

# VILLAGE CARE MAX

**MEDICARE HEALTH ADVANTAGE PLAN (HMO D-SNP)**

## **Summary of Benefits**

January 1, 2023

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December 31, 2023



# VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

## Table of Contents

INTRODUCTION TO SUMMARY OF BENEFITS ..... 2

Things to Know About VillageCareMAX Medicare Health Advantage (HMO D-SNP) ..... 4

Monthly Premium, Deductible, and Limits on How Much You Pay for Covered Services ..... 7

SUMMARY OF MEDICARE-COVERED BENEFITS ..... 8

SUMMARY OF MEDICAID-COVERED BENEFITS ..... 20

## SUMMARY OF BENEFITS

January 1, 2023 – December 31, 2023

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### INTRODUCTION TO SUMMARY OF BENEFITS

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This is a summary of health services covered by VillageCareMAX Medicare Health Advantage (HMO D-SNP) for 2023. There are different types of Medicare health plans. VillageCareMAX Medicare Health Advantage is a Dual Eligible Special Needs Plan (D-SNP), which is a Health Maintenance Organization (HMO) for people with Medicare and Medicaid. VillageCareMAX Medicare Health Advantage is approved by Medicare and run by a private company.

This document is only a summary. It does not list every service that we cover or every limitation or exclusion. Please read the Evidence of Coverage for the full list of benefits. You can view the Evidence of Coverage on our website at [www.villagecaremax.org](http://www.villagecaremax.org) or call Member Services for a copy.

### You have choices about how to get your Medicare Benefits

- One choice is to get your Medicare benefits through Original Medicare (fee-for-service Medicare). Original Medicare is run directly by the Federal government.
- Another choice is to get your Medicare benefits by joining a Medicare health plan like VillageCareMAX Medicare Health Advantage (HMO D-SNP).

### Tips for comparing your Medicare choices

- If you want to compare our plan with other Medicare health plans, ask the other plans for their Summary of Benefits booklets. Or, use the Medicare Plan Finder on <https://www.medicare.gov>.
- If you want to know more about the coverage and costs of Original Medicare, read the *Medicare & You 2023* handbook. View it online at <https://www.medicare.gov> or get a copy 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.



## VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

- VillageCareMAX is an HMO plan with Medicare and New York State Medicaid contracts. Enrollment in VillageCareMAX depends on contract renewal.
- This information is not a complete description of benefits. Call 1-800-469-6292 (TTY: 711) for more information.
- ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-469-6292 (TTY: 711).
- 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1-800-469-6292 (TTY: 711)。
- You can get this document for free in languages other than English and in other formats, such as large print, braille, or audio. Call Member Services at the number at the bottom of this page. This document is available in Spanish and Chinese.
- Upon enrollment, we will request for the language and format that you prefer to get mailings and communications. We will keep your preference in your file as a standing request for future mailings and communications. You can make changes at any time by calling Member Services at the number listed at the bottom of this page.
- Out-of-network/non-contracted providers are under no obligation to treat VillageCareMAX Medicare Health Advantage 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.
- Food & Produce (grocery items) are a part of Special Supplemental Benefits for the Chronically Ill (SSCBI) and not all members may qualify.



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**If you have questions**, please call VillageCareMAX at 1-800-469-6292 (TTY: 711), 8:00 am to 8:00 pm, 7 days a week. The call is free. **For more information**, visit [www.villagecaremax.org](http://www.villagecaremax.org).

# VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

## Things to Know About VillageCareMAX Medicare Health Advantage (HMO D-SNP)

<p>What benefits are covered under VillageCareMAX Medicare Health Advantage?</p>	<p>Members of the plan are covered for:</p> <ul style="list-style-type: none"><li>• <b>Medicare benefits</b> for inpatient and outpatient services covered under Medicare Part A &amp; Part B</li><li>• <b>Extra benefits</b> that are not covered by Medicare including additional coverage for hearing, dental, vision, Over-the-Counter (OTC) health-related items, grocery items for eligible members, fitness membership, transportation, and more. This document includes a summary of these benefits.</li><li>• <b>Drug Coverage:</b> Medicare Part D prescription drugs. In addition, you are covered for Medicare Part B drugs including those given by your provider in their office, some oral anti-cancer drugs, and some drugs used with certain medical equipment. You can see the complete VillageCareMAX Formulary (List of Covered Drugs) and any restrictions on our website at <a href="http://www.villagecaremax.org">www.villagecaremax.org</a>, or call Member Services for a copy.</li></ul>
<p>Who should you contact if you have questions or need help?</p>	<p><b>CALL</b>      <b>1-800-469-6292.</b> Calls to this number are free. 8:00 am to 8:00 pm, 7 days a week. On call service is available after business hours. Member Services also has free language interpreter services available for people who do not speak English.</p> <p><b>TTY</b>        <b>711.</b> Calls to this number are free. This number is for people who have hearing or speaking problems. You must have special telephone equipment to call it. 8:00 am to 8:00 pm, 7 days a week</p> <p><b>WRITE</b>      112 Charles Street, New York NY 10014</p> <p><b>WEBSITE</b>   <a href="http://www.villagecaremax.org">www.villagecaremax.org</a></p>



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## Things to Know About VillageCareMAX Medicare Health Advantage (HMO D-SNP)

### Who can join?

To join VillageCareMAX Medicare Health Advantage, you must meet the following eligibility requirements:

- Have both Medicare Part A and Medicare Part B
- Have Medicaid coverage (see *Medicaid Eligibility* below)
- Live in our service area
  - Our service area includes the following counties in New York: Bronx, Kings (Brooklyn), New York (Manhattan), Queens, Richmond (Staten Island), Nassau, and Westchester.
- Must be a United States citizen or lawfully present in the United States

### Medicaid Eligibility

Our plan is designed to meet the needs of people who receive certain Medicaid benefits. There are programs offered through Medicaid that help people with Medicare pay their Medicare costs, such as their Medicare premiums. These “Medicare Savings Programs” help people with limited income and resources save money each year. The following categories are eligible for enrollment in VillageCareMAX Medicare Health Advantage:

- **Full Benefit Dual Eligible (FBDE):** Eligible for full Medicaid benefits, and payment of your Medicare Part A premiums (in some cases) and Medicare Part B premiums.
- **Qualified Medicare Beneficiary (QMB) Only:** Eligible for Medicaid payment of your Medicare Part A and/or Part B premiums, and other cost sharing (like deductibles, copayments and coinsurance. This excludes payment of Part D cost sharing.
- **QMB-Plus (QMB+):** Meets all the requirements of QMB Only and also eligible for full Medicaid benefits.

