



Virtual-First Healthcare

Benefits Summary

Managed by Redirect Health

**Experience the benefits of real savings, 24/7 access,
and the dedicated attention you deserve.**

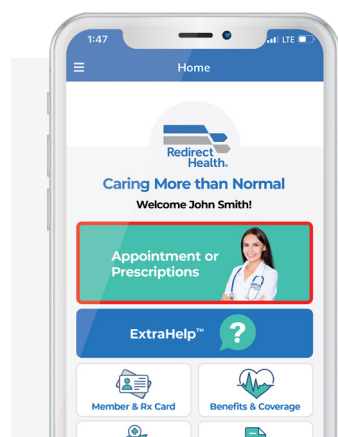
At Redirect Health, we prioritize your well-being by ensuring you have all the time and support you need, while eliminating unnecessary expenses. Our members can attest to the guidance and care they receive. It's our commitment to provide you with convenient and truly affordable healthcare that suits your needs.



We Put People First!

Care Navigation works for everyone.

Finally! Healthcare on your terms – access care anytime, from anywhere, 24/7/365.



Everything You Want in a Healthcare App – and More



Access Your
ID Card(s)



Speak with a
Medical Provider



Access Plan
Details



Renew
Prescriptions



Update Your
Information



Submit receipts or
billing questions

Start with the Redirect Health Member App

- ✓ Available to answer any questions 24/7/365 in English and Spanish
- ✓ If you have a medical need simply use the Member App, call or text
- ✓ Our Care Team is made up of healthcare experts and medical providers



We Navigate and Coordinate Your Care

- ✓ We'll help you determine if virtual, in-person, urgent, or emergency care is needed
- ✓ Connect to a virtual medical provider at a convenient time for you who will determine if further in-office care is needed
- ✓ We'll assist with any next steps, such as in-office visit scheduling or filling prescriptions at a nearby pharmacy so you never waste any time

Follow-Up that Matters

- ✓ We find you the right level of care to address your medical needs, so you never pay more than you should
- ✓ Whether you had a virtual or in-person visit, we follow-up after your visit to make sure your care plan is staying on track
- ✓ Ever have a question? The Care Team is available 24/7/365





Pricing ¹	Primary Member:	Everyday1to1 ² Care Navigation	iEverydayCARE ³ Routine Care	iEverydayCARE ³ Hospitalization			iEverydayCARE ³ Hospitalization PLUS		
		Any Age	Age 18-64	Age 18-44	Age 45-59	Age 60-64	Age 18-44	Age 45-59	Age 60-64
Member Only		\$79	\$145	\$349	\$419	\$509	\$424	\$519	\$634
Member + Spouse		\$149	\$260	\$699	\$819	\$949	\$849	\$1,019	\$1,199
Member + Child(ren)		\$149	\$260	\$729	\$849	\$979	\$879	\$1,049	\$1,229
Member + Family		\$229	\$385	\$1,089	\$1,199	\$1,239	\$1,314	\$1,499	\$1,614
Virtual-First Care & Navigation									
Redirect Health Virtual Provider Network		\$0	\$0	\$0			\$0		
Virtual Specialist Curbside Consult ⁴		\$0	\$0	\$0			\$0		
Care Navigation & Referral Management		\$0	\$0	\$0			\$0		
Coordination of Benefits		\$0	\$0	\$0			\$0		
Alternative Funding Management		\$0	\$0	\$0			\$0		
Routine Care									
In-office Visits • Primary & Urgent Care • Pediatric Care • Chiropractic • Labs • X-ray Multiplan PHCS Practitioner Only (or add a doctor prior to visit)	Care Navigation Only Appointment preparation, coordination, navigation, alternative funding management, and pre-negotiations 100% Member Responsibility	\$0 member responsibility Virtual and In-Network Office Visit with Pre-Authorization \$20 member responsibility Out-of-Network Office Visit with Pre-Authorization \$50 member responsibility In-Network or Out-of-Network Visit without 48 Hour Preparation/ Pre-Authorization	\$0 member responsibility Virtual and In-Network Office Visit with Pre-Authorization \$20 member responsibility Out-of-Network Office Visit with Pre-Authorization \$50 member responsibility In-Network or Out-of-Network Visit without 48 Hour Preparation/ Pre-Authorization	\$0 member responsibility Virtual and In-Network Office Visit with Pre-Authorization \$20 member responsibility Out-of-Network Office Visit with Pre-Authorization \$50 member responsibility In-Network or Out-of-Network Visit without 48 Hour Preparation/ Pre-Authorization					
Prescriptions Cost will vary depending on pharmacy location, quantity, and dosage	Subsidized Discount Program (Prescriptions with no mark-up)								
Specialist / Advanced Imaging / Hospital									
Specialist Office Visits, Consults & Care Multiplan PHCS Practitioner Only	Care Navigation Only Appointment preparation, coordination, navigation, alternative funding management, and pre-negotiations 100% Member Responsibility	\$50 member responsibility with 48 Hour Pre-Authorization			\$50 member responsibility with 48 Hour Pre-Authorization				
Advanced Diagnostic Testing MRI, PET, CT Scans, Ultrasound, Colonoscopy, Mammogram and other imaging		\$50 member responsibility with 48 Hour Pre-Authorization			\$50 member responsibility with 48 Hour Pre-Authorization				
Hospital Care - Inpatient & Outpatient		Individual \$2,000 initial member responsibility 20% co-share \$4,000 out-of-pocket max Family \$4,000 initial member responsibility 20% co-share \$6,000 out-of-pocket max			Individual \$2,000 initial member responsibility 20% co-share \$4,000 out-of-pocket max Family \$4,000 initial member responsibility 20% co-share \$6,000 out-of-pocket max				
Emergency Room		\$500 initial member responsibility + 20% co-share			\$500 initial member responsibility + 20% co-share				
Excluded Service ⁵ Pre-existing conditions, organ transplants, dialysis, skilled nursing, advanced psychiatric care and specialty & non-formulary medications	Care Navigation Only Appointment preparation, coordination, navigation, alternative funding management, and pre-negotiations 100% Member Responsibility						Chemotherapy medication \$30,000 sharing limit ⁶ Dialysis \$10,000 sharing limit ⁶ Skilled nursing \$5,000 sharing limit ⁶ Air ambulance \$5,000 sharing limit ⁶ Pre-existing exclusions apply 12 month look back		

