

Group Proposal:

Minimum Essential Coverage with Rx and Healthcare2U's DPCplus

Delivering Coast-to-Coast Meaningful Essential Coverage™ to Employers





Non-Compliance Penalties

The Employer Mandate: Penalty A*

Employers must offer at least Minimum Essential Coverage (MEC) to at least 95 percent of its ACA full-time employees and their dependents. Non-Compliance will generally result in a penalty of \$2,900 PER eligible employee in 2025.

The Employer Mandate: Penalty B*

Employers must offer a Minimum Value (MV) plan that meets 60 percent actuarial value, including hospitalization services. The MV plan must be offered at a maximum contribution of 9.02 percent of the employee's income in 2025 – employers pay the difference.

Example:

A minimum wage employee - An employee making \$10 an hour who works a minimum of 30 hours per week, has a maximum employee contribution of \$117.26 per month. If the plan cost is \$400, employers pay the difference of \$282.74 per month

Non-compliance in 2025 will result in a \$4,350 penalty per employee that enrolls in coverage through the state exchange and receives a premium subsidy.

*The Employer Mandate applies to employers with 50 or more full-time employees and/or full-time equivalents. Nothing in this proposal should be construed as legal advice. This product does not satisfy Minimum Value.

The Solution

Healthcare2U and S&S Health's experts have developed a cost-conscious plan offering employers an affordable solution to help eliminate penalties.

S&S Health is Affordable

Beginning with the provisions of the ACA, many MEC administrators developed programs with unnecessary benefit add-ons, which created an unaffordable MEC program. S&S Health eliminates unnecessary add-ons and provide you with a low-cost MEC solution without excessive fees and additions.

S&S Health is Offered Through Experienced Brokers and Agents

Many companies did not offer benefits prior to the federal regulations mandating group health coverage. As a result, agents or brokers with limited expertise in group health consulting were retained to create a compliant benefit solution. In contrast, S&S Health's MEC product is only offered through approved brokers in the group health insurance industry.

S&S Health is the Complete Solution

Many organizations implement a strategy without any regard to the new 1094/1095 reporting provisions. Their experts are capable of assisting, not only in plan administration, but also in the reporting of the benefits offered to the IRS.

About Us

S&S Healthcare Strategies (S&S Health)



S&S Health is leading the way to better healthcare with a reliable, rewarding approach to benefits. Healthcare isn't a one-size fits all, which is why for over 20 years, we've custom-built networks, programs and services designed to match the individual needs of our clients. We believe healthcare begins with empowered, engaged consumers with a mission to provide affordable solutions focused on member experience, cost savings, and monitoring to avoid penalties. We are experienced healthcare administrators who offer an end-to-end solution from implementation to enrollment and year-end reporting.

Healthcare2U | No-Claims Healthcare™

Healthcare2U is a non-insurance healthcare alternative that eliminates claims while providing convenient and affordable access to primary care. Through our proprietary Private Physician Network (PPN)™, Healthcare2U provides a unique patient-navigation platform which guides members through the healthcare system. Members receive access to our nationwide PPN for acute care at \$10 an in-office visit and \$25 for urgent care. For the same \$10 in-office fee, Healthcare2U also detects and manages 13 of the most prevalent chronic disease states. In addition, we offer round-the-clock telehealth for a \$0 visit fee and contract with our practitioners to practice generic-first protocols for pharmaceuticals.



S&S Health's Minimum Essential Coverage

By eliminating unnecessary add-ons, S&S Health provides groups with a low-cost Minimum Essential Coverage (MEC) without excessive fees and additions. S&S Health offers a complete solution for organizations by assisting in plan administration, and in IRS reporting data.

What is Minimum Essential Coverage (MEC)?

Minimum Essential Coverage is any insurance plan that meets the Affordable Care Act (ACA) requirement for having health coverage. To avoid the ACA penalties, employers must offer and employees must be enrolled in a plan that qualifies as Minimum Essential Coverage (sometimes called “qualifying health coverage”).

S&S Health Services Include

- MEC coverage of 72 preventative services
- Plan document
- ID cards
- Claims adjudication
- SBCs
- 1094/1095 Reporting data provided (filing services available)
- COBRA administration
- Member portal



Preventative Care

The Affordable Care Act requires all plans to cover certain preventative care services at no cost. These services include the following:

For All Adults

- Alcohol misuse screening and counseling
- Aspirin use
- Cholesterol screening
- Depression screening
- Type 2 diabetes screening
- Diet counseling
- HIV screening
- Obesity screening and counseling
- Sexually Transmitted Infection (STI) prevention counseling
- Syphilis screening
- Tobacco use screening
- Abdominal aortic aneurysm screening
- Colorectal cancer screening
- Immunization vaccines

For Children

- Autism screening
- Blood pressure screening
- Congenital hypothyroidism screening
- Developmental screening
- Dyslipidemia screening
- Gonorrhea preventative medication
- Hearing screening
- Height, weight and Body Mass Index (BMI) measurements
- Hematocrit or hemoglobin screening
- Hemoglobinopathies or sickle cell screening
- Immunization vaccines
- Iron supplements
- Medical history throughout development
- Oral health risk assessment
- Phenylketonuria (PKU) screening
- Tuberculin testing
- Alcohol and drug assessments
- Behavioral assessments
- Cervical dysplasia screening
- Depression screening
- Fluoride chemoprevention supplements
- HIV screening
- Lead screening
- Obesity screening and counseling
- Sexually Transmitted Infection (STI) prevention counseling
- Vision screening

