



myEVHC.com

WELCOME

GET THE MOST OUT OF YOUR BENEFITS

2026



QUESTIONS? Call EVHC at 877-877-3496



Need Help?



Visit myEVHC.com

Register for personalized information about your plan.



Call Toll-Free

If you don't have computer access and need answers, call the number on your health plan ID card.



Mobile App

Download the free app from the Apple or Google Play app store.

Changing the landscape of employer-based health plans

Welcome! Thank you for being an EVHC member. We understand that managing health plan benefits and controlling costs can be complicated. That's why we offer a member website and a dedicated team ready to help you understand your coverage, treatment options, and more. We hope this guide helps make your health care experience easier. Contact us if you need help.

GETTING STARTED

Who is EVHC?

EVHC is your medical plan. To verify benefits or check the status of a claim, you will need to contact EVHC by calling the number on your ID card.

Network Access

When seeking care, your EVHC plan utilizes the Anthem network of providers and facilities. Log into your account at myEVHC.com to locate in-network providers.

Your Member ID Card

Get to know your health plan ID card. It has information about you and your coverage. Remember to carry it with you wherever you go. When you visit your provider or pharmacy, show your card so they now how to bill for their services.

Log on to myEVHC.com for complete plan details. View health plan documents like your policy, riders, amendments, required notices and welcome materials.

Member ID Card

- Member ID and Group Number
- Your Co-payment Amounts
- Prescription Coverage

Anthem 		ABC Company
First Name, Last Name	For detailed benefit information including Deductible and Out-of-Pocket Maximums, please visit your Member Services website.	
Member ID: ABC12345678E		
Group #: LH Group #: Plan Code: RxBIN: RxPCN: RxGRP:	INN Ded Indv/Fam OON Ded Indv/Fam INN OOP Max Indv/Fam OON OOP Max Indv/Fam Copays Office Visit Specialist Rx Retail Gen/Preff/Brand Rx Mail Gen/Preff/Brand	
ABC Company has hired Luminare Health Benefits to handle member contact for health plan administration. See back for contact information.		

QUESTIONS? Call EVHC at 877-877-3496

myEVHC.com

MEMBER PORTAL

These days, people do their banking, pay bills and shop for just about anything online. It's secure, fast, easy and convenient. At EVHC, we believe accessing information about your health plan and managing your accounts should be no different. That's why we provide myEVHC.com, a personal online portal with access to detailed claims data, out-of-pocket expense tracking, dedicated customer support, and much more.



Welcome to myEVHC!

Sign in to myEVHC

Username

Password

SUBMIT

[Forgot your password?](#)
[Forgot your username?](#)

Register

I am a Participant
Find a doctor, check claim status, manage your health and more.
CREATE YOUR ACCOUNT

I am an Employer/Client
Manage employee coverage and eligibility, view claims and view reports.
CREATE YOUR ACCOUNT

I am a Broker
Keep tabs on your clients' plan and access reports.
CREATE YOUR ACCOUNT

I am a Provider
Check the status of your patients' claims and confirm their eligibility history.
CREATE YOUR ACCOUNT

For access to your health plan information, you must register first for the member portal - myEVHC.com

- Coverage and Claims
- Account Balances
- Deductibles and OOP Maximums
- Online Message Center
- View your ID Card
- Explanation of Benefits
- Find Network Doctors and Facilities
- And more...

TO REGISTER: Visit myEVHC.com and click on "I am a Participant, Create My Account" - you'll need your ID Card, Social Security number, and date of birth.

Download the Mobile App

Stay connected while you're on the go. Our mobile app lets you stay in control from anywhere. You can download our app for free from the App Store from Apple or Google Play. Just search for myEVHC Mobile.



Prepare for Your Visit

In addition to the items above, be prepared to discuss any current health issues with your doctor. Get involved and be an active participant in your healthcare. Bring a list of questions you may have for your provider so you don't forget.



ID CARD

Remember to bring your health plan ID card and one form of picture ID, such as a driver's license to every doctor's visit.



MEDICATION

Supply your provider with a current list of any medications you're taking and discuss any new prescriptions.



RECORDS

When visiting a new doctor's office for the first time, it's a good idea to bring any files you have on hand from previous providers.

