



Medicare Products

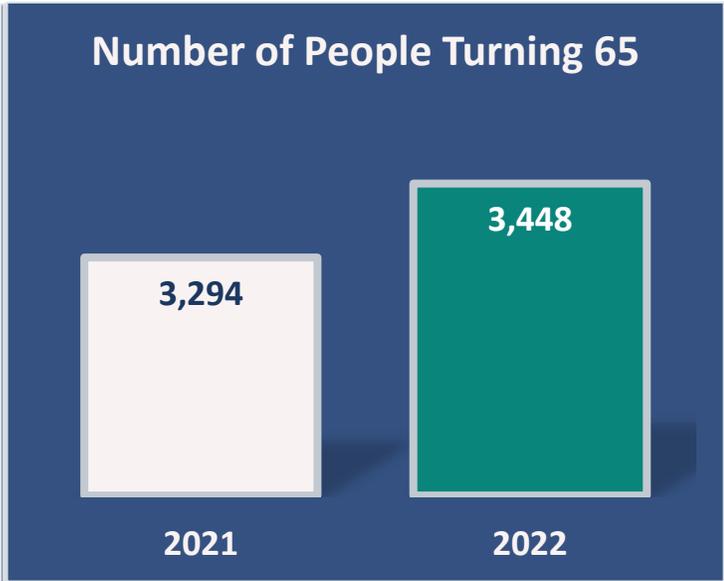
Grow your Medica business with local consumers turning 65

Minnehaha, Moody, Lake, Miner, Hanson, McCook, Turner, & Lincoln counties

Total population of Counties **293,120**



Number of people turning 65 in 2022 **3,448**



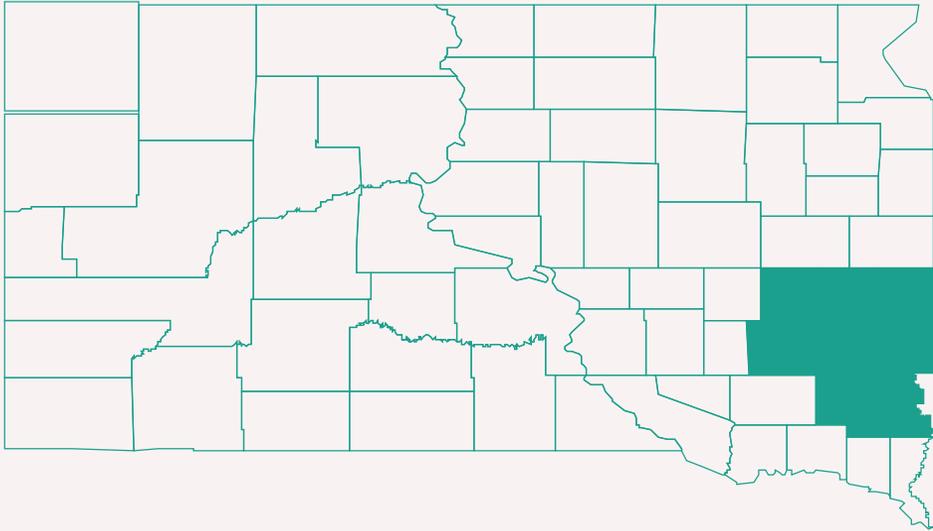
49.16%

Females turning 65

50.84%

Males turning 65

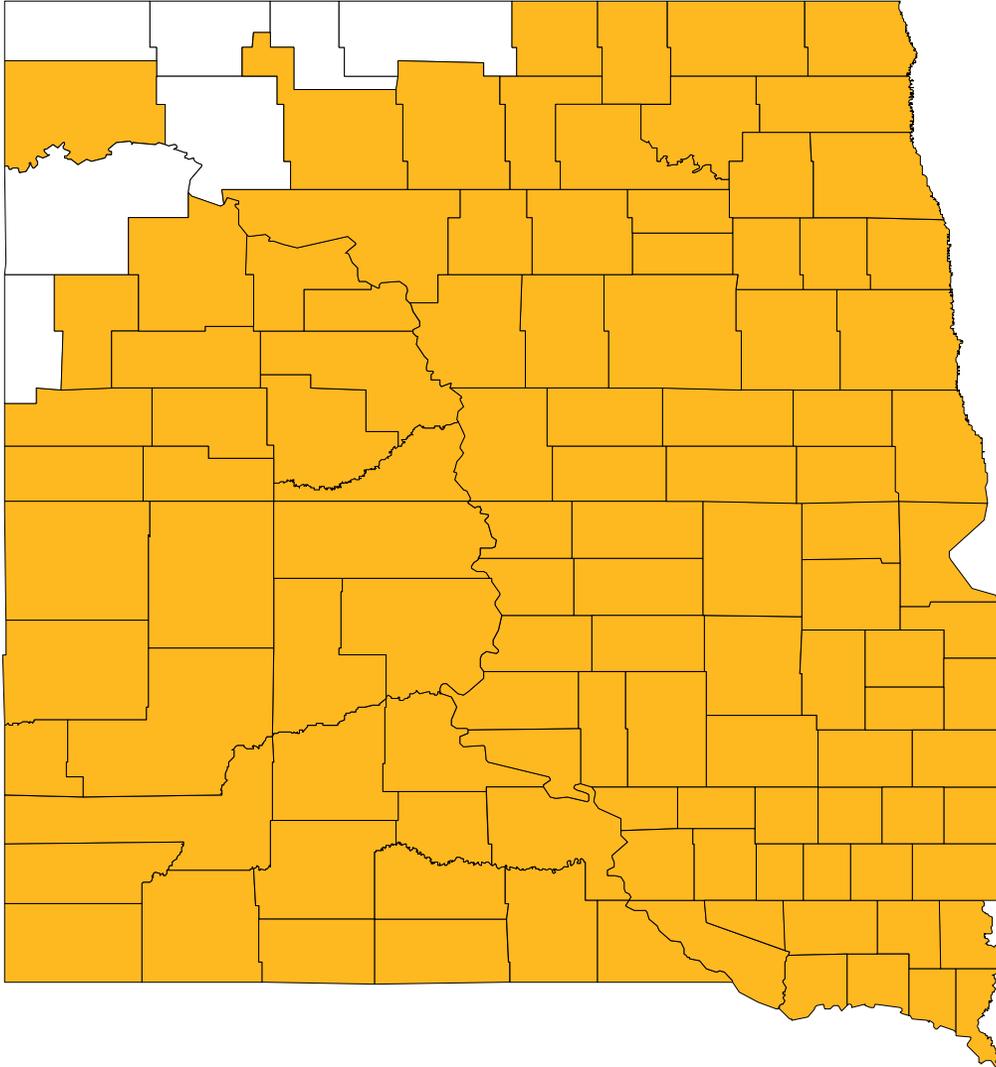
58,690 residents in Counties are 65+



Reference: Carrot Health

Medica Prime Solution

Medica Prime Solution | North Dakota & South Dakota



2022 Plan Options | Standard*, Thrift, Core, Premier

- Medical Only Plans
- Medical + Part D Plans

Available to residents of most counties in North Dakota and all counties in South Dakota

Medica Prime Solution | North Dakota & South Dakota

| | Standard* | Thrift | Core | Premier |
|------------------------------------|---|---|---|---|
| Monthly Premium (Medical Only) | \$0 | \$34 | \$79 | \$189 |
| Monthly Premium (Medical + Part D) | Rx: \$42.00 | Rx: \$78.40 | Rx: \$139.70 | Rx: \$253.80 |
| BENEFITS ▼ | YOU PAY ▼ | | | |
| Preventive Services | \$0 | \$0 | \$0 | \$0 |
| Primary Care | \$0 | 20% | \$0 | \$0 |
| Specialist Office Visit | \$35 | 20% | \$15 | \$0 |
| Part B Drugs | 20% | 20% | 20% | 20% |
| Diagnostic Tests | \$0-35 | 20% | \$10 | \$0 |
| Outpatient Surgery | \$200 | 20% | \$100 | \$0 |
| Emergency Care | \$90 worldwide | \$50 | \$50 worldwide | \$0 worldwide |
| Inpatient Hospital | Days 1-5: \$280/day Days 6-90: \$0/day | Days 1-4 : \$300/day Days 5-90 : \$0/day | \$300 per stay | \$0 per stay |
| Skilled Nursing Facility | Days 1-20: \$0/day Days 21-100: \$185.50**/day | Days 1-20: \$0/day Days 21-100: \$185.50**/day | Days 1-20: \$0/day Days 21-100: \$50/day | Days 1-20: \$0/day Days 21-100: \$25/day |
| Max. Out-of-Pocket | \$4,500 | \$6,700 | \$4,000 | \$3,000 |
| Medical Deductible | \$0 | \$50 | \$0 | \$0 |

Prime Solution Standard Open Enrollment

Prime Solution Standard has a limited Open Enrollment Period. Please note that this is Medica rule and not a CMS rule.

- General enrollments are only allowed for 1/1, 2/1, or 3/1 effective dates
 - Outside of a qualified enrollment period such as the Initial Enrollment Period or a Special Enrollment Period
 - Current Prime members can move to Prime Standard for 1/1, 2/1, or 3/1 effective dates via change form
- Members may switch to another Prime Solution medical only plan throughout the year, but not allowed to re-enroll in the Standard plan until the next AEP or Special Enrollment Period
- Medicare Advantage members may use MA OEP to enroll in Prime Solution Standard for 2/1, 3/1, or 4/1 effective dates



Prime Solution Network

Medica Prime Solution continues to have an expansive provider and facility network, with several major health care systems in-network.



