



RELIEF HEALTH
SERVICES

Webinar
12/03/2009

START PRODUCING IN THE FASTEST GROWING MARKET

OVERVIEW



- **Who We Are**

National Healthcare Network

- **What We Do**

Provide customers with no cost medical equipment

- **How Agents Benefit From Us**

Supplement income

Compensation every 2 weeks

No charge backs

Products sell themselves



WHY PRODUCE WITH RHS



- Huge additional income
- No license required
- Sell Year Round
- Build Credibility With Clients
- Use your existing customer database
- Another Line to Your Portfolio
- Get Started in Minutes
- No Administrative Effort
- Fastest Growing Market



MARKET RELEVANCE



- Baby boomers are approaching 65
- 70 Million Americans will be reaching this age in the next 20 years
- Diabetes is the fastest growing disease among seniors
- Over 20% of the senior population is diabetic
- Over 40% of the senior population is arthritic
- RHS can provide the solution



CLIENT BENEFITS



- No Cost Medical Supplies
- No Insurance Claims or Paperwork
- Free Delivery to Their Door
- Product Support & In Home Training



PRODUCTS



Diabetic Supplies:

- Testing Meter
- Testing strips
- Lancets
- Lancing device
- Control solution
- Battery replacements
- Diabetic Cookbook



Arthritic Equipment:

- Vital wear Wrap
- Braces:
 1. Ankle
 2. Knee
 3. Back
 4. Glove
 5. Elbow
 6. Shoulder



Mobility:

- Power Wheelchairs
- Power Scooters

All products are provided at no cost to clients.

DIABETIC SUPPLIES



Supplies Shipped Every 3 Months

- Testing Strips
- Lancets
- Lancing Device
- Control Solution
- Battery Replacements



First Shipment- Complimentary Products

- Free cookbook with first order
- Brand new testing meter



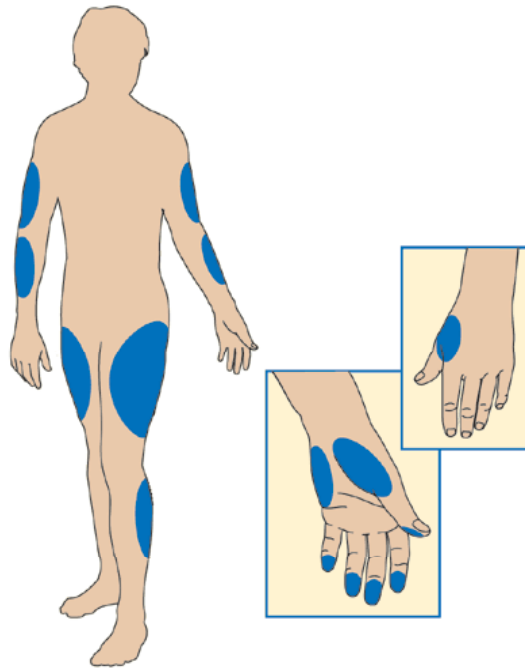
DIABETIC SUPPLIES



Testing Meter

Complimentary product with the first shipment of diabetic supplies.

- Alternate Site Testing
- Virtually Pain Free
- Equipped With PC Download Capability



MOBILITY



- Variety of brands
- Free delivery, free in-home setup



ARTHRITIC BRACES



Knee Braces



Ankle Braces



Back Braces



Gloves



Shoulder Braces





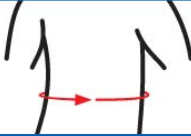
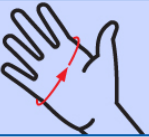
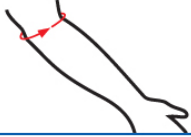

Elbow Braces



Sizes range from XS to XXL to ascertain precise fitting.

SIZING GUIDE



BODY PART / PRODUCT		XS	S	M	L	XL	XXL
	ANKLE WRAP & ANKLE SLEEVE Measure around ankle joint	21-23 cm	23-24 cm	24-25 cm	25-26 cm	26-27 cm	28-30 cm
		8.25"-8.75"	8.75"-9.5"	9.5"-10"	10"-10.5"	10.5"-11"	11"-11.5"
	KNEE Measure slightly bent underneath knee cap	26-30 cm	31-35 cm	36-40 cm	41-45 cm	46-50 cm	51-55 cm
		10.25"-11.75"	12"-13.75"	14"-15.75"	16"-17.75"	18"-19.75"	20"-21.75"
	BACK Measure around middle of waist	60-69 cm	70-80 cm	81-90 cm	91-100 cm	101-112 cm	113-125 cm
		23.5"-27.25"	27.5"-31.75"	32"-35.5"	35.75"-39.5"	39.75"-44"	44.25"-48.5"
	GLOVES Measure the circumference of the hand around the knuckle	15-17 cm	18-20 cm	21-23 cm	24-26 cm	27-29 cm	30 cm +
		6"-6.75"	7"-7.75"	8"-9"	9.25"-10.5"	10.75"-11.5"	11.75" +
	ELBOW Measure around elbow joint with arm extended	18-22 cm	23-26 cm	27-30 cm	31-35 cm	36-40 cm	41-45 cm
		7.5"-8.75"	9"-10.25"	10.5"-11.75"	12"-13.75"	14"-15.75"	16"-17.75"
	SHOULDER Measure expanded chest around middle	84-89 cm	90-95cm	96-102 cm	103-109 cm	110-120 cm	121-131 cm
		33"-35"	35.25"-37.5"	37.75"-40.25"	40.5"-43"	43.25"-47.25"	47.5"-51.5"

