Self-Funded, Limited-Day Health Plans for employees

Two Benefit Levels to Offer - **Outpatient Only & Outpatient + Inpatient**

A copay-driven plan, not indemnity.

For the employee - affordable cost and useable benefits

- 50-60% of the cost of Major Medical
- NO deductible
- Low copays
- No health questionnaires
- Unlimited Virtual Direct Primary Care with $0 copay
- Wellness Benefit Plan

A plan that you the employee can actually afford!

Not an ACA minimum value compliant plan. The plan will pay 100% of applicable in-network charges after the copay is satisfied for each benefit listed in the brochure for the amount of days listed for each benefit. Any charges incurred after the plan limits will be the responsibility of the insured.

Fundamental Care Tri-Level Limited Day			IN & OUT PATIENT MEC PLAN		OUTPATIENT MEC PLAN	
Deductible			None		None	
PREVENTIVE SERVICES - *PPO Providers only. Not covered outside the network.*						
CMS Preventive Care Services			Paid at 100%		Paid at 100%	
VIRTUAL DIRECT PRIMARY CARE	Number of Days/year	Co-pay/day	Number of Days/year	Co-pay/day	Number of Days/year	Co-pay/day
MeMD	Unlimited	$0	Unlimited	$0	Unlimited	$0
PHYSICIAN SERVICES - PPO*			Number of Days/year	Co-pay/day	Number of Days/year	Co-pay/day
Office Visits - PCP			3	$30	3	$30
Office Visits - Specialist			3	$60	3	$60
Urgent Care			2	$100	2	$100
Laboratory Services and Xray (outside OV)			2	$50	2	$50
O/P Diagnostic Testing - Radiologist			1	None	1	None
Emergency Room Physician & Staff			1	None	1	None
Outpatient Surgeon & Anesthesiologist			1	None	N/A	N/A
PRESCRIPTION DRUGS - *Available through the drug card plan only.*						
Generic RX Only			Unlimited	$15	Unlimited	$15
OUTPATIENT FACILTY EXPENSES			Number of Days/year	Co-pay/day	Number of Days/year	Co-pay/day
Paid at 150% of Medicare**						
O/P Diagnostic Testing			1	$350	1	$350
Emergency Room			1	$500	1	$500
Outpatient Surgeries			1	$350	N/A	N/A
Ambulance - ground			1	$250	1	$250
INPATIENT FACILITY			Number of Days/year	Co-pay	Number of Days/year	Co-pay
Paid at 150% of Medicare**						
***There are no network limitations on facilities. If any facility does not accept the allowed amount as payment in full (after the member's deductible) the plan will negotiate a rate with the provider. The member is not responsible for any amount other than the co-pay for any facility expense covered by the plan."*			3	$500	N/A	N/A
			Includes all facility based services, supplies and professional services (nurses, doctors, therapists) for up to three days.			

**Non-PPO physicians benefits are subject to the same copay and the allowable amount is a percentage of the the Medicare fee schedule. The member is responsible for any balance billed amounts. Mental Health & substance abuse benefits are covered the same as any other illness and apply to the same benefits as medical services. refer to policy documents for a full list of exclusions.*

PRIME HEALTH SERVICES

Fundamental Care uses a dual PPO Network/Facilities-based Medicare pricing approach to lower costs at facilities while providing access to physicians and labs.

Group Health Physician Only Network

Prime Health Services is a national medical cost containment company with a noteworthy Physician Only PPO Network. Our nimble and tech-focused nature allows clients to take advantage of the flexibility of customization while not compromising on claims processing speed.

Since 2001, we have specialized in medical provider network development and offer clients a customized approach to medical cost containment. The Prime Health Services Physician Only PPO network is comprised of direct-contract physicians from coast to coast in the United States. Through this network, our clients gain access to quality medical physicians at discounted rates in order to combat the rising cost of health care.

