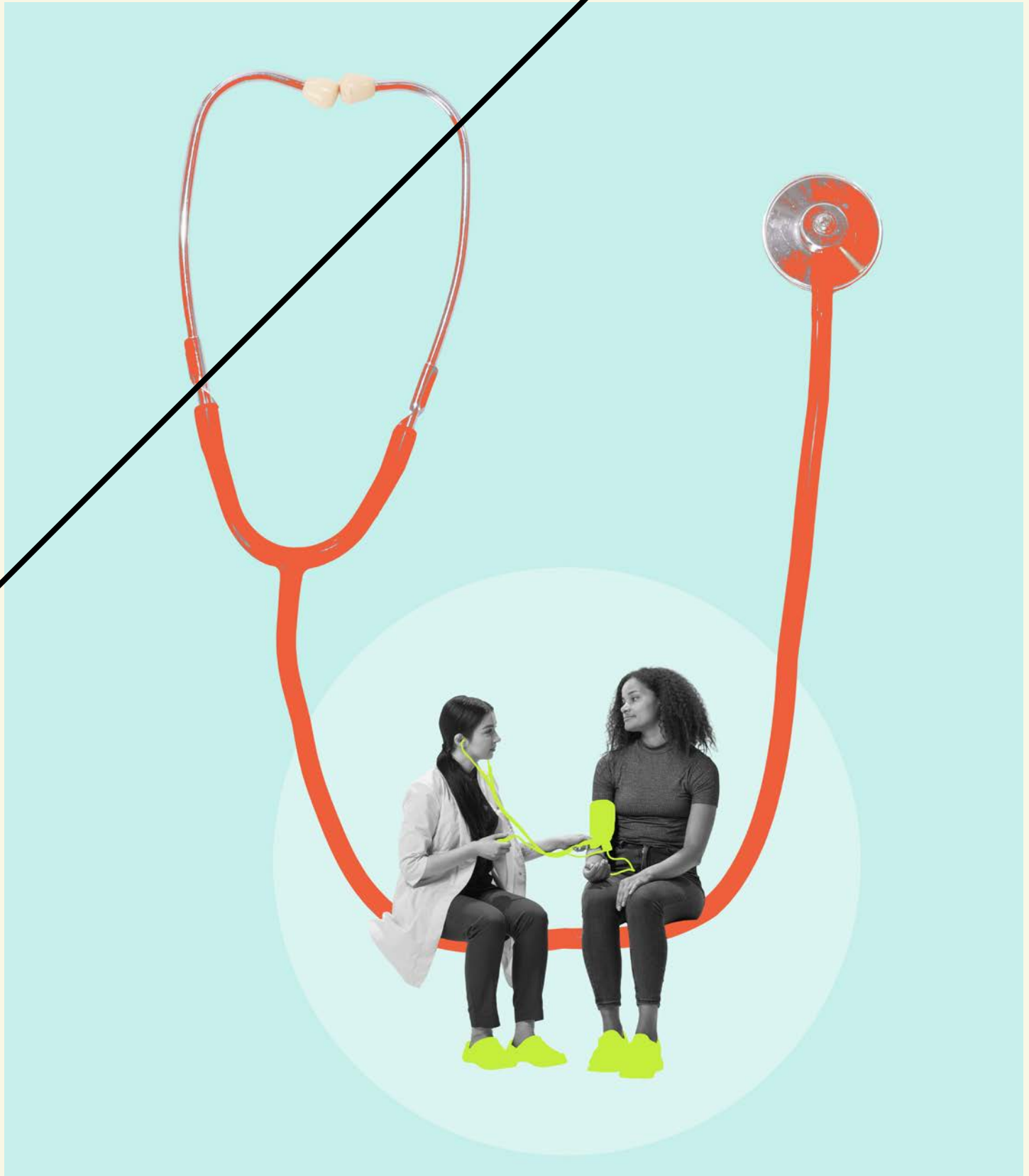


HEALTHCARE2U

DIRECT PRIMARY CARE

HC2U DPC **Prime**
Sample Guide v0525



Revolutionizing **Hassle-Free Healthcare** Access for All!

WHERE AFFORDABLE CARE MEETS CONVENIENCE!

