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Vativis Medical Discount Plan Overview

Who is Vativis?

Vativis is a US based company that was created with the vision of a future where healthcare breaks free from outdated insurance models, making transformative solutions the new standard to build healthier communities and energize workplaces.

Why Vativis?

Vativis was founded to challenge the traditional health insurance model. We aim to provide an alternative to expensive health insurance in the form of dependable healthcare solutions that break free from complex, outdated and costly insurance models. Vativis ensures that everyone can afford the healthcare they expect. We do not offer insurance. Rather, we offer healthcare discount solutions that are proven, straightforward, flexible, and always focused on you.

How do I start using the Vativis Medical Discount Plan?

Once you have signed up and paid for your chosen subscription plan you will get a welcome email that provides you access to the membership panel.

- 1. The email contains attachments for each of our partners providing all the information you need in order to start using the benefits that you have signed up for.
- 2. The membership card in the panel has the registration links that you need to register and start using the individual benefits from your plan.
- 3. You can alternatively, scan the QR codes on your membership card to start using your member services.

What are the support numbers in case I need to contact someone?

For all vendor and health benefit information, and to contact support for your individual benefits from your plan you can contact: 833-694-0186.

For account, sales and billing information please contact: 833-999-1347



General Membership Questions

Can I use the plan internationally?

Currently, Vativis is available only for residents of the United States..

How can I cancel my membership?

To cancel your Vativis membership, please contact our customer service team either through our website or by calling our 833-999-1347

Can I cancel anytime?

You can cancel anytime before your subscription starts. However, once your subscription starts, you cannot cancel your Vativis membership for 90 days. After the 90 days you can contact our customer service team either via our email support@vativis.com or calling our toll free number at 1-833-999-1347.

Why is there a 90 day cancellation period?

If a customer orders a prescription for home delivery it can take time for the delivery. That is why a 90 day period is required.

Is Vativis insurance?

No. We are a non-insurance solution that provides deep discounts that may be lower than your Copay. Compare our cost with your deductible.

Can I use insurance to pay for Vativis?

No, we do not accept insurance or spending account plans as payment. Our cost is already the lowest in the market compared to insurance.

Can I claim medication of FSA or HSA accounts?

Yes, a receipt of your order will be sent to apply to your plan. Please check with your plan administrator.



Why are the benefit or vendor names in the membership panel different from what is on the website?

Vativis partners with third party vendors to provide health care benefits to our members. Once you have subscribed to our services and access the membership panel all the information regarding our partners will be provided.

How can I make changes to my profile?

Go to My Profile, select Edit and correct. Or call our Customer Care for help.

How many family members can be on my plan?

Family members are your spouse and children. As long as they live at the same address as provided on your membership you can have 2 adults and as many children as living at the same address.

Can I change the plan from family to individual at any time?

Yes, you may at the due date of your monthly subscription. You can also cancel at any time.

How can I manage my Vativis account online?

You can manage your account online, including updating your credit card information and address details.

Will my credit card be charged on a certain day each month with Vativis?

Your credit card will be charged on a 30 day rolling basis as per your billing date to avoid any delays with your subscription benefit.

Security and Privacy Questions

Is my personal health information protected and kept confidential with Vativis?

Yes, at Vativis, we prioritize the protection and confidentiality of your personal health information. We adhere to strict privacy and security measures to safeguard your data.

Is my credit card secure?



Yes, we utilize one of the top processing companies in the US and they take all precautions to protect your valuable information.

Is my personal information secure when using Vativis Virtual Care?

Vativis Virtual Care is committed to protecting the privacy and security of user information. All data is encrypted and stored securely in compliance with healthcare privacy regulations.

I cannot remember my password?

Click on Forget Password on the login screen and follow the directions.

Shipping Questions

How long will it take for me to receive my medication order with Vativis?

Shipping time depends on your preference, with standard shipping taking 7-10 days and expedited options available. Diabetic supplies are shipped in 2 days with correct insulation to maintain the proper temperature of the insulin during shipping.

Do you deliver to P.O. Boxes?

Yes, we can ship your orders to P.O. Boxes for your convenience.

Will I receive tracking information for my order?

Absolutely! Your delivery courier will provide you with tracking information to monitor the status of your package.

