

WoW Health's **Comprehensive Membership**



Thank you for the opportunity to allow WoW Health and its team of affiliates and partners to present healthcare benefits for you.

Our goal is to bring transparency to the cost of medical care, and give control of medical decisions back to the doctors and patients. We do this by recognizing that everyone in healthcare is a "self pay" consumer. Even with health insurance, when one adds up copays, deductibles, and coinsurances, the total out-of-pocket frequently exceeds what a member would pay with our direct-pay network. Unfortunately, in healthcare neither the consumer nor the provider of service have any idea about the final cost of any episode of care, regardless if it is an office visit, medication, lab, or imaging study. We are here to change that!

We recognize that not all episodes of care can be addressed in this direct-pay arrangement where the patient pays directly at the time of service at a fair though discounted rate. About 5-7% events in healthcare are large medical needs like hospitalizations, ER visits, surgeries, cancer care, etc. We have solutions like HealthShare to provide protection against these uncommon but large medical needs, while costing less than half of the usual insurance.

As a physician, I am proud to lead a team of visionaries that have reimagined healthcare benefits with the goal of delivering the best quality healthcare at a price point that is actually affordable. Our 24/7 support team is always available to address any concerns for our members.

I would like to extend a warm welcome from the WoW Health family!

Sincerely,

Jawad Arshad

Jawad Arshad, MD, FACEP CEO, WoW Health



Table of Contents

Cha	pter 1: Everday Care	6
Intro	duction	7
Medi	ical Encounters	9
Ment	tal Health ·····	11
Medi	ications	12
Labs		14
lmag	ing	15
Proc	edure & Surgeries	16
Dent	al Program	17
Visio	n Plan	18
Case	Studies	19
Cha	pter 2: Large Medical Expenses	22
Intro	duction	23
a.	Sharing Request	25
b.	Initial Unshareable Amount	25
Heal	thShare	26
a.	Pre-Membership Conditions	26
b.	Smoking Restrictions	27

Table of Contents

Free	Preventive Services	 28
a.	Annual Office Visit	 29
b.	Immunizations	 30
c.	Pediatric Care	 31
d.	Mammogram	 32
e.	Colonoscopy	 33
Case	e Studies	24



Chapter 1 Everyday Care

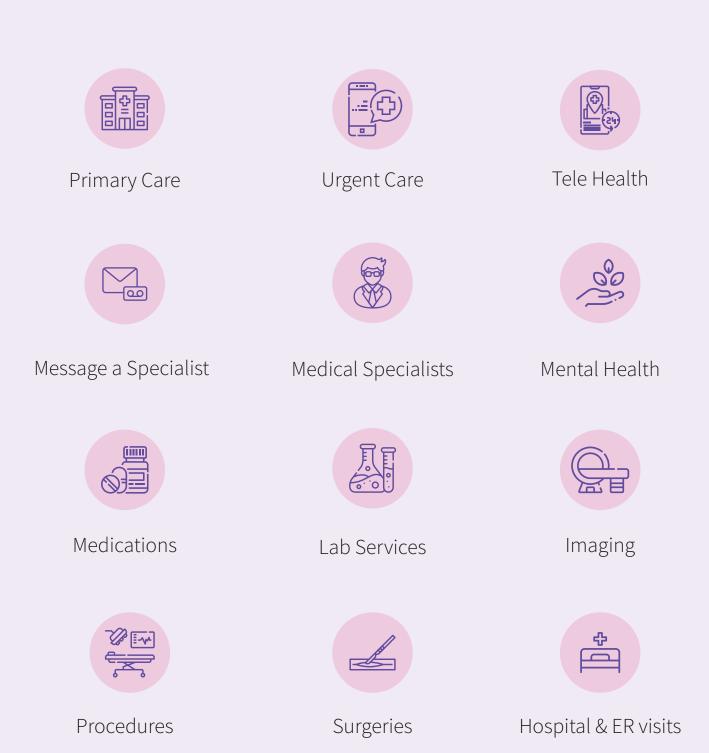
Everyday Care

Everyday Care is quite affordable when the provider is paid directly at the time of service. The providers of service like doctors, pharmacies, labs, etc. do not have to submit claims and excessive paperwork, and in return extend steep discounts to the patients.