National Coverage

- Primary network physician-only network solution
- Over 600,000 physicians nationwide
- Reference-based contracts with a focus on % of Medicare
- Flexibility and customization
- Data integrity: URAC and NCQH credentialing standards

Tech-Focused

- Our proprietary repricing technology sets up apart
- Our system processes a claim in less than 0.17 seconds!
- Through our Physician Only PPO Network, we have the ability to do front-end claims edits

REFERENCE-BASED PRICING **RBP**

FACILITIES-BASED MEDICARE REFERENCE PRICING*

Facilities charges for in-hospital visits, surgeries both in and outpatient, and Emergency room expenses are reimbursed up to a maximum allowable charge of 150% of what Medicare would pay. Any hospital/facility that accepts this payment is allowed. Non-urgent medical facility stays should be pre-approved to ensure that reimbursement will be accepted as payment in full. Please call Allied National at 800-825-7531.

*Reference-Based Pricing (RBP) is an objective methodology used to calculate the amount a healthcare provider is paid for a specific service. Instead of using a standard PPO network discount (from what is often an inflated billed charge), an RBP-based plan pays claims based on a “maximum allowed charge” - defined as a percentage above what Medicare pays the provider for the same service. Medicare rates are the most widely accepted payment methodology.

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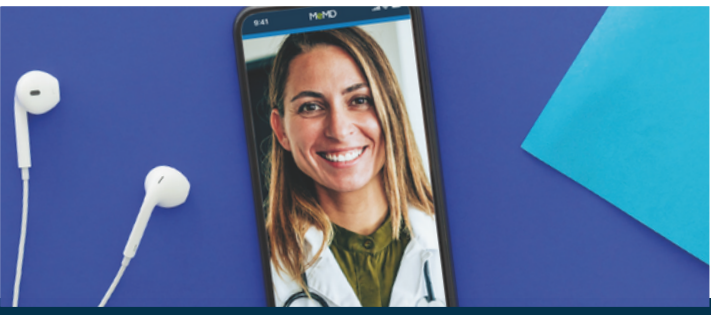
MeMD

Welcome to healthcare virtually anywhere

Sign in online to get started.



Your MeMD Plan Includes:

Virtual Primary Care (16+)
Be seen on your schedule, by the same provider, for all your traditional healthcare needs.

Urgent Care
Adults and children can be treated 24/7 for routine health issues, such as cold and flu.

Talk Therapy (18+)
Speak with a licensed therapist and get help in as few as 24 hours for common issues.

Teen Therapy (10-17)
Parents can schedule a 50-minute visit with a therapist for their child in as few as 24 hours.

Psychiatry (18+)
Talk therapy, medications, psychosocial interventions and other treatments.

Your provider can help with:

- Minor illnesses & injury
- Chronic health concerns
- Mental health concerns
- Prescriptions or refills
- Referrals to specialists
- Lab work & imaging
- General advice
- **And more!**

What

What's virtual primary care? A service that helps you handle your healthcare in many of the same ways an in-person PCP or mental health provider can, just by phone or video!

Is there a cost? Most visits are included in your plan and provided at no cost. Review your member card for details.

Who

Who can use the service? MeMD is available to you, your spouse/domestic partner, and dependents/children up to 26.

Who will I see? A board-certified physician, NP, PA, therapist, or psychiatric provider depending on type of visit requested.

When

When should I use virtual primary care? Use MeMD instead of urgent care or primary care office visits. Request a visit and tell us what's wrong. We'll order tests, prescribe and refill medications, recommend ways to feel better, and can even arrange referrals and procedures with local specialists.

When can I use MeMD? Schedule a primary care visit in as few as 24 hours, or request an urgent care visit on-demand.

How

How do I save more money? Since visits are included in your plan you don't have to think about co-pays or confusing bills when you meet with your provider. Plus, we include annual wellness labs and prescription discounts, saving you more.

Where

Where can I use telehealth? From the privacy of your own home or office, online, over the phone, or by app.

