Welcome to Your 2024 Health Plan



Memorial Hermann Dual *Advantage* HMO Dual Special Needs Plan (D-SNP)

Benefits Guide







Memorial Hermann Health Plan:

Website: healthplan.memorialhermann.org/medicare

Customer Service: 855.645.8448 (TTY: 711)

8 a.m. to 8 p.m. CT, 7 days a week from Oct. 1 – March 31 8 a.m. to 8 p.m. CT, Monday - Friday from April 1 – Sept. 30

Case Management: 713.579.7909



Prescription Drug Information:

Pharmacy Customer Service: 855.645.8448 Costco Mail Order Pharmacy: 800.607.6861



Other Resources:

Flex Spending Program: mhhp-flex.org

Nurse Health Line: 844.632.0074

Teladoc: 1-800-TELADOC (835.2362) or visit <u>teladoc.com</u>

Behavioral Health: 855.645.8448

Liberty Dental: 866.674.0114 or visit <u>client.libertydentalplan.com/MemorialHermannMedicare</u>

Transportation: 855.330.9138 or visit <u>mymodivcare.com/find-your-plan</u>

NOTE: The information contained within this booklet is not a complete description of benefits. For more plan details, visit:

healthplan.memorialhermann.org/medicare-advantage/advantage-hmo-plans, reference your Evidence of Coverage (EOC), or call our Customer Service team at 855.645.8448 (TTY 711).

Welcome to Your 2024 Plan Year!

Dear Member,

On behalf of the Memorial Hermann Health Plan family, **thank you** for enrolling in the Medicare Dual *Advantage* HMO (D-SNP) Plan. When you become a Medicare Advantage member, you are joining a team of thousands dedicated to providing you with the best possible health and wellness coverage. We appreciate the opportunity to be your health care partner.

To get the most from your plan, we'd like to remind you of the benefits and services available to you. It's important to understand that you have health coverage that extends beyond just those times when you're not feeling your best. If you know how your plan works, it enables us to provide you with a superior health care experience.

Important topics covered in this **Plan Highlights** booklet:

- Benefits and Services review
- Flexible Spending Program New for 2024!
- Primary Care Physician (PCP)
- Your Annual Wellness Visit
- Healthy Advantage Wellness Program
- Silver&Fit® Fitness Program
- Access to the Memorial Hermann online portal
- Available 24/7 telehealth services from Teladoc®
- Prescription Drug coverage and Pharmacy Information

Thank you again for joining the only Medicare Advantage plan backed by Memorial Hermann, a health system known and trusted for more than 100 years.

Wishing you the very best in health,

Your Memorial Hermann Medicare Advantage Team



Memorial Hermann Dual Advantage HMO D-SNP

The Memorial Hermann *Dual Advantage* Special Needs Plan (D-SNP) is for people with both Medicare and Medicaid coverage who live in Harris, Fort Bend or Montgomery County. Some plan highlights include:



For more details on benefits and services offered within your specific plan, visit: **healthplan.memorialhermann.org/medicare-advantage/our-plans** or refer to your Evidence of Coverage (EOC).

Getting the Most From Your 2024 Benefits

Your Memorial Hermann *Advantage* team listens to your feedback and works hard to improve your plan every year. There are more benefits in 2024 than ever before, but if you don't use those benefits, we haven't done our job. The following provides an at-a-glance review of key benefits we hope you take advantage of. And as always, you can find more detailed plan information in your annual Summary of Benefits document, or simply call your Houston-based customer care team at **855.645.8448** (TTY:711).



Dental Coverage with Liberty Dental

All Memorial Hermann *Advantage* Plans have both preventive and comprehensive dental coverage for 2024. Your plan has a total coverage amount of \$4,000. Dental services are provided by Liberty Dental. Liberty has an excellent network in the Houston area, and you can find a provider at:

client.libertydentalplan.com/MemorialHermannMedicare/FindADentist.



Transportation

Grocery shopping, visiting the pharmacy, seeing your doctor, these are important things you need to do, but sometimes getting there might be difficult. Your 2024 plan makes it as easy as making a phone call or visiting a web site.

Your plan provides unlimited trips in 2024 at no cost to you. Our vendor is called Modivcare, and to schedule your ride, they prefer you call or visit their web site **three days** prior to your trip. The number is **855.330.9138** (TTY: 866.288.3133). They will need your Memorial Hermann Advantage Plan ID, your address, and the time and address of when/where you are going.

You can also schedule your trips on their website: **www.mymodivcare.com/book-now**, where you can click the "Book Online" link and follow the instructions.



