

Member Guide

Let's make the
most of your
benefits with
Imagine360

Plan Year 2026

CORE SELECT PLAN

| Monthly Rates | Core Select Plan |
|--|---|
| Employee Only | \$91.50 |
| Employee + Spouse | \$402.53 |
| Employee + Child(ren) | \$303.75 |
| Family | \$645.92 |
| Cost Sharing | |
| Deductible (family / individual) | \$0 / \$0 |
| Out-of-Pocket Maximum (family / individual) | \$9,100 / \$18,200 |
| Physician Services | |
| Primary Care / Specialty Care Visits | \$25 / \$50 |
| Preventive Care | Covered 100% in freestanding facility |
| Urgent Care | \$75 |
| Telemedicine (through plan vendor) | Covered 100% |
| Hospital Services | |
| Inpatient Hospital | \$750 copay 5 days & 2 surgeries per plan year |
| Outpatient Hospital and Surgery | \$350 copay 1 visit & 1 surgery per plan year |
| Emergency Room Services | \$750 copay 1 visit per plan year |
| Maternity Facility/Physician | \$1,500 / \$350 copay |
| Imaging & Diagnostic | |
| Advanced Imaging Services | \$350 per visit 1 service per plan year |
| Diagnostic Testing (labs & x-rays) | \$50 copay |
| Prescription Benefits | |
| Preventive Generic / Generic | \$0 / \$10 copay |
| Preferred / Non-Preferred Brand | Not Covered / Not Covered |
| Specialty | Not Covered |
| Supplies | |
| C-PAP / Sleep Study (through ConnectDME) | \$400 copay per device / \$350 per study |
| Diabetic Education and Supplies (ConnectDME) | \$35 copay per kit |
| Durable Medical Equipment | Not Covered |
| Other Medical Services | |
| Home Health Care | \$50 copay 10 visits per plan year |
| Chiropractic Care | \$75 copay 10 visits per plan year |
| Hospice Care | Not Covered |
| Infertility | Not Covered |
| Dialysis | Not Covered |
| Chemo & Radiation Therapy | Not Covered |

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Action Items

Register

With miBenefits

Register with the miBenefits portal as soon as your plan goes live to begin accessing your benefits all in one place.

[Click Here](#)

Locate

Providers

Find providers within your area that work well with your health plan by contacting the Member Experience team.

[Click Here](#)

Transition

Of Care

If you have an existing condition or active treatment plan, Imagine360 ensures your medical care continues smoothly.

[Click Here](#)

