

Your Healthcare...Your Choice Take Control of Your Care Now

Healthcare costs and out-of-pocket expenses are skyrocketing! Tired of paying more and getting less?

Your HealthSaver membership provides benefits that make a real difference, saving you time and money. Quality, affordable healthcare, anytime, anywhere. The way healthcare should be.

Great for you and your family. Perfect for businesses to help your employees.

Your HealthSaver Package includes:

Healthcare Services

- **Virtual House Call** - Teladoc is healthcare on YOUR schedule, anytime, anywhere. One call gets you a board-certified physician who will discuss your symptoms, diagnose your illness, and if needed, call in your prescription to your local pharmacy. Simple, easy, access from your home, office, or when traveling. **ZERO cost for the doctor consultation. Unlimited use for you and your immediate family.**
- **ID Wellness** – Take your assessment and make your own plan to stay healthy and fit.
- **Medication Management** – If you take 4 or more prescriptions monthly or have an ongoing chronic illness, you qualify for the high-touch, personal care to help manage your condition to help you Get Better, Feel Better and Stay Better. This includes your medications pre-packaged exactly as your doctors ordered and mailed to you at no shipping charge.

Savings on Healthcare you use most often

- **Dental** (15% to 50%),
- **Vision & Eyewear** (20% to 60%),
- **Pharmacy** (Avg. 41%),
- **Chiropractic** (30% to 50%),
- **Lab Tests** (10% to 80%),
- **MRI & CT Scans** (50% to 75%),
- **Durable Medical Equipment** (20% to 50%)

**All 10 Benefits for one
low price per month.**

**Unlimited Use
Includes You, Spouse
& Dependents**

* Actual costs and savings vary by provider, service and geographical area.

** Savings may vary based on geographic location, provider and procedure performed.

*** Available services may vary by provider.

**** Benefits vary by State

See all of the Benefit Details on the following pages

Teladoc

Feel better now! 24/7 access to a doctor is only a call or click away—anytime, anywhere with no consult fee. With Teladoc, you can talk to a doctor by phone or online video consult to get a diagnosis, treatment options and prescription if necessary. Save time and money by avoiding crowded waiting rooms in the doctor’s office, urgent care clinic or ER. Just use your phone, computer, smartphone or tablet to get a quick diagnosis by a U.S. licensed physician.

- On-demand healthcare—wherever, whenever
- Treatment for common medical issues such as colds, flu, poison ivy, respiratory infections, bronchitis, pink eye, sinus problems, allergies, urinary tract infections and ear infections
- 16 minute average callback time
- Consultations for all ages—from children to seniors
- U.S. board-certified doctors with an average 15 years practice experience
- Upon request, Teladoc can share consult information with your doctor

Call Teladoc:

- When you need care now.
- If you’re considering the ER or urgent care center for non-emergency issues.
- On vacation, on a business trip, or away from home.
- For short-term prescription refills.

Teladoc treats conditions like:

- Cold and flu
- Bronchitis
- Respiratory infection
- Sinus problems
- Allergies
- Urinary tract infection
- Pediatric care
- Poison ivy
- Pink Eye

Teladoc – Frequently Asked Questions

What is Teladoc?

Founded in 2002, Teladoc is the first and largest provider of telehealth medical consultations in the United States, allowing over 7.5 million members 24/7/365 access to affordable medical care via phone and online video.

Who are the Teladoc doctors?

Teladoc doctors are U.S. board-certified internists, state-licensed family practitioners, and pediatricians licensed to practice medicine in the U.S. and living in the U.S. When you request a consult, Teladoc will connect you with a doctor licensed in your state.

Does Teladoc replace my doctor?

No. Teladoc doctors do not replace your primary care physician. Teladoc should be used when you need immediate care for non-emergent medical issues. It is an affordable, more convenient alternative to urgent care and ER visits.

How do I set up my Teladoc account?

Setting up your account is a quick and easy process. You can set up your account online or over the phone. Follow the instructions in your benefit book.

How do I request a consultation to talk to a doctor?

Log in to your account and click Request a Consult. Or you can call the number on the back of your membership card any time day or night.

How quickly can I talk to the doctor?

A doctor will call you back within 16 minutes, on average. If you miss the doctor's call (whether you are away from the phone or you have anonymous call blocker on) you will be returned to the bottom of the waiting list. The consultation request is cancelled if you miss three calls.

Can I provide consultation information to my doctor?

