

MEDICARE ADVANTAGE IN NEBRASKA



A Guide to Medicare Advantage Insurance Plans 2009

SHIIP

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THE FACTS ABOUT MEDICARE ADVANTAGE

Medicare Advantage is an alternative to Original Medicare coverage. Sometimes referred to as Medicare Health Plans, Medicare + Choice, or Part C, Medicare Advantage Plans are health plan options that are approved by Medicare and administered by private companies.

Medicare Advantage Plans provide all of your Part A (hospital) and Part B (medical) coverage and must cover medically-necessary services. Some plans offer extra benefits, such as dental and vision services.

Medicare Advantage Plans also accept all Medicare beneficiaries, even those on Medicare due to a disability, and cannot have a waiting period for pre-existing conditions. The exception to this rule are those with End-Stage Renal Disease.

This booklet contains basic information about the various Medicare Advantage options in Nebraska. Medicare Advantage Plans include:

- **Private Fee-for-Service Plans (PFFS)**
- **Medicare Preferred Provider Organization Plans (PPO)**
- **Medicare Managed Care Plans (HMO & HMO/POS)**
- **Medicare Special Needs Plans (SNP)**
- **Medicare Medical Savings Account Plans (MSA)**

You must have Medicare Part A and Part B to join a Medicare Advantage Plan. Some plans do not charge a monthly premium, but you must continue to pay the Part B premium (\$96.40 in 2009*).

If you are considering joining a Medicare Advantage Plan, keep the following in mind:

- ***You are responsible for co-payments.*** Under Medicare Advantage, you must pay co-payments for each Medicare-covered service, such as physician office visits and inpatient hospital stays. These co-pays vary according to plan.
- ***Your provider may or may not accept your plan.*** Doctors or hospitals from which you receive care are not required to accept payment from Medicare Advantage Plans. If the provider does not accept the plan, you may be responsible for the entire payment.

You may join a Medicare Advantage Plan when you first become eligible for Medicare, whether by age or disability. A seven month initial enrollment period is granted to new Medicare enrollees that includes the three months before your first month of Medicare eligibility, your month of Medicare eligibility, and the three months after your first month of Medicare eligibility.

If you did not join when you were first eligible for Medicare, you can join between November 15 and December 31 each year. Your coverage will begin on January 1 of the following year.

The Medicare Advantage open enrollment period is from January 1 through March 31 each year. Beneficiaries may enroll, disenroll, or switch Medicare Advantage Plans one time during this period, but cannot join or drop a stand-alone Medicare prescription drug plan.

- continued on following page -

THE FACTS ABOUT MEDICARE ADVANTAGE (CONTINUED)

Under certain circumstances, you may be able to join a Medicare Advantage Plan at other times. Contact the Nebraska Senior Health Insurance Information Program (SHIIP) at 1-800-234-7119 to see if you are eligible for a special enrollment opportunity.

Those who are covered under Original Medicare may have a Medigap (Medicare Supplement Insurance) policy. ***Medigap Plans only work with the Original Medicare Plan, so if you join a Medicare Advantage Plan, you do not need to keep your Medigap policy.*** If you are satisfied with your current Medigap policy, you do not need to buy a Medicare Advantage Plan.

If you are over age 65 and were covered under Original Medicare and a Medigap policy, then joined a Medicare Advantage Plan and cancelled your Medigap policy, you retain the right to cancel your Medicare Advantage Plan during the first 12 months of enrollment and return to Original Medicare. If you do this during the 12 month “trial period,” you are granted a guarantee issue into the same Medigap policy in which you were most recently enrolled, if available from the same issuer, or, if not so available, a benefit package classified as Plan A, B, C, F (including F with a high deductible), K or L offered by any issuer.

If you are new to Medicare and elect to join a Medicare Advantage Plan, you retain the right to cancel your Medicare Advantage Plan during the first 12 months of enrollment and return to Original Medicare. If you do this during the 12 month “trial period,” you are granted a guarantee issue into a Medicare Supplement package classified as Plan A, B, C, F (including F with a high deductible), K or L offered by any issuer.

Some Medicare Advantage Plans include coverage for prescription drugs. Extra help paying for prescription drugs may be available if you have a low income and limited assets. Contact the Social Security Administration at 1-800-772-1213 to find out if you qualify for extra help.

For more information on a specific Medicare Advantage Plan, contact the company; phone numbers and web site addresses are listed in this booklet. If you have general questions about Medicare Advantage, contact the Nebraska SHIIP at 1-800-234-7119.

** The Medicare Part B standard monthly premium in 2009 is \$96.40. Single beneficiaries with annual income greater than \$85,000 and married couples with annual income greater than \$170,000 may have to pay a higher premium. Contact the Social Security Administration at 1-800-772-1213 for more information.*

Table of Contents

Private Fee-for-Service Plans	5-22
Medicare Preferred Provider Organization Plans	23-24
Medicare Managed Care Plans	25-26
Medicare Special Needs Plans	27
Medical Savings Account Plans	28-29

PRIVATE FEE-FOR-SERVICE PLANS

A Private Fee-for-Service (PFFS) Plan is a type of Medicare Advantage Plan. PFFS plans are offered by private companies. The private company, rather than Medicare, decides how much it will pay and what you pay for the services you receive. Extra benefits are often offered for an extra premium.

Enrollees do not need to choose a primary care doctor. *These plans do not have a “network” of providers. Beneficiaries can go to any Medicare-approved doctor or hospital as long as the provider accepts the plan’s payment terms for covered services.* No referrals are necessary.

Monthly premiums may be lower, but out-of-pocket co-payments may be higher than when the beneficiary was enrolled in Original Medicare and a standard Medigap policy.

Beneficiaries must continue to pay the Part A (if necessary) and Part B Medicare premium (\$96.40 in 2009).

PFFS plans must accept all Medicare beneficiaries, even those on Medicare due to a disability, and cannot have a waiting period for pre-existing conditions. The exception to this rule are those with End-Stage Renal Disease.

Some PFFS plans offer drug coverage. If the plan in which you are interested does not offer drug coverage, you can join a stand-alone prescription drug plan in your area.

Contact the individual plan for more information on any of the benefits listed on the following pages.

ADVANTRA FREEDOM 1 (H0846-004)

First Health Life & Health Insurance Company
P.O. Box 690; Mahwah, NJ 07430

1-800-711-1607 ♦ www.advantrafreedom.com

Coverage Area: 25 Nebraska counties

- Banner, Boone, Box Butte, Dawes, Dixon, Gage, Gosper, Grant, Hayes, Hooker, Jefferson, Keya Paha, Logan, Loup, Madison, McPherson, Morrill, Sarpy, Scotts Bluff, Seward, Sheridan, Sioux, Stanton, Wayne, Wheeler

Monthly Premium: \$96 (in addition to Part B premium)

Yearly Out-of-Pocket Maximum:

- \$2,500 (all plan services included)

Physician Office Visit:

- \$0 for each primary care doctor visit
- \$0 for each specialist doctor visit

Inpatient Hospital Care:

- \$50 each day, day(s) 1-5; \$0 each day, day(s) 6-90

Skilled Nursing Care:

- \$0 each day, day(s) 1-7; \$125 each day, day(s) 8-27; \$0 each day, day(s) 28-100

Prescription Drug Coverage: No

ADVANTRA FREEDOM 1B (H0846-017)

First Health Life & Health Insurance Company
P.O. Box 690; Mahwah, NJ 07430

1-800-711-1607 ♦ www.advantrafreedom.com

Coverage Area: 15 Nebraska counties

- Buffalo, Butler, Cedar, Cheyenne, Cuming, Dakota, Dawson, Deuel, Furnas, Garfield, Greeley, Kearney, Knox, Merrick, Phelps

Monthly Premium: \$140 (in addition to Part B premium)

Yearly Out-of-Pocket Maximum:

- \$2,500 (all plan services included)

Physician Office Visit:

- \$5 for each primary care doctor visit
- \$15 for each specialist doctor visit

Inpatient Hospital Care:

- \$100 each day, day(s) 1-5; \$0 each day, day(s) 6-90

Skilled Nursing Care:

- \$125 each day, day(s) 1-20; \$0 each day, day(s) 21-100

Prescription Drug Coverage: No

<p align="center">ADVANTRA FREEDOM 2 (H0846-005)</p> <p align="center">First Health Life & Health Insurance Company P.O. Box 690; Mahwah, NJ 07430</p> <p align="center">1-800-711-1607 ♦ www.advantrafreedom.com</p>	<p align="center">ADVANTRA FREEDOM 3 (H0846-006)</p> <p align="center">First Health Life & Health Insurance Company P.O. Box 690; Mahwah, NJ 07430</p> <p align="center">1-800-711-1607 ♦ www.advantrafreedom.com</p>
<p>Coverage Area: 40 Nebraska counties</p> <ul style="list-style-type: none"> • Banner, Boone, Box Butte, Buffalo, Butler, Cedar, Cheyenne, Cuming, Dakota, Dawes, Dawson, Deuel, Dixon, Furnas, Gage, Garfield, Gosper, Grant, Greeley, Hayes, Hooker, Jefferson, Kearney, Keya Paha, Knox, Logan, Loup, Madison, McPherson, Merrick, Morrill, Phelps, Sarpy, Scotts Bluff, Seward, Sheridan, Sioux, Stanton, Wayne, Wheeler 	<p>Coverage Area: 19 Nebraska counties</p> <ul style="list-style-type: none"> • Blaine, Boyd, Brown, Cass, Cherry, Dodge, Douglas, Dundy, Hall, Hamilton, Johnson, Lancaster, Perkins, Platte, Saline, Saunders, Sherman, Thomas, Washington
<p>Monthly Premium: \$0 (in addition to Part B premium)</p>	<p>Monthly Premium: \$0 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,000 (all plan services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,350 (all plan services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$15-\$50 for each primary care doctor visit • \$30 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$20-\$50 for each primary care doctor visit • \$30 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$180 each day, day(s) 1-5; \$0 each day, day(s) 6-90 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$265 each day, day(s) 1-11; \$0 each day, day(s) 12-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-3; \$80 each day, day(s) 4-37; \$0 each day, day(s) 38-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$100 each day, day(s) 1-25; \$0 each day, day(s) 26-100
<p>Prescription Drug Coverage: No</p>	<p>Prescription Drug Coverage: No</p>
<p align="center">ADVANTRA FREEDOM 2 (H0846-010)</p> <p align="center">First Health Life & Health Insurance Company P.O. Box 690; Mahwah, NJ 07430</p> <p align="center">1-800-711-1607 ♦ www.advantrafreedom.com</p>	<p align="center">ADVANTRA FREEDOM 3 (H0846-013)</p> <p align="center">First Health Life & Health Insurance Company P.O. Box 690; Mahwah, NJ 07430</p> <p align="center">1-800-711-1607 ♦ www.advantrafreedom.com</p>
<p>Coverage Area: 7 Nebraska counties</p> <ul style="list-style-type: none"> • Chase, Frontier, Garden, Harlan, Kimball, Nemaha, Thayer 	<p>Coverage Area: 7 Nebraska counties</p> <ul style="list-style-type: none"> • Chase, Frontier, Garden, Harlan, Kimball, Nemaha, Thayer
<p>Monthly Premium: \$35 (in addition to Part B premium)</p>	<p>Monthly Premium: \$23 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,000 (all plan services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,350 (all plan services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$15-\$50 for each primary care doctor visit • \$30 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$20-\$50 for each primary care doctor visit • \$30 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$180 each day, day(s) 1-5; \$0 each day, day(s) 6-90 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$265 each day, day(s) 1-11; \$0 each day, day(s) 12-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-3; \$80 each day, day(s) 4-37; \$0 each day, day(s) 38-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$100 each day, day(s) 1-25; \$0 each day, day(s) 26-100
<p>Prescription Drug Coverage: No</p>	<p>Prescription Drug Coverage: No</p>

<p align="center">ADVANTRA FREEDOM 3 (H0846-016)</p> <p align="center">First Health Life & Health Insurance Company P.O. Box 690; Mahwah, NJ 07430</p> <p align="center">1-800-711-1607 ♦ www.advantrafreedom.com</p>	<p align="center">ADVANTRA FREEDOM 5 (H5227-002)</p> <p align="center">Coventry Health and Life Insurance Company P.O. Box 690; Mahwah, NJ 07430</p> <p align="center">1-800-711-1607 ♦ www.advantrafreedom.com</p>
<p>Coverage Area: 15 Nebraska counties</p> <ul style="list-style-type: none"> • Arthur, Clay, Colfax, Fillmore, Franklin, Hitchcock, Howard, Keith, Otoe, Pawnee, Pierce, Polk, Red Willow, Rock, Valley 	<p>Coverage Area: 34 Nebraska counties</p> <ul style="list-style-type: none"> • Arthur, Blaine, Boyd, Brown, Cass, Cherry, Clay, Colfax, Dodge, Douglas, Dundy, Fillmore, Franklin, Hall, Hamilton, Hitchcock, Howard, Johnson, Keith, Lancaster, Otoe, Pawnee, Perkins, Pierce, Platte, Polk, Red Willow, Rock, Saline, Saunders, Sherman, Thomas, Valley, Washington
<p>Monthly Premium: \$31 (in addition to Part B premium)</p>	<p>Monthly Premium: \$34 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,350 (all plan services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,350 (all plan services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$20-\$50 for each primary care doctor visit • \$30 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$15-\$50 for each primary care doctor visit • \$30 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$265 each day, day(s) 1-11; \$0 each day, day(s) 12-90 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$180 each day, day(s) 1-6; \$0 each day, day(s) 7-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$100 each day, day(s) 1-25; \$0 each day, day(s) 26-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-3; \$80 each day, day(s) 4-40; \$0 each day, day(s) 41-100
<p>Prescription Drug Coverage: No</p>	<p>Prescription Drug Coverage: Yes</p>
<p align="center">ADVANTRA FREEDOM 5 (H5227-001)</p> <p align="center">Coventry Health and Life Insurance Company P.O. Box 690; Mahwah, NJ 07430</p> <p align="center">1-800-711-1607 ♦ www.advantrafreedom.com</p>	<p align="center">ADVANTRA FREEDOM 5 Plus-GAP (H5227-004)</p> <p align="center">Coventry Health and Life Insurance Company P.O. Box 690; Mahwah, NJ 07430</p> <p align="center">1-800-711-1607 ♦ www.advantrafreedom.com</p>
<p>Coverage Area: 40 Nebraska counties</p> <ul style="list-style-type: none"> • Banner, Boone, Box Butte, Buffalo, Butler, Cedar, Cheyenne, Cuming, Dakota, Dawes, Dawson, Deuel, Dixon, Furnas, Gage, Garfield, Gosper, Grant, Greeley, Hayes, Hooker, Jefferson, Kearney, Keya Paha, Knox, Logan, Loup, Madison, McPherson, Merrick, Morrill, Phelps, Sarpy, Scotts Bluff, Seward, Sheridan, Sioux, Stanton, Wayne, Wheeler 	<p>Coverage Area: 40 Nebraska counties</p> <ul style="list-style-type: none"> • Banner, Boone, Box Butte, Buffalo, Butler, Cedar, Cheyenne, Cuming, Dakota, Dawes, Dawson, Deuel, Dixon, Furnas, Gage, Garfield, Gosper, Grant, Greeley, Hayes, Hooker, Jefferson, Kearney, Keya Paha, Knox, Logan, Loup, Madison, McPherson, Merrick, Morrill, Phelps, Sarpy, Scotts Bluff, Seward, Sheridan, Sioux, Stanton, Wayne, Wheeler
<p>Monthly Premium: \$0 (in addition to Part B premium)</p>	<p>Monthly Premium: \$0 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,350 (all plan services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,350 (all plan services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$15-\$50 for each primary care doctor visit • \$30 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$15-\$50 for each primary care doctor visit • \$30 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$180 each day, day(s) 1-6; \$0 each day, day(s) 7-90 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$180 each day, day(s) 1-6; \$0 each day, day(s) 7-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-3; \$80 each day, day(s) 4-40; \$0 each day, day(s) 41-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-3; \$80 each day, day(s) 4-40; \$0 each day, day(s) 41-100
<p>Prescription Drug Coverage: Yes</p>	<p>Prescription Drug Coverage: Yes</p>

<p align="center">AVERA ADVANTAGE VALUE (H5421-131)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528; Houston, TX 77274 1-800-999-3947 ♦ www.averaadvantage.com</p>	<p align="center">HUMANA GOLD CHOICE (H1804-081)</p> <p align="center">Humana Insurance Company 500 West Main Street; Louisville, KY 40202 1-800-833-0632 ♦ www.humana-medicare.com</p>
<p>Coverage Area: 3 Nebraska counties</p> <ul style="list-style-type: none"> • Cedar, Holt, Knox 	<p>Coverage Area: all Nebraska counties</p>
<p>Monthly Premium: \$25 (in addition to Part B premium)</p>	<p>Monthly Premium: \$68 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,000 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$5,000 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$20-\$35 for each primary care doctor visit • \$35 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$15-\$30 for each primary care doctor visit • \$30 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$195 each day, day(s) 1-5; \$0 each day, day(s) 6-90 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$950 per admission
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$128 each day, day(s) 21-100
<p>Prescription Drug Coverage: No</p>	<p>Prescription Drug Coverage: Yes</p>
<p align="center">AVERA ADVANTAGE VALUE PLUS (H5421-134)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528; Houston, TX 77274 1-800-999-3947 ♦ www.averaadvantage.com</p>	<p align="center">HUMANA GOLD CHOICE (H1804-210)</p> <p align="center">Humana Insurance Company 500 West Main Street; Louisville, KY 40202 1-800-833-0632 ♦ www.humana-medicare.com</p>
<p>Coverage Area: 3 Nebraska counties</p> <ul style="list-style-type: none"> • Cedar, Holt, Knox 	<p>Coverage Area: all Nebraska counties</p>
<p>Monthly Premium: \$46.70 (in addition to Part B premium)</p>	<p>Monthly Premium: \$88 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,000 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$5,000 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$20-\$35 for each primary care doctor visit • \$35 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$15-\$30 for each primary care doctor visit • \$30 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$195 each day, day(s) 1-5; \$0 each day, day(s) 6-90 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$950 per admission
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$128 each day, day(s) 21-100
<p>Prescription Drug Coverage: Yes</p>	<p>Prescription Drug Coverage: Yes</p>

