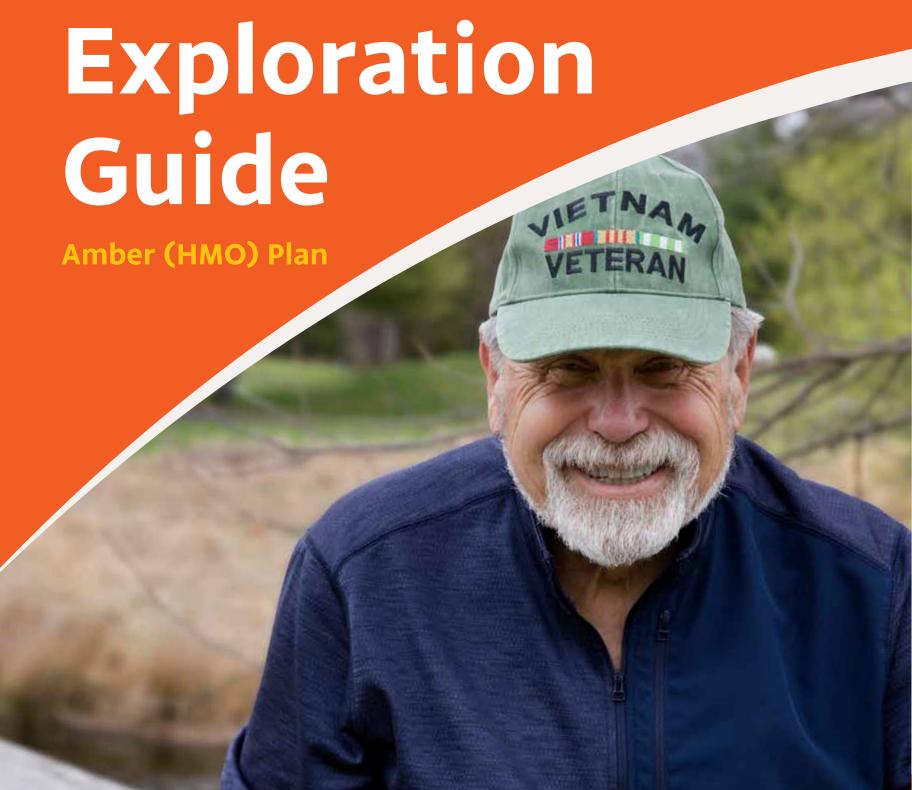


2026 Medicare Advantage Plans





Begin Your Personal SummaCare Journey

We are committed to contributing to a healthier community by guiding you to be the healthiest version of yourself.

SummaCare Medicare Advantage plans are "all-in-one" — meaning, your medical, dental, vision and other healthcare coverage are all in one convenient budget-friendly plan. This booklet explores the Amber (HMO) plan, which does not include Part D prescription coverage.

As you read on, you'll notice SummaCare goes beyond basic Medicare with valuable extra benefits designed to keep you healthy.

With a focus on member satisfaction, your good health is our top priority.

Contents SummaCare 2026 MA Plans Extra Benefits Health & Wellness Programs & Services 8 **Provider Network** Key Providers and Health Systems 13 Network Hospitals by County 14 Frequently Asked Questions 16 **Summaries of Benefits** SummaCare Medicare Advantage Amber HMO Plans 19 **How to Enroll** Medicare Enrollment Periods 37 SummaCare's Service Area 37 Ways to Enroll 38 39 Paying Your Premium

Go Beyond Basic Medicare with Valuable Extra Benefits

Our plans cover everything that Original Medicare covers and more!





Benefit Bucks & SummaCare & more card

Every member will receive a SummaCare &more card with which to spend your various Benefit Bucks, including Over-the-Counter (OTC) Allowances and Preventive Care Rewards. How members earn/receive Benefit Bucks and corresponding amounts may vary based on current plan.

*Rewards are loaded automatically to your SummaCare &more card approximately 90 days after claims are paid.

&more Benefits Prepaid Mastercard® is issued by Avidia Bank, pursuant to a license from Mastercard Incorporated. Use of this card is subject to the terms and conditions of the Cardholder Agreement.



△ DELTA DENTAL®

Enhanced Dental Coverage through the Delta Dental Network!

You're covered for a wide variety of services including cleanings, fluoride treatments, X-rays, exams, fillings, simple extractions and root canals. Coverage for bridges, crowns and dentures is also available on all plans. Optional Supplemental Dental coverage can be purchased for an additional monthly premium.



See a Vision Provider of Your Choice

You'll receive an annual reimbursement amount to use toward the purchase of frames/lenses or contact lenses with the freedom to purchase **ANYWHERE** you choose. Coverage also includes in-network diagnostic and routine vision exams for a \$0 copay at network providers.



amplifon

Choose the Hearing Aid that's Best for You

You're covered for one hearing aid per ear every year; choose from a wide variety of hearing aids and only pay a \$395 or \$695 copay per hearing aid, depending on model selected. Amplifon does have additional hearing-aid models available for purchase at a discounted rate.



Over-the-Counter (OTC) Items

Use your SummaCare &more card to spend your Benefit Bucks on non-prescription OTC health-related items. Your OTC quarterly allowance can be used to obtain health-related items over the phone, online or in person at more than 70,000+ participating retailers nationwide.

&more Benefits Prepaid Mastercard® is issued by Avidia Bank, pursuant to a license from Mastercard Incorporated. Use of this card is subject to the terms and conditions of the Cardholder Agreement.



BrainHQ Memory Fitness

In the simplest of terms, BrainHQ is an online, evidence-based program to address your overall brain health. BrainHQ has dozens of exercises that have been scientifically proven to help people think faster, focus better and remember more. BrainHQ adjusts to meet the needs of your unique brain over time; providing the best exercises at the right pace your brain needs to be at its sharpest.



This benefit is not available on the below plans:

TOPAZ (HMO) QUARTZ (HMO)

GARNET (HMO)



Papa Pals

Hang Out and Help Out. Papa pairs our members with Pals for companionship and assistance with everyday tasks. Get help around the house, including light housework, a ride to your provider's office, pharmacy (or anywhere around town), technology assistance, help with errands or simply someone to talk to. When a Papa Pal supports a SummaCare Medicare Advantage member, they're also offering relief and respite to caregivers who need it.