Prepared Meals After In-Patient Hospitalization

If you have been discharged from an in-patient hospital stay, you are eligible to receive up to 10 meals from Mom's Meals.

If you are working with a Case Manager as part of your hospitalization, they can order the meals after you have been discharged. However, you also have up to 14 days after you have been discharged to order themeals yourself. Simply call Customer Service at **855.645.8448** (TTY: 711). Your prepared meals will arrive in 2-3 days, and can be refrigerated for up to two weeks.

Getting the Most From Your 2024 Benefits Cont.



Case Management – Your personal healthcare professional when you need it the most

A Case Manager is a licensed healthcare professional that provides one-on-one care tailored to the needs of the member, with the focus on helping maintain wellness and independence. You might be introduced to a Case Manager because of a recent diagnosis or change in your health. A Case Manager may be needed for a single day or several months depending on the situation. Examples include:

- Helping to understand a new or existing diagnosis and how to manage it
- Finding a new in-network provider
- Helping a member find community resources if they're struggling to pay bills or having trouble moving safely around their home

If you would like to request assistance directly, please call **713.579.7909** and leave a detailed message; or, call Customer Service at **855.645.8448** (TTY: 711). You can also send an email to: **MHHPCaseManagement@apex4health.org**.

Behavioral Health



You have access to behavioral and substance abuse case management through the health plan. The Case Manager is a licensed behavioral health specialist or Registered Nurse who can help you with the following:

- Better understand your illness and provide education on treatment options
- Help you understand your medications
- Strategies to help you manage your illness

To access a behavioral health Case Manager, please call **713.579.7909** (TTY: 711) and leave a detailed message; or, call Customer Service at 855.645.8448. If you are experiencing a behavioral health crisis and need assistance, please call the 24/7 crisis line at **877.559.5596** (TTY: 711). For assistance finding an in-network provider please call Customer Service at 855.645.8448.

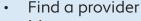
Your Health Portal





Welcome to HealthTrio - your new member portal! For 2023 and beyond, your Memorial Hermann Health Plan portal will transition to a new location: HealthTrio: mhhp.org/portal

All your member information, including claims for health services completed connected to any Memorial Hermann medical facilities, will be located in one place, the new HealthTrio portal.



- Manage your communication preferences
- Send and receive secure messages within the portal
- View your coverage details
- Check your benefits balances
- View claims history
- Manage contact information
- And much more

To access member information that occurred prior to January 1, 2023, please visit our member portal landing page, **mhhp.org/portal** to access the Everday Well Portal.



Flexible Spending Program

New for your 2024 plan - Flex Card

The Memorial Hermann Advantage Mastercard Flexible spending program (we like to call it the **Flex Card** for short).

What It Is

The Memorial Hermann Advantage Flex Card is a debit card that can be used like a credit card to purchase **Vision and Hearing** items (such as glasses and hearing aids), **groceries** and **Over-the-Counter (OTC)** items.

How It Works

After you enroll, you will receive your card in the mail ready to go – it will automatically begin working on your enrollment effective date. After that, simply use your Flex Card like a credit card at the time of purchase. If you exceed your allowance, you will need to cover the remaining amount with another form of payment. For example:



Your \$1,000 vision and hearing allowance is already loaded onto the card. You can use these dollars in any combination you want when purchasing items such as glasses, contacts, and hearing aids. Simply present the card and dollars will be deducted accordingly.



Each quarter (every three months) an allowance of \$200 for OTC items will be automatically loaded to your card. You can purchase OTC items at retail outlets such as Kroger, Walmart, CVS, and Walgreens; or, you can use our mail-order catalog from Medline and pay with your flex card. When ordering from the Medline catalog, be sure to check the OTC balance on your Flex Card first, because you can only spend up to your balance. You will not be able to exceed your available OTC balance and use a second form of payment to cover the difference. To check your available balance go to mhhp.org/flex to access your Flex Card portal. Your quarterly dollars do not roll-over, so it's important that you take some time each quarter to determine your OTC needs and place your order.



Each quarter (every three months) you will receive a quarterly allowance of \$240 for groceries. Acceptable groceries follow the USDA SNAP guidelines. Unused funds rollover to the next quarter.



Your Flex card will automatically activate at the start of 2024 and can be used for as long as you are a Memorial Hermann Health Plan member.

Visit <u>mhhp.org/flex</u> to get more information and access to your Flex card portal. Here you can see the balance on your card and complete other actions, such as submitting a reimbursement request if you forgot to use your card.

Primary Care Physician (PCP) Requirement

For the 2024 plan year, all Memorial Hermann Advantage members are required to select a Primary Care Physician (PCP) upon enrollment.



