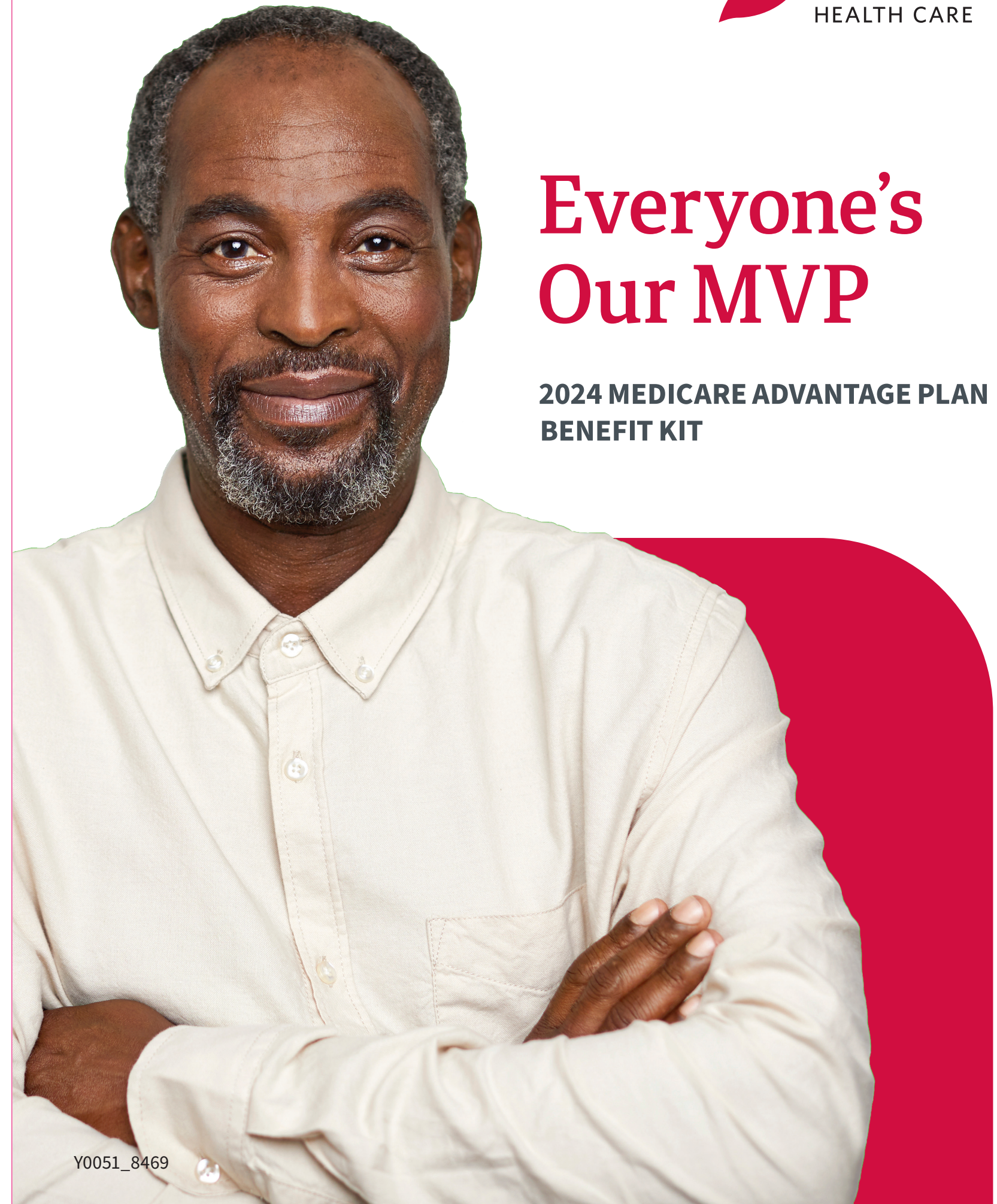




Everyone's Our MVP

**2024 MEDICARE ADVANTAGE PLAN
BENEFIT KIT**



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mvphealthcare.com/medicare

MVPMCR0162 08/2023 ©2023 MVP Health Care

MVP Medicare Advisors are your partners to ensure
you're confident about your Medicare choices.

Let's talk!

1-800-324-3899 (TTY 711)

October 1–March 31, seven days a week, 8 am–8 pm Eastern Time.
April 1–September 30, call Monday–Friday 8 am–8 pm.



MVP Care Guides

Get extra support from our expert Care Guides as you get started with an MVP Medicare Advantage plan. They are available to offer personalized guidance to make sure you understand your plan, are ready to use your benefits, and ensure there is no disruption to your health care.



Let's talk!

Have questions or need more information?

Call **1-800-324-3899** (TTY 711)

October 1–March 31, seven days a week, 8 am–8 pm Eastern Time.
April 1–September 30, call Monday–Friday, 8 am–8 pm.

Or visit mvphealthcare.com/medicare.

