



WoW Health's **Comprehensive Membership**

Your Partner for Affordable, Accessible
Healthcare

Thank you for your interest in WoW Health. As a physician, I am proud to lead a team dedicated to reimagining healthcare. Our vision is simple: to make high-quality, affordable healthcare a reality for everyone.

We know that 9 out of 10 interactions with the healthcare system occur outside the “four walls” of a hospital—when people visit their doctor or an urgent care center, pick up blood pressure medication, receive an MRI or lab work, or visit a dentist or optometrist for eyeglasses or contact lenses. In all of these outpatient settings, everyone is effectively a “self-pay” patient, because even with traditional insurance, these episodes of care are paid out-of-pocket through copays, deductibles, and coinsurance.

There is a better way. We bring direct-pay pricing to a complete continuum of healthcare, where, as a “cash-pay” patient, you receive discounted costs because medical providers are paid at the time of service—without months of waiting and complex paperwork. That is the power of transparency and control over your medical decisions.

We envision healthcare much like the rest of life’s transactions: you pay at the time of service for outpatient and routine care, and for life’s “what-ifs”—major medical needs such as hospitalizations, emergency care, or pregnancy—you rely on the financial protection of a solution that may be traditional insurance or our offering of HealthSharing.

We encourage you to think of your relationship with health insurance the same way you think about auto or homeowners insurance—you should have it, but you do not look forward to using it. Imagine the cost of an oil change if it were billed to your auto insurance. So why should a routine doctor visit or outpatient care be billed to your health insurance?

I am confident this common-sense approach will resonate with you. We believe our solutions and our model of care are exactly what is needed for us to work together to improve our healthcare system and build healthier communities.

Thank you for your interest in being part of our family.

Welcome,

A handwritten signature in blue ink that reads "Jawad Arshad".

Jawad Arshad, MD, FACEP

CEO, WoW Health Solutions

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WoW Health Patient Case Studies

Perfect Mix of Virtual and
In-person Care

Virtual Primary Care at its best

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	Traditional Insurance
Consultation with Primary Care	\$0 (Virtual Primary Care)	\$140 (In-person)
Celiac Labs	\$130	\$290
Follow up with Primary Care	\$0 (Virtual Primary Care)	\$140 (In-person)
Total Cost for this Episode	\$130	\$570

Abby has saved \$440 (77%) on her direct cost of care for this episode!

Loyalty Rewards to Keep You Healthy

Jason cut his hand while preparing food at home. He goes to the local urgent care where he is charged \$240 for the visit and to fix the laceration. Jason paid the \$240 for his urgent care visit, and then submitted the receipt to WoW Health.

Jason got \$120 sent to his bank account within two weeks! Without the complexity of copays and deductibles, the simplicity and discount of being a “cash-pay” patient, and WoW Health’s loyalty reward program with 50% reimbursement, Jason has saved well over 65% on this episode...no pricing opaqueness or network restrictions!

Financial Protection at Every Age

McKenzie is thrilled about her pregnancy! With the national average cost of a normal pregnancy at over \$11,000, here's how her HealthShare significantly reduced her out-of-pocket costs!

	HealthShare	Traditional Insurance
Cost Per Year	$\$295 \times 12\text{mo} = \$3,540$	$\$480 \times 12\text{mo} = \$5,760$
Out-of-Pocket for Pregnancy	\$2,500 IUA	\$5,000 Deductible
Total Cost to McKenzie	$\$3,540 + \$2,500 = \$6,040$	$\$5,760 + \$5,000 = \$10,760$

McKenzie has saved 44% on the total cost of her maternity care!



Routine & Maintenance Care

**Direct-Pay & Discounted
Access**

Access to Medical Providers

At WoW Health, we believe the most important aspect of healthcare is the ability to connect with a medical provider. Our hybrid model balances the convenience of virtual care with the importance of in-person evaluation, examination, and human connection.

Virtual Care

We provide unlimited, free virtual care across three settings:

Primary Care

Schedule appointments with the same provider and build an ongoing relationship. Your provider can refill prescriptions, order tests and labs, review results, and guide you through your healthcare journey.

Urgent Care

Connect with the next available provider—typically within 10 minutes, 24/7. Your provider will help determine whether your concern can be treated virtually, requires a visit to the emergency room, or can safely wait for an in-person appointment. This provides meaningful guidance during acute medical situations.

Counseling

Mental health is just as important as physical health. Licensed professionals are available to provide clarity and support for concerns such as depression, anxiety, substance use, and life stressors.

