



**INDIVIDUAL + FAMILIES**



# 2025 Medica Health Plans for Missouri



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## Questions? We're here to help.



Contact our sales team with questions about your plan options, benefits and more.

**1 (855) 347-5001 (TTY: 711)**  
8 a.m. - 5 p.m. CT, Monday - Friday



Find the best plan for you.  
Visit **Medica.com/ShopPlans-MO**



Support is just a click away.  
Visit **Medica.com/Contact-us**

# Coverage + care that work for you

We're a nonprofit health plan that's been around for nearly 50 years. We offer a range of plans to meet every need and budget. They all give you these benefits and much more:



\$0 preferred diabetic supplies and preferred insulin for only \$35 per month on select plans



\$0 Virtual care visits on most plans



\$0 copay plans available for primary care, mental health, and behavioral health

# How to choose the right plan

Not sure how to select health coverage? These topics can help you understand your plan options.

## How it works

When you're in the market for a health plan, check out the coverage and benefits. Coverage is how much financial protection you get from insurance. Benefits are the health services that your plan covers. Insurance plans come in four "metal" categories. What's the difference between them? It comes down to how much you pay for your care – your premium – and how much your plan pays.

## Balancing costs and benefits

The higher the coverage level, the higher the premium. Premiums are higher for gold plans because the insurer covers more of the medical care costs for you and everyone on your plan. Silver and bronze plans have lower premiums, but you'll pay more of your medical expenses. You'll want to balance the level you want with the premium you can afford.

## How many doctor visits and prescriptions will you use next year?



### VERY FEW

Consider a **bronze plan**.  
These are best if you don't go to the doctor or pharmacy very often. You pay a lower premium, but your out-of-pocket care costs will be higher.



### IN BETWEEN

Consider a **silver plan**.  
These are best if you aren't sure how often you'll go to the doctor or pharmacy. Your premium and out-of-pocket care costs will be more evenly balanced.



### MANY

Consider a **gold plan**.  
These are best if you go to the doctor or pharmacy frequently. You pay a higher premium, but your out-of-pocket care costs will be lower.

# Plan types

What's the difference between plan types? It has to do with when and how you pay for your health care and how predictable your expenses will be. Note: other services not listed below may be subject to coinsurance or a deductible which you will need to pay.

## With a standard plan, here's what you can expect:

- Primary care, behavioral health and therapy office visit copays
- Lower costs when you access specialty care
- An easy shopping experience with options at every metal tier across our provider networks

## With a \$0 copay plan you'll pay:

- \$0 for primary care office visits, behavioral health visits, urgent care, and more
- Specialty care at a dependable office visit copay
- Prescription copays on all medications your plan covers
- An easy way to maintain or build your relationship with your provider

## With a share plan, here's what you can expect:

- Primary care at an affordable office visit copay
- Low cost generic copays at the pharmacy
- Lower monthly premiums to help you balance your budget and stay healthy

## With a premier plan you'll pay:

- \$0 for primary care office visits and more after your deductible is met
- Specialty care at a dependable office visit copay after your deductible is met
- Lower cost generic copays at the pharmacy
- Our lowest possible deductible on a Bronze plan

# Covered benefits and preventive care

## What's covered?

All plans cover a comprehensive list of health care services called benefits. You and your health plan share the cost for these services. They include:



### Most same-day services

*office visits, outpatient services*



### Emergency services



### Prescription drugs



### Hospitalization

*including surgery and overnight stays*



### Pregnancy, maternity, and newborn care

*before and after birth*



### Pediatric services

*medical care for children*



### Rehabilitative and habilitative services and devices

*these help people with injuries, disabilities, or chronic conditions gain or recover mental and physical skills*



### Mental health and substance abuse services



### Preventive care and chronic disease management

Specific services vary based on the state you live in. There's no annual limit on the value of services you can receive in these categories as long as you receive them from a provider in your network. You can see what each plan covers by viewing its plan document.

## Preventive care<sup>†</sup> available at no cost

Preventive care that you get from a network provider is available at no cost to you. Preventive care, commonly known as your annual checkup or physical, can help you spot or avoid health problems. It also includes services like:



### Annual exams



### Recommended vaccines such as tetanus, HPV, and influenza



### Cancer screenings such as skin, breast, and cervical (Pap test)



### Obesity screening and counseling



### Alcohol abuse and tobacco use screenings, and help to stop



### Screenings for blood pressure, high cholesterol, diabetes, and depression

Find out more about preventive care at [Medica.com/Prevention](https://www.Medica.com/Prevention).