What should I do if my shipment arrives damaged?

If your medication arrives damaged, please contact our customer service team immediately. We will guide you through the necessary steps to ensure you receive your medication without delay.

What are some additional costs I should be aware of?

Our shipping is free even for those medications that require a cooler for delivery. For expedited shipping (overnight and 1-2 day) there will be an additional cost as per location. You can see the cost when you are logged in to your member portal.



Vativis Direct Primary and Urgent Care

What is the Vativis Direct Primary Care Program?

The Vativis Direct Primary Care Program (DPC) is a medical discount program that is the solution to rising healthcare costs resulting in higher out-of-pocket costs and higher premiums for employers and individuals. Our platform and benefits are simple and straightforward with out of pocket costs shown upfront. People using our discount programs save 30-70% compared to traditional insurance.

Is the Direct Primary Care membership considered health insurance?

Nope, it's not insurance! Vativis offers a membership that works on a different system called Direct Primary Care (DPC). You pay \$10 at the doctors office for every visit and \$25 if you are at an urgent care, there are no limitations, deductibles or anything else for this program

Why can't I see clinic names, addresses, and phone numbers?

Good question! With Vativis, you can't just walk into a primary care or urgent care clinic without an appointment. We wait until you schedule your visit through our Patient Advocacy Line before sharing any clinic details.

How do I verify if my doctor is covered by the plan?

Just shoot us an email at <u>support@vativis.com</u> and we will confirm whether your physician is included in the plan or not.

How do I schedule an appointment with a doctor?

Once you have signed up for our service, you will get access to your membership portal which will have the concierge service number. All you have to do is call that number and schedule an appointment as required.



Can members see a doctor as many times as they want?

Absolutely! There's no limit on how often you can visit a doctor with Vativis. You just need to book your appointments through our Patient Advocacy Line.

Is Vativis DPC available everywhere in the United States?

Yes, you can find Vativis Direct Primary Care all across the United States! Just a heads-up: If your membership includes WellCard Savings and you're in Montana, Vermont, or Washington, you won't get a discount card.

What benefits come with Vativis Direct Primary Care?

Here's what's included:

- Unlimited doctor visits for just a \$10 fee each time.

- Unlimited urgent care visits for \$25 each.

- You get 24/7 access to bilingual medical providers online or by phone for minor illnesses and injuries, all at no extra cost!

- An annual physical with four lab tests (the Well-woman pap smear isn't included).

- You can manage unlimited chronic disease conditions, like diabetes and high blood pressure, with 13 common health issues covered.

- Plus, our doctors focus on using generic meds first whenever possible.

If I have pre-existing conditions like diabetes or high blood pressure, can I still join?

Yes, you can! We accept pre-existing conditions. You can see a doctor for just a \$10 fee each time you visit, and since members can visit as often as needed, you can get the care you need before things get serious.

How does a DPC plan work with regular health insurance plans like United Healthcare or Aetna?

Vativis is a great addition to your regular health insurance. With DPC, all the services covered by your membership don't count against your regular insurance. Instead of worrying about copays and deductibles, you pay a simple membership fee and low visit fees when you see a doctor. This can be especially helpful if you have a high deductible plan!

Can Vativis doctors take care of any medical issues?

Our providers can treat a lot of conditions, including some chronic ones like diabetes and high blood pressure, as long as they're manageable. Just like any doctors visit at times depending



on the severity of the condition, you might need to see a specialist or go to a hospital, and those services aren't included in the Vativis membership.

Does this membership cover hospital care or specialty care?

The Vativis membership covers urgent care but doesn't cover hospital care, whether it's inpatient or outpatient. Many members choose to have an additional policy to help cover emergencies that aren't included with Vativis. As for specialty care, while we can manage some chronic conditions, we don't offer specialty services outside our partner clinics. If you're already seeing a specialist, it's best to stick with them.

Can I join Vativis if I have Medicare, Medicaid, or Tricare?

Unfortunately, no. Because of insurance regulations, Vativis can't accept members who have Medicare, Medicaid, or Tricare.

Is there a limit on how often I can see a doctor?

Nope! You can visit your physician as often as you need to with Vativis. Just make sure to schedule your visits through our Patient Advocacy Line first. This way, you can get the help you need before using your insurance.