Know Where to Go

When to use:

Cost: \$

- Allergies
- Bladder infections
- Bronchitis
- Cough/cold
- Diarrhea
- Fever
- Pinkeye
- Rashes
- Seasonal flu
- Sinus problems
- Sore throat
- Stomachaches

When to use:

Cost: \$\$

- Checkups
- Preventive services
- Minor skin conditions
- Vaccinations
- General health managements

When to use:

Cost: \$\$\$

- Sprains and strains
- Small cuts that require stitches
- Minor burns
- Minor infections
- Minor broken bones

When to use:

Cost: \$\$\$\$

- Heavy bleeding
- Large wounds
- Change in vision
- Chest pain
- Sudden weakness/trouble speaking
- Major burns
- Spinal injuries
- Severe head injury
- Breathing difficulty
- Major broken bones

Virtual Visits

See a doctor using your smartphone, tablet or computer. You can even get prescriptions sent to your local pharmacy. Copay or coinsurance may apply and registration is required.

Primary Care Physician

Your PCP has access to your health records and provides preventive care, treats chronic conditions, manages medications and can steer you to a specialist if your plan requires a referral.

Urgent/Convenient Care

When you need care quickly but it's not an emergency, urgent and/or convenient care centers can treat issues that aren't life-threatening.

Emergency Room

The emergency room is for life-threatening or very serious conditions that require immediate care. You may call 911 or local emergency number.

Cost and time information represent average only and are not tied to a specific condition, level of coverage or treatment. Your out-of-pocket costs will vary based on your plan details.

Understanding Your **PHARMACY BENEFITS**

Log on to myEVHC.com or www.carelonrx.com for more information about your pharmacy benefits. If you still have questions, call the member pharmacy number on your ID card.

With the Carelon Rx app on your smartphone or tablet, you can refill prescriptions, track your prescription history, compare medication pricing and options, search your prescription drug list (PDL) and more.



Filling Prescriptions

Members can fill prescriptions in-person at the pharmacy with your EVHC ID card or, get your medications delivered directly to your door with flexible mail order options..

Save money on maintenance medications. Order up to a three-month supply of medications you take regularly

Learn More:

www.myEVHC.com or,
www.carelonrx.com

Managing Your Pharmacy Benefits

- Your EVHC Healthcare plan's pharmacy benefits are managed by Carelon Rx
- Log on to myEVHC.com and click "My Links" to access your portal, or log on to www.carelonrx.com to register
- Manage your benefits on-the-go, download the Carelon Rx mobile app

Using Your Pharmacy Benefits

1. **Transfer Current Medications**

When you switch to a new plan, coverage for prescriptions you're already taking may change. Get information on how to continue to get your current medication or how to switch to a lower-cost alternative. The CarelonRx mobile app can also tell you if your medications are covered.

2. **Check Your Prescription Drug List (PDL)**

Your PDL is a list of covered medication. The list is broken into sections called tiers. Choosing medications in lower tiers may save you money. Check your PDL often.

3. **Talk To Your Doctor**

When you talk with your doctor, use the CarelonRx app to confirm coverage and costs. You can also talk about what you need to do to get your medication.

4. **Consider Generic Drugs**

Generic medications usually have a lower copay than brand-name medications. Ask your doctor if there's a generic option for you.

5. **Compare Prices**

Search for lower-cost alternatives by logging into the CarelonRx app.

Know Your Plan

Your plan may require one or more of the following before you can fill your prescription:

- **Prior Authorization:** approval to get a medication
- **Step Therapy:** trying one medication before another
- **Quantity limits:** getting a certain amount of each prescription

NOW THAT YOU'VE RECEIVED CARE

Explanation of Benefits (EOB)

We'll send you a copy of your Explanation of Benefits when you or one of your covered dependents use your health plan. You can see all claims processed for that period, plus your network and out-of-network balances and deductible information.

If you receive your Explanation of Benefits online, you'll get an email whenever a new EOB is posted. You can view your information and activity securely, at myEVHC.com.

Sample Explanation of Benefits

The items appearing on the explanation of benefits (EOB) sample are for reference only. This sample shows claims and benefits for a family of five. Each family member's claims are shown separately.

