



SummaCare Secure Choice 2011

Medicare Options for Small Businesses

For companies with 2 - 19 employees



Not for distribution to Medicare Beneficiaries

SummaCare Secure Choice

2-19 Employer Medicare Advantage Group Plan

We know the challenges you face as a small business covering employees over the age of 65. Do you want to offer comprehensive coverage to these “working aged” employees? We recognize their unique needs may increase premium costs for all of your employees. And, we have a solution for you.

SummaCare Secure Choice is a small business Employer Medicare Advantage Group Plan that may provide you and your Medicare eligible employees with richer benefits at a lower cost.

Two Options = One Perfect Fit

SummaCare Secure Choice A-11 (HMO-POS)
SummaCare Secure Choice B-11 (HMO-POS)

Our 2-19 Employer Medicare Advantage Group Plans are developed with prescription drug coverage and are specifically designed for the Medicare eligible employee. These plans offer network and non-network coverage allowing employees to use any provider.*

Employer Benefits

- Benefits are typically more comprehensive than your existing health plan
- No medical underwriting or pre-existing condition limitations for Medicare eligibles enrolling in this plan (exceptions do apply in the case of ESRD)
- Dependent coverage options are also available and vary based upon the coverage option selected by the employee
- Employer contribution matches the contribution for the commercial product

Employee Benefits

- Comprehensive benefits – including prescription drug coverage – in one easy-to-understand plan
- Minimal out-of-pocket costs, including no deductibles
- No individual medical underwriting and no pre-existing conditions and limitations
- Full range of health and wellness services are standard with all plans - including exclusive web-based tools to manage health
- Extensive network of providers – plus the ability to utilize any Medicare approved provider in the nation*
- Dependent coverage options are also available and vary based upon the coverage option selected by the employee

*Enrollees will pay more out-of-pocket if they use non-network providers.



Eligibility Guidelines

SummaCare Secure Choice

2-19 Employer Medicare Advantage Group Plan

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Eligibility Guidelines

Participation	<ul style="list-style-type: none">• The Employer must maintain a minimum enrollment of two employees with at least one employee being enrolled in the Employer Medicare Advantage Group Plan.• A Medicare eligible dependent does not satisfy the minimum enrollment participation requirement.• The Employer group forfeits participation in this product if total employment increases to 20 or more individuals for 20 or more calendar weeks.• The SummaCare Employer Medicare Advantage Group Plan must be the sole Medicare Advantage plan offered to eligible members (Exceptions permitted when union contracts stipulate different carrier/product).• An employer participating in an association is required to obtain a quote for the entire group by accessing SummaCare outside of the association.
Employer Contributions	<ul style="list-style-type: none">• Employer contribution is at the discretion of the employer.
Employer Eligibility	<ul style="list-style-type: none">• Medicare plans can be offered to sole proprietorships, partnerships or corporations.• Organizations must not be formed solely for the purpose of obtaining health coverage.
Member Eligibility	<ul style="list-style-type: none">• No individual medical underwriting• No pre-existing condition limitations• Members and dependents are individually eligible for the Employer Medicare Advantage Group Plan if they are entitled to Medicare Part A and enrolled in Medicare Part B and continue to pay their Part B premium.• Employees can select either the Employer Medicare Advantage Group Plan or the Employer Commercial Group Plan.• Dependent coverage options are also available and vary based upon the coverage option selected by the employee.• Members and dependents who enroll in SummaCare's Employer Medicare Advantage Group Plan must reside in SummaCare's approved Medicare service area.• Members must be actively working (not a retiree).
Employer Financial Conditions	<ul style="list-style-type: none">• Groups that have been terminated for non-payment may be reinstated only through renewed application.

In order to offer the SummaCare Medicare Advantage Group Plan, SummaCare must be the sole offering to the entire group.