1 Prices are monthly with annual contract. Add 25% for month to month contract. 2 Everyday1to1® is not insurance. Members are 100% responsible for payment for medical treatment & services. 3 This program is NOT insurance. iEverydayCARE is managed by Redirect Health exclusively for members of the Reimagined Society. The Medical Cost Share risk pool is managed by Newpath Medical Inc., a Wyoming Medical Cost Share organized pursuant to Wyo. Stat. Ann. 26-1-104. See program guide for details. Redirect Health and Newpath Medical Inc. are not insurance companies. This program does NOT meet the minimum requirements for MEC (Minimal Essential Coverage) or the ACA (Affordable Care Act). New Jersey, Massachusetts, Vermont, California, Rhode Island and the District of Columbia have passed their own state-level individual mandate laws that mirror the Federal Affordable Care Act. Redirect Health and Medical Cost Share memberships do not satisfy the new individual mandate requirements of these states. It should be expected that state enforced penalties may apply in these states. See State Specific Disclosures www.RedirectHealth.com/state-disclosures for more information regarding program limitations. 4 A Redirect Health medical professional will interact with specialist on your behalf. 5 See Membership Guidelines in the app for coverage limitations and details. 6 Maximum sharing after initial member responsibility.

How your membership works

Get the most out of your healthcare by following these simple steps.

What if I need care?

Always use the Member App to schedule care and prepare for your appointments. Many times you'll get everything you need over the phone. Your Care Team will make sure you always get the right care. Never spend more than you should.

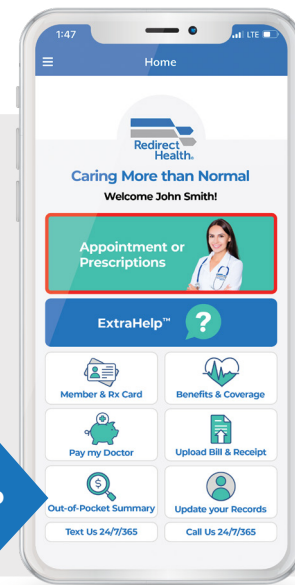
What if I get a bill?

Submit doctor's bills through the SECURE Member App (but most times we'll pay your doctor before you get a bill)

What if I have extra questions?

