

Care Plus Plan

Care Plus Plan Medical Benefits

Effective January 1, 2011

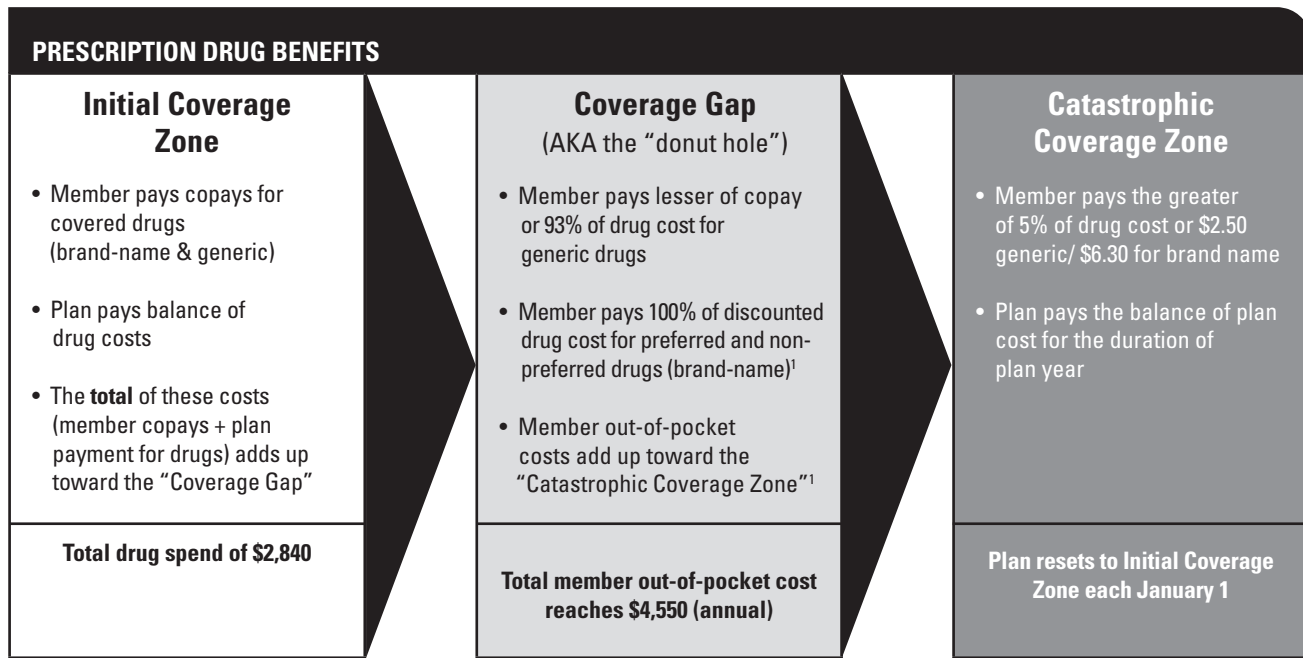
| Medical Plans | | | |
|---|---|--|---|
| Part A services (as defined by Medicare) | Medicare pays | Care Plus plan pays | You pay ¹ |
| Hospital stays: <ul style="list-style-type: none"> Semi-private room and board General nursing Other hospital services and supplies | <ul style="list-style-type: none"> 100% days 1-60 Costs over \$275/day for days 61-90 Costs over \$550/day for days 91-150 (lifetime reserve days) | <ul style="list-style-type: none"> 50% of Part A deductible (for every benefit period)² \$275/day for days 61-90 \$550/day for days 91-150 (lifetime reserve days); 100% after reserves are depleted all costs after 150 days | 50% of the Part A deductible ² |
| Skilled nursing facility care | <ul style="list-style-type: none"> 100% days 1-20 Costs over \$137.50/day for days 21-100 | Not a covered benefit | <ul style="list-style-type: none"> \$137.50/day for days 21-100 100% after 100 days |
| Part B services (as defined by Medicare) | Medicare pays | Care Plus plan pays | You pay ¹ |
| Medical services & supplies: <ul style="list-style-type: none"> Doctors' services Inpatient and outpatient medical and surgical services/supplies Physical and speech therapy Diagnostic tests Durable medical equipment and other services | 80% of Medicare-approved amounts for covered services | Remaining 20% of Medicare-approved amounts for covered services | \$162 (Part B deductible) ³ |
| Diagnostic clinical laboratory service | 100% of Medicare-approved amount for covered services | Nothing (Medicare covers at 100%) | Costs above Medicare-approved amounts or services not covered by Medicare |

¹ You are responsible for 100% of any charges not covered by Medicare or that are above the Medicare-approved amount.

² You must pay 50% of the Part A deductible for every benefit period, which begins when you are admitted and ends when you have not received hospital or skilled nursing facility treatment for 60 days in a row.

³ You pay the Part B deductible once a year.

Care Plus Plan Prescription Benefits



¹ Members will actually pay 50% of brand drug cost after a discount from the pharmaceutical manufacturer. The discounted amount will be charged at the pharmacy. The full retail cost of the drugs will still apply to getting out of the donut hole even though 50% was paid for by the pharmaceutical manufacturers.

PRESCRIPTION DRUG COPAYS:

| | | Quantity (Days' supply) | 34 | 60 | 90 |
|------------------------|----------------------|-------------------------|------|-------|-------|
| Retail Pharmacy | Generic ¹ | | \$8 | \$16 | \$24 |
| | Preferred | | \$35 | \$70 | \$105 |
| | Non-Preferred | | \$60 | \$120 | \$180 |
| | Specialty Drug | | \$50 | \$100 | \$150 |
| Mail Order | Generic ¹ | | \$6 | \$11 | \$16 |
| | Preferred | | \$24 | \$45 | \$70 |
| | Non-Preferred | | \$40 | \$80 | \$120 |
| | Specialty Drug | | \$50 | \$100 | \$150 |

¹ Generic drug copays apply in both the Initial Coverage Zone and the Coverage Gap.