This benefit is not available on the below plans:

TOPAZ (HMO) QUARTZ (HMO)



Travel Coverage

Through our **visitor/travel benefit**, members receive in-network coverage levels (for most benefits) when visiting a Medicare-participating provider in Arizona, Florida and Texas. Garnet (HMO), Ruby (HMO), Quartz (HMO) and Topaz (HMO) plan members also have travel coverage for North and South Carolina. Whether you're a snowbird or regularly travel, go with confidence knowing you're covered.

Note: You still must use SummaCare network providers for Part D prescription drugs (Part D prescription coverage not included on Amber (HMO) plan) and certain supplemental benefits for in-network coverage to apply. Our plans also have built-in **worldwide emergency, urgent care coverage and ambulance services**, too, so you can travel close to home or around the world, worry-free.





Meal Delivery

You are covered for nutritious, fully prepared meals created by chefs and registered dietitians that fuel healthy living! Following a hospital stay, or if you are diabetic with an A1C over 8, you can receive home-delivered, nutritious meals to help you focus on rest and recovery.

This benefit is not available on the below plans:

TOPAZ (HMO) QUARTZ (HMO)

GARNET (HMO)





SilverSneakers®

All SummaCare Medicare Advantage plans include a SilverSneakers® membership at no added cost. SilverSneakers is more than a traditional fitness program. It's a way to improve your health and live the life you want. Whether you enjoy group fitness classes, sports, using strength and cardio equipment or prefer staying active at home, SilverSneakers gives you the opportunity to improve your health, gain confidence and connect with your community.



Teladoc

Telehealth Services

You're covered for Teledoc® and/or telehealth visits with primary care providers, specialists and/or behavioral health and substance abuse providers. Visits can be scheduled through in-network providers or through Teladoc Health. Most Teladoc Health visits can be scheduled 24 hours a day, 365 days a year.





Acupuncture Services

If you have chronic low back pain, you're covered on all plans. Supplemental acupuncture services vary by plan and are combined with Therapeutic massage. Visits must be scheduled through HOMELINK.

Supplemental acupuncture services are not available on the below plans:

TOPAZ (HMO) QUARTZ (HMO) RUBY (HMO) SAPPHIRE (HMO-POS)



Diabetes Supplies

Receive supplies to monitor your blood glucose including test strips, lancet devices, lancets and glucose-control solutions for no cost when using Abbott and/or Ascensia Contour products through any in-network pharmacy. Only Abbott products are available through HOMELINK.





Home Safety Devices

You may qualify for coverage for home safety devices, such as grab bars, shower stools and more. To qualify you must have had, within the last 12 months, any of the following: hip replacement, knee replacement or femur fractures; or a diagnosis of falls, as documented by a provider. Emerald (HMO-POS) members do not need a qualifying diagnosis to use this benefit.



This benefit is not available on the Quartz (HMO) plan

QUARTZ (HMO)



Therapeutic Massage Services

You're covered for therapeutic massage services performed by in-network providers. These services require a provider's order. Visit limit is combined with supplemental acupuncture.

This benefit is not available on the below plans:





QUARTZ (HMO) RUBY (HMO)

SAPPHIRE (HMO-POS)



Transportation

You're covered for a defined number of trips to medical appointments. Most trips can be scheduled in as little as 30 minutes, and you can see providers throughout SummaCare's 33-county service area. HOMELINK coordinates most transportation trips using local ride-share vendors such as Uber and Lyft. Please schedule stretcher, wheelchair or electric wheelchair transport at least 72 hours in advance; ambulatory sedan trips should be scheduled 48 hours in advance.

This benefit is not available on the Topaz (HMO) plan

TOPAZ (HMO)

Call us now at **888.290.0610 (TTY 711)** for more details on coverage amounts, limitations and copays for each of these services.





Save Big with Benefit Bucks on Your SummaCare & more Card!

Use your OTC allowance and preventive care rewards to build a Benefit Bucks balance on your SummaCare &more card. Then stock up and save on everyday health essentials-and more-when you shop!





Over-the-Counter (OTC) Allowance Benefit Bucks

All SummaCare Medicare Advantage plans offer a quarterly OTC allowance to use to buy non-prescription drugs and everyday health-related items, for example:

- Pain relievers
- Cough drops
- Skin & sun care

Antacids

· First-aid

Vitamins

Your OTC allowance can be used to purchase health-related items at participating retailers. Members may also order OTC items for home delivery by:

- Visiting summacare.com/overthecounter
- Using the andmore mobile app
- · Calling 855.263.6673 (TTY 711) and placing your order over the phone



Preventive Care Rewards Benefit Bucks

All SummaCare Medicare Advantage members are also eligible to receive rewards on your SummaCare &more card when you receive key preventive care services, including:

- · Annual Wellness Visit-\$50
- Breast Cancer Screening-\$10
- · Colorectal Cancer Screening-\$10

Use your Benefit Bucks at participating retailers for everything in store (like OTC, food, household supplies, personal care products, clothes, fitness items, floral) excluding alcohol, tobacco, firearms, fuel, lottery or gift cards. Members can order online, by phone and through the andmore mobile app from our catalog.



































Health & Wellness Programs



24-Hour Nurse Line

You'll have access to a registered nurse 24 hours a day, seven days a week who can answer your non-emergent health concerns.



Preventive Health Reminders and Incentives!

Do you sometimes forget to schedule regular checkups? Once you're a member, we'll send you reminders for preventive services and other recommended care for common conditions.



Health Coaching and Condition Management

Condition Management includes a registered nurse helping you learn how to better manage your chronic condition and how to maintain and improve your quality of life.



Health Manager Powered by WebMD®

Once you're a member, you'll get exclusive access to WebMD's Health Manager online tool. Set personal goals, monitor your health progress, track results, set personal health and wellness reminders. It's like having a personal health coach working with you 24/7.



QuitCare

SummaCare can offer support to smokers who are ready to kick the habit. Quitting specialists will enroll members in the FREE QuitCare counseling program. Members may also choose to receive FREE nicotine replacement therapy.

Plus, many enhanced care management programs!

