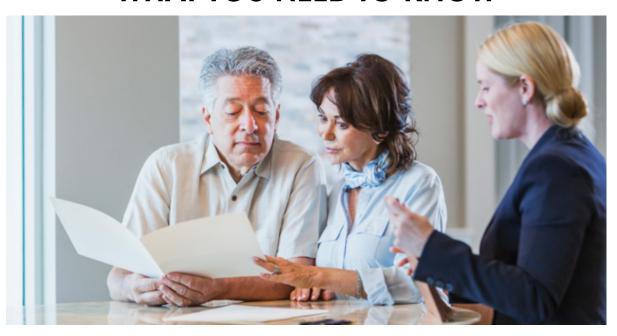


The Annual Enrollment Period Is Here: WHAT YOU NEED TO KNOW



The next few pages will walk you through some of the changes to your benefits in the coming year. Your options for 2021 are as follows: Stay with AvMed; go to another Medicare Advantage Plan; or switch to traditional, fee-for-service Medicare. We feel strongly that our plans continue to offer major advantages that make it the best choice for you.

In 2021, we are introducing new plans to provide more choices tailored to your needs. You'll find that some copays have remained the same and other healthcare costs are lower. By keeping costs low for

our Members, AvMed continues to be one of the best values in South Florida. Our goal is to help Members achieve a WELLfluent™ lifestyle, and we're doing that by minimizing Member expenses and maintaining the highest caliber of healthcare benefits.

We are looking forward to continuing to serve you.

Have Questions?

If you have questions about your changes in coverage, call AvMed's Member Engagement Center at **1-800-782-8633** (TTY 711) 7 days a week, 8 am–8 pm.

AvMed Medicare is an HMO plan with a Medicare contract. Enrollment in AvMed Medicare depends on contract renewal. See other side for more information.

Medicare Choice / Miami-Dade Benefits at a Glance

BENEFIT	2020	2021
Annual Out-of-Pocket Maximum	\$3,400	\$3,400
Primary Care Physician	\$0	\$0
Specialist Physician Referral Needed	\$0 - \$25	\$0
Telehealth	NA	\$0
Transportation (one-way)	8	8
Inpatient Hospital	\$0 days 1 to 5 \$55 days 6 to 20 \$0 days 21 to 90 and beyond	\$0 days 1 to 5 \$55 days 6 to 20 \$0 days 21 to 90 and beyond
Outpatient Surgery	\$50 - \$175	\$50 - \$175
Meals (post-hospitalization) 5 Days/10 Meals	Not Covered	\$0
Emergency Room	\$100	\$100
Eyewear Allowance	\$200	\$200
Dental Exam (See EOC for details)	\$0 - \$25	\$0 - \$25
Hearing Aid Allowance	\$500	\$1,200
Over the Counter Allowance	\$25 per quarter	\$25 every month
Part D Prescription Drug Benefit		
Initial Coverage Limit	\$4,020	\$4,500
Preferred Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/\$25/\$70/33%	\$0/\$0/\$25/\$70/33%
Standard Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$10/\$35/\$85/33%	\$0/\$10/\$35/\$85/33%

Miami-Dade Benefit Changes for 2021

Medicare Circle / Miami-Dade Benefits at a Glance

BENEFIT	2020	2021
Annual Out-of-Pocket Maximum	\$6,700	\$2,500
Primary Care Physician	\$0	\$0
Specialist Physician Referral Needed	\$0	\$0
Telehealth	NA	\$0
Transportation (one-way)	20	Unlimited
Inpatient Hospital	\$0	\$0
Outpatient Surgery	\$50 - \$175	\$50 - \$175
Meals (post-hospitalization) 5 Days/10 Meals	Not Covered	\$0
Emergency Room	\$90	\$75
Eyewear Allowance	\$350	\$350
Dental Exam (See EOC for details)	\$0 - \$25	\$0
Hearing Aid Allowance	\$600	\$1,500
Over the Counter Allowance	\$50 every month	\$50 every month
Part D Prescription Drug Benefit		
Initial Coverage Limit	\$4,500	\$6,000
Preferred Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/\$15/\$65/33%	\$0/\$0/\$0/\$65/33%
Standard Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$10/\$25/\$85/33%	\$0/\$10/\$25/\$85/33%

