

2010 Plan Benefits Guide

Unison Advantage[®] (HMO)

Pennsylvania

Unison  *Advantage*[®]

A healthier tomorrow begins with you.SM

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A healthier tomorrow begins with you.SM

Unison Advantage[®] Member Services

1-800-290-4009
(hearing impaired: 711)

Call seven days a week from 8 a.m. to 8 p.m.
From March 2 through November 14, you may receive our
messaging service on weekends and holidays.

Or visit us online: www.unisonhealthplan.com





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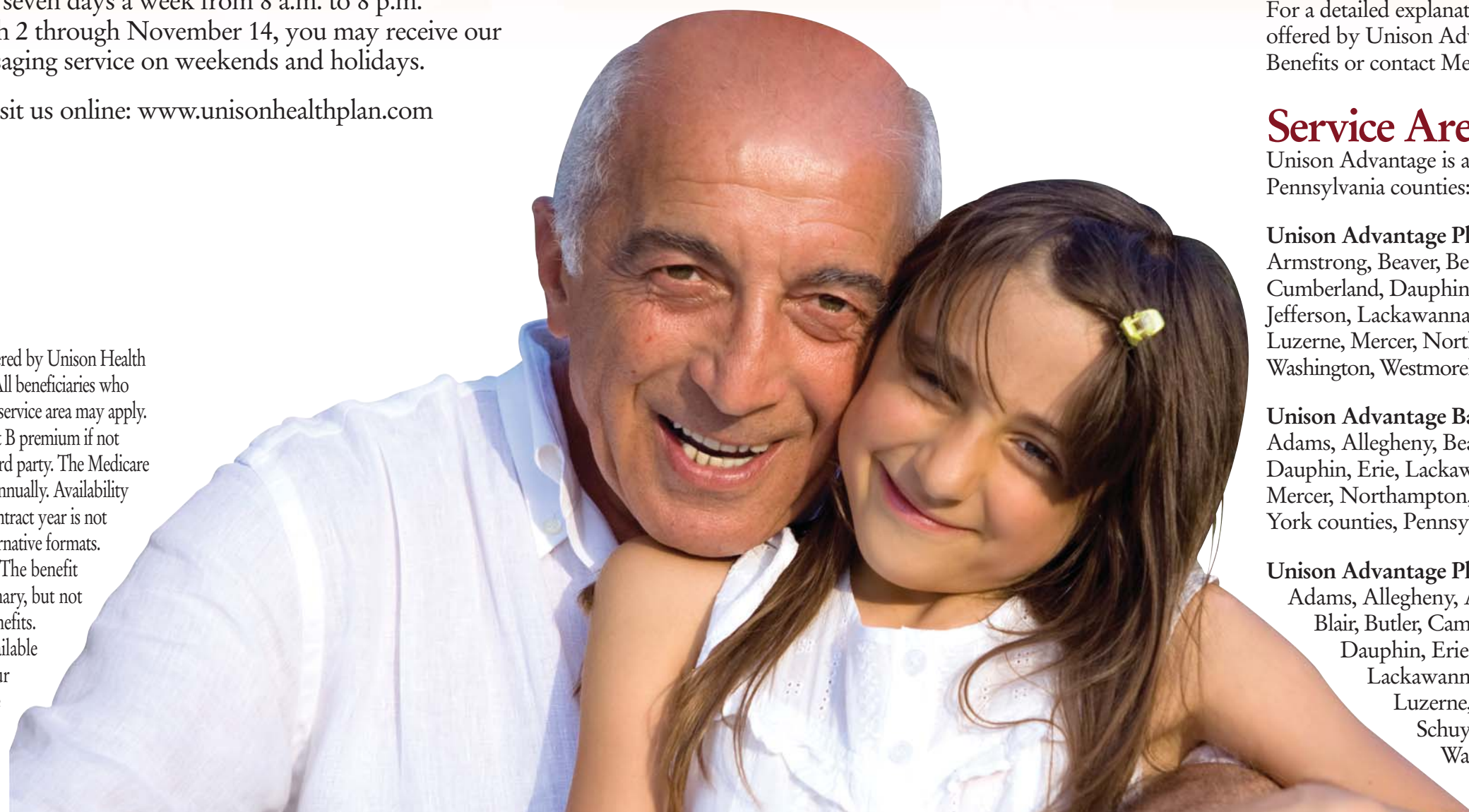
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Unison Advantage[®] (HMO) products are offered by Unison Health Plan, a health plan with a Medicare contract. All beneficiaries who have Medicare (Parts A and B) and live in the service area may apply. You must continue to pay your Medicare Part B premium if not otherwise paid for by Medicaid or another third party. The Medicare health plan's contract with CMS is renewed annually. Availability of coverage beyond the end of the current contract year is not guaranteed. This document is available in alternative formats. Eligible beneficiaries can enroll at any time. The benefit information provided herein is a brief summary, but not a comprehensive description of available benefits. Additional information about benefits is available to assist you in making a decision about your coverage. This is an advertisement; for more information contact the plan.