<p align="center">SECUREHORIZONS MEDICAREDIRECT PLAN 3 (H5435-003)</p> <p align="center">SecureHorizons MedicareDirect P.O. Box 29550; Hot Springs, AR 71903 1-800-555-5757 ♦ www.securehorizons.com</p>	<p align="center">SECUREHORIZONS MEDICAREDIRECT RX PLAN 55 (H5435-024)</p> <p align="center">SecureHorizons MedicareDirect P.O. Box 29550; Hot Springs, AR 71903 1-800-555-5757 ♦ www.securehorizons.com</p>
<p>Coverage Area: 87 Nebraska counties</p> <ul style="list-style-type: none"> • Arthur, Banner, Blaine, Boone, Box Butte, Boyd, Brown, Buffalo, Burt, Butler, Cass, Cedar, Chase, Cherry, Cheyenne, Clay, Colfax, Cuming, Custer, Dakota, Dawes, Dawson, Deuel, Dixon, Dodge, Douglas, Dundy, Fillmore, Franklin, Frontier, Furnas, Gage, Garden, Garfield, Gosper, Grant, Greeley, Hall, Hamilton, Harlan, Hayes, Hitchcock, Hooker, Howard, Jefferson, Johnson, Kearney, Keith, Keya Paha, Kimball, Knox, Lancaster, Logan, Loup, Madison, McPherson, Merrick, Morrill, Nance, Nemaha, Otoe, Pawnee, Perkins, Phelps, Pierce, Platte, Polk, Red Willow, Richardson, Rock, Saline, Sarpy, Saunders, Scotts Bluff, Seward, Sheridan, Sherman, Sioux, Stanton, Thayer, Thomas, Thurston, Valley, Washington, Wayne, Wheeler, York 	<p>Coverage Area: 87 Nebraska counties</p> <ul style="list-style-type: none"> • Arthur, Banner, Blaine, Boone, Box Butte, Boyd, Brown, Buffalo, Burt, Butler, Cass, Cedar, Chase, Cherry, Cheyenne, Clay, Colfax, Cuming, Custer, Dakota, Dawes, Dawson, Deuel, Dixon, Dodge, Douglas, Dundy, Fillmore, Franklin, Frontier, Furnas, Gage, Garden, Garfield, Gosper, Grant, Greeley, Hall, Hamilton, Harlan, Hayes, Hitchcock, Hooker, Howard, Jefferson, Johnson, Kearney, Keith, Keya Paha, Kimball, Knox, Lancaster, Logan, Loup, Madison, McPherson, Merrick, Morrill, Nance, Nemaha, Otoe, Pawnee, Perkins, Phelps, Pierce, Platte, Polk, Red Willow, Richardson, Rock, Saline, Sarpy, Saunders, Scotts Bluff, Seward, Sheridan, Sherman, Sioux, Stanton, Thayer, Thomas, Thurston, Valley, Washington, Wayne, Wheeler, York
<p>Monthly Premium: \$0 (in addition to Part B premium)</p>	<p>Monthly Premium: \$0 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,350 (contact plan for services that apply) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,600 (contact plan for services that apply)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$10 for each primary care doctor visit • \$20 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$10 for each primary care doctor visit • \$25 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$195 each day, day(s) 1-18; \$0 each day, day(s) 19-90 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$220 each day, day(s) 1-17; \$0 each day, day(s) 18-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$95 each day, day(s) 1-28; \$0 each day, day(s) 29-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$110 each day, day(s) 1-26; \$0 each day, day(s) 27-100
<p>Prescription Drug Coverage: No</p>	<p>Prescription Drug Coverage: Yes</p>

<p align="center">SECURITYCHOICE CLASSIC (H0540-001) Unicare Life & Health Insurance Company P.O. Box 9092; Oxnard, CA 93031 1-888-949-5384 ♦ www.unicare.com</p>	<p align="center">SECURITYCHOICE PLUS (H0540-020) Unicare Life & Health Insurance Company P.O. Box 9092; Oxnard, CA 93031 1-888-949-5384 ♦ www.unicare.com</p>
<p>Coverage Area: 86 Nebraska counties</p> <ul style="list-style-type: none"> ● Adams, Antelope, Arthur, Banner, Blaine, Boone, Box Butte, Boyd, Brown, Buffalo, Butler, Cass, Cedar, Chase, Cherry, Cheyenne, Clay, Colfax, Cuming, Custer, Dakota, Dawes, Dawson, Deuel, Dixon, Dundy, Fillmore, Franklin, Frontier, Furnas, Gage, Garden, Garfield, Gosper, Grant, Greeley, Hall, Hamilton, Harlan, Hayes, Hitchcock, Holt, Hooker, Howard, Jefferson, Johnson, Kearney, Keith, Keya Paha, Kimball, Knox, Lancaster, Logan, Loup, Madison, McPherson, Merrick, Morrill, Nance, Nemaha, Nuckolls, Otoe, Pawnee, Perkins, Phelps, Pierce, Platte, Polk, Richardson, Rock, Saline, Sarpy, Scotts Bluff, Seward, Sheridan, Sherman, Sioux, Stanton, Thayer, Thomas, Valley, Washington, Wayne, Webster, Wheeler, York 	<p>Coverage Area: 86 Nebraska counties</p> <ul style="list-style-type: none"> ● Adams, Antelope, Arthur, Banner, Blaine, Boone, Box Butte, Boyd, Brown, Buffalo, Butler, Cass, Cedar, Chase, Cherry, Cheyenne, Clay, Colfax, Cuming, Custer, Dakota, Dawes, Dawson, Deuel, Dixon, Dundy, Fillmore, Franklin, Frontier, Furnas, Gage, Garden, Garfield, Gosper, Grant, Greeley, Hall, Hamilton, Harlan, Hayes, Hitchcock, Holt, Hooker, Howard, Jefferson, Johnson, Kearney, Keith, Keya Paha, Kimball, Knox, Lancaster, Logan, Loup, Madison, McPherson, Merrick, Morrill, Nance, Nemaha, Nuckolls, Otoe, Pawnee, Perkins, Phelps, Pierce, Platte, Polk, Richardson, Rock, Saline, Sarpy, Scotts Bluff, Seward, Sheridan, Sherman, Sioux, Stanton, Thayer, Thomas, Valley, Washington, Wayne, Webster, Wheeler, York
<p>Monthly Premium: \$0 (in addition to Part B premium)</p>	<p>Monthly Premium: \$0 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> ● \$4,000 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> ● \$4,000 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> ● \$15 for each primary care doctor visit ● \$25 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> ● \$20 for each primary care doctor visit ● \$30 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> ● \$200 each day, day(s) 1-5; \$0 each day, day(s) 6-90 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> ● \$275 each day, day(s) 1-5; \$0 each day, day(s) 6-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> ● \$0 each day, day(s) 1-20; \$125 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> ● \$0 each day, day(s) 1-20; \$125 each day, day(s) 21-100
<p>Prescription Drug Coverage: No</p>	<p>Prescription Drug Coverage: Yes</p>
<p align="center">SECURITYCHOICE ESSENTIAL (H0540-088) Unicare Life & Health Insurance Company P.O. Box 9092; Oxnard, CA 93031 1-888-949-5384 ♦ www.unicare.com</p>	<p align="center">SECURITYCHOICE ESSENTIAL PLUS (H0540-089) Unicare Life & Health Insurance Company P.O. Box 9092; Oxnard, CA 93031 1-888-949-5384 ♦ www.unicare.com</p>
<p>Coverage Area: 4 Nebraska counties</p> <ul style="list-style-type: none"> ● Dodge, Douglas, Red Willow, Saunders 	<p>Coverage Area: 4 Nebraska counties</p> <ul style="list-style-type: none"> ● Dodge, Douglas, Red Willow, Saunders
<p>Monthly Premium: \$0 (in addition to Part B premium)</p>	<p>Monthly Premium: \$35 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> ● \$4,500 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> ● \$4,500 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> ● \$20 for each primary care doctor visit ● \$30 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> ● \$20 for each primary care doctor visit ● \$30 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> ● \$250 each day, day(s) 1-5; \$0 each day, day(s) 6-90 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> ● \$250 each day, day(s) 1-5; \$0 each day, day(s) 6-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> ● \$0 each day, day(s) 1-20; \$125 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> ● \$0 each day, day(s) 1-20; \$125 each day, day(s) 21-100
<p>Prescription Drug Coverage: No</p>	<p>Prescription Drug Coverage: Yes</p>

