



TUFTS  Health Plan

 Medicare Preferred

## STEP 1: Choose your medical plan

With Tufts Medicare Preferred HMO plans, you can choose the plan that's right for you. You'll get more comprehensive coverage than Original Medicare alone—along with affordable copayments, no deductibles and Preferred Extras.

Plan Premiums & Benefits	Tufts Medicare Preferred HMO		
	HMO Basic	HMO Value	HMO Prime
<b>Monthly Medical Premium</b>			
Service Area <sup>1</sup>	\$20	\$62	\$92
Service Area <sup>2</sup>	\$20	\$78	\$116
<b>Deductibles</b>	No deductibles		
<b>Doctors Office Visits</b>			
Primary Care Physician <sup>3</sup>	\$20	\$15	\$10
Specialist	\$30	\$20	\$15
<b>Annual Out-of-Pocket Maximum</b>	\$3,400		
<b>Inpatient Hospital Coverage</b>	\$200 per day for days 1-10; \$0 per day after day 10	\$125 per day for days 1-5; \$0 per day after day 5	\$300 per year
<b>Outpatient Services/Surgery</b>	\$0 to \$150		\$0 to \$50
<b>Diagnostic Procedures, Tests &amp; Lab Services</b>	\$0 copay		
<b>Emergency Care</b>	\$50; coverage when you travel within the US and worldwide		
<b>Annual Routine Vision Exam</b>	\$30	\$20	\$15
<b>Annual Eyeglasses Benefit</b>	\$150 toward eyeglasses per year		
<b>Annual Routine Hearing Exam</b>	\$30	\$20	\$15
<b>Annual Fitness Benefit</b>	\$150 toward fitness club membership per year		

<sup>1</sup>Service Area includes Barnstable, Bristol, Hampden, Hampshire, Middlesex, Norfolk and Plymouth counties. If you live in one of the following zip codes, you live outside the service area and are not eligible to be a member: Bristol County: 02715, 02718, 02764, 02779, 02780, 02783; Plymouth County: 02344, 02346, 02347, 02348, 02349.

<sup>2</sup>Service Area includes Essex, Suffolk and Worcester counties.

<sup>3</sup>Members must choose a primary care physician and get a referral before seeing a specialist within the PCP's referral circle. A referral circle is a group of specialists, facilities and suppliers that are part of the PCP's contracting network. If you receive care out of this network, neither Medicare nor Tufts Medicare Preferred HMO will be responsible for the cost.

## STEP 2: Choose your prescription drug plan

With Tufts Medicare Preferred HMO, you've got the option of adding prescription drug coverage, with or without generic drug coverage in the gap.

Plan Premiums & Benefits	Tufts Medicare Preferred HMO Optional Prescription Drug Plans*	
	Rx Option	Rx Plus Option
Monthly Prescription Drug Plan Premium (in addition to your monthly medical premium)	\$33.70	\$52.80
Deductible	No deductibles	No deductibles
Drug Tiers: 30-day retail or 90-day mail order Copays		
Tier 1: Generic	\$10 / \$20	\$10 / \$20
Tier 2: Preferred Brand	\$42 / \$84	\$30 / \$60
Tier 3: Non-Preferred Brand	\$83 / \$166	\$70 / \$140
After combined yearly drug costs paid by you and Tufts Medicare Preferred reach \$2,830 and until your own payments reach \$4,550: 30-day retail or 90-day mail order copay	You pay 100%	Covers all generic (Tier 1) drugs. \$10 / \$20
After the Coverage Gap: 30-day retail or 90-day mail order Copays	Whichever is greater:	Whichever is greater:
Generic	\$2.50 / 5%	\$2.50 / 5%
Brand	\$6.30 / 5%	\$6.30 / 5%

\*If you join any of our three HMO plans, even medical only, you cannot join a separate prescription drug plan. If you want Medicare prescription drug coverage, you must purchase it through our plan. Rx Option and Rx Plus Option are qualified Medicare Part D prescription drug plans.

## STEP 3: *Determine your 2010 premium*

With Tufts Medicare Preferred HMO, you can select medical coverage only—or choose to add prescription drug coverage for as little as \$33.70 a month! When you select a medical plan with a prescription drug option, you are automatically enrolled in a qualified Medicare Part D prescription drug plan.

**It's easy to figure your monthly premium. Just follow these simple steps:**

1. Choose a medical plan
2. Choose a prescription drug plan
3. Add your medical and prescription drug plan premiums for your total monthly costs.

Your Medical Plan Premium*	Your Rx Premium	Your Combined Medical and Rx Plan Premium
\$	\$	\$

\* If you join any of our three HMO plan options, even medical only, you cannot join a separate prescription drug plan. If you want Medicare prescription drug coverage, you must purchase it through our plan. Both Tufts Medicare Preferred HMO Rx and Rx Plus options are qualified Medicare Part D prescription drug plans.

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## QUESTIONS?

Call 1-800-978-2222; TTY 1-888-899-8977\*

VISIT US AT: [tuftshealthplan.com/medicare](http://tuftshealthplan.com/medicare)

\*Monday – Friday, 8:00 a.m. – 8:00 p.m.

( From November 15 – March 1, available 7 days a week, 8:00 a.m. – 8:00 p.m. )

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Tufts Health Plan is a Medicare Advantage organization with a Medicare contract. The Medicare Advantage contract between Tufts Health Plan and the Centers for Medicare & Medicaid Services (CMS) is renewed annually. The benefits, premiums, copayments and service area offered by Tufts Medicare Preferred are subject to change on an annual basis. The availability of coverage beyond the end of the contract year is not guaranteed.

For full information on Tufts Medicare Preferred benefits, see the enclosed Summary of Benefits.

With every Medicare Advantage plan you must continue to pay your Medicare Part B premium if not otherwise paid for under Medicaid or by a third party.

This is an advertisement.