

ZION HEALTH

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PREVENTIVE MEDICAL SHARING



OVERVIEW

Connected is Zion Health's preventive sharing program. Although Zion Health generally shares in expenses related to acute, unexpected medical events, we encourage our members to take proactive measures for good health. Our Connected program shares in certain preventive services to help you and your family stay healthy. Connected is available to Direct Members and Essential Members who choose the Connected add on.

Preventive services do not require you to meet your IUA.

SERVICE	WAITING PERIOD	SHARING CAP
Annual Provider Visit	None	\$250
Colonoscopies	Six months	\$5000
Mammograms	Six months	\$600
Youth Immunizations(0-18)	Six months	See below
Well Child Visits	None to six months	See below

HOW TO ACCESS CARE

There are no network limitations for preventive services, so you can go to any provider of your choice. At the time of service, ask your provider for a self-pay discount and an itemized bill sent to Zion Health, or call the Member Care Team and they will facilitate payment to your provider over the phone. Zion Health's billing information is located on your member ID card.

On occasion, providers may be reluctant or not understand how to bill Zion Health. In such cases, you can call the Member Care Team, who will assist you. If your provider is unwilling to work with Zion Health and requires payment at the time of service, request a self-pay discount and itemized bill. You can submit your bill and proof of payment to Zion Health.

PREVENTIVE CARE SERVICES

ANNUAL PROVIDER VISIT

Zion Health offers **one fully shareable** annual provider visit per member. The visit may be used for a sick visit, preventive visit, or specialist visit. Members may also use their annual visit for services provided by a dentist, optometrist, or mental health provider.

The first qualifying service submitted to Zion Health for sharing will be shared at 100%. The annual visit resets 12 months from the visit, not at the membership anniversary.

Sharing is limited to \$250 for the total visit cost. Pap smears will be considered fully shareable when billed alongside the annual provider visit. Any additional services provided at the time of service will be considered the member's responsibility, including x-rays and other services.

COLONOSCOPIES

Screening colonoscopies are available every 10 years beginning at age 45. A screening colonoscopy and the related anesthesia are shared at 100%. Diagnostic testing, including biopsies and pathology, performed as part of the screen are also shared. Any separate appointment or visit fees are not considered shareable as part of the colonoscopy service.

The \$5000 sharing cap applies to the total cost of the visit and all shareable services. We encourage members to have this service performed at an outpatient center and not in the hospital, as the centers usually charge less for their services.

MAMMOGRAMS

A yearly preventive mammogram is shareable beginning at the age of 50. A 2D or 3D imaging service and the follow-up appointment are shareable at 100%, including the mammogram, exam, appointment, and evaluation of imaging. For members at high risk for breast cancer, mammograph may be shareable prior to age 50 if referred by a licensed medical provider. The maximum shareable amount for the preventive mammogram and related services is \$600.

Diagnostic mammograms are not shareable as a preventive service. They may be eligible for sharing as part of a related eligible need.

YOUTH IMMUNIZATIONS

All shareable immunizations for children up to the age of 18 are based on the guidelines set forth by the Centers for Disease Control and Prevention ([cdc.gov](https://www.cdc.gov)). The appointment or visit fees are not sharable as part of the preventive immunizations, except for those that are a part of the well child visits or annual wellness visits.

Immunizations must be given within 12 months of the age recommended by the CDC and are shareable up to the member's age of 18.

WELL CHILD VISITS

Well child visits and their associated immunizations are shareable. Following the Centers for Disease Control and Prevention guidelines and recommendations from the American Academy of Pediatrics, Zion Health will share in up to six (6) well child visits before the age of 12 months, three (3) between 12 months and 24 months, and two (2) between 24 months and 36 months. Yearly visits after can be shared as the annual provider visit.

For children born through a shareable maternity need, members have the option to change their family enrollment to our Direct membership or add Connected to the Essential Membership within 30 days of the birth of the child in order to be eligible for well child visit sharing. Corresponding contribution changes will be applied, and there is no waiting period for sharing.

For children not born through a shareable maternity need, the membership must be active for at least six months to qualify for sharing and to be eligible for the optional membership change.