<sup>†</sup> Preventive services as defined by the Patient Protection and Affordable Care Act (PPACA). If your doctor does extra tests, follow-up appointments, and treatments, you may have additional costs.

# Help paying for your insurance

Many people who buy their own insurance can get financial assistance to help pay for their premiums and out-of-pocket costs — and a lot of them don't even know it. There are two kinds of help, and your estimated household income and other household information determine what you qualify for. That help may cover most or even all of your costs.

1

## Premium tax credits\*

You can use a tax credit to lower your monthly premium. This is what you pay each month for your insurance. If your estimated income falls between 100%–400% of the federal poverty level for your household size, you may qualify for a premium tax credit. You can use that credit to enroll in any metal level (gold, silver or bronze) plan.

2

## Cost-Share Reduction (CSR) plans\*

CSR plans help reduce your out-of-pocket costs by giving you a discount that lowers your deductibles, copays, and coinsurance. For the discount to apply, you must enroll in a silver metal level plan.

To get assistance you may be qualified for, you'll need to buy your plan through your state's **Health Insurance Marketplace**. The Marketplace can also help you apply for public assistance insurance if your income makes you eligible.

## Who qualifies for help?

Your 2024 household income determines if you can get help paying for your 2025 health insurance. To see if you qualify, visit [Medica.com/ShopPlans-MO](https://www.Medica.com/ShopPlans-MO).

### Eligibility guidelines:\*

- Individuals making \$20,783 — \$60,240 or more
- Family of two making \$28,207 — \$81,760 or more
- Family of three making \$35,632 — \$103,280 or more
- Family of four making \$43,056 — \$124,800 or more

\* All income ranges and financial help qualifications are determined by [HealthCare.gov](https://www.HealthCare.gov). Visit [HealthCare.gov](https://www.HealthCare.gov) for more information.

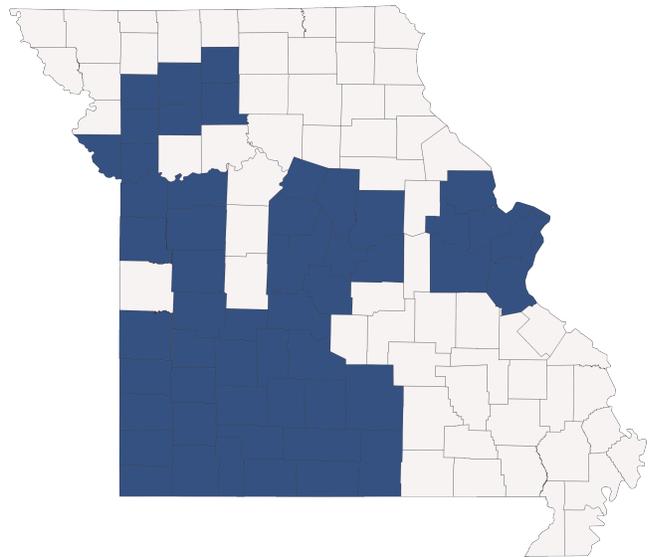
# Medica plan networks

## Eligibility + enrollment area

If you live in one of the counties below and you aren't enrolled in Medicare, you can enroll in the Individual + Family plans in this brochure.

### Available in:

- Barry
- Barton
- Boone
- Caldwell
- Callaway
- Camden
- Cass
- Cedar
- Christian
- Clay
- Clinton
- Cole
- Cooper
- Dade
- Dallas
- Daviess
- DeKalb
- Douglas
- Franklin
- Greene
- Grundy
- Henry
- Hickory
- Howard
- Howell
- Jackson
- Jasper
- Jefferson
- Johnson
- Laclede
- Lafayette
- Lawrence
- Lincoln
- Livingston
- McDonald
- Miller
- Montineau
- Morgan
- Newton
- Osage
- Ozark
- Platte
- Polk
- Saint Clair
- Saint Charles
- Saint Louis
- Saint Louis City
- Stone
- Taney
- Texas
- Vernon
- Warren
- Webster
- Wright



Want to know if your provider is in our network?  
Visit [Medica.com/Find-Care](https://www.medicare.com/Find-Care) to search our provider directory.

