

NaviCare HMO SNP (a Medicare HMO Special Needs Plan) offered by Fallon Community Health Plan (Fallon Health)

Annual Notice of Changes for 2023

You are currently enrolled as a member of NaviCare HMO SNP. Next year, there will be changes to the plan's costs and benefits. NOTE: NaviCare members have no costs for covered services. ***Please see page 4 for a Summary of Important Costs, including Premium.***

This document tells about the changes to your plan. To get more information about costs, benefits, or rules please review the *Evidence of Coverage*, which is located on our website at fallonhealth.org/navicare. You may also call Enrollee Services to ask us to mail you an *Evidence of Coverage*.

What to do now

1. ASK: Which changes apply to you

- Check the changes to our benefits and costs to see if they affect you. NOTE: NaviCare members have no costs for covered services.
 - Review the changes to Medical care costs (doctor, hospital). NOTE: NaviCare members have no costs for covered services.
 - Review the changes to our drug coverage, including authorization requirements and costs.
 - Think about how much you will spend on premiums, deductibles, and cost sharing. NOTE: NaviCare members have no costs for covered services.
- Check the changes in the 2023 Drug List to make sure the drugs you currently take are still covered.
- Check to see if your primary care doctors, specialists, hospitals and other providers, including pharmacies will be in our network next year.
- Think about whether you are happy with our plan.

2. COMPARE: Learn about other plan choices

- Check coverage and costs of plans in your area. Use the Medicare Plan Finder at www.medicare.gov/plan-compare website or review the list in the back of your *Medicare & You 2023* handbook.
- Once you narrow your choice to a preferred plan, confirm your costs and coverage on the plan's website.

3. **CHOOSE:** Decide whether you want to change your plan

- If you don't join another plan by December 7, 2022, you will stay in NaviCare HMO SNP.
- To **change to a different plan**, you can switch plans between October 15 and December 7. Your new coverage will start on **January 1, 2023**. This will end your enrollment with NaviCare HMO SNP.
- Look in section 3.2, page 9 to learn more about your choices.
- If you recently moved into, currently live in, or just moved out of an institution (like a skilled nursing facility or long-term care hospital), you can switch plans or switch to Original Medicare (either with or without a separate Medicare prescription drug plan) at any time.

Additional Resources

- Please contact our Enrollee Services number at 1-877-700-6996 for additional information. (TTY users should call TRS 711.) Hours are 8 a.m.–8 p.m., Monday–Friday. (Oct. 1–March 31, seven days a week.)
- This information is available in alternate formats, such as braille, large print or audio.
- **Coverage under this Plan qualifies as Qualifying Health Coverage (QHC)** and satisfies the Patient Protection and Affordable Care Act's (ACA) individual shared responsibility requirement. Please visit the Internal Revenue Service (IRS) website at www.irs.gov/Affordable-Care-Act/Individuals-and-Families for more information.

About NaviCare HMO SNP

- Fallon Health is an HMO plan with a Medicare contract and a contract with the Massachusetts Medicaid program. Enrollment in Fallon Health depends on contract renewal. NaviCare is a voluntary program in association with MassHealth/EOHHS and CMS. The plan also has a written agreement with the MassHealth (Medicaid) program to coordinate your Medicaid benefits.
- NOTE: MassHealth is required by federal law to recover money from the estates of certain MassHealth members who are age 55 years or older, and who are any age and are receiving long-term care in a nursing home or other medical institution. For more information about MassHealth estate recovery, please visit www.mass.gov/estater recovery.
- When this document says “we,” “us,” or “our,” it means Fallon Community Health Plan (Fallon Health). When it says “plan” or “our plan,” it means NaviCare HMO SNP.

