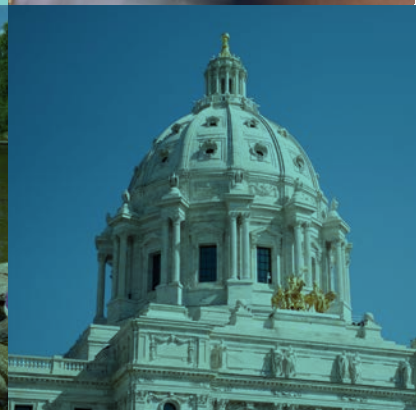




INDIVIDUAL & FAMILY PLANS

Sensible. Stable. Secure.



MEDICA'S WIDE VARIETY OF PLANS OFFER STABILITY FOR YOU AND YOUR FAMILY.

Choosing a health insurance plan is important. And that goes double for family and individual coverage. It's a choice you want to make sensibly. So you want a plan that fits you and your family's lifestyle perfectly. Here in Minnesota, you're in luck. **Say "hello" to Medica.**

With Medica, you choose from a wide variety of plans, to find the one that works for your needs. And just like your favorite pair of shoes – a Medica plan feels right, fits good. And that's the way it should be. Medica plans are available as a one-person or family plan through MNsure, or directly from Medica. Your insurance agent can assist you in either situation.

Take a look through our entire portfolio of Minnesota offerings—you'll discover that you can have it all with Medica: secure coverage for you and your family.

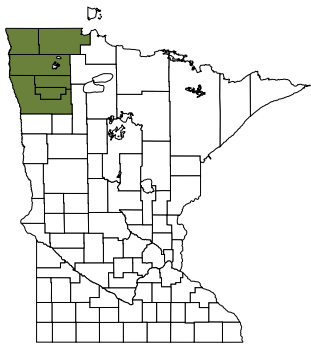
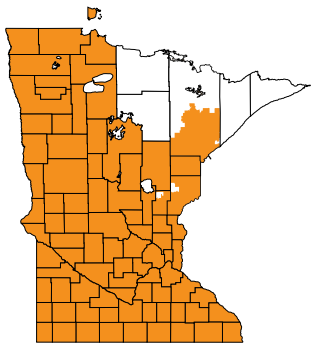
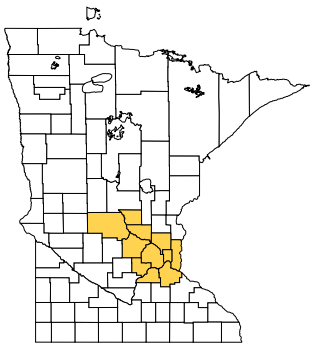
HERE'S HOW TO DO IT.

1. **Choose your network.** Decide who and where your care comes from. You have the option to choose from a broad network that will give you access to the largest system of providers. Or you may be able to choose a large care system-based network that will provide you with significant cost savings. Note that not all networks are available in all areas.
2. **Choose your plan.** Decide if you want a copay plus, copay, or health savings account (HSA) compatible plan. Then select the metal level you prefer: gold, silver or bronze. A catastrophic plan may also be available for those who qualify.
3. **Choose individual or family coverage.** Whether you need coverage for yourself or the whole family, we've got you covered. Plans are available for single or family coverage for ages 0 through 64.
4. **Calculate your monthly premium.** Visit our quoting and enrollment tool at personalplans.medica.com, call Medica Sales at **1-800-670-5935** or call your Medica insurance agent.



MINNESOTA NETWORKS:

CHOOSE WHO AND WHERE YOUR CARE COMES FROM

NETWORK	ALTRU NETWORK Altru Prime by Medica SM	APPLAUSE NETWORK Medica [®] Applause [®]	CHOICE NETWORK Medica Individual Choice SM
Availability	Available to individuals and families living in northwest Minnesota. Must be a resident of Kittson, Lake, Marshall, Pennington, Polk, Red Lake, or Roseau county.	Available to individuals and families living throughout most of Minnesota. Some counties are excluded.	Available to individuals and families living in the Twin Cities metro. Must be a resident of Anoka, Benton, Carver, Dakota, Hennepin, Ramsey, Scott, Sherburne, Stearns, Washington or Wright county.
			
