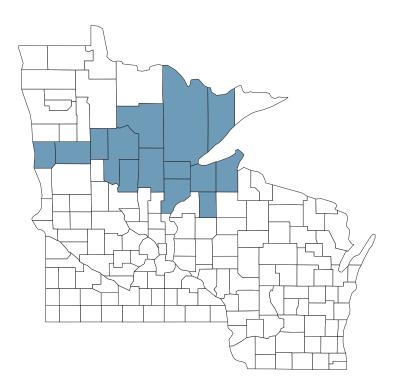


2025 EssentiaCare Medicare Plans Comparison Chart



Essentia Health + UCare



To be eligible for EssentiaCare you must live in one of the following counties:

Minnesota counties

Aitkin, Becker, Carlton, Cass, Clay, Crow Wing, Hubbard, Itasca, Lake, Pine, St. Louis

Wisconsin counties

Bayfield, Douglas, Washburn

Plan options:

EssentiaCare Access (PPO*)

Available only in St. Louis (MN), Bayfield (WI), Douglas (WI) and Washburn (WI) counties.

EssentiaCare Secure (PPO*)

EssentiaCare Grand (PPO*)

For information about plans available in other counties, please call us at 1-855-432-7027 (TTY users call 1-800-688-2534).

You can see any provider that accepts Medicare, but you'll pay less when you get care from Essentia Health providers.

Coverage when traveling

EssentiaCare plans travel with you whether you're gone for a couple weeks or a few months.

As an EssentiaCare member, here's how it works. In addition to the more than 2,200 Essentia Health providers and their partners, you have access to many out-of-state providers. At these providers, your plan works the same as in-network — giving you the same great coverage.

Always know that emergencies are covered while traveling in the U.S. and worldwide with a copay.

For services at in-network providers. See the Summary of Benefits for details

| providers. See the Summary of Benefits for details. | Access | Secure | Grand |
|--|---|--|--|
| 2025 monthly plan premium you must continue to pay your Medicare Part B premium | \$O | \$8 | \$62 |
| Medicare Part B premium giveback | \$11 | None | None |
| Maximum out-of-pocket | \$4,400; then 100% covered | \$4,500; then 100% covered | \$3,000; then 100% covered |
| Preventive care | \$O copay for many services | \$O copay for many services | \$O copay for many services |
| Doctor visits in person or telehealth for Medicare-approved services | Primary: \$10 copay Specialist: \$50 copay | Primary: \$0 copay Specialist: \$45 copay | Primary: \$0 copay Specialist: \$30 copay |
| Inpatient hospital care (per admission) | \$300 copay per day (days 1–5); then 100% covered | \$300 copay per day (days 1–5); then 100% covered | \$250 copay per stay (not per day); then 100% covered |
| Outpatient hospital or surgery | \$395 copay | \$350 copay | \$300 copay |
| Lab services | \$O copay | \$O copay | \$O copay |
| Diagnostic tests (e.g., MRI and CT scans), radiation therapy and X-rays | 20% coinsurance | 10% coinsurance up to a maximum of \$150 per day | 10% coinsurance up to a maximum of \$50 per day |
| Coverage when traveling | Out-of-network coverage | Out-of-network coverage | Out-of-network coverage |
| Dental coverage | \$600 flexible allowance to use on one or a combination of eligible dental, hearing aids and prescription eyewear | Routine dental with optional coverage available | Routine dental with optional coverage available |
| Hearing aid allowance | | Not covered | \$500 annual allowance |
| Eyewear/contacts allowance | | \$100 annual allowance | \$200 annual allowance |
| Over-the-counter (OTC) allowance | \$50 per month | \$50 per month | \$50 per month |
| One Pass fitness program | Fitness memberships, including gym membership, online classes, at-home fitness kits, brain training and social events | Fitness memberships, including gym membership, online classes, at-home fitness kits, brain training and social events | Fitness memberships, including gym membership, online classes, at-home fitness kits, brain training and social events |
| Medicare Part D prescription drug coverage | Annual deductible: Tier 1 = 0 Tiers 2-5 = 125 Cost shares: Tier 1 = 0 Tier 2 = 10 Tier 3 = 47 Tier 4 = 100 | Annual deductible: Tiers 1 & 2 = 0 Tiers 3 - 5 = 95 Cost shares: Tier 1 = 0 Tier 2 = 7 Tier 3 = 47 Tier 4 = 100 | Annual deductible: Tiers $1-5 = \$0$ Cost shares: Tier $1 = \$0$ Tier $2 = \$10$ Tier $3 = \$47$ Tier $4 = \$100$ |
| | Tier $5 = 28\%$ | Tier $5 = 29\%$ | Tier $4 = 100 Tier $5 = 33\%$ |

Choose the plan that's right for you.

This chart helps you compare costs and coverage to find a plan that fits your needs and budget. If you'd rather talk through your options, our Medicare experts are ready to help.



Ask a Medicare specialist

218-722-4783 or 1-855-432-7027 toll-free TTY users call 612-676-6810 or 1-800-688-2534 toll-free

Or call a trusted broker near you



Compare plan benefits

- Look up participating doctors, dentists and pharmacies
- Look up covered prescription drugs

Visit ucare.org/medicare123

This information is not a complete description of benefits.

UCare is a PPO plan with a Medicare contract. Enrollment in UCare depends on contract renewal. Out-of-network/noncontracted providers are under no obligation to treat EssentiaCare members, except in emergency situations. Call our customer service number or see your Evidence of Coverage for more information, including cost-sharing that applies to out-of-network services.

EssentiaCare is a registered trademark of Essentia Health nonprofit corporation.

UCare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 612-676-3200/1-800-203-7225 (TTY 612-676-6810/1-800-688-2534).

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 612-676-3200/1-800-203-7225 (TTY 612-676-6810/1-800-688-2534).

EssentiaCare

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