Marketplace

CareSource®

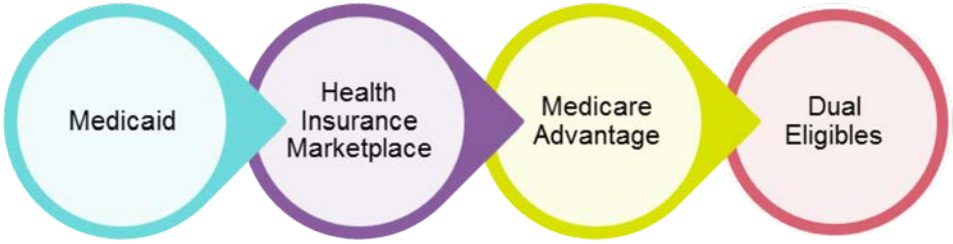


Our MISSION

To make a lasting difference in our members' lives by improving their health and well-being.

CARESOURCE

- A nonprofit health plan and national leader in Managed Care
- 32-year history of serving populations with limited resources across multiple states and insurance products
- Currently serving members in Georgia, Indiana, Kentucky, Ohio and West Virginia
- 4,500+ employees located across 30 states



2.1+M* members

**Based on members enrolled in all CareSource product lines across all service areas as of July 13, 2021.*

CARESOURCE

OUR VISION

Transforming lives through innovative health and life services.

It's not just about making a **change**.
It's about making a ***difference.***



CareSource is and will always be **members first**

Nearly 90% of the revenue that comes into our organization goes right back out to our members.*

Our profits go back to the people we serve.

**CareSource 2021 Annual Report "Meeting the Moment"*

Real. Smart. Health Insurance.

All essential health benefits covered

Coverage for pre-existing conditions

No annual or lifetime dollar limits for essential health benefits

Preventive services covered at no cost



Saving Money On Health Insurance

The majority of CareSource Marketplace members qualify for subsidies* that help bring down the total cost of a Marketplace insurance plan.

COST-SHARING REDUCTION (CSR)

Extra savings on out-of-pocket costs that lower the amount owed for any deductible, copayments and coinsurance. CSRs only apply to Silver plans#, so if you qualify for a CSR, you must enroll in a Silver plan on the exchange to get it.

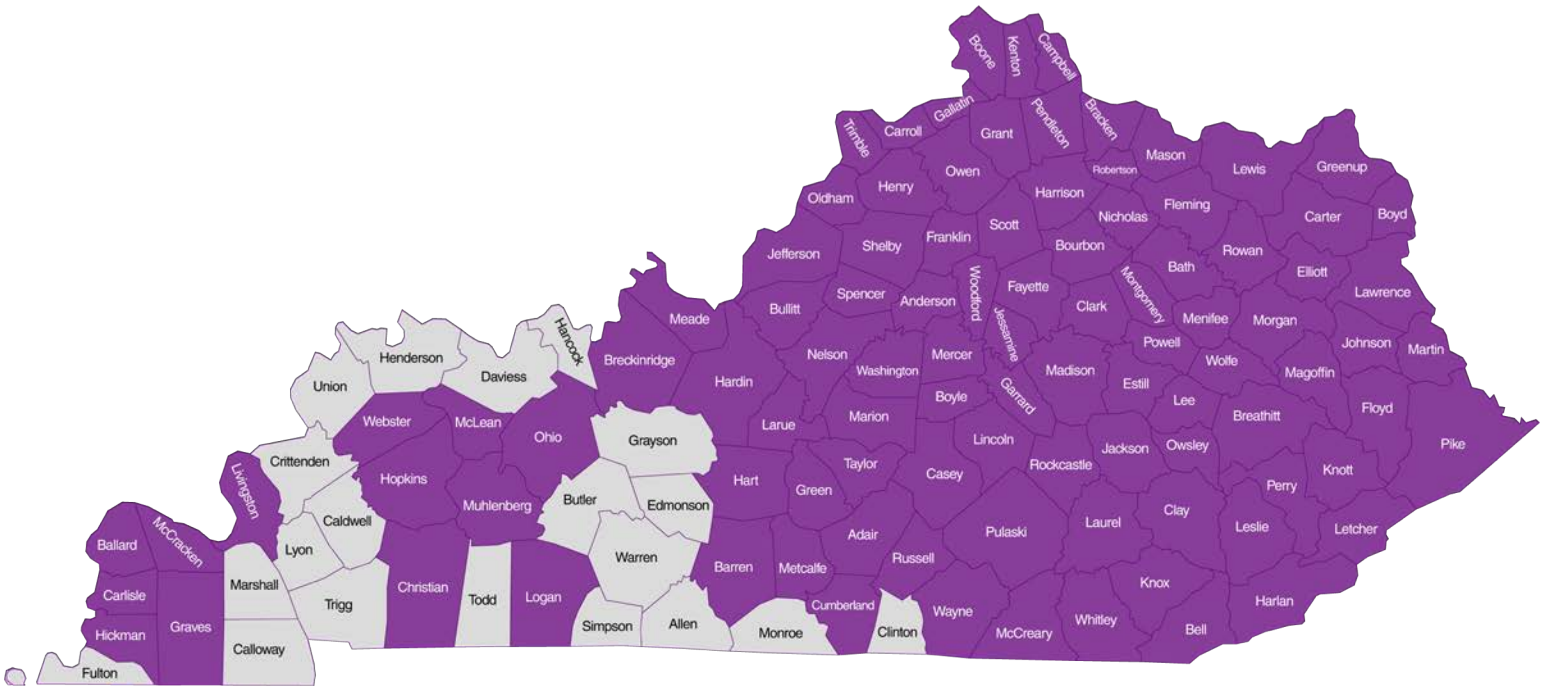
ADVANCE PREMIUM TAX CREDIT (APTC)