Register online to start using your MeMD benefits:

- Schedule a visit with your MeMD primary care provider 24/7/365 to receive care for common ailments, mental health concerns, chronic conditions, and referrals to in-person or specialty care when needed.
- After activating your account (using the plan details on your membership card above) you can enjoy streamlined access to healthcare right when you need it by visiting: **patient.MeMD.me**

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myewellness

Myewellness is an online platform delivering a simple solution of health and wellness services to you. Our goal is to help you change behaviors, lose weight, detect diseases and improve your daily health.

- **GET HEALTHY**

Use the personal health tools including calculators and assessments to manage your progress. Find exercise and nutrition resources to help you take the healthy strides you're wanting.

- **BE INFORMED**

With educational videos, current wellness articles and daily health tips, you can stay on top of the current trends. Resources, including a conditions library and clinical trials, help answer any questions you have.

- **SAVE TIME AND MONEY**

Why pay full retail prices for medical services when you don't have to? Medical bill negotiation and fair market pricing tools will help you choose the services you need based on price or facility ratings.

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Lab Program

Your plan provides generous lab discounts when work is performed at one of these three locations:

- Labcorp
- Quest Diagnostics
- American Esoteric Laboratories

When you choose to get your testing done at one of the above participating laboratories – and the testing is ordered by your physician – you pay no deductibles, no copays, and no coinsurance. Even better, you might not have to go to a different location to get testing done if your physician's office is affiliated with one of the three labs. So, make sure you ask first before having any test performed.

Outpatient lab work includes:

- Blood testing (e.g., cholesterol, CBC)
- Urine testing (e.g., urinalysis)
- Cytology and pathology (e.g., pap smears, biopsies)
- Cultures (e.g., throat culture)

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Explanation of Additional Benefits

ADVANTAGE PHC

What is it?

Health Advocacy is simply a service for consumers and their families to call to help them navigate their health care.

How does it work?

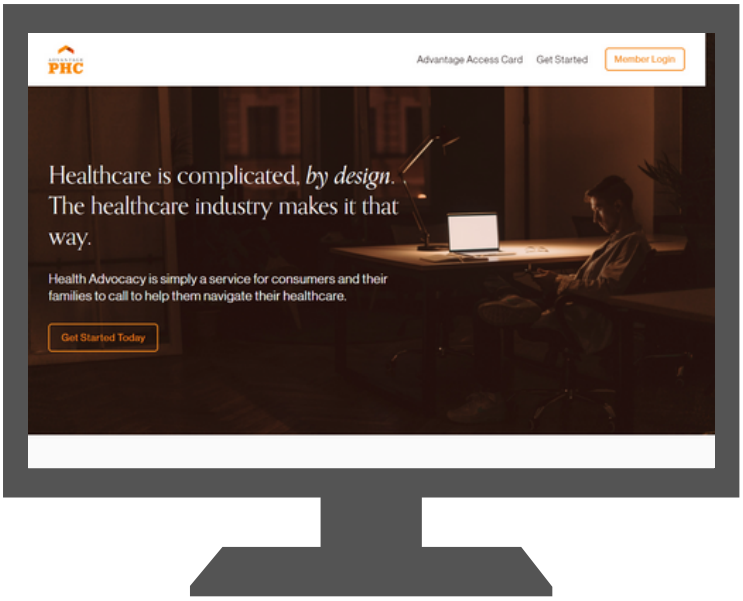
Advocates address clinical issues, price transparency, claims/benefit questions, grievances, paperwork, and other urgent needs.

Finding Care: Transparency & Access

- Find the right doctors, hospitals, and other providers
- Schedule tests and appointments
- Compare cost & quality
- Negotiating with providers and facilities on Reference Based Pricing Health Plans

Problem Solving: Hands-On Support & Solution

- Claims Explanation & Support
- Medical Bill Reviews & Audits
- Fee & Payment Negotiation
- Untangle medical bills
- Resolve insurance claims and billing issues



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