



INDIVIDUALS + FAMILIES

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# 2025 Member Guide

## Get to know your plan

- Explore your member account
- Find in-network care
- See benefits, track claims, and use wellness extras

# Welcome

**Thank you for trusting us with your 2025 health plan.**

This guide shares a few easy ways to find important coverage information. It's a handy how-to: From signing in to your member account to tracking claims and downloading free mobile apps. Check it out — and use it to get everything you need from your plan.



**You're not just covered, you're cared for.®**

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## Let's get started together

Scan the QR codes throughout this guide — or visit the URLs — to get going.

### Find your Policy of Coverage

For more complete plan details, limitations, and exclusions, refer to your Policy of Coverage (POC). In a conflict, your POC will govern. Here's how to find your POC:

- Sign in or set up your member account at [Medica.com/NewAccount](https://www.Medica.com/NewAccount)
- Select "**Documents**"
- Select "**Coverage + benefits**"

*SSM Health Insurance Company (SSMHIC) is a Qualified Health Plan Issuer in the Federal Health Insurance Marketplace.*

## Set up your member account

You'll find almost everything you need in your online member account. Sign in to manage your plan from anywhere.\*

- Check claims status
- Find in-network doctors, hospitals, or clinics
- Explore mental health and wellness extras
- Pay your monthly premium, sign up for autopay, and more



Scan to sign in or visit  
**Medica.com/NewAccount**

### GO PAPERLESS

Save a tree and get your benefit statements from your member account. Sign in and choose paperless delivery under “**Communication Preferences.**”

## Get your ID card

Lose your physical member ID card? No problem — you're still covered. When your plan's active, you can request a new one, add it to your phone, or view and print a digital ID. Here's how:

- Sign in at **Medica.com/NewAccount**
- Look for “**Tools + resources,**” and click “**View ID card**”

*\*Per federal law, subscribers will have access to dependent accounts if the dependent is 11 years old or younger. Once a dependent turns 12 years old, the subscriber can no longer access the dependent's account, nor will the dependent be able to create an account. Once the dependent, or any subscriber, turns 13 years old, they can create their own account.*



## YOUR CARE NETWORK

# Choose a primary care provider

Your next steps are to find a primary care provider and schedule your Annual Preventive Visit (also referred to as an Annual Wellness Visit). Your provider can be a Medical Doctor (MD), Physician's Assistant (PA), or Nurse Practitioner (NP).

Your primary care provider is by your side to help you get and stay healthy. And they can catch illnesses early, which can help you and your family avoid expensive tests and treatments down the road.

### How to find a provider

If you already have a provider, make sure they're in your plan's network. You can search your plan's network in your member account:



Scan to sign in or visit










**Medica.com/NewAccount**

Select "Find Care" to see network and care options — including \$0 virtual visits.\*

## Where to find care — and save money

The emergency room isn't your only choice when you need care quickly. The chart below can help you find the care that may work best for you.

Find your closest and most cost-effective in-network options — including \$0 virtual care\* — in your member account.

	Virtual Care	Primary Care Clinics	Urgent Care Centers	Emergency Room
<b>Cost</b>	\$	\$ \$	\$ \$ \$	\$ \$ \$ \$
<b>Wait Times</b>				
<b>Severity</b>				
<b>Symptoms Treated</b>	<ul style="list-style-type: none"> <li>• Allergies</li> <li>• Fever</li> <li>• Colds and flu</li> <li>• Skin conditions</li> <li>• Most infections</li> </ul>	<ul style="list-style-type: none"> <li>• Allergies</li> <li>• Vaccines</li> <li>• Minor burns and skin conditions</li> <li>• Sinus and ear infections</li> </ul>	<ul style="list-style-type: none"> <li>• Nausea and diarrhea</li> <li>• Minor cuts and broken bones</li> <li>• Back and joint pain</li> </ul>	<ul style="list-style-type: none"> <li>• Trouble breathing</li> <li>• Heart attack and stroke</li> <li>• Sudden illnesses and serious accidents</li> </ul>

*This chart is for illustrative purposes only. Please note that actual results may vary.*

When you get emergency care or get treated by an out-of-network provider at an in-network hospital or ambulatory surgical center, you are protected from surprise billing or balance billing. Your in-network benefit will apply. If your plan has no out of network coverage and you visit a non-network provider you will be responsible for the full cost of any care or supplies.

