



P.O. Box 2568 | Frisco, TX 75034



Hello **APWU Health Plan Member**,





Welcome to **APWU Health Plan**! We're so glad you've joined us and look forward to helping you significantly reduce your healthcare costs.

With no limits on access to care and an extensive network that makes it easy for you to find providers close to home, work or while you're traveling, **APWU Health Plan** will enable you to get the care you need whenever and wherever you need it.

Be sure to always keep your enclosed membership card with you, as you will need to present it upon each healthcare visit and have it available for verification purposes when calling to make appointments. The card also lists the savings programs you are participating in and phone numbers to help you get the care you need.

To find participating providers close to you, obtain a fee schedule, or if you have additional questions, call us toll-free at **(833) 795-7784** or visit **apwuhp.solutionssimplified.com**.

We thank you for your business and hope you enjoy all your plan has to offer.

 <small>apwuhp.solutionssimplified.com (833) 795-7784</small>  <b>APWU HEALTH PLAN MEMBER</b> <b>UHC Member ID:</b> _____ <b>Group Code:</b> DEFINHLTH <b>Effective Date:</b> 1/1/2025 <b>CARE POS</b> <small>Careington</small> <b>THIS IS NOT INSURANCE.</b>	 <small>apwuhp.solutionssimplified.com (833) 795-7784</small>  <b>APWU HEALTH PLAN MEMBER</b> <b>UHC Member ID:</b> _____ <b>Group Code:</b> DEFINHLTH <b>Effective Date:</b> 1/1/2025 <b>CARE POS</b> <small>Careington</small> <b>THIS IS NOT INSURANCE.</b>
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# Membership Information:

## Dental - Careington POS

- Save 20% to 50% on most dental procedures including routine oral exams, unlimited cleanings, and major work such as dentures, root canals and crowns through one of the largest dental networks nationally with a focus on neighborhood dentists.
- To locate a participating provider, please call **(833) 795-7784** or visit **apwuhp.solutionssimplified.com** to access our online provider search.

**THIS PLAN IS NOT INSURANCE and is not intended to replace health insurance.** This plan does not meet the minimum creditable coverage requirements under M.G.L. c.111M and 956 CMR 5.00. This plan is not a Qualified Health Plan under the Affordable Care Act. The range of discounts will vary depending on the type of provider and service. The plan does not pay providers directly. Plan members must pay for all services but will receive a discount from participating providers. The list of participating providers is at [apwuhp.solutionssimplified.com](http://apwuhp.solutionssimplified.com). A written list of participating providers is available upon request. You may cancel within the first 30 days after effective date or receipt of membership materials (whichever is later) and receive a full refund. Discount Plan Organization and administrator: Careington International Corporation, 7400 Gaylord Parkway, Frisco, TX 75034; phone 800-44T-0380.

This plan is not available in Vermont or Washington.

Dental: Careington - (833) 795-7784 -  
[apwuhp.solutionssimplified.com](http://apwuhp.solutionssimplified.com)

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# Membership Agreement

DISCOUNT PLAN  
ORGANIZATION

Careington International Corporation  
7400 Gaylord Parkway, Frisco, TX 75034

**MEMBER ID**  
39236274

**MEMBER NAME AND ADDRESS**  
APWU Health Plan Member

**GROUP NAME**  
APWU Health Plan

**GROUP CODE**  
DEFINHLTH

**TERM**  
Annual

**EFFECTIVE DATE**  
1/1/2025

To add a family member to your plan or change mode of payment, contact **APWU Health Plan** at **(833) 795-7784**. For assistance using your plan, please call Member Services at (833) 795-7784.

**TOTAL FEES**  
There is no cost to this plan.  
Classification: Member + Family

**Membership and Renewal Conditions:** By joining a plan, for yourself or on behalf of a minor child for whom you are a parent or legal guardian, you confirm that you are at least 18 years old and have read and agree to the terms and conditions of the plan. *This plan will automatically renew at the end of your membership term.*

**Termination Conditions:** **APWU Health Plan** and Careington International Corporation (Careington) reserve the right to terminate plan members from its plan for any reason.

**Cancellation Conditions:** Please notify **APWU Health Plan**) if for any reason you wish to cancel the plan.

**Description of Services:** Please see the enclosed materials for a specific description of the programs included in your plan.

**Limitations, Exclusions & Exceptions:** This is a discount plan offered by Careington. Careington is not a licensed insurer, health maintenance organization or other underwriter of health care services. This plan is not insurance. No portion of any provider's fees will be reimbursed or otherwise paid by Careington. Careington is not licensed to provide and does not provide health care services or items to individuals. You will receive discounts for services at certain health care providers who have contracted with the plan. You are obligated to pay for all health care services at the time of service. Savings are based upon the provider's normal fees. Actual savings will vary depending upon location and specific services or products purchased. Please verify such services with each individual provider. The plan's discounts may not be used in conjunction with any other discount plan or program. All listed or quoted prices are current prices by participating providers and subject to change without notice. Any procedures performed by a non-participating provider are not discounted. From time to time, certain providers may offer products or services to the general public at prices lower than the discounted prices available through this plan. In such event, members will be charged the lowest price. Discounts on professional services are not available when prohibited by law. This plan does not discount all procedures. Providers are subject to change without notice and services may vary in some states. It is your responsibility to verify that the provider participates in the plan. At any time Careington may substitute a provider network at its sole discretion. Careington cannot guarantee the continued participation of any provider. If the provider leaves the plan, you will need to select another provider. Providers contracted by Careington are solely responsible for the professional advice and treatment rendered to members and Careington disclaims any liability with respect to such matters.

**Complaint Procedure:** If you would like to file a complaint regarding your plan membership, you must submit your complaint in writing to: Careington International Corporation, P.O. Box 2568, Frisco, TX 75034. You have the right to request an appeal if you are dissatisfied with the complaint resolution. After completing the complaint resolution process, if you remain dissatisfied you may contact your state insurance department. Contact information for your state insurance department is available upon request.