Medicare Choice / Broward Benefits at a Glance

BENEFIT	2020	2021
Annual Out-of-Pocket Maximum	\$3,400	\$3,400
Primary Care Physician	\$0	\$0
Specialist Physician Referral Needed	\$10 - \$20	\$10
Telehealth	NA	\$0
Transportation (one-way)	8	8
Inpatient Hospital	\$0 days 1 to 5 \$40 days 6 to 20 \$0 days 21 to 90 and beyond	\$0 days 1 to 5 \$40 days 6 to 20 \$0 days 21 to 90 and beyo
Outpatient Surgery	\$75 - 200	\$75 - 200
Meals (post-hospitalization) 5 Days/10 Meals	Not Covered	\$0
Emergency Room	\$120	\$100
Eyewear Allowance	\$200	\$200
Dental Exam (See EOC for details)	\$0 - \$25	\$0 - \$25
Hearing Aid Allowance	\$500	\$1,200
Over the Counter Allowance	\$25 every quarter	\$25 every month
Part D Prescription Drug Benefit		
Initial Coverage Limit	\$4,020	\$4,500
Preferred Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/\$30/\$75/33%	\$0/\$0/\$30/\$75/33%
Standard Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$10/\$40/\$100/33%	\$0/\$10/\$40/\$100/33%

Medicare Circle / Broward Benefits at a Glance

BENEFIT	2020	2021
Annual Out-of-Pocket Maximum	\$6,700	\$2,500
Primary Care Physician	\$0	\$0
Specialist Physician Referral Needed	\$10	\$0
Telehealth	NA	\$0
Transportation (one-way)	20	Unlimited
Inpatient Hospital	\$0	\$0
Outpatient Surgery	\$75 - \$175	\$75 - \$175
Meals (post-hospitalization) 5 Days/10 Meals	Not Covered	\$0
Emergency Room	\$90	\$75
Eyewear Allowance	\$300	\$350
Dental Exam (See EOC for details)	\$0 - \$25	\$0
Hearing Aid Allowance	\$600	\$1,500
Over the Counter Allowance	\$50 every month	\$50 every month
Part D Prescription Drug Benefit		
Initial Coverage Limit	\$4,500	\$6,000
Preferred Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/\$20/\$75/33%	\$0/\$0/\$20/\$75/33%
Standard Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$10/\$30/\$100/33%	\$0/\$10/\$30/\$100/33%

AvMed Access / HMO-POS Miami-Dade Benefits at a Glance

NEW 2021 PLAN			
BENEFIT	MIAMI-DADE		
Annual Out-of-Pocket Maximum	\$3,400		
Point of Service	This plan has a \$10,000 Point-of-Service benefit		
Primary Care Physician	\$0		
Specialist Physician	\$10 No Referral		
Telehealth	\$0		
Transportation (one-way)	8		
Inpatient Hospital	\$0 days 1 to 5 \$40 days 6 to 20 \$0 days 21 to 90 and beyond		
Outpatient Surgery	\$75 - \$175		
Meals (post-hospitalization) 5 Days/10 Meals	Not Covered		
Emergency Room	\$120		
Eyewear Allowance	\$200		
Dental Exam (See EOC for details)	\$0 - \$25		
Hearing Aid Allowance	\$1,000		
Over the Counter Allowance	\$25 every quarter		
Part D Prescription Drug	Part D Prescription Drug Benefit		
Initial Coverage Limit	\$4,500		
Preferred Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/\$30/\$75/33%		
Standard Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$10/\$40/\$100/33%		

AvMed Access / HMO-POSBroward Benefits at a Glance

NEW 2021 PLAN		
BENEFIT	BROWARD	
Annual Out-of-Pocket Maximum	\$3,400	
Point of Service	This plan has a \$10,000 Point-of-Service benefit	
Primary Care Physician	\$0	
Specialist Physician	\$10 No Referral	
Telehealth	\$0	
Transportation (one-way)	8	
Inpatient Hospital	\$0 days 1 to 5 \$40 days 6 to 20 \$0 days 21 to 90 and beyond	
Outpatient Surgery	\$75 - \$175	
Meals (post-hospitalization) 5 Days/10 Meals	Not Covered	
Emergency Room	\$120	
Eyewear Allowance	\$200	
Dental Exam (See EOC for details)	\$0 - \$25	
Hearing Aid Allowance	\$1,000	
Over the Counter Allowance	\$25 every quarter	
Part D Prescription Drug Benefit		
Initial Coverage Limit	\$4,500	
Preferred Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/\$30/\$75/33%	
Standard Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$10/\$40/\$100/33%	