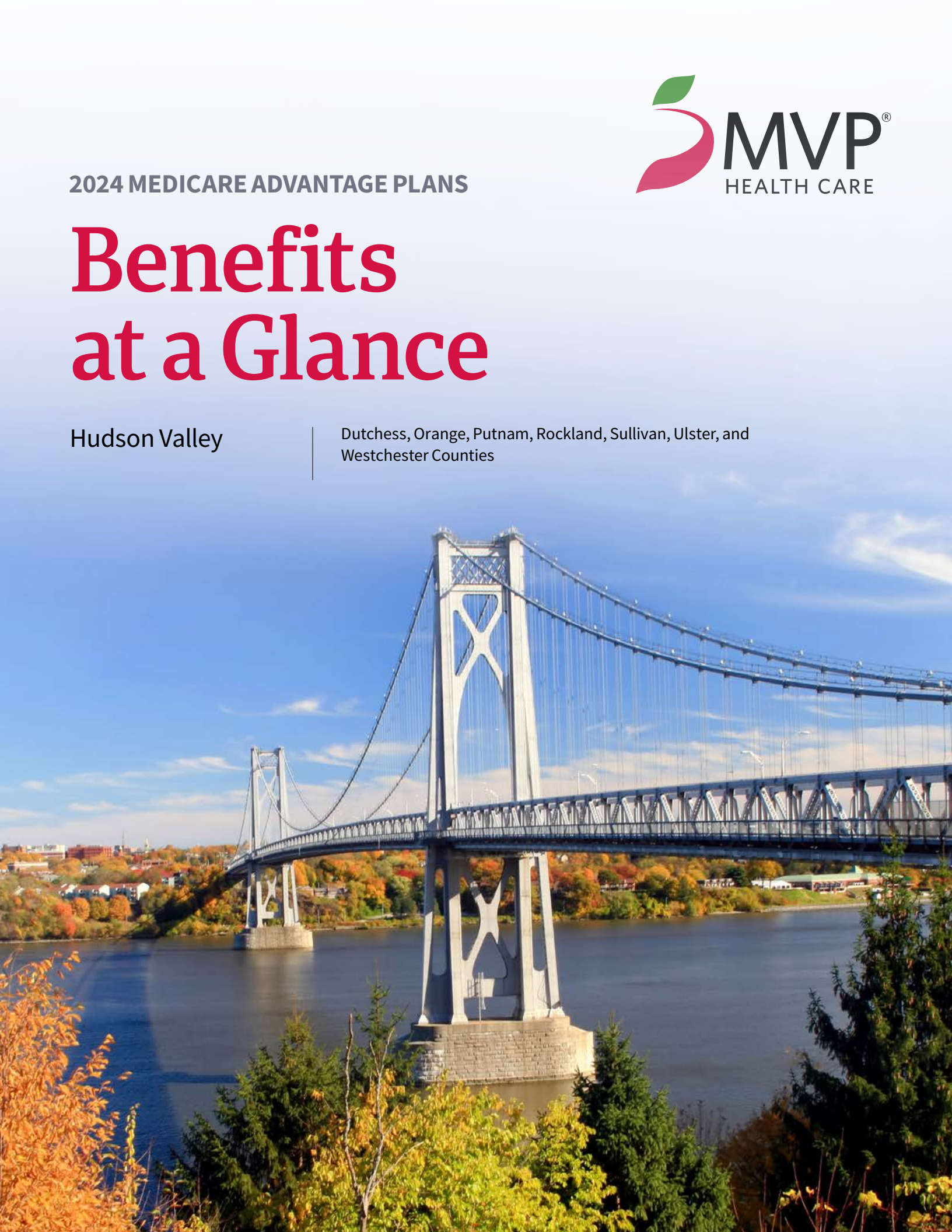


2024 MEDICARE ADVANTAGE PLANS

Benefits at a Glance

Hudson Valley

Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, and Westchester Counties



Well-Being Benefits and Extras

MVP is committed to supporting you along every step of your personal health journey. Our Medicare Advantage plans include extra benefits, programs, and services to help you live your best life.

MVP MEDICARE ADVANTAGE PLANS

	MVP MEDICARE WELLSELECT [®]	MVP MEDICARE PATRIOT PLAN [®]	MVP MEDICARE SECURE [®]
Dental Services	\$1,500 per year for covered dental services	\$1,750 per year for covered dental services	\$1,250 per year for covered dental services
In-network provider: 0% co-insurance for covered services Out-of-network provider: 20%–50% co-insurance for covered services			
Hearing Aids from TruHearing [®]	Choose the right coverage for you! Pay \$699 or \$999 per hearing aid, or get up to \$600 per hearing aid toward your choice of top models, rechargeable or batteries included		
Eyewear Allowance	\$150 per year	\$175 per year	\$175 per year
Over-the-Counter Allowance	\$75 per quarter	\$50 per quarter	\$25 per quarter
Transportation to Medical Appointments (30 miles maximum per ride)	26 one-way rides per year	Unlimited rides to VA, 24 one-way rides to other appointments	14 one-way rides per year
Meal Delivery	14 free refrigerated meals after an in-patient hospital stay discharge		
Gia [®] by MVP	\$0 virtual care to address an immediate or same-day health need, available 24/7		
SilverSneakers [®] Fitness Membership	Enjoy a free gym membership to 16,000 fitness locations nationwide, plus, get access to a full library of on-demand videos, live online classes, and the GetSetUp online learning community		
Be Well Rewards Program	Earn a \$100 gift card reward for completing your annual wellness visit		

For detailed benefit information, refer to the MVP MEDICARE ADVANTAGE PLANS brochure.

MVP MEDICARE ADVANTAGE PLANS

MVP MEDICARE SECURE PLUS [®]	MVP MEDICARE PREFERRED GOLD [®] with Part D	MVP MEDICARE PREFERRED GOLD [®] without Part D
\$2,000 per year for covered dental services	\$2,000 per year for covered dental services	\$2,000 per year for covered dental services
In-network provider: 0% co-insurance for covered services Out-of-network provider: 20%–50% co-insurance for covered services		
Choose the right coverage for you! Pay \$699 or \$999 per hearing aid, or get up to \$600 per hearing aid toward your choice of top models, rechargeable or batteries included		
\$175 per year	\$225 per year	\$225 per year
\$75 per quarter	\$100 per quarter	\$25 per quarter
24 one-way rides per year	24 one-way rides per year	12 one-way rides per year
14 free refrigerated meals after an in-patient hospital stay discharge		
\$0 virtual care to address an immediate or same-day health need, available 24/7		
Enjoy a free gym membership to 16,000 fitness locations nationwide, plus, get access to a full library of on-demand videos, live online classes, and the GetSetUp online learning community		
Earn a \$100 gift card reward for completing your annual wellness visit		

Look inside for at-a-glance plan comparisons.

MVP Health Plan, Inc. complies with Federal civil rights laws. MVP Health Plan, Inc. does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex (including sexual orientation and gender identity).

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-844-946-8010 (TTY 711).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-844-946-8010 (TTY 711)。

If your coverage is through an employer-sponsored plan, check with the former employer for your benefit information. This is not a contract. These benefit charts are for general reference only. All benefits are subject to federal Medicare program medical necessity guidelines.

MVP Health Plan, Inc. is an HMO-POS/PPO organization with a Medicare contract. Enrollment in MVP Health Plan depends on contract renewal. Out-of-network/non-contracted providers are under no obligation to treat MVP Health Plan members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

For accommodations of persons with special needs at meetings, call 1-800-324-3899 (711).

MVP virtual care services through Gia are available at no cost-share for most members. In-person visits and referrals are subject to cost-share per plan.

SilverSneakers is a registered trademark of Tivity Health, Inc. SilverSneakers On-Demand is a trademark of Tivity Health, Inc. ©2023 Tivity Health, Inc. All rights reserved. GetSetUp is a third-party provider and is not owned or operated by Tivity Health, Inc. (“Tivity”) or its affiliates. Users must have Internet service to access online services. Internet service charges are responsibility of user.

TruHearing[®] and (RE)[™] are trademarks of TruHearing, Inc. All other trademarks, product names, and company names are the property of their respective owners. Retail pricing is based on prices for comparable aids. Follow-up provider visits included for one year following hearing aid purchase. Free battery offer is not applicable to the purchase of rechargeable hearing aid models. Three-year warranty includes repairs and one-time loss and damage replacement. Hearing aid repairs and replacements are subject to provider and manufacturer fees. For questions regarding fees, contact a TruHearing hearing consultant.



