

All You Need to Know about your **Beyond Med** Membership



What is the Beyond Med Plan?

Beyond Med is a licensed discount plan organization (LDPO). A discount medical plan is an easy-to-use, affordable method to gain access to medical benefits without using traditional health benefits. What differentiates Beyond Med from a traditional medical plan, is that it **provides access to elective medical procedures that customary health benefits do not provide coverage on.** Beyond Med provides an affordable alternative to health benefits so that members can be assured of a specific discounted fee towards their desired elective procedure.

Beyond Med is not insurance.

Your membership provides discounts at certain health care providers for medical services. **Beyond Med does not make payments directly to the providers of medical services or provide any reimbursement.** Members are obligated to pay for all health care services but will receive a discount from those health care providers who are in-network.

How does Beyond Med differ from traditional health benefit plans?

Beyond Med is an affordable, easy-to-use and hassle-free solution for anyone looking for savings on **cosmetic and/or elective treatments.**

Here is a comparison guide between Beyond Med and traditional benefit plans.

Beyond Med

No annual limits - members enjoy discounts on services all year long

No paperwork hassles - members simply present their membership card at a participating provider's office for discounts on their offered services

Affordable membership fees to access a network of providers offering discounts on cosmetic and elective treatment

No health restrictions - there is no need to wait for comprehensive medical plan to pursue an elective treatment

No selection of primary doctor - members have freedom to choose from all providers within the network.

Traditional Benefit Plan
















Claims submission and approval by an insurance carrier required

Pre-authorizations by a medical carrier is often required prior to the procedure being preformed

Limitations, deductibles, exclusions and annual maximums

What does Beyond Med offer?

With your Beyond Med membership you will **enjoy quality treatments and will save an average of 20% or more on numerous procedures** by our participating providers! There are no limitations to the number of times you can get discounts on covered procedures with participating providers.

AESTHETICS	FAMILY CARE	BODY + MIND
 Dermatology	 Fertility	 Acupuncture
 Hair Restoration	 Mental Wellness	 Anti-Aging/Wellness
 Med Spa	 Veterinary	 Bariatric
 Plastic Surgery		 Chiropractic
 Surgical Vision		 Hearing
 Weight Loss		 Physical Therapy

Beyond Med is an excellent **add-on** for those who also carry **medical insurance**, as the plan may be used along with the medical insurance for discounts on those elective treatments, which would normally not be covered.

How do I obtain an ID card?

Check your registered email's inbox for a **welcome email from Beyond Med's team** (info@beyondmedplans.com) which will **contain your personal temporary password and instructions to log in into your member portal** (first time users only).

Once signed in, create your user password and please, save it in your records.

You will be able to access and download your Member ID card in your Member Portal at any time.

For any questions or help with accessing your Member Portal, please call our Member Services department at **844-267-6192** or email us at **info@beyondmedplans.com**.

2 How do I find a doctor?

Visit Beyond Med's "Provider Search Tool" at beyondmedplans.com or alternatively call our Member Services department at 844-267-6192. Once you find a doctor, make sure to call the provider's office to confirm that they provide the desired treatment and that the treatment is discounted per Beyond Med's website.

3 Can I coordinate my Beyond Med membership with other medical benefit coverages?

Any traditional health benefit coverage you may have will always be looked at as the primary coverage by the provider. At the sole discretion of the provider, he/she/they may provide the additional Beyond Med discount on top of savings already offered with the member's traditional health benefits plan. Please confirm your total out of pocket expense through the treatment plan provided by your doctor, prior to obtaining the treatment.

4 How do I obtain verification of eligibility for my doctor?

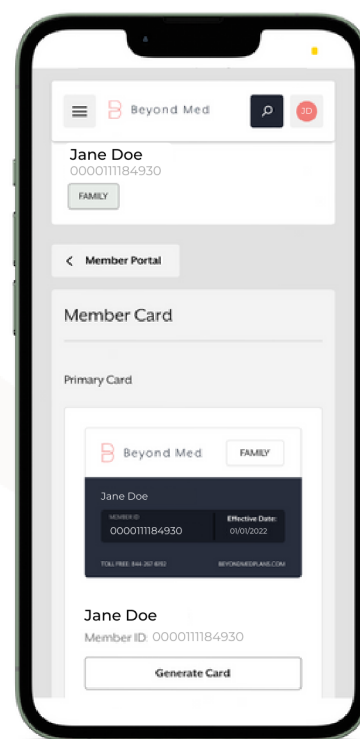
To obtain verification of eligibility, your doctor can find this out by using the contact information provided on your Beyond Med member ID card.

5 How do I update my information or add or change enrollment for me and/or my family?

Please contact your Human Resources representative or benefits coordinator. In the case you purchased an individual policy through the website, please call 844-267-6192.

6 What can I do if I have been overcharged by a provider?

Please confirm the amount quoted by the provider's office prior to treatment. If (i) this number is different than the amount charged, (ii) if any additional surcharges are noticed and (iii) if you have been charged for the wrong treatment, please contact your provider for more information regarding the discrepancy. In the event that you have a disagreement with the doctor, you may contact our member Services department at 844-267-6192 for an assistance. Please make sure to have the name of the treatment plan and provider/office name you have visited.



7 How can I nominate a provider to be part of the Beyond Med's provider network?

Do you have a medical professional that you would like to be added to our network? You may nominate them into our network through your Member Portal - Resources Center.

You can also call our Member Services department at **844-267-6192** and nominate them through a representative. We will make every best effort to recruit the desired provider into our network so that he/she/they can provide you with lower rates.

8 What is BMP's toll-free number and what are the hours of operation?

Our Member Service department **toll-free number is +1 844-267-6192**. We are available Monday - Friday from 9:00 am to 5:00pm. You may also contact us by email at info@beyondmedplans.com and we will get back to you as soon as possible.

9 How can I cancel my membership?

In case you would like to cancel your membership for any reason, you have an option to request to **cancel through your Member Portal**, contact our Member Services department at **844-267-6192**, or email us at info@beyondmedplans.com.

If you decide to cancel your membership within the first 30 days after the effective date of enrollment, you shall receive a reimbursement of all periodic charges. If you decide to cancel after the first 30 days, then your membership will be canceled within 30 days after receipt of the cancellation request.

Additionally,

- If you enrolled with your employer, association, or union, please confirm your termination with your benefits coordinator. In the event you are charged after 30 days following your termination request, you shall receive a pro-rata reimbursement for such periodic charges.
- If Beyond Med cancels your membership for any reason other than nonpayment of fees, Beyond Med will make pro-rata reimbursements to you for all charges after the point of termination.