**Annual Notice of Changes for 2023
Table of Contents**

Summary of Important Costs for 2023 4

SECTION 1 Changes to Benefits and Costs for Next Year 5

 Section 1.1 – Changes to the Monthly Premium 5

 Section 1.2 – Changes to the Provider and Pharmacy Networks..... 5

 Section 1.3 – Changes to Benefits and Costs for Medical Services 5

 Section 1.4 – Changes to Part D Prescription Drug Coverage 7

SECTION 2 Administrative Changes 8

SECTION 3 Deciding Which Plan to Choose..... 8

 Section 3.1 – If you want to stay in NaviCare HMO SNP 8

 Section 3.2 – If you want to change plans 9

SECTION 4 Changing Plans 10

**SECTION 5 Programs That Offer Free Counseling about Medicare and
MassHealth (Medicaid)..... 10**

SECTION 6 Programs That Help Pay for Prescription Drugs 11

SECTION 7 Questions?..... 11

 Section 7.1 – Getting Help from NaviCare HMO SNP 11

 Section 7.2 – Getting Help from Medicare..... 12

 Section 7.3 – Getting Help from Medicaid..... 12

Summary of Important Costs for 2023

The table below compares the 2022 costs and 2023 costs for NaviCare HMO SNP in several important areas. **Please note this is only a summary of costs.** Because you are eligible for Medicare cost-sharing assistance under MassHealth (Medicaid), you pay \$0 for your deductible, doctor office visits, and inpatient hospital stays.

Cost	2022 (this year)	2023 (next year)
Monthly plan premium	\$0	\$0
Doctor office visits	\$0	\$0
Inpatient hospital stays	\$0	\$0
Part D prescription drug coverage (See Section 1.4 for details.)	\$0	\$0

SECTION 1 Changes to Benefits and Costs for Next Year

Section 1.1 – Changes to the Monthly Premium

Cost	2022 (this year)	2023 (next year)
Monthly premium (You must also continue to pay your Medicare Part B premium unless it is paid for you by MassHealth (Medicaid).)	\$0	\$0

Section 1.2 – Changes to the Provider and Pharmacy Networks

Updated directories are located on our website at fallonhealth.org/navicare. You may also call Enrollee Services for updated provider and/or pharmacy information or to ask us to mail you a directory.

There are changes to our network of providers for next year. **Please review the 2023 *Provider and Pharmacy Directory* to see if your providers (primary care provider, specialists, hospitals, etc.) are in our network.**

There are changes to our network of pharmacies for next year. **Please review the 2023 *Provider and Pharmacy Directory* to see which pharmacies are in our network.**

It is important that you know that we may make changes to the hospitals, doctors and specialists (providers), and pharmacies that are a part of your plan during the year. If a mid-year change in our providers affects you, please contact Enrollee Services so we may assist.

Section 1.3 – Changes to Benefits and Costs for Medical Services

Please note that the *Annual Notice of Changes* tells you about changes to your Medicare and MassHealth (Medicaid) benefits and costs. NOTE: NaviCare members have no costs for covered services.

We are making changes to costs and benefits for certain medical services next year. The information below describes these changes.

Cost	2022 (this year)	2023 (next year)
<p>Durable medical equipment (DME) and related supplies</p>	<p>You pay \$0 for Medicare- and MassHealth (Medicaid)-covered durable medical equipment and related supplies.</p> <p>You pay \$0 up to \$600 for a seat lift recliner chair once per lifetime. You pay all charges over the \$600 plan coverage limit.</p>	<p>You pay \$0 for Medicare- and MassHealth (Medicaid)-covered durable medical equipment and related supplies.</p> <p>You pay \$0 up to \$900 for a seat lift recliner chair once per lifetime. You pay all charges over the \$900 plan coverage limit.</p>
<p>In-home support services</p>	<p>In-home support services are <u>not</u> covered.</p>	<p>You pay \$0 for up to 60 hours of in-home support services per calendar year under this benefit.</p> <p>You pay all costs for services after 60 hours per calendar year.</p>
<p>Over-the-Counter items</p>	<p>You pay \$0 for MassHealth (Medicaid)-covered over-the-counter items.</p> <p>You pay \$0 for approved over-the-counter items with the Save Now card, up to \$150 every quarter. You pay all costs over \$150 per quarter.</p> <p>Self-Care card is <u>not</u> covered.</p>	<p>You pay \$0 for MassHealth (Medicaid)-covered over-the-counter items.</p> <p>You pay \$0 for approved over-the-counter items with the Save Now card, up to \$150 every quarter. You pay all costs over \$150 per quarter.</p> <p>You pay \$0 for approved MassHealth (Medicaid)-covered personal care items with the Self-Care card, up to \$50 every quarter. You pay all costs over \$50 per quarter.</p>

Section 1.4 – Changes to Part D Prescription Drug Coverage

Changes to Our Drug List

Our list of covered drugs is called a Formulary or “Drug List.” A copy of our Drug List is provided electronically.