Everyone in healthcare is a "self pay" consumer. Even with health insurance, when one adds up copays, deductibles, and coinsurances, the total out-of-pocket frequently exceeds what a member would pay with our direct-pay network.



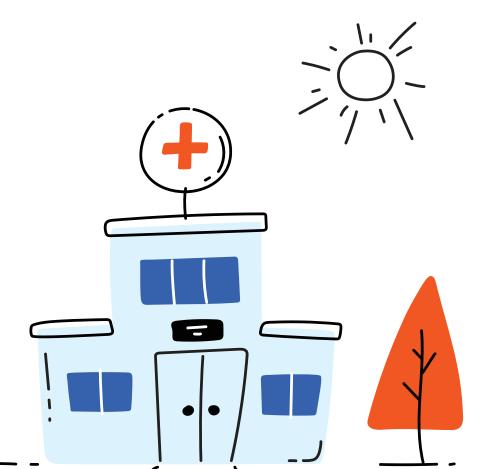
WoW Health provides a complete suite of routine and urgent care services for its members with nationwide access, with a mediacal concierge and 24/7 member support to guide you!



Medical Encounters

WoW Health brings the perfect mix of Virtual and In-person care for all of your medical needs. Our members have access to Virtual Primary Care, so you can build a relationship with your doctor who can help guide you with any healthcare concerns. Appointments are usually available within 1-2 business days, and you can conduct a video or audio-only encounter.

Our members also have access to a doctor 24/7 via our Virtual Urgent Care service so regardless of the time of the day, you have access to a doctor who can either take care of your concern or help direct you to the best venue for your need.



Many a times, you don't need to speak to a doctor but you may have a concern or questions about your diet, medications, alternative medicine therapies, or pediatric issues...our comprehensive list of specialists can respond within 24-hours to any question that you send their way with the ability to attach any files with the secure message.

Our virtual care takes care of most of your medical concerns but at times an in-person visit is needed. This is where our Medic-concierge can make an appointment with a local clinic including getting any medical records sent over so the primary or urgent care clinic is ready to take care of you!

And, if you need to see a specialist, our direct-pay network of over 150,000 specialists will disclose the cost of their office visit, and you pay for it at the clinic with full control and transparency.

We have built the perfect safety net of doctors with primary care, urgent care, and specialists anchored by our certified Medic-concierge to help you navigate and make the best choice for your medical needs.

Mental Health

We know that mental health is just as important as physical health. So we bring access to certified counselors via our 24/7 tele-counseling service to assist with challenges of life like work stressors, family issues, anxiety, depression, etc. With the option to also see a counselor in-person, we are confident that we can provide the best options to support your well being.

Our members also have the option to engage in tele-psychiatry services with psychologists and psychiatrists, who, if needed, can prescribe psychiatric medications. Our mental health services provide the privacy of being able to get the help from the privacy of your home or car.





Medications

Prescriptions can be a significant source of healthcare costs. 5 out of 6 people take at least one prescribed medication regularly, which increases to four medications in people over age 50. We understand that providing transparent and cost effective medication benefits is critical for any healthcare package.

Our medication solution provides steep discounts on all medications where we search multiple discount plans in real-time so you get the best discount, and pick up your medication at a local retailer including CVS, Walgreens, Costco, Walmart, etc.

For brand name drugs, which can be really expensive, we also give the option to our members to get those medications with our International sourcing program. You get the same medication, home delivered at less than half the cost!





Top 93% of generic medications at zero cost, home delivered!

