AshHEALTH™

ACCESS CARE | ENHANCE BENEFITS | EMPOWER LIFE

AshHEALTH Benefits

Partnership Prospectus

An introduction for general agencies, carrier partners, and employer groups

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Confidential — Prepared for prospective partners



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1. EXECUTIVE OVERVIEW

AshHEALTH Benefits is the employee-benefits and insurance brokerage business unit of AshHEALTH, LLC, a New York company established in 2018.

AshHEALTH Benefits is an independent employee-benefits brokerage and healthcare benefits advisory platform focused primarily on small and mid-sized employer groups. Its model combines traditional insurance brokerage with access to employer healthcare programs such as Vital110 and VitalDirect, as well as the MyAshHealth cash-pay digital-health platform.

Leadership: Ashton S. Maaraba, President & CEO of AshHEALTH, LLC — a New York-licensed Life Broker (NY License LB-1994333; National Producer Number 22340357). AshHEALTH, LLC is now a fully licensed and active New York insurance brokerage — NY Department of Financial Services entity producer license LB-1997842, issued September 22, 2026, authorized for Life, Accident & Health brokerage activities — with Mr. Maaraba serving as the designated licensed sublicensee.

Our objective is to establish relationships with select General Agencies, carriers, benefit administrators, and technology partners that allow AshHEALTH Benefits to provide employers with a broad and competitive benefits portfolio — while maintaining strong independent broker representation and full ownership of our client relationships.

2. OUR MODEL: MORE THAN A TRADITIONAL BROKERAGE

Rather than beginning with the question "Which insurance product can we sell?" our approach begins with "What healthcare and financial risks is this employer trying to solve for its workforce?" Insurance products are then incorporated alongside healthcare-access and employee-engagement strategies.

Our intended insurance portfolio includes:

- Group medical
- Dental and vision
- Life and AD&D
- Short- and long-term disability

- Accident insurance
- Critical illness
- Hospital indemnity
- Voluntary employee benefits
- Supplemental health solutions
- Other appropriate employer-sponsored Life, Accident & Health products

Our initial market focus is small and mid-sized employers, with particular interest in the East Coast, Mid-Atlantic and Southern United States, with NY as our hub, and opportunities that can ultimately be expanded regionally and nationally where licensing and carrier relationships permit.

3. HOW VITAL110 WORKS

Program materials describe Vital110™ as a self-funded MEC plan designed to meet ACA baseline coverage requirements, offered to employers through our strategic relationship with Health Compass. It does not replace an employer's major medical plan — it overlays existing coverage and runs through the employer's current payroll process, with no separate benefits platform.

How it fits into payroll:

1. **Employer enrolls —** The company integrates Vital110 into its Section 125 pre-tax payroll deduction.
2. **Employees opt in —** Participating employees elect coverage; a $1,000 monthly premium is deducted pre-tax.
3. **Everyone saves — The employer is projected to net $438 per employee per year (see math below); employees receive a $975 monthly tax-free claim payment tied to scans (recommended weekly; at least monthly to remain eligible) and average about $146.80 more in monthly take-home pay.**
4. **Benefits activate —** The enrolled employee and eligible family members gain access to the Vital110 benefit suite.

The math, per enrolled employee (program figures):

Employer admin fee	$40.00/mo ($480/yr)

Employer FICA savings — Social Security: $1,000 × 6.20% pre-tax	$62.00/mo ($744/yr)
Employer FICA savings — Medicare: $1,000 × 1.45% pre-tax	$14.50/mo ($174/yr)
Total employer FICA savings (6.20% + 1.45% = 7.65%)	$76.50/mo ($918/yr)
Net employer gain	+$36.50/mo (+$438/yr)

On top of the $438 net gain, program materials project a 10–15% reduction in major medical-plan spending — a projection, not a guarantee.

What participating employees and families can access:

- Primary care, urgent care, and mental-health counseling.
- 1,000+ common medications at $0 through 80,000+ pharmacies.
- 3,500+ lab screenings through LabCorp and Quest.
- Whole-family access — the enrolled employee, spouse, and dependent children up to age 26 — with no deductibles, co-pays, or surprise bills for included services.
- Care-navigation concierge and medical bill advocacy.
- Specialty telehealth access through MyAshHealth (separate treatment pricing may apply).

The weekly scan:

- A one-minute selfie video — recommended weekly; completion is tied to the $975 monthly tax-free claim payment, per program materials. At least one scan per month is required to remain in the benefit — employees who scan less frequently risk being dropped from the program.
- Tracks heart rate, heart-rate variability, blood pressure, breathing rate, oxygen saturation, stress, and recovery indicators.
- Results are described as private and HIPAA-compliant, and are never shared with the employer.