The better your PCP knows you, the more they can help you be successful; healthcare is different for everyone. Here are some reasons why your relationship with your assigned PCP is important and how to navigate this requirement:

Your Primary Care Physician (PCP) is the captain of your healthcare team. This provider is your first point of contact and most likely will be the first to see signs of things like depression, chronic disease or other health concerns. Their job is to make sure you get the right care in a way that fits your needs and values. This could include managing those symptoms or referring you to a specialist when necessary.

Your PCP is selected by you. If you did not select a PCP at time of enrollment, one was selected for you and assigned based on time and distance requirements. You may change your assigned PCP at any time by calling our Customer Service team at **855.645.8448** or search for a Provider by visiting **healthplan.memorialhermann.org/find-a-doctor**. PCP changes made after the 1st of the month will be effective on the 1st of the following month.

Please visit:

<u>healthplan.memorialhermann.org/medicare-advantage/resource-center/member-faq</u>

for related PCP FAQ or call us at **855.645.8448** with questions.





Annual Wellness Visit

Your Annual Wellness Visit provides the perfect forum to discuss health problems that you were always meaning to ask your doctor about but haven't had a chance to, such as frequent falls, medication issues, brain fog, urinary incontinence or leakage.

In addition, by completing your Annual Wellness Visit, you are eligible for a gift card worth \$50. For more detailed information visit

healthplan.memorialhermann.org/medicare-advantage/healthy-advantage-wellness-program.

Also, in order to keep track of your general health, new and existing members will be sent a personalized letter outlining a list of health services that have not been completed. This letter will describe what services are due, as well as details on how to schedule for them.

What's an Annual Wellness Visit?

- A review of your medical and family history
- A review of your current medications
- Height, weight, body mass index (BMI) and blood pressure stats
- Hemoglobin A1c for diabetes and other routine measurements
- Screening for depression and any cognitive impairments
- Advanced care planning
- An opportunity to establish health goals
- Scheduling of preventive health services such as immunizations, annual eye exam, mammogram, and colon cancer screening

Complete Your HRA Today

All Memorial Hermann Medicare Advantage members need to complete the **Health Risk Assessment (HRA)** guestionnaire.

The HRA is used to review your current health conditions to provide you with appropriate care. Completing this questionnare also activates your Healthy Advantage Wellness Program. Upon completion of the HRA you will receive a \$25 gift card in the mail.

If you have not completed your HRA please call Customer Service 855.645.8448.

Healthy Advantage Wellness Program

The Memorial Hermann Healthy Advantage Wellness Program is designed specifically for our Medicare Advantage members who want to make the most of their plan benefits, while taking steps toward improving their overall health and well-being.

The Healthy Advantage Wellness Program has set rewards for certain health-related activities. Each reward will vary based on the type of service completed during the plan year.

The following services are eligible for a reward:

	Service Rev	vard Amount
ŠĀ.	Annual Health Risk Assessment (Required to activate program)	\$25
Ä	Annual Wellness/ Comprehensive Visit	\$50
	Breast Cancer Screening	\$25
	Colon Cancer Screening	\$50
	Retinal Eye Exam for Diabetics* (excluding Glaucoma screening)	\$30



*Subject to Vision Care benefit coverage as outlined in the Evidence of Coverage. Limited to one gift card per year.

How to Activate Your Wellness Program:

To activate your Healthy Advantage Wellness Program benefits you must complete and return the annual Health Risk Assessment (HRA). Upon completion, your rewards program will be activated, and you will receive your first \$25 gift card. Once a member completes a service and a claim is filed, we will run monthly reports to identify which members have completed which activities. We will then mail a MasterCard gift card with the specific allotted value for that particular service. The gift card can be used for any purchases, whether online or at brick and mortar locations. The card is not reusable and can be disposed of after the valued amount has been entirely spent.

Please allow up to 60 days from the date the claim was received for processing and mailing of your gift card.

For more detailed information on our rewards program, please visit healthplan.memorialhermann.org/medicare-advantage/healthy-advantage-wellness-program or call Customer Service at 855.645.8448.

Silver&Fit® Program

As a Memorial Hermann *Advantage* member, you also have full access to the Silver&Fit® Healthy Aging and Exercise Program, as well as all the benefits and rewards that come along with it – at no cost to you!

No-cost fitness center memberships

Enjoy access to one of 15,000+ participating fitness centers.

Home Fitness Kits

Pick up to 2 kits per benefit year from 34 unique options, including Tai Chi, Chair-Based Exercise, and more.*

Fitness Tracking

Track and view your activity levels through your wearable fitness devices or the Silver&Fit Connected!™ mobile app.**



Stay Fit Kits

Choose one of three kit options each benefit year to keep you active in the comfort and safety of your own home.

