Medicare HMO coverage options

Making the right health care choices for yourself and your family is important. This includes selecting the plan that works best for you when you enroll. Remember to consider both your **contributions** (the amount you pay for coverage) and your **out-of-pocket costs** when you receive care. Start by reviewing the Medicare HMO summary information below as well as the **Medicare PPO coverage options**. Then use the online tools available through the **Dow U.S. Benefits Site** to review contributions and compare options based on your personal situation.

In-network medical benefits ↓

Prescription drug coverage ↓

Retiree contributions ↓

If you are a Dow Corning retiree

Please contact Alight regarding Medicare coverage options and costs:

(888) 628-0082 | retiree.alight.com/dowcorning

*Note: Grandfathered Dow Corning retirees currently enrolled in Dow coverage can find plan details through the **Dow U.S. Benefits Site**.*

In-network medical benefits

The summary below covers in-network benefits, which are generally the most cost-effective way to receive care. Note that HMOs require the use of in-network providers for care.

Coverage option	Blue Care Network of Michigan	Humana Health Plan of LA	Kaiser Foundation Health Plan, Inc.
Eligibility (based on heritage company you retired under)	Dow, Union Carbide, Rohm & Haas, Electronic Materials	Dow, Union Carbide, Rohm & Haas, Electronic Materials	Dow, Union Carbide, Rohm & Haas, Electronic Materials
Availability	Michigan	Louisiana	California
Contribution amount (see details)	$$$	$$$	$$$
What you pay for care			
Preventive care	◄ Covered 100% when you use in-network providers (no deductible) ►		
Office visit copays (no deductible)	Primary care: $20 Specialist: $20	Primary care: $5 Specialist: $20	Primary care: $15 Specialist: $15
Telemedicine	Same as office visit copays	Same as office visit copays	$0 copay
Other copays (no deductible)	Urgent care: $20 Emergency room: $50 Outpatient x-ray/lab: $0 Outpatient surgery: $0 Outpatient mental health and substance abuse: $0 Inpatient care: $0 *Note: Prior-authorization required for mental health and substance abuse*	Urgent care: $20 Emergency room: $65 Outpatient x-ray/lab: $0 Outpatient surgery: $100 Outpatient mental health and substance abuse: $5 to $40 Inpatient care: $150 per day for 5 days *Note: 190-day lifetime limit in psychiatric facility*	Urgent care: $15 Emergency room: $50 Outpatient x-ray/lab: $0 Outpatient surgery: $150 Outpatient mental health and substance abuse: $15 (lower for group visit) Inpatient care: $100 per admission
Deductible (per member)	None	None	None
Coinsurance (after deductible)	N/A	N/A	N/A
Out-of-pocket maximum (per member)	$6,700	$2,500	$1,000
Additional details (including other benefits such as maternity, hospital, mental health and substance use, as well as out-of-network coverage, if applicable)			
Review detailed carrier summary	**Blue Care Network of Michigan**	**Humana Health Plan of LA**	**Kaiser Foundation Health Plan, Inc.**
Contact information and apps	**bcbsm.com** (800) 450-3680 **Apple App Store** **Google Play**	**humana.com** (866) 396-8810 **Apple App Store** **Google Play**	**kaiserpermanente.org** (855) 344-2209 **Apple App Store** **Google Play**

Prescription drug coverage

All of the medical plans include coverage for prescription medications. To help you save money, remember that generic drugs typically cost significantly less than brand-name medications while offering the same effectiveness. Additionally, using mail-order pharmacy services for maintenance medications can often lead to further savings and added convenience.

Coverage option	Blue Care Network of Michigan	Humana Health Plan of LA	Kaiser Foundation Health Plan, Inc.
What you pay for prescriptions			
Deductible	None	None	None
Out-of-pocket maximums (per member)	$2,100	$2,100	$2,100
Retail (30-day supply)			
Generic	You pay 50% up to max: • Preferred pharmacy: $2 • Other pharmacy: $10	You pay $10 (low-cost generics only)	You pay based on supply: • $10 for 30-day • $20 for 31–60 day • $30 for 61-100 day
Preferred brand name on formulary	You pay 50% up to max: • Preferred pharmacy: $10 • Other pharmacy: $20	You pay $20 (level two) to $40 (level three) *Note: Amounts also apply to high-cost generics*	You pay based on supply: • $20 for 30-day • $40 for 31-60 day • $60 for 61-100 day
Non-preferred brand name	You pay 50% up to max: • Preferred pharmacy: $30 • Other pharmacy: $40	You pay 25% (specialty medications)	Not covered/available
Mail order (90-day supply)			
Generic	You pay 50% up to max: • Preferred pharmacy: $4 • Other pharmacy: $20	You pay $0 (low-cost generics only)	You pay based on supply: • $10 for 30-day • $20 for 31-100 day
Preferred brand name on formulary	You pay 50% up to max: • Preferred pharmacy: $20 • Other pharmacy: $40	You pay $40 (level two) to $80 (level three) *Note: Amounts also apply to high-cost generics*	You pay based on supply: • $20 for 30-day • $40 for 31-100 day
Non-preferred brand name	You pay 50% up to max: • Preferred pharmacy: $60 • Other pharmacy: $80	Not covered/available	Not covered/available

Retiree contributions for 2026

The amount you pay to have medical coverage depends on a number of factors, including heritage company you retired under, the coverage tier you elect and years of service. To see the specific contributions that apply to you:

- Enroll through the **Dow U.S. Benefits Site**.

OR

- Review your benefits enrollment statement (mailed to you prior to enrollment).

Retired from Dow or Union Carbide?

You can also use the online calculators to estimate your Medicare contributions:

Dow calculator **Union Carbide calculator**

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Looking for previous summaries for 2025? Access them here.

The brief summaries of benefits in this communication are not intended to be complete descriptions of each of the respective benefit plans. If there are discrepancies between (a) information in this communication and any oral or written representations made by anyone regarding a plan and (b) the Summary Plan Descriptions (SPD) and other legal documents of any of the plans, the SPD and other legal documents will govern. Dow reserves the right to amend, modify, and terminate the plans described in this communication at any time in its sole discretion.