



2016 MEDICA

Prime Solution[®] (Cost)

Basic, Thrive & Enhanced

MEDICA[®]

We focus on all the right things. So you can, too.

It's an exciting time of life. You're prepared to make the most of it. And so are we. We know you want affordability and plan options that meet your unique needs. We also know it is important for you to choose your doctor.

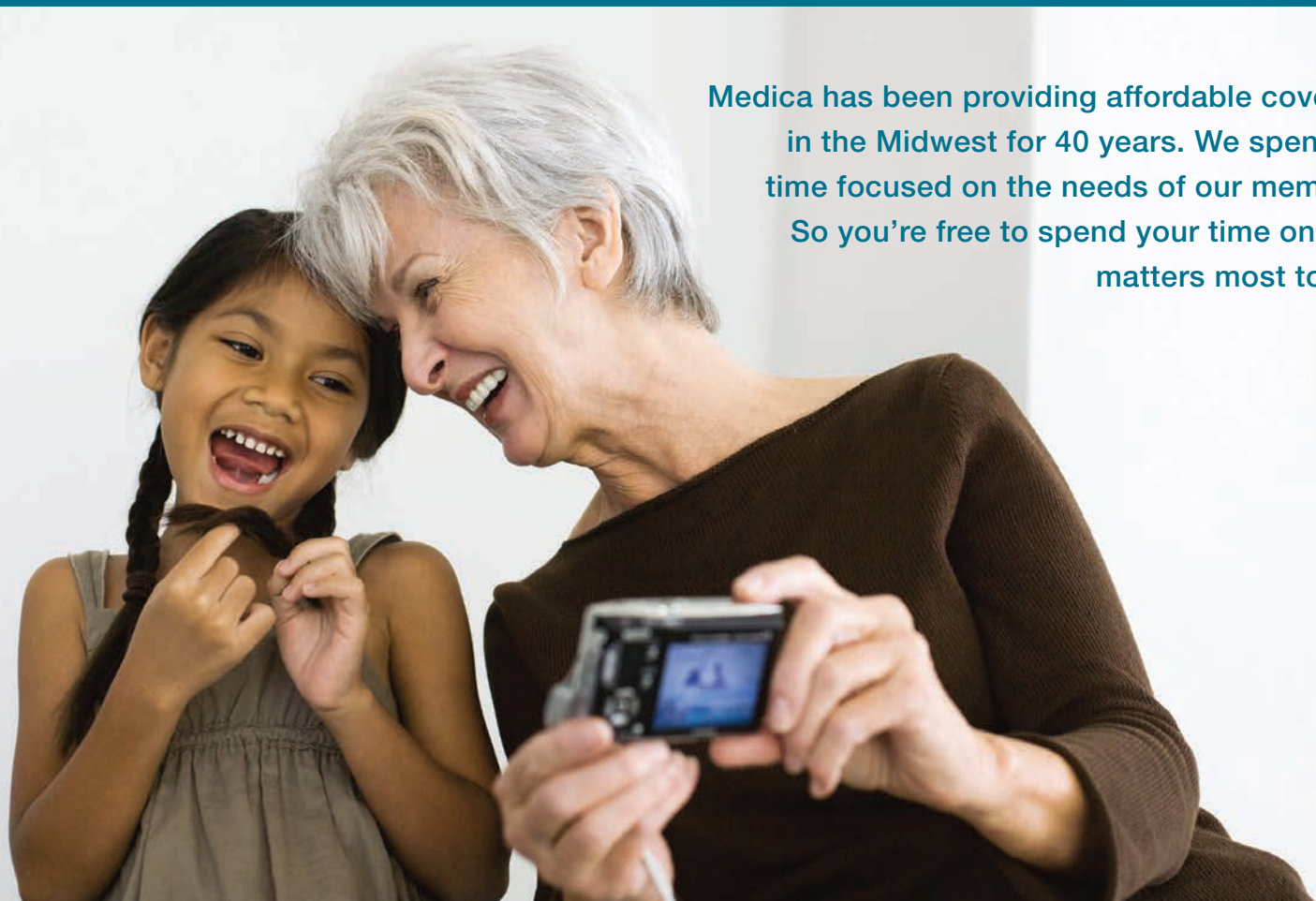
We've got just what you need.

- **Affordability** — Prime Solution has a history of stable, affordable premiums. In fact, the premium for the Prime Solution Basic plan is lower today than it was in 2001.
- **Flexibility** — Prime Solution has a range of medical and Part D options to fit your needs.
- **Choice** — Medica is committed to maintaining a large network of doctors and hospitals.