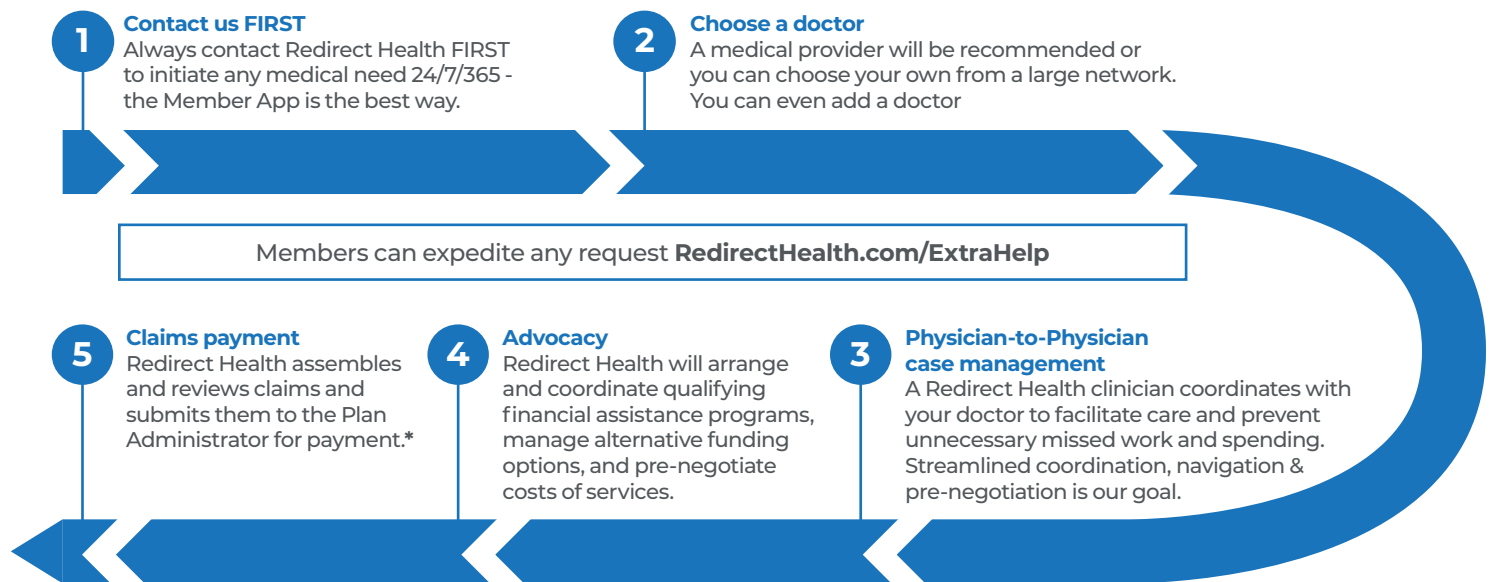
Expedite any request or obstacle on the Member App or use RedirectHealth.com/ExtraHelp

Please visit
RedirectHealth.com/app
to download the App



How Needs are Shared with the Community

Your Redirect Health membership protects you and your family from high-dollar medical expenses



How Pre-Existing Conditions are Shared (iEverydayCARE Hospitalization Only)

A condition is considered pre-existing for a member or dependent if symptoms or treatment have occurred within the 12 months prior to joining the Medical Cost Share. See the Membership Guidelines for detailed description of what will be considered a pre-existing condition. **Controlled diabetes, hypertension, high cholesterol, seasonal allergies and intermittent asthma will not be considered pre-existing when reported prior to membership effective date.**

Conditions beginning after a member's effective date will be shared after paying a \$2,000 initial member responsibility then 20% with a maximum out-of-pocket of \$4,000[^] per year. See the Membership Guidelines for sharing rules.

Additional Sharing Restrictions and Limitations
See Member Guidelines.

Pre-existing conditions become eligible for sharing based on members' tenure with the plan, as indicated by the following graduated sharing schedule:

Time After Membership Effective Date	Shareable
First 12 months	Not shareable
Months 13-24	Shareable to \$25,000
Months 25-36	Shareable to \$50,000
Month 37 and after	Shareable to \$125,000

*Specialist, advanced imaging, and hospital claims must be pre-authorized and coordinated by Redirect Health to be eligible for payment.

[^]Subject to program sub-limits. Prescription drug benefits are not included in out-of-pocket max calculation.