

## 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 2022 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.

As you review this insert, 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.

## Medicare Choice / Miami-Dade Benefits at a Glance

BENEFIT	HMO 2021	HMO 2022
Annual Out-of-Pocket Maximum	\$3,400	\$3,400
Primary Care Physician	\$0	\$0
Specialist Physician Referral Needed	\$0	\$0
Telehealth	\$0	\$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	\$0	\$0
Emergency Room	\$100	\$100
Eyewear Allowance	\$200	\$200
Dental Exam (See EOC for details)	\$0 - \$25	\$0
Hearing Aid Allowance	\$1,200	\$1,200
Over the Counter Allowance	\$25 every month	\$25 every month
<b>Part D Prescription Drug Benefit</b>		
Initial Coverage Limit	\$4,500	\$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%

## Medicare Choice / Broward Benefits at a Glance

BENEFIT	2021	2022
Annual Out-of-Pocket Maximum	\$3,400	\$3,400
Primary Care Physician	\$0	\$0
Specialist Physician Referral Needed	\$10	\$10
Telehealth	\$0	\$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	\$0	\$0
Emergency Room	\$100	\$100
Eyewear Allowance	\$200	\$200
Dental Exam (See EOC for details)	\$0 - \$25	\$0 - \$25
Hearing Aid Allowance	\$1,200	\$1,200
Over the Counter Allowance	\$25 every month	\$25 every month
<b>Part D Prescription Drug Benefit</b>		
Initial Coverage Limit	\$4,500	\$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 / Miami-Dade Benefits at a Glance

BENEFIT	HMO 2021	HMO 2022
Annual Out-of-Pocket Maximum	\$2,500	\$2,500
Primary Care Physician	\$0	\$0
Specialist Physician Referral Needed	\$0	\$0
Telehealth	\$0	\$0
Transportation (one-way)	Unlimited	Unlimited
Inpatient Hospital	\$0	\$0
Outpatient Surgery	\$50 - \$175	\$50 - \$100
Meals (post-hospitalization) 5 Days/10 Meals	\$0	\$0
Emergency Room	\$75	\$75
Eyewear Allowance	\$350	\$350
Dental Exam (See EOC for details)	\$0	\$0
Hearing Aid Allowance	\$1,500	\$1,500
Over the Counter Allowance	\$50 every month	\$50 every month
<b>Part D Prescription Drug Benefit</b>		
Initial Coverage Limit	\$6,000	\$8,000
Preferred Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/ \$0/\$65/33%	\$0/\$0/\$0/\$60 /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 Circle / Broward Benefits at a Glance

BENEFIT	HMO 2021	HMO 2022
Annual Out-of-Pocket Maximum	\$2,500	\$2,500
Primary Care Physician	\$0	\$0
Specialist Physician Referral Needed	\$0	\$0
Telehealth	\$0	\$0
Transportation (one-way)	Unlimited	Unlimited
Inpatient Hospital	\$0	\$0
Outpatient Surgery	\$75 - \$175	\$75 - \$100
Meals (post-hospitalization) 5 Days/10 Meals	\$0	\$0
Emergency Room	\$75	\$75
Eyewear Allowance	\$350	\$350
Dental Exam (See EOC for details)	\$0	\$0
Hearing Aid Allowance	\$1,500	\$1,500
Over the Counter Allowance	\$50 every month	\$50 every month
<b>Part D Prescription Drug Benefit</b>		
Initial Coverage Limit	\$6,000	\$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/\$10/\$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 Medicare Access / HMO-POS Miami-Dade Benefits at a Glance

<b>Point-of-Service Benefit (POS)</b>		
<b>BENEFIT</b>	<b>MIAMI-DADE 2021</b>	<b>MIAMI-DADE 2022</b>
Annual Out-of-Pocket Maximum	\$3,400	\$3,400
Primary Care Physician	\$0	\$0
Specialist Physician	\$10 No Referral	\$10 No Referral
Telehealth	\$0	\$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 beyond
Outpatient Surgery	\$75 - \$175	\$75 - \$175
Emergency Room	\$120	\$120
Eyewear Allowance	\$200	\$200
Dental Exam (See EOC for details)	\$0 - \$25	\$0 - \$25
Hearing Aid Allowance	\$1,000	\$1,000
Over the Counter Allowance	\$25 every quarter	\$25 every quarter
<b>Part D Prescription Drug Benefit</b>		
Initial Coverage Limit	\$4,500	\$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%

## AvMed Medicare Access / HMO-POS Broward Benefits at a Glance

<b>Point-of-Service Benefit (POS)</b>		
<b>BENEFIT</b>	<b>BROWARD 2021</b>	<b>BROWARD 2022</b>
Annual Out-of-Pocket Maximum	\$3,400	\$3,400
Primary Care Physician	\$0	\$0
Specialist Physician	\$10 No Referral	\$10 No Referral
Telehealth	\$0	\$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 beyond
Outpatient Surgery	\$75 - \$175	\$75 - \$175
Emergency Room	\$120	\$120
Eyewear Allowance	\$200	\$200
Dental Exam (See EOC for details)	\$0 - \$25	\$0 - \$25
Hearing Aid Allowance	\$1,000	\$1,200
Over the Counter Allowance	\$25 every quarter	\$25 every quarter
<b>Part D Prescription Drug Benefit</b>		
Initial Coverage Limit	\$4,500	\$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%

