

# TODAY'S OPTIONS<sup>®</sup>

## Today's Options<sup>®</sup> Medicare Advantage Group Plans



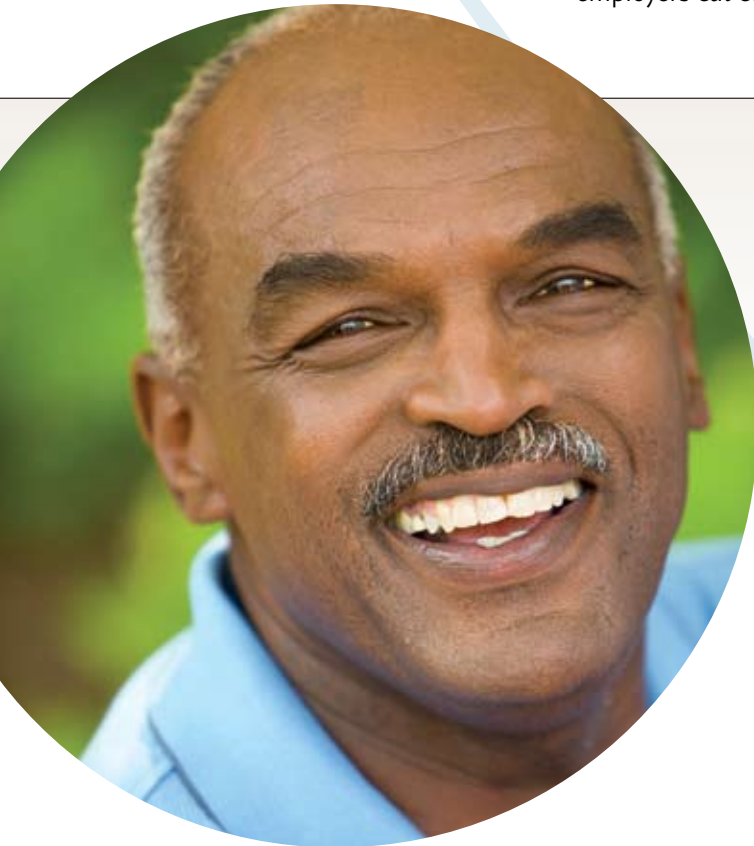
## Providing your company with the tools it needs to protect retirees, working seniors and others with Medicare

Universal American Corp. is a specialty healthcare company, with an emphasis on providing a broad array of health coverage, managed care and prescription drug benefits to the growing senior population. Our subsidiary companies are collectively among the leading providers of Medicare Advantage (MA) and Medicare Advantage Prescription Drug Plans (MAPD) in the United States.

Today's Options<sup>®</sup> is our Medicare Advantage Private Fee-for-Service plan. The plan provides affordable coverage for healthcare services—broader coverage than Medicare alone—and our “Rx” plans marry our healthcare coverage with high-quality prescription drug benefits.

Today's Options provides the tools your company needs to protect retirees and Medicare-eligible active employees from escalating healthcare costs, while providing stability and certainty for your group health plan.

**Why should your company partner with Universal American to provide group health coverage for your retirees and Medicare-eligible employees?** Universal American is different. We believe in building and supporting the relationships between physicians, pharmacists and our members, which sets us apart from other organizations. Experience has shown this partnership best serves the interests of retirees and your company's bottom line. Our group plans can help employers cut costs for themselves—and their retirees.



## More than Medicare Alone

Plans from Today's Options® offer you the healthcare coverage your retirees and Medicare-eligible active employees need, with a focus on keeping them healthy and realizing cost savings for the group health plan.

### Specifically, the plans offer:

- Affordable premiums and co-pays on healthcare and prescription drugs\*
- Reasonable annual out-of-pocket limit on medical expenses
- Coverage on a broader spectrum of services than Medicare alone
- Broad drug coverage designed specifically around Medicare beneficiaries' medical needs and access to more than 63,000 pharmacies nationwide\*
- Freedom to choose—pick your doctor<sup>†</sup>, pick your pharmacy\*



## Simplicity and Flexibility

Many employers are finding it increasingly difficult to provide healthcare benefits as costs continue to rise. Today's Options offers lower premiums, enhanced benefits and a nationwide service area. This eliminates the higher costs associated with group major medical coverage. Combining coverage under one plan means you'll have little to no administrative involvement.