Yes. You have access to your portable electronic medical record at anytime. Download a copy from your online Teladoc account or call the number on the back of your membership card and ask to have your medical record mailed or faxed to you.

Can I speak with a specialist?

You cannot request to speak with a specialist directly, but our doctors may be able to provide guidance on the type of specialist you should see.

Can I request a particular doctor?

You cannot request a particular doctor. Teladoc is designed to support your relationship with your existing doctor. It is not a means of establishing an exclusive relationship with one of our doctors. Please know that all Teladoc doctors are highly qualified and go through rigorous training and credentialing. We have the largest physician network of any telehealth provider with board-certified, state-licensed doctors.

Can I use it for my family?

Yes. The Teladoc service is for you, your spouse and your dependents.

Can I get a prescription?

Teladoc does not guarantee prescriptions. It is up to the doctor to recommend the best treatment. Teladoc doctors do not issue prescriptions for substances controlled by the DEA, non-therapeutic, and/or certain other drugs which may be harmful because of their potential for abuse. These include, but are not limited to, antidepressant drugs such as Cymbalta, Prozac and Zoloft which are drugs that are harmful due to their potential for abuse. Also, non-therapeutic drugs such as Viagra and Cialis are not prescribed by Teladoc doctors.

How are prescriptions sent to the pharmacy?

Teladoc does not dispense prescription drugs. If the doctor prescribes medication, it is submitted electronically (SureScripts) or by phone to the pharmacy of your choice.

Is my electronic health record kept private?

Health records are kept totally private and we employ robust encryption methods to protect your personal information. You determine who can see the information in your record.

Can I be turned down for a pre-existing condition?

We do not turn patients away because of pre-existing conditions.

Can I call Teladoc outside of the United States?

Teladoc consults are unavailable outside of the United States.

Disclaimers

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Teladoc does not replace the primary care physician. Teladoc does not guarantee that a prescription will be written. Teladoc operates subject to state regulation and may not be available in certain states. Teladoc does not prescribe DEA controlled substances, non-therapeutic drugs and certain other drugs which may be harmful because of their potential for abuse. Teladoc physicians reserve the right to deny care for potential misuse of services. Teladoc phone consultations are available 24 hours, 7 days a week while video consultations are available during the hours of 7am to 9pm, 7 days a week.

Dental

In most instances, members receive discounts of 15% to 50% per visit* on dental services at over 132,000** available dental practice locations nationwide. Members simply show their card with the Aetna Dental Access® logo and pay the discounted price at the time of service. Members can use their card and enjoy the savings time and time again.

Highlights

- In most instances, members save 15% to 50% per visit* on services from general dentistry and cleanings to root canals and crowns.
- Over 132,000** available dental practice locations in the national network.
- Save on routine dental services such as X-rays and fillings.
- Save on specialty dental care such as orthodontics and periodontics where available.

Disclosures

* Actual costs and savings vary by provider, service and geographical area.

** **As of June 2013.

- Dental Benefit is not available to Vermont residents.
- The discount program provides access to the Aetna Dental Access® network. This network is administered by Aetna Life Insurance Company (ALIC). Neither ALIC nor any of its affiliates offers or administers the discount program. Neither ALIC nor any of its affiliates is an affiliate, agent, representative or employee of discount program. Dental providers are independent contractors and not employees or agents of ALIC or its affiliates. ALIC does not provide dental care or treatment and is not responsible for outcomes.

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Dental – Frequently Asked Questions

Q. How does the dental plan work?

A. Participating dental providers are listed in the membership fulfillment kit; members may also call the toll-free number located on the back of the membership card Monday through Friday, 7 a.m. to 7 p.m. and Saturday, 8 a.m. to 5 p.m. Central Time. When calling to schedule an appointment the member should identify him/herself as a member of the Aetna Dental Access® program. To receive the discount the member must present the membership card and pay the total discounted bill at the time of service.

Q. Is there a limit to the number of times the card can be used?

A. No. Members and their families may take advantage of the savings any time throughout the year. Members may also change dentists within the network whenever they choose.

Q. May this discount be combined with dental insurance?

A. In some cases, members may use both. If your insurance company allows you to submit claims after service, simply visit a participating dental provider, pay the discounted bill and submit the bill and claim to the insurance company. The net out-of-pocket cost will be lower because the insurance company would reimburse the member the percentage of the reduced bill as defined in their insured plan. If your insurance company does not allow the policyholder to submit claims, the discount dental can only be used for services not paid for by the insurance such as cosmetic dentistry or services after your annual maximum has been met.