We specialize in Medicare, so we know how to serve you best.

- Prime Solution received one of the highest ratings from the Centers for Medicare & Medicaid Services — 4.5 stars (out of 5).¹
- Our members give Medica Prime Solution a 9-out-of-10 rating on average for overall plan satisfaction.²

Medica has been providing affordable coverage in the Midwest for 40 years. We spend our time focused on the needs of our members. So you're free to spend your time on what matters most to you.



The right plan that fits your changing needs.

Medica Prime Solution is designed to adapt to your needs as they change from year to year. Each of our Prime Solution medical plans can be combined with an optional Part D rider so you can tailor your coverage to meet your individual needs.

Prime Solution includes even more options to meet your needs with the 2016 introduction of Thrive — a \$0 copay plan* with a medical premium of only \$95.

Plus, Prime Solution offers plan options with the extra benefits you value:

- Nationwide Travel and "Snowbird" Coverage
- Vision and Hearing Benefits**
- Optional Dental**
- Fitness Center Membership**

We're here to answer your questions and help you choose the right plan for you.

- **Talk to one of our local Medicare specialists** — call toll-free **1-800-906-5432**. TTY: 711.
- **Attend a Medicare Workshop** — visit medica.com/MedicareWorkshops to locate one near you.

To see if you're eligible to enroll in Medica Prime Solution, go to page 16.

*For most eligible services.

**Not available with Thrive.

¹ Medicare evaluates plans based on a 5-Star rating system. Star Ratings are calculated each year and may change from one year to the next.

² Source: January 2014 – March 2015 Medica proprietary surveys of 1,642 Prime Solution members. (Study/statistical data not endorsed by CMS/Medicare. The award was not given by Medicare. View the plan's official CMS Star Rating at medicare.gov.)

EARNING
MEMBERS' TRUST
FOR **40**
YEARS

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Need help understanding Medicare? See pages 17–19.

Medical Plan Comparison

Premium amounts below are for medical coverage only. Each of these Prime Solution plans can be combined with an optional Part D rider (see pages 5–7). (You must continue to pay your Medicare Part B premium.)

	2015 Original Medicare YOU PAY	Prime Solution Plans		
		Basic YOU PAY	Thrive YOU PAY	Enhanced YOU PAY
Monthly Premium	\$104.90	\$74	\$95	\$142
Benefits ▼ (In-Network)				
Preventive Care	No Cost	No Cost	No Cost	No Cost
Primary Care/Convenience Care	20%*	\$0	\$0	\$0
Specialist Office Visit	20%*	\$10	\$0	\$0
Urgent Care	20%*	\$0-\$10	\$0	\$0
Chiropractic**	20%*	\$10	\$0	\$0
Routine Eye Exam	100%	\$0	100%	\$0
Routine Hearing Exam	100%	\$0	100%	\$0
Diagnostic Procedures & Tests	20%*	\$10	\$0	\$0
X-Ray/Radiology	20%*	\$10	\$0	\$0
Lab Services	\$0	\$0	\$0	\$0
Durable Medical Equipment	20%*	20%	\$0	\$0
Diabetes Testing Supplies	20%*	20%	\$0	\$0
Ambulance	20%*	\$25	\$0	\$0
Outpatient Hospital	20%*	\$50	\$0	\$0
Worldwide Emergency Room	20%*	\$50	\$0	\$0
Inpatient Hospital				
Days 1 – 60	\$1,260 total	\$100 per stay for unlimited days	\$0 per stay for unlimited days	\$0 per stay for unlimited days
Days 61 – 90	\$315/day			
Days 91 – 150	\$630/day			
Days 151+	100%			
Skilled Nursing Facility				
Days 1 – 20	\$0	\$0	\$0	\$0
Days 21 – 100	\$157.50/day	\$0/day	\$0/day	\$0/day
Days 101+	100%	100%	100%	100%
Maximum Out-Of-Pocket	NO LIMIT	\$3,000	\$3,000	\$3,000
Silver&Fit		Included	Not Included	Included
Eyewear & Hearing Aid Allowances		Included	Not Included	Included

* After you pay your annual Part B deductible.

** Medicare-covered visit for manual manipulation of the spine to correct subluxation (a displacement or misalignment of a joint or body part).

This is not a complete list of benefits. For detailed coverage information, see the Summary of Benefits.

Prime Solution **Basic** Part D Options

Your Prime Solution Basic medical plan can be combined with one of the Part D prescription riders below. Premiums include medical and Part D coverage. (You must continue to pay your Medicare Part B premium.)

