

EverydayCARE Member Benefit

- Care Management - Chronic & Acute Disease**
(Proactive, personalized, condition specific care management)
- 24/7/365 Telehealth Services**
(English & Spanish, Telemedicine, Diagnosis, Care Planning, & prescription support)
- Physician-to-Physician Case Management**
(Care coordination & Advocacy, Primary, Specialty EO, Hospital)
- Patient Assistance Programs**
(Pharmaceutical Programs, State Medicaid Programs, & Nanthealth Cancer Program)
- Workers Compensation Case Management**
(E-MOD Protection & Stay-at-Work Programs)

24/7/365 Care Access (in English & Spanish)

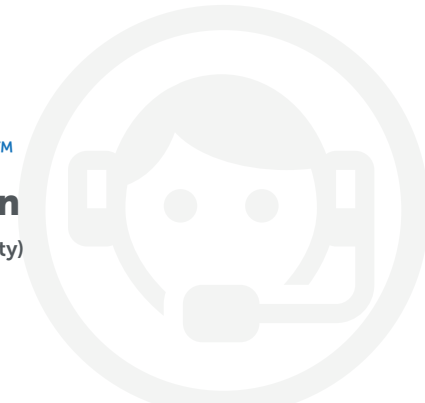


Primary Care & Injury Office Visits	\$0 Copay & No Deductible*
Labs (most routine labs) ¹	Plan pays 100%*
Preventative Adult Care ²	Plan pays 100%*
Preventative Well Child Care ²	Plan pays 100%*
Immunizations ²	Plan pays 100%*
Chiropractic Office Visits (12 visits per plan year) ³	\$0 Copay & No Deductible*

Other Care

- Diabetic Supplies
- X-ray
- MRI, PET, & CT Scans
- Specialist Consults & Care
- Hospital Care
(Inpatient Care & Outpatient Services)
- Urgent Care
- Emergency Room Service

Everyday 1to1™ Care Navigation (100% Member Responsibility)



Prescription Drug Programs
Directed through Redirect Health (or no benefit)

Preventive Medication (MEC) ⁴	\$0 Copay* (Plan Pays 100%)
Prescriptions (Generic and Brand Name)	Discount Program

Employee Only	
Employee & Spouse	
Employee & Child(ren)	
Employee & Family	

^{*}When directed by Redirect Health
¹See your agent or your employer for a copy of the plan document.
²All Minimum Essential Coverage as outlined by the Affordable Care Act. For more information, visit hrsgov.gov.
³(12) Chiropractic visits per plan per year, office visits only.
⁴See EverydayCARE MEC formulary at www.redirecthealth.com/member
 This only serves as a summary of your benefit plan. Please refer to your Summary Plan Description for actual coverage, limitation, and exclusion provisions.