



Medicare Advantage Plan



Today's Discussion

- Who are We?
- What are the Parts of Medicare?
- How and When to Sign up for Medicare
- Medicare Provider Network
- Comparing Our Plans
- Introducing Jade (HMO) with Bene-Flex™
- Medicare Advantage Benefits
- How to Enroll

Who Are We?

High Member Satisfaction

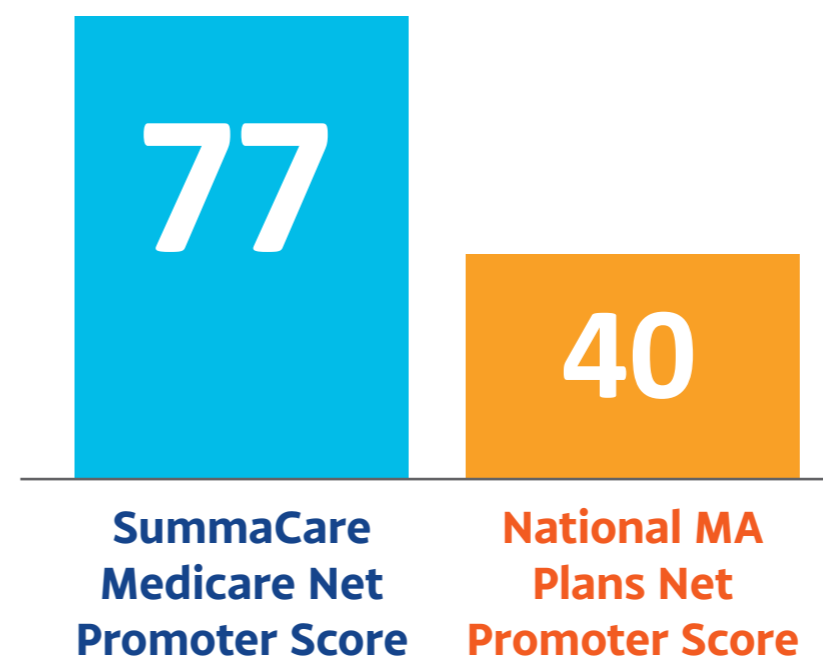
97% voluntary retention* rate
for 2023

- National average is 89%**



2023 Member Satisfaction Study Results:

- **80%** have been SummaCare Medicare members for three or more years
- SummaCare Medicare Net Promoter Score = **77**
(National MA Plans Net Promoter Score = 40)
- **94%** rated satisfaction with their SummaCare Medicare Advantage plan at an 8, 9 or 10
- Interactions with Customer Service are **positive**



*Based on 2023 AEP voluntary disenrollment study completed by SummaCare

**Based on competitor data for 2023 AEP voluntary disenrollments reported through Deft Research

Member Testimonials



Greg W., Parma
Member since 2020



Diane & Jim M., Akron
Members since 2015

Parts of Medicare

Parts of Medicare



Part A

Hospital Coverage

Covers inpatient hospital stays, home health care, hospice care, skilled nursing facility care



Part B

Medical Coverage

Covers medically necessary and preventive health services



Part C

Medicare Advantage

Receive all medical benefits from the insurance company instead of government. Most Part C plans include prescription drug coverage



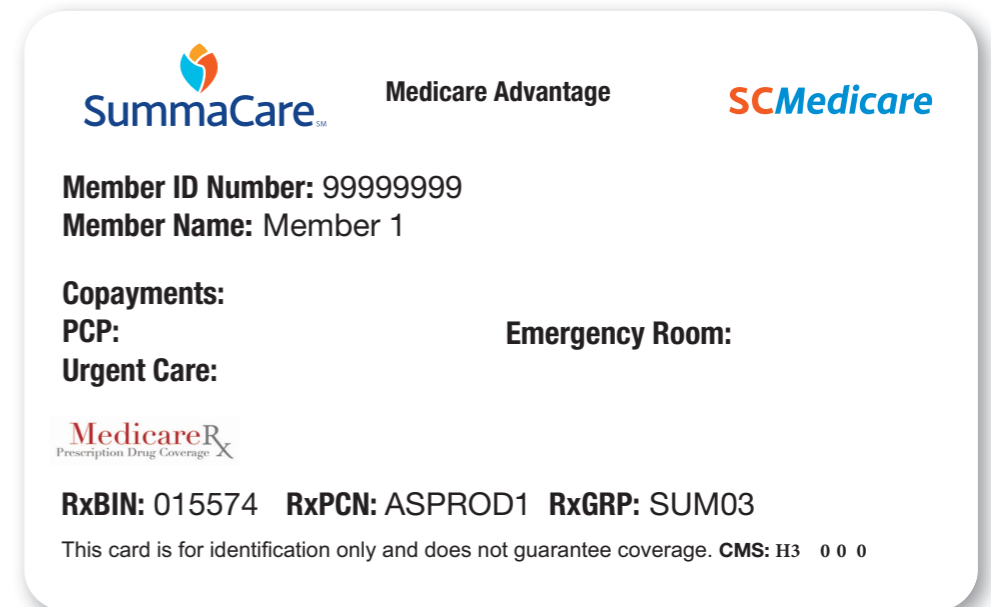
Part D

Drug Coverage

Parts of Medicare (continued)

