



Thank you for your order!

Group Information

Group ID:12925428
Group Name:
Agent Code:1234

Enrolling BC - 12110902

For assistance with your membership contact:

Jane Public

P: 111-111-1111
traceyb@ameriplanusa.com

Membership Details



DeluxePlus

Your MEMBER ID# 27000052 For:

Deluxe Plus

Deluxe Plus	\$39.95
Deluxe Plus Total	\$39.95

Includes:

- Dental (Oral Exams, Teeth Cleaning, Fillings And Crowns, Orthodontics and much more...)
- Vision (includes Frames Direct, Ophthalmology Eye Exams, Frames, Lenses, Tints And More...)
- Prescription Drugs (including Diabetic Supplies)
- Chiropractic
- Telemedicine (24/7 Access to U.S. board-certified doctors & pediatricians by phone or email)
- Bill Negotiator (helps save on current and prior medical bills)
- Healthcare Navigator (access to skilled advisors to quickly deliver real time results)
- Surgery Saver (gives members an advisor who will provide info regarding cost, quality, availability and physician privileges)
- Ancillary Services (includes MRI, CT Scans, Blood work)
- Wellness Screenings
- Hearing

*Non Medical Benefits Include: Office Depot, Dell Computers, Sprint, JCP Portraits & Free Conference Calling, Ameriplan Cash Back Saver

Recurring \$39.95 monthly fee is required.

Package Total

\$39.95

Order Total

\$39.95

Monthly Payment Requirement

A monthly payment is due each month. If your payment is not received by the due date your account will be cancel.

Deluxe Plus

Your next payment of \$39.95 is due by 5/3/2019.

Member Information

william baldridge

3715 granada

Irving, TX 75062

P:(214) 434-6592

amairanigomez30@icloud.com

DOB:1/1/1987 F

Household Members

Payment Details

Paid Via ACH

Account Holder Name	Cash Sweep
Routing Number	
Account Number	XXXXXXXXXX
Amount	\$39.95

Terms & Conditions

Membership Terms, Conditions, Refund and Cancellation Policy

You have entered a secure site. The information provided below is encrypted for security. Encryption scrambles the information in your application, including your credit card or bank drafting account information. Credit Card and Bank Drafting Account Information is stored for monthly or quarterly payment of your membership fees. eSana Health® securely stores all information we collect to protect your privacy. I desire to become a Member of the eSana Health® Discount Plans. DISCOUNT PLANS ARE NOT INSURANCE. As a member I will be entitled to receive a discounted fee from the providers of the services I have selected. As a Member I will receive discounts from participating providers based on the

procedures performed and/or items provided. I am to pay such discounted fee directly to the provider at the time the services are delivered.

IF YOU ARE NOT SATISFIED WITHIN 30 DAYS OF YOUR ACTIVATION DATE, YOU MAY CANCEL YOUR MEMBERSHIP BY WRITTEN REQUEST. YOU MUST INCLUDE YOUR MEMBER NUMBER WITH YOUR WRITTEN CANCELLATION REQUEST.

- By mail: Bank and Credit Card Department 5700 Democracy Drive, Plano, Texas 75024
- By facsimile to: 469-229-4595
- By email to: cancel@AmeriPlanusa.com

eSana Health WILL NOT COLLECT ADDITIONAL MEMBERSHIP FEES ONCE YOUR CANCELLATION REQUEST IS PROCESSED.

REFUNDS: IF YOU ARE NOT SATISFIED WITHIN 30 DAYS OF YOUR ACTIVATION DATE YOU MAY CANCEL AND RECEIVE A REFUND OF THE MEMBERSHIP FEE PAID. AFTER THE FIRST THREE DAYS FROM YOUR ACTIVATION DATE THE ONE-TIME REGISTRATION AND/OR BC ANNUAL ENROLLMENT FEE ARE NONREFUNDABLE. PLEASE ALLOW 30 DAYS PROCESSING TIME FOR REFUNDS. CANCELLATIONS RECEIVED AFTER THE 30 DAY DEADLINE WILL NOT BE ELIGIBLE FOR A REFUND.

eSana Health IS NOT RESPONSIBLE FOR MONEY PAID FOR HEALTHCARE SERVICES AND PRODUCTS RECEIVED FROM PROVIDERS.

TELEPHONE CANCELLATION REQUESTS WILL NOT BE ACCEPTED

I william baldridge agree to the Membership Terms and Conditions on 3/31/2019 11:47:00 AM

Your IP Address **76.187.43.154** has been recorded and attached to this agreement.

Welcome to the eSana Health Family

Thank you for letting us help you save on your family's healthcare cost. We truly appreciate your business and want to help you save money. Present your new member ID to any of our quality healthcare providers and save! Our online Provider Search tool makes finding a provider near you easy. [PROVIDER SEARCH](#) You pay the provider at the time of service at a discounted fee.

A Member Information Guide and your Membership Identification cards will be mailed to you. Please allow 5-7 business days for them to arrive.

If you need assistance please contact our member services team.

 (800) 647-8421

 customersupport@AmeriPlanusa.com

Yours sincerely, The eSana Health Team

IF YOU ARE NOT THE APPLICANT LISTED ABOVE, SOMEONE HAS MISTAKENLY REGISTERED USING YOUR E-MAIL ADDRESS. WE REGRET ANY INCONVENIENCE. PLEASE CONTACT CUSTOMER SERVICE AT 1-800-647-8421 TO REMOVE YOUR E-MAIL ADDRESS FROM OUR DATABASE.

IF YOU DID AUTHORIZE THIS TRANSACTION, AND YOU ARE IN THE FIRST THREE DAYS OF YOUR ACTIVATION DATE, BUT WOULD LIKE TO CANCEL AND RECEIVE A FULL REFUND OF ALL MONIES PAID, PLEASE [Click Here](#). OTHERWISE PLEASE SEE OUR CANCELLATION POLICY LISTED BELOW:

CANCELLATION & REFUND POLICY

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Thank you,
eSana Health ® Corporation

THIS IS AN AUTOMATED EMAIL. PLEASE DO NOT REPLY TO THIS EMAIL



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