The QMB Program is a Medicaid benefit that pays Medicare Part A & Part B premiums, and cost sharing for certain low-income Medicare beneficiaries. Federal law does not allow Medicare providers and health plans to bill people in the QMB program for Medicare cost sharing. This includes Medicare Part A or B deductibles, coinsurance, or copayments. However, if you are a QMB or QMB-Plus beneficiary, you may be responsible for some Part D prescription drugs costs.



# VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Things to Know About VillageCareMAX Medicare Health Advantage (HMO D-SNP)	
Which doctors, hospitals, and pharmacies can I use?	<p>VillageCareMAX has a large network of doctors, hospitals, pharmacies, and other providers. You must use in-network providers to get most of your medical care and services. The only exceptions are emergencies, urgently needed services, out-of-area dialysis, and cases in which VillageCareMAX Medicare Health Advantage authorizes use of out-of-network providers. Otherwise, if you use the providers that are not in our network, the plan may not pay for these services. You must generally use network pharmacies to fill your prescriptions for covered Part D drugs.</p> <p>You can see the VillageCareMAX Provider &amp; Pharmacy Directory on our website at <a href="http://www.villagecaremax.org">www.villagecaremax.org</a>. If you would like a copy of the Provider &amp; Pharmacy Directory mailed to you, please call Member Services.</p>
Do I need a referral?	<p>You do not need a referral from your Primary Care Provider (PCP) to see specialists or other providers in our network. However, you must follow plan rules to request prior authorization for some services.</p>
What is prior authorization?	<p>Prior authorization means that you must get approval from VillageCareMAX Medicare Health Advantage before we will cover a specific service, item, or drug or out-of-network provider. VillageCareMAX Medicare Health Advantage may not cover the service, item or drug if you don't get prior approval. If you need urgent or emergency care or out-of-area dialysis services, you don't need to get approval first.</p> <p>Refer to Chapter 3 of the <i>Evidence of Coverage</i> to learn more about prior authorization. Refer to the Benefits Chart in Chapter 4 of the <i>Evidence of Coverage</i> to learn which services require a prior authorization.</p>
What is Extra Help?	<p>Extra Help is a program that helps people with limited income and resources pay Medicare prescription drug program costs, such as premiums, deductibles, and copays. We send members a document called the "Evidence of Coverage Rider for People Who Get Extra Help Paying for Prescription Drugs" (also known as the "Low Income Subsidy Rider" or the "LIS Rider"). This document tells you about your drug coverage and costs. If you don't have this document, please call Member Services and ask for the "LIS Rider."</p>



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# VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Monthly Premium, Deductible, and Limits on How Much You Pay for Covered Services	
<p><b>How much is the monthly premium?</b></p> <p>(If you are eligible for Medicare cost-sharing assistance under Medicaid, you pay \$0)</p>	<p>Part C Premium: \$0</p> <p>Part D Premium: \$0 to \$38.90 premium per month for Part D prescription drugs</p> <p>You must also continue to pay your Medicare Part B premium unless it is paid for you by Medicaid.</p>
<p><b>How much is the deductible?</b></p> <p>(If you are eligible for Medicare cost-sharing assistance under Medicaid, you pay \$0)</p>	<p>Part B Medical Services</p> <ul style="list-style-type: none"> <li>\$0 or \$226 deductible per year for some in-network medical services.</li> </ul> <p>Part D Prescription Drugs</p> <ul style="list-style-type: none"> <li>\$0 or \$104 deductible per year for Part D prescription drugs coverage</li> </ul>
<p><b>What is the maximum out-of-pocket amount that I will pay for medical services as a member of VillageCareMAX Medicare Health Advantage?</b></p> <p>(If you are eligible for Medicare cost-sharing assistance under Medicaid, you pay \$0)</p>	<p>Medicare requires all health plans to limit how much you pay “out-of-pocket” for the year. This limit is called the “maximum out-of-pocket amount.” The amount you pay, and Medicaid pays on your behalf, count toward the maximum out-of-pocket amount. This does not include costs for prescription drugs.</p> <p>Your costs for covered medical services (such as copays and deductibles) count toward the maximum out-of-pocket amount. The yearly limit for this plan is:</p> <ul style="list-style-type: none"> <li>\$8,300 for medical services you receive from in-network providers</li> </ul> <p>Once this limit has been reached, we pay the full cost for covered Part A and Part B services for the rest of the year.</p> <p>You will still need to pay any costs for your Part D prescription drugs.</p>



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# VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

## SUMMARY OF MEDICARE-COVERED BENEFITS

The following chart is a quick overview of benefits, your costs, and rules about the benefits. **If you are eligible for Medicare cost-sharing assistance under Medicaid, you pay \$0 for Medicare-covered services.**

*This section shows Medicare services and extra benefits covered by VillageCareMAX Medicare Health Advantage. This is not a complete list and description of benefits, refer to your Evidence of Coverage for more details.*

Benefits	What you pay	Benefit Rules
<b>Inpatient Hospital Care</b>	For each inpatient hospital benefit period: <ul style="list-style-type: none"> <li>» Deductible: \$0 or \$1,600</li> <li>» Days 1-60: \$0 after you pay your deductible</li> <li>» Days 61-90: \$0 or \$400 per day</li> <li>» Days 91 and beyond: \$0 or \$800 per day for lifetime reserve days (up to 60 days over your lifetime)</li> <li>» Beyond lifetime reserve days: all costs</li> </ul>	Prior authorization is required.
<b>Outpatient Hospital Care</b> <ul style="list-style-type: none"> <li>» Observation services</li> <li>» Outpatient Surgery</li> <li>» Laboratory &amp; diagnostic tests</li> <li>» Medical supplies</li> <li>» Certain drugs and biologicals</li> </ul>	0% or 20% of the cost for each Medicare-covered outpatient hospital services	Prior authorization is required for some services.

## VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Benefits	What you pay	Benefit Rules
<b>Ambulatory Surgical Centers (ASC) services</b>	0% or 20% of the total cost per visit for outpatient surgical services at an ASC	Prior authorization is required.
<b>Doctor Visits</b>	0% or 20% of the cost for each Medicare-covered primary care or specialist visit	Prior authorization is not required for in-network providers.
<b>Preventive Care</b> <ul style="list-style-type: none"> <li>» Preventive care visits</li> <li>» Annual wellness visit</li> <li>» Depression screening</li> <li>» HIV screening</li> <li>» Flu shots, COVID-19 vaccines, hepatitis B shots, pneumococcal shots</li> <li>» All other Medicare-covered preventive services</li> </ul>	\$0	Prior authorization is not required for covered services from in-network and out-of-network providers.  Any additional preventive services approved by Medicare during the contract year will be covered.
<b>Emergency Care</b> <ul style="list-style-type: none"> <li>» See “Worldwide Emergency/Urgent Coverage” for additional coverage</li> </ul>	0% or 20% of the total cost per visit (up to \$95)	Prior authorization is not required.  You pay \$0 if admitted to the hospital within 24 hours of the emergency room visit.