VITALWEAR



Simple

Easy-to-use design for self-treatment

Precise

Control your own temperature, 40°-105°

Flexible

Hot/cold contrast compression therapies

Versatile

Treat multiple areas of the body



The Vital wear system can be used to treat virtually any part of the body.

HOW IT WORKS



- RHS is simply an extension to an agent's portfolio
- The products are offered at no cost to the clients through their Medicare coverage
- RHS will link your client with a medical equipment supplier who can provide specific healthcare items



2 WAYS TO PRODUCE



Appointments

- Bring RHS to current appointments



Existing Clientele

- New excuse to contact old clients
- Open the door for other products

THE PROCESS



1.) Market Products to Clients



2.) Fill Out Application



3.) Submit Application



4.) Receive Payment



CLIENT APPLICATION



PATIENT INFORMATION

Patients Name _____ Date of Birth ____/____/_____
Street Address _____ City _____ State _____ Zip _____
Ship To Address _____ City _____ State _____ Zip _____
Telephone _____ E-mail _____ Male ___ Female ___

INSURANCE INFORMATION

Primary Insurance

Medicare Claim Number _____
Name as written on Red/White/Blue Medicare Card:

Secondary Insurance

Does the patient have secondary insurance? _____
Insurance Company _____
ID number _____

*****Are you signing up for a new plan today? Y N

Company: _____
Effect. Date: _____

PRESCRIBING PHYSICIAN INFORMATION

Name _____ Clinic _____
Street Address _____ City _____ State _____ Zip _____
Telephone _____ Fax _____ Date of Last Visit _____
NPI# _____ UPIN _____
MEDICAID # _____

SUPPLIES INFORMATION

Current Supplier _____ Date Last Received Supplies _____

Diabetic

- Regular Heating Pad
 Ed Pump
 Diabetic Supplies

Arthritis

- Heating pad w/pump
 Thermoskin Wrap
 ED Pump

Mobility

- Scooter
 Power Wheelchair

Beneficiary Signature _____

Date _____

*By filling out this form, I authorize Relief Health Services and/or any of its affiliates to contact me regarding the coordination of shipment and/or the furnishing of a Medicare covered item that is to be rented or purchased.

WRITING AGENT

*Must complete all red fields

ONLINE PORTAL



- What is the online portal?
- What can you do on the portal?
 - Apply to RHS
 - Register a client
 - Track the status of your client
 - Track your payments
 - Edit your personal profile



ONCE A CLIENT IS SUBMITTED...

