

ATK Medicare Supplement Plan Post 65 retirees and Medicare-eligible participants may enroll in this plan. If you enroll, you must also enroll for Medicare Part A and Part B coverage. You are responsible for paying the Medicare Part A and Medicare Part B deductibles. **This plan has no prescription drug coverage.** To obtain drug coverage, people on Medicare must enroll in a Medicare prescription drug plan, Medicare Part D. Like other Medicare insurance, you pay a monthly premium, a deductible and share the cost of your prescriptions. ***Chart Illustrates 2012 deductibles. Medicare can advise 2011 deductibles.**

Services and medical expenses	Medicare pays *	ATK Medicare Supplement Pays	You pay *
Part A: Hospital Services			
Hospital expenses: semi-private room and board, general nursing and hospital services and supplies			
• Day 1-60	All but Part A deductible (\$1,156 for 2012) *	\$0	Part A deductible (\$1,156 for 2012) *
• Days 61 – 90	All but \$289 per day *	\$289 per day	\$0
• Days 91 – 150	All but \$578 per day *	\$578 per day	\$0
• Beyond 150 days	\$0	100% up to the \$ 10,000 lifetime maximum	100% after lifetime maximum is met
Post-hospital skilled-nursing care facility			
• Days 120	100%	\$0	\$0
• Days 21 -100	All but \$144.50 per day *	\$144.50 per day	\$0
• Beyond 100 days	\$0	\$0	100%
Home health care (medically necessary care prescribed by a physician)	100% of Medicare approved expenses	\$0	Any remaining charges not approved by Medicare
Hospice care	100% of the amount approved by Medicare except \$5 outpatient drug copay 5% inpatient respite care coinsurance	100% of the amount approved by Medicare but not paid by Medicare	Any remaining charges not approved by Medicare
Part B: Physician and medical services			
Physician's Services: for hospital, surgery, anesthesia, outpatient hospital care, radiology, pathology, ambulance, etc.	80% of Medicare approved amount after Part B deductible (\$140 for 2012) *	20% of Medicare approved amount	Part B deductible (\$140 for 2012) * and any remaining charges not approved by Medicare
Durable medical equipment	80% of Medicare approved amount after Part B deductible	20% of Medicare approved amount	Part B deductible and any remaining charges not approved by Medicare
Physician office and home visits including evaluation and management of a new patient	80% of Medicare approved amount after Part B deductible	20% of Medicare approved amount	Part B deductible and any remaining charges not approved by Medicare
Outpatient physical and occupational therapy	80% of Medicare approved amount after Part B deductible	20% of Medicare approved amount	Part B deductible and any remaining charges not approved by Medicare
Outpatient mental health	80% of Medicare approved amount after Part B deductible	20% of Medicare approved amount	Part B deductible and any remaining charges not approved by Medicare
Preventive services			
• Yearly routine exams	Check details in your <i>Medicare & You Handbook</i> , provided by Medicare	100% of the amount approved by Medicare but not paid by Medicare	Any remaining charges not approved by Medicare
• Cancer screenings		100% of the amount approved by Medicare but not paid by Medicare	Any remaining charges not approved by Medicare

This is only a summary communication and constitutes a Summary of Material modification (SMM) of the ATK health plan. Read your Summary Plan Description (SPD) for more information about what is and is not covered. If there are any discrepancies between this information and the SPD, the SPD is the governing document. ATK reserves the right to change, amend, or terminate any of its benefit plans at any time in its sole discretion. Retiree eligibility is determined by ATK.



Cigna Medicare Supplement

Medical Benefits that Supplement Medicare

The Cigna Medicare Supplement plan helps you pay some of the health care costs that your Medicare Part A and Part B plans do not cover. Please refer to your Summary of Benefits for details about your specific supplement plan.

With the Cigna Medicare Supplement plan, you can visit any health care provider who accepts Medicare. You don't need to select a Primary Care Physician, and you don't need a referral to see a specialist.

Your out-of-pocket costs are lower when you use a doctor who accepts Medicare assignment.

Cigna Medicare Supplement is available only if you and/or your eligible dependent are enrolled in Medicare Part A and Part B.

To find doctors who accept Medicare, or to learn more about Medicare benefits and services, visit www.medicare.com or call 1-800-MEDICARE (1-800-633-4227) 24 hours a day, 7 days a week. TTY/TDD users call 1-877-486-2048.

Questions & Answers

Will I receive an identification card?

After you enroll in Cigna Medicare Supplement, you will receive a Cigna Identification (ID) Card. You should present this card along with your Medicare card when you receive care. The back of the ID card has the address for submitting claims along with the toll-free telephone number for Cigna's Customer Service.

Do I submit claims to Cigna?

Not necessarily. For services covered by Medicare Part A or Part B, your doctor or hospital will send a claim directly to Medicare. Medicare will pay their part of the claim and send the rest to Cigna electronically - be sure to give Cigna your Medicare claim number. This means less paperwork for you!

For services not covered by Medicare but covered by your Cigna plan, you will need to submit a claim to Cigna. Please send a medical claim form and an itemized bill from your doctor or hospital to the mailing address on the back of your Cigna ID card. Forms are available at myCigna.com or through your Cigna Customer Service team. Just call the toll-free number on the back of your Cigna ID card - 24 hours per day, 7 days per week.

Call

the Cigna information
line toll free:

1.800.CIGNA24 1.800.244.6224

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