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## VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Benefits	What you pay	Benefit Rules
<b>Urgently Needed Care</b> <ul style="list-style-type: none"> <li>» See “Worldwide Emergency/Urgent Coverage” for additional coverage</li> </ul>	0% or 20% of the total cost per visit (up to \$60)	Prior authorization is not required.
<b>Diagnostic Tests/ Labs/ Imaging:</b> <ul style="list-style-type: none"> <li>» Diagnostic tests and procedures</li> <li>» Diagnostic radiology services (MRIs, CT scans)</li> <li>» Lab Services</li> <li>» Outpatient X-ray</li> <li>» Therapeutic radiology services (such as radiation treatment for cancer)</li> </ul>	0% or 20% of the cost	Prior authorization is required for some services.
<b>Hearing Services</b> <ul style="list-style-type: none"> <li>» Diagnostic and routine hearing services</li> <li>» Hearing aids</li> </ul>	0% or 20% of the cost for Medicare-covered diagnostic hearing services.  \$0 for additional plan-covered benefits for routine hearing exam, fitting evaluation, and hearing aids.	Prior authorization is required for some services.  You are covered for: <ul style="list-style-type: none"> <li>» 1 routine hearing exam and fitting for hearing aid per year</li> <li>» Up to \$1,500 per year for 2 hearing aids limited to \$750 per ear</li> </ul>



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Benefits	What you pay	Benefit Rules
<p><b>Dental Services</b></p> <ul style="list-style-type: none"> <li>» Diagnostic, preventive, and comprehensive dental care</li> </ul>	<p>0% or 20% of the cost for Medicare-covered services.</p> <p>\$0 for additional plan-covered benefits for preventive &amp; comprehensive dental services.</p>	<p>Prior authorization is required for some services.</p> <p>Unlimited preventive dental services:</p> <ul style="list-style-type: none"> <li>» Oral exams</li> <li>» Cleanings</li> <li>» Fluoride treatments</li> <li>» Dental X-rays</li> </ul> <p>\$2,000 per year (\$500 per quarter) for comprehensive dental services such as:</p> <ul style="list-style-type: none"> <li>» Restorative services to repair teeth such as fillings</li> <li>» Endodontics (root canal therapy)</li> <li>» Periodontal (treatment of gum disease) services</li> <li>» Dentures (complete and partial), crowns and retainer crowns</li> <li>» Implant services</li> <li>» Extractions</li> <li>» Oral Surgery</li> <li>» Teledentistry services</li> <li>» Palliative (emergency) treatment/minor procedure</li> <li>» Other covered non-routine and diagnostic services</li> </ul> <p>Unused amounts from the quarterly limit carry over to the next quarter and must be used by December 31, 2023.</p> <p>The supplemental dental benefit is limited to the dental procedure codes covered by the plan.</p>

# VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Benefits	What you pay	Benefit Rules
<p><b>Vision Services</b></p> <ul style="list-style-type: none"> <li>» Diagnostic eye care, eye exam and eyewear</li> </ul>	<p>0% or 20% of the cost for Medicare-covered services.</p> <p>\$0 for additional plan-covered benefits for eye exam and eyewear.</p>	<p>Prior authorization is required for some services.</p> <p>You are covered for:</p> <ul style="list-style-type: none"> <li>» One (1) eye exam per year</li> <li>» Up to \$350 per year for contact lenses or eyeglasses (lenses and frames)</li> </ul>
<p><b>Mental Health Services</b></p> <ul style="list-style-type: none"> <li>» Inpatient and outpatient care</li> </ul>	<p>Inpatient Mental Health care services for each benefit period:</p> <ul style="list-style-type: none"> <li>» Deductible: \$0 or \$1,600</li> <li>» Days 1-60: \$0 after you pay your deductible</li> <li>» Days 61-90: \$0 or \$400 per day</li> <li>» Days 91 and beyond: \$0 or \$800 per day for lifetime reserve days (up to 60 days over your lifetime)</li> <li>» Beyond lifetime reserve days: all costs</li> </ul> <p>Outpatient Group or Individual Therapy Visits:</p> <ul style="list-style-type: none"> <li>» 0% or 20% of the total cost per visit</li> </ul>	<p>Prior authorization is required for inpatient mental health. If you are in a psychiatric hospital (instead of a general hospital), Medicare only pays for up to 190 days of inpatient psychiatric hospital services during your lifetime.</p> <p>Prior authorization is not required for outpatient mental health services from in-network and out-of-network providers.</p>

# VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Benefits	What you pay	Benefit Rules
<b>Skilled Nursing Facility (SNF)</b>	SNF for each benefit period: <ul style="list-style-type: none"> <li>» Days 1-20: \$0</li> <li>» Days 21-100: \$0 or \$200.00 per day</li> <li>» Days 101 and beyond: all costs</li> </ul>	Prior authorization is required.  No prior hospital stay is required.
<b>Rehabilitation Services</b> <ul style="list-style-type: none"> <li>» Physical therapy visits</li> <li>» Occupational therapy visits</li> <li>» Speech and language therapy visits</li> <li>» Cardiac rehabilitation services</li> </ul>	0% or 20% of the total cost per visit	Prior authorization is required.
<b>Ambulance</b>	0% or 20% of the total cost	Prior authorization is required for non-emergency ambulance trips.
<b>Transportation (non-emergency services)</b>	\$0 for non-emergency transportation by taxi or van	Prior authorization is required. <ul style="list-style-type: none"> <li>» Up to 36 one-way trips per year to plan approved locations</li> </ul>

# VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Benefits	What you pay	Benefit Rules
<p><b>Medicare Part B drugs</b></p> <ul style="list-style-type: none"> <li>» Drugs given by your provider in their office, some oral anti-cancer drugs, and some drugs used with certain medical equipment.</li> </ul>	<p>0% or 20% of the total cost</p>	<p>Prior authorization is required for certain injectable drugs.</p>



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# VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

