



MEMBERSHIP OPTIONS

HSP can be combined or layered with ANY high deductible health insurance plan to reduce out of pocket costs.

Basic Membership w/ \$15 Co-Pay No Deductible, Unlimited Office Visits

Membership Includes:

- ✓ Unlimited Single Problem Office Visits
- Higher level acuity will increase cost of co-pay**
- ✓ One EKG
- ✓ Three In-House Lab Tests*
- ✓ One X-Ray

**All additional labs are available at greatly reduced time of service pricing. Additional blood draw fee required.*

Not included with membership, but available at greatly reduced time of service pricing

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|--------------------------|--------------------------|
| ◆ Physicals (Annual/DOT) | ◆ Medication Injections |
| ◆ Lab Testing | ◆ DME |
| ◆ Immunizations | ◆ Ultrasound, Nuclear |
| ◆ Physical Therapy | ◆ Diagnostic Services |
| ◆ Licensed Counseling | ◆ Emergency Transport |
| ◆ Vision Services | ◆ In-home Urgent Consult |
| ◆ Packaged Meds | ◆ Wheelchair Transport |
| ◆ Fracture Care/Casting | ◆ Basic Home Care |
| ◆ Wellness Programs | ◆ Subspecialists |
| ◆ Dental | ◆ Out Patient Surgery |

Complete Care Center

8401 Holly Road
Grand Blanc, MI 48439

(810) 695-8011

www.healthshareplan.com



▶▶▶ Please call for questions

Comprehensive Membership W/ \$15 Co-Pay No Deductible, Unlimited Office Visits

Membership Includes:

- ✓ Unlimited Office Visits (Any acuity level)
- ✓ Any acuity level no increase in co-pay
- ✓ Physicals (Annual/GYN, etc.)
- ✓ Procedures (Lacerations/I&D/warts/etc.)
- ✓ Fracture Care and Casting
- ✓ Diagnostic Procedures (EKG/Holter/Stress etc.)
- ✓ Medication Injections
- ✓ X-Ray Services
- ✓ Durable Medical Equip. (Crutches/splints/slings)
- ✓ One Free Annual Sports Physical
- ✓ One Free Annual Flu Shot
- ✓ Blood draw and injection fees waived
- ✓ Prescription renewal and form fees waived

Not included with membership, but available at greatly reduced time of service pricing

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|-----------------------|--------------------------|
| ◆ Lab Testing | ◆ Emergency Transport |
| ◆ Immunizations | ◆ In-home Urgent Consult |
| ◆ Physical Therapy | ◆ Wheelchair Transport |
| ◆ Licensed Counseling | ◆ Basic Home Care |
| ◆ Vision Services | ◆ Subspecialists |
| ◆ Packaged Meds | ◆ Wellness Programs |
| ◆ Ultrasound, Nuclear | ◆ DOT Physicals |
| ◆ Dental | ◆ Out Patient Surgery |

Pricing on Back



MEMBERSHIP PRICING

HSP can be combined or layered with ANY high deductible health insurance plan to reduce out of pocket costs.

Basic Membership w/ \$15 Co-Pay

	Monthly	Quarterly	Annual
Individual	\$49	\$186.20	\$529.20
Couple	\$98	\$372.40	\$1058.40
Family of 3	\$147.00	\$558.60	\$1587.60
Each Additional	\$30	\$114	\$324
Save 5% with a Quarterly Membership			
Save 10% with an Annual Membership			
One Time \$30 Processing Fee			

Comprehensive Membership W/ \$15 Co-Pay

	Monthly	Quarterly	Annual
Individual	\$80	\$304	\$864
Couple	\$160	\$608	\$1728
Family of 3	\$240	\$912	\$2592
Each Additional	\$50	\$190	\$540
Save 5% with a Quarterly Membership			
Save 10% with an Annual Membership			
One Time \$30 Processing Fee			

Example of savings on complex office visit:

Chest Pain	TOS	Basic	Comprehensive
Office Visit 99214	\$100	\$75	\$15
EKG	\$40	\$0	\$0
Chest X-Ray	\$45	\$0	\$0
CBC	\$20	\$0	\$10.69
Troponin	\$45	\$45	\$8.93
CKMB	\$32	\$32	\$10.47
Blood Draw	\$7	\$7	\$0
Phenergan	\$15	\$15	\$0
Valium	\$10	\$10	\$0
Injection Admin	\$30	\$15	\$0
Total	\$344	\$199	\$45.09

Example of savings on simple office visit:

Hyperlipidemia/ Diabetes	TOS	Basic	Comprehensive
Office Visit 99213	\$70	\$45	\$15
EKG	\$40	\$0	\$0
Chol Panel	\$25	\$0	\$12.61
Hepatic	\$20	\$0	\$7.59
Basic Metabolic	\$20	\$0	\$8.68
HbA1c	\$20	\$20	\$13.34
Blood Draw	\$7	\$7	\$0
Total	\$202	\$72	\$57.22

*Prices may vary
Health Share Plan is not insurance



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