EVHC
145 W. Orlend Street
2nd Floor
Baltimore, MD 21203

Questions? Toll-Free: 1-800-311-3842
Website: www.EVHC.com

Contact us: 1-800-311-3842
www.EVHC.com

Sally Sample
123 Main Street
Anywhere USA 12345

ABC Company
Group Number: 54321
Print Date: Month DD, YYYY

Consolidated Family Explanation of Benefits
This is not a Bill

Page 1 of 2

Patient's Name Type of Service	Service Date(s)	Billed Charges	Discount Amount	Other Adjust- ments	Other Plan Payment	Patient Responsibility After Payment	Plan Benefit	Plan Paid At	Reason Codes
						Ineligible Co-Pay Deductible	Co-ins		
1 Patient #1 Name									
Claim #: E00015454399 Pat. Acct. #: 10188851 Provider: Mainstreet Medical Group Network: Sample Network Issued: MMDDYYYY									
DRUGS/STIC PROC	MMDDYYYY	29.00	11.75	0.00	3.27	0.00	0.00	14.00	100% 901 901 901
Totals:		29.00	11.75	0.00	3.27	0.00	0.00	14.00	0.00
2 Patient Responsibility: 0.00									
2 Patient #2 Name									
Claim #: E00015454399 Pat. Acct. #: 123 Provider: ABC Medical Center Network: Hospital Network Issued: MMDDYYYY									
ANCILLARY EXPENSE	MMDDYYYY	75.00	0.00	0.00	0.00	0.00	0.00	75.00	0.00 0% 901
Totals:		75.00	0.00	0.00	0.00	0.00	0.00	75.00	0.00
3 Patient Responsibility: 75.00									
3 Patient #3 Name									
Claim #: E0001355105 Pat. Acct. #: 13435593 Provider: ABC Hospital Network: Sample Network Issued: MMDDYYYY									
ANCILLARY EXPENSE	MMDDYYYY	2,392.00	1,987.00	0.00	0.00	0.00	0.00	305.00	25.00 100.00 90% 901
Totals:		2,392.00	1,987.00	0.00	0.00	0.00	0.00	305.00	25.00
4 Patient Responsibility: 325.00									
4 Patient #4 Name									
Claim #: E00014959888 Pat. Acct. #: 10008855 Provider: Mainstreet Medical Group Network: Sample Network Issued: MMDDYYYY									
PHYSICIAN VISIT	MMDDYYYY	52.00	3.52	0.00	0.00	0.00	10.00	0.00	81.08 100% 901 0%
MISC SUPPLY	MMDDYYYY	75.00	0.00	75.00	0.00	0.00	0.00	0.00	0% 816 6%
Totals:		127.00	3.52	75.00	0.00	0.00	10.00	0.00	81.08
5 Patient Responsibility: 10.00									
5 Patient #5 Name									
Claim #: E00012334818 Pat. Acct. #: 1122334818 Provider: ABC Medical Center Network: Hospital Network Issued: MMDDYYYY									
ANCILLARY EXPENSE	MMDDYYYY	250.00	0.00	0.00	0.00	0.00	0.00	250.00	0.00 0% 901
Totals:		250.00	0.00	0.00	0.00	0.00	0.00	250.00	0.00
6 Patient Responsibility: 250.00									

Page 1 of EOB

What's in your EOB?

- Member and Group Information:** Your unique member and group information provides security. Be sure to check this information is correct.
- Service Date(s):** This is the date you received service from your provider or medical facility.
- What You May Owe:** The amount you need to pay your healthcare provider if you didn't pay at the time of services and the portion that's applied to your deductible.
- Statement Period:** Your Explanation of Benefits statement during a specific period of time. Check all dates for accuracy.