OUTPATIENT PRESCRIPTION DRUGS				
Depending on your income and institutional status, you pay the following:				
Initial Coverage Stage	Standard retail cost-sharing (up to 30-day supply)	Mail-order cost-sharing (up to a 90-day supply)	Long-term care (LTC) cost-sharing (up to 31-day supply)	
Tier 1: Generic Drugs	\$0 copay or \$1.45 copay or \$4.15 copay or Up to 15% of the cost	\$0 copay or \$1.45 copay or \$4.15 copay or Up to 15% of the cost	\$0 copay or \$1.45 copay or \$4.15 copay or Up to 15% of the cost	<p>Once you pay the yearly deductible, you move to the Initial Coverage Stage. <b>During this stage, the plan pays its share of the cost of your drugs, and you pay your share of the cost.</b></p> <p>You stay in this stage until your payments reach a total of \$7,400. You will then move to the next stage (the Catastrophic Coverage Stage).</p>
Tier 1: Brand Drugs	\$0 copay or \$4.30 copay or \$10.35 copay or Up to 15% of the cost	\$0 copay or \$4.30 copay or \$10.35 copay or Up to 15% of the cost	\$0 copay or \$4.30 copay or \$10.35 copay or Up to 15% of the cost	
Catastrophic Coverage Stage	\$0 copay, or \$4.15 for generic drugs or \$10.35 for brand drugs			

**Important Message About What You Pay for Vaccines** - Our plan covers most Part D vaccines at no cost to you even if you haven't paid your deductible. Call Member Services for more information.

**Important Message About What You Pay for Insulin** - You won't pay more than \$35 for a one-month supply of each insulin product covered by our plan, no matter what cost-sharing tier it's on even if you haven't paid your deductible



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ADDITIONAL HEALTH BENEFITS		
Benefits	What you pay	Benefit Rules
<b>Over-the-Counter Items (OTC Card)</b>	\$0	<p>You are covered for up to \$2,100 per year (\$175 per month) on your OTC card to buy approved non-prescription drugs and health-related items at participating locations or online for home delivery.</p> <p>Eligible members can also use their monthly benefit amount to get Food &amp; Produce (grocery items). See below for “Special Supplemental Benefits for the Chronically Ill (SSBCI) – Food &amp; Produce”</p>
<b>Special Supplemental Benefits for the Chronically Ill (SSBCI) – Food &amp; Produce</b>	\$0	<p>Members who meet the criteria of chronically ill can use their OTC card to get grocery items as well. You are covered for up to \$2,100 per year (\$175 per month) on your OTC card to buy approved grocery items, non-prescription drugs and health-related items at participating locations or online for home delivery.</p> <p>You can call Member Services or refer to the <i>Evidence of Coverage</i> for more information about this benefit.</p>



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ADDITIONAL HEALTH BENEFITS		
Benefits	What you pay	Benefit Rules
<b>Wellness Programs</b> <ul style="list-style-type: none"> <li>» Fitness Membership</li> <li>» Member Newsletter</li> </ul>	\$0	You are covered for fitness membership through the Silver&Fit Healthy Aging and Exercise program: <ul style="list-style-type: none"> <li>» Access to fitness centers within the network</li> <li>» Home fitness kits if you prefer to work out at home</li> <li>» Telephone coaching</li> </ul>
<b>Home and Bathroom Safety Devices</b>	\$0	Prior authorization is required.  You are covered for up to \$150 per year for the following safety devices: <ul style="list-style-type: none"> <li>• Shower Chair</li> <li>• Reach Stick</li> <li>• Raised Toilet Seat</li> <li>• Handheld Shower Device</li> <li>• Transfer Bench</li> </ul> An in-home safety assessment must be completed to evaluate the need for the devices.
<b>In Home Safety Assessment</b>	\$0	Prior authorization is required.  You are covered for one safety evaluation per year at home.
<b>Worldwide Emergency/Urgent Coverage</b>	\$0	You are covered for up to \$50,000 per year for Worldwide Emergency/Urgent Coverage and Emergency Transportation when you travel outside of the United States and its territories.



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ADDITIONAL HEALTH BENEFITS		
Benefits	What you pay	Benefit Rules
<b>Chiropractor Services</b>	0% or 20% of the total cost per visit	Prior authorization is required.  You are covered for manual manipulation of the spine to correct subluxation (partial dislocation or misalignment).
<b>Home Health Care</b>	\$0	Prior authorization is required.
<b>Diabetes Supplies and Services</b> <ul style="list-style-type: none"> <li>» Diabetes self-management training</li> <li>» Therapeutic shoes or inserts</li> <li>» Diabetic monitoring supplies</li> </ul>	\$0	Prior authorization is required for some services and items.  Abbott is the preferred manufacturer for blood glucose, glucometers, and testing supplies.
<b>Foot Care (Podiatry Services)</b>	0% or 20% of the total cost per visit	You are covered for foot exams and treatment if you have diabetes-related nerve damage and/or meet certain conditions.



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ADDITIONAL HEALTH BENEFITS		
Benefits	What you pay	Benefit Rules
<b>Therapeutic Shoes (Diabetic Shoes)</b>	\$0 for additional plan-covered benefits for Diabetic Shoes	Prior authorization is required.  You are covered for 1 additional pair of custom-molded shoes above the Medicare limit per year, if you have diabetes and severe diabetic foot disease.
<b>Durable Medical Equipment and related supplies</b>  » Wheelchairs, crutches, hospital bed, IV infusion pump, oxygen equipment, nebulizer, walker, etc.	0% or 20% of the total cost	Prior authorization is required for some items.
<b>Meals (immediately following surgery or inpatient hospitalization)</b>	\$0	Prior authorization is required.  You are covered for 2 meals per day for up to 4 weeks with a maximum of 56 meals per year.



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# VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

## SUMMARY OF MEDICAID-COVERED BENEFITS

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The benefits described in the previous section of the Summary of Benefits are Medicare-covered services and extra benefits covered by VillageCareMAX Medicare Health Advantage. The complete list of services is listed in your Evidence of Coverage. You can view the Evidence of Coverage on our website at [www.villagecaremax.org](http://www.villagecaremax.org) or call Member Services for a copy.

If you qualify for both Medicare and Medicaid, you are eligible for benefits under both the federal Medicare Program and the New York State Medicaid Program. VillageCareMAX Medicare Health Advantage does not cover Medicaid benefits. The Plan covers your Medicare benefits and coordinates the benefits that you get under the New York State's Medicaid Program.

Coverage for Medicaid benefits described below depends on your level of Medicaid eligibility. If you lose Medicaid while enrolled in VillageCareMAX Medicare Health Advantage, we will continue to provide benefits covered under the Plan for a 3-month deemed eligibility period. During this period, the Plan will work with you to help you regain Medicaid coverage, if possible.

If you have questions about your Medicaid eligibility and what benefits you are entitled to, you can call *New York State Department of Health Medicaid Help Line* at 1-800-541-2831. The business hours are Monday through Friday from 8:00 am to 5:00 pm, and Saturday from 9:00 am to 1:00 pm. TTY users should call 1-800-662-1220. You may also call VillageCareMAX Member Services for assistance at 1-800-469-6292, (TTY: 711), 8:00am to 8:00 pm, 7 days a week.



