































Number of
Employees
2-19

 Redirect Health®

EverydayCARE®

Group Employer Benefit Summary

Simple and Truly Affordable Healthcare

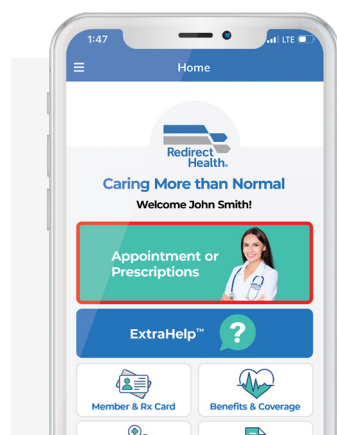
	EverydayCARE® Routine Care	EverydayCARE ¹ Hospital	EverydayCARE ¹ Hospital PLUS
Employee:	Any Age	Any Age	Any Age
Employee Only	\$176	\$486	\$603
Employee + Spouse	\$316	\$860	\$1,200
Employee + Child(ren)	\$316	\$995	\$1,241
Employee + Family	\$469	\$1,405	\$1,744
Multiplan  PHCS Practitioner Only Network (or add a doctor 48 Hours prior to visit) ²			
Routine Care			
<div> Virtual Primary Care (24/7/365)</div> <div> In-Office Primary & Urgent Care</div> <div> Pediatric Care</div> <div> Annual Adult Physical³ & Well Child³</div> <div> Chiropractic (12 free visits per year)</div> <div> X-rays</div>			
\$0 copay Virtual and In-Network Office Visit with 48 Hour Pre-Authorization			
\$20 copay ⁴ Out-of-Network Office Visit with 48 Hour Pre-Authorization			
\$50 copay ⁵ In-Network or Out-of-Network Visit without 48 Hour Pre-Authorization			
\$0 copay Labs RedirectHealth.com/labs with 48 Hour Pre-Authorization	 (Basic)	 (Standard)	 (Expanded)
\$0 copay Mental Health Tele-Counseling with 48 Hour Pre-Authorization			
Rx & Immunizations RedirectHealth.com/rxformulary Copays may vary depending on pharmacy location, quantity, and dosage with 48 Hour Pre-Authorization	 (Basic)	 (Standard)	 (Expanded)
Specialist / Advanced Imaging / Hospital			
Specialist Consults & Care \$50 member responsibility ⁵ with 48 Hour Pre-Authorization	Care Navigation Only Appointment preparation, coordination, navigation, alternative funding management, and pre-negotiations 100% Member Responsibility		
\$50 member responsibility ⁵ MRI, PET, CT scans, ultrasound, mammogram and other imaging with 48 Hour Pre-Authorization			
Hospital Care - Inpatient & Outpatient ⁶ Individual – plan year \$2,000 initial member responsibility 20% co-share \$4,000 out-of-pocket max ⁴ Family – plan year \$4,000 initial member responsibility 20% co-share \$6,000 out-of-pocket max ⁴ Emergency Room \$500 + 20% member responsibility		 (Non-Embedded Member Responsibility)	 (Non-Embedded Member Responsibility)
Excluded Services ⁷ Pre-existing conditions, organ transplants, dialysis, skilled nursing, advanced psychiatric care, and specialty and non-formulary medications	Care Navigation Only Appointment preparation, coordination, navigation, alternative funding management, and pre-negotiations 100% Member Responsibility		Additional chemotherapy \$30,000 sharing limit ⁸ Dialysis \$10,000 sharing limit ⁸ Skilled nursing \$5,000 sharing limit ⁸ Air ambulance \$5,000 sharing limit ⁸ Pre-existing exclusions apply 12 month look back
Guidelines			
ACA Compliance Satisfies Penalty A (MEC)			
Minimum Employer Contribution	100% of Primary Member Only	50% of Primary Member Only	
Minimum Employee Participation	50% of Full-Time Employees		

1 The EverydayCARE program is an Employer self-funded insurance plan managed by Redirect Health exclusively for members of the Modern Business Council. The captive risk pool is managed by Newpath Mutual Insurance Company (see Summary Plan Document for details). The Medical Cost Share risk pool is managed by Newpath Medical Inc., a Wyoming Health Sharing Ministry organized pursuant to Wyo. Stat. Ann. §26-1-104 (see Membership Guidelines for details). 2 Any doctor who accepts the Redirect Health Usual, Customary & Reasonable (UCR) Agreement can be in-network. 3 Routine physical/exam; gynecological exam; mammogram; pap smear; prostate testing (PSA); other routine lab and immunizations. 4 Eligible benefits subject to initial employee responsibility counts toward max out-of-pocket. Excludes prescription drug benefits, pre-existing conditions, and subject to program sub-limits. 5 Maximum allowable is 140% of Medicare allowable. 6 Pre-authorization REQUIRED for ALL NON-EMERGENCY Care. 7 See Membership Guidelines and Summary Plan Document (SPD). 8 Maximum sharing after initial member responsibility.