Welcome to the HC2U Direct Primary Care Prime Membership



Welcome to the new era of healthcare with Healthcare2U's Direct Primary Care (DPC) Prime Tier - (previously named the Advantage Tier) - a Healthcare2U (HC2U) Coast-to-Coast Healthcare Membership™. Healthcare2U is a non-insurance healthcare alternative that eliminates claims while providing convenient and affordable access to direct primary care. By breaking down barriers to quality primary care, Healthcare2U allows you to focus on healthy living without the financial burden.

What is DPC Prime?

DPC Prime is a groundbreaking healthcare membership that offers an alternative payment model with a flat, affordable membership fee. This membership grants members unlimited access to primary, chronic, and urgent care services across the U.S., through our nationwide Private Physician Network (PPN)™.

PATIENT ADVOCACY LINE - PAL



Our certified medical professionals are ready to guide you through the healthcare system, helping you find the most affordable and convenient care options, and scheduling your appointments with ease.

UNLIMITED ACCESS TO IN-OFFICE VISITS



Enjoy unlimited in-office visits with board certified physicians for primary, acute, chronic, or preventive care. When you need care beyond a physician's office, our Patient Advocates will arrange appointments with our urgent care partners.

UNLIMITED ACCESS TO VIRTUAL VISITS



Access bilingual board-certified physicians 24/7/365 online or by phone for acute concerns, prescription refills, and more all from the convenience from your home, work or traveling.

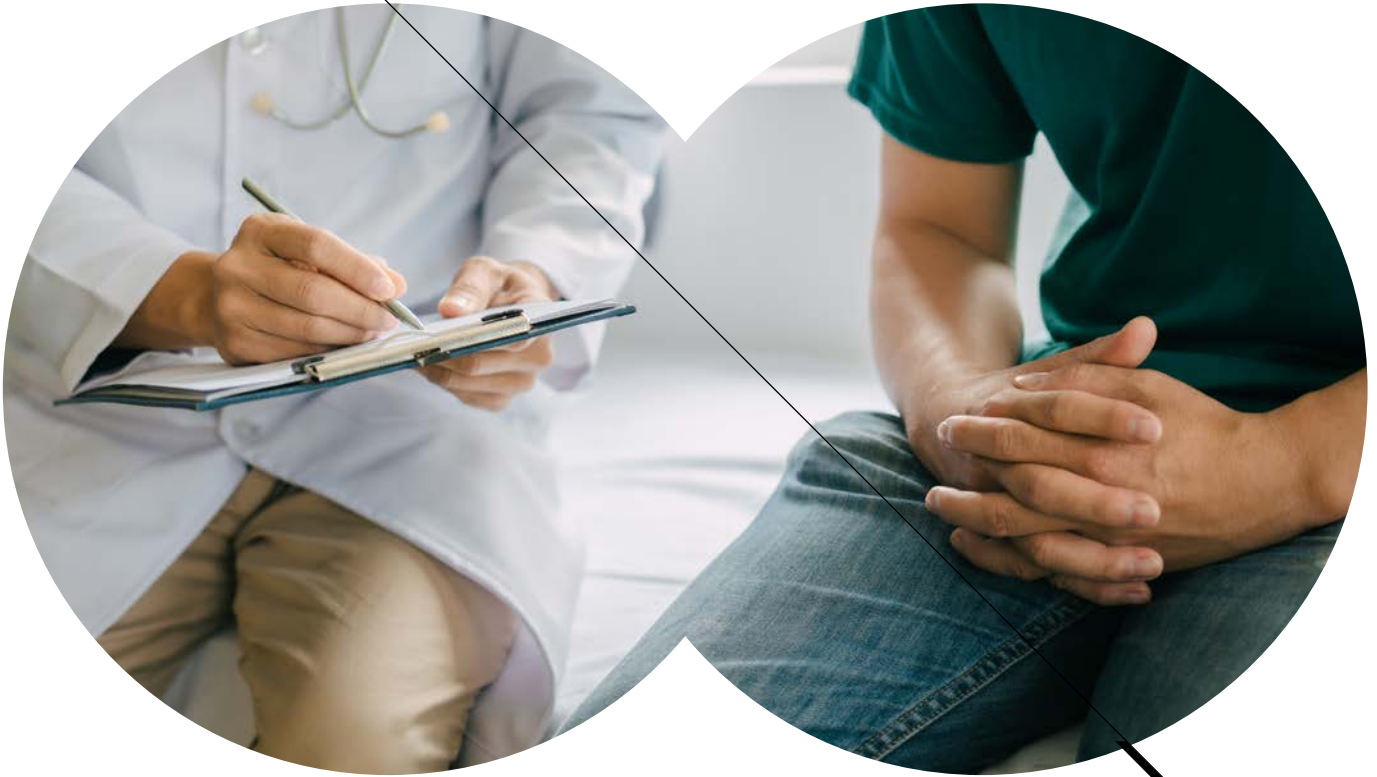
All details of services and access fees are listed on page 3. No walk-ins allowed. Unlimited services (including Virtual DPC / telehealth) must be accessed through Healthcare2U's Patient Advocacy Line (PAL)™ and all care is provided through Healthcare2U's Private Physician Network (PPN)™. In-office appointments are only available within business hours (Monday through Friday, 7 am to 6 pm CST). PAL may direct the member to another level of care if appropriate, depending on the member's condition and utilization of services. Applicable visit fees apply. After hours? Members have the option to speak to a physician virtually. Telehealth programs are provided through third-party organizations and are not connected to Healthcare2U. Well-woman pap smear pathology interpretation is not included in the annual physical. Dependent on membership type, the annual physical may only be accessible after six consecutive months of membership. Healthcare2U's membership does not include inpatient or outpatient hospital services or critical illness. **This is not insurance.*