	Basic with Rx	Basic with Rx 2	
Basic Medical & Part D Combined Premium	\$108.60	\$157.70	
Part D Annual Deductible	\$316	No Deductible	
YOU PAY (31-Day Retail)			
Level One: Shared drug costs \$0 to \$3,310	Tier 1 Preferred Generic	up to \$5	up to \$8
	Tier 2 Generic	up to \$11	up to \$15
	Tier 3 Preferred Brand	up to \$47	up to \$43
	Tier 4 Non-Preferred Brand	up to \$93	up to \$85
	Tier 5 Specialty	25%	33%
Level Two: Member-only drug costs up to \$4,850	Generic Drug Costs	58%	58%
	Brand Drug Costs	45%*	45%*
Level Three: Shared drug costs \$4,850 and up	Generic Drug Costs	\$2.95 or 5%**	\$2.95 or 5%**
	Other Drug Costs	\$7.40 or 5%**	\$7.40 or 5%**

* See page 19 for information about the manufacturer-paid discount on covered brand drugs available in the Level 2 Coverage Gap.

** Whichever is greater.

All of the Prime Solution Part D riders include a large covered drug list and convenient access to prescriptions through retail or mail order.

- An extensive retail pharmacy network with more than 65,000 pharmacies nationwide
- Pay only two copays for three-month supplies of eligible drugs via mail order (through Fairview Mail Service Pharmacy)

To see if our covered drug list (formulary) includes the drugs you take, go to medica.com/medicare or call 1-800-906-5432. TTY: 711.

Prime Solution **Thrive** Part D Option

You can add a Part D rider to your Prime Solution Thrive medical plan. Premium includes medical and Part D coverage. (You must continue to pay your Medicare Part B premium.)

			Thrive with Rx
Thrive Medical & Part D Combined Premium			\$135.60
Part D Annual Deductible			\$310
YOU PAY (31-Day Retail)			
Level One: Shared drug costs \$0 to \$3,310	Tier 1	Preferred Generic	up to \$4
	Tier 2	Generic	up to \$12
	Tier 3	Preferred Brand	up to \$47
	Tier 4	Non-Preferred Brand	up to \$93
	Tier 5	Specialty	25%
Level Two: Member-only drug costs up to \$4,850	Generic Drug Costs		58%
	Brand Drug Costs		45%*
Level Three: Shared drug costs \$4,850 and up	Generic Drug Costs		\$2.95 or 5%**
	Other Drug Costs		\$7.40 or 5%**

* See page 19 for information about the manufacturer-paid discount on covered brand drugs available in the Level 2 Coverage Gap.

** Whichever is greater.

Prime Solution **Enhanced** Part D Options

Your Prime Solution Enhanced medical plan can be combined with one of the Part D prescription riders below. Premiums include medical and Part D coverage. (You must continue to pay your Medicare Part B premium.)

			Enhanced with Rx	Enhanced with Rx 2
Enhanced Medical & Part D Combined Premium			\$196.40	\$229.00
Part D Annual Deductible			\$300	No Deductible
YOU PAY (31-Day Retail)				
Level One: Shared drug costs \$0 to \$3,310	Tier 1	Preferred Generic	up to \$5	up to \$10
	Tier 2	Generic	up to \$11	up to \$20
	Tier 3	Preferred Brand	up to \$47	up to \$35
	Tier 4	Non-Preferred Brand	up to \$93	up to \$85
	Tier 5	Specialty	26%	33%
Level Two: Member-only drug costs up to \$4,850	Generic Drug Costs		58%	58%
	Brand Drug Costs		45%*	45%*
Level Three: Shared drug costs \$4,850 and up	Generic Drug Costs		\$2.95 or 5%**	\$2.95 or 5%**
	Other Drug Costs		\$7.40 or 5%**	\$7.40 or 5%**

* See page 19 for information about the manufacturer-paid discount on covered brand drugs available in the Level 2 Coverage Gap.

** Whichever is greater.

Need help understanding how Part D works?

Want information on how to get help paying your Part D prescription drug costs?

See page 19.

