

Welcome to Curative! Your new health plan starts here.

We're excited to welcome you to Curative, a health plan built on affordability, engagement, and simplicity. With Curative, you can focus on healthcare, not health costs.

1. What is Curative?

Curative is a health plan focused on helping you stay healthy, not just treating you when you're sick. After completing an annual [Baseline Visit](#), you'll continue with access to \$0 copays, \$0 deductibles, and \$0 out-of-pocket costs for in-network care.

2. What's the Baseline Visit?

The [Baseline Visit](#) is an annual health checkup to understand your plan and current health needs. Complete this within your first 120 days to continue with \$0 out-of-pocket costs for in-network services and preferred prescriptions.

3. How do I find in-network providers?

Curative has a broad national network of approximately 1 million providers, including doctors, specialists, care professionals, and facilities. You'll also have access to a strong local network with top health systems like AdventHealth, Halifax Health, Orlando Health, Nemours, and Shands. Curative is continuously expanding our provider network to meet the needs of our members.

You'll be paired with a Care Navigator, who can help guide you to in-network providers eligible for \$0 costs. To avoid out-of-pocket expenses, it's important to use in-network or Curative recommended providers across all plan options. If you choose to see a provider that isn't in-network or not aligned with Curative guidance for EPO Value, you may be responsible for full out-of-pocket costs.

You can also use our easy provider search tool anytime at curative.com/providers. Members 18+ receive a Zero Card, a self-pay charge card backed by Curative, that expands access to even more \$0 providers, especially mental health providers who don't accept insurance. Members on the EPO Value plan will need to secure approval before using the Zero Card.

4. What is a Care Navigator?

Your **Care Navigator** is your go-to source for all things Curative and will be your direct point of contact if you have questions or concerns about your coverage. Your Care Navigator can help you find providers and navigate your benefits to help you reach your health goals. You do not need to wait until the Baseline Onboarding to connect with your Care Navigator. Go to your [Member Portal](#) to find their information.

5. What if I see a doctor not in Curative's network?

If your current provider is not in Curative's network, you'll need to select a new one. You can easily find in-network providers by using our easy provider search tool anytime at curative.com/providers. The EPO Value plan option requires members to consult with Curative for recommended \$0 providers when seeking care. If you are changing doctors, contact your current doctor's office to transfer your medical records and ask them to send them to your new provider.

6. What about prescriptions?

Curative members will transition to [Publix](#) or [Curative Pharmacy](#) for \$0 preferred prescriptions.

7. What if I'm in the middle of treatment or currently taking a prescription?

If you're receiving ongoing treatment or currently taking medication, Curative offers a Transition of Care (TOC) period to help you maintain access to your prescriptions during the switch to your new plan. Upon enrollment, members will enjoy a one-month TOC period, allowing a 30-day supply of pharmacy benefit drugs. During this time, follow instructions regarding copays and in-network pharmacy usage.

During this time, most formulary drugs requiring prior authorization will continue to be temporarily covered at the point of sale. Your doctor will need to submit a [prior authorization](#) if you wish to continue the medication under Curative's plan long term. Copays will vary by medication tier, ranging from \$0 to \$250. For more information on transition of care and continuity of care, including frequently asked questions and how to access and complete the form, [download our overview](#).

Please note:

- All prescriptions must be filled at in-network pharmacies (except PPO Max members).
- Certain medications, including non-formulary drugs, GLP-1s, step therapy medications, and weight loss or fertility treatments, are not eligible for TOC and will require immediate authorization.

You'll receive communication about your next steps via letter, phone, email, or text. For details and updates, visit curative.com/for-members or contact your Care Navigator.

8. Is mental health covered?

Absolutely. Curative offers \$0 access to a vast network of **mental health providers**, including therapy and psychiatry. Your Care Navigator can help you find the right provider based on your needs and preferences. Learn about all our mental health programs at curative.com/mental-health.

9. What else should I know?

- Ensure you and your dependents ages 18+ complete your **Baseline Visit** within 120 days to avoid out-of-pocket costs.
- Always check with your Care Team before scheduling care to ensure you use in-network providers.
- Use your [Member Portal](#) or contact your Care Navigator for support anytime.

Have more questions?

Visit curative.com. You can also contact Member Services at 855-428-7284 or health@curative.com. We're here to help every step of the way.