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# VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

*The following benefits are available to people who qualify for Medicaid benefits. For each benefit listed below, you can see what VillageCareMAX Medicare Health Advantage covers and what is covered by Medicaid. The amount you pay for covered services depends on your level of Medicaid eligibility.*

Benefits	New York State Medicaid	VillageCareMAX Medicare Health Advantage (HMO D-SNP)
<b>Ambulance Services</b>	Medicaid covers Medicare deductibles, copays, and coinsurances.	0% or 20% of the cost for each Medicare-covered trip
<b>Cardiac and Pulmonary Rehabilitation Services</b>	Medicaid covers Medicare deductibles, copays, and coinsurances.	0% or 20% of the cost for Medicare-covered: <ul style="list-style-type: none"> <li>» Cardiac rehabilitation services, and</li> <li>» Intensive cardiac rehabilitation services</li> </ul>
<b>Chiropractic Services</b>	Medicaid covers Medicare deductibles, copays, and coinsurances.	0% or 20% of the cost for Medicare-covered chiropractic services  You are covered for manual manipulation of the spine to correct subluxation (partial dislocation or misalignment).

# VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Benefits	New York State Medicaid	VillageCareMAX Medicare Health Advantage (HMO D-SNP)
<p><b>Dental Services</b></p>	<p>Medicaid covers Medicare deductibles, copays, and coinsurances.</p> <p>Dental services include, but shall not be limited to, preventive, prophylactic and other dental care, services, supplies, routine exams, prophylaxis, oral surgery (when not covered by Medicare), and dental prosthetic and orthotic appliances required to alleviate a serious health condition, including one which affects employability.</p>	<p>0% or 20% of the cost for Medicare-covered dental services.</p> <p>\$0 copay for additional benefits covered by the plan:</p> <p>Unlimited preventive dental services including:</p> <ul style="list-style-type: none"> <li>» Oral exams</li> <li>» Cleanings</li> <li>» Fluoride treatments</li> <li>» Dental X-rays</li> </ul> <p>Comprehensive dental services:</p> <ul style="list-style-type: none"> <li>» You are covered for up to \$2,000 per year (\$500 per quarter) for services such as non-routine care, extractions, fillings, implants, dentures, crowns, bridges, root canal and oral surgery.</li> <li>» Unused amounts from the quarterly limit carry over to the next quarter and must be used by December 31, 2023.</li> </ul> <p>The supplemental dental benefit is limited to the dental procedure codes covered by the plan.</p>

# VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Benefits	New York State Medicaid	VillageCareMAX Medicare Health Advantage (HMO D-SNP)
<b>Diabetes Programs and Supplies</b>	Medicaid covers Medicare deductibles, copays, and coinsurances.	0% or 20% of the cost for Medicare-covered services: <ul style="list-style-type: none"> <li>» Diabetes self-management training</li> <li>» Therapeutic shoes or inserts</li> <li>» Diabetic monitoring supplies</li> </ul>
<b>Diagnostic Tests, X-Rays, Lab Services, and Radiology Services</b>	Medicaid covers Medicare deductibles, copays, and coinsurances.	0% or 20% of the cost for Medicare-covered services: <ul style="list-style-type: none"> <li>» X-rays</li> <li>» Diagnostic and therapeutic radiological services</li> <li>» Diagnostic procedures and tests</li> <li>» Lab services</li> </ul>
<b>Doctor Office Visits</b>	Medicaid covers Medicare deductibles, copays, and coinsurances.	0% or 20% of the cost for Medicare-covered: <ul style="list-style-type: none"> <li>» Primary Care Provider (PCP) visits and Specialist visits</li> </ul>



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## VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Benefits	New York State Medicaid	VillageCareMAX Medicare Health Advantage (HMO D-SNP)
<b>Durable Medical Equipment (DME)</b>	<p>Medicaid covers Medicare deductibles, copays, and coinsurances.</p> <p>DME must be ordered by a practitioner. No homebound prerequisite and include non-Medicare DME covered by Medicaid (e.g. tub stool; grab bar).</p>	<p>0% or 20% of the cost for Medicare-covered durable medical equipment and supplies.</p>
<b>Emergency Care</b>	<p>Medicaid covers Medicare deductibles, copays, and coinsurances.</p>	<p>0% or 20% (up to \$95) of the cost for each Medicare-covered emergency room visit.</p> <p>You pay \$0 if admitted to the hospital within 24 hours of the emergency room visit.</p> <p>You are covered for up to \$50,000 per year for Worldwide Emergency/Urgent Coverage and Emergency Transportation when you travel outside of the United States and its territories.</p>



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## VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Benefits	New York State Medicaid	VillageCareMAX Medicare Health Advantage (HMO D-SNP)
<p><b>Hearing Services</b></p>	<p>Medicaid covers Medicare deductibles, copays, and coinsurances.</p> <p>Hearing services and products when medically necessary to alleviate disability caused by the loss or impairment of hearing. Services include hearing aid selecting, fitting, and dispensing; hearing aid checks following dispensing, conformity evaluations, and hearing aid repairs; audiology services, including examinations and testing, hearing aid evaluations, and hearing aid prescriptions; and hearing aid products, including hearing aids, ear molds, special fittings, and replacement parts.</p>	<p>0% or 20% of the cost for Medicare-covered hearing services.</p> <p>You pay nothing for additional plan-covered benefits:</p> <ul style="list-style-type: none"> <li>» 1 routine hearing exam and fitting for hearing aid per year</li> <li>» Up to \$1,500 per year for 2 hearing aids limited to \$750 per ear</li> </ul>
<p><b>Home Health Services</b></p>	<p>Medicaid covers Medicare deductibles, copays, and coinsurances.</p> <p>Medically necessary intermittent skilled nursing care, home health aide services, and rehabilitation services. Also includes non-Medicare-covered home health services (e.g., home health aide services with nursing supervision to medically unstable individuals, physical therapist to supervise maintenance program for patients who have reached their maximum restorative potential, or nurse to prefill syringes for disabled individuals with diabetes).</p>	<p>There is no copay for each Medicare-covered home health visit</p>



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## VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Benefits	New York State Medicaid	VillageCareMAX Medicare Health Advantage (HMO D-SNP)
<b>Hospice</b>	Medicaid covers Medicare deductibles, copays, and coinsurances.	When you enroll in a Medicare-certified hospice program, your hospice services and your Part A and Part B services related to your terminal prognosis are paid for by Original Medicare, not VillageCareMAX Medicare Health Advantage.
<b>Inpatient Hospital Care – including Substance Abuse and Rehabilitation Services</b>	<p>Medicaid covers Medicare deductibles, copays, and coinsurances.</p> <p>Up to 365 days per year (366 days for leap year).</p>	<p>Our plan covers inpatient stays. For each benefit period:</p> <ul style="list-style-type: none"> <li>» \$0 or \$1,600 deductible</li> <li>» \$0 for days 1 -60</li> <li>» \$0 or \$400 per day for days 61-90</li> <li>» \$0 or \$800 per day for 60 lifetime reserve days</li> </ul>



