

Greater Milwaukee Metro Area

# Today's Health<sup>®</sup> HMO

## Medicare Advantage Health Plans

### 2010 Product Overview

**CONFIDENTIALITY STATEMENT**

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Today's Health HMO is a Medicare-Approved Medicare Advantage plan offered through the following organization that contract with the Federal government: Abri Health Plan, Inc. Today's Health is administered by Heritage Health Systems, Inc., a member of the Universal American family of Companies.



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# Today's Health® HMO

Greater Milwaukee Metro Area

Medicare Advantage HMO

2010 Product Overview

	Today's Health Value	Today's Health Classic powered by CCRx
<b>SAMPLE BENEFITS</b>		
Monthly Plan Premium*	\$0	\$19
Out-of-Pocket Max	\$3,250	\$3,250
Primary Care Physician Office Visit	\$7 minimum copay per PCP visit; \$35 maximum copay per PCP visit.	\$0 minimum copay per PCP visit; \$35 maximum copay per PCP visit.
Specialist Office Visit	\$30 copay per visit for Medicare-covered benefits.	\$35 copay per visit for Medicare-covered benefits.
Hospital Inpatient	Days 1-7: \$250 copay per day. \$0 copay per day for 8-90 days.	Days 1-7: \$270 copay per day. \$0 copay per day for 8-90 days.
Skilled Nursing Facility	\$0 per day for days 1-20; \$125 per day for days 21-100.	\$0 per day for days 1-20; \$133.50 per day for days 21-100.
Emergency Care	\$50 for each Medicare-covered ER visit; 20% member coinsurance for each Medicare-covered ER visit outside the U.S.	\$50 for each Medicare-covered ER visit; 20% member coinsurance for each Medicare-covered ER visit outside the U.S.
Preventive Benefits	No copayment for Bone Mass Measurement; Colorectal Screening Exams; Pneumonia and Flu vaccines; Screening Mammograms; Pap Smear and Pelvic Exams; Prostate Screening.	No copayment for Bone Mass Measurement; Colorectal Screening Exams; Pneumonia and Flu vaccines; Screening Mammograms; Pap Smear and Pelvic Exams; Prostate Screening.
<b>PRESCRIPTION DRUGS</b>		
Deductible	No Coverage	\$0
Part D copays	No Coverage	Copays: Generic - \$5 for one-month supply, \$12.50 for three-month supply. Preferred Brand - \$35 for one-month supply, \$87.50 for three-month supply. Non-Preferred Brand - \$65 for one-month supply, \$162.50 for three-month supply. Specialty - 33% coinsurance for one-month supply.
Part D Initial Coverage Limit		\$2,830
Part D - Coverage Gap	No Coverage	No coverage
<b>ADDITIONAL BENEFITS</b>		
Dental Benefits	\$15 copay for an office visit that includes 2 oral exams, cleanings, fluoride treatments and dental x-rays every year.	\$15 copay for an office visit that includes 2 oral exams, cleanings, fluoride treatments and dental x-rays every year.
Vision Benefits	\$25 copay for up to 1 routine eye exam every year; \$100 limit for eyewear every year.	\$25 copay for up to 1 routine eye exam every year; \$100 limit for eyewear every year.
Over-the-Counter (OTC) Benefit	Not Available	Not Available
Hearing Exam Benefit	\$25	\$25

Part D drug copay and coinsurance payments do not count toward the maximum out-of-pocket limit.

\*You must continue to pay your Medicare Part B premium.

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**Today's Health Premier**  
**powered by CCRx**

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\$60

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\$3,000

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\$0 minimum copay per PCP visit;  
\$30 maximum copay per PCP visit.

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\$30 copay per visit for Medicare-  
covered benefits.

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Days 1-7: \$195 copay per day.  
\$0 copay per day for 8-90 days.

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\$0 per day for days 1-20;  
\$100 per day for days 21-100.

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\$50 for each Medicare-covered ER visit;  
20% member coinsurance for each Medi-  
care-covered ER visit outside the U.S.

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No copayment for Bone Mass  
Measurement; Colorectal Screening  
Exams; Pneumonia and Flu vaccines;  
Screening Mammograms; Pap Smear and  
Pelvic Exams; Prostate Screening.

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\$0

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Copays: Generic - \$5 for one-month supply,  
\$12.50 for three-month supply.  
Preferred Brand - \$35 for one-month  
supply, \$87.50 for three-month supply.  
Non-Preferred Brand - \$65 for one-month  
supply, \$162.50 for three-month supply.  
Specialty - 33% coinsurance for  
one-month supply.

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\$2,830

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Yes - generics only, insulin, Plavix

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\$15 copay for an office visit that  
includes 2 oral exams, cleanings,  
fluoride treatments and dental x-rays  
every year.

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\$10 copay for up to 1 routine eye exam  
every year; \$125 limit for eyewear  
every year.

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Not Available

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\$25

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**ADDITIONAL SERVICES FOR MEMBERS:**

<b>24/7 Health Hotline</b>	Trained health professionals, just a phone call away! <ul style="list-style-type: none"><li>• Call at any time—day or night.</li></ul>
<b>Vision Care</b>	Savings through Herslof. <ul style="list-style-type: none"><li>• Savings on eyewear and annual vision exams</li></ul>
<b>Hearing Care</b>	Discounts through HearPO <ul style="list-style-type: none"><li>• 30% savings on hearing evaluations and exams</li><li>• 25% discount on hearing aids</li><li>• 1,600 locations nationwide</li></ul>
<b>Dental Services</b>	Savings through Careington <ul style="list-style-type: none"><li>• Dental services at low set fee or at 20% discount.</li></ul>
<b>Fitness</b>	Savings through Careington <ul style="list-style-type: none"><li>• 25-50% discounts at over 10,000 participating exercise and fitness centers nationwide</li></ul>

Restrictions and limitations may apply.

The products and services described are neither offered nor guaranteed under our contract with the Medicare program. In addition, they are not subject to the Medicare appeals process. Any disputes regarding these products and services may be subject to the Today's Health HMO grievance process.



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For additional information please contact us at: 1-800-958-2710

[www.todayshealthwi.com](http://www.todayshealthwi.com)

*Universal American (NYSE: UAM), through our family of healthcare companies, offers benefit plans designed to promote collaboration among our members and their healthcare professionals. This Healthy Collaboration improves the health and well-being of over two million people with Medicare every day.*