MVP MEDICARE ADVANTAGE PLANS Benefits at a Glance

(IN=In-network providers,
OUT=Out-of-network providers)

	MVP MEDICARE WELLSELECT with Part D (PPO)	MVP MEDICARE PATRIOT PLAN [*] with Part D (PPO)	MVP MEDICARE SECURE [*] with Part D (HMO-POS)	MVP MEDICARE SECURE PLUS [*] with Part D (HMO-POS)	MVP MEDICARE PREFERRED GOLD [*] with Part D (HMO-POS)	MVP MEDICARE PREFERRED GOLD [*] without Part D (HMO-POS)
Monthly Premium ¹	\$0	\$42.40	\$39.50	\$97.50	\$147.40	\$0
Doctor Visits						
Primary Care	IN \$0 co-pay OUT \$5 co-pay	IN \$0 co-pay OUT \$5 co-pay	\$0 co-pay	\$0 co-pay	\$0 co-pay	\$0 co-pay
Specialist No Referrals!	IN \$45 co-pay OUT \$50 co-pay	IN \$40 co-pay OUT \$50 co-pay	\$40 co-pay	\$40 co-pay	\$30 co-pay	\$30 co-pay
Mental Health Specialist	IN \$10 co-pay OUT \$50 co-pay	IN \$10 co-pay OUT \$50 co-pay	\$10 co-pay	\$10 co-pay	\$10 co-pay	\$30 co-pay
Gia [®] Virtual Care Services	\$0 co-pay	\$0 co-pay	\$0 co-pay	\$0 co-pay	\$0 co-pay	\$0 co-pay
Routine Eye Exams	IN \$0 co-pay OUT \$0 co-pay	IN \$0 co-pay OUT \$0 co-pay	\$0 co-pay	\$0 co-pay	\$0 co-pay	\$0 co-pay
Routine Hearing Exams	IN \$0 co-pay OUT \$60 co-pay	IN \$0 co-pay OUT \$60 co-pay	\$0 co-pay	\$0 co-pay	\$0 co-pay	\$0 co-pay
Chiropractic	IN \$15 co-pay OUT \$20 co-pay	IN \$10 co-pay OUT \$20 co-pay	\$10 co-pay	\$10 co-pay	\$10 co-pay	\$15 co-pay
Outpatient Physical, Speech, and Occupational Therapy	IN \$30 co-pay OUT \$60 co-pay	IN \$40 co-pay OUT \$60 co-pay	\$20 co-pay	\$20 co-pay	\$20 co-pay	\$20 co-pay
Emergency Care Worldwide Coverage						
Emergency Room Care	\$95 co-pay	\$95 co-pay	\$95 co-pay	\$95 co-pay	\$95 co-pay	\$95 co-pay
Urgently Needed Care	\$30 co-pay	\$30 co-pay	\$40 co-pay	\$30 co-pay	\$30 co-pay	\$55 co-pay
Ambulance (Ground)	\$200 co-pay	\$150 co-pay	\$250 co-pay	\$175 co-pay	\$100 co-pay	\$100 co-pay
Out-of-Network Coverage All plans include coverage for non-emergency care from Medicare providers anywhere in the United States who are not part of the MVP Medicare provider network.						
Non-Urgent and Non-Emergency Services and Admissions Some services excluded	Up to \$60 co-pay for office visits, 40% co-insurance for other	Up to \$60 co-pay for office visits, 40% co-insurance for other	30% co-insurance, MVP pays 70%, up to \$4,000 per year	30% co-insurance, MVP pays 70%, up to \$4,000 per year	30% co-insurance, MVP pays 70%, up to \$4,000 per year	30% co-insurance, MVP pays 70%, up to \$4,000 per year
Hospital, Surgery, and Rehabilitation Services All plans cover skilled nursing facility care at a post-acute rehabilitation center.						
Inpatient Hospital Stays Emergency admissions covered worldwide	IN \$385 per day for days 1–5, then \$0 per day for days 6+ OUT 40% co-insurance	IN \$400 per day for days 1–5, then \$0 per day for days 6+ OUT 40% co-insurance	\$370 per day for days 1–5, then \$0 per day for days 6+	\$350 per day for days 1–5, then \$0 per day for days 6+	\$325 per day for days 1–5, then \$0 per day for days 6+	\$350 per day for days 1–5, then \$0 per day for days 6+
Observation Stays Not inpatient admission	IN \$350 OUT 40% co-insurance	IN \$350 OUT 40% co-insurance	\$300 co-pay	\$300 co-pay	\$200 co-pay	\$250 co-pay
Outpatient Hospital/Ambulatory Surgical Center (Same day surgery)	IN \$350/\$225 co-pay OUT 40% co-insurance	IN \$350/\$200 co-pay OUT 40% co-insurance	\$300 co-pay/\$175 co-pay	\$300 co-pay/\$175 co-pay	\$200 co-pay/\$125 co-pay	\$250 co-pay/\$150 co-pay
Diagnostic Services Office visit co-pay may apply.						
Outpatient X-ray (Radiology)	IN \$60 co-pay OUT \$60 co-pay	IN \$50 co-pay OUT \$60 co-pay	\$45 co-pay	\$40 co-pay	\$30 co-pay	\$30 co-pay
Outpatient CT Scans, PET Scans, and MRIs	IN \$150 co-pay OUT 40% co-insurance	IN \$200 co-pay OUT 40% co-insurance	\$200 co-pay	\$175 co-pay	\$125 co-pay	\$100 co-pay
Laboratory	IN \$0 co-pay OUT 40% co-insurance	IN \$0 co-pay OUT 40% co-insurance	\$0 co-pay	\$0 co-pay	\$0 co-pay	\$10 co-pay
Diagnostic Procedures	IN \$20 co-pay OUT 40% co-insurance	IN \$10 co-pay OUT 40% co-insurance	\$10 co-pay	\$10 co-pay	\$10 co-pay	\$10 co-pay
Maximum Out-of-Pocket Protection ²	IN Only \$7,550 IN and OUT Combined \$11,300	IN Only \$7,550 IN and OUT Combined \$11,300	\$7,550	\$7,550	\$5,800	\$6,700

¹May be lower with New York State EPIC and/or Low Income Subsidy assistance. You must continue to pay your Part B premium.

²The most you pay for covered medical services in a calendar year, excluding Part D drug costs. If you reach the maximum amount, MVP pays 100% of the cost of covered services, including Part D drugs, through December 31.