Case Submission

Verification of Employee/Retiree Status	<ul style="list-style-type: none">• Groups may be asked to submit evidence of employment status for Medicare eligible employees
Effective Dates/Rate Change Dates	<ul style="list-style-type: none">• Rates will be adjusted annually on renewal date
Licensed, Registered Producers	<ul style="list-style-type: none">• Only approved, licensed Agents/Producers registered by SummaCare may market. Only a SummaCare Medicare Account Executive may sell the SummaCare 2-19 Employer Medicare Advantage Group Plan.• All Commercial rating proposals are subject to change based on additional information made available during underwriting.

What's Covered?

SummaCare Secure Choice

The chart below details coverage under each plan.

	SummaCare Secure Choice A-11 (HMO-POS)		SummaCare Secure Choice B-11 (HMO-POS)	
Monthly Plan Premium	\$225		\$300	
Benefit	In-Network Benefit	Out-of-Network Benefit	In-Network Benefit	Out-of-Network Benefit
Out-of-Pocket Maximum	\$3,400	N/A	\$3,400	N/A
Preventive Services*				
Routine Physicals	\$0 copay	\$15 copay	\$0 copay	\$20 copay
Gynecological Exam and Pap	Annual; \$0 copay if performed by PCP; \$30 if performed by specialist	Annual; \$15 copay if performed by PCP; \$45 if performed by specialist	Annual; \$0 copay if performed by PCP; \$20 if performed by specialist	Annual; \$15 copay if performed by PCP; \$40 if performed by specialist
Mammograms	Every year; No charge	\$15 copay	Every year; No charge	\$15 copay
Immunizations	\$0 copay for covered vaccinations	\$15 copay for covered vaccinations	\$0 copay for covered vaccinations	\$15 copay for covered vaccinations
Outpatient Services				
Primary and Specialty Office Visits	\$10 copay for PCP visits; \$30 for specialist visits	\$25 copay for PCP visits; \$45 for specialist visits	\$10 copay for PCP visits; \$20 for specialist visits	\$20 copay for PCP visits; \$40 for specialist visits
Medical and Surgical Care	\$250 copay for outpatient surgery	20% coinsurance for outpatient surgery	\$100 copay for outpatient surgery	\$250 copay for outpatient surgery
Laboratory and X-Ray Tests	\$100 copay Medicare covered x-rays; \$25 copay diagnostic radiology; \$50 copay diagnostic procedures/tests; \$0 copay therapeutic radiology; \$0 copay labs	20% coinsurance	\$0 copay Medicare covered x-rays; \$0 copay diagnostic radiology; \$0 copay diagnostic procedures/tests; \$0 copay therapeutic radiology; \$0 copay labs	20% coinsurance
End-stage Renal Disease	20% of the cost for renal dialysis	20% of the cost for renal dialysis	20% of the cost for renal dialysis	20% of the cost for renal dialysis
Hospital Inpatient Care				
Semiprivate Rooms	\$175 copay per day for days 1 - 10 \$0 copay for days 11 - 90	20% coinsurance per day	\$250 copay per stay	20% coinsurance per day

	SummaCare Secure Choice A-11 (HMO-POS)		SummaCare Secure Choice B-11 (HMO-POS)	
Benefit	In-Network Benefit	Out-of-Network Benefit	In-Network Benefit	Out-of-Network Benefit
Emergency Services				
Emergency Room Services	\$50 copay	\$50 copay	\$50 copay	\$50 copay
Urgent Care	\$35 copay	\$35 copay	\$25 copay	\$25 copay
Ambulance	\$75 copay	\$75 copay	\$0 copay	\$75 copay
Supplies and Services				
Rehabilitation Treatment (physical, occupational and speech)	\$30 copay	\$45 copay	\$20 copay	\$40 copay
Durable Medical Equipment	20% coinsurance	30% coinsurance	20% coinsurance	30% coinsurance
Chiropractic (subluxation of the spine)	\$30 copay	\$45 copay	\$20 copay	\$40 copay
Prosthetic Devices	20% coinsurance	30% coinsurance	20% coinsurance	30% coinsurance
Home Health Care	No Charge	20% coinsurance	No Charge	20% coinsurance
Skilled Nursing Facility Care and Hospice Care				
Semiprivate Room	\$0 copay for days 1 - 10; \$100 copay per day for days 11 - 100	\$100 copay per day for days 1 - 100	\$0 copay for days 1 - 10; \$75 copay per day for days 11 - 100	\$100 copay per day for days 1 - 100
Hospice Care	Not covered; covered under Medicare if member elects Medicare hospice benefits	Not covered; covered under Medicare if member elects Medicare hospice benefits	Not covered; covered under Medicare if member elects Medicare hospice benefits	Not covered; covered under Medicare if member elects Medicare hospice benefits
Mental Health and Substance Abuse				
Inpatient	\$175 copay per day for days 1 - 10; \$0 copay per day for days 11 - 100	20% coinsurance per day for days 1 - 90	\$0 copay per day for days 1 - 90	20% coinsurance per day for days 1 - 90