You also have the option for enhanced pharmacy benefits where you can get the top 93% of prescribed generic medications home delivered at zero cost! You can search your medication and then share the prescribing information with your doctor so he/she can electronically send the prescription to the home-delivery pharmacy. In addition to home delivery of chronic medications like blood pressure, high cholesterol, diabetes, etc., all acute care medications like antibiotics are also FREE but you pick them up at a local retailer like CVS or Walgreens because you can't wait 2 days for them to show up in your mailbox.`

*Members can get a 3-month supply of all needed chronic medications in each package. Up to 5 packages are delivered for free per year, with \$5 for each additional delivery package.



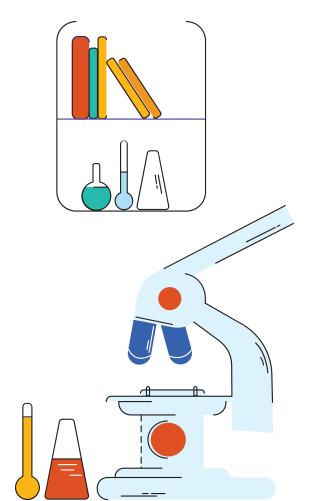




Labs

Our members have access to a nationwide network of labs with over 2,100 sites because of our partnership with the largest lab operator, Quest Diagnostics. You pick the labs, schedule a time at the local lab center, pre-pay for the tests, and get their results electronically. It is not necessary to have a doctor's order to get labs with our service.

Yearly physical labs can be obtained for \$75, including many discounted bundles for men's and women's health, food allergies, and autoimmune issues.





Imaging

We bring an expansive network of over 4,000 independent and quality verified imaging centers nationwide. When a radiology test is needed, you send a request with the doctor's order from your WoW Health account. You will be contacted by a concierge who will go over your choices of centers, time, and final cost. All tests include the results of the test by a board certified radiologist.

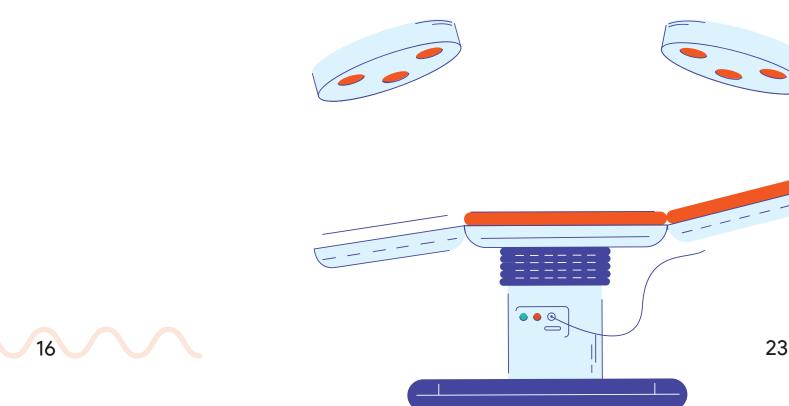
Once the details are finalized, you will pay for the test to confirm and secure the appointment, so there is no concern about hidden charges or uncovered services on the day of the test. Best of all, because you are paying for the test, there is NO need for authorization or approvals from anyone. For example, the usual patient cost for an MRI with insurance usually exceeds \$1,000 but with our direct-pay arrangement, you would pay less than half of that!



Procedures & Surgeries

WoW Health has partnered with an expansive network of procedure and surgery centers to bring a bundled price for our members. With thousands of centers nationwide, we can get the best doctor to provide services at a fair cost because they are guaranteed their payment without having to submit claims and paperwork.

If a procedure or surgery is needed, you create a request from your WoW Health account. You will communicate with a concierge who will go over your choices of doctors and centers, time, and final cost. Once the details are finalized, you will pay to confirm and secure the appointment, so there is no concern about hidden charges or uncovered services on the day of the procedure.

