

Training agenda

- UPMC for Life Medicare Advantage
 - Plan lineup
 - New and improved highlights
 - Individual plan changes
- Prescription drug coverage
- Extra benefits and services
- UPMC for Life Complete Care
- Plan documents and marketing



UPMC for Life Medicare Advantage

Who we are

We are proud to call Pennsylvania home. From our local doctors and hospitals, you know and trust, to our Health Care Concierge team, it's all right here.









Owned by UPMC, a worldclass academic medical center



Second-largest

provider-led plan in the nation

Value proposition

Take a moment to review the UPMC for Life value proposition. Our product strategy directly supports our ability to provide a better experience to our members. We give our members the high-quality coverage they need at an affordable price so they can get the health care they need, when they need it.



Save money

- We're offering our <u>best</u> plan options ever, starting as low as \$0 per month.
- Our costs stay low year after year.
- Your plan limits your out-of-pocket costs and helps to give you financial protection.



Easy to get care

- High-quality care from UPMC and access to other community doctors and hospitals across PA.
- Emergency and urgent care anywhere in the U.S.
- Travel Concierge Program for worry-free trips.



Prescriptions

- \$0 copay for Tier 1 and Tier 2 drugs at preferred pharmacies.
- Diabetic insulin coverage through the donut hole.
- 65,000 participating pharmacies, including mail order.



Product strategy

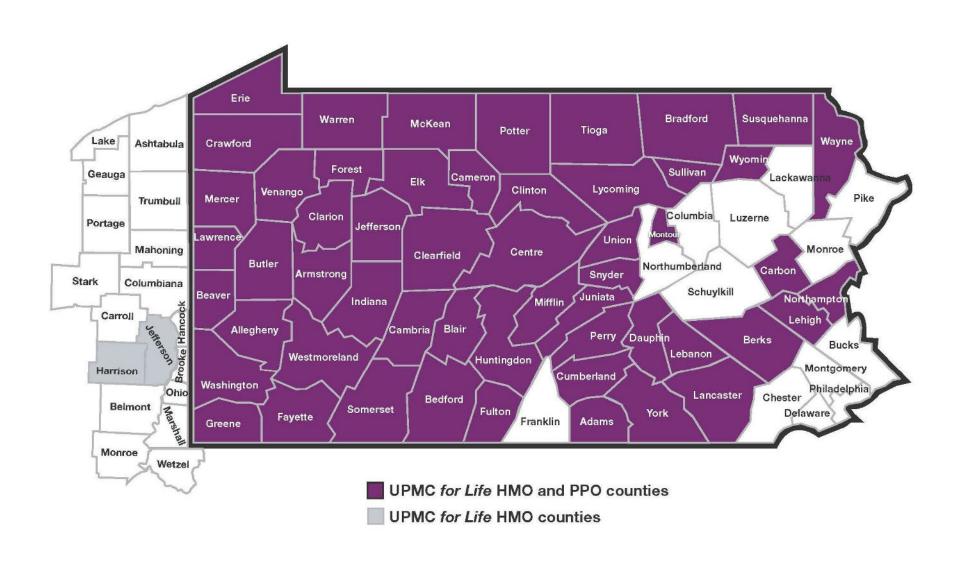
Our products fall into three categories. Each plan has a specific target audience and key benefits to best serve our members. Here's our product strategy for 2024.

- Military veteran plans—These plans are designed to target veterans and have separate sales and marketing plans to support their growth and member retention.
- Core growth plans—These plans are where we expect to gain new members, and we may see current members switch to these plans.
- Legacy plans—We would like to retain current members in these plans but do not expect to see sales of new members in them.

Veterans plans	Core growth plans	Legacy plans
HMO No Rx (H3907-002)	HMO Premier Rx plans (H3907-046) (H3907-050) (H3907-052)	HMO Deductible Rx (H3907-037)
PPO Salute (H5533-012)	PPO Premier Rx plans (H5533-013) (H5533-011)	PPO High Deductible Rx (H5533-003)
	PPO Rx Choice plans (H5533-015-001) (H5533-015-002) (H5533-009)	PPO Rx Enhanced (H5533-008) (H5533-005)
	HMO Rx Choice (H3907-057-001) (H3907-057-002) (H3907-057-003) (H3907-057-004) (H3907-057-005)	HMO Rx Enhanced (H3907-006)
	HMO Rx (H3907-029)	

Medicare service area

No changes have been made to the Medicare service area for 2024.



Sales and marketing regions

The 2024 plans are organized into the following regions for sales and marketing purposes.

Region name	Counties
Allegheny PA	Allegheny
Southwestern PA (SWPA)	Armstrong, Beaver, Bedford, Blair, Butler, Fayette, Greene, Somerset, Washington, Westmoreland
Northwestern PA (NWPA)	Cameron, Clarion, Crawford, Elk, Erie, Forest, Lawrence, McKean, Mercer, Venango, Warren
Western PA (WPA)	Cambria, Carbon, Clearfield, Huntingdon, Indiana, Jefferson
South Central PA (SCPA)	Adams, Cumberland, Dauphin, Fulton, Juniata, Lancaster, Lebanon, Mifflin, Perry, York
North Central PA (NCPA)	Centre, Clinton, Lycoming, Montour, Potter, Snyder, Sullivan, Tioga, Union
Northeastern PA (NEPA)	Berks, Bradford, Lehigh, Northampton, Susquehanna, Wayne, Wyoming
Ohio (OH)	Harrison, Jefferson

Segmentation

This year UPMC for Life is introducing plan segmentation.

What is segmentation?

- O Segmentation allows a Medicare Advantage organization to create multiple segments (also known as regions) in one plan without each region needing to have separate contract and PBP numbers.
- o Premium and benefits can change in each region/segment based on product strategy.

Which plans are being segmented and why are we doing this?

- o PPO Rx Choice H5533-014 and HMO Rx Choice H3907-049 will both be segmented.
 - PPO Rx Choice is being segmented so that we can offer more competitive benefits in Allegheny County. As you'll learn more about in a few slides, Allegheny County is a critical piece of our product strategy for this year.
 - HMO Rx Choice is being segmented, but the benefits in all segments will be the same this year.
 We're segmenting it this year so we can be prepared to make benefit changes in the coming years if we need to.
- We'll explain more about how segmentation works in detail on the next slide.

Are members being terminated?

- o The current plans will be terminated. Two new plans will be created with new contract and PBP numbers.
- O No members are being terminated. All members affected will be cross-walked seamlessly to their new plan. The plans will still be named the same so members should not realize this has happened at all. Members do not need to do anything for this change.
- o Members will get a new member ID card in November that shows their new Segment ID number.

Segmentation—PPO Rx Choice

PPO Rx Choice (H5533-014) will be segmented into two regions in WPA, one for Allegheny County and a second one for the rest of the counties in WPA.

PPO Rx Choice					
Current 2023 NEW 2024 Region 2024					
115522 044	H5533-015-001	Allegheny			
H5533-014	H5533-015-002	Rest of WPA			

Here's how segmentation works:

- The plan will receive <u>new</u> contract and PBP numbers. The contract and PBP will be the <u>same</u> for each segment.
 - o Contract: H5533
 - o PBP: 015
- Each region will have a <u>new</u> segment ID number. The segment ID will be <u>different</u> for each region. This will be a third set of numbers added to the contract and PBP numbers. Segment ID will be a new field in MC400.
 - o Segment ID: 001 (Allegheny)
 - o Segment ID: 002 (Rest of WPA)
- Here's how the new plan codes will look:
 - 1. Allegheny = H5533-015-<mark>001</mark>
 - 2. Rest of WPA = H5533-015-002

Segmentation—HMO Rx Choice

HMO Rx Choice (H3907-049) will be segmented into five regions across PA.

HMO Rx Choice					
Current 2023 NEW 2024 Region 2024					
	H3907-057-001	Allegheny			
	H3907-057-002	SWPA and OH			
H3907-049	H3907-057-003	NWPA			
	H3907-057-004	СРА			
	H3907-057-005	WPA			

Here's how segmentation works:

- The plan will receive <u>new</u> contract and PBP numbers. The contract and PBP will be the <u>same</u> for each segment.
 - o Contract: H3907
 - o PBP: 057
- Each region will have a <u>new</u> segment ID number. The segment ID will be <u>different</u> for each region. This will be a third set of numbers added to the contract and PBP numbers. Segment ID will be a new field in MC400.
- Here's how the new plan codes will look:
 - 1. Allegheny = H3907-057-<mark>001</mark>
 - 2. SWPA and OH = H3907-057-002
 - 3. NWPA = H3907-057-003
 - 4. CPA = H3907-057-004
 - 5. WPA = H3907-057-005

Plan lineup for 2024

Use this brief overview to reference the 2024 plans as you go through this document.

Plan name	Contract-PBP	Region	Premium	County changes
HMO No Rx	H3907-002	All	\$0	None
PPO Salute	H5533-012	All, except OH	\$0	None
HMO Premier Rx	H3907-046	Allegheny, SWPA, Lycoming, Tioga	\$0	None
HMO Premier Rx	H3907-050	NWPA	\$0	None
HMO Premier Rx	H3907-052	Cumberland, Dauphin, Lancaster, York, Berks	\$0	None
PPO Premier Rx	H5533-013	Allegheny, SWPA, NWPA, WPA	\$0	None
PPO Premier Rx	H5533-011	SCPA, NCPA	\$0	None
PPO Rx Choice	(prev. H5533-014) H5533-015-001	Allegheny	\$19	NEW plan–Allegheny
PPO Rx Choice	(prev. H5533-014) H5533-015-002	SWPA, NWPA, WPA	\$23	Remove Allegheny
PPO Rx Choice	H5533-009	SCPA, NCPA	\$23	None

Plan lineup for 2024 (cont'd)

Use this brief overview to reference the 2024 plans as you go through this document.

Plan name	Contract-PBP	Region	Premium	County changes
HMO Deductible Rx	H3907-037	All, except Berks	\$20.80	None
PPO High Deductible Rx	H5533-003	Allegheny, SWPA, NWPA, WPA	\$29.50	None
HMO Rx Choice	(prev. H3907-049) H3907-057-001	Allegheny	\$36	Just Allegheny
HMO Rx Choice	(prev. H3907-049) H3907-057-002	SWPA/OH	\$36	Armstrong, Beaver, Butler, Greene, Fayette, Washington, Westmoreland, Harrison OH, Jefferson OH
HMO Rx Choice	(prev. H3907-049) H3907-057-003	NWPA	\$36	Cameron, Clarion, Crawford, Elk, Erie, Forest, Lawrence, McKean, Mercer, Venango, Warren
HMO Rx Choice	(prev. H3907-049) H3907-057-004	NCPA, SCPA	\$36	Adams, Bradford, Centre, Clinton, Cumberland, Dauphin, Fulton, Juniata, Lancaster, Lebanon, Lehigh, Lycoming, Mifflin, Montour, Northampton, Perry, Potter, Snyder, Sullivan, Susquehanna, Tioga, Union, Wayne, Wyoming, York
HMO Rx Choice	(prev. H3907-049) H3907-057-005	WPA	\$36	Bedford, Blair, Cambria, Carbon, Clearfield, Huntingdon, Indiana, Jefferson, Somerset

Plan lineup for 2024 (cont'd)

Use this brief overview to reference the 2024 plans as you go through this document.

Plan name	Contract-PBP	Region	Premium	County changes
PPO Rx Enhanced	H5533-008	SCPA, NEPA, Berks	\$58	None
HMO Rx	H3907-029	All, except Berks	\$81	None
PPO Rx Enhanced	H5533-005	Allegheny, SWPA, NWPA, WPA	\$134	None
HMO Rx Enhanced	H3907-006	All	\$295	None

Doctor access is important



48,000 doctors and specialists



250 hospitals and facilities



300 urgent care centers



Coverage in your community and across the state

Doctors and hospitals our members know and trust!

- Our network includes the high-quality care of UPMC as well as thousands of community providers across PA and out of state.
- Members pay lower costs for their care when they use providers that participate with our plan.
- Members can self-refer to any participating provider without paying more.

Out-of-network care with PPO plans

- PPO members can access providers in- and out-of-network—they can see any provider that accepts Medicare in the U.S.
- No referrals are needed to see out-of-network providers.
- Low costs for out-of-network care with the UPMC *for Life* PPO Premier Rx and UPMC *for Life* PPO Rx Choice plans.
- If a member needs help seeing an out-of-network provider, we're here for them. They can call the Health Care Concierge team.

Scan this code with your smartphone to search providers:



Allegheny County-PPO Rx Choice

We've made some important benefit changes for Allegheny County this year!



Why is Allegheny important to our product strategy?

- Allegheny County is our home turf!
 Increasing membership here helps to support our UPMC doctors and hospitals and allows us to make the best use of integrating health insurance and health care delivery.
- We're dedicated to this community, where many of our employees live, and to creating the best health care experience possible.
- With 34% market share, UPMC for Life
 is the leader in Medicare Advantage in
 this county.
- We have an incredible opportunity with over 211K Medicare shoppers who are not yet UPMC for Life members.



What advantages does the new Allegheny PPO Rx Choice plan give our members?

- \$19 premium—A strong, competitive mid-priced premium plan.
- \$10 specialist (in-network)—The lowest specialist copay we've ever had!
- \$225 inpatient hospital per stay (in-network)
- \$0 labs (in-network)
- \$15 x-rays (in-network)
- \$6,000 comprehensive dental allowance, including dentures
- \$750 UPMC for Life Flex Spend Card allowance to buy OTC products and pay for medical service costs, dental care, vision care, and hearing aids
- Members can see any provider that accepts Medicare in the U.S.

NEW and improved for 2024!!

UPMC for Life is offering our <u>BEST</u> plans ever! Here's a quick list of what's new and improved for 2024. Let's get excited!!!

- Plan stability—Our plans remain strong and consistent; no premium increases.
- PPO plans—NEW! Allegheny PPO Rx Choice with low \$19 premium and low copays for services our members use most; PPO plans from last year remain robust and competitive.
- Part B giveback—Many plans now include a small monthly Part B premium reduction; the following plans now have increased Part B premium reduction: PPO Salute \$75, PPO Premier Rx in Central PA \$53, and HMO No Rx \$39.
- Tier 2 Rx copays—All plans with Part D coverage have a \$0 copay for Tier 2 drugs at preferred pharmacies and mail order.
- Diabetes test strips—All plans now have a \$0 copay for preferred diabetes testing strips made by LifeScan.
- Dental-Many plans have \$2,000 more for dental allowance.
- UPMC for Life Flex Spend Card—All members that have the Flex Spend Card can now use their card to pay for medical service costs (Part A & B services)—ex., doctor office copays.