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## VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Benefits	New York State Medicaid	VillageCareMAX Medicare Health Advantage (HMO D-SNP)
<p><b>Inpatient Mental Health Care</b></p>	<p>Medicaid covers Medicare deductibles, copays, and coinsurances.</p> <p>All inpatient mental health services, including voluntary or involuntary admissions for mental health services over the Medicare 190- Day Lifetime Limit.</p>	<p>For each benefit period:</p> <ul style="list-style-type: none"> <li>» \$0 or \$1,600 deductible</li> <li>» \$0 for days 1 -60</li> <li>» \$0 or \$400 per day for days 61-90</li> <li>» \$0 or \$800 per day for 60 lifetime reserve days</li> </ul> <p>You get up to 190 days of inpatient care in a psychiatric hospital in a lifetime (limit does not apply to care provided in a general hospital).</p>



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# VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Benefits	New York State Medicaid	VillageCareMAX Medicare Health Advantage (HMO D-SNP)
<p><b>Outpatient Prescription Drugs</b></p>	<p>Medicaid does not cover Part D-covered drugs or copays.</p> <p>Medicaid Pharmacy Benefits allowed by State Law (select drug categories excluded from the Medicare Part D benefit and certain Medical Supplies and Enteral Formula when not covered by Medicare).</p>	<p><b>Drugs covered under Medicare Part B</b></p> <ul style="list-style-type: none"> <li>» 0% or 20% of the cost of Medicare Part B chemotherapy drugs and other Medicare Part B drugs</li> </ul> <p><b>Drugs covered under Medicare Part D</b> Depending on your level of income and Medicaid eligibility, you pay the following:</p> <p><b>Initial Coverage Stage</b> (after you paid your yearly deductible)</p> <ul style="list-style-type: none"> <li>» Generic drugs: \$0 or \$1.45 or \$4.15 copay, or 15%</li> <li>» Brand drugs: \$0 or \$4.30 or \$10.35 copay, or 15%</li> </ul> <p><b>Catastrophic Coverage Stage</b> (once payments reach \$7,400 in a year)</p> <ul style="list-style-type: none"> <li>» \$0 copay, or</li> <li>» \$4.15 for generics drugs or \$10.35 for brand drugs</li> </ul>

## VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Benefits	New York State Medicaid	VillageCareMAX Medicare Health Advantage (HMO D-SNP)
<b>Outpatient Rehabilitation Services</b>	<p>Medicaid covers Medicare deductibles, copays, and coinsurances.</p> <p>Medicaid covers medically necessary occupational therapy, physical therapy and speech therapy visits that are ordered by a doctor or other licensed professional</p>	<p>0% or 20% of the cost for each Medicare-covered:</p> <ul style="list-style-type: none"> <li>» Physical Therapy visits</li> <li>» Occupational Therapy visits</li> <li>» Speech Language Therapy visits</li> </ul>
<b>Outpatient Services/Surgery</b>	<p>Medicaid covers Medicare deductibles, copays, and coinsurances.</p>	<p>0% or 20% of the cost for each Medicare-covered:</p> <ul style="list-style-type: none"> <li>» Ambulatory Surgical Center visit</li> <li>» Outpatient Hospital services</li> </ul>
<b>Outpatient Substance Abuse Care</b>	<p>Medicaid covers Medicare deductibles, copays, and coinsurances.</p> <p>Medicaid covers substance abuse services.</p>	<p>0% or 20% of the cost for each Medicare-covered individual and group therapy session.</p>
<b>Over-the counter items</b>	<p>Medicaid covers certain over-the-counter medications.</p>	<p>VillageCareMAX Medicare Health Advantage provides an OTC card with a maximum limit of up to \$2,100 per year (\$175 per month) to buy approved non-prescription drugs and health-related items at participating locations, or online for home delivery. Eligible members may also use their card to buy grocery items.</p>

## VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Benefits	New York State Medicaid	VillageCareMAX Medicare Health Advantage (HMO D-SNP)
<b>Podiatry Services</b>	Medicaid covers Medicare deductibles, copays, and coinsurances.	<p>0% or 20% of the cost for each Medicare-covered visit for podiatry services.</p> <p>Medicare-covered podiatry services are for medically necessary foot care.</p>
<b>Preventive Services and Wellness/ Education Programs</b>	Some preventive services covered under Medicaid.	<p>\$0 for preventive services covered under Original Medicare.</p> <p>Any additional preventive services approved by Medicare during the contract year will be covered.</p>
<b>Transportation (non-emergency)</b>	Non-emergency transportation services are covered.	\$0 for up to 36 one-way trips per year to plan approved locations.
<b>Urgently Needed Care</b>	Medicaid covers Medicare deductibles, copays, and coinsurances.	<p>0% or 20% of the cost (up to \$60) for each Medicare-covered urgently needed care visits.</p> <p>You are also covered for up to \$50,000 per year for Worldwide Emergency/Urgent Coverage and Emergency Transportation when you Travel outside of the United States and its territories.</p>



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# VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Benefits	New York State Medicaid	VillageCareMAX Medicare Health Advantage (HMO D-SNP)
<p><b>Prosthetic Devices, Medical and Surgical Supplies, Enteral and Parenteral Formula</b></p>	<p>Medicaid covers Medicare deductibles, copays, and coinsurances.</p> <p>Medicaid covers prosthetics, orthotics, and orthopedic footwear.</p> <p>These items are generally considered to be one-time only use, consumable items routinely paid for under the Durable Medical Equipment category of fee-for-service Medicaid.</p> <p>Coverage of enteral formula and nutritional supplements is limited to coverage only for nasogastric, jejunostomy, or gastrostomy tube feeding. Coverage of enteral formula and nutritional supplements is limited to individuals who cannot obtain nutrition through any other means, and to the following three conditions: 1) tube-fed individuals who cannot chew or swallow food and must obtain nutrition through formula via tube; 2) individuals with rare inborn metabolic disorders requiring specific medical formulas to provide essential nutrients not available through any other means; and, 3) children who require medical formulas due to mitigating factors in growth and development. Coverage for certain inherited diseases of amino acid and organic acid metabolism shall include modified solid food products that are low-protein, or which contain modified protein.</p>	<p>0% or 20% of the cost for each Medicare-covered:</p> <ul style="list-style-type: none"> <li>» Prosthetic devices</li> <li>» Medical and surgical supplies</li> <li>» Enteral and parenteral formula</li> </ul> <p>You pay nothing for additional plan-covered benefits:</p> <ul style="list-style-type: none"> <li>» 1 additional pair of custom-molded diabetic shoes above the Medicare limit per year, if you have diabetes and severe diabetic foot disease.</li> </ul>