Digital Workout VideosGo to **SilverandFit.com** to view yoga, strength, and many other workout videos.

Online Workout Videos

Join daily workout classes. To learn more visit: facebook.com/SilverandFit youtube.com/SilverandFit

Please remember to consult your physician before you participate in a fitness program or make changes in your activity levels.

How To Get Started:

- Go to **SilverandFit.com** to find a participating fitness center near you.
- Choose a participating no-cost fitness center online or with a Silver&Fit representative over the phone at 877.427.4788.
- Take your Silver&Fit fitness card directly to your participating fitness center and get started. If you prefer to workout at home, you can enroll in the Home Fitness Program.



For questions about the Silver&Fit program, call toll-free at **877.427.4788** (TTY 711), Monday through Friday, 5 a.m. to 6 p.m. PT. *Members cannot select the same Home Fitness Kit twice in the same benefit year. Once selected, kits cannot be exchanged.

**Purchase of a wegrable fitness tracker or app may be required to use the Connected tool.

**Purchase of a wearable fitness tracker or app may be required to use the Connected! tool and is not reimbursable by the Silver&Fit program.



So many reasons to use Teladoc

Teladoc® gives you access 24 hours, 7 days a week to a U.S. board-certified doctor through the convenience of phone, video or mobile app visits. As a Medicare Advantage member, this telehealth service is available to you - at no additional cost!

Teladoc doctors can diagnose and treat many non-emergency medical conditions such as cold & flu symptoms, allergies, sinus problems, respiratory infections and more.



Receive quality care anytime, anywhere you happen to be.

Prompt treatment. Talk to a doctor in minutes.



Prescriptions sent to pharmacy of choice if medically necessary.



Teladoc is less expensive than the ER or urgent care.

Easily set up your account in minutes.

You can download the Teladoc app or get started online at Teladoc.com. You can also call 1-800-Teladoc (835-2362). Then just fill out a brief medical history like you would at a doctor's office to get started.

With your consent, Teladoc is happy to provide information about your Teladoc visit to your primary care physician.



Teladoc.com



Teladoc.com/mobile



1-800-TELADOC (835-2362)

Pharmacy Benefits FAQ



Q: What is Navitus Health Solutions?

Navitus Health Solutions is a pharmacy benefit manager (PBM). A PBM primarily provides the pharmacy claims processing platform and supports administrative services for the pharmacy portion of health care benefits. Navitus will work with Memorial Hermann Health Plan and network pharmacies to provide cost-effective prescription drug benefits for Memorial Hermann Health Plan members and to improve memberhealth and minimize their out-of-pocket costs.

Q: Where can I see the latest pharmacy directory?

Members can call our Customer Service line to ask specific questions on pharmacies and prescriptions that they are taking. You can find more information on network pharmacies by visiting: healthplan.memorialhermann.org/medicare-advantage/pharmacy-benefits/pharmacy-directory

Q: Does the formulary change?

Yes, the formulary may change each month. We encourage members to check the new formulary online here:

healthplan memorialherm

healthplan.memorialhermann.org/find-other-services?network=Medicare+Advantage+HMO for the latest information or call Memorial Hermann Health Plan Customer Service at 855.645.8448 (TTY 711) for additional information 7 days a week from Oct. 1 - March 31 Monday through Friday from April 1 - Sept. 30, 8 a.m. to 8 p.m. CT,

Q: Who provides the MTM services?

Navitus Clinical Engagement Center is working to provide Medication Therapy

A: Management (MTM) services to our members. This service is absolutely FREE for our members and enables them to improve their health, optimize their medications, and address any concerns with a pharmacist. For more information, call 888.913.7885 TTY 711. We are available Monday-Thursday, 8am-7pm Central Time, and Friday, 8am-5pm CT.

Q: How do I register for Costco Mail Order Pharmacy?

A: You can register via mail, phone or online. Below are the two methods to register for home delivery service with Costco Mail Order Pharmacy.

Option 1: You can register for Costco by mail or phone using the Traditional Mail Order Process. This process requires you to order all your prescriptions via mail or phone.

Option 2: Online Ordering service requires you to order all your new prescriptions online at www.costco.com. You should create an online account. Please remember that each individual receiving medications must have their own unique email address in order to create an online account. All communication between you and the pharmacy will be done via email.

For assistance with creation of the Costco account, please contact Costco Mail Order Pharmacy at **800.607.6861**.

