

Medicare Advantage

*CareSource Dual Advantage™
(HMO D-SNP)*

Ohio 2022



Welcome!

Thank you for considering
CareSource Dual Advantage!

Selecting the **Medicare Advantage plan** that is right for you is a very important decision for your peace of mind and health.

Our goal today:

Help you by sharing the information you need so you can make an **informed decision** about your health care needs.



CareSource

Our Vision

Transforming lives through
innovative health and life services.

It's not just about making a change.
It's about making a ***difference***.

Our Mission

To make a lasting difference in our members' lives by improving their health and well-being.



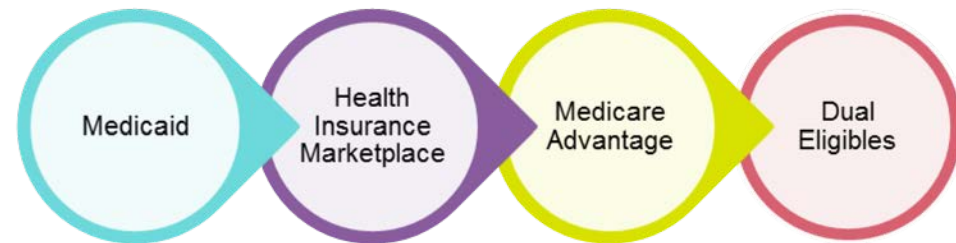
ABOUT US

A nonprofit health plan and national leader in Managed Care

32-year history of serving varied populations across multiple states and insurance products

Currently serving over 2.1 million members* in Georgia, Kentucky, Ohio, Indiana, Arkansas and West Virginia

4,500 employees located across 30 states



2.1M+
members



**Based on members enrolled in all CareSource product lines across all states as of 7/13/2021*

Today's Discussion

Today we will review the following topics to provide additional information about your Medicare options, including:

- Medicare eligibility
- ABCDs of Medicare
- Accessing your care
- CareSource Dual Advantage benefits
- How to enroll
- What to expect (after you enroll)



About Me

MY EXPERIENCE

- My background and expertise
- My personal mission

As a Licensed Sales Agent:

- I do not represent the government, Medicare or Medicaid.
- I may be compensated based on your enrollment.
- I want you to know that you are under no obligation to join a plan.

Let's Learn More About You

What **type** of plan do you have now?

What do you **like** about your coverage?

What would you **add** to your current coverage to make it ideal for you?

Have you assigned a **power of attorney** to someone to assist you with making health care decisions?



Medicare Eligibility

GENERALLY, MEDICARE IS AVAILABLE FOR:

- People age 65 or older who have worked 40 quarters or 10 years
- Certain people with disabilities
- People with End-Stage Renal Disease (e.g., permanent kidney failure requiring dialysis or transplant)



CareSource Dual Advantage Eligibility

- Eligible for Medicare Parts A & B
- Specific levels of Medicaid eligibility (Qualified Medicare Beneficiary, Qualified Medicare Beneficiary+, Full Benefit Dual Eligibles)
- Live in our service area



ABCDs of Medicare

Original Medicare



Service Area

Covered Counties:

Adams, Allen, Ashland, Athens, Auglaize, Brown, Butler, Carroll, Champaign, Clark, Clermont, Clinton, Columbiana, Coshocton, Crawford, Cuyahoga, Darke, Defiance, Delaware, Erie, Fairfield, Fayette, Franklin, Fulton, Gallia, Geauga, Greene, Guernsey, Hamilton, Hancock, Hardin, Harrison, Henry, Highland, Hocking, Holmes, Huron, Jackson, Jefferson, Lake, Lawrence, Licking, Logan, Lorain, Lucas, Madison, Mahoning, Marion, Medina, Meigs, Mercer, Miami, Monroe, Montgomery, Morgan, Morrow, Muskingum, Noble, Ottawa, Paulding, Perry, Pickaway, Pike, Portage, Preble, Putnam, Richland, Ross, Sandusky, Scioto, Seneca, Shelby, Stark, Summit, Trumbull, Union, Van Wert, Vinton, Warren, Washington, Wayne, Williams, Wood, Wyandot






Dual Advantage

You deserve more than just
basic Medicare...
more benefits,
more savings,
more care.




Why CareSource Dual Advantage?

