



Medicare Advantage HMO Plans Optima Medicare Value and Optima Medicare Prime

Now serving Williamsburg &
James City County



Chesapeake, Hampton, James City County, Newport News, Norfolk,
Poquoson, Portsmouth, Suffolk, Virginia Beach and Williamsburg



Medicare

- Medicare is a Federal health insurance program for individuals ages 65 or older, have certain disabilities, or have End Stage Renal Disease (permanent kidney failure).
- The Centers for Medicare and Medicaid Services (CMS) is the Federal agency which regulates Medicare and Medicaid.



Medicare

- The Social Security Administration performs the administrative functions for the Medicare program. It provides general information such as developing visual aids, booklets and other information required to inform the public of their rights and responsibilities under the program.

Medicare

- **Medicare Part A** (hospital insurance) mainly covers inpatient care in a hospital, skilled nursing facility, home health care or hospice program.
- Most beneficiaries do not pay for Part A.
- **Medicare Part B** (medical insurance) covers outpatient care, including physician services, diagnostic services, ambulance, certain limited drugs, and durable medical equipment.
- Beneficiaries will pay \$134 for Part B in 2017. Upper income beneficiaries will pay more. (CMS has not yet announced 2018 amounts)



Medicare

- **Medicare Part C** (Medicare Advantage) plans cover Part A and B benefits.
- Private plans contract with CMS to administer Part C plans under contract.
- **Part D** benefits can be provided through:
 - Prescription Drug Plans (PDPs)
 - Medicare Advantage plans with Part D (MA-PD), or
 - Employer sponsored plans that are deemed creditable
- Medicare Advantage plans may include Part D benefits (MA-PD).
- Medicare Advantage plans have uniform premium and cost-sharing amounts, except for limited income subsidy beneficiaries under Part D.



How Part D Works



Premium

- A premium is your monthly cost to maintain coverage. If you choose an Optima Medicare Advantage plan, your Part D premium will be included in the overall premium.

Stage 1 Deductible

- The amount you must pay for your covered prescriptions before your plan begins to pay. Deductibles may apply only to certain types of drugs. The deductible varies from plan to plan and some plans offer no deductible so you get coverage immediately.
- **Optima Medicare (HMO) plan deductibles are:**
Optima Medicare Prime \$250 for tiers 4 and 5
Optima Medicare Value \$300 for tiers 4 and 5.

How Part D Works - continued



Stage 2 Initial Coverage

- Once you meet your deductible, you and your plan share the cost of your prescription drugs. Once you and your plan spend \$3,750, you move to the next stage. Optima Medicare Prime and Optima Medicare Value prescription drug cost are below.

Drug Tier	Optima Medicare Prime	Optima Medicare Value
1	\$0	\$0
2	\$8	\$14
3	\$40	\$47
Deductible applies only to Tiers below	\$250	\$300
4	\$80	\$95
5	28%	27%



How Part D Works - continued



Stage 3 Coverage Gap

- During this stage, you pay 35% of the negotiated price for brand name drugs and 44% of the price for generic drugs. You must also pay a portion of the dispensing fee. You stay in this stage until your yearly out-of-pocket costs for covered prescription drugs reach \$5000.

Stage 4 Catastrophic

- Once you pay \$5,000 for your covered prescription drugs, the plan will pay most of the cost for the rest of 2018. You will pay the greater of 5% of the cost for the drugs or \$3.35 for generic drugs and \$8.35 for all other drugs.

Election Periods



A beneficiary may only enroll in or change plans during an election period that occurs at specific times of the year.

Previous Medicare health plan elections will impact what Medicare choices are now available.

- **Initial Election Period (IEP)**
- **Annual Election Period (AEP)**
- **Medicare Advantage Disenrollment Period (MADP)**
- **Special Enrollment Period (SEP)**

OptimaHealth

- Optima Health Plan has over 30 years of experience in the insurance business.¹
- Provides health plan coverage to approximately 420,000 members.²
- A service of Sentara Healthcare – with top-ranking Virginia hospitals.³
- Provides access to physicians and hospitals with:
 - comprehensive clinical programs
 - up-to-date preventive care and safety protocols and the
 - latest medical procedures and technology.

1 Optima Health Plan has been licensed as an HMO in the Commonwealth of Virginia since 1984.

2 Total Medical Membership based on Membership History Report, June 2017. Includes members from all Optima Health Licenses, products, Medicare and Medicaid products.

3 According to www.health.usnews.com, July 2017.

Optima Medicare Plans

- Optima Medicare is a unique partnership between Sentara Healthcare, Sentara Medical Group, EVMS Medical Group, and Optima Health.
- Optima Medicare provides a physician-led team approach to care, including:
 - A focus on preventive care
 - Your own care team to connect and coordinate services and specialists
- Optima Medicare Plans are Medicare Advantage Health Maintenance Organization (HMO) plans.