For Women

- Anemia screening on a routine basis
- Bacteriuria (urinary tract or other urinary infection) screening
- Cervical cancer screening
- Chlamydia infection screening
- Domestic and interpersonal violence counseling
- Folic acid supplements
- Gonorrhea screening
- HIV screening and counseling
- Osteoporosis screening
- Sexually Transmitted Infection (STI) counseling
- Tobacco use screening and interventions
- Well-woman visits
- BRCA counseling
- Breast cancer mammography screening
- Breast cancer chemoprevention counseling
- Breast feeding support and counseling
- Contraception and patient education counseling
- Gestational diabetes screening
- Hepatitis B screening
- Human Papillomavirus (HPV) DNA testing
- Rh incompatibility screening
- Syphilis screening



Direct Primary Care *plus*

A Coast-to-Coast Healthcare Membership™ through Healthcare2U

Healthcare2U's nationwide Direct Primary Care plus (DPCplus) membership¹ caters to members through affordable and easy-to-access primary medical care. DPCplus is available when and where members need it via our PAL concierge and Private Physician Network (PPN)™. Through DPC, Healthcare2U breaks down barriers to quality primary care so members can focus on healthy living without the cost. Eligible members² receive the unlimited services listed below by contacting Healthcare2U's PAL concierge during business hours.³

Concierge & Patient Advocacy

Healthcare2U acts as a member's personal concierge through our bilingual Patient Advocacy Line (PAL)™. PAL is staffed by certified medical professionals who navigate care options and book appointments for our members and eligible participants.

In-Office Primary Care

Unlimited doctor visits with a \$10 visit fee.

Unlimited urgent care visits with a \$25 visit fee.

Annual physical⁴ with four labs: complete metabolic panel (CMP), complete blood count (CBC), thyroid stimulating hormone (TSH) and lipid panel for a \$0 visit fee.

24/7 Virtual Primary Care

Unlimited access to bilingual licensed medical providers online or by phone, 24/7/365 for minor illnesses and injuries for a \$0 visit fee.⁵

Chronic Disease Management

Unlimited treatment and management of 13 chronic disease states for the same \$10 visit fee. Healthcare2U accepts preexisting conditions within manageable ranges,⁶ including:

Anxiety	CHF	Fibromyalgia
Arthritis	COPD	GERD
Asthma	Depression	Gout
Blood Pressure	Diabetes	Hypertension
		Thyroid

Interested in lowering overall healthcare expenses?

Healthcare2U can be implemented in organizations of all sizes and structures

¹ Healthcare2U's Direct Primary Care (DPC) is a healthcare membership. DPC is not insurance and does not satisfy ACA minimum essential coverage.

² Individuals ages 2 to 65 are eligible for Healthcare2U's DPC membership, Dependents under the age of two are not eligible to enroll for Healthcare2U. Dependent children are eligible for membership until the last day of their 25th year. Individuals are eligible for membership until the last day of their 64th year.

³ No walk-ins allowed. Unlimited services (including Virtual DPC/telehealth) must be accessed through Healthcare2U's Patient Advocacy Line (PAL)™ and all care is provided through our physician network. In-office appointments are only available within business hours (Monday through Friday, 7 AM to 6 PM CST). Our PAL may direct the member to another level of care if appropriate, depending on the member's condition and utilization of services. Applicable visit fees apply. After hours? Members have the option to speak to a physician virtually.

⁴ Well-woman pap smear pathology interpretation is not included in the annual physical. Dependent on membership type, the annual physical may only be accessible after six consecutive months of membership.

⁵ Telehealth and discount programs are provided through third-party organizations and are not connected to Healthcare2U. Contact your agent for more information.

⁶ Healthcare2U does not provide specialty care outside of our partner-physician clinics. If Member currently sees a specialist for an advanced disease state, we do not recommend leaving that specialist.



SimpleScripts Rx

PRO PREMIUM-1 Medication Program

ACUTE and ACA-MEC Meds No-Cost!

**Plus 200 CHRONIC Drugs
for Only \$1 per Fill.**

Welcome to SimpleScripts Rx

As a member of SimpleScripts Rx, there is no need to worry about the high cost of over 130 commonly prescribed medications. That is because we created the **PRO PREMIUM-1 Medication Program** to include 37 ACUTE and 95 ACA (Affordable Care Act) medications at no cost, plus 200 routinely prescribed CHRONIC drugs for only \$1 per fill.

You can view all medications in this program along with their co-pays on the following pages. Feel free to take this formulary to your physician to help them prescribe a listed medication so you can stay within your budget.

This Program is Easy to Use

You will receive an email with a link to your personalized Rx Card and instructions on how to set up your online medicine cabinet. Your electronic Rx Card can also be found by logging onto our website at **www.SimpleScriptsRx.com**. Just click on your username in the upper-right and then click 'Membership Card.' This card may also be used for everyone in your family/household.

The Rx Card will display your BIN, PCN and Group Number to present to the pharmacist. You can present this card to virtually any retail pharmacy (over 70,000 in network) and if on the formulary, you'll pay the listed copay. If your medication is not on the formulary, your out-of-pocket cost is based on a deeply discounted price.