Part D = Prescription Drug

- Each plan has a formulary (list of covered drugs) that meets Medicare standards.
- “Formularies” (list of covered drugs) and the “Tiers” the drugs are in can vary with each plan.



Medicare Part D Penalty

- A late enrollment penalty would be assessed if a beneficiary does not enroll within 63 days of becoming eligible for a Prescription Drug Plan (for example, when you turn 65 or lose employer coverage).
- Late enrollment penalty (LEP) is calculated by multiplying 1% of the national base premium times the number of uncovered months you could have had Part D and did not take it.

How Medicare Drug Plans Work



Deductible

The deductible you would pay if on Medicare alone, or if your plan has a deductible.

None of our plans have drug deductibles

Initial Coverage Phase

What you and the drug plan/Medicare would pay combined
\$5,030

Coverage Gap Phase or 'Donut Hole'

You have to start paying 25% of plan's cost for generic and brand name

\$8,000 to get out of Gap Phase*

Not everyone will reach this coverage gap phase

Note: Tier 1 and Tier 6 are covered at \$0 through the Gap.

Catastrophic Coverage Phase

Beginning in 2024, if you reach the Catastrophic Coverage Stage, you pay nothing for covered Part D drugs. You may have cost sharing for excluded drugs that are covered under our enhanced benefit.

Limit Resets

Every year your benefit limit resets

*Other limits apply to those who qualify for low income subsidy.

How and When to Sign Up for Medicare

Medicare Enrollment Periods

Initial Enrollment Period

- Beginning 3 months before your 65th birthday and ending 3 months after the month of your 65th birthday.
- You are automatically enrolled into Medicare if you are receiving Social Security or Railroad Retirement benefits prior to age 65.



Annual Enrollment Period

- Most people review their coverage during the annual enrollment period, running from October 15 through December 7 each year.

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.