Q. Is there someone that can answer questions about the card and services offered?

A. Yes. Simply call the toll-free number located on the back of the membership card Monday through Friday, between 7 a.m. and 7 p.m. Central and Saturday between 8 a.m. and 5 p.m. Central. A member services representative is standing by to answer any questions.

Q. What if a member's dentist is not a participating provider?

A. Simply call the toll-free number on the membership card and give the member services representative the doctor's name, address, phone number and specialty. We then contact the doctor about becoming a provider.

Dental – Sample Savings

Product/Service	Select Regional Average Cost*	Average Cost with Aetna Dental Access®	Total Savings
Adult Cleaning	\$108	\$59	\$49
Child Cleaning	\$78	\$42	\$36
Routine Checkup	\$56	\$30	\$26
Four Bitewing X-rays	\$68	\$36	\$32
Composite (White) Filling	\$171	\$90	\$81
Crown (porcelain fused to noble metal)	\$1,178	\$748	\$430
Complete Upper Denture	\$1,265	\$896	\$369
Molar Root Canal	\$1,095	\$669	\$426
Extraction (single tooth)	\$187	\$82	\$105

Updated 2011.

*The select regional average fee represents the average fees for the procedures listed above in Los Angeles, Orlando, Chicago and New York City, as displayed in the Estimate the Cost of Care tool as of September 2011.

Vision

Coast to Coast Vision (CTC) has over 12,000 eye care locations nationwide. Members save on eyeglasses, contacts, and laser surgery. The CTC provider network includes ophthalmologists, optometrists, independent optical centers and national chain locations.

Highlights

- Save 20% to 60% on prescription eyewear.
- Most frames, lenses and specialty items such as tints, coatings and UV protection are available.
- Save 10% to 20% on contact lenses (excluding disposables) at participating retail locations.
- Save 10% to 40% on soft contact lenses, including disposables, through America's Eyewear mail order service.
- Save 40% on lenses for eyeglasses or sunglasses when ordering online, or save 15% off your entire order through FramesDirect.com (excludes contact lenses and certain brands of eyewear due to manufacturer guidelines), with free standard shipping for orders over \$99.
- Savings of 10 to 30% on eye exams at participating locations.
- Save 40% to 50% off the national average on LASIK surgery (other laser surgeries available at select locations).
- No limit to the number of times you can use your card.
- Thirty day money-back guarantee and low price guarantee on eyeglasses.
- Members may submit the name of their eye care professional to join the network.

Vision Benefit is not available to Vermont Residents.

Vision – Frequently Asked Questions

Benefit FAQs

Q. What is the vision benefit? Does it include eye exams? Does it include contact lenses?

A. The vision benefit offers 10% to 60% discounts on eyewear and eye care at more than 12,000 optical locations throughout the United States. Providers include national optical chains such as LensCrafters, Pearle Vision, Visionworks, JCPenney, and Sears as well as regional chains and thousands of independent practitioners. Often many participating locations offer discounts of 10% on eye exams for both eye glasses and contact lenses. Additionally, the ophthalmology portion of the network offers 10% to 30% discounts on eye exams and surgical procedures, including the popular laser surgeries in select markets.

On average, members receive a 20% discount on replacement contact lenses (excluding disposable lenses) at retail locations. Members may elect to use the mail order service to purchase replacement contact lenses (including disposables) at a 10% to 40% discount.

Q. Is Coast to Coast Vision (CTC) discount insurance?

A. No. While an insured plan is available, CTC is a discount eyewear and eye care program. There is no paperwork. The participating retail optical locations will give the discount at the time of the purchase.

Q. Can members use CTC if they already have vision insurance?

A. Yes. In most cases CTC can be utilized to reduce out of pocket expenses. For example, once the insurance benefit has been exhausted, members may use their discount to buy additional pairs of glasses or contacts.

Q. Is there a limit on the number of times the benefit can be used?

A. There is no limit on the number of times the member or family member can take advantage of the savings provided by CTC.

Q. Does the CTC discount include family members?

A. It includes the member, their spouse and all legal dependents.

Q. What is included with CTC membership?

A. Prescription glasses and contact lenses are discounted 20% to 60% in most cases. Eye exams and surgery are discounted 10% to 30% where available.