Imagine better health.™



Convenience of Bundling Medical + Part D

1

The Power of One

- Combined bill and premium payment
- ID card
- Combined customer service call for all your care
- Website to look up medical and prescription drug claims



Part D Prescription Drug Benefit Changes

Pharmacy Benefit Manager (PBM)

Benefit Highlights & Formulary

- 5-Tier formulary with more than 3,400 prescription drugs

Large Nationwide Pharmacy Network

- **60,000+** pharmacies nationwide, including all major chains and thousands of independent pharmacies



Part D Prescription Drug Benefit Changes

Save Money When Using Preferred Pharmacies

Advantages to you

- Copay savings when using preferred pharmacies
- Significant savings with Tier 1 drugs
- Includes Walgreens, Hy-Vee Pharmacy, Walmart, Sam's Club, Costco and other independent pharmacies (25,000 nationwide)



Mail Service Pharmacy | Express Scripts

Save When Using Convenient Mail Service

Mail Service Pharmacy

- For 3-month supplies through preferred mail order vendor:
 - Pay \$0 for Tier 1 drugs with some plans
 - 90-day supply for two copays
- Your Part D deductible does not apply to Tier 1 and 2 drugs*
- Order refills online anytime, anywhere
- Set up handy automatic refills for most maintenance medications
- Real-time order tracking and typically receive in 3-5 days



*Deductible applies to all tiers for Thrift plan

Medica Prime Solution | Part D Benefits | North Dakota & South Dakota

| Part D Deductible | Standard w/Rx* | | Thrift w/Rx | | Core w/Rx | | Premier w/Rx | |
|---|----------------------------------|-------------------|--------------------|-------------------|----------------------------------|-------------------|----------------------------------|-------------------|
| | \$480 Tiers 3-5 \$0 Tiers 1-2 | | \$480 | | \$480 Tiers 3-5 \$0 Tiers 1-2 | | \$480 Tiers 3-5 \$0 Tiers 1-2 | |
| YOU PAY ▼ (30-day Retail) | | | | | | | | |
| Level One: Initial Coverage (Shared drug costs \$0 to \$4,430) | | | | | | | | |
| | Preferred Pharmacy | Standard Pharmacy | Preferred Pharmacy | Standard Pharmacy | Preferred Pharmacy | Standard Pharmacy | Preferred Pharmacy | Standard Pharmacy |
| Tier 1 Preferred Generic | \$0 | \$10 | \$2 | \$10 | \$0 | \$10 | \$0 | \$10 |
| Tier 2 Generic | \$15 | \$20 | \$10 | \$20 | \$10 | \$20 | \$7 | \$20 |
| Tier 3 Preferred Brand | \$47 | \$47 | \$38 | \$47 | \$35 | \$47 | \$28 | \$47 |
| Tier 4 Non-Preferred | 46% | 46% | 50% | 50% | 46% | 46% | 46% | 46% |
| Tier 5 Specialty Drug | 25% | 25% | 25% | 25% | 25% | 25% | 25% | 25% |
| Level Two: Coverage Gap "Donut Hole" (Member-only drug costs up to \$7,050) | | | | | | | | |
| Generic at 25% and Covered Brand at 25% for all plan options | | | | | | | | |
| Level Three: Catastrophic Coverage (Shared drug costs \$7,050 and up) | | | | | | | | |
| Generic at \$3.95 or 5%** and other drugs \$9.85 or 5%** | | | | | | | | |

*Not available in ND
 **Whichever is greater

Medica Prime Solution | Extra Value Benefits | North Dakota & South Dakota

| Dental Reimbursement | Eyewear Reimbursement | Hearing Aid Reimbursement |
|--|--|--|
| <p>Reimbursement for dental services (preventive and restorative care) provided by any licensed dentist. No network restrictions.</p> <p>Available for members with:</p> | <p>Annual reimbursement for prescription eyewear.</p> <p>Available for members with:</p> | <p>Annual reimbursement for hearing aids and evaluations/fittings. No network restrictions.</p> <p>Available for members with:</p> |

| | |
|----------------------|--------------|
| Standard Plan | \$500 |
| Core Plan | \$300 |
| Premier Plan | \$400 |

| | |
|----------------------|--------------|
| Standard Plan | \$150 |
| Core Plan | \$100 |
| Premier Plan | \$200 |

| | |
|----------------------|--------------|
| Standard Plan | \$600 |
| Core Plan | \$400 |
| Premier Plan | \$400 |

Medica Prime Solution | Over-the-Counter (OTC) Savings | North Dakota & South Dakota

New benefit for Prime Solution!

Quarterly allowance available for purchase of eligible over-the-counter health and wellness products in OTC Health Solutions catalog.

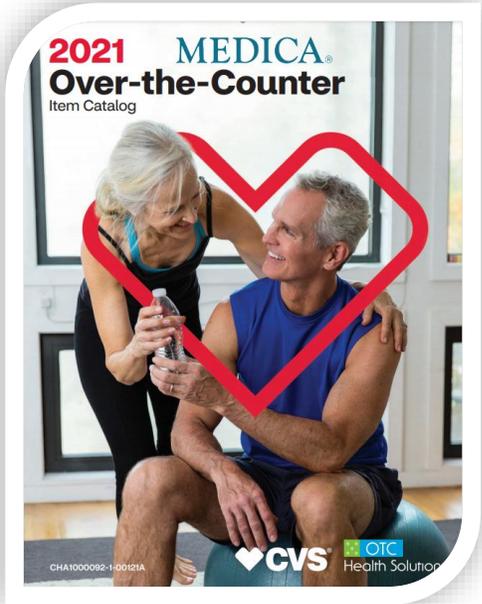
- The benefit is available at the beginning of every quarter of the calendar year
- Unused credits do not carry over to the next period
- Order online or order through the catalog
- Free shipping

Available for members with:

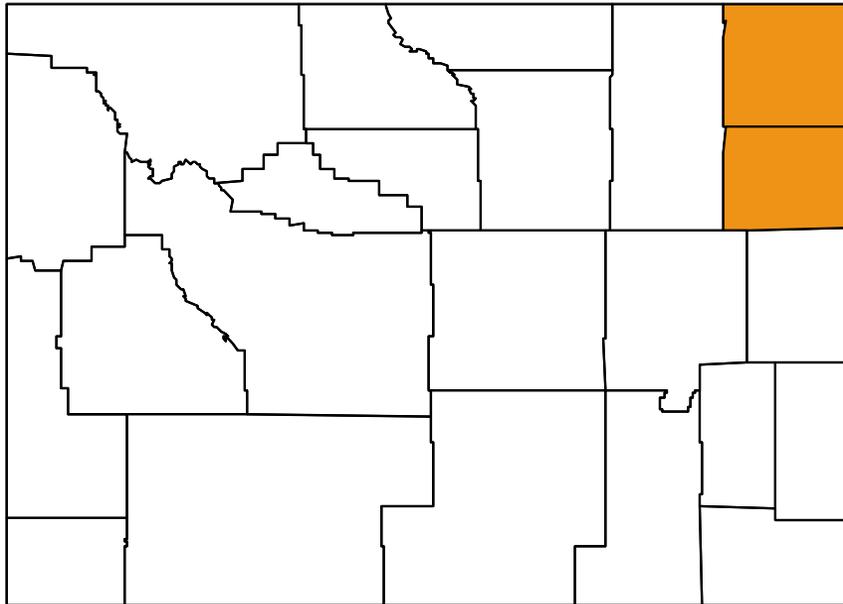
Standard Plan **\$25**

Core Plan **\$75**

Premier Plan **\$50**



Medica Prime Solution | Wyoming



2022 Plan Options | Thrift, Core, Premier

- Medical-only Plan Options

Available to residents of 2 Wyoming counties:

Crook, Weston

Medica Prime Solution | Wyoming

| | Thrift | Core | Premier |
|--------------------------------|--|---|---|
| Monthly Premium (Medical Only) | \$34 | \$79 | \$189 |
| BENEFITS ▼ | YOU PAY ▼ | | |
| Preventive Services | \$0 | \$0 | \$0 |
| Primary Care | 20% | \$0 | \$0 |
| Specialist Office Visit | 20% | \$15 | \$0 |
| Part B Drugs | 20% | 20% | 20% |
| Diagnostic Tests | 20% | \$10 | \$0 |
| Outpatient Surgery | 20% | \$100 | \$0 |
| Emergency Care | \$50 | \$50 worldwide | \$0 worldwide |
| Inpatient Hospital | Days 1-4 : \$300/day Days 5-90 : \$0/day | \$300 per stay | \$0 per stay |
| Skilled Nursing Facility | Days 1-20: \$0/day Days 21-100: \$185.50*/day | Days 1-20: \$0/day Days 21-100: \$50/day | Days 1-20: \$0/day Days 21-100: \$25/day |
| Max. Out-of-Pocket | \$6,700 | \$4,000 | \$3,000 |
| Medical Deductible | \$50 | \$0 | \$0 |

[*This is a 2021 amount and may change in 2022.]

Medica Prime Solution | Extra Value Benefits | Wyoming

| Dental Reimbursement | Eyewear Reimbursement | Hearing Aid Reimbursement |
|--|--|--|
| <p>Reimbursement for dental services (preventive and restorative care) provided by any licensed dentist. No network restrictions.</p> <p>Available for members with:</p> | <p>Annual reimbursement for prescription eyewear.</p> <p>Available for members with:</p> | <p>Annual reimbursement for hearing aids and evaluations/fittings. No network restrictions.</p> <p>Available for members with:</p> |

| | |
|--------------|--------------|
| Core Plan | \$300 |
| Premier Plan | \$400 |

| | |
|--------------|--------------|
| Core Plan | \$100 |
| Premier Plan | \$200 |

| | |
|--------------|--------------|
| Core Plan | \$400 |
| Premier Plan | \$400 |

Medica Prime Solution | Over-the-Counter (OTC) Savings | Wyoming

New benefit for Prime Solution!

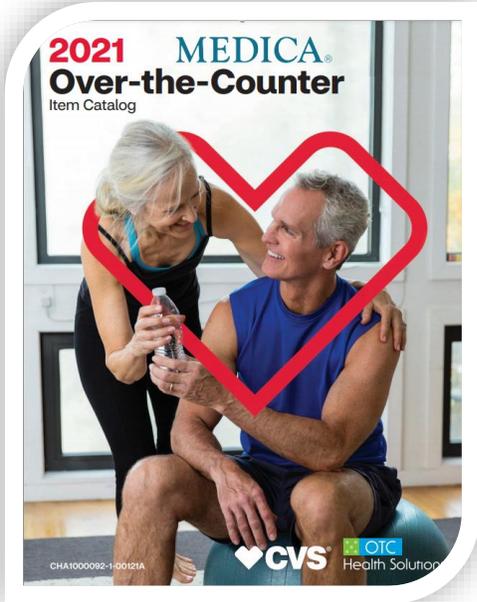
Quarterly allowance available for purchase of eligible over-the-counter health and wellness products in OTC Health Solutions catalog.

