2027 Medicare Group Plans

Medica Group Advantage Solution℠ (PPO)
Medica Group Prime Solution℠ w/ Rx (Cost)

Medica

	Plan 2	Plan 5	Plan 11	
Monthly Premium	**$409.00**	**$158.00**	**$92.00**	
Medical Benefits ▼				**Summary**
Primary Care Office Visit	$10	$25	$40	Visits to doctor's office
Specialist Office Visit	$40	$50	$60	No referral required
Urgent Care	$20	$30	$40	Non-emergencies; no appointment
Inpatient Hospital	$290 per day (days 1-5)	$390 per day (days 1-5)	$490 per day (days 1-5)	Hospital stay more than 23 hours
Outpatient Hospital	$250	$350	$450	Hospital stay less than 23 hours
Ambulance (Ground & Air)	$200	$350	$500	Coverage of medically necessary ambulance services
X-rays	$40	$50	$60	Outpatient x-ray services
Outpatient Radiology	$200	$300	$400	Outpatient radiology services such as MRIs, CT Scans
Worldwide Emergency Room	$130	$130	$130	No copay required if admitted as inpatient within 48 hours in the United States
Preventive Care	$0	$0	$0	Includes annual physical exam
Dental	$0 preventative care	Not included	Not included	Diagnostic & Preventive Services - 100% in-network or 50% out-of-network
Hearing Aids	EPIC hearing copays	EPIC hearing copays	EPIC hearing copays	Benefit covers private label hearing aid models from EPIC hearing providers ($549, $799, $1,299; OTC $999/pair)
Over-the-Counter	$50 semi-annual allowance	$25 semi-annual allowance	Not included	Semi-annual allowance - this amount does not carry over half way through the year
Chiropractic	$20	$20	$20	Covers manual manipulation of the spine to correct a displacement/misalignment
Durable Medical Equipment	20%	25%	30%	Medical equipment such as walkers, wheelchairs, etc. ordered by your doctor
Part B Drugs	20%	20%	20%	Drugs covered under Part B per CMS; cost-sharing for Part B rebatable drugs may be lower
Part D Prescription Drug Coverage ▼				**Summary**
Tier 1	$7	$8	$10	Preferred Generic
Tier 2	$12	$15	$20	Generic
Tier 3	25%	25%	20%	Generic and Preferred Brand
Tier 4	50%	50%	50%	Generic and Non-Preferred Drug
Tier 5	30%	28%	25%	Generic and Specialty Drug
Deductibles and Max. Out-of-Pocket Limits ▼				**Summary**
Medical Deductible	$200	$300	$400	The amount you pay prior to plan payment for eligible services
Pharmacy Deductible	$300 deductible does not apply to tier 1	$500 deductible does not apply to tier 1	$700 deductible does not apply to tier 1	
Medical Out-of-Pocket Maximum	$5,400	$6,900	$9,850	Max. amount of paid out-of-pocket per calendar year for eligible charges
Rx Out-of-Pocket Maximum	Medicare limits ($2,400)	Medicare limits ($2,400)	Medicare limits ($2,400)	

*Please see the Summary of Benefits for more plan information

Additional Plan Features

Large Provider Network Open access to all providers who accept Medicare and are in the Medica network. No referrals are required. Visit medica.com/Medicare for a list of network providers.
OnePass™ Free fitness program gives you access to over 25,000+ locations nationwide − you can even enroll at multiple locations at the same time. Enjoy classes live or on-demand, exercise equipment and other amenities. Plus unlimited access to CogniFit online activities that support brain speed and memory.
Health Advocate™ 24-Hour NurseLine and Personal Health Advocate A 24/7 NurseLine and access to a Personal Health Advocate who can help you navigate the often complex healthcare system in unique ways such as arranging appointments with hard-to-reach specialists, finding doctors taking new patients, explaining your doctor's instructions and much more.

Eligibility

- Must be enrolled in Medicare Parts A & B (or Part B only for Medica Group Prime Solution w/Rx)
- Must continue to pay Medicare Part B premium
- Must meet employers eligibility guidelines

Resources

Medica Medicare Sales:

- Toll-free at 1-855-844-6395 (TTY: 711)
- Hours of Operation: Oct. 1 - March 31: 8 a.m. to 8 p.m. Central, seven days a week
  April 1 - Sept. 30: 8 a.m. to 8 p.m. Central, Monday - Friday
- You will speak to a live representative if you call during our business hours unless we are closed for a holiday. If you call when we are not open for business, you can leave a voicemail message and we will return your call within one business day.
- medica.com/Medicare

Medicare. 1-800-MEDICARE (1-800-633-4227). TTY: 1-877-486-2048. 24 hours a day, 7 days a week. medicare.gov

Social Security. 1-800-772-1213. TTY: 1-800-325-0778. ssa.gov

Medica is a Cost and PPO plan with a Medicare contract. Enrollment in Medica depends on contract renewal.

