

When you get picky about your health plan, good things happen

High-quality healthcare without the high price tag! How does Centivo do it? Centivo's plan is built around a network of high-quality, cost-efficient healthcare providers – and the savings are passed on to you!

Annual cost savings

\$1200

On average, Centivo members spend \$409 each year, compared to an industry average of \$1650 for traditional health plans.

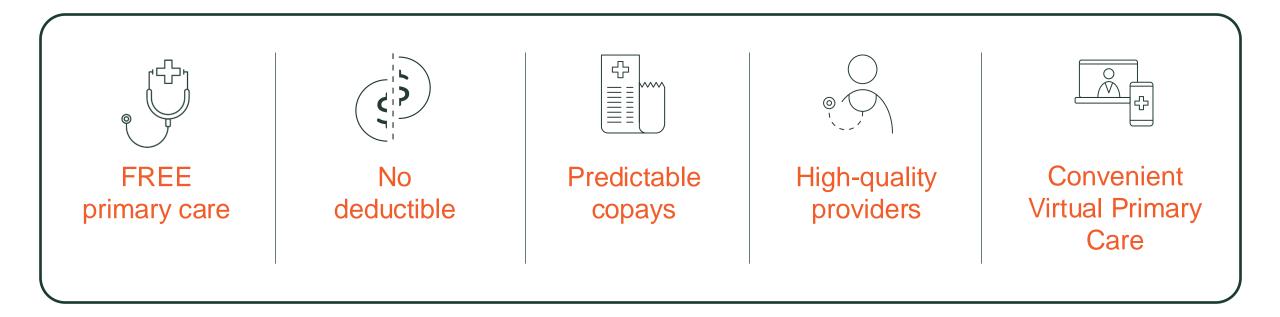
High provider satisfaction

90%

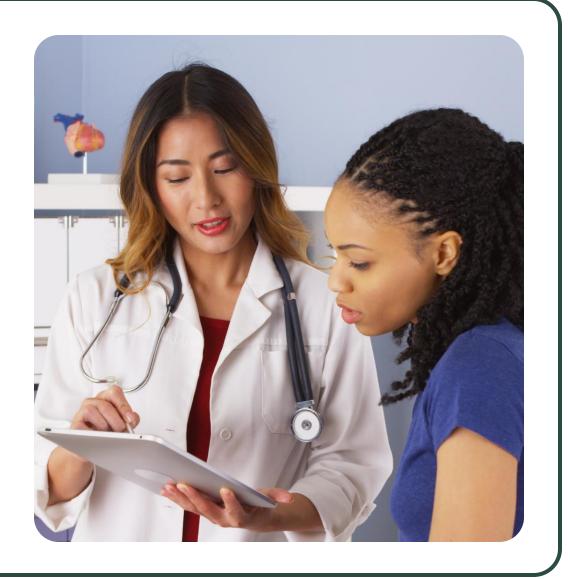
90% of Centivo members are satisfied with the healthcare providers and/or services they receive.

Protecting your health. And your wallet.

Low, predictable costs and high-quality care



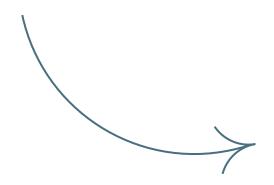
Plan overview

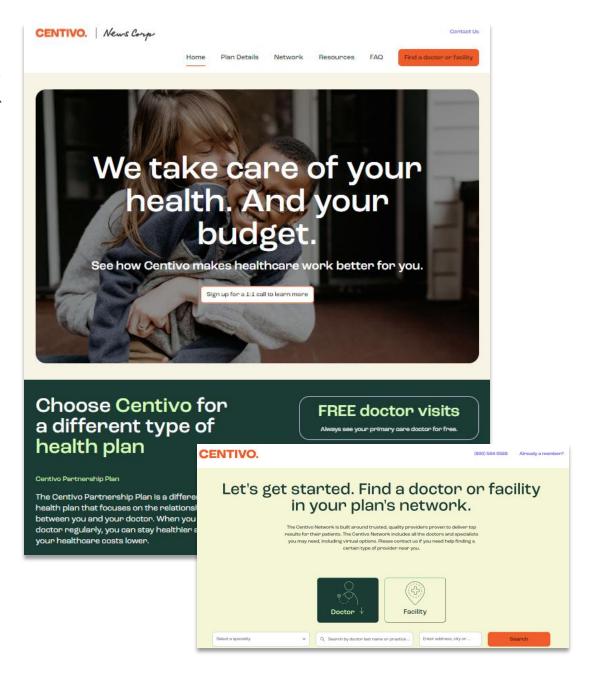


Trusted, quality network

The Centivo Network includes quality providers from local, trusted health systems.