Hudson Valley

Part D Prescription Drug Coverage

MVP MEDICARE ADVANTAGE PLANS				
WELLSELECT	PATRIOT PLAN	SECURE	SECURE PLUS	PREFERRED GOLD with Part D
DEDUCTIBLE STAGE				
\$250 Deductible for Tiers 3–5	\$200 Deductible for Tiers 3–5	\$150 Deductible for Tiers 3–5	No Deductible	No Deductible
INITIAL COVERAGE STAGE				
After your deductible is met, you pay your cost-share for covered prescription drugs. Your cost for a 30-day supply from a participating retail pharmacy is below. Or save money using the CVS Caremark Mail Service Pharmacy. A three-month supply of many prescriptions is available for only two co-pays. Refer to the Medicare Part D Formulary for details.				
TIER 1 \$0 No Deductible	\$0 No Deductible	\$0 No Deductible	\$0	\$0
TIER 2 \$12 No Deductible	\$15 No Deductible	\$10 No Deductible	\$15	\$10
TIER 3 \$47 After Deductible	\$45 After Deductible	\$47 After Deductible	\$45	\$35
TIER 4 25% After Deductible	25% After Deductible	25% After Deductible	25%	25%
TIER 5 27% After Deductible	27% After Deductible	30% After Deductible	33%	33%
COVERAGE GAP STAGE				
If your total drug costs in 2024 reach \$5,030 , your cost for prescription drugs changes. You pay:				
All Tiers: 25% for generic and contracted brand name drugs	All Tiers: 25% for generic and contracted brand name drugs	All Tiers: 25% for generic and contracted brand name drugs	Tier 1: \$0 Tiers 2–5: 25% for generic and contracted brand name drugs	Tier 1: \$0 Tiers 2–5: 25% for generic and contracted brand name drugs
CATASTROPHIC COVERAGE STAGE				
If your true out-of-pocket costs reach \$8,000 , you will pay \$0 for all drugs in all tiers for the rest of the calendar year.				

! Drugs purchased outside the United States are not Medicare-approved and are not covered.

Members living with diabetes have extra support. Plan-covered insulin drugs are not subject to Part D deductibles and are covered at a maximum \$35 co-pay or the tier co-pay, whichever is less. OneTouch, FreeStyle, Precision, and Prodigy brand diabetic supplies are covered with a \$0 co-pay.

Your Guide to Dental Benefits

Included with all MVP Medicare Advantage plans!

Dental care is key to your overall health. And we know dental coverage is something you want in your Medicare Advantage plan. That's why **all** MVP Medicare Advantage plans include preventive and comprehensive dental benefits to meet your needs.

Each plan offers a benefit amount to use however you choose toward the covered dental services you need—**with no deductibles**. Plus MVP Health Care® partners with LIBERTY Dental Plan to provide access to an extensive network of dentists and specialists locally and nationwide.

Covered Dental Services

	In-Network LIBERTY Dental Provider	Out-of-Network Non-LIBERTY Dental Provider
Annual Deductible	None	None
Preventive Oral Exams	\$0	20% Co-Insurance
Prophylaxis (cleanings)	\$0	20% Co-Insurance
Preventive X-rays	\$0	20% Co-Insurance
Diagnostic Oral Exams	\$0	20% Co-Insurance
Diagnostic X-rays	\$0	20% Co-Insurance
Restorative Services	\$0	20–50% Co-Insurance
Endodontics (root canals)	\$0	50% Co-Insurance
Periodontics	\$0	50% Co-Insurance
Prosthodontics (dentures, crowns)	\$0	50% Co-Insurance
Oral Surgery	\$0	20–50% Co-Insurance
Other Services (implants, occlusal guards, teledentistry)	\$0	50% Co-Insurance

This information is a summary of dental benefits covered by the plan. Please see your Evidence of Coverage for a full list of dental benefits and applicable limitations.

Questions?

Call **1-800-324-3899** (TTY 711) to speak with an MVP Medicare Advisor. October 1–March 31, call seven days a week, 8 am–8 pm Eastern Time. April 1–September 30, call Monday–Friday, 8 am–8 pm.

See other side for more information about your dental benefits. 

About Your MVP Medicare Advantage Plan Dental Benefit

As part of the MVP Medicare Advantage plan dental benefits, you may see a dentist that participates with the LIBERTY Dental Plan anywhere in the country. Covered services performed by LIBERTY dentists are covered at no additional cost to you. Visit mvphealthcare.com/MedicareDentist to confirm that your dentist is part of the LIBERTY network.

Your dental plan also gives you access to the national Guardian PPO network. If you go to a Guardian dentist, be sure to tell the provider you have access to the Guardian network through your LIBERTY Dental Plan. Dentists can also call the number on the back of your dental Member ID card to confirm eligibility.

You also have the flexibility to go to any dentist for covered services, but you may pay more for services provided by a dentist who is not part of the LIBERTY Dental network. Dentists also may ask for the full cost of services to be paid upfront. You can submit a claim for reimbursement for any charges up to the co-insurance amount covered by your plan.

MVP pays for covered dental services based on a maximum allowable benefit for each service. LIBERTY dentists accept this amount as payment in full for covered services. If you see a dentist that does not participate with LIBERTY, you may be billed for additional costs.

You will receive a dental Member ID card from LIBERTY—show this card any time you visit the dentist. Make sure your dentist is still in the network each time you have a visit.

If your coverage is through an employer-sponsored plan, check with the former employer for your benefit information.

MVP Health Plan, Inc. is an HMO-POS/PPO organization with a Medicare contract. Enrollment in MVP Health Plan depends on contract renewal. Out-of-network/non-contracted providers are under no obligation to treat MVP Health Plan members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

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MVP MEDICARE PATRIOT PLAN® with Part D PPO

VA Benefits + Medicare Advantage

You deserve both!

As a veteran, you've earned the right to quality, affordable health care.

Add on all these extras and much more:

- **Access to care where and when you need it**—with an extensive network of over 54,000 doctors and hospitals, plus out-of-network coverage for non-emergency care with Medicare providers anywhere in the U.S.
- **Local and worldwide** emergency and urgent care coverage
- **Unlimited FREE rides** to/from VA hospitals and facilities, plus **24 FREE** one-way rides to other medical appointments
- **Expanded dental benefits** with preventive and comprehensive coverage at no deductible
- **Access to Gia® by MVP**—\$0 virtual care to address an immediate or same-day health need, including mental health support, available 24/7
- **FREE** SilverSneakers fitness membership, plus earn a **\$100 gift card reward** with the MVP Be Well Rewards program
- **Allowances** for quality hearing aids, glasses or contacts, and select over-the-counter items
- **\$0 Preferred Generic Drugs** and free at-home delivery for added prescription drug savings
- **Personal support** to navigate your plan from our expert team of Care Guides

Already have prescription coverage?

Add on expanded Medicare Advantage benefits with MVP Medicare Preferred Gold® without Part D HMO-POS **for \$0/month!**



Let's work together!

MVP Health Care® (MVP) Medicare Advisors are ready to support you and make sure you're confident about your Medicare choice.

Call **1-833-MVP-4VET** (TTY 711)

Seven days a week, 8 am-8 pm

April 1-September 30, call Monday-Friday, 8 am- 8 pm



The MVP Medicare Patriot Plan is available in the following New York counties: Albany, Allegany, Broome, Cattaraugus, Cayuga, Chautauqua, Chemung, Chenango, Cortland, Columbia, Delaware, Dutchess, Erie, Fulton, Genesee, Greene, Herkimer, Jefferson, Lewis, Livingston, Madison, Monroe, Montgomery, Niagara, Oneida, Onondaga, Ontario, Orange, Orleans, Oswego, Otsego, Putnam, Rensselaer, Rockland, Saratoga, Schenectady, Schuyler, Seneca, Steuben, Sullivan, Tompkins, Tioga, Ulster, Wayne, Warren, Washington, Westchester, Wyoming, and Yates.