We made changes to our Drug List, including changes to the drugs we cover and changes to the restrictions that apply to our coverage for certain drugs. **Review the Drug List to make sure your drugs will be covered next year and to see if there will be any restrictions.**

Most of the changes in the Drug List are new for the beginning of each year. However, during the year, we might make other changes that are allowed by Medicare rules. For instance, we can immediately remove drugs considered unsafe by the FDA or withdrawn from the market by a product manufacturer. We update our online Drug List to provide the most up to date list of drugs.

If you are affected by a change in drug coverage at the beginning of the year or during the year, please review Chapter 5 of your Evidence of Coverage and talk to your doctor to find out your options, such as asking for a temporary supply, applying for an exception and/or working to find a new drug. You can also contact Enrollee Services for more information.

SECTION 2 Administrative Changes

Description	2022 (this year)	2023 (next year)
<p>Diabetes self-management training, diabetic services and supplies</p>	<p>Continuous blood glucose monitors are limited to the Freestyle Libre System. Members may obtain Freestyle Libre at network durable medical equipment suppliers or pharmacies.</p>	<p>Our preferred therapeutic or non-adjunctive continuous glucose monitors are Freestyle Libre monitors and supplies. Members may obtain Freestyle Libre at network pharmacies. Products other than FreeStyle Libre may be covered when use of FreeStyle Libre is determined to be unsuccessful or there are reasons why it cannot be medically used.</p> <p>Our non-therapeutic or adjunctive continuous glucose monitor is Medtronic. Members may obtain Medtronic at network DME providers.</p>

SECTION 3 Deciding Which Plan to Choose

Section 3.1 – If you want to stay in NaviCare HMO SNP

To stay in our plan, you don’t need to do anything. If you do not sign up for a different plan or change to Original Medicare by December 7, you will automatically be enrolled in our NaviCare HMO SNP.

Section 3.2 – If you want to change plans

We hope to keep you as a member next year but if you want to change plans for 2023 follow these steps:

Step 1: Learn about and compare your choices

- You can join a different Medicare health plan,
- -- *OR*-- You can change to Original Medicare. If you change to Original Medicare, you will need to decide whether to join a Medicare drug plan.

To learn more about Original Medicare and the different types of Medicare plans, use the Medicare Plan Finder (www.medicare.gov/plan-compare), read the *Medicare & You 2023* handbook, call your State Health Insurance Assistance Program (see Section 5), or call Medicare (see Section 7.2).

As a reminder, Fallon Community Health Plan (Fallon Health) offers other Medicare health plans and Medicare prescription drug plans. These other plans may differ in coverage, monthly premiums, and cost-sharing amounts.

Step 2: Change your coverage

- To **change to a different Medicare health plan**, enroll in the new plan. You will automatically be disenrolled from NaviCare HMO SNP.
- To **change to Original Medicare with a prescription drug plan**, enroll in the new drug plan. You will automatically be disenrolled from NaviCare HMO SNP.
- To **change to Original Medicare without a prescription drug plan**, you must either:
 - Send us a written request to disenroll. Contact Enrollee Services if you need more information on how to do so.
 - – *or* – Contact **Medicare**, at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week, and ask to be disenrolled. TTY users should call 1-877-486-2048.

If you switch to Original Medicare and do **not** enroll in a separate Medicare prescription drug plan, Medicare may enroll you in a drug plan unless you have opted out of automatic enrollment.

SECTION 4 Changing Plans

If you want to change to a different plan or to Original Medicare for next year, you can do it from **October 15 until December 7**. The change will take effect on January 1, 2023.

Are there other times of the year to make a change?

In certain situations, changes are also allowed at other times of the year. Examples include people with Medicaid, those who get “Extra Help” paying for their drugs, those who have or are leaving employer coverage, and those who move out of the service area.

If you enrolled in a Medicare Advantage plan for January 1, 2023, and don’t like your plan choice, you can switch to another Medicare health plan (either with or without Medicare prescription drug coverage) or switch to Original Medicare (either with or without Medicare prescription drug coverage) between January 1 and March 31, 2023.