Tax credit taken in advance, in whole or in part, to lower monthly premium payments. This can be used no matter which metal level plan (Gold, Silver, Bronze) you enroll in.

**Based on CareSource Marketplace membership as of July 2021. Eligibility for subsidies is determined by the Health Insurance Marketplace, not CareSource.*

#CSRs are also applicable on Limited and Zero plans, available only to members of federally-recognized tribes and ANCSA corporation shareholders.

CareSource Coverage Area



Member Services

1-888-815-6446
(TTY: 711)
CareSource.com/Marketplace

Coverage area subject to change

Consider This…

It is easy to underestimate how much medical care can cost:

- A broken leg can cost up to *$7,500* to treat.
- The average cost of a 3-day hospital stay is around *$30,000*.
- Comprehensive cancer care can cost hundreds of thousands of dollars.

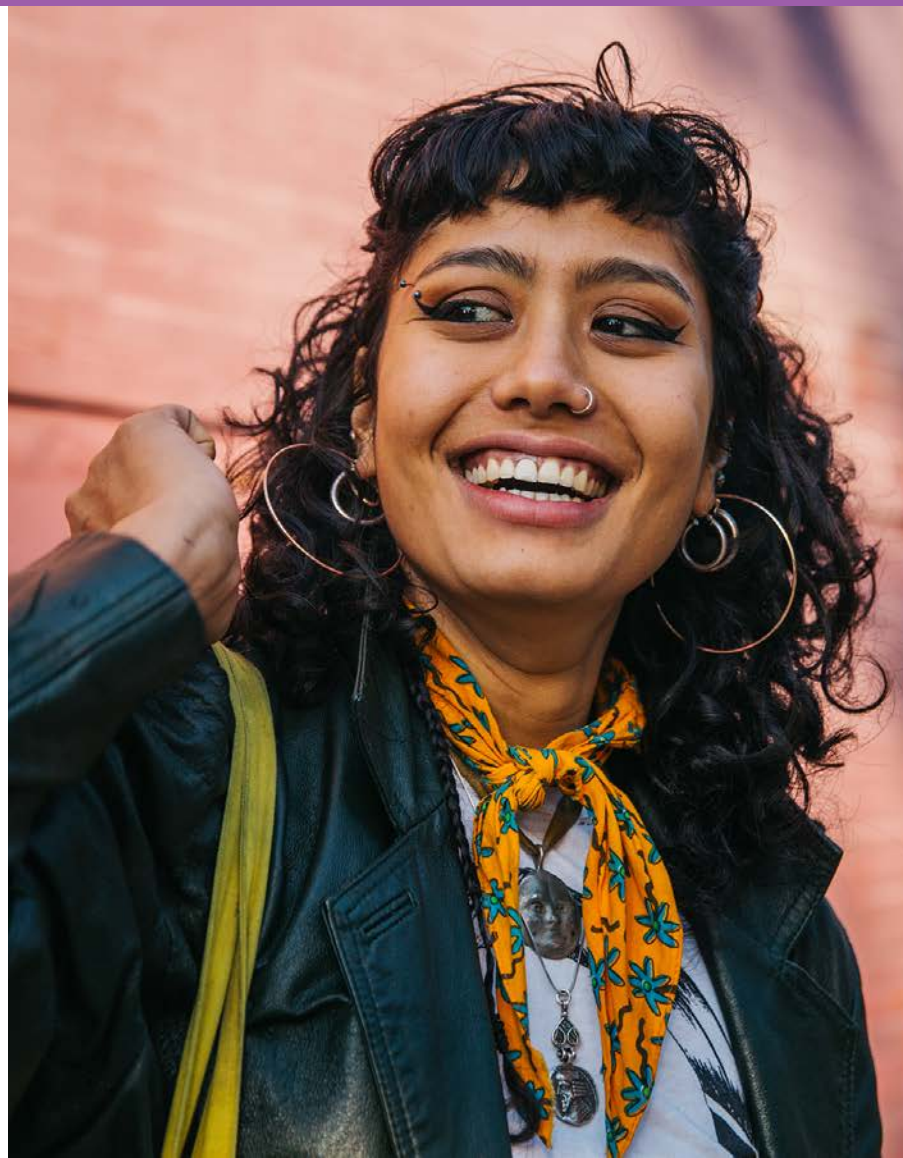
Having health coverage can help protect you from high, unexpected costs like these.



