



INDIANA BENEFITS



**CONSUMERS LIFE
INSURANCE COMPANY®**
A MEDICAL MUTUAL OF OHIO COMPANY

X7078 R12/09

CONSUMERS LIFE INSURANCE COMPANY®



SUPERMED PLUS® PRODUCTS

PRODUCT NAME	DEDUCTIBLE		COINSURANCE		OUT-OF-POCKET MAXIMUM		OFFICE VISIT COPAY		ER COPAY
	NETWORK	NON-NETWORK	NETWORK	NON-NETWORK	NETWORK	NON-NETWORK	NETWORK	NON-NETWORK	
SUPERMED PLUS 2090 STANDARD PLANS									
2090-250	\$250/\$750	\$500/\$1,500	90%	60%	\$2,000/\$4,000	\$6,000/\$12,000	\$20	\$30	\$150
2090-500	\$500/\$1,500	\$1,000/\$3,000	90%	60%	\$2,000/\$4,000	\$6,000/\$12,000	\$20	\$30	\$150
2090-1000	\$1,000/\$3,000	\$2,000/\$6,000	90%	60%	\$2,000/\$4,000	\$6,000/\$12,000	\$20	\$30	\$150
2090-1500	\$1,500/\$4,500	\$3,000/\$9,000	90%	60%	\$2,000/\$4,000	\$6,000/\$12,000	\$20	\$30	\$150
SUPERMED PLUS 2080 STANDARD PLANS									
2080-250	\$250/\$750	\$500/\$1,500	80%	50%	\$3,000/\$6,000	\$9,000/\$18,000	\$20	\$40	\$150
2080-500	\$500/\$1,500	\$1,000/\$3,000	80%	50%	\$3,000/\$6,000	\$9,000/\$18,000	\$20	\$40	\$150
2080-1000	\$1,000/\$3,000	\$2,000/\$6,000	80%	50%	\$3,000/\$6,000	\$9,000/\$18,000	\$20	\$40	\$150
2080-1500	\$1,500/\$4,500	\$3,000/\$9,000	80%	50%	\$3,000/\$6,000	\$9,000/\$18,000	\$20	\$40	\$150
2080-2500	\$2,500/\$7,500	\$5,000/\$15,000	80%	50%	\$3,000/\$6,000	\$9,000/\$18,000	\$20	\$40	\$150
SUPERMED PLUS 2580 STANDARD PLANS									
2580-250	\$250/\$750	\$500/\$1,500	80%	50%	\$4,000/\$8,000	\$12,000/\$24,000	\$25	\$50	\$150
2580-500	\$500/\$1,500	\$1,000/\$3,000	80%	50%	\$4,000/\$8,000	\$12,000/\$24,000	\$25	\$50	\$150
2580-1000	\$1,000/\$3,000	\$2,000/\$6,000	80%	50%	\$4,000/\$8,000	\$12,000/\$24,000	\$25	\$50	\$150
2580-1500	\$1,500/\$4,500	\$3,000/\$9,000	80%	50%	\$4,000/\$8,000	\$12,000/\$24,000	\$25	\$50	\$150
2580-2500	\$2,500/\$7,500	\$5,000/\$15,000	80%	50%	\$4,000/\$8,000	\$12,000/\$24,000	\$25	\$50	\$150
SUPERMED PLUS 3570 VALUE PLANS									
3570-1000	\$1,000/\$3,000	\$3,000/\$9,000	70%	50%	\$5,000/\$10,000	\$25,000/\$50,000	\$35	\$50	\$150
3570-1500	\$1,500/\$4,500	\$4,500/\$13,500	70%	50%	\$5,000/\$10,000	\$25,000/\$50,000	\$35	\$50	\$150
3570-2000	\$2,000/\$6,000	\$6,000/\$18,000	70%	50%	\$5,000/\$10,000	\$25,000/\$50,000	\$35	\$50	\$150
3570-2500	\$2,500/\$7,500	\$7,500/\$15,000	70%	50%	\$5,000/\$10,000	\$25,000/\$50,000	\$35	\$50	\$150
3570-5000	\$5,000/\$15,000	\$15,000/\$30,000	70%	50%	\$5,000/\$10,000	\$25,000/\$50,000	\$35	\$50	\$150
SUPERMED PLUS 3080 VALUE PLANS									
3080-1000*	\$1,000/\$3,000	\$3,000/\$9,000	80%	50%	\$5,000/\$10,000	\$25,000/\$50,000	\$30	\$50	\$150
3080-1500	\$1,500/\$4,500	\$4,500/\$13,500	80%	50%	\$5,000/\$10,000	\$25,000/\$50,000	\$30	\$50	\$150
3080-2000	\$2,000/\$6,000	\$6,000/\$18,000	80%	50%	\$5,000/\$10,000	\$25,000/\$50,000	\$30	\$50	\$150
3080-2500*	\$2,500/\$7,500	\$7,500/\$15,000	80%	50%	\$5,000/\$10,000	\$25,000/\$50,000	\$30	\$50	\$150
3080-5000*	\$5,000/\$15,000	\$15,000/\$30,000	80%	50%	\$5,000/\$10,000	\$25,000/\$50,000	\$30	\$50	\$150
SUPERMED PLUS 25100 VITAL ACCESS PLANS									
25100-3500	\$3,500/\$7,000	\$9,000/\$18,000	100%	70%	N/A	\$7,500/\$15,000	\$25	70% after deductible	\$200
25100-5000	\$5,000/\$10,000	\$10,000/\$20,000	100%	70%	N/A	\$7,500/\$15,000	\$25	70% after deductible	\$200
25100-7500	\$7,500/\$15,000	\$12,000/\$24,000	100%	70%	N/A	\$7,500/\$15,000	\$25	70% after deductible	\$200
25100-10000	\$10,000/\$20,000	\$15,000/\$30,000	100%	70%	N/A	\$7,500/\$15,000	\$25	70% after deductible	\$200
SUPERMED PLUS 2580 VITAL ACCESS PLANS									
2580-3500	\$3,500/\$7,000	\$9,000/\$18,000	80%	50%	\$4,000/\$8,000	\$8,000/\$16,000	\$25	50% after deductible	\$200
2580-5000	\$5,000/\$10,000	\$10,000/\$20,000	80%	50%	\$4,000/\$8,000	\$8,000/\$16,000	\$25	50% after deductible	\$200
2580-7500	\$7,500/\$15,000	\$12,000/\$24,000	80%	50%	\$4,000/\$8,000	\$8,000/\$16,000	\$25	50% after deductible	\$200
2580-10000	\$10,000/\$20,000	\$15,000/\$30,000	80%	50%	\$4,000/\$8,000	\$8,000/\$16,000	\$25	50% after deductible	\$200

