



2026

Enrollment Guide

Tecta America

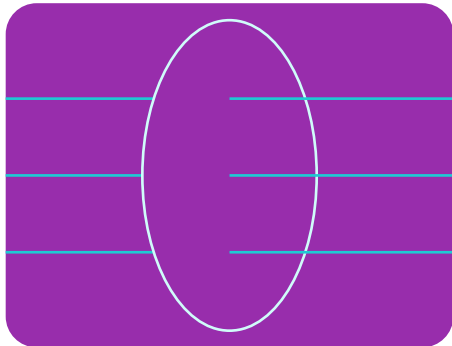
The health plan you'll be **happy** to see

Take control of your healthcare journey with a plan that gives you access to top-quality providers and offers price certainty for every medical service. With SimplePay, experience healthcare without the complications.

Clear and supportive healthcare

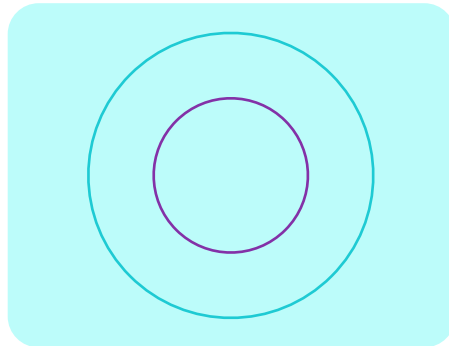
Price certainty

Know the price of every medical service ahead of time. Focus on your health, without worrying about add-ons or unexpected bills.



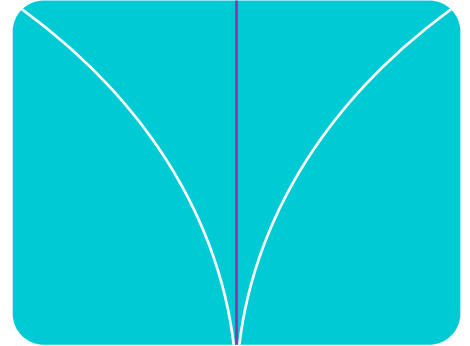
Great care and value

Find top-quality providers offering all services at fixed, predetermined costs — from routine checkups to advanced procedures. High-quality providers cost you less.



Simple user experience

Access your health plan from anywhere with the straightforward and intuitive SimplePay member portal.



Health Valet service

Work alongside a SimplePay Health Valet to confidently navigate your healthcare journey. Health Valets can assist with:

- + Finding a high-quality provider
- + Answering questions about billing or coverage
- + Helping you understand different care options and more



Contact the Health Valet team:

1-800-606-3564

healthvalet@simplepayhealth.com

Monday-Friday

8:00 a.m. - 8:00 p.m. Central

Price certainty

Going for care is easygoing when you know the cost ahead of time.

What to expect:

1.

Look up a service and know exactly what you'll owe.



2.

Go to the doctor and receive great care.



3.

Receive an Explanation of Benefits.



Use the SimplePay member portal to find the best provider based on cost and quality rankings.

See your provider and feel confident knowing their quality of care.

Pay the exact cost you saw in your member portal.