	SummaCare Secure Choice A-11 (HMO-POS)		SummaCare Secure Choice B-11 (HMO-POS)	
Benefit	In-Network Benefit	Out-of-Network Benefit	In-Network Benefit	Out-of-Network Benefit
Mental Health and Substance Abuse, Continued.				
Outpatient	\$30 copay per visit	\$45 copay per visit	\$20 copay per visit	\$40 copay per visit
SummaCare Benefits Beyond Medicare				
Foreign Travel	Emergency and urgent care covered same as in U.S.	Emergency and urgent care covered same as in U.S.	Emergency and urgent care covered same as in U.S.	Emergency and urgent care covered same as in U.S.
Routine Eye Exam (Annual)	\$10 copay for annual exam if performed by PCP; \$30 if performed by specialist	\$25 copay for annual exam if performed by PCP; \$45 if performed by specialist	\$0 copay for annual exam if performed by PCP; \$20 if performed by specialist	\$20 copay for annual exam if performed by PCP; \$40 if performed by specialist
Routine Hearing Exam (Annual)	\$10 copay for annual exam if performed by PCP; \$30 if performed by specialist	\$25 copay for annual exam if performed by PCP; \$45 if performed by specialist	\$10 copay for annual exam if performed by PCP; \$20 if performed by specialist	\$20 copay for annual exam if performed by PCP; \$40 if performed by specialist
Eyeglasses	Available through EyeMed Discount Program	Available through EyeMed Discount Program	Available through EyeMed Discount Program	Available through EyeMed Discount Program
Preventive Dental	Available through Guardian Dental Program	Available through Guardian Dental Program	Available through Guardian Dental Program	Available through Guardian Dental Program
Transportation	Not covered	Not covered	Not covered	Not covered
Prescription Drug Coverage				
Prescription Drugs	Retail Benefit \$12/\$30/\$50/\$50 30-day supply Mail Order Benefit \$24/\$60/\$100/\$100 90-day supply No Coverage Gap			
Part B Drugs	20% of the cost for Part B covered chemotherapy drugs and other Part B covered drugs			

***Preventive Services Note:** \$0 copay for In-Network benefit for preventive services (includes Bone Mass Measurement, Colorectal Screening, Pap Smear, Prostate Cancer Screening, One Routine Physical Exam, Diabetes Self-Monitoring Training and Supplies, Mammogram Screenings). Medicare guidelines apply.

If you're interested in learning more about SummaCare Secure Choice Medicare Options for small businesses, please contact your independent insurance agent or call SummaCare at 330-996-8913.



Medicare 2-19

Employee and Dependent Options

Scenario	Employee	Dependent	Employee Choice	Dependent Option
1.	Medicare-eligible	Medicare-eligible	Medicare	Medicare
2.	Medicare-eligible	Medicare-eligible	Commercial	Commercial
3.	Medicare-eligible	Not Medicare-eligible	Medicare	Commercial
4.	Medicare-eligible	Not Medicare-eligible	Commercial	Commercial
5.	Not Medicare-eligible	Medicare-eligible	Commercial	Commercial