Search for in-network providers by type, location, gender and more at **newscorp.centivo.com**







CENTIVO NETWORK





Northeast Market

SELECT HEALTH SYSTEM PARTNERS INCLUDE:





















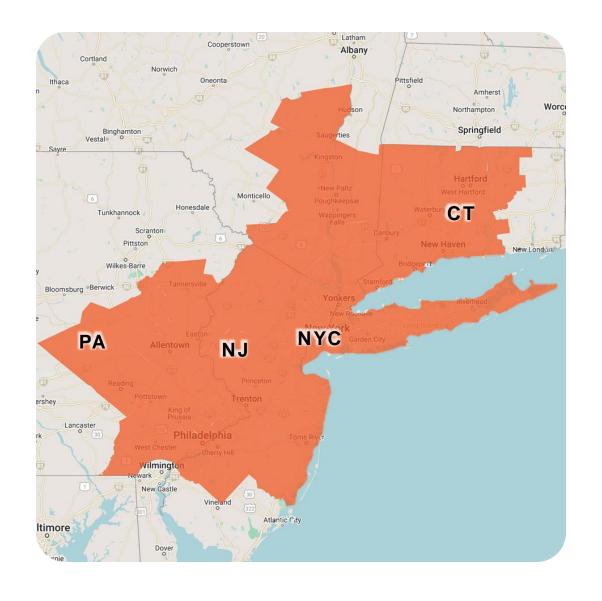














How the plan works

Select a primary care doctor for everyone covered on your plan – this is called "activating"

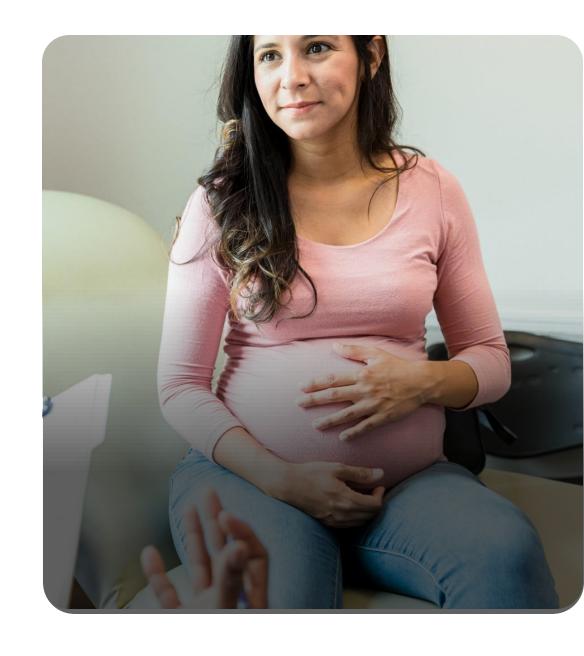
Choose from the primary care providers in the Centivo Network, including:

- Pediatricians for children
- Centivo Virtual Primary Care for members 18+
- See your primary care doctor first for any care needs

They will guide your care, and refer you to specialists when needed

Stay in-network for the most cost savings

Out-of-network care is only available for urgent, emergent, and MH office visits, or with authorization from Centivo through transition of care



QUESTION

What if I need specialist care?

- Speak to your primary care doctor first. They'll submit a referral to an in-network specialist, and you'll see that in the Centivo app
- Your referral will be good for one year
- If you don't get a referral, you'll have to pay the copay amount plus a penalty charge
 of the same amount.

Referrals are NOT needed for these specialties:

- · Urgent or emergency care
- OB/GYN care
- · Mental healthcare
- Physical, occupational and speech therapy
- Chiropractic care
- Acupuncture



Virtual behavioral health providers included in the network



 Virtual psychiatry, behavioral and mental health talk therapy, and medication management services.



Behavioral and mental health talk therapy



 Service to help you find the best therapist for your specific needs.



 Psychiatry and medication management services for adults and children.



Virtual and national providers included in the network



Physical and occupational therapy rehabilitation.



Speech and language therapy via specialized treatment modules



 A virtual service for orthopedic and musculoskeletal pain, ranging from virtual assessments to health coaching to physical therapy to orthopedic physician consultations.