We also offer a **Prescription Assistance Program (PAP)** for many medications over \$200. If you are on one of these costly drugs, visit **SimpleScriptsRx.com** and chat with our Customer Care team to get the information you need. You could save hundreds, maybe thousands a year.

Rx savings are simple with SimpleScripts Rx.

Medications For:

- Allergy
- Arthritis/Pain
- Blood Pressure/Heart
- Cholesterol
- Cold/Cough
- Diabetes
- Men/Women's Health
- Mental Health
- Pink Eye
- and Much More!



Search



Select



Save

PRO PREMIUM-1 FORMULARY

[Click here for details on how the PRO PREMIUM-1 Medication Program works.](#)

NOTE: You can search for a drug by typing 'CTRL' or 'CMD' + F.

Brand Dosage Form	Retail Qty	HD Qty	Co-pay	Brand Dosage Form	Retail Qty	HD Qty	Co-pay
ACETAMINOPHEN WITH CODEINE 120-12 MG/5 SOLUTION	473	N/A	\$1	BUPROPION HCL 300 MG TABLET 24-HOUR ER	30	30	\$0
ACYCLOVIR 200 MG CAPSULE	30	90	\$1	BUPROPION HCL 75 MG TABLET	30	90	\$1
ALBUTEROL SULFATE 90 MCG HFA AEROSOL INHALER	N/A	18	\$1	BUPROPION SR 100 MG TABLET ER	60	180	\$0
ALBUTEROL SULFATE SYRUP 2 MG/5ML 2 MG/5 ML SYRUP	473	473	\$1	BUPROPION SR 150 MG TABLET ER	60	180	\$0
ALENDRONATE SODIUM 35 MG TABLET	4	12	\$1	BUPROPION SR 200 MG TABLET ER	60	180	\$0
ALLOPURINOL 100 MG TABLET	30	90	\$1	CARBAMAZEPINE 100 MG/5 ML SUSPENSION	150	450	\$1
ALLOPURINOL 300 MG TABLET	30	90	\$1	CARBINOXAMINE MALEATE 4 MG/5 ML LIQUID	118	118	\$1
ALPRAZOLAM 0.25 MG TABLET	30	N/A	\$1	CARVEDILOL 12.5 MG TABLET	30	90	\$1
ALPRAZOLAM 0.5 MG TABLET	30	N/A	\$1	CARVEDILOL 25 MG TABLET	30	90	\$1
ALPRAZOLAM 1 MG TABLET	30	N/A	\$1	CARVEDILOL 3.125 MG TABLET	30	90	\$1
AMLODIPINE BESYLATE 10 MG TABLET	30	90	\$1	CEPHALEXIN 250 MG CAPSULE	40	N/A	\$1
AMLODIPINE BESYLATE 2.5 MG TABLET	30	90	\$1	CEPHALEXIN 500 MG CAPSULE	40	N/A	\$1
AMLODIPINE BESYLATE 5 MG TABLET	30	90	\$1	CETIRIZINE HCL 1 MG/ML SOLUTION	150	450	\$1
AMLODIPINE BESYLATE/BENAZEPRIL 10 MG-20 MG CAPSULE	30	90	\$1	CETIRIZINE HCL 10 MG TABLET	30	90	\$1
AMLODIPINE BESYLATE/BENAZEPRIL 2.5 MG-10 MG CAPSULE	30	90	\$1	CHLORDIAZEPOXIDE HCL 10 MG CAPSULE	15	N/A	\$1
AMLODIPINE BESYLATE/BENAZEPRIL 5 MG-40 MG CAPSULE	30	90	\$1	CHLORDIAZEPOXIDE HCL 5 MG CAPSULE	15	N/A	\$1
AMOXICILLIN 125 MG/5 ML SUSPENSION FOR RECON	200	N/A	\$1	CHOLECALCIFEROL (VITAMIN D3) 1000 UNIT TABLET	30	90	\$0
AMOXICILLIN 200 MG/5 ML SUSPENSION FOR RECON	200	N/A	\$1	CHOLECALCIFEROL (VITAMIN D3) 400 UNIT TABLET	28	84	\$0
