

# Your 2019 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 Members can expect the same quality benefits they enjoyed throughout 2018. "Members want stability and affordability, and we're giving them that," says AvMed Director of Pharmacy Shawn Barger, PharmD. "Copays are either decreasing or remaining the same, and the formulary is just going through annual maintenance changes. Many Members will not be affected by these updates."

For more information on formulary changes, visit [AvMed.org](http://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 the most out of their medicines, AvMed offers several support programs:

- **High-Risk Medication Notification:** We



aim to keep high-risk prescription drugs 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.

- **AvMed TEAMRx (Targeting and Engaging AvMed Members on Prescriptions):**

AvMed partners with the Retail pharmacies in the network to speak to our Members about their new medications, remind them to refill their existing medications and warn them about any medications that could be added or taken away based on their diagnoses and their entire list of medications. This solution-oriented program helps Members overcome any obstacles to taking their medicines.

- **Medication Therapy Management Program:**

AvMed partners with SinfoniaRX Medication Therapy Management (MTM). This program is for Members with higher-than-average amounts of medicines, health issues, or costs. After a one-on-one comprehensive review of a Member's medicines, we send recommendations to the Member and his or her prescribing provider.

- **Transition Window:** During the first 90 days of enrollment with AvMed Medicare, Members are able to fill a one-time 30-day supply of a Medicare approved medication.

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

## Attention AvMed Medicare Members: Your 2019 Benefits Have Been Enhanced

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

**A**s you review your 2019 benefits and make important choices for the new year, we want you to know that we're here for you. And, for 2019, we are pleased to share that we have enhanced some of the benefits with **lower cost sharing**.

Our goal is to offer a health care experience that helps you lead a **WELLfluent™** life – one that's rich in health and happiness. During the Annual Enrollment Period, which runs from Oct. 15 to Dec. 7, 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:

- Access to one of the largest and highest-quality networks of Primary Care Physicians (PCPs), specialists, and hospitals in South Florida
- The advantages of a large national plan with the highly personalized service of a regional plan

- **WELLfluent** living programs like AvMed Healthyperks<sup>SM</sup>, an incentives program that rewards Members for staying on top of their health
- Lower copays and cost-sharing responsibilities through AvMed's High Performance Network of Providers.
- Comprehensive dental benefits through Delta Dental
- Prescription drug coverage, including 90-day retail and mail-order discounts through CVS/caremark<sup>TM</sup>
- Free gym memberships and fitness classes through SilverSneakers<sup>®</sup>
- Earn gift card rewards for staying on top of your health with Healthyperks
- Emergency care anywhere in the world for travelers

On the pages that follow, you'll find the new annual medical and dental benefits for 2019. 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.

## 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 2019 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 in Miami-Dade County.

"In 2019, we are excited to share with you that we've made some significant improvements in cost-sharing. You'll find that some copays have remained the same and other healthcare costs are lower," says AvMed Director of Medicare, Madeleine Arritola. "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."

This year we have lowered the Member's out-of-pocket maximum (MOOP), visits to our High Performance Network (HPN) Specialist, prescription drugs as well as no cost for diabetic supplies. Plan benefits – including Primary Care Physician (PCP) visits, hospital admissions and lab tests – are staying the same.

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) 7 days a week, 8 am-8 pm.

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

## Miami-Dade Benefits at a Glance

BENEFIT	2019	2018
Out-of-pocket maximum	\$3,400	\$4,500
Primary Care Physician (PCP)	\$0	\$0
Specialists	\$0 - \$25	\$0-\$40
Hospital	\$0-\$25/day, days 1-5 \$55/day, days 6-20 \$0/day, days 21-90 \$0/day thereafter	\$0/day, days 1-5 \$55/day, days 6-20 \$0/day, days 21-90 \$0/day thereafter
Emergency room visit	\$120	\$80
Physical, speech, and occupational therapy	\$10/visit	\$10/visit
Comprehensive outpatient rehab facility	\$10/visit	\$10/visit
Allergy injections/ allergy skin testing	\$5 allergy injections/ \$10 allergy skin testing	\$5 allergy injections/ \$10 allergy skin testing
Copayments for prescription drugs	Categories are being referred to as tiers: \$0 Tier 1 \$0 Tier 2 \$35 Tier 3 \$70 Tier 4 33% coinsurance specialty drugs	Categories are being referred to as tiers: \$0 Tier 1 \$3 Tier 2 \$40 Tier 3 \$75 Tier 4 33% coinsurance specialty drugs
Outpatient diagnostic testing	\$10 in-office per test \$25 at facility per test	\$10 in-office per test \$25 at facility per test
Outpatient surgery	\$50 at a non-hospital-affiliated facility \$175 at a hospital-affiliated facility	\$45 at a non-hospital-affiliated facility \$145 at a hospital-affiliated facility
Dental	\$0-25/exams \$0-\$45/cleanings \$0-\$35/X-rays	\$0-\$25/exams \$0-\$45/cleanings \$0-\$35/X-rays

## Miami-Dade Benefit Changes for 2019

## Broward Benefits at a Glance

BENEFIT	2019	2018
Out-of-pocket maximum	\$3,400	\$5,000
Primary Care Physician (PCP)	\$0	\$0
Specialists	\$10-\$20	\$10-\$40
Hospital	\$0/day, days 1-5 \$40/day, days 6-20 \$0/day, days 21-90 \$0/day thereafter	\$0/day, days 1-5 \$40/day, days 6-20 \$0/day, days 21-90 \$0/day thereafter
Emergency room visit	\$120	\$80
Physical, speech, and occupational therapy	\$15/visit	\$15/visit
Comprehensive outpatient rehab facility	\$15/visit	\$15/visit
Allergy injections/ allergy skin testing	\$5 allergy injections/ \$10 allergy skin testing	\$5 allergy injections/ \$10 allergy skin testing
Copayments for prescription drugs	Categories are being referred to as tiers: \$0 Tier 1 \$5 Tier 2 \$40 Tier 3 \$75 Tier 4 33% coinsurance specialty drugs	Categories are being referred to as tiers: \$0 Tier 1 \$7 Tier 2 \$40 Tier 3 \$75 Tier 4 33% coinsurance specialty drugs
Outpatient lab diagnostic testing	\$10 in-office per test \$25 at facility per test	\$10 in-office per test \$25 at facility per test
Outpatient surgery	\$75 at a non-hospital-affiliated facility \$200 at a hospital-affiliated facility	\$35 at a non-hospital-affiliated facility \$200 at a hospital-affiliated facility
Dental	\$0-25/exams \$0-\$45/cleanings \$0-\$35/X-rays	\$0-\$25/exams \$0-\$45/cleanings \$0-\$35/X-rays

## Broward Benefit Changes for 2019