DIRECT PRIMARY CARE SERVICES

Healthcare2U's Direct Primary Care (DPC) is a healthcare membership. DPC is not insurance and does not satisfy ACA minimum essential coverage. Individuals ages 2 to 65 are eligible for Healthcare2U's DPC membership

Description of Service	Service Details for Direct Primary Care Prime
In-Office Doctor Visits	Unlimited Access to In-Office Doctor Visits - \$0 Access Fee per visit. (No walk-in visits allowed. All visits must be accessed through HC2U's PAL line and only available within business hours (Mon-Fri 7am-6pm CST.)
In-Office Urgent Care Visits	Unlimited Access to In-Office Urgent Care Visits - \$0 Access Fee per visit. (No walk-in visits allowed. All visits must be accessed through HC2U's PAL line and only available within business hours (Mon-Fri 7am-6pm CST.)
Virtual Primary Care Visits	Unlimited Access to Virtual Primary Care Visits - \$0 Access Fee per visit. Virtual Primary Care visits must be accessed through HC2U's PAL line (Telehealth programs are provided through third-party organizations and are not connected to Healthcare2U.)
Annual Physical & Labs	Membership includes an annual physical exam ¹ and four essential labs - \$0 Access Fee. Waiting Period of 6 months from effective date for this service. Four Labs include: Complete Metabolic Panel (CMP), Complete Blood Count (CBC), Thyroid Stimulating Hormone (TSH), and Lipid Panel. ¹ Well-woman pap smear pathology interpretation is not included in the annual physical. Dependent on membership type, the annual physical may only be accessible after six consecutive months of membership.
Unlimited Chronic Care	Manage 13 prevalent chronic conditions with unlimited care - \$0 Access Fee per visit. Includes: Asthma, Anxiety, Arthritis, Blood Pressure, CHF, COPD, Depression, Diabetes, Fibromyagia, Gerd, Gout, Hypertension, & Thyroid. (Healthcare2U accepts preexisting conditions within manageable ranges. Healthcare2U's membership does not include inpatient or outpatient hospital services or critical illness. Healthcare2U does not provide specialty care outside of our partner-physician clinics. If Member currently sees a specialist for an advanced disease state, we do not recommend leaving that specialist.)
Eligibility & Other Information	Details
Available Nationwide	Access care from anywhere in the United States.
Member Eligibility	Members 2-64 are eligible. (Dependents under the age of 2 are not eligible to enroll for Healthcare2U. Dependent children are eligible for membership until the last day of their 25th year. Individuals are eligible for membership until the last day of their 64th year.)
Access Fees	The Healthcare2U member is responsible for the visit fees associated with their care at time of service.
Additional Ineligibility Criteria	Healthcare2U is not available to any member on Medicare, Medicaid or Tricare.

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A NEW APPROACH TO DOCTOR VISITS TRADITIONAL VS NON-INSURANCE MODELS

Healthcare is undergoing a significant transformation as new models emerge to address the limitations of traditional insurance. Among these innovations is a non-insurance healthcare model that simplifies access to in-office doctor visits, in-office urgent care visits, and virtual doctor consultations. This model eliminates the need for insurance claims, providing a seamless experience for members who access services through an access fee and a central phone number that connects them to a nationwide private physician network. Let's explore how this new approach compares to traditional insurance models.