Source: healthcare.gov/why-coverage-is-important/protection-from-high-medical-costs/

Essential Health Benefits

- Preventive and wellness services and chronic disease management
- Emergency services
- Hospitalization
- Prescription drugs
- Pediatric services, including dental and vision care
- Birth control coverage
- Pregnancy, maternity and newborn care
- Breastfeeding coverage
- Ambulatory patient services
- Mental health and substance use disorder services, including behavioral health treatment
- Rehabilitative and habilitative services and devices
- Laboratory services



Open Enrollment

November 1 – January 15

New enrollees must make their first premium payment to activate their coverage.

How to Enroll:

- Visit: Enroll.CareSource.com
- Call: 1-844-539-1733 (TTY: 711)

After January 15th, you can only enroll if you have a qualifying life event for a Health Insurance Marketplace “Special Enrollment Period” (SEP).

If you enroll after December 15th, be aware that your enrollment will not take effect as of January 1, 2022.



Special Enrollment Period

Examples of the most common qualifying life events include:

1. Getting married
2. Having a baby
3. Moving outside your insurer's coverage area
4. Getting a divorce
5. Leaving incarceration
6. Adopting a child or placing a child for adoption or foster care
7. Losing minimum essential coverage

Available year-round for people who qualify.

Federal and state laws limit enrollment into CareSource plans to designated time periods within a calendar year (open enrollment), unless you qualify for a special enrollment period. CareSource does not determine whether you will qualify for a special enrollment period. Please contact the Health Insurance Marketplace for greater detail on special enrollment periods.



Silver Plans

Budget-Friendly, Subsidy-Eligible

Choose the plan that fits your budget - Low Premium, Low Deductible, or the Standard plan which helps you balance premiums and cost shares (deductibles, copays and coinsurance). Plus, Silver plans are subsidy-eligible (Cost Share Reduction) for those who qualify.

	Low Premium	Standard	Low Deductible
Deductible	$6,500	$5,800	$5,100
Out-of-Pocket Maximum	$8,700	$7,900	$7,500
Coinsurance	30%	25%	20%
Primary Care or Retail Clinic Visit	$30	$25	$25
Specialist Visit	$70	$60	$60
Urgent Care Visit	$75	$75	$75
Emergency Room Visit	$500*	$500*	$400*
Tier 1: Low Cost Prescription Drug Coverage (Retail/90-day Mail)	$20/$50	$20/$50	$20/$50
Pediatric Dental and Vision Services	$0 Preventive/Diagnostic, varying cost shares for restorative/basic, major comprehensive, and medical necessary orthodontics.		

**After deductible. In the chart above, amounts using a dollar sign ($) refer to copays (except for Deductible and Out-of-Pocket Maximum). Amounts using a percentage (%) refer to coinsurance.*

CSR Silver Plans

CSR Level 1, 2 and 3 are available upon eligibility for Cost-Sharing Reductions as determined by the Health Insurance Marketplace.