Lab services



Lab services



Dialysis centers





- Durable medical equipment, including through mail order
- Integra offers a network of local equipment providers in NY and FL



Free Centivo Virtual Primary Care

A convenient alternative to in-person primary care.

- Virtual appointments with no waiting rooms
- Dedicated team that gets to know you and your needs
- · Address new concerns, ongoing issues, medication refills and more
- Coordination with local, in-network providers when you need in-person care like lab work or a specialist visit
- Available to members 18+ who live in any state where the Centivo Partnership Plan is available
- Choose Centivo Virtual Primary Care as your designated primary care provider when your plan year begins

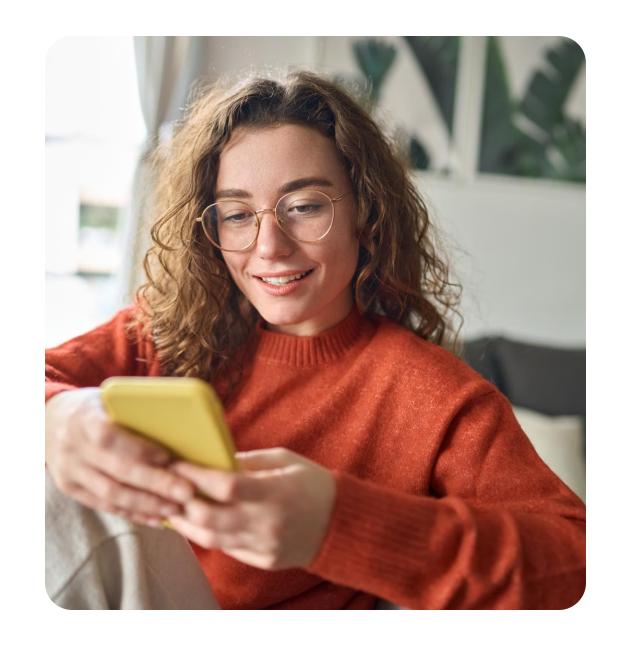




Telemedicine through MDLIVE

- Easy, low-cost alternative to in-person urgent care for simple health concerns such as earaches, sore throats, sinus infections, colds, flu, allergies and others
- Access to board-certified behavioral health professionals for help with depression, anxiety and more
- Great option for after-hours care or care when traveling
- Visit virtually from your home, at work or on-the-go, 24/7/365
- Available through the Health Hub in the Centivo app once your plan starts

All visits are FREE!



How does it work when I travel?

Emergency care is covered at in-network rates no matter where you are. Go to the ER if you have an emergency (e.g., broken bone, burn, chest pain, etc.)

Urgent care is covered at in-network rates when you're outside the Centivo Network area

Contact your primary care doctor to see if they offer virtual appointments.

What's <u>not</u> covered when I'm traveling? Routine or non-emergency appointment without a referral to an in-network provider

Surgery or procedure

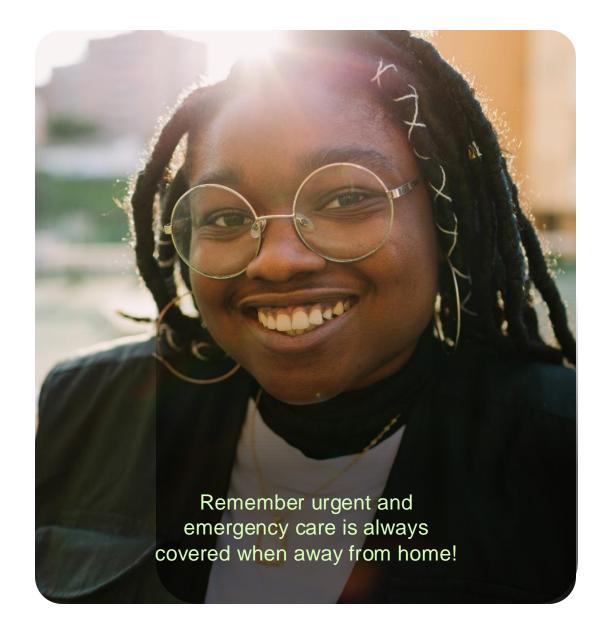
(e.g., you want to go to an out-of-area hospital or facility)



What if I have a dependent who lives away from home?