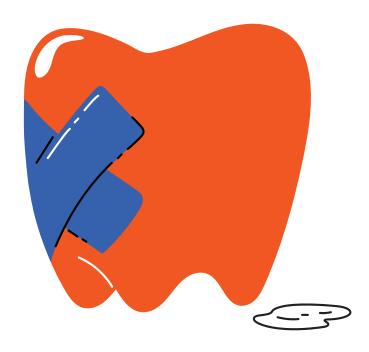




Dental Program

Dental and oral health is a vital aspect of every good healthcare package. WoW Health brings access to over 250,000 dentists nationwide at 60%+ savings for common dental services. Routine dental cleanings will usually only cost about \$40!

You can search for any needed dental procedure, see the discounted price, and a list of local dental practices. When you call to make an appointment, you inform the practice of your discount plan, and pay for the visit at the time of service. WoW Health's dental program has stayed true to our core belief of price knowledge and access, with choice and control, and no surprise bills in the mail!





Vision Plan

3 out of 4 adults use some form of vision correction, and with the effects of aging and increase in screen usage, vision care has become even more important. WoW Health brings discounted access to local vision providers so you can search for a participating clinic, and share your vision discount membership card to pay a discounted rate.

Member Savings

	Single Vision	\$50
Standard Plastic Lenses	Bifocal	\$70
	Trifocal	\$105
Frames	Any frame available at provider location	35% off retail price
Lens Options	UV Coating	\$15
	Tint (Solid & Gradient)	\$15
	Standard Polycarbonate	\$40
	Standard Progressive (Add-on to B	sifocal) \$65
	Standard Anti-Reflective Coating	\$45
	Other Add-ons and Services	20% off retail price
Contact Lenses	Conventional	15% off retail price
Laser Vision Correction	LASIK or PRK from U.S. Laser Network	15% off retail price 5% off promotional
Exams	\$5 off routine exam	\$10 off contact lens exam

WoW Health Membership is a perfect mix of virtual and in-person care, supported by our Medic Concierge to help our members make the best decisions for their health.

Abby is a 41 year-old teacher. She has noticed some sensitivity to foods where eating certain foods can lead to stomach pain. She has noticed the symptoms for 3-4 months and they are not resolving.

Abby connects with her WoW Virtual Primary Care who has a detailed discussion with Abby about her symptoms, and factors that seem to make them worse. The doctor feels that Abby could have developed Celiac sensitivity, and recommends for Abby to get some labs done to decide on next steps. Abby's labs are ok, and with increasing fiber and adding probiotics to her diet, she starts to feel back to normal in about 4 weeks.

	WoW Health Membership	Insurance Plan
Monthly Cost	\$30	\$420
Consultation with Primary Care	\$0 (Virtual)	\$110 (In-person)
Celiac Labs	\$210	\$330
Follow up with Primary Care	\$0 (Virtual)	\$110 (In-person)
Total Cost for the Episode	\$210	\$550

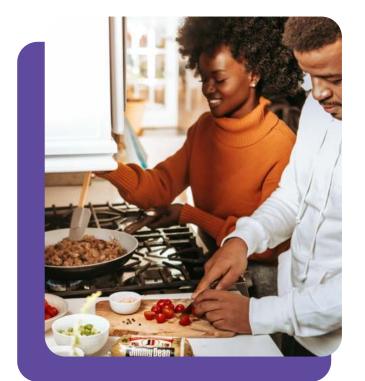
Abby is saving \$340 (62%) on her direct cost of care for this episode!

Jason is a 28 year-old cook who has an accident at home while making dinner. Jason needs to have the cut on his hand evaluated. He is unsure if it is deep enough to need a visit to the Emergency Department.

Jason is a WoW member so he calls the Medic line and speaks to a certified medic who advises Jason that since the bleeding isn't completely stopped, he should have the wound evaluated by a doctor. The Medic then proceeds to make Jason an appointment in 30 minutes with a local urgent care, and informs the clinic of Jason's arrival. Jason pays his \$25 urgent care visit fee and gets his wound taken care of.