If you are living with a serious or chronic health condition, SummaCare offers members additional programs and services designed to help you stay independent and feel your best. If you qualify, our Care Management team will reach out to you once you're a member.





summacare.com/medicare

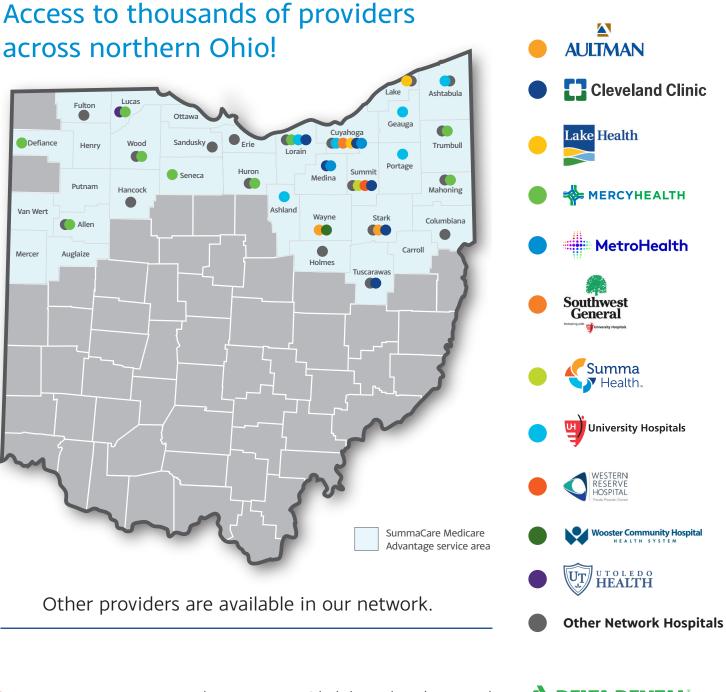
Provider Network



Far-reaching network. Neighborly service

Provider Network

SummaCare's extensive network of providers and health systems stretches across 33 northern Ohio counties.



Dental coverage provided through Delta Dental.



Provider Network - Hospitals by County

- Allen 🛑
- Bluffton Hospital
- · Institute for Orthopaedic Surgery
- Mercy Health
 - · St. Rita's Medical Center

Ashland

- University Hospitals
 - · Samaritan Medical Center

Ashtabula

- · Ashtabula County Medical Center
- University Hospitals
 - · Conneaut Medical Center
 - · Geneva Medical Center

Columbiana

Salem Regional Medical Center

Cuyahoga (Cuyahoga

- Cleveland Clinic
 - · Cleveland Clinic Main Campus
 - · Cleveland Clinic Rehabilitation Hospital, Beachwood
 - · Euclid Hospital
 - · Fairview Hospital
 - Hillcrest Hospital
 - · Lutheran Hospital
 - Marymount Hospital
 - · South Pointe Hospital
- · Lake Health
 - · Beachwood Medical Center
- MetroHealth
 - MetroHealth Medical Center
 - MetroHealth Cleveland Heights Hospital
- · MetroHealth Parma Hospital
- Southwest General Health Center
- St. Vincent Charity Medical Center
- · University Hospitals
 - Ahuja Medical Center
 - · Cleveland Medical Center
 - MacDonald Women's Hospital
 - · Parma Medical Center
 - · Rainbow Babies & Children's Hospital
 - · Seidman Cancer Center
 - · St. John Medical Center

Defiance



- Mercy Health
 - · Defiance Hospital

Erie

· Firelands Regional Medical Center

Fulton

Fulton County Health Center

Geauga

- University Hospitals
 - · Geauga Medical Center

Hancock

Blanchard Valley Hospital

Holmes

· Pomerene Hospital

Huron C

- Bellevue Hospital
- · Fisher-Titus Medical Center
- Mercy Health
 - · Willard Hospital

Lake C



- Lake Health
- TriPoint Medical Center
- West Medical Center

Lorain

- Avon Hospital at Richard E. Jacobs Campus
- · Cleveland Clinic Rehabilitation Hospital, Avon
- Mercy Health
 - · Allen Hospital
 - · Lorain Hospital
- · University Hospitals
 - · Elyria Medical Center

Lucas (



- Mercy Health
 - · Children's Hospital
 - · St. Anne Hospital
 - · St. Charles Hospital
 - · St. Vincent Medical Center
- University of Toledo Medical Center

























Mahoning



- · Akron Children's Hospital **Mahoning Valley**
- Mercy Health
 - · St. Elizabeth Boardman Hospital
 - · St. Elizabeth Youngstown Hospital
- The Surgical Hospital at Southwoods

Medina



- · Lodi Hospital
- Medina Hospital
- MetroHealth
 - Medina Health Center (Reagan Parkway)
 - · Brunswick Health Center

Portage

- University Hospitals
 - Portage Medical Center

Sandusky

Promedica Memorial Hospital

Seneca

- Mercy Health
 - Tiffin Hospital

Stark

- Alliance Community Hospital
- Aultman Hospital
- · Cleveland Clinic
 - Mercy Hospital

Summit



- · Akron Children's Hospital
- Cleveland Clinic
 - · Akron General
 - · Cleveland Clinic Rehabilitation Hospital, Edwin Shaw
- Crystal Clinic Orthopedic Center
- · Summa Health System
 - Akron Campus
 - Barberton Campus
- Western Reserve Hospital

Trumbull



- St. Joseph Warren Hospital
- · Trumbull Memorial Hospital

Tuscarawas



- Trinity Hospital Twin City
- Union Hospital

Wayne **Wayne**



· Wooster Community Hospital

Wood



- · Mercy Health
 - Perrysburg Hospital
- · Wood County Hospital

Provider Network

Frequently Asked Questions

How do I find a provider or hospital?

SummaCare makes it easy for you to find a provider or hospital in our network. You can:

- Use the provider search tool on our website at summacare.com/medicare. Our online provider search is updated on a daily basis. This provides the most current listing of our provider network.
- Call us at 888.464.8440 (TTY 711), and we'll help you find a provider.
- If you'd like a Provider Directory mailed to you, you may call the number above or request one through our website at summacare.com/medicare.

Why do I need a Primary Care Provider (PCP)?

Having a primary care provider can keep you healthier. Your PCP will coordinate your care and work directly with other providers in the network to assure you're receiving the care that's most appropriate for your condition. If you require care from a specialist, your PCP can serve as your navigator to ensure you receive care from the providers best suited for your medical conditions.

What if my current provider is not in your network?

If you cannot find your current provider(s) in our provider listing, please call us first. Because provider listings may change daily, our representatives can review the most current information to determine the status of your provider(s).