© PY2027 Medica Y0088_1019925_M

Notice of Availability of Language Assistance Services and Auxiliary Aids and Services

English: ATTENTION: If you speak English, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call 1-800-952-3455 (TTY: 711) for Medica, call 1-877-317-2410 (TTY: 711) for Dean Health Plan/Prevea360 Health Plan, or speak to your provider.

Spanish: ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia de idiomas. También están disponibles de forma gratuita asistencia y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al 1-800-952-3455 (TTY: 711) para Medica, llame al 1-877-317-2410 (TTY: 711) para Dean Health Plan/Prevea360 Health Plan o hable con su proveedor de atención médica.

Vietnamese/Việt: LƯU Ý: Nếu quý vị nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các hỗ trợ dịch vụ phù hợp để cung cấp thông tin theo các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi theo số 1-800-952-3455 (TTY: 711) đối với Medica, gọi theo số 1-877-317-2410 (TTY: 711) đối với Dean Health Plan/Prevea360 Health Plan hoặc trao đổi với nhà cung cấp dịch vụ của quý vị.

Chinese Traditional: 注意：如果您說中文，我們可以為您提供免費語言協助服務。也可以免費提供適當的輔助工具與服務，以無障礙格式提供資訊。請致電 1-800-952-3455 (TTY: 711) 聯絡 Medica，致電 1-877-317-2410 (TTY: 711) 聯絡 Dean Health Plan/Prevea360 Health Plan，或與您的提供者討論。

Hmong/Lus Hmoob: LUS CEEV: Yog hais tias koj hais Lus Hmoob ces muaj kev pab txhais lus pub dawb rau koj. Muaj khoom siv thiab muaj kev saib xyuas pab uas tsim nyog los npaj kom muaj cov ntaub ntawv uas siv tau dawb. Hu rau 1-800-952-3455 (TTY: 711) rau Medica, hu rau 1-877-317-2410 (TTY: 711) rau Dean Health Plan/Prevea360 Health Plan, los sis tham rau koj tus kws kuaj mob.

German/Deutsch: ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistenzdienste zur Verfügung. Entsprechende Hilfsmittel und Dienste zur Bereitstellung von Informationen in barrierefreien Formaten stehen ebenfalls kostenlos zur Verfügung. Rufen Sie 1-800-952-3455 (TTY: 711) für Medica bzw. 1-877-317-2410 (TTY: 711) für Dean Health Plan/Prevea360 Health Plan oder sprechen Sie mit Ihrem Gesundheitsdienstleister.

Cushitic-Oromo: XIYYEEFFANNOO: Ingiliffaa dubbattu taanaan, tajaajilli deggersa afaan bilisaa ni jira. Tajaajilli deggersa bu'ura dhiheessii odeeffannoo kaffaltii tokko malee ni jira. Lakkoofsa bilbilaa 1-800-952-3455 (TTY: 711) Tajaajila Fayyaaf, lakkoofsa Medica 1-877-317-2410 (TTY: 711), Dean Health Plan/Prevea360 Health Plan, ykn dhiheessaa keessan dubbisaa.

العربية/Arabic

كما تتوفر وسائل مساعدة وخدمات مناسبة لتوفير إذا كنت تتحدث اللغة العربية، فستتوفر لك خدمات المساعدة اللغوية المجانية. تنبيه: (الهاتف النصي: 711) للتواصل مع 1-800-952-3455اتصل على الرقم المعلومات بتنسيقات يمكن الوصول إليها مجانًا. Dean Health Plan، اتصل على الرقم 1-877-317-2410 (الهاتف النصي: 711) بشأن خطة الرعاية الصحية Medica Plan/Prevea360 Health Plan

Korean/한국어: 주의: 한국어를 사용하시는 경우 무료 언어 지원 서비스를 이용하실 수 있습니다. 이용 가능한 형식으로 정보를 제공하는 적절한 보조 기구 및 서비스도 무료로 제공됩니다. Medica 의 경우 1-800-952-3455(TTY: 711)번으로, Dean Health Plan/Prevea360 Health Plan 의 경우 1-877-317-2410(TTY: 711)번으로 전화하시거나, 서비스 제공업체에 문의하십시오.