- The benefit is available at the beginning of every quarter of the calendar year
- Unused credits do not carry over to the next period
- Order online or order through the catalog
- Free shipping

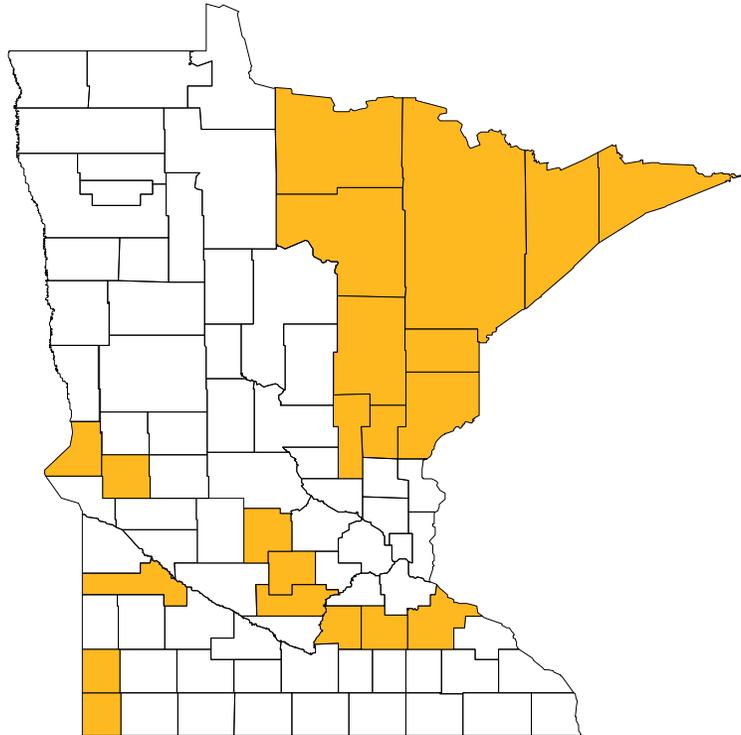
Available for members with:

Core Plan **\$75**

Premier Plan **\$50**



Medica Prime Solution | Minnesota



2022 Plan Options | Standard, Thrift, Basic, Enhanced

- Medical-only plans
- Medical + Part D plans

Available to residents of 21 Minnesota counties:

Aitkin, Carlton, Cook, Goodhue, Itasca, Kanabec, Koochiching, Lake, Le Sueur, McLeod, Meeker, Mille Lacs, Pine, Pipestone, Rice, Rock, Sibley, St. Louis, Stevens, Traverse and Yellow Medicine

Prime Solution Value

Prime Solution Value and Prime Solution Value Rx will not be offered in 2022.

Current members on Prime Solution Value will be transitioned to Prime Solution Basic effective 1/1/2022

- Members Impacted: 765
- The change will happen automatically
- No action needed from the member

Prime Solution **Value Medical Only** → Prime Solution **Basic Medical Only**

Prime Solution **Value with Rx** → Prime Solution **Basic with Rx**



Medica Prime Solution | Minnesota

| | Standard | Thrift | Basic | Enhanced |
|------------------------------------|--|--|---|---|
| Monthly Premium (Medical Only) | \$0 | \$34 | \$79 | \$157 |
| Monthly Premium (Medical + Part D) | Rx: \$42.00 | Rx: \$78.40 | Rx: \$118.50 Rx2: \$155.50 | Rx: \$215.90 Rx2: \$229.30 |
| BENEFITS ▼ | YOU PAY ▼ | | | |
| Preventive Services | \$0 | \$0 | \$0 | \$0 |
| Primary Care | \$0 | 20% | \$0 | \$0 |
| Specialist Office Visit | \$35 | 20% | \$15 | \$10 |
| Part B Drugs | 20% | 20% | 20% | 20% |
| Diagnostic Tests | \$0-35 | 20% | \$10 | \$0 |
| Outpatient Surgery | \$200 | 20% | \$50 | \$0 |
| Emergency Room | \$90 worldwide | \$50 | \$50 worldwide | \$50 worldwide |
| Inpatient Hospital | Days 1-5: \$280/day Days 6-90: \$0/day | Days 1-4: \$300/day Days 5-90: \$0/day | \$300 per stay | \$0 per stay |
| Skilled Nursing Facility | Days 1-20: \$0/day Days 21-100: \$185.50*/day | Days 1-20: \$0/day Days 21-100: \$185.50*/day | Days 1-20: \$0/day Days 21-100: \$50/day | Days 1-20: \$0 Days 21-100: \$25/day |
| Max. Out-of-Pocket | \$4,500 | \$6,700 | \$3,400 | \$3,000 |
| Medical Deductible | \$0 | \$50 | \$0 | \$0 |

Prime Solution Standard Open Enrollment

Prime Solution Standard has a limited Open Enrollment Period. Please note that this is Medica rule and not a CMS rule.

- General enrollments are only allowed for 1/1, 2/1, or 3/1 effective dates
 - Outside of a qualified enrollment period such as the Initial Enrollment Period or a Special Enrollment Period
 - Current Prime members can move to Prime Standard for 1/1, 2/1, or 3/1 effective dates via change form
- Members may switch to another Prime Solution medical only plan throughout the year, but not allowed to re-enroll in the Standard plan until the next AEP or Special Enrollment Period
- Medicare Advantage members may use MA OEP to enroll in Prime Solution Standard for 2/1, 3/1, or 4/1 effective dates



Prime Solution Network

Medica Prime Solution continues to have an expansive provider and facility network, with several major health care systems in-network.



Alina Health



HealthPartners®
Park Nicollet®



Essentia Health

Convenience of Bundling Medical + Part D

1

The Power of One

- Combined bill and premium payment
- ID card
- Combined customer service call for all your care
- Website to look up medical and prescription drug claims



Part D Prescription Drug Benefit Changes

Pharmacy Benefit Manager (PBM)

Benefit Highlights & Formulary

- 5-Tier formulary with more than 3,400 prescription drugs

Large Nationwide Pharmacy Network

- **60,000+** pharmacies nationwide, including all major chains and thousands of independent pharmacies



Part D Prescription Drug Benefit Changes

Save Money When Using Preferred Pharmacies

Advantages to you

- Copay savings when using preferred pharmacies
- Significant savings with Tier 1 drugs
- Includes Walgreens, Hy-Vee Pharmacy, Walmart, Sam's Club, Costco and other independent pharmacies (25,000 nationwide)



Mail Service Pharmacy | Express Scripts

Save When Using Convenient Mail Service

Mail Service Pharmacy

- For 3-month supplies through preferred mail order vendor:
 - Pay \$0 for Tier 1 drugs with some plans
 - 90-day supply for two copays
- Your Part D deductible does not apply to Tier 1 and 2 drugs*
- Order refills online anytime, anywhere
- Set up handy automatic refills for most maintenance medications
- Real-time order tracking and typically receive in 3-5 days



*Deductible applies to all tiers for Thrift plan

Medica Prime Solution | Part D Benefits | Minnesota

| | Standard | | Thrft | | Basic | | | | Enhanced | | | |
|---|---|-------------|--------------|-------------|---|-------------|--------------|-------------|---|-------------|--------------|-------------|
| | w/Rx | | w/Rx | | w/Rx | | w/Rx2 | | w/Rx | | w/Rx2 | |
| Part D Deductible | \$480 Tiers 3-5 \$0 Tiers 1-2 | | \$480 | | \$480 Tiers 3-5 \$0 Tiers 1-2 | | \$0 | | \$480 Tiers 3-5 \$0 Tiers 1-2 | | \$0 | |
| YOU PAY ▼ (30-day Retail) | | | | | | | | | | | | |
| Level One: Initial Coverage (Shared drug costs \$0 to \$4,430) | | | | | | | | | | | | |
| | Preferred Rx | Standard Rx | Preferred Rx | Standard Rx | Preferred Rx | Standard Rx | Preferred Rx | Standard Rx | Preferred Rx | Standard Rx | Preferred Rx | Standard Rx |
| Tier 1 Preferred Generic | \$0 | \$10 | \$2 | \$10 | \$0 | \$10 | \$2 | \$10 | \$0 | \$10 | \$2 | \$10 |
| Tier 2 Generic | \$15 | \$20 | \$10 | \$20 | \$10 | \$20 | \$8 | \$20 | \$10 | \$20 | \$8 | \$20 |
| Tier 3 Preferred Brand | \$47 | \$47 | \$38 | \$47 | \$35 | \$47 | \$35 | \$47 | \$33 | \$47 | \$35 | \$47 |
| Tier 4 Non-Preferred | 46% | 46% | 50% | 50% | 46% | 46% | 50% | 50% | 46% | 46% | 50% | 50% |
| Tier 5 Specialty Drug | 25% | 25% | 25% | 25% | 25% | 25% | 33% | 33% | 25% | 25% | 33% | 33% |
| Level Two: Coverage Gap "Donut Hole" (Member-only drug costs up to \$7,050) | | | | | | | | | | | | |
| Generic at 25% and Covered Brand at 25% for all plan options | | | | | | | | | | | | |
| Level Three: Catastrophic Coverage (Shared drug costs \$7,050 and up) | | | | | | | | | | | | |
| Generic at \$3.95 or 5%* and other drugs \$9.85 or 5%* | | | | | | | | | | | | |

*Whichever is greater.

Medica Prime Solution | Extra Value Benefits | Minnesota

| Dental Reimbursement | Eyewear Reimbursement | Hearing Aid Reimbursement |
|--|--|--|
| <p>Reimbursement for dental services (preventive and restorative care) provided by any licensed dentist. No network restrictions.</p> <p>Available for members with:</p> | <p>Annual reimbursement for prescription eyewear.</p> <p>Available for members with:</p> | <p>Annual reimbursement for hearing aids and evaluations/fittings. No network restrictions.</p> <p>Available for members with:</p> |

| | |
|---------------|-------|
| Standard Plan | \$500 |
| Basic Plan | \$300 |
| Enhanced Plan | \$400 |

| | |
|---------------|-------|
| Standard Plan | \$150 |
| Basic Plan | \$100 |
| Enhanced Plan | \$200 |

| | |
|---------------|-------|
| Standard Plan | \$600 |
| Basic Plan | \$400 |
| Enhanced Plan | \$400 |

Medica Prime Solution | Over-the-Counter (OTC) Savings | Minnesota

New benefit for Prime Solution!

Quarterly allowance available for purchase of eligible over-the-counter health and wellness products in OTC Health Solutions catalog.

