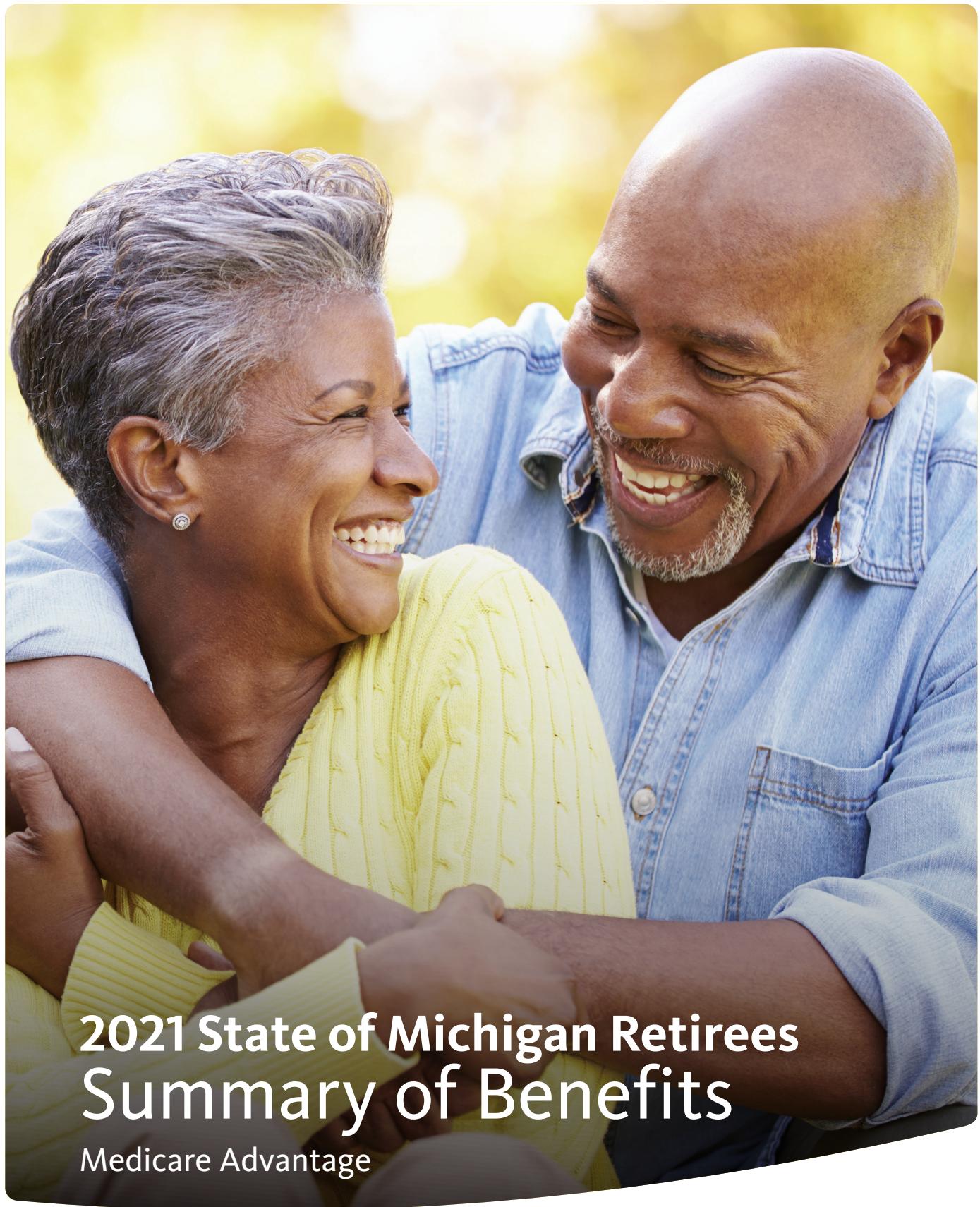


Serving Bay, Calhoun, Clinton, Eaton, Gratiot, Ingham, Ionia, Kalamazoo, Montcalm, Saginaw, Shiawassee, and Tuscola Counties



# 2021 State of Michigan Retirees Summary of Benefits

Medicare Advantage

PHP MEDICARE (HMO-POS)

 **PHP**  
**MEDICARE**  
State of Michigan Retirees



# PHP MEDICARE SUMMARY OF BENEFITS

## **State of Michigan**

**January 1, 2021 – December 31, 2021**

This document gives you a summary of the benefits you can expect when you choose the PHP Medicare Employer Plan, including what PHP Medicare covers and what you pay. It doesn't list every limitation, exclusion, or covered service. To get a complete list of services we cover, call us and ask for the Evidence of Coverage.

