

# Care Today No Rx Plan

Effective 01/01/2026



<b>MEDICAL BENEFITS</b>			
Part A Services Hospital services per benefit period (as defined by Medicare)	Medicare pays	Plan pays	You pay <sup>1</sup>
<b>Hospital stays</b> <ul style="list-style-type: none"><li>• Semi-private room and board</li><li>• General nursing</li><li>• Other hospital services and supplies</li></ul>	<ul style="list-style-type: none"><li>• 100% days 1–60 (after \$1,736 deductible)</li><li>• Costs over \$434/day for days 61–90</li><li>• Costs over \$868/day for days 91–150 (lifetime reserve days)</li></ul>	<ul style="list-style-type: none"><li>• 100% of Part A deductible</li><li>• \$434/day for days 61–90</li><li>• \$868/day for days 91–150 (lifetime reserve days)</li><li>• 100% after reserves are depleted</li><li>• All costs after 150 days</li></ul>	<ul style="list-style-type: none"><li>• Nothing</li></ul>
<b>Blood</b> <ul style="list-style-type: none"><li>• First three pints</li><li>• Additional amounts</li></ul>	<ul style="list-style-type: none"><li>• \$0</li><li>• 100%</li></ul>	<ul style="list-style-type: none"><li>• 100%</li><li>• \$0</li></ul>	<ul style="list-style-type: none"><li>• Nothing</li></ul>
<b>Skilled nursing facility care</b>	<ul style="list-style-type: none"><li>• 100% days 1–20</li><li>• Costs over \$217/day for days 21–100</li></ul>	<ul style="list-style-type: none"><li>• Nothing for days 1–20</li><li>• \$217/day for days 21–100</li></ul>	<ul style="list-style-type: none"><li>• Nothing for days 21–100</li><li>• 100% after 100 days</li></ul>
<b>Hospice Care</b> <ul style="list-style-type: none"><li>• Available as long as you meet Medicare's requirements, your doctor certifies you are terminally ill and you elect to receive these services</li></ul>	<ul style="list-style-type: none"><li>• All but very limited co-pay/co-insurance for outpatient drugs and inpatient respite care</li></ul>	<ul style="list-style-type: none"><li>• Medicare co-pay/co-insurance</li></ul>	<ul style="list-style-type: none"><li>• Nothing</li></ul>

<sup>1</sup>You are responsible for 100% of any charges not covered by Medicare or that are above the Medicare-approved amount.

Part B services Medical services per calendar year (as defined by Medicare)	Medicare pays	Plan pays	You pay <sup>1</sup>
<b>Preventive care<sup>2</sup></b> (For recommended preventive care services, including an annual wellness visit)	• 100%	• Nothing	• Nothing
<b>Medical services &amp; supplies</b> • Doctors' services • Inpatient and outpatient medical and surgical services/supplies • Physical and speech therapy • Diagnostic tests • Durable medical equipment and other supplies	• 80% of Medicare-approved amounts for covered services	• 100% Part B deductible • Remaining 20% of Medicare-approved amounts for covered services	• Nothing
<b>Outpatient mental health services</b>	• 80% of Medicare-approved amounts for covered services	• Remaining 20% of Medicare-approved amounts for covered services	• Nothing
<b>Clinical laboratory service</b> • Tests for diagnostic services	• 100% of Medicare-approved amounts for covered services	• Nothing	• Nothing
<b>Part B excess charges</b> Up to 15% above Medicare-approved amounts	• \$0	• 100%	• \$0
Parts A and B services	Medicare pays	Plan pays	You pay
<b>Home health care</b> • Medicare-approved services • Durable medical equipment	• 100% medically necessary skilled care services and medical supplies • 80% Medicare-approved amounts (after deductible)	• Nothing • Remaining 20% of Medicare-approved amounts for covered services	• \$0 for home health care services • \$0 for Medicare-approved durable medical equipment
Benefits not covered by Medicare	Medicare pays	Plan pays	You pay
<b>Foreign travel emergency</b> Medically necessary, emergency care services beginning during the first 60 days of each trip outside the USA	• \$0	• \$50,000 lifetime maximum • 80% co-insurance after \$250 overseas deductible	• 20% coinsurance after \$250 deductible

<sup>1</sup>You are responsible for 100% of any charges not covered by Medicare or that are above the Medicare-approved amount.

<sup>2</sup>For those enrolled in Medicare Part B, Medicare pays 100% of costs for recommended preventive care services (including an annual wellness visit), per *Your Guide to Medicare Preventive Services*. You may find a copy of this guide at [medicare.gov](https://medicare.gov).