ClearShare Member Guidelines

Advanced + ClearShare

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The Advanced membership add-on offers low costs for services including doctor visits, prescriptions, and diagnostic tests – both in-network and out-of-network. This membership is a great fit for anyone who regularly uses their healthcare beyond just preventive check-ups, such as families with young children, people who regularly visit specialists, or people with recurring prescriptions.

Services & Costs

Service	Shareable Amounts		
	In Network	Out of Network*	Limits
Preventive Care Visit	Entire amount shareable	Not Shareable	As outlined by the Affordable Care Act
Primary Care Visit	Member responsible for first \$20 per visit	Member responsible for first \$50 per visit	3 visits per year, per person. Included only when services are provided in a non-hospital setting. Services provided at hospital outpatient departments are not included.
Specialist Visit	Member responsible for first \$50 per visit	Member responsible for first \$100 per visit	3 visits per year, per person. Included only when services are provided in a non-hospital setting. Services provided at hospital outpatient departments are not included.
Mental Health Visit	Member responsible for first \$50 per visit	Member responsible for first \$100 per visit	3 visits per year, per person. Included only when services are provided in a non-hospital setting. Services provided at hospital outpatient departments are not included.
Urgent Care	Member responsible for first \$50 per visit	Member responsible for first \$100 per visit	3 visits per year, per person. Included only when services are provided in a non-hospital setting. Services provided at hospital outpatient departments are not included.
Lab Work	Member responsible for first \$10 per visit	Member responsible for first \$25 per visit	5 visits per year, per person. Included only when services are provided in a non-hospital setting. Services provided at hospital outpatient departments are not included.



X-Rays	Member responsible for first \$50 per visit	Member responsible for first \$100 per visit	2 visits per year, per person. Included only when services are provided in a non-hospital setting. Services provided at hospital outpatient departments are not included.
Imaging (CT scan, MRI, ultrasound)	Member responsible for first \$200 per visit	Member responsible for first \$400 per visit	2 visits per year, per person. Included only when services are provided in a non-hospital setting. Services provided at hospital outpatient departments are not included. Pre-approval is required or a 25% payment reduction penalty applies.
Rx Tier 1: Generic	Entire amount shareable	N/A	See formulary for details
Rx Tier 2: Preferred Brand	Member responsible for first \$20	N/A	See formulary for details
Rx Tier 3: Non-Preferred Brand	Member responsible for first \$40	N/A	See formulary for details

*ClearShare will share in out-of-network services up to 150% of usual, customary, and reasonable (UCR) industry rates, or 150% of Medicare.

Annual Maximum Does Not Apply

The Advanced membership add-on services listed in the table above are available for sharing even before you pay your Annual Maximum. Expenses for the services listed above do not accumulate towards your Annual Maximum. The shareable amounts listed do not change even after you have paid your Annual Maximum for other services. In the event that any of the services listed above are a result of another shareable need, they may be considered for inclusion in your Annual Max or shared without a member cost.

Pre-Membership Conditions Do Not Apply

The Advanced membership add-on services listed above are eligible for sharing with the ClearShare community regardless of the pre-membership conditions and waiting periods outlined in the Member Guidelines.

Pre-Approval

Pre-approval can eliminate unnecessary services, hospitalizations, and shorten confinements while improving quality of care and reducing costs to the member and the ClearShare



community. Members are required to direct their providers to obtain pre-approval from ClearShare online at <u>ClearwaterBenefitsAdmin.com/s/pre-approval-request-form</u> or call (877) 405-2926. Providers should contact ClearShare at least 14 days in advance of the member's procedure to ensure there is enough time to review the request. Failure to obtain pre-approval will result in a 25% payment reduction penalty on the shareable need. See the <u>ClearShare Member Guidelines</u> for information.

Preventive Care Services

This membership add on includes over 74 preventive care services that are completely free. These services keep you healthy before you become sick, including routine check-ups, counseling, screenings, and immunizations. For information on services included <u>click here</u>.

Network

Advanced membership add-on services participate in a nationwide PPO network. To find a list of providers, go to the <u>PHCS network website</u>.

When selecting a provider, contact the provider's office to verify that they are still in-network with PHCS and that the provider's billing NPI# is contracted through the PHCS/Multiplan network.

Location Restrictions

The Advanced membership add-on services listed above are not eligible for sharing if performed at a hospital, regardless of network status. Seeking proper non-emergent care at offices, clinics, or independent labs reduces the financial strain on the entire community.

Prescriptions

To see how prescriptions are categorized, browse the Drug Formulary.

How to Access Care

For services listed above with a small set member responsibility, please pay that amount directly to your provider and have your provider submit the bill directly to ClearShare using the information on your member ID card. If your provider refuses to bill us, please call us at the time of service: 877-405-2926.



Other Services

See the <u>ClearShare Member Guidelines</u> for information about sharing eligibility for other services not listed here.

Disclaimer

NOTICE: ClearShare is not insurance or an insurance policy nor is it offered through an insurance company. Neither is ClearShare a discount healthcare program nor a discount health card program. Whether anyone chooses to assist you with your medical bills will be totally voluntary, as neither ClearShare nor any other member is liable for or may be compelled to make the payment of your medical bill. As such, ClearShare should never be considered as insurance. Whether you receive any amounts for medical expenses and whether or not ClearShare continues to operate, you are always personally responsible for the payment of your own medical bills. ClearShare is not subject to the regulatory requirements or consumer protections of your particular State's Insurance Code or Statutes.