- Combines benefits of Medicare and Medicaid into a single plan
- Adds extra benefits Original Medicare and Medicaid don't provide
- New CareSource member ID card simplifies and improves member experience

**CareSource Dual Advantage™**
(HMO D-SNP)

Member Name: <John Doe>
Member ID#: <12345678900>
Medicaid ID#: <12345678900>
Health Plan: 80840 **Payer ID:** <XXXXX>
Primary Care Provider/Clinic Name: <Good, I Am A.>
Provider/Clinic Phone: <XXX-XXX-XXX>

Effective Date: <01/01/2021> **<OH>**


RxBIN - 610014
RxPCN - MEDDPRIME
RxGrp - RXINN02

PROVIDERS: Do **NOT** bill member.
Copays:
Office: <\$XX.XX> **ER:** <\$XX.XX>
Spec: <\$XX.XX> **UrgCare:** <\$XX.XX>

MedicareRx
Prescription Drug Coverage
CMS: <XXXXX-XXX>

CareSource.com/Medicare

This card does not guarantee coverage. To verify benefits, view claims, or find a provider, use the website or call:

MEMBERS: 1-833-230-2020 TTY: 711

24/7 Nurse Advice Line:

<X-XXX-XXX-XXXX>

Vision Benefits:

EyeMed 1-866-299-1425

Hearing Benefits:

TruHearing 1-833-759-6826

Medical Claims:

CareSource
P.O. Box 8730
Dayton, OH 45401-8730

Providers:

1-833-230-2176

Dental Network:

DentaQuest <X-XXX-XXX-XXXX>

Pharmacy:

<X-XXX-XXX-XXXX>

Pharmacy Claims:

Express Scripts
ATTN: Medicare Part D
P.O. Box 14718
Lexington, KY 40512-4718

PROVIDERS: Do **NOT** bill member. Please submit Medicare claims to the plan. Please bill Medicaid for any remaining charges.



\$0 Copay Covered Benefits



Primary Care Provider
(PCP) / Specialist Office
Visits



Home Health Care



Inpatient Hospital Care



Ambulance Services



Emergency Room Visits



Durable Medical Equipment



Urgent Care Visits



Telehealth PCP Visit



Preventive Care



Annual Physical



Telehealth



Thinking of going to the emergency room (ER) or urgent care center for a non-emergency health issue? Think about using CareSource's telehealth benefit! Simply speak to or see a U.S. board certified doctor using your computer, tablet, or mobile device.

Telehealth is available with all CareSource Medicare Advantage plans.



\$0 Copay Extra Benefits

CareSource Dual Advantage also includes the following extra services (still no cost to you!) to help you live your best life:



\$3,000 annual limit for preventive and comprehensive dental care including inlays, outlays and crowns



Routine vision exam, \$380 allowance for glasses and/or contacts



60 one-way (or 30 round trips) to medical appointments



Two meals per day for two weeks after an inpatient hospital stay



Personal Emergency Response System (PERS)



Mail order and/or debit card; \$350 quarterly over-the-counter (OTC) pharmacy allowance



Routine hearing test and one hearing aid per ear per year (\$1000 annual max per ear)



Membership at participating fitness centers and home fitness kit (some kits include a wearable fitness tracker).



BrainHQ online brain health improvement tool



My CareSource Rewards® offers members an opportunity to earn rewards for completing healthy activities.



BrainHQ Brain Health



BrainHQ® provides the exercise your brain needs to be at its sharpest. Think of it as a personal gym where you exercise your memory, attention, brain speed, people skills, navigation, intelligence and more! With over 30 years of development and research, BrainHQ offers cognitive training that's completely tailored to you. BrainHQ can be accessed using a computer or mobile device.



Prescription Drug Benefits

CareSource Dual Advantage covers most prescription drugs. Make sure all of the drugs you take are on our Preferred Drug List.

Your prescription drug copays will be impacted by the amount of Extra Help you receive.



