

PLAN COVERAGE	MEMBER COST
Individual Family Annual Deductible	\$0 \$0
Individual Family Annual Out-of-Pocket Maximum	\$5,000 \$10,000
Three Waves Clinic Preventive Care Premise Health App	\$0
Office Visits: Primary Pediatric Specialty Urgent	\$100 \$25 \$150 \$100 Copay
Emergency Room (copay waived if admitted)	\$250 Copay
Inpatient or Outpatient Hospital & Facility Services	\$1,000 Copay
Pharmacy Tiers: Generic Preferred Brand Non-Preferred Brand Specialty	\$5 \$40 \$80 \$250 Copays

*Collaborative Care can waive non-emergent, specialty care Copays or benefit limitations. See Collaborative Care FAQ's and Summary Plan Description for full details.

EMPLOYEE CONTRIBUTIONS PER MONTH (pre-tax)

Employee Only: \$50 Family: \$100

Please review the full summary plan documents for a list of your exclusions and limitations. This plan highlight is a summary provided to help you understand your insurance coverage. Details may differ from state to state. Please refer to your certificate booklet for your complete plan description. If the terms of this plan highlight summary or your certificate differ from your policy, the policy will govern.

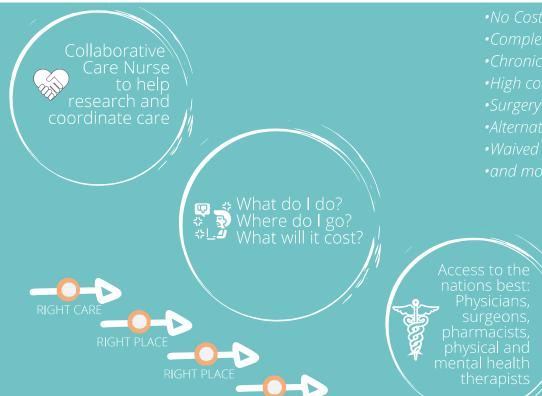
YOUR HEALTH PLAN INCLUDES



Healthcare can be frustrating and difficult to navigate. When you have new, ongoing or complex symptoms and need guidance, we're here to help you avoid misdiagnosis, unnecessary treatment and paying too much.

We are a nurse concierge team with access to 4,000+ specialists, physicians and pharmacists across the nation, here to help you get to the right care.

When we research your options and help you coordinate your care, we can possibly even waive your copays.



CALL THE NUMBER ON THE FRONT OF YOUR ID CARD (833-993-9163) FOR MORE!



Frequently Asked Questions



Who are my Plan Advocates?

Your health plan comes with a team of dedicated benefit experts – called Advocates – who know your benefit plan and can help guide you to answers, about coverage and claims, or resources for care, including your Collaborative Care team.

What is my Collaborative Care team?

Your plan gives you access to this team of benefit and clinical experts who will work together to help you assess and plan your care along with your existing providers.

How do I access the Collaborative Care team?

Simply call the Member Services number on your ID card or in your app; 833-993-9163.

Does Collaborative Care replace my Primary Care Physician or Specialist(s)?

Your PCP or Specialists play a key role in your care. The Collaborative Care team is here to support existing relationships and ensure you're getting the most from those relationships. If you're not, or you need a referral, the team will assist in coordinating.

Does this cost me anything?

Medical opinions, care coordination and research and condition management over and above existing treatments are no cost to you and can waive or reduce your out of pocket expenses on the right care.. Should you choose to continue planned care or treatment, your benefits remain the same.

Do I have to follow the advice of the Collaborative Care team?

Your Collaborative Care Nurse will provide you with options. You can choose how you want to proceed. These options will always have the intent of providing you with high quality, affordable care.

What can my Collaborative Care team help me with?

- Non-urgent care (if you need a care issue resolved within 24 hours, we cannot support; utilize your Premise Health app or clinic.)
- Planning for routine lab work, prescriptions and condition management
- Surgical second opinions through independent, boardcertified specialists
- Alternative non-surgical therapy options
- And more...

Will my Collaborative Care Nurse ever proactively contact me?

Yes, they may. Our clinical team works proactively to identify opportunities for better access to care or benefits based on specific conditions. In the event you are contacted, you can be certain it will be to provide assistance.

What information is shared with my employer?

Your Health Plan and the Collaborative Care team follow all HIPAA guidelines and take the utmost care in securing data and information. Individual health record information is available to the Collaborative Care team in conjunction with their efforts to assist you in coordinating your care needs and accessing the best benefits.

When should I NOT contact Collaborative Care?

You shouldn't contact Collaborative Care for basic stuff like new ID cards, provider lists, etc. If you are experiencing a medical emergency, always dial 911 and go to the nearest Emergency Room. For non-emergent, but urgent matters, utilize your Premise Health app.

Call the number on the front of your card (833-993-9163) or access through your member portal to connect with Collaborative Care.





PLAN COVERAGE	MEMBER COST
Preventative Care: (Adult & child wellness exams, immunizations, age based screenings)	\$0
Premise Health App: Urgent Care	\$0
Primary Care Pediatrician	\$100 \$25 Copay
Chiropractic	\$100 Copay
Urgent Care	\$100 Copay
Specialist Care*	\$150 Copay

Out of Pocket Maximum includes Medical & Pharmacy: \$5,000 per Individual (2x per Family)

*Collaborative Care can waive non-emergent, specialty care Copays or benefit limitations.

See Collaborative Care FAQ's and Summary Plan Description for full details.



