

# Medica Prime Solution® (Cost) bundled medical and Part D options



Take advantage of our reduced premiums for 2017 for all-in-one medical and Part D prescription drug plans.

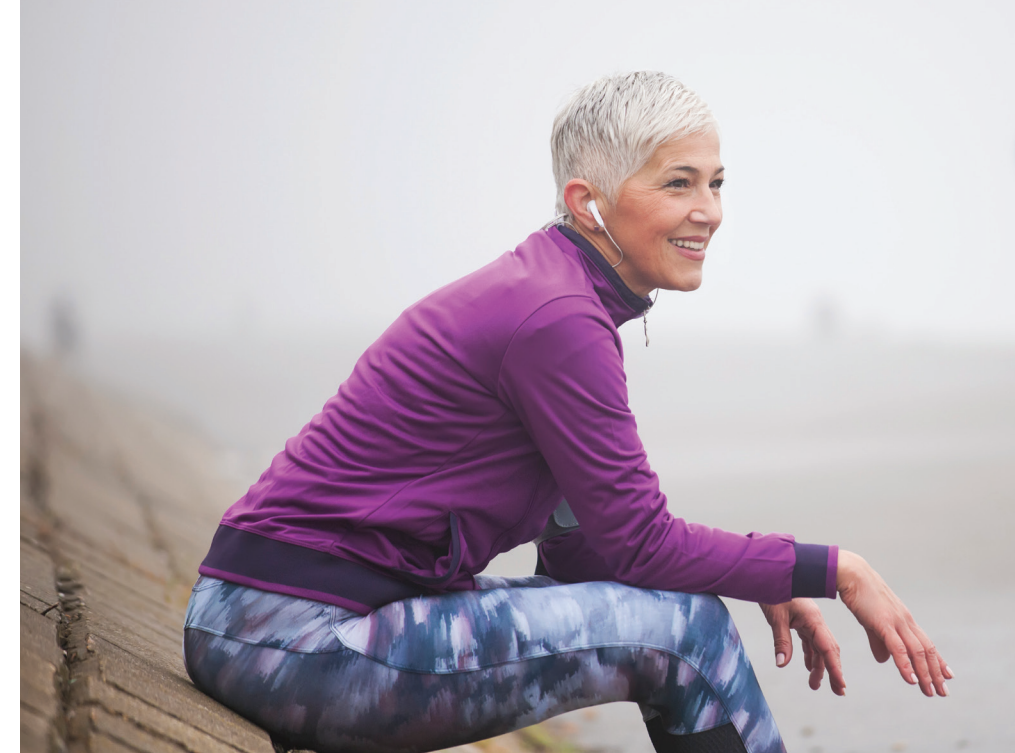
		Prime Solution Medical + Part D Bundled Plan Options							
	2017 Original Medicare	Thrift	Value		Basic		Thrive (MN Only)	Enhanced	
		with Rx	with Rx	with Rx2	with Rx	with Rx2	with Rx	with Rx	with Rx2
<b>Monthly Premium</b>	\$134 for Part B	\$73.20	\$85	\$113.20	\$101.40	\$128.60	\$133	\$185.40	\$208.60
<b>Medical Deductible</b>	\$183 for Part B	\$50	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Part D Deductible</b>	n/a	\$200	\$315	\$0	\$250	\$0	\$225	\$200	\$0
<b>Annual Maximum Out-of-Pocket (medical)</b>	n/a	\$6,700	\$4,000	\$4,000	\$3,400	\$3,400	\$3,000	\$3,000	\$3,000
Medical Benefits	YOU PAY	YOU PAY	YOU PAY		YOU PAY		YOU PAY	YOU PAY	
Inpatient Hospital	Days 1-60: \$1,316 total Days 61-90: \$329/day Days 91-150: \$658/day	\$600 per stay	Days 1-27: \$150/day† Days 28-90: \$0/day		Days 1-34: \$100/day† Days 35-90: \$0/day		Days 1-30: \$100/day† Days 31-90: \$0/day	Days 1-30: \$100/day† Days 31-90: \$0/day	
Skilled Nursing Facility	Days 1-20: \$0/day Days 21-100: \$164.50/day Days 101+: 100%	Days 1-20: \$0/day Days 21-100: \$164.50/day Days 101+: 100%	Days 1-20: \$0/day Days 21-100: \$80/day Days 101+: 100%		Days 1-20: \$0/day Days 21-100: \$0/day Days 101+: 100%		Days 1-20: \$0/day Days 21-100: \$50/day Days 101+: 100%	Days 1-20: \$0/day Days 21-100: \$50/day Days 101+: 100%	
Preventive Services	\$0	\$0	\$0		\$0		\$0	\$0	
Primary Care / Convenience Care	20%	20%	\$10		\$0		\$0	\$0	
Specialist Office Visit	20%	20%	\$30		\$10		\$20	\$20	
Urgent Care	20%	\$25	\$10-\$30		\$0-\$10		\$0-\$20	\$0-\$20	
Chiropractic*	20%	20%	\$20		\$10		\$20	\$20	
Diagnostic Tests / X-Ray / Radiology	20%	20%	10%		\$10		\$0	\$0	
Lab Services	\$0	\$0	\$0		\$0		\$0	\$0	
Diabetes Supplies / Durable Medical Equipment	20%	20%	20%		20%		\$0	\$0	
Outpatient Care	20%	20%	\$125		\$50		\$0	\$0	
Ambulance	20%	20%	\$50		\$25		\$0	\$0	
Emergency Room	20%	\$50	\$50**		\$50**		\$75**	\$75**	
Eye & Hearing Exams - Routine Annual	100%	100%	\$30		\$0		100%	\$0	
Eyewear Allowance / Hearing Aid Allowance	n/a	Not Included	Not Included		Included		Not Included	Included	
Part D Prescription Drug Coverage (31-day Retail)									
Level One - Initial Coverage (Shared drug costs \$0 to \$3,700)									
Tier 1 - Commonly Prescribed Generic & Brand	100%	Up to \$2	Up to \$4	Up to \$2	Up to \$3	Up to \$2	Up to \$4	Up to \$3	Up to \$2
Tier 2 - Low-Cost Generic & Brand	100%	Up to \$10	Up to \$10	Up to \$8	Up to \$10	Up to \$8	Up to \$12	Up to \$13	Up to \$8
Tier 3 - More Expensive Generic & Brand	100%	Up to \$34	Up to \$45	Up to \$35	Up to \$25	Up to \$35	Up to \$25	Up to \$27	Up to \$35
Tier 4 - Higher-Priced Generic & Brand	100%	50%	50%	50%	50%	50%	50%	50%	50%
Tier 5 - Generic or Brand for Complex Conditions	100%	29%	26%	33%	28%	33%	28%	28%	33%
Level Two - Coverage Gap "Donut Hole" (Member-only drug costs up to \$4,950)		Generic at 51% and Covered Brand at 40% for all plan options							
Level Three - Catastrophic Coverage (Shared drug costs \$4,950 and up)		Generic at \$3.30 or 5%*** and Other Drugs at \$8.25 or 5%*** for all plan options							

