HealthPartners Medicare Group Retiree Renewal

PEIP

Effective January 1st, 2026

Monthly premium	**$316.50**
Benefits	**HealthPartners Medicare Journey (MA) group Plan 1**
Medical	
Service Area	You must live in one of the following counties to be eligible for the HealthPartners Journey group plan: Aitkin, Anoka, Becker, Beltrami, Benton, Big Stone, Carlton, Carver, Cass, Chippewa, Chisago, Clay, Clearwater, Cook, Cottonwood, Crow Wing, Dakota, Douglas, Grant, Hennepin, Hubbard, Isanti, Itasca, Jackson, Kanabec, Kandiyohi, Kittson, Koochiching, Lac qui Parle, Lake, Lake of the Woods, LeSueur, Lincoln, Lyon, Mahnomen, Marshall, McLeod, Meeker, Mille Lacs, Morrison, Murray, Nobles, Norman, Otter Tail, Pennington, Pine, Pipestone, Polk, Pope, Ramsey, Red Lake, Redwood, Renville, Rice, Rock, Roseau, Scott, Sherburne, Sibley, St Louis, Stearns, Stevens, Swift, Todd, Traverse, Wadena, Washington, Wilkin, Wright, Yellow Medicine
Annual out-of-pocket maximum	$3,500 in-network $5,000 combined in and out-of-network
Lifetime maximum	Unlimited
Out of Network Services	40% coinsurance
Annual deductible	None
Routine physical, eye and hearing exams	No charge
Primary care office visit	No charge
Specialty office visit/Urgent care	$35 copay
Inpatient hospital	$200 copay
Emergency room	$75 copay

The benefit information provided is not a comprehensive listing of benefits or rules. The Evidence of Coverage and Certificate of Coverage documents are considered the final and complete level of benefits. For employer group use only – not for distribution to retirees/employees.

Outpatient hospital	$200 copay
Diagnostic Radiology: MRI/CT/PET	$100 copay
Ambulance	20% coinsurance
DME/Prosthetics	20% coinsurance
Travel Coverage	In-network cost sharing when traveling within the U.S. (up to 9 months) using the Visitor/Traveler benefit. Assist America® Domestic and world-wide travel logistics Travel-related services and support when traveling more than 100 miles from home or in a foreign country.
Hearing Aids: TruHearing®	$499/$699/$999 per hearing aid, per year; ~requires use of TruHearing® provider network
Part D prescription drugs	
Annual deductible	$300
Tier 1 (Preferred generic)	$4 copay
Tier 2 (Non-preferred generic)	$10 copay
Tier 3 (Preferred brand)	$47 copay
Tier 4 (Non-preferred brand)	50% coinsurance
Tier 5 (Specialty)	27% coinsurance

Included benefits and discounts:

- SilverSneakers® program: **Free** basic membership at participating fitness facilities in the national network, at-home workout kit, unlimited online classes
- Assist America®: Domestic and world-wide travel logistics. Experienced clinicians available by phone 24/7 to assist members in assessing their need for medical care and to coordinate post stabilization transport to the nearest medical facility or home. Member must be at least 100 miles from permanent residence for no longer than 90 consecutive days
- Telehealth services: E-visits, phone visits, online clinic visits (including unlimited Virtuwell® at no charge)
- Healthy Discounts: Discounts at participating retailers including eyewear, healthy eating programs, meal delivery, pet insurance, skin care services, wellness programs and many more