KEY TAKEAWAYS

- 1. PPO plans—NEW! Allegheny PPO Rx Choice with \$19 premium
- 2. Part B reduction—Increased on three plans; added small amounts to many other plans
- 1. Tier 2 Rx-\$0 copay
- 2. Diabetes test strips—\$0 copay
- 5. **Dental allowance**–\$2,000 more
- 6. Flex Spend Card—members can use on medical service costs

Other important changes

Here are some additional changes that are being made to benefits for 2024.

- Chiropractic services tiering—Tiering for chiropractic services has been removed and all plans will have the Tier 1 copay.
- 3-month prescription supply—3-month supply has been extended from 90 days to 100 days for all prescription tiers (except Tier 5 specialty).
- Mental health/Extra Help telehealth—Members with Extra Help (LIS) and disabling mental health conditions (bipolar disorder, major depressive disorders, paranoid disorder, schizophrenia, and schizoaffective disorder) have a \$15 copay for outpatient mental health in-person visits. They now have a \$15 copay for mental health telehealth visits as well (all plans except PPO Salute and Allegheny PPO Rx Choice).

Dental allowance

Many plans now have \$2,000 more in dental allowance.

And remember, members on a plan with the UPMC for Life Flex Spend Card can use their card to help pay for additional dental services, like teeth whitening and dental implants.

Category	Plan name	Contract-PBP	Dental allowance	Dentures
Veterans	HMO No Rx	H3907-002	\$3,000/50% coinsurance	Yes
plans	PPO Salute	H5533-012	\$5,000/50% coinsurance	Yes
	HMO Premier Rx	H3907-046	\$4,000/50% coinsurance	No
	HMO Premier Rx	H3907-050	\$4,000/50% coinsurance	No
	HMO Premier Rx	H3907-052	\$4,000/50% coinsurance	No
	PPO Premier Rx	H5533-013	\$4,000/50% coinsurance	No
Core	PPO Premier Rx	H5533-011	\$4,500/50% coinsurance	No
growth	PPO Rx Choice	H5533-015-001	\$6,000/50% coinsurance	Yes
Plans	PPO Rx Choice	H5533-015-002	\$5,000/50%coinsurance	Yes
	PPO Rx Choice	H5533-009	\$5,000/50% coinsurance	Yes
	HMO Rx Choice (all plans)	H3907-057-001, 002, 003, 004, 005	\$5,000/50% coinsurance	Yes
	HMO Rx	H3907-029	\$5,000/50% coinsurance	Yes
	HMO Deductible Rx	H3907-037	\$2,250/50% coinsurance	Yes
	PPO High Deductible Rx	H5533-003	\$250 (standard allowance)	No
Legacy plans	PPO Rx Enhanced	H5533-008	\$2,000/50% coinsurance	Yes
	PPO Rx Enhanced	H5533-005	\$1,000/50% coinsurance	No
	HMO Rx Enhanced	H3907-006	Not covered	No

UPMC for Life Flex Spend Card

Members can choose how to spend these additional dollars on their health care!

Here's what you need to know:

- Members get an additional allowance per year to spend on over-the-counter (OTC) products and dental, vision, and hearing services. NEW for 2024, this card can be used for Part A and B medical service costs too! See the next slide for more details on this new benefit!
- The Flex Spend Card allowance is in addition to the dental and vision allowances members already get with their plan.
- Members can use the full amount whenever they like during the plan year.
- This is not a quarterly allowance, and it will not roll over from year to year.

Category	Plan name	Contract-PBP	Flex Spend Card
Veterans	HMO No Rx	H3907-002	\$250
plans	PPO Salute	H5533-012	\$600
	HMO Premier Rx	H3907-046	\$500
	HMO Premier Rx	H3907-050	\$500
	HMO Premier Rx	H3907-052	\$500
	PPO Premier Rx	H5533-013	\$300
Core	PPO Premier Rx	H5533-011	\$500
growth Plans	PPO Rx Choice	H5533-015-001	\$750
Fidils	PPO Rx Choice	H5533-015-002	\$300
	PPO Rx Choice	H5533-009	\$500
	HMO Rx Choice (all plans)	H3907-057-001, 002, 003, 004, 005	\$500
	HMO Rx	H3907-029	\$1,000
	HMO Deductible Rx	H3907-037	\$500
	PPO High Deductible Rx	H5533-003	Not covered
Legacy plans	PPO Rx Enhanced	H5533-008	Not covered
	PPO Rx Enhanced	H3907-005	Not covered
	HMO Rx Enhanced	H3907-006	Not covered

How to use the Flex Spend Card

Here's how members can use their card for health care services.

NEW! Parts A and B medical service costs

- Members can use their UPMC for Life Flex Spend Card for out-of-pocket costs at the doctor's office and medical facilities when they receive Part A and Part B health care services.
 This card can be used at any provider that accepts MasterCard.
- Members can only use \$50 of their Flex Spend Card allowance per transaction to pay for medical service costs.
 - Example: If the member receives a Diagnostic/Advanced Imaging service like a CT scan with a \$225 copay, the member can use the Flex Spend Card to pay for \$50 of this copay. After the Flex Spend Card is used, the member would still have to pay \$175 (\$225 - \$50 = \$175) out-of-pocket.



- Members can use their card to pay for out-of-pocket costs like copays, coinsurance, and deductibles.
- Members can use their card for BOTH in- and out-of-network medical services.
- Members CANNOT use their card to pay for Part D prescription drug copays.
- The \$50 transaction limit applies only to medical service costs and does not apply to OTC, dental, vision, or hearing.

Flex Spend Card-OTC products

Members can buy OTC products using their UPMC for Life Flex Spend Card at participating retail stores and through mail order. Here's how.



Retail stores

- Members can purchase OTC products at participating retail stores or through our mail-order catalog.
- Some participating retail stores include **Giant Eagle**, **Rite Aid**, **Walgreens**, **and Walmart**. A full list is available on the UPMC *for Life* public website: upmchp.us/member-flex.

Mail-order

- Mail-order products are purchased through Convey. Here's how to order:
 - 1. Online using the UPMC for Life OTC website:
 - o Log in to MyHealth OnLine at upmchealthplan.com/members.
 - o Log in to the UPMC Health Plan app.
 - 2. To have a catalog mailed, members can call **1-833-293-6483 (TTY: 711).** Catalogs are sent through the Converge fulfillment website.
 - 3. Call Convey at **1-800-688-2515 (TTY: 711)** Mon.—Fri. from 8 a.m. to 11 p.m.

See slide 23 for additional resources and information.

Flex Spend Card-Dental, vision, hearing

Members can use their UPMC for Life Flex Spend Card to pay for dental, vision, and hearing services at any provider that accepts MasterCard.



Dental services

- Members can use their dental benefit allowance first at any participating dental provider and then use this card second to help pay for any additional out-of-pocket costs.
- Example HMO Rx Choice plan:
 - o This plan has a \$4,000 maximum comprehensive dental allowance with 50% coinsurance. It also has a \$500 Flex Spend Card allowance.
 - o If you receive a covered dental service that totals \$400, you are responsible for 50% of the cost, which in this case would be \$200. You can use your Flex Spend Card to pay for your out-of-pocket cost of \$200. Your plan would cover the other 50%, or \$200. You would then have a remaining dental allowance of \$3,800, and a remaining balance of \$300 on your Flex Spend Card that you can use for something else.
- Members can also use this card to pay for dental services at non-participating providers, but they would not be able to use their dental benefit allowance first.

Vision services

- Members can use their vision benefits allowance first and then use this card second to help pay for any additional out-of-pocket costs.
- Members can also use this card to pay for the cost of a vision services at nonparticipating providers, but they would not receive a free vision exam or be able to use their vision allowance benefit.

Hearing aids

- Members can use this card to pay the discounted cost for hearing aids through an Amplifon hearing provider.
- Members can also use this card to pay for the cost of hearing aids at non-participating providers, but they would not receive a free hearing exam, free hearing aid fitting, or discount on the cost of hearing aids.

Flex Spend Card resources

Here are some helpful resources that can help our members get information they need to use their Flex Spend Card.



Flex Spend Card tutorial video

 Members can learn all about their Flex Spend Card and watch videos about how to access resources at upmchp.us/member-flex.

Find participating retail stores

- Public website: upmchp.us/member-flex
- MyHealth OnLine: upmchealthplan.com/members → Your Insurance → UPMC for Life Flex Spend Card → UPMC for Life Flex Spend Card Portal. Once on the portal, go to Tools and Support and click Merchant Locator Tool.

Scanning products at retail stores

 Members can scan products while they shop to see if they're covered. Log in to the UPMC Health Plan app → Insurance Tab → Scan Items

Members should check their card balance every time before they use it. Three ways to check real-time 24/7:

- Call our automated system: 1-833-293-6483 (TTY: 711)
- MyHealth OnLine: upmchealthplan.com/members → Your
 Insurance → UPMC for Life Flex Spend Card
- UPMC Health Plan app → Insurance Tab

Getting OTC products by mail:

- Here are two easy ways to access the UPMC for Life OTC online store:
 - MyHealth OnLine: upmchealthplan.com/members →
 Your Insurance → UPMC for Life Flex Spend Card →
 Visit the UPMC for Life OTC Website
 - UPMC Health Plan app → Insurance Tab → View Flex
 Spending → Over-the-Counter Store
- Choose products from our OTC catalog and complete an order form. Mail to: OTC Servicing Center, PO Box 526266, Miami, FL 33152-9819.
- Call **1-800-688-2515 (TTY: 711)** Mon.—Fri. from 8 a.m. to 11 p.m.

Plans for military veterans

- This year UPMC for Life has two plan options that are recommended for those who have honorably served our country:
 - HMO No Rx
 - PPO Salute
- The next few slides explain these plan options and why they are a good fit for veterans and retired military.
- Veterans are also welcome to enroll in any of our other plan options.
- If you have any questions about the veteran plan options, please contact Chris Preffer: preffercr@upmc.edu.

GOAL:

Engage with veterans in our community and help them get high-quality, affordable Medicare coverage.

HMO No Rx-H3907-002

Here's the product value story and target audience for this plan.

Value story

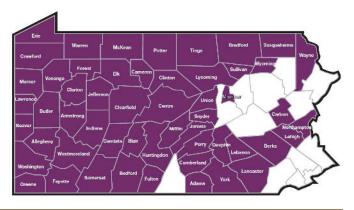
- You don't need to pay more; in fact, we'll pay you! Why pay more for a plan with drug coverage when you don't need it? You have a \$0 monthly premium and get \$39 back in your monthly Social Security check.
- No prescription coverage. If you already have credible coverage for drugs through the VA or as a PACE/PACENET recipient, you do not need a Part D plan.
- Extra benefits. More benefits than with Original Medicare alone!
 - Dental, vision, hearing, free gym memberships, personal counseling, caregiver support, and more.
 - The UPMC for Life Flex Spend Card gives you \$250 to spend on OTC products and pay for medical service costs, dental care, vision care, and hearing aids.
- Doctor access.
 - Access to UPMC and additional community providers across PA and out of state.
 - o Emergency and urgent care anywhere in the U.S.
 - Use the UPMC for Life Travel Concierge program for worry-free trips.

Who should buy this plan?

- Veteran
 - Less than 20 years of service and does not have Tricare
 - Gets Part Dprescription coveragethrough VA
- PACE/PACENET
 - Gets Part Dprescription coveragethroughPACE/PACENET

HMO No Rx-H3907-002

Service Area: Adams, Allegheny, Armstrong, Beaver, Bedford, Blair, Bradford, Butler, Cambria, Cameron, Carbon, Centre, Clarion, Clearfield, Clinton, Crawford, Cumberland, Dauphin, Elk, Erie, Fayette, Forest, Fulton, Greene, Huntingdon, Indiana, Jefferson, Juniata, Lancaster, Lawrence, Lebanon, Lehigh, Lycoming, McKean, Mercer, Mifflin, Montour, Northampton, Perry, Potter, Snyder, Somerset, Sullivan, Susquehanna, Tioga, Union, Venango, Warren, Washington, Wayne, Westmoreland, Wyoming, York, Harrison (OH), and Jefferson (OH) counties



Plan Highlights	2023	2024	
Plan Premium	\$0 per month	\$0 per month–NO CHANGE	
Part B Premium Reduction	\$25 per month	\$39 per month-that's \$14 MORE	
Deductible	\$0	\$0–NO CHANGE	
Maximum Out-of-Pocket	\$5,000 per year	\$5,000–NO CHANGE	
Inpatient Hospital	\$300 per stay	\$300 per stay–NO CHANGE	
PCP/Specialist (in-office and telehealth)	PCP: \$0/ Specialist: \$45	PCP: \$0/ Specialist: \$45–NO CHANGE	
Chiropractic Services	Tier 1: \$18 per visit; Tier 2: \$20 per visit	\$18 per visit–removed tiering	
Outpatient Surgery	\$225 per service	\$225 per service–NO CHANGE	
Diabetes Test Strips	20% coinsurance	\$0 copay for LifeScan Diabetes Test Strips—change to copay; All other brands 20% coinsurance with prior auth	
Dental Allowance	\$1,000/50% coinsurance	\$3,000/50% coinsurance—that's \$2,000 MORE	
Vision Allowance	\$200 per year	\$200 per year–NO CHANGE	
Hearing Aids	\$690-\$1,890 copay per aid, per year	\$690-\$1,890 copay per aid, per year-NO CHANGE	
Flex Spend Card	\$250 per year	\$250 per year–now includes medical service costs	
Home Safety	\$0 for one home safety visit per year \$0 for three home safety products per year;	\$0 for one home safety visit per year; Home safety products not covered—no coverage for products	

PPO Salute-H5533-012

Here's the product value story and target audience for this plan.

Value story

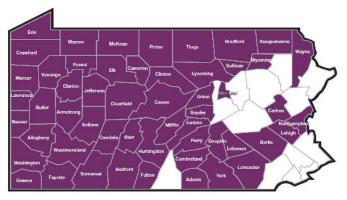
- This plan was designed by retired military for retired military veterans. It's best for veterans with over 20 years of service who have TRICARE For Life (TFL).
 - \$0 monthly premium and \$75 back in your monthly Social Security check.
 - Does not offer Part D prescription drug coverage—TRICARE For Life and VA benefits offer credible drug prescription drug coverage.
 - o You keep your TRICARE For Life plan.
- Rich extra benefits. Unlike Original Medicare, this plan offers important extra benefits, so you do not have to pay premium for additional coverage.
 - O Dental, vision, hearing, free gym memberships, personal counseling, caregiver support, and more.
 - The UPMC for Life Flex Spend Card gives you \$600 to spend on OTC products and pay for medical service costs, dental care, vision care, and hearing aids.
- Doctor access.
 - This PPO plan gives you access to providers in- and out-ofnetwork. You can use any doctor that accepts Medicare in the U.S.
 - 24/7 worldwide emergency medical assistance when you travel
 100 miles or more away from home.