Traditional Insurance Models

IN-OFFICE DOCTOR VISITS

In traditional insurance models, patients often face co-pays and must meet deductibles before insurance covers the majority of their medical expenses. The network restrictions can limit a patient's choice of doctors, potentially affecting the quality and convenience of care. The complexity of claims and paperwork can also be burdensome, adding stress to the healthcare process.

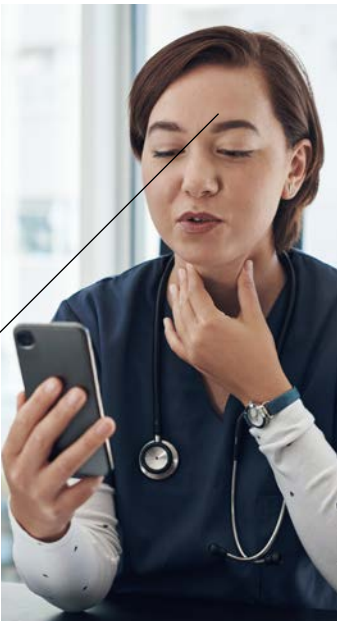
IN-OFFICE URGENT CARE VISITS

Urgent care visits under traditional insurance are generally more affordable than emergency room visits, thanks to lower co-pays. However, out-of-pocket costs can add up quickly, especially if the patient hasn't met their deductible. Network limitations can also apply, which may restrict access to preferred urgent care facilities.

VIRTUAL DOCTOR CONSULTATIONS

While many traditional insurance plans have started covering telehealth services, co-pays and network restrictions still apply. The convenience of virtual consultations is often hampered by these additional costs and limitations.

Non-Insurance Healthcare Models: A New Approach



IN-OFFICE DOCTOR VISITS

The non-insurance model introduces a streamlined process where members pay an access fee to receive healthcare services at an in-office doctor visit. By eliminating insurance claims and paperwork, patients enjoy direct and immediate access to a network of private physicians. This model facilitates more personalized and flexible care through a single central triage number that also schedules appointments, freeing patients from concerns about network restrictions.




IN-OFFICE URGENT CARE VISITS

For urgent care, this new approach offers a straightforward and predictable cost structure. Members can access in-office urgent care services through a central phone number, which triages their situation and connects them to the appropriate facility. The elimination of claims and the simplification of the billing process make urgent care visits more accessible and less stressful.

VIRTUAL DOCTOR CONSULTATIONS

Virtual consultations are seamlessly integrated into this non-insurance model, providing unlimited access to telehealth services without additional fees. Members can quickly and easily connect with healthcare providers, encouraging proactive management of health issues. The convenience and accessibility of virtual consultations make them an attractive option for routine care and follow-up visits.

Comparing the Models

 COST PREDICTABILITY	The non-insurance model offers transparent pricing with an access fee, eliminating unexpected expenses related to deductibles and co-pays found in traditional insurance.
 FLEXIBILITY	With a central phone number facilitating appointments, the non-insurance model delivers greater flexibility in accessing healthcare services, from in-office visits to virtual consultations.
 SIMPLICITY	By removing the need for claims and paperwork, the non-insurance model simplifies healthcare access, reducing stress and administrative burdens for patients.

In conclusion, the non-insurance healthcare approach offers an innovative alternative to traditional insurance models. With its emphasis on simplicity, flexibility, and cost transparency, this model empowers individuals to take control of their healthcare journey. As the industry continues to evolve, understanding these options will help individuals make informed decisions about their healthcare needs.

While this article explores an innovative non-insurance healthcare model that simplifies access to in-office doctor visits, in-office urgent care visits, and virtual doctor consultations, it is important to clarify that we strongly recommend all individuals maintain traditional health insurance coverage. This new approach is designed to complement, not replace, conventional insurance plans. It addresses specific healthcare needs by offering streamlined services with a focus on cost predictability and flexibility. However, traditional insurance remains essential for comprehensive coverage, including hospitalizations, specialist care, and other extensive medical needs. Always consult with a healthcare professional or insurance advisor to understand the best options for your personal health requirements. See page 7 for all disclosures and HC2U disclosures related to this program.



