

Medica Provider Fact Sheet on Medica SoloSM

Overview

Medica SoloSM is a new low-cost health plan for individuals, available beginning September 1, 2007. The target market is young and uninsured individuals under 30 years of age, but the product is available to anyone three months of age through 64 years of age. Medica Solo utilizes the Medica Choice® network.

Available

September 1, 2007
Offered in MN only

Identification Card

MEDICA.	
Rx BIN: 003585 RxPCN: 99500	
CLM SUBM #: 94265	
ID: 123456789	
NAME(S):	
DOE, JOHN A	00
DOE, JANE B	01
ACCOUNT: (Group #): 999999	
CARE TYPE: Medica Solo	
SVC TYPE: MEDICAL	
Satisfaction of Deductible Required for Most Services	

Highlights

- Provides complete coverage for the first \$200 each calendar year for the following preventative services:
 - Annual physicals
 - Eye exams
 - Cancer screenings
 After the first \$200, the member's deductible applies.
- Provides \$50 annual benefit for eyewear.
- Provides 100% coverage, after a co-pay, for the first three non-preventative office visits each calendar year. After the first three visits, the member's deductible applies.
- Provides 100% coverage after \$200 copay for the first Emergency Room visit in a calendar year for the facility charges. After the first visit, the member's deductible applies.
- Provides 100% coverage after \$100 copay for the Urgent Care visit in a calendar year. After first Urgent Care visit, member's deductible applies.
- The Medica travel program *does* apply outside the Medica service area (MN, WI, SD, ND).
- Prenatal is included at 100%, maternity services are excluded.

Pharmacy Benefits

Maximum annual pharmacy benefit \$2000

- Tiered drug benefit
- Generic drug copay \$5
- Brand name formulary drug \$50
- Brand name non-formulary drug \$90
- Cosmetic, weight loss and erectile dysfunction medications are *excluded*.
- Specialty drugs: infertility and growth hormone medications are *excluded*.

Specialty Network

These networks follow the Medica standard networks:

- American Chiropractic Network (ACN)
- Medica Behavioral Health (MBH)
- United Resource Network (URN)
- Delta Dental
- MedImpact

Claim Submission

Claims should be submitted to:

Medica
PO Box 30990
Salt Lake City, UT 84130

Electronic payer ID 94265

Claims Payment and Provider Explanations of Benefits (EOBs)

- Payments will be issued on a different schedule than payments for Medica's other business. Payments will be issued, once per week, based on the first letter of the provider's check name:

Monday	A-C
Tuesday	D-H
Wednesday	I-M
Thursday	N-R
Friday	S-Z, 0-9, any other characters

 - Generally, the provider's check name will be the group name, e.g. ABC Clinic
 - Payments will not be bundled to one entity under the Alt Payee address. Payments will be made to the provider's check name under the individual practitioner (see Q&A for more details).
 - A maximum of 9 claims will be paid per Provider EOB.
- Provider EOBs and ePRA/835 will **not** include 7-digit COSMOS provider number.
- Adjustment, denial and disallow codes will **not** be used for this business on Provider EOBs. Proprietary "Remark codes", which are a combination of numbers and letters, will be used on Provider EOBs. Proprietary codes used on Provider EOBs are mapped to the ANSI X12 code set for the ePRA/835.