Q. Why does the discount vary from 10% to 60%?

A. Many variables go into the calculation of the discount such as market demographics, location, hours of operation, one-hour service capability and level of retail mark-up. Example - a chain provider in a major metropolitan mall, open seven days a week, 10 hours a

Vision – Frequently Asked Questions - continued

day with an on-site lab, will more than likely have a different mark-up than an independent practitioner in a rural community. However, members will pay almost exactly the same price for the exact same materials regardless of where the purchase is made. Only the percentage of discount off retail may vary.

Q. Can members receive the discount at any optical location?

A. No. Members must go to an optical location that is contracted with Coast to Coast Vision to receive a discount. Our providers include national, regional and local chains as well as thousands of independent professionals.

Q. What is a dispensing fee?

A. The dispensing fee is the amount of money that is added to the provider's wholesale acquisition cost of materials. It is generally the only profit made by the provider on your purchase.

Q. Is the eye exam discounted?

A. Yes, at approximately 4,000 of our 12,000 locations nationwide. Our member service representatives can tell you which locations discount eye exams in your area.

Q. What do I do when I get to the location to get my discount?

A. All you need to do to receive your discount is show the provider your membership card and tell them you are with Coast to Coast Vision. It is very important that you mention Coast to Coast Vision Network to ensure a discount at the time of purchase.

Q. Do I get the discount if the store is running a sale?

A. The location will not combine our contracted discount with the sale price. However, in most cases, the Coast to Coast price will be better than the sale price.

Q. Do the retail locations mark up the merchandise to give me the discount?

A. No, you receive the discount because CTC brings the buying power of over 10 million members to the optical retailers participating with us.

Q. How do I get my eye doctor or optician on the Coast To Coast Vision network?

A. If you wish to refer your doctor to the CTC network, just give us their name, address and phone number and we will contact them about becoming a provider. If your practitioner does not wish to join the plan, you can still use him/her for your eye exam. Simply take your prescription to one of our participating providers to receive your discount on glasses or contact lenses.

Vision – Frequently Asked Questions (continued)

Q. How can I be guaranteed the greatest savings on contact lenses for me and for my husband?

A. Although members receive a 10% to 20% discount when purchasing replacement contact lenses at participating optical centers, the greatest savings and selection for contact lenses is often offered through the mail order program. Replacement contact lenses are discounted at 10% to 40% below retail.

Q. Can I purchase disposable contact lenses at a discount through a participating optical center?

A. No. Disposable lenses are generally priced as "loss leaders" at the retail stores. However, members can use the mail order contact lens program to receive discounts when ordering disposable lenses.

Q. What if my contact lenses are destroyed while I'm on vacation?

A. Simply call the toll-free number on the back of your membership card. The patient registration keeps your prescription on file until it expires and we can send your replacements overnight to you almost anywhere in the world.

Q. What is LASIK?

A. LASIK (Laser-Assisted In Situ Keratomileusis) is an outpatient treatment that uses an Excimer Laser (cool beam of light) to gently reshape the front surface of the eye (the cornea). Reshaping the cornea redirects the light angle as it enters the eye to refocus correctly on the retina. This allows images to be more sharply focused. Vision recovery is rapid, and there is little or no post-operative pain. With refractive procedures, your dependence upon glasses and contact lenses should diminish significantly.

Q. Can LASIK be done if I have astigmatism?

A. Yes, the LASIK procedure has been approved to effectively treat astigmatism as well as myopia (nearsightedness) and hyperopia (farsightedness).

Vision – Sample Savings

Example 1 - New York, NY

Regular Exam (Ophthalmologist)	\$150.00
CTC Member pays:	\$120.00
Savings	\$30.00
Conventional Lasik:	\$5,500.00
CTC Member Pays:	\$3,600.00
Savings	\$1,900.00
TOTAL SAVINGS	\$1,930.00

Example 2 - Dallas, TX

Regular Exam (Ophthalmologist)	\$190.00
CTC Member pays:	\$133.00
Savings	\$57.00
Frames (Regular)	\$89.95
CTC Member Pays:	\$54.47
Savings:	\$31.48
Progressive / Polycarbonate	\$209.00
CTC Member pays:	\$156.75
Savings	\$52.25
TOTAL SAVINGS	\$140.73

Example 3 - Tampa, FL

Extended Exam (Ophthalmologist)	\$225.00
CTC Member pays:	\$157.50
Savings	\$67.50
Frames (Designer)	\$200.00
CTC Member Pays:	\$72.72
Savings	\$127.28
Single Vision Lens (Plastic)	\$170.00
CTC Member pays:	\$110.50
Savings	\$59.50
TOTAL SAVINGS	\$254.28

Chiropractic

Members save 30% to 50% at over 3,000 participating chiropractors nationwide.