Network size	Large care system-based provider network	Broad provider network	Broad provider network
Details	<p>Access to more than 30 primary and specialty clinics, 13 hospitals, and a large network of convenience care, urgent care and outpatient centers in northwest Minnesota and northeast North Dakota. Including:</p> <ul style="list-style-type: none"> • Altru Hospital • Riverview Hospital • Kittson Memorial Hospital • Lakewood Health Center 	<p>Access to one of our largest networks: nearly 27,600 providers of all types at more than 5,500 offices, clinics and hospitals in Minnesota, North Dakota, South Dakota and western Wisconsin.</p> <p>Access to numerous independent clinics and the following Minnesota health care systems:</p> <ul style="list-style-type: none"> • Essentia Health • CentraCare Health • Fairview Health Services • HealthEast Care System • Hennepin County Medical Center • Mayo Clinic Health System* • North Memorial Health Care • Ridgeview Medical Center 	<p>Access to our largest network: nearly 33,000 providers of all types at more than 6,000 offices, clinics and hospitals in Minnesota, North Dakota, South Dakota and western Wisconsin.</p> <p>Access to numerous independent clinics and the following Minnesota health care systems:</p> <ul style="list-style-type: none"> • Allina Health • CentraCare Health • Essentia Health • Fairview Health Services • HealthEast Care System • Hennepin County Medical Center • Integrity Health Network • Mayo Clinic Health System* • North Memorial Health Care • Park Nicollet Health Services • Ridgeview Medical Center • St. Luke's Care System

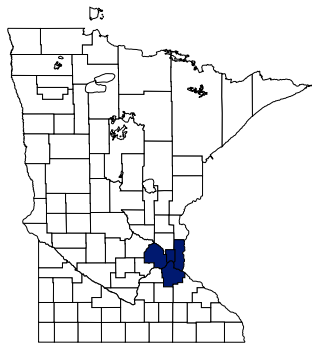
* Does not include the Mayo Clinic and Hospitals in Rochester.

To search and compare networks, visit medica.com/ifbfindadoctor.

HEALTHEAST NETWORK

Inspiration Health by HealthEast
and MedicaSM

Available to individuals and families living in the Twin Cities east metro. Must be a resident of Dakota, Hennepin, Ramsey, or Washington county.



Large care system-based provider network

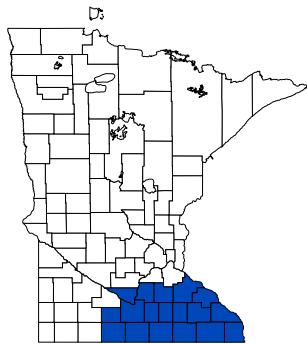
Access to more than 14 primary and specialty care clinic locations, and 4 hospitals, including:

- Bethesda Hospital
- St. John's Hospital
- St. Joseph's Hospital
- Woodwinds Health Campus

MAYO CLINIC NETWORK

Medica with Mayo Clinic

Available to individual and families living in southern Minnesota. Must be a resident of Blue Earth, Dodge, Faribault, Fillmore, Freeborn, Goodhue, Houston, Le Sueur, Martin, Mower, Nicollet, Olmsted, Rice, Steele, Wabasha, Waseca, Watonwan, or Winona county.



Large care system-based provider network

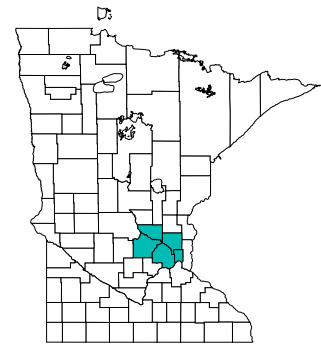
Access to more than 100 primary and specialty clinics and 25 hospitals including:

- Mayo Clinic Hospital, Saint Mary's Campus
- Mayo Clinic Hospital, Methodist Campus
- Northfield Hospital
- Winona Health Hospital

NORTH MEMORIAL NETWORK

North Memorial Acclaim by MedicaSM

Available to individuals and families living in the Twin Cities north metro. Must be a resident of Anoka, Hennepin, Ramsey, Sherburne, or Wright county.



Large care system-based provider network

Access to more than 900 specialists and primary care practitioners at 15 primary care clinic locations, two hospitals and a metrowide network of specialty, urgent and urgency care clinics and outpatient centers.

- Maple Grove Hospital
- North Memorial Medical Center
- University of Minnesota Masonic Children's Hospital

TRAVELING? NO PROBLEM.

If you travel outside Medica's service area** you can access your network benefits when you visit a provider in our Travel Program. Our Travel Program gives you nationwide access to more than 4,500 hospitals, 80,000 care facilities and 700,000 providers, through Multiplan's PHCS Health Direction's network. To find Travel Program providers, visit medica.com/ifbfindadoctor and select Travel Program.