Out-of-network/non-contracted providers are under no obligation to treat plan members, except in emergency situations. Please call Member Services at 330.996.8885 (TTY 711) or 800.996.6250 (TTY 711) or see your Evidence of Coverage at summacare.com/eoc for more information. From October 1 through March 31, a representative will be available to take your call from 8:00 a.m. until 8:00 p.m., seven days a week.

From April 1 through September 30, a representative will be available to take your call from 8:00 a.m. until 8:00 p.m., Monday through Friday. Outside these hours, you may leave us a message, and a representative will return your call the next business day.

Do I need a referral from my Primary Care Provider (PCP) to see a specialist?

No; however, we recommend you first seek care through your Primary Care Provider (PCP) to identify the most appropriate course of treatment and to determine the most appropriate specialist to provide the specialty care needed.

What if I'm traveling outside of the SummaCare service area and need care?

If you're traveling outside of the service area, all SummaCare Medicare Advantage plans offer coverage anywhere in the country for emergency, urgent care and ambulance services. All SummaCare Medicare Advantage plans include Visitor/Travel Coverage at Medicare-approved providers in AZ, FL and TX at the in-network level. Select benefits may be available based on the plan selected.

Please refer to the Summary of Benefits documents in this guide for more information.





Plan Year January 1, 2026, through December 31, 2026

SummaCare Medicare Advantage Amber NE (HMO) (H3660-052-1) The SummaCare Medicare Advantage Amber (HMO) plan is available to residents of the following counties in Ohio:
Ashland, Ashtabula, Carroll, Columbiana, Cuyahoga, Geauga, Holmes, Lake, Lorain, Mahoning, Medina, Portage, Stark, Summit, Trumbull, Tuscarawas and Wayne.

SummaCare Medicare Advantage Amber NW (HMO) (H3660-052-2) The SummaCare Medicare Advantage Amber (HMO) plan is available to residents of the following counties in Ohio: Allen, Auglaize, Defiance, Fulton, Hancock, Henry, Huron, Lucas, Mercer, Ottawa, Putnam, Seneca, Van Wert and Wood

SummaCare is an HMO and HMO-POS plan with a Medicare contract. Enrollment in SummaCare depends on contract renewal. H3660_SC1912_M Accepted 09232025

Premiums and Benefits	SummaCare Medicare Amber NE (HMO)	SummaCare Medicare Amber NW (HMO)
Monthly Plan	You must continue to pay your Medicare Part B premium.	
Premium	You pay \$0	You pay \$0
Medical Deductible	You pay nothing.	You pay nothing.
Maximum Out-of-Pocket Responsibility	 Does not include prescription drugs. Includes copays and other costs for in-network Part A and Part B medical services throughout the year. 	
	\$3,450	\$3,450
Inpatient	Our plan pays for an unlimited number of days for an inpatient hospital stay.	
Hospital Coverage	\$250 copay per day for days 1 through 5. You pay nothing after day 5.	\$250 copay per day for days 1 through 5. You pay nothing after day 5.
	Outpatient hospital:	
Outpatient	Outpatient hospital:	
Outpatient Hospital Coverage	Outpatient hospital: \$250 copay	\$250 copay
Hospital		\$250 copay
Hospital	\$250 copay	\$250 copay \$250 copay
Hospital	\$250 copay Observation services:	<u> </u>
Hospital Coverage Ambulatory	\$250 copay Observation services: \$250 copay	\$250 copay \$200 copay
Hospital Coverage Ambulatory Surgical Center Provider	\$250 copay Observation services: \$250 copay \$200 copay You are not required to receive authorizations.	\$250 copay \$200 copay
Hospital Coverage Ambulatory Surgical Center Provider	\$250 copay Observation services: \$250 copay \$200 copay You are not required to receive authorizations specialists.	\$250 copay \$200 copay
Hospital Coverage Ambulatory Surgical Center Provider	\$250 copay Observation services: \$250 copay \$200 copay You are not required to receive authorize specialists. Primary care provider visit:	\$250 copay \$200 copay ation before seeking care from most

Premiums and Benefits	SummaCare Medicare Amber NE (HMO)	SummaCare Medicare Amber NW (HMO)
Preventive Care (e.g., flu vaccines, diabetic screenings)	 Our plan covers many preventive servi Abdominal aortic aneurysm screening Alcohol misuse counseling Annual Wellness Visit Bone mass measurement Breast cancer screening (mammogram) Cardiovascular disease risk reduction Cardiovascular disease testing Cervical and vaginal cancer screening Colorectal cancer screenings (colonoscopy, fecal occult blood test, flexible sigmoidoscopy) Depression screening Diabetes screening HIV screening 	 Medical nutrition therapy services Obesity screening and counseling Pre-exposure prophylaxis (PrEP) for HIV prevention Prostate cancer screening and counseling Screening for Hepatitis C Virus infection Sexually transmitted infections screening and counseling Tobacco use cessation counseling (counseling for people with no sign of tobacco-related disease) Vaccines (including flu, Hepatitis B, pneumococcal) "Welcome to Medicare" preventive visit (one-time)
	You pay nothing.	You pay nothing.
Emergency Care	If you are admitted to the hospital within 24 hours, you do not have to pay the copay. Emergency, urgent care and ambulance services outside of the United States are covered up to a maximum of \$25,000 each year. This includes emergency ambulance occurring immediately before a covered emergency visit.	
	\$120 copay per visit	\$120 copay per visit