Highlights

- Free initial consultation.
- 50% off diagnostic services.
- 50% off X-rays performed on-site.
- 30% off treatment and other services.
- No limit to the number of visits.
- Over 3,000 providers.
- Each chiropractor's licensure and insurance are verified before being accepted in the network.
- Items such as vitamins and durable goods are priced at the doctor's discretion.

Disclosures

Chiropractic Benefit is not available to Vermont residents.

Chiropractic – Frequently Asked Questions

Q. What is the chiropractic benefit?

A. UHS Chiropractic™ provides services at discounted rates from a choice of over 3,000 participating Doctors of Chiropractic.

Q. How much can I expect to save?

A. Members of UHS will receive a free initial consultation, as well as 50% savings on diagnostic procedures and X-rays performed on-site, and 30% savings on treatments and most other services.

Q. Who needs chiropractic care?

A. Everyone can benefit from modern, safe, effective, and painless chiropractic care.

Q. How do I receive my discount when I go for treatment? Must I file a claim?

A. All you need to do to receive your discount is show the provider your membership card and tell them you are with UHS Chiropractic™. To ensure you receive a discount, it is very important that you mention UHS when you make your appointment and at the time of service. Since this is a non-insured plan, there are no claim forms or reimbursement procedure. The discount is always applied at the time of purchase.

Q. Can I receive a discount at any chiropractor's office?

A. No. You must go to a location that is contracted with UHS Chiropractic™ in order to receive your discount. Members can call our toll-free number located on the back of their card or 24 hours a day, 7 days a week go to www.mymemberportal.com to access the names of participating providers nearest them.

Q. How do I nominate my chiropractor for this program?

A. If you wish to nominate your chiropractor to the UHS Chiropractic™ program, just complete a nomination form, located in your membership packet, and we will contact them about becoming a provider.

Q. Is there a limit on how many times I may use my card?

A. There is no limit on the number of times you and your family may take advantage of the savings provided by the UHS Chiropractic™ benefit throughout the year.

Q. Is there a consultation fee?

A. The initial consultation is free!

Q. May I use this card in conjunction with my insurance?

A. Yes. In fact, after you pay the discounted amount at the point of service, you may then file the claim with your insurance.

Chiropractic – Sample Savings

Service	Average Cost	Member Cost	Savings Percentage
New Patient Problem Focused	\$110.00	\$77.00	30%
New Patient Comprehensive	\$180.00	\$126.00	30%
Established Patient Comprehensive	\$85.00	\$59.50	30%
Chiropractic Manipulative Treatment 1-2 Regions	\$45.00	\$31.50	30%
Chiropractic Manipulative Treatment 5+ Regions	\$65.00	\$45.50	30%
Radiologic Exam, Full Spine Anteroposterior/Lateral	\$185.00	\$92.50	50%
Muscle Testing-Cervical	\$60.00	\$30.00	50%
Physical Performance Testing/Comprehensive Muscle Testing	\$95.00	\$47.50	50%
Total	\$825.00	\$509.50	38%

Lab Testing

Members also save 10% to 80% on charges for blood tests and all other lab testing. The network provides affordable lab testing, which leads to proper diagnosis and effective treatment.

Highlights

- Save 10% to 80% on typical costs for blood tests.
- Place your order online or by phone.
- The network will help you find the location of the nearest major clinical laboratory and provide the necessary order.
- Confidential results available in as little as 24-48 hours for most tests.

When you schedule an appointment with a participating lab, have your membership card and payment with you.

Not available in MA, MD, ND, NJ, NY, RI, or SD.

Lab Testing – Sample Savings

Test	Retail Price	Your Price	You Save
CWP*	\$535	\$97	\$448
PSA	\$107	\$49	\$63
Thyroid Panel w/THS	\$174	\$45	\$133

**Comprehensive Wellness Profile (CWP) with 50+ results includes: cbc, lipids, kidney, liver, glucose, electrolytes, bone and minerals.*

MRI and CT Scans

Members receive discounts of 50% to 75%* off usual charges for imaging services while using credentialed radiologists. Members will be matched with the best provider based on type of medical condition, member preferences, and location.