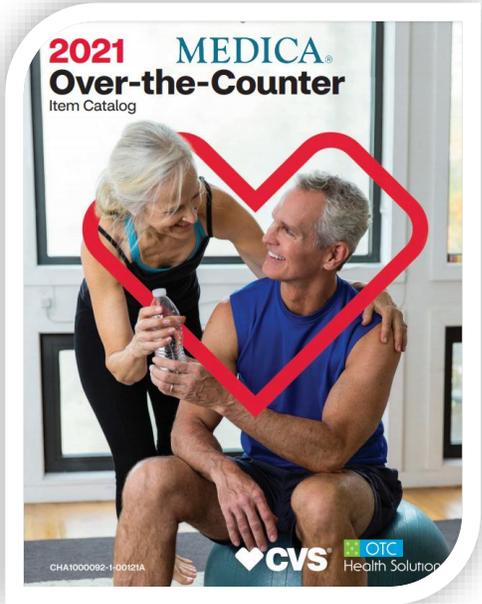
- The benefit is available at the beginning of every quarter of the calendar year
- Unused credits do not carry over to the next period
- Order online or order through the catalog
- Free shipping

Available for members with:

Standard Plan **\$25**

Basic Plan **\$75**

Enhanced Plan **\$50**



Medica Prime Solution | 24/7 Online Convenience Care

\$0 copay for convenience care and behavioral health visits through Amwell®*

- 24/7 unlimited online care via phone, computer, or tablet
- Available in all states
- Online medical service staffed by board-certified doctors who can answer questions, diagnose, treat and prescribe medications (if needed) for common medical conditions
- Simply go to **amwell.com/cm** or call toll-free at (855) 635-1393



*Not available with Thrift plan.

New Fitness Vendor **One Pass**[™]

One Pass is a next generation fitness and wellness-based solution, which incorporates physical, digital, mental, and social well-being personalized tools.*



Fitness Networks

Over 20,000 core and premium locations including gyms and boutique studios



Digital Solutions

Over 20,000 on-demand and live virtual fitness classes including an AI workout builder



Social Activities

Nearly 20,000 free events and classes for members



Brain Training

A personalized program of exercising the brain to improve aspects of cognition including memory, attention, focus, and brain speed.



Home Kits

Fitness kits designed for members who are unable to access a gym location

***Available on all Prime Solution plans except Thrift**

One Pass Gym Network

- Access to our extensive, nationwide network of gyms and fitness locations, the largest of all Medicare fitness programs
- Including high demand premium locations not in competition's network
- New gym and fitness locations continually being added:
 - Members can request to have their specific facility added if necessary

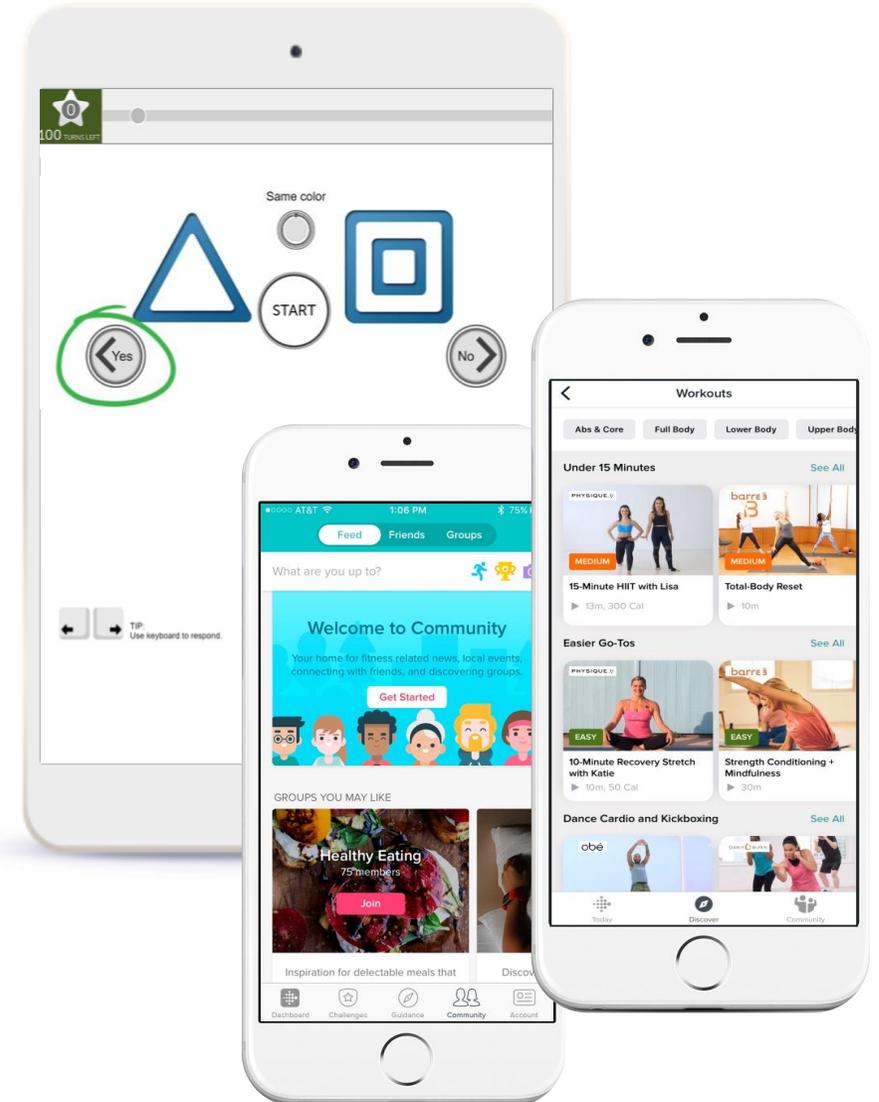


Other participating locations are available in our network.

Virtual Options

A complete virtual solution for at-home engagement, including:

- Access to over 20,000 digital on-demand and live classes
- Unlimited Member Access – members can participate in as many classes as they want
- Use multiple platforms at one-time – no limit on what brands members use or how many classes members have access to
- Digital Solutions Brand include:
 - BurnAlong
 - LesMills OnDemand
 - Fitbit premiums
 - Daily Burn
 - Yogaworks
 - Openfit
 - AgeBold
- Online cognitive tools, including personalized recommendations, articles, brain health exercises, activities, brain games and more



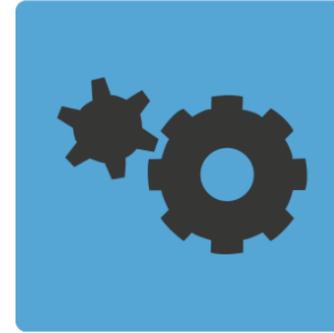
Brain Training

Clinically proven online platform to help people think faster, focus better, and remember more leading to better health outcomes:

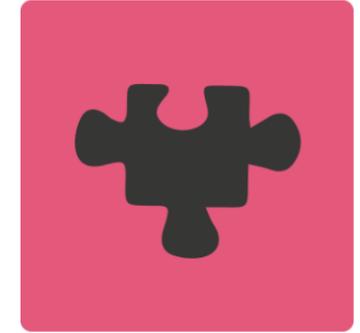
- Health-related quality of life
- Mood
- Balance
- Ability to Live Independently



Attention



Brain Speed



Memory



People Skills



Intelligence



Navigation

One Pass Transition FAQs

What will be new with One Pass?

One Pass has the largest gym network in the industry with over 20,000 gyms and premium boutique fitness studios

- Over 20,000 on-demand and live fitness classes, brain-training and social activities both (in person and virtual)

Will members receive an ID card from Rally Pass?

No, members will receive a confirmation code from the One Pass member website to gain access to all gyms and program features

- The confirmation code is only needed for the initial visit
- Members will then receive a gym membership ID card or access to the gym app to check in for future visits

Can members go to more than one gym on the same day?

Yes, members have multi-facility access

- Members can use multiple gym locations during the same time
- Caregiver Access allows members to bring a caregiver to the gym at no additional cost
 - Caregivers are not allowed to workout – they are expected to assist the member in their caregiver capacity

Will members lose access to gyms or classes currently offered by SilverSneakers?

We are actively identifying any potential network gaps and working to contract with those gyms

- Members can still attend SilverSneakers branded classes at participating One Pass gyms

Personal Support Programs | Available 365 days a year 24/7

HealthAdvocateSM

24/7 NurseLine

Highly-trained nurses answer questions about symptoms, medications, health conditions and offer self-care tips for non-urgent medical issues.

HealthAdvocateSM

Personal Advocacy Support

Personal Health Advocates help in a variety of ways from finding the right doctor to resolving claims questions to answering questions about coverage, find network providers, schedule appointments, and more.

Medicare Supplement

Medicare Supplement | Key Features

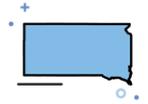
- Offered statewide in all South Dakota and Minnesota counties
- Guaranteed renewable as long as premiums are paid
- No contracted network (may use any Provider nationwide who accepts Medicare assignment)
- Doesn't include Part D coverage
- Option to pair with any stand-alone Part D Prescription Drug Plan (PDP)
- Fully portable when you change your state of residence*
- No referrals or prior authorizations required for Medicare Supplement
- Benefits don't change from year to year

Medicare Supplement | MACRA

The Medicare Access and CHIP Reauthorization Act (MACRA) prohibits the sale of Medicare Supplement policies that cover the Medicare Part B deductible for individuals who are *newly* eligible for Medicare on or after January 1, 2020.

- A *newly* eligible individual is one that turns age 65 **on or after January 1, 2020** or first becomes eligible for Medicare due to age, disability, or end-stage renal disease **on or after January 1, 2020**.
- A *non-newly* eligible individual is one that turns age 65 **before January 1, 2020** or first becomes eligible due to age, disability, or end-stage renal disease **before January 1, 2020**.

Medicare Supplement | Plan Options



Medica plan options:

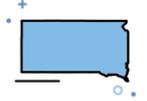
- Plans A, F*, G and N

| Benefits | A | F* | G | N |
|--|------|------|------|--------|
| Medicare Part A coinsurance and hospital costs (up to an additional 365 days after Medicare benefits are used) | 100% | 100% | 100% | 100% |
| Medicare Part B coinsurance or copayment | 100% | 100% | 100% | 100%** |
| Blood (first 3 pints) | 100% | 100% | 100% | 100% |
| Part A hospice care coinsurance or copayment | 100% | 100% | 100% | 100% |
| Skilled nursing facility care coinsurance | | 100% | 100% | 100% |
| Part A deductible | | 100% | 100% | 100% |
| Part B deductible | | 100% | | |
| Part B excess charges | | 100% | 100% | |
| Foreign travel emergency (up to plan limits) | | 80% | 80% | 80% |

*Plan F is only available to Non-Newly Eligible applicants.

**Plan N pays 100% of the Part B coinsurance, except for a copayment of up to \$20 for some office visits and up to a \$50 copayment for emergency room visits that don't result in an inpatient admission.

Medicare Supplement | Premiums



Premiums

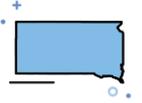
Premiums are age-rated with some area factors based on the zip code of where the applicant resides. Exact premium amounts can be calculated within the E-Application based on applicant demographic data or in the Outline of Coverage.

