

## The Annual Enrollment Period Is Here: WHAT YOU NEED TO KNOW



The next few pages will walk you through some of the changes to your benefits in the coming year. Your options for 2024 are as follows: Stay with AvMed; go to another Medicare Advantage Plan; or switch to traditional, fee-for-service Medicare. We feel strongly that our plans continue to offer major advantages that make it the best choice for you.

As you review this insert, you'll find that some copays have remained the same and other healthcare costs are lower. By keeping costs low for our Members, AvMed continues to be one of the best values in

South Florida. Our goal is to help Members achieve a WELLfluent™ lifestyle, and we're doing that by minimizing Member expenses and maintaining the highest caliber of healthcare benefits.

We are looking forward to continuing to serve you.

### Have Questions?

If you have questions about your changes in coverage, call AvMed's Member Engagement Center at **1-800-782-8633** (TTY 711) 8:00AM to 8:00PM Monday to Friday and Saturday from 9:00AM to 1:00PM April 1st to September 30th. 8:00AM to 8:00PM 7 days a week between October 1st to March 31st.

AvMed Medicare is an HMO plan with a Medicare contract. Enrollment in AvMed Medicare depends on contract renewal. See other side for more information.

## AvMed Medicare Choice / Miami-Dade Benefits at a Glance

BENEFIT	HMO 2024	HMO 2023
Annual Out-of-Pocket Maximum	\$3,000	\$3,000
Primary Care Physician	\$0	\$0
Specialist Physician	\$0	\$0
Referral	Yes	Yes
Telehealth	\$0	\$0
Transportation (one-way)	8	8
Inpatient Hospital	\$0	\$0
Outpatient Surgery	\$50 - \$175	\$50 - \$175
Meals (post-hospitalization) 5 Days/10 Meals	\$0	\$0
Emergency Room	\$100	\$100
Eyewear Allowance	\$350	\$350
Dental Exam (See EOC for details)	\$0	\$0
Hearing Aid Allowance	\$1,200	\$1,200
Over the Counter Allowance	\$25 every month	\$25 every month
<b>Flex Card</b> (Dental, Hearing, Vision & OTC) Rollover benefit until end of year	\$175 every quarter	\$50 every month
<b>Part D Prescription Drug Benefit</b>		
Initial Coverage Limit	\$5,030	\$4,660
Preferred Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/\$25/\$35/33%	\$0/\$0/\$25/\$35/33%
Standard Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$10/\$35/\$85/33%	\$0/\$10/\$35/\$85/33%

## AvMed Medicare Circle / Miami-Dade Benefits at a Glance

BENEFIT	HMO 2024	HMO 2023
Annual Out-of-Pocket Maximum	\$2,500	\$2,500
Primary Care Physician	\$0	\$0
Specialist Physician	\$0	\$0
Referral	Yes	Yes
Telehealth	\$0	\$0
Transportation (one-way)	Unlimited	Unlimited
Inpatient Hospital	\$0	\$0
Outpatient Surgery	\$50 - \$100	\$50 - \$100
Meals (post-hospitalization) 5 Days/10 Meals	\$0	\$0
Emergency Room	\$75	\$75
Eyewear Allowance	\$450	\$450
Dental Exam (See EOC for details)	\$0	\$0
Hearing Aid Allowance	\$1,500	\$1,500
Over the Counter Allowance	\$50 every month	\$50 every month
<b>Flex Card</b> (Dental, Hearing, Vision & OTC) Rollover benefit until end of year	\$250 every quarter	\$75/month
<b>Part D Prescription Drug Benefit</b>		
Initial Coverage Limit	\$8,000	\$8,000
Preferred Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/\$0/\$35/33%	\$0/\$0/\$0/\$35/33%
Standard Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$10/\$25/\$85/33%	\$0/\$10/\$25/\$85/33%