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MVP virtual care services through Gia are available at no cost-share for most members. In-person visits and referrals are subject to cost-share per plan. SilverSneakers is a registered trademark of Tivity Health, Inc. SilverSneakers On-Demand is a trademark of Tivity Health, Inc. ©2023 Tivity Health, Inc. All rights reserved.

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Let's do
Medicare
together.

2024 MEDICARE ADVANTAGE PLANS



Locally based.
Community focused.

Choosing health insurance is about more than dollars and cents—it's about feeling confident that you have the support, coverage, and resources you need to navigate your individual health journey. With MVP Health Care Medicare Advantage plans, our goal is to be a true partner—providing personal support, easier access to care, and benefits that cover the whole you.

As a regional, not-for-profit health plan, we're committed to **putting our members and communities first**. Plans include benefits that matter most to you, like dental, vision, and prescription coverage, programs to support your well-being, and extras that give you savings and peace of mind.

When it comes to getting health care, MVP **meets you wherever you are**, with our wide regional network of providers throughout New York State, Vermont, and surrounding areas, coverage from Medicare providers anywhere in the U.S., and the convenience of 24/7 virtual care services.

And at every step, with whatever you need, MVP is there with **the support of a committed team of guides** to help you reach your personal health goals and make sure your health plan fits your life.

With an MVP Medicare Advantage plan, experience what it's like to be a Most Valuable Person. Because around here, everyone's our MVP.



MVP Medicare Advantage well-being benefits and extras.

Comprehensive health coverage is only the beginning! MVP is committed to helping you along your path to better health, with benefits, programs, and services to help you live healthy and stay well.

Dental Coverage

Here's something to smile about! All MVP Medicare Advantage plans include coverage for preventive and comprehensive dental services—with no deductibles.

Each plan offers a benefit amount each year to use toward covered dental services—from regular cleanings and x-rays to fillings and crowns. Services are covered up to a maximum allowable amount for each service.

You can see any dentist you choose. MVP Medicare plans also include access to the Liberty Dental Plan network.

Eyewear Coverage

Take advantage of an annual allowance for glasses and contacts with all plans. You can go to any vision provider, plus with MVP vision partner, EyeMed, you have access to a mix of independent, national retail, and regional retail providers, including LensCrafters®, Target Optical™, and Pearle Vision™, to get additional savings on vision products and services.

TruHearing® Hearing Aids

All MVP Medicare Advantage plans offer a flexible hearing aid benefit through our partner, TruHearing, to make hearing aids more affordable and let you choose the right solution for your needs. All hearing aids feature state-of-the-art technology with personalized care.

Over-the-Counter Allowance

Receive a quarterly allowance with all MVP Medicare Advantage plans to use toward over-the-counter medicine and health-related purchases from select pharmacies or by mail order. Shop for covered items at eligible retailers,* or place an order online.

*Participating retail locations include CVS Pharmacy, Rite Aid, Walgreens, or Walmart. Please visit **mvp.nationsbenefits.com** to access a list of all participating retail locations.

Transportation to Medical Appointments

With your MVP Medicare Advantage plan, getting to the doctor is easier and more convenient, with FREE rides to medical appointments. All plans offer a number of rides each year via ride share, medical sedan, or wheelchair van.



The support and resources to meet your health goals.

For more details, please call the MVP Medicare Team at **1-800-324-3899** (TTY 711) or visit **mvphealthcare.com/extrabenefits**.

Be Well Rewards

Get rewarded for focusing on your health with the Be Well Rewards Program. Earn a \$100 gift card reward for seeing your doctor for an Annual Wellness Visit. This appointment helps you keep up with preventive screenings, review your overall physical and mental health, and discuss any other health needs. Your Annual Wellness Visit is covered at no cost under your plan.

SilverSneakers® Fitness

Enjoy a free fitness membership to 16,000 fitness locations nationwide with SilverSneakers. Plus, with access to a full library of on-demand videos, live online classes, and the GetSetUp learning community you can stay active and engaged from the comfort of home.

Living Well Classes

MVP provides a wide variety of innovative health and well-being programs for our members throughout the year. Enjoy a mix of in-person and virtual classes.

Wherever life takes you, take Gia.

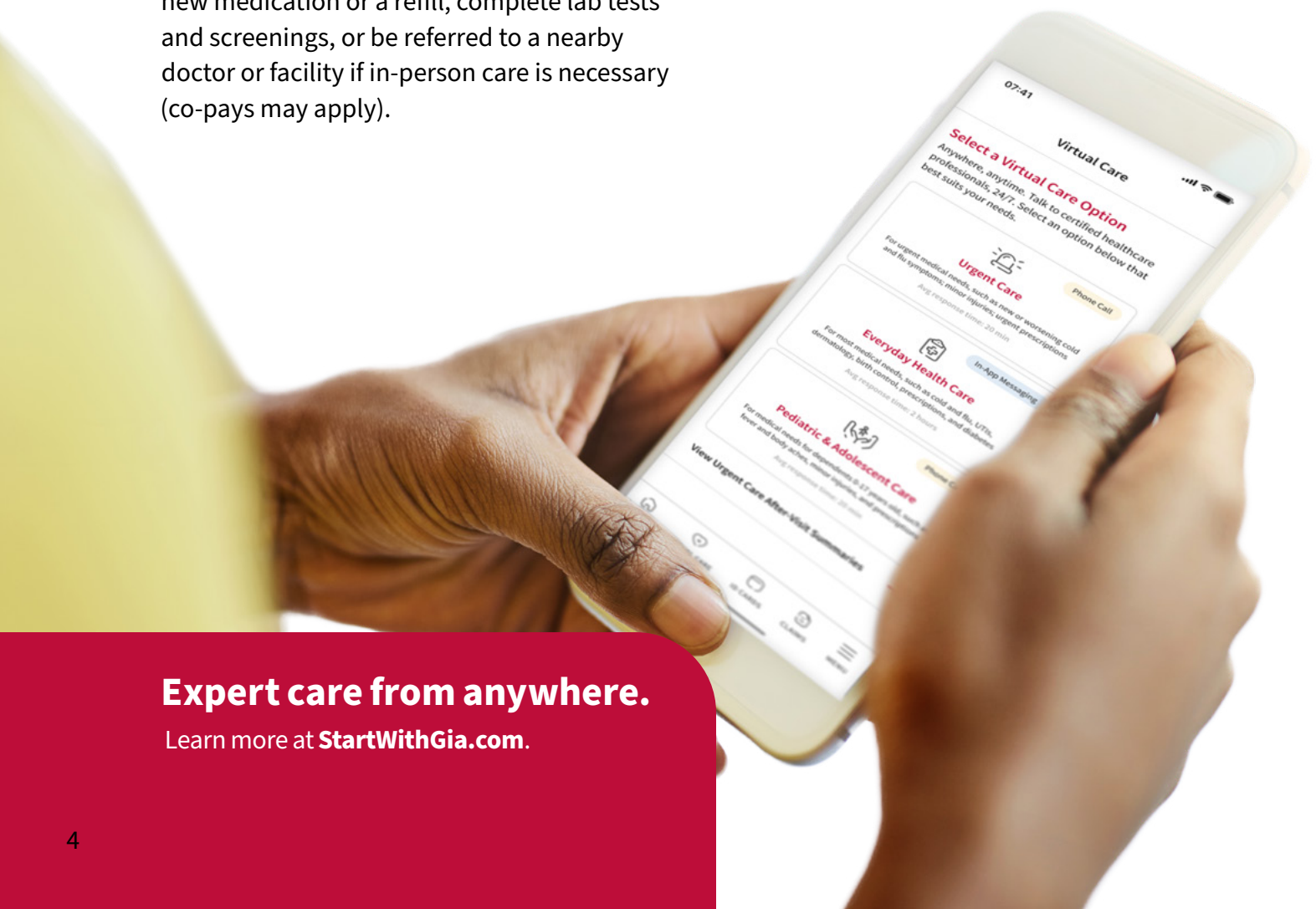
Life is full of adventures. And whether your next adventure takes you up a mountain or up that extra set of stairs, take the *Gia*® by MVP mobile app along. Available 24/7, Gia gives you access to immediate or same-day virtual care, support to get healthier, access to plan information, and answers to medical questions whenever and wherever you need it.