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## VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Benefits	New York State Medicaid	VillageCareMAX Medicare Health Advantage (HMO D-SNP)
<b>Skilled Nursing Facility (SNF)</b>	<p>Medicaid covers Medicare deductibles, copays, and coinsurances.</p> <p>Medicaid covers additional days beyond Medicare 100-day limit.</p>	<p>Plan covers up to 100 days each benefit period.</p> <p>For each benefit period:</p> <ul style="list-style-type: none"> <li>» \$0 for days 1 through 20</li> <li>» \$0 or \$200.00 per day for days 21-100</li> <li>» All costs for each day after day 100 of the benefit period</li> </ul>
<b>Vision Services</b>	<p>Medicaid covers Medicare deductibles, copays, and coinsurances.</p> <p>Medicaid covers services of optometrists, ophthalmologists, and ophthalmic dispensers, including eyeglasses, medically necessary contact lenses, and poly carbonate lenses, artificial eyes (stock or custom-made), low-vision aids, and low-vision services. Coverage also includes the repair or replacement of parts. Coverage also includes examinations for diagnosis and treatment for visual defects and/or eye disease. Examinations for refraction are limited to every two (2) years unless otherwise justified as medically necessary. Eyeglasses do not require changing more frequently than every two (2) years unless medically necessary or unless the glasses are lost, damaged, or destroyed.</p>	<p>0% or 20% for Medicare covered services:</p> <ul style="list-style-type: none"> <li>» 1 pair of eyeglasses or contact lenses after cataract surgery</li> <li>» Exams to diagnose and treat diseases and conditions of the eye</li> </ul> <p>\$0 copay for additional benefits covered by the plan:</p> <ul style="list-style-type: none"> <li>» Routine eye exam (1 per year)</li> <li>» Eyewear – up to \$350 per year for contact lenses or eyeglasses (lenses and frames)</li> </ul>



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## VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

*The following benefits are not covered by VillageCareMAX Medicare Health Advantage but may be available through Medicaid depending on your level of Medicaid coverage. This is not a complete list. Call Member Services for more information.*

Benefits	New York State Medicaid
<b>Adult Day Health Care</b>	Adult day health care is care and services provided in a residential health care facility or approved extension site under the medical direction of a physician to a person who is functionally impaired, not homebound, and who requires certain preventive, diagnostic, therapeutic, rehabilitative, or palliative items or services. Adult day health care includes the following services: medical, nursing, food and nutrition, social services, rehabilitation therapy, leisure time activities which are a planned program of diverse meaningful activities, dental, pharmaceutical, and other ancillary services.
<b>Assisted Living Program</b>	Medicaid covers personal care, housekeeping, supervision, home health aides, personal emergency response services, nursing, physical therapy, occupational therapy, speech therapy, medical supplies and equipment, adult day health care, a range of home health services, and the case management services of a registered professional nurse. Services are provided in an adult home or enriched housing setting.
<b>Certain Mental Health Services</b>	Medicaid coverage includes: <ul style="list-style-type: none"> <li>» Intensive Psychiatric Rehabilitation Treatment Programs</li> <li>» Day Treatment Continuing Day Treatment</li> <li>» Case Management for Seriously and Persistently Mentally Ill (sponsored by state or local mental health units)</li> <li>» Partial Hospitalizations</li> <li>» Assertive Community Treatment (ACT)</li> <li>» Personalized Recovery Oriented Services (PROS)</li> </ul>



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# VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Benefits	New York State Medicaid
<b>Community First Choice Option (CFCO)</b>	<p>Services are community based, person centered, and designed to maximize an Enrollee’s independence in the community. All services in this category must directly relate to an assessed need and must be authorized in the Enrollee’s Person-Centered Service Plan. Some CFCO Services are available to all Enrollees. Other CFCO Services are only available to those who qualify for CFCO. To qualify for CFCO, Enrollees must be determined to need Nursing Home Level of Care.</p>
<b>Comprehensive Medicaid Case Management</b>	<p>Medicaid covers Comprehensive Medicaid Case Management (CMCM), which provides “social work” case management referral services to a targeted population. A CMCM case manager will assist a client in accessing necessary services in accordance with goals outlined in a written case.</p>
<b>Consumer Directed Personal Assistance Services (CDPAS)</b>	<p>Medicaid covers services to chronically ill or physically disabled individuals who have a medical need for help with activities of daily living (ADLs) or skilled nursing services. Services can include any of the services provided by a personal care aide (home attendant), home health aide, or nurse. Members who choose CDPAS have flexibility and freedom to choose their caregivers with some restrictions. A parent of an adult child (21 years of age or older) may serve as that adult child's CDPAS personal assistant. However, a parent of a child who is younger than 21 years of age cannot be hired as that minor child's CDPAS personal assistant.</p> <p>The member or the person acting on the member’s behalf is responsible for recruiting, hiring, training, supervising, and, if necessary, terminating caregivers providing CDPAS services.</p>
<b>Directly Observed Therapy for Tuberculosis (TB) Disease</b>	<p>Medicaid covers Tuberculosis Directly Observed Therapy (TB/DOT), which is the direct observation of oral ingestion of TB medications to assure patient compliance with the physician’s prescribed medication regimen.</p>