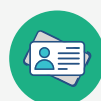
We Put People First!

Care Navigation Works for Everyone.

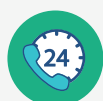
Finally! Healthcare on your terms – access care anytime, from anywhere, 24/7/365.



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

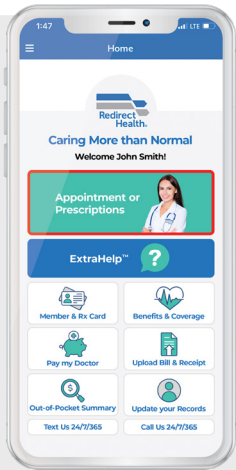
Follow-Up that Matters

- ✓ 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



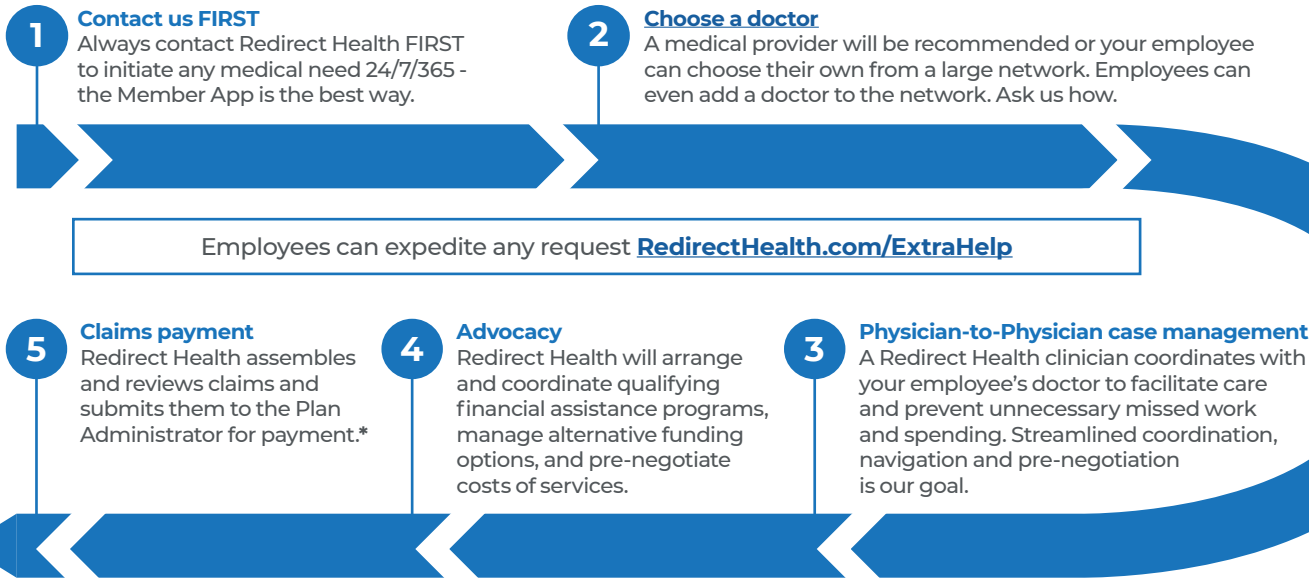
How the Plan Works

Protect your company and your employees from high-dollar medical expenses



- 1 Plan Compliance**
Your company plan is set up to comply with ERISA and the Affordable Care Act (Penalty A). We also coordinate required 5500, PCORI & 1094/1095.
- 2 Plan Management**
Redirect Health manages the program with the extra care your employees need - Appointment Preparation, concierge access, coordination, navigation and pre-negotiation.
- 3 Predictive Healthcare**
Even before your plan's effective date Redirect Health starts learning about your employees' healthcare needs and the obstacles that may get in their way. Proactive, predictive and smart healthcare.

How You and Your Employees Access Healthcare



How Pre-Existing Conditions are Shared (EverydayCARE® Hospital & Hospital PLUS Only)

A condition is considered pre-existing for an employee 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 an employee's effective date will be shared after paying a \$2,000 initial responsibility then 20% with a maximum out-of-pocket of \$4,000^A 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.
^ASubject to program sub-limits. Prescription drug benefits are not included in out-of-pocket max calculation.



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