

Independent Health's Medicare Family Choice[®] HMO I-SNP 2021 Plan Overview

If you reside in a participating nursing home or an assisted living/adult care facility, or are caring for someone who does, and want an extra level of care to address special needs you may be interested in this Medicare Advantage plan.

Benefit	Copay
Monthly Plan Premium	\$42.30 (There may be no cost to you if you qualify for Medicaid)
Prescription Coverage	No deductible \$4/\$15/25%/25%/33% to initial coverage limit of \$4,130
Inpatient Hospital Copayment	\$200 copay per admission (\$600 annual copayment maximum)
Office Visit - Primary and Specialist*	\$0
Enhanced Annual Well Visit (EAV)	\$0 comprehensive annual well visit with your doctor that includes a detailed exam and conversation about your health to create a personalized care plan.
Preventive Services	\$0
Lab**	\$0
X-ray/Advanced Radiology	10% coinsurance general X-ray/10% coinsurance advanced radiology
Worldwide Emergency Room Coverage	\$90 copay
Urgent Care	\$0
Outpatient Surgery	10% coinsurance
Physical, Occupational and Speech Therapy	\$0 copay
Home Health	\$0 copay
Skilled Nursing Facility	\$0
Vision	\$0 copay routine eye exam. Up to \$150 annually for routine eyewear (includes Retinal Imaging).
Hearing Aid	\$45 hearing aid evaluation exam. Member pays \$499 – \$2,799 (per ear) for hearing aid devices. You must use a provider in the American Hearing Benefits network.
Transportation (non-emergency)	\$0 for up to 36 one-way trips to plan-approved locations (30 mile limit).

Speak with an Independent Health Medicare Family Choice HMO I-SNP plan representative today at
(716) 635-4900 or **1-800-958-4405** (TTY: 711):

October 1 – December 7: Monday – Sunday, 8 a.m. – 8 p.m.;

December 8 – September 30: Monday – Friday, 8 a.m. – 8 p.m.

Or, for more information and to view a full list of participating facilities,
visit www.independenthealth.com/familychoice



*Referrals are required on specialist visits. **Member pays 20% for genetic testing.

Independent Health is a Medicare Advantage organization with a Medicare contract offering HMO, HMO-SNP, HMO-POS, and PPO plans. Enrollment in Independent Health depends on contract renewal.

This plan is available to anyone with Medicare who meets the Skilled Nursing Facility (SNF) level of care requirement and resides in a participating nursing home for 90 days or more. Or, members must qualify for an institutional level of care as defined by the state of New York. Must be a resident of a participating assisted living/adult care facility located in Western New York, and not live outside the affiliated facility for more than 30 days. Independent Health's Medicare Family Choice HMO I-SNP has been approved by the National Committee for Quality Assurance (NCQA) to operate as a Special Needs Plan (SNP) until December 31, 2023 based on a review of Independent Health's Medicare Family Choice HMO I-SNP Model of Care.

This information is not a complete description of benefits. For more information please call (716) 635-4900 or 1-800-958-4405 (TTY: 711), October 1 – December 7: Monday – Sunday, 8 a.m. – 8 p.m.; December 8 – September 30: Monday – Friday, 8 a.m. – 8 p.m.

ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Call 1-800-665-1502 (TTY: 711).

Independent Health 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 1-800-665-1502 (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 1-800-665-1502 (TTY: 711)。

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