



2015

Summary of Benefits

Virginia Premier CompleteCare (Medicare-Medicaid Plan),
a Commonwealth Coordinated Care Plan



If you have questions, please call Virginia Premier CompleteCare at 1-855-338-6467, 8:00 am to 8:00 pm, Monday to Friday. The call is free. For more information, visit www.vapremier.com/completecure.

Virginia Premier CompleteCare: **Summary of Benefits**



This is a summary of health services covered by Virginia Premier CompleteCare for 2015. This is only a summary. Please read the Member Handbook for the full list of benefits.

- ❖ Virginia Premier CompleteCare (Medicare-Medicaid Plan) is a health plan that contracts with both Medicare and the Virginia Department of Medical Assistance Services to provide benefits of both programs to enrollees. It is for people with both Medicare and Medicaid.
- ❖ Under Virginia Premier CompleteCare you can get your Medicare and Medicaid services in one health plan. A Virginia Premier CompleteCare care manager will help manage your health care needs.
- ❖ This is not a complete list. The benefit information is a brief summary, not a complete description of benefits. For more information contact the plan or read the Member Handbook.
- ❖ Limitations, copays, and restrictions may apply. For more information, call Virginia Premier CompleteCare Member Services or read the Virginia Premier CompleteCare Member Handbook.
- ❖ Benefits, List of Covered Drugs, and pharmacy and provider networks, and/or copayments may change from time to time throughout the year and on January 1 of each year.
- ❖ Copays for prescription drugs may vary based on the level of Extra Help you receive. Please contact the plan for more details.
- ❖ You can ask for this information in other formats, such as Braille or large print. Call 1-855-338-6467. The call is free.
- ❖ You can get this information for free in other languages. Call 1-855-338-6467. The call is free.



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Virginia Premier CompleteCare: **Summary of Benefits**

The following chart lists frequently asked questions.

Frequently Asked Questions (FAQ)	Answers
What is a Medicare-Medicaid Plan?	A Medicare-Medicaid Plan is an organization made up of doctors, hospitals, pharmacies, providers of long-term services, and other providers. It also has care managers to help you manage all your providers and services. They all work together to provide the care you need.
What is a Virginia Premier CompleteCare care manager?	A Virginia Premier CompleteCare care manager is one main person for you to contact. This person helps manage all your providers and services and makes sure you get what you need.
What are long-term services and supports?	Long-term services and supports (LTSS) are a variety of services and supports that help elderly individuals and individuals with disabilities meet their daily needs for assistance and improve the quality of their lives. Examples include assistance with bathing, dressing and other basic activities of daily life and self-care, as well as support for everyday tasks such as laundry, shopping, and transportation. LTSS are provided over a long period of time, usually in homes and communities, but also in facility-based settings such as nursing facilities.



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Frequently Asked Questions (FAQ)	Answers
Will you get the same Medicare and Medicaid benefits in Virginia Premier CompleteCare that you get now?	You will get your covered Medicare and Medicaid benefits directly from Virginia Premier CompleteCare. You will work with a team of providers who will help determine what services will best meet your needs. This means that some of the services you get now may change. When you enroll in Virginia Premier CompleteCare, you and your care team will work together to develop an Individualized Care Plan to address your health and support needs. During this time, you can keep your current providers (including out-of-network providers) for 180 days after you first enroll. You can also keep getting your prior authorized services for the duration of the prior authorization or for 180 days after you first enroll, whichever is sooner. If you are in a nursing facility at the time of program implementation, you may remain in the facility as long as you continue to meet the criteria for nursing facility care, unless you or your family prefers to move to a different nursing facility or return to the community. Nursing home criteria are established by the Virginia Department of Medical Assistance Services. When you join our plan, if you are taking any Medicare Part D prescription drugs that Virginia Premier CompleteCare does not normally cover, you can get a temporary supply. We will help you get another drug or get an exception for Virginia Premier CompleteCare to cover your drug, if medically necessary.



