

MVP Medicare Advantage Plans Benefits at a Glance 2022



Vermont and Northern New York

Vermont: Addison, Bennington, Caledonia, Chittenden, Essex, Franklin, Grand Isle, Lamoille, Orange, Orleans, Rutland, Washington, Windham and Windsor counties

New York: Clinton, Essex, Franklin, Hamilton and St. Lawrence counties

MVP® Medicare WellSelect® with Part D (PPO)

MVP Medicare Secure Plus with Part D (HMO-POS)

Monthly premium May be lower with NYS EPIC and/or Low Income Subsidy assistance. You must continue to pay your Part B premium.

	\$0	\$90
Doctor visits (IN = In-network providers, OUT = out-of-network providers)		
Primary care	IN \$0 co-pay / OUT \$60 co-pay	\$0 co-pay
Specialist No referrals!	IN \$45 co-pay / OUT \$60 co-pay	\$40 co-pay
Mental health specialist	IN \$40 co-pay / OUT \$60 co-pay	\$40 co-pay
MVP virtual care services	\$0 co-pay	\$0 co-pay
Routine eye exams	IN and OUT \$0 co-pay	\$0 co-pay
Routine hearing exams	IN \$0 co-pay / OUT \$60 co-pay	\$0 co-pay
Chiropractic	IN \$15 co-pay / OUT \$20 co-pay	\$10 co-pay
Outpatient physical, speech, and occupational therapy	IN \$30 co-pay / OUT \$60 co-pay	\$20 co-pay
Cardiac rehabilitation	IN \$0 co-pay / OUT \$60 co-pay	\$0 co-pay
Emergency care		
Emergency room care Worldwide coverage	\$90 co-pay	\$90 co-pay
Urgently needed care Worldwide coverage	\$65 co-pay	\$50 co-pay
Ambulance (ground)	\$200 co-pay	\$175 co-pay
Out-of-network coverage		
Non-urgent and non-emergency services and admissions Some services excluded	\$60 co-pay office visits, 40% co-insurance other	30% co-insurance, MVP pays 70%, up to \$4,000 per year
Hospital, surgery, and rehabilitation services Skilled nursing facility care at a post-acute rehabilitation center is covered for all plans.		
Inpatient hospital stays Emergency admissions covered worldwide	IN \$385 per day for days 1–5, \$0 per day for days 6+ / OUT 40% co-insurance	\$350 per day for days 1–5, \$0 per day for days 6+
Observation stays Not inpatient admission	IN \$350 / OUT 40% co-insurance	\$300 co-pay
Outpatient hospital/ ambulatory surgical center (same day surgery)	IN \$350 / \$225 co-pay / OUT 40% co-insurance	\$300 co-pay / \$175 co-pay
Diagnostic services Office visit co-pay may apply.		
Outpatient x-ray (radiology)	IN and OUT \$60 co-pay	\$40 co-pay
Outpatient CT scans, PET scans, and MRIs	IN \$150 co-pay / OUT 40% co-insurance	\$150 co-pay
Lab	IN \$0 co-pay / OUT 40% co-insurance	\$0 co-pay
Diagnostic procedures	IN \$20 co-pay / OUT 40% co-insurance	\$10 co-pay
Maximum out-of-pocket protection The most you pay for covered medical services in a calendar year (does not include Part D drug costs). If you reach the maximum amount, MVP pays 100% of the cost of covered services, including Part B drugs, through December 31.		
	IN only \$7,550 / IN and OUT combined \$11,300	\$7,550

Questions? Call **1-800-324-3899** (TTY: 1-800-662-1220) or visit **JoinMVPmedicare.com**. Email **ShopMVPMedicare@mvphealthcare.com**.
 Seven days a week, 8 am–8 pm Eastern Time. April 1–September 30, Monday–Friday, 8 am–8 pm

Benefits and Extras

MVP is committed to helping you along your path to better health. Our Medicare Advantage plans include valuable benefits, wellness programs, and extra support to help you live healthy and stay well.



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MVP Medicare Secure Plus with Part D (HMO-POS)

Preventive dental Two cleanings, two exams, and two sets of x-rays per year, covered up to the maximum benefit amount for each service. You can choose to add even more dental coverage to meet your needs, for services like root canals, crowns, and partial dentures—for \$25 per month!

Hearing aids	\$699 or \$999 co-pay per hearing aid	\$699 or \$999 co-pay per hearing aid
Eyewear allowance	\$150 per year	\$175 per year
Over-the-counter allowance	Not covered	\$25 per quarter
Transportation to medical appointments	Not covered	Not covered
Preferred diabetic supplies (OneTouch, FreeStyle, Precision, Prodigy)	\$5 co-pay	\$0 co-pay

MVP virtual care services \$0 co-pay for emergency, urgent, and everyday health care, mental health and psychiatry, physical therapy, and nutrition support. All from your smartphone, phone, tablet, or computer.

Mom's Meals 14 free refrigerated meals after an in-patient hospital stay discharge.

Gia—Your 24/7 health care connection. Gia expertly assesses your health needs and quickly refers you the right care. Access MVP's free virtual care services, or when necessary, get referred to in-person care (co-pays may apply).

Refer to the MVP Medicare Advantage 2022 Health Plans brochure for more information about these benefits. Or visit JoinMVPMedicare.com/extrabenefits.

MVP Living Well Advantage: Free programs, benefits, and memberships—available on all plans!

- SilverSneakers® membership
- Up to \$200 in WellBeing Rewards
- Living Well in-person and virtual classes
- ChooseHealthy® discounts
- Medication Therapy Management Program
- Diabetes Prevention Program
- Case Management

MVP Health Care complies with applicable Federal civil rights laws and does not discriminate on the basis 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: 1-800-662-1220). 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: 1-800-662-1220). 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/MSA 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. Virtual care services from MVP Health Care are provided by UCM Digital Health, Amwell, and Physera at no cost-share for members. (Plan exceptions may apply.) Members' direct or digital provider visits may be subject to co-pay/cost-share per plan. SilverSneakers is a registered trademark of Tivity Health, Inc. SilverSneakers On-Demand is a trademark of Tivity Health, Inc. ©2021 Tivity Health, Inc. All rights reserved.

MVP Medicare Advantage Plans Part D 2022

MVP® Medicare WellSelect® with Part D (PPO)

Deductible: \$300 Tiers 3–5

Initial Coverage: 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	Tier 1 \$0
Tier 2 \$12 no deductible	Tier 2 \$15
Tier 3 \$47 after deductible	Tier 3 \$45
Tier 4 25% after deductible	Tier 4 27%
Tier 5 27% after deductible	Tier 5 33%

Coverage Gap: If your total drug costs in 2022 reach \$4,430, your cost for prescription drugs changes. You pay:

25% for generic drugs and **25%** for contracted brands

Tier 1 **\$0**
Tiers 2–5 **25%** for generic drugs and **25%** for contracted brands

Catastrophic Coverage: If your true out-of-pocket costs reach \$7,050, your cost for prescriptions is reduced. You pay the greater of 5% or \$3.95 for generics and \$9.85 for brand-name drugs.

Please note: Drugs purchased outside the U.S. are not Medicare approved and are not covered.