



OVAL ACCESS

VERSION 1.0

Ovalcare Specialty Prescription Plan – OVAL Access

Please read this document carefully. By signing below or clicking "I Agree" electronically, you are entering into a legally binding agreement and providing various consents as outlined below.

Member Participation Agreement

1. Plan Description

This Agreement governs your participation in the OvalCare Specialty Prescription Plan ("Plan"), a membership-based prescription discount and wellness Plan operated by OvalCare, LLC ("OvalCare," "we," "us," or "our"). This Plan provides access to specialty pharmaceutical products including but not limited to hormone replacement therapy (HRT), testosterone replacement therapy (TRT), erectile dysfunction medications, peptides, medical weight loss treatments, bioidentical hormone replacement therapy (BHRT), hair loss treatments, and dermatological products. Additional services may include telehealth consultations, prescription fulfillment, medication delivery, and customer support.

The charge and mode of payment for participation in the Plan is on your enrollment form. If you need to change your payment mode, please contact the member services number on your identification card.

The range of discounts for tele pharmaceutical services provided under the Plan will vary depending on the type of medication and the membership tier enrolled in.

The corporate name and the location of the licensed tele pharmacy organization is: Oval Care, LLC. 848 Brickell Avenue, Suite PH5, Miami. FL 33131

 1-305-939-0168 |  www.ovalcare.com

PLAN TIER – OVAL ACCESS	PRICE
The Monthly fee for Individual is	\$49.99
The Monthly fee for Individual+Spouse is	\$59.99
The Monthly fee for Individual+Child(ren) is	\$59.99
The Monthly fee for Family is	\$79.99
The One Time Non-Refundable Processing Fee is:	\$0.00

2. Plan Classification

IMPORTANT DISCLAIMER: THIS Plan IS NOT INSURANCE. This Plan is not health insurance, does not provide health insurance coverage, and is not intended to replace health insurance. This Plan does not meet the minimum essential coverage requirements under the Affordable Care Act (ACA). You are responsible for ensuring you have appropriate health insurance coverage that meets your needs and legal requirements.

Membership Terms

Membership Period

Your membership begins on the effective date specified during enrollment and continues on a month-to-month basis unless terminated by either party.

Membership Fees

Monthly membership fees as disclosed during enrollment are due in advance and are non-refundable except as required by law.

Auto-Renewal

Your membership will automatically renew each month unless you cancel in writing at least 30 days prior to your next billing date.

Geographic Coverage

Plan benefits are available to residents of all 50 United States and the District of Columbia, subject to state-specific restrictions.

Member Obligations

You agree to :

- Provide accurate, current, and complete information during enrollment and update information as needed
- Use Plan benefits only for legitimate medical purposes as prescribed by licensed healthcare providers
- Comply with all applicable laws and regulations
- Pay all fees when due
- Notify us immediately of any changes to your contact information, payment method, or eligibility status

3. Termination

Either party may terminate this Agreement at any time with 30 days written notice. OvalCare may terminate your membership immediately for breach of this Agreement, fraudulent activity, misuse of Plan benefits, or violation of applicable laws. Upon termination, you remain responsible for any outstanding fees and obligations incurred prior to termination.

4. Activation Clause

If you activate your Oval membership by purchasing a medication under the Plan and you receive a supply of medication that extends beyond the initial month (e.g., a 12-month supply), you understand and agree that you are committing to a membership term equal to the duration of the supply provided. Because this supply is extended to you at a discounted rate under the assumption of active membership, early cancellation of your membership does not relieve you of your financial responsibility. Should you choose to cancel your membership prior to the conclusion of the supply term, you will remain liable for the monthly membership fees for the remainder of the committed term. These remaining fees will be collected in accordance with your original payment authorization directly with Ovalcare payment processing.

Acknowledgement And Signature

Electronic Signature Consent

By checking the box below and/or providing my electronic signature, I acknowledge that:


- I have read and understand this entire Agreement
- I have been given the opportunity to ask questions
- I voluntarily consent to all terms and conditions outlined above
- I understand that electronic signatures have the same legal effect as handwritten signatures
- I consent to electronic delivery of this Agreement and related documents Specific Consents Confirmation

Document Version: 1.0


Last Updated _____

Effective Date _____

OvalCare Customer Service

 | 1-305-939-0168

 | support@ovalcare.com

 | 848 Brickell Avenue, Suite PH5, Miami. FL 33131

Privacy Officer Contact

 | 1-305-939-0168

 | privacy@ovalcare.com