If your dependent lives in a different location, they can:

- Choose Centivo Virtual Primary Care if they are 18+ and live in a state where it's available.
- Pick an in-person primary care doctor in their home geography that offers virtual visits.
- If they live in an area covered by the Centivo Network, they can choose a primary care doctor near them and see in-network specialists when needed.
- Use telemedicine for non-urgent care needs.
- Most colleges offer on-site medical care. Your enrolled dependent may consider using the school's student health services for most/all care.



Benefit overview and cost comparisons



Your benefit highlights

	Centivo Partnership Plan
	In-network
Network	Centivo
Primary care doctor selection required	Yes
Primary care referrals to specialists required	Yes, with exceptions*
Deductible (individual/family)	None
Out-of-pocket max. (individual/family)	\$3,000 / \$6,000
Primary care (includes pediatricians)	FREE*
Centivo virtual primary care	FREE
Specialist	\$30 copay*
Behavioral health office visits - (may seek out of network care)	FREE
Basic imaging (such as X-rays)	\$10 copay
Advanced imaging (such as MRIs & PET scans)	\$200 copay
Outpatient surgery	\$350 copay*
Inpatient surgery	\$700 copay*
Telemedicine (urgent care/behavioral health) through MDLive	FREE
Urgent care (in-network cost when out of network service area)	\$100 copay
Emergency room (same cost in- or out-of-network)	\$200 copay

^{*} If you don't visit your designated primary care doctor for primary care, a \$30 penalty charge will apply to that office visit. There is also a penalty charge, equal to the copay amount listed, if you have a specialist office visit or have surgery without getting a referral from your designated primary care doctor. No referral needed for OB/GYN, behavioral health, urgent, emergency or chiropractic care, lab work, physical, occupational or speech therapy.



Prescription coverage by Capital Rx

Pharmacy benefits are provided by Capital Rx. You'll get access to over 65,000 pharmacies across the U.S. including national chains, and independent pharmacies. Capital Rx partners with Optum for mail order and specialty medications.

Once your plan year begins, you can download the Capital Rx app to access a pharmacy directory, manage prescriptions and more.

Prescription coverage by Capital Rx	
1 Tescription coverage by Capital Tex	Retail (up to 30-day supply) / mail order (90-day supply)
Generic – Tier 1+	\$5 / \$10 copay
Preferred brand – Tier 2	\$35 / \$70 copay
Non-preferred brand – Tier 3	\$70 / \$140 copay

⁺ A small number of generic drugs may fall under the preferred brand tier. Please check the prescription drug list or contact Capital Rx for any questions about specific medications.



Cost scenario – knee surgery

	Centivo Partnership Plan
1 primary care visit	\$0
1 MRI	\$200
1 specialist office visits (\$30 cost per visit)	\$30
Outpatient surgery, includes facility and surgeon's charges	\$350
6 PT visits (\$30per visit)	\$180
2 generic Rx (retail, 30-day supply)	\$10
Out-of-pocket costs	\$800



Cost scenario – routine pregnancy and delivery

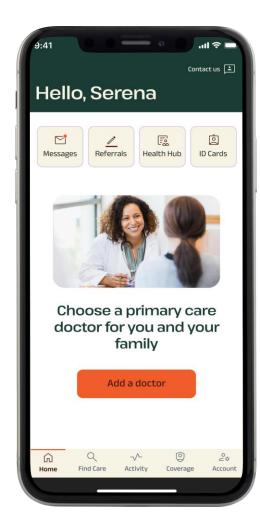
	Partnership Plan
1 primary care visit	\$0
6 Ultrasounds	\$0
All prenatal and post natal OB office visits	\$30
8 sets lab work (\$0 per set)	\$0
Caesarean delivery and 5-day hospital stay	\$700
2 generic Rx (retail, 90-day supply)	\$20
Out-of-pocket costs	\$750

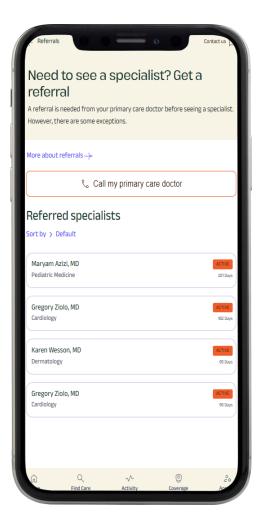


Easy-to-use app and member portal

Use the app or member portal to:

- Choose or change your primary care doctor (activate)
- Find in-network providers and facilities
- Access plan details
- View cost information and Explanation of Benefit statements (EOBs)
- View or print your ID card
- Send a message to Centivo Member Care
- And more







Centivo Member Care

Centivo Member Care is available Monday through Friday from 8 am-9 pm ET at 800-584-0568.