Who should buy this plan?

- Retired military veterans
 - 20 years of service and retired from U.S.
 Armed Forces
 - Eligible for Tricare For Life
- Veterans with VA benefits can sign up for this plan. especially if they use the VA for care.

PPO Salute-H5533-012

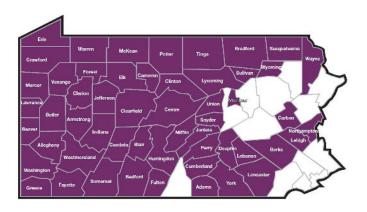
Service Area: Adams, Allegheny, Armstrong, Beaver, Bedford, Berks, Blair, Bradford, Butler, Cambria, Cameron, Carbon, Centre, Clarion, Clearfield, Clinton, Crawford, Cumberland, Dauphin, Elk, Erie, Fayette, Forest, Fulton, Greene, Huntingdon, Indiana, Jefferson, Juniata, Lancaster, Lawrence, Lebanon, Lehigh, Lycoming, McKean, Mercer, Mifflin, Montour, Northampton, Perry, Potter, Snyder, Somerset, Sullivan, Susquehanna, Tioga, Union, Venango, Warren, Washington, Wayne, Westmoreland, Wyoming, and York counties



Plan Highlights	UPMC <i>for Life</i> PPO Salute Pays	TRICARE For Life Pays	Member Pays (after TRICARE and UPMC <i>for Life</i> pay)
Plan Premium		\$0 per month	
Part B Premium Reduction		\$75 per month–that's \$15 more!	
Deductible	\$233	3 (Medicare-defined Part B deductib	le)
Maximum Out-of-Pocket	\$5,500 IN/	\$9,950 OON-\$1,000 more combined	d IN/OON
Inpatient Hospital	Days 1-60: 100% after you meet your \$1,556 deductible each benefit period Days 61-90: All but \$389 per day each benefit period Days 91-150: All but \$778 per day each benefit period 151+ Days: Nothing	Days 1-60: Your \$1,556 deductible Days 61-90: \$389 per day Days 91-150: \$778 per day 151+ Days: IN: Agreed-upon charges minus your share for facility and professional charges, if applicable OUT: TRICARE-allowable amount minus your share for facility and professional charges	Days 1-60: \$0 per day Days 61-90: \$0 per day Days 91-150: \$0 per day 151+ Days: IN: \$250 per day or 25% of total agreed upon facility charges, whichever is less, plus 20% for separately billed agreed-upon professional charges OUT: \$1,053 per day or 25% billed charges for facility services, whichever is less, plus 25% of the TRICARE- allowable amount for separately billed professional charges
PCP/Specialist (in-office and telehealth)	80% of the cost per visit IN/OON	20% of the cost per visit	\$0 per visit; OON telehealth not covered

PPO Salute-H5533-012

Service Area: Adams, Allegheny, Armstrong, Beaver, Bedford, Berks, Blair, Bradford, Butler, Cambria, Cameron, Carbon, Centre, Clarion, Clearfield, Clinton, Crawford, Cumberland, Dauphin, Elk, Erie, Fayette, Forest, Fulton, Greene, Huntingdon, Indiana, Jefferson, Juniata, Lancaster, Lawrence, Lebanon, Lehigh, Lycoming, McKean, Mercer, Mifflin, Montour, Northampton, Perry, Potter, Snyder, Somerset, Sullivan, Susquehanna, Tioga, Union, Venango, Warren, Washington, Wayne, Westmoreland, Wyoming, and York counties



Plan Highlights	UPMC <i>for Life</i> PPO Salute Pays	TRICARE For Life Pays	Member Pays (after TRICARE and UPMC <i>for Life</i> pay)
Lab Services	\$0 copay per day per facility IN/OON	Nothing	\$0 per day per facility
Outpatient Surgery	80% of the cost per day IN/OON	20% of the cost per day	\$0 per service
Ambulance	80% of the cost per day IN/OON Treat no transport: \$0 copay	20% of the cost per day	\$0 per day
Dental Allowance	UPMC for Life extra benefit: \$5,000/50% coinsurance IN/OON–that's \$2,000 more!		
Vision Allowance	UPMC for Life extra benefit: \$300 per year IN/OON–NO CHANGE		
Hearing Aids	UPMC for Life extra benefit: \$690-\$1,890 copay per aid, per year-NO CHANGE		
Flex Spend Card	UPMC for Life extra benefit: \$600 per year-that's \$100 more and now includes medical service costs!		
Home Safety	\$0 for one home safety visit per year; Home safety products not covered–NO CHANGE		
Transportation	24 one-way trips per year to the doctor's office, health care facilities, and pharmacies – NEW benefit		

Core growth plans

- These are our most competitive plan options:
 - HMO Premier Rx
 - PPO Premier Rx
 - PPO Rx Choice
 - HMO Rx Choice
 - O HMO Rx
- Many of these plans have our BEST copays for medical care, enhanced extra benefits, competitive copays for Part D prescriptions.
- Our new PPO Rx Choice segment in Allegheny County is priced to sell! It's our most competitive plan <u>EVER</u>!

GOAL:

Give members access to the best quality care and the best value at a price they can afford.

HMO Premier Rx plans

Here's the product value story and target audience for these plans.

Value story

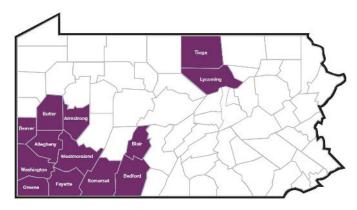
- If you don't go to the doctor often, our HMO Premier Rx plan may be a good fit for you. The Medicare Part B premium is expensive for many and having to pay for a Medicare Advantage plan on top of it can add up. Our \$0 plan provides medical coverage, drug coverage, and additional benefits not covered by Medicare.
- Prescription coverage.
 - Pick up Part D coverage now to avoid paying a Part D penalty later.
 - \$0 copays for Tier 1 and Tier 2 prescriptions at preferred pharmacies, coverage for insulins in the donut hole, and mail-order delivery.
- Extra benefits.
 - O Dental, vision, hearing, free gym memberships, personal counseling, caregiver support, and more.
 - o The UPMC for Life Flex Spend Card gives you an additional allowance to spend on OTC products and pay for medical service costs, dental care, vision care, and hearing aids.
- Doctor access.
 - Access to UPMC and additional community providers across PA and out of state.
 - o Emergency and urgent care anywhere in the U.S.
 - O Use the UPMC *for Life* Travel Concierge program for worry-free trips.

Who should buy this plan?

- Medicare Advantage switcher
- Medicare Supp switcher
- Age-ins
- Original Medicare (FFS)
- Cost conscious
- Good health—not expecting to use many medical services
- Take few prescriptions

HMO Premier Rx-H3907-046

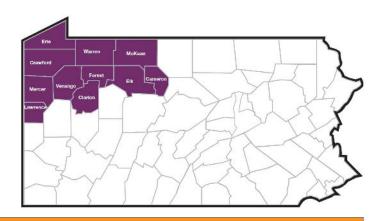
Service Area: Allegheny, Armstrong, Beaver, Bedford, Blair, Butler, Fayette, Greene, Lycoming, Somerset, Tioga, Washington, and Westmoreland counties



Plan Highlights	2023	2024
Plan Premium	\$0 per month	\$0 per month–NO CHANGE
Part B Premium Reduction	Not applicable	Not applicable–NO CHANGE
Deductible	\$0	\$0–NO CHANGE
Maximum Out-of-Pocket	\$5,500	\$5,500–NO CHANGE
Inpatient Hospital	\$165 per day, days 1-5 \$0 per day, days 6 and beyond	\$165 per day, days 1-5-NO CHANGE \$0 per day, days 6 and beyond
PCP/Specialist (in-office and telehealth)	PCP: \$0/ Specialist: \$30	PCP: \$0/ Specialist: \$30–NO CHANGE
Chiropractic Services	Tier 1: \$18 per visit; Tier 2: \$20 per visit	\$18 per visit–removed tiering
Outpatient Surgery	\$325	\$325–NO CHANGE
Diabetes Test Strips	20% coinsurance	\$0 copay for LifeScan Diabetes Test Strips—change to copay; All other brands 20% coinsurance with prior auth
Dental Allowance	\$2,000/50% coinsurance	\$4,000/50% coinsurance—that's \$2,000 more!
Vision Allowance	\$200 per year	\$200 per year–NO CHANGE
Hearing Aids	\$690-\$1,890 copay per aid, per year	\$690-\$1,890 copay per aid, per year–NO CHANGE
Flex Spend Card	\$500 per year	\$500 per year–now includes medical service costs!
Home Safety	\$0 for one home safety visit per year; Home safety products not covered	\$0 for one home safety visit per year; \$0 for six home safety products per year— NEW!

HMO Premier Rx-H3907-050

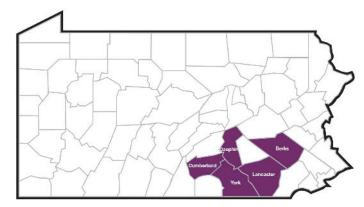
Service Area: Cameron, Clarion, Crawford, Elk, Erie, Forest, Lawrence, McKean, Mercer, Venango, and Warren counties



Plan Highlights	2023	2024
Plan Premium	\$0 per month	\$0 per month–NO CHANGE
Part B Premium Reduction	Not applicable	\$2 per month– NEW!
Deductible	\$0	\$0-NO CHANGE
Maximum Out-of-Pocket	\$4,900	\$4,900–NO CHANGE
Inpatient Hospital	\$270 per stay	\$270 per stay–NO CHANGE
PCP/Specialist (in-office and telehealth)	PCP: \$0/ Specialist: \$30	PCP: \$0/ Specialist: \$20-that's \$10 less!
Chiropractic Services	Tier 1: \$18 per visit; Tier 2: \$20 per visit	\$18 per visit–removed tiering
Outpatient Surgery	\$350	\$270–that's \$80 less!
Diabetes Test Strips	20% coinsurance	\$0 copay for LifeScan Diabetes Test Strips—change to copay; All other brands 20% coinsurance with prior auth
Dental Allowance	\$2,000/50% coinsurance	\$4,000/50% coinsurance—that's \$2,000 more!
Vision Allowance	\$200 per year	\$200 per year–NO CHANGE
Hearing Aids	\$690-\$1,890 copay per aid, per year	\$690-\$1,890 copay per aid, per year—NO CHANGE
Flex Spend Card	\$500 per year	\$500 per year–now includes medical service costs!
Home Safety	\$0 for one home safety visit per year; Home safety products not covered	\$0 for one home safety visit per year; \$0 for six home safety products per year— NEW!

HMO Premier Rx-H3907-052

Service Area: Berks, Cumberland, Dauphin, Lancaster, and York counties



Plan Highlights	2023	2024
Plan Premium	\$0 per month	\$0 per month–NO CHANGE
Part B Premium Reduction	Not applicable	Not applicable—NO CHANGE
Deductible	\$0	\$0–NO CHANGE
Maximum Out-of-Pocket	\$6,700	\$6,700–NO CHANGE
Inpatient Hospital	\$170 per day, days 1-5 \$0 per day, days 6 and beyond	\$170 per day, days 1-5–NO CHANGE \$0 per day, days 6 and beyond
PCP/Specialist (in-office and telehealth)	PCP: \$0/ Specialist: \$30	PCP: \$0/ Specialist: \$30–NO CHANGE
Chiropractic Services	Tier 1: \$18 per visit; Tier 2: \$20 per visit	\$15 per visit–removed tiering and \$3 lower copay
Outpatient Surgery	\$325	\$325–NO CHANGE
Diabetes Test Strips	20% coinsurance	\$0 copay for LifeScan Diabetes Test Strips—change to copay; All other brands 20% coinsurance with prior auth
Dental Allowance	\$2,000/50% coinsurance	\$4,000/50% coinsurance—that's \$2,000 more!
Vision Allowance	\$200 per year	\$200 per year–NO CHANGE
Hearing Aids	\$690-\$1,890 copay per aid, per year	\$690-\$1,890 copay per aid, per year–NO CHANGE
Flex Spend Card	\$500 per year	\$500 per year–now includes medical service costs!
Home Safety	\$0 for one home safety visit per year; Home safety products not covered	\$0 for one home safety visit per year; \$0 for six home safety products per year- NEW!

PPO Premier Rx plans

Here's the product value story and target audience for these plans.

Value story

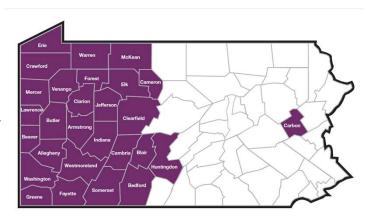
- If you want access to more doctors with a \$0 premium and low costs for care, check out our PPO Premier Rx plan.
 - o You can see any doctor who accepts Medicare in the U.S.
 - Your out-of-pocket costs are reasonable even when you use doctors and hospitals out-of-network.
 - o The PPO Premier Rx plan in central PA gives you \$53 back in your monthly Social Security check and many services have the same cost sharing in- or out-of-network.
- Prescription coverage.
 - Pick up Part D coverage now to avoid paying a Part D penalty later.
 - o \$0 copays for Tier 1 and Tier 2 prescriptions at preferred pharmacies, coverage for insulins in the donut hole, and mail-order delivery.
- Extra benefits.
 - Dental, vision, hearing, free gym memberships, personal counseling, caregiver support, and more.
 - o The UPMC for Life Flex Spend Card gives you an additional allowance to spend on OTC products and pay for medical service costs, dental care, vision care, and hearing aids.

Who should buy this plan?