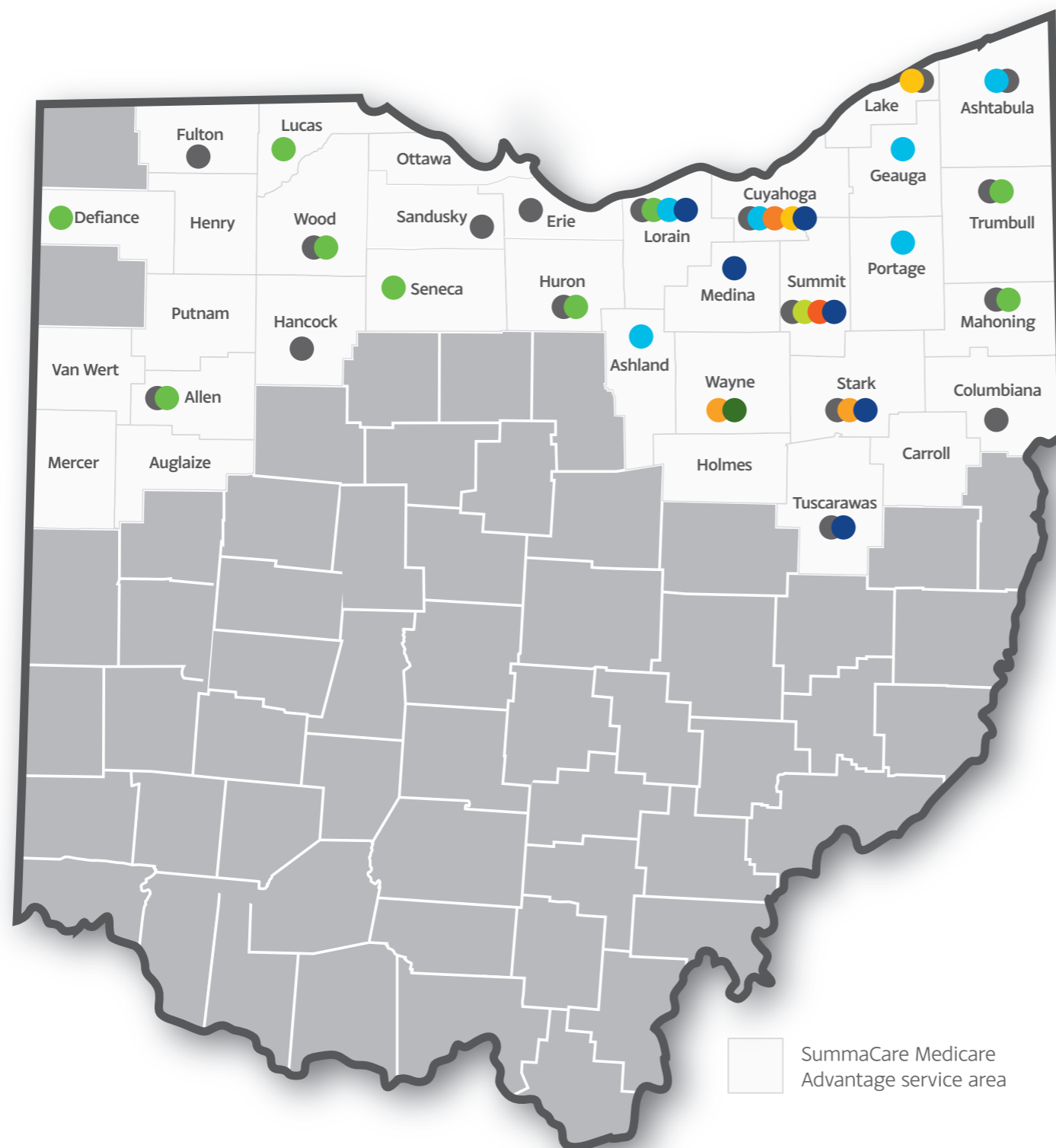
Special Enrollment Period

- A time outside the Annual Enrollment Period when you can make changes to your Medicare coverage based on certain life events.



Medicare Advantage Provider & Hospital Network

Provider Network



-  **AULTMAN**
 -  **Cleveland Clinic**
 -  **Lake Health**
 -  **MERCYHEALTH**
 -  **MetroHealth**
 -  **Summa Health™**
 -  **Southwest General**
Partnering with University Hospitals
 -  **University Hospitals**
 -  **WESTERN RESERVE HOSPITAL**
Proudly Physician Owned
 -  **Wooster Community Hospital**
HEALTH SYSTEM
 -  **Other Network Hospitals**
-  **SummaCare**
Health Insurance

Provider Network by County

SCMedicare Network Hospitals

Allen ●

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

Ashland ●

- University Hospitals
 - Samaritan Medical Center

Ashtabula ●

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

Columbiana ●

- Salem Community Hospital

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

Cuyahoga Continued ●●●●

- Lake Health
 - Beachwood Medical Center
- MetroHealth
 - MetroHealth Medical Center
 - MetroHealth Cleveland Heights Medical Center
 - Metro Health 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

Erie ●

- Firelands Regional Medical Center

Defiance ●

- Mercy Health
 - Defiance Hospital

Fulton ●

- Fulton County Health Center

Geauga ●

- University Hospitals
 - Geauga Medical Center

Hancock ●

- Blanchard Valley Hospital

Huron ●●

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

Lake ●●

- Lake Health
- TriPoint Medical Center
- West Medical Center

SCMedicare Network Hospitals (continued)

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 Center at Southwoods

Medina ●

- Cleveland Clinic
 - Lodi Hospital
 - Medina Hospital

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
- St. Thomas Campus
- Western Reserve Hospital

Trumbull ●●

- St. Joseph Warren Hospital
- Trumbull Regional Medical Center

Tuscarawas ●●

- Trinity Hospital Twin City
- Union Hospital

Wayne ●●

- Aultman Orrville Hospital
- Wooster Community Hospital

Wood ●●

- Mercy Health
 - Perrysburg Hospital
- Wood County Hospital

Comparing Our Plans

A Plan for Everyone

One size doesn't fit all.

All SummaCare plans start with comprehensive medical; nearly all plans also include prescription drug (Part D) coverage—with no deductibles!

Amber (HMO)	Topaz (HMO)	Jade (HMO)	Garnet (HMO)	Ruby (HMO)	Sapphire (HMO-POS)	Emerald (HMO-POS)
\$0 Premium	\$0 Premium	\$20 Premium	\$30 Premium	\$50 Premium	\$79 Premium	\$169 Premium
A Part C-only plan for Veterans and others who receive drug coverage from a non-Medicare source.	Our lowest plan premium – comprehensive coverage without a plan premium.	Includes Bene-Flex™ which allows you to select additional supplemental benefits based on your unique needs.	Comprehensive coverage with the most enhanced supplemental benefits.	Mid-tier premium with lower out-of-pocket costs on hospital and outpatient services.	Additional coverage for out-of-network services.	Additional coverage for out-of-network services as well as lowest copays and costs - including \$0 copays for office visits.
You'll utilize the SCMedicare network of providers which includes thousands of providers throughout Northern Ohio and more than 70 hospitals. Coverage for emergency, urgent care and renal dialysis services available through any Medicare-approved provider.					You'll utilize the SCMedicare network of providers AND have coverage through ANY Medicare-approved provider for most services.	