## AvMed Medicare Access / Miami-Dade Benefits at a Glance

BENEFIT	HMO POS 2024 \$10,000 Point-of-Service Benefit	HMO POS 2023 \$10,000 Point-of-Service Benefit
Annual Out-of-Pocket Maximum	\$3,400	\$3,400
Primary Care Physician	\$0	\$0
Specialist Physician	\$10	\$10
Referral	No	No
Telehealth	\$0	\$0
Transportation (one-way)	8	8
Inpatient Hospital	\$0 days 1 to 5 \$40 days 6 to 20 \$0 days 21 to 90 and beyond	\$0 days 1 to 5 \$40 days 6 to 20 \$0 days 21 to 90 and beyond
Outpatient Surgery	\$75 - \$175	\$75 - \$175
Meals (post-hospitalization) 5 Days/10 Meals		
Emergency Room	\$120	\$120
Eyewear Allowance	\$350	\$350
Dental Exam (See EOC for details)	\$0 - \$25	\$0 - \$25
Hearing Aid Allowance	\$1,000	\$1,000
Over the Counter Allowance	\$25 every quarter	\$25 every quarter
<b>Flex Card</b> (Dental, Hearing, Vision & OTC) Rollover benefit until end of year	\$115 every quarter	\$30/month
<b>Part D Prescription Drug Benefit</b>		
Initial Coverage Limit	\$5,030	\$4,660
Preferred Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/\$30/\$75/33%	\$0/\$0/\$30/\$75/33%
Standard Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$10/\$40/\$100/33%	\$0/\$10/\$40/\$100/33%

## NEW! AvMed Medicare One HMO/ Miami-Dade Benefits at a Glance

BENEFIT	NEW! One HMO 2024
Annual Out-of-Pocket Maximum	\$1,000
Primary Care Physician	\$0
Specialist Physician	\$0
Referral	No
Telehealth	\$0
Transportation (one-way)	Unlimited
Inpatient Hospital	\$0
Outpatient Surgery	\$50 - \$100
Meals (post-hospitalization) 5 Days/10 Meals	\$0
Emergency Room	\$75
Eyewear Allowance	\$450
Dental Exam (See EOC for details)	\$0
Hearing Aid Allowance	\$1,500
Over the Counter Allowance	\$50 every month
<b>Flex Card</b> (Dental, Hearing, Vision & OTC) Rollover benefit until end of year	\$275 every quarter
<b>Part D Prescription Drug Benefit</b>	
Initial Coverage Limit	\$8,000
Preferred Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/\$0/\$35/33%
Standard Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$10/\$25/\$85/33%

## AvMed Medicare Choice / Broward Benefits at a Glance

BENEFIT	HMO 2024	HMO 2023
Annual Out-of-Pocket Maximum	\$3,400	\$3,400
Primary Care Physician	\$0	\$0
Specialist Physician	\$10	\$10
Referral	Yes	Yes
Telehealth	\$0	\$0
Transportation (one-way)	8	8
Inpatient Hospital	\$0	\$0
Outpatient Surgery	\$75 - 200	\$75 - 200
Meals (post-hospitalization) 5 Days/10 Meals	\$0	\$0
Emergency Room	\$100	\$100
Eyewear Allowance	\$350	\$350
Dental Exam (See EOC for details)	\$0	\$0
Hearing Aid Allowance	\$1,200	\$1,200
Over the Counter Allowance	\$25 every month	\$25 every month
<b>Flex Card</b> (Dental, Hearing, Vision & OTC) Rollover benefit until end of year	\$175 every quarter	\$50/month
<b>Part D Prescription Drug Benefit</b>		
Initial Coverage Limit	\$5,030	\$4,660
Preferred Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/\$30/\$65/33%	\$0/\$0/\$30/\$65/33%
Standard Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$10/\$40/\$100/33%	\$0/\$10/\$40/\$100/33%

## AvMed Medicare Circle / Broward Benefits at a Glance

BENEFIT	HMO 2024	HMO 2023
Annual Out-of-Pocket Maximum	\$2,500	\$2,500
Primary Care Physician	\$0	\$0
Specialist Physician	\$0	\$0
Referral	Yes	Yes
Telehealth	\$0	\$0
Transportation (one-way)	Unlimited	Unlimited
Inpatient Hospital	\$0	\$0
Outpatient Surgery	\$75 - \$100	\$75 - \$100
Meals (post-hospitalization) 5 Days/10 Meals	\$0	\$0
Emergency Room	\$75	\$75
Eyewear Allowance	\$450	\$450
Dental Exam (See EOC for details)	\$0	\$0
Hearing Aid Allowance	\$1,500	\$1,500
Over the Counter Allowance	\$50 every month	\$50 every month
<b>Flex Card</b> (Dental, Hearing, Vision & OTC) Rollover benefit until end of year	\$250 every quarter	\$75/month
<b>Part D Prescription Drug Benefit</b>		
Initial Coverage Limit	\$6,000	\$6,000
Preferred Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/\$10/\$65/33%	\$0/\$0/\$10/\$65/33%
Standard Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$10/\$30/\$100/33%	\$0/\$10/\$30/\$100/33%