Is Vativis DPC membership available all over the country?

Yes, it's available across the United States! Just a reminder: If your job has WellCard Savings and you're in Montana, Vermont, or Washington, you won't receive a discount card.

If you have more questions, feel free to ask! We're here to help you make the most out of your healthcare.

Vativis Prescription Solutions

What is Vativis Health Rx?

Vativis Rx is a comprehensive pharmacy discount program designed to provide significant savings on prescription medications. It caters to individuals who are underinsured, including those with high deductibles, by offering the lowest prices on medications nationwide through established partnerships and buying power. Additionally, Vativis Rx extends its benefits to small businesses, providing them with an incremental value to offer affordable medication plans to their employees, including long-term full-time, part-time, contract, and freelance workers.



Why choose Vativis Health Rx?

Vativis Rx gives individuals and employers discount prices on their prescription medication. This is an affordable alternative to expensive insurance plans, with excellent full service support.

Vativis Rx was created to provide individuals and families with an alternative to high deductibles on their insurance so they can afford prescription medications. It is perfect for the uninsured and underinsured who can now get the lowest prices on medications at pharmacies nationwide.

How do I get started?

Getting started is easy. Individuals and families can simply sign-up and get access within 24 hours. For businesses looking for group plans at custom rates you can afford. Contact us and we can get you started.

Will all medications for me be free?

800 generic medications on our formulary are free through our home delivery program, all others are at up to 80% discount . Brand medications and most OTCs are usually at high deductibles or not covered under insurance. We provide them at deep discounts compared to retail prices.

Can I start right away or is there a wait period before I can use Vativis Rx?

You can start using the benefits immediately for Mail Order. If you will pick the prescription at a pharmacy you can do so 24 hours after you sign up

How can I get brand medications if they are not free?

Brand discounts are available through our national network of over 64K pharmacies. Having partnered with leading pharmacists our pharmacy consultation service can help you get an equivalent drug that will meet your medical needs. We could also help you get the brand name medications through an international pharmacy at a contracted cost which will still be lower than what you would pay through insurance. All phone numbers are available in the portal once you sign-up.

How do I save on Over the Counter (OTC) medications?

OTC medication is available via mail order and will be at a discount price compared to retail.

What if the medication I need is not listed on the formulary online?

If your medication is not available on our formulary, please contact our support number.



Can you assist me in signing up and completing the forms?

Of course! Feel free to reach out to our customer service team for assistance with the sign-up process and form completion.

Is automatic refill enrollment available?

While we do not currently offer automatic refills, we can set up SMS text reminders to notify you when it's time for your next refill (14 days prior).

How does the prescription discount program work?

Sign Up: Join our program to receive your monthly membership card, granting you access to our extensive list of free medications.

Search: Explore our catalog of 800+ generic medications and compare the cost savings to what you're currently paying.

Consult: Reach out to our pharmacy coaches for personalized assistance. We'll ensure your medications are covered or suggest suitable alternatives.

Transfer: Transfer your prescriptions to us hassle-free, or have your doctor ePrescribe directly to our pharmacy.

Confirmation: Our team will confirm your order details and collect payment to ensure accuracy and security.

Delivery: Enjoy the convenience of free shipping for chronic medications delivered straight to your doorstep.

Can I get my prescriptions transferred and what quantity of prescriptions will I receive?

When you enroll in the membership our pharmacist will get into contact with your pharmacy or physician to transfer your prescription. Your prescription will determine the quantity you can receive and there is a maximum qty limit allowed by the program. Charges may occur for maximum quantity limits exceeded.

Can I use the prescription card anywhere and will I be charged if I do not use it?

Your membership card is valid at any of the 64,000+ nationwide pharmacies in the US, Guam and Puerto Rico..



Do you support 30-day and 90-day prescriptions under Vativis?

Yes, we support both 30-day and 90-day prescriptions, with the most economical option being a 90-day supply.

Is there a limit to how many prescriptions I can get filled with Vativis?

No, there is no limit.

Can I use Vativis Rx alongside my current insurance plan?

Yes, the Vativis Rx program can be used as a supplement to your insurance, however, the pharmacy will use one or the other, not both to fill your prescription.