Our Portfolio of Plans

Medical Services/Benefits

Service/Benefit	Amber (HMO)	Topaz (HMO)	Jade 1 (HMO)	Jade 2 (HMO)	Garnet (HMO)	Ruby (HMO)	Sapphire (HMO-POS)	Emerald (HMO-POS)
Monthly Plan Premium	\$0	\$0	\$20	\$20	\$30	\$50	\$79	\$169
Inpatient Hospital	\$250 Copay/ 1 to 5 days	\$340 Copay/ 1 to 6 days	\$325 Copay/ 1 to 6 days	\$335 Copay/ 1 to 6 days	\$306 Copay/ 1 to 6 days	\$270 Copay/ 1 to 6 days	\$240 Copay/ 1 to 6 days	\$205 Copay/ 1 to 5 days
Medical Deductible	None	None	None	None	None	None	None	None
Out-of-Pocket Maximum (in-network services only)	\$3,450	\$3,700	\$3,850	\$3,850	\$3,700	\$3,600	\$3,550	\$3,400
Primary Care Provider Office Visit	\$0 Copay	\$0 Copay	\$0 Copay	\$0 Copay	\$0 Copay	\$0 Copay	\$0 Copay	\$0 Copay
Specialist Office Visit	\$30 Copay	\$35 Copay	\$35 Copay	\$40 Copay	\$40 Copay	\$40 Copay	\$35 Copay	\$0 Copay
Ambulatory Surgical Center/ Outpatient Hospital Facility	\$250 Copay	\$310 Copay	\$305 Copay	\$305 Copay	\$275 Copay	\$250 Copay	\$250 Copay	\$175 Copay
Ambulance Copay – Ground	\$200 Copay	\$290 Copay	\$290 Copay	\$300 Copay	\$225 Copay	\$200 Copay	\$200 Copay	\$200 Copay
Emergency Care	\$120 Copay	\$120 Copay	\$120 Copay	\$120 Copay	\$120 Copay	\$120 Copay	\$120 Copay	\$120 Copay
Urgent Care	\$40 Copay	\$30 Copay	\$25 Copay	\$30 Copay	\$30 Copay	\$25 Copay	\$25 Copay	\$25 Copay
Lab Services	\$5 Copay	\$0 to \$10 Copay	\$0 to \$8 Copay	\$0 to \$10 Copay	\$0 to \$5 Copay	\$0 to \$8 Copay	\$0 to \$6 Copay	\$0 to \$4 Copay
Diagnostic Procedures & Tests	\$50 Copay	\$0 to \$125 Copay	\$0 to \$100 Copay	\$0 to \$125 Copay	\$0 to \$50 Copay	\$0 to \$125 Copay	\$0 to \$99 Copay	\$0 to \$75 Copay
X-Ray	\$50 Copay	\$75 to \$130 Copay	\$0 to \$110 Copay	\$0 to \$110 Copay	\$0 to \$50 Copay	\$0 to \$110 Copay	\$0 to \$99 Copay	\$0 to \$75 Copay
Diagnostic Radiology Services	\$125 Copay	\$175 Copay	\$150 Copay	\$150 Copay	\$125 Copay	\$150 Copay	\$150 Copay	\$100 Copay

Our Portfolio of Plans

Part D Prescription Drug Coverage

Service/Benefit	Amber (HMO)	Topaz (HMO)	Jade (HMO)	Garnet (HMO)	Ruby (HMO)	Sapphire (HMO-POS)	Emerald (HMO-POS)
Deductible	N/A	\$0	\$0	\$0	\$0	\$0	\$0
Generic - Preferred (Tier 1)	N/A	\$0	\$0	\$0	\$0	\$0	\$0
Generic - (Tier 2)	N/A	\$9	\$8	\$8	\$8	\$8	\$8
Brand/Drug - Preferred (Tier 3)	N/A	\$46	\$44	\$44	\$44	\$44	\$39
Non-Preferred (Tier 4)	N/A	\$100	\$100	\$100	\$100	\$100	\$95
Specialty Drugs (Tier 5)	N/A	33%	33%	33%	33%	33%	33%
Select Care Drugs & Vaccines (Tier 6)	N/A	\$0	\$0	\$0	\$0	\$0	\$0
Coverage in Gap (Tiers 1 & 6)	N/A	✓	✓	✓	✓	✓	✓