QUESTIONS? Call EVHC at 877-877-3496

Medical Benefits	Exclusive Non-CA PPO		Classic PPO	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
MEDICAL DEDUCTIBLE & MAX OF POCKET				
Deductible (Ded)	\$0/Individual \$0/Family	\$3,500/Individual \$10,500/Family	\$1,000/Individual \$3,000/Individual	\$3,000/Individual \$9,000/Family
Coinsurance (Paid by Plan)	70%	50%	80%	\$1/Family
Out-Of-Pocket Maximum (Includes Deductible, Coinsurance & Copays)	\$5,000/Individual \$10,000/Family	\$10,000/Individual \$20,000/Family	\$5,000/Individual \$10,000/Family	\$15,000/Individual \$30,000/Family
WELLNESS/PREVENTIVE (Routine Care)				
Physical Examinations	Covered in full	Ded then 50%	Covered in full	Ded then 60%
Well Child Care (Including Immunizations)	Covered in full	Ded then 50%	Covered in full	Ded then 60%
Diagnostic X-Ray & Laboratory	Covered in full	Ded then 50%	Covered in full	Ded then 60%
PHYSICIAN'S OFFICE VISITS				
Primary Care (Includes Lab & Xray)	\$30 Copay	Ded then 50%	\$35 Copay	Ded then 60%
Specialist Office (Includes Lab & Xray)	\$30 Copay	Ded then 50%	\$55 Copay	Ded then 60%
DIAGNOSTIC X-RAY & LABORATORY				
Physicians Office (without office visit)	100%	Ded then 50%	Ded then 80%	Ded then 60%
Specialist Office (without office visit)	100%	Ded then 50%	Ded then 80%	Ded then 60%
Labs				
Non-Hospital/Freestanding Facility	100%	Ded then 50%	Ded then 80%	Ded then 60%
Hospital (Facility Based)	70%	Ded then 50%	Ded then 80%	Ded then 60%
Xray				
Non-Hospital/Freestanding Facility	100%	Ded then 50%	Ded then 80%	Ded then 60%
Hospital (Facility Based)	70%	Ded then 50%	Ded then 80%	Ded then 60%
Advance Imaging Services				
Office	\$100 Copay	Ded then 50%	Ded then 80%	Ded then 60%
Non-Hospital/Freestanding Facility	70%	Ded then 50%	Ded then 80%	Ded then 60%
Hospital (Facility Based)	70%	Ded then 50%	Ded then 80%	Ded then 60%
HOSPITAL BENEFITS				
In-Patient	70%	Ded then 50%	Ded then 80%	Ded then 60%
Out-Patient Hospital	70%	Ded then 50%	Ded then 80%	Ded then 60%
Ambulatory Surgical Center	70%	Ded then 50%	Ded then 80%	Ded then 60%
Emergency Room (Waived If Admitted)	\$200 Copay	Same as In-Network	\$150 Copay then Ded then 80%	Same as In-Network
Urgent Care Facility	\$30 Copay	Ded then 50%	\$35 Copay	Ded then 60%
Retail Clinic	\$30 Copay	Ded then 50%	\$35 Copay	Ded then 60%
SURGICAL BENEFITS				
In-Patient	70%	Ded then 50%	Ded then 80%	Ded then 60%
Out-Patient	70%	Ded then 50%	Ded then 80%	Ded then 60%
ADDITIONAL MEDICAL BENEFITS				
Chiropractic Services	\$30 Copay	Ded then 50%	\$35 Copay	Ded then 60%
Ambulance	\$100 Copay	Same as In-Network	Ded then 80%	Same as In-Network
Durable Equipment & Supplies	80%	Ded then 50%	Ded then 80%	Ded then 60%
PRESCRIPTION DRUG CARD				
RX Deductible	N/A		N/A	
RX Out of Pocket Max	Combined with Medical Out of Pocket		Combined with Medical Out of Pocket	
Retail Pharmacy Copay	\$5 Lower Cost Generic \$15 Generic \$30 Preferred \$50 Non-Preferred		\$5 Lower Cost Generic \$20 Generic \$30 Preferred \$50 Non-Preferred	
	30% Coinsurance up to \$250 per Specialty script 2.5 times Retail Copay for 90 day supply		30% Coinsurance up to \$250 per Specialty script 2.5 times Retail Copay for 90 day supply	
Mail Order Copay				