AMOXICILLIN 250 MG CAPSULE	30	N/A	\$0	CHOLECALCIFEROL (VITAMIN D3) 400/ML DROPS	50	150	\$0
AMOXICILLIN 250 MG/5 ML SUSPENSION FOR RECON	200	N/A	\$1	CIPROFLOXACIN HCL 500 MG TABLET	14	N/A	\$0
AMOXICILLIN 400 MG/5 ML SUSPENSION FOR RECON	200	N/A	\$1	CITALOPRAM HYDROBROMIDE 20 MG TABLET	30	90	\$1
AMOXICILLIN 400 MG/5 ML SUSPENSION FOR RECONSTITUTION	200	N/A	\$0	CITALOPRAM HYDROBROMIDE 40 MG TABLET	30	90	\$1
AMOXICILLIN 500 MG CAPSULE	30	N/A	\$0	CLONAZEPAM 0.5 MG TABLET	30	N/A	\$1
AMOXICILLIN 875 MG TABLET	20	N/A	\$0	CLONAZEPAM 1 MG TABLET	30	N/A	\$1
AMOXICILLIN/POTASSIUM CLAV 200-28.5/5 SUSPENSION FOR RECON	200	N/A	\$1	CLONAZEPAM 2 MG TABLET	30	N/A	\$1
AMOXICILLIN/POTASSIUM CLAV 400-57 MG/5 SUSPENSION FOR RECON	200	N/A	\$1	CLONIDINE HCL 0.1 MG TABLET	30	90	\$1
AMOXICILLIN/POTASSIUM CLAV 875-125 MG TABLET	14	N/A	\$0	CLONIDINE HCL 0.2 MG TABLET	30	90	\$1
ANASTROZOLE 1 MG TABLET	30	90	\$1	CLOPIDOGREL BISULFATE 75 MG TABLET	30	90	\$1
ASPIRIN 81 MG CHEWABLE TABLET	30	90	\$0	CYCLOBENZAPRINE HCL 10 MG TABLET	30	90	\$1
ASPIRIN 81 MG TABLET DR/EC	30	90	\$0	CYPROHEPTADINE HCL 2 MG/5 ML SYRUP	30	N/A	\$1
ATENOLOL 25 MG TABLET	30	90	\$1	CYPROHEPTADINE HCL 4 MG TABLET	21	N/A	\$0
ATENOLOL 50 MG TABLET	30	90	\$1	DESOG-E. ESTRADIOL/E. ESTRADIOL 21-5 TABLET	28	84	\$0
ATORVASTATIN CALCIUM 10 MG TABLET	30	90	\$0	DESOGESTREL-ETHINYL ESTRADIOL 0.15-0.03 TABLET	28	84	\$0
ATORVASTATIN CALCIUM 20 MG TABLET	30	90	\$0	DESOGESTREL-ETHINYL ESTRADIOL 7 DAYS X 3 TABLET	28	28	\$0
AZITHROMYCIN 250 MG TABLET	6	N/A	\$0	DEXAMETHASONE SOD PHOSPHATE 0.5 MG TABLET	30	90	\$1
AZITHROMYCIN 500 MG TABLET	6	N/A	\$0	DEXAMETHASONE SOD PHOSPHATE 0.5 MG/5 ML ELIXIR	30	90	\$1
BACITRACIN 500 UNIT/G OINTMENT	28	N/A	\$0	DIABETIC TESTING SUPPLIES N/A STRIP	N/A	100	\$1
BACLOFEN 20 MG TABLET	30	90	\$1	DIAZEPAM 10 MG TABLET	30	N/A	\$1
BD NEEDLES 18G X 1&1/2" NEEDLE	N/A	100	\$1	DIAZEPAM 2 MG TABLET	30	N/A	\$1
BD NEEDLES 27G X 1/2" NEEDLE	N/A	100	\$1	DIAZEPAM 5 MG TABLET	30	N/A	\$1
BENZONATATE 100 MG CAPSULE	30	N/A	\$0	DICYCLOMINE HCL 10 MG CAPSULE	30	90	\$1
BENZONATATE 200 MG CAPSULE	15	N/A	\$0	DICYCLOMINE HCL 20 MG TABLET	30	90	\$1
BISAC/NACL/NAHCO3/KCL/PEG 3350 5 MG-210 G KIT	1	1	\$0	DIPHENHYDRAMINE HCL 50 MG CAPSULE	30	N/A	\$1
BUPROPION HCL 100 MG TABLET	30	30	\$0	DOXEPIN HCL 10 MG/ML CONCENTRATE	30	90	\$1
BUPROPION HCL 150 MG TABLET 12-HOUR SR	60	60	\$0	DULOXETINE HCL 20 MG CAPSULE DR/EC	30	90	\$1
BUPROPION HCL 150 MG TABLET 24-HOUR ER	30	30	\$0	EMTRICITABINE/TENOFOVIR 200-300 MG TABLET	30	90	\$0

