

Exclusive Provider Organization (EPO) Plan FAQs

1. **What does EPO stand for?** EPO stands for Exclusive Provider Organization. It is a type of managed care health insurance plan.
2. **How does an EPO plan work?** EPO plans provide coverage exclusively through a network of doctors and hospitals. The CMSU EPO plan uses the Aetna Premier Care Network Plus (APCN+) network. You must use these providers to receive full benefits, except in emergencies.
3. **What are the advantages of an EPO plan?** The EPO plan is the lowest cost medical plan and offers “first dollar coverage”. This means you will pay a flat copay for certain medical services like doctor’s visits and prescription drugs.
4. **Do I have to see my primary care physician (PCP) for referrals?** No, but we encourage you to do so. Your primary care doctor is a great resource and can suggest a network specialist for you.
5. **What are the costs associated with an EPO plan?** EPO plans usually have lower monthly premiums compared to other plans, but you’ll need to pay copays for doctor visits and may have deductibles for other services.
6. **Is preventive care covered?** Yes, the EPO plan covers preventive care services, such as annual check-ups and vaccinations, at no additional cost.
7. **Are out-of-network services covered?** EPO plans do not cover non-emergency out-of-network services. If you see a provider outside the network, you will be responsible for the full cost.
8. **What happens in an emergency?** In an emergency, you can seek care from any provider, even if they are out-of-network. Emergency services are covered regardless of the provider's network status.
9. **How can I find network providers?** You can find network providers through [Aetna's website](#).
10. **Can I use my EPO plan for prescriptions?** Yes, EPO plans often include a pharmacy benefit. You'll need to check the plan formulary for covered medications and copayment amounts.
11. **Does the EPO plan include an HSA or HRA?** No. The EPO plan does not qualify for an HSA because it offers “first dollar” benefits, which do not meet IRS requirements.
12. **Will I still receive the 2025 Wellness Incentive if I completed it if I enroll in the EPO plan?** No. If you enroll in the EPO plan you will no longer be eligible for an HSA or HRA and will not receive a wellness incentive contribution.
13. **If I have an HSA, can I continue to use the remaining funds, even if I cannot contribute while enrolled in an EPO plan?** Yes.

If you have more questions about the EPO plan please contact the Benefits Team at Benefits@us.medical.canon.