

Welcome to Your 2024 Health Plan



**Memorial Hermann Medicare Advantage
Prime Value MA Only**
Benefits Guide

**MEMORIAL[®]
HERMANN**
Health Plan
Medicare Advantage Plans



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



Other Resources:

Flex Spending Program: mhhp-flex.org

Nurse Health Line: 844.632.0074

Teladoc: 1-800-TELADOC (835.2362) or visit teladoc.com

Behavioral Health: 855.645.8448

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

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

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 *Advantage* Prime Value MA Only 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®

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 Medicare Advantage Prime Value MA Only

Along with a \$0 monthly premium¹, your your plan provides a \$125 Part B premium reduction. This plan is designed for people who reside in Harris, Fort Bend, Montgomery, Liberty, Galveston, and Brazoria counties.

Some plan highlights include:



**\$125 monthly
Part B premium
reduction**



**Flexible Spending
Program**



**Vision and Hearing
coverage², as
well as Dental
benefits³**



**\$0 Copay for
primary care
physician
(PCP) visits**



**\$30 Copay to see
any network
specialist and no
referral needed**




**Maximum
out-of-pocket
costs of \$2,950**



**National/
worldwide urgent
care & emergency
coverage**



**Convenient
telehealth services
via phone or
online**



**Meal, Fitness &
Transportation
Benefit**

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 \$2,000. 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 20 one-way 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 the meals 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 HealthTrio®



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.

- Find a provider
- 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 Everyday 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) and **Over-the-Counter (OTC)** items.

How It Works

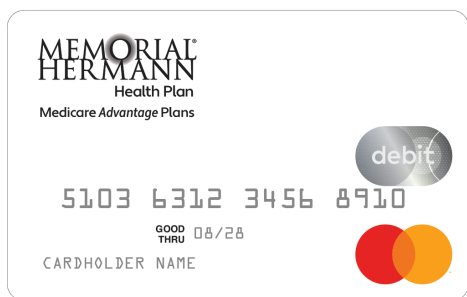
After you enroll, you will receive your card in the mail ready to go – it will automatically begin working on your enrollment effective date. After that, simply use your Flex Card like a credit card at the time of purchase. If you exceed your allowance, you will need to cover the remaining amount with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



Your vision and hearing allowance of \$900 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 \$100 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.



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 mhhp.org/flex 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.

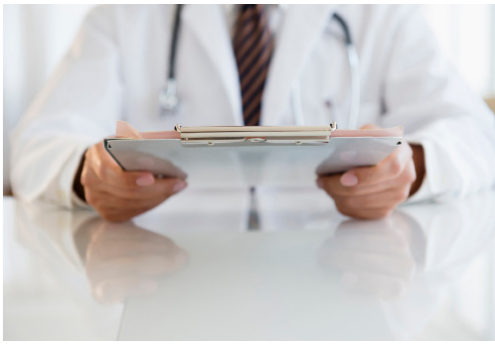
Your PCP is selected by you. If you did not select a PCP at time of enrollment, one was selected for you and assigned based on time and distance requirements. You may change your assigned PCP at any time by calling our Customer Service team at **855.645.8448** or search for a Provider by visiting **healthplan.memorialhermann.org/find-a-doctor**.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

Please visit:

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

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

<p>Subscriber</p> <p>Subscriber: Test Member112 Subscriber ID: MH900000211 Group #: MH0002023 Effective Date: 01/01/2023 Plan Type: Select 6350 HSA Hybrid HMO Plan</p> <p style="text-align: center;"></p> <p style="text-align: center;">Administered by Memorial Hermann Health Solutions, Inc.</p>	<p>Medical Plan</p> <p>Deductible: Ind \$6,350, Fam \$12,700 OOP: Ind \$6,350, Fam \$12,700 Office Visit: Ded Only, \$0 (Well) Urgent Care: Ded Only ER: Ded Only</p> <p>Pharmacy Plan</p>



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)** questionnaire.

The HRA is used to review your current health conditions to provide you with appropriate care. Completing this questionnaire 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	Reward Amount
	Annual Health Risk Assessment (Required to activate program)	\$25
	Annual Wellness/ Comprehensive Visit	\$50
	Breast Cancer Screening	\$25
	Colon Cancer Screening	\$50
	Retinal Eye Exam for Diabetics (excluding Glaucoma screening)	\$30



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 Videos

Go 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:

- 1 Go to SilverandFit.com to find a participating fitness center near you.
- 2 Choose a participating no-cost fitness center online or with a Silver&Fit representative over the phone at **877.427.4788**.
- 3 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 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® Telehealth Services

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](https://www.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)

Insulin and Vaccine FAQ's



INSULIN FAQ:

Q: What will I pay for Insulin?

A: You won't pay more than \$35 for a one-month supply of each insulin product covered by our plan, no matter what cost-sharing tier it's on. If you use Costco mail order you can receive a 90-day supply for \$105. You do not need to be a Costco member to use Costco mail order. You can contact Costco Mail Order Pharmacy at 800.607.6861 for assistance with setting up your online account or mail order services.

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, Fluvad 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.

We also cover some vaccines under our Part B prescription drug benefit. Please see pg. 63 in your EOC for a full list of Part B coverage.

Continuous Glucose Monitors (CGM) are limited to our preferred manufacturers, DexCom G6/G7 and Freestyle Libre/libre2/Libre14. We may only cover other brands and manufacturers if your doctor or other provider tells us that the preferred brand is not appropriate for your medical needs. 20% coinsurance for preferred CGM brands at a network pharmacy (retail).

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

Notes

Notes

Your Medicare Made Personal.

We're here for you

If you have a question,
concern, issue or
feedback, please call us first.

855.645.8448

We're here to help!



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

²Receive a \$900 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.

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.