Premium payment options:

- Monthly
- Quarterly
- Semi-annually
- Annually

New policyholders receive a 12 month rate guarantee, with premium rate changes on policy anniversary date.

Medicare Supplement | Household Discount



In South Dakota:

- Must have a household resident (at least one, no more than three): with whom you have continuously resided for the last 12 months and who is age 60 or older; OR with whom you reside and to whom you are either married or in a civil union partnership
- The household discount is 12%

Optional Prescription Drug Plan Coverage

If you need Part D coverage, we can assist you

Add Optional Part D drug coverage to your Medica Medicare Supplement plan

SilverScript®* Prescription Drug Plan (PDP) offers Part D plans designed to fit your needs and your budget.

- **SilverScript gives you:**
 - Affordable coverage options
 - A large formulary, including brand name, generic and specialty drugs
 - An extensive network of pharmacies nationwide

***Pair a Supplement plan with a SilverScript Prescription Drug Plan or any other stand-alone Part D Prescription Drug Plan.**

SilverScript® is a Prescription Drug Plan with a Medicare contract offered by SilverScript Insurance Company. Enrollment in SilverScript depends on contract renewal. This information is not a complete description of benefits. Contact the plan for more information. SilverScript Insurance Company is an independent company whose products and services are not Medica products and services. SilverScript Insurance Company is solely responsible for this prescription drug coverage.

Personal Support Programs | Available 365 days a year 24/7

HealthAdvocateSM

24/7 NurseLine

Highly-trained nurses answer questions about symptoms, medications, health conditions and offer self-care tips for non-urgent medical issues.

HealthAdvocateSM

Personal Advocacy Support

Personal Health Advocates help in a variety of ways from finding the right doctor to resolving claims questions to answering questions about coverage, find network providers, schedule appointments, help with recovery and more.

Medicare Supplement | Plan Options



| Medicare Supplement Benefits | Basic | Extended Basic (without Part B Deductible) | Extended Basic (with Part B Deductible) ¹ | \$20/\$50 Copayment (Plan N) |
|---|--------------------------|--|--|--|
| Basic Benefits | ✓ | ✓ | ✓ | ✓ 100% Part B coinsurance except up to \$20 copay per office visit and up to \$50 copay per Emergency Room visit |
| Medicare Part A: Skilled Nursing Facility Coinsurance | ✓ | ✓ | ✓ | ✓ |
| Medicare Part A: Inpatient Hospital Deductible | Optional Rider Available | ✓ | ✓ | ✓ |
| Medicare Part B: Deductible ¹ | Optional Rider Available | | ✓ | |
| Preventive Care (Not Covered by Medicare) | Optional Rider Available | ✓ | ✓ | |
| Medicare Part B Excess Charges | Optional Rider Available | ✓ | ✓ | |
| Foreign Travel Emergency Care (Not Covered by Medicare) | ✓ 80% | ✓ 80%* | ✓ 80%* | ✓ 80% |
| Coverage While In A Foreign Country | | ✓ 80%* | ✓ 80%* | |
| State-Mandated Benefits (Example: Diabetic Equipment and Supplies, Routine Cancer Screening, etc) | ✓ | ✓ | ✓ | ✓ |

¹ Available to Non-Newly Eligible applicants only

* 100% after you spend \$1,000 of out-of-pocket costs for a Calendar Year./ ✓ The check marks(✓) in the Medigap chart mean the benefit is included with this plan option.

Note: Medica will not pay for services for which a charge is normally not made where there is no insurance. In addition, no benefits are payable for expenses incurred before the Coverage Effective Date.

Medicare Supplement | Basic Plan - Optional Riders



| | |
|--|--|
| MEDICARE PART A INPATIENT HOSPITAL DEDUCTIBLE RIDER | 100% Coverage for Medicare Part A inpatient hospital deductible amount |
| MEDICARE PART B DEDUCTIBLE RIDER* | 100% Coverage for the Medicare Part B annual deductible amount |
| MEDICARE PART B EXCESS CHARGE RIDER | 100% Coverage of all eligible medical expenses and supplies not covered by Medicare Part B, not to exceed any charge limitation established by the Medicare program or state law |
| NON-MEDICARE COVERED PREVENTIVE CARE BENEFIT RIDER | 100% Coverage for annual physical exam, eye and hearing exam Up to \$120 benefit per year |

Medicare Supplement | MN Plan Options & Current Premiums



Premiums

Premiums are community rated, which means the same monthly premium is charged to everyone who has the Medicare policy, regardless of age.

| Plan Types | Tobacco Free | Tobacco |
|--|--------------|----------|
| Basic Plan | \$189.80 | \$220.90 |
| Part A Deductible Rider | \$45.10 | \$51.80 |
| Part B Deductible Rider* | \$16.90 | \$16.90 |
| Part B Excess Charges Rider | \$1.10 | \$1.20 |
| Preventive Medical Care Rider | \$2.60 | \$2.90 |
| Basic Plan + Riders (Non-newly eligible) | \$255.50 | \$293.70 |
| Basic Plan + Riders (Newly eligible) | \$238.60 | \$276.80 |
| Extended Basic (with Part B Deductible Coverage)* | \$256.20 | \$294.60 |
| Extended Basic (without Part B Deductible Coverage) | \$239.80 | \$278.30 |
| \$20/\$50 Copayment (Plan N) | \$184.60 | \$212.20 |
| High Deductible Plan (HDF) | \$92.70 | \$106.60 |

*Available to Non-newly eligible applicants only. Non-newly eligible applicants are people who turned age 65 before January 1, 2020, or first became eligible for Medicare due to age, disability or end-stage renal disease before January 1, 2020.

Optional Prescription Drug Plan Coverage

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Add Optional Part D drug coverage to your Medica Medicare Supplement plan

SilverScript®* Prescription Drug Plan (PDP) offers Part D plans designed to fit your needs and your budget.

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***Pair a Supplement plan with a SilverScript Prescription Drug Plan or any other stand-alone Part D Prescription Drug Plan.**

SilverScript® is a Prescription Drug Plan with a Medicare contract offered by SilverScript Insurance Company. Enrollment in SilverScript depends on contract renewal. This information is not a complete description of benefits. Contact the plan for more information. SilverScript Insurance Company is an independent company whose products and services are not Medica products and services. SilverScript Insurance Company is solely responsible for this prescription drug coverage.

Personal Support Programs | Available 365 days a year 24/7

HealthAdvocateSM

24/7 NurseLine

Highly-trained nurses answer questions about symptoms, medications, health conditions and offer self-care tips for non-urgent medical issues.

HealthAdvocateSM

Personal Advocacy Support

Personal Health Advocates help in a variety of ways from finding the right doctor to resolving claims questions to answering questions about coverage, find network providers, schedule appointments, help with recovery and more.

New Fitness Vendor **One Pass™**

One Pass is a next generation fitness and wellness-based solution, which incorporates physical, digital, mental, and social well-being personalized tools.*



Fitness Networks

Over 20,000 core and premium locations including gyms and boutique studios



Digital Solutions

Over 20,000 on-demand and live virtual fitness classes including an AI workout builder



Social Activities

Nearly 20,000 free events and classes for members



Brain Training

A personalized program of exercising the brain to improve aspects of cognition including memory, attention, focus, and brain speed.



Home Kits

Fitness kits designed for members who are unable to access a gym location

***Only available in MN.**

Medicare Supplement | Discount Programs*



| Medical Alert Systems | Discounts on Hearing Aids | Lasik Vision Correction |
|---|---|---|
| <p>Medical Alert Systems Receive a discount on medical alert systems from Philips Lifeline</p> | <p>Discounts on Hearing Aids 30%-60% discount on hearing aids through EPIC® Hearing Service Plan</p> | <p>Lasik Vision Correction Discounts up to 50% off LASIK vision correction through QualSight Laser Vision Correction Program</p> |

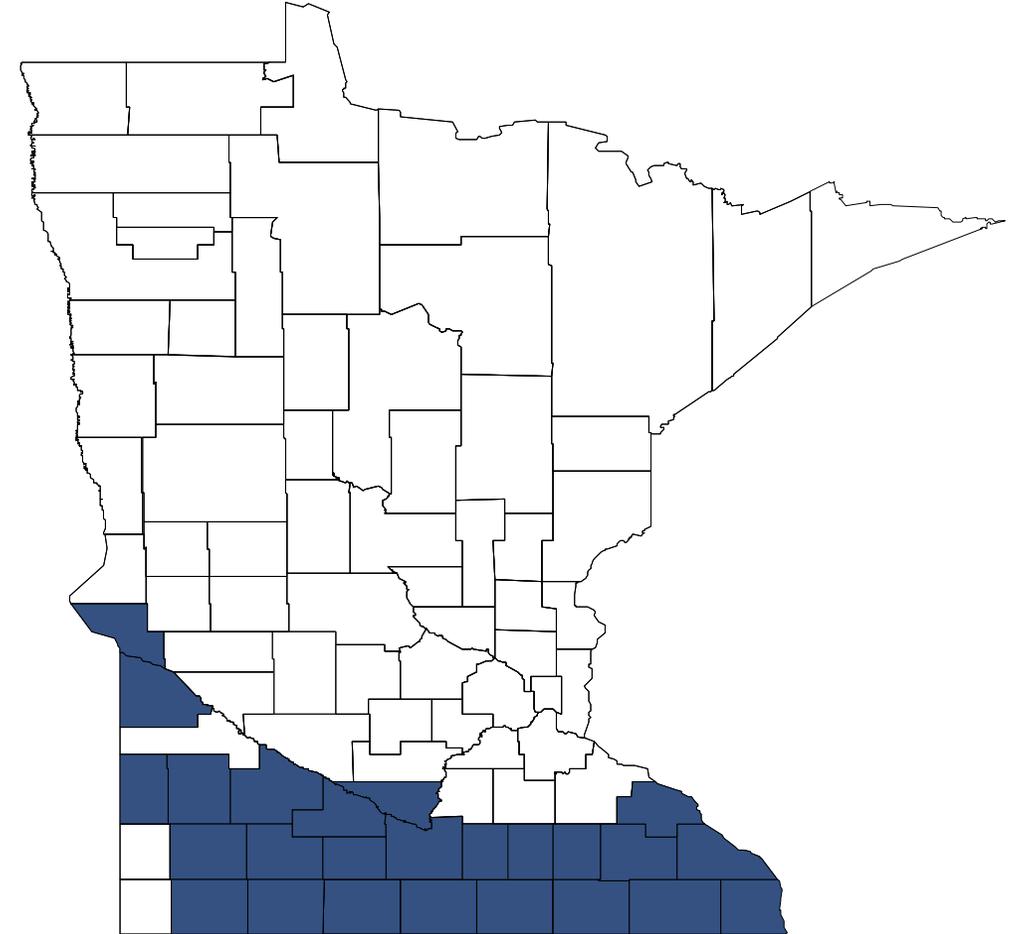
*Only available in MN.