## AvMed Medicare Access / Broward Benefits at a Glance

BENEFIT	HMO POS 2024 \$10,000 Point-of-Service Benefit	HMO POS 2023 \$10,000 Point-of-Service Benefit
Annual Out-of-Pocket Maximum	\$3,400	\$3,400
Primary Care Physician	\$0	\$0
Specialist Physician	\$10	\$10
Referral Needed	No	No
Telehealth	\$0	\$0
Transportation (one-way)	8	8
Inpatient Hospital	\$0 days 1 to 5 \$40 days 6 to 20 \$0 days 21 to 90 and beyond	\$0 days 1 to 5 \$40 days 6 to 20 \$0 days 21 to 90 and beyond
Outpatient Surgery	\$75 - \$175	\$75 - \$175
Meals (post-hospitalization) 5 Days/10 Meals		
Emergency Room	\$120	\$120
Eyewear Allowance	\$350	\$350
Dental Exam (See EOC for details)	\$0 - \$25	\$0 - \$25
Hearing Aid Allowance	\$1,000	\$1,000
Over the Counter Allowance	\$25 every quarter	\$25 every quarter
<b>Flex Card</b> (Dental, Hearing, Vision & OTC) Rollover benefit until end of year	\$115 every quarter	\$30/month
<b>Part D Prescription Drug Benefit</b>		
Initial Coverage Limit	\$5,030	\$4,660
Preferred Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/\$30/\$75/33%	\$0/\$0/\$30/\$75/33%
Standard Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$10/\$40/\$100/33%	\$0/\$10/\$40/\$100/33%



## NEW! AvMed Medicare One HMO/ Broward Benefits at a Glance

BENEFIT	NEW! One HMO 2024
Annual Out-of-Pocket Maximum	\$1,500
Primary Care Physician	\$0
Specialist Physician	\$0
Referral	No
Telehealth	\$0
Transportation (one-way)	Unlimited
Inpatient Hospital	\$0
Outpatient Surgery	\$75 - \$100
Meals (post-hospitalization) 5 Days/10 Meals	\$0
Emergency Room	\$75
Eyewear Allowance	\$450
Dental Exam (See EOC for details)	\$0
Hearing Aid Allowance	\$1,500
Over the Counter Allowance	\$50 every month
<b>Flex Card</b> (Dental, Hearing, Vision & OTC) Rollover benefit until end of year	\$275 every quarter
<b>Part D Prescription Drug Benefit</b>	
Initial Coverage Limit	\$6,000
Preferred Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/\$10/\$65/33%
Standard Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/\$20/\$130/33%

## NEW! AvMed Medicare One HMO/ Palm Beach Benefits at a Glance

BENEFIT	NEW! One HMO 2024	Circle HMO 2023
Annual Out-of-Pocket Maximum	\$3,400	\$3,400
Primary Care Physician	\$0	\$0
Specialist Physician	\$20	\$20
Referral Needed	No	No
Telehealth	\$0	\$0
Transportation (one-way)	Unlimited	Unlimited
Inpatient Hospital	\$200 days 1 to 6 \$0 days 7 to 90 and beyond	\$200 days 1 to 6 \$0 days 7 to 90 and beyond
Outpatient Surgery	\$75 - \$175	\$75 - \$175
Meals (post-hospitalization) 5 Days/10 Meals	\$0	\$0
Emergency Room	\$120	\$120
Eyewear Allowance	\$450	\$450
Dental Exam (See EOC for details)	\$0	\$0
Hearing Aid Allowance	\$1,200	\$1,200
Over the Counter Allowance	\$100 every quarter	\$100 every quarter
<b>Flex Card</b> (Dental, Hearing, Vision & OTC) Rollover benefit until end of year	\$175 every quarter	\$50 every month
<b>Part D Prescription Drug Benefit</b>		
Initial Coverage Limit	\$5,030	\$4,660
Preferred Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/\$30/\$75/33%	\$0/\$0/\$30/\$75/33%
Standard Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$10/\$10/\$40/\$100/33%	\$0/\$10/\$40/\$100/33%