What pharmacies are included in my plan?

More than 99% of the pharmacies in the US will accept Vativis including:

Pharmacy	Pharmacy	Pharmacy
Albertsons Market Pharmacy	Cub Pharmacy	Fred Meyer Pharmacy
Bartell Drugs	CVS Pharmacy	Fruth Pharmacy
Big Y Pharmacy	Frys Food and Drug	Carrs Pharmacy
Dillon Pharmacy	Giant Eagle Pharmacy	Cash Wise Pharmacy
Discount Drug Mart	Giant Pharmacy	Coborns Pharmacy
Food City Pharmacy	Haggen Pharmacy	Costco Pharmacy



Food Lion Pharmacy	Hannaford Supermarket & Pharmacy	Harmons Pharmacy
Harris Teeter Pharmacy	Hartig Drug Co	Harveys Supermarket
HEB Pharmacy	Hy-Vee Drugstore	King Soopers Pharmacy
Kinney Drugs	Kroger Pharmacy	Longs Drugs
Market Street Pharmacy	Marshfield Clinic Pharmacy	Medicap Pharmacy
Navarro Discount Pharmacy	Osco Drug	Osco Pharmacy
Pavilions Pharmacy	Pick N Save Pharmacy	Price Chopper Pharmacy
Publix Pharmacy	Raley's Pharmacy	Ralphs Pharmacy
Randalls Pharmacy	Ridleys Pharmacy	Rite Aid Pharmacy
Safeway Pharmacy	Savon Pharmacy	Smiths Pharmacy
Stop & Shop Pharmacy	The Medicine Shoppe Pharmacy	Tom Thumb Pharmacy
Tops Pharmacy	United Pharmacy	Vons Pharmacy
Walgreens	Oxygen Pharmacy	Wegmans Food Markets, Inc.
Weis Pharmacy	Winn Dixie	



What's the difference between a brand-name drug and a generic equivalent drug?

Generic drugs are FDA-approved equivalents of brand-name drugs, with identical active ingredients, dosage, safety, and performance. They typically cost up to 70% less and are equally effective. Your savings are maximized with generic options.

What if my drug is not available in generic form?

If your drug isn't available in generic form, there may be a similar generic alternative that's just as effective. Your doctor can suggest therapeutic equivalents from our extensive list of 800 free generic medications. If you need a brand medication we have partnerships with international pharmacies and can provide the brand name medications at lower cost than retail.

What should I ask my doctor?

Inform your doctor about our program and the availability of free generic medications. Ask if generic alternatives could be suitable for your condition and inquire about other brand-name drugs that might have generic substitutes on our list. Most medications prescribed in the US are generic.

Why aren't ALL medicines on your drug list?

Our drug list covers 90% of prescribed medications, focusing on more than 22 therapeutic classes to ensure comprehensive treatment for various chronic and acute conditions.

My Pharmacist is not familiar with Vativis?

Vativis is powered by Rx Valet. Show them the membership card and ask them to process the claim just like they do with any other RX Benefit Card. If they are having trouble they can call our Pharmacist Hotline at 1-855-798-2538.

Will I owe any money at the pharmacy?

If the medicine is not on our free list you will owe the co-pay or the discounted price as shown on the website after you have logged in. This amount will be according to the contracted amount with your membership. Present your card to the pharmacy with a valid prescription. Mail order is required on maintenance medications.

Do I need a valid prescription?

Yes - Your local pharmacy or our Home Delivery Program will require a valid prescription. Please bring your prescription with you to your local pharmacy or have it electronically sent to the pharmacy of your choice. When picking up the prescription, show your BestChoice Rx card as a form of payment.



I am experiencing a problem at the pharmacy?

Please have the Pharmacist call the Pharmacy Helpline 855-798-2538.

What is a MemberID?

MemberID tells our system what plan you are on and what co-pays, if any you may have to reflect correct costs to the member.

Where do I enter my Member Code?

On the Menu page choose Member Code and enter your code.

I forgot or don't know my code?

On the My Profile page, please click on "forgot Member Code". Please enter your name and date of birth. We will provide the code via email or text. Or you can click on Membership Card to download a PDF version of your card that you can print or save.