Medica Advantage Solution

Medica Advantage Solution

Southern Minnesota

- Bundled medical, hospital and prescription drug coverage
- Two Medicare Advantage plan options available in Southern Minnesota
 - 2 PPO plans
- **Residents of:** Big Stone, Blue Earth, Brown, Cottonwood, Dodge, Faribault, Fillmore, Freeborn, Houston, Jackson, Lac Qui Parle, Lincoln, Lyon, Martin, Mower, Murray, Nicollet, Nobles, Olmsted, Redwood, Steele, Wabasha, Waseca, Watonwan and Winona counties



Medica Advantage Solution | Southern Minnesota

| | H8889-008 (PPO) | H8889-004 (PPO) |
|--------------------------------------|-----------------------------|----------------------------|
| | In-Network | In-Network |
| Monthly Premium | \$39 | \$125 |
| Medical Deductible | \$0 | \$0 |
| Maximum Out-of-Pocket | \$5,900 | \$4,900 |
| MEDICAL BENEFIT ▼ | YOU PAY | |
| Preventive Services | \$0 | \$0 |
| Annual Physical Exam | \$0 | \$0 |
| Primary Care | \$0 | \$0 |
| Specialist Visit | \$45 | \$30 |
| Urgent Care | \$30-40 | \$0-30 |
| Chiropractic | \$20 | \$20 |
| Eye Exam – Routine Annual | \$0 | \$0 |
| Hearing Exam – Routine Annual† | \$0 | \$0 |
| X-Ray / Radiology / Diagnostic Tests | 20%, up to \$150/day | 15%, up to \$75/day |

† When using an EPIC® provider

| | H8889-008 (PPO) | H8889-004 (PPO) |
|----------------------------|--|--|
| | In-Network | In-Network |
| Medical Benefit ▼ | YOU PAY | |
| Diabetes Supplies | 0*-20% | 0*-20% |
| Durable Medical Equipment | 20% | 20% |
| Part B Drugs | 20% | 20% |
| Outpatient Surgery | \$325 | \$250 |
| Ambulance – Ground | \$265 | \$265 |
| Emergency Room – U.S. | \$90 | \$90 |
| Emergency Room – Worldwide | 20% | 20% |
| Inpatient Hospital | Days 1-5: \$370/day Days 6-90: \$0 | \$225 per stay |
| Skilled Nursing Facility | Days 1-20: \$0 Days 21-100: \$184/day | Days 1-20: \$0 Days 21-100: \$184/day |

*\$0 when using preferred manufacturers (LifeScan and Roche)

Medica Advantage Solution | Part D Coverage



Highlights of Benefit Structure

- 5-Tier formulary with more than 3,400 prescription drugs
- Tier 1 drugs:
 - Deductible does not apply for all plans
 - **\$0** copay at preferred pharmacies
 - \$0 copay for 3-month preferred mail order
- Tier 2 drugs:
 - Deductible does not apply for all plans
 - \$10 - \$14 copay at preferred pharmacies
 - \$20 - \$32 copay for 3-month preferred mail order



Large Nationwide Pharmacy Network

- **60,000+** pharmacies nationwide, including all major chains and thousands of independent pharmacies



Part D Prescription Drug Benefit Changes

Save Money When Using Preferred Pharmacies

Advantages to you

- Copay savings when using preferred pharmacies
- Save at least \$6 and up to \$15 per copay, per prescription on Tier 1 & 2 drugs
- Includes Walgreens, Walmart, Cub, Costco, Sam's Club, Hy-Vee, Allina Pharmacy, Fairview Pharmacy, HCMC Pharmacy, Essentia Pharmacy, Mayo Clinic Pharmacy, and other independent pharmacies (25,000 nationwide)



Medica Advantage Solution | Part D Coverage

Save When Using Convenient Mail Service

Mail Service Pharmacy

- For 3-month supplies through preferred mail order vendor:
 - Pay \$0 for Tier 1 drugs
 - Pay \$0 for Tier 2 drugs for many plans
 - Get \$10 off the preferred retail copay on Tier 3 drugs
- Your Part D deductible does not apply to Tier 1 drugs and Tier 2 drugs for many plans
- Order refills online anytime, anywhere
- Set up handy automatic refills for most maintenance medications
- Real-time order tracking and typically receive in 3-5 days



Medicare Advantage Solution | Part D Coverage

Save with the Part D Shared Savings Program



Insulin savings

- Pay \$35 copay for a 1-month supply of select insulins
- Pay \$105 copay for a 3-month supply through mail order of select insulins
- Same copay at Preferred and Standard Pharmacy locations
- Your Part D deductible does not apply
- Available through deductible, initial coverage and gap coverage stages

Medica Advantage Solution | Part D Coverage | Southern Minnesota

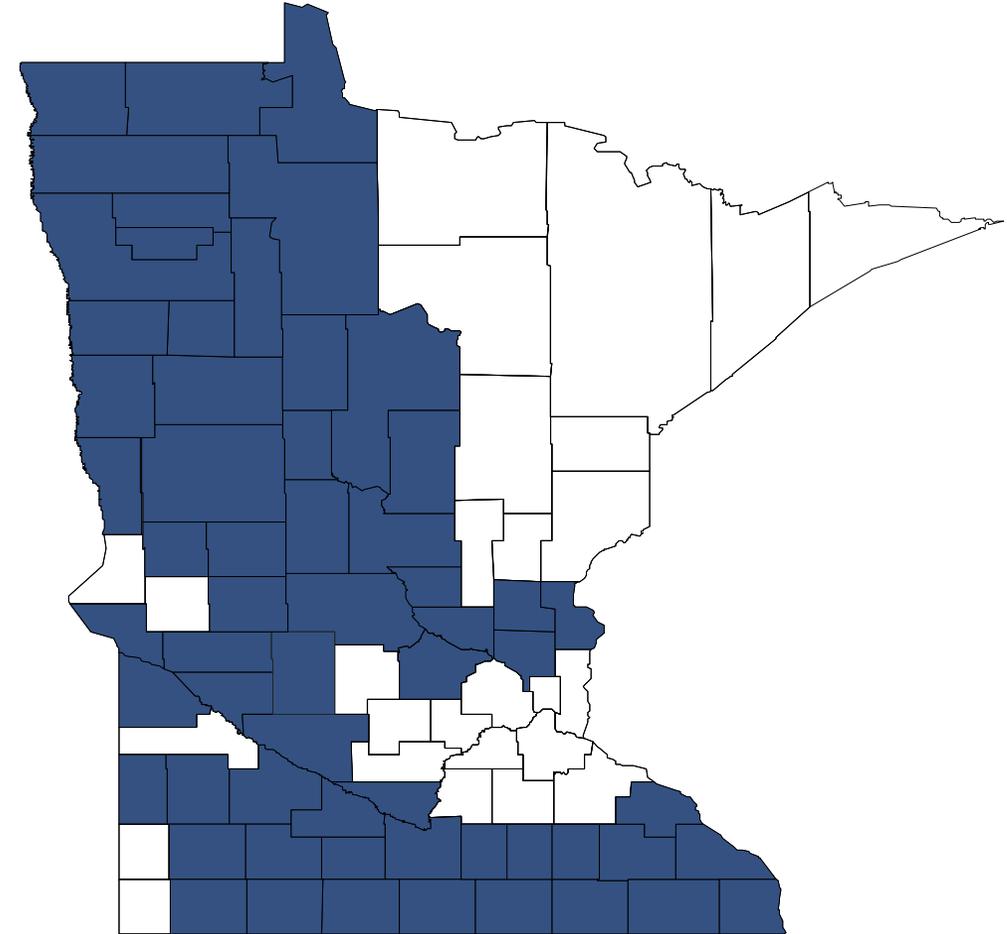
| | H8889-008 (PPO) | | H8889-004 (PPO) | |
|---|--|-------------------|----------------------------------|-------------------|
| Part D Deductible [†] | \$395 Tiers 3-5 \$0 Tiers 1-2 | | \$295 Tiers 3-5 \$0 Tiers 1-2 | |
| YOU PAY ▼ (30-day Retail) | | | | |
| Level One: Initial Coverage (Shared drug costs up to \$4,430) | | | | |
| | Preferred Pharmacy | Standard Pharmacy | Preferred Pharmacy | Standard Pharmacy |
| Tier 1 (Deductible does not apply) Preferred Generic | \$0 | \$15 | \$0 | \$10 |
| Tier 2 (Deductible does not apply) Generic | \$14 | \$20 | \$10 | \$20 |
| Tier 3 Preferred Brand | \$47 | \$47 | \$47 | \$47 |
| Tier 4 Non-Preferred | 50% | 50% | 50% | 50% |
| Tier 5 Specialty Drugs | 26% | 26% | 28% | 28% |
| Level Two: Coverage Gap “Donut Hole” (Member-only drug costs up to \$7,050) | | | | |
| | Generic and Covered Brand at 25% for all plan options | | | |
| Level Three: Catastrophic Coverage (Shared drug costs \$7,050 and up) | | | | |
| | Generic at \$3.70 or 5%* and Other Drugs \$9.20 or 5%* | | | |

*Whichever is greater

Medica Advantage Solution

Minnesota

- Medical plan only*
- One Medicare Advantage plan option available in the Minnesota service area
 - 1 PPO plan
- **Residents of:** Anoka, Becker, Beltrami, Benton, Big Stone, Blue Earth, Brown, Carver, Cass, Chippewa, Chisago, Clay, Clearwater, Cottonwood, Crow Wing, Dakota, Dodge, Douglas, Faribault, Fillmore, Freeborn, Grant, Hennepin, Houston, Hubbard, Isanti, Jackson, Kandiyohi, Kittson, Lac Qui Parle, Lake of the Woods, Lincoln, Lyon, Mahnomen, Marshall, Martin, Morrison, Mower, Murray, Nicollet, Nobles, Norman, Olmsted, Otter Tail, Pennington, Polk, Pope, Ramsey, Red Lake, Redwood, Renville, Roseau, Scott, Sherburne, Stearns, Steele, Swift, Todd, Wabasha, Wadena, Waseca, Washington, Watonwan, Wilkin, Winona, and Wright counties