## NEW! AvMed Medicare One HMO / Orange, Osceola and Seminole Benefits at a Glance

BENEFIT	NEW! One HMO 2024	Circle HMO 2023
Annual Out-of-Pocket Maximum	\$3,000	\$3,000
Primary Care Physician	\$0	\$0
Specialist Physician	\$5	\$20
Referral	No	No
Telehealth	\$0	\$0
Transportation (one-way)	Unlimited	Unlimited
Inpatient Hospital	\$200 days 1 to 5 \$0 days 6 to 90 and beyond	\$200 days 1 to 5 \$0 days 6 to 90 and beyond
Outpatient Surgery	\$25 - \$50	\$25 - \$50
Meals (post-hospitalization) 5 Days/10 Meals	\$0	\$0
Emergency Room	\$90	\$90
Eyewear Allowance	\$450	\$450
Dental Exam (See EOC for details)	0%	0%
Hearing Aid Allowance	\$1,000	\$1,000
Over the Counter Allowance	\$75 every quarter	\$75 every quarter
<b>Flex Card</b> (Dental, Hearing, Vision & OTC) Rollover benefit until end of year	\$25 every 3 months	N/A
<b>Part D Prescription Drug Benefit</b>		
Initial Coverage Limit	\$5,030	\$4,660
Preferred Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$0/\$0/\$30/\$85/33%	\$0/\$0/\$30/\$85/33%
Standard Retail Network - 30 day supply Tier 1/Tier 2/Tier 3/Tier 4/Tier 5	\$10/\$20/\$47/\$100/33%	\$10/\$20/\$47/\$100/33%



# Attention AvMed Medicare Members: Your **2024** Benefits Have Been Enhanced

See your Evidence of Coverage or read below for improved cost sharing

As you review your 2024 benefits and make important choices for the new year, we want you to know that we're here for you. We are pleased to share that we have enhanced some of the benefits with **lower cost sharing**.

Our goal is to offer a healthcare experience that helps you lead a **WELLfluent™** life – one that's rich in health and happiness. During the Annual Enrollment Period, which runs from October 15, 2023 - December 7, 2023, we invite you to review your new Medicare coverage and understand your options. After all, becoming a wise health care consumer starts with knowledge.

As part of Florida's oldest and largest not-for-profit health plan, you can expect a range of benefits that will help you on your **WELLfluent** path.

These benefits include:

- **NEW!** AvMed Assist offers personalized service to help you navigate your health plan\* available for Members of AvMed Medicare One.
- Access to one of the largest and highest-quality networks of Primary Care Physicians (PCPs), specialists, and hospitals in your area
- Flex card helps you pay for up to \$1,100 of eligible expenses annually\*
- \$0 premium, primary care provider office visits and telemedicine visits
- **WELLfluent** living programs like AvMed Healthyperks<sup>SM</sup>, an incentives program



that rewards Members for staying on top of their health

- Prescription drug coverage, including RX Savings Solutions, a tool to help you easily find the lowest price for your prescription drugs
- Comprehensive dental benefits through Delta Dental\*
- Prescription drug coverage, including 100-day retail and mail-order discounts through Express Scripts
- Free gym memberships and fitness classes through SilverSneakers®
- Hearing solutions available through Nations Hearing\*
- Non-Emergency Medical Transportation powered by ALIVI\*
- Emergency care anywhere in the world for travelers

For a full benefits overview, look for your Annual Notice of Change and Evidence of Coverage in the mail. Once you've reviewed your options, we're certain you'll see that AvMed's dedication to high quality care makes us the best choice.

\*Applies to some plans.





# Your **2024** Pharmacy Benefits

Whether you're dealing with a chronic disease or an acute condition, pharmacy benefits are a huge factor when deciding on a health plan. AvMed's pharmacy benefits are designed to provide you with the best healthcare experience possible.