Note: Copay amounts are for one month supply

Drug Tiers

The prescription drugs on the Medicare Advantage formulary are organized into tiers



No deductible on prescription drug coverage

Highlights for the 2024 Medicare Part D Formulary

- \$0 copay for Tier 6, includes vaccines and Select Care Drugs to treat chronic diseases like diabetes, high cholesterol, high blood pressure, etc.
- Tier 1 and 6 are covered at \$0 through the gap

- Tier 1 and 6 are available for 100-day supply
- Tier 6 includes the Shingles vaccine

Note: Copay amounts are for one month supply

Our Portfolio of Plans

Dental, Vision and Hearing

Service/Benefit	Amber NE (HMO)	Amber NW (HMO)	Topaz (HMO)	Jade NE (HMO)	Jade NW (HMO)	Garnet (HMO)	Ruby (HMO)	Sapphire (HMO-POS)	Emerald (HMO-POS)
Preventive Dental Benefits	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Dental Max	\$2,000	\$2,000	\$3,000	\$3,000	\$3,000	\$2,000	\$1,000	\$2,000	\$2,000
Comprehensive Dental Coverage	NEW for 2024: One fluoride treatment, prework for dentures and bridges	NEW for 2024: One fluoride treatment, prework for dentures and bridges	NEW for 2024: One fluoride treatment, prework for dentures and bridges	NEW for 2024: One fluoride treatment, prework for dentures and bridges	NEW for 2024: One fluoride treatment, prework for dentures and bridges	NEW for 2024: One fluoride treatment, prework for dentures and bridges	NEW for 2024: Added exams and root canals for 50%	NEW for 2024: One fluoride treatment, prework for dentures and bridges	NEW for 2024: One fluoride treatment, prework for dentures and bridges
Glasses or Contacts After Cataract Surgery	\$0 Copay	\$0 Copay	\$0 Copay	\$0 Copay	\$0 Copay	\$0 Copay	\$0 Copay	\$0 Copay	\$0 Copay
Vision Exams to Diagnose & Treat	\$0 Copay	\$0 Copay	\$0 Copay	\$0 Copay	\$0 Copay	\$0 Copay	\$0 Copay	\$0 Copay	\$0 Copay
Vision Hardware Allowance	\$300 Allowance	\$200 Allowance	\$270 Allowance	\$265 Allowance	\$240 Allowance	\$365 Allowance	\$250 Allowance	\$305 Allowance	\$300 Allowance
Diagnostic & Supplemental Hearing Exam	\$0 to \$20 Copay	\$0 to \$20 Copay	\$0 to \$20 Copay	\$0 to \$15 Copay	\$0 to \$15 Copay	\$0 to \$15 Copay	\$0 to \$15 Copay	\$0 to \$15 Copay	\$0
Hearing Aids (Limit 1 per ear every year)	\$395 or \$695 Copay	\$395 or \$695 Copay	\$395 or \$695 Copay	\$395 or \$695 Copay	\$395 or \$695 Copay	\$395 or \$695 Copay	\$395 or \$695 Copay	\$395 or \$695 Copay	\$395 or \$695 Copay

Comprehensive Dental Coverage



Dental Maximum increased up to \$3,000*

Service/Benefit	Amber (HMO)	Topaz (HMO)	Jade (HMO)	Garnet (HMO)	Ruby (HMO)	Sapphire (HMO-POS)	Emerald (HMO-POS)
Fillings	\$0	\$0	\$0	\$0	50%	50%	50%
Simple Extractions	\$0	\$0	\$0	\$0	50%	50%	50%
Root Canals	\$0	\$0	\$0	\$0	50%	50%	50%
Bridges	50%	20%	20%	40%	Not Covered	70%	70%
Crowns	50%	20%	20%	40%	Not Covered	70%	70%
Dentures	50%	20%	20%	40%	Not Covered	70%	70%
Periodontic Services	Not Covered	Not Covered	Not Covered	\$0	Not Covered	Not Covered	Not Covered
Relines & Repairs to Bridges & Dentures	Not Covered	Not Covered	Not Covered	\$0	Not Covered	Not Covered	Not Covered
Maximum	\$2,000	\$3,000	\$3,000	\$2,000	\$1,000	\$2,000	\$2,000
Network	PPO	PPO	PPO	PPO + Premier	PPO	PPO	PPO

All amounts are member's copay or coinsurance.