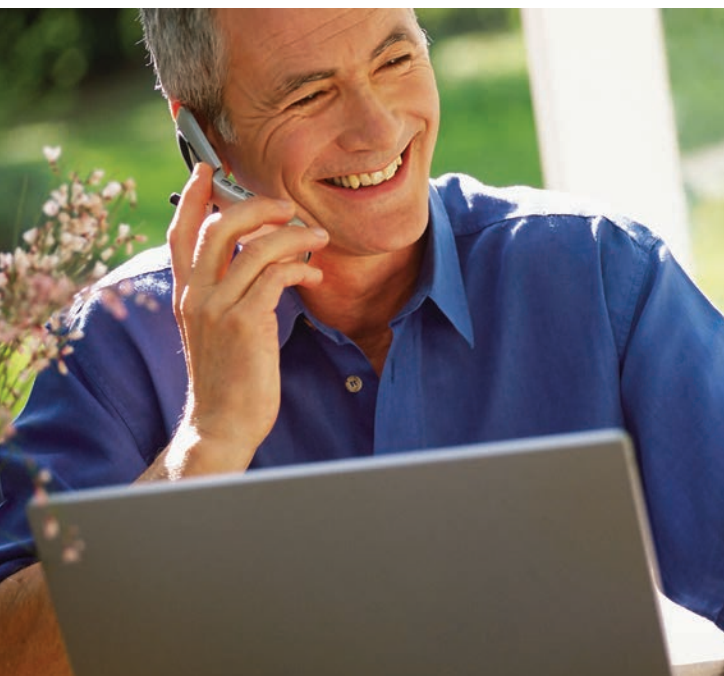


Extra Benefits

HealthAdvocate™

NurseLine™ and much more!

Health Advocate helps you navigate the often complex health care system in a number of unique ways.



- **Address health care concerns** — Your personal Health Advocate will do the legwork to get you to the right providers and the right answers, including arranging appointments with hard-to-reach specialists, finding doctors taking new patients, explaining your doctor's instructions, and much more.
- **Consult with a nurse** — Speak to a registered nurse 24 hours a day, 7 days a week. Receive guidance on appropriate treatment options for your situation.
- **Resolve coverage questions** — Get answers to claims and benefit questions.
- **Locate care facilities and support** — Your personal Health Advocate can help you research resources like adult daycare, assisted living, long-term care and in-home care.

See what Prime Solution members are saying about Health Advocate...

Greg

“It was nice because Health Advocate was kind of like a middle man for me and made it so I didn't have to make multiple calls. They emailed me the necessary paperwork I needed to submit so I could get reimbursed and they also told me how the forms should be filled out. I was impressed ...”

Margaret

“Health Advocate totally helped me. I was with my family in Myrtle Beach and I became quite ill and ... did not know where I could go. I was able to find a doctor nearby and be seen right away. I was able to avoid the ER trip and not worry my family. It was a godsend!”

Karen

“I contacted Health Advocate because I needed help finding several things. They were able to email me the information that I needed in a timely manner. Making all those calls on my own would have taken up so much of my time. Finding Health Advocate made my day. What a nice, time-saving way to help me find clinics, doctors, and get all my questions answered with one easy call.”



Exercise & Healthy Aging Program

Available with Basic and Enhanced only.

The Silver&Fit® program is designed specifically for Medicare beneficiaries to help you improve your health through exercise.

There are two options available at no additional cost to you:

- **Membership at a participating facility.** You can choose from an extensive list of facilities, including participating Life Time “Gold” and “Bronze” clubs, YMCAs, Anytime Fitness, Snap Fitness, Curves and more. Visit SilverandFit.com to locate facilities near you.

OR

- **The Silver&Fit Home Exercise Program** for members who are unable to participate at a fitness facility or prefer to work out at home. Two fitness kits of your choice are sent to you each year. Choose from a number of popular kit titles, such as Cardio Strength, Pilates, Yoga, Walking and more.

Silver&Fit members also have access to Healthy Aging content online or via quarterly mailings of DVDs and booklets as well as a newsletter.



Eyewear and Hearing Aid Allowances

Available with Basic and Enhanced only.

Medica reimburses up to \$400 per year for hearing aids and evaluation/fittings. For prescription eyewear, Medica reimburses up to \$125 with the Enhanced plan and up to \$75 with the Basic plan each year.

Nationwide Travel & “Snowbird” Coverage

Available with all Prime Solution plans.

Take your coverage with you when you travel within the United States and enjoy access to your full in-network benefits for up to 9 consecutive months.



Medica SeniorDental®

If you enroll in Medica Prime Solution Basic or Enhanced, you can add dental coverage through our Medica SeniorDental plan.