\* Medicare-covered visit for manual manipulation of the spine to correct sUBLuxation (a displacement or misalignment of a joint or body part) / \*\* Worldwide / \*\*\* Whichever is greater / † Copayments apply once during a benefit period, per day, up to the Part A deductible.

## Prime Solution medical-only options

You can choose not to bundle your medical and Part D drug coverage and instead select a medical-only plan. (See the "Medical Benefits" section in chart above.)

	Prime Solution Medical-only Plan Options				
	Thrift	Value	Basic	Thrive (MN Only)	Enhanced
Monthly Medical-Only Premium	\$49	\$67	\$79	\$105	\$157
Medical Deductible	\$50	\$0	\$0	\$0	\$0
Annual Maximum Out-of-Pocket (medical)	\$6,700	\$4,000	\$3,400	\$3,000	\$3,000



## Learn more about Medica Prime Solution



### Speak with a Medicare consultant.

Toll free **1-800-906-5432 (TTY: 711)**

8 a.m. to 8 p.m. Central, seven days a week

Access to representatives may be limited at times.



### Explore our Medicare coverage options:

[medica.com/Medicare](https://medica.com/Medicare)



CHA52390-701016A

This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits, premiums and/or co-payments/co-insurance may change on January 1 of each year. You must continue to pay your Medicare Part B premium.

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

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