PRO PREMIUM-1 FORMULARY

[Click here for details on how the PRO PREMIUM-1 Medication Program works.](#)

Brand Dosage Form	Retail Qty	HD Qty	Co-pay	Brand Dosage Form	Retail Qty	HD Qty	Co-pay
ESCITALOPRAM OXALATE 10 MG TABLET	30	90	\$1	LAMOTRIGINE 200 MG TABLET	30	90	\$1
ESCITALOPRAM OXALATE 5 MG TABLET	30	90	\$1	LAMOTRIGINE 25 MG TABLET	30	90	\$1
ETHINYL ESTRADIOL/DROSPIRENONE 0.02-3(24) TABLET	28	28	\$0	LANCETS 33 GAUGE LANCETS	N/A	100	\$1
ETHINYL ESTRADIOL/DROSPIRENONE 0.03 MG-3 MG TABLET	28	84	\$0	LANCETS N/A BOX	N/A	100	\$1
ETHYNODIOL D-ETHINYL ESTRADIOL 1 MG-35 MCG TABLET	28	28	\$0	LEVAlBUTEROL TARTRATE 45 MCG HFA AEROSOL INHALER	N/A	15	\$1
ETHYNODIOL D-ETHINYL ESTRADIOL 1 MG-50 MCG TABLET	28	28	\$0	LEVETIRACETAM 250 MG TABLET	30	90	\$1
FLUCONAZOLE 150 MG TABLET	1	N/A	\$0	LEVONORGESTREL 1.5 MG TABLET	28	84	\$0
FLUOXETINE HCL 20 MG CAPSULE	30	90	\$1	LEVONORGESTREL-ETHIN ESTRADIOL 0.1-0.02 TABLET	28	84	\$0
FOLIC ACID 0.8 MG CAPSULE	30	30	\$0	LEVONORGESTREL-ETHIN ESTRADIOL 0.15-0.03 3 MONTH TABLET DOSE PACK	91	91	\$0
FOLIC ACID 0.8 MG TABLET	30	90	\$0	LEVONORGESTREL-ETHIN ESTRADIOL 0.15-0.03 TABLET	28	84	\$0
FOLIC ACID 1 MG TABLET	30	90	\$1	LEVONORGESTREL-ETHIN ESTRADIOL 6-5-10 TABLET	28	84	\$0
FUROSEMIDE 10 MG/ML SOLUTION	30	90	\$1	LEVOTHYROXINE SODIUM 175 MCG TABLET	30	90	\$1
FUROSEMIDE 20 MG TABLET	30	90	\$1	LEVOTHYROXINE SODIUM 25 MCG TABLET	30	90	\$1
FUROSEMIDE 40 MG TABLET	30	90	\$1	LISINAPRIL 10 MG TABLET	30	90	\$1
GABAPENTIN 100 MG CAPSULE	30	90	\$1	LISINAPRIL 2.5 MG TABLET	30	90	\$1
GABAPENTIN 300 MG CAPSULE	30	90	\$1	LISINAPRIL 20 MG TABLET	30	90	\$1
GLIMEPIRIDE 2 MG TABLET	30	90	\$1	LISINAPRIL 30 MG TABLET	30	90	\$1
GLIMEPIRIDE 4 MG TABLET	30	90	\$1	LISINAPRIL 40 MG TABLET	30	90	\$1
GLIPIZIDE 2.5 MG TABLET 24-HOUR ER	30	90	\$1	LISINAPRIL 5 MG TABLET	30	90	\$1
GLIPIZIDE 5 MG TABLET	30	90	\$1	LISINAPRIL/HYDROCHLOROTHIAZIDE 20 MG-25 MG TABLET	30	90	\$1
GLYBURIDE 1.25 MG TABLET	30	90	\$1	LISINAPRIL/HYDROCHLOROTHIAZIDE 20-12.5 MG TABLET	30	90	\$1
GLYBURIDE,MICRONIZED 1.5 MG TABLET	15	45	\$1	LITHIUM CARBONATE 150 MG CAPSULE	30	90	\$1
GUAIFENESIN 200 MG TABLET	10	N/A	\$1	LITHIUM CARBONATE 300 MG CAPSULE	30	90	\$1
GUAIFENESIN/CODEINE PHOSPHATE 100-10 MG/5 LIQUID	118	N/A	\$0	LITHIUM CARBONATE 300 MG TABLET ER	30	90	\$1
HYDRALAZINE HCL 10 MG TABLET	30	90	\$1	LITHIUM CARBONATE 600 MG CAPSULE	30	90	\$1
HYDRALAZINE HCL 25 MG TABLET	30	90	\$1	L-NORGEST/E.ESTRADIOL-E.ESTRAD 100-20(84) 3 MONTH TABLET DOSE PACK	91	91	\$0
HYDRALAZINE HCL 50 MG TABLET	30	90	\$1	LORAZEPAM 0.5 MG TABLET	30	N/A	\$1
HYDROCHLOROTHIAZIDE 25 MG TABLET	30	90	\$1	LORAZEPAM 1 MG TABLET	30	N/A	\$1
HYDROCHLOROTHIAZIDE 50 MG TABLET	30	90	\$1	LOVASTATIN 10 MG TABLET	30	90	\$0
HYDROCODONE/ACETAMINOPHEN 10 MG-300 MG TABLET	12	N/A	\$0	LOVASTATIN 20 MG TABLET	30	90	\$0
HYDROCORTISONE 1% CREAM	28	N/A	\$0	LOVASTATIN 40 MG TABLET	30	90	\$0
HYDROCORTISONE 2.5% CREAM AND GEL COMBO PACK (TOPICAL)	30	90	\$1	MECLIZINE HCL 12.5 MG TABLET	20	60	\$1
HYDROCORTISONE 5 MG TABLET	30	90	\$1	MECLIZINE HCL 25 MG TABLET	20	60	\$1
HYDROXYZINE HCL 10 MG/5 ML SOLUTION	60	180	\$1	MEDROXYPROGESTERONE ACETATE 10 MG TABLET	28	84	\$0
HYDROXYZINE HCL 50 MG TABLET	20	60	\$1	MEDROXYPROGESTERONE ACETATE 150 MG/ML SUSPENSION	1	1	\$0
HYDROXYZINE PAMOATE 25 MG CAPSULE	20	60	\$1	MEDROXYPROGESTERONE ACETATE 2.5 MG TABLET	30	90	\$1
HYDROXYZINE PAMOATE 50 MG CAPSULE	20	60	\$1	MELOXICAM 15 MG TABLET	30	90	\$1
IBUPROFEN 400 MG TABLET	20	N/A	\$0	MELOXICAM 7.5 MG TABLET	30	90	\$1
IBUPROFEN 600 MG TABLET	20	N/A	\$0	METFORMIN HCL 1000 MG TABLET	30	90	\$1
IBUPROFEN 800 MG TABLET	20	N/A	\$0	METFORMIN HCL 500 MG TABLET	30	90	\$1
IMIPRAMINE HCL 10 MG TABLET	30	90	\$1	METFORMIN HCL 750 MG TABLET 24-HOUR ER	30	90	\$1
INFLUENZA VACCINE INJECTION VACCINE	1	N/A	\$0	METFORMIN HCL ER 500 MG TABLET 24-HOUR ER	30	90	\$1
IPRATROPIUM/ALBUTEROL SULFATE 0.5-3 MG/3 SOLUTION FOR NEBULIZATION	90	270	\$1	METHADONE HCL 10 MG TABLET	30	N/A	\$1
IRON PS CMLPX/VIT B12/FA 150-25-1 CAPSULE	30	90	\$1	METHYLPREDNISOLONE 4 MG TABLET	21	N/A	\$0
KETOCONAZOLE 200 MG TABLET	20	60	\$1	METHYLPREDNISOLONE 4 MG TABLET DOSE PACK	21	N/A	\$1
LACTULOSE 10 GRAM/15 ML SOLUTION	1	3	\$1	METOPROLOL TARTRATE 25 MG TABLET	30	90	\$1