A Guide to Your Health

Gia connects you with a doctor in minutes for \$0 virtual care services, available by text, video, or phone call. Get help with an urgent or emergent care need, or ask questions about a chronic condition or other medical concern. With Gia, you can even request a new medication or a refill, complete lab tests and screenings, or be referred to a nearby doctor or facility if in-person care is necessary (co-pays may apply).

A Guide to Your Health Plan

Gia connects you to your MVP health plan, too. Access to your ID cards, claims, a wide network of doctors and facilities, and monthly premium bills are right in your pocket.



Expert care from anywhere.

Learn more at StartWithGia.com.

Access to health care, when and where you need it.

No matter where you are or where you go, MVP Medicare Advantage plans give you the freedom and flexibility to get the expert care you need.



Extensive Regional Network

Through the comprehensive MVP Medicare provider network, you have access to your choice of a combined total of more than 54,000 hospitals, doctors, and other health care professionals across New York and Vermont, and in additional areas.



Nationwide Coverage

All plans include coverage for non-emergency care from Medicare providers anywhere in the U.S. for allergy shots, physical therapy, maintenance lab work, and more. Not all services are covered out-of-network, and you may pay more for care received from non-contracted providers.



Worldwide Emergency and Urgent Care

You are covered anywhere in the world for emergency room care, urgently needed care, or emergency hospitalization.

To confirm that your provider is in the MVP network, go to **mvphealthcare.com/findadoctor**, then choose *Medicare* from the list of plan names. Or call the MVP Medicare Team at **1-800-324-3899**.

Extra support managing your health.

From everyday health concerns to ongoing health issues, MVP Medicare Advantage plans offer guidance and support with experts, special resources, and programs to help you achieve your best life.

Care Guides

Our expert Care Guides are your resource for personalized support with your MVP Medicare Advantage plan. They are available to help you understand and take full advantage of your benefits, get the right care, and have the support to help you stay well or manage ongoing health care.

Your Care Guide can listen to your individual needs and help you navigate your complete health care experience, from managing prescriptions, coordinating prior authorizations, scheduling appointments, or addressing a chronic or new health condition.

By working with a Care Guide, you're ready to get the most out of your plan from the first day of coverage!

Meal Delivery

For extra help when returning home after an inpatient hospital stay, MVP offers free meal delivery in partnership with Mom's Meals®, to assist with nutritional support during your recovery. You will receive 14 refrigerated meals delivered directly to your home, at no cost! Meals can be tailored to suit dietary and condition-specific needs.

Health and Care Management Programs

Support is available for common situations, like returning home from a hospital stay, help quitting smoking, or understanding a health condition. Free health management programs are available for members living with a number of chronic health conditions:

- Asthma
- Chronic Obstructive Pulmonary Disorder (COPD)
- Diabetes
- Heart Disease
- Heart Failure
- Mental Health Concerns
- Low Back Pain

Support for Members Managing Diabetes

MVP Medicare Advantage plans include tailored support and benefits to assist members living with diabetes follow their treatment plan and save money. Diabetic supplies from OneTouch, FreeStyle, Precision, and Prodigy brands are covered at no co-pay. Also, plan-covered insulin drugs are not subject to Part D deductibles and are covered at a maximum \$35 co-pay, or their Tier co-pay, whichever is less.

In addition, members managing diabetes have a \$0 co-pay for routine podiatry visits to address preventive foot care services.

Support for Members Living with Hypertension

To help members living with hypertension (high blood pressure or HBP) monitor their blood pressure, plans offer a home blood pressure cuff at no cost. Choose from two available models.

Joint Replacement Recovery

MVP Medicare Advantage plans offer members living with rheumatoid or osteoarthritis additional support when recovering from a joint replacement surgery. A number of commonly needed personal assistance devices are available at no cost. These items are recommended by a team of orthopedists and physical therapists to help lower the risk of falls and post-surgery injury.

An MVP Case Manager will work with you to determine your specific needs.

Support for Members Recovering from a Stroke

Individuals who have suffered a stroke may be at risk for falling more frequently. To help prevent falls in daily life, members who have had a stroke can get up to \$250 of select at-home bathroom safety and assistance devices at no additional cost to you. Covered items include grab bars, raised toilet seats, shower chairs, and more on the plan's approved list of covered items.



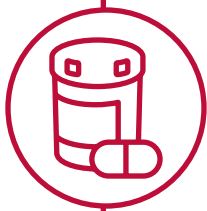
Understanding Part D prescription drug coverage.

MVP Medicare Advantage plans include Part D prescription drug coverage, making it easy and convenient to manage your prescription needs and expenses with one health plan.



1. Start with the Formulary

The MVP Medicare Part D Formulary is the list of medications covered by the plan. Go to mvphealthcare.com/PartDFormulary to find the most current list of drugs, their costs, and details on coverage. Look for your medication in the alphabetical index or refer to the Table to Contents to search by medical condition.



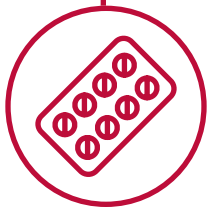
2. Check the List of \$0 Preferred Generic Drugs

Tier 1 of the Formulary, Preferred Generic Drugs, covers commonly used generic medications **at no cost**. Talk to your doctor to see if these medications may be right for you. (See the list on the following page.)