You can also schedule a 1:1 appointment to ask questions at newscorp.centivo.com

Get assistance with:

Benefit questions

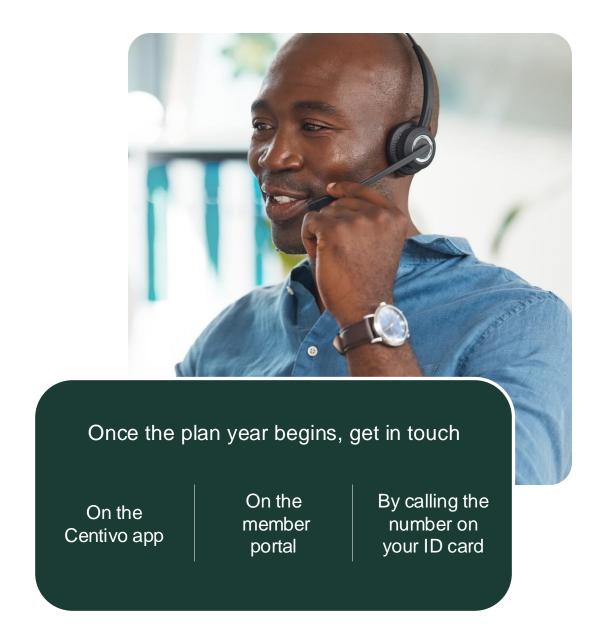
Finding a provider

✓ The app/portal

Claims questions

Activation for you and your family

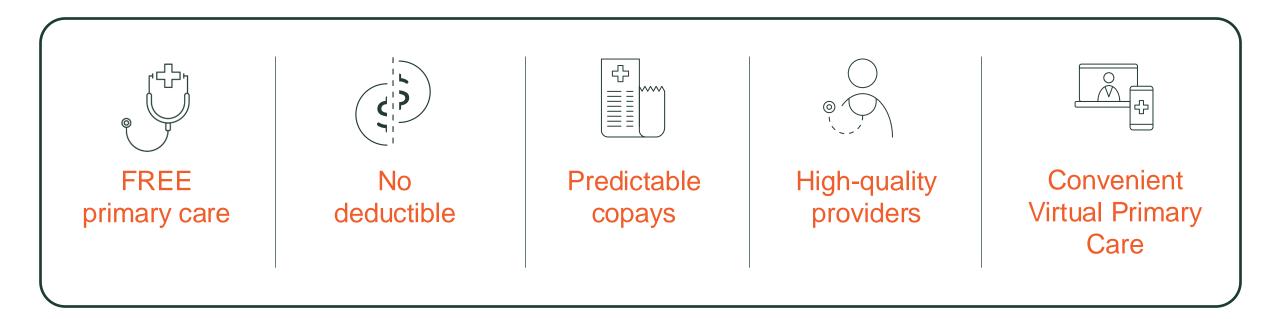
And more





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Thank you!

Reminder: Annual Enrollment is from 11/6-11/20



Plan considerations and member care



QUESTION

What if I'm in the middle of treatment?

If you're currently pregnant (and will be in your second or third trimester once the plan year begins) or actively being treated for a medical condition by a provider who isn't in the Centivo Network, you *may* be eligible to continue care with your current provider at the in-network rate until your current treatment is completed.

This is called *Transition of Care*.

However, you must submit your request and determination must be made *prior* to receiving additional care.

TRANSITION OF CARE

What are qualifying types of care?

- Hospital Care member is in the hospital when the new plan starts or recovering from a major surgery
- Terminal Illness member has been diagnosed with a life-limiting illness or condition that cannot be cured and requires very specific care
- Medical / Surgical / Mental Health / Substance Abuse ongoing treatment for a serious or complex condition which will prevent remission or deterioration of health
- Transplants Under active treatment, the member is considered unstable or in need of ongoing care due to complications
- Pregnancy member in the <u>second or third trimester</u> when the new plan starts
- Cancer member undergoing cancer care or relapsed cancer care, active chemotherapy, radiation therapy, or reconstruction

How to apply for Transition of Care (TOC)

If your provider is out of network with Centivo and you have a qualifying type of care:

- Call Centivo Member Care for assistance to begin the "TOC" process
- You can call to begin the process as soon as you have your member
 ID in December
- Your must apply no later than <u>30 days</u> after the effective date of enrollment (by January 30, 2025) to have out of network care considered for coverage
- The continued care lasts for a defined period, <u>typically 90 days</u>, or until the care has been completed and you are able to safely transfer to an in-network provider

CENTIVO NETWORK



Is the Centivo Partnership Plan right for you?

