



**QUAPAW TRIBAL MEMBER HEALTH PLAN  
BENEFIT SUMMARY 2022**

PH 866-794-8848/FAX 620-856-2268

**ANNUAL BENEFIT MAXIMUM \$5,000**

**PRESCRIPTION BENEFITS** **\$1,000 Maximum per year**

**MEDICAL, DENTAL, VISION COMBINED MAXIMUM \$4,000 PER YEAR**

**MEDICAL BENEFITS**

Physician Office Visits	100%
Urgent Care Visit	100%
Emergency Room Visit	100%
Ambulance Services	100%; \$500 Maximum per trip
Durable Medical Equipment	100%; \$500 Maximum per year
Outpatient Diagnostic X-ray	100%
Outpatient Hospital Services	100%
Inpatient Hospital Services	100%
Physical/Speech/Occupational Therapy	100%
Organ Transplant Services	NOT COVERED
Preventive Care	100%
Hearing Aids	100%; \$1,500 Maximum per year

**DENTAL BENEFITS** **\$2,500 Maximum per year**

All Services	100%
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**VISION BENEFITS** **\$750 Maximum per year**

All Services	100%
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Submit Claims to:  
Native Care Health  
PO Box 50  
Quapaw, OK 74363  
Email:  
[sbankson@rwibenefits.com](mailto:sbankson@rwibenefits.com)