- You may use any licensed dentist (no network)
- No waiting period
- Maximum annual dental benefit of \$1,000

	YOU PAY
Monthly Premium	\$60.80
Annual Deductible for Non-Preventive Services	\$50
Preventive Cleanings & Exams (2 per year)	\$0
Fillings	20%–50%
Gum Disease Treatment	50%
Root Canal Treatment	50%
Oral Surgery	50%
Bridges, Crowns, Dentures	50%



Frequently Asked Questions

1 Can I choose my doctors with your plan?

You can use any provider who is currently part of the extensive Medica Prime Solution network of doctors, specialists and hospitals. For a Provider Directory, visit medica.com/medicare or call **1-800-906-5432**. TTY: 711.

2 What if I go to a doctor not in the Medica Prime Solution network?

We may not pay for the services you receive outside of our network, but Medicare still pays its share of approved charges. You would be responsible for your Medicare Part B deductible and coinsurance payments. If you have activated your Extended Absence Option (see below), then services out-of-network are covered by your Prime Solution plan.

3 What if I travel or spend part of the year outside the plan's service area? Am I covered?

Our Extended Absence Option allows you to use your Medica Prime Solution benefits for up to nine consecutive months at a time when you are outside the service area and must receive medical care outside of our provider network.

4 Do you cover glasses and contacts?

Medica reimburses up to \$125 with the Enhanced plan and up to \$75 with the Basic plan for eyewear every year.

5 Do you cover hearing aids?

Our Basic and Enhanced plans provide up to \$400 for evaluation, fitting and hearing aids each year.

6 Does Medica Prime Solution include a fitness benefit?

For the Basic and Enhanced plans, you can choose between two Silver&Fit exercise options: (1) Membership at a participating fitness facility, or (2) Home exercise program – select two fitness kits each year.

7 Does Medica Prime Solution offer dental coverage?

Our optional Medica SeniorDental plan is available with Medica Prime Solution Basic or Enhanced for an additional premium. (See page 10 for more information.)

8 How can I get more information about Medica and the plans they offer?

Call Medica at **1-800-906-5432. TTY: 711.** Or visit us at medica.com/medicare.

9 Where can I get my prescriptions with your plan?

You can use any pharmacy that is currently part of the extensive Medica Prime Solution network. For a Pharmacy Directory, visit medica.com/medicare or call Medica at **1-800-906-5432. TTY: 711.**

10 What if I go to a pharmacy not in your network?

We may not pay for your prescriptions if you use a pharmacy that is not part of our network, except in certain cases. Call Medica for more information, **1-800-906-5432. TTY: 711.**

11 What prescription drugs are covered by Medica's Part D plan?

Covered drugs are listed on the plan formulary. You can check online to see if your drugs are covered at medica.com/medicare. To request a printed formulary (covered drug list), you can call Medica at **1-800-906-5432. TTY: 711.**



12 What do I pay for Part B drugs?

Part B drugs are covered under your medical plan. With Basic and Thrive, you pay 20% coinsurance for Medicare Part B-covered drugs; with Enhanced, you pay 0%. (If you have Basic, you have a \$0 copay for self-administered Erythropoietin.)

13 How are oncology drugs covered by the plan?

Oncology drugs are covered either under Part B or Part D (if you have the Part D rider).

- Part B drugs: with Basic and Thrive, you pay 20% coinsurance for Medicare Part B-covered drugs; with Enhanced, you pay 0%. If you have Basic, you have a \$0 copay for self-administered Erythropoietin.
- Part D drugs: see pages 5–7 for copay/coinsurance amounts.

14 What if a drug I take is not covered by the Medica covered drug list or has coverage restrictions?

As a Medica plan member, you can submit an exception request to have your drug covered or have coverage restrictions waived. Generally, Medica must make a decision within 72 hours of receiving your request, although you can request an expedited exception.

If a drug you take is removed from the Medica covered drug list, or if prior authorization, quantity limits and/or step therapy restrictions are added, Medica must notify you of the change at least 60 days before the change becomes effective, or when you request a refill of the drug.



How to Enroll in Prime Solution

Medica offers fast and easy enrollment over the phone. Just call **1-800-906-5432** and we will walk you through it. **TTY: 711.**

If you want to fill out an application, just follow the three steps below.

Step 1 Complete the enrollment application in full and sign & date

Choose your Medica Prime Solution medical plan option:

- **Basic** — a modest monthly premium with low copays and a fitness center membership
- **Thrive** — a slightly higher monthly premium with \$0 copays for most eligible services
- **Enhanced** — our most comprehensive plan with \$0 copays for most eligible services and a fitness center membership

Decide whether you want to add a Part D rider.

