



Elective Benefits

HEALTH/WEALTH SOLUTIONS

Exclusive Health Care Plan for Clients of Elective Benefits

Health Coverage for Doctor's Visits, Prescriptions, and Urgent Care Centers*

Affordable monthly rates

- \$175 for an individual
- \$286 for a couple
- \$373 for a family

Everyone accepted with no rate increase

People with preexisting conditions and smokers are guaranteed coverage with no increase in the rates

Free unlimited access to doctors from your phone or computer

- Includes free (no co-pay) unlimited phone access day or night to a doctor who can prescribe medications quickly for common issues.
- Comprehensive primary care coverage through a mobile phone app or computer with no co-pay for around 1500 medical conditions. Message back and forth, share photos, and jump on the phone when needed with your personal online doctor.

Go to any doctor or urgent care center anywhere in the country

- Co-pays are kept small - \$35 for primary care visits and \$65 for specialists.
- Additionally, a national network of doctors is offered to minimize costs even further.

Comprehensive prescription coverage

Get your prescriptions filled with low co-pays without any preexisting conditions clause.

No upfront deductible

Unlike traditional insurance offerings which require you to pay an amount of often \$500 or more out of your own pocket per year before coverage begins, this plan covers you immediately from the first dollar spent.

*This plan is not meant to compete with major medical, but to allow you the comfort of being able to go to and communicate with doctors, get prescribed medications, and receive care at urgent care centers. It does not cover hospital visits, including emergency rooms, same-day surgical procedures, and inpatient stays.



Exclusive Catastrophic Hospital Health Share Plan for Clients of Elective Benefits*

Traditional insurance has high yearly deductibles and only pays 50-80% after you've met your deductible. This plan has no yearly deductible and pays 100% after the initial co-pay.

\$500 per incident MRA (Member Responsibility Amount)

For example, an emergency room visit for a heart attack followed by hospital visits for the same heart condition are all counted as one incident. An additional visit for a broken arm, however, would be considered a new unrelated incident subject to a new \$500 MRA.

100% unlimited coverage after the MRA

Member is covered in full after \$500 MRA for each incident

Complete freedom of choice of either network or non-network hospital

Three-year preexisting conditions clause

Blood pressure and cholesterol controlled by meds NOT subject to clause

Smokers accepted

Affordable rates

See next page for rate tables

*Sedera, Inc. is not an insurance company. The Sedera catastrophic hospital health share plan is not issued or offered by an insurance company. While every effort is made to meet members' medical needs, Sedera, Inc. and the Sedera medical cost sharing community do not guarantee payment of any medical expense.

Rates

The rates below for Hospital Coverage INCLUDE the base plan benefits for doctor's visits, prescriptions, and urgent care centers.

Non-Smoker/Tobacco Non-User

Age	Individual	Couple	Individual with Children	Family
18 - 29	\$328.50	\$576.00	\$566.00	\$806.50
30 - 39	\$350.50	\$621.00	\$608.00	\$870.50
40 - 49	\$372.50	\$665.00	\$651.00	\$935.50
50 - 59	\$417.50	\$754.00	\$735.00	\$1,064.50
60 - 64	\$617.50	\$1,154.00	\$1,115.00	\$1,644.50

Smoker/Tobacco User

Age	Individual	Couple	Individual with Children	Family
18 - 29	\$403.50	\$651.00	\$641.00	\$881.50
30 - 39	\$425.50	\$696.00	\$683.00	\$945.50
40 - 49	\$447.50	\$740.00	\$726.00	\$1,010.50
50 - 59	\$492.50	\$829.00	\$810.00	\$1,139.50
60 - 64	\$692.50	\$1,229.00	\$1,190.00	\$1,719.50



Exclusive Combined Dental and Vision Plan for Clients of Elective Benefits

Dental

Broad dental coverage

- 100% coverage for cleanings and check-ups
- 80% coverage for basic services like fillings*
- 50% coverage for major services like crowns*

Use any dentist

\$1250 maximum dental benefit per calendar year per person

Vision

Covered services include exam, lenses, frames, contact lenses and fitting, and Lasik surgery

\$250 per year combined maximum benefit for all above services

Affordable monthly rates

- \$48 for an individual
- \$89 for a couple
- \$105 for an individual with children
- \$156 for a family

*Subject to member responsibility amount (MRA) of \$50 for single/\$150 for family per calendar year and initial waiting period after sign-up of 6 months for basic dental services and 12 months for major dental services.