# Choosing the right care

## Where to go for care



### **\$0 virtual care options**

\$0 virtual care visits with Amwell or SSM Health E-visit are available from the comfort of home for medical issues like urinary tract infections, lice, yeast infections, and pink eye/conjunctivitis, and more. They're ideal if you can't meet with your regular provider face-to-face. A virtual care visit with your provider is the same as your primary care copay.



### **Primary care provider**

Your primary care provider should usually be your first choice for care. They know your medical history, plus a scheduled office visit is the least expensive type of care.



### **Urgent care**

Urgent care is available if you need to treat medical problems sooner than a scheduled office visit. Use it for bruises or sprains, minor cuts, minor burns, and the like.



### **Emergency room (ER)**

The ER is for life-threatening illnesses or injuries. Go to the ER for unconsciousness, severe or unusual bleeding, a suspected heart attack or stroke.

## Out-of-network coverage



### **Emergency and urgent care services**

You're always covered for emergency and urgent care with in-network copays for care you get in the U.S. and its territories.



### **Non-emergency services**

You pay higher costs for non-emergency care when you visit an out-of-network provider.



### **Care while traveling**

Virtual care is an option if you're traveling in the United States or its territories, and need to meet with your doctor. Your office visit cost share will apply, and you can schedule and get virtual care from anywhere you have an internet connection.

### **No referral? No problem.**

You don't need referrals for specialty care as long as the specialist is in-network.

# 2025 network details

A **network** is made up of the independently contracted **doctors, hospitals, clinics, and pharmacies** that we work with. Your benefits will apply to in-network providers. See “Receiving care outside of your network” on the “What else you need to know” page to learn more about your out-of-network coverage.



## Ready to enroll?

We make it simple.

Call us at **1 (855) 347-5001 (TTY: 711)**.

8 a.m. – 5 p.m. CT, Monday - Friday

PLAN NAME	PRIMARY + SPECIALTY CARE DOCTORS	HOSPITALS	FIND A DOCTOR OR HOSPITAL	FIND A MENTAL HEALTH PROVIDER	COVERED COUNTIES
Balance by Medica 	8,600+	50+	<a href="https://medica.com/SearchBalanceNetwork-2025">Medica.com/ SearchBalanceNetwork-2025</a>	<a href="https://medica.com/SearchBalanceNetwork-2025">Medica.com/ SearchBalanceNetwork-2025</a>	Barry, Barton, Cedar, Christian, Dade, Dallas, Douglas, Franklin, Greene, Hickory, Howell, Jasper, Jefferson, Laclede, Lawrence, Lincoln, McDonald, Newton, Ozark, Polk, Saint Charles, Saint Clair, Saint Louis, Saint Louis City, Stone, Taney, Texas, Vernon, Warren, Webster, and Wright
Medica with MU Health Care 	2,000+	5+	<a href="https://medica.com/SearchMUHealthNetwork-2025">Medica.com/ SearchMUHealthNetwork-2025</a>	<a href="https://medica.com/SearchMUHealthNetwork-2025">Medica.com/ SearchMUHealthNetwork-2025</a>	Boone, Callaway, Camden, Cole, Cooper, Howard, Miller, Moniteau, Morgan, and Osage
Select by Medica 	5,300+	20+	<a href="https://medica.com/SearchSelectNetwork-2025">Medica.com/ SearchSelectNetwork-2025</a>	<a href="https://medica.com/SearchSelectNetwork-2025">Medica.com/ SearchSelectNetwork-2025</a>	Caldwell, Cass, Clay, Clinton, Daviess, DeKalb, Grundy, Henry, Jackson, Johnson, Lafayette, Livingston, and Platte
WellFirst by Medica 	3,250+	25+	<a href="https://medica.com/SearchWellFirstNetwork-2025">Medica.com/ SearchWellFirstNetwork-2025</a>	<a href="https://medica.com/SearchWellFirstNetwork-2025">Medica.com/ SearchWellFirstNetwork-2025</a>	Saint Charles, Saint Louis, Saint Louis City, and Warren

## Choosing your plan’s network

A smaller network will **save you the most** on your premium. With a smaller network, you’ll have fewer doctors and hospitals to choose from. We’ve contracted with health systems to give you access to quality care at a lower cost.