	WoW Health Membership	Insurance Plan
Monthly Cost	\$60	\$350
Medic Concierge Call	\$0	Not Available
Urgent Care Visit	\$25 (In-person)	\$140 In-person)
Follow up for wound check with Primary Care	\$10 (In-person)	\$110 (In-person)
Total Cost for the Episode	\$35	\$250

Jason has saved \$215 (86%) for this episode by being a WoW member!



Kathy is a 34 year-old caregiver who has gotten sick with a fever. She is having a runny nose and cough though she doesn't feel short of breath. It is 11pm on Saturday night so she is trying to decide if she needs to go into the Emergency Department.

Kathy is a WoW member so she uses her Virtual Urgent Care service, connects with a doctor in 10-min and is reassured that she has a virus and it will get better. Kathy starts to feel better in 5-6 days.

Two weeks later, Kathy develops a sore throat, and since she had been recently ill, she is unsure what she should do next. Kathy calls the WoW Medic concierge who advises her to be seen in-person with a primary care physician, and makes her an appointment. Kathy is diagnosed with Strep throat, and given antibiotics. She starts to feel back to normal in 2 days.

	WoW Health Membership	Insurance Plan
Monthly Cost	\$75	\$390
Urgent Care Visit for cold symptoms	\$0 (Virtual)	\$110 (In-person)
Medic Concierge Call	\$0	\$Not Available
Primary Care Visit	\$10 (In-person)	\$110 (In-person)
Antibiotics	\$3	\$10
Total Cost for the Episode	\$13	\$250

Kathy saved \$237 (95%) on her bout of viral and then a later strep infection because of her WoW Health membership!



Chapter 2

Large Medical Expenses

Large Medical Expenses

Uncommon and very expensive medical events like ER visits, hospitalizations, surgeries, cancer care, etc. require financial assistance because an individual will not be able to pay for these.

Traditional insurance plans bundle the common but inexpensive phases of care with the less common but expensive episodes and end up charging a large premium. Then, to shift the risk and dissuade people from accessing care, there are many terms that are deployed—copays, deductibles, coinsurance, etc.—all of which increase the cost of care. No wonder that 2 out of 3 people who have to declare bankruptcy due to healthcare costs actually have a traditional health insurance plan!



WoW Health has taken a very different approach. We know that routine Everyday Care is actually quite affordable —add up the copay at time of visit, and then the bill that you get 4 weeks after the appointment because you haven't met your deductible, and you end up paying more than if you had just paid directly at the time of visit. So with WoW Health you get to pay your medical provider directly with price transparency, and without any surprise bills after the fact!

However, for uncommon but large medical expenses, WoW Health has chosen to provide membership for our members to a HealthSharing community. You may also hear interchangeable terms like Medical Cost Sharing or MediShare but they are conceptually the same as HealthShare. In this arrangement, members pay directly for their routine care, but any large medical expense is shared with the community. And no, this isn't some new concept, this type of HealthSharing has been around for almost 50 years, with over a million members!

There are two basic terms you need to know to understand the concept of HealthSharing.

- Sharing Request
- 2 Initial Unshareable Amount (IUA)

Sharing Request

A sharing request is defined as all of the medical expenses related to a single accident or illness that exceeds your Initial Unshareable Amount (IUA).

A sharing request comprises all expenses surrounding a new accident injury or illness. Once your IUA is met for a request, all eligible medial expenses are shared by the community until the sharing request is resolved. For example, you fall and end up fracturing your leg. From the initial doctor visits, any medical treatment, x-rays, MRIs, specialists visits, surgeries, physical therapy, everything counts as one request. Each household membership will be responsible for three ③ IUA(s) in a rolling 12-month period beginning on the date the member submits the verified IUA. If a household paid three ③ IUAs in a rolling 12-month period, any additional `eligible sharing requests exceeding \$500 will be shared with no IUA responsibility.

Initial Unshareable Amount (IUA)

The IUA for each member's medical need is the responsibility of each member, based on your choice of IUA. This is the amount that you need to pay before the community is eligible to share in your medical expenses.