PRO PREMIUM-1 FORMULARY

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Brand Dosage Form	Retail Qty	HD Qty	Co-pay	Brand Dosage Form	Retail Qty	HD Qty	Co-pay
METRONIDAZOLE 500 MG TABLET	21	N/A	\$0	PEDI MVI NO.16 WITH FLUORIDE 0.25 MG CHEWABLE TABLET	30	30	\$0
MONTELUKAST SODIUM 10 MG TABLET	30	90	\$1	PEDI MVI NO.16 WITH FLUORIDE 0.5 MG CHEWABLE TABLET	30	30	\$0
NAPROXEN 250 MG TABLET	30	N/A	\$0	PEDI MVI NO.16 WITH FLUORIDE 1 MG CHEWABLE TABLET	15	45	\$0
NAPROXEN 375 MG TABLET	20	N/A	\$0	PEG 3350/NA SULF,BICARB,CL/KCL 236-22.74 G RECON SOLUTION	4000	4000	\$0
NAPROXEN 500 MG TABLET	20	N/A	\$0	PEG 3350/NA SULF,BICARB,CL/KCL 240-22.72 G RECON SOLUTION	4000	4000	\$0
NAPROXEN SODIUM 220 MG TABLET	30	90	\$1	PEN NEEDLES BD PEN NEEDLES 29G X 1/2"	N/A	100	\$1
NICOTINE 14 MG/24 HR 24-HOUR PATCH	21	14	\$0	PEN NEEDLES BD PEN NEEDLES 31G X 1/2"	N/A	100	\$1
NICOTINE 21 MG/24 HR 24-HOUR PATCH	7	42	\$0	PEN NEEDLES BD PEN NEEDLES 32G X 1/2"	N/A	100	\$1
NICOTINE 7 MG/24 HR 24-HOUR PATCH	14	14	\$0	PEN NEEDLES BD PEN NEEDLES 4MM 32G	N/A	100	\$1
NICOTINE POLACRILEX 2 MG GUM	100	110	\$0	PHENDIMETRAZINE TARTRATE 35 MG TABLET	30	N/A	\$1
NICOTINE POLACRILEX 2 MG LOZENGE	72	72	\$0	POLYMYXIN B SULF/TRIMETHOPRIM 1 MG / 10,000 UNITS EYE DROPS	10	N/A	\$1
NICOTINE POLACRILEX 4 MG GUM	100	110	\$0	POLYMYXIN B SULF/TRIMETHOPRIM 10000-1/ML DROPS	10	N/A	\$0
NICOTINE POLACRILEX 4 MG LOZENGE	72	72	\$0	PRAVASTATIN SODIUM 10 MG TABLET	30	90	\$0
NONOXYNOL 9 3% GEL	30	81	\$0	PRAVASTATIN SODIUM 20 MG TABLET	30	90	\$0
NORETHINDRONE 0.35 MG TABLET	28	84	\$0	PRAVASTATIN SODIUM 40 MG TABLET	30	90	\$0
NORETHINDRONE AC-ETH ESTRADIOL 1 MG-20 MCG TABLET	21	63	\$0	PRAVASTATIN SODIUM 80 MG TABLET	30	90	\$0
NORETHINDRONE AC-ETH ESTRADIOL 1.5-0.03 MG TABLET	21	63	\$0	PREDNISON 1 MG TABLET	30	90	\$1
NORETHINDRONE-E.ESTRADIOL-IRON 1 MG-20(21) TABLET	28	84	\$0	PREDNISON 10 MG TABLET	30	N/A	\$0
NORETHINDRONE-E.ESTRADIOL-IRON 1 MG-20(24) TABLET	28	84	\$0	PREDNISON 2.5 MG TABLET	30	90	\$1
NORETHINDRONE-E.ESTRADIOL-IRON 1.5-30(21) TABLET	28	84	\$0	PREDNISON 20 MG TABLET	30	90	\$1
NORETHINDRONE-E.ESTRADIOL-IRON 5-7-9-7 TABLET	28	28	\$0	PREDNISON 5 MG TABLET	30	90	\$1
NORETHINDRONE-ETHINYL ESTRAD 0.4-0.035 TABLET	28	84	\$0	PREDNISON 50 MG TABLET	30	N/A	\$0