Highlights

- Save 50-75% on typical costs for the following imaging services**:
- MRI
- CT Scans
- Ultrasounds
- Large nationwide panel of radiologists and imaging specialists with over 2,900 radiology centers throughout the United States.

** Savings may vary based on geographic location, provider and procedure performed.*

***Available services may vary by provider.*

Pharmacy

Save 10% to 85% on most short-term, acute care prescriptions with the local pharmacy program. Long-term prescriptions may be purchased at the local pharmacy.

It's simple to use. The member simply shows the membership card and prescription to the pharmacist. The pharmacist calculates the discount and the member pays the lower price. No other forms required.

Highlights

- 10% to 85% savings on most short-term and acute care medications.
- Use the Online Drug Price Check Utility (www.rxpricequotes.com) to find the price of prescriptions at participating locations by zip code.
- Over 60,000 locations, including independent, national and regional chain pharmacies nationwide.

Disclosures

Pharmacy discounts are Not Insurance, and are Not Intended as a Substitute for Insurance. **The discount is only available at participating pharmacies.**

Pharmacy – Frequently Asked Questions

Q. What can I expect to save with this membership?

A. Prices will always vary on prescription drugs and therefore it is impossible to estimate specific dollar savings through any non-insured drug program. The Neighborhood Pharmacy program offers 10% to 85% discounts on acute care medications. Savings cannot be used in conjunction with other discount or insurance cards.

Q. Do I get a discount on every single drug at the neighborhood pharmacy when I use my Membership card?

A. Not necessarily. Drug stores, like hardware and grocery stores determine their own pricing structures. Due to large discounts from manufacturers, some drugs may already be priced at or below the PBM's discount price. The PBM network pharmacies have agreed to sell prescription drugs at the contract price, or their "usual retail price" whichever is lower.

Q. Why didn't I save any money at the participating local drugstore?

A. More than likely, you ordered a long-term maintenance medication versus a short-term acute care medication such as an antibiotic or pain-killer. Most pharmacies use long-term, maintenance medications as "loss leaders" and price these drugs at or below cost. They do this so that their customers will assume that all their prices are low. It's a marketing strategy. The pharmacy realizes that for long-term medications, you'll shop around in order to get the best price for a medication that you may be taking for the rest of your life. As the consumer, you are led to believe that this pharmacy has low prices on all their prescription drugs and other items. Our pharmacy program has contracted with independent and chain pharmacies nationwide to offer you a discounted price that will normally save you 10% to 85% on short term medications. However, in order to draw customers, many pharmacies opt to price their prescriptions lower than the contracted price. In this case the member gets the lower of the two. Normally, they use high profile maintenance drugs for these "loss leader" price reductions such as Prozac, Zantac, and Premarin.

Q. What if the Pharmacist doesn't recognize the card's name?

A. Always make inquiries in person and be sure to bring your card with you. When the pharmacist sees the Pharmacy Benefit Manager information on the card, the pharmacist then understands which program you are on.

Q. Is this a co-pay insurance card?

A. No. A co-pay card is an insured product where the customer pays a preset amount and the insurance company pays the remainder. This membership is a discount card offering reduced prices. You are responsible to pay the pharmacy 100% of the discounted price.

Pharmacy discounts are Not Insurance, and are Not Intended as a Substitute for Insurance.

The discount is only available at participating pharmacies.

Payment must be made at the time of service in order to receive a discount.

Pharmacy – Sample Savings

<u>Drug</u>	<u>Strength/Quantity</u>	<u>Retail Price</u>	<u>Discounted Price</u>	<u>Savings</u>
Vicodin	5MG-500MG, 40 qty	\$17.52	\$11.01	37%
HCTZ	25MG, 30 qty	\$8.51	\$6.53	23%
Amoxicillin	500MG, 21 qty	\$14.00	\$10.24	27%
Glucophage	500MG, 60 qty	\$23.76	\$13.32	44%
Zithromax	250MG, 6 qty	\$48.45	\$30.36	37%
Xanax	0.5MG, 60 qty	\$19.78	\$11.49	42%
Bactrim DS	800-160MG, 20 qty	\$14.08	\$11.72	17%
Darvocet	100-650MG, 45 qty	\$23.31	\$14.15	39%
Soma	350MG, 60 qty	\$37.80	\$17.96	52%
Zestril	20MG, 30 qty	\$17.18	\$11.49	33%

**Prices are subject to change without notice and may vary by region.*

Payment must be made at the time of service in order to receive a discount.