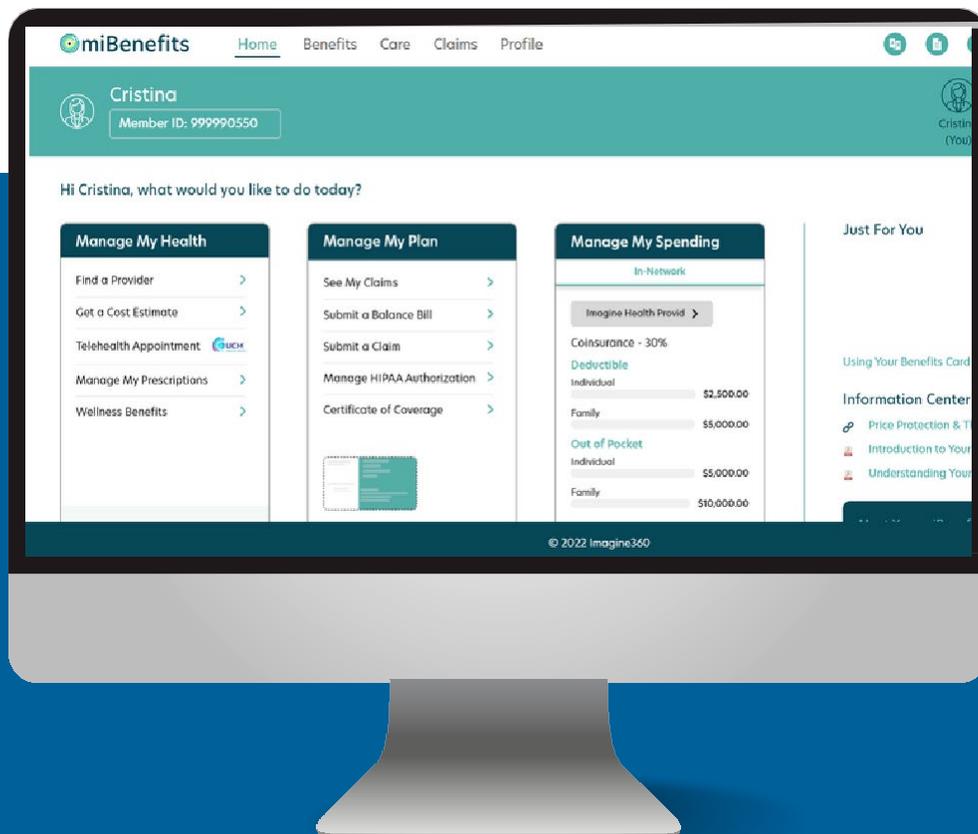


miBenefits

Get 24/7 access to your health plan with Imagine360's online portal and mobile app (i360 miBenefits).

Once your plan is active, create your account at mibenefits.imagine360.com

- Find and compare providers
- Track prescription refills
- View your medical benefits
- Replace your ID card
- Track your spending
- Review and monitor claims



Locate Providers

Need Help Finding a Provider?

Let the Member Experience Team guide you to the right provider. Call the number on the front of your ID card (800-457-4509) for personalized support in comparing providers based on your specific needs. The Member Experience team will help you make informed decisions, ensuring you get the best care at the right price.

Partners Direct Health Network

Easily find in-network providers with the Partners Direct search tool.

[Click Here](#)

HealthSmart Network

Use the HealthSmart search tool to locate quality providers in your area.

[Click Here](#)

Ensure Seamless Care During Your Health Plan Transition

If you have an existing condition or active treatment plan, The Member Experience Team ensures your medical care continues smoothly. Call the number on the front of your ID card if you or any covered family members:



01

Are undergoing medical treatment.

02

Have a complex medical condition.

03

Have a scheduled procedure within 30 days of your coverage start date.

Flexible Care with Open-Access and Cost Control

Your plan is **Open-Access**, giving you the freedom to *see any healthcare provider you choose*. Imagine360 doesn't rely on a traditional network but instead offers access to **logo** and **non-logo providers**. While you can visit both, using a logo provider ensures the lowest possible costs for your care.

Logo Provider

Logo providers are part of the Imagine360 preferred pricing through Partners Direct Health and HealthSmart networks. Choosing a logo provider ensures you get the best rates and keep your costs as low as possible.

To Find a Logo Provider:

[Partners Direct Health Provider Search](#)

[HealthSmart Provider Search](#)

Non-Logo Provider

Non-logo providers are still covered under your plan but may not follow the same preferred pricing. While Imagine360 will help manage these costs, using a logo provider is the most cost-effective option.



Care In Action

Providers are often more familiar with traditional networks and may not immediately recognize how your plan works. **Don't worry—this is completely normal!** If you encounter any confusion or pushback from a provider, simply contact the Member Experience Team. They'll handle everything for you, from explaining your coverage to resolving any concerns, ensuring you receive the care you need without any hassle.



01

APPOINTMENT

Jane checks in at her doctor and is told that her insurance isn't accepted or is out-of-network.



02

IMAGINE360

Jane tells the front desk to call the number on the back of her ID card and the Imagine360 team takes it from there.



03

REIMBURSEMENT

Imagine360 explains provider reimbursement, which usually resolves any issues.



04

RESOLUTION

Imagine360 negotiates a Single Patient Contact or provides Jane with upfront payment via a virtual cash card.

Simplified Payments and Care Access

Single Patient Contracts

When you need care from a provider outside of Imagine360's preferred networks, **your first step is to contact the Member Experience Team by dialing the number on your ID card (800-457-4509).** Imagine360 will work directly with the provider to negotiate a fair price for your treatment, ensuring you get the care you need without unexpected or excessive costs, even if the provider is out-of-network.

Pre-Pay Virtual Payment Card

Imagine360 also simplifies the payment process through its Pre-Pay Virtual Payment Card.