- Medicare Advantage switcher
- Medicare Supp switcher
- Age-ins
- Original Medicare (FFS)
- Cost conscious
- Good health—not expecting to use many medical services
- Take few prescriptions
- Want access to all doctors, or doctor is out-of-network

PPO Premier Rx-H5533-013

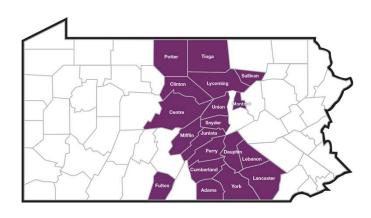
Service Area: Allegheny, Armstrong, Beaver, Bedford, Blair, Butler, Cambria, Cameron, Carbon, Clarion, Clearfield, Crawford, Elk, Erie, Fayette, Forest, Greene, Huntingdon, Indiana, Jefferson, Lawrence, McKean, Mercer, Somerset, Venango, Warren, Washington, and Westmoreland counties



Plan Highlights	2023	2024
Plan Premium	\$0 per month	\$0 per month–NO CHANGE
Part B Premium Reduction	Not applicable	\$2 per month –NEW!
Deductible	\$0	\$0-NO CHANGE
Maximum Out-of-Pocket	\$6,500 IN/\$10,000 OON	\$6,500 IN/\$10,000 OON-NO CHANGE
Inpatient Hospital	\$165 IN/\$300 OON per day, days 1-5 \$0 per day, days 6 and beyond	\$165 IN/\$300 OON per day, days 1-5-NO CHANGE \$0 per day, days 6 and beyond
PCP/Specialist (in-office and telehealth)	PCP: \$0 IN/OON; Specialist: \$35 IN/\$45 OON	PCP: \$0 IN/OON (OON telehealth not covered)—NO CHANGE; Specialist: \$35 IN/\$45 OON (OON telehealth not covered)—NO CHANGE
Chiropractic Services	Tier 1: \$18 IN/\$45 OON per visit; Tier 2: \$20 IN/\$45 OON per visit	\$15 IN/\$45 OON per visit—removed tiering and \$3 lower IN
Outpatient Surgery	\$295 IN/\$375 OON	\$295 IN/\$375 OON-NO CHANGE
Diabetes Test Strips	20% IN/30% OON coinsurance	\$0 copay for LifeScan Diabetes Test Strips—change to copay; All other brands 20% coinsurance with prior auth
Dental Allowance	\$2,000/50% coinsurance IN/OON	\$4,000/50% coinsurance IN/OON-that's \$2,000 more!
Vision Allowance	\$150 per year IN/OON	\$225 per year IN/OON–that's \$75 more!
Hearing Aids	\$690-\$1,890 copay per aid, per year	\$690-\$1,890 copay per aid, per year-NO CHANGE
Flex Spend Card	\$300 per year	\$300 per year–now includes medical service costs!
Home Safety	\$0 for one home safety visit per year: Home safety products not covered	\$0 for one home safety visit per year; \$0 for six home safety products per year— NEW!

PPO Premier Rx-H5533-011

Service Area: Adams, Centre, Clinton, Cumberland, Dauphin, Fulton, Juniata, Lancaster, Lebanon, Lycoming, Mifflin, Montour, Perry, Potter, Snyder, Sullivan, Tioga, Union, and York counties



Plan Highlights	2023	2024
Plan Premium	\$0 per month	\$0 per month–NO CHANGE
Part B Premium Reduction	\$50 per month	\$53 per month–that's \$3 more!
Deductible	\$0	\$0–NO CHANGE
Maximum Out-of-Pocket	\$5,900 IN/\$8,950 OON	\$5,900 IN/\$8,950 OON-NO CHANGE
Inpatient Hospital	\$350 IN per stay/\$250 per day (days 1-5) OON; \$0 per day, days 6 and beyond	\$350 IN per stay/\$250 per day (days 1-5) OON-NO CHANGE \$0 per day, days 6 and beyond
PCP/Specialist (in-office and telehealth)	PCP: \$0 IN/OON; Specialist: \$30 IN/OON	PCP: \$0 IN/OON (OON telehealth not covered)—NO CHANGE; Specialist: \$25 IN/OON (OON telehealth not covered)—that's \$5 less!
Chiropractic Services	Tier 1: \$18 IN/\$30 OON per visit; Tier 2: \$20 IN/\$30 OON per visit	\$18 IN/\$30 OON per visit—removed tiering
Outpatient Surgery	\$265 IN/\$300 OON	\$265 IN/\$300 OON-NO CHANGE
Diabetes Test Strips	20% IN/30% OON coinsurance	\$0 copay for LifeScan Diabetes Test Strips—change to copay; All other brands 20% coinsurance with prior auth
Dental Allowance	\$2,500/50% coinsurance IN/OON	\$4,500/50% coinsurance IN/OON-that's \$2,000 more!
Vision Allowance	\$200 per year IN/OON	\$225 per year IN/OON–that's \$25 more!
Hearing Aids	\$690-\$1,890 copay per aid, per year	\$690-\$1,890 copay per aid, per year–NO CHANGE
Flex Spend Card	\$500 per year	\$500 per year–now includes medical service costs!
Home Safety	\$0 for one home safety visit per year; Home safety products not covered	\$0 for one home safety visit per year; \$0 for six home safety products per year- NEW!

PPO Rx Choice plans

Here's the product value story and target audience for these plans.

Value story

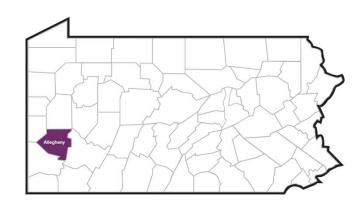
- If you want access to more doctors with an affordable premium and low costs for care, check out our PPO Rx Choice plan.
 - o You can see any doctor who accepts Medicare in the U.S.
 - Your out-of-pocket costs are reasonable even when you use doctors and hospitals out-of-network.
 - The NEW Allegheny PPO Rx Choice plan is our <u>BEST plan</u> <u>EVER</u>—it offers a low \$19 premium with low cost sharing for services you use most. Specialist copays are only \$10.
- Prescription coverage.
 - o You get our richest prescription drug benefits.
 - \$0 copays for Tier 1 and Tier 2 prescriptions at preferred pharmacies, low copays for diabetes medications, coverage for insulins in the donut hole, and mail-order delivery.
- Extra benefits.
 - Dental, vision, hearing, free gym memberships, personal counseling, caregiver support, and more.
 - o The UPMC for Life Flex Spend Card gives you an additional allowance to spend on OTC products and pay for medical service costs, dental care, vision care, and hearing aids.

Who should buy this plan?

- Medicare Advantage switcher
- Medicare Supp switcher
- Age-ins
- Original Medicare (FFS)
- Mid-premium, looking for low cost sharing
- Good health—not expecting to use many medical services
- Take few prescriptions
- Want access to all doctors, or doctor is out-of-network

PPO Rx Choice— H5533-015-001

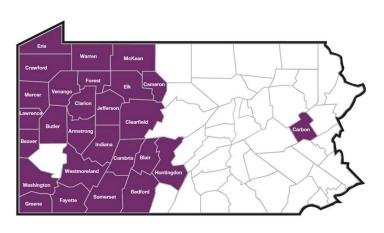
Service Area: Allegheny County



Plan Highlights	2023 (prev. H5533-014)	2024
Plan Premium	\$23 per month	\$19 per month–that's \$4 lower!
Part B Premium Reduction	Not applicable	\$2 per month -NEW!
Deductible	\$0	\$0-NO CHANGE
Maximum Out-of-Pocket	\$5,500 IN/\$8,950 OON	\$5,500 IN/\$9,550 OON-\$600 higher OON
Inpatient Hospital	\$295 IN/\$400 OON per stay	\$225 IN/\$325 OON per stay-\$70 lower IN/\$75 lower OON
PCP/Specialist (in-office and telehealth)	PCP: \$0 IN/OON; Specialist: \$30 IN/\$40 OON	PCP: \$0 IN/OON (OON telehealth not covered)—NO CHANGE; Specialist: \$10 IN/\$20 OON (OON telehealth not covered)—\$20 less IN/OON
Chiropractic Services	Tier 1: \$18 IN/\$40 OON per visit; Tier 2: \$20 IN/\$40 OON per visit	\$15 IN/\$20 OON per visit—removed tiering and lowered copays
Outpatient Surgery	\$225 IN/\$350 OON	\$175 IN/\$275 OON-\$50 lower IN/\$75 lower OON
Diabetes Test Strips	20% IN/30% OON coinsurance	\$0 copay for LifeScan Diabetes Test Strips—change to copay; All other brands 20% coinsurance with prior auth
Dental Allowance	\$3,000/50% coinsurance IN/OON	\$6,000/50% coinsurance IN/OON-that's \$3,000 more!
Vision Allowance	\$175 IN/OON per year	\$300 per year IN/OON-that's \$125 more!
Hearing Aids	\$690-\$1,890 copay per aid, per year	\$690-\$1,890 copay per aid, per year-NO CHANGE
Flex Spend Card	\$300 per year	\$750 per year-\$450 more and now includes medical service costs!
Home Safety		\$0 for one home safety visit per year; \$0 for six home safety products per year— NEW!

PPO Rx Choice— H5533-015-002

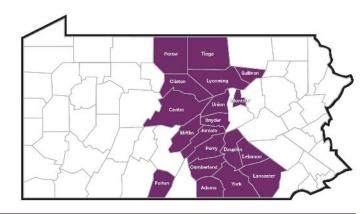
Service Area: Armstrong, Beaver, Bedford, Blair, Butler, Cambria, Cameron, Carbon, Clarion, Clearfield, Crawford, Elk, Erie, Fayette, Forest, Greene, Huntingdon, Indiana, Jefferson, Lawrence, McKean, Mercer, Somerset, Venango, Warren, Washington, and Westmoreland counties



Plan Highlights	2023 (prev. H5533-014)	2024
Plan Premium	\$23 per month	\$23 per month–NO CHANGE
Part B Premium Reduction	Not applicable	\$1 per month—NEW!
Deductible	\$0	\$0–NO CHANGE
Maximum Out-of-Pocket	\$5,500 IN/\$8,950 OON	\$5,500 IN/\$8,950 OON–NO CHANGE
Inpatient Hospital	\$295 IN/\$400 OON per stay	\$295 IN/\$400 OON per stay–NO CHANGE
PCP/Specialist (in-office and telehealth)	PCP: \$0 IN/OON; Specialist: \$30 IN/\$40 OON	PCP: \$0 IN/OON (OON telehealth not covered)—NO CHANGE; Specialist: \$20 IN/\$40 OON (OON telehealth not covered)—\$10 less IN
Chiropractic Services	Tier 1: \$18 IN/\$40 OON per visit; Tier 2: \$20 IN/\$40 OON per visit	\$18 IN/\$40 OON per visit–removed tiering
Outpatient Surgery	\$225 IN/\$350 OON	\$225 IN/\$350 OON–NO CHANGE
Diabetes Test Strips	20% IN/30% OON coinsurance	\$0 copay for LifeScan Diabetes Test Strips—change to copay; All other brands 20% coinsurance with prior auth
Dental Allowance	\$3,000/50% coinsurance IN/OON	\$5,000/50% coinsurance IN/OON—that's \$2,000 more!
Vision Allowance	\$175 IN/OON per year	\$300 per year IN/OON-that's \$125 more!
Hearing Aids	\$690-\$1,890 copay per aid, per year	\$690-\$1,890 copay per aid, per year–NO CHANGE
Flex Spend Card	\$300 per year	\$300 per year–now includes medical service costs!
Home Safety	\$0 for one home safety visit per year; Home safety products not covered	\$0 for one home safety visit per year; \$0 for six home safety products per year— NEW!

PPO Rx Choice-H5533-009

Service Area: Adams, Centre, Clinton, Cumberland, Dauphin, Fulton, Juniata, Lancaster, Lebanon, Lycoming, Mifflin, Montour, Perry, Potter, Snyder, Sullivan, Tioga, Union, and York counties



Plan Highlights	2023	2024
Plan Premium	\$23 per month	\$23 per month–NO CHANGE
Part B Premium Reduction	Not applicable	\$2 per month -NEW!
Deductible	\$0	\$0-NO CHANGE
Maximum Out-of-Pocket	\$4,900 IN/\$8,950 OON	\$4,900 IN/\$8,950 OON-NO CHANGE
Inpatient Hospital	\$300 IN/\$400 OON per stay	\$300 IN/\$400 OON per stay-NO CHANGE
PCP/Specialist (in-office and telehealth)	PCP: \$0 IN/OON; Specialist: \$30 IN/OON	PCP: \$0 IN/OON (OON telehealth not covered)—NO CHANGE; Specialist: \$25 IN/OON (OON telehealth not covered)—\$5 less IN
Chiropractic Services	Tier 1: \$18 IN/\$30 OON per visit; Tier 2: \$20 IN/\$30 OON per visit	\$18 IN/\$30 OON per visit-removed tiering
Outpatient Surgery	\$200 IN/\$300 OON	\$200 IN/\$300 OON-NO CHANGE
Diabetes Test Strips	20% IN/OON coinsurance	\$0 copay for LifeScan Diabetes Test Strips—change to copay; All other brands 20% coinsurance with prior auth
Dental Allowance	\$3,000/50% coinsurance IN/OON	\$5,000/50% coinsurance IN/OON-that's \$2,000 more!
Vision Allowance	\$300 IN/OON per year	\$300 per year IN/OON–NO CHANGE
Hearing Aids	\$690-\$1,890 copay per aid, per year	\$690-\$1,890 copay per aid, per year-NO CHANGE
Flex Spend Card	\$500 per year	\$500 per year–now includes medical service costs!
Home Safety	\$0 for one home safety visit per year; Home safety products not covered	\$0 for one home safety visit per year; \$0 for six home safety products per year— NEW!

HMO Rx Choice plans

Here's the product value story and target audience for these plans.

Please note: All HMO Rx Choice segments have the same benefits for 2024.

Value story

- Our HMO Rx Choice is a well-rounded plan for medical copays, prescription drug costs, added benefits, and more. This is a great plan for someone who is in good health or someone who uses a lot of medical services.
- Prescription coverage.
 - o You get our richest prescription drug benefits.
 - This plan has \$0 copays for Tier 1 and Tier 2 prescriptions, low copays for diabetes medications, coverage for insulins in the donut hole, and a mail-order delivery service.
- Extra benefits.
 - O Dental, vision, hearing, free gym memberships, home safety, personal counseling, caregiver support, and more.
 - o The UPMC for Life Flex Spend Card gives you \$500 to spend on OTC products and pay for medical service costs, dental care, vision care, and hearing aids.
- Doctor access.
 - O Access to UPMC and additional community providers across PA and out of state.
 - o Emergency and urgent care anywhere in the U.S.
 - Use the UPMC for Life Travel Concierge program for worry-free trips.

Who should buy this plan?