	CSR Level 1			CSR Level 2			CSR Level 3		
	Low Premium	Standard	Low Deductible	Low Premium	Standard	Low Deductible	Low Premium	Standard	Low Deductible
Deductible	$5,700	$5,500	$4,800	$1,250	$1,200	$900	$450	$400	$350
Out-of-Pocket Maximum	$6,600	$6,000	$6,100	$2,800	$2,600	$2,500	$900	$750	$700
Coinsurance	20%	20%	20%	10%	10%	10%	5%	5%	5%
Primary Care or Retail Clinic Visit	$25	$20	$20	$15	$10	$10	$5	$5	$0
Specialist Visit	$50	$40	$40	$40	$30	$30	$15	$15	$15
Urgent Care Visit	$75	$75	$75	$75	$75	$75	$75	$25	$25
Emergency Room Visit	$450*	$400*	$375*	$250*	$250*	$200*	$200*	$150*	$150*
Tier 1: Low Cost Prescription Drug Coverage (Retail / 90-day Mail)	$20/$50	$20/$50	$20/$50	$10/$25	$10/$25	$10/$25	$5/$12.50	$5/$12.50	$0/$0
Pediatric Dental & Vision Services	$0 Preventive/Diagnostic, varying cost shares for restorative/basic, major comprehensive, and medical necessary orthodontics.								

In the chart above, amounts using a dollar sign ($) refer to copays (except for Deductible, Out-of-Pocket Maximum). Amounts using a percentage (%) refer to coinsurance.
**After deductible.*

Bronze Plans

Lowest Premiums, Highest Out-of-Pocket Costs

Generally a good choice if you do not expect to have a lot of doctor appointments, don't need many prescription medications, or need many other health services. Unlike many of our competitors, our Bronze First plan offers access to key services - such as Primary Care, Specialist office visits, some Prescription Drugs, and more - prior to having to satisfy your deductible. Plus, the Health Savings Account (HSA) eligible plan provides a tax-free way to save for health care costs which CareSource has partnered with HSA Bank® to make it easy for you to take part in the savings!

	Bronze First	HSA Eligible Bronze
Deductible	$7,700	$5,400
Out-of-Pocket Maximum	$8,700	$7,000
Coinsurance	50%	50%
Primary Care or Retail Clinic Visit	$40	50%*
Specialist Visit	$80	50%*
Urgent Care Visit	$100*	50%*
Emergency Room Visit	$500*	50%*
Tier 1: Low Cost Prescription Drug Coverage (Retail/90-day Mail)	$25/$62.50	50%*
Pediatric Dental & Vision Services	$0 Preventive/Diagnostic, varying cost shares for restorative/basic, major comprehensive, and medical necessary orthodontics.	

*In the chart above, amounts using a dollar sign ($) refer to copays (except for Deductible, Out-of-Pocket Maximum). Amounts using a percentage (%) refer to coinsurance. *After deductible.*

Gold Plan

Higher Premiums, Lower Out-of-Pocket Costs

Typically a good choice if you expect to have a lot of doctor appointments, need many prescription medicines or need other health services.

	Gold
Deductible	$2,000
Out-of-Pocket Maximum	$6,500
Coinsurance	20%
Primary Care or Retail Clinic Visit	$20
Specialist Visit	$50
Urgent Care Visit	$75
Emergency Room Visit	$400*
Tier 1: Low Cost Prescription Drug Coverage (Retail/90-day Mail)	$15/$37.50
Pediatric Dental & Vision Services	$0 Preventive/Diagnostic, varying cost shares for restorative/basic, major comprehensive, and medical necessary orthodontics.

In the chart above, amounts using a dollar sign ($) refer to copays (except for Deductible, Out-of-Pocket Maximum). Amounts using a percentage (%) refer to coinsurance.
**After deductible.*

Telehealth

- Through our Zero Cost Telemedicine Partner Program, you have access to $0 copay telehealth office visits.
- Other Telehealth Office Visits have the same cost share as your Primary Care Physician, and non-office visits have the same cost share as an in-person visit.
- CareSource fully supports your choice to use telehealth and is willing to partner with your Provider, and we provide access to services to all members through RelyMD®.
- RelyMD® provides 24/7 access to U.S.-licensed physicians who can consult, diagnose, and prescribe medications by phone or video for short-term illnesses.



Pediatric Vision Benefits

All CareSource Marketplace plans provide pediatric vision benefits.
With the CareSource pediatric vision benefit, kids can learn, grow and succeed through healthy eye care habits. We even provide coverage for replacement eyewear if it's medically necessary.