New for 2024

- **New for Amber, Topaz, Jade, Garnet, Sapphire and Emerald plans!**
- Prewrite for Dentures and Bridges
- **New for Amber, Topaz, Jade, Garnet, Ruby, Sapphire and Emerald plans!**
- One Fluoride Treatment per year

*Benefits may vary based on plan selected and county availability.

Our Portfolio of Plans

EXTRA BENEFITS

Service/Benefit	Amber NE (HMO)	Amber NW (HMO)	Topaz (HMO)	Jade NE (HMO)	Jade NW (HMO)	Garnet (HMO)	Ruby (HMO)	Sapphire (HMO-POS)	Emerald (HMO-POS)
Transportation	\$0, 50 One-way trips	\$0, 6 One-way trips	\$0, 6 One-way trips	Bene-Flex™	Bene-Flex™	\$0, 8 One-way trips	\$0, 6 One-way trips	\$0, 10 One-way trips	\$0, 12 One-way trips
Home Safety Devices	\$150 allowance	\$150 allowance	\$150 allowance	Bene-Flex™	Bene-Flex™	\$200 allowance	\$175 allowance	\$225 allowance	\$250 allowance
Teladoc Telehealth (General acute, Derm, BH)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Non Teladoc Telehealth	\$0 - \$20	\$0 - \$20	\$0 - \$20	\$0 - \$20	\$0 - \$20	\$0 - \$20	\$0 - \$20	\$0 - \$20	\$0 - \$20
Over-the-Counter (OTC) items (Includes Retail)	\$100 Per quarter	\$25 Per quarter	\$75 Per quarter	\$85 Per quarter	\$65 Per quarter	\$100 Per quarter	\$45 Per quarter	\$80 Per quarter	\$55 Per quarter
SilverSneakers®	SilverSneakers®	SilverSneakers®	SilverSneakers®	Bene-Flex™	Bene-Flex™	SilverSneakers®	SilverSneakers®	SilverSneakers®	SilverSneakers®
Visitor/Travel	Yes - FL, TX, AZ	Yes - FL, TX, AZ	Yes - FL, TX, AZ	Yes - FL, TX, AZ	Yes - FL, TX, AZ	Yes - FL, TX, AZ	Yes - FL, TX, AZ	Yes - FL, TX, AZ	Yes - FL, TX, AZ
Meal Delivery	28 Meals (2/day) Post Discharge, A1C >8	28 Meals (2/day) Post Discharge, A1C >8	14 Meals (2/day) Post Discharge, A1C >8	Bene-Flex™	Bene-Flex™	14 Meals (2/day) Post Discharge, A1C >8	14 Meals (2/day) Post Discharge, A1C >8	14 Meals (2/day) Post Discharge, A1C >8	14 Meals (2/day) Post Discharge, A1C >8
Papa Pals	90 Max Hours	90 Max Hours	30 Max Hours	Bene-Flex™	Bene-Flex™	40 Max Hours	40 Max Hours	60 Max Hours	80 Max Hours
BrainHQ	Covered	Covered	Covered	Bene-Flex™	Bene-Flex™	Covered	Covered	Covered	Covered
PERS (Personal Emergency Response System)	Not Covered	Not Covered	Not Covered	Bene-Flex™	Bene-Flex™	Not Covered	Not Covered	Not Covered	Covered
Assist America®	Covered	Covered	Covered	Covered	Covered	Covered	Covered	Covered	Covered

Benefits



Papa Pals

Hang Out & Help Out Papa pairs adults and families with Papa Pals for companionship and assistance with everyday tasks. Get help around the house, a ride to the doctor's office, 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.



Assist America®

Assist America provides global emergency travel assistance when you're more than 100 miles from home or in a foreign country. Assist America gives you peace of mind while traveling, knowing that a single phone call will give you access to a vast network of resources to help coordinate care on your behalf during any medical travel emergency.

Full coverage details for all benefits can be found in the Evidence of Coverage (EOC).



Travel Coverage

All plans receive in-network coverage in the states of Arizona, Florida & Texas when you visit a Medicare-participating provider through our **visitor/travel benefit**. Whether you're a snowbird or regularly travel, go with confidence knowing you're covered. **Notes:** You still must use SummaCare network providers for Part D prescription drugs and certain supplemental benefits for in-network coverage to apply. There is no limit to the number of times travel benefits can be activated.

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 meals that fuel healthy living! Following a hospital stay or if you have diabetes with a high A1C level, you can receive home-delivered, nutritious meals to help you focus on rest and recovery.

Benefit Bucks and SummaCare Visa Card

Benefit Bucks and SummaCare Visa Card

Your OTC allowance, member rewards and Jade flexible benefits (if selected) will all be accessed with a single card!