To join PHP Medicare (HMO-POS), you must be entitled to Medicare Part A, enrolled in Medicare Part B, and live in the PHP Medicare service area. Our service area includes the following counties in Michigan: Bay, Calhoun, Clinton, Eaton, Gratiot, Ingham, Ionia, Kalamazoo, Montcalm, Saginaw, Shiawassee, and Tuscola.

### **CONTACT US**

If you have questions, call one of our PHP Medicare experts at <XXX.XXX.XXXX> (TTY: 711). From October 1 to March 31, you can call us seven days a week from 8 a.m. to 8 p.m. E.T. From April 1 to September 30, you can call us Monday through Friday from 8 a.m. to 8 p.m. E.T.

Email us anytime. Visit [phpSOM.com](http://phpSOM.com) and click on Contact Us to send a secure email.

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.

<Material ID>

# Overview of In-Network Benefits

Healthcare Services	In-Network Coverage
<b>Deductible</b>	\$125
<b>Maximum Out-of-Pocket</b>	\$500
<b>Co-insurance</b>	None
<b>Primary Care Physician Visits</b>	\$20 copay
<b>Specialist Visits</b>	\$20 copay
<b>Telemedicine Visits</b>	\$10 copay
<b>Emergency Care Visits</b>	\$65 copay (waived if admitted)
<b>Ambulance Services</b>	Covered after deductible
<b>Urgent Care Visits</b>	\$20 copay
<b>Preventive Services</b>	Covered 100% (check with plan for list)
<b>Inpatient Hospital</b>	Covered after deductible
<b>Outpatient Surgery</b>	Covered after deductible
<b>Radiology Services (X-rays, MRI, CAT, PET)</b>	Covered after deductible
<b>Laboratory &amp; Pathology Tests</b>	Covered
<b>Radiation Therapy</b>	Covered after deductible
<b>Physical/Speech/Occupational Therapy</b>	\$20 copay
<b>Inpatient Mental Health &amp; Substance Abuse</b>	Covered after deductible
<b>Outpatient Mental Health &amp; Substance Abuse</b>	\$20 copay
<b>Chiropractic Care</b>	\$20 (subluxation manipulation only)
<b>Durable Medical Equipment</b>	Covered
<b>Prosthetics &amp; Orthotics</b>	Covered
<b>Allergy Testing &amp; Therapy</b>	Covered after deductible

*Prior authorization may apply for some benefits. Contact the plan for more information.*

# Overview of In-Network Benefits

Healthcare Services	In-Network Coverage
Allergy Injections	Covered
Skilled Nursing Facility (SNF)	Covered after deductible (up to 120 days per stay)
Hospice Care	Covered after deductible
Home Healthcare	Covered after deductible
Supplemental Benefits Included	
Fitness Memberships at a participating SilverSneakers® facility	Covered
Transportation	20 One-way non-emergent transportation trips
Hearing Exam – Routine Exam	Covered
Hearing Aids	\$1,000 allowance for hearing aids every 3 calendar years
Part D Prescription Drugs	
<b>Retail Preferred Pharmacy</b>	<b>30-Day Supply</b>
Tier 1 (Preferred Generic)	\$10
Tier 2 (Generic)	\$10
Tier 3 (Preferred Brand)	\$30
Tier 4 (Non-Preferred Drug)	\$60
Tier 5 (Specialty)	\$60
<b>Mail Order</b>	<b>90-Day Supply</b>
Tier 1 (Preferred Generic)	\$20
Tier 2 (Generic)	\$20
Tier 3 (Preferred Brand)	\$60
Tier 4 (Non-Preferred Drug)	\$120
Tier 5 (Specialty)	Not Available
<b>Maximum Out-of-Pocket coverage</b>	Once member's out of pocket costs reach over \$6,550, the copay is the greater of either 5% OR \$3.70 for generics and \$9.20 brands, not to exceed base copay.

Retail copays above are for Preferred Pharmacies; add \$5 for Retail Non-Preferred Pharmacies. Mail-Order copays remain the same.



## Notice of Non-Discriminatory Practices

PHP Medicare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. PHP Medicare does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

PHP Medicare:

Provides free aids and services to people with disabilities to communicate effectively with us, such as:

- • Qualified interpreter services
- • Written information in other formats

Provides free language services to people whose primary language is not English, such as:

- Qualified interpreter services
- Information written in other languages

If you need these services, contact Customer Service at X.XXX.XXX.XXXX(TTY: 711).