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## VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Benefits	New York State Medicaid
<b>Family Planning Services</b>	Family planning services provided by qualified out-of-network Medicaid providers. Services include diagnosis and all medically necessary treatment, sterilization, screening and treatment for sexually transmissible diseases and screening for disease and pregnancy. Also included is HIV counseling and testing when provided as part of a family planning visit.
<b>HIV COBRA Case Management Program</b>	A program that provides intensive, family-centered case management and community follow-up activities by case managers, case management technicians, and community follow-up workers. Services include intake, assessment, reassessment, service plan development and implementation, monitoring, advocacy, crisis intervention, exit planning, and case specific supervisory case-review conferencing.
<b>Home and Community Based Waiver Program Services</b>	Medicaid covers personal care services to a participant who requires assistance with personal care services tasks and whose health and welfare in the community is at risk because oversight and supervision of the participant is required when no personal care task is being performed. These services are provided under the direction and supervision of a Registered Professional Nurse.
<b>Medicaid Pharmacy Benefits</b>	Medicaid covers select drug categories excluded from the Medicare Part D benefit. For a full list of Medicaid reimbursable drugs, visit <a href="https://www.emedny.org/info/formfile.aspx">https://www.emedny.org/info/formfile.aspx</a> .
<b>Methadone Maintenance Treatment Programs (MMTP)</b>	Medicaid covers MMTP, consisting of drug detoxification, drug dependence counseling, and rehabilitation services which include chemical management with methadone.
<b>Nutrition</b>	Medicaid covers the assessment of nutritional needs and food patterns, or the planning for the provision of foods and drink appropriate for the individual's physical and medical needs and environmental conditions, or the provision of nutrition education and counseling to meet normal and therapeutic needs. In addition, these services may include the assessment of nutritional status and food preferences, planning for provision of appropriate dietary intake within the patient's home environment and cultural considerations, nutritional education regarding therapeutic diets as part of the treatment milieu, development of a nutritional treatment plan, regular evaluation and revision of nutritional plans, provision of in-service education to health agency staff, as well as consultation on specific dietary problems of patients and nutrition teaching to patients and families. These services must be provided by a qualified nutritionist.



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## VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Benefits	New York State Medicaid
<b>Office for People with Development Disabilities (OPWDD) Services</b>	Medicaid covers the following OPWDD services: Long Term Therapy Services Provided by Article 16-Clinic Treatment Facilities or Article 28 Facilities. Day Treatment. Comprehensive Medicaid Case Management Services. Home- and Community- Based Services Waivers (HCBS) for the developmentally disabled.
<b>Personal Care Services</b>	Medicaid covers personal care services (PCS), which involve the provision of some or total assistance with personal hygiene, dressing and feeding, and nutritional and environmental support (meal preparation and housekeeping). Personal care services must be medically necessary, ordered by a physician, and provided by a qualified person in accordance with a plan of care.
<b>Personal Emergency Response Services (PERS)</b>	Medicaid covers electronic devices which enable certain high-risk patients to secure help in the event of a physical, emotional, or environmental emergency. A variety of electronic alert systems now exists which employ different signaling devices. Such systems are usually connected to a patient's phone and signal a response center once a "help" button is activated. In the event of an emergency, the signal is received and appropriately acted upon by a response center.
<b>Private Duty Nursing</b>	Medicaid coverage provided for medically necessary private duty nursing services in accordance with the ordering physician, registered physician assistant, or certified nurse practitioner's written treatment plan.
<b>Rehabilitation Services Provided to Residents of OMH-Licensed Community Residences (CRs) and Family-Based Treatment Programs</b>	Medicaid covers rehabilitation services provided to residents of the Office of Mental Health (OMH)-licensed community residences (CRs) and family-based treatment programs.



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## VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

Benefits	New York State Medicaid
<b>Social and Environmental Supports</b>	Medicaid covers services and items that support the medical needs of the Enrollees and are included in an Enrollee's plan of care. These services and items include but are not limited to the following: home maintenance tasks, homemaker/chore services, housing improvement, and respite care.
<b>Social Day Care</b>	Medicaid covers a structured Social Day Care program which provides functionally impaired individuals with socialization; supervision and monitoring; and nutrition in a protective setting during any part of the day, but for less than a 24-hour period. Additional services may include and are not limited to personal care maintenance and enhancement of daily living skills, transportation, caregiver assistance, and case coordination and assistance.



**If you have questions**, please call VillageCareMAX at 1-800-469-6292 (TTY: 711), 8:00 am to 8:00 pm, 7 days a week. The call is free. **For more information**, visit [www.villagecaremax.org](http://www.villagecaremax.org).

# VillageCareMAX Medicare Health Advantage (HMO D-SNP) | 2023 Summary of Benefits

## Pre-Enrollment Checklist

Before making an enrollment decision, it is important that you fully understand our benefits and rules. If you have any questions, you can call and speak to a customer service representative at 1-800-469-6292 (TTY: 711).

### Understanding the Benefits

- The Evidence of Coverage (EOC) provides a complete list of all coverage and services. It is important to review plan coverage, costs, and benefits before you enroll. Visit [www.villagecaremax.org](http://www.villagecaremax.org) or call 1-800-469-6292 (TTY: 711) to view a copy of the EOC.
- Review the provider directory (or ask your doctor) to make sure the doctors you see now are in the network. If they are not listed, it means you will likely have to select a new doctor.
- Review the pharmacy directory to make sure the pharmacy you use for any prescription medicines is in the network. If the pharmacy is not listed, you will likely have to select a new pharmacy for your prescriptions.
- Review the formulary to make sure your drugs are covered.

### Understanding Important Rules

- In addition to your monthly plan premium, you must continue to pay your Medicare Part B premium unless Medicaid pays it for you. This premium is normally taken out of your Social Security check each month.
- Benefits, premiums and/or copayments/co-insurance may change on January 1, 2024.
- Except in emergency or urgent situations, we do not cover services by out-of-network providers (doctors who are not listed in the provider directory).
- This plan is a dual eligible special needs plan (D-SNP). Your ability to enroll will be based on verification that you are entitled to both Medicare and medical assistance from a state plan under Medicaid.

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VillageCareMAX is an HMO plan with Medicare and New York State Medicaid contracts. Enrollment in VillageCareMAX depends on contract renewal.

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**If you have general questions or questions about our plan, services, service area, billing, or Member ID Cards, please call VillageCareMAX Medicare Health Advantage Member Services:**

1-800-469-6292

Calls to this number are free. 8:00 am to 8:00 pm, 7 days a week

Member Services also has free language interpreter services available for non-English speakers.

TTY 711

This number requires special telephone equipment and is only available for people who have difficulties hearing or speaking.

Calls to this number are free. 8:00 am to 8:00 pm, 7 days a week

**If you have questions about your health:**

- Call your Primary Care Provider (PCP) or clinic, if opened. Follow the instructions for getting care when the office or clinic is closed.
- If your clinic or PCP office is closed, you can call Member Services or VillageCareMAX Medicare Health Advantage's Physician Call Line. A doctor will listen to your problem and tell you how to get care.

The numbers for the Physician Call Line are:

1-844-484-7362 - Calls to this number are free. 24 hours per day.

VillageCareMAX Medicare Health Advantage also has free language interpreter services available for non-English speakers.

TTY 711 - Calls to this number are free. 24 hours per day.

**If you need immediate behavioral health care, call Beacon Health Options Member Services:**

1-866-599-1481

Calls to this number are free. 8:00 am to 6:00 pm, Monday through Friday. On Call Service is available after business hours.

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# VILLAGECAREMAX

**800-469-6292 Toll-free**

**TTY 711**

**7 days a week, 8:00 am to 8:00 pm**

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