<p align="center">STERLING BASIC (H5006-018) Sterling Life Insurance Company P.O. Box 1917; Bellingham, WA 98227 1-888-858-8572 ♦ www.sterlingplans.com</p>	<p align="center">STERLING OPTION II (H5006-017) Sterling Life Insurance Company P.O. Box 1917; Bellingham, WA 98227 1-888-858-8572 ♦ www.sterlingplans.com</p>
<p>Coverage Area: all Nebraska counties</p>	<p>Coverage Area: all Nebraska counties</p>
<p>Monthly Premium: \$20 (in addition to Part B premium)</p>	<p>Monthly Premium: \$56 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum: • \$5,000 (all Medicare-covered services included)</p>	<p>Yearly Out-of-Pocket Maximum: • Contact the plan for this information</p>
<p>Physician Office Visit: • \$20 for each primary care doctor visit • \$40 for each specialist doctor visit</p>	<p>Physician Office Visit: • \$20 for each primary care doctor visit • \$40 for each specialist doctor visit</p>
<p>Inpatient Hospital Care: • \$200 each day, day(s) 1-5; \$0 each day, day(s) 6-90</p>	<p>Inpatient Hospital Care: • \$150 each day, day(s) 1-5; \$0 each day, day(s) 6-90</p>
<p>Skilled Nursing Care: • \$0 each day, day(s) 1-10; \$30 each day, day(s) 11-100</p>	<p>Skilled Nursing Care: • \$0 each day, day(s) 1-10; \$35 each day, day(s) 11-100</p>
<p>Prescription Drug Coverage: No</p>	<p>Prescription Drug Coverage: Yes</p>
<p align="center">STERLING OPTION I (H5006-014) Sterling Life Insurance Company P.O. Box 1917; Bellingham, WA 98227 1-888-858-8572 ♦ www.sterlingplans.com</p>	<p align="center">STERLING OPTION III (H5006-015) Sterling Life Insurance Company P.O. Box 1917; Bellingham, WA 98227 1-888-858-8572 ♦ www.sterlingplans.com</p>
<p>Coverage Area: all Nebraska counties</p>	<p>Coverage Area: all Nebraska counties</p>
<p>Monthly Premium: \$35 (in addition to Part B premium)</p>	<p>Monthly Premium: \$65 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum: • Contact the plan for this information</p>	<p>Yearly Out-of-Pocket Maximum: • \$3,000 (all Medicare-covered services included)</p>
<p>Physician Office Visit: • \$10 for each primary care doctor visit • \$40 for each specialist doctor visit</p>	<p>Physician Office Visit: • \$10 for each primary care doctor visit • \$40 for each specialist doctor visit</p>
<p>Inpatient Hospital Care: • \$125 each day, day(s) 1-5; \$0 each day, day(s) 6-90</p>	<p>Inpatient Hospital Care: • \$125 each day, day(s) 1-5; \$0 each day, day(s) 6-90</p>
<p>Skilled Nursing Care: • \$0 each day, day(s) 1-10; \$30 each day, day(s) 11-100</p>	<p>Skilled Nursing Care: • \$0 each day, day(s) 1-10; \$30 each day, day(s) 11-100</p>
<p>Prescription Drug Coverage: No</p>	<p>Prescription Drug Coverage: No</p>

<p align="center">TODAY'S OPTIONS PREMIER (H5421-046)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p align="center">1-800-996-8867 ♦ www.todaysoptions.com</p>	<p align="center">TODAY'S OPTIONS PREMIER (H5421-048)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p align="center">1-800-996-8867 ♦ www.todaysoptions.com</p>
<p>Coverage Area: 8 Nebraska counties</p> <ul style="list-style-type: none"> ● Banner, Butler, Dawes, Gosper, McPherson, Sheridan, Sioux, Wheeler 	<p>Coverage Area: 6 Nebraska counties</p> <ul style="list-style-type: none"> ● Buffalo, Deuel, Logan, Morrill, Seward, Wayne
<p>Monthly Premium: \$0 (in addition to Part B premium)</p>	<p>Monthly Premium: \$49 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> ● \$2,500 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> ● \$2,500 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> ● \$10-\$35 for each primary care doctor visit ● \$25 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> ● \$10-\$35 for each primary care doctor visit ● \$25 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> ● \$350 per admission 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> ● \$350 per admission
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> ● \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> ● \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100
<p>Prescription Drug Coverage: No</p>	<p>Prescription Drug Coverage: No</p>
<p align="center">TODAY'S OPTIONS PREMIER (H5421-047)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p align="center">1-800-996-8867 ♦ www.todaysoptions.com</p>	<p align="center">TODAY'S OPTIONS PREMIER (H5421-049)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p align="center">1-800-996-8867 ♦ www.todaysoptions.com</p>
<p>Coverage Area: 13 Nebraska counties</p> <ul style="list-style-type: none"> ● Boone, Box Butte, Cheyenne, Dixon, Hayes, Hooker, Jefferson, Kearney, Keya Paha, Loup, Madison, Scotts Bluff, Stanton 	<p>Coverage Area: 29 Nebraska counties</p> <ul style="list-style-type: none"> ● Blaine, Boyd, Brown, Cass, Cedar, Cuming, Dakota, Dawson, Dodge, Douglas, Dundy, Furnas, Gage, Garfield, Grant, Greeley, Hall, Hamilton, Keith, Knox, Lancaster, Merrick, Perkins, Phelps, Platte, Rock, Sarpy, Saunders, Thomas
<p>Monthly Premium: \$39 (in addition to Part B premium)</p>	<p>Monthly Premium: \$69 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> ● \$2,500 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> ● \$2,500 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> ● \$10-\$35 for each primary care doctor visit ● \$25 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> ● \$10-\$35 for each primary care doctor visit ● \$25 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> ● \$350 per admission 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> ● \$350 per admission
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> ● \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> ● \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100
<p>Prescription Drug Coverage: No</p>	<p>Prescription Drug Coverage: No</p>

<p align="center">TODAY'S OPTIONS PREMIER (H5421-050)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p align="center">1-800-996-8867 ♦ www.todaysoptions.com</p>	<p align="center">TODAY'S OPTIONS VALUE (H5421-052)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p align="center">1-800-996-8867 ♦ www.todaysoptions.com</p>
<p>Coverage Area: 25 Nebraska counties</p> <ul style="list-style-type: none"> ● Arthur, Chase, Cherry, Clay, Colfax, Fillmore, Franklin, Frontier, Garden, Harlan, Hitchcock, Howard, Johnson, Kimball, Nemaha, Otoe, Pawnee, Pierce, Polk, Red Willow, Saline, Sherman, Thayer, Valley, Washington 	<p>Coverage Area: 8 Nebraska counties</p> <ul style="list-style-type: none"> ● Banner, Butler, Dawes, Gosper, McPherson, Sheridan, Sioux, Wheeler
<p>Monthly Premium: \$89 (in addition to Part B premium)</p>	<p>Monthly Premium: \$0 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> ● \$2,500 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> ● \$3,000 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> ● \$10-\$35 for each primary care doctor visit ● \$25 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> ● \$20-\$35 for each primary care doctor visit ● \$35 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> ● \$350 per admission 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> ● \$195 each day, day(s) 1-5; \$0 each day, day(s) 6-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> ● \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> ● \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100
<p>Prescription Drug Coverage: No</p>	<p>Prescription Drug Coverage: No</p>
<p align="center">TODAY'S OPTIONS PREMIER (H5421-051)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p align="center">1-800-996-8867 ♦ www.todaysoptions.com</p>	<p align="center">TODAY'S OPTIONS VALUE (H5421-053)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p align="center">1-800-996-8867 ♦ www.todaysoptions.com</p>
<p>Coverage Area: 12 Nebraska counties</p> <ul style="list-style-type: none"> ● Adams, Antelope, Burt, Custer, Holt, Lincoln, Nance, Nuckolls, Richardson, Thurston, Webster, York 	<p>Coverage Area: 13 Nebraska counties</p> <ul style="list-style-type: none"> ● Boone, Box Butte, Cheyenne, Dixon, Hayes, Hooker, Jefferson, Kearney, Keya Paha, Loup, Madison, Scotts Bluff, Stanton
<p>Monthly Premium: \$99 (in addition to Part B premium)</p>	<p>Monthly Premium: \$0 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> ● \$2,500 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> ● \$3,000 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> ● \$10-\$35 for each primary care doctor visit ● \$25 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> ● \$20-\$35 for each primary care doctor visit ● \$35 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> ● \$350 per admission 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> ● \$195 each day, day(s) 1-5; \$0 each day, day(s) 6-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> ● \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> ● \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100
<p>Prescription Drug Coverage: No</p>	<p>Prescription Drug Coverage: No</p>