Learn more at [Medica.com/BalanceBill](https://www.Medica.com/BalanceBill).

\* \$0 virtual care is available with HSA and Catastrophic plans once you meet your deductible.



## YOUR PLAN BENEFITS

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# Make sense of your coverage

You'll find a summary of benefits in your member account on the day your plan begins. It'll show how we share the cost of care with you.

**Remember: Your benefits only apply to doctors, hospitals, and providers in your plan's network.** Most preventive care, like Annual Wellness Visits, certain cancer screenings, and vaccines, are always \$0 from an in-network provider.

### How to check your benefits

- Sign in at [Medica.com/NewAccount](https://www.Medica.com/NewAccount)
- Click "**View coverage details**" in the "**Coverage + benefits**" section
- Under your current benefit plan, click "**Benefit highlights**"
- View a summary of your benefits under "**Plan details**"

## Know what you'll owe

Here's how to understand how much money you owe your doctor, clinic, hospital, pharmacy, or durable medical equipment supplier once your claim has processed.

**Charges – Allowed amount – Paid amount = Amount you owe**

CHARGES	ALLOWED AMOUNT	PAID AMOUNT
The dollar amount the provider initially charged for the service before your health plan discount is applied.	The total dollar amount for the service after your health plan discount.	The amount your health plan paid for a service. Your plan starts to pay on your claims after you meet your individual deductible or pay your copay.

## Your Explanation of Benefits (EOB)

You'll get an Explanation of Benefits (EOB) in the mail after every service unless you go paperless. You can also access your EOB's online in your member account under **"Update Preferences"** in **"Tools + resources"**.

An EOB isn't a bill. It explains how your health plan was applied in detail. The amount you owe on an EOB is how much you owe your health care provider. Your provider should send you a bill.

## How to track your claims after your plan starts

- Sign in to your member account
- Select **"Claims"** from the drop-down in the bar above
- Choose **"Claims Overview"** to see a summary

*Medica does not provide health care but arranges for the provision of covered health care services with independently contracted health care providers. The relationships between Medica and network providers are contractual relationships between independent contractors. Network providers are not agents or employees of Medica. The relationship between a provider and any member is that of health care provider and patient. The provider is solely responsible for health care provided to any member.*



## YOUR HEALTH + WELLNESS EXTRAS

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# My Health Rewards

My Health Rewards turns your wellness choices into points you can redeem for gift cards or products from the Personify Health\* online store.

Whether you're making healthy changes or adding to your wellness routine, look to My Health Rewards for the free tools and support you need:

- Daily well-being tips
- Healthy habit tracking, and more

**Plus:** Connect devices, apps, and fitness trackers to see your steps, sleep, mindful minutes, and other health data.



Scan to sign in or visit

**[Join.PersonifyHealth.com/MyHealthRewardsIFB](https://Join.PersonifyHealth.com/MyHealthRewardsIFB)**

Type "My Health Rewards Individual + Family"

## Get the app

Download the free Personify Health app from the Apple App Store or Google Play.

*Note: Virgin Pulse is changing its name to Personify Health on Jan. 1, 2025. Nothing else will change.*



## Access your health info 24/7

SSM Health MyChart is a free service that collects your health information in the palm of your hand. Set up your account for 24/7 access to your personal records plus:

- Request prescription refills
- View and pay doctor, clinic, or hospital bills
- Get lab results
- Schedule appointments
- Send and get messages from your doctor, and more



Scan to sign in or visit  
**Medica.com/MyChart**

### Get the app

Download the free **MyChart** app from the Apple App Store or Google Play.



*\* The use of these apps does not replace medical advice, nor does it replace care or advice from a licensed physician. Medica is not responsible for the use, misuse, interpretation, or application of this information. Always ask your doctor for appropriate examinations, treatment, testing, and care recommendations.*

† Some MyChart features may not be available at all primary care locations.