If you believe that PHP Medicare has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

### **Section 1557 Compliance Coordinator**

#### **ATTN: Discrimination Grievance**

Michelle Coberly, Director of Medicare Compliance

1400 E. Michigan Avenue, Lansing, MI 48912

Ph: 517-364-8384

Fax: 517-364-8406

You must file a grievance using the prescribed form in writing by mail, fax, or email. You may request a form and instruction on how to file a grievance from the Coordinator at the contact information above.

If you need help filing a grievance, the Compliance Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-868-1019, 800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>

PHP Medicare is an HMO-POS plan with a Medicare contract. Enrollment in PHP Medicare depends on contract renewal. You must continue to pay your Medicare part B premium.

## Multi-Language Interpreter Services

**ENGLISH: ATTENTION:** If you speak another language other than English, language assistance services, free of charge, are available to you. Call X.XXX.XXX.XXXX (TTY: 711).

**SPANISH: ATENCIÓN:** Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al X.XXX.XXX.XXXX (TTY: 711).

**ARABIC:** ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل -xxx-xxx-xxxx (رقم هاتف الصم والبكم -xxx-xxx-xxxx).

**CHINESE:** 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 X.XXX.XXX.XXXX (TTY: 711)。

**VIETNAMESE:** CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số X.XXX.XXX.XXXX (TTY: 711).

**ALBANIAN:KUJDES:** Nëse flitni shqip, për ju ka në dispozicion shërbime të assistencës gjuhësore, pa pagesë. Telefononi në X.XXX.XXX.XXXX (TTY: 711).

**KOREAN:** 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. X.XXX.XXX.XXXX 번 (TTY: 711 번)으로 전화하십시오.

**BENGALI:** লক্ষ্য করুনঃ যদি আপনি বাংলা, কথা বলতে পারেন, তাহলে নিঃখরচায় ভাষা সহায়তা পরিষেবা উপলব্ধ আছে। ফোন করুন ১XXXXXXX XXXXX TTY: 711।

**POLISH:** UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwon pod numer X.XXX.XXX.XXXX (TTY: 711).

**GERMAN:** ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufen Sie uns an unter X.XXX.XXX.XXXX (TTY: 711).

**ITALIAN: ATTENZIONE:** In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero X.XXX.XXX.XXXX (TTY: 711).

**JAPANESE:** 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。  
XXXX XXX XXXX (TTY:711) まで、お電話にてご連絡ください。

**RUSSIAN: ВНИМАНИЕ!** Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните по номеру X.XXX.XXX.XXXX (телефон: 711).

**SERBO-CROATIAN: OBAVJEŠTENJE:** Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite X XXX XXX XXXX (TTY- Telefon za osobe sa oštećenim govorom ili slušom: 711).

**TAGALOG: PAUNAWA:** Kung nagsasalita ka ng Tagalog, may mga libreng serbisyo para sa tulong sa wika na maaari mong gamitin. Tumawag sa X XXX XXXX XXXX (TTY: 711)

## **phpSOM.com**

Toll-free: <xxx.xxx.xxxx> TTY users call: 711, 8 a.m. to 8 p.m., seven days a week

1400 E. Michigan Ave. Lansing, MI 48912

You may reach a messaging service on weekends from April 1 through September 30 and holidays. Please leave a message, and your call will be returned the next business day.

PHP Medicare offers employer/union-sponsored HMO-POS plans with a Medicare contract. Enrollment in PHP Medicare depends on contract renewal. All PHP Medicare plans include Part D drug coverage. To enroll, you must have both Medicare Parts A and B and reside in the Michigan county of Bay, Calhoun, Clinton, Eaton, Gratiot, Ingham, Ionia, Kalamazoo, Montcalm, Saginaw, Shiawassee, or Tuscola.

You must continue to pay your Medicare Part B premium. Please note that enrollment is limited to specific times of the year. This information is not a complete description of benefits. Call <XXX.XXX.XXXX> (TTY: 711) for more information.

Out-of-network/non-contracted providers are under no obligation to treat PHP Medicare 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.

PHP Medicare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al <XXX.XXX.XXXX> (TTY: 711).

**ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية توافر لك بالمجان. اتصل برقم <XXX.XXX.XXXX> (رقم هاتف الصم والبكم: 711).**

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