Optima Medicare Plans

Optima Medicare is an HMO Plan:

- You can depend on your PCP for care and guidance when seeking care within the Optima Medicare network.
- You are not required to obtain referrals for Plan specialist care.
- Except for emergency services, all care must be received from Plan providers in the Optima Medicare network.

Optima Medicare

Care That Changes as Your Needs Do

Patient-Centered Care

- SMG and EVMS Medical Group care coordination will improve care for you by:
 - organizing care around patients needs
 - working in teams
 - coordinating and tracking your care over time



Optima Medicare

Patient-Centered Care - What Can You Expect?

- An assessment with a care team (RN and MD) in the first 90 days of membership.
- At assessment, a discussion of your health risk and physician document of each of your chronic conditions.
- Visits to your doctor every 3-6 months if you have any chronic conditions.
- If you have multiple chronic conditions, the expertise of an extended care team, including a RN Care Coordinator.



Optima Medicare

Patient-Centered Care - What Can You Expect?



- Contact by your PCP or RN Care Coordinator after ANY emergency department or hospital visit.
- To be seen by your PCP within a few days of a hospital visit.
- To have preventive screenings completed in timely fashion.
- To have a pharmacist review your medication list at each visit.

Optima Medicare Value (HMO)

	Optima Medicare Value (HMO)
Monthly Premium	\$0
Annual Medical Out-of-Pocket Limit	In-Network \$4,900
BENEFITS	In-Network
Inpatient Hospital Care	\$450 per day days 1-4
Primary Care Doctor Office Visits	\$0 per visit
Specialist	\$40 per visit
Preventive Services	\$0 per visit
Emergency Care	\$80 per visit
Urgent Care	\$0 - \$45 per visit
Home Health	\$0
DME	20% of the cost
Part D Prescription Drugs	\$0/\$14/\$47/\$95/27% copay based on drug tier (30-day supply) \$300 deductible for tier 4 and 5

Optima Medicare Prime (HMO) Southside

	Optima Medicare Prime (HMO) Southside
Monthly Premium	\$52
Annual Medical Out-of-Pocket Limit	In-Network \$5,100
BENEFITS	In-Network
Inpatient Hospital Care	\$320 per day days 1-5
Primary Care Doctor Office Visits	\$0 per visit
Specialist	\$35 per visit
Preventive Services	\$0 per visit
Emergency Care	\$80 per visit
Urgent Care	\$0 - \$40 per visit
Home Health	\$0
DME	20% of the cost
Part D Prescription Drugs	\$0/\$8/\$40/\$80/28% copay based on drug tier (30 day supply) \$250 deductible for tier 4 and 5

Dental Benefit

Optima Medicare Value and Optima Medicare Prime (HMO):

- \$0 copay for two oral exams, two cleanings, one dental x-ray, every year
- \$0 copay for Medicare-covered dental benefits.



Vision Benefit



Optima Medicare Value and Optima Medicare Prime (HMO):

- \$15 copay for routine eye exam every year
- \$10 copay for Medicare-covered exams to diagnose and treat diseases and eye conditions
- \$100 combined limit for eyewear and or contacts
- \$0 copay for Medicare covered eyeglasses or contacts after cataract surgery

Hearing Aid Benefit

Optima Medicare Value (HMO)

- \$40 for Medicare covered exams to diagnose and treat hearing and balance issues
- \$0 for routine hearing exam annually
- \$0 for an annual hearing aid fitting/evaluation
- Inner ear/outer ear/over-the-ear hearing aid benefit limited to \$1,000 every 3 years for both ears combined

Hearing Aid Benefit

Optima Medicare Prime (HMO):

- \$35 for Medicare covered exams to diagnose and treat hearing and balance issues
- \$0 for routine hearing exam annually
- \$0 for an annual hearing aid fitting/evaluation
- Inner ear/outer ear/over-the-ear hearing aid benefit limited to \$3,000 every 3 years for both ears combined

Transportation Benefit

Optima Medicare Value:

- \$0 copay for up to 6 one-way trips to plan-approved location annually

Optima Medicare Prime:

- \$0 copay for up to 12 one-way trips to plan-approved location annually



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Fitness Program

Choose what works for you!



We will reimburse you fees for membership or exercise classes up to \$200 annually at any fitness facilities or exercise center.

Optima Medicare

is All About You



Plans that gives you everything Medicare offers plus extra benefits and preventive services:

- \$0 copay for PCP visits
- \$0 copay for many generic drugs
- Dental, vision, and hearing aid benefits

Thank you



We look forward to serving your health care needs.

Optima Medicare is an HMO with a Medicare contract. Enrollment in Optima Medicare depends on contract renewal. This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits, formulary, pharmacy or provider networks, premiums, and/or copayments/coinsurance may change on January 1 of each year. You must continue to pay your Medicare Part B premium.

Optima Medicare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

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