Do I need help? I don't have a printer or smart phone?

Call our Customer Support team at 855-798-2538 and we will help you with all of your questions.

Does Vativis Cover Brand Medications?

Yes, we do. Our first option is to try to fulfill your prescription with the low-cost generic alternatives. However, in some cases a generic is not available you may get the brand medication at an additional cost.

Why are Brand Medications so expensive?

Drug companies control the prices and try to recoup the investment in research and development. Thus, causing high prices. We will also work with you to look for alternatives that could save you money. Our customer support team is available to discuss options.

Do the prices vary by pharmacy?

Yes, pharmacies have their own pricing. Show your BestChoice Rx card and pay the Pharmacy nothing if your drugs are on the free list! You have the ability to save more through Home Delivery.

Can I use Vativis for medications for my pets?

Yes, Vativis offers pet medication included in your membership.

Will I be reminded when needing a refill?

Yes, we will contact you via phone, email and or text to confirm your next shipment 14 days in advance.



Dental & Vision

Which dentists participate in the Dental plan?

Your subscription gives you access to all dentists who participate in the Aetna Dental Access network.

How much can I save in the Dental program?

Smile brighter with big savings at over 262,000* available dental practice locations nationwide. Use your card over and over again to keep your teeth sparkling clean!

- 1. In most instances, save 15% to 50% per visit**
- 2. Save on dental services such as cleanings, X-rays, crowns, root canals and fillings
- 3. Need specialty dental care? Save on orthodontics and periodontics, too!
- 4. Show your card with the Aetna Dental Access® logo and pay the discounted price at checkout

*As of April 2020. **Actual costs and savings vary by provider, service and geographical area.

What is included in the Vision program?

You and your family can see better savings at over 20,000 vision providers nationwide, including national chains and local retailers. You save 10% to 60% on glasses, contacts, laser surgery, and exams.

- 1. 20% to 60% off prescription eyewear including most frames, lenses and specialty items such as tints, coatings and UV protection
- 2. 10% to 30% off eye exams
- 3. Participating chains include LensCrafters, Pearle Vision, Visionworks, JCPenney, Target and more
- 4. Your eye doctor is not in our network? The nomination process is a breeze!
- 5. 10% to 40% off contact lenses through America's Eyewear mail order service
- 6. 40% to 50% off the national average cost of LASIK surgery

Dental-Vision Benefits Disclosures

 This program 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. It contains a 30-day cancellation period, provides discounts only at the offices of contracted health care providers, and each member is obligated to pay the discounted medical charges in full at the point of service. The range of discounts for medical or ancillary services provided under the program will vary depending on the type of provider and medical or ancillary service received. Members shall receive a reimbursement of all periodic membership fees if



membership is canceled within the first 30 days after the effective date. Discount Plan Organization: New Benefits, Ltd., Attn: Compliance Department, PO Box 803475, Dallas, TX 75380-3475, 800-800-7616. Website to obtain participating providers: <u>MyBenefitsWork.com</u>.

2. 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 the 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.

Quest Select-Laboratory

What is the Quest Select[™] Program?

The Quest Select[™] program offers you outpatient laboratory testing with no cost to you.

What are my costs when using Quest Select™?

You will incur a \$0 copay for over 1,200 different laboratory tests, including blood, urine, cytology, pathology, and cultures included in the program.

What tests are covered under Quest Select™?

The program covers over 1,200 tests, which include:

- Blood testing (e.g., cholesterol, complete blood cell counts)
- Urine testing (e.g., urinalysis)
- Cytology and pathology (e.g., Pap smears, biopsies)
- Cultures (e.g., throat culture)



How can I ensure that Quest Diagnostics will not bill me?

To avoid being billed, you must inform the Quest Diagnostics receptionist that you are a Quest Select[™] member and provide your member ID number. If you have a health plan, your member ID will be your health plan ID number. If you do not have a health plan, a unique Quest Select[™] member ID will be assigned to you and can be accessed online or by calling 1-800-646-7788.

What should I do if my doctor ordered lab work to be done in the office?