Step 2 Select any additional riders that you want

For optional dental coverage, check the SeniorDental box on the Prime Solution application or complete the Medica SeniorDental Enrollment Form.

Step 3 Submit your completed forms via mail, fax or web

Mail to: OR	Medica Medicare Solutions PO Box 6300 Eau Claire, WI 54702-9713
Fax to: OR	1-855-250-2166
Upload securely at:	medica.com/EnrollmentUpload

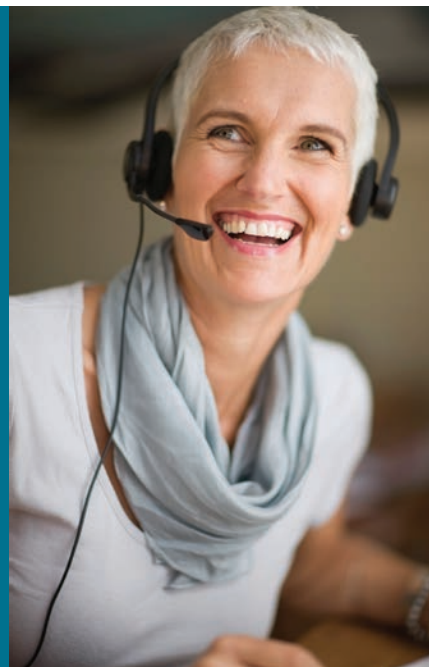
What to Expect After You Enroll

Once you have submitted your application, you can expect to receive the following communications from us:

- ✓ **Acknowledgement Letter**
Within about a week, you will receive a letter letting you know that your application has been received.
- ✓ **ID Card**
Within 1 – 2 weeks, you will receive your ID card. (NOTE: Your ID card is not included in your member packet — it is sent separately.)
- ✓ **Member Packet**
Within 2 weeks, you will receive your member packet, which will contain your Evidence of Coverage and other important materials that you will want to read and keep for future reference.
- ✓ **Verification Communication**
Medicare requires that we contact you to verify that you are familiar with the terms of your new plan.
- ✓ **Confirmation Letter**
This letter confirms Medicare's approval of your enrollment in Medica Prime Solution.

If you have questions at any point in the enrollment process — or want to make changes — please call Medica and one of our local Medicare specialists can answer your questions or resolve any issues.

Call toll-free 1-800-906-5432
TTY: 711



This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits, premiums and/or co-payments/co-insurance may change on January 1 of each year. The formulary, pharmacy network and/or provider network may change at any time. You will receive notice when necessary.

2016 Medica Prime Solution Enrollment Service Area

You are eligible to enroll in Medica Prime Solution Basic, Thrive or Enhanced, if your permanent residence is in one of the counties below and you are Medicare-eligible.

THRIVE

Minnesota Counties:
All counties

BASIC & ENHANCED

Minnesota Counties:
All counties

North Dakota Counties:

Adams, Barnes, Benson, Billings, Bowman, Burleigh, Cass, Cavalier, Dickey, Dunn, Eddy, Emmons, Foster, Grand Forks, Grant, Griggs, Hettinger, Kidder, LaMoure, Logan, McHenry, McIntosh, McLean, Mercer, Morton, Nelson, Oliver, Pembina, Pierce, Ramsey, Ransom, Richland, Rolette, Sargent, Sheridan, Sioux, Slope, Stark, Steele, Stutsman, Towner, Traill, Walsh, Ward, Wells, Williams

South Dakota Counties:

Aurora, Beadle, Bennett, Bon Homme, Brookings, Brown, Brule, Buffalo, Butte, Campbell, Charles Mix, Clark, Clay, Codington, Corson, Custer, Davison, Day, Deuel, Dewey, Douglas, Edmunds, Fall River, Faulk, Grant, Gregory, Haakon, Hamlin, Hand, Hanson, Harding, Hughes, Hutchinson, Jackson, Jerauld, Jones, Kingsbury, Lake, Lawrence, Lincoln, Lyman, Marshall, McCook, McPherson, Meade, Mellette, Miner, Minnehaha, Moody, Pennington, Perkins, Potter, Roberts, Sanborn, Shannon (Oglala Lakota), Spink, Stanley, Sully, Todd, Tripp, Turner, Union, Walworth, Yankton, Ziebach

Wisconsin Counties:

Ashland, Barron, Bayfield, Burnett, Chippewa, Douglas, Dunn, Eau Claire, Pierce, Polk, Sawyer, St. Croix, Washburn

Medicare Eligibility and Enrollment

Are you eligible for Medicare?

