

GAIN THE EDGE

COVENTRY HEALTH CARE

Serving the Illinois and Missouri community since 1978

- Previously known as Group Health Plan (GHP); GHP became Coventry Health Care of Missouri in December 2011
- Offering Medicare Advantage plans since 1995
- Headquartered in the St. Louis, Missouri metro area to provide you with local support

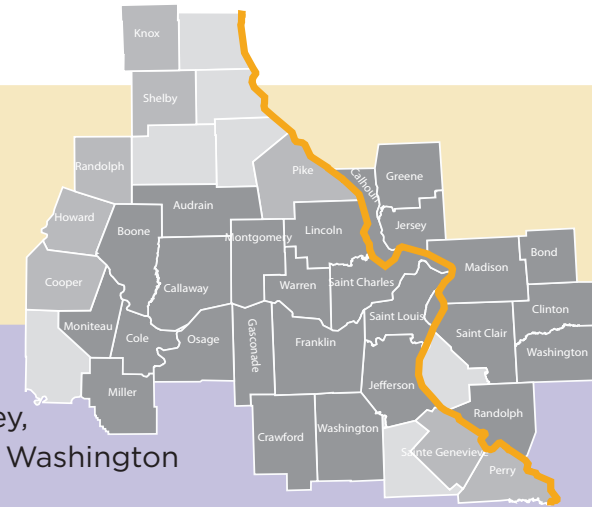
568,830



Medicare Eligibles



Service Area



ILLINOIS COUNTIES:

Bond, Calhoun, Clinton, Greene, Jersey, Madison, Monroe, Randolph, St. Clair, Washington

MISSOURI COUNTIES:

Audrain, Boone, Callaway, Cole, Cooper, Crawford, Franklin, Gasconade, Howard, Jefferson, Knox, Lincoln, Miller, Moniteau, Montgomery, Osage, Perry, Pike, Randolph, St. Charles, Ste. Genevieve, St. Louis, St. Louis (City), Shelby, Warren, Washington

Plan Highlights

NO DEDUCTIBLE available in ALL 2014 plans

Hearing Aids, Vision and Preventive Dental benefits available in MOST 2014 plans

Medicare/Medicaid Dual Eligible SNP available in MOST Missouri service areas - includes an OTC and **COMPREHENSIVE Dental Benefit**

\$0 preferred generics, \$0 and LOW-COST Diabetic supplies, insulin and medication benefits - in MOST 2014 Plans

NEW for 2014

- Expanded service area; Advantra PPO now available in ALL 2014 services areas, including Illinois
- \$0 copay for preferred generics - in most 2014 plans!
- New, lower-cost pricing for diabetic supplies, insulin and common diabetic prescription drugs in ALL 2014 Plans!

	Gold Advantage (HMO)	Advantra (PPO)	Coventry Total Care (HMO-POS)
Why YOU Should Sell This Plan	Our most popular product with a long history of client satisfaction – offers a robust network, modest copays and a very low MOOP	For your clients who appreciate the cost-savings of using In-Network providers, but also appreciate – and demand – the flexibility to see providers outside of the network	A small network that offers big cost-savings to clients that prefer the Mercy & SSM healthcare networks and facilities. POS allows the freedom and flexibility to see providers outside of the network
Monthly Premium	\$0	\$38	\$0
Maximum Out-of-Pocket	\$2,225	\$3,400 In-Network, \$5,100 OON Combined	\$2,200
Prescription Drugs Tier 1 - Preferred Generic Tier 2 - Non-Preferred Generic Tier 3 - Preferred Brand Tier 4 - Non-Preferred Brand Tier 5 - Specialty	Preferred Pharmacies/ Non-Preferred Pharmacies \$0/\$6 copay \$5/\$15 copay \$30/\$45 copay \$65/\$95 copay 33% coinsurance	Preferred Pharmacies/ Non-Preferred Pharmacies \$0/\$5 copay \$4/\$12 copay \$30/\$45 copay \$65/\$95 copay 33% coinsurance	Preferred Pharmacies/ Non-Preferred Pharmacies \$0/\$5 copay \$4/\$12 copay \$30/\$45 copay \$65/\$95 copay 33% coinsurance Gap Coverage - \$0 Tier 1 - Preferred Generics
Medicare Covered Services			
Inpatient Hospital	Days 1-6: \$315	Days 1-7: \$300	Days 1-8: \$275
PCP Visit	\$10 copay	\$20 copay	\$5 copay
Specialist Visit	\$40 copay	\$40 copay	\$35 copay
Outpatient Surgery	\$150 copay Ambulatory Surgical Center -OR- \$250 copay at an outpatient Hospital Surgical facility	\$250 copay Ambulatory Surgical Center -OR- \$300 copay at an outpatient Hospital Surgical facility	\$250 copay at Ambulatory Surgical Center -OR- outpatient Hospital Surgical facility
Value-Added Benefits			
Fitness Program	Healthways SilverSneakers®	Healthways SilverSneakers®	Healthways SilverSneakers®
Vision/Hearing	Eyewear/Hearing Aid allowance	Eyewear/Hearing Aid allowance	Eyewear/Hearing Aid allowance
Dental	Preventive Dental	Preventive Dental	Preventive Dental

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	Advantira Dual Eligible SNP (SNP)	Advantira Option 1 (HMO)	Advantira Option 2 (HMO-POS)
Why YOU Should Sell This Plan	Offers your Dual Eligible clients all of the benefits of Medicare and Medicaid plus Part D and comprehensive dental, OTC, vision and fitness benefits – all in ONE easy-to-use plan!	Your clients enjoy our largest network of providers at a modest monthly premium	Our largest network of providers at a higher premium than Advantira Option 1 – but with lower overall copays and a lower MOOP, plus the option to go OON
Monthly Premium	\$29.30*	\$39	\$99
Maximum Out-of-Pocket	\$6,700*	\$4,500	\$3,200
Prescription Drugs Tier 1 - Preferred Generic Tier 2 - Non-Preferred Generic Tier 3 - Preferred Brand Tier 4 - Non-Preferred Brand Tier 5 - Specialty	For generic drugs (including brand drugs treated as generic), either*: \$0, \$1.15, or \$2.55 For all other drugs, either*: \$0, \$3.50, or \$6.35	Preferred Pharmacies/ Non-Preferred Pharmacies \$0/\$5 copay \$4/\$12 copay \$30/\$45 copay \$65/\$95 copay 33% coinsurance	Preferred Pharmacies/ Non-Preferred Pharmacies \$4/\$8 copay \$8/\$15 copay \$30/\$45 copay \$65/\$95 copay 33% coinsurance
Medicare Covered Services			
Inpatient Hospital	\$0*	Days 1-5: \$335	Days 1-6: \$290
PCP Visit	\$0*	\$25 copay	\$20 copay
Specialist Visit	\$0*	\$50 copay	\$40 copay
Outpatient Surgery	\$0*	\$250 copay Ambulatory Surgical Center -OR- Hospital Surgical facility	\$200 copay Ambulatory Surgical Center -OR- outpatient Hospital Surgical facility
Value-Added Benefits			
Fitness Program	Healthways SilverSneakers®	Healthways SilverSneakers®	Healthways SilverSneakers®
Vision/Hearing	Eyewear/Hearing Aid allowance	Eyewear/Hearing Aid allowance	Eyewear/Hearing Aid allowance
Dental	Preventive AND Comprehensive Dental	Preventive Dental	N/A

*Depending on enrollee's level of Medicaid eligibility, they may not have any cost cost-sharing responsibility for original Medicare services.

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