Prescription Drug Benefits

Drug Tiers	30-day retail*	90-day retail*	90-day mail order*
1	25% coinsurance or applicable LIS copay	25% coinsurance or applicable LIS copay	25% coinsurance or applicable LIS copay
2	Same as Tier 1	Same as Tier 1	Same as Tier 1
3	Same as Tier 1	Same as Tier 1	Same as Tier 1
4	Same as Tier 1	Same as Tier 1	Same as Tier 1
5	Same as Tier 1	N/a	N/a
6*	\$0	\$0	\$0

LIS Level	Drug Type	Cost Sharing
(1) FPL > 100%	Generic Brand	\$3.95 copay \$9.85 copay
(2) FPL < 100%	Generic Brand	\$1.35 copay \$4.00 copay
(3) FPL Institutionalized	Generic Brand	\$0 copay \$0 copay
(4) FPL 135% - 149%	Generic Brand	15% coinsurance 15% coinsurance



**Tier 6 Select Care drugs have a \$0 cost-share during the Initial Coverage stage. As a Medicare beneficiary the cost of your medication could change depending on the pharmacy you choose, days' supply, your Extra Help level and if/when you enter another phase of the Part D benefit.*

What Is Extra Help?

- Help paying for any Medicare drug plan's monthly premium, yearly deductible and prescription copayments.
- People with limited income and resources may qualify for "Extra Help" from Medicare (also known as Low Income Subsidy). Some people automatically qualify for Extra Help and don't need to apply. Medicare mails a letter to people who automatically qualify for Extra Help.
- Haven't received your letter?
We can help!



How To Apply For Extra Help And Medicare Savings Programs

EXTRA HELP

Complete an application with Social Security:

- **Online** at ssa.gov/prescriptionhelp
- **Call** 1-800-772-1213
(TTY: 1-800-325-0778)
Monday – Friday 8 a.m. – 7 p.m.

MEDICARE SAVINGS PROGRAMS

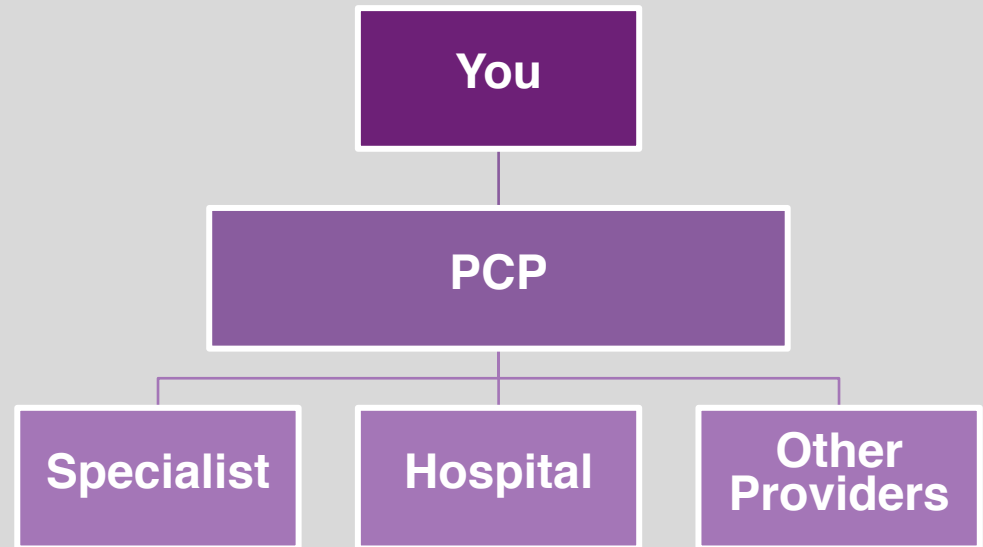
Fill out and hand in a Medicaid application.



Your PCP



You can depend on us to work with your health care providers and pharmacists to maintain your health. You must select a CareSource Advantage in-network primary care provider (PCP) that will coordinate all of your health care needs except for urgent and emergency care and out-of-area dialysis services. This network may differ from the CareSource Medicaid network of providers.



You may change your PCP at any time. Our Member Services team can help you find a new in-network doctor with an office location near you!

Let's Get You Enrolled

with my help today!

COMPLETE AN APPLICATION!

By calling
1-844-607-2830 (TTY: 711)

Online at
CareSource.com/DSNP

Online at
Medicare.gov

In The Next Few Weeks



CareSource will process your application and confirm your eligibility.



Medicare will confirm your enrollment.



You'll receive your confirmation letter or call & Low-Income Subsidy rider (if eligible).