Powered by Zion HealthShare, WoW Health currently offers 3 IUA levels of \$1000, \$2500, and \$5000. The higher the IUA level, the more financial risk a member takes, and so the lower the monthly membership cost. However to protect our members financially, a member will not be responsible for more than 3 IUAs in a rolling 12-month period. So in case of a fourth request that exceeds \$500, members will not have to pay anything.

Pre-Membership Conditions

HealthShare does not decline anyone, although there are rules to be fair to all members for pre-memebrship conditions. Any person who has received any medical treatment, diagnosed with a disease, taken medication, or had any symptoms in the last 24 months since the membership joining date is considered a pre-memebrship condition. It is not fair that a member who is recently given a serious diagnosis like cancer joins the community, and now the community has to pay towards those bills.

So there is a phase-in period for pre-membership conditions.

1st Year of Membership	\$0 (Waiting period)
2nd Year of Membership	\$25,000 maximum per sharing request
3rd Year of Membership	\$50,000 maximum per sharing request
4th Year of Membership and Beyond	\$125,000 maximum per sharing request

After year four of membership, expenses related to pre- membership conditions will be shareable up to a maximum of \$125,000 in a 12-month rolling period. The shareable maximum resets each membership year.

Smoking Restrictions

HealthSharing prioritizes individual responsibility and healthy living. For this reason, members who use any tobacco products, including cigarettes, cigars, chewing tobacco, snuff, pipe tobacco, or vapes will receive a monthly tobacco surcharge of \$50 per household.

A household member who has used any tobacco product one or more times a month within the past year is considered a tobacco user. Cannabis products are considered tobacco for purposes of the tobacco surcharge.

Medical needs for tobacco users age 50 and above are limited to \$50,000 for the following disease categories: cancer, heart conditions, COPD, and stroke.



Free Preventive Services

You have the option to add-on preventive services to your HealthShare membership. Preventive services are not subject to the IUA. At the time of service, ask your provider for a self-pay discount and an itemized bill which is submitted to the HealthShare with the proof of payment for reimbursement.

Following resources are referenced for Preventive services:

- US Preventive Services Task Force
- American Cancer Society
- Centers for Disease Control (CDC) and Prevention Guidelines
- American Academy of Pediatrics
- American Academy of Family Physicians





Annual Office Visit

Pediatric care





Mammogram

Colonoscopy

Annual Office Visit

- You are provided one free annual office visit per family member. The visit may be used for a sick visit, preventive visit, or specialist visit.
- The free annual visit resets 12 months from the last free visit, not at the membership anniversary.
- There is a cap of \$175 for the total visit cost. Pap smears will be considered fully shareable when billed alongside the annual provider visit.
- There is a cap of \$175 for the total visit cost. Pap smears will be considered shareable when billed alongside the annual provider visit.

Any additional services provided at the time of service will be considered the member's responsibility, including x-rays and other services.

Immunizations

Reimbursement for youth immunizations is available upon membership start date for babies born to mothers who had an eligible pregnancy and delivery event. All other children become eligible for immunizations reimbursement after six months of a continuous membership with the Preventive Services add-on feature up to the age of eighteen. HealthShare may reimburse up to the CDC price list in effect at the time of request.

Visits	Hep B	RV	DTaP	HiB	PCV	IPV	MMR	VAR	Hep A	Tdap	HPV	Men
Birth	×											
1 Month					vell child	visit, no	immuniz	ations				
2 Months	×	X	×	×	×	X						
4 Months		X	×	X	×	×						
6 Months	×	X	X	×	×	X						
9 Months				- 1	well child	visit, no	immuniz	ations				
12 Months				×	×		×	X	×			
15 Months					vell child	visit, no	immuniz	ations				-
18 Months			X						X			
24 Months		well child visit, no immunizations										
30 Months	well child visit, no immunizations											
3 Years					well child	visit, no	immuniz	ations				
4-6 Years			Х			×	×	Х				
7-10 Years				ann	ual provi	der visit	, no imm	unizatio	าร			
11-12 Years										×	X	×
13-15 Years				ann	ual provi	der visit	, no imm	unizatio	าร	N .		
16 Years												×
17-18 Years				ann	ual provi	der visit	, no imm	unizatio	าร		1	
	is not cod s B occocal vacci	ed as a	well child	ann ed abov d visit ar frus vated pol	ual provi	der visit annual ies base DTaP	provider ed on me Diptheria, acellular p	visit be mber gi tetanus, pertussis	ns etween b	oirth an Haer type	d 36 m nophilus	
Hep A Hepatiti	s A				Q	MMR	Measles, n rubella	numps,	17,440			
		Td		us, dipthe		HPV	Human pa		Me	n Men	ingococci	18

