

Contact us.

Contact your local Medica broker or give us a call.

952-992-2080

1-800-670-5935

Hearing Impaired: Please call the National Relay Center at 1-800-855-2880 and ask for one of the numbers listed above.

Hours

8 a.m. to 5 p.m. Monday – Thursday;
9 a.m. to 5 p.m. Friday.

You may also visit us
at medica.com or e-mail us at
medicaindividualproducts@medica.com.

MEDICA®

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MEDICA®

MINNESOTA



MEDICA DIRECT HSASM

Coverage for one or more people.

BENEFIT SUMMARY

This information is valid January 2011 through December 2011.

Plan Highlights

- Medica Direct HSA is available as an individual or family plan.
- Primary applicants must be between ages 19 and 64. Additional applicants must be at least 60 days old.
- See the Minnesota Medica Direct HSA Rate Guide to calculate your monthly premium.
- This is a brief overview of the plan. Please see a policy document available on medica.com for complete details.

Benefits	In-Network Coverage	
	80% Coverage	100% Coverage
One-person plan Annual deductible / out-of-pocket maximum	\$1,500 / \$2,500 \$3,000 / \$4,000 \$5,000 / \$5,900	\$2,000 / \$2,000 \$3,300 / \$3,300 \$4,600 / \$4,600 \$5,900 / \$5,900
Family plan Annual deductible / out-of-pocket maximum	\$3,000 / \$4,000 \$5,500 / \$6,500 \$8,000 / \$9,000	\$4,000 / \$4,000 \$7,000 / \$7,000 \$9,500 / \$9,500 \$11,900 / \$11,900
Office visits Non-preventive care (e.g., physician, chiropractor)	80% coverage after deductible	100% coverage after deductible
Preventive care	100% coverage (Coinsurance and deductible do not apply)	
Prescription drugs	80% coverage after deductible	100% coverage after deductible
Convenience care center visits		
Urgent care center visits		
Emergency room		
Lab and X-ray services		
Hospital services		
Ambulance		
Surgery		
Maternity Prenatal care	100% coverage for prenatal care (deductible does not apply)	
Maternity, labor, delivery, and postpartum care	Not covered for first 12 months; after 12 months, 80% coverage after deductible	Not covered for first 12 months; after 12 months, 100% coverage after deductible
Other eligible healthcare services	80% coverage after deductible	100% coverage after deductible

Additional Coverage Options	
Remove mental health/substance abuse coverage	You have the option to remove your mental health and substance abuse coverage already included in the plan. <i>Choosing to remove this coverage reduces your monthly rate. Check the rate guide to see your monthly rate.</i>

Travel Program	
Program details	You receive in-network coverage when you travel in the United States and use a Travel Program provider. Find more information on the Minnesota Product Features page.

Benefits	Out-of-Network Coverage*
Out-of-network annual deductible	Out-of-network annual deductible is double the in-network annual deductible
Out-of-network annual out-of-pocket maximum	There is no out-of-pocket maximum for out-of-network services
Benefit coverage	60% coverage after deductible
Lifetime maximum benefits	\$1 million
Other details	If you visit an out-of-network healthcare provider, certain services may be excluded or limited. Please see a Medica Direct HSA policy on medica.com for details.

*If you choose to receive services or supplies from a non-network provider, you are responsible for any difference between Medica's non-network reimbursement amounts (generally based on a fee schedule) and the charges billed by the non-network provider.

Other Important Information

- For individuals ages 19 and over, a pre-existing condition exclusion may apply. If continuous qualifying health coverage has been maintained, this limitation is in effect for 12 months, but will be reduced based upon length of previously qualifying coverage. If continuous qualifying health coverage has not been maintained, this limitation is in effect for the first 18 months.
- Services not covered include custodial care or rest care; eyewear; most dental services; cosmetic services; refractive eye surgery; infertility services; and services that are investigational, not medically necessary or received while on military duty.
- The deductible is subject to a "cost of living" increase on a yearly basis. This "cost of living" increase is tied to the Consumer Price Index (CPI).
- On a family plan, everyone shares one deductible. The deductible can be met by any combination of family members.