We’ve highlighted the networks that will help you save more with a 

# Prescription drug coverage

## Our list of covered drugs

To help keep your costs low, our plans cover safe and effective drugs on our List of Covered Drugs. Your cost will depend on which tier your drug belongs to.

\$	<b>TIER 1</b>	<b>Generic</b>
\$\$	<b>TIER 2</b>	<b>Preferred brand</b>
\$\$\$	<b>TIER 3</b>	<b>Non-preferred brand</b>
\$\$\$\$	<b>TIER 4</b>	<b>Specialty</b>



## Insulin coverage

You'll pay no more than **\$35 for preferred insulin** — per prescription, per month — when you fill it at a network pharmacy.



## 90-day refill options

Your doctor can prescribe 90-day supplies of certain medications. Once prescribed, pick it up at a network pharmacy — or have it sent through our mail-order pharmacy at no extra cost when you use standard shipping.



## Search the drug list or find a pharmacy

To apply your benefits to a prescription on our drug list, you need to visit an independently contracted network pharmacy. Our network includes more than 68,000 pharmacies nationwide, including most major chains and thousands of independent pharmacies.

See what drugs are covered or find a network pharmacy at **[Medica.com/ShopPlans-MO](https://www.Medica.com/ShopPlans-MO)**

# Extras that make your plan even better

These resources can help you stay healthy.  
And you get them all at no additional cost.



## Personal Health Advocate

Your advocate can help you find doctors, estimate costs, and make informed health care decisions. All completely confidential.



## 24/7 Nurseline

Get 24/7 answers for many non-urgent care questions. Nurses will help answer questions about symptoms, medications, and health conditions. They also can help you find the right location to get care.



## Online health program with reward opportunities

With My Health Rewards by Medica, you'll get access to programs to motivate and support a healthy lifestyle. Stay active, eat healthy, manage stress, and find direction for your life.



## On-demand help for stress, anxiety, and depression

Get access to clinically proven techniques based on cognitive behavioral therapy for stress, anxiety, depression, or whatever else you're going through. You also get access to AbleTo, an app-based therapy program.

AbleTo also offers a coaching tool that lets you message with a supportive behavioral health coach and try live, anonymous classes. There's an additional cost for coaching that's not covered under your Medica plan. Find out more by tapping on the "Coaching" tile in the AbleTo app.

*Note: if there is a discrepancy between this document and the plan's Policy of Coverage (POC), the POC will govern.*

# 2025 plan examples

Here are some plans we're offering this year. See the full list of them and their benefits at [Medica.com/ShopPlans-MO](https://www.Medica.com/ShopPlans-MO).



## Ready to enroll?

We can help you pick a plan too

Call us at **1 (855) 347-5001 (TTY: 711)**.

8 a.m. – 5 p.m. CT, Monday - Friday

PLAN NAME	METAL LEVEL	PLAN TYPE	DEDUCTIBLE/OUT-OF-POCKET MAX Medical + Pharmacy	PRIMARY CARE	SPECIALTY CARE	VIRTUAL CARE Amwell or SSM Health E-Visit	PREVENTIVE CARE	INDIVIDUAL COUNSELING + THERAPY	PRESCRIPTIONS Generic/Preferred Brand/ Non-Preferred Brand/ Specialty
Balance by Medica	Gold	Standard	Individual: \$1,500/\$7,800 Family: \$3,000/\$15,600	\$30 <sup>1</sup>	20% <sup>2</sup>	\$0	\$0	\$30	\$15/\$30/\$60/\$250
		\$0 Copay	Individual: \$1,325/\$7,750 Family: \$2,650/\$15,500	\$0	\$90	\$0	\$0	\$0	\$15/\$75/\$225/\$550
		Share	Individual: \$1,500/\$8,700 Family: \$3,000/\$17,400	\$30	\$90	\$0	\$0	\$30	\$15/\$80/50% <sup>2</sup> /\$550
Medica with MU Health	Silver	Standard	Individual: \$5,000/\$8,000 Family: \$10,000/\$16,000	\$40 <sup>1</sup>	\$90	\$0	\$0	\$40	\$20/\$40/\$80 <sup>2</sup> /\$350 <sup>2</sup>
		\$0 Copay	Individual: \$3,500/\$9,000 Family: \$7,000/\$18,000	\$0	\$80	\$0	\$0	\$0	\$25/\$125/\$225/\$700
Select by Medica		Share	Individual: \$5,900/\$9,100 Family: \$11,800/\$18,200	\$30	\$110	\$0	\$0	\$30	\$20/\$125/60% <sup>2</sup> /\$700
WellFirst by Medica	Bronze	Standard	Individual: \$7,500/\$9,200 Family: \$15,000/\$18,400	\$50 <sup>1</sup>	\$100	\$0	\$0	\$50	\$25/\$50 <sup>2</sup> /\$100 <sup>2</sup> /\$500 <sup>2</sup>
		\$0 Copay	Individual: \$7,500/\$9,200 Family: \$15,000/\$18,400	\$0	\$150	\$0	\$0	\$0	\$30/\$200/\$500/\$750
		Catastrophic	Individual: \$9,200/\$9,200 Family: \$18,400/\$18,400	\$30	0% <sup>2</sup>	0% <sup>2</sup>	0%	\$30	0% <sup>2</sup> /0% <sup>2</sup> /0% <sup>2</sup> /0% <sup>2</sup>
Balance by Medica Medica with MU Health	Bronze	Premier	Individual: \$2,000/\$9,200 Family: \$4,000/\$18,400	\$0 <sup>2</sup>	\$160 <sup>2</sup>	\$0 <sup>2</sup>	\$0	\$0	\$35/\$200/70% <sup>2</sup> /\$750
Select by Medica WellFirst by Medica		Share	Individual: \$7,500/\$9,200 Family: \$15,000/\$18,400	\$50	\$200	\$0	\$0	\$50	\$30/\$250/70% <sup>2</sup> /\$850