Pediatric Care

Well child visits and their associated immunizations are reimbursed for a maximum of \$175 per qualifying visit.

- Six well child visits before the age of 12 months
- ✓ Three well child visits between 12 months and 24 months.
- ✓ Two well child visits between 24 months and 36 months
- One yearly visit after 36 months

For children born through a shareable maternity, while the mother is a member of HealthShare, there is no waiting period. However, if children are not born through shareable maternity, the membership must be active for at least six months for the services to be reimbursable.

- The appointment or visit fees are not covered as part of the preventive immunizations unless they are a part of the well child visits or annual wellness visits.
- Immunizations must be given within 12 months of the age recommended by the CDC.

Mammogram

- Sharing for a mammogram is available after six® months of a continous membership that includes the preventive sharing additional service and every year begining at the age of forty (40).
- Sharing is limited to \$600 for a 2D or 3D mammogram. The exam, appointment, and evaluation of imaging performed as a part of the screening will count toward the \$600 limit. Any additional services provided will be the member's responsibility.
- The maximum shareable amount for the preventive mammogram and related services is \$600.

Diagnostic mammograms are not shareable as a preventive service. They may be eligible for sharing as part of a related eligible need. There is a six month waiting period for the benefit to be active.

Colonoscopy

- Sharing for a colorectal cancer sceening is available every ten(10) years beginning at the age of forty-five (45) and after six (6) months of a continuous membership that includes the Preventive Serives additional services.
- Any additional testing resulting from a home colorectal cancer screening test including a colonoscopy, will require a separate request and is subject to the IUA.
- Sharing is limited to the \$5000 for the screening colonoscopy, anesthesia, diagnostic testing, biopsies, and pathology performed as a part of the screening. Any additional costs, services, or follow-ups will be the member's responsibility.
- We encourage members to have this service performed at an outpatient center and not in the hospital, as the centers usually charge less for their services. There is a six month waiting period for the benefit to be active.
- gFOBT (guaiac fecal occult blood test) and FIT (fecal immunochemical test) are reimbursable once every 12 months, and sDNA-FIT (stool DNA with fecal immunochemical test) once every three years, for up to \$500. Any additional testing resulting from a home colorectal cancer screening test, including a colonoscopy, will require a separate sharing request and is subject to the IUA.`

HealthShare is an ideal way to be protected against large medical needs. We present a few examples for illustration purposes.

Aiden is a 10 year-old who has had recurrent sore throat. He is seen by his pediatrician who referred him to the ENT specialist.

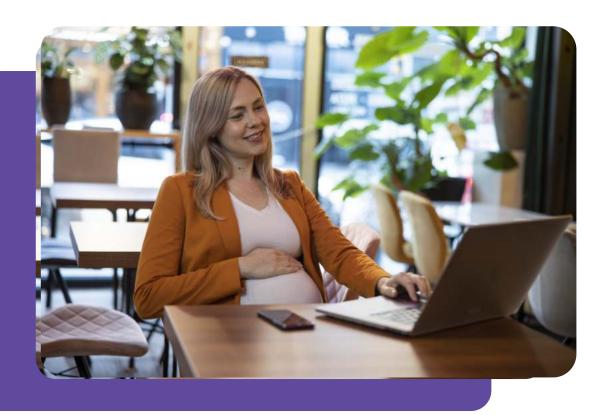
The ENT physician recommended that Aiden's tonsils should be taken out, and after surgery Aiden sees the ENT physician for follow-up. In about a month's time, Aiden is feeling better.