The science in brief: the scan uses PPG (photoplethysmography) — an optical technique that detects blood-volume changes in tissue with every heartbeat, the same principle as the fingertip clip used in hospitals. Measurement is held to ISO

80601-2-61, the international standard for pulse-oximeter equipment (scope: SpO2 and pulse rate).

Why it matters for everyday users: the innovation is that hospital-grade optical sensing now lives in the phone people already carry. There is nothing to buy, wear, charge, or calibrate — no clinic appointment and no blood draw. A one-minute selfie video — recommended weekly — is the entire experience. That simplicity is what makes regular biometric tracking realistic for everyday users: it removes the cost, scheduling, and intimidation of traditional screenings while applying the same PPG principle hospitals have trusted for decades.

Figures, included services, and program terms are per current program materials; plan documents govern. Projected savings and average take-home figures are not guaranteed.

4. THE ENGINE: VITAL110 AND VITALDIRECT

Behind the AshHEALTH Benefits advisory model is the engine that differentiates it from a conventional startup brokerage: a strategic relationship with Health Compass in connection with the Vital110 and VitalDirect employer healthcare programs (see How Vital110 Works above).

These offerings give employers additional options alongside traditional insured benefits — particularly where employers are looking for more flexible, cost-conscious healthcare access strategies for their workforce. Vital110 and VitalDirect are separate from MyAshHealth and serve a distinct role within the AshHEALTH Benefits portfolio. They are employer healthcare programs; they are not described as insurance.

- **Vital110:** the core employer healthcare benefit solution — see How Vital110 Works above for program mechanics.
- **VitalDirect:** an additional employer-facing healthcare access option that can be incorporated into a broader benefits strategy depending on the needs of the employer group.

The goal is not to replace traditional insurance in every circumstance, but to give employers additional tools that may complement, supplement, or provide alternatives to conventional benefit structures where appropriate.

Availability: Vital110 and VitalDirect are offered nationally — all 50 states — with one exception: Vital Direct is not currently available in New York. Vital110 is available in New York.

This creates a three-part employer benefits framework:

1	**Insurance Brokerage — AshHEALTH Benefits** Licensed insurance placement and benefit strategy for small and mid-sized employer groups.
2	**Employer Healthcare Access — Vital110 / VitalDirect** Employer-oriented healthcare benefit programs offered through Health Compass — the engine behind the advisory model.
3	**Direct Cash-Pay Digital Health — MyAshHealth** Voluntary employee access to digital-health and cash-pay healthcare programs, with employer-specific discount opportunities and no insurance required.

Strategic value to partners:

This model allows AshHEALTH Benefits to approach distribution relationships not simply as a producer seeking carrier access, but as a healthcare benefits platform capable of bringing employers into a broader ecosystem of insured and non-insured solutions — combining traditional insured employee benefits; alternative employer healthcare programs; voluntary benefits; digital-health access; virtual care; cash-pay healthcare options; and employee engagement tools.

AshHEALTH Benefits already has experience working with employer-oriented healthcare offerings through its relationship with Health Compass and the Vital110 and VitalDirect programs, giving the business an existing foundation for employer benefit distribution beyond traditional insurance products alone.

5. THE MyAshHealth CONNECTION

AshHEALTH, LLC also operates MyAshHealth, a separate consumer-facing digital healthcare platform. MyAshHealth is not health insurance and is not intended to replace employer-sponsored insurance.

It operates as a cash-pay healthcare access platform through which consumers can access eligible virtual-health and healthcare programs without submitting claims to an insurance carrier. Programs may include virtual care, weight-management programs, **GLP-1s**, FDA-approved peptides, and additional specialty or common therapies available for selection and distribution, prescription services where clinically appropriate, Home Health Care Lab Options, and other healthcare-access programs offered through independent licensed providers and pharmacies. Clinical decisions remain with the applicable licensed healthcare professionals, and provider decisions are primarily through asynchronous contact.

MyAshHealth holds LegitScript Certification — independent third-party certification that a healthcare business meets recognized standards for legal compliance, transparency, and safe operating practices. For employers evaluating digital-health options, that independent vetting is a point of differentiation on safety, trust, and security: it means the platform their employees are invited to use has been reviewed against established healthcare compliance standards rather than merely describing itself as safe.

Employer Access Program: participating employers may receive a unique MyAshHealth employer discount code that employees can elect to use when purchasing eligible cash-pay services.