Urgently Needed Services Urgently needed services are provided to treat a non-emergency, unforeseen medical illness, injury, or condition that requires immediate medical care but given your circumstances, it is not possible, or it is unreasonable, to obtain services from network providers. If it is unreasonable given your circumstances to immediately obtain the medical care from a network provider, then your plan will cover the urgently needed services from a provider out-of-network. Services must be immediately needed and medically necessary. Examples of urgently needed services that the plan must cover out of network occur if: you are temporarily outside the service area of the plan and require medically needed immediate services for an unforeseen condition but it is not a medical emergency; or it is unreasonable given your circumstances to immediately obtain the medical care from a network provider. Cost sharing for necessary urgently needed services furnished out-of-network is the same as for such services furnished in-network. Emergency, urgent care and ambulance services outside of the United States are covered up to a maximum of \$25,000 each year. This includes emergency ambulance occurring immediately before a covered emergency visit. \$40 copay per visit \$40 copay per visit The copay is based on where the procedure takes place. You pay a lower copay at a provider's office (office visit copay may apply). You pay a higher copay at all
ambulance occurring immediately before a covered emergency visit. \$40 copay per visit \$40 copay per visit The copay is based on where the procedure takes place. You pay a lower copay at a provider's office (office visit copay may apply). You pay a higher copay at all
Diagnostic Services/Labs/ The copay is based on where the procedure takes place. You pay a lower copay at a provider's office (office visit copay may apply). You pay a higher copay at all
Services/Labs/ at a provider's office (office visit copay may apply). You pay a higher copay at all
Imaging other locations.
Diagnostic radiology service (e.g., MRI):
\$125 copay \$125 copay
Diagnostic tests and procedures:
\$50 copay \$50 copay
Lab services:
\$5 copay \$5 copay
Outpatient X-rays:
\$50 copay \$50 copay
Therapeutic radiology services (such as radiation treatment for cancer):
20% of the cost 20% of the cost

<u>Juninar</u>	ily of beliefits		
Premiums and Benefits	SummaCare Medicare Amber NE (HMO)	SummaCare Medicare Amber NW (HMO)	
Hearing Services	You are covered for an annual routine hearing exam every year. Services for hearing aids must be received through SummaCare's in-network provider, Amplifon. You receive one year of follow-up care. Risk-free trial of 60 days. Two-year battery support (battery supply or charging station.) Costs for hearing aids do not count towards the out-of-pocket maximum. There is no copay for a hearing aid fitting/evaluation.		
	Diagnostic hearing exam:		
	\$0-\$20 copay, depending on the location	\$0-\$20 copay, depending on the location	
	Supplemental routine hearing exam:		
	\$0 copay	\$0 copay	
	Hearing aids: Limit one per ear every year. Amplifon does have additional hearing-aid models available for purchase at a discounted rate.		
	\$395 per hearing aid for Level 1 hearing aids and \$695 per hearing aid for Level 2 hearing aids	\$395 per hearing aid for Level 1 hearing aids and \$695 per hearing aid for Level 2 hearing aids	
Dental Services	Preventive dental covers two cleanings, two exams, one bitewing X-ray and one fluoride treatment per year. Preventive dental also includes full mouth or panoramic X-rays once every five years, periapical X-rays as needed and emergency treatment of dental pain as needed. \$0 copay per visit.		
	\$0 copay per visit	\$0 copay per visit	
Comprehensive Dental Services:			
	You pay \$0 for fillings, root canals and simple extractions.	You pay \$0 for fillings, root canals and simple extractions.	
	You pay 50% coinsurance for bridges, crowns and dentures. For full details and exclusions, view your dental handbook at summacare.com/plandocuments.	You pay 50% coinsurance for bridges, crowns and dentures. For full details and exclusions, view your dental handbook at summacare.com/plandocuments.	
	\$2,000 calendar year maximum for preventive and comprehensive dental services.	\$2,000 calendar year maximum for preventive and comprehensive dental services.	
	Must use Delta Dental of Ohio Medicare Advantage PPO network.	Must use Delta Dental of Ohio Medicare Advantage PPO network.	

SummaCare Medicare Amber NE (HMO) SummaCare Medicare Amber NE (HMO)
Coverage for eyeglasses and/or contact lenses provided after cataract surgery is limited to Medicare-allowed amount for Medicare-covered lenses and frames. In addition to an annual routine eye exam and Medicare-covered eye exams (for diagnosis and treatment for diseases and conditions of the eye), you'll receive an annual amount to use toward the purchase of frames/lenses or contact lenses — with the freedom to purchase from any vision provider you choose. Diagnostic eye exam: \$0 copay \$0 copay \$0 copay \$0 copay Annual prescription eyewear allowance: Costs for the annual eyewear allowance do not count toward the maximum out-of-pocket. \$300 allowance \$300 allowance
limited to Medicare-allowed amount for Medicare-covered lenses and frames. In addition to an annual routine eye exam and Medicare-covered eye exams (for diagnosis and treatment for diseases and conditions of the eye), you'll receive an annual amount to use toward the purchase of frames/lenses or contact lenses — with the freedom to purchase from any vision provider you choose. Diagnostic eye exam: \$0 copay \$0 copay \$0 copay Annual prescription eyewear allowance: Costs for the annual eyewear allowance do not count toward the maximum out-of-pocket. \$300 allowance \$300 allowance
(for diagnosis and treatment for diseases and conditions of the eye), you'll receive an annual amount to use toward the purchase of frames/lenses or contact lenses — with the freedom to purchase from any vision provider you choose. Diagnostic eye exam: \$0 copay \$0 copay \$0 copay \$0 copay Annual prescription eyewear allowance: Costs for the annual eyewear allowance do not count toward the maximum out-of-pocket. \$300 allowance \$300 allowance
\$0 copay Supplemental routine eye exam: \$0 copay \$0 copay Annual prescription eyewear allowance: Costs for the annual eyewear allowance do not count toward the maximum out-of-pocket. \$300 allowance \$300 allowance
\$0 copay \$0 copay Annual prescription eyewear allowance: Costs for the annual eyewear allowance do not count toward the maximum out-of-pocket. \$300 allowance \$300 allowance
\$0 copay Annual prescription eyewear allowance: Costs for the annual eyewear allowance do not count toward the maximum out-of-pocket. \$300 allowance \$300 allowance
Annual prescription eyewear allowance: Costs for the annual eyewear allowance do not count toward the maximum out-of-pocket. \$300 allowance \$300 allowance
allowance do not count toward the maximum out-of-pocket. \$300 allowance \$300 allowance
Glasses or contact lenses after cataract surgery:
You pay nothing. You pay nothing.
Yearly glaucoma screening:
You pay nothing. You pay nothing.
Mental Health Services There is a 190-day lifetime limit for inpatient services in a psychiatric hospital. The 190-day lifetime limit does not apply to inpatient mental health services provided in a psychiatric unit of a general hospital.
Inpatient visit:
\$250 copay per day for days 1 through 4. You pay nothing after day 4. \$250 copay per day for days 1 through 4. You pay nothing after day 4.
Outpatient group therapy visit:
\$30 copay \$30 copay
Outpatient individual therapy visit:

Premiums and Benefits	SummaCare Medicare Amber NE (HMO)	SummaCare Medicare Amber NW (HMO)	
Skilled Nursing Facility	Our plan covers up to 100 days in a Skilled Nursing Facility per benefit period.		
	\$0 copay per day for days 1 through 20. \$196 copay per day for days 21 through 100.	\$0 copay per day for days 1 through 20. \$196 copay per day for days 21 through 100.	
Rehabilitation	Cardiac (heart) rehab services:		
and Physical Therapy	You pay nothing.	You pay nothing.	
	Occupational therapy visit:		
	\$25 copay \$30 copay Physical therapy and speech and language therapy visit:		
	\$25 copay	\$30 copay	
Ambulance	Emergency, urgent care and ambulance services outside of the United States are covered up to a maximum of \$25,000 each year. This includes emergency ambulance occurring immediately before a covered emergency visit.		
	Ground ambulance:		
	\$200 copay \$200 copay Air ambulance: \$200 copay \$200 copay \$200 copay		
Transportation	Routine non-emergent medical transportation services are covered for in-network medical appointments or visits to providers within the plan service area. Trips to and from a pharmacy are excluded. A minimum of 72 hours advance notice is required to schedule a stretcher transport/electric wheelchair transport and 48 hours for wheelchair and ambulatory sedan transports. This service is available Monday-Friday only. Trips must be scheduled through SummaCare's transportation vendor, HOMELINK.		
	\$0 copay for 50 one-way trips per calendar year.	\$0 copay for 50 one-way trips per calendar year.	
Medicare Part B Drugs	For Part B-covered chemotherapy drugs and other Part B-covered drugs: Part B drugs may be subject to Step Therapy requirements. Insulin cost sharing is subject to a coinsurance cap of \$35 for one-month's supply of insulin.		
	Up to 20% of the cost		

Premiums
and Benefits

SummaCare Medicare Amber NE (HMO)

SummaCare Medicare Amber NW (HMO)

Additional Benefits

Acupuncture	General acupuncture: Up to six visits per calendar year for any combination of general acupuncture services and therapeutic massage services performed by in-network providers are covered. The visit limit is combined with the acupuncture benefit. Visits must be scheduled through SummaCare's Acupuncture/ Therapeutic Massage vendor, HOMELINK		
	\$20 copay \$20 copay		
	For chronic lower back pain: Up to a maximum of 20 treatments per year for each Medicare-covered acupuncture treatment visit for chronic low back pain. Visits must be scheduled through HOMELINK.		
	\$20 copay	\$20 copay	
Telehealth Services	For each primary care, dermatological, behavioral health and substance abuse telehealth visit provided through Teladoc® Health or another in-network provider:		
	\$0 copay	\$0 copay	
	For all other in-network telehealth specialist visits:		
	\$0-\$20 copay \$0-\$20 copay		
Papa Pals	Hang Out and Help Out. Papa pairs older adults and families with Papa Pals for companionship and assistance with everyday tasks. Get help around the house, including light housework, a ride to the doctor's office or pharmacy (or anywhere around town), help with errands or simply someone to talk to. Providing support to SummaCare Medicare Advantage members also offers relief and respite to caregivers.		
	Up to 90 hours of assistance	Up to 90 hours of assistance	
Visitor/Travel Coverage	SummaCare Medicare members who are visiting the states of Arizona, Florida and Texas receive all plan-covered services through the Visitor/Travel coverage.		
Meal Delivery	You are covered for a maximum of 28 meals (two per day for fourteen days) following a hospital discharge or for diabetics with a high A1C (over 8) through SummaCare's in-network meal delivery vendor, Mom's Meals.		

Premiums and Benefits	SummaCare Medicare Amber NE (HMO)	SummaCare Medicare Amber NW (HMO)
Therapeutic Massage	Up to six visits per calendar year for any combination of general acupuncture services and therapeutic massage services performed by in-network providers are covered. The visit limit is combined with the acupuncture benefit. Visits must be scheduled through SummaCare's Acupuncture/ Therapeutic Massage vendor, HOMELINK.	
	\$20 copay	\$20 copay
Home Safety Devices	If you have had a diagnosis of any of the following: hip replacement, knee replacement, femur fractures or a diagnosis of falls within the past 12 months, as documented by a provider, you are eligible for home safety devices. Items must be purchased through HOMELINK. Otherwise you will be responsible for the full cost of those items and no payment will be made.	
	\$150 allowance per year	\$150 allowance per year
Chiropractic Care (Medicare- Covered)	\$20 copay	\$20 copay
Foot Care (Podiatry Services)	\$30 copay	\$30 copay
Home Health Care	\$0 copay	\$0 copay
Hospice	You pay nothing for hospice care from a Medicare-certified hospice. You may have to pay part of the costs for drugs and respite care.	

Premiums and Benefits	SummaCare Medicare Amber NE (HMO)	SummaCare Medicare Amber NW (HMO)
Medical	Durable medical equipment (e.g., whe	elchairs, oxygen):
Equipment/ Supplies	20% of the cost	20% of the cost
	Prosthetic devices (e.g., braces, artific	ial limbs):
	20% of the cost	20% of the cost
	Diabetes monitoring supplies manufactu	ured by Abbott and/or Ascensia Contour:
	\$0 copay	\$0 copay
	Diabetes self-management training:	
	You pay nothing.	You pay nothing.
	Therapeutic shoes or inserts:	
	20% of the cost	20% of the cost
Outpatient	Group therapy visit:	
Substance Abuse	\$30 copay	\$30 copay
	Individual therapy visit:	
	\$30 copay	\$30 copay
Opioid Treatment Program Services	Opioid use disorder treatment services are covered under Part B of Original Medicare. Members of our plan receive coverage for these services through our plan. Covered services include: • FDA-approved opioid agonist and antagonist treatment medications and the dispensing and administration of such medications, if applicable • Substance use counseling • Individual and group therapy • Intake activities • Periodic assessments • Toxicology testing	
	\$0 copay	\$0 copay