And, if you roll your healthcare and prescription drug benefits into one plan through our "Rx" plans, you can offer your Medicare-eligible active employees and retirees a comprehensive and holistic strategy for a variety of healthcare needs—all with one premium, one ID card and one customer service number.

Today's Options offers three different MA plans:

- Standard
- Choice
- Complete

\* Rx plans only

<sup>†</sup> You can choose any doctor in your service area that participates in Medicare and accepts the plan's terms and conditions.

## Private Fee-For-Service Plans

Member Co-Pays	Standard	Choice	Complete
<b>Out-of-Pocket Limit (MOOP)</b>	\$3,000	\$2,500	\$1,500
<b>Inpatient Hospital Out-of-pocket limit</b>	N/A	N/A	N/A
<b>Inpatient Hospital Care Co-pay</b>	\$250/day 1–5 days; \$0/day 6–90 days; per benefit period	\$300 for each Medicare covered stay	\$100 for each Medicare covered stay
<b>Inpatient Mental Health Care Co-pay</b>	\$250/day 1–5 days; \$0/day 6–90 days; per benefit period	\$200/day 1–5 days; \$0/day 6–90 days; per benefit period	\$100/day 1–5 days; \$0/day 6–90 days; per benefit period
<b>Primary Care Physician Co-pay</b>	\$20 per visit	\$10 per visit	\$5 per visit
<b>Specialist Co-pay</b>	\$30 per visit	\$20 per visit	\$10 per visit
<b>Outpatient Surgery—Ambulatory/Hospital Co-pay</b>	\$100 for each visit to an ambulatory surgical center; \$200 for each visit to an outpatient hospital facility	\$100 for each visit to an ambulatory surgical center; \$200 for each visit to an outpatient hospital facility	\$25 for each visit to an ambulatory surgical center; \$50 for each visit to an outpatient hospital facility
<b>Outpatient Mental Health Care Co-pay</b>	\$35	\$35	\$35
<b>Outpatient Rehab (therapies) Co-pay</b>	\$35	\$30	\$15
<b>Outpatient Substance Abuse Care Co-pay</b>	50%	50%	50%
<b>Skilled Nursing Facility Co-pay</b>	\$0/day 1–20 days; \$100/day 21–100 days; covered for 100 days per benefit period	\$0/day 1–20 days; \$100/day 21–100 days; covered for 100 days per benefit period	\$0/day 1–20 days; \$50/day 21–100 days; covered for 100 days per benefit period
<b>Home Health Co-pay</b>	20%	0% (Covered in full)	0% (Covered in full)
<b>Ambulance Co-pay</b>	\$150	\$100	\$50
<b>Emergency Room Co-pay</b>	\$75 for each ER visit; Worldwide coverage	\$50 for each ER visit; Worldwide coverage	\$50 for each ER visit; Worldwide coverage
<b>Urgently Needed Care Co-pay</b>	\$75 for each Urgently Needed care visit; Worldwide coverage	\$35 for each Urgently Needed care visit; Worldwide coverage	\$35 for each Urgently Needed care visit; Worldwide coverage
<b>Durable Medical Equipment and/or Prosthetic Co-pays</b>	20%	20%	10%
<b>Diabetic supplies Co-pay</b>	20%	10%	0% (Covered in full)
<b>Diagnostic tests, X-rays, Lab Co-pay</b>	\$0–lab; 20% radiation; 20% x-rays	\$0–lab; 20% radiation; 20% x-rays	\$0–lab; 10% radiation; 10% x-rays
<b>Preventive Services Co-pay</b>	No co-payment for Bone Mass Measurement; Colorectal Screening Exams; Pneumonia and Flu vaccines; Screening Mammograms; Pap Smear and Pelvic Exams; Prostate Screening	No co-payment for Bone Mass Measurement; Colorectal Screening Exams; Pneumonia and Flu vaccines; Screening Mammograms; Pap Smear and Pelvic Exams; Prostate Screening	No co-payment for Bone Mass Measurement; Colorectal Screening Exams; Pneumonia and Flu vaccines; Screening Mammograms; Pap Smear and Pelvic Exams; Prostate Screening
<b>Chiropractic and Podiatry Services Co-pay</b>	\$35 for each Medicare covered visit	\$20 for each Medicare covered visit	\$10 for each Medicare covered visit
<b>Dental Co-pays</b>	None	None	100%
<b>Hearing Co-pays</b>	\$35 per Medicare-approved exam; 100% for hearing aids	\$30 per Medicare-approved exam; 100% for hearing aids	\$15 per Medicare-approved exam; 100% for hearing aids
<b>Vision Co-pays</b>	\$35 per Medicare-approved exam	\$30 per Medicare-approved exam	\$15 per Medicare-approved exam
<b>Part B Drugs</b>	20%	20%	20%