	Classic CA EPO		Value CA EPO	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
MEDICAL DEDUCTIBLE & MAX OF POCKET				
Deductible (Ded)	\$0/Individual \$0/Family	N/A N/A	\$0/Individual \$0/Family	N/A N/A
Coinsurance (Paid by Plan)	80%	N/A	80%	N/A
Out-Of-Pocket Maximum (Includes Deductible, Coinsurance & Copays)	\$2,500/Individual \$5,000/Family	N/A N/A	\$3,500/Individual \$7,000/Family	N/A N/A
WELLNESS/PREVENTIVE (Routine Care)				
Physical Examinations	Covered in full	N/A	Covered in full	N/A
Well Child Care (Including Immunizations)	Covered in full	N/A	Covered in full	N/A
Diagnostic X-Ray & Laboratory	Covered in full	N/A	Covered in full	N/A
PHYSICIAN'S OFFICE VISITS				
Primary Care (Includes Lab & Xray)	\$20 Copay	N/A	\$20 Copay	N/A
Specialist Office (Includes Lab & Xray)	\$40 Copay	N/A	\$40 Copay	N/A
DIAGNOSTIC X-RAY & LABORATORY				
Physicians Office (without office visit)	100%	N/A	100%	N/A
Specialist Office (without office visit)	100%	N/A	100%	N/A
Labs				
Non-Hospital/Freestanding Facility	100%	N/A	100%	N/A
Hospital (Facility Based)	100%	N/A	80%	N/A
Xray				
Non-Hospital/Freestanding Facility	100%	N/A	100%	N/A
Hospital (Facility Based)	100%	N/A	80%	N/A
Advance Imaging Services				
Office	\$100 Copay	N/A	\$100 Copay	N/A
Non-Hospital/Freestanding Facility	\$100 Copay	N/A	80%	N/A
Hospital (Facility Based)	\$100 Copay	N/A	80%	N/A
HOSPITAL BENEFITS				
In-Patient	\$500 Copay	N/A	80%	N/A
Out-Patient Hospital	\$250 Copay	N/A	80%	N/A
Ambulatory Surgical Center	\$250 Copay	N/A	80%	N/A
Emergency Room (Waived If Admitted)	\$125 Copay	Same as In-Network	\$200 Copay	Same as In-Network
Urgent Care Facility	\$20 Copay	N/A	\$20 Copay	N/A
Retail Clinic	\$20 Copay	N/A	\$20 Copay	N/A
SURGICAL BENEFITS				
In-Patient	\$500 Copay	N/A	80%	N/A
Out-Patient	\$250 Copay	N/A	80%	N/A
ADDITIONAL MEDICAL BENEFITS				
Chiropractic Services	\$20 Copay	N/A	\$20 Copay	N/A
Ambulance	\$100 Copay	Same as In-Network	\$100 Copay	Same as In-Network
Durable Equipment & Supplies	80%	N/A	80%	N/A
PRESCRIPTION DRUG CARD				
RX Deductible	N/A		N/A	
RX Out of Pocket Max	Combined with Medical Out of Pocket		Combined with Medical Out of Pocket	
Retail Pharmacy Copay	\$5 Lower Cost Generic \$15 Generic \$30 Preferred \$50 Non-Preferred		\$5 Lower Cost Generic \$20 Generic \$40 Preferred \$60 Non-Preferred	
Mail Order Copay	30% Coinsurance up to \$250 per Specialty script 2.5 times Retail Copay for 90 day supply		30% Coinsurance up to \$250 per Specialty script 2.5 times Retail Copay for 90 day supply	

Have a video visit with a doctor or therapist at home

Using LiveHealth Online, you can have a private video visit on your smartphone, tablet or computer.



If you need care for a health issue, or support if you're feeling anxious or having trouble coping on your own, LiveHealth Online is ready to help. You can stay home and have a video visit with a board-certified doctor or licensed therapist on your smartphone, tablet or computer.

By using LiveHealth Online, you can

- **See a board-certified doctor in a few minutes with no appointment.** Doctors are available 24/7 to assess your condition and, if it's needed, they can send a prescription to your local pharmacy.¹ When your own doctor isn't available, use LiveHealth Online if you have pinkeye, a cold, the flu, a fever, allergies, a sinus infection or another common health condition.
- **Make an appointment with a licensed therapist in four days or less.**² You can have a video visit with a therapist from home, at work or on the go — evenings and weekend appointments are available too. Appointments can be scheduled online or over the phone at **1-888-548-3432** from 7 a.m. to 7 p.m., seven days a week. You can get help for anxiety, depression, grief, panic attacks and more.

What will a visit cost?

Your Anthem plan includes benefits for video visits using LiveHealth Online, so you'll just pay your share of the costs — usually \$59 or less for medical doctor visits, and a 45-minute therapy session usually costs the same as an office therapy visit.