In-Person Care

Not every medical issue can be addressed virtually. As true partners, we will not shield you from the true cost of care, and we will support you during these episodes. Our simple process is as follows:

- You may visit any primary care or urgent care provider of your choice.
- You pay the full cost of the visit at the time of service.
- You submit your paid receipt to us, and we share 50% of the cost.

To ensure fairness for all members, the following guidelines apply:

- You must be a member for three continuous months to unlock your first subsidized visit. After six continuous months, you unlock your second subsidized visit.
- One unused visit may roll over into the next 12-month period.
- Reimbursement is 50% of the visit cost, up to a maximum of \$150 per visit.
- Each family member is allocated two subsidized visits per 12-month period.

You are responsible for the full cost of visits with specialists and other medical providers. However, many members find that out-of-pocket costs under this direct-pay model are often lower than those with traditional insurance.

Medications

Ninety-one percent (91%) of prescribed medications are generic and treat conditions such as high blood pressure, diabetes, high cholesterol, and thyroid disease. Our pharmacy program reduces out-of-pocket costs and eliminates access barriers.

When you search for a medication, our system presents available options, broadly categorized as generic or brand name.

Generic Medications

- Free top 80% of generics
- Chronic care generics (e.g., blood pressure medications) are home delivered
- Acute care generics (e.g., antibiotics) are picked up at local pharmacies
- Remaining generics are discounted and available at local pharmacies



[Search Medications](#)

Brand Name Medications

- Pickup at local pharmacies, or
- International sourcing from Canada, Australia, New Zealand, or England with home delivery

We also offer specialized programs, including weight loss support with discounted GLP-1 medications.

Diagnostics & Procedures

We provide members with discounted access to labs, imaging, and procedures at thousands of centers nationwide.



Labs

Purchase your selected labs, visit a local lab for the blood draw, and receive your results within a few days.



[Search Labs](#)



Imaging & Procedures

Submit your request and connect with our concierge, who will assist with pricing and scheduling options.



[View](#)

[Imaging Services](#)



Dental Care

Our dental program provides price transparency for dental procedures. You may choose a provider from our network or visit a dentist of your choice.



[View](#)

[Dental Services](#)



Vision Care

Our vision program uses an augmented reality interface to scan your face and allow you to select eyeglasses virtually. We fit lightweight polycarbonate lenses with blue light reduction, scratch resistance, and other enhancements, and deliver them directly to your home. All you need is a valid prescription from a local optometrist.

We also offer a full line of contact lenses at discounts that exceed those found elsewhere.



[View](#)

[Vision Care](#)



Large Medical Expenses

Protect Your Future from Life's
What-Ifs



[Full HealthShare Guidelines](#)

Uncommon but expensive events—such as emergency room visits, hospitalizations, surgeries, and pregnancy—require financial protection. Traditional insurance combines routine care with these high-cost events and charges a premium, then adds copays, deductibles, and coinsurance that further increase out-of-pocket costs. As a result, many individuals with traditional insurance still face significant financial hardship. We take a different approach: direct-pay access for routine and chronic care, paired with HealthSharing for financial protection against large medical events. There are two terms for you to understand:

IUA (Initial Unshareable Amount)

The IUA is the amount a member must pay before expenses become eligible for sharing with the medical cost-sharing community. Membership options include IUAs of \$1,250 or \$2,500. Once the IUA is met, eligible expenses may be shared without annual or lifetime limits.

Members do not need to meet a new IUA for the same medical need unless they are symptom-free for 12 months. Household memberships are not responsible for more than three IUAs in a rolling 12-month period.

Sharing Requests

Sharing requests are submitted per member and per medical need. A medical need may include preventive care, maternity, accidents, or serious medical incidents. Expenses must be medically necessary, safe, and effective, and provided by licensed professionals and facilities. Diagnostic testing must be FDA-approved.

Members must submit original, itemized bills within six months of the date of service. There is no lifetime limit on eligible shared expenses.



HealthSharing Important Considerations

Pre-Membership Medical Conditions

To keep membership contributions low, a waiting period applies to conditions that existed before enrollment. A condition is considered pre-membership if, within the previous 24 months, a member was examined, diagnosed, treated, took medication, experienced symptoms, or had a known increased risk related to pregnancy.

Sharing eligibility increases over time:

- Year One: \$0
- Year Two: \$25,000 maximum
- Year Three: \$50,000 maximum
- Year Four and beyond: \$125,000 maximum per 12-month period

Exceptions for High Blood Pressure, High Cholesterol, & Diabetes

High blood pressure, high cholesterol, and diabetes (types 1 and 2) are not considered pre-membership medical conditions as long as

- the member has not been hospitalized for the condition in the 12 months prior to enrolling, and
- the member is able to control the condition through medication or diet.