Premium Saver Plan / Broward County only

NEW 2021 PLAN		
BENEFIT	BROWARD	
Annual Out-of-Pocket Maximum	\$3,400	
Part B Premium Reduction	This plan will reduce your monthly Part B premium by up to \$100	
Primary Care Physician	\$0	
Specialist Physician Referral Needed	\$25	
Telehealth	\$0	
Transportation (one-way)	Not Covered	
Inpatient Hospital	\$200 days 1 to 5 \$0 days 6 to 90 and beyond	
Outpatient Surgery	\$75 - \$175	
Meals (post-hospitalization) 5 Days/10 Meals	Not Covered	
Emergency Room	\$120	
Eyewear Allowance	Not Covered	
Dental Exam (See EOC for details)	Not Covered	
Hearing Aid Allowance	Not Covered	
Over the Counter Allowance	Not Covered	
Part D Prescription Drug Benefit		
Initial Coverage Limit	\$4,130	
Preferred Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/\$40/\$80/33%	
Standard Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$5/\$20/\$47/\$100/33%	

New 2021 Access and Premium Saver Plans Broward Benefits at a Glance

BENEFIT	ACCESS	PREMIUM SAVER
Annual Out-of-Pocket Maximum	\$3,400	\$3,400
POS Benefit and Premium Reduction	\$10,000 Point-of-Service benefit	Part B monthly premium reduction of up to \$100
Primary Care Physician	\$0	\$0
Specialist Physician	\$10 No Referral	\$25
Telehealth	\$0	\$0
Transportation (one-way)	8	Not Covered
Inpatient Hospital	\$0 days 1 to 5 \$40 days 6 to 20 \$0 days 21 to 90 and beyond	\$200 days 1 to 5 \$0 days 6 to 90 and beyond
Outpatient Surgery	\$75 - \$175	\$75 - \$175
Meals (post-hospitalization) 5 Days/10 Meals	Not Covered	Not Covered
Emergency Room	\$120	\$120
Eyewear Allowance	\$200	Not Covered
Dental Exam (See EOC for details)	\$0 - \$25	Not Covered
Hearing Aid Allowance	\$1,000	Not Covered
Over the Counter Allowance	\$25 every quarter	Not Covered
Part D Prescription Drug Benefit		
Initial Coverage Limit	\$4,500	\$4,130
Preferred Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/\$30/\$75/33%	\$0/\$0/\$40/\$80/33%
Standard Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$10/\$40/\$100/33%	\$5/\$20/\$47/\$100/33%

Attention AvMed Medicare Members:

Your **2021** Benefits Have Been Enhanced

See your Evidence of Coverage or read below for improved cost sharing

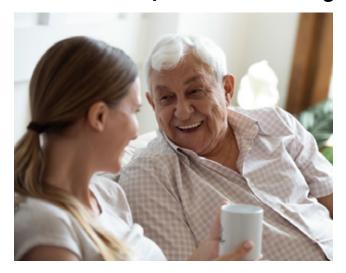
s you review your 2021 benefits and make important choices for the new year, we want you to know that we're here for you. And, for 2021, we are pleased to share that we have enhanced some of the benefits with lower cost sharing.

Our goal is to offer a healthcare experience that helps you lead a **WELL**fluent™ life – one that's rich in health and happiness. During the Annual Enrollment Period, which runs from Oct.15 to Dec. 7, we invite you to review your new Medicare coverage and understand your options. After all, becoming a wise health care consumer starts with knowledge.

As part of Florida's oldest and largest not-for-profit health plan, you can expect a range of benefits that will help you on your **WELL**fluent path.

These benefits include:

- Access to one of the largest and highest-quality networks of Primary Care Physicians (PCPs), specialists, and hospitals in South Florida
- The advantages of a large national plan with the highly personalized service of a regional plan
- WELLfluent living programs like AvMed HealthyperksSM, an incentives program that rewards Members for staying on top of their health