<p align="center">TODAY'S OPTIONS VALUE (H5421-054)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p align="center">1-800-996-8867 ♦ www.todaysoptions.com</p>	<p align="center">TODAY'S OPTIONS VALUE (H5421-056)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p align="center">1-800-996-8867 ♦ www.todaysoptions.com</p>
<p>Coverage Area: 6 Nebraska counties</p> <ul style="list-style-type: none"> • Buffalo, Deuel, Logan, Morrill, Seward, Wayne 	<p>Coverage Area: 25 Nebraska counties</p> <ul style="list-style-type: none"> • Arthur, Chase, Cherry, Clay, Colfax, Fillmore, Franklin, Frontier, Garden, Harlan, Hitchcock, Howard, Johnson, Kimball, Nemaha, Otoe, Pawnee, Pierce, Polk, Red Willow, Saline, Sherman, Thayer, Valley, Washington
<p>Monthly Premium: \$15 (in addition to Part B premium)</p>	<p>Monthly Premium: \$50 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,000 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,000 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$20-\$35 for each primary care doctor visit • \$35 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$20-\$35 for each primary care doctor visit • \$35 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$195 each day, day(s) 1-5; \$0 each day, day(s) 6-90 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$195 each day, day(s) 1-5; \$0 each day, day(s) 6-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100
<p>Prescription Drug Coverage: No</p>	<p>Prescription Drug Coverage: No</p>
<p align="center">TODAY'S OPTIONS VALUE (H5421-055)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p align="center">1-800-996-8867 ♦ www.todaysoptions.com</p>	<p align="center">TODAY'S OPTIONS VALUE (H5421-057)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p align="center">1-800-996-8867 ♦ www.todaysoptions.com</p>
<p>Coverage Area: 29 Nebraska counties</p> <ul style="list-style-type: none"> • Blaine, Boyd, Brown, Cass, Cedar, Cuming, Dakota, Dawson, Dodge, Douglas, Dundy, Furnas, Gage, Garfield, Grant, Greeley, Hall, Hamilton, Keith, Knox, Lancaster, Merrick, Perkins, Phelps, Platte, Rock, Sarpy, Saunders, Thomas 	<p>Coverage Area: 12 Nebraska counties</p> <ul style="list-style-type: none"> • Adams, Antelope, Burt, Custer, Holt, Lincoln, Nance, Nuckolls, Richardson, Thurston, Webster, York
<p>Monthly Premium: \$30 (in addition to Part B premium)</p>	<p>Monthly Premium: \$65 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,000 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,000 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$20-\$35 for each primary care doctor visit • \$35 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$20-\$35 for each primary care doctor visit • \$35 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$195 each day, day(s) 1-5; \$0 each day, day(s) 6-90 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$195 each day, day(s) 1-5; \$0 each day, day(s) 6-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100
<p>Prescription Drug Coverage: No</p>	<p>Prescription Drug Coverage: No</p>

<p align="center">TODAY'S OPTIONS PREMIER POWERED BY CCRX (H5421-064)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p align="center">1-800-996-8867 ♦ www.todaysoptions.com</p>	<p align="center">TODAY'S OPTIONS PREMIER POWERED BY CCRX (H5421-066)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p align="center">1-800-996-8867 ♦ www.todaysoptions.com</p>
<p>Coverage Area: 8 Nebraska counties</p> <ul style="list-style-type: none"> • Banner, Butler, Dawes, Gosper, McPherson, Sheridan, Sioux, Wheeler 	<p>Coverage Area: 6 Nebraska counties</p> <ul style="list-style-type: none"> • Buffalo, Deuel, Logan, Morrill, Seward, Wayne
<p>Monthly Premium: \$58.70 (in addition to Part B premium)</p>	<p>Monthly Premium: \$101.50 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$2,500 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$2,500 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$10-\$35 for each primary care doctor visit • \$25 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$10-\$35 for each primary care doctor visit • \$25 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$350 per admission 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$350 per admission
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100
<p>Prescription Drug Coverage: Yes</p>	<p>Prescription Drug Coverage: Yes</p>
<p align="center">TODAY'S OPTIONS PREMIER POWERED BY CCRX (H5421-065)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p align="center">1-800-996-8867 ♦ www.todaysoptions.com</p>	<p align="center">TODAY'S OPTIONS PREMIER POWERED BY CCRX (H5421-067)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p align="center">1-800-996-8867 ♦ www.todaysoptions.com</p>
<p>Coverage Area: 13 Nebraska counties</p> <ul style="list-style-type: none"> • Boone, Box Butte, Cheyenne, Dixon, Hayes, Hooker, Jefferson, Kearney, Keya Paha, Loup, Madison, Scotts Bluff, Stanton 	<p>Coverage Area: 29 Nebraska counties</p> <ul style="list-style-type: none"> • Blaine, Boyd, Brown, Cass, Cedar, Cuming, Dakota, Dawson, Dodge, Douglas, Dundy, Furnas, Gage, Garfield, Grant, Greeley, Hall, Hamilton, Keith, Knox, Lancaster, Merrick, Perkins, Phelps, Platte, Rock, Sarpy, Saunders, Thomas
<p>Monthly Premium: \$78.10 (in addition to Part B premium)</p>	<p>Monthly Premium: \$112.80 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$2,500 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$2,500 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$10-\$35 for each primary care doctor visit • \$25 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$10-\$35 for each primary care doctor visit • \$25 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$350 per admission 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$350 per admission
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100
<p>Prescription Drug Coverage: Yes</p>	<p>Prescription Drug Coverage: Yes</p>

<p align="center">TODAY'S OPTIONS PREMIER POWERED BY CCRX (H5421-068)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p align="center">1-800-996-8867 ♦ www.todaysoptions.com</p>	<p align="center">TODAY'S OPTIONS VALUE POWERED BY CCRX (H5421-070)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p align="center">1-800-996-8867 ♦ www.todaysoptions.com</p>
<p>Coverage Area: 25 Nebraska counties</p> <ul style="list-style-type: none"> • Arthur, Chase, Cherry, Clay, Colfax, Fillmore, Franklin, Frontier, Garden, Harlan, Hitchcock, Howard, Johnson, Kimball, Nemaha, Otoe, Pawnee, Pierce, Polk, Red Willow, Saline, Sherman, Thayer, Valley, Washington 	<p>Coverage Area: 8 Nebraska counties</p> <ul style="list-style-type: none"> • Banner, Butler, Dawes, Gosper, McPherson, Sheridan, Sioux, Wheeler
<p>Monthly Premium: \$138.50 (in addition to Part B premium)</p>	<p>Monthly Premium: \$21.80 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$2,500 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,000 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$10-\$35 for each primary care doctor visit • \$25 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$20-\$35 for each primary care doctor visit • \$35 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$350 per admission 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$195 each day, day(s) 1-5; \$0 each day, day(s) 6-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100
<p>Prescription Drug Coverage: Yes</p>	<p>Prescription Drug Coverage: Yes</p>
<p align="center">TODAY'S OPTIONS PREMIER POWERED BY CCRX (H5421-069)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p align="center">1-800-996-8867 ♦ www.todaysoptions.com</p>	<p align="center">TODAY'S OPTIONS VALUE POWERED BY CCRX (H5421-071)</p> <p align="center">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p align="center">1-800-996-8867 ♦ www.todaysoptions.com</p>
<p>Coverage Area: 12 Nebraska counties</p> <ul style="list-style-type: none"> • Adams, Antelope, Burt, Custer, Holt, Lincoln, Nance, Nuckolls, Richardson, Thurston, Webster, York 	<p>Coverage Area: 13 Nebraska counties</p> <ul style="list-style-type: none"> • Boone, Box Butte, Cheyenne, Dixon, Hayes, Hooker, Jefferson, Kearney, Keya Paha, Loup, Madison, Scotts Bluff, Stanton
<p>Monthly Premium: \$153.50 (in addition to Part B premium)</p>	<p>Monthly Premium: \$21.80 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$2,500 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,000 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$10-\$35 for each primary care doctor visit • \$25 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$20-\$35 for each primary care doctor visit • \$35 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$350 per admission 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$195 each day, day(s) 1-5; \$0 each day, day(s) 6-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100
<p>Prescription Drug Coverage: Yes</p>	<p>Prescription Drug Coverage: Yes</p>

