

RETIREE BENEFIT COMPARISON

An Overview of Medicare Supplement Plan Alternatives: 2010 Values

Health Care Expenses	Medicare Pays...	Group Retiree Plan F Pays...	Century Preferred In – Network Pays
First 60 days in the hospital	All but \$1100 of approved charges	\$1100 of approved charges	\$1100 of approved charges
61 st -90 th day in the hospital	All but \$275 per day of approved expenses	\$275 per day of approved expenses	\$275 per day of approved expenses
91 st -150 th day in the hospital	\$0 or all approved expenses except \$550 per day	\$550 per day of approved expenses	\$550 per day of approved expenses
Additional days in hospital	Not Covered	365 extra “lifetime” days full semi-private room	Unlimited days are available after Medicare Benefits exhausted (subject to medical necessity)
Ambulance Services	80% of covered charges after satisfying a \$155 deductible	20% of covered charges as well as the \$155 deductible	20% of covered charges as well as the \$155 deductible
Hospitalization outside the United States	Not covered	80% of Medicare eligible expenses after a \$250 deductible; \$50,000 lifetime maximum	Unlimited days (subject to medical necessity)
Care in skilled nursing facilities	First 20 days in full, then all but \$137.50 of approved expenses per day for the 21 st -100 th day	\$137.50 per day of approved expenses for 21 st -100 th day	\$137.50 per day of approved expenses for 21 st -100 th day. Additional 20 days of coverage paid in full
Hospital outpatient and emergency	Most expenses	Any balance of approved expenses	Any balance of approved expenses
Outpatient Prescription Drugs	Not Covered	See Medicare Rx benefit design	See Drug Rider
Home health care	Medically necessary skilled care Services and medical supplies	Covered per Medicare guidelines	Up to 200 visits per calendar year subject to medical necessity
Medical/Surgical (office visits, lab charges, x-rays)	80% of approved expenses except \$155 per year deductible	20% balance of approved expenses as well as the \$155 per year deductible and 15% of Medicare Part B excess charge	Any balance of approved charges