**Medica service area includes; Minnesota, North Dakota, South Dakota and western Wisconsin

MINNESOTA COPAY PLUS PLANS

Individual & Family

NETWORK BENEFITS	GOLD Copay Plus	SILVER Copay Plus
Deductible	Per member: \$1,000 Family: \$3,000	Per member: \$2,500 Family: \$7,500
Out-of-pocket maximum	Per member: \$4,000 Family: \$8,000	Per member: \$6,000 Family: \$12,000
Family plan deductible details	Embedded individual deductible	Embedded individual deductible
Preventive care	100% coverage (deductible does not apply)	100% coverage (deductible does not apply)
Office and urgent care visits Lab and X-ray services	\$30 copay	\$60 copay
Prescription drugs (Preferred Drug List)	Tier 1 drugs: \$5 copay Tier 2 drugs: \$35 copay Tier 3 drugs: \$150 copay	Tier 1 drugs: \$10 copay Tier 2 drugs: \$60 copay Tier 3 drugs: \$200 copay
Convenience care visits	\$10 copay for preferred providers \$20 copay for other providers	\$10 copay for preferred providers \$20 copay for other providers
Emergency room (Facility charge only)	\$150 copay	\$250 copay
Hospital services (Facility charge only)	\$250 copay per day for the first five days; then 100% coverage (deductible does not apply). Copay applies to facility charges only; professional fees apply toward deductible.	\$400 copay per day for the first five days; then 100% coverage (deductible does not apply). Copay applies to facility charges only; professional fees apply toward deductible.
Enhanced imaging services (e.g. MRI, PET scan)	\$150 copay per service. Copay applies to facility charges only; professional fees apply toward deductible.	\$250 copay per service. Copay applies to facility charges only; professional fees apply toward deductible.
Maternity	Prenatal care: 100% coverage (deductible does not apply) Labor, delivery and postpartum care: 75% coverage after deductible	Prenatal care: 100% coverage (deductible does not apply) Labor, delivery and postpartum care: 65% coverage after deductible
Ambulance Surgery Home health care Other eligible health care services	75% coverage after deductible	65% coverage after deductible

MINNESOTA COPAY PLANS

Individual & Family

NETWORK BENEFITS	GOLD Copay	GOLD Copay 100	SILVER Copay	BRONZE Copay
Deductible	Per member: \$300 Family: \$900	Per member: \$2,400 Family: \$7,200	Per member: \$2,600 Family: \$7,800	Per member: \$6,850 Family: \$13,700
Out-of-pocket maximum	Per member: \$5,000 Family: \$10,000	Per member: \$2,400 Family: \$7,200	Per member: \$5,750 Family: \$11,500	Per member: \$6,850 Family: \$13,700
Family plan deductible details	Embedded individual deductible	Embedded individual deductible	Embedded individual deductible	Embedded individual deductible
Preventive care	100% coverage (deductible does not apply)	100% coverage (deductible does not apply)	100% coverage (deductible does not apply)	100% coverage (deductible does not apply)
Office and urgent care visits	\$30 copay	\$30 copay	\$30 copay	\$100 copay
Prescription drugs (Preferred Drug List)	Tier 1 drugs: \$10 copay Tier 2 drugs: 70% coverage after deductible Tier 3 drugs: 50% coverage after deductible	Tier 1 drugs: \$10 copay Tier 2 drugs: 100% coverage after deductible Tier 3 drugs: 100% coverage after deductible	Tier 1 drugs: \$10 copay Tier 2 drugs: 60% coverage after deductible Tier 3 drugs: 40% coverage after deductible	Tier 1 drugs: \$20 copay Tier 2 drugs: 100% coverage after deductible Tier 3 drugs: 100% coverage after deductible
Convenience care visits	\$10 copay for preferred providers \$20 copay for other providers	\$10 copay for preferred providers \$20 copay for other providers	\$10 copay for preferred providers \$20 copay for other providers	\$10 copay for preferred providers \$20 copay for other providers
Emergency room Hospital services Enhanced imaging services (e.g. MRI, PET scan) Ambulance Surgery Home health care Lab and X-ray services Other eligible health care services	70% coverage after deductible	100% coverage after deductible	60% coverage after deductible	100% coverage after deductible
Maternity	Prenatal care: 100% coverage (deductible does not apply) Labor, delivery and postpartum care: 70% coverage after deductible	Prenatal care: 100% coverage (deductible does not apply) Labor, delivery and postpartum care: 100% coverage after deductible	Prenatal care: 100% coverage (deductible does not apply) Labor, delivery and postpartum care: 60% coverage after deductible	Prenatal care: 100% coverage (deductible does not apply) Labor, delivery and postpartum care: 100% coverage after deductible

YOUR PREFERRED CONVENIENCE CARE PROVIDERS

You can save time and money when you visit a convenience care clinic for your health care needs. Convenience care clinics provide same-days services, often without an appointment and even on evenings and weekends. So you can be in, out and on with your day before you know it! And when you visit a convenience care clinic located inside your local Target store you'll pay only a \$10 copay!