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Frequently Asked Questions (FAQ)	Answers
Can you go to the same doctors you see now?	Often that is the case. If your providers (including doctors, therapists, and pharmacies) work with Virginia Premier CompleteCare and have a contract with us, you can keep going to them. Providers with an agreement with us are “in-network.” You must use the providers in Virginia Premier CompleteCare’s network. If you need urgent or emergency care or out-of-area dialysis services, you can use providers outside of Virginia Premier CompleteCare's network To find out if your doctors are in the plan’s network, call Member Services or read Virginia Premier CompleteCare's Provider and Pharmacy Directory. If Virginia Premier CompleteCare is new for you, you can continue seeing the doctors you go to now (including out of network providers) for 180 days after you first enroll. If you were transferred to Virginia Premier CompleteCare from another Commonwealth Coordinated Care health plan, you can continue seeing the doctors you go to now (including out of network providers) for 30 days after you first enroll.
What happens if you need a service but no one in Virginia Premier CompleteCare's network can provide it?	Most services will be provided by our network providers. If you need a service that cannot be provided within our network, Virginia Premier CompleteCare will pay for the cost of an out-of-network provider.



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Frequently Asked Questions (FAQ)	Answers
Where is Virginia Premier CompleteCare's available?	The service area for this plan includes: Albemarle, Alleghany, Amelia, Augusta, Bath, Bedford City, Bedford County, Botetourt, Buena Vista, Brunswick, Buckingham, Caroline, Charles City, Charlottesville, Chesapeake, Chesterfield, Colonial Heights, Covington, Craig, Culpeper, Cumberland, Dinwiddie, Essex, Emporia, Floyd, Fluvanna, Franklin City, Franklin County, Fredericksburg, Giles, Gloucester, Goochland, Greene, Greenville, Hampton, Hanover, Henrico, Highland, Hopewell, Isle of Wight, King and Queen, King George, King William, Lancaster, Lexington, Louisa, Lunenburg, Madison, Mathews, Middlesex, Nelson, New Kent, Newport News, Norfolk, Nottoway, Orange, Patrick, Petersburg, Poquoson, Portsmouth, Powhatan, Prince Edward, Prince George, Pulaski, Richmond City, Richmond County, Roanoke City, Roanoke County, Rockbridge, Rockingham, Salem, Southampton, Spotsylvania, Stafford, Suffolk, Surry, Sussex, Virginia Beach and Waynesboro Counties, Virginia. You must live in one of these areas to join the plan.
Do you pay a monthly amount (also called a premium) under Virginia Premier CompleteCare?	You will not pay any monthly premiums to Virginia Premier CompleteCare for your health coverage.
What is prior authorization?	Prior authorization means that you must get approval from Virginia Premier CompleteCare before you can get a specific service or drug or see an out-of-network provider. Virginia Premier CompleteCare may not cover the service or drug if you don't get approval. If you need urgent or emergency care or out-of-area dialysis services, you don't need to get approval first.
What is Extra Help?	Extra Help is a Medicare program that helps reduce your prescription drug program costs such as copays. Your prescription drug copays under Virginia Premier CompleteCare already include the amount of Extra Help you qualify for. For more information about Extra Help, contact your local Social Security Office, or call Social Security at 1-800-772-1213. TTY users may call 1-800-325-0778.



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Virginia Premier CompleteCare: Summary of Benefits

Frequently Asked Questions (FAQ)	Answers
Who should you contact if you have questions or need help?	If you have general questions or questions about our plan, services, billing, or member cards, please call Virginia Premier CompleteCare Member Services:
	CALL 1-855-338-6467 Calls to this number are free. Our office hours are 8:00 am to 8:00 pm, Monday to Friday. This information may be available in a different format, including large print and Braille. Please call Member Services at the number listed above if you need plan information in another format or language. Member Services also has free language interpreter services available for people who do not speak English.
	TTY 1-800-828-1120 (TTY) / 1-800-828-1140 (TDD) This number is for people who have hearing or speaking problems. You must have special telephone equipment to call it. Calls to this number are free. Our office hours are 8:00 am to 8:00 pm, Monday to Friday.
	If you have questions about your health, please call the Nurse Advice Call line:
	CALL 1-800-256-1982 Calls to this number are free. Nurse Advice Line services are offered 24 hours a day, 7 days a week.
	TTY 1-800-828-1120 (TTY) / 1-800-828-1140 (TDD) This number is for people who have hearing or speaking problems. You must have special telephone equipment to call it. Calls to this number are free. Nurse Advice Line services are offered 24 hours a day, 7 days a week.