Get the benefits you deserve
with Unison Advantage[®],
where a healthier tomorrow
begins with you.

Unison Advantage is dedicated to providing quality health care to people with Medicare (Parts A and B). Our Medicare plans offer medical, hospital and prescription drug coverage, as well as some extra benefits that you won't get with Original Medicare.

Please spend some time looking through this 2010 Plan Benefits Guide to see what our Medicare plans can offer you. We recommend that you meet with a Unison Advantage benefit consultant who can help you review your options and assist you in making an educated decision about your health care. You'll quickly learn how Unison Advantage is there for you. We are confident you'll discover how Unison Advantage can meet your financial and health care needs.

The benefit information in this guide is not comprehensive. For a detailed explanation of all the benefits and services offered by Unison Advantage, please see the Summary of Benefits or contact Member Services.

Service Area

Unison Advantage is available in the following Pennsylvania counties:

Unison Advantage Plus (HMO): Adams, Allegheny, Armstrong, Beaver, Berks, Blair, Butler, Cambria, Clarion, Cumberland, Dauphin, Erie, Fayette, Greene, Indiana, Jefferson, Lackawanna, Lancaster, Lawrence, Lehigh, Luzerne, Mercer, Northampton, Perry, Schuylkill, Somerset, Washington, Westmoreland and York counties, Pennsylvania.

Unison Advantage Basic & Choice (HMO): Adams, Allegheny, Beaver, Berks, Butler, Cumberland, Dauphin, Erie, Lackawanna, Lancaster, Lehigh, Luzerne, Mercer, Northampton, Perry, Somerset, Westmoreland and York counties, Pennsylvania.

Unison Advantage Plus Integrated Care (HMO): Adams, Allegheny, Armstrong, Beaver, Bedford, Berks, Blair, Butler, Cambria, Clarion, Cumberland, Dauphin, Erie, Fayette, Greene, Indiana, Jefferson, Lackawanna, Lancaster, Lawrence, Lehigh, Luzerne, Mercer, Northampton, Perry, Schuylkill, Somerset, Venango, Warren, Washington, Westmoreland and York counties, Pennsylvania.

Benefits-At-A-Glance

Unison Advantage® Plan

Benefits	Basic	Choice	Plus*	Plus Integrated Care*
Monthly plan premium (in addition to your Medicare Part B premium)	\$0	\$0	\$0	\$0
Part D prescription drug coverage	No	Yes Mail order available	Yes Mail order available	Yes Mail order available
Referrals required for network specialists	No	No	No	No
Primary care physician (PCP) office visit cost per each visit.	\$5 copay	\$10 copay	0% or 20% of the cost	0% of the cost
Specialist office visit cost for each visit	\$25 copay	\$30 copay	0% or 20% of the cost	0% of the cost
Annual routine physical cost for each visit (one exam per year)	\$0 copay	\$0 copay	0% or 20% of the cost	0% of the cost
Preventive services (Medicare-covered preventive services like colorectal screening, mammograms, Pap Smears, prostate cancer screening, etc.)	\$0 copay	\$0 copay	0% or 20% of the cost for services	0% of the cost for services
Immunizations (Flu vaccine, Pneumonia vaccine, Hepatitis B vaccine for at-risk Medicare beneficiaries)	\$0 copay	\$0 copay	\$0 copay for Flu and Pneumonia vaccines; 0% or 20% of the cost for Hepatitis B vaccine	\$0 copay for Flu and Pneumonia vaccines; 0% of the cost for Hepatitis B vaccine

Limitations and restrictions may apply. You must receive all care from plan providers.