If you recently moved into, currently live in, or just moved out of an institution (like a skilled nursing facility or long-term care hospital), you can change your Medicare coverage **at any time**. You can change to any other Medicare health plan (either with or without Medicare prescription drug coverage) or switch to Original Medicare (either with or without a separate Medicare prescription drug plan) at any time.

SECTION 5 Programs That Offer Free Counseling about Medicare and MassHealth (Medicaid)

The State Health Insurance Assistance Program (SHIP) is an independent government program with trained counselors in every state. In Massachusetts, the SHIP is called Serving the Health Insurance Needs of Everyone (SHINE) Program.

It is a state program that gets money from the Federal government to give **free** local health insurance counseling to people with Medicare. SHINE counselors can help you with your Medicare questions or problems. They can help you understand your Medicare plan choices and answer questions about switching plans. You can call SHINE at 1-800-243-4636. You can learn more about SHINE by visiting their website (www.mass.gov/health-insurance-counseling).

For questions about your MassHealth (Medicaid) benefits, contact MassHealth (Medicaid) at 1-800-841-2900, TTY: 1-800-497-4648, Monday–Friday, 8 a.m.–5 p.m. Ask how joining another plan or returning to Original Medicare affects how you get your MassHealth (Medicaid) coverage.

SECTION 6 Programs That Help Pay for Prescription Drugs

You may qualify for help paying for prescription drugs. Below we list different kinds of help:

- **“Extra Help” from Medicare.** Because you have MassHealth (Medicaid), you are already enrolled in “Extra Help,” also called the Low Income Subsidy. “Extra Help” pays some of your prescription drug premiums, annual deductibles and coinsurance. Because you qualify, you do not have a coverage gap or late enrollment penalty. If you have questions about “Extra Help”, call:
 - 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048, 24 hours a day/7 days a week;
 - The Social Security Office at 1-800-772-1213 between 8 am and 7 pm, Monday through Friday for a representative. Automated messages are available 24 hours a day. TTY users should call, 1-800-325-0778; or
 - Your State Medicaid Office (applications).
- **Help from your state’s pharmaceutical assistance program.** Massachusetts has a program called Prescription Advantage that helps people pay for prescription drugs based on their financial need, age, or medical condition. To learn more about the program, check with your State Health Insurance Assistance Program.

SECTION 7 Questions?

Section 7.1 – Getting Help from NaviCare HMO SNP

Questions? We’re here to help. Please call Enrollee Services at 1-877-700-6996. (TTY only, call TRS 711.) We are available for phone calls 8 a.m.–8 p.m., Monday–Friday. (Oct. 1–March 31, seven days a week.) Calls to these numbers are free.

Read your 2023 Evidence of Coverage (it has details about next year's benefits and costs)

This *Annual Notice of Changes* gives you a summary of changes in your benefits and costs for 2023. For details, look in the *2023 Evidence of Coverage* for NaviCare HMO SNP. The *Evidence of Coverage* is the legal, detailed description of your plan benefits. It explains your rights and the rules you need to follow to get covered services and prescription drugs. A copy of the *Evidence of Coverage* is located on our website at fallonhealth.org/navicare. You may also call Enrollee Services to ask us to mail you an *Evidence of Coverage*.

Visit our Website

You can also visit our website at fallonhealth.org/navicare. As a reminder, our website has the most up-to-date information about our provider network (*Provider and Pharmacy Directory*) and our list of covered drugs (Formulary/Drug List).

Section 7.2 – Getting Help from Medicare

To get information directly from Medicare:

Call 1-800-MEDICARE (1-800-633-4227)

You can call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

Visit the Medicare Website

Visit the Medicare website (www.medicare.gov). It has information about cost, coverage, and quality Star Ratings to help you compare Medicare health plans in your area. To view the information about plans, go to www.medicare.gov/plan-compare.

Read *Medicare & You 2023*

Read the *Medicare & You 2023* handbook. Every fall, this booklet is mailed to people with Medicare. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare. If you don't have a copy of this document, you can get it at the Medicare website (<https://www.medicare.gov/Pubs/pdf/10050-medicare-and-you.pdf>) or by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

Section 7.3 – Getting Help from Medicaid

To get information from MassHealth (Medicaid) you can call MassHealth (Medicaid) at 1-800-841-2900. TTY users should call 1-800-497-4648.