LIVE IN SOUTHERN MINNESOTA?

In addition to convenience care clinics located inside your local Target store, as Medica with Mayo Clinic member you will also only pay only a \$10 copay when you visit a Mayo Clinic or Mayo Clinic Health System Express Care Clinic.

Mayo Express Care clinics are walk-in clinics that offer quick and convenient treatment when you need it. No appointment necessary!

NOTE: Preferred convenience care benefit is not available with HSA-compatible plans or the Altru Prime by Medica product.



MINNESOTA HSA – COMPATIBLE PLANS

Individual & Family

NETWORK BENEFITS	GOLD HSA	SILVER HSA	BRONZE HSA
Deductible	Individual: \$1,300 Family: \$2,600	Individual: \$1,300 Family: \$2,600	Per member: \$6,300 Family: \$12,700
Out-of-pocket maximum	Individual: \$2,350 Family: \$4,500	Per member: \$5,450 Family: \$10,000	Per member: \$6,300 Family: \$12,700
Family plan deductible details	Non-embedded individual deductible	Non-embedded individual deductible	Embedded individual deductible
Preventive care	100% coverage (deductible does not apply)	100% coverage (deductible does not apply)	100% coverage (deductible does not apply)
Office visit	70% coverage after deductible	60% coverage after deductible	100% coverage after deductible
Prescription drugs (Preferred Drug List)	Tier 1 drugs: 70% coverage after deductible Tier 2 drugs: 70% coverage after deductible Tier 3 drugs: 70% coverage after deductible	Tier 1 drugs: 60% coverage after deductible Tier 2 drugs: 60% coverage after deductible Tier 3 drugs: 60% coverage after deductible	Tier 1 drugs: 100% coverage after deductible Tier 2 drugs: 100% coverage after deductible Tier 3 drugs: 100% coverage after deductible
Convenience care visits Emergency room Hospital services Enhanced imaging services (e.g. MRI, PET scan) Ambulance Surgery Home health care Lab and X-ray services Other eligible health care services	70% coverage after deductible	60% coverage after deductible	100% coverage after deductible
Maternity	Prenatal care: 100% coverage (deductible does not apply) Labor, delivery and postpartum care: 70% coverage after deductible	Prenatal care: 100% coverage (deductible does not apply) Labor, delivery and postpartum care: 60% coverage after deductible	Prenatal care: 100% coverage (deductible does not apply) Labor, delivery and postpartum care: 100% coverage after deductible

MINNESOTA CATASTROPHIC

Individuals & Families Under Age 30

NETWORK BENEFITS	CATASTROPHIC
Deductible	Per member: \$6,850 Family: \$13,700
Out-of-pocket maximum	Per member: \$6,850 Family: \$13,700
Family plan deductible details	Embedded individual deductible
Preventive care	100% coverage (deductible does not apply)
Primary care office visits	\$30 copay first 3* visits per person per calendar year. After 3rd, 100% coverage after deductible
Prescription drugs (Preferred Drug List)	Tier 1 drugs: 100% coverage after deductible Tier 2 drugs: 100% coverage after deductible Tier 3 drugs: 100% coverage after deductible
Convenience care visits	\$10 copay for preferred providers \$20 copay for other providers Limited to first 3* visits per person per calendar year. After 3rd visit, 100% coverage after deductible
Enhanced imaging services (e.g. MRI, PET scan) Ambulance Surgery Home health care Lab and X-ray services Emergency room Hospital services Other eligible health care services	100% coverage after deductible
Maternity	Prenatal care: 100% coverage (deductible does not apply) Labor, delivery and postpartum care: 100% coverage after deductible
Details	* Primary and convenience care subject to combined 3 visit maximum per person per calendar year.

THESE VALUE EXTRAS ARE STANDARD WITH ANY PLAN YOU CHOOSE.