HOW TO ENROLL IN HEALTHCARE2U DPC PRIME

Embarking on your hassle-free healthcare journey with Healthcare2U Direct Primary Care Prime is a straightforward process designed to provide you with personalized and accessible healthcare solutions. By choosing to enroll, you are opting for a seamless healthcare experience that prioritizes your well-being, eliminates the complexities of traditional insurance, and grants you direct access to a network of dedicated healthcare professionals. This journey not only ensures peace of mind but also empowers you to take charge of your health with confidence and ease. Let's get started!

COMPLETE SIMPLE ENROLLMENT ONLINE

Complete the simple enrollment yourself at:

<https://enroll.benboost.com>

IMPORTANT PHONE #s

Questions on Plan

Call this number: **866-438-4274**

Enroll with Agent Assistance

Call this number: **866-438-4274**

Enrollment is straightforward. Fill out the enrollment application, provide your payment details, and you'll receive a verification email. After reviewing, accepting, and e-signing the application, your enrollment is complete! It's as easy as that.

Important Notice: While agents can help you with the initial steps of enrollment, you are required to complete the verification and e-signature on your own. Make sure to use a good email address as this is how you receive your email verification link and all fulfillment materials.

Important Disclosures

Benefit Boost Subscription Notice:

Please read this guide carefully. This is not insurance. This is a brief description of a concierge & patient advocacy, In-Office Primary Care, 24/7 Virtual Primary Care and Chronic disease management service provided by Healthcare2U and is not an insurance contract. This is not a qualified health plan under the Affordable Care Act (ACA). Some services may be covered by a qualified health plan under the ACA. This plan does not meet the minimum creditable coverage requirements under M.G.L.c. 111M and 956 CMR 5.00. Furthermore, this is not a Medicare prescription drug plan. Not all services are available in all states.

Pricing and Subscription Details:

Any quoted prices or information regarding the Benefit Boost Subscription membership dues are non-binding and may change with a thirty (30) day notice. Notifications can be sent via mail to your most recent mailing address or through email to your last registered email address. It is your responsibility to monitor the transactions on your account each month and to cancel with the Third Party billing Administrator (TPA) when you wish. Each month, we cover the cost of the membership services on your behalf, regardless of whether you utilize them. For details on refunds, please refer to our Refund Policy. The TPA for Benefit Boost holds SOC 1, SOC 2, and PCI-DSS certifications. Please note that on your bank or credit card statements, the billing descriptor will appear as UBAGAP8664384274, where the number 8664384274 corresponds to our phone number.

Refund & Cancellation Policy:

We offer a refund policy on all Benefit Boost Subscription programs. If you are not satisfied, you may cancel, and a refund will be issued if the cancellation occurs within the first thirty (30) days. We want you to be 100% satisfied with your Benefit Boost benefits and services.

To Cancel:

Contact the TPA:

HealthyAmerica / H A Partners, Inc.
409 W Vickery Blvd, Ft Worth TX 76104
1-866-438-4274

Cancellation Methods:

Email: info@benefitboost.com
Phone: 1-866-438-4274 (M-Thurs 8 am-5 pm or Fri 8 am-1:30 pm CST)
Online Form: <https://benefitboost.com/billing.html>
Member Portal: <https://members.benboost.com>
Fax: 1-817-335-1270

Please do not cancel through your agent. Canceling directly with the TPA will ensure that your cancellation is processed correctly. Once a cancellation request is made, our team will send a confirmation cancellation notice by email. While we believe that you will be pleased with your overall membership product, we cannot warrant or guarantee the performance of any service. Services and product costs are subject to change. For billing, customer service, fulfillment, or membership questions, contact 866-438-4274.

Important Disclaimer Regarding Third-Party Liability Waiver:

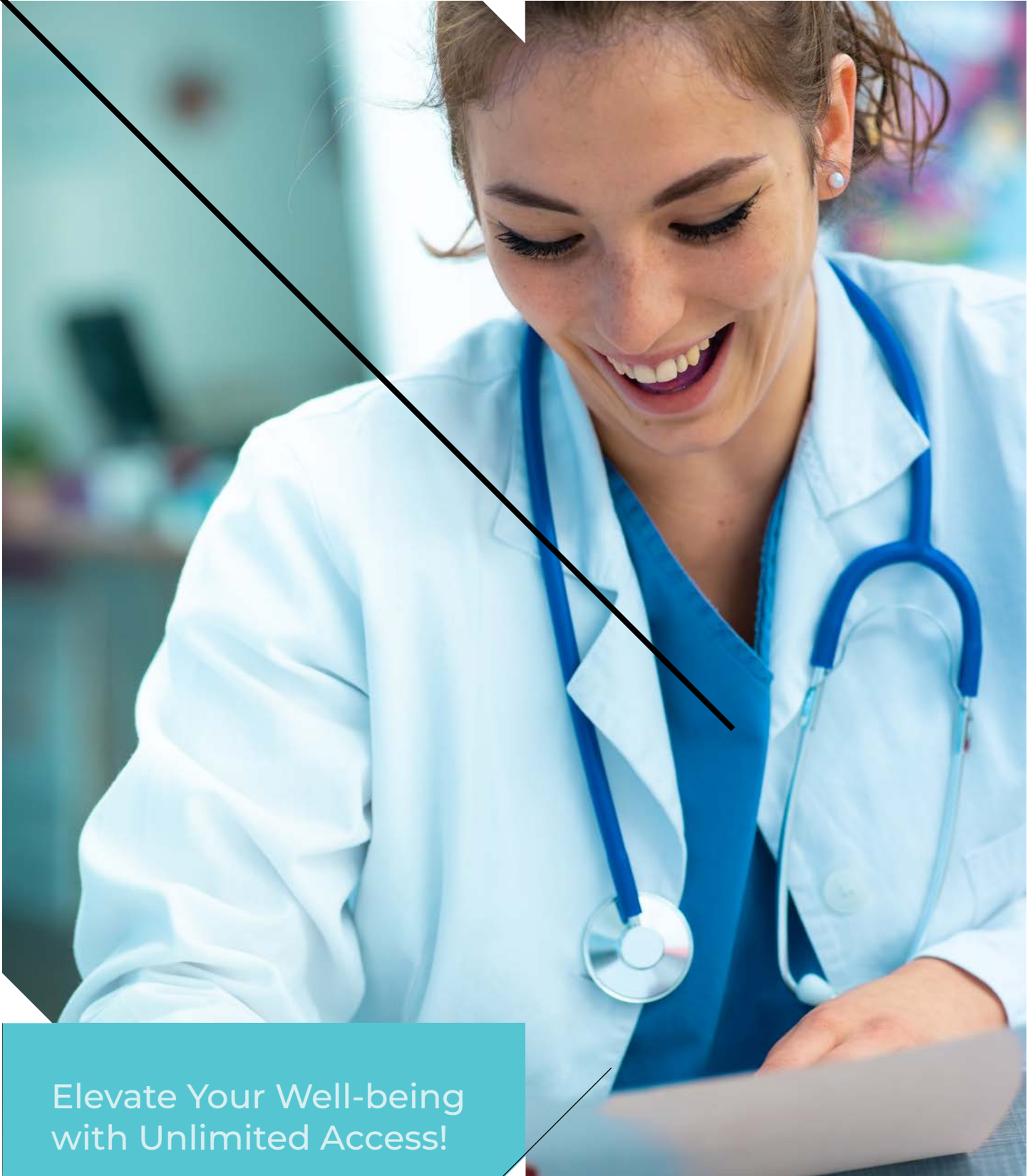
Healthy America Insurance Agency, Inc. (HealthyAmerica) and H A Partners, Inc. (HAPI)

Healthy America and H A Partners, Inc. disclaim any liability related to services provided through Healthcare2U, including the decisions made by medical professionals regarding medication prescriptions and referrals to other non-covered in-person consultations. Healthcare2U offers a comprehensive range of services, including access to in-office doctor visits, in-office urgent care visits, and virtual doctor consultations. However, the nature of these services may not be suitable for all medical conditions. Users must acknowledge that some conditions might require further in-person evaluation and treatment outside of the scope of this membership program, and that the services offered are intended to support, not replace, the patient-physician relationship. These services are designed to complement, not substitute, conventional insurance plans and should not be used as a replacement for emergency medical treatment. By utilizing Healthcare2U services, users agree to release Healthy America and H A Partners, Inc. from any claims or liabilities arising from these services. For further inquiries, users are encouraged to contact the support team.

Healthcare2U Disclosure:

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Elevate Your Well-being
with Unlimited Access!

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