*Part D not included in this plan

Medica Advantage Solution | Minnesota‡

| | H8889-009 (PPO) |
|--------------------------------------|----------------------|
| | In-Network |
| Monthly Premium | \$0 |
| Medical Deductible | \$0 |
| Maximum Out-of-Pocket | \$5,500 |
| MEDICAL BENEFIT ▼ | YOU PAY |
| Preventive Services | \$0 |
| Annual Physical Exam | \$0 |
| Primary Care | \$0 |
| Specialist Visit | \$30 |
| Urgent Care | \$0-45 |
| Chiropractic | \$20 |
| Eye Exam – Routine Annual | \$0 |
| Hearing Exam – Routine Annual† | \$0 |
| X-Ray / Radiology / Diagnostic Tests | 20%, up to \$150/day |

‡Part D not included in this plan

† When using an EPIC® provider

| | H8889-009 (PPO) |
|----------------------------|--|
| | In-Network |
| Medical Benefit ▼ | YOU PAY |
| Diabetes Supplies | 0*-20% |
| Durable Medical Equipment | 20% |
| Part B Drugs | 20% |
| Outpatient Surgery | \$250 |
| Ambulance – Ground | \$265 |
| Emergency Room – U.S. | \$90 |
| Emergency Room – Worldwide | 20% |
| Inpatient Hospital | Days 1-6: \$195/day Days 7-90: \$0 |
| Skilled Nursing Facility | Days 1-20: \$0 Days 21-100: \$184/day |

*\$0 when using preferred manufacturers (LifeScan and Roche)

MA Only (PPO) Plan Details

New MA-only plan in 66 counties in Minnesota

- Includes Part B premium reduction benefit of \$25.00 per month
- Social Security Administration is responsible for processing the Part B Premium reduction

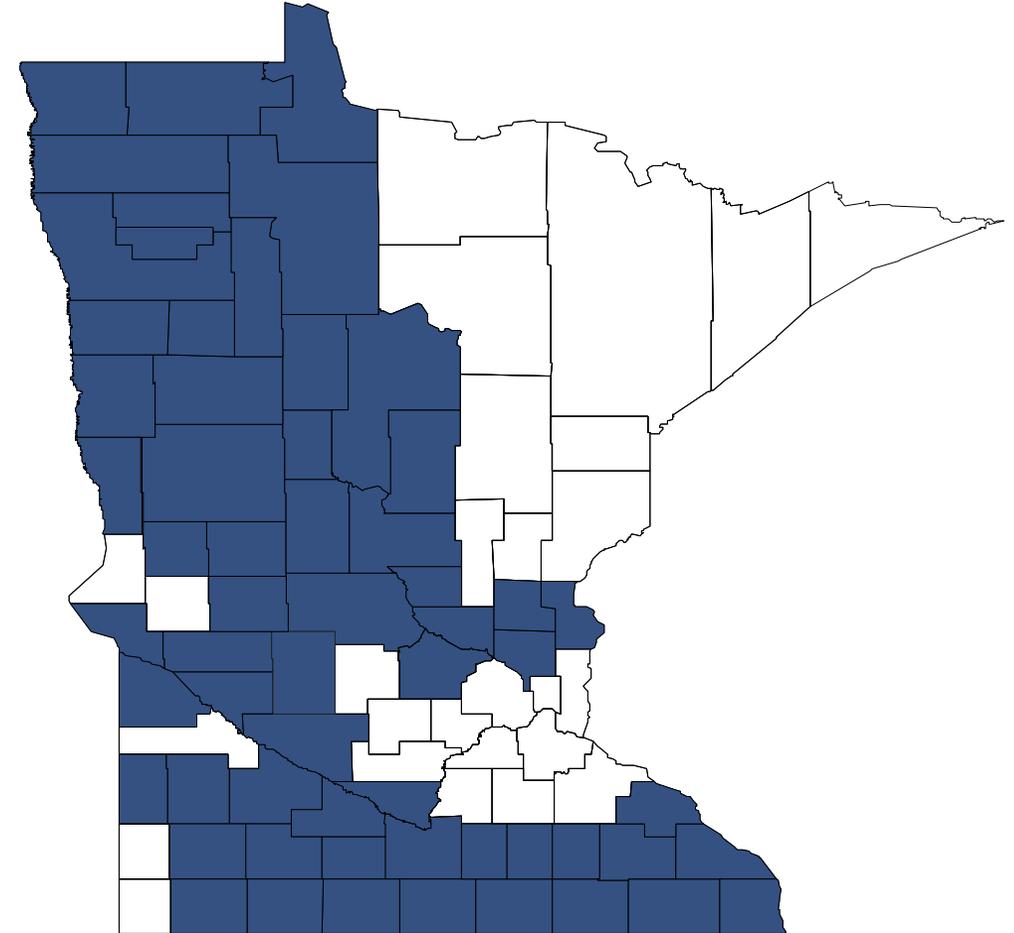
Enrollment Periods to Enroll in MA-only and standalone Part D

- Initial Enrollment Period
- General Enrollment Period
- Annual Enrollment Period

Special Enrollment Period

Follows Medicare Special Enrollment Periods including, but not limited to:

- Leaving an employer group health plan
- Change in residence
- Dual-eligible individuals
- Non-renewing plans or plan terminations



Advantage Solution Network

Medica Advantage Solution has an expansive provider and facility network, with several major health care systems in-network.

Effective 1/1/2022, Mayo Clinic is joining Medica's large provider and facility network, as an in-network provider, for all Minnesota Advantage Solution plans.



HealthPartners®
Park Nicollet®



Essentia Health

Medica Advantage Solution

24/7 Online convenience

\$0 eVisits through **virtuwell**®

- 24/7 access to quick, convenient online care via computer or mobile device
- Over 50 common conditions treated
- Diagnosis, treatment plan and prescription (if needed) by a certified nurse practitioner in less than 30 minutes
- Simply go to **virtuwell.com** and live chat with a nurse or doctor
- Services, such as primary, specialist, mental health, may also be available via telehealth



Medica Advantage Solution | Extra Value Benefits



Dental Reimbursement

Annual reimbursement for dental services (preventive and restorative care) provided by any licensed dentist.

- **H6154-001 (HMO-POS):** up to \$400 per year
- **H6154-002 (HMO-POS):** up to **\$250** per year
- **H8889-001 (PPO):** up to **\$750** per year
- **H8889-002 (PPO):** up to **\$750** per year
- **H8889-003 (PPO):** up to \$750 per year
- **H8889-004 (PPO):** up to \$400 per year
- **H8889-005 (PPO):** up to \$500 per year
- **H8889-008 (PPO):** up to \$300 per year
- **H8889-009 (PPO):** up to \$750 per year

Over-the-Counter (OTC) Savings

Quarterly allowance that can be used toward the purchase of eligible over-the-counter health and wellness products in catalog.

- **H6154 (HMO-POS):** up to **\$40** per quarter
- **H8889 (PPO):** up to \$50 per quarter
 - Except H8889-008: up to \$40 per quarter

Medica Advantage Solution | Extra Value Benefits



Eyewear Reimbursement

Receive an annual reimbursement for prescription eyewear. Reimbursement amount varies by plan.

- **H6154-001 (HMO-POS):** up to \$100 per year
- **H6154-002 (HMO-POS):** up to **\$100** per year
- **H8889-001 (PPO):** up to **\$200** per year
- **H8889-002 (PPO):** up to **\$150** per year
- **H8889-003 (PPO):** up to **\$200** per year
- **H8889-004 (PPO):** up to \$100 per year
- **H8889-005 (PPO):** up to \$100 per year
- **H8889-008 (PPO):** up to \$100 per year
- **H8889-009 (PPO):** up to \$150 per year

EPIC® Hearing Program

- \$0 copay for routine hearing exam from an EPIC Hearing provider
- Low copays on hearing aids from EPIC Hearing
 - \$549 for the Basic model
 - \$799 for the Reserve model
- Up to 3 visits from an EPIC Hearing provider within the first year of hearing aid purchase to help with fitting and adjustments
 - \$50 copay for the Basic model
 - \$0 copay for the Reserve model

Medica Advantage Solution | Healthy Savings Program*



**HEALTHY
SAVINGS®**

**Cub
FOODS®**


COBORN'S

HyVee®

Walmart 

Savings on Fresh Fruits & Vegetables

- Members with certain health conditions may have access to these benefits (**medical criteria/conditions apply*).
- Up to 80% of our members qualify.
- With this program, members save 50% on fresh fruits and vegetables, up to \$65 per quarter at participating retail grocers.

At Checkout, Use Your Card or Show The App

- Members will receive a Healthy Savings card in the mail if they qualify for the program. Then, members simply scan their card at checkout.
- Or, members can download the Healthy Savings mobile app, and use mobile barcode at checkout.

Where Can Member's Use the Healthy Savings Card?

- Large network of retailers includes Cub Foods, Coborn's, Hy-Vee, Walmart, and more.

New Fitness Vendor **One Pass™**

One Pass is a next generation fitness and wellness-based solution, which incorporates physical, digital, mental, and social well-being personalized tools.*



Fitness Networks

Over 20,000 core and premium locations including gyms and boutique studios



Digital Solutions

Over 20,000 on-demand and live virtual fitness classes including an AI workout builder



Social Activities

Nearly 20,000 free events and classes for members



Brain Training

A personalized program of exercising the brain to improve aspects of cognition including memory, attention, focus, and brain speed.



Home Kits

Fitness kits designed for members who are unable to access a gym location

***Available on all Medica Advantage plans**

How to Sell Medica

Medica provides multiple different tools to support you selling electronically via the Broker Portal.

Compare, Quote and Enroll tool allows brokers to:

- **Compare** plans for current members in your book of business
- **Compare** plans for prospective members
- Print, email, text, or upload Scope of Appointment
- **Quote** plans available to the prospect
- Email **quote**, with plan documents to prospect
- **Enroll** prospect electronically

7 plans available in [55305](#)

Medical and Prescription Drug Plans (4 plans) | Medical-Only Plans (0 plans) | Prescription Drug Plans (0 plans) | Medicare Supplement Plans (3 plans)

Plans with combined medical and Part D drug benefits give you the convenience of having all your coverage in one plan.

Sort: Total Estimated Annual Cost

Filters [Clear all](#)

Plan subtypes

- HMOPOS
- PPO

Preferences [Add preferences](#)

Enter preferences to estimate your annual cost.