*HRA-compatible plan

- Well-Child Care: Up to age 9 per period (\$1000 maximum per benefit period) including immunizations.
- Routine mammogram (one per benefit period).
- Routine PAP test (one per benefit period)
- Routine EKG, chest x-ray, complete blood count, comprehensive metabolic panel, urinalysis (one per benefit period), (cholesterol, PSA, colorectal and endoscopic screenings)
- Adult immunizations (tetanus toxoid, rabies vaccine and meningococcal polysaccharide vaccine are covered services)
- Outpatient diagnostic

PLAN NOTES:

- Benefit Period: January 1 through December 31
- Any amount of non-network coinsurance that is met is also applied to the network coinsurance information
- Fourth quarter deductible carryover does not apply

PRESCRIPTION DRUG OPTIONS

	ANNUAL DEDUCTIBLE	ANNUAL MAXIMUM	RETAIL (30-DAY SUPPLY) GENERIC/ FORMULARY/ NON-FORMULARY	HOME DELIVERY (90-DAY SUPPLY) GENERIC/ FORMULARY/ NON-FORMULARY
OPTION 1 ¹	n/a	n/a	\$10/\$30/\$50	\$30/\$90/\$150
OPTION 2 ¹	\$200 per individual (except generics)	n/a	\$10/\$30/\$50	\$30/\$90/\$150
OPTION 3 ¹	n/a	\$5000 per individual	\$10/\$40/\$60/ 20% coinsurance for Rx over \$500 for 30 day supply	\$30/\$120/\$180/ 20% coinsurance for Rx over \$1500 for 90 day supply
OPTION 4 ¹	n/a	\$5000 per individual	\$10/20% coinsurance/ 30% coinsurance	\$30/20% coinsurance/ 30% coinsurance

¹ Rx Selections® Drug List: A list of drugs on the Rx Selections formulary will be used.



SUPERMED PLUS[®] HEALTH SAVINGS ACCOUNTS (HSAs)

Consumers Life offers Qualified High-Deductible Health Plans (QHDHPs) that allow interested employees to open a Health Savings Account (HSA). HSAs are tax-favored savings accounts from which money can be drawn to offset eligible healthcare expenses. HSA plans, which were included in the Medicare Prescription Drug Improvement and Modernization Act of 2003, replace Medical Savings Account (MSA) plans and are available to persons under age 65 who have a QHDHP. QHDHPs offered by Consumers Life are outlined below.