Sign up for LiveHealth Online today — it's quick and easy

Go to livehealthonline.com or download the app and register on your phone or tablet.





CHRONIC CONDITION MANAGEMENT PLUS

An integrated approach to managing multiple chronic conditions



Treating the whole person is the key to lasting change

The impact of living with multiple chronic conditions is profound. Not only does it affect health and well-being, but it also contributes exponentially to the rising cost of healthcare.

Bringing together the best of hypertension, diabetes, prediabetes and weight management, then integrating it with mental health, can inspire lasting change.¹ It starts with a data-driven approach that leverages billions of data points to engage members effectively—no matter which condition, or conditions, they have. Connected devices and expert coaching offer comprehensive and personalized support for multiple conditions.

The impact of chronic conditions

48%

OF PEOPLE WITH CHRONIC CONDITIONS SAY MENTAL HEALTH ISSUES WERE A RESULT OF OR NEGATIVELY IMPACTED THEIR CHRONIC CONDITION²

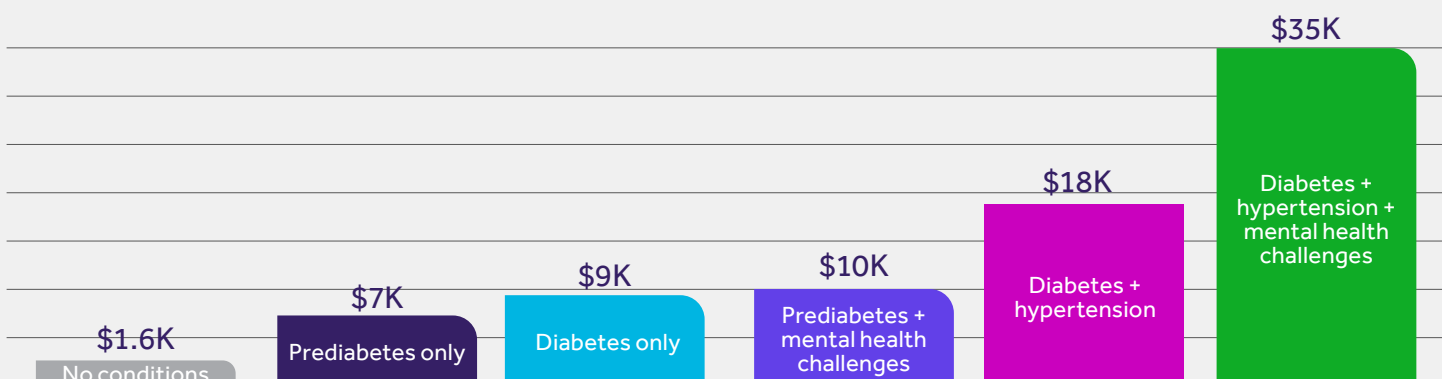
78%

PREFER A SINGLE, UNIFIED EXPERIENCE TO MANAGE THEIR HEALTH³

21x

ANNUAL COST PER PERSON WITH THREE CHRONIC CONDITIONS COMPARED TO THOSE WITH NONE⁴

Annual direct healthcare costs per person⁵





A connected approach to chronic conditions

Three solutions—each characterized by an anchor condition—offer an effective way to manage multiple health challenges and up to \$180 PPPM in cost savings⁵

- Diabetes Management Plus also includes tools to manage hypertension, weight and mental health
- Hypertension Management Plus also includes tools to manage weight and mental health
- Prediabetes Management Plus also includes tools to manage hypertension, weight and mental health

Key features

Connected devices

- **Relevant devices available** for each program
- **Unlimited supplies**, test strips and lancets
- **Data collected in one place** for a unified experience

Personalized health signals

- **HealthNudges™** deliver calls to action when people are most receptive
- **Remote outreach and assistance** in the case of extreme blood glucose readings
- **Action plans** guide members based on health goals across conditions

Expert coaching

- **Certified coaches** provide support in their areas of expertise
- **Dedicated coach** across conditions provides members with long-term guidance and access
- **Mental health** support which includes digital therapeutics and licensed coaching all the way through crisis management

Measurable clinical outcomes

2.1%

AVERAGE A1C REDUCTION FOR MEMBERS WITH STARTING A1C >8% AND SUSTAINED OVER 5+ YEARS⁷

13-point

AVERAGE SYSTOLIC BLOOD PRESSURE REDUCTION AFTER ONE YEAR⁸

5%

AVERAGE WEIGHT LOSS FOR MEMBERS AFTER ONE YEAR⁹

¹Data on file (DS-10502, 2022)

²Chronic Condition Consumer Study, Teladoc Health, 2022

³Mental Health Research Report: Consumer experience with mental health services, Teladoc Health, 2022

⁴Data on file (DS-4266)

⁵Ibid.

