COMPANION CARE MEDICARE SUPPLEMENT PLAN NORTHERN REGION BENEFIT SUMMARY

(As of 1/1/18 - Based on Calendar Year)

| SERVICES | MEDICARE 2018 Benefits | COMPANIONCARE Based on 2018 Medicare Benefits |
|---|---|---|
| Inpatient Hospital (Part A) | Pays all but first \$1340 for 1 st 60 days | Pays \$1340 |
| | Pays all but \$335 a day for the 61 st – 90 th day Pays all but \$670 a day | Pays \$335 a day Pays \$670 a day |
| | Lifetime Reserve for | |
| | 91st to 150th day Pays nothing after Lifetime Reserve is used (refer to Evidence of Coverage) | Pays 100% after Medicare and Lifetime Reserve are exhausted up to 365 days per lifetime |
| Skilled Nursing Facilities | Pays 100% for 1 st 20 days | Pays nothing |
| (Must be approved | Dave all but \$167.50 a day | Days \$167.50 a day for |
| by Medicare) | Pays all but \$167.50 a day | Pays \$167.50 a day for |
| | for 21 st to 100 th day | 21st to 100th day |
| | Pays nothing after 100 th day | Pays nothing after 100 th day |
| Deductible (Part B) | \$183 Part B deductible per year | Pays \$183 |
| Basis of Payment (Part B) | 80% Medicare Approved (MA) charges after Part B deductible | Pays 20% MA charges Including 100% of Medicare Part B deductible |
| Medical Services (Part B) Doctor, x-ray, Appliances & Ambulance | 80% MA charges | Pays 20% MA charges |
| Lab | 100% MA charges | Pays nothing |
| Physical/Speech Therapy (Part B) | 80% MA charges up to the Medicare annual benefit amount | Pays 20% MA charges up to the Medicare annual benefit amount (PT & ST Combined) |
| Blood (Part B) | 80% MA charges after 3 pints | Pays 1st 3 pints un-replaced blood and 20% MA charges |

COMPANION CARE MEDICARE SUPPLEMENT PLAN

NORTHERN REGION BENEFIT SUMMARY (continued)

| | MEDICARE | COMPANIONCARE |
|---|--|---|
| SERVICES | 2018 Benefits | Based on 2018 |
| | | Medicare Benefits |
| Travel Coverage | Not covered | Pays 80% inpatient hospital, |
| (when outside the US | | surgery, anesthetist and in |
| for less than 6 consecutive | | hospital visits for medically |
| months) | | necessary services for 90 |
| | | days of treatment per |
| | | lifetime. For details |
| | | call Anthem customer |
| | | service |
| | | at 1-800-825-5541. |
| Outpatient | Medicare Part D Prescription drug plan | |
| Prescription Drugs | through Navitus Health Solutions | |
| Retail Pharmacy | 30 day supply \$9 Generic co-pay \$35 Brand co-pay | |
| | | |
| Mail Order | 90 day supply \$18 Generic | co-pay \$90 Brand co-pay |
| Due to Medicare | 90 day supply \$18 Generic | . , |
| Due to Medicare restrictions | Pharmacy benefits are adminis | stered through Navitus Health |
| Due to Medicare restrictions the following programs | Pharmacy benefits are adminis | stered through Navitus Health a Med D formulary. Some |
| Due to Medicare restrictions the following programs are not available with | Pharmacy benefits are administ Solutions Medicare Rx using exclusions and prior authorizati | stered through Navitus Health a Med D formulary. Some ons may apply. Members that |
| Due to Medicare restrictions the following programs are not available with Companion Care: | Pharmacy benefits are administrations Medicare Rx using exclusions and prior authorizations have questions regarding their | stered through Navitus Health a Med D formulary. Some ons may apply. Members that medication coverage can call |
| Due to Medicare restrictions the following programs are not available with Companion Care: \$0 generic copay at Costco | Pharmacy benefits are administrations Medicare Rx using exclusions and prior authorizations have questions regarding their Navitus Health Solutions Medicare | stered through Navitus Health a Med D formulary. Some ons may apply. Members that medication coverage can call care Rx at 1-866-270-3877 or |
| Due to Medicare restrictions the following programs are not available with Companion Care: | Pharmacy benefits are administrations Medicare Rx using exclusions and prior authorizations have questions regarding their | stered through Navitus Health a Med D formulary. Some ons may apply. Members that medication coverage can call care Rx at 1-866-270-3877 or |

MEDICARE

COMPANIONCARE

COMPANIONCARE IS a Medicare Supplement plan that pays for medically necessary services and procedures that are considered a Medicare Approved Expense. SISC will automatically enroll CompanionCare Members into Medicare Part D. No additional premium required. SISC plans are NOT subject to the "doughnut hole"

Eligibility: Member must be retired and enrolled in Medicare Part A (hospital) and Medicare Part B (medical)

coverage. Retirees under age 65 with Medicare for the disabled (Parts A & B) may enroll in

CompanionCare.

Enrollment: Enrollment forms and a copy of the Medicare card must be received by SISC 45 calendar days in

advance of requested effective date - NO exceptions. SISC will automatically enroll members in Medicare Part D for outpatient prescription medications. Members already enrolled in non-SISC

Medicare Part D plans will be automatically disenrolled from those plans.

Disenrollment: Disenrollment throughout the year requires submission of a disenrollment form to SISC with a 45

calendar day advance notice of requested effective date. During the annual Med D Open Enrollment members can enroll into Medicare Part D plans outside of SISC with a January 1 effective date. Enrollment in a Med D plan outside of SISC will terminate the SISC medical and Rx benefits.

Provider

Network: Physicians who accept Medicare Assignment

For additional Medicare benefit information, please go to www.medicare.gove or call 1-800-medicare (1-800-633-4227) For additional Navitus Medicare Rx prescription drug information, please go to www.navitus.com or call 1-866-270-3877

| Rate Effective October 1, 2018 | Total Cost Per Person | | |
|---|---------------------------|--|--|
| Retirees with Medicare A & B | Northern Region: \$386.00 | | |
| (SISC will enroll members in part D) | | | |
| A school district's geographic location will determine the applicable rate. | | | |
| Northern Region includes Monterey, Kings, Tulare, Inyo and all other counties to the north. | | | |