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Virginia Premier CompleteCare: **Summary of Benefits**

The following chart is a quick overview of what services you may need, your costs and rules about the benefits.

Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions, & benefit information (rules about benefits)
You want to see a doctor	Visits to treat an injury or illness	\$0	No prior authorization is required.
	Wellness visits, such as a physical	\$0	No prior authorization is required.
	Transportation to a doctor's office	\$0	A prior authorization is required (trip request requires 72 hours advanced notice).
	Specialist care	\$0	A prior authorization may be required.
	Care to keep you from getting sick, such as flu shots	\$0	No prior authorization is required.
	"Welcome to Medicare" preventive visit (one time only)	\$0	No prior authorization is required.
You need medical tests	Lab tests, such as blood work	\$0	No prior authorization is required for routine tests.
	X-rays or other pictures, such as CAT scans	\$0	No prior authorization is required for basic x-rays or pictures.
	Screening tests, such as tests to check for cancer	\$0	No prior authorization is required.



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Virginia Premier CompleteCare: **Summary of Benefits**

Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions, & benefit information (rules about benefits)
You need drugs to treat your illness or condition	Generic drugs (no brand name)	Tier 1 drugs are generic drugs. The copay will be from \$1.20 to \$2.65 for a 30-day supply. Copays for prescription drugs may vary based on the level of Extra Help you receive. Please contact the plan for more details.	There may be limitations on the types of drugs covered. Please see Virginia Premier CompleteCare's List of Covered Drugs (Drug List) for more information. In some cases, you may obtain your medications for an extended-day supply through our in-network mail-order pharmacy at the same cost as for a one-month supply at our in-network retail pharmacies. See the Provider/Pharmacy Directory for a list of in-network pharmacies and types of pharmacies (retail, mail-order, etc.). A prior authorization may be required.
	Brand name drugs	Tier 2 drugs are brand name drugs. The copay will be from \$3.60 to \$6.60 for a 30-day supply. Copays for prescription drugs may vary based on the level of Extra Help you receive. Please contact the plan for more details.	There may be limitations on the types of drugs covered. Please see Virginia Premier CompleteCare's List of Covered Drugs (Drug List) for more information. In some cases, you may obtain your medications for an extended-day supply through our in-network mail-order pharmacy at the same cost as for a one-month supply at our in-network retail pharmacies. See the Provider/Pharmacy Directory for a list of in-network pharmacies and types of pharmacies (retail, mail-order, etc.). A prior authorization may be required.



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Virginia Premier CompleteCare: Summary of Benefits

Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions, & benefit information (rules about benefits)
You need drugs to treat your illness or condition (continued)	Over-the-counter (OTC) drugs	Tier 3 drugs are Non-Medicare Rx/OTC drugs and the copay will be \$0.00.	Virginia Premier CompleteCare covers some OTC drugs when they are written as prescriptions by your provider. There may be limitations on the types of drugs covered. Please see Virginia Premier CompleteCare's List of Covered Drugs (Drug List) for more information. A prior authorization may be required.
	Medicare Part B prescription drugs	\$0	Part B drugs include drugs given by your doctor in his or her office, some oral cancer drugs, and some drugs used with certain medical equipment. Read the Member Handbook for more information on these drugs. A prior authorization may be required.
You need therapy after a stroke or accident	Occupational, physical, or speech therapy	\$0	A prior authorization is required.
You need emergency care	Emergency room services	\$0	No prior authorization is required. Emergency room services will be covered if you need to use an emergency room that is not in our network. Read the Member Handbook for more information.
	Ambulance services	\$0	A prior authorization is not required for emergencies. A prior authorization is required for non-emergencies.
	Urgent care	\$0	No prior authorization is required. Urgent care services will be covered if you need to use a provider that is not in our network. Read the Member Handbook for more information.
You need hospital care	Hospital stay	\$0	A prior authorization is required.
	Doctor or surgeon care	\$0	A prior authorization is required unless it is a visit with your Primary Care Provider (PCP).