## AvMed Medicare Premium Saver HMO

### Broward Benefits at a Glance

<b>\$100 Part B Reimbursement</b>		
<b>BENEFIT</b>	<b>BROWARD 2021</b>	<b>BROWARD 2022</b>
Annual Out-of-Pocket Maximum	\$3,400	\$3,400
Primary Care Physician	\$0	\$0
Specialist Physician Referral Needed	\$25	\$25
Telehealth	\$0	\$0
Transportation (one-way)	Not Covered	Not Covered
Inpatient Hospital	\$200 days 1 to 5 \$0 days 6 to 90 and beyond	\$200 days 1 to 5 \$0 days 6 to 90 and beyond
Outpatient Surgery	\$75 - \$175	\$75 - \$175
Emergency Room	\$120	\$120
Eyewear Allowance	Not Covered	Not Covered
Dental Exam (See EOC for details)	Not Covered	Not Covered
Hearing Aid Allowance	Not Covered	Not Covered
Over the Counter Allowance	Not Covered	Not Covered
<b>Part D Prescription Drug Benefit</b>		
Initial Coverage Limit	\$4,130	\$4,430
Preferred Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/\$40/\$80/33%	\$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%	\$5/\$20/\$47/\$100/33%



## 2022 Hospice Benefit

### AvMed Medicare Choice, Circle, Access and Premium Saver

HOSPICE CARE	WHAT YOU PAY
<p>AvMed Medicare Members are eligible for the hospice benefit when their doctor and a hospice medical director have provided a prognosis certifying terminal illness, with 6 months or less to live, or if your illness runs its normal course. A hospice doctor can be an in- or out-of-network provider.</p> <p>You may receive care from any Medicare-certified hospice program.</p> <p>Covered services include:</p> <ul style="list-style-type: none"> <li>• Drugs for symptom control and pain relief</li> <li>• Short-term respite care</li> <li>• Home care</li> </ul> <p>Transitional care benefits may be included during hospice election but only provided by participating providers.</p> <p>Wellness and Healthcare Planning</p> <p>AvMed covers the following services:</p> <ul style="list-style-type: none"> <li>• Annual Wellness Visit</li> <li>• Medicare Health Risk Assessment</li> <li>• Care Management Program</li> <li>• Palliative Care Programs</li> </ul>	<p>When you enroll in a Medicare-certified hospice program, your hospice and Part A and Part B services related to your terminal prognosis are paid for by AvMed Medicare.</p> <p>5% coinsurance not to exceed \$5 per prescription for drugs and biologicals, furnished by the hospice on an outpatient basis.</p> <p>5% coinsurance per day for a respite care day, not to exceed \$5.</p>

### Supplemental Benefits for Access and Premium Saver

<p>Additional Supplemental Benefits include:</p> <p>200 hours of companionship through our partnership with Papa Pals. Members and their care givers will have access to the Papa Pals program. To address the emotional toll of end of life, individuals will be able to interact with specially trained and selected "Pals" either in person or virtually, in non-clinical ways, for assistance with everyday tasks, playing games, reading books, technology and more.</p>	<p>\$0 copay</p>
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# Attention AvMed Medicare Members:

## Your **2022** Benefits Have Been Enhanced

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

As you review your 2022 benefits and make important choices for the new year, we want you to know that we're here for you. 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 **WELLfluent™** 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 **WELLfluent** 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 Healthyperks<sup>SM</sup>, 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.

\*Applies to some plans.

# Your **2022** 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 2021, 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 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.

- **Rx Savings Solutions:**

AvMed understands the importance of keeping prescription medication costs down for our Members. Rx Savings Solutions helps Members easily find the lowest-price options for their prescription drugs. This new online pharmacy tool is linked to AvMed, so everything is personalized, at no cost to Members.

Rx Savings Solutions will notify Members via email or text whenever there is an opportunity to save. To get started, Members can log on to the AvMed Member Portal at [AvMed.org](http://AvMed.org) and select Rx Savings Solutions link on the left menu.

- **Pharmacy Benefits:**

Members can also save money by using Preferred Pharmacies. If Members use AvMed's Preferred Pharmacies, their cost share for prescription coverage could be lower in 2022 compared to 2021. Preferred Pharmacies include such well-known names as CVS, Navarro's, Walmart and Publix as well as some independent retail pharmacies. Members should see the Provider and Pharmacy 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:**

For 2022, AvMed has a dedicated clinical pharmacist who will be performing a Comprehensive Medication Review (CMR) for our Medication Therapy Management (MTM) eligible members. This program is for Members with higher-than-average amounts of medications, health issues, or costs. After a one-on-one comprehensive review of a Member's medications, we send recommendations to the Member and their prescribing provider.

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