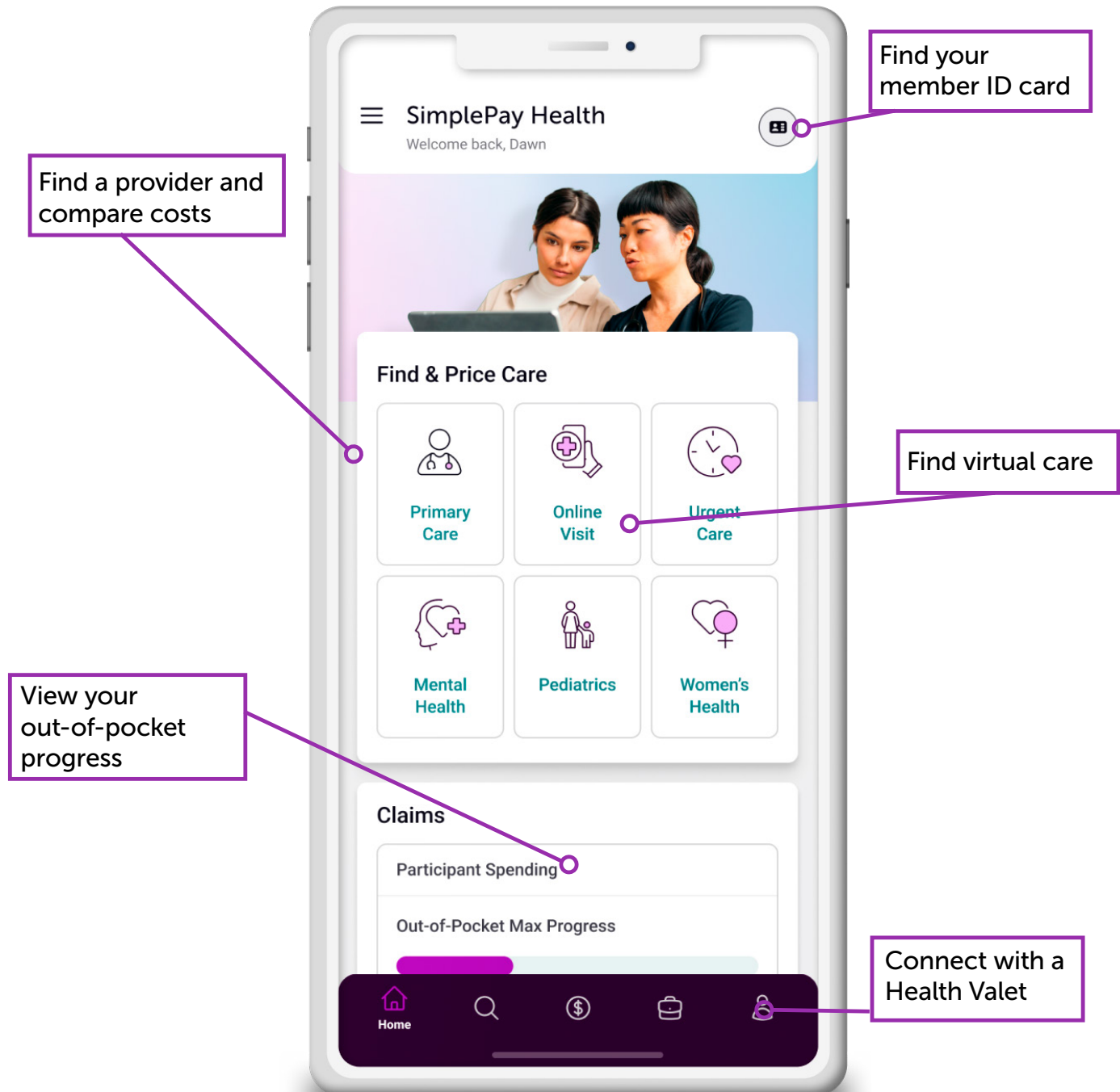


For questions, contact the Health Valet team or visit

<https://simplepay.dialogs.com/TectaAmericaCorp.html>

Member portal




Explore the member portal anytime from your mobile app or desktop. It's your one-stop hub for all your benefit information.



Quality you can trust

SimplePay is designed to help you find **high-quality**, low-cost providers so you can prioritize your health and your bank account.

With SimplePay, providers are categorized into three copay rankings based on the following criteria:

-  Tier 1 provider
-  Tier 2 provider
-  Tier 3 provider

Quality

Providers renowned for their best-in-class training, certifications, and commitment to delivering excellent care outcomes.

Relationship

Providers that are associated with top-quality service lines at their facility, ensuring great care with every visit.

Experience

Providers that consistently deliver positive patient experiences and outcomes.

Efficiency

Providers that offer the best results for their patients, delivering just the right amount of care to ensure health needs are met.

Provider Ranking Legend



Meets all standards above



Meets most standards above



Meets some standards above



High Plan Benefits Summary(Non-Financing)