3. Find a Nearby Pharmacy

You have access to thousands of pharmacies, including all major pharmacy chains. Show your MVP Member ID card any time you fill a prescription. Prescriptions filled at non-contracted pharmacies are covered only in certain situations.



4. Save with Free Home Delivery

Save on prescriptions you take regularly with the CVS Caremark Mail Service Pharmacy. Get a three-month supply of medication for the cost of two months, shipped to your home for free.

Help With Drug Costs

You may be eligible for certain state and federal programs that reduce your monthly prescription drug premium or co-pays.

Low Income Subsidy

To see if you qualify, call **1-800-MEDICARE (1-800-633-4227)** 24/7. Or call the Social Security Office at **1-800-772-1213** Monday–Friday, 8am–7pm (TTY: 1-800-325-0778). You can also call your state Medicaid office.

New York State EPIC

(Elderly Pharmaceutical Insurance Coverage)
1-800-332-3742 (TTY: 1-800-290-9138)
Monday–Friday, 8:30 am–5 pm Eastern Time

To learn more about the MVP Formulary and Part D coverage, go to **mvphealthcare.com/PartD**.

\$0 Preferred Generic Drugs

Blood Pressure

amlodipine
atenolol/
chlorthalidone
atenolol
benazepril/
hydrochlorothiazide
benazepril
bisoprolol fumarate/
hydrochlorothiazide
bisoprolol fumarate
carvedilol
enalapril maleate/
hydrochlorothiazide
enalapril maleate
fosinopril sodium
fosinopril/
hydrochlorothiazide
furosemide
hydrochlorothiazide
indapamide

irbesartan
irbesartan/
hydrochlorothiazide
lisinopril/
hydrochlorothiazide
lisinopril
losartan potassium
losartan potassium/
hydrochlorothiazide
metoprolol ER
metoprolol/
hydrochlorothiazide
metoprolol tartrate
moexipril
propranolol
quinapril/
hydrochlorothiazide
quinapril
ramipril
spironolactone
spironolactone/
hydrochlorothiazide

telmisartan
trandolapril
triamterene/
hydrochlorothiazide
valsartan
valsartan/
hydrochlorothiazide

Osteoporosis

alendronate sodium
35 mg and 70 mg tabs

High Cholesterol

atorvastatin tabs
ezetimibe tabs
ezetimibe/
simvastatin tabs
lovastatin tabs
pravastatin tabs
rosuvastatin tabs
simvastatin tabs

Diabetes

glimepiride tabs
glipizide tabs
glipizide ER tabs
glipizide XL
metformin tabs
metformin ER
tabs (generic
Glucophage XR only)

Thyroid

euthyrox tabs
levothyroxine tabs
levothyroxine caps
np thyroid tabs

Acid Reflux

omeprazole 10 mg,
20 mg and 40 mg caps
pantoprazole 20 mg
and 40 mg tabs

This is not a complete list. For a complete listing, please call the MVP Medicare Team at **1-800-324-3899** (TTY 711), or visit **mvphealthcare.com/PartDFormulary**.

Be confident in your Medicare plan choice.

Choosing a health plan is about finding the right option that addresses your individual needs. Here are a few things to consider as you review your choices.

- ✓ Check the network for your current doctors, hospitals, pharmacy, and other service providers
- ✓ Understand how your prescriptions will be covered
- ✓ Think about what extra benefits you need, like dental or eyewear, or access to health care while away from home
- ✓ Look for other value and savings, like allowances to spend on health-related items and free fitness memberships



See how the value adds up.

Get more information with a personalized plan recommendation based on your expected health care and prescription needs. Plus, explore valuable extras included with MVP Medicare Advantage plans.

Scan the QR code with your smartphone. Or visit **bestplanforme.mvphealthcare.com**.

Your Medicare Member Rights

MVP Health Care encourages members to learn about and exercise their rights and responsibilities, including timely access to covered services, privacy protections, and the right to make decisions about health care. Visit **mvphealthcare.com** and select *Privacy Practices & Compliance*, then *Medicare Member Rights and Responsibilities*, or refer to Chapter 8 of your plan's Evidence of Coverage.

MVP Medicare Advisors are here to help.

MVP Medicare Advisors are your partner, offering guidance and advice so you can feel confident about your choices and make a smooth transition to your MVP Medicare Advantage plan. We'll be here for you every step of the way—before, during, and after you enroll—to make Medicare work for you.

Experience what it's like to be a Most Valuable Person. Because around here, everyone's our MVP.

Meet with us!

Discuss your health care needs one-on-one, or join us for a group Medicare Seminar to learn more about plan offerings.

1-800-324-3899 TTY 711

October 1–March 31,
seven days a week,
8 am–8 pm Eastern Time

April 1–September 30,
Monday–Friday, 8 am–8 pm

95%

The percentage of new members who spoke to an MVP Medicare Advisor found the conversation “very or extremely valuable” when considering their Medicare plan options!

**2023 MVP Medicare New Member survey*



Medicare Advantage Glossary of Terms

Catastrophic Coverage—A stage in the Part D drug benefit during which you pay a lower co-payment or co-insurance for your prescription drugs. You enter Catastrophic Coverage after what you have spent for covered drugs during the year reaches a set limit.

Co-Payment—An amount you may be required to pay as your share of the cost for a medical service or supply, like a doctor's visit or prescription. A co-payment is usually a set amount, rather than a percentage. For example, you might pay \$20 for a doctor's visit.

Coverage Gap—A stage in the Part D drug benefit when your prescription drug cost sharing changes until you spend enough to qualify for catastrophic coverage. The coverage gap (also called the "donut hole") starts when you and your plan have paid a set dollar amount for prescription drugs during that year.

Deductible—The amount you must pay for health care or prescriptions before Original Medicare, your prescription drug plan, or your other insurance begins to pay.

Low Income Subsidy (LIS)—Medicare beneficiaries who meet income and asset qualifications may be eligible for Extra Help with the costs of their prescription drugs. This program is also known as LIS, or the Part D Low Income Subsidy. The Social Security Administration and the federal Medicare program work together to provide the LIS benefit.

Medicare Advantage Plan—Medicare Advantage plans, sometimes called "Part C" or "MA Plans," are offered by private companies approved by Medicare. Medicare pays these companies to cover your Medicare benefits. If you join a Medicare Advantage plan, the plan will provide your Medicare Part A (Hospital Insurance) and Medicare Part B (Medical Insurance) coverage. Medicare Advantage plans often include Part D prescription drug coverage as well.

Network—A group of medical professionals, hospitals, and other facilities that contract with a health plan to provide care to the plan's members.

Out-of-Network—Coverage from providers who do not have a contract with your health plan. In some cases, it may cost you more for out-of-network services.

Out-of-Pocket Costs—Health or prescription drug costs that you must pay on your own because they aren't covered by Medicare or other insurance.

Out-of-Pocket Maximum—A predetermined limited amount of money that an individual must pay, before an insurance company or (self-insured employer) will pay 100% for an individual's covered health care expenses.