Vision Care Services	In-Network Member Cost
Exam with Dilation as Necessary	$0 copay. Retinal Imaging at no member cost share.
Contact Lenses Fit & Follow-up	
Standard contact lenses	Up to $40 copay
Premium contact lenses	10% off retail price
Frames	100% coverage for provider-designated frames
Any available frame at a provider location	
Standard Plastic Lenses	
Single Vision	$0 copay
Bifocal	$0 copay
Trifocal	$0 copay
Lenticular	$0 copay
Progressive	See fixed premium progressive price list
Contact Lenses *(includes materials only for one of the options below)*	
Conventional	100% coverage for provider-designated contact lenses
Extended Wear Disposables	12-month supply of monthly or 2-week disposable, single vision, spherical or toric contact lenses
Daily Wear / Disposable	12-month supply of daily disposable, single vision, spherical contact lenses
Frequency	
Examination	Once every calendar year
Eyewear (eyeglasses or contacts)	Once every calendar year
Replacement Glasses	If medically necessary, 1 replacement for glasses as outlined above

Additional savings...

40% off additional pair discount*

20% off non-prescription sunglasses*

**These discounts are offered at in network providers only. Discounts are not funded by CareSource.*

See benefit summary details for full list of vision care services.

Optional Adult Dental, Vision and Fitness Benefits

For around $8* more per month, adults on your plan get access to benefits to treat the whole person – Dental, Vision and Fitness – all within a singular premium & relationship

DENTAL BENEFITS INCLUDE:

- $1,000 annual allowance
- $0 cost share for Diagnostic & Preventive services
- Basic & Major restorative services (fillings, extractions, root canals, dentures and crowns), subject to cost share

*Based on a single 30-year-old member. Your premium difference may be more or less based on your member and plan characteristics.



Adult Vision Benefits

CareSource partnered with EyeMed® to bring you access to the biggest network with the most choice – including hundreds of independent providers, and truly in-network access to popular national retailers as well as regional favorites. There are convenient locations with extended evening and weekend hours.

Vision Care Services	In-Network Member Cost
Exam with Dilation as Necessary	$0-$65 Copay or 40% Coinsurance.† Retinal Imaging at no cost to member.
Frame, Lenses & Options Package Any frame, lenses and lens options available at provider location.	$250 allowance for frame, lenses and lens options, 20% off balance over $250
Contact Lenses *(includes materials only for one of the options below)*	
Conventional	$0 copay; $250 allowance, 15% off balance over $250
Disposable	$0 copay; $250 allowance, plus balance over $250
Laser Vision Correction LASIK or PRK from U.S. Laser Network	15% off retail price or 5% off promotional price
Frequency	
Examination	Once every calendar year
Frame & Lenses or Contact Lenses	Once every calendar year

†Extra Discounts may be available for those that qualify for a CSR.

Additional savings...

40% off additional pair discount*

20% off non-prescription sunglasses*

20% off any remaining frame balance*

**These discounts are offered at in network providers only. Discounts are not funded by CareSource.*

Fitness Benefits

All below fitness benefits are included with your Dental, Vision and Fitness benefits. No monthly gym fee, no contracts, no cost*!

- Fitness Center Membership: Join participating fitness centers in our robust national network of 13,000+ locations*, including select LA Fitness®, Snap Fitness™, Anytime Fitness®, Planet Fitness® and more. Access the Premium fitness network, with a buy-up price, which includes an additional 7,000+ fitness center and studio choices, and unique experiences like rock climbing gyms and rowing centers.
- Home Fitness Kits: Receive one home fitness kit each benefit year from a variety of fitness categories like yoga, Pilates, total body strength, and more with some kits including a wearable device (e.g., Fitbit® or Garmin®).
- On-Demand Workout Videos: 8,000+ selections in the digital library, for all fitness levels.
- Healthy Living Coaching: Over-the-phone lifestyle coaching with a trained health coach in areas such as fitness, nutrition, stress, and sleep.
- Quarterly newsletter, Get Started Program, and other online tools and education at www.ActiveandFit.com

**Limitations and Exclusions apply to the Program. Full details are available in the applicable 2022 CareSource Marketplace plan Evidence of Coverage or by calling CareSource. Non-standard services at the fitness center and premium fitness network may have costs associated.*

How To Enroll

Visit Enroll.CareSource.com

Shop for plans, compare benefits, premiums and cost-sharing amounts. Then, enroll in the plan that suits your health care needs and budget best!

Prefer to talk to someone?
Our staff will be happy to help you!
Just call toll-free
1-844-539-1733 (TTY: 711)

Open enrollment begins on November 1st.



Health Savings Accounts (HSAs) are a tax advantaged health care account that you own. HSA contributions are subject to limits established by the Internal Revenue Service (IRS). The funds you contribute, but do not use, roll over year to year. Please consult your tax advisor for guidance and review IRS Publication 969 at www.irs.gov.

CareSource is a Qualified Health Plan Issuer in the Health Insurance Marketplace.





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