

MVP Health Care Announces New UVM Health Advantage Plans

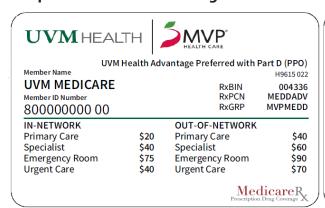
MVP Health Care® (MVP) has partnered with The University of Vermont (UVM) Health Network to co-create a unique doctor-guided Medicare Advantage plan to meet the specific health care needs of older adults in Vermont and northern New York called: UVM Health Advantage.

UVM Health Advantage Select, UVM Health Advantage Secure, and UVM Health Advantage Preferred are Medicare Advantage PPO plans that will utilize the existing MVP PPO network, meaning Providers that participate in MVP's current Medicare Advantage network will be in-network for these Members. Members are not limited to UVM Health Network providers.

Highlights of these new plans include:

- Plan options are offered with **Part D** prescription drug coverage.
- Members have a limit on how much they must pay out-of-pocket each year for medical services that are
 covered under Medicare Part A and Part B. When a Member reaches the maximum out-of-pocket
 payment amount, they will not have to pay any out-of-pocket costs for the remainder of the calendar year for
 covered Part A and Part B services. Prescription Part D Drugs, Routine Eyewear, Preventive Dental, and Hearing
 Aids do not apply to the out-of-pocket maximum.
- Members are <u>not</u> required to select a Primary Care Provider (PCP).
- Tailored support and benefits for patients living with **diabetes**, including: \$0 co-pay for routine podiatry visits; low-cost orthotics and diabetic shoes (only 5% co-insurance); \$0 Freestyle, OneTouch, Precision, or Prodigy glucometer and related supplies; and a free home health kit sent to the Member.
- Tailored support and benefits for members living with **heart disease**, including: \$0 co-pay for cardiology specialty care office visits; \$0 for all phases of cardiac rehab; free home health kit including digital blood pressure cuff and digital pulse oximeter; and 12 weeks of home-delivered meals following congestive heart failure diagnosis.
- Access to a UVM Health Advantage **Plan Guide** to help Members understand their options, find the right plan, and make sure their transition to the new plan goes smoothly with no disruption of care.
- Access to a UVM Health Advantage **Care Guide** to help Members understand their diagnosis and treatment plan while assisting Members in accessing their full benefits.

Sample UVM Health Advantage Plan Member I.D. Cards



For plan information, sign in at mvphealthcare.com Medicare Customer Care Center: 1-800-665-7924 TTY: 1-800-662-1220 Pharmacy Info: 1-866-494-8829 | TTY 711

Provider Services Department: 1-800-684-9286 Pharmacists | CVS/caremark®: 1-800-364-6331 mvphealthcare.com/providers

 Send Claims to:
 Prescription Claims to:

 MVP Health Plan, Inc.
 Prescription Claims to:

 625 State Street
 CVS Caremark®

 P.O. Box 2207
 P.O. Box 52066

 Schenectady, NY 12301-2207
 Phoenix, AZ 85072-2066

MVP will pay Medicare providers according to Medicare fee schedule. Medicare Limiting Charges apply to non-contracted providers and out-of-network services. DO NOT bill Original Medicare.

MVP is currently accepting enrollment for its new UVM Health Advantage plans for coverage beginning January 1, 2022. To learn more about these new plans, visit **UVMHealthAdvantage.com.**

To receive future FastFax messages by email, go to **mvphealthcare.com/provideremail**

To view all communications, visit mvphealthcare.com/FastFax

Questions? Contact your MVP Professional Relations Representative or call the MVP Customer Care Center for Provider Services at 1-800-684-9286.