Premium—What you pay, usually monthly, for health and/or prescription drug coverage.

TrOOP—TrOOP (True Out-Of-Pocket) costs are the expenses that count toward your Medicare drug plan out-of-pocket expenses—up to \$8,000 in 2024. These costs determine when your catastrophic coverage will begin.



Let's talk!

**Speak with an MVP Medicare Advisor to
get started.**

Call 1-800-324-3899 TTY 711

October 1–March 31, seven days a week, 8 am–8 pm Eastern Time
April 1–September 30, Monday–Friday, 8 am–8 pm

Or visit mvphealthcare.com/medicare

Learn about our plans, watch videos, or
request a personal consultation.



MVP Health Plan, Inc. is an HMO-POS/PPO organization with a Medicare contract. Enrollment in MVP Health Plan depends on contract renewal. Out-of-network/non-contracted providers are under no obligation to treat MVP Health Plan members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services. For accommodations of persons with special needs at meetings call, 1-800-324-3899 (TTY 711).

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MVP virtual care services through Gia are available at no cost-share for most members. In-person visits and referrals are subject to cost-share per plan.

The benefits mentioned are part of special supplemental benefits for MVP Health Plan Medicare Advantage plan members living with diabetes, hypertension, or are recovering from a stroke. The diagnosis must be in your patient record and be confirmed by the Centers for Medicare & Medicaid Services (CMS). Not all plan members qualify.

You're our MVP. Right from the start!

Whether you're new to Medicare or new to MVP Health Care[®], we're working to ensure you have a smooth transition to your MVP Medicare Advantage plan.

What to Expect Once You Enroll

- ✓ **You'll receive a Simple Guide and MVP Member ID card.** Your Simple Guide is a brief overview of how to utilize your plan benefits. Your MVP Member ID card is the key to your plan. You should bring it with you every time you see a provider, and use it to set up your MVP Member online account. You'll receive your Simple Guide and MVP Member ID card within 10 days of your enrollment.
- ✓ **A member of our Care Guide team will call you** to welcome you to MVP and answer questions about your plan or plan benefits. Care Guide calls will begin within 10 days of your plan effective date.
- ✓ **You'll receive your Benefits MasterCard[®] Prepaid Card** in the mail from NationsBenefits. This card will be used for your quarterly over-the-counter allowance and will come with activation instructions. Visit mvp.nationsbenefits.com for more information.
- ✓ **You'll receive your LIBERTY Dental Plan card.** Use this card whenever you see a dentist. Your LIBERTY Dental Plan card will arrive in the mail within 10 days of your effective enrollment date.

What You Can Do in the Meantime

- ✓ **Confirm your doctors are in the MVP network.** Visit mvphealthcare.com/find-care and select *Find a Doctor*. Enter your zip code and select *Medicare* from the list of plan names.
- ✓ **Review any of your prescriptions** to make sure they are covered in the MVP Medicare Part D Formulary. Visit mvphealthcare.com/PartDFormulary to begin your search.
- ✓ **Download the *Gia*[®] by MVP mobile app on your smartphone or tablet.** *Gia* offers 24/7 immediate or same-day virtual care and answers to medical questions, whenever and wherever you need it. You can complete the registration process once you receive your MVP Member ID card.
- ✓ Visit mvphealthcare.com/MedicareDentist to confirm your dentist is part of the LIBERTY dental network.

Questions?

We're here to help. Call **1-800-324-3899** (TTY 711) to speak with an MVP Medicare Advisor, seven days a week, 8 am–8 pm Eastern Time. April 1–September 30, call Monday–Friday, 8 am–8 pm.

MVP Health Plan, Inc. is an HMO-POS/PPO organization with a Medicare contract. Enrollment in MVP Health Plan depends on contract renewal.

MVP virtual care services through Gia are available at no cost-share for most members. In-person visits and referrals are subject to cost-share per plan. Members enrolled in a Medicare prescription drug plan without additional MVP medical coverage do not have access to MVP virtual care services through Gia.

The Benefits Mastercard® Prepaid Card, is issued by The Bancorp Bank, N.A., Member FDIC, pursuant to license by Mastercard International Incorporated. Mastercard and the circles design are registered trademarks of Mastercard International Incorporated. Card can be used for eligible expenses wherever Mastercard is accepted. Valid only in the U.S. No cash access.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-844-946-8010 (TTY 711).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-844-946-8010 (TTY 711)。

Pre-Enrollment Checklist

Before making an enrollment decision, it is important that you fully understand our benefits and rules.

Visit mvphealthcare.com/plandocuments or call **1-800-324-3899** (TTY 711) to view a copy of any of the documents mentioned below.

Understanding the Benefits

- ☐ Review the full list of benefits found in the Evidence of Coverage (EOC), especially for those services that you routinely see a doctor.
- ☐ Review the provider directory (or ask your doctor) to make sure the doctors you see now are in the network. If they are not listed, it means you will likely have to select a new doctor.
- ☐ Review the pharmacy directory to make sure the pharmacy you use for any prescription medicines is in the network. If the pharmacy is not listed, you will likely have to select a new pharmacy for your prescriptions.
- ☐ Review the Medicare Part D Formulary to make sure the drugs you currently take are covered, and determine if there are any restrictions. If your drug(s) are not listed or if there are additional requirements or limits on coverage, the Medicare Part D Formulary will also provide additional guidance on how you can ask MVP to make an exception to our rules.

Understanding Important Rules

- ☐ In addition to your monthly plan premium, you must continue to pay your Medicare Part B premium. This premium is normally taken out of your Social Security check each month.
- ☐ Benefits, premiums, and/or co-payments/co-insurance may change on January 1, 2025.
- ☐ You may see providers outside of our network (non-contracted providers), however, you may pay a higher co-payment or co-insurance for services received by non-contracted providers. Out-of-network services for non-contracted providers are limited for HMO-POS plans. PPO members can utilize non-contracted providers. Urgent and emergent services are covered worldwide across all plans.
- ☐ **Effect on your current coverage**—if you are currently enrolled in a Medicare Advantage plan, your current Medicare Advantage health care coverage will end once your new Medicare Advantage coverage starts. If you have Tricare, your coverage may be affected once your new Medicare Advantage coverage starts. Please contact Tricare for more information. If you have a Medigap plan, once your Medicare Advantage coverage starts, you may want to drop your Medigap policy because you will be paying for coverage you cannot use.

Continued on other side ➞

For MVP DualAccess (HMO D-SNP) Plans

These are dual eligible needs plans (D-SNP). Your ability to enroll will be based on verification that you are entitled to both Medicare and medical assistance from a state plan under Medicaid.

MVP Health Care® restricts D-SNP enrollment to individuals who are deemed fully dual eligible by New York State.

Questions?

Call an MVP Medicare Advisor at **1-800-324-3899** (TTY 711), seven days a week, 8 am–8 pm Eastern Time. April 1–September 30, call Monday–Friday, 8 am–8 pm.