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Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions, & benefit information (rules about benefits)
You need help getting better or have special health needs	Rehabilitation services	\$0	A prior authorization is required.
	Medical equipment for home care	\$0	A prior authorization is required.
	Skilled nursing care	\$0	A prior authorization is required.
You need eye care	Eye exams	\$0	No prior authorization is required (once every two years).
You need hearing/auditory services	Routine hearing screenings	\$0	No prior authorization is required.
You have a chronic condition, such as diabetes or heart disease	Services to help manage your disease	\$0	No prior authorization is required.
	Diabetes supplies and services	\$0	A prior authorization is required.
You have a mental health condition	Mental or behavioral health services	\$0	A prior authorization may be required.
You have a substance abuse problem	Substance abuse services	\$0	A prior authorization may be required.
You need long-term mental health services	Inpatient care for people who need mental health care	\$0	A prior authorization is required.
You need durable medical equipment (DME)	Wheelchairs	\$0	A prior authorization is required.
	Canes	\$0	A prior authorization is required.
	Crutches	\$0	A prior authorization is required.
	Walkers	\$0	A prior authorization is required.
	Oxygen	\$0	A prior authorization is required.



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Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions, & benefit information (rules about benefits)
You need help living at home	Home services, such as cleaning or housekeeping	Varies*	Waiver services and State eligibility requirements may apply. The dollar amount is based on patient pay amount. A prior authorization is required.
	Changes to your home, such as ramps and wheelchair access	\$0	A prior authorization is required. Limitations, copays and restrictions may apply. For more information, call Virginia Premier CompleteCare Member Services. This means you may have to pay for some services and that you need to follow certain rules to have Virginia Premier CompleteCare pay for your services.
	Personal care assistant (You may be able to employ your own assistant. Call Member Services for more information.)	Varies*	Waiver services and State eligibility requirements may apply. The dollar amount is based on patient pay amount. A prior authorization is required.
	Home health care services	\$0	A prior authorization is required.
	Services to help you live on your own	Varies*	Waiver services and State eligibility requirements may apply. The dollar amount is based on patient pay amount. A prior authorization is required.
	Adult day services or other support services	Varies*	Waiver services and State eligibility requirements may apply. The dollar amount is based on patient pay amount. A prior authorization is required.
You need a place to live with people available to help you	Nursing facility care	Varies*	A prior authorization is required. Members must meet state-specific criteria and be authorized for long-term nursing facility admissions. The dollar amount is based on patient pay amount.



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Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions, & benefit information (rules about benefits)
Your caregiver needs some time off	Respite care	Varies*	Waiver services and State eligibility requirements may apply. The dollar amount is based on patient pay amount. A prior authorization is required.

* *You must contribute toward the cost of this service when your income exceeds an allowable amount. This contribution, known as the patient pay amount, is required if you live in a nursing facility or receive services through the Elderly or Disabled with Consumer Direction (EDCD) Waiver.*



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Virginia Premier CompleteCare: **Summary of Benefits**

Other services that Virginia Premier CompleteCare covers

This is not a complete list. Call Member Services or read the Member Handbook to find out about other covered services.

Other services covered by Virginia Premier CompleteCare	Your costs for <u>in-network</u> providers
One supplemental routine podiatry visit(s) every three months for approved members.	\$0

Services that Virginia Premier CompleteCare does not cover

This is not a complete list. Call Member Services to find out about other excluded services.

Services <u>not</u> covered by Virginia Premier CompleteCare	Additional Information
Acupuncture	The use of sharp needles inserted in various points of the body for the treatment of a variety of illnesses and health conditions.
Targeted Case Management Services	Includes both referral/transition management and clinical services such as monitoring, self-management support, medication review and adjustment for Enrollees with developmental disabilities.
Certain Dental services unless otherwise noted	Virginia Premier CompleteCare is responsible for some medically necessary procedures. Call Member Services for more information.
Case Management Services for Participants of Auxiliary Grants	An income supplement for individuals who receive Supplemental Security Income (SSI) and certain other aged, blind, or disabled individuals who reside in a licensed assisted living facility (ALF) or an approved adult foster care (AFC) home.