NORETHINDRONE-ETHINYL ESTRAD 0.5-0.035 TABLET	28	28	\$0	PRILOSEC 20 MG CAPSULE DR/EC	30	90	\$1
NORETHINDRONE-ETHINYL ESTRAD 1 MG-35 MCG TABLET	28	84	\$0	PROMETHAZINE HCL 12.5 MG TABLET	30	90	\$1
NORETHINDRONE-ETHINYL ESTRAD 7-9-5 TABLET	28	84	\$0	PROMETHAZINE HCL 25 MG TABLET	30	90	\$1
NORGESTIMATE-ETHINYL ESTRADIOL 0.25-0.035 TABLET	28	84	\$0	PROMETHAZINE HCL 6.25 MG/5 ML SYRUP	240	N/A	\$1
NORGESTIMATE-ETHINYL ESTRADIOL 7DAYSX3 28 TABLET	28	84	\$0	PROMETHAZINE HCL/CODEINE 6.25-10/5 SYRUP	240	N/A	\$1
NORGESTIMATE-ETHINYL ESTRADIOL 7DAYSX3 LO TABLET	28	84	\$0	PROMETHAZINE/DEXTROMETHORPHAN 6.25-15 MG/5 ML SYRUP	240	N/A	\$1
NORGESTREL-ETHINYL ESTRADIOL 0.3-0.03 MG TABLET	28	84	\$0	ROSUVASTATIN CALCIUM 10 MG TABLET	30	90	\$0
NORGESTREL-ETHINYL ESTRADIOL 0.5 MG-50 TABLET	28	28	\$0	ROSUVASTATIN CALCIUM 5 MG TABLET	30	90	\$0
NORTRIPTYLINE HCL 25 MG CAPSULE	30	90	\$1	SERTRALINE HCL 100 MG TABLET	30	90	\$1
NORTRIPTYLINE HCL 75 MG CAPSULE	30	90	\$1	SERTRALINE HCL 25 MG TABLET	30	90	\$1
OFLOXACIN 0.3% DROPS	5	N/A	\$0	SERTRALINE HCL 50 MG TABLET	30	90	\$1
OLMESARTAN MEDOXOMIL 20 MG TABLET	30	90	\$1	SILDENAFIL CITRATE 100 MG TABLET	N/A	72	\$1
OLMESARTAN MEDOXOMIL 40 MG TABLET	30	90	\$1	SILDENAFIL CITRATE 50 MG TABLET	N/A	72	\$1
OMEPRAZOLE 10 MG CAPSULE DR/EC	30	90	\$1	SIMVASTATIN 10 MG TABLET	30	90	\$0
OMEPRAZOLE 40 MG CAPSULE DR/EC	30	90	\$1	SIMVASTATIN 20 MG TABLET	30	90	\$0
OXYCODONE HCL 10 MG TABLET	30	N/A	\$1	SIMVASTATIN 40 MG TABLET	30	90	\$0
PANTOPRAZOLE SODIUM 20 MG TABLET DR/EC	30	90	\$1	SIMVASTATIN 5 MG TABLET	30	90	\$0
PANTOPRAZOLE SODIUM 40 MG TABLET DR/EC	30	90	\$1	SIMVASTATIN 80 MG TABLET	30	90	\$0
PAROXETINE HCL 10 MG TABLET	30	90	\$1	SODIUM FLUORIDE 0.125/DROP DROPS	30	90	\$0
PAROXETINE HCL 20 MG TABLET	30	90	\$1	SODIUM FLUORIDE 0.2% SOLUTION	473	473	\$0
PAROXETINE HCL 30 MG TABLET	30	90	\$1	SODIUM FLUORIDE 0.25 MG/0.6 DROPS	60	60	\$0
PEDI MVI NO.12/SODIUM FLUORIDE 0.25 MG CHEWABLE TABLET	30	90	\$0	SODIUM FLUORIDE 0.25(0.55) CHEWABLE TABLET	15	45	\$0
PEDI MVI NO.12/SODIUM FLUORIDE 0.5 MG CHEWABLE TABLET	30	90	\$0	SODIUM FLUORIDE 0.4% GEL	122	122	\$0
PEDI MVI NO.12/SODIUM FLUORIDE 1 MG CHEWABLE TABLET	30	90	\$0	SODIUM FLUORIDE 0.5 MG/ML DROPS	10	10	\$0

PRO PREMIUM-1 MEDICATION PROGRAM

[Click here to return to the PRO PREMIUM-1 Formulary.](#)

