Los Angeles | Orange



SCAN Inspired (HMO)

by women for women



Medicare Advantage Plan **2025 BENEFIT HIGHLIGHTS**

Plan Details	SCAN Inspired	
Monthly Plan Premium	\$25	
Annual Plan Deductible	\$0	
Maximum Out-of-Pocket	SCAN Inspired	
Annual Maximum Out-of-Pocket (MOOP)	\$299	
Comprehensive Care	SCAN Inspired	
Primary Care Office Visits	\$0	
Specialist Office Visits	\$0	
Diabetic Self-Management Training	\$0	
Diabetic Supplies (lancets, test strips, monitor)	\$0	
Continuous Glucose Monitors (available through DME or at your Pharmacy)	20% of the total cost at the pharmacy or DME provider	
Durable Medical Equipment	\$0 for items up to \$99; 20% for items \$100 and more	
Annual Physical Exam	\$0	
Preventive Services (Medicare-covered screenings)	\$0	
Lab Services and X-rays	\$0	
Diagnostic Tests and Procedures	\$0	
Outpatient Rehabilitation (e.g. PT, OT, ST)	\$0	
Diagnostic Radiology (e.g. MRI, CT, ultrasound)	\$0	
Outpatient Mental Health (Individual/Group)	\$0	
Hospital and Emergency Care	SCAN Inspired	
Inpatient Hospital Care	\$50 per day (1-5) \$0 per day (6-90+)	
Skilled Nursing Facility	\$0 per day (1-100)	
Outpatient Surgery	\$0	
Emergency Care	\$90 (worldwide) \$0 (if admitted immediately)	
Urgent Care Services	\$0 (worldwide)	
Ambulance Services	\$200	

Prescription Dr	ug Coverage	SCAN Inspired		
Part D Deductible		\$0		
Initial Coverage Stage - SCAN Contracted Retail Pharmacies (1-month/30-day supply)				
Pharmacy Network		PREFERRED	STANDARD	
Tier 1: Preferred Generic		\$0	\$5	
Tier 2: Generic		\$0	\$12	
Tier 3: Preferred Brand	Insulin	\$35	\$35	
	Other Drugs	\$42	\$47	
Tier 4: Non-Preferred Drug		50%	50%	
Tier 5: Specialty Tier		33%	33%	
Part D Out-of-Pocket Maximum		\$2,000		
Catastrophic Coverage Stage		\$0		

\$0 Prescription DrugsPay \$0 for Tiers 1 and 2 (up to a 100-day supply) at preferred retail and Express Scripts mail-order pharmacies.

Dental Services	SCAN Inspired		
Dental coverage to support your overall health.	Dental Plan CAC73	PPO Dental	
	These dental services are included in your plan	\$55 monthly premium	
DIAGNOSTIC AND PREVENTIVE DENTAL			
Oral Exams (2 per year)	\$0	\$0	
Dental X-rays (2 per year)	\$0	\$0	
Prophylaxis (cleaning - 2 per year)	\$0	\$0	
COMPREHENSIVE DENTAL			
Restorative Services (fillings, crowns)	\$8-\$395	\$8-\$395	
Endodontics (root canals)	\$5-\$395	\$5-\$395	
Periodontics (deep cleaning)	\$0-\$380	\$0-\$380	
Prosthodontics (tooth replacement/dentures)	\$13-\$395	\$13-\$395	
	PLAN COVERAGE		
Annual Maximum In-Network	No Maximum	No Maximum	
Annual Maximum Out-of-Network	No Maximum	\$2,000 Maximum*	
Out-of-Network Cost Sharing	Not Available	50% Cost Share	

^{*}You must cover any costs above the OON coverage limit.