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Virginia Premier CompleteCare: Summary of Benefits

Your rights as a member of the plan

As a member of Virginia Premier CompleteCare, you have certain rights. You can exercise these rights without being punished. You can also use these rights without losing your health care services. We will tell you about your rights at least once a year. For more information on your rights, please read the Member Handbook. Your rights include, but are not limited to, the following:

- **You have a right to respect, fairness and dignity.** This includes:
 - The right to get covered services without concern about race, ethnicity, national origin, religion, gender, age, mental or physical disability, sexual orientation, genetic information, ability to pay, or ability to speak English
 - The right to request information in other formats (e.g., audio CD-ROM, large print, cassette, Braille)
 - The right to be free from any form of restraint or seclusion
 - The right not to be billed by providers
- **You have the right to get information about your health care.** This includes information on treatment and your treatment options. This information should be in a format you can understand. These rights include getting information on:
 - Description of the services we cover
 - How to get services
 - How much services will cost you
 - Names of health care providers and care managers
- **You have the right to make decisions about your care, including refusing treatment.** This includes the right:
 - To choose a Primary Care Provider (PCP) and you can change your PCP at any time
 - To see a women's health care provider without a referral
 - To get your covered services and drugs quickly
 - To know about all treatment options, no matter what they cost or whether they are covered
 - To refuse treatment, even if your doctor advises against it
 - To stop taking medicine
 - To ask for a second opinion. Virginia Premier CompleteCare will pay for the cost of your second opinion visit.
- **You have the right to timely access to care that does not have any communication or physical access barriers.** This includes the right to:
 - Get medical care timely
 - Get in and out of a health care provider's office. This means barrier free access for people with disabilities, in accordance with the Americans with Disabilities Act
 - Have interpreters to help with communication with your doctors and your health plan.



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- **You have the right to seek emergency and urgent care when you need it.** This means:
 - You have the right to get emergency services without prior approval in an emergency
 - You have the right to see an out of network urgent or emergency care provider, when necessary
- **You have a right to confidentiality and privacy.** This includes:
 - The right to ask for and get a copy of your medical records in a way that you can understand and to ask for your records to be changed or corrected.
 - The right to have your personal health information kept private.
- **You have the right to make complaints about your covered services or care.** This includes the right to:
 - File a complaint or grievance against us or our providers
 - Ask for a state fair hearing
 - Get a detailed reason for why services were denied

For more information about your rights, you can read the Virginia Premier CompleteCare Member Handbook. If you have questions, you can also call Virginia Premier CompleteCare Member Services.



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Virginia Premier CompleteCare: **Summary of Benefits**

If you have a complaint or think we should cover something we denied

If you have a complaint or think Virginia Premier CompleteCare should cover something we denied, call Virginia Premier CompleteCare at 1-855-338-6467. You are able to appeal our decision.

For questions about complaints and appeals, you can read Chapter 9 of the Virginia Premier CompleteCare Member Handbook. You can also call Virginia Premier CompleteCare Member Services.

To mail or fax a complaint, grievance or appeal:

Virginia Premier Health Plan, Inc.
Attn: Grievance & Appeals
PO Box 5244
Richmond, VA 23220

Grievances and Appeals Fax Number: 804-649-9647

If you suspect fraud

Most health care professionals and organizations that provide services are honest. Unfortunately, there may be some who are dishonest.

If you think a doctor, hospital or other pharmacy is doing something wrong, please contact us.

- Call us at Virginia Premier CompleteCare Member Services. Phone numbers are on the cover of this summary.
- Or, call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. You can call these numbers for free, 24 hours a day, 7 days a week.
- Or, call the Department of Medical Assistance Services (DMAS) at 1-800-371-0824.



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Multi-language Interpreter Services

English: We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-855-338-6467. Someone who speaks English/Language can help you. This is a free service.

Spanish: Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-855-338-6467. Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin: 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 1-855-338-6467。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Cantonese: 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電1-855-338-6467。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

Tagalog: Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggamot. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa 1-855-338-6467. Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French: Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-855-338-6467. Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese: Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi 1-855-338-6467 sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

German: Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter 1-855-338-6467. Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean: 당사는 의료 보험 또는 약품 보험에 관한 질문에 답해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-855-338-6467 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Russian: Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-855-338-6467. Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Arabic:

إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول على مترجم فوري، ليس عليك سوى الاتصال بنا على 1-855-338-6467. سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية.

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