ID Wellness

Health and Well-being is important to all of us. Wellness is about a healthy lifestyle that includes nutrition, activity and mindset. ID Life is about Wellness specifically designed for **YOU** to get healthy and stay healthy.

HIGHLIGHTS

- Patented (HIPAA Compliant) personal assessment tool to start your personal Wellness Plan
- Web Based Application to create your personal plan based on age, gender and level of fitness
- Nutrition Plans individualized to meet your needs and goals
- Tracks your goals and progress
- Health and Exercise library with articles and exercise videos
- Fitness calculator and meal planning essentials
- Links to experts for training and nutrition

Using the Wellness benefit is the first step toward better health!

Medication Management and Pharmacy Services

MEDICATION MANAGEMENT AND PHARMACY SERVICES GET BETTER, FEEL BETTER, STAY BETTER

A SIMPLER AND MORE CONVENIENT WAY TO GET AND TAKE YOUR MEDICINE!

Curant Health provides medication management and pharmacy services, as well as exceptional patient care, for seniors and patients with chronic medical conditions. Simplify your life and get your medications pre-packaged in daily doses customized to your lifestyle specifically to your doctor's orders. Simple, convenient, safe and personal.

If you are taking 4 or more medications OR have an ongoing chronic condition, you qualify for a personalized medication management program, designed specifically for you by your own clinical pharmacist and care coordinator.

As a Wellspring member, you will receive:

- Customized packaging of your medications in daily dose packs so you never have to wonder if you're taking the right medication at the right time
- Home delivery of pre-packed medication for no shipping cost
- Pharmacist and physician interaction to coordinate and manage your prescription refills
- Education and coaching to make sure you know what steps to take to get the best results from your medicine
- Personal care coordinator and pharmacist who you know and trust
- Continuous care and follow-up on your health conditions
- Close, personal coordination with your doctor to make sure you get the best possible care
- Access to financial assistance programs if needed

Durable Medical Equipment

The Medical Supplies Service is an easy way to order medical supplies and equipment. Through this service, members get a discount on equipment such as walkers, power mobility scooters, hospital beds, blood pressure devices, and much more. They also save \$5 on orders of \$100 or more. Just order online or call the toll-free number to speak with a representative.

Highlights

- Toll-free and online ordering for home delivery on a wide range of health and wellness products.
- \$5 discount on orders of \$100 or more.
- Save 20% to 50% on health and wellness products such as:
 - ~ Walking aids:
 - ~ Walkers, canes, crutches.
 - ~ Bathroom safety:
 - ~ Shower chairs, transfer benches, commodes, raised toilet seats, safety bars.
 - ~ Wheelchairs and scooters:
 - ~ Wheelchair accessories, power mobility scooters.
 - ~ Hospital beds and accessories:
 - ~ Electric beds, slings, trapezes.
 - ~ Cushioning and pressure relief:
 - ~ Pads, cushions, lumbar supports.
 - ~ Orthopedic products:
 - ~ Knee braces, arm slings, back supports, carpal tunnel supports.

Disclosures

This plan is NOT insurance.

The plan is not insurance coverage and does not meet the minimum creditable coverage requirements under the Affordable Care Act or Massachusetts M.G.L. c. 111M and 956 CMR 5.00. This plan provides discounts at certain healthcare providers for medical services. This plan does not make payments directly to the providers of medical services. The plan member is obligated to pay for all healthcare services but will receive a discount from those healthcare providers who have contracted with the discount plan organization. **This discount card program contains a 30 day cancellation period.** The range of discounts for medical or ancillary services provided under the plan will vary depending on the type of provider and medical or ancillary service received. Member shall receive a full refund of membership fees, excluding registration fee, if membership is cancelled within the first 30 days after the effective date. AR and TN residents: A refund of all fees will be issued if membership is cancelled within the first 30 days. MD Residents: The membership fee and one-time registration fee (minus \$5.00) will be refunded if cancelled within the first 30 days and upon return of the discount card. Discount Medical Plan Organization: New Benefits, Ltd., Attn: Compliance Department, PO Box 671309, Dallas, TX 75367-1309, 800-800-7616. Website to obtain participating providers: MyMemberPortal.com. Not Available to KS, VT or WA residents.