Client Name: Tecta America Corporation

Plan Year: January 1st, 2026 - December 31st, 2026

Network: Aetna Choice POS II

Medical Benefits				
	In-Network			Out-of-Network
	✔ Tier 1	⊖ Tier 2	⚠ Tier 3	
Calendar Year Deductible (Indiv/Family)	N/A			N/A
Out-of-Pocket Maximum (Indiv/Family)	\$4,000 / \$8,000			\$8,000 / \$16,000
*OOP Max applies to in-network services only				
	In-Network			Out-of-Network
Medical Services	✔ Tier 1	⊖ Tier 2	⚠ Tier 3	
Physician Services				
Primary Care Physician	\$20	\$25	\$40	\$60
Retail Health Clinic	\$20	\$25	\$40	\$60
Specialist	\$40	\$55	\$95	\$140
Preventative Services & Routine Care				
Well-Child Care (including exams and immunizations)	No Charge			
Adult Physical Examination (including routine GYN visit)	No Charge			
Routine Eye Care	No Charge			
COVID 19 Vaccine	No Charge			
Breast Cancer Screening (any age)	See plan document for specific coverage based on age/necessity			
Pap Test	See plan document for specific coverage based on age/necessity			
Prostate Cancer Screening	See plan document for specific coverage based on age/necessity			
Colorectal Cancer Screening	See plan document for specific coverage based on age/necessity			
Teledoc Services (1-800-Teledoc)				
Teledoc General Behavioral	\$10			N/A
Teledoc General Medical				
Maternity				
Initial Prenatal Office Visit	\$20	\$25	\$40	\$60
Routine/Ongoing Prenatal Office Visit	No Charge			\$60
Delivery & Postnatal Care	\$2,530	\$3,370	\$4,000	\$8,000
Hospital Expenses or Long-Term Acute Care Facility/Hospital (Facility Charges)				
Inpatient Hospital	\$2,530	\$3,370	\$4,000	\$8,000
Outpatient Hospital	\$870	\$1,150	\$1,950	\$2,330
Skilled Nursing /Rehabilitation Facility (120 days combined max per plan year)	\$2,300	\$3,060	\$4,000	\$8,000
Ambulance Services	\$500			
Ambulatory Surgical Center	\$870	\$1,150	\$1,950	\$2,330
Home Health Care (60 visits per plan year)	\$55	\$70	\$120	\$140
Home Infusion	\$55	\$70	\$120	\$140
Hospice Care	\$290	\$390	\$650	\$780

	In-Network			Out-of-Network
Medical Services	✔ Tier 1	⚡ Tier 2	⚠ Tier 3	
Radiology Services				
Diagnostic X-Rays	\$100	\$120	\$180	\$210
Advanced Imaging (MRI, MRA, CAT & PET Scans)	\$460	\$620	\$1,140	\$1,260
Laboratory Services				
Basic Labs	\$25	\$30	\$45	\$55
Advanced Diagnostic Labs	\$80	\$120	\$160	\$190
Emergency Services/Urgent Care				
Emergency Room	\$750			
Urgent Care Facility	\$50			
Mental Disorders & Substance Use Disorders				
Office Visit	\$20	\$25	\$40	\$60
Inpatient	\$2,530	\$3,370	\$4,000	\$8,000
Outpatient	\$870	\$1,150	\$1,950	\$2,330
Therapy Services				
Chiropractic Care/Spinal Manipulation (30 visits per plan year)	\$40	\$55	\$95	\$110
Physical Therapy (65 visits per plan year)	\$40	\$55	\$95	\$110
Occupational Therapy (70 visits per plan year)	\$40	\$55	\$95	\$110
Speech Therapy (45 visits per plan year)	\$40	\$55	\$95	\$110
Durable Medical Equipment*				
Durable Medical Equipment (DME)	\$115	\$160	\$260	\$320
Other Healthcare Facilities/Services				
Allergy Injections, Serum & Testing	\$40	\$55	\$95	\$140
Acupuncture	\$40	\$55	\$95	\$140
Transplants (Travel/lodging \$10,000 per transplant)	\$2,530	\$3,370	\$4,000	\$8,000

Medical Network: Aetna Choice POS II

How to Find a Provider: Log into your member portal at www.simplepayhealth.com and click on “Find a Doctor and Compare Costs” under the “Benefits” tab.

For questions about your SimplePay Health Plan, please contact your SimplePay Health Valet:

Email: healthvalet@simplepayhealth.com

Phone: 800-606-93564

Pharmacy Drug Vendor: OreadRX

Pharmacy Benefits

NOTE: There is no coverage under the plan for prescription drugs obtained from a Non-Participating Partner.

Single	If you reach your out-of-pocket maximum, the plan will pay 100% of the applicable allowed benefit for most covered services for the remainder of the year. All eligible copays and other eligible out-of-pocket costs count toward your out-of-pocket maximum, except balance billed amounts.
Family	

Pharmacy Plan Feature

Retail Pharmacy

Generic Drugs (Up to a 34-day supply)	\$5
Preferred Brand Drugs (Up to a 34-day supply)	20% coinsurance
Non-Preferred Brand Drugs (Up to a 34-day supply)	30% coinsurance
Specialty Drugs* (Up to a 34-day supply)	Must be sourced through OreadRx's Patient Assistance Program. Please call OreadRx at 833-673-2379.
*Specialty medications are required to be sourced through OreadRx's Patient Assistance Program. Please call OreadRx at 833-673-2379.	