PLAN COVERAGE	MEMBER COST
Emergency Room	\$250 Copay
Ambulance (Air or Ground)	\$250 Copay
Durable Medical Equipment*	\$250 Copay
Labor and Delivery	\$1,000 Copay
Inpatient Residential Treatment	\$1,000 Copay
Inpatient Room & Board*	\$1,000 Copay
Advanced Diagnostics*	\$1,000 Copay
Outpatient Surgery*	\$1,000 Copay
Skilled Nursing*	\$1,000 Copay

Out of Pocket Maximum includes Medical & Pharmacy: \$5,000 per Individual (2x per Family)

*Collaborative Care can waive non-emergent, specialty care Copays or benefit limitations. See Collaborative Care FAQ's and Summary Plan Description for full details.

Please review the full summary plan documents for a list of your exclusions and limitations. This plan highlight is a summary provided to help you understand your insurance coverage. Details may differ from state to state. Please refer to your certificate booklet for your complete plan description. If the terms of this plan highlight summary or your certificate differ from your policy, the policy will govern.



TYPE OR TIER	MEMBER COST
Tier 0 - Preventive	\$0 Copay
Tier 1 - Generic	\$5 Copay
Tier 2 - Formulary Preferred	\$40 Copay
Tier 3 - Formulary Non-Preferred*	\$80 Copay
Tier 4 - Specialty*	Please Call Rescrybe 1-866-401-1883

*Collaborative Care can waive Copays or benefit limitations. See Collaborative Care FAQ's and Summary Plan Description for full details.

Out of Pocket Maximum includes Medical & Pharmacy: \$5,000 per Individual (2x per Family)

Your new formulary can be found at <u>ventegra.com</u>. Select "Drug List & Formularies" at the bottom of the page, then download the Premium formulary.

Lower cost options for certain brand/specialty are available by reaching out to Collaborative Care. Specialty drugs and certain other drugs require pre-authorization, which may also be automatically initiated when the pharmacy attempts to fill the drug for the first time.

All out-of-pocket costs track to your out of pocket maximum.



Copays shown are for a 30-day supply. Mail order available through Costco Mail Order Pharmacy at 2x the retail copay for a 90 day supply.



PRESCRIPTIONS FOR HOME DELIVERY

Costco Mail Order Pharmacy Ordering Instructions



Online Ordering

Costco Mail Order Pharmacy provides an Online Ordering service. If you choose to utilize Online Ordering, it is helpful to be familiar with basic online purchasing processes and have frequent access to your email account. Most communication between you and Costco Mail Order Pharmacy will be through email. When using this service, all orders for new prescriptions must be initiated online at **pharmacy.costco.com**.

How do I set up an account online?

Visit **pharmacy.costco.com.** Click "Sign In/Register." Select Create account, and enter your email address and a password. Please note: Each patient (self, spouse, dependent(s), etc.), independent of whether or not they are covered by the plan, must have his or her own unique email address to create an online account. Enter all required information to set up your online patient account including information regarding drug allergies, medical conditions, brand/generic preferences, etc.

How do I order a new prescription using the Online Ordering service?

If you need to start your medication immediately or do not have enough to last you at least two weeks, request two prescriptions from your prescriber: One for an initial short-term supply of your maintenance medication that your local retail pharmacy can II immediately, and a second for a 90-day supply, including re IIs that can be submitted to Costco Mail Order Pharmacy.

- Visit **pharmacy.costco.com**. Click the "New Prescriptions" link and follow the steps below:
- 1. Log in.
- 2. Provide prescription information, including physician name, drug name and shipping method.
- 3. Confirm your order and mail the prescription to the address provided.
- · Costco Pharmacy will begin processing your order

once this request and the original prescription is received at our facility.

• Costco Mail Order Pharmacy does not hold prescriptions. Please send only prescriptions to be ordered immediately. Once an order has been processed, it cannot be stopped. We cannot accept returns.

How do I order a refill using the Online Ordering service?

• **Phone:** Call 1-800-607-6861. Costco's 24-hour automated telephone system guides you through the refill ordering process. Be sure to have your prescription number available.

OR

• Online: Visit pharmacy.costco.com. Click the "Re II Prescriptions" link.

What form of payment may I use for Traditional Mail Order service?

For your convenience and to make quick and secure payments, Costco accepts Visa®, MasterCard, Discover and Costco Credit Cards.



Frequently Asked Questions

When do I need to place my order?

It is Costco's goal to have your order in your hands 14 days after Costco receives it at the processing facility. Allow a few extra days when placing an order for the rst time and remember to calculate the amount of time it may take for your prescription(s) request to reach the facility. Once Costco receives your order it will leave the facility within one to four days. Costco offers free standard shipping. Expedited shipping options are

available for an additional fee. If you do not receive your order in 14 days, contact Costco Mail Order Pharmacy at the toll-free number provided.

How can I ensure my order will not be delayed?

Please ensure you are providing Costco with a valid shipping address and valid payment information. Ensure your name, address and phone number are written legibly on all submitted documents including the original prescription(s). Your physician must provide complete directions for use. Costco cannot dispense an order without valid instructions; "use as directed" will not be accepted. Ensure your prescription is written for the maximum days supplied allowed by your plan (usually 90 days) and contains additional refills.

How will I know the cost of my prescription order?

It is your responsibility to know the co-pay(s) for your prescription order. For additional information, please contact your benefits provider.

When I receive my order, what will be included in the package?

Each package will include your prescription medication, prescription label and a drug monograph. All prescription bottles will be sealed with child-safety caps to prevent them from opening during shipment. If you select easy-open caps, they will be included in the package for you to switch once your package has safely arrived.



Costco Mail Order Pharmacy Customer Service 1-800-607-6861 phone 1-800-633-0334 fax

Monday through Friday: 5 a.m. to 7 p.m. (PST) Saturday: 9:30 a.m. to 2 p.m. (PST)

Visit us online at: **pharmacy.costco.com**