<p style="text-align: center;">TODAY'S OPTIONS VALUE POWERED BY CCRX (H5421-072)</p> <p style="text-align: center;">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p style="text-align: center;">1-800-996-8867 ♦ www.todaysoptions.com</p>	<p style="text-align: center;">TODAY'S OPTIONS VALUE POWERED BY CCRX (H5421-074)</p> <p style="text-align: center;">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p style="text-align: center;">1-800-996-8867 ♦ www.todaysoptions.com</p>
<p>Coverage Area: 6 Nebraska counties</p> <ul style="list-style-type: none"> • Buffalo, Deuel, Logan, Morrill, Seward, Wayne 	<p>Coverage Area: 25 Nebraska counties</p> <ul style="list-style-type: none"> • Arthur, Chase, Cherry, Clay, Colfax, Fillmore, Franklin, Frontier, Garden, Harlan, Hitchcock, Howard, Johnson, Kimball, Nemaha, Otoe, Pawnee, Pierce, Polk, Red Willow, Saline, Sherman, Thayer, Valley, Washington
<p>Monthly Premium: \$36.70 (in addition to Part B premium)</p>	<p>Monthly Premium: \$71.70 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,000 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,000 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$20-\$35 for each primary care doctor visit • \$35 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$20-\$35 for each primary care doctor visit • \$35 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$195 each day, day(s) 1-5; \$0 each day, day(s) 6-90 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$195 each day, day(s) 1-5; \$0 each day, day(s) 6-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100
<p>Prescription Drug Coverage: Yes</p>	<p>Prescription Drug Coverage: Yes</p>
<p style="text-align: center;">TODAY'S OPTIONS VALUE POWERED BY CCRX (H5421-073)</p> <p style="text-align: center;">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p style="text-align: center;">1-800-996-8867 ♦ www.todaysoptions.com</p>	<p style="text-align: center;">TODAY'S OPTIONS VALUE POWERED BY CCRX (H5421-075)</p> <p style="text-align: center;">Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274</p> <p style="text-align: center;">1-800-996-8867 ♦ www.todaysoptions.com</p>
<p>Coverage Area: 29 Nebraska counties</p> <ul style="list-style-type: none"> • Blaine, Boyd, Brown, Cass, Cedar, Cuming, Dakota, Dawson, Dodge, Douglas, Dundy, Furnas, Gage, Garfield, Grant, Greeley, Hall, Hamilton, Keith, Knox, Lancaster, Merrick, Perkins, Phelps, Platte, Rock, Sarpy, Saunders, Thomas 	<p>Coverage Area: 12 Nebraska counties</p> <ul style="list-style-type: none"> • Adams, Antelope, Burt, Custer, Holt, Lincoln, Nance, Nuckolls, Richardson, Thurston, Webster, York
<p>Monthly Premium: \$51.70 (in addition to Part B premium)</p>	<p>Monthly Premium: \$86.70 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,000 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,000 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$20-\$35 for each primary care doctor visit • \$35 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$20-\$35 for each primary care doctor visit • \$35 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$195 each day, day(s) 1-5; \$0 each day, day(s) 6-90 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$195 each day, day(s) 1-5; \$0 each day, day(s) 6-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100
<p>Prescription Drug Coverage: Yes</p>	<p>Prescription Drug Coverage: Yes</p>

<p align="center">WELLCARE - CONCERT (H1340-014)</p> <p align="center">WellCare Health Plans 8735 Henderson Road; Tampa, FL 33634 1-866-238-9898 ♦ www.wellcarepffs.com</p>	<p align="center">WELLCARE - CONCERT (H1340-034)</p> <p align="center">WellCare Health Plans 8735 Henderson Road; Tampa, FL 33634 1-866-238-9898 ♦ www.wellcarepffs.com</p>
<p>Coverage Area: 4 Nebraska counties</p> <ul style="list-style-type: none"> • Butler, Dawes, Scotts Bluff, Sheridan 	<p>Coverage Area: 15 Nebraska counties</p> <ul style="list-style-type: none"> • Cass, Cedar, Cheyenne, Colfax, Cuming, Douglas, Fillmore, Furnas, Hamilton, Johnson, Lancaster, Merrick, Platte, Sarpy, Saunders
<p>Monthly Premium: \$0 (in addition to Part B premium)</p>	<p>Monthly Premium: \$29 (in addition to Part B premium)</p> <ul style="list-style-type: none"> • \$135 yearly deductible
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,750 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,750 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$15-\$35 for each primary care doctor visit • \$35 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$20-\$35 for each primary care doctor visit • \$35 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$175 each day, day(s) 1-6; \$0 each day, day(s) 7-90 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$250 each day, day(s) 1-5; \$0 each day, day(s) 6-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$128 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$128 each day, day(s) 21-100
<p>Prescription Drug Coverage: Yes</p>	<p>Prescription Drug Coverage: Yes</p>
<p align="center">WELLCARE - CONCERT (H1340-033)</p> <p align="center">WellCare Health Plans 8735 Henderson Road; Tampa, FL 33634 1-866-238-9898 ♦ www.wellcarepffs.com</p>	<p align="center">WELLCARE - MELODY (H1340-002)</p> <p align="center">WellCare Health Plans 8735 Henderson Road; Tampa, FL 33634 1-866-238-9898 ♦ www.wellcarepffs.com</p>
<p>Coverage Area: 15 Nebraska counties</p> <ul style="list-style-type: none"> • Boone, Box Butte, Buffalo, Cherry, Dakota, Dawson, Dixon, Gage, Jefferson, Kearney, Madison, Morrill, Phelps, Seward, Wayne 	<p>Coverage Area: 34 Nebraska counties</p> <ul style="list-style-type: none"> • Boone, Box Butte, Buffalo, Butler, Cass, Cedar, Cherry, Cheyenne, Colfax, Cuming, Dakota, Dawes, Dawson, Dixon, Douglas, Fillmore, Furnas, Gage, Hamilton, Jefferson, Johnson, Kearney, Lancaster, Madison, Merrick, Morrill, Phelps, Platte, Sarpy, Saunders, Scotts Bluff, Seward, Sheridan, Wayne
<p>Monthly Premium: \$0 (in addition to Part B premium)</p> <ul style="list-style-type: none"> • \$135 yearly deductible 	<p>Monthly Premium: \$0 (in addition to Part B premium)</p> <ul style="list-style-type: none"> • \$135 yearly deductible
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,750 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • Contact the plan for this information
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$20-\$35 for each primary care doctor visit • \$35 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • 20% of the cost of each primary care doctor visit • 20% of the cost of each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$250 each day, day(s) 1-5; \$0 each day, day(s) 6-90 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$1,024 deductible, day(s) 1-60; \$256 each day, day(s) 61-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$128 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$128 each day, day(s) 21-100
<p>Prescription Drug Coverage: Yes</p>	<p>Prescription Drug Coverage: No</p>

<p align="center">WELLCARE - PRELUDE (H1340-020)</p> <p align="center">WellCare Health Plans 8735 Henderson Road; Tampa, FL 33634 1-866-238-9898 ♦ www.wellcarepffs.com</p>	<p align="center">WELLCARE - SERENADE (H1340-037)</p> <p align="center">WellCare Health Plans 8735 Henderson Road; Tampa, FL 33634 1-866-238-9898 ♦ www.wellcarepffs.com</p>
<p>Coverage Area: 4 Nebraska counties</p> <ul style="list-style-type: none"> • Butler, Dawes, Scotts Bluff, Sheridan 	<p>Coverage Area: 4 Nebraska counties</p> <ul style="list-style-type: none"> • Butler, Dawes, Scotts Bluff, Sheridan
<p>Monthly Premium: \$0 (in addition to Part B premium)</p> <ul style="list-style-type: none"> • Plan will reduce Part B premium by up to \$25 each month 	<p>Monthly Premium: \$29 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,750 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,500 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$20-\$35 for each primary care doctor visit • \$35 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$5-\$25 for each primary care doctor visit • \$10 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$250 each day, day(s) 1-5; \$0 each day, day(s) 6-90 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$100 each day, day(s) 1-5; \$0 each day, day(s) 6-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$128 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$128 each day, day(s) 21-100
<p>Prescription Drug Coverage: No</p>	<p>Prescription Drug Coverage: No</p>
<p align="center">WELLCARE - QUARTET (H1340-041)</p> <p align="center">WellCare Health Plans 8735 Henderson Road; Tampa, FL 33634 1-866-238-9898 ♦ www.wellcarepffs.com</p>	<p align="center">WELLCARE - SERENADE (H1340-038)</p> <p align="center">WellCare Health Plans 8735 Henderson Road; Tampa, FL 33634 1-866-238-9898 ♦ www.wellcarepffs.com</p>
<p>Coverage Area: 4 Nebraska counties</p> <ul style="list-style-type: none"> • Butler, Dawes, Scotts Bluff, Sheridan 	<p>Coverage Area: 15 Nebraska counties</p> <ul style="list-style-type: none"> • Boone, Box Butte, Buffalo, Cherry, Dakota, Dawson, Dixon, Gage, Jefferson, Kearney, Madison, Morrill, Phelps, Seward, Wayne
<p>Monthly Premium: \$96 (in addition to Part B premium)</p>	<p>Monthly Premium: \$69 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$2,500 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,500 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$0-\$25 for each primary care doctor visit • \$15 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$10-\$25 for each primary care doctor visit • \$25 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$0 per admission 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$100 each day, day(s) 1-5; \$0 each day, day(s) 6-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 per admission 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$128 each day, day(s) 21-100
<p>Prescription Drug Coverage: No</p>	<p>Prescription Drug Coverage: No</p>

