



Bending the **cost curve** and improving **employee wellbeing** with **member engagement**

Curative is removing barriers to care with affordability, engagement, and simplicity. When members actually use their benefits we **improve health outcomes** and lower costs.



Current health care isn't working for anyone

Rising deductibles and copays mean people are deferring care. Even a basic visit to a doctor can come with a lot of out-of-pocket expenses. Plus, the system is so complex and with nobody to help, getting the right care can be overwhelming. So we defer care as long as we possibly can, and prescriptions go unfilled because they're simply unaffordable.

Transparent, next-generation health care employees will love to use

We've created a simple plan that consumers love to use—that removes cost barriers like copays, deductibles and most prescription charges, while providing trusted support at every step— we will completely change the way members engage with their health. Getting every member the preventive care they need, encouraging healthy behaviors, putting medical advancements to work, and helping us all live longer, healthier lives — with lower long-term total costs of care for members and employers alike.

Curative Care Navigators

Care Navigators are at the core of our member-centric experience. Each Curative plan member is paired with a Care Navigator who will be their **first point of contact** to onboard with our plan, and support them through their entire journey as a member, providing resources and guidance on maximizing their **Curative benefits** to reach their health goals.



“Most people do not choose to seek the care that they need because of small barriers to access – not knowing the right questions to ask or lack of awareness of the resources available to them. I am easily accessible by phone, text, or email and the members can reach out to me directly at any time. It is my hope that I will build a relationship with the members during their **Baseline Visits** so that they feel comfortable enough to ask any questions that they may have about seeking care.”

-Kyra N., Care Navigator

Engagement from the start

In order to qualify for **\$0 copays and deductibles** members must complete a Baseline Visit within the first 120 days of the plan effective date.

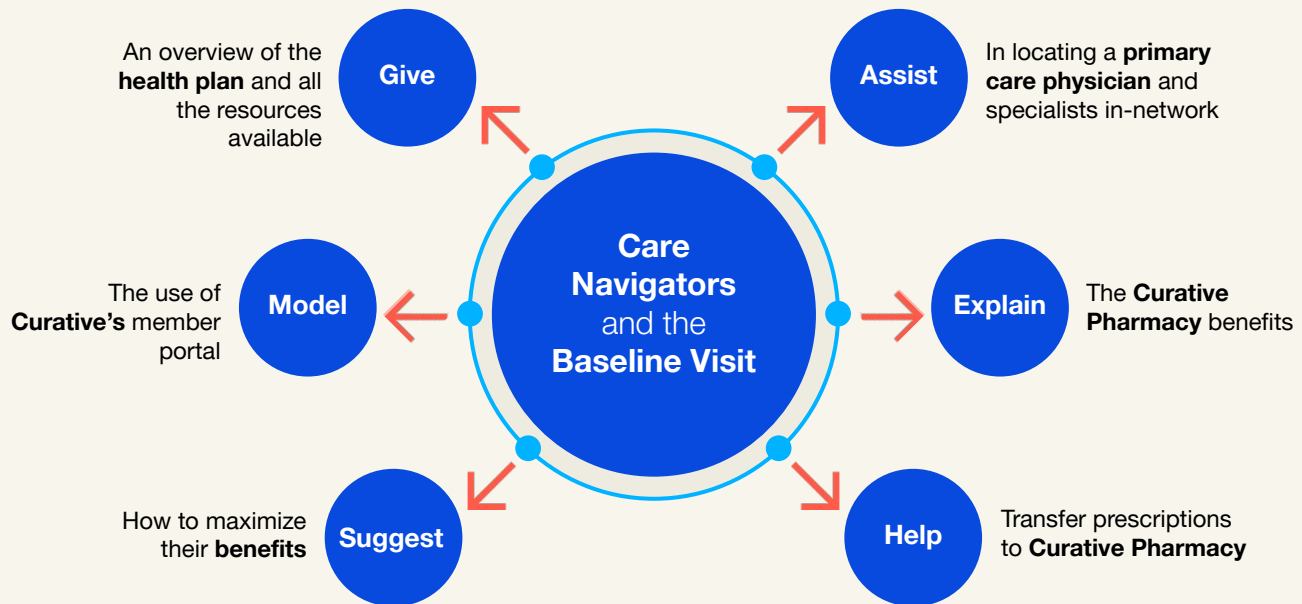


The Baseline Visit

A Baseline Visit is an **individualized appointment** with a **Care Navigator** that focuses on the member's complete well-being and shares how to best utilize **Curative benefits** and resources.

Proactively starting the conversation around **health goals** and providing the tools to achieve them sets your employees up for **long-term success** and improved satisfaction.

Members also meet with a clinician who will review medical history, help the member with a care plan and, if appropriate, connect them to Curative **wellness management programs** for chronic or acute conditions related to: obesity, hypertension, diabetes, and maternal health. We also have a **robust case management** process to help with acute situations.



Continued member support so employees can focus on what matters

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Better health benefits benefit your business

Employers should offer plan options that focus on high-quality, comprehensive coverage that is cost-transparent, member-centric, and encouraged to use. When members are equipped and incentivized to prioritize their health, their health, wellbeing, and productivity improves.