- Medicare Advantage switcher
- Medicare Supp switcher
- Age-ins
- Original Medicare (FFS)
- Mid-premium, looking for low cost sharing
- Good health—not expecting to use many medical services
- Take few prescriptions
- Members who have higher use of medical care may want to move to the HMO Rx plan

HMO Rx Choice—All plans H3907-057-001, 002, 003, 004, 005

Service Area: Adams, Allegheny, Armstrong, Beaver, Bedford, Blair, Bradford, Butler, Cambria, Cameron, Carbon, Centre, Clarion, Clearfield, Clinton, Crawford, Cumberland, Dauphin, Elk, Erie, Fayette, Forest, Fulton, Greene, Huntingdon, Indiana, Jefferson, Juniata, Lancaster, Lawrence, Lebanon, Lehigh, Lycoming, McKean, Mercer, Mifflin, Montour, Northampton, Perry, Potter, Snyder, Somerset, Sullivan, Susquehanna, Tioga, Union, Venango, Warren, Washington, Wayne, Westmoreland, Wyoming, York, Harrison (OH), and Jefferson (OH) counties



Plan Highlights	2023 (prev. H3907-049)	2024
Plan Premium	\$36 per month	\$36 per month–NO CHANGE
Part B Premium Reduction	Not applicable	Not applicable–NO CHANGE
Deductible	\$0	\$0-NO CHANGE
Maximum Out-of-Pocket	\$4,500	\$4,500–NO CHANGE
Inpatient Hospital	\$395 per stay	\$395 per stay–NO CHANGE
PCP/Specialist (in-office and telehealth)	PCP: \$0/ Specialist: \$35	PCP: \$0/ Specialist: \$35–NO CHANGE
Chiropractic Services	Tier 1: \$18 per visit; Tier 2: \$20 per visit	\$18 per visit–removed tiering
Outpatient Surgery	\$250 per service	\$250 per service–NO CHANGE
Diabetes Test Strips	20% coinsurance	\$0 copay for LifeScan Diabetes Test Strips—change to copay; All other brands 20% coinsurance with prior auth
Dental Allowance	\$3,000/50% coinsurance	\$5,000/50% coinsurance—that's \$2,000 more!
Vision Allowance	\$200 per year	\$200 per year–NO CHANGE
Hearing Aids	\$690-\$1,890 copay per aid, per year	\$690-\$1,890 copay per aid, per year-NO CHANGE
Flex Spend Card	\$500 per year	\$500 per year–now includes medical service costs!
Home Safety	\$0 for one home safety visit per year; \$0 for three products per year	\$0 for one home safety visit per year; \$0 for six home safety products per year—that's three more!

HMO Rx

Here's the product value story and target audience for this plan.

Value story

- Prescription costs are always a concern when looking at Medicare plans.

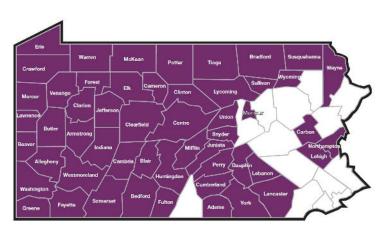
 Often if you have medications that cost a lot of money, you can end up in the Medicare coverage gap (or donut hole). The HMO Rx plan can help with that! With this plan, Tier 1 and Tier 2 prescriptions are covered through the donut hole. You could save up to \$500 per year if you typically hit the donut hole.
- Prescription coverage.
 - o You get our richest prescription drug benefits.
 - \$0 copays for Tier 1 and Tier 2 prescriptions at preferred pharmacies, low copays for diabetes medications, coverage for insulins and Tier 1 and 2 prescriptions in the donut hole, and mail-order delivery.
- Extra benefits.
 - O Dental, vision, hearing, free gym memberships, home safety, personal counseling, caregiver support, and more.
 - o The UPMC *for Life* Flex Spend Card gives you \$1,000 to spend on OTC products and pay for medical service costs, dental care, vision care, and hearing aids.
- Doctor access.
 - Access to UPMC and additional community providers across PA and out of state.
 - o Emergency and urgent care anywhere in the U.S.
 - o The UPMC for Life Travel Concierge program for worry-free trips.

Who should buy this plan?

- Medicare Advantage switcher
- Medicare Supp switcher
- Willing to pay a high premium to have a low MOOP and low cost sharing
- Moderate use of medical services
- Take several prescriptions
- Members who use many medical services should stay in this plan instead of switching down to a lower premium plan
- Has the highest Flex Spend Card amount to help members get the additional care and health care products they need

HMO Rx-H3907-029

Service Area: Adams, Allegheny, Armstrong, Beaver, Bedford, Blair, Bradford, Butler, Cambria, Cameron, Carbon, Centre, Clarion, Clearfield, Clinton, Crawford, Cumberland, Dauphin, Elk, Erie, Fayette, Forest, Fulton, Greene, Huntingdon, Indiana, Jefferson, Juniata, Lancaster, Lawrence, Lebanon, Lehigh, Lycoming, McKean, Mercer, Mifflin, Montour, Northampton, Perry, Potter, Snyder, Somerset, Sullivan, Susquehanna, Tioga, Union, Venango, Warren, Washington, Wayne, Westmoreland, Wyoming, York, Harrison (OH), and Jefferson (OH) counties



Plan Highlights	2023	2024
Plan Premium	\$81 per month	\$81 per month–NO CHANGE
Part B Premium Reduction	Not applicable	\$2 per month -NEW!
Deductible	\$0	\$0-NO CHANGE
Maximum Out-of-Pocket	\$5,500	\$4,500-that's \$1,000 less!
Inpatient Hospital	\$295 per stay	\$295 per stay–NO CHANGE
PCP/Specialist (in-office and telehealth)	PCP: \$0/ Specialist: \$25	PCP: \$0/ Specialist: \$25–NO CHANGE
Chiropractic Services	Tier 1: \$18 per visit; Tier 2: \$20 per visit	\$18 per visit–removed tiering
Outpatient Surgery	\$200 per service	\$200 per service–NO CHANGE
Diabetes Test Strips	20% coinsurance	\$0 copay for LifeScan Diabetes Test Strips—change to copay; All other brands 20% coinsurance with prior auth
Dental Allowance	\$3,000/50% coinsurance	\$5,000/50% coinsurance—that's \$2,000 more!
Vision Allowance	\$200 per year	\$225 per year—that's \$25 more!
Hearing Aids	\$690-\$1,890 copay per aid, per year	\$690-\$1,890 copay per aid, per year–NO CHANGE
Flex Spend Card	\$1,000 per year	\$1,000 per year—now includes medical service costs!
Home Safety	\$0 for one home safety visit per year; \$0 for three products per year	\$0 for one home safety visit per year; \$0 for six home safety products per year—that's three more!

Legacy plans

- These plans include:
 - HMO Deductible Rx
 - PPO High Deductible Rx
 - PPO Rx Enhanced
 - HMO Rx Enhanced
- These plans no longer experience much new sales growth.
- Many of these plans do not have new and improved benefits and continue to have the highest maximum out-of-pocket (MOOP) available.

GOAL:

These plans continue to have strong membership that we'd like to keep. Retain current members.

HMO Deductible Rx

Here's the product value story and target audience for this plan.

Value story

• Durable medical equipment can be so expensive, and most plans cover it with a 20% coinsurance. However, with our HMO Deductible Rx plan, for a low-cost premium, we will cover 100% of your DME costs. Are you anticipating any major services, such as surgery and physical therapy? Our plan covers an unlimited amount of physical therapy once the deductible has been met.

Prescription coverage.

- You get our richest prescription drug benefits.
- \$0 copays for Tier 1 and Tier 2 prescriptions at preferred pharmacies, low copays for diabetes medications, coverage for insulins in the donut hole, and mail-order delivery.

Extra benefits.

- Dental, vision, hearing, free gym memberships, home safety, personal counseling, caregiver support, and more.
- The UPMC for Life Flex Spend Card gives you an additional allowance to spend on OTC products and pay for medical service costs, dental care, vision care, and hearing aids.

Doctor access.

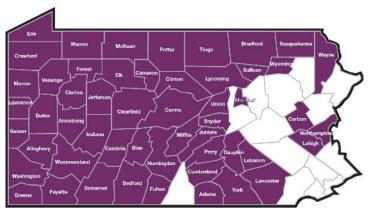
- Access to UPMC and additional community providers across PA and out of state.
- o Emergency and urgent care anywhere in the U.S.
- o Use the UPMC *for Life* Travel Concierge program for worry-free trips.

Who should buy this plan?

 Most Medicare shoppers are not looking for a plan with a deductible.

HMO Deductible Rx-H3907-037

Service Area: Adams, Allegheny, Armstrong, Beaver, Bedford, Blair, Bradford, Butler, Cambria, Cameron, Carbon, Centre, Clarion, Clearfield, Clinton, Crawford, Cumberland, Dauphin, Elk, Erie, Fayette, Forest, Fulton, Greene, Huntingdon, Indiana, Jefferson, Juniata, Lancaster, Lawrence, Lebanon, Lehigh, Lycoming, McKean, Mercer, Mifflin, Montour, Northampton, Perry, Potter, Snyder, Somerset, Sullivan, Susquehanna, Tioga, Union, Venango, Warren, Washington, Wayne, Westmoreland, Wyoming, York, Harrison (OH), and Jefferson (OH) counties



Plan Highlights	2023	2024
Plan Premium	\$22 per month	\$20.80–that's \$1.20 less
Part B Premium Reduction	Not applicable	Not applicable—NO CHANGE
Deductible	\$750	\$750–NO CHANGE
Maximum Out-of-Pocket	\$6,000	\$6,000–NO CHANGE
Inpatient Hospital	\$300 per stay after deductible	\$300 per stay after deductible—NO CHANGE
PCP/Specialist (in-office and telehealth)	PCP: \$0/ Specialist: \$35 (deductible does not apply)	PCP: \$0/ Specialist: \$35–NO CHANGE (deductible does not apply)
Chiropractic Services	Tier 1: \$18 per visit; Tier 2: \$20 per visit (deductible does not apply)	\$18 per visit–removed tiering (deductible does not apply)
Outpatient Surgery	\$125 after deductible–NO CHANGE	\$125 after deductible—NO CHANGE
Diabetes Test Strips	20% coinsurance	\$0 copay for LifeScan Diabetes Test Strips—change to copay; All other brands 20% coinsurance with prior auth
Dental Allowance	\$1,250/50% coinsurance	\$2,250/50% coinsurance—that's \$1,000 more!
Vision Allowance	\$100 per year	\$150 per year–that's \$50 more!
Hearing Aids	\$690-\$1,890 copay per aid, per year	\$690-\$1,890 copay per aid, per year–NO CHANGE
Flex Spend Card	\$500 per year	\$500 per year–now includes medical service costs!
Home Safety	\$0 for one home safety visit per year; \$0 for three products per year	\$0 for one home safety visit per year; \$0 for six home safety products per year—that's three more!

PPO High Deductible Rx

Here's the product value story and target audience for this plan.

Value story

- Are you seeking a low-cost premium that allows you to use in- and out-of-network doctors? For \$29.50 per month, you can get just that! It sounds like you are in good health and seeking that "just in case" coverage? Our PPO High Deductible Rx plan will give you both medical and drug coverage, in- or out-of-network.
- Prescription coverage.
 - o You get our richest prescription drug benefits.
 - \$0 copays for Tier 1 and Tier 2 prescriptions at preferred pharmacies, low copays for diabetes medications, coverage for insulins in the donut hole, and mail-order delivery.
- Extra benefits.
 - o Dental, vision, hearing, free gym memberships, home safety, personal counseling, caregiver support, and more.
- Doctor access.
 - o Access to doctors and hospitals in- and out-of-network.
 - o You can see any provider that accepts Medicare in the U.S.
 - o Emergency and urgent care anywhere in the U.S.
 - o 24/7 worldwide emergency medical assistance when you travel 100 miles or more away from home.

Who should buy this plan?

• Most Medicare shoppers are not looking for a plan with a deductible.

PPO High Deductible Rx-H5533-003

Service Area: Allegheny, Armstrong, Beaver, Bedford, Blair, Butler, Cambria, Cameron, Carbon, Clarion, Clearfield, Crawford, Elk, Erie, Fayette, Forest, Greene, Huntingdon, Indiana, Jefferson, Lawrence, McKean, Mercer, Somerset, Venango, Warren, Washington, and Westmoreland counties



Plan Highlights	2023	2024
Plan Premium	\$33 per month	\$29.50 per month–that's \$3.50 less
Part B Premium Reduction	Not applicable	Not applicable–NO CHANGE
Deductible	\$1,250 IN/OON	\$1,250 IN/OON–NO CHANGE
Maximum Out-of-Pocket	\$7,550 IN/\$11,300 OON per year	\$7,550 IN/\$11,300 OON per year–NO CHANGE
Inpatient Hospital	\$300 IN/30% coinsurance OON per stay after deductible	\$300 IN/30% coinsurance OON per stay after deductible—NO CHANGE
PCP/Specialist (in-office and telehealth)	PCP: \$0 IN/\$40 OON after deductible Specialist: \$50 IN/\$60 OON after deductible	PCP: \$0 IN (deductible does not apply)/ \$40 OON after deductible; Specialist: \$50 IN (deductible does not apply)/ \$60 OON after deductible (OON telehealth not covered)
Chiropractic Services	Tier 1: \$18 IN/30% OON per visit; Tier 2: \$20 IN/30% OON per visit after deductible	\$15 IN/30% OON per visit after deductible–removed tiering and \$3 lower IN
Outpatient Surgery	\$175 IN/30% coinsurance OON after deductible	\$175 IN/30% coinsurance OON after deductible—NO CHANGE
Diabetes Test Strips	20% IN/50% coinsurance OON after deductible	\$0 copay for LifeScan test strips—change to copay; All other brands 20% with prior auth IN; 50% OON after deductible
Dental Allowance	\$175 IN/OON (standard allowance)	\$250 IN/OON (standard allowance)—that's \$75 more!
Vision Allowance	\$100 IN/OON per year	\$100 IN/OON per year–NO CHANGE
Hearing Aids	\$690-\$1,890 copay per aid, per year	\$690-\$1,890 copay per aid, per year–NO CHANGE
Flex Spend Card	Not covered	Not covered
Home Safety	\$0 for one home safety visit per year; \$0 for three home safety products	\$0 for one home safety visit per year; \$0 for six home safety products per year—that's three more!

PPO Rx Enhanced plans

Here's the product value story and target audience for these plans.

Value story

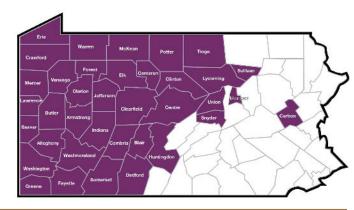
- You get medical and prescription drug coverage in one easy-to-use plan.
- Prescription coverage.
 - o You get our richest prescription drug benefits.
 - \$0 copays for Tier 1 and Tier 2 prescriptions at preferred pharmacies, low copays for diabetes medications, coverage for insulins in the donut hole, and mail-order delivery.
- Extra benefits.
 - Dental, vision, hearing, free gym memberships, home safety, personal counseling, caregiver support, and more.
- Doctor access.
 - Access to doctors and hospitals in- and out-of-network.
 - o You can see any provider that accepts Medicare in the U.S.
 - o Emergency and urgent care anywhere in the U.S.
 - o 24/7 worldwide emergency medical assistance when you travel 100 miles or more away from home.

Who should buy this plan?

 Most Medicare shoppers are not looking for a high-premium plan with a deductible.

