



MEDICAL PLAN FRAUD PREVENTION

It's time to put on your detective hat and earn some money!

Medical and prescription drug prices keep skyrocketing, and to keep the Plan “healthy,” we need to ensure that the Plan is not paying fraudulent or mistaken charges. Beginning January 1, 2018, any Participant who finds an overcharge on his or her bill for medical or dental services (such as hospital or emergency room visits, office visits, lab work, or x-rays), or for prescription drugs, will receive a payment by the Plan of one-third of the total savings realized by the Plan, up to a maximum payment to each Participant of \$599 per calendar year.