Receive your CareSource member ID card within a few weeks after you enroll.



Your New Member Kit will arrive in the mail.



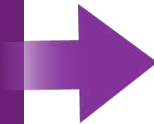
In addition, during the first 90 days of enrollment, you will receive a call from one of our Care Managers from our clinical care team to assist you in completing the Health Needs Assessment (HNA) and ensure you get the care and resources that meet your specific needs. You may also have the opportunity to complete the HNA at the time of enrollment.



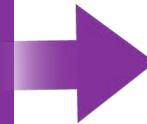
What To Expect

As A New CareSource Dual Advantage Member:

You will receive a Welcome call from a CareSource representative to answer any new questions about your new plan.



Help with scheduling an Annual Wellness Visit with an in-network provider (at no cost to you!) and other preventive screenings, included as part of your plan.



You should expect to hear from our Care Management team within the next 90 days.



CareSource Care Management

CareSource has nurses and other outreach workers on staff who can work with you one-on-one to help coordinate your health care needs. They may contact you by phone.

Our staff is trained to help you with any special medical problems like asthma, cancer, diabetes or other medical conditions. We can also work with you if you need help figuring out when to get medical care from your provider, an urgent care center or the emergency room and more.

- Help completing your Health Needs Assessment (HNA)
- Find community resources
- Schedule provider appointments
- Answer any questions you may have about your plan benefits
- Find specialist providers for you
- Scheduling transportation (rides) so you can get to your appointments



My CareSource[®]

Your Personal Online Account

Get the most out of your member experience.

- ✓ Select or change your PCP
- ✓ Request a new CareSource member ID card
- ✓ View claims and plan details
- ✓ Update your contact information
- ✓ Receive a customized wellness plan
- ✓ And more

Visit [MyCareSource.com](https://www.mycaresource.com) to sign up now! It's fast, easy and secure.

Want to talk to someone instead? Call us at

1-833-230-2020

(TTY: 711)

From Oct. 1 to Mar. 31, seven days a week
8 a.m. – 8 p.m.

From Apr. 1 to Sep. 30, Monday – Friday
8 a.m. – 8 p.m.



Thanks For Your Time
Any Questions?

Here's Where To Find Information:

CareSource.com/DSNP

"Medicare and You" handbook
Medicare.gov

Call us!

1-844-829-6903 (TTY: 711)


CareSource[®]



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

Contact CareSource:

Sales/Enrollment: **1-844-829-6903 (TTY: 711)**

Member Services: **1-833-230-2020 (TTY: 711)**

Hours of operation for both Sales and Member Services:

From October 1 to March 31, seven days a week from 8 a.m. to 8 p.m.

From April 1 to September 30, Monday through Friday from 8 a.m. to 8 p.m.

Or call 1-800-MEDICARE (TTY: 1-877-486-2048), 24 hours a day / 7 days a week.

CareSource complies with applicable state and federal civil rights laws and does not discriminate on the basis of age, gender, gender identity, color, race, disability, national origin, marital status, sexual preference, religious affiliation, health status, or public assistance status. CareSource does not exclude people or treat them differently because of age, gender, gender identity, color, race, disability, national origin, marital status, sexual preference, religious affiliation, health status, or public assistance status.

CareSource provides free aids and services to people with disabilities to communicate effectively with us, such as: (1) qualified sign language interpreters, and (2) written information in other formats (large print, audio, accessible electronic formats, other formats). In addition, CareSource provides free language services to people whose primary language is not English, such as: (1) qualified interpreters, and (2) information written in other languages. If you need these services, please call the member services number on your member ID card.

If you believe that CareSource has failed to provide the above mentioned services to you or discriminated in another way on the basis of age, gender, gender identity, color, race, disability, national origin, marital status, sexual preference, religious affiliation, health status, or public assistance status, you may file a grievance, with:

CareSource
Attn: Civil Rights Coordinator
P.O. Box 1947, Dayton, Ohio 45401
1-844-539-1732, TTY: 711
Fax: 1-844-417-6254

CivilRightsCoordinator@CareSource.com

You can file a grievance by mail, fax, or email. If you need help filing a grievance, the Civil Rights Coordinator is available to help you.

You may also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office of Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW Room 509F
HHH Building Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