We offer nine different Medicare Advantage plans with integrated prescription drug coverage (MAPD). You can create an MAPD that best suits your group’s needs by adding one of our Rx plans (Low Rx, Medium Rx, High Rx) to a Today’s Options MA plan.

### Rx Plans

Member Co-Pays	Low Rx	Medium Rx	High Rx
Deductible	\$0 / \$200	\$0 / \$200	\$0 / \$200
Generic	\$10	\$5	\$0
Preferred Brand	\$30	\$25	\$20
Non-Preferred Brand	\$60	\$50	\$40
Specialty	30% / 25%	30% / 25%	30% / 25%
Initial Coverage Limit	\$2,510 / \$2,510 Brand Only / None	\$2,510 / \$2,510 Brand Only / None	\$2,510 / \$2,510 Brand Only / None
Out-of-Pocket Limit (TrOOP)	\$4,050	\$4,050	\$4,050
Catastrophic Coverage	Greater of \$2.25 / \$5.60 or 5%	Greater of \$2.25 / \$5.60 or 5%	Greater of \$2.25 / \$5.60 or 5%
Coverage Gap	No / Generics Only / Yes	No / Generics Only / Yes	No / Generics Only / Yes

Specialty is an optional tier

30% Specialty coinsurance applies if deductible is \$0; 25% applies if deductible is \$200

All plans offer the same Medicare Part A and Part B coverage including:

- Primary care physician office visits
- Specialist office visits
- Inpatient hospital stays
- Medicare-approved skilled nursing facility stays
- Outpatient surgery
- Emergency care

Remember: By selecting our Rx plans, your retirees and Medicare-eligible employees will receive all the benefits of the medical coverage from the Medicare Advantage plans, plus prescription drug coverage, eliminating the need for separate Part D prescription drug coverage.



## Commitment to Retiree Care

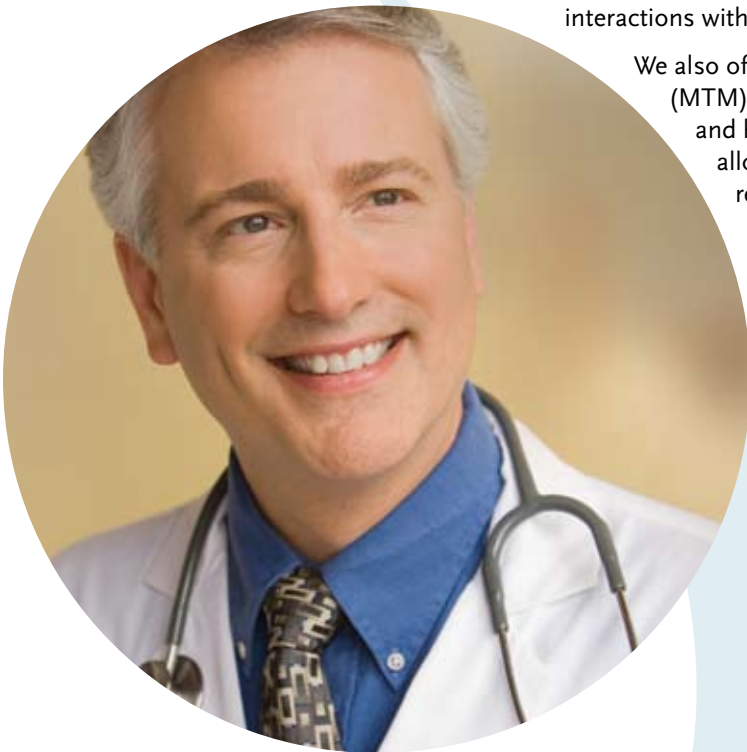
Today's Options offers Health & Wellness Services designed to help your retirees and Medicare-eligible active employees take better care of themselves. We offer a dedicated care management team to assist with health conditions. This collaborative effort improves the quality, access and value of the healthcare delivered to your group health plan members.

