

CDPHP CONDITIONS FOR OFFERING:

Only RETIREES may enroll in this Group Medicare Plan.

Enrollees must have Medicare Part A and B.

For Group Medicare the employer contribution must be 50% or more.

Group members must reside in a **24-county service area**: Albany, Broome, Chenango, Columbia, Delaware, Dutchess, Essex, Fulton, Greene, Hamilton, Herkimer, Madison, Montgomery, Oneida, Orange, Otsego, Rensselaer, Saratoga, Schenectady, Schoharie, Tioga, Ulster, Warren and Washington.

Individuals or Sole Proprietors cannot enroll in a group medicare plan. For a referral, please contact Debbie Collett at 518-431-1433.

2019 CDPHP MEDICARE CHOICE PPO \$10/\$15

MONTHLY PREMIUM	NETWORK	Preventive Care	OFFICE VISIT	SPECIALIST VISIT	INPATIENT / HOSPITAL	OUTPATIENT SURGERY	ER *	AMBULANCE	URGENT CARE	LAB (waived if	X-RAY / ULTRA-SOUND	COMPLEX RADIOLOGY	ANNUAL OUT OF POCKET LIMIT
\$320.10	In Network	Covered in full	\$10	\$15	\$0	\$125	\$75 *	\$100	\$25	\$15	\$15	\$30	\$3,350
	Out of Network	Covered in full	\$20	\$30	\$500	\$250	\$75 *	\$100	\$25	\$30	\$30	\$60	Combined IN & OON

* waived if admitted

CDPHP Group Medicare Plan includes the following:

PART D PRESCRIPTION DRUG BENEFIT: RX Rider - Plan 520: \$0/\$10/\$35/\$65/30% No Deductible, No Coverage Gap

Preventive Services Covered at no copayment **in network**.

Physical, speech, occupational therapies covered at the specialist copayment or lower with no visit limit.

Skilled Nursing Facility Care limited to 100 days per benefit period for medically necessary care; covered at no copayment in network.

Home Health Care covered at no copayment in network as long as medically necessary.

Routine eye exams and hearing tests at specialist copayment, plus a \$100 allowance toward eyewear and \$200 allowance toward hearing aids annually.

Part B Pharmaceuticals: \$20 copayment.

Hearing Care Solutions, a discount program for hearing care.

Cardiac Rehab., Podiatry Care, Renal Care, Outpatient Mental Health - \$15 copayment per visit

Dental Services are not covered.

Also available to CDPHP Group Medicare members:

CDPHP Senior Fit fitness programs through SilverSneakers, Curves, Sunnyview Lifestyle Wellness Center, Rudy A. Ciccotti Center, Beltrone Living Center and YMCAs.

A variety of free wellness classes, including yoga, nutrition, exercise and stress management.

CDPHP Health Ally, a personalized program that meets Medicare members' unique needs through support, education and access to CDPHP Benefits and community-based services.

NOTE: This summary highlights the benefits of the plan being offered and does not detail all benefits, limitations or exclusions.

MVP CONDITIONS FOR OFFERING:

Only RETIREES may enroll in this Group Medicare Plan.

Enrollees must have Medicare Part A and B.

Employer must contribute a minimum of 80% of the member premium.

Plan requires minimum of 3 enrolled contracts.

Individuals or Sole Proprietors cannot enroll in a group medicare plan.

2019 MVP HEALTH CARE PREFERRED GOLD HMO-POS

MVP Product HG170022/RGH0192X

MONTHLY RATE	NETWORK	Preventive Care	OFFICE VISIT	SPECIALIST VISIT	INPATIENT / HOSPITAL	OUTPATIENT SURGERY	ER	AMBULANCE	URGENT CARE	LAB	X-RAY / ULTRA-SOUND	COMPLEX RADIOLOGY	ANNUAL OUT OF POCKET LIMIT
\$299.63	In Network	Covered in full	\$15	\$30	\$250 per stay / \$750 max/year	\$60	\$75	\$100 per use	\$30 worldwide coverage	\$10	\$30	\$60	\$4000**
	Out of Network		*	*	*	*	*	*	*	*	*	*	No Deductible. Member pays 30%. \$5000 Max Annual Benefit. *

* **Out of Network:** Care from providers that are not part of MVP's network. (Not all services are covered out of network.)

** **Member Protection:** In and Out of Network (excludes: Part D costs, acupuncture, eyewear, hearing aids and dental if applicable)

MVP Group Medicare Plan includes the following:

PART D PRESCRIPTION DRUG BENEFIT: Pharmacy Rider: RX \$0/\$10/\$35/50%/33%; Tier 1 & copays through donut hole

Physical, speech, occupational therapies : \$30 copayment.

Skilled Nursing Facility Care limited to 100 days per benefit period for medically necessary care; \$25 each day days 1-20; \$150 each day, days 21-100.

Home Health Care is covered in full.

Eyewear \$100 Allowance/2years

Hearing Aids \$600 allowance/3 years

Dental services are not covered.

Also available to MVP Group Medicare members:

24 Hour Nurse Line, 7 days per week to answer health questions via telephone or email

HealthDollars: \$100 in HealthDollars to use toward health programs such as weight loss and smoking cessation.

The SilverSneakers Fitness Program: free fitness center membership benefits at participating fitness centers.

NOTE: This summary highlights the benefits of the plan being offered and does not detail all benefits, limitations or exclusions.