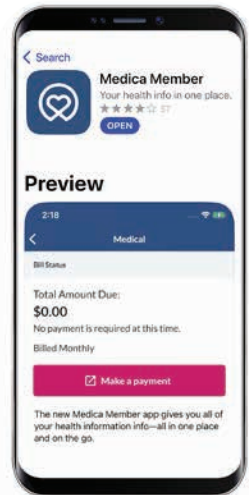
## YOUR MEMBER APP

# Manage your plan on the go

Track claims, find in-network care, take advantage of wellness extras, and more in your free Medica Member app. You can also download your digital ID card and add it to your mobile wallet while your plan's active.

### Here's how

- Sign in to your member account on the app
- Tap "ID card" on the bottom menu bar
- Tap "Add to Mobile Wallet"  
(Note: Tap "Flip To Back" to see the back of your ID card)



**If you want free help translating this information,  
call the number included in this document  
or on the back of your Medica ID card.**

Si desea asistencia gratuita para traducir esta información, llame al número que figura en este documento o en la parte posterior de su tarjeta de identificación de Medica.

Yog koj xav tau kev pab dawb kom txhais daim ntwav no, hu rau tus xov tooj nyob hauv daim ntwav no los yog nyob nraum qab ntwam koj daim npav Medica ID.

如果您需要免費翻譯此資訊，請致電本文檔中或者在您的 Medica ID 卡背面包含的號碼。

Nếu quý vị muốn trợ giúp dịch thông tin này miễn phí, hãy gọi vào số có trong tài liệu này hoặc ở mặt sau thẻ ID Medica của quý vị.

Odeffannoo kana gargaarsa tolaan akka isinii hiikamu yoo barbaaddan, lakkoobsa barruu kana keessatti argamu ykn ka dugda kaardii Waraqaa Eenyummaa Medica irra jiruun bilbila'a.

إذا كنت تريد مساعدة مجانية في ترجمة هذه المعلومات، فاتصل على الرقم الوارد في هذه الوثيقة أو على ظهر بطاقة تعريف ميديكا الخاصة بك.

Если Вы хотите получить бесплатную помощь в переводе этой информации, позвоните по номеру телефона, указанному в данном документе и на обратной стороне Вашей идентификационной карты Medica.

ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອໃນການແປຂໍ້ມູນນີ້ພຣີ, ໃຫ້ໃບໂທຫາເລກໜ້າຍທໍ້ມີຢູ່ໃນເອກະສານນີ້ ຫຼື ຢູ່ດ້ານຫຼັງຂອງບັດ Medica ຂອງທ່ານ.

이 정보를 번역하는 데 무료로 도움을 받고 싶으시면, 이 문서에 포함된 전화번호나 Medica ID 카드 뒷면의 전화번호로 전화하십시오.

Si vous voulez une assistance gratuite pour traduire ces informations, appelez le numéro indiqué dans ce document ou au dos de votre carte d'identification Medica.

ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອໃນການແປຂໍ້ມູນນີ້ພຣີ, ໃຫ້ໃບໂທຫາເລກໜ້າຍທໍ້ມີຢູ່ໃນເອກະສານນີ້ ຫຼື ຢູ່ດ້ານຫຼັງຂອງບັດ Medica ຂອງທ່ານ.

Kung nais mo ng libreng tulong sa pagsasalín ng impormasyong ito, tawagan ang numero na kasama sa dokumentong ito o sa likod ng iyong Kard ng Medica ID.

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Ako želite besplatnu pomoć za prijevod ovih informacija, nazovite broj naveden u ovom dokumentu ili na poleđini svoje ID kartice Medica.

Dii t'áá jiiik'e shá ata' hodoonih nízingo éi ninaaltsoos Medica bee néiho'díizinígi bine'déé' námboo biká'ígíjii' béesh bee hodíilnih.

Wenn Sie bei der Übersetzung dieser Informationen kostenlose Hilfe in Anspruch nehmen möchten, rufen Sie bitte die in diesem Dokument oder auf der Rückseite Ihrer Medica-ID-Karte angegebene Nummer an.



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you're cared for.®**