Unison Advantage® Plan

Benefits	Basic	Choice	Plus*	Plus Integrated Care*
Podiatry services	\$0 copay for 4 routine visits each year	\$0 copay for 4 routine visits each year	\$0 copay for 4 routine visits each year	\$0 copay for 4 routine visits each year
Inpatient hospital care	\$150 copay per day for days 1-10; \$0 copay for days after 10; \$1,500 out-of-pocket maximum per year	\$150 copay per day for days 1-10; \$0 copay for days after 10; \$1,500 out-of-pocket maximum per year	\$1,112 deductible. \$0 copay for days 1-60; \$278 copay for days 61-90; \$556 each lifetime reserve day (days 1-60)	\$0 deductible. \$0 copay for days 1-60; \$0 copay for days 61-90; \$0 each lifetime reserve day (days 1-60)
Outpatient surgery and hospital services cost for each visit	\$125 copay	\$125 copay	0% or 20% of the cost	0% of the cost
Urgent care cost per each visit	\$25 copay	\$30 copay	0% or 20% of the cost	0% of the cost
Emergency care (worldwide coverage)	\$50 copay	\$50 copay	\$0 or \$50 copay	\$0 copay
Ambulance services (medically necessary)	\$150 copay	\$150 copay	0% or 20% of the cost	0% of the cost
Durable medical equipment (wheelchairs, oxygen, etc.)	20% coinsurance	20% coinsurance	0% or 20% coinsurance	0% coinsurance

*Unison Advantage® Plus (HMO) and Unison Advantage® Plus Integrated Care (HMO) are Medicare Special Needs Plans offered by Unison, a health plan with a Medicare contract. All beneficiaries who have Medicare (Parts A and B) and Medicaid and live in the service area may apply. Premiums, copays, coinsurances and deductibles may vary based on your level of Medicaid eligibility. Unison Advantage can explain how your claims are paid under both programs. Contact Member Services if you would like more information about the benefits that you are entitled to under both Medicare and Medicaid.

Additional Benefits

With Unison Advantage®, you'll receive even more benefits and services than what you get with Original Medicare. Turn to Unison Advantage for:

Transportation

- Get up to 24 one-way trips to plan-approved locations every year.

Silver&Fit®

- The Unison Advantage® Basic and Choice plans offer the Silver&Fit® fitness program. Choose between a membership at a participating fitness facility or a home fitness program if you prefer to work out at home (not available on Unison Advantage Plus or Unison Advantage Plus Integrated Care).