HealthAdvocate[™] (Medica Exclusive*)

Your Health Care Lifeline

Need help navigating the world of health insurance and medical care? Health Advocate is there for you 24/7. Get help making appointments with hard-to-reach doctors, resolving medical claims and getting answers to questions about medical treatment. You can even get help with health care issues facing your parents and parents-in-law. Health Advocate is an independent and confidential service.

24-Hour NurseLine[™]

You and your family have a place to turn for trusted advice and information when you need it most. Highly trained nurses are available 24/7 to help answer your questions about symptoms, medications and health conditions, and offer self-care tips for non-urgent concerns.

HEALTHY LIVING[®] with MEDICA[®] (Medica Exclusive*)

Daily Health Rewarded

Personalized health and well-being programs, gym membership discounts, special offers for personal trainer sessions, and rewards for making healthy choices – Healthy Living offers all this and more! It’s a web-based tool whose two-week programs will motivate and support you to make the changes you want in your health and life — get fit, eat healthier, manage stress, sleep better and find direction for your life. Earn points as you participate that you can redeem for discounts, be entered into raffles or you can use to donate to charities.



24/7 Online Care

You'll have access to quick, convenient online care through virtuwell. Available anytime, anywhere from your computer or mobile device virtuwell can treat over 50 common conditions. Get a diagnosis, treatment plan and prescription (if needed) often in less than 30 minute so you or your family can get better faster.

*We're proud to be the only health insurer in Minnesota offering unlimited access to these value extras at no charge to members!

2016 OUT-OF-NETWORK DETAILS

OUT-OF-NETWORK BENEFITS	COPAY PLUS, COPAY, HSA – COMPATIBLE AND CATASTROPHIC PLANS
Deductible	Individual: \$10,000 Family: \$20,000
Out-of-pocket maximum	There is no maximum for out-of-network services
Benefit coverage	50% coverage after deductible
Other Details	Certain services may be excluded or limited. Please see the plan's policy on medica.com for details.

If you choose to receive services or supplies from an out-of-network provider, you are responsible for any differences between Medica's non-network reimbursement amounts (generally based on a fee schedule) and the charges billed by the non-network provider. That means your out-of-pocket costs can be much higher.



OTHER IMPORTANT INFORMATION

Pediatric Dental

These plans do not include pediatric dental services. Pediatric dental is an essential health benefit that can be purchased as a stand-alone product through Delta Dental®. For more information visit deltadentalmn.org/mnindividualpediatric.

MNsure and Cost-Sharing Reduction Plans

You may be able to receive help paying your health insurance premium or qualify for plans with reduced deductibles and copays. You can get this assistance if you get health insurance through MNsure, your income is below a certain level, and you choose a health plan from the Silver plan category. Reduced cost sharing is not available with a Catastrophic plan. If you're a member of a federally recognized tribe, you may qualify for additional cost-sharing benefits. To see if you're eligible, please visit mnsure.org.

Deductible Details

The deductible and out-of-pocket maximum are subject to a "cost of living" increase on a yearly basis. This increase is tied to the Consumer Price Index and/or may result from adjustments needed to keep plans within the range for a given metal level; metal levels (e.g., Gold, Silver, Bronze) must always be in compliance with the Affordable Care Act (ACA) for Qualified Health Plans (QHPs). On a family plan, the deductible will be embedded or non-embedded. On family plans with non-embedded deductibles, everyone shares one deductible. The deductible can be met by any combination of family members. On family plans with embedded deductibles, each member has their own individual deductible. Any deductible amount paid by an individual will apply to the family deductible amount – but no individual is required to pay more than their individual deductible amount.

Preferred Drug List

To help keep your share of the costs at their lowest, Medica's plans cover drugs on our Preferred Drug List. This list is comprised of drugs that provide the most value and have proven safety and effectiveness. To see what drugs are covered, please visit medica.com/ifbpharmacy.

Health Management Programs

These plans include programs to help individuals with certain health conditions manage their overall health care and treatment. Find more information about the programs and services available by visiting medica.com.

Applying for Coverage

You can only enroll in a Medica plan during the annual open enrollment period or if you have a life event that qualifies you for special enrollment. For special enrollment, generally you have 60 days from the date of the event to apply for new coverage. Visit medica.com for more information.

Prior Approvals and Excluded Services

Some services and procedures require prior approval from Medica before they are covered. Services not covered include, but are not limited to, custodial care, adult eyewear, most dental services, cosmetic services, refractive eye surgery, those received while on military duty, and services that are investigational or not medically necessary. For a complete list, see a policy available on medica.com or call **1-800-670-5935**.