You are eligible for Medicare if at least one of the following applies to you: (1) You are 65 years old, (2) You are permanently disabled, (3) You have been diagnosed with end-stage renal disease (ESRD).

Turning 65

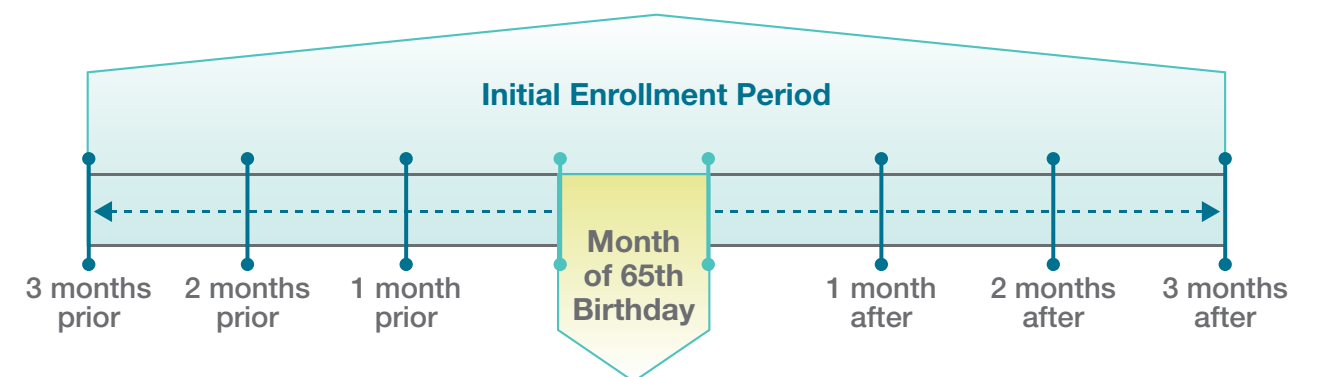
If you are receiving Social Security benefits when you turn 65, your Medicare card should arrive 3 months before your 65th birthday.

If you are not receiving Social Security benefits, then you will need to apply for Medicare through the Social Security Administration. You can go to www.ssa.gov, or visit your local Social Security office, or call **1-800-772-1213**, 7 a.m. to 7 p.m., Monday-Friday. TTY users can call **1-800-325-0778**.

Medicare Enrollment Periods

Initial Enrollment Period (IEP)

- The seven months in which you may initially enroll in a Medicare Prescription Drug (Part D) plan without penalty



Annual Election Period (AEP): October 15 – December 7

- Annual open enrollment period when you can make changes to your medical and Part D coverage for the new plan year (January 1 effective date)

Special Enrollment Period (SEP)

- Allows for special circumstances such as moving outside your current plan service area, leaving an employer group and more — see medicare.gov for detailed information

Medicare Overview

- Medicare provides basic, affordable health coverage for beneficiaries
- You can't be denied Medicare coverage due to pre-existing conditions and coverage can't be canceled if you get sick
- Medicare is administered by the Centers for Medicare & Medicaid Services (CMS)

Medicare is divided into four "Parts" — A, B, C and D

Part A Hospital Coverage

- Helps pay for things such as inpatient hospital stays, critical care, skilled nursing facilities, hospice care and some home health care
- There is no premium if you have worked a minimum of 10 years in Medicare-covered employment, and are eligible for Social Security benefits
- There are deductibles you must pay
- Private health plans like Medica Prime Solution offer insurance to add to the basic coverage Medicare provides

Part B Medical Coverage

- Helps pay for doctors' services, outpatient hospital care, physical and occupational therapy and home health care
- There are deductibles you must pay and a monthly Part B premium
- Your premium is deducted from your Social Security benefits
- Private health plans like Medica Prime Solution offer insurance to add to the basic coverage Medicare provides

Part C Medicare Advantage Plans

- Part C gives you the option to choose a Medicare Advantage (MA) plan in which you assign your Medicare Parts A and B benefits to a private health plan that administers your benefits on behalf of Medicare