There are three ways SummaCare Medicare Members may use their Benefit Bucks on their new SummaCare Visa Card:

1. Over-The-Counter (OTC) Allowance
2. Member Rewards Program
3. Jade Benefit Allowance



Benefit Bucks and SummaCare Visa Card

1. Over-the-Counter (OTC) Allowance Benefit Bucks

All SummaCare Medicare Advantage plans offer a quarterly OTC allowance that may be used to buy non-prescription drugs and everyday health-related items, for example, pain relievers, antacids, cough drops and first aid supplies.

OTC allowance amounts vary by plan and unused quarterly balances do not roll over. Your OTC allowance can be used to order health-related items over the phone (855.435.5111 or TTY: 711), online via summacareotc.com or in person at more than 68,000 participating retailers.

Member Rewards can be used at more than 68,000 participating retailers

*Card cannot be used for alcohol, tobacco, firearm, fuel, lottery or gift card purchases.

Benefit Bucks and SummaCare Visa Card

2. Member Rewards Program

Receive Benefit Bucks on your SummaCare Visa card for using key preventive care services, including:

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

Member Rewards can be used at more than 68,000 participating retailers. Items that can be purchased are not restricted.*

Member Rewards can be used at more than 68,000 participating retailers

*Card cannot be used for alcohol, tobacco, firearm, fuel, lottery or gift card purchases.

Benefit Bucks and SummaCare Visa Card

3. Bene-Flex™ Benefit Bucks—Chosen By Members on Jade

Flex Card with additional \$550 allowance for dental, vision and hearing expenses above and beyond the benefit. These funds will be loaded on your SummaCare Visa card. You can use your additional allowance at any vision hardware provider with the exception of purchases at big box store's vision centers. You may use your additional allowance with your Delta Dental provider or other dentists of your choice. You can use your allowance toward hearing aids at any provider in or out of network.

\$40/month allowance for healthy grocery items (for example fruits, vegetable, milk, eggs, etc.) will be loaded on your SummaCare Visa card. This monthly allowance may be used at any of the 68,000+ retail locations.*

Member Rewards can be used at more than 68,000 participating retailers

* Requires a condition of diabetes mellitus and/or congestive heart failure.

National Retailers

68,000+ Participating National Retailers

SummaCare's members can use their SummaCare Visa card at neighborhood retailers, in addition to home delivery channels (e.g. web, app, phone, mail), providing easy access to items at retail locations. OTC health-related items can still be shipped right to your door.



Jade (HMO) with Bene-Flex™

Bene-Flex is an innovative way to deliver supplemental benefits. It empowers members to take control of their own healthcare benefits and is available **exclusively with the Jade plan.**

- We have designed a way to give you the ability to **personalize your plan** to meet your unique healthcare needs.
- **Create your own package** by choosing discretionary supplemental benefits from a menu of options.
- Change your discretionary supplemental benefits annually to **meet your changing healthcare needs.**

Key features of the Jade plan:

- Attractive benefits including a low monthly premium, low MOOP & competitive copays for medical and drug
- Supplemental benefits including dental, vision, hearing, OTC, Visitor/Travel & Assist America are embedded

Jade (HMO) Bene-Flex™ Menu Offerings

Benefit Details

Build your own package of benefits

Core Benefits	Tier 1 (Pick 3) Pick 3	Tier 2 (Pick 1) Pick 1	Tier 3 (Pick 1) Pick 1
<ul style="list-style-type: none"> Dental Vision Hearing OTC Assist America® Visitor/Travel 	<ul style="list-style-type: none"> Massage Therapy*** <ul style="list-style-type: none"> 10 visits Acupuncture <ul style="list-style-type: none"> 10 visits Fitness Tracker <ul style="list-style-type: none"> Fitbit® Toenail Trimming <ul style="list-style-type: none"> 6 times per year Nutrition Coaching <ul style="list-style-type: none"> 4 visits BrainHQ Memory Fitness <ul style="list-style-type: none"> Annual subscription 	<ul style="list-style-type: none"> SilverSneakers® Papa Pals <ul style="list-style-type: none"> 80 hours Chiropractic Care <ul style="list-style-type: none"> 10 visits Transportation <ul style="list-style-type: none"> 24 one-way trips Indoor Air Quality <ul style="list-style-type: none"> Air purifier* Meal Delivery <ul style="list-style-type: none"> Post-Discharge -28 meals; or Chronic Care -84 meals** 	<ul style="list-style-type: none"> Flex Card for Vision, Dental & Hearing <ul style="list-style-type: none"> \$550 additional allowance on your SummaCare Visa to lower out-of-pocket expenses Healthy Grocery Allowance** <ul style="list-style-type: none"> \$40 monthly allowance on your SummaCare Visa PERS (Personal Emergency Response System) Home Safety Devices <ul style="list-style-type: none"> \$400 allowance, not limited by diagnosis

*Requires a diagnosis of COPD - including asthma, chronic bronchitis and/or emphysema.

