

Concordia Health Plan 2023 Premium Plus At-a-Glance

(Reflects Member's Responsibility)

Hospitalization for Medical or Mental Health/Substance Abuse—Premium Plus Benefits Administered by AmWINS/WebTPA	Medicare Pays	Premium Plus Pays	Member Pays
Inpatient Care in a Hospital (first 60 days of a benefit period*) (includes medical, mental health and substance abuse)	100% after Medicare Part A annual deductible amount for each benefit period.*	Medicare Part A annual deductible amount for each benefit period.*	\$0
Inpatient Care in a Hospital (Days 61-90)	All, but Medicare Part A coinsurance for each benefit period.*	Medicare Part A coinsurance for each benefit period.*	\$0
Inpatient Care in a Hospital (Days 91 and beyond)	All, but Medicare Part A coinsurance per each "lifetime reserve day" after Day 90 for each benefit period* (up to 60 days over your lifetime).	Medicare Part A coinsurance per each "lifetime reserve day" after Day 90 for each benefit period* (up to 60 days over your lifetime).	\$0
365 Additional Lifetime Reserve Days	0%	100%	\$0
Inpatient care in a Skilled Nursing Facility (not custodial or long term care)	100% for Days 1-20; all but Medicare Part A coinsurance per day for Days 21-100; 100% for Days 101 and beyond	\$0 for days 1-20; Medicare Part A coinsurance per day for Days 21-100; 0% for Days 101 and beyond	\$0
Hospice Care	100%	\$0	\$0
Home Health Care	100%	\$0	\$0
Inpatient Respite Care	95%	5%	\$0

Physician Medical or Mental Health/Substance Abuse Services—Premium Plus Benefits Administered by AmWINS/WebTPA	Medicare Pays	Premium Plus Pays	Member Pays
Physician Services	80% of Medicare-approved charges after the Medicare Part B deductible	20% of Medicare-approved charges, plus 100% of the difference between the actual Medicare Part B charge as billed and the Medicare-approved Part B charge	Part B Calendar Year Deductible, then \$0
Durable Medical Equipment	80% of Medicare-approved charges	20% of Medicare-approved charges	\$0

Preventive Benefits	Medicare Pays	Premium Plus Pays	Member Pays
Preventive Care	100% of Medicare-approved Preventive Services including Annual Exam, Cancer Screenings, Bone Density Screening, Flu Shots and others	\$0	\$0

Foreign Travel Emergency—Premium Plus Benefits Administered by AmWINS/WebTPA	Medicare Pays	Premium Plus Pays	Member Pays
Foreign Travel Emergency Medical Treatment Expenses	\$0	80% after a \$250 Deductible up to a \$50,000 Lifetime Maximum	\$250 Deductible, Plus 20% up to \$50,000 and 100% thereafter

Prescription Drug Benefits — Administered by Express Scripts	Retail Pharmacy Short-Term Medication (up to 31 days)	Mail Order Pharmacy Long-Term Medication (up to 90 days)
	Generic	\$15
Brand-name Formulary**	\$30	\$60
	For insulin drugs only: 30-day supply: \$25 copay / 60-day supply: \$50 copay / 90-day supply: \$75 copay	
Brand-name Non-Formulary**	\$60	\$120

Other CHP Benefits and Discounts	
Hearing	TruHearing
Employee Assistance Program	Cigna Behavioral Health
Wellness Program	Vitality

* A "benefit period" begins when you are admitted as an inpatient in a hospital or skilled nursing facility. It ends when you have received no inpatient hospital or skilled nursing facility care for 60 days in a row.

** When a patient or physician requests a brand drug but an equivalent generic is available, the patient pays the brand cost share plus the cost difference between the brand and generic drugs up to the cost of the brand drug. The cost difference will not be applied to the deductible or out-of-pocket maximum.