2023 plan comparison

MEDICAL	Cigna True Choice Medicare Advantage PPO	Cigna Medicare Surround				
Annual deductible (Part B services only)	\$0	Cigna pays 50% of your Part B deductible; you pay 50% \$2,000				
Annual out-of-pocket max (Part B only)	\$1,500					
	You pay:	After Part B deductible, Medicare pays ¹	After Part B deductible			
Wellness						
Preventive care/immunizations	\$0	100% (no deductible)	You pay \$0			
Office/routine care		` `	` 			
MNPS Employee & Family Health Care Center visits	Primary: \$0 Specialist: \$20	N/A	You pay \$0			
Primary care visits	\$0	80%				
Specialist visits	\$20	80%	Cigna pays 10%;			
Urgent care	\$20	80%	you pay 10%			
Lab services (diagnostic)	\$0	100% (no deductible)	You pay \$0			
Lab/x-ray, dialysis, chemo, radiation therapy	Lab/x-ray: \$0 All other: \$20	80%	Lab/x-ray: \$0			
Short-term rehabilitation visits	\$0	80%	All Other: Cigna pays 10%; you pay 10%			
Durable medical equipment	\$20	80%				
Part B drugs ²	\$20	80%	you puy 10/0			
Hospital care	-					
Inpatient - facility services	\$0	Day 1-60: 100% after \$1,556 deductible	Day 1-60: You and Cigna each pay half of deductible			
Inpatient - professional services	\$0	80%				
Emergency (waived if admitted)	\$120	80%	Cigna pays 10%;			
Outpatient - facility services	\$100	80%	you pay 10%			
Advanced imaging/radiation therapy	\$20	80%				
Ambulance	\$0	Up to 80%	You pay \$0			
Skilled nursing facility (see benefit summary for days 101+)	Day 1-20: \$0 Day 21-100: \$92/day	Day 1-20: 100%, Day 21-100: Cigna pays all but \$185.50/day	Day 1-20: You pay \$0 Day 21-100: You and Cigna each pay half of day rate			
Home health care	\$0	100% (no deductible)	You pay \$0			
Mental health and substance abuse						
Inpatient	\$0	\$0	\$0			
Outpatient visits	\$0	\$0	\$0			

¹ The amount Medicare pays for covered services is subject to change annually.

² Includes but is not limited to inhaled nebulizer medications, injectable drugs/IV drugs, antigens, osteoporosis drugs, erythropoiesis, blood clotting factors, immunosuppressive drugs, oral cancer drugs, oral anti-nausea drugs; follows Medicare standard guidelines

2023 plan comparison

PRESCRIPTION DRUGS	Cigna True Choice Medicare Advantage PPO with Part D Drug Coverage		Cigna Medicare Surround with Cigna Rx Medicare (PDP)		
PRESCRIPTION DRUGS	During Initial Coverage and Coverage Gap ¹ (until you have spent \$4,660-\$7,400 in true out-of-pocket Rx costs)				
Annual prescription out-of-pocket maximum	\$1,500		\$1,500		
You pay (unless otherwise noted)	Kroger	Other pharmacies	Kroger	Other pharmacies	
Certain preventive drugs					
Generic and brand	\$0		\$0		
Network retail (30-day supply)					
Tier 1: generic	\$2	\$5	\$2	\$5	
Tier 2: preferred brand	\$20	\$25	\$20	\$25	
Tier 3: non-preferred brand	\$75	\$80	\$75	\$80	
Tier 4: high-cost specialty ²	\$75	\$80	\$75	\$80	
Out-of-network	N/A	See note below ³	N/A	See note below ³	
Mail order (90-day supply)					
Tier 1: generic	N/A	\$10	N/A	\$10	
Tier 2: preferred brand	N/A	\$50	N/A	\$50	
Tier 3: non-preferred brand	N/A	\$160	N/A	\$160	
Tier 4: high-cost specialty ²	N/A	N/A	N/A	N/A	
Out-of-network	Same as in-network for 30-day supply Same as in-network for 30-day		rk for 30-day supply		
PRESCRIPTION DRUGS (retail and mail order)	Catastrophic Coverage (once you have paid \$7,400 in true out-of-pocket Rx costs)				
	Lesser of Standard Part D or Gap Coverage. Standard Part D = Greater than 5% of cost or \$4.15 for generic; greater than 5% of cost or \$10.35 for brand				

¹ Although some Medicare prescription drug plans do not provide coverage during the coverage gap, also known as the donut hole, the Medicare Surround and Cigna Rx Medicare (PDP) and Cigna MAPD plans do, so there is no gap in coverage.

² Specialty drugs are limited to a 30-day supply per fill.

³ Prescriptions purchased out-of-network are paid at the in-network level, but you're responsible for any difference between the out-of-network pharmacy billed charge and the actual in-network allowable amount. Limited to 30-day supply.