<sup>1</sup> Primary visit cost-share applies to physical therapy, occupational therapy, and speech therapy

<sup>2</sup> Cost-share begins after the deductible is met.

Our plans come in three “metal” categories:



**Gold**  
HIGHER PREMIUMS



**Silver**  
MODERATE PREMIUMS



**Bronze**  
LOWER PREMIUMS

## THREE WAYS TO ENROLL



### Over the phone

Call 1 (877) 347-0267 (TTY: 711).  
for fast phone enrollment.  
8 a.m. – 5 p.m. CT, Monday – Friday



### Online

Visit [Medica.com/ShopPlans-MO](https://www.Medica.com/ShopPlans-MO)  
to enroll.



### Through the mail

Complete and sign a paper application form  
and submit as indicated on the form. (You  
can call us to get a paper application  
or contact your local Medica agent.)



### Have questions?

Email us at  
[MedicalIndividualProducts@Medica.com](mailto:MedicalIndividualProducts@Medica.com)  
or find an agent or broker in your community  
at [Medica.com/Agent](https://www.Medica.com/Agent)



# After you enroll

## What to expect as a new member:



### Making your first premium payment

To complete enrollment and activate your coverage, you'll need to make your first premium payment.

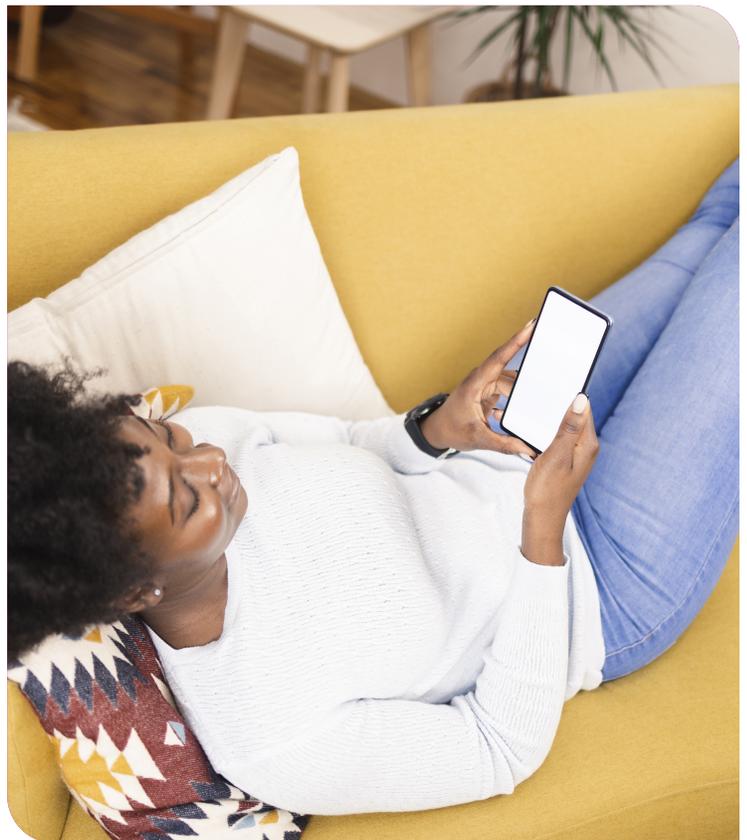
After we get that first payment, we'll send your Medica member ID card and Welcome Guide in the mail, and you can start using your insurance coverage on your effective date.

