

Your Comprehensive Health Care Benefit

We have you covered!

All eligible employees have access to a full spectrum of free and affordable options to meet your unique health care needs.

You will automatically receive the Health Access Preventive benefit for yourself at no cost. You may also elect to add the Health Access Cooperative and a traditional health insurance plan.



Health Access Preventive – for Everyone at No Cost

This benefit is free to all eligible employees and provides access to quality care that is both affordable and convenient. You can add family members.



In-Person Wellness Doctor Visits Keep Your Doctor

Up to three a year reimbursed; see any doctor.



Low-Cost Prescriptions

You have access anytime to some of the lowest-priced prescription medication locally, by mail order, or international.



Vision Screening

Up to \$250 total reimbursed per year, see any provider.



Basic Wellness

Lab tests, mammograms, colonoscopies, and more, up to \$4,500 per year.



Physical Health & Fitness

Including gym memberships, up to \$250 per year.



Nutritional Health

Nutritional counseling, meal planning, weight loss support, up to \$500 per year.



Mental Health & Substance Counseling

From psychiatrist to counseling up to \$3,000 total reimbursed per year; see any provider.



Dental Cleanings

Up to \$250 total reimbursed per year, see any provider.



Tobacco Cessation

Help quitting if you need to, up to \$500 reimbursed per year.

2026 Preventive Reimbursement Maximums and Eligible Services

Basic Wellness Services | \$4500 (annual maximum)

Annual Wellness Exams (up to three per year)

Well Child Exam (including routine immunizations)

Gynecological Exam (well woman visit aged 21 and over)

Flu, Shingles, and Pneumonia Vaccinations

Annual Preventive Mammogram (including Breast Ultrasound or MRI following a preventive mammogram)
- Covered once annually from age 40-80

Colorectal Cancer Screening:

- Age range: 45-80 (covered from age 40 if 1st degree relative has positive history of colon cancer)
- Screening Type: Procto / Sigmoidoscopy every 5 years. Cologuard every 3 years.
- Colonoscopy is an eligible screening type

Bloodwork Screenings:

- Lipid Panel (Cholesterol and triglycerides)
- Comprehensive Metabolic Panel (CMP)
- Complete Blood Count (CBC) with differential test
- Thyroid Panel TSH (Thyroid Stimulating Hormone) with reflex to T4 if abnormal
- Routine Comprehensive Urinalysis (UA)
- Hemoglobin A1C (HgbA1C)
- Vitamin D Level

PSA for men age 50-75. Start at age 40 if 1st degree relative has positive history of prostate cancer.

Bone Density Screening Post-menopausal women, every 2-3 years

Heart Screening: C-Reactive Protein (CRP) & Homocysteine levels for those with strong personal history or 1st degree relative history of heart disease or those of South Asian or Pacific Island origins.

Preventive Vision Exams | \$250 (annual maximum)

Preventive Vision Exam

Preventive Dental Exams | \$250 (annual maximum)

Preventive Dental Exam, Sealants, Cleaning, and Fluoride Treatment

Mental Health | \$3000 (annual maximum)

Mental Health / Substance Abuse evaluation and counseling

Physical Health | \$250 (annual maximum)

Gym Membership

Fitness Training (on-line or in-person)

Nutritional Health | \$500 (annual maximum)

Nutritional / Meal Planning (on-line or in-person)

Weight Loss / Weight Gain counseling and support

Smoking Cessation | \$500 (annual maximum)

Covers counseling, cost of medication, hypnotherapy, or other cessation program

Any DPC - Direct Primary Care Maximum Monthly Reimbursement Amounts **

Membership Tier	Max Monthly Amount
Employee Only	\$70/month
Employee & Spouse	\$140/month
Employee & Child(ren)***	\$120/month
Family***	\$160/month

** The Any DPC program is only available to employer groups that have selected this option.

Please refer to your digital membership packet for details.

Your tier option is based upon employees selected membership tier.

***Dependent children under the age of 26

What information do I need to submit a reimbursement?

Please provide your physician's office itemized statement of services showing the service performed, date of service and the cost. Health Access Solutions accepts reimbursement requests for eligible preventive services from providers based in the United States, Canada, and Mexico. If the services were rendered by a provider outside the United States, you'll be asked to provide the following items: a copy of a financial statement showing the transaction came from an account under your name and an itemized receipt of the services you received.

How do I submit my request?

- Login to Member Dashboard: <https://www.healthaccesssolutions.com/members>
- Text "preventive" to (239) 299-0333 to receive your personal link to a prefilled login form.
- Requests must be submitted within the calendar year of the services and no later than March 1 of the following year.

Questions?

Call: 800-606-1135

Email: members@healthaccesssolutions.com