- **Employer cost:** $0
- **Insurance required:** No
- **Insurance claim submitted:** No
- **Employee participation:** Voluntary
- **Employee payment:** Direct cash-pay transaction
- **Discount:** Employer-specific, based on established program criteria

MyAshHealth participation is independent of the placement or purchase of insurance through AshHEALTH Benefits — an employer does not have to make

AshHEALTH Benefits its Broker of Record for its employees to participate in an eligible MyAshHealth employer program.

6. WHAT AshHEALTH BRINGS TO THE RELATIONSHIP

- Extensive executive experience across healthcare, pharmacy, digital health, virtual care, employer healthcare strategy, and healthcare technology — spanning executive leadership, business development, strategic partnerships, and healthcare-market expansion, including relationships and initiatives involving pharmacies, healthcare technology organizations, employers, and national healthcare companies.
- A dual insurance and healthcare-delivery perspective on employer benefits strategy: the ability to approach an employer's benefits from both the coverage side and the care-delivery side.
- An existing foundation for employer benefit distribution through the Health Compass relationship and the Vital110 and VitalDirect programs — beyond traditional insurance products alone — supported by a strategic relationship with prominent experts in the U.S. benefits industry, including Cody Mangalsingh (CEO) and Jeff Fisher (COO) of Health Compass, who serve as a support center for the program.

7. HOW WE PARTNER

AshHEALTH Benefits works through three partnership paths — often in combination:

7.1. FOR GENERAL AGENCY PARTNERS

We seek one or more GA relationships that provide the infrastructure to efficiently serve employer groups — while we remain focused on business development, employer relationships, and benefit strategy.

- New York as primary carrier access — including competitive small-group and middle-market medical options — with openness to expanded geographical carrier access outside of NY across the East, Mid-Atlantic, Midwest, and Southern U.S. regions
- Dental, vision, life, disability, voluntary, and supplemental markets

- Multi-carrier quoting, census analysis, underwriting support, and proposal development
- Enrollment, implementation, renewal, and case-management assistance
- Benefits-administration technology and carrier contracting support
- Commission administration, reporting, and compliance resources
- Dedicated broker and account support

Of particular importance is a relationship in which AshHEALTH Benefits maintains ownership and control of its employer relationships and book of business.

7.2. DISCUSSION TOPICS

1. **Carrier access —** Which medical and ancillary carriers would be available to AshHEALTH Benefits?
2. **Onboarding —** What is required to contract and begin submitting business?
3. **Small-group capabilities —** What quoting, underwriting, enrollment, and case-management resources are available?
4. **Broker-of-record ownership —** Does AshHEALTH Benefits retain control and ownership of its employer relationships and book?
5. **Compensation —** How are carrier commissions and any GA overrides structured?
6. **Technology & support —** What quoting, enrollment, benefits-administration, and account-management resources are available?

7.3. FOR DIRECT CARRIER PARTNERS

Where direct appointment is available without a General Agency intermediary, we seek direct carrier relationships that offer:

- Direct appointment and contracting
- Competitive commission structures
- Quoting, underwriting, and enrollment support
- A dedicated carrier representative or account team
- Clear book-ownership and broker-of-record protections

7.4. FOR EMPLOYER GROUPS

Employers work directly with AshHEALTH Benefits across the full three-part framework:

- Licensed insurance brokerage and benefit strategy for the group's coverage needs
- Vital110 / VitalDirect employer healthcare programs, which overlay existing coverage through the current payroll process
- MyAshHealth employer access — $0 employer cost, voluntary cash-pay participation, and employer-specific discount codes
- A dedicated benefits contact and ongoing strategy reviews as the workforce and plan evolve

8. IDEAL EMPLOYER PROFILE

Our primary target market — and the employer profile our distribution partners can expect — includes small and mid-sized employers seeking greater flexibility, employee engagement, and cost transparency in their benefits strategy — particularly employers experiencing:

- Increasing health-benefit costs
- Difficulty providing competitive benefits
- High employee out-of-pocket exposure
- Recruitment and retention challenges
- Limited employee access to healthcare
- High-deductible health plan concerns
- Demand for voluntary benefits
- Interest in virtual healthcare solutions
- Workforce interest in weight management and wellness programs

We intend to build relationships based on long-term employer benefit strategy, not transactional insurance sales.

9. CONTACT

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Employers: ask about a Vital110 program overview for your leadership team.



A. APPENDIX: LEGAL AND COMPLIANCE NOTICE

AshHEALTH Benefits operates as a licensed insurance brokerage — AshHEALTH, LLC (NY DFS entity producer license LB-1997842) and Ashton S. Maaraba (NY-licensed Life Broker, License LB-1994333; NPN 22340357) — and offers products and programs in compliance with applicable state insurance laws and regulations. Availability varies by state, and offerings are structured to meet the requirements of each state in which they are made available.