### Your member account

Your online member account lets you:

- Download your ID card
- Find doctors, hospitals, or clinics close by
- Explore mental health and wellness benefits
- Pay your premium and sign up for autopay

Sign up at [Medica.com/SignIn](https://www.Medica.com/SignIn).



# What else you need to know

## Eligibility and requirements

To qualify for a Medica plan, you must be a resident of Missouri, and not enrolled in Medicare. You also must live within your selected network's service area to enroll in and remain in the plan.

## Understanding benefits and coverage details

This brochure is a brief overview of the plans. This document is not an invitation to apply or contract for insurance and is only intended to provide basic information about insurance that may be available. For costs and further details of the coverage, including exclusions, any reductions or limitations, and the terms under which the policy may be continued in force, see your agent, visit [Medica.com/ShopPlans-MO](https://www.medicamissouri.com/ShopPlans-MO), or you can get a paper copy by calling 1 (877) 347-0267 (TTY: 711).

## Prior approvals and excluded services

Some services and procedures require prior approval from Medica before they are covered. Services not covered include, but are not limited to, custodial care, adult eye wear, most dental services, cosmetic services, refractive eye surgery, those received while on military duty and services that are investigational or not medically necessary. For a complete list, see a Medica Individual and Family insurance policy available on [Medica.com/ShopPlans-MO](https://www.medicamissouri.com/ShopPlans-MO) or call 1 (877) 347-0267 (TTY: 711).

## Pediatric dental is not covered

These policies do not include pediatric dental services. Pediatric dental is an essential health benefit that can be purchased as a standalone product through [HealthCare.gov](https://www.healthcare.gov). For more information visit [HealthCare.gov](https://www.healthcare.gov).

## Member Complex Case Management

We have services and programs designed to help members with certain health conditions manage their overall care and treatment. Find more information about the programs and services available by visiting [Medica.com/ShopPlans-MO](https://www.medicamissouri.com/ShopPlans-MO).

## Deductible and out-of-pocket maximum details

The deductible and out-of-pocket maximum are subject to a "cost of living" increase on a yearly basis. This increase is tied to the Consumer Price Index and/or may result from adjustments needed to keep plans within the range for a given metal level; metal levels (e.g., Gold, Silver, Bronze must always be in compliance with the Affordable Care Act (ACA) for Qualified Health Plans (QHPs).

## Cost Share Reduction plans

You may be able to get help paying your health insurance premium or qualify for plans with reduced deductibles and copays. Plans with reduced deductibles and copays are called Cost Share Reduction (CSR) plans. You can get this assistance if you get health insurance through [HealthCare.gov](https://www.healthcare.gov), your income is below a certain level, and you choose a health plan from the Silver plan category. Reduced cost sharing is not available with a Catastrophic plan. If you're a member of a federally recognized tribe, you may qualify for additional cost-sharing benefits. To see if you're eligible, please visit [HealthCare.gov](https://www.healthcare.gov).

## Receiving care outside your network

Unless it's an emergency, emergency air ambulance service, or certain out-of-network care at an in-network facility or pre-approved by Medica, there is no coverage if you visit a provider that is not in your plan's network. This means that your provider may require you to be responsible for the full cost of any care or supplies. Learn more at [Medica.com/BalanceBill](https://www.medicamissouri.com/BalanceBill).





# You're not just covered, you're cared for.

## Connect with us

**Call** us at 1 (877) 347-0267 (TTY: 711). 8 a.m. - 5 p.m. CT, Monday - Friday

**Email** us at [MedicalIndividualProducts@Medica.com](mailto:MedicalIndividualProducts@Medica.com).

**Visit** us on the web at [Medica.com/ShopPlans-MO](https://www.Medica.com/ShopPlans-MO).

**Follow** us on social media with the handle [@Medica](https://www.Medica.com).



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