Here's How it Works:



Pre-Authorization

Before your appointment, Imagine360 coordinates with your provider to determine the cost of your service.



Virtual Card Creation

Once approved, a virtual payment card is generated with the exact amount needed for your care.



Provider Payment

The provider uses the virtual card to receive immediate payment, eliminating out-of-pocket costs and avoiding the need for reimbursements.

Coverage Requirement

Important Coverage Requirement:

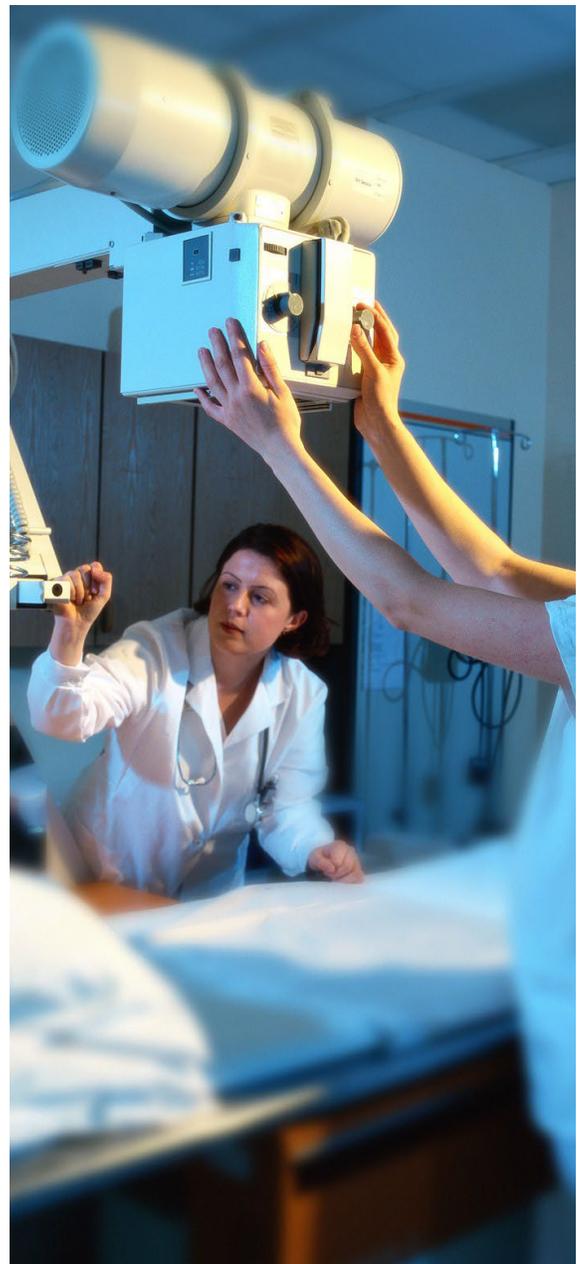
When scheduling any outpatient diagnostic testing—such as lab work, imaging, or other tests—it is required to use a Freestanding Facility for the service to be covered by the plan.

Definition of Freestanding Facility:

Freestanding Facilities are independent medical centers that are not owned by or attached to a hospital. They provide the same services but often at a lower cost, ensuring your care is both high-quality and affordable.

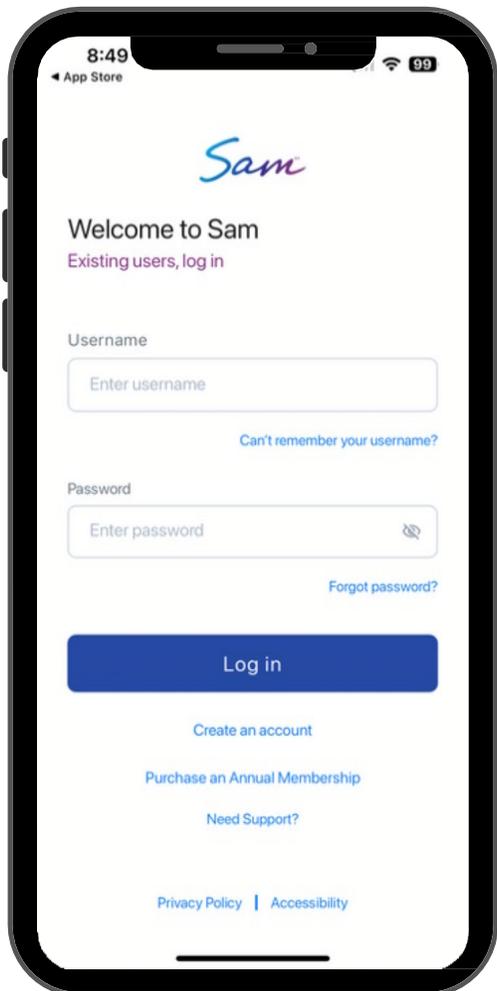
To Find a Freestanding Facility:

Call The Member Experience Team at 800-457-4509. They will help guide you to the best freestanding facility for your needs.



Telemedicine

UCM Digital Health provides 24/7 access to board-certified emergency medicine providers for all your medical needs—whether urgent, preventative, or ongoing care. You can consult a provider via phone, video, or the Sam by UCM app, offering flexible care on your terms.



How it Works

- **Contact UCM Digital Health:** Use the Sam app, website, or call 888-528-4655.
- **Consultation:** A provider will assess your symptoms and offer treatment or advice.
- **Treatment:** If necessary, prescriptions will be sent directly to your pharmacy. You can also get referrals for lab work or imaging if needed.

Important Disclaimer

To be covered by the plan, you must use UCM Digital Health for telemedicine services. Visits with other telemedicine providers or your primary care physician (PCP) for virtual care will not be covered under the plan.

Get Started

Download the Sam by UCM app or visit [imagine360.com/telehealth](https://www.imagine360.com/telehealth). Register today to access healthcare in the palm of your hand.

Prime Therapeutics

Prime Therapeutics is the pharmacy benefit manager (PBM) responsible for managing prescription drug benefits for your healthcare plan.

- **Prescription Coverage:** Prime Therapeutics manages your prescription drug benefits, ensuring coverage for a broad range of medications.
- **Pharmacy Network:** Access a nationwide network of pharmacies, including local and chain pharmacies, for easy and convenient prescription pickups.
- **Cost Savings:** Prime negotiates directly with drug manufacturers to help lower your medication costs, offering both brand-name and generic drug options.



Accessing Your Benefits

Simply present your pharmacy card at any participating pharmacy to fill your prescriptions. You can also manage your medications online through the Prime Therapeutics app.

For Any Rx Questions

Phone: 866-545-9428

Member Portal: [click here](#)

Rx Valet

Cost Support

Specialty Medications

By partnering with your health plan, Rx Valet ensures that members have access to and cost support for high-complexity, high-cost specialty medications needed for chronic or rare conditions. They offer a streamlined process for obtaining these medications, providing support through every step—from prescription to delivery.

To Get Started

Phone: 855-798-2538

Email: info@MyRxValet.com



FAQ's

How do I find a provider?

Call the number on your benefits ID card (800-457-4509), and the Member Experience Team will help you compare providers by location, quality ratings, and cost. They will also check if the provider works well with your plan.

My provider is asking me to pay upfront. What do I do?

The only out-of-pocket expense you should pay at the time of service is a copay or deductible. Ask the front desk to call The Member Experience Team at 800-457-4509 while you are still at your appointment.

My provider doesn't recognize my plan. Now what?

Explain that you have health benefits and request they call the number on your benefits ID card to verify eligibility (866-206-3224). You can call Imagine360 at that same number if you have any difficulties.

Provider FAQ's

What's the name of your insurance?

Your Response: Imagine360 is the claims administrator for my group benefits plan.

How do I confirm your eligibility?

Your Response: Please call the provider number on the back of my card (866-206-3224). It will just take a moment to talk with a plan representative.

Where do we submit your claims?

Your Response: The address for submitting claims is noted on the back of my benefits ID card.

Resources

Member Experience

Phone: 800-457-4509

miBenefits Portal: [click here](#)

App: i360 miBenefits

Prime Therapeutics

Phone: 866-545-9428

Prime Portal: [click here](#)

UCM Digital Health

Phone: 888-528-4655

Web: [click here](#)

App: Sam By UCM Mobile App

Rx Valet

Phone: 855-798-2538

Email: info@MyRxValet.com