AvMed has made the strategic decision to change our Pharmacy Benefit Manager from CVS Caremark® to Express Scripts, effective January 1, 2024. As a result of our ongoing efforts to contribute to healthcare cost containment and improve health outcomes, this transition will allow us to enhance the value of the pharmacy programs we offer to our Members. Express Scripts focuses on delivering comprehensive and integrated care to identify and address any health concerns early on and close gaps in care.

"Our prescription drug plan ensures that our Members get the most out of their pharmacy benefits," says AvMed Director

of Pharmacy Lester Lachuk, Pharm.D., MBA. "We have worked with providers and pharmacies so that Members will be covered in the manner that most aligns with their treatment needs." For more information on formulary changes, visit **AvMed.org** or call AvMed's Member Engagement Center at **1-800-782-8633** (TTY 711) 7 days a week, 8 am–8 pm.

## **MEMBER SUPPORT**

To help Members get high quality prescription coverage, AvMed offers several support programs:

- **High-Risk Medication Notification:**  
We aim to keep high-risk prescription We aim to keep high-risk prescription drugs

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at a minimum and send notifications to any physicians who prescribe them. While some situations may call for a high-risk medication, there are often alternatives available.

#### • **Rx Savings Solutions:**

AvMed understands the importance of keeping prescription medication costs down for our Members. Rx Savings Solutions helps Members easily find the lowest-price options for their prescription drugs. This new online pharmacy tool is linked to AvMed, so everything is personalized, at no cost to Members.

Rx Savings Solutions will notify Members via email or text whenever there is an opportunity to save. To get started, Members can log on to the AvMed Member Portal at [AvMed.org](http://AvMed.org) and select Rx Savings Solutions link on the left menu.

#### • **Pharmacy Benefits:**

Members can also save money by using Preferred Pharmacies. If Members use AvMed's Preferred Pharmacies, their cost share for prescription coverage could be lower in 2024 compared to 2023. Preferred Pharmacies include such well-known names as Walgreens, Navarro's, Walmart and Publix as well as some independent retail pharmacies. Members should see the Provider and Pharmacy Directory for a full list of Preferred Pharmacies. If Members choose to use a non-Preferred Pharmacy, there is a possibility their cost share for prescription coverage, depending on what copay tier their drug(s) is in, could go up. It really pays to save by using a Preferred Pharmacy!

#### • **Transition Window:**

During the first 90 days of enrollment with AvMed Medicare, Members are able to fill a one-time 30-day supply of most Medicare approved medications.



#### • **Medication Therapy Management Program:**

For 2024, AvMed has a dedicated clinical pharmacist who will be performing a Comprehensive Medication Review (CMR) for our Medication Therapy Management (MTM) eligible members. This program is for Members with higher-than-average amounts of medications, health issues, or costs. After a one-on-one comprehensive review of a Member's medications, we send recommendations to the Member and their prescribing provider.

AvMed Medicare is an HMO plan with a Medicare contract. Enrollment in AvMed Medicare depends on contract renewal.





# Ordering Over-the-Counter (OTC) Products Has Never Been Easier



As a valued **AvMed** Member, you have access to a variety of brand-name and generic health and wellness products with your OTC benefit through **NationsOTC**®. Your benefit allowance can be used to order the items you need while saving you time and money.

## ENJOY A PREMIER EXPERIENCE



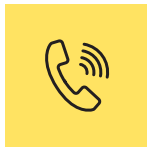
### Website

Visit [AvMed.NationsBenefits.com](https://AvMed.NationsBenefits.com) to order through the **MyBenefits** portal



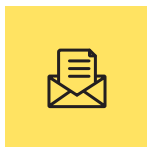
### App

Scan this code to download the **MyBenefits** app or visit [AvMed.NationsBenefits.com](https://AvMed.NationsBenefits.com)



### Phone

Call us at **(877) 239-2946** (TTY: 711)



### Mail

Complete and mail an order form



If you have any questions, please call us at **(877) 239-2946** (TTY: 711).

Member Experience Advisors are available 24 hours per day, 7 days per week, 365 days per year. Language support services are available free of charge.