Brand Dosage Form	Retail Qty	HD Qty	Co-pay	Brand Dosage Form	Retail Qty	HD Qty	Co-pay
SODIUM FLUORIDE 0.5(1.1)MG CHEWABLE TABLET	30	90	\$0	TRAMADOL HCL 50 MG TABLET	30	90	\$1
SODIUM FLUORIDE 1.1% CREAM	51	153	\$0	TRAZODONE HCL 50 MG TABLET	30	N/A	\$1
SODIUM FLUORIDE 1.1% GEL	56	168	\$0	TRIAMCINOLONE ACETONIDE 0.025% OINTMENT	15	N/A	\$0
SODIUM FLUORIDE 2.5 MG/ML DROPS	30	30	\$0	TRIAMCINOLONE ACETONIDE 0.5% OINTMENT	15	90	\$1
SPIRONOLACTONE 25 MG TABLET	30	90	\$1	TRIAMTERENE/HYDROCHLOROTHIAZIDE 37.5-25 MG TABLET	30	45	\$1
SULFAMETHOXAZOLE/TRIMETHOPRIM 800-160 MG TABLET	30	90	\$1	TRIAZOLAM 0.25 MG TABLET	30	90	\$1
TADALAFIL TABLETS 10 MG TABLET	N/A	48	\$1	VALSARTAN 40 MG TABLET	30	N/A	\$1
TADALAFIL TABLETS 20 MG TABLET	N/A	48	\$1	VALSARTAN/HYDROCHLOROTHIAZIDE 160-12.5 MG TABLET	30	90	\$1
TAMOXIFEN CITRATE 10 MG TABLET	30	90	\$0	VALSARTAN/HYDROCHLOROTHIAZIDE 160-25 MG TABLET	30	90	\$1
TAMOXIFEN CITRATE 20 MG TABLET	30	90	\$0	VALSARTAN/HYDROCHLOROTHIAZIDE 320 MG-25 MG TABLET	30	90	\$1
TERAZOSIN HCL 1 MG CAPSULE	30	50	\$1	VALSARTAN/HYDROCHLOROTHIAZIDE 80-12.5 MG TABLET	30	90	\$1
TERAZOSIN HCL 10 MG CAPSULE	30	90	\$1	VERAPAMIL HCL 40 MG TABLET	30	90	\$1
TERAZOSIN HCL 2 MG CAPSULE	30	90	\$1	WARFARIN SODIUM 1 MG TABLET	30	90	\$1
TERAZOSIN HCL 5 MG CAPSULE	30	90	\$1				
TIZANIDINE HCL 2 MG TABLET	30	90	\$1				
TIZANIDINE HCL 4 MG TABLET	30	90	\$1				

PROGRAM DETAILS

1. The PPREM-1 Medication Program includes all prescription medications and their co-pay listed on the formulary. If the drug is not on the formulary, your out-of-pocket cost is based on a deeply discounted price.
2. You may pick-up your medication at virtually any retail pharmacy of your choice (over 70,000 in our network).
3. Only certain doses and quantities for each medication are offered through this program.
4. Present your Rx Card to the pharmacy of your choice to utilize benefits.
5. After your first retail purchase, all CHRONIC medications must be filled using our mail-order service. Our team will contact and work with you to transfer your prescription.
6. Men's Health: generic Viagra® and Cialis® can be purchased exclusively via mail-order and limited to 72 generic Viagra 50/100 mg pills or 48 generic Cialis 5/20 mg pills per year.

This a Pharmacy Subscription Program. THIS IS NOT INSURANCE. We provide you direct access to medications at negotiated PBM pricing, and Home Delivery Pharmacy pricing on a pre-paid basis. Your Rx Card offers solutions for high-priced specialty medications via an International Pharmacy or PAP service. In addition, a discount pharmacy solution is available, where you search discount options and are directed to a specific pharmacy for super-low pricing. Sometimes, this can be your lowest price option. Only certain doses and quantities for each medication are offered through this program.

Your Rx Card is NOT Insurance. Discount Only – Discounts are available exclusively through participating pharmacies. The range of the discounts will vary depending on the type of prescription and the pharmacy chosen. This part of the program does

7. All medications require a prescription.
8. No limit on prescription medication orders.
9. You also get access to the entire suite of products, discounts and services.

HOW THIS PROGRAM WORKS

1. Search for medications by entering drug name in the search bar. If a medication is not on the formulary, a discounted price will be displayed.
2. Present your Rx Card to the pharmacy of your choice. Your Rx Card will display your BIN, Group Number and PCN to present to the pharmacist. If you paid for your order online prior to picking up your medication, you will owe nothing at the pharmacy.
3. Reorders will be processed every 90 days for all mail-order prescriptions.
4. If you need other medications, easily search our website for deeply discounted prices.

not make payments directly to pharmacies. Members are required to pay for all prescription purchases. Cannot be used in conjunction with insurance. You may contact customer care anytime with questions or concerns, to cancel your registration, or to obtain further information. This program is administered by Medical Security Card Company, LLC, Tucson, AZ.

Formulary and pricing are subject to change. Please see website for current pricing. In order to get the most out of your Pharmacy Subscription Program, utilize our mail-order service by logging into the website. Members must log in to see complete program pricing and details.

SSR2342PR



(855) 798 2538
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1580 Atkinson Road
Lawrenceville, GA 30043

S&S Healthcare Strategies'

Minimum Essential Coverage with Rx and Healthcare2U's DPCplus

	Member Only	Member + Spouse	Member + Child(ren)	Member + Family
Administration	\$72.00	\$132.50	\$188.50	\$252.50
Claims Reserve	\$5.00	\$10.00	\$15.00	\$20.00
Total Plan Cost	\$77.00	\$142.50	\$203.50	\$272.50

Year-end claim reserve surplus can be utilized for employee premium holidays and/or administration of policy

MEC claim-reserves are based on a conservative projection of the utilization of MEC benefits.

Claim reserves are held and administered by S&S Health.

COBRA administration available for groups with 20+ employees.

Healthcare2U | No-Claims Healthcare™
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(512) 900-8900