QUALIFIED HIGH-DEDUCTIBLE HEALTH PLANS

PRODUCT NAME		DEDUCTIBLE		COINSURANCE		OUT-OF-POCKET MAXIMUM	
		NETWORK	NON-NETWORK	NETWORK	NON-NETWORK	NETWORK	NON-NETWORK
SMP 2500	Embedded	\$2,500/\$5,000	\$3,000/\$6,000	100%	60%	-	\$5,000/\$10,000
SMP 2500	Aggregate	\$2,500/\$5,000	\$3,000/\$6,000	100%	60%	-	\$5,000/\$10,000
SMP 3000	Embedded	\$3,000/\$6,000	\$3,500/\$7,000	100%	60%	-	\$5,000/\$10,000
SMP 3000	Aggregate	\$3,000/\$6,000	\$3,500/\$7,000	100%	60%	-	\$5,000/\$10,000
SMP 4000	Embedded	\$4,000/\$8,000	\$4,500/\$9,000	100%	60%	-	\$5,000/\$10,000
SMP 4000	Aggregate	\$4,000/\$8,000	\$4,500/\$9,000	100%	60%	-	\$5,000/\$10,000
SMP 5000	Embedded	\$5,000/\$10,000	\$5,500/\$11,000	100%	60%	-	\$5,000/\$10,000
SMP 5000	Aggregate	\$5,000/\$10,000	\$5,500/\$11,000	100%	60%	-	\$5,000/\$10,000
SMP 1750 Value	Aggregate	\$1,750/\$3,500	\$2,250/\$4,500	80%	50%	\$4,200/\$8,400	\$5,000/\$10,000
SMP 2500 Value	Embedded	\$2,500/\$5,000	\$3,000/\$6,000	80%	50%	\$3,450/\$6,900	\$5,000/\$10,000
SMP 2500 Value	Aggregate	\$2,500/\$5,000	\$3,000/\$6,000	80%	50%	\$3,450/\$6,900	\$5,000/\$10,000



SUPERMED[®] VISION

SERVICES	NETWORK	NON-NETWORK ¹
PROFESSIONAL SERVICES (One every 12 months)		
Spectacle Exam	\$15 copayment	\$15 maximum
Contact Lens Exam	\$15 copayment + any amount over spectacle exam	\$15 maximum
FRAME (One every 12 months)		
	\$0 copayment (up to \$100 20% off amount over \$100)	\$30 maximum
LENSES (Uncoated Plastic. One pair every 12 months)		
Single Vision	\$15 copayment	\$10 maximum
Bifocal	\$15 copayment	\$20 maximum
Trifocal	\$15 copayment	\$30 maximum
Lenticular	\$15 copayment	\$40 maximum
CONTACT LENSES (In lieu of lenses and frames. One pair every 12 months)		
Cosmetic	\$15 copayment (up to \$100)	\$40 maximum
Medically Necessary	\$15 copayment (up to \$200)	\$75 maximum
Disposable	\$15 copayment (up to \$100)	\$40 maximum
DEPENDENT AGE LIMIT	SAME AS MEDICAL	

¹The non-network maximum is the amount a member receives for covered vision services received from a non-network provider.

Listed below are additional ways to save on lens options and contact lenses through the SuperMed Vision program:

LENS OPTIONS: If an EyeMed Vision Care provider is used, members are entitled to a discount in addition to the lens copayments listed above. The discount applies to items whether or not they are covered as part of a vision plan. The available discounted lens options are listed below.

LENS OPTIONS	*DISCOUNTED PRICE	LENS OPTIONS	*DISCOUNTED PRICE
Progressive (no-line bifocal)	\$.65	Anti-reflective coating	\$.45
Polycarbonate	\$.40	Solid tint or Gradient tint	\$.15
Scratch-resistant coating	\$.15	Photochromic20% off retail price
Ultraviolet coating	\$.15	Glass20% off retail price

*Discounted price is in addition to the \$15 copayment listed above. Discounts available through EyeMed Access Network providers only.

CONTACT LENSES: LISTED BELOW ARE TWO CONVENIENT WAYS TO OBTAIN CONTACT LENSES.

1. Visit a participating EyeMed Vision Care location and save 15% on non-disposable or medically necessary contact lenses.
2. Use the mail-order Vision One Contact Lens Replacement Program and apply discounts when ordering contacts by mail.