<p align="center">WELLCARE - SERENADE (H1340-039)</p> <p align="center">WellCare Health Plans 8735 Henderson Road; Tampa, FL 33634 1-866-238-9898 ♦ www.wellcarepffs.com</p>	<p align="center">WELLCARE - SONATA (H1340-025)</p> <p align="center">WellCare Health Plans 8735 Henderson Road; Tampa, FL 33634 1-866-238-9898 ♦ www.wellcarepffs.com</p>
<p>Coverage Area: 15 Nebraska counties</p> <ul style="list-style-type: none"> • Cass, Cedar, Cheyenne, Colfax, Cuming, Douglas, Fillmore, Furnas, Hamilton, Johnson, Lancaster, Merrick, Platte, Sarpy, Saunders 	<p>Coverage Area: 15 Nebraska counties</p> <ul style="list-style-type: none"> • Boone, Box Butte, Buffalo, Cherry, Dakota, Dawson, Dixon, Gage, Jefferson, Kearney, Madison, Morrill, Phelps, Seward, Wayne
<p>Monthly Premium: \$89 (in addition to Part B premium)</p>	<p>Monthly Premium: \$0 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,500 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$4,000 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$15-\$35 for each primary care doctor visit • \$35 for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$20-\$35 for each primary care doctor visit • \$35 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$125 each day, day(s) 1-5; \$0 each day, day(s) 6-90 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$200 each day, day(s) 1-6; \$0 each day, day(s) 7-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$128 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$128 each day, day(s) 21-100
<p>Prescription Drug Coverage: No</p>	<p>Prescription Drug Coverage: No</p>
<p align="center">WELLCARE - SONATA (H1340-024)</p> <p align="center">WellCare Health Plans 8735 Henderson Road; Tampa, FL 33634 1-866-238-9898 ♦ www.wellcarepffs.com</p>	<p align="center">WELLCARE - SONATA (H1340-026)</p> <p align="center">WellCare Health Plans 8735 Henderson Road; Tampa, FL 33634 1-866-238-9898 ♦ www.wellcarepffs.com</p>
<p>Coverage Area: 4 Nebraska counties</p> <ul style="list-style-type: none"> • Butler, Dawes, Scotts Bluff, Sheridan 	<p>Coverage Area: 15 Nebraska counties</p> <ul style="list-style-type: none"> • Cass, Cedar, Cheyenne, Colfax, Cuming, Douglas, Fillmore, Furnas, Hamilton, Johnson, Lancaster, Merrick, Platte, Sarpy, Saunders
<p>Monthly Premium: \$0 (in addition to Part B premium)</p>	<p>Monthly Premium: \$0 (in addition to Part B premium)</p> <ul style="list-style-type: none"> • \$135 yearly deductible
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$3,500 (all Medicare-covered services included) 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$4,000 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$10-\$25 for each primary care doctor visit • \$15 of the cost for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$20-\$35 for each primary care doctor visit • \$35 for each specialist doctor visit
<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$125 each day, day(s) 1-6; \$0 each day, day(s) 7-90 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$200 each day, day(s) 1-6; \$0 each day, day(s) 7-90
<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$128 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; 128 each day, day(s) 21-100
<p>Prescription Drug Coverage: No</p>	<p>Prescription Drug Coverage: No</p>

PREFERRED PROVIDER ORGANIZATION PLANS

A Preferred Provider Organization (PPO) Plan is a type of Medicare Advantage Plan offered in a local or regional area. You should contact the plan before you receive a service to find out if the service is covered and how much it costs.

Enrollees do not need to choose a primary care doctor. Beneficiaries can go to any Medicare-approved doctor or hospital. ***PPOs have network doctors and hospitals, but you can also use out-of-network providers for covered services, but you will pay more than for services in-network.*** No referrals are necessary.

PPOs limit your out-of-pocket costs but may have higher premiums than other Medicare Advantage Plans. Extra benefits are often offered for an extra premium.

Beneficiaries must continue to pay the Part A (if necessary) and Part B Medicare premium (\$96.40 in 2009).

PPO plans must accept all Medicare beneficiaries, even those on Medicare due to a disability, and cannot have a waiting period for pre-existing conditions. The exception to this rule are those with End-Stage Renal Disease.

Most PPO plans offer drug coverage. If the plan in which you are interested does not offer drug coverage, you can join a stand-alone prescription drug plan in your area.

Contact the individual plan for more information on any of the benefits listed on the following pages.

ADVANTRA PLATINUM PPO (H8393-001)

Local Preferred Provider Organization

Coventry Health and Life Insurance Company
13305 Birch Drive, Suite 100; Omaha, NE 68164

1-866-642-7245 ♦ www.advantraplans.com

Coverage Area: 12 Nebraska counties

- Burt, Butler, Cass, Colfax, Dodge, Douglas, Lancaster, Otoe, Sarpy, Saunders, Seward, Washington

Monthly Premium: \$70 (in addition to Part B premium)

Yearly Out-of-Pocket Maximum:

- \$2,000 (contact plan for services that apply)

Physician Office Visit:

- \$10 for each primary care doctor visit
- \$10 for each specialist doctor visit

Inpatient Hospital Care:

- \$180 each day, day(s) 1-10; \$0 each day, day(s) 11-90

Skilled Nursing Care:

- \$0 each day, day(s) 1-6; \$100 each day, day(s) 7-26; \$0 each day, day(s) 27-100

Prescription Drug Coverage: Yes

MEDICAREBLUE PPO (R5566-005)

Regional Preferred Provider Organization

Blue Cross Blue Shield Northern Plains Alliance
4301 Cambridge Road; Fort Worth, TX 76155

1-866-434-2038 ♦ www.yourmedicareolutions.com

Coverage Area: all Nebraska counties

Monthly Premium: \$58.60 (in addition to Part B premium)

Yearly Out-of-Pocket Maximum:

- \$3,350 (all plan services included)

Physician Office Visit:

- \$25 for each primary care doctor visit
- \$35 for each specialist doctor visit

Inpatient Hospital Care:

- \$225 each day, day(s) 1-3; \$0 each day, day(s) 4-90

Skilled Nursing Care:

- \$0 each day, day(s) 1-20; \$125 each day, day(s) 21-100

Prescription Drug Coverage: Yes

<p>TODAY'S OPTIONS PPO COMPLETE POWERED BY CCRX (H3437-003) <i>Local Preferred Provider Organization</i> Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274 1-866-422-1967 ♦ www.todaysoptions.com</p>	<p>TODAY'S OPTIONS PPO SELECT POWERED BY CCRX (H3437-002) <i>Local Preferred Provider Organization</i> Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274 1-866-422-1967 ♦ www.todaysoptions.com</p>
<p>Coverage Area: 3 Nebraska counties • Douglas, Sarpy, Washington</p>	<p>Coverage Area: 3 Nebraska counties • Douglas, Sarpy, Washington</p>
<p>Monthly Premium: \$0 (in addition to Part B premium)</p>	<p>Monthly Premium: \$90.60 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum: • Contact the plan for this information</p>	<p>Yearly Out-of-Pocket Maximum: • \$2,500 (all Medicare-covered services included)</p>
<p>Physician Office Visit: • 20% of the cost of each primary care doctor visit • 20% of the cost of each specialist doctor visit</p>	<p>Physician Office Visit: • \$10 for each primary care doctor visit • \$25 for each specialist doctor visit</p>
<p>Inpatient Hospital Care: • \$1,068 deductible, day(s) 1-60; \$267 each day, day(s) 61-90</p>	<p>Inpatient Hospital Care: • \$195 per admission</p>
<p>Skilled Nursing Care: • \$0 each day, day(s) 1-20; \$133.50 each day, day(s) 21-100</p>	<p>Skilled Nursing Care: • \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100</p>
<p>Prescription Drug Coverage: Yes</p>	<p>Prescription Drug Coverage: Yes</p>
<p>TODAY'S OPTIONS PPO SELECT (H3437-001) <i>Local Preferred Provider Organization</i> Pyramid Life Insurance Company P.O. Box 742528 Houston, TX 77274 1-866-422-1967 ♦ www.todaysoptions.com</p>	<p style="text-align: center;">NOTES</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
<p>Coverage Area: 3 Nebraska counties • Douglas, Sarpy, Washington</p>	
<p>Monthly Premium: \$59 (in addition to Part B premium)</p>	
<p>Yearly Out-of-Pocket Maximum: • \$2,500 (all Medicare-covered services included)</p>	
<p>Physician Office Visit: • \$10 for each primary care doctor visit • \$25 for each specialist doctor visit</p>	
<p>Inpatient Hospital Care: • \$195 per admission</p>	
<p>Skilled Nursing Care: • \$0 each day, day(s) 1-20; \$100 each day, day(s) 21-100</p>	
<p>Prescription Drug Coverage: No</p>	

MANAGED CARE PLANS

Managed Care Plans (HMO & POS) are a type of Medicare Advantage Plan. These plans are only offered in select Eastern Nebraska counties.

In most cases, enrollees must see a primary care doctor to get a referral before you see any other health care provider. If your doctor moves outside of your coverage area, your plan will notify you to choose another plan doctor.

HMOs have a network of providers. If you get health care outside the plan's network, you may have to pay the full cost of the services yourself.

If the plan has a Point-of-Service (POS) option, you can go out-of-network, but you will pay more than for services in-network.

Beneficiaries must continue to pay the Part A (if necessary) and Part B Medicare premium (\$96.40 in 2009).

Managed Care Plans must accept all Medicare beneficiaries, even those on Medicare due to a disability, and cannot have a waiting period for pre-existing conditions. The exception to this rule are those with End-Stage Renal Disease.