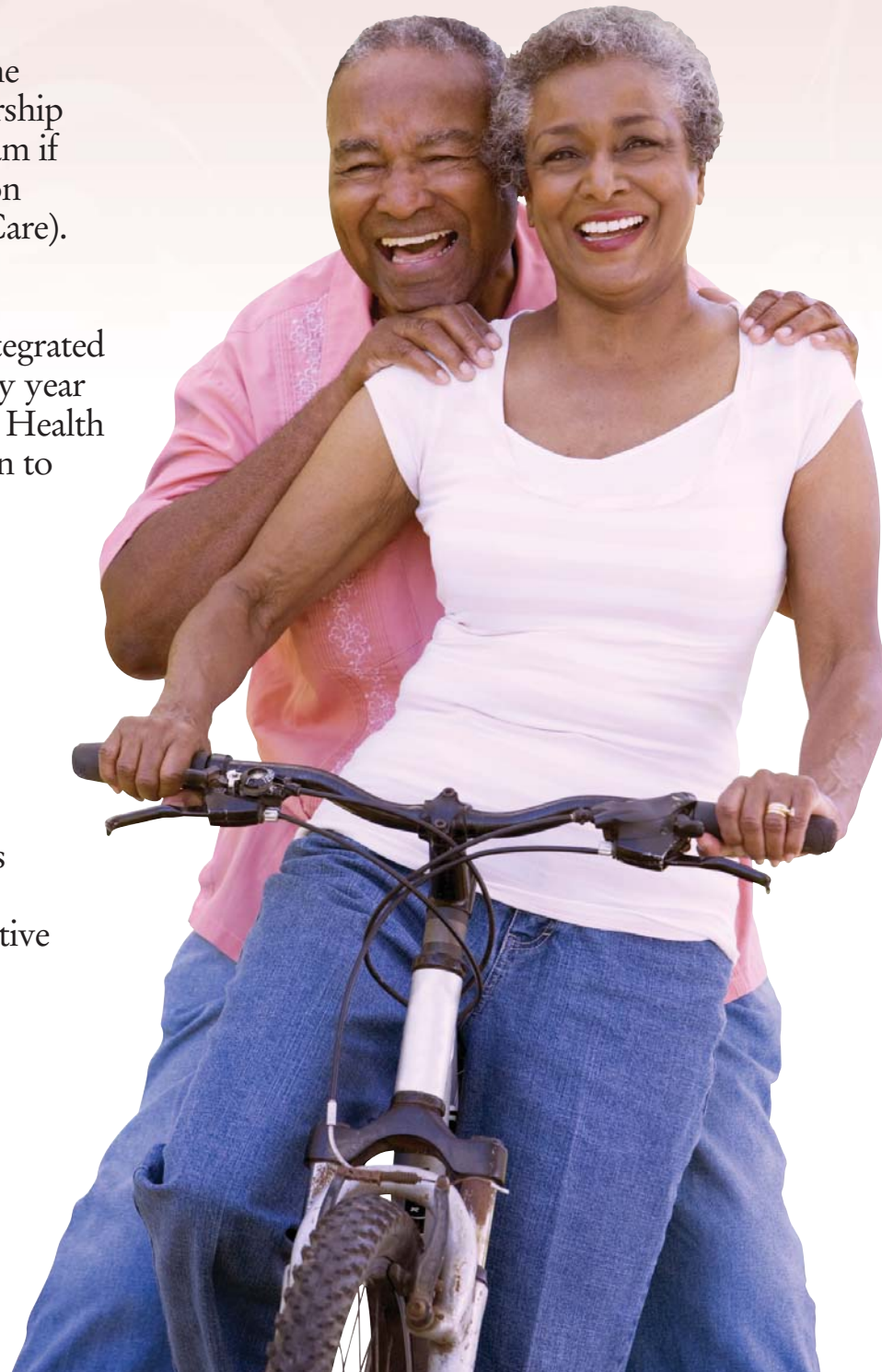
Health Products Catalog

- Unison Advantage Plus and Unison Advantage Plus Integrated Care members can get up to \$360 in benefit credits every year to order helpful health care products from our Personal Health Products Catalog. You can choose anything from aspirin to vitamins and blood pressure monitors (not available on Unison Advantage Basic or Choice).

Dental Services

Unison Advantage Basic

- \$0 copay for preventive services including:
 - One oral exam every six months
 - One cleaning every six months
 - One dental x-ray every six months
- \$35 copay for Medicare-covered comprehensive services
- \$0 copay for additional comprehensive services including dentures, emergency services, diagnostic services, restorative services, extractions and more
- \$1,000 maximum benefit for comprehensive services each year



Dental Services (Continued)

Unison Advantage Choice

- \$0 copay for preventive services including:
 - One oral exam every six months
 - One cleaning every six months
 - One dental x-ray every six months
- \$10 copay for Medicare-covered comprehensive services
- \$0 copay for additional comprehensive services including dentures, emergency services, diagnostic services, restorative services, extractions and more
- \$1,000 maximum benefit for comprehensive services each year

Unison Advantage Plus and Unison Advantage Plus Integrated Care

- \$0 copay for preventive services including:
 - One oral exam every six months
 - One cleaning every six months
 - One dental x-ray every six months
- \$0 copay for Medicare-covered comprehensive services
- \$0 copay for additional comprehensive services including dentures, emergency services, diagnostic services, restorative services, extractions and more

Vision Services

- \$0 copay for one routine eye exam every year
- \$0 copay for one pair of contacts or one pair of lenses and frames every two years (\$150 limit for eyewear every two years)

Hearing Services

- \$0 copay for Medicare-covered diagnostic hearing exams
- \$0 copay for one routine hearing test every year
- \$0 copay for one fitting evaluation visit every two years
- One individual hearing aid every two years (\$750 limit for hearing aids every two years)