Mail Order (90 Day Supply*)

Generic Drugs (Up to a 90-day supply)	\$15
Preferred Brand Drugs (Up to a 90-day supply)	20% coinsurance
Non-Preferred Brand Drugs (Up to a 90-day supply)	30% coinsurance
Specialty Drugs* (Up to a 90-day supply)	Must be sourced through OreadRx's Patient Assistance Program. Please call OreadRx at 833-673-2379
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Low Plan Benefits Summary (Non-Financing)

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Plan Year: January 1st, 2026 - December 31st, 2026

Network: Aetna Choice POS II

Medical Benefits				
	In-Network			Out-of-Network
	✔ Tier 1	☹ Tier 2	⚠ Tier 3	
Calendar Year Deductible	\$0			\$0
Out-of-Pocket Maximum (Indiv/Family)	\$7,000 / \$14,000			\$14,000 / \$28,000
*OOP Max applies to in-network services only				
	In-Network			Out-of-Network
Medical Services	✔ Tier 1	☹ Tier 2	⚠ Tier 3	
Physician Services				
Primary Care Physician	\$70	\$95	\$160	\$190
Retail Health Clinic	\$70	\$95	\$160	\$190
Specialist	\$150	\$200	\$340	\$410
Preventative Services & Routine Care				
Well-Child Care (including exams and immunizations)	No Charge			
Adult Physical Examination	No Charge			
Routine Eye Care	No Charge			
COVID 19 Vaccine	No Charge			
Breast Cancer Screening (any age)	See plan document for specific coverage based on age/necessity			
Pap Test	See plan document for specific coverage based on age/necessity			
Prostate Cancer Screening	See plan document for specific coverage based on age/necessity			
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Teledoc Services(1-800-Teledoc)				
Teledoc General Behavioral	\$10			N/A
Teledoc General Medical				
Maternity				
Initial Prenatal Office Visit	\$70	\$95	\$160	\$190
Routine/Ongoing Prenatal Office Visit	No Charge			\$190
Delivery & Postnatal Care	\$4,370	\$5,820	\$7,000	\$14,000
Hospital Expenses or Long-Term Acute Care Facility/Hospital (Facility Charges)				
Inpatient Hospital	\$4,370	\$5,820	\$7,000	\$14,000
Outpatient Hospital	\$1,750	\$2,300	\$3,900	\$4,700
Skilled Nursing /Rehabilitation Facility (120 days combined max per plan year)	\$3,910	\$5,200	\$7,000	\$14,000
Ambulance Services	\$1,000			
Ambulatory Surgical Center	\$1,750	\$2,300	\$3,900	\$4,700
Home Health Care (60 visits per plan year)	\$150	\$200	\$340	\$410
Home Infusion	\$150	\$200	\$340	\$410
Hospice Care	\$460	\$620	\$1,040	\$1,250

	In-Network			Out-of-Network
Medical Services	✓ Tier 1	⚡ Tier 2	⚠ Tier 3	
Radiology Services				
Diagnostic X-Rays	\$260	\$350	\$590	\$700
Advanced Imaging (MRI, MRA, CAT & PET Scans)	\$640	\$770	\$1,300	\$1,500
Laboratory Services				
Basic Labs	\$200	\$270	\$460	\$550
Advanced Diagnostic Labs	\$410	\$540	\$910	\$1,090
Emergency Services/Urgent Care				
Emergency Room			\$1,000	
Urgent Care Facility			\$100	
Mental & Substance Use Disorders				
Office Visit	\$70	\$95	\$160	\$190
Inpatient	\$4,370	\$5,820	\$7,000	\$14,000
Outpatient	\$1,750	\$2,300	\$3,900	\$4,700
Therapy Services				
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Find a happier way to healthcare

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1-800-606-3564
healthvalet@simplepayhealth.com

Monday - Friday
8:00 a.m. - 8:00 p.m. Central

For questions regarding provider information, visit
your company's microsite or reach out to your
Health Valet.

[Learn More](#)

Connect with SimplePay

simplepayhealth.com