**Requires a diagnosis of diabetes mellitus and/or congestive heart failure.

***May require a provider's order or a diagnosis in order to be selected or utilized.

How might a Jade (HMO) member choose their benefits?



Build your own package of benefits

Core Benefits	Tier 1 (Pick 3) Pick 3	Tier 2 (Pick 1) Pick 1	Tier 3 (Pick 1) Pick 1
<ul style="list-style-type: none"> Dental Vision Hearing OTC Assist America® Visitor/Travel 	<ul style="list-style-type: none"> Massage Therapy*** <ul style="list-style-type: none"> 10 visits Acupuncture <ul style="list-style-type: none"> 10 visits Fitness Tracker <ul style="list-style-type: none"> Fitbit® Toenail Trimming <ul style="list-style-type: none"> 6 times per year Nutrition Coaching <ul style="list-style-type: none"> 4 visits BrainHQ Memory Fitness <ul style="list-style-type: none"> Annual subscription 	<ul style="list-style-type: none"> SilverSneakers® Papa Pals <ul style="list-style-type: none"> 80 hours Chiropractic Care <ul style="list-style-type: none"> 10 visits Transportation <ul style="list-style-type: none"> 24 one-way trips Indoor Air Quality <ul style="list-style-type: none"> Air purifier* Meal Delivery <ul style="list-style-type: none"> Post-Discharge -28 meals; or Chronic Care -84 meals** 	<ul style="list-style-type: none"> Flex Card for Vision, Dental & Hearing <ul style="list-style-type: none"> \$550 additional allowance on your SummaCare Visa to lower out-of-pocket expenses Healthy Grocery Allowance** <ul style="list-style-type: none"> \$40 monthly allowance on your SummaCare Visa PERS (Personal Emergency Response System) Home Safety Devices <ul style="list-style-type: none"> \$400 allowance, not limited by diagnosis

*Requires a diagnosis of COPD - including asthma, chronic bronchitis and/or emphysema.

**Requires a diagnosis of diabetes mellitus and/or congestive heart failure.

***May require a provider's order or a diagnosis in order to be selected or utilized.

What's New for 2024?



Diane & Jim Millard Members
since 2015, Uniontown

**"The customer service is fantastic. When I
make a call, a live person answers the phone."**
– *Diane Millard*

What's New for 2024?



Enhancements to Embedded Dental Benefits

- **Increased annual dental maximum on Topaz (HMO), Jade (HMO) and Ruby (HMO) plans!**
 - **Removed coinsurance** for fillings, simple extractions and root canals on the Amber, Topaz and Jade plans. Now Amber, Topaz and Jade (along with Garnet (HMO)) have **first dollar coverage** on these services
 - **Reduced coinsurance** for bridges, crowns and dentures from 50% to 20% on Topaz and Jade; from 70% to 40% on Garnet and 70% to 50% on Amber.
 - Added coverage for **simple extractions and root canals** on Ruby
 - Added one **fluoride treatment** as part of embedded preventive dental benefit on all plans
 - Added **pre-work for dentures and bridges** as a covered benefit on all plans except for Ruby

Dental coverage provided through



What's New for 2024?

Amber (HMO)(Northeast)



- Increased **vision hardware** benefit from \$200 to \$300 annually.



- Increased **OTC** quarterly benefit from \$25 to \$100 per quarter.



- Increased **transportation** benefit from 6 trips to 50 trips annually.



- Reduced **PT/OT/speech therapy** copay from \$30 to \$25 per visit.

Amber (HMO) NE and Amber (HMO) NW



- Increased meals post-discharge or high A1C from 14 to 28 annually.



Topaz, Jade, Garnet, Ruby and Sapphire

- Increased **vision hardware** benefit



Jade, Ruby and Sapphire .

- Increased **OTC** quarterly benefit

Ready to Enroll?

Enrollment is Easy



I Can Enroll You

Accepting applications for enrollment <starting October 15>



Call Us

Enroll over the telephone by calling **330.996.8440** or (toll-free) **888.290.0610 (TTY 711)** and we will do the paperwork for you.



Go Online

Enroll online by visiting **summacare.com/medicare**



Mail Us Your Paperwork

Send your completed enrollment form to:
SummaCare Medicare Advantage
P.O. Box 3620
Akron, OH 44309-3620

Disclaimers

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. This information is not a complete description of benefits. Call 888.464.8440 (TTY 711) for more information. Some benefits mentioned are a part of special supplemental program for the chronically ill. 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 service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services. 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.

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Questions?