PPO Rx Enhanced-H5533-005

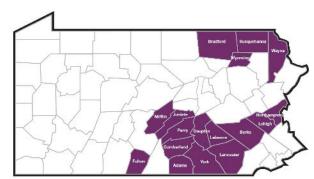
Service Area: Allegheny, Armstrong, Beaver, Bedford, Blair, Butler, Cambria, Cameron, Carbon, Clarion, Clearfield, Crawford, Elk, Erie, Fayette, Forest, Greene, Huntingdon, Indiana, Jefferson, Lawrence, McKean, Mercer, Somerset, Venango, Warren, Washington, and Westmoreland counties



Plan Highlights	2023	2024
Plan Premium	\$134 per month	\$134 per month–NO CHANGE
Part B Premium Reduction	Not applicable	Not applicable–NO CHANGE
Deductible	\$500 OON	\$500 OON-NO CHANGE
Maximum Out-of-Pocket	\$7,550 IN/\$11,300 OON per year	\$7,550 IN/\$11,300 OON per year–NO CHANGE
Inpatient Hospital	\$250 IN per stay/30% coinsurance OON after the deducible	\$250 IN per stay/30% coinsurance OON after the deducible–NO CHANGE
PCP/Specialist (in-office and telehealth)	PCP: \$0 IN/\$30 OON after deductible Specialist: \$40 IN/\$50 OON after deductible	PCP: \$0 IN/\$30 OON after deductible—NO CHANGE Specialist: \$40 IN/\$50 OON after deductible—NO CHANGE (OON telehealth not covered
Chiropractic Services	Tier 1: \$18 IN/30% OON per visit; Tier 2: \$20 IN/30% OON per visit after deductible	\$15 IN/30% OON per visit after deductible—removed tiering and \$3 lower IN
Outpatient Surgery	\$150 IN/30% coinsurance OON after deductible	\$150 IN/30% coinsurance OON after deductible–NO CHANGE
Diabetes Test Strips	20% IN/50% coinsurance OON after deductible	\$0 copay for LifeScan test strips—change to copay; All other brands 20% with prior auth IN; 50% OON after deductible
Dental Allowance	Not covered	\$1,000/50% coinsurance IN/OON-NEW!
Vision Allowance	\$175 IN/OON per year	\$175 IN/OON per year–NO CHANGE
Hearing Aids	\$690-\$1,890 copay per aid, per year	\$690-\$1,890 copay per aid, per year–NO CHANGE
Flex Spend Card	Not covered	Not covered
Home Safety	\$0 for one home safety visit per year; \$0 for three home safety products	\$0 for one home safety visit per year; \$0 for six home safety products per year—that's three more!

PPO Rx Enhanced-H5533-008

Service Area: Adams, Berks, Bradford, Cumberland, Dauphin, Fulton, Juniata, Lancaster, Lebanon, Lehigh, Mifflin, Northampton, Perry, Susquehanna, Wayne, Wyoming, and York counties



Plan Highlights	2023	2024
Plan Premium	\$58 per month	\$58 per month–NO CHANGE
Part B Premium Reduction	Not applicable	Not applicable–NO CHANGE
Deductible	\$500 OON	\$500 OON–NO CHANGE
Maximum Out-of-Pocket	\$7,550 IN/\$11,300 OON per year	\$7,550 IN/\$11,300 OON per year-NO CHANGE
Inpatient Hospital	\$275 per day, days 1-5 IN/40% coinsurance after deductible; \$0 per day, days 6 and beyond/40% coinsurance after deductible	\$275 per day, days 1-5 IN/40% coinsurance after deductible; \$0 per day, days 6 and beyond/40% coinsurance after deductible—NO CHANGE
PCP/Specialist (in-office and telehealth)	PCP: \$0 IN/\$30 OON after deductible Specialist: \$40 IN/40% coins. after deductible	PCP: \$0 IN/\$30 OON after deductible—NO CHANGE Specialist: \$40 IN/40% coins. after deductible—NO CHANGE (OON telehealth not covered)
Chiropractic Services	Tier 1: \$18 IN/30% OON per visit; Tier 2: \$20 IN/30% OON per visit after deductible	\$15 IN/30% OON per visit after deductible–removed tiering and \$3 lower IN
Outpatient Surgery	\$250 IN/40% coinsurance OON after deductible	\$250 IN/40% coinsurance OON after deductible–NO CHANGE
Diabetes Test Strips	20% IN/50% coinsurance OON after deductible	\$0 copay for LifeScan test strips—change to copay; All other brands 20% with prior auth IN; 50% OON after deductible
Dental Allowance	\$1,000/50% coinsurance IN/OON	\$2,000/50% coinsurance IN/OON—that's \$1,000 more!
Vision Allowance	\$200 IN/OON per year	\$200 IN/OON per year–NO CHANGE
Hearing Aids	\$690-\$1,890 copay per aid, per year	\$690-\$1,890 copay per aid, per year-NO CHANGE
Flex Spend Card	Not covered	Not covered
Home Safety	\$0 for one home safety visit per year; \$0 for three home safety products	\$0 for one home safety visit per year; \$0 for six home safety products per year—that's three more!

HMO Rx Enhanced

Here's the product value story and target audience for this plan.

Value story

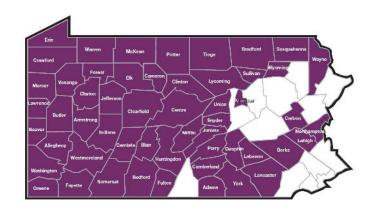
- If your employer is paying your premium and you want the best coverage that we have, the HMO Rx Enhanced plan has the lowest copays across all our plans.
- Prescription coverage.
 - o You get our richest prescription drug benefits.
 - \$0 copays for Tier 1 and Tier 2 prescriptions at preferred pharmacies, low copays for diabetes medications, coverage for insulins in the donut hole, and mail-order delivery.
- Extra benefits.
 - o Dental, vision, hearing, free gym memberships, home safety, personal counseling, caregiver support, and more.
- Doctor access.
 - Access to UPMC and additional community providers across PA and out of state.
 - o Emergency and urgent care anywhere in the U.S.
 - Use the UPMC for Life Travel Concierge program for worry-free trips.

Who should buy this plan?

 Most Medicare shoppers are not looking for a plan with a high-premium.

HMO Rx Enhanced-H3907-006

Service Area: Adams, Allegheny, Armstrong, Beaver, Bedford, Berks, Blair, Bradford, Butler, Cambria, Cameron, Carbon, Centre, Clarion, Clearfield, Clinton, Crawford, Cumberland, Dauphin, Elk, Erie, Fayette, Forest, Fulton, Greene, Huntingdon, Indiana, Jefferson, Juniata, Lancaster, Lawrence, Lebanon, Lehigh, Lycoming, McKean, Mercer, Mifflin, Montour, Northampton, Perry, Potter, Snyder, Somerset, Sullivan, Susquehanna, Tioga, Union, Venango, Warren, Washington, Wayne, Westmoreland, Wyoming, York, Harrison (OH), and Jefferson (OH) counties



Plan Highlights	2023	2024
Plan Premium	\$295 per month	\$295 per month–NO CHANGE
Part B Premium Reduction	Not applicable	Not applicable—NO CHANGE
Deductible	\$0	\$0-NO CHANGE
Maximum Out-of-Pocket	\$7,550 per year	\$7,550 per year–NO CHANGE
Inpatient Hospital	\$125 per stay	\$125 per stay–NO CHANGE
PCP/Specialist (in-office and telehealth)	PCP: \$0/ Specialist: \$25	PCP: \$0/ Specialist: \$25–NO CHANGE
Chiropractic Services	Tier 1: \$18 per visit; Tier 2: \$20 per visit	\$15 per visit–removed tiering and \$3 lower
Outpatient Surgery	\$80 per service	\$80 per service–NO CHANGE
Diabetes Test Strips	20% coinsurance	\$0 copay for LifeScan Diabetes Test Strips—change to copay
Dental Allowance	Not covered	Not covered
Vision Allowance	\$200 per year	\$200 per year–NO CHANGE
Hearing Aids	\$690-\$1,890 copay per aid, per year	\$690-\$1,890 copay per aid, per year-NO CHANGE
Flex Spend Card	Not covered	Not covered
Home Safety	\$0 for one home safety visit per year; \$0 for three products per year	\$0 for one home safety visit per year; \$0 for six home safety products per year—that's three more!

Prescription drug coverage

Formulary

For 2024 there will be four comprehensive formulary booklets.

1. Premier Rx:

- HMO Premier Rx
- PPO Premier Rx

2. Advantage Rx:

- PPO Choice Rx
- HMO Deductible Rx
- PPO High Deductible Rx
- HMO Rx Choice
- HMO Rx
- PPO Rx Enhanced
- HMO Rx Enhanced

3. Complete Care (SNP)

 All SNP plans use this formulary

4. Group (HMO/PPO)

 All group plans that offer Part D coverage use this formulary

All formularies can be found <u>online</u>. Select the plan type, state, and county to see the appropriate formulary. Scan this code with your smartphone to learn more:



How is our formulary different?

UPMC for Life aims to provide superior access and affordability by working with our doctors, using the latest clinical information, and developing care management programs focused on whole person care. We use real-world feedback from our doctors to make changes to our formulary.

Formulary drug changes

Benzodiazepines and controlled substance sleep aids

- Moving from Tier 2 to Tier 3.
- These medications are sometimes associated with abuse or misuse so it would not be appropriate to cover them on a \$0 tier, which could promote their use.
- The member cost share may be less than the Tier 3 copay.

Certain specialty medications

- Moving from Tier 4 to Tier 5.
- CMS sets the minimum per month cost of a medication to be eligible for the Specialty Tier (Tier 5).

The 2024 formulary drug changes are very limited to help provide stability for our members.

These changes were made in conjunction with our medical directors and CMS guidelines.

Part D stages

As a member's prescription medication spending increases throughout the year, they move from one stage to the next. All members start at Stage 1 at the beginning of each year. All Part D drug plans have the same stages.



DEDUCTIBLE STAGE

UPMC *for Life* does not have a deductible on our Part D plans. If your plan does have a deductible, you will pay the full price for your drugs until you meet your Part D deductible.



INITIAL COVERAGE STAGE

During this stage your out-of-pocket costs are very predictable. You can look at your plan's formulary to find the tier your prescription drugs are on. You pay copays until your total yearly costs reach \$5,030. The total yearly drug costs are paid by both you and your Part D plan. Most people will stay in this stage for the entire year.

Part D stages

For 2024 the catastrophic coverage stage will be changing. Members will no longer have a 5% coinsurance or copay for their prescriptions in this stage. This is due to the Inflation Reduction Act of 2022 (IRA) that was signed into law in August 2022.



COVERAGE GAP STAGE (DONUT HOLE)

If your total yearly drug costs exceed \$5,030, you move into the coverage gap stage, also known as the donut hole. In the donut hole you pay up to 25% of the plan's cost for brand-name and generic drugs plus a portion of the dispensing fee. You stay in this stage until your out-of-pocket costs (including any manufacturer's discount payments provided for brand-name drugs) reach \$8,000. After that you move into the catastrophic coverage stage.



CATASTROPHIC COVERAGE STAGE

Once you reach this stage, you will no longer pay for your prescriptions. Your Part D plan will be responsible for paying your share of the cost for your prescriptions.

Save money on prescriptions

Here are two important changes to UPMC *for Life* prescription drug coverage that can help our members save money.

NEW!—Tier 2 copays are now \$0

- All plans with Part D coverage have a \$0 copay for Tier 2 drugs when filled at preferred retail and mailorder pharmacies
- Plans that use the Advantage Rx formulary also have \$0 copay for brand-name (non-insulin) diabetes medications on Tier 2.
- Tier 1 preferred generics are still \$0 when filled at preferred retail and mail-order pharmacies as well.
- This applies during the initial coverage stage.

NEW!—3-month supply extended to 100-days

- Retail and mail-order 3-month supply has been changed from 90 days to 100 days.
- This applies to all plans with Part D coverage for all formulary tiers (except Tier 5 specialty drugs).
- We've made this change to help our members save money and stay consistent in taking their medication.

Donut hole coverage

All Part D plans have donut hole coverage for insulin medications

- Copays are the same in the initial coverage and coverage gap (donut hole) stages, saving our members hundreds!
- \$35 for 30-day supply at retail
- \$87.50 for 100-day supply at preferred mail order
- \$96.25 for 100-day supply at preferred retail
- \$105 for 100-day supply at standard pharmacies

UPMC for Life prescription costs

Plans that include Part D prescription drug coverage have the copays listed below. These copays apply only during the initial coverage stage. The HMO No Rx and PPO Salute plans do not include Part D prescription drug coverage.

	30-day	supply	100-day supply			
	Retail		Retail		Mail Order	
Tier	Preferred Pharmacy	Standard Pharmacy	Preferred Pharmacy	Standard Pharmacy	Preferred Pharmacy	Standard Pharmacy
Tier 1 Preferred Generic	\$0 copay	\$15 copay	\$0 copay	\$30 copay	\$0 copay	\$30 copay
Tier 2 Generic	\$0 copay	\$20 copay	\$0 copay	\$40 copay	\$0 copay	\$40 copay
Tier 3 Preferred Brand	\$47 copay	\$47 copay	\$129.50 copay	\$141 copay	\$117.50 copay	\$141 copay
Tier 4 Non-Preferred	\$100 copay	\$100 copay	\$300 copay	\$300 copay	\$300 copay	\$300 copay
Tier 5 Specialty	33% coinsurance	33% coinsurance	Not offered	Not offered	33% coinsurance limited to a 30-day supply	33% coinsurance limited to a 30-day supply

Extra benefits and services

We're here for our members

Everything we do is focused on creating a better health care experience for our members. Here's how our members can get help and information, fast!



Health Care Concierge

Call us when you need help with your plan or have questions. We have a team of Medicare experts at the ready! UPMC Health Plan was a GRAND STEVIE winner for overall best Sales and Customer Service at the 17th annual Stevie Awards in 2023!





UPMC Health Plan Tech Guides

This dedicated tech team is here to help you use all the free digital health care tools UPMC Health Plan offers. We can even help you set up your smart device and give you tips on how to use it.



UPMC Health Plan Login

You can securely access your health insurance information on the go. See your member ID card and plan information, chat with a Health Care Concierge, find a doctor, check prescriptions, and much more!

Here's the plan for better health

Our members have extra benefits that help them stay active and independent.



SilverSneakers®

Unlimited FREE gym memberships and one FREE personal training session per year.



Home safety

One FREE in-home safety visit per year and FREE home safety items each year (select plans).



Personal counseling

Six sessions per concern per year with a trained and licensed counselor through UPMC Resources for Life.



Tools for caregivers

You, your family, and friends can learn ways to reduce feelings of loss, loneliness, or stress.