It's essential to know your rights. If your doctor works for a hospital, they may refer you to the hospital's lab, which can be more expensive. However, you have the right to request that your blood work or lab tests be performed at Quest Diagnostics instead. Inform your doctor and their medical receptionist that you have a \$0 out-of-pocket Quest Select[™] membership and ask them to schedule your tests at Quest Diagnostics. Your results will be sent to your doctor and available online through your MyQuest[™] account.

Does the Quest Select[™] Plan replace my current healthcare benefits?

No, Quest Select[™] is a supplementary program. If you do not utilize Quest Select[™], your standard deductible and coinsurance will apply, and you will not benefit from the \$0 copay feature.

What tests are not covered under the Quest Select[™] plan?

The following are not covered by Quest Select™:

- Lab work ordered during hospitalization
- Emergency (STAT) lab work
- Time-sensitive esoteric outpatient testing (e.g., fertility testing, bone marrow studies)
- Non-laboratory procedures (e.g., mammograms, x-rays, imaging, dental work)
- Lab work conducted without using your Quest Select™ benefit
- Testing that is not approved or covered by your existing health plan, if you have one.

How can I find the nearest Quest Diagnostics location?

To locate the nearest Quest Diagnostics lab, visit this <u>link</u> and select "QuestSelect Map." Enter your zip code to find your closest location. Alternatively, you can go to [Quest Diagnostics' <u>location search page</u>].

How many Quest Select[™] labs are available in the U.S.?

There are over 2,000 Quest Diagnostics lab locations across the United States.



Telemedicine

What is Vativis telemedicine program and how does it work?

Vativis Virtual Care is a telehealth service that provides access to licensed healthcare providers 24/7 via phone or video. Users can request a visit, speak with a provider, and receive acute health treatment if medically necessary.

What medical conditions can be treated through Vativis telemedicine?

Vativis Virtual Care can treat a variety of routine urgent health issues, including abrasions, allergies, flu, nausea, sinus symptoms, urinary tract infections, and more. <u>Full list</u>



Who are the healthcare providers at Vativis telemedicine?

The healthcare providers at Vativis telemedicine include physicians, nurse practitioners, and physician assistants who are U.S. board certified and licensed in accordance with quality standards.

Do I need to have insurance to use Vativis telemedicine?

Vativis Virtual Care services are available to patients nationwide and is a standalone benefit through the prescription service, not insurance.

Can I get prescriptions through Vativis telemedicine?

If medically necessary, providers at Vativis telemedicine may write a prescription for medication that can be picked up at a local pharmacy. However, they do not prescribe controlled substances. You can use your insurance for the prescription service or purchase the Vativis RX service as a bundle with Telemed or separately.

Can I request refills for prescriptions through Vativis telemedicine?

Providers generally do not prescribe more than a 90-day refill within a 6-month period. Patients should be aware that Vativis telemedicine is not a replacement for regular primary care physician visits.

How can I access Vativis telemedicine?

After purchasing Vativis telemed or the bundle with drugs, users will receive an email with all access details for access to your membership panel.

Can family members also use Vativis telemedicine?

It depends on the package that was purchased, for any family package, yes, family members can use virtual care.

Is Vativis telemedicine available in all states?

Telehealth services may vary by state, and services are provided in accordance with state law by licensed healthcare professionals.



How can I get more information about Vativis telemedicine?

For more information, you can contact us at support@vativis.com

Can I use Vativis telemedicine for emergency medical situations?

Vativis telemedicine is not suitable for emergency medical situations. If you have a medical emergency, please call 911 or visit the nearest emergency room.

How long does it take to receive care through Vativis telemedicine?

The time it takes to receive care through Vativis telemedicine may vary depending on demand and availability. However, users can typically request a visit and speak with a provider in a timely manner within a few hours.

Are there any age restrictions for using Vativis telemedicine?

Vativis telemedicine can treat both adults and children for routine health issues. However, there may be limitations on the types of conditions that can be treated based on age and other factors.

Can I use Vativis telemedicine if I am pregnant?

Vativis telemedicine providers can only treat female patients ages 18-65 who are not pregnant. Pregnant individuals should consult their primary care provider or OB/GYN for healthcare needs.

Are there any additional fees associated with using Vativis telemedicine?

There is no additional fee.

How can I provide feedback or report a complaint about my experience with Vativis telemedicine?