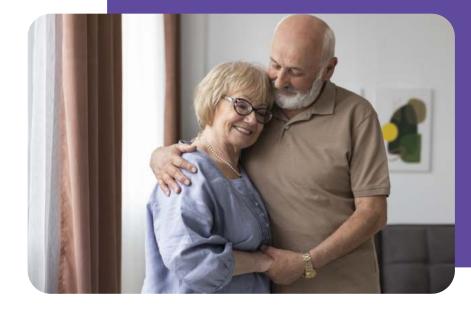
	Zion HealthShare	Traditional Insurance
Visit to Pediatrician	\$100	\$100
ENT Consultation	\$150	\$150
Tonsillectomy surgery	\$4,131	\$7,621
ENT post surgery follow-up	\$150	\$150
Paid by Aiden's Parents	\$1,000 IUA	\$7,000 OOP
Amount Paid by Company	\$3,531	\$1,021



McKenzie is excited to find out that she is pregnant. The national average cost of normal pregnancy is \$13,024. Here is a breakdown of out of pocket costs for McKenzie

	Zion HealthShare	Traditional Insurance
Cost of Plan per year	\$385 x 12 = \$4,620	\$630 x 12 = \$7,560
Additional Responsibility	\$2,500 IUA	\$7,000 Deductible
Total Cost to McKenzie	\$4,620 + \$2,500 = \$7,120	\$7,560 + \$7,000 = \$14,560





James is 55 year old. He has an unexpected episode of chest pain so he is taken to the ER by ambulance where he is found to have a heart attack. He has a heart cath followed by open heart surgery. James is then sent to cardiac rehab, and after about 4 months, he has become clinically stable and is back to normal activity. The estimated cost of care is \$120,000 for his care.

	Zion HealthShare	Traditional Insurance
Cost of Plan per year	\$535 x 12 = \$6,420	\$830 x 12 = \$9,960
Additional Responsibility	\$2,500 IUA	\$7,000 Deductible
Total Cost to James	\$6,420 + \$2,500 = \$8,920	\$9,960 + \$7,000 = \$16,960

These three examples show how HealthSharing provides upfront savings with a lower monthly cost compared to insurance premiums, and then at the time of medical need, the lower IUA compared to out-of-pocket costs and deductibles further save the members more money.

HealthSharing does not cap the cost of care so there is the peace of mind that the members are only responsible for their IUA amount for any qualified medical need.

Zion HealthShare is not an insurance company. Neither this publication nor membership in Zion HealthShare are offered by an insurance company. Visit zionhealthshare.org to view your state specific notice.

What Happens Next

When you join WoW Health, you will receive an email and SMS informing you of your enrollment.

- Please note that your email is your login.
- 2 You will have to set your password, and accept our terms of service.
- You will be brought to your dashboard where you will be able to view all of your available services.

When you tap on a service, it will bring you to your service page which will explain the benefit and how to use the service.

Once you have logged into WoW Health, you can download the WoW Health app from the Apple or the Android store.









Family accounts are linked but you can not view each other's medical services.

- Accounts for children under age 18 can only be accessed from the parent account.
- Dependents between ages 18-26 must have an independent account with their own email address and phone number.
- Adults over age 26 can not be a dependent on a family plan.

You have access to our 24/7/365 member support team. They can be reached at any time via chat from the website, or phone at 844-969-4325, or email at customersupport@wowhealthsolutions.com

PLEASE DO NOT PURCHASE A WoW HEALTH MEMBERSHIP IF YOU WILL BE ENROLLING FOR AN EMPLOYEE PLAN.

YOU MUST WAIT TO RECEIVE YOUR ENROLLMENT EMAIL AND SMS TO LOGIN AND ACCESS YOUR SERVICES.



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