Vital110 and VitalDirect are employer healthcare programs offered through Health Compass. They are not insurance products, and they are not discount programs: they are structured benefit programs with defined program terms, and plan documents govern.

MyAshHealth is a separate, unaffiliated program — a consumer cash-pay digital-health platform operated by AshHEALTH, LLC — and is independent of the Vital110 and VitalDirect programs. Employers may elect to offer MyAshHealth access to their employees as a voluntary option at no cost to the employer. Participation is independent of the placement or purchase of insurance through AshHEALTH Benefits, and an employer does not need to make AshHEALTH Benefits its Broker of Record for its employees to participate. MyAshHealth is currently set to launch December 1, 2026.

This prospectus is for informational purposes for prospective distribution and employer partners. It is not an offer, solicitation, or contract of insurance. Figures, included services, and program terms are per current program materials; plan and program documents govern.

B. APPENDIX: DEFINITIONS

Key terms used in this prospectus. Program-specific descriptions reflect current program materials; plan documents govern.

ACA (Affordable Care Act) — The federal health reform law whose "minimum essential coverage" (MEC) standard is the baseline coverage benchmark referenced by the Vital110 program materials.

AD&D (Accidental Death & Dismemberment) — An insurance benefit that pays a benefit for death or specified injuries resulting from an accident; included in the intended insurance portfolio.

Broker of Record — The insurance broker officially designated to represent an employer on its benefit plans. Participation in MyAshHealth is independent of an employer's Broker-of-Record status.

Claim payment — As used in Vital110 program materials: the $975 monthly tax-free payment tied to scan completion. Program terms govern; plan documents control.

Co-pay — A fixed amount a covered person pays for a service at the time of care. Included Vital110 services carry no co-pays, per program materials.

Deductible — The amount a covered person must pay out of pocket before a plan begins paying. Included Vital110 services carry no deductibles, per program materials.

FICA (Federal Insurance Contributions Act) — The federal payroll tax funding Social Security (6.20%) and Medicare (1.45%), totaling 7.65%; the basis for the projected employer savings in this prospectus.

General Agency (GA) — An intermediary organization that connects insurance carriers with brokers and agencies; AshHEALTH Benefits seeks relationships with select GAs.

HIPAA (Health Insurance Portability and Accountability Act) — The federal law governing the privacy and security of health information; scan results are described as private and HIPAA-compliant, and are never shared with the employer.

ISO 80601-2-61 — The international standard for pulse-oximeter equipment (scope: SpO2 and pulse rate); the scan's measurement is held to this standard.

LegitScript Certification — An independent certification program for healthcare-related businesses; held in connection with the MyAshHealth platform (see MyAshHealth Connection).

MEC (Minimum Essential Coverage) — The ACA's baseline coverage standard. Vital110 is described in program materials as a self-funded MEC plan designed to meet ACA baseline coverage requirements; it does not replace an employer's major medical plan.

MyAshHealth — A separate, consumer-facing cash-pay digital healthcare platform operated by AshHEALTH, LLC. It is not insurance, is not intended to replace employer-sponsored coverage, and is unaffiliated with the Vital110 and VitalDirect employer programs.

PPG (Photoplethysmography) — An optical sensing technique that detects blood-volume changes in tissue with every heartbeat — the same principle as the fingertip clip used in hospitals. The Vital110 scan uses PPG to track heart rate, heart-rate variability, blood pressure, breathing rate, oxygen saturation (SpO2), stress, and recovery indicators.

Section 125 (Cafeteria Plan) — The section of the Internal Revenue Code that lets employees pay for qualified benefits with pre-tax dollars. Vital110 integrates into the employer's Section 125 pre-tax payroll deduction.

Self-funded plan — A benefit arrangement in which the employer or program funds benefit payments rather than paying premiums to an insurer for risk transfer. Vital110 is described as a self-funded MEC plan in program materials.

SpO2 — Blood oxygen saturation, expressed as a percentage; one of the vitals tracked by the scan.

Telehealth — The delivery of healthcare services via digital communications (video, phone, messaging); referenced in the Telehealth Consent context.

Vital110 — The core employer healthcare program offered through AshHEALTH Benefits' strategic relationship with Health Compass: a self-funded MEC plan with preventive care, lab screenings, care navigation, and the PPG-based scan.

VitalDirect — An additional employer-facing healthcare access option available through the Health Compass strategic relationship; not currently available in New York.