⁶Savings based on diabetes anchor condition using multi-condition ROI methodology, white paper available upon request

⁷Data on file (DS-10609 for members starting A1c ≥ greater than 8, 2022)

⁸Data on file (DS-8290 for members starting in Stage 2, 2021)

⁹Data on file (DS-12600 for highly engaged members starting with BMI ≥ 30, 2022)

LEARN MORE: TeladocHealth.com | engage@teladochealth.com

About Teladoc Health: Teladoc Health is empowering all people everywhere to live healthier lives by transforming the healthcare experience. Recognized as the world leader in whole-person virtual care, Teladoc Health leverages clinical expertise, advanced technology and actionable data insights to meet the evolving needs of consumers and healthcare professionals.

Teladoc
HEALTH



CRX International is a voluntary international mail order option. To be eligible for the CRX International program, you must be an existing member of a health insurance plan that currently has CRX International implemented as an additional option for prescription medication coverage.



FREE Brand-Name Medications



No Shipping and Handling Charges to You!



SAVINGS.

SIMPLE.

SAFE.

Who is CRX International?

With our program, you pay **\$0** in copays and your medications are shipped right to your door for **FREE**. How? Your health plan pays less for the medication and shares these savings with you.

We're the easy way for you to get prescription medications. CRX International offers hundreds of brand-name maintenance medications that you can get — **copay-free** — in just a few easy steps.

Medications are shipped direct to you from licensed and regulated pharmacies located in Canada, the United Kingdom and Australia. All medications are backed by a Quality Assurance Team of doctors and pharmacists, as well as 20-plus years of experience in the industry.

**Ready to
Start Saving?**

**ENROLL
TODAY!**

1-866-488-7874 | crxintl.com



**YES, IT'S FREE! ...and
IT'S THAT EASY!**



WOULD YOU?

...like to receive a 90-day supply of your medication delivered to you instead of every month?

Your employer added a great new benefit from PriceMDs to source your medication.

SCAN CODE TO LEARN MORE

**SCAN
HERE!**



THIS IS HOW

Simply point your phone camera on this QR code and follow the link to the 30 sec. video!

EASY TO START!

A PriceMDs RN will call and guide you through the easy process!

You or a family member are eligible for this benefit. You will receive the exact same medication and keep your existing treating physician. This benefit waives any copay you may be paying every month. You will be assigned a dedicated PriceMDs RN that will coordinate all your refills.

It's quick and it's easy to get started; just call one of the nurses listed below. You get to talk to a dedicated U.S. Registered Nurse anytime you want! No auto-attendants or messages; the RNs pick up their phones when you call!

Scheduling of **PREFERRED** Appointments!



DEDICATED NURSE

Your own personal U.S. licensed and trained Registered Nurse

FDA Approved

All medications are FDA approved and brand name only from exact same manufacturers as in the US with mandatory FDA worksheet that documents chain of custody.

NO Pre-Auth

No monthly pre-authorization or paperwork to determine eligibility. Your personal RN nurse navigator takes care of all paperwork for you.

FOUR MILLION

Annual imports of medication for personal use by U.S. patients

Second Opinion

This is a second opinion program with an international, US Boarded & Licensed MD & a US Boarded MD that is Licensed in the patient's state.

NO Obligation

You may return back to your usual method of refilling your prescription meds at any time if you are not satisfied with this program.

CALL OR TEXT YOUR NURSE NOW

 Moshe Damavandi RN
Direct Line 727-212-1211

 Rachel Kirkham RN
Direct Line 813-833-3267



PriceMDs RNs -nursing@pricemds.com



Contact us

Phone:

877-877-3496

Member Website

www.myEVHC.com