- [Get Started](#)
- [Health](#)
- [Prescriptions](#)
- [Pharmacy](#)

Medica Advantage Solution H6154-001 Add to compare

★★★★★ [Star rating](#)

| | | |
|--------------------|------------------------------|-----------------|
| Medical Deductible | Maximum Annual Out Of Pocket | Monthly premium |
| \$0 | \$7,550 | \$0.00 |

[Plan details](#) [Add to cart](#) [Add to quote](#)

Medica Advantage Solution H8889-005 Add to compare

★★★★★ [Star rating](#)

| | | |
|--------------------|------------------------------|-----------------|
| Medical Deductible | Maximum Annual Out Of Pocket | Monthly premium |
| \$0 | \$7,550 | \$49.00 |

[Plan details](#) [Add to cart](#) [Add to quote](#)

How to Sell Medica

Upload Medicare enrollment documents tool allows brokers to:

- Upload Medicare enrollment documents in different file types
- Upload up to 15 files at a time
- Upon submission an email confirming receipt is sent
- Uploading documents negates the need to mail or fax the documents to Medica

Can't submit electronically?

Medica will accept enrollment documents via fax or mail

Upload Medicare Enrollment Documents

Please enter your information below. Attach the enrollment document(s) you would like to securely submit to Medica's enrollment department. Upon submission you will receive an e-mail confirming receipt.

Note: Please retain the original document(s) and the receipt page for your records. You do not need to mail or fax these documents to us.

Broker first name

Broker last name

Broker email address

Verify broker email address

Member first name

Member last name

Type of upload
- Select One -

This enrollment application is for which Medicare product?
- Select one -

Enrollment document(s)
 No file chosen
[Add another file](#)

File Info

File Types

- .bmp
- .gif
- .jpg
- .jpeg
- .pdf
- .png
- .tif
- .tiff

File Count

You can attach a maximum of 15 files.

File Size Max

- 15 MB (each document)
- 28 MB (all files combined)

Need Help?

Call the Broker Service Center:
1-866-752-0945



Medica Operational Updates

STRATEGIC PRIORITIES

Broker Experience Team

Our dedicated broker experience team provides knowledgeable, trusted, relationship-driven service to support your agency's growth and retention goals. Our team can help you with any broker-related inquiries, including marketing, enrollment, billing, benefits, commissions and more.



Key values

-  Dedicated team
-  Knowledgeable + trusted
-  Results-driven
-  Issue resolution
-  Relationship-driven



Action plan

-  Broker Client View
-  Self-service tools
-  Ready-to-sell dashboard
-  Broker contracting enhancements
-  Personalized broker touchpoints



Have a question?

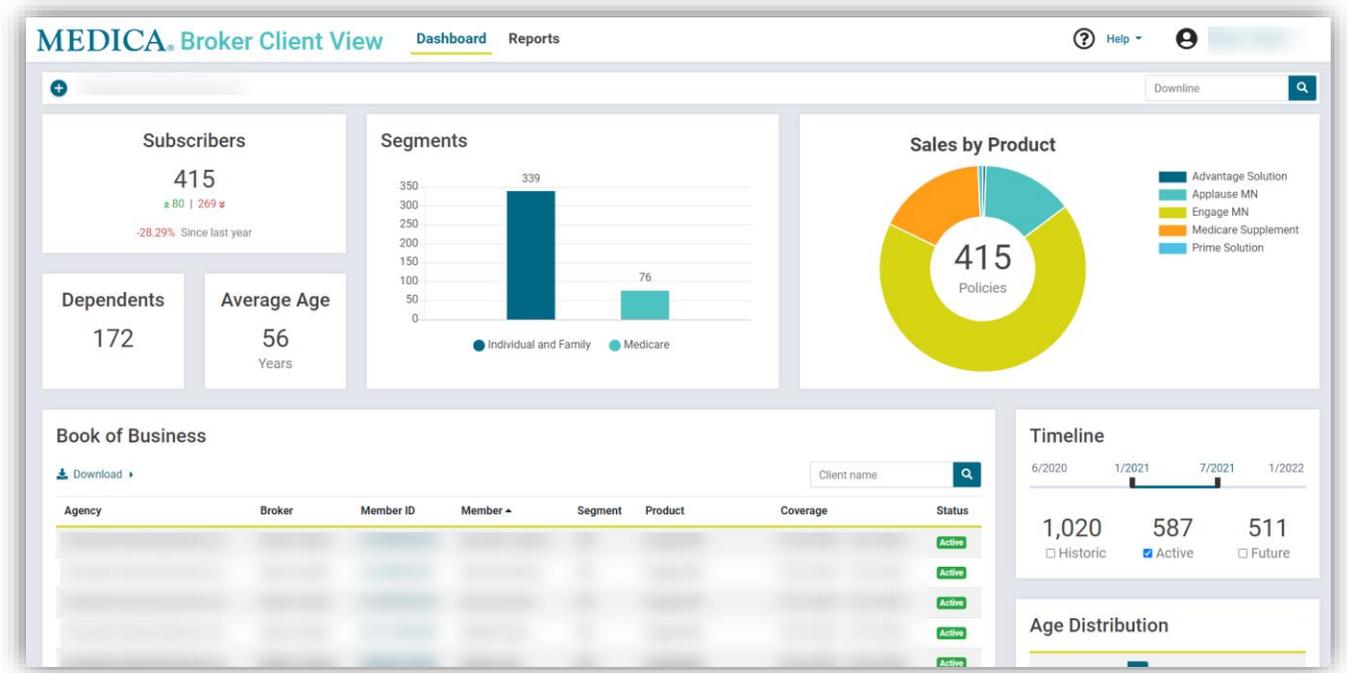
Email us at
BrokerExperience@Medica.com
Call 1 (866) 752-0945



Visit the **Broker Portal** for
self-service tools and
resources www.medica.com

Broker Client View

- Broker Client View (BCV) is Medica's book of business dashboard.
- BCV features intuitive navigation in a secure environment with powerful data driven functionality.
- This self-service tool offers opportunities for brokers to support their Medica members and to grow and retain clients.



Medica Broker Manual

- Newly updated for 2021
- Coming soon on the Broker Portal
- Topics:
 - About Medica
 - Broker Contracting
 - Commissions
 - Broker Tools
 - Training and Certification
 - Compliance and Sales Oversight
 - Broker Experience

The screenshot shows the Medica Broker Portal homepage. At the top right, there are links for "Manage your account" and "Log out". The Medica logo is prominently displayed in the center. Below the logo is a search bar with the text "Search our site" and a magnifying glass icon. A navigation menu includes "Shop Plans", "For Members", "For Employers", "For Brokers", and "For Providers". A teal banner with the text "Welcome Brokers" is positioned below the navigation. The main content area features a large image of two people in an office setting. Overlaid on this image is a white box with the text "Medicare Supplement Plans" and "New Medica Medicare Supplement plans available in Iowa, Nebraska, North Dakota and South Dakota." Below this text is a link that says "Enroll a client today >". At the bottom of the page, there are two columns of links. The left column is titled "Medicare Brokers" and includes links for "Compare, Quote and Enroll", "Broker Client View", "Medicare Enrollment Receipts", and "Training and Events". The right column is titled "Quick Links" and includes links for "Find a physician or facility", "Change Cost plan online", "Upload Medicare enrollment documents", "Access Medicare Supplement portal", and "Order ID card".

Navigating the Marketing Hub

The Marketing Hub is organized into categories by state.

You can find the following materials and resources:

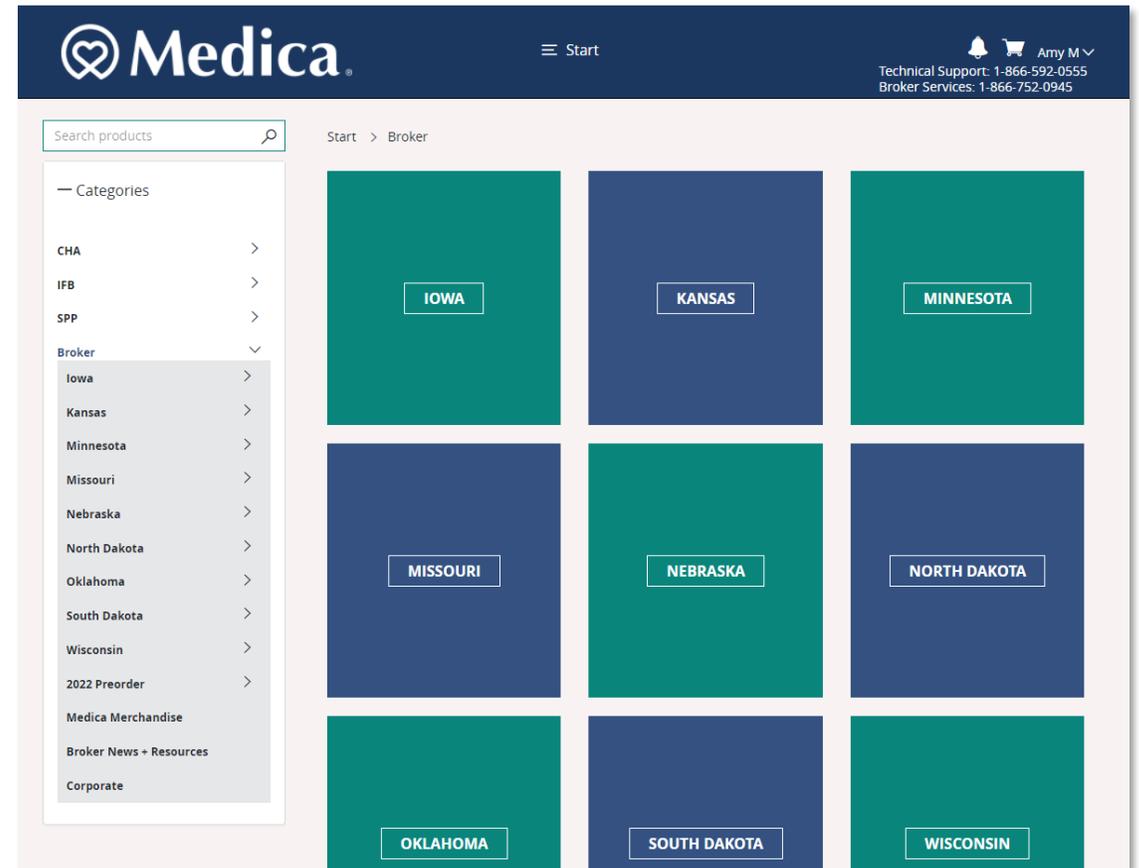
Sales Materials — Order various materials, such as sales kits, brochures and forms

Customizable Materials — Order customized ads, such as postcards, fliers, digital ads and more

Medica Merchandise — Offers discounted and free Medica-branded merchandise

Broker News + Resources — Refer to past updates and alerts in the Broker Update + Alert Archive.

You can view the materials in each state and product by either clicking on the state square or using the menu on the left hand side.





Q & A



THANK YOU