Personal care managers

We can help you understand your doctor's instructions, outline your next steps after a diagnosis, and coordinate your future care.



RxWell®

Get a personal plan to help with anxiety, stress, depression, weight loss, healthy eating, physical activity, and quitting using tobacco.





UPMC Resources for Life

Get connected to help for legal concerns, financial services, and everyday living services like pet sitting and handypersons.



Helping our members get care, their way

UPMC for Life makes it easy for our members to get health care in the way that's most convenient for them.



UPMC *My*Health 24/7 Nurse Line

Registered nurses give you support and advice on a wide range of health issues.



UPMC AnywhereCare

24/7 access to virtual urgent care for common medical conditions right from your smartphone, tablet, or computer.



MyUPMC

Schedule appointments, chat with your doctor, and track your health tests all through an easy-to-use app!



Worldwide Assistance

24/7 worldwide emergency assistance when you travel 100+ miles from home or to another country.



Travel Concierge

HMO members **pay the same cost sharing** for covered routine medical services while visiting Arizona, Florida, Georgia, North Carolina, South Carolina, and Tennessee (at a Medicare-participating provider).

Scan this code with your smartphone to learn more:



Whole person care

UPMC for Life looks at the whole health of our members. That means not just providing care through doctors and hospitals, but filling the gaps in care that exist by offering programs that support our members in all aspects of their lives.



Prior authorizations

- We have an automatic authorization process, for medical services. This makes it easier for providers and faster for doctors and members to get approvals.
- Almost 95% of our prior authorizations are approved.



Value-based care

Over the past 10+ years, UPMC Health Plan has been a leader in collaborations with our local provider network and community organizations to move toward value-based care. Here are just a few ways we provide support in the community:

- UPMC Health Plan Neighborhood Center
- Pathways to Work program
- Resources for Life
- Prescription for Wellness
- Member Advisory Council



Health and wellness programming

We're dedicated to providing wellness programming to our communities that helps older adults stay active and maintain their health. Here are some of the programs we offer:

- UPMC for Life Medicare Faith and Wellness
- Powerful Tools for Caregivers
- Zoo and Botanical Garden Walks
- National Senior Health & Fitness Day
- Champions for Life

Programs for certain conditions

UPMC for Life members who have certain conditions can get additional benefits to help them manage their illness.

Post-discharge meals for members with COPD, CHF, and diabetes

- Contracts: H3907 and H5533.
- Covers all PBPs.
- Prior authorization no longer required
- For members with all three diagnoses of chronic obstructive pulmonary disease (COPD), congestive heart failure (CHF), and diabetes.
- This benefit is for a member who has been discharged from either an inpatient hospital stay, observation stay, or a skilled nursing facility stay.
- 56 meals (two meals per day for four weeks (28 days)) will be delivered to the member's home in four deliveries (one delivery per week). The meal benefit can only be used once after a discharge, it cannot be broken up into separate weeks.
- One meal benefit per year.

\$0 nebulizers and drugs-COPD only

- Contracts: H3907 and H5533.
- PBPs: 002, 037, 057, 029, 006, 003, 005.

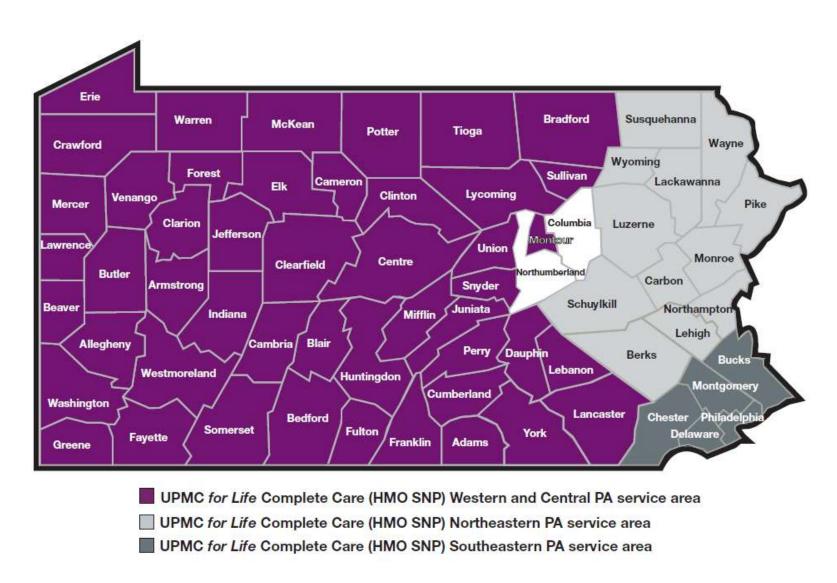
Mental health/Extra Help (LIS)

- This benefit is available on most plans (except PPO Salute and Allegheny PPO Rx Choice).
- This is for members with Extra Help (LIS) and disabling mental health conditions limited to bipolar disorder, major depressive disorders, paranoid disorder, schizophrenia, and schizoaffective disorder.
- Members have a \$15 copay for outpatient mental health services (in-person and telehealth).

UPMC for Life Complete Care

SNP service area

No changes have been made to the SNP service area for 2024.



NEW and improved for 2024!!

Great news for UPMC for Life Complete Care members!! Here's a quick list of what's new and improved for 2024.

- Plan premiums—\$0 per month.
- Medical services—\$0 copays.
- Part D prescriptions—\$0 copay for all covered prescriptions.
- 3-month supply extended to 100 days—The benefit for 3-month supply has been extended from 90 days to 100 days for all Part D prescription tiers (except Tier 5 specialty drugs).
- Hearing aids—\$0 copay per ear every three years through our hearing vendor, Amplifon.
- Transportation—Trips can now be used to go to non-medical locations including grocery stores, salons, churches, libraries, fitness centers, and community centers.
- UPMC for Life Complete Care Shop Healthy Card now offers up to \$2,000 per year in additional benefits.
 - \$400 per quarter for OTC products, healthy foods, household supplies, pet care supplies, and pest control.
 - \$100 per quarter for utilities (gas, water, electric, heating, sewage, and trash).
 - o Members can choose one health and wellness kit every six months for FREE.

KEY TAKEAWAYS:

- 1. Part D-\$0 copays and 3-month supply extended to 100 days
- 2. Hearing aids—\$0 copay per ear every three years
- 3. Transportation—now includes non-medical locations
- 4. Shop Healthy Card—members can use for new benefits:
 household/pet care supplies, pest control, and utilities; members can choose two health and wellness kits per year for FREE

Special Needs Plan overview

Here's what you need to know about how SNP plans work.

What is a Special Needs Plan (SNP)?

- SNP plans are a type of Medicare Advantage plan.
- Some SNP plans also limit membership to people with specific diseases or characteristics.
- Their benefits, provider choices, and prescription formularies are tailored to best meet the specific needs of the groups they serve.

Who is eligible to enroll?

- Individuals who qualify for a Special Needs Plan must meet one of the guidelines established by the Centers for Medicare & Medicaid Services (CMS):
 - Institutionalized Medicare beneficiaries.
 - o Individuals with severe or disabling chronic conditions.
 - Dual eligible beneficiaries.

Enrollment requirements

- An individual can join UPMC *for Life* Complete Care if they are entitled to Medicare Part A, enrolled in Medicare Part B, and receive full Medicaid.
- An individual must live in the service area.

SNP + CHC = better health coverage!

Members who receive their SNP and Community HealthChoices (CHC) benefits through UPMC Health Plan get additional benefits and services and important care coordination.

- As a member of both plans, members can have peace of mind that most of their health care services are covered.
- Extra benefits and services—Members get these benefits at no extra cost: UPMC for Life Complete Care Shop Healthy Card; vision, dental, and hearing benefits; transportation services; and unlimited free gym memberships.
- Care coordination
 - Members have a personal care manager who can work with their doctors, pharmacy, other health care providers, and insurance to make sure they are getting the right care.
 - Members also have a CHC coordinator who helps to make sure they get connected with additional community support if needed.
- One member ID card and point of contact with our award-winning Health Care Concierge team for all health insurance needs.

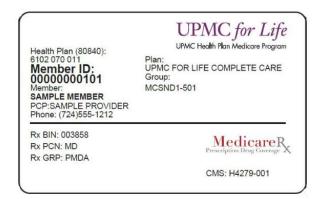
KEY TAKEAWAYS:

- 1. Extra benefits and services
- 2. Care coordination
- 3. One member ID card and Health Care Concierge
- 4. Health care coverage through one company

SNP member ID cards

Here are the member ID cards for the SNP only, CHC only, and SNP + CHC members.

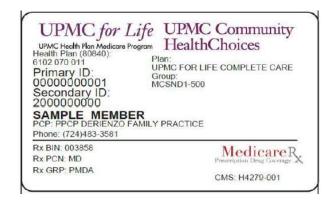
UPMC *for Life* Complete Care HMO SNP



UPMC Community HealthChoices CHC



UPMC *for Life* Complete Care HMO SNP + CHC



Plan benefits

The Medicare coverage through UPMC for Life Complete Care pays as primary.

Medicaid pays as secondary no matter whether the member has coverage through UPMC CHC, another CHC, or ACCESS.

- SNP plans provide all the usual services covered by Original Medicare plus additional enhanced benefits.
- Members must use the UPMC *for Life* Complete Care network of doctors, specialists, and hospitals to receive covered medical services.
- If a member has UPMC Community HealthChoices (CHC) and UPMC for Life Complete Care, they will receive only one ID card and it will contain two member ID numbers.
 - o The first ID number is the SNP member number and is **Primary.**
 - The second ID number is the CHC member number and is Secondary.
- UPMC for Life Complete Care members that are not enrolled with UPMC CHC must also show their Access or CHC card along with their UPMC for Life Complete Care card.
 - o These members will receive only a UPMC for Life card.
 - o The secondary ID number on their card will be the member's CHC recipient ID number.

Grace period

UPMC for Life Complete Care members have a 180-day grace period when they lose their Medicaid coverage.

- During the grace period, UPMC for Life Complete Care members are encouraged to contact their County Assistance Office to regain full Medicaid coverage.
- UPMC for Life Complete Care members who are unable to regain full Medicaid coverage will be disenrolled after the grace period ends.
- Once the member is disenrolled, they will return to Original Medicare unless they enroll in another Medicare Advantage plan.
- While in the grace period:
 - o Members will continue to be covered by UPMC for Life while in the Grace Period. They may be responsible for copays and/or coinsurance during this time.
 - o Members will remain responsible for the Part B premium at all times, unless this amount is paid on their behalf.

Part D VBID

UPMC for Life Complete Care members will continue to have the Part D VBID program for 2024.

- What is it?
 - \$0 copay for ALL covered Part D prescriptions at participating pharmacies.
 - Applies through each phase of the pharmacy benefit: initial, coverage gap, and catastrophic.
- Automatic participation
 - All members receive this benefit.
 - Applies to all levels of Extra Help (LIS).
- What should members do when filling prescriptions?
 - Members should use a participating pharmacy with a covered prescription.
 - O When they show their UPMC for Life Complete Care membership ID card they will automatically receive the \$0 copay.

Value-Based Insurance Design (VBID)

The VBID program is part of an initiative from the Centers for Medicare & Medicaid Services (CMS) to increase the quality and decrease the cost of care for members in Medicare Advantage and Special Needs Plans. This allows plans to create specialized benefits for their members.

Hearing aids and transportation

Here are some additional details on these enhancements.



Hearing aids

- \$0 copay for one hearing aid per ear every three years.
- Members must use our hearing aid vendor, Amplifon, to take advantage of this benefit.
- Members can choose from over 700 hearing aids and will get expert help in selecting the best hearing aid based on their specific needs. Rechargeable and Bluetooth options are available.
- To get started, members can call Amplifon at 1-855-807-3919 (TTY: 711) or visit: amplifonusa.com/lp/upmcforlife.



Transportation

- Members get trips for FREE with our transportation program—they can go to doctor's offices, medical facilities, and pharmacies.
- *NEW for 2024!* They can use some of their one-way trips to go to approved non-medical locations within a 30-mile radius, including grocery stores, salons, churches, libraries, fitness centers and community centers.
- SNP WPA/CPA: 60 one-way trips; up to 28 can be used for non-medical locations.
- SNP NEPA/SEPA: 20 one-way trips; up to 8 can be used for non-medical locations.
- To schedule a non-medical trip, members call the same phone number as they would currently: 1-844-335-5921 (TTY: 711).

UPMC for Life Complete Care Shop Healthy Card

Members now get up to \$2,000 a year on their Shop Healthy Card—that's \$500 per quarter!!!

What is it?

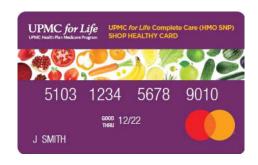
- \$400 quarterly allowance for OTC products, healthy foods, pet care supplies, and pest control
- \$100 quarterly allowance for household utilities (gas, water, electric, heating, sewage, trash)
- This allowance does not roll over from quarter to quarter.

Health and wellness kit

- Members can choose one kit to be mailed to them every six months for FREE.
- This does not count against the Shop Healthy Card allowance.

Automatic participation

All SNP members receive these benefits and can continue to use their current Shop Healthy Card for 2024.



Shop Healthy Card Amounts



- Utilities (gas, water, electric, heating, sewage, trash)
- OTC, healthy foods, pet supplies, pest control

New Shop Healthy Card benefits

Members can spend up to \$400 per quarter on OTC products, healthy foods, household supplies, pet care supplies, and pest control.



OTC products and healthy foods

- Members can purchase OTC products and healthy foods at participating retail stores. Members can buy up to 50 covered products per transaction.
- OTC products can also be purchased through mail order (online or catalog).
- Some participating retail stores include Giant Eagle, Rite Aid, Walgreens, and Walmart. A full list can be found at upmchp.us/member-shop-healthy.



Pet care supplies

- Pet care supplies can be purchased through mail order (online or catalog). Here are some examples: dry pet food, canned pet food, fish food, litter, pads, grooming brush, nail trimmer, and topical flea and tick medicine.
- Pet care supplies <u>CANNOT</u> be purchased at retail stores.



Pest control

- Members can purchase pest control services through a professional vendor of their choice. The vendor must accept MasterCard as a form of payment. They can use their Shop Healthy Card to pay for services. They can also self-pay for services up front and request reimbursement for the cost. See the reimbursement process on the next slide.
- Members can also purchase pest control items through mail order (online or catalog). Here are some examples: mouse traps, crawling bait traps, and spray for common insects.

New Shop Healthy Card benefits

Members can spend up to \$100 per quarter on utilities. They can use their card up front to pay their bill or self-pay and submit a claim for reimbursement.