Good candidates for the Centivo Partnership Plan:



Shawn

Uses providers who are all included in the Centivo Network and loves them.



Miles

Doesn't have a primary care doctor and visits urgent care if he needs medical care.



Sarah

Has a primary care doctor who isn't in the Centivo network but wants to save money and is open to switching providers.



Jen

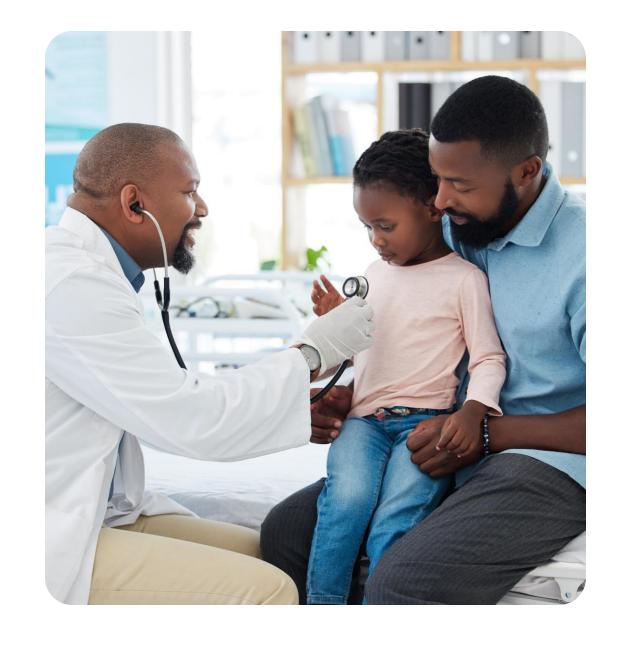
Covers four children on her medical plan and worries about how she will pay for pediatrician visits if they get sick or injured.

Who is Centivo?

An innovative health plan that helps provide highquality care and lower costs by working directly with local healthcare providers.

Centivo administers the plan and provides:

- Payment processing when you get care
- Member support and helpful app
- Explanation of Benefits statements (EOBs)
- Communications about your plan

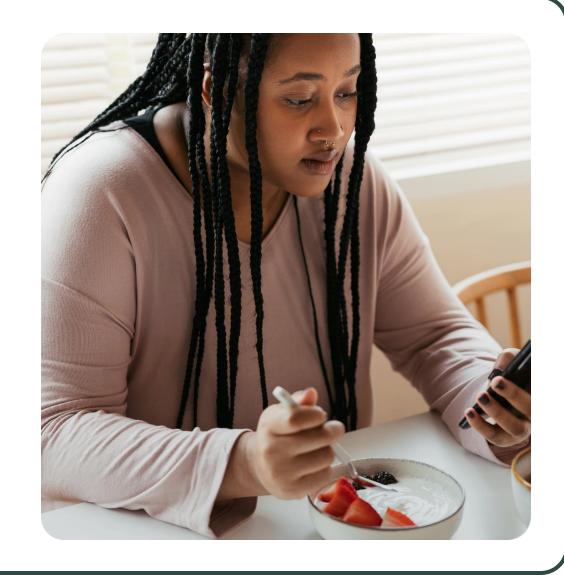


Cost scenario – someone who doesn't need a lot of care

	Centivo Partnership Plan
1 primary care visit	\$0
1 set of lab work	\$10
1 generic Rx (year supply, mail order)	\$40
Out-of-pocket costs	\$50



Getting started



Getting started with your new plan



Refill prescriptions

with your current health plan before the end of the plan year to ensure no gaps in medication.



Be on the lookout for your Centivo ID card

which you'll receive shortly before the plan year begins.



Activate

to ensure coverage on day

1. You'll get instructions with
your ID card.



Contact

Centivo Member Care with any questions.

Activate as soon as you get your ID card



Do this right away so all your care will be covered on day one. Instructions will be provided with your member ID card, which you'll need to get started.