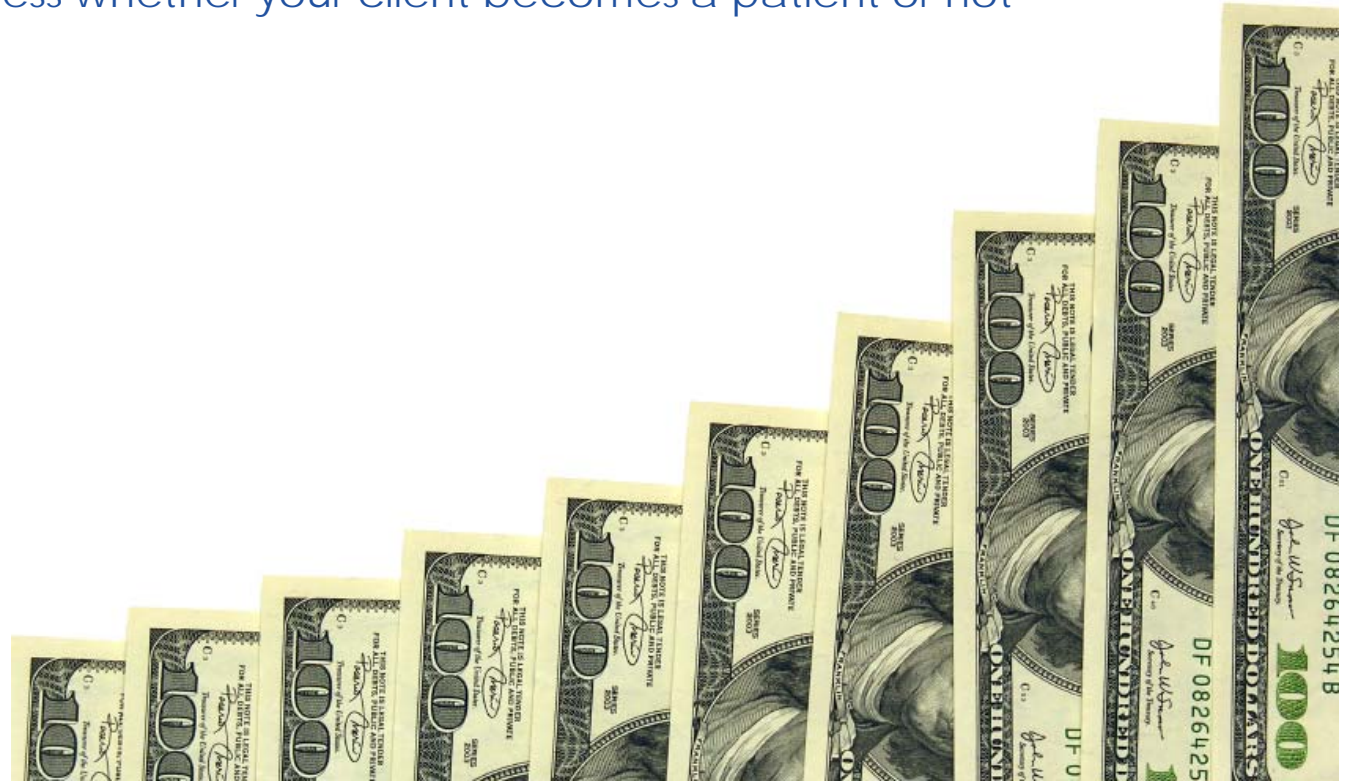


- 1) RHS contacts the client within 48 hours to confirm the order
- 2) RHS validates medical necessity with physician
- 3) Client is approved
- 4) Client is connected with a supplier
- 5) Agent receives check within 2 weeks
- 6) Client receives products

RECEIVE PAYMENT



- Compensation on the 1st & 15th of every month
- Getting paid regardless whether your client becomes a patient or not



QUALIFICATIONS



A client needs to have the following in order to be approved:

- Acceptable Insurance
 - Medicare Parts A and B
 - Private Fee For Service (Medicare Advantage)
- Medical necessity for the products
- Patient Consent

MEDICARE		HEALTH INSURANCE	
1-800-MEDICARE (1-800-633-4227)			
NAME OF BENEFICIARY JANE DOE			
MEDICARE CLAIM NUMBER	SEX		
000-00-0000-A	FEMALE		
IS ENTITLED TO	EFFECTIVE DATE		
HOSPITAL	(PART A)	07-01-1986	
MEDICAL	(PART B)	07-01-1986	
SIGN HERE →	<i>Jane Doe</i>		

FUTURE PRODUCTS



Coming Soon:

- Oxygen
- Respiratory
- Pharmacy
- Sleep Apnea
- Senior Living Services
- Home Medical Equipment
- Erectile Dysfunction Pump

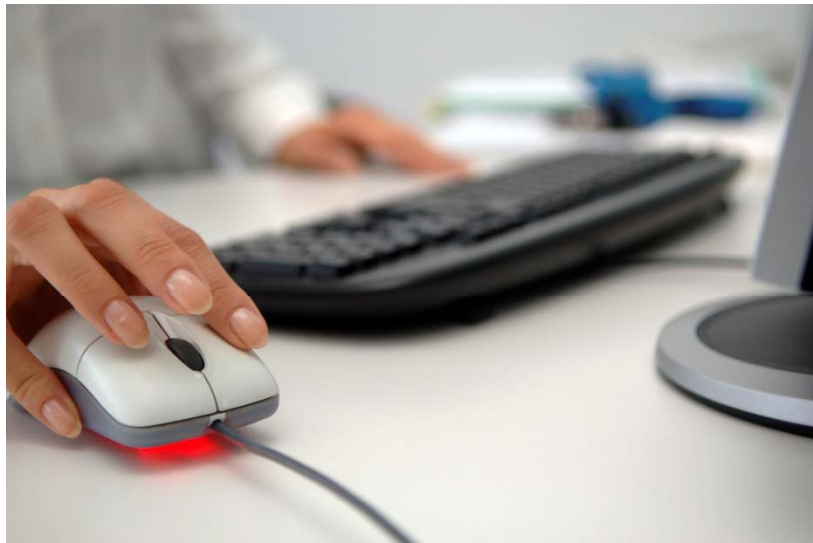


RESOURCES & SUPPORT



We provide agents with all materials needed to get started:

- Client applications
- Marketing Materials
- Qualification Sheet
- Portal Access



Specific Client Question or Concerns:

support@ReliefHealthServices.com

Phone: 1-954-772-9504

General Questions:

info@ReliefHealthServices.com

Phone: 1-954-495-8468

Fax : 1-866-345-2992