Utilities (gas, water, electric, heating, sewage, and trash)

- Members can purchase household utilities through the vendor of their choice. The utility
 provider must accept MasterCard as a form of payment. They can use their Shop Healthy Card
 to pay their utility bills.
- They can also self-pay for services up front and request reimbursement for the cost.
- Utilities include gas, water, electric, heating, sewage, and trash.
- Members <u>CANNOT</u> use their card to pay their landlord or to pay for rent, internet service, cell phone coverage, or TV cable or subscription streaming services.



Submitting a claim for reimbursement

- Members who pay out of pocket for OTC products, healthy food, professional pest control, or utilities can submit a claim for reimbursement. Members can be reimbursed up to their allowance amount.
- Reimbursement claims cannot be submitted for items purchased through our mail-order vendor.
- Members will be reimbursed by check or can set up direct deposit on their *My*Health OnLine portal.
- Here are all the ways to submit a claim:
 - Online: upmchealthplan.com/members or through the UPMC Health Plan app
 - o Fax: **1-844-361-4700**
 - o Mail: UPMC Health Plan, PO BOX 2784, Fargo, ND 58108

Shop Healthy Card quick guide

This chart helps you to quickly see how the new Shop Healthy Card benefits can be purchased and to which allowance they belong.

Allowance	Benefit	Retail	Mail order	Bill pay	Reimbursement
\$100 per quarter	Utilities	N/A	N/A	Yes	Yes
\$400 per quarter	OTC products	Yes	Yes	N/A	Yes
	Healthy foods	Yes	No	N/A	Yes
	Pet care supplies	No	Yes	N/A	Yes
	Pest control	No	Yes	Yes	Yes

Shop Healthy Card resources

Here are some helpful resources that can help our members get information they need to use their Shop Healthy Card.

Find participating retail stores

- Public website: upmchp.us/member-shop-healthy
- MyHealth OnLine: upmchealthplan.com/members →
 Your Insurance → UPMC for Life Shop Healthy Card
 Portal. Once on the portal, go to Tools and Support and click Merchant Locator Tool.

Scanning products at retail stores

 Members can scan products while they shop to see if they're covered. Log in to the UPMC Health Plan app → Insurance Tab → Scan Items

Members should check their card balance every time before they use it. Here are three easy ways to check real-time 24/7:

- Call our automated system: 1-833-293-6484 (TTY: 711)
- MyHealth OnLine: upmchealthplan.com/members →
 Your Insurance → UPMC for Life Complete Care Shop
 Healthy Card
- UPMC Health Plan app → Insurance Tab

Getting OTC products, household supplies, and pet care supplies by mail:

- Here are two easy ways to access the UPMC for Life
 OTC online store:
 - MyHealth OnLine: upmchealthplan.com/members → Your Insurance → UPMC for Life Complete Care Shop Healthy Card → Visit the UPMC for Life OTC Website
 - UPMC Health Plan app → Insurance Tab →
 View Shop Healthy Card → Over-the-Counter
 Store
- Choose products from our OTC catalog and complete an order form. Mail to: OTC Servicing Center, PO Box 526266, Miami, FL 33152-9819.
- Call **1-800-688-2515 (TTY: 711)** Mon.—Fri. from 8 a.m. to 11 p.m.

Health and wellness kits

UPMC for Life Complete Care members can choose two Health and Wellness Kits per year for FREE.



What do members get?

- Members will have the choice to select a healthy food box with nonperishable food items or a health and wellness kit.
- Some examples of kit options that will be available include energy builder, spa day, and wellness.

How do members select the kit they want and what is the order deadline?

- Members can order their kits on Convey's website starting Jan. 1. They cannot pre-order before Jan. 1.
- The ordering process will be the same as ordering OTC products. See slide 83 for mail-order details.
- Kit 1 must be ordered before 6/30/24.
 Kit 2 must be ordered before 12/31/24.
- If the member does not select a kit by the deadline, they will not receive one.

How are we telling members about this new benefit?

- Current members will learn about this benefit in the value brochure mailing that goes out in early October. We will let them know they will receive full details on how to order in their member guide mailing in December. The member guide mailing will remind them to order starting Jan. 1 and include the kit order deadline.
- New members can select a kit after their coverage effective date by using Convey's website. We will remind new members of this in their welcome kit mailing.
- The Shop Healthy Card Catalog will have more information about this new benefit and time frames to order.
- In addition, we will remind of kit deadlines in the Caring for Life member newsletter and other Q1 mailings.

Complete Care (HMO SNP)-H4279-001

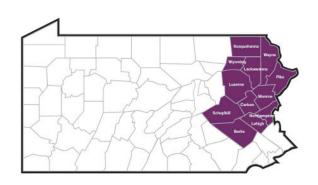
Service Area: Adams, Allegheny, Armstrong, Beaver, Bedford, Blair, Bradford, Butler, Cambria, Cameron, Centre, Clarion, Clearfield, Clinton, Crawford, Cumberland, Dauphin, Elk, Erie, Fayette, Forest, Franklin, Fulton, Greene, Huntingdon, Indiana, Jefferson, Juniata, Lancaster, Lawrence, Lebanon, Lycoming, McKean, Mercer, Mifflin, Montour, Perry, Potter, Snyder, Somerset, Sullivan, Tioga, Union, Venango, Warren, Washington, Westmoreland, and York counties



Plan Highlights	2023	2024
Plan Premium	\$0 per month	\$0 per month–NO CHANGE
Medical Copays	\$0 copays	\$0 copays-NO CHANGE
Part D Copays	\$0 copays	\$0 copays for all covered prescriptions—NO CHANGE
Maximum Out-of-Pocket	\$8,300 per year	\$8,850 per year—\$550 increase
Dental Allowance	\$7,250 per year	\$8,250 per year—that's \$1,000 more!
Vision Allowance	\$575 per year	\$575 per year–NO CHANGE
Hearing Aids	\$5,000 allowance every three years (for both ears)	\$0 copay per ear every three years—changed to copay
Transportation	60 one-way trips per year	60 one-way trips per year; members can use up to 28 of their 60 one-way trips to go to non-medical locations within a 30-mile radius—added new locations
Home Safety	\$0 for one home safety visit per year; \$0 for six home safety products per year	\$0 for one home safety visit per year; \$0 for six home safety products per year—NO CHANGE
Shop Healthy Card	\$400 per quarter (no roll-over) for OTC and healthy foods	\$400 per quarter (no roll-over) for OTC, healthy foods, household/pet care supplies, and pest control; \$100 per quarter (no roll-over) for utilities
Health and Wellness Kit	Not offered	One health and wellness kit every six months-added benefit

Complete Care (HMO SNP)-H4279-004

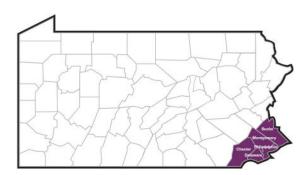
Service Area: Berks, Carbon, Lackawanna, Lehigh Luzerne, Monroe, Northampton, Pike, Schuylkill, Susquehanna, Wayne, and Wyoming counties



Plan Highlights	2023	2024
Plan Premium	\$0 per month	\$0 per month–NO CHANGE
Medical Copays	\$0 copays	\$0 copays—NO CHANGE
Part D Copays	\$0 copays	\$0 copays for all covered prescriptions—NO CHANGE
Maximum Out-of-Pocket	\$8,300 per year	\$8,850 per year-\$550 increase
Dental Allowance	\$4,000 per year	\$5,000 per year-that's \$1,000 more!
Vision Allowance	\$575 per year	\$575 per year–NO CHANGE
Hearing Aids	\$3,000 allowance every three years (for both ears)	\$0 copay per ear every three years—changed to copay
Transportation	12 one-way trips per year	20 one-way trips per year; members can use up to 8 of their 20 one-way trips to go to non-medical locations within a 30-mile radius—added 8 trips and new locations
Home Safety	\$0 for one home safety visit per year; \$0 for six home safety products per year	\$0 for one home safety visit per year; \$0 for six home safety products per year–NO CHANGE
Shop Healthy Card	\$400 per quarter (no roll-over) for OTC and healthy foods	\$400 per quarter (no roll-over) for OTC, healthy foods, household/pet care supplies, and pest control; \$100 per quarter (no roll-over) for utilities
Health and Wellness Kit	Not offered	One health and wellness kit every six months-added benefit

Complete Care (HMO SNP)-H7123-001

Service Area: Bucks, Chester, Delaware, Montgomery, and Philadelphia counties



Plan Highlights	2023	2024
Plan Premium	\$0 per month	\$0 per month–NO CHANGE
Medical Copays	\$0 copays	\$0 copays—NO CHANGE
Part D Copays	\$0 copays	\$0 copays for all covered prescriptions—NO CHANGE
Maximum Out-of-Pocket	\$8,300 per year	\$8,850 per year-\$550 increase
Dental Allowance	\$4,000 per year	\$4,000 per year–NO CHANGE
Vision Allowance	\$575 per year	\$575 per year–NO CHANGE
Hearing Aids	\$3,000 allowance every three years (for both ears)	\$0 copay per ear every three years—changed to copay
Transportation	12 one-way trips per year	20 one-way trips per year; members can use up to 8 of their 20 one-way trips to go to non-medical locations within a 30-mile radius—added 8 trips and new locations
Home Safety	\$0 for one home safety visit per year; \$0 for six home safety products per year	\$0 for one home safety visit per year; \$0 for six home safety products per year—NO CHANGE
Shop Healthy Card	\$400 per quarter (no roll-over) for OTC and healthy foods	\$400 per quarter (no roll-over) for OTC, healthy foods, household/pet care supplies, and pest control; \$100 per quarter (no roll-over) for utilities
Health and Wellness Kit	Not offered	One health and wellness kit every six months-added benefit

Plan documents and marketing

Member plan documents

Here are some of the documents our members will be mailed during AEP.

Annual Notice of Changes (ANOC)

- Mailing Sept. 12–23 to arrive in homes by Sept. 30.
- Members who requested an electronic copy will be emailed the link to their electronic ANOC on Sept. 15.

Low Income Subsidy (LIS)

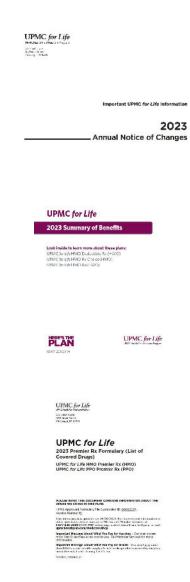
- Mailing Sept. 12–23 to arrive in homes by Sept. 30.
- Members who requested an electronic copy will be emailed the link to their electronic LIS on Sept. 15.

Summary of Benefits

- Only available upon request for members; ready to mail Oct. 1.
- Available on the UPMC for Life public website by Oct. 15.
- Included in the enrollment kit for prospective members.

Evidence of Coverage, prescription formulary, and provider directory

- Hard copies will be mailed to members who previously requested a hard copy.
- Documents will be mailed Oct. 8 to arrive in homes by Oct. 15.
- Members who requested an electronic copy will be emailed the link to MyHealth OnLine (secure member portal) to see their electronic documents on Oct. 15.



Marketing Storefront

To order materials on the Marketing Storefront (formally Converge), go to upmchp.klicorders.com.

The following documents can be found and ordered on the Marketing Storefront:

- Enrollment kit
- Summary of Benefits
- Sales Seminar PowerPoint kit
- Member Retention PowerPoint kit
 - o (UPMC staff only)
- SNP PowerPoint
- Lead sheets
- Member meeting evaluation
 - o (UPMC staff only)
- Prescription drug formulary
- Over-the-counter catalog
- Plan comparison
- Extra benefits fliers
- Spanish materials

If you are new to Converge or have a question about how to request materials, please review the **PDF user guide** on the left side of the page.

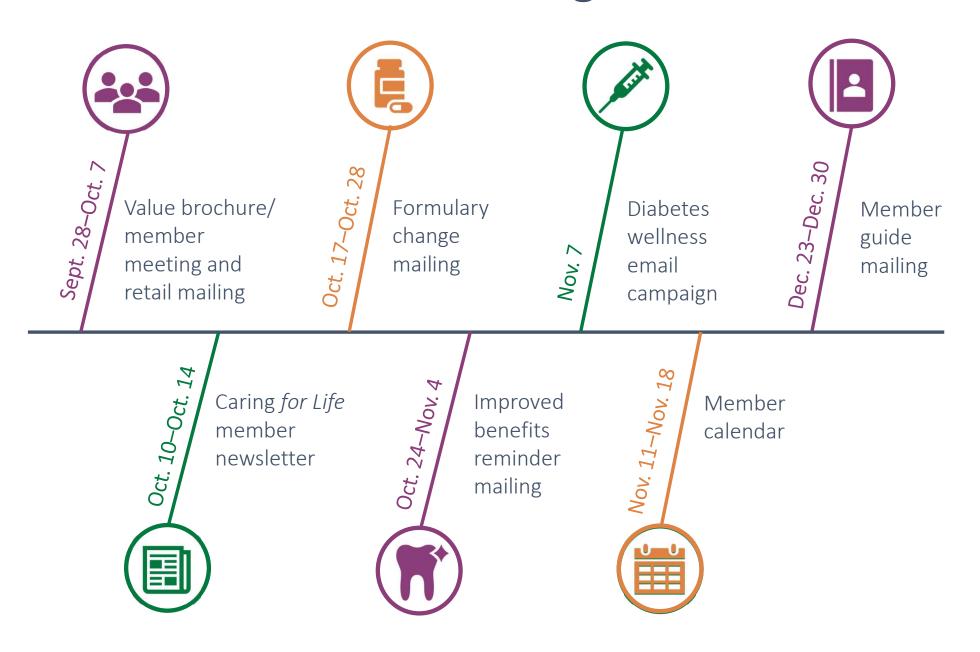
- Personalized marketing materials
 - o Veterans
 - o 5-star
 - o SNP
 - General Medicare and SNP
- Sales collateral—Internal users only. Broker Agents can request from Broker Manager
 - Signage
 - Member benefit and programs booklets
 - Greeting cards

>> Browse Products

>> Order History/Check Status

>> PDF User Guide

Member marketing timeline



Find materials online

Here's where to find important plan documents and materials online.

These plan documents can be found on the SHOP page of our public website:

- Annual Notice of Changes
- Summary of Benefits
- Evidence of Coverage
- Star ratings
- Prescription drug formulary
- Provider directory

To view a plan document, go to https://www.upmchealthplan.com/medicare/shop/.

- Click **Yes** for Are you a current UPMC *for Life* member.
- Enter the member or prospect **ZIP code**.
- Find your plan then click View Plan Details.
- Scroll down and click the link for the document.

Other plan documents are still located on the Documents and forms tab.

Scan these codes with your smartphone:

SHOP page:



Documents and forms:



Thank You

UPMC HEALTH PLAN