SCAN COVERS THESE VALUABLE EXTRAS

Extras that help you stay healthy and independent

Benefits	SCAN Inspired	
Vision (routine) Eye exam Coverage for eyewear	\$0 (1 every 12 months) \$345 limit allowance every year	
Hearing	\$450-\$750 per aid/year	
Transportation*	\$0 (26 one-way trips per year)	
Over-the-Counter (OTC) Can be used at CVS locations, online or over the phone	\$125 allowance per quarter with rollover	
Fitness	\$0 (One Pass)	
Acupuncture, Chiropractic, and Therapeutic Massage Services (routine)	\$5 per visit (30 visits/year combined — Acupuncture and Chiropractic only) \$5 per visit (20 visits per year — Therapeutic Massage)	

Extras that connect you to even more care and support

Benefits	SCAN Inspired
Telehealth Urgent Medical Telehealth Behavioral Health	\$0 \$0
Nurse Advice Line	\$0 (per phone visit)
HealthTECH+	\$0 support line or home visit
Personal Emergency Response System (PERS)	\$0 (includes installation and monthly fees)
SCAN Returning to Home** In-home Care Visits Home-Delivered Meals	After hospital or skilled nursing facility stay \$0 personal in-home care visits 60 hours per year/4 hour min \$0 home-delivered meals up to 28 days per year
Home-Delivered Meals	Up to 28 days of home-delivered meals are available to members with chronic conditions
Worldwide Care	Urgent or emergency care when outside of the U.S.

^{*50-}mile limit will apply to each one-way trip. **Criteria and limitations apply.

TAKE A LOOK AT THESE PLAN HIGHLIGHTS



Your own, personal health coach

As a SCAN Inspired member, you have a Women's Health Coach to help you set a personalized path to wellness that matches your priorities, goals and lifestyle.



Pharmacy benefits that are easy on your wallet

\$0 for drugs on Tier 1 and Tier 2 of our generous Formulary (list of covered drugs) at preferred pharmacy locations.



Over-the-Counter (OTC) coverage with CVS

Use a SCAN debit card on eligible OTC items at CVS. Place an order over the phone—or shop online or at your local CVS pharmacy.



Fitness benefit that leaves no excuses

From a wide range of fitness locations—including popular specialty clubs—to at-home classes and personalized programs, One Pass is your one-stop fitness shop.



DARING TO CARE DIFFERENTLY SINCE 1977

The Senior Care Action Network

(SCAN) was founded by seniors, for seniors. Their goal was to bring together the services and support they needed to age safely in their own homes. Today SCAN is an award-winning Medicare Advantage plan. We're still not-for-profit. And

we're still committed to keeping seniors healthy and independent.

Please refer to your Summary of Benefits for more details about all the benefits and services you get with your Medicare Advantage Plan. If you have any questions, just call us. An authorized SCAN representative will be happy to help you.



www.scanhealthplan.com

1-877-870-4867 TTY: 711

SCAN Inspired by women for women (HMO) is an HMO plan with a Medicare contract. Enrollment in SCAN Health Plan depends on contract renewal. You must continue to pay your Medicare Part B premium. This plan is designed for women but anyone with Medicare Parts A & B can enroll.

You won't pay more than \$35 for a one-month supply and no more than \$105 for a three-month supply of each insulin product covered by our plan, no matter what cost-sharing tier it's on. Most adult Part D vaccines are covered by our plan at no cost to you. For more information, please refer to your "Drug List" (Formulary). If you have questions about the Drug List, you can also call Member Services. Prescription copay/coinsurance may vary by plan, county, pharmacy type (e.g., Preferred or Standard, etc.), day supply, Part D benefit phase, or in members who receive "Extra Help." You can fill your prescriptions at any of our network pharmacies, but you may pay less at a Preferred pharmacy. Check your Evidence of Coverage or call Member Services for details (phone numbers for Member Services are printed on the back cover of your Evidence of Coverage).

You can get prescription drugs shipped to your home through our network mail-order delivery program. Express Scripts PharmacySM is our Preferred mail-order pharmacy. While you can fill your prescription medications at any of our network mail-order pharmacies, you may pay less at the Preferred mail-order pharmacy. Typically, you should expect to receive your prescription drugs within 14 days from the time that Express Scripts mail-order pharmacy receives the order. If you do not receive your prescription drug(s) within this time, please contact SCAN Health Plan's Member Services. For your mail-order prescriptions, you have the option to sign up for an automatic refill program by contacting Express Scripts Pharmacy at 1-866-553-4125, 24 hours a day, 7 days a week. TTY users call 711. You may opt out of automatic deliveries at any time.