The discount schedule for lens options and contact lenses listed above is subject to change without notice. EyeMed Vision Care manages SuperMed Vision.

EyeMed Access Network provider must be seen in order for network benefits to apply. Network providers can be located by visiting the SuperMed Vision page on ConsumersLife.com.

Note: Benefits will be determined based on Consumers Life medical and administrative policies and procedures. This document is only a partial listing of benefits. This is not a contract of insurance. No person other than an officer of Consumers Life may agree, orally or in writing, to change the benefits listed here. The contract or certificate will contain the complete listing of covered services.



When you select Consumers Life as your health plan, you have access to our SuperWell® Program, a comprehensive suite of health and wellness initiatives designed to improve employees' health and keep your healthcare costs down. The SuperWell Program's initiatives educate your employees about their overall health and teach them to make healthy choices.

By electing Consumers Life health coverage, your covered employees will automatically have access to wellness programs, including:

Health Assessment

The Health Assessment is an online questionnaire that collects in-depth data about each employee's past health history, current medical information and daily health habits. Upon completion, it creates a personalized set of recommended behavior changes to improve the employee's overall health. The Health Assessment is available by logging on to *My Health Plan* on ConsumersLife.com.

SuperWell QuitLine

SuperWell QuitLine is available to help tobacco users give up the habit for good by providing one-on-one coaching, a personalized quit plan and educational materials, in addition to a four- to eight-week supply of nicotine replacement therapy to maximize their chances of quitting. For more information, call 866/845-7702.

Weight Watchers® reimbursement program

Members can receive a special reimbursement for completing Weight Watchers meeting series. Employees 18 and older can participate in specific At Work or Local (community) Meetings series and receive up to a \$150 reimbursement of their registration fees per calendar year. For more information, call 866/204-2878.

SuperWell Fitness Discounts

To help our members save money while staying fit, our SuperWell Fitness Discounts program provides access to the GlobalFit network. GlobalFit offers access to more than 10,000 fitness clubs nationwide as well as discounted membership fees with flexible membership options at any participating fitness club. For more information, call 800/294-1500

The Chef's Garden

Members have access to The Chef's Garden®, a family-run farm that focuses on nutrition and taste. The Chef's Garden offers a wide variety of lettuces, greens, vegetables, herbs and micro greens grown with environmentally-friendly practices. To access The Chef's Garden Web site, members log on to *My Health Plan* on ConsumersLife.com.

SuperWell® Disease and Maternity Management Program

Consumers Life offers the *SuperWell® Disease and Maternity Management Program* to members who are pregnant or diagnosed with one or more of the following conditions:

- Congestive heart failure
- Chronic obstructive pulmonary disease
- Diabetes
- Coronary artery disease
- Asthma
- Chronic pain conditions
- Depression

The program helps members better manage their care by providing specialty trained health coaches who offer structured education and support to help members better understand and manage their condition(s).

In addition, participants will receive:

- Periodic telephone assessment and education
- Printed educational materials
- 24-hour telephone support
- A health coach to develop and coordinate individualized self-management plan



ELIGIBILITY REQUIREMENTS

GROUP ELIGIBILITY

For groups to be eligible to enroll, the following must apply:

- Groups must have at least two, but not more than 99 total active eligible employees.
- The employer must contribute at least 25% of the total monthly premium for all coverage, including retirees.

RETIRED EMPLOYEES

Upon retirement, employees can continue their coverage through:

- Retiree coverage if your group policy with Consumers Life was in effect prior to March 1, 2006, and retiree coverage is offered by your group.
- Medicare, if the employee is Medicare-eligible.
- COBRA, if the employee is not Medicare-eligible.
- Direct non-group plan from Consumers Life.

PRE-EXISTING CONDITION CLAUSE

A pre-existing condition is any injury, ailment, condition, disease, disorder or illness for which an employee or a dependent has received medical treatment or was advised by a physician or other professional provider to receive treatment prior to the enrollment date of coverage. No payment will be made for services related to a pre-existing condition following the enrollment date of coverage for up to nine months.

New hires may receive credit for the period of time covered under prior creditable coverage, unless there was more than a 63-day lapse in coverage (except for the probationary period). This information is requested on the employee application.

CONSUMERS LIFE NETWORKS

The Consumers Life network offers access to top-quality hospitals and we will continue to offer access to the finest healthcare available today. To identify the appropriate network, members should refer to the networks identified on their ID cards or visit ConsumersLife.com for current network information.