Premiums and Benefits	SummaCare Medicare Amber NE (HMO)	SummaCare Medicare Amber NW (HMO)
Over-the- Counter Items	Coverage includes non-prescription over-the-counter health-related items like vitamins, pain relievers, cough and cold medicines and first aid supplies. Refer to your 2026 OTC Product Catalog or visit summacare.com/overthecounter for a complete list of plan-approved OTC items. You may also conduct a product search by retail location at summacare.com/overthecounter . Any unused quarterly OTC benefit funds will not roll over to the next quarter or calendar year.	
	\$100 allowance per quarter \$25 allowance per quarter	
Partial Hospitalization	"Partial hospitalization" is a structured program of active psychiatric treatment provided as a hospital outpatient service or by a community mental health center, that is more intense than the care received in your doctor's or therapist's office and is an alternative to inpatient hospitalization.	
	Intensive outpatient service is a structured program of active behavioral (mental) health therapy treatment provided in a hospital outpatient department, a community mental health center, a Federally qualified health center, or a rura health clinic that is more intense than the care received in your doctor's or therapist's office but less intense than partial hospitalization. \$40 copay \$40 copay	
Renal Dialysis	20% of the cost	20% of the cost

	, 0. 20.10.113		
Premiums and Benefits	SummaCare Medicare Amber NE (HMO)	SummaCare Medicare Amber NW (HMO)	
Health and Wellness Programs and Services	better and remember more. BrainHQ a brain over time; providing the best exe to be at its sharpest. SilverSneakers® Fitness Program: Silver more active life through fitness and so a fitness benefit through SilverSneaker including live and on-demand classes for have access to a nationwide network of take classes and use exercise equipmer many locations as you like, at any time instructor-led group fitness classes. Sor classes. Classes vary by location. You all specially designed group exercise classes a week. Additionally, SilverSneakers Conactive outside of traditional gyms at reneighborhood locations. Ad-Hour Nurse Line QuitCare Health Manager Powered by WebMD® Enhanced Condition and Care Manager	in health. BrainHQ has dozens of croven to help people think faster, focus djusts to meet the needs of your unique rcises at the right pace your brain needs. Sneakers can help you live a healthier, cial connection. You are covered for sonline and at participating locations or members to access at home. You f participating locations where you cannot and other amenities. Enroll in as . Membership includes SilverSneakers me locations offer members additional so have access to instructors who lead es in-person and online, seven days mmunity gives you options to get creation centers, parks and other	
	You pay nothing. You pay nothing.		

Summary of Benefits				
Premiums and Benefits	SummaCare Medicare Amber NE (HMO)	SummaCare Medicare Amber NW (HMO)		
Optional Supplemental Dental	If you elect to enroll in this optional supplemental dental plan, you'll pay an additional \$37 per month in order to obtain the following additional benefits. You must keep paying your Medicare Part B premium and your SummaCare Medicare plan premium.			
	If you purchase this optional supplemental dental benefit, the plan will pay a total maximum benefit of \$2,000 per benefit year. This includes your embedded and supplemental dental benefits.			
	 Services must be received through Delta Dental's Medicare Advantage PPO or Medicare Advantage Premier network of providers. Services received from dentists who do NOT participate in Delta Dental's Medicare Advantage PPO or Medicare Advantage Premier network are NOT covered benefits. 			
	There is no waiting period for coverage to begin.			
	The following benefits are in addition to the embedded benefits covered in your plan see page 23. For full details and exclusions, view your dental handbook at summacare.com/plandocuments. Inlays/Onlays:			
	50% coinsurance	50% coinsurance		
	Periodontal Maintenance:			
	50% coinsurance	50% coinsurance		
	Periodontal Non-Surgical Procedures:			
	50% coinsurance	50% coinsurance		
	Periodontal Surgical Procedures:			
	50% coinsurance	50% coinsurance		
	Denture Relines/Repairs:			
	50% coinsurance	50% coinsurance		
	Bridge Repairs:			
	50% coinsurance	50% coinsurance		
	Surgical Extractions/Oral Surgery:			
	50% coinsurance	50% coinsurance		

Premiums	SummaCare Medicare	SummaCare Medicare
and Benefits	Amber NE (HMO)	Amber NW (HMO)

Optional Supplemental Dental Continued			
Optional	Brush Biopsy:		
Supplemental Dental	50% coinsurance	50% coinsurance	
	Occlusal Guards/Occlusal Adjustments:		
	50% coinsurance	50% coinsurance	
	General Anesthesia or IV Sedation when medically necessary:		
	50% coinsurance	50% coinsurance	

Things to Know About SummaCare Amber (HMO)

What do we cover?

SummaCare Medicare Advantage plans cover many benefits not offered with Original Medicare.

Which providers and hospitals can I use?

SummaCare Medicare Advantage Amber (HMO) has a network of providers and hospitals. If you use providers that are not in our network, the plan may not pay for these services — except for emergency, urgent and out-of-area renal dialysis services. Out-of-network/non-contracted providers are under no obligation to treat SummaCare members, except in emergency situations. Please call our Member Services number or request an Evidence of Coverage (EOC) document for more information, including the cost sharing that applies to out-of-network services. You can see our plan's provider directory on our website,

summacare.com/medicare, or call us and we will send you a copy of the provider directory. The plan in this Summary of Benefits (SOB) document also includes Visitor/Travel coverage.

Want to learn more?

Visit **summacare.com/medicare** to find more information about our plans. Or, call us at **888.464.8440** (TTY **711**). From October 1 through March 31, a representative is available to take your call from 8 a.m. until 8 p.m., seven days a week. From April 1 through September 30, a representative is available to take your call from 8 a.m. until 8 p.m., Monday – Friday. Outside these hours, you may leave us a message and a representative will return your call the next business day.

To enroll in SummaCare, you must be entitled to Medicare Part A, be enrolled in Medicare Part B and live in our service area. This document is available in other formats such as braille, large print or audio.

This is a summary document. The benefit information provided does not list every service that we cover or list every limitation or exclusion. To get a complete list of services we cover, please request the EOC. To request the EOC, visit **summacare.com/eoc** or call **888.464.8440** (TTY **711**).

If you want to know more about the coverage and costs of Original Medicare, look in your current "Medicare & You" handbook. View it online at **medicare.gov** or order a copy by calling **800.MEDICARE (800.633.4227)**, 24 hours a day, 7 days a week. TTY users should call **877.486.2048**.