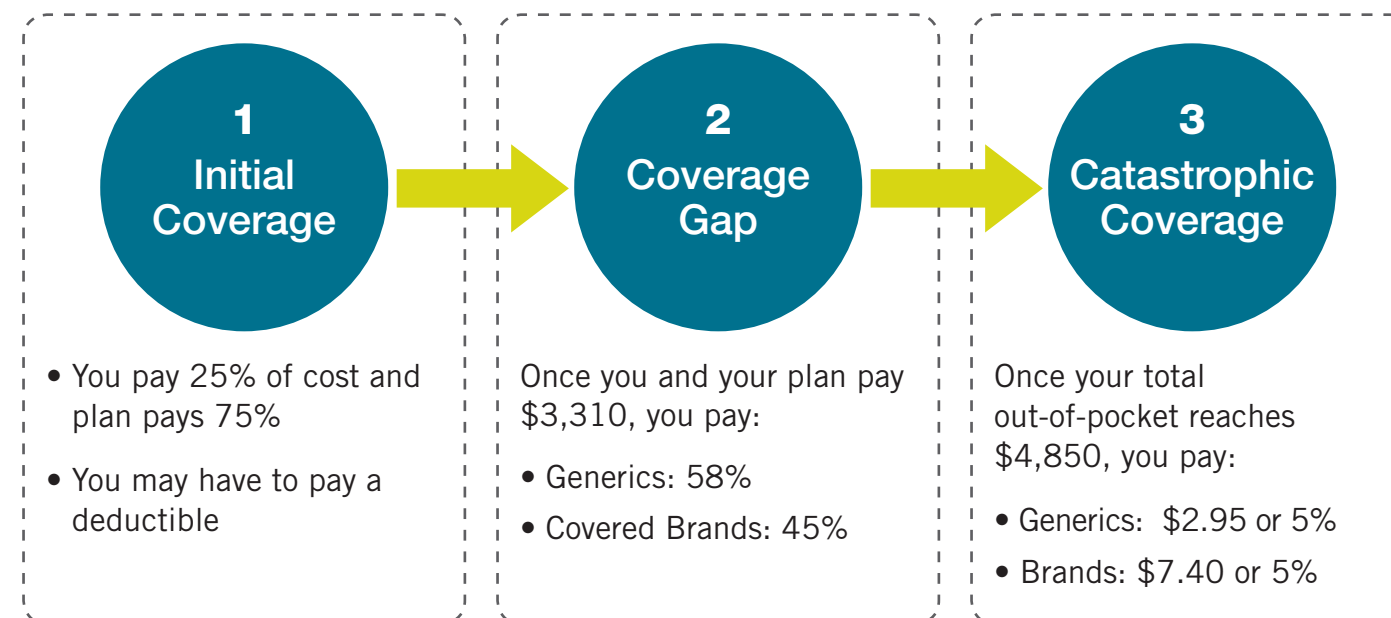
Part D Prescription Drug Coverage

- Helps pay the cost of prescription drugs that are on the health plan's Part D list of covered drugs
- You must choose whether or not to enroll in Part D; there are penalties for late enrollment
- Private health plans offer this coverage under contract with Medicare

How Part D Works

To get Part D prescription coverage, you must enroll in a private Part D plan. These plans usually charge a monthly premium.

Standard Part D plans provide the following levels of prescription coverage:



In the Level 2 Coverage Gap, you receive a manufacturer-paid 50% discount on covered brand drugs (unless you are already receiving Extra Help — see below). 95% of the drug cost — including both the portion covered by the manufacturer discount and your out-of-pocket cost — counts toward your Drug Costs and helps move you through the Coverage Gap. (The plan pays 5% of the drug cost.)

Help for people with limited incomes

- People with limited incomes may qualify for Extra Help to pay for their prescription drug costs. Many people are eligible for these savings and don't even know it.
- If you qualify, Medicare could pay for up to seventy-five (75) percent or more of your drug costs including monthly prescription drug premiums, annual deductibles, and coinsurance.
- Those who qualify will not be subject to the Coverage Gap or a late enrollment penalty.
- For more information or to see if you qualify for Extra Help, contact your local Social Security office or call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

Important Resources

Medica

- Toll-free at 1-800-906-5432
- TTY: 711
- Hours of operation:
October 1 – February 14: 8 a.m.-8 p.m.
Central Time, seven days a week
February 15 – September 30:
8 a.m.-8 p.m. Central Time,
Monday-Friday
- medica.com/medicare

Centers for Medicare & Medicaid Services (CMS)

- Toll-free at 1-800-MEDICARE
(1-800-633-4227)
- TTY users can call 1-877-486-2048
- Hours of operation: 24 hours a day,
seven days a week
- medicare.gov

Social Security Administration

- Toll-free at 1-800-772-1213
- TTY users can call 1-800-325-0778
- Hours of operation: 7 a.m.-7 p.m.,
Monday-Friday
- ssa.gov



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Medica is a Cost plan with a Medicare contract. Enrollment in Medica depends on contract renewal.