### COMPANIONCARE MEDICARE SUPPLEMENT PLAN, NORTHERN REGION

#### Benefit Summary
(As of 1/1/21—Based on Calendar Year)

<table>
<thead>
<tr>
<th>Services</th>
<th>Medicare 2021 Benefits</th>
<th>CompanionCare Based on 2021 Medicare Benefits</th>
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</table>
| **Inpatient Hospital (Part A)** | • Pays all but first $1,408 for 1st 60 days  
• Pays all but $352 a day for the 61st–90th day  
• Pays all but $704 a day  
• Lifetime Reserve for 91st to 150th day  
• Pays nothing after Lifetime Reserve is used (refer to Evidence of Coverage) | • Pays $1,408  
• Pays $352 a day  
• Pays $704 a day  
• Pays 100% after Medicare and Lifetime Reserve are exhausted, up to 365 days per lifetime |
| **Skilled Nursing Facilities**  | (must be approved by Medicare)  
• Pays 100% for 1st 20 days  
• Pays all but $185.50 a day for 21st to 100th day  
• Pays nothing after 100th day | • Pays nothing  
• Pays $185.50 a day for 21st to 100th day  
• Pays nothing after 100th day |
| **Deductible (Part B)**         | • $203 Part B deductible per year                                                   | • Pays $203                                                                                                   |
| **Basis of Payment (Part B)**   | • 80% Medicare-approved (MA) charges after Part B deductible                         | • Pays 20% MA charges Including 100% of Medicare Part B deductible                                             |
| **Medical Services (Part B)**   | • Doctor, X-Ray, Appliances, and Ambulance  
• Lab  
• 80% MA charges  
• 100% MA charges | • Pays 20% MA charges  
• Pays nothing                                                                                          |
| **Physical/Speech Therapy (Part B)** | • 80% MA charges up to the Medicare annual benefit amount | • Pays 20% MA charges up to the Medicare annual benefit amount (PT and ST combined) |
| **Blood (Part B)**              | • 80% MA charges after 3 pints                                                      | • Pays 1st 3 pints unreplaced blood and 20% MA charges                                                       |
| **Travel Coverage**             | (when outside the US for less than 6 consecutive months)  
• Not covered | • Pays 80% inpatient hospital, surgery, anesthetist and in-hospital visits for medically necessary services for 90 days of treatment per hospital stay. For details call Anthem customer service at 1-800-825-5541. |

#### Outpatient Prescription Drugs
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<th>Medicare Part D Prescription Drug Plan Through Navitus Health Solutions</th>
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| **Retail Pharmacy Mail Order**               | • 30-day supply $9 Generic co-pay, $35 Brand co-pay  
• 90-day supply $18 Generic co-pay, $90 Brand co-pay         |
| **Due to Medicare restrictions the following programs are not available with CompanionCare:** | • Pharmacy benefits are administered through Navitus Health Solutions Medicare Rx using a Medicare D formulary. Some exclusions and prior authorizations may apply. Members that have questions regarding their medication coverage can call Navitus Health Solutions Medicare Rx at 1-866-270-3877 or TYY users please call 711. |

CompanionCare is a Medicare Supplement plan that pays for medically necessary services and procedures that are considered a Medicare Approved Expense. SISC will automatically enroll CompanionCare Members into Medicare Part D. No additional premium required. SISC plans are NOT subject to the "doughnut hole"
Eligibility: Member must be retired and enrolled in Medicare Part A (hospital) and Medicare Part B (medical) coverage. Retirees under age 65 with Medicare for the disabled (Parts A and B) may enroll in CompanionCare.

Enrollment: Enrollment forms and a copy of the Medicare card must be received by SISC 45 calendar days in advance of requested effective date—NO exceptions. SISC will automatically enroll members in Medicare Part D for outpatient prescription medications. Members already enrolled in non-SISC Medicare Part D plans will be automatically disenrolled from those plans.

Disenrollment: Disenrollment throughout the year requires submission of a disenrollment form to SISC with a 45-calendar day advance notice of requested effective date. During the annual Medicare D Open Enrollment members can enroll into Medicare Part D plans outside of SISC with a January 1 effective date. Enrollment in a Medicare D plan outside of SISC will terminate the SISC medical and Rx benefits.

Provider Network: Physicians who accept Medicare Assignment

For additional Medicare benefit information, please go to www.medicare.gov or call 1-800-medicare (1-800-633-4227) For additional Navitus Medicare Rx prescription drug information, please go to www.navitus.com or call 1-866-270-3877.

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<th>Rate Effective October 1, 2021</th>
<th>Total Cost Per Person</th>
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<tr>
<td>Retirees with Medicare Parts A and B (SISC will enroll members in Part D)</td>
<td>Northern Region: $378.00</td>
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A school district’s geographic location will determine the applicable rate. Northern Region includes Monterey, Kings, Tulare, Inyo and all other counties to the north.