Users can provide feedback or report complaints by contacting the customer service team at Vativis telemedicine. Contact information can be found on the website or through the telehealth platform.



Can I use Vativis telemedicine for ongoing chronic conditions?

Vativis telemedicine can only provide non-emergency acute care. It is important to consult with your primary care provider for ongoing management of chronic conditions.

Can I request a virtual visit for a specific medical condition not listed?

If you have a specific medical condition that is not listed on the website, you can contact Vativis telemedicine for more information on whether it can be treated through the telehealth service.

Additional services

Mental health

What is Balance for Life (BFL)?

Balance for Life is our partner providing a comprehensive program that supports behavioral wellbeing and substance abuse recovery, addressing mental health concerns and providing resources to manage social challenges effectively.

How long has the BFL program been in place?

Although Balance For Life is a new program, counseling services and their AI chatbot features have been available since 1982 and 2018, respectively.

How many lives does the Balance for Life program support? The program supports over 110 million individuals worldwide.

Is the BFL program a one-size-fits-all solution?

No, the BFL program is tailored to meet the specific needs of various individuals, schools or employers, ensuring personalized support.

Does BFL offer services in other languages?

Yes, BFL provides support in over 70 languages for counseling services and in 2 languages for chat consultations.



Student Assist

What is Student Assist?

• Student Assist is a global program that provides emotional and practical support for university and college students.

What services does Student Assist offer?

• Student Assist offers 24/7 direct access to a professional counselor, emotional support, practical support, and advisor assistance.

Is Student Assist available for student advisors?

• No, Student Assist is only available for students. Student advisors should refer to their Advisor Program for their own support needs.

Advisor Assist

What is Advisor Assist?

• Advisor Assist is a service component of Student Assist that helps school advisors communicate with students and provide support.

Who is eligible for Advisor Assist?

• School advisors, including on-site counselors, professors, teachers, and faculty members with student-advising roles.

What services does Advisor Assist offer?

• Advisor Assist offers telephonic or video consultations and formal referrals for students.

Life Coaching

What is Life Coaching?

• Life Coaching is a service that helps participants develop personal and professional skills through one-on-one coaching sessions.



How many Life Coaching sessions are available?

• Up to 10 telephonic or video sessions are available free.

Who delivers the Life Coaching sessions?

The service is delivered by our professionally certified coaches or our network affiliates.

In what languages is Life Coaching available?

This service is globally available, in 27 local languages.

Zenn

What is Zenn?

• Zenn is a digital support service that offers emotional support and guidance through text-based conversations.

Is Zenn confidential?

• Yes, all conversations with Zenn are private and secure.

How will Zenn support me?

You can use Zenn through text anytime, anywhere, all day, every day. Psychologists approve of the support Zenn provides as it follows proven methods that really work.

How is Zenn trained?

Zenn is an AI tool that learns with the help of smart computer programs and advice from psychologists. As it provides chat support and gets feedback the words used, questions, and feelings shared makes it better at giving support.

How does Zenn know if someone is in trouble?

There are trigger words and phrases that Zenn pays attention to that suggest strong feelings like thinking about hurting oneself. If Zenn hears that, it suggests calling a crisis line for help. Zenn also checks in after suggesting the crisis line to see how things are going.



Can Zenn remember things?

Though all chat and content is kept private and secure, Zenn remembers the contact information so that the advice given is not repeated to one person.

An example of support that Zenn gives is it helps people become emotionally stronger by checking in with them. For instance, if someone feels anxious, Zenn might guide them in a deep breathing exercise.

Hospital Bill Eraser

What is a hospital bill eraser or hospital bill negotiation service?

A hospital bill eraser or hospital bill negotiation service helps patients reduce their medical bills. These services review bills for errors, negotiate with hospitals to lower charges, and assist with insurance claims. Patients typically pay a percentage of the savings as a fee. They also provide education on managing medical bills. It's important for patients to understand any associated costs before using these services.

How many hospitals provide free care?

In the U.S., around 3,000 non-profit hospitals out of about 5,700 hospitals offer free care through a program called Financial Assistance Program (FAP). Non-profit hospitals must provide charity care as required by federal law. Additionally, there are about 2,000 for-profit hospitals that also have financial assistance options, bringing the total to around 5,000 hospitals that can help.