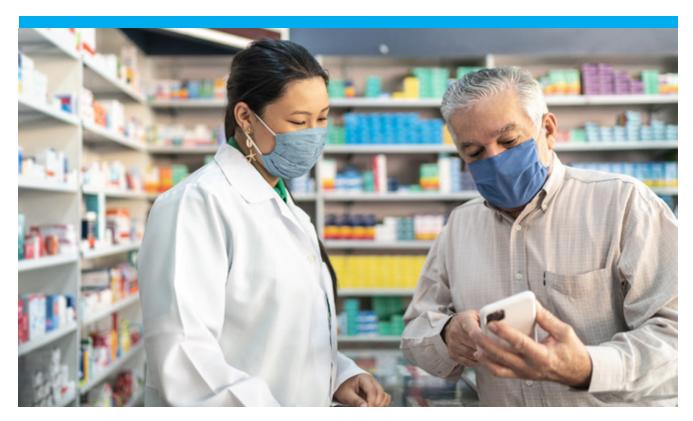


- Lower copays and cost-sharing responsibilities through AvMed's High Performance Network of Providers
- Comprehensive dental benefits through Delta Dental
- Prescription drug coverage, including 100-day retail and mail-order discounts through CVS/caremark™
- Free gym memberships and fitness classes through SilverSneakers®
- Hearing solutions available through Nations Hearing
- Non-Emergency Medical Transportation powered by ALIVI
- Emergency care anywhere in the world for travelers

For a full benefits overview, look for your Annual Notice of Change and Evidence of Coverage in the mail. Once you've reviewed your options, we're certain you'll see that AvMed's dedication to high quality care makes us the best choice.

Your **2021**Pharmacy Benefits

Whether you're dealing with a chronic disease or an acute condition, pharmacy benefits are a huge factor when deciding on a health plan. AvMed's pharmacy benefits are designed to provide you with the best healthcare experience possible.



AvMed Members can expect the same quality benefits they enjoyed throughout 2020, plus over-the-counter credit through CVS.

"Our prescription drug plan ensures that our Members get the most out of their pharmacy benefits," says AvMed Director of Pharmacy Shawn Barger, PharmD. "We have worked with providers and pharmacies so that Members will be covered in the manner that most aligns with their

treatment needs." For more information on formulary changes, visit **AvMed.org** or call AvMed's Member Engagement Center at **1-800-782-8633** (TTY 711) 7 days a week, 8 am–8 pm.

MEMBER SUPPORT

To help Members get high quality prescription coverage, AvMed offers several support programs:

High-Risk Medication Notification:
We aim to keep high-risk prescription
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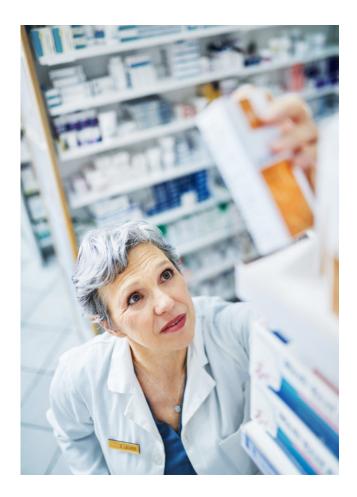
drugs at a minimum and send notifications to any physicians who prescribe them. While some situations may call for a high-risk medication, there are often alternatives available.

AvMed TEAMRx (Targeting and Engaging AvMed Members on Prescriptions):

AvMed partners with the Retail pharmacies in the network to speak to our Members about their new medications, remind them to refill their existing medications and warn them about any medications that could be added or taken away based on their diagnoses and their entire list of medications. This solution-oriented program helps Members overcome any obstacles to taking their medicines.

Pharmacy Benefits:

Members can save money by using Preferred Pharmacies. If Members use AvMed's Preferred Pharmacies, their cost share for prescription coverage could be lower in 2021 compared to 2020. Preferred Pharmacies include such well-known names as CVS. Navarro's, Walmart and Sam's as well as some independent retail pharmacies. Members should see the Provider Directory for a full list of Preferred Pharmacies, If Members choose to use a non-Preferred Pharmacy, there is a possibility their cost share for prescription coverage, depending on what copay tier their drug(s) is in, could go up. It really pays to save by using a Preferred Pharmacy!



• Transition Window:

During the first 90 days of enrollment with AvMed Medicare, Members are able to fill a one-time 30-day supply of a Medicare approved medication.

Medication Therapy Management Program:

AvMed partners with SinfoniaRX Medication Therapy Management (MTM). This program is for Members with higher-than-average amounts of medicines, health issues, or costs. After a one-on-one comprehensive review of a Member's medicines, we send recommendations to the Member and his or her prescribing provider.

AvMed Medicare is an HMO plan with a Medicare contract. Enrollment in AvMed Medicare depends on contract renewal.

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