Smoking Restrictions

Households with tobacco users incur a \$50 monthly surcharge. Tobacco use includes cigarettes, cigars, smokeless tobacco, vaping, hookah, and smoked cannabis. Failure to disclose use may result in fees, paused sharing requests, or membership revocation.

Medical cost sharing for eligible sharing requests of current or previous tobacco users who have utilized tobacco within the past 15 years are limited to \$50,000 for each of the following four disease categories:

- Stroke
- Cancer -Tobacco Related
- Heart conditions
- Chronic obstructive pulmonary disease (COPD)

Pregnancy & Maternity Care

Eligible expenses include prenatal care, postnatal care, and delivery. All maternity care has a \$2,500 IUA, regardless of selected membership IUA. Newborn expenses require a separate sharing request and IUA.

Maternity sharing requests must be submitted within six months of the first date of service. **A six-month membership waiting period applies, and conception must occur after this period.**

Preventive Services

Annual Office Visit

One visit every 12 months from the start of membership, up to \$175, for each family member.

Please note: Emergency room or urgent care visits are not eligible for sharing as an Annual Provider Visit. This annual provider visit is in addition to the above mentioned two subsidized office visits in the Access to Medical Providers section.

Pediatric Immunizations

Available after a six-month waiting period.

Mammograms

Eligible annually after age 40, up to \$600.

Colorectal Cancer Screening

Colonoscopy eligible every 10 years after age 45, up to \$5,000. Home colorectal cancer screening tests such as high sensitivity gFOBT (guaiac fecal occult blood test), FIT (fecal immunochemical test), and sDNA-FIT (stool DNA with fecal immunochemical test) are eligible for sharing beginning at the age of 45 and after six (6) months of continuous membership with preventive services.

What Happens Next?

After enrollment, you will receive an email (your login). Set your password, accept the terms, and access your dashboard to view all services. Download the WoW Health app for a streamlined experience.

Family accounts are linked, but medical information remains private. Children under 18 are accessed through a parent account. Dependents ages 18–26 require independent accounts. Adults over 26 cannot be dependents.

Our 24/7/365 Member Support Team is available

Phone at

844-969-4325

Email at

customersupport@wowhealthsolutions.com.

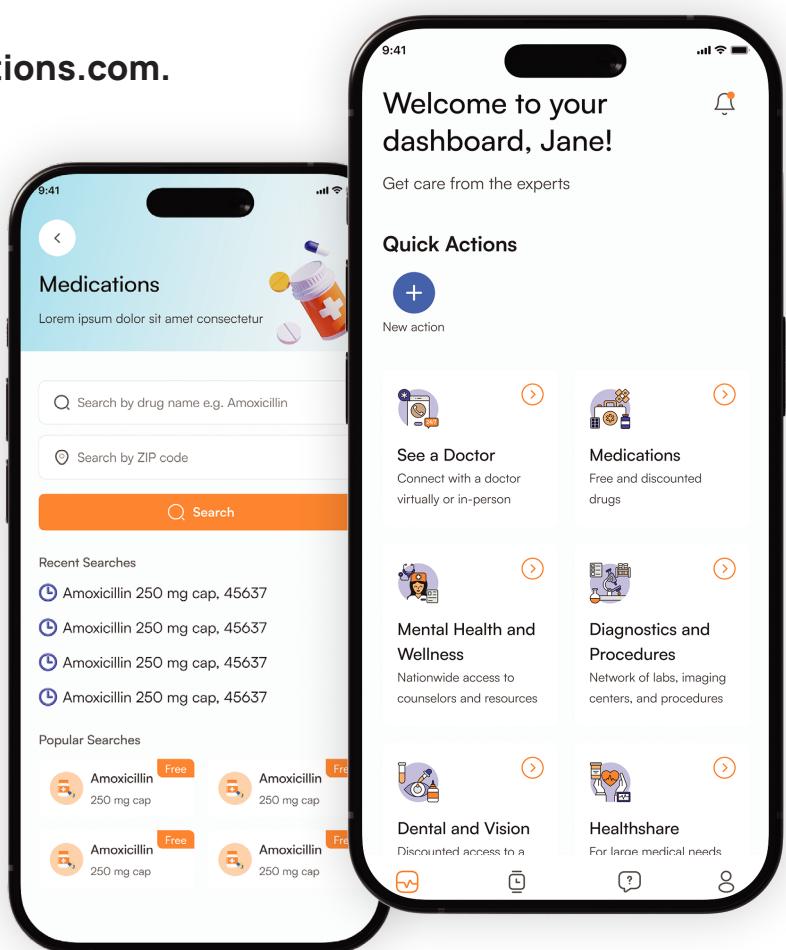
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