Understanding Benefits and Coverage Details

This brochure is a brief overview of the plans. All plans have no in-network lifetime maximum. For complete benefit details, limitations, and exclusions please see a policy. This can be found by visiting medica.com or request a paper copy by calling **1-800-670-5935**.

Medica Privacy Notice

Medica takes its responsibility of protecting your personal information seriously. Where possible, Medica de-identifies or encrypts personal information. We use and disclose personal information only to the extent necessary to conduct treatment, payment and health care operations, or to comply with legal, regulatory or accreditation requirements. Medica's full Privacy Notice is available upon request by calling **1-800-670-5935** or by going to medica.com.



GOT QUESTIONS? CONTACT US.

Call **952-992-2080** or **1-800-670-5935**

Monday-Thursday 8 a.m. to 5 p.m. and Fridays 9 a.m. to 5 p.m.

1-800-855-2880 (National Relay Center)

TTY users, please call the National Relay Center and ask for the number listed above.

Visit us on the web: **medica.com**

Email: **medicaindividualproducts@medica.com**

Connect with **Medica4Me**  

See us at **www.youtube.com/medica4me**



Medica is a Qualified Health Plan issuer in the MNSure Health Insurance Marketplace.

Medica does not discriminate on the basis of race, color, national origin, disability, age, sex, gender identity, sexual orientation, or health status in the administration of the plan, including enrollment and benefit determinations.

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Notice concerning policyholder rights in an insolvency under the Minnesota Life and Health Insurance Guaranty Association Law.

If the insurer that issued your life, annuity, or health insurance policy becomes impaired or insolvent, you are entitled to compensation for your policy from the assets of that insurer. The amount you recover will depend on the financial condition of the insurer. In addition, residents of Minnesota who purchase life insurance, annuities, or health insurance from insurance companies authorized to do business in Minnesota are protected, subject to limits and exclusions, in the event the insurer becomes financially impaired or insolvent. This protection is provided by the Minnesota Life and Health Insurance Guaranty Association.

Minnesota Life and Health Insurance
Guaranty Association
4760 White Bear Parkway, Suite 101
White Bear Lake, MN 55110
Telephone: 651-407-3149
Fax: 651-407-3150

The maximum amount the guaranty association will pay for all policies issued on one life by the same insurer is limited to \$500,000. Subject to this \$500,000 limit, the guaranty association will pay up to \$500,000 in life insurance death benefits, \$130,000 in net cash surrender and net cash withdrawal values for life insurance, \$500,000 in health insurance benefits, including any net cash surrender and net cash withdrawal values, \$250,000 in the present value of annuity benefits including net cash surrender and net cash withdrawal values, \$410,000 in present value of annuity benefits for annuities which are part of a structured settlement or for annuities in regard to which periodic annuity benefits, for a period of not less than the annuitant's lifetime or for a period certain of not less than ten years, have begun to be paid on or before the date of impairment or insolvency, or if no coverage limit has been specified for a covered policy or benefit, the coverage limit shall be \$500,000 in present value. Unallocated annuity contracts issued to retirement plans, other than defined benefit plans, established under section 401, 403(b), or 457 of the Internal Revenue Code of 1986, as amended through December 31, 1992, are covered up to \$250,000 in net cash surrender and net cash withdrawal values, for Minnesota residents covered by the plan provided, however, that the association shall not be responsible for more than \$10,000,000 in claims from all Minnesota residents covered by the plan. If total claims exceed \$10,000,000, the \$10,000,000 shall be prorated among all claimants. These are the maximum claim amounts. Coverage by the guaranty association is also subject to other substantial limitations and exclusions and requires continued residency in Minnesota. If your claim exceeds the guaranty association's limits, you may still recover a part or all of that amount from the proceeds of the liquidation of the insolvent insurer, if any exist. Funds to pay claims may not be immediately available. The guaranty association assesses insurers licensed to sell life and health insurance in Minnesota after the insolvency occurs. Claims are paid from this assessment.

The coverage provided by the Guaranty Association is not a substitute for using care in selecting insurance companies that are well managed and financially stable. In selecting an insurance company or policy, you should not rely on coverage by the Guaranty Association. This notice is required by Minnesota state law to advise policyholders of life, annuity, or health insurance policies of their rights in the event their insurance carrier becomes financially insolvent. This notice in no way implies that the company currently has any type of financial problems. All life, annuity, and health insurance policies are required to provide this notice.

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