**These valuable programs are available to members at no extra cost:**

- **Personal health assessments**—Members will receive a complementary health assessment each year. This ensures they understand their health status and helps us identify ways to better serve them.
- **Around-the-clock health advice**—Specially trained medical professionals are available 24 hours a day, 7 days a week to answer health-related questions and provide support for chronic diseases like diabetes and respiratory conditions.
- **After-care support**—Special support is available to help members get back on their feet after an acute illness or hospitalization.
- **24/7 Health Hotline**—Our members can receive medical advice from registered nurses. Trained professionals are also available to help members find senior centers, transportation providers, home delivered meals and more.
- **Complex Case Management**—Offers management for acute care and post hospitalization needs.

If you select a plan with prescription drug coverage, your retirees will qualify for a Welcome Medication Review with their pharmacists. Through this review, the pharmacist is able to understand the needs of the member, help manage various health issues, review current medication and uncover any dangerous drug interactions with both prescriptions and over-the-counter medication.

We also offer face-to-face Medication Therapy Management (MTM) sessions for retirees who take many prescriptions and have certain chronic conditions. These MTM sessions allow pharmacists to continually assess medication regimens and costs for beneficiaries with certain chronic diseases to check for dangerous drug interactions and to help them take their medicines correctly, while saving them (and the plan) money.



## Frequently Asked Questions

**Does Today's Options cover everything that Original Medicare covers?**

Yes. Today's Options must provide enrollees with the same benefits they would receive under Original Medicare. This includes all medically necessary services covered under Medicare Parts A and B, plus additional benefits not covered by Original Medicare. In addition, group health plans can choose a Today's Options plan with the "Rx" option, which includes drug benefits.

**If our company selects an "Rx" plan, where can our members have their prescriptions filled?**

Today's Options members have access to more than 63,000 pharmacies nationwide, including all major chains.

**How will our company's retirees know if the prescription drugs they currently take will be covered?**

Our "Rx" plans have a list of covered drugs, or a formulary. You can obtain a copy of the formulary by asking your agent.

**What drugs are excluded from the Medicare Advantage Prescription Drug Plans?**

The same drugs that are excluded by Medicare are excluded by Medicare Advantage plans. They are:

1. Drugs used for anorexia, weight loss, or weight gain
2. Drugs used to promote fertility
3. Drugs used for cosmetic purposes or hair growth
4. Drugs used for the symptomatic relief of cough and colds
5. Prescription vitamins and mineral products, except prenatal vitamins and fluoride preparation
6. Non-prescription drugs
7. Inpatient drugs
8. Barbiturates (sleeping pills)
9. Benzodiazepines (central nervous system depressants)

In addition, a drug cannot be covered under a Medicare Advantage Prescription Drug Plan if payment for that drug is available under Medicare Parts A or B, such as drugs administered in a hospital or a physician's office. Also, each Medicare Advantage Prescription Drug Plan may have its own specific exclusions.





## The Bottom Line That Benefits Everyone.

Today's Options strives to maintain the balance between your retirees' needs and your needs as a plan sponsor, while keeping your retirees' health and well-being at the heart of our commitment. We build and support the relationships between physicians, pharmacists and our members. As a result, we strive for healthier outcomes. Because we make the health and well-being of the member the true bottom line of our business model, everybody benefits.



Contact General Group Sales for more information  
1-877-285-8759

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Today's Options Medicare Advantage Private Fee-for-Service plans are offered by American Progressive Life & Health Insurance Company of New York and The Pyramid Life Insurance Company, subsidiaries of Universal American Corp., which are contracted with the Federal government. Our plan is available to anyone enrolled in Part B and entitled to Part A of Medicare through age or disability who continues to pay any applicable Medicare premiums and lives in the service area. You must continue to pay your Medicare Part B premium. American Progressive Life & Health Insurance Company of New York and Pyramid Life Insurance Company and its agents are not connected in any way with the federal or state government or Medicare.

A Medicare Advantage Private Fee-for-Service plan works differently than a Medicare Supplement plan. Your doctor or hospital must agree to accept the plan's terms and conditions prior to providing healthcare services to you, with the exception of emergencies. If your doctor or hospital does not agree to accept our payment terms and conditions, they may not provide healthcare services to you, except in emergencies.