How many people can get free or discounted care?

About 100 million people might qualify for free or discounted care at non-profit hospitals across the United States.

Do financial assistance policies cover co-pays, coinsurance, or deductibles?

It depends on the hospital's policy. Some financial assistance programs cover these costs, while others do not or are unclear about it. These programs can also help with denied claims or claims when someone does not have insurance.



Is there a minimum or maximum limit on financial assistance?

Most non-profit hospitals have a minimum amount of \$1,500 to apply for financial assistance. They typically do not cover routine check-ups or preventive care. There is no maximum limit on how much help you can get.

What is the federal poverty level (FPL) and why is it important?

The federal poverty level (FPL) is set every year by the U.S. Department of Health and Human Services. It depends on how much money a household makes and how many people live there. Many non-profit hospitals provide free care to people making below 200% of the FPL. Hospitals may give discounts to those making between 201% and 400% of the FPL, but the closer you get to 400%, the smaller the discount becomes.

What is catastrophic financial assistance coverage?

If a medical bill is more than 20% of your total household income, many hospitals consider that a serious hardship, and you might qualify for financial help. Different hospitals might have different percentages, so check their policies for details.

How long do I have to apply for financial assistance after receiving care?

You have 240 days to apply for financial assistance after you receive care.

What does the amount generally billed (AGB) mean, and why is it important?

AGB is a confusing term because it actually means the average amount that hospitals get paid for a service. For example, if a medical service costs \$10,000, the AGB might be around \$2,500. This means hospitals usually receive about 25% of what they charge. Some financial assistance programs state that if your income is between 201% and 400% of the FPL, you won't have to pay more than this average amount for care.

My hospital sent me a big bill and said I owe them money. What should I do?

Call CareGuide Advocates at 888-221-1140. They can help you handle unfair hospital billing. If you apply for financial assistance, the hospital can't send you to collections. If you haven't received a detailed bill, they still can't send you to collections. CareGuide Advocates will communicate with the hospital on your behalf, as allowed by consumer protection laws.

What if my income is too high to qualify for financial assistance? Can Hospital Bill Eraser help?

Yes! CareGuide Advocates can help you negotiate your hospital bill, even if you make a lot of money. They use special techniques and a pricing database to make sure you don't overpay. Let them work for you so you can pay less on your hospital bills.

Money Map



What is a Money Map?

Money Map is like your trusty guide for finding affordable healthcare options. Whether you need blood tests, imaging, surgery like GI scopes, or urgent care, Money Map helps you discover low-cost providers so you can get the care you need without breaking the bank.

Why was the Money Map developed?

That's a great question! Did you know that the same procedure in the same insurance network can have prices that vary by over 1,000%? For example, a CT scan can cost anywhere from \$400 to \$4,000, all in the same city. A blood test might run you \$50 or up to \$500! So, just staying in-network doesn't always mean you'll save money—this is where Money Map steps in to help you find the best price for your routine healthcare needs.

How much can I save when using Money Map?

Using a Money Map can lead to some significant savings! On average, you could save around \$150 per blood draw, \$700 for an MRI or CT scan, and even \$2,000 for certain surgeries, like a GI scope. Plus, if you choose urgent care over an ER visit, you could save around \$2,000. These numbers come from analyzing billions of dollars in claims, so they're pretty reliable!

How does a medical facility become a Money Map provider?

Our Advocates do some pretty thorough research. They dive into our pricing database and call each provider every year to find out who runs the place, handles the billing, and what billing codes they use. Since we know a lot about medical billing, we ask the right questions to make sure only the most qualified providers get listed on Money Map. If a provider isn't willing to share the info we need, they don't make the cut!

Are doctors listed on the Money Map?

Not exactly. Choosing a doctor is a personal decision, and we don't want to step in on that. Our focus is really on the pricier care, like blood work and imaging, where you can find major savings.

Is pricing for care listed on the Money Map?

Nope, you'll find that we don't list specific prices on Money Map. Our Advocates use a different tool called the Pricing Portal to find out what the best pricing options are, so they can help secure the best deals for you.

Feel free to ask more questions if you're curious—helping you navigate healthcare is what we're here for.