NOTE: For more FAQ, please visit:

healthplan.memorialhermann.org/medicare-advantage/pharmacy-benefits

News from Your Health Plan Pharmacy Team



Memorial Hermann Health Plan is excited to continue partnering with Navitus Health Solutions as our pharmacy benefit manager for plan year 2024. All members should have received new ID cards by mail for the new 2024 Plan Year. Be sure to show this new ID card to your pharmacy on or after January 1, 2024.

Members can get the same low copayment or coinsurance when filling medications at any network pharmacy locations or at our Memorial Hermann Pharmacies or Memorial Hermann Specialty Pharmacy. Please see our Pharmacy Network Directory for all the pharmacies in our network.

Costco Mail Order Pharmacy remains our partner for mail order prescription benefits. You don't need to be a Costco member to take advantage of this benefit. To get started, register online at **costco.com/Pharmacy/home-delivery**. You can also contact Costco Mail Order Pharmacy at 800.607.6861 for assistance with setting up your online account or mail order services. Please allow at least 14 calendar days from the day you submit your order to receive your medication(s). Any existing prescriptions at your current mail order pharmacy can be transferred to the new Costco Mail Order Pharmacy or you can have your doctor send new prescriptions directly to Costco Mail Order Pharmacy for home delivery.

Memorial Hermann Health Plan is proud to work with Navitus Clinical Engagement Center to provide Medication Therapy Management (MTM), a service designed to allow you to be in control of your healthcare needs and improve overall health at no cost to you. This valuable service is done in the comfort of your home in just one phone call. Navitus Clinical Engagement Center reviews your medicines and health conditions to better improve your health and answer all your questions regarding your medications, and any concerns you may have. To talk to a pharmacist about your medicines , or to opt out of this program, call Navitus Clinical Engagement Center toll free at 888.913.7885, Monday - Thursday, 8 a.m. - 7 p.m. CST, Friday 8 a.m. - 5 p.m. CST. (TTY/TDD users, please call 800.367.8939.) Take advantage of the helpful service today!



Insulin and Vaccine FAQ's



INSULIN FAQ:

Q: What will I pay for Insulin?

A: DSNP members, or members who have both Medicaid and Medicare will have a \$0 copay.

VACCINE FAQ:

Q: Should I get vaccinated against the flu virus too?

A: Yes. All of our members should get the flu vaccination, which is a covered benefit. Influenza (flu) is a potentially serious disease that can lead to hospitalization and sometimes even death. Every flu season is different, and flu can affect people differently. Talk to your local pharmacy or your provider about Fluzone High-Dose, Fluad Quadrivalent, or another flu vaccine available. Members with egg allergies can use egg-free vaccines such as Flucelvax Quadrivalent. For more information, call our Customer Service Department.

Q: What will I pay for Part D vaccines?

A: Our plan covers Part D vaccines at no cost to you, even if you haven't paid your deductible. Call Customer Service for more information.

Q: What other vaccines are covered on my prescription (Part D) benefit?

A: Memorial Hermann Health Plan is proud to offer a multitude of vaccines to help protect our member's health. We cover vaccines such as Shingrix injection for shingles, Meningococcal vaccine such as Menactra injection or Menveo injection, Varicella(Chickenpox) vaccine such as Varivax injection and more! Check the online formulary for a complete listing of all the vaccines we cover:

healthplan.memorialhermann.org/medicare-advantage/pharmacy-benefits/formulary-information-drug-list

Additional Member FAQs can be found on our website at:

healthplan.memorialhermann.org/medicare-advantage/resource-center/member-faq

healthplan.memorialhermann.org/medicare-advantage/healthy-advantage-wellness-program/healthy-advantage-faq



Your Medicare Made Personal.



¹You must continue to pay your Medicare Part B premium.

²Receive a \$1,000 annual benefit towards your Vision and Hearing benefits. This can be used to purchase hearing aids and eye-wear or contacts.

³For the Dental benefit, the DHMO (Dental Health Maintenance Organization) provides services from a specific group of dentists within a service area. An HMO Plan member must designate a dentist. To learn more about the dental benefits offered with your specific plan, visit Liberty Dental at client.libertydentalplan.com/MemorialHermannMedicare or call 866.674.0114.

The information contained within this booklet is not a complete description of benefits. For complete plan details, please reference your Evidence of Coverage (EOC) or call Customer Service at **855.645.8448** (TTY 711) more information.

This plan is a Dual Eligible Special Needs Plan (D-SNP). Your ability to enroll will be based on verification that you are entitled to both Medicare and medical assistance from a state plan under Medicaid.

Memorial Hermann Dual *Advantage* is a Medicare Advantage organization with a Medicare contract and a contract with the State Medicaid Program. Enrollment in the plan depends on the plan's contract renewal.

Memorial Hermann *Advantage* complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex.

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