You must get prescription drug coverage from the plan. In Nebraska, all Managed Care Plans offer drug coverage

Contact the individual plan for more information on any of the benefits listed on the following pages.

AARP MEDICARE COMPLETE PLAN 1 (H2802-001) HMO

SecureHorizons by UnitedHealthcare
2717 North 118th Circle; Omaha, NE 68164

1-800-547-5514 ♦ www.aarpmedicarecomplete.com

Coverage Area: 1 Nebraska county
• Douglas

Monthly Premium: \$0 (in addition to Part B premium)

Yearly Out-of-Pocket Maximum:
• \$3,500 (contact plan for services that apply)

Physician Office Visit:
• \$10 for each primary care doctor visit
• \$30 for each specialist doctor visit

Inpatient Hospital Care:
• \$245 each day, day(s) 1-15; \$0 each day, day(s) 16-90

Skilled Nursing Care:
• \$110 each day, day(s) 1-26; \$0 each day, day(s) 27-100

Prescription Drug Coverage: Yes

ADVANTRA GOLD (H7149-002) Local HMO

Coventry Health and Life Insurance Company
13305 Birch Drive, Suite 100; Omaha, NE 68164

1-866-642-7245 ♦ www.advantraplans.com

Coverage Area: 12 Nebraska counties
• Burt, Butler, Cass, Colfax, Dodge, Douglas, Lancaster, Otoe, Sarpy, Saunders, Seward, Washington

Monthly Premium: \$38 (in addition to Part B premium)

Yearly Out-of-Pocket Maximum:
• \$3,000 (contact plan for services that apply)

Physician Office Visit:
• \$0 for each primary care doctor visit
• \$25 for each specialist doctor visit

Inpatient Hospital Care:
• \$225 each day, day(s) 1-10; \$0 each day, day(s) 11-90

Skilled Nursing Care:
• \$0 each day, day(s) 1-3; \$100 each day, day(s) 4-26;
\$0 each day, day(s) 27-100

Prescription Drug Coverage: Yes

SPECIAL NEEDS PLANS

In Nebraska, Medicare Special Needs Plans (SNP) are Medicare Advantage Plans that provide healthcare to three specific groups of people.

The first plan is available to individuals who have both Medicare and Medicaid. These plans provide access to coordinated, personalized care.

Beneficiaries who reside in a nursing home are also eligible to enroll in a SNP. The plan supplements nursing facilities services with an added layer of care, including access to a Nurse Practitioner.

Finally, people with long-term illnesses including, but not limited to, heart disease, asthma, high blood pressure, and diabetes may also enroll in a SNP.

<p>EVERCARE PLAN DH-POS (H2803-010) <i>Special Needs Plan for Medicare & Medicaid</i></p> <p>SecureHorizons by UnitedHealthcare 2717 North 118th Circle; Omaha, NE 68164 1-888-834-3721 ♦ www.evercarehealthplans.com</p>	<p>EVERCARE PLAN IH (H2802-005) <i>Special Needs Plan for Long-Term Care</i></p> <p>SecureHorizons by UnitedHealthcare 2717 North 118th Circle; Omaha, NE 68164 1-888-834-3721 ♦ www.evercarehealthplans.com</p>
<p>Coverage Area: 6 Nebraska counties</p> <ul style="list-style-type: none"> • Burt, Cass, Douglas, Otoe, Sarpy, Washington 	<p>Coverage Area: 2 Nebraska counties</p> <ul style="list-style-type: none"> • Douglas, Sarpy
<p>Monthly Premium:* \$0 to \$20.70 (in addition to Part B premium)</p> <p>*All cost sharing in this summary of benefits is based on your level of Medicaid eligibility.</p>	<p>Monthly Premium: \$24.80 (in addition to Part B premium)</p>
<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • Contact the plan for this information 	<p>Yearly Out-of-Pocket Maximum:</p> <ul style="list-style-type: none"> • \$2,400 (all Medicare-covered services included)
<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$0 for each primary care doctor visit • \$0 or 20% of the cost for each specialist doctor visit 	<p>Physician Office Visit:</p> <ul style="list-style-type: none"> • \$0 for each primary care doctor visit • \$15 for each specialist doctor visit
<p>Inpatient Hospital Care: \$0, <i>or</i></p> <ul style="list-style-type: none"> • \$1,068 deductible, day(s) 1-60; \$267 each day, day(s) 61-90 	<p>Inpatient Hospital Care:</p> <ul style="list-style-type: none"> • \$175 each day, day(s) 1-14; \$0 each day, day(s) 15-90
<p>Skilled Nursing Care: \$0, <i>or</i></p> <ul style="list-style-type: none"> • \$0 each day, day(s) 1-20; \$133.50 each day, day(s) 21-100 	<p>Skilled Nursing Care:</p> <ul style="list-style-type: none"> • \$0 per admission
<p>Prescription Drug Coverage: Yes</p>	<p>Prescription Drug Coverage: Yes</p>

MEDICARE MEDICAL SAVINGS ACCOUNTS

Medicare Medical Savings Accounts (MSAs) have two parts. The first part is a high-deductible Medicare Advantage Plan. The plan covers your healthcare costs once you meet a high yearly deductible, which varies by plan. The second part of a Medicare MSA Plan is a special type of savings account. Each year, Medicare deposits money into a bank account created by your plan. You can choose to use money from this account to pay your healthcare costs, even before you meet the deductible.

Only Medicare-covered services are counted toward your plan's deductible. You may use the money in your savings account for other expenses such as dental and vision, or even groceries and utilities, but these expenses are not counted toward your yearly deductible. If you use all the money in your account before your deductible is met, you will have to pay out-of-pocket for additional healthcare costs until your deductible is met. After you reach your deductible, your plan will cover all Medicare-covered services.

Only your Medicare Advantage Plan can make deposits to your savings account – you may not deposit your own money. The amount of your deposit can change each year and may also earn interest. Any money left in your account at the end of the year will remain in your account. If you stay with the Medicare MSA Plan the following year, the new deposit will be added to any leftover amount.

You have access to the money in your account through a special debit or credit card. When you have a medical expense, such as a fee for a doctor visit, you can pay for it using the card, and the money will come out of your account.

In general, if you join a Medicare MSA Plan, you do not need other health insurance, such as a Medigap policy. MSA plans do not cover Medicare Part D prescription drugs, so you would need to join a stand-alone prescription plan of your choice.

You may join a Medicare MSA Plan when you first become eligible for Medicare, whether by age or disability. A seven month initial enrollment period is granted to new Medicare enrollees that includes the three months before your first month of Medicare eligibility, your month of Medicare eligibility, and the three months after your first month of Medicare eligibility.

If you did not join when you were first eligible for Medicare, you can join between November 15 and December 31 each year. Your coverage will begin on January 1 of the following year. During this time, you may also choose to leave a Medicare MSA Plan.*

There is no monthly premium for MSAs other than the Part A (if necessary) and Part B Medicare premium (\$96.40 in 2009). Contact the individual plan for more information on any of the benefits listed on the following page.

** If you enroll in a Medicare MSA Plan for the first time and then change your mind, you can cancel your enrollment by December 15 of the same year. Contact the plan to cancel your enrollment.*

ADVANTRA SAVINGS - PLAN 1 (H7206-001)

First Health Life & Health Insurance Company
P.O. Box 690; Mahwah, NJ 07430

1-800-474-5993 ♦ www.advantrasavings.com

NOTES

Coverage area: 23 Nebraska counties

- Banner, Boone, Box Butte, Buffalo, Butler, Dawes, Dixon, Gosper, Hooker, Kearney, Keya Paha, Logan, Loup, McPherson, Madison, Phelps, Sarpy, Scotts Bluff, Seward, Sheridan, Stanton, Wayne, Wheeler

Monthly Premium: \$0 (in addition to Part B premium)

Yearly Deductible:

- \$2,700 for Medicare-covered services

MSA Deposited Funds:

- \$1,250 is deposited in your bank account by Medicare

ADVANTRA SAVINGS - PLAN 2 (H7206-002)

First Health Life & Health Insurance Company
P.O. Box 690; Mahwah, NJ 07430

1-800-474-5993 ♦ www.advantrasavings.com

Coverage area: 53 Nebraska counties

- Arthur, Blaine, Boyd, Brown, Cass, Cedar, Cherry, Cheyenne, Clay, Colfax, Cuming, Dakota, Dawson, Deuel, Dodge, Douglas, Dundy, Fillmore, Franklin, Frontier, Furnas, Gage, Garfield, Grant, Greeley, Hall, Hamilton, Hayes, Hitchcock, Howard, Jefferson, Johnson, Keith, Kimball, Knox, Lancaster, Merrick, Morrill, Otoe, Pawnee, Perkins, Pierce, Platte, Polk, Red Willow, Rock, Saline, Saunders, Sherman, Sioux, Thomas, Valley, Washington

Monthly Premium: \$0 (in addition to Part B premium)

Yearly Deductible:

- \$4,000 for Medicare-covered services

MSA Deposited Funds:

- \$1,570 is deposited in your bank account by Medicare