People with limited incomes may qualify for Extra Help to pay for their medical expenses. See if you qualify by calling:

- 800.MEDICARE (800.633.4227), 24 hours a day, 7 days a week. TTY/TDD users call 877.486.2048.
- The Social Security Administration at 800.772.1213, Monday - Friday, 7 a.m. to 7 p.m. TTY/TDD users call 800.325.0778 (TTY 711).

Amber HMO Plans

With a SummaCare HMO plan, you can utilize the plan's network of providers for all your care, except in certain circumstances including emergency and urgent care services and renal dialysis services.

NE If you live in a county named on the map, you are eligible to enroll in that HMO plan. **SummaCare Medicare Advantage Amber NE (HMO) \$0 Monthly Premium** This plan is available to residents living in the 17 shaded counties. **SummaCare Medicare Advantage Amber NW (HMO) \$0 Monthly Premium** This plan is available to residents living in the 14 shaded counties.

How to Enroll





Medicare Enrollment Periods

Annual Enrollment Period

The Annual Enrollment Period (AEP) occurs October 15 through December 7 each year. During this time, you have the option to make changes to your current plan or switch to a new plan.

Special Enrollment Period

During the Special Enrollment Period (SEP), you can make changes to your coverage if certain events happen in your life. For instance:

- You moved outside the service area of your current plan
- You lost your other insurance coverage
- Your plan changed its contract with Medicare
- You are eligible for both Medicare and Medicaid
- · You are receiving the Low-Income Subsidy

Initial Enrollment Period

Your Initial Enrollment Period (IEP) occurs when you are newly eligible for Medicare beginning three months before your 65th birthday and ending three months after the month of your 65th birthday. During this time, you can sign up for a Medicare Advantage plan. This enrollment period is different for everyone and is dependent on your current situation.

Open Enrollment Period

Running from January 1 through March 31 each year, enrollees may make one change to a different Medicare Advantage plan or return to Original Medicare. Part D can be elected at this time in the course of a plan change.

Call SummaCare today to discuss the many circumstances that might place you in your Initial Enrollment Period or a Special Enrollment Period.

Who is eligible to enroll in a SummaCare plan?

You can enroll if you are entitled to Medicare Part A and are enrolled in Medicare Part B. You must also reside in a county located within our service area.

SummaCare's Amber (HMO) 31-County Service Area

Allen Henry **Ashland** Holmes Ashtabula Huron **Auglaize** Lake Carroll Lorain Columbiana Lucas Cuyahoga Mahoning Defiance Medina Fulton Mercer Geauga Ottawa Hancock Portage

Putnam
Seneca
Stark
Summit
Trumbull
Tuscarawas
Van Wert
Wayne
Wood

Ways to Enroll



Call Us

Enroll over the phone by calling your broker or personal SummaCare representative. If you are not already working with a representative, please call 330.996.8440 (TTY 711) or (toll free) 888.464.8440 (TTY 711) and we will do the paperwork for you. From October 1 through March 31, a representative will be available to take your call from 8:00 a.m. until 8:00 p.m., seven days a week. From April 1 through September 30, a representative will be available to take your call from 8:00 a.m. until 8:00 p.m., Monday through Friday. Outside these hours, you may leave us a message and a representative will return your call the next business day. Persons with hearing impairments may call TTY 711.



Go Online

Enroll online by visiting summacare.com/medicare and compare plans to enroll.



Mail Us Your Paperwork

Complete an enrollment form and mail to: SummaCare Medicare Advantage P.O. Box 3620 Akron OH 44309-3620



Scan this QR Code

to enroll online





Important Reminders

- Please have your red, white and blue Medicare card ready to reference.
- Please have your Primary Care
 Provider's name ready to reference.
- Select the plan in which you want to enroll.
- If you'd like to enroll in the optional supplemental Delta Dental of Ohio plan, please indicate this on the enrollment form. You will be charged a separate monthly premium for this optional benefit. You have 30 days from the date of your effective date to enroll in the supplemental Delta Dental of Ohio plan. Additional information about the supplemental Delta Dental of Ohio plan can be found in the Summary of Benefits.
- Medicare beneficiaries may also enroll in SummaCare through the CMS Medicare Online Enrollment Center located at medicare.gov.



Easy Ways to Pay Your SummaCare Medicare Advantage Plan Premium

SummaCare offers many convenient ways for you to pay your plan premium.

1. Premium withheld from your Social Security check

Your plan premium can be automatically deducted from your Social Security check each month – you don't even have to worry about getting a bill. Please be advised, it may take up to three months for this deduction to begin being withheld from your Social Security check.

2. Direct Debit/Credit

Your plan premium can be automatically deducted from a checking or savings account or charged to a credit card each month.

Again, you don't have to worry about getting a bill.

3. Online Bill Pay

You can pay your bill through our secure, online member site, Plan Central.

4. Phone or Mail

Pay your premium over the telephone through a SummaCare representative or mail us a check each month.

After you enroll

After you've enrolled in a SummaCare Medicare Advantage plan, here's what you can expect:

- 1. SummaCare will send you a letter confirming that your application was received.
- 2. You will receive your SummaCare member ID card and Member Handbook in the mail.
- 3. You will receive outstanding service all year! Contact us anytime with your questions. Plus, be sure to look for special announcements in the mail regarding exclusive member events and important plan information from SummaCare. Do you sometimes forget to schedule regular checkups? We'll send you reminders for preventive services and other recommended care for common conditions and preventive screenings.



summacare.com/medicare

Benefits may vary based on plan selected and county availability.

SummaCare is an HMO and HMO-POS plan with a Medicare contract. Enrollment in SummaCare depends on contract renewal. Other providers are available in our network. Not all members qualify for all benefits. Out-of-network/non-contracted providers are under no obligation to treat SummaCare members, except in emergency situations. Please call our Member Services number or see your Evidence of Coverage for more information. Actual SummaCare Medicare Advantage plan members shown. Members were not compensated for their appearance.

This information is not a complete description of benefits. Call **888.464.8440** (TTY **711**) for more information. **1.800.MEDICARE** (**1.800.633.4227**), 24 hours a day, 7 days a week. TTY users call **1.877.486.2048**.



Questions?

Let's talk.

To speak with a SummaCare Medicare Advantage Advisor, call **888.290.0610** (TTY **711**) or, visit **summacare.com/medicare**.

Follow SummaCare on Social Media!











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SummaCare is an HMO and HMO-POS plan with a Medicare contract. Enrollment in SummaCare depends on contract renewal.