Russian/Русский: Если вы говорите по-русски, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Позвоните по телефону 1-800-952-3455 (TTY: 711) относительно Medica, позвоните по телефону 1-877-317-2410 (TTY: 711) относительно Dean Health Plan/Prevea360 Health Plan или обратитесь к своему поставщику услуг.

Laos/ ລາວ: ຂໍ້ຄວນເອົາໃຈໃສ່: ຖ້າທ່ານເວົ້າພາສາລາວ, ຈະມີບໍລິການຊ່ວຍດ້ານພາສາແບບບໍ່ເສຍຄ່າໃຫ້ທ່ານ. ນອກຈາກນີ້ ຈະມີເຄື່ອງຊ່ວຍເສີມ ແລະ
ບໍລິການແບບທີ່ເໝາະສົມເພື່ອໃຫ້ຂໍ້ມູນໃນຮູບແບບທີ່ສາມາດເຂົ້າເຖິງໄດ້ໂດຍບໍ່ເສຍຄ່າ. ໂທຫາເບີ 1-800-952-3455 (TTY: 711) ສຳລັບ Medica, ໂທ 1-877-317-2410 (TTY: 711) ສຳລັບ Dean Health Plan/Prevea360 Health Plan ຫຼື ຕິດຕໍ່ຜູ້ໃຫ້ບໍລິການຂອງທ່ານ.

French/ Français: ATTENTION : si vous parlez français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et services auxiliaires appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le 1-800-952-3455 (TTY : 711) pour Medica, appelez le 1-877-317-2410 (TTY : 711) pour le régime de santé Dean Health Plan/Prevea360, ou parlez à votre prestataire de santé.

Serbo-Croatian: PAŽNJA: Ako govorite srpski, dostupne su vam besplatne usluge tumača. Odgovarajuća dodatna pomagala i usluge za pružanje informacija u pristupačnim formatima su takođe dostupne besplatno. Za Medica zdravstveno osiguranje pozovite 1-800-952-3455 (TTY: 711), za Dean/Prevea360 zdravstveno osiguranje pozovite 1-877-317-2410 (TTY: 711) ili razgovarajte sa svojim pružaocem usluga.

Tagalog: PAALALA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng serbisyong tulong sa wika. Magagamit din nang libre ang mga naaangkop na auxiliary na tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa 1-800-952-3455 (TTY: 711) para sa Medica, tumawag sa 1-877-317-2410 (TTY: 711) para sa Dean Health Plan/Prevea360 Health Plan, o makipag-usap sa iyong tagapagbigay ng serbisyo.

Karen/ထၢနှာ်လီၤဖဲအံၤ: ဟ်သူဉ်ဟ်သး– နမ့ၢ်ကတိၤကညီကျိာ်နၤ့ဉ် တၢ်အိဉ်ဒီး ကျိာ်တၢ်ဆီဉ်ထွဲမၤစၢၤ လၢတလာ်ဘူဉ်လာ်စ့ၤလၢနဂီၢ်လီၤ. တၢ်အိဉ်ဒီး ပှၤနီၢ်ခိက့ၢ်ဂီၤတဆူဉ်တကျၢၤအဂီၢ် ပီးလီဒီးတၢ်တိစၢၤမၤစၢၤလၢအကြၢးအဘဉ် လၢကဟ့ဉ်တၢ်ဂ့ၢ်တၢ်ကျိၤ လၢတၢ်မၤနှ့ၢ်အီၤသ့တဖဉ် လၢတလာ်ဘူဉ်လာ်စ့ၤ လၢနဂီၢ်လီၤ. ကိး 1-800-952-3455 (TTY: 711) လၢ Medica အဂီၢ်, ကိး 1-877-317-2410 (TTY: 711) လၢ Dean Health Plan/Prevea360 Health Plan အဂီၢ်, မ့တမ့ၢ် ကတိၤတၢ်ဒီး နပှၤလၢဟ့ဉ်နၤတၢ်ကွၢ်ထွဲတက့ၢ်.

Amharic/ አማርኛ:- ማሳሰቢያ፡- አማርኛ የሚናገሩ ከሆነ፣ የቋንቋ ድጋፍ አገልግሎት በነፃ ይቀርብልዎታል። መረጃን በተደራሽ ቅርጸት ለማቅረብ ተገቢ የሆኑ ተጨማሪ እገዛዎች እና አገልግሎቶች እንዲሁ በነፃ ይገኛሉ። ለMedica በ1-800-952-3455 (TTY: 711) ይደውሉ፣ ለDean የጤና እቅድ/Prevea360 የጤና እቅድ በ1-877-317-2410 (TTY: 711) ይደውሉ ወይም ለእርስዎን አቅራቢ የሆነውን ያነጋግሩ።