

Changes to the
AvMed Medicare Circle Miami-Dade County
2022
Evidence of Coverage

November 10, 2021

Dear Member,

This is important information on changes in your AvMed Medicare Circle coverage.

We previously sent you the Evidence of Coverage (EOC) which provides information about your coverage as an enrollee in our plan. This notice is to let you know there were errors in your EOC. Below you will find information describing and correcting the errors. Please keep this information for your reference. The correct EOC can be found on our website at www.avmed.org/medicare.

Changes to your EOC

Where you can find the error in your 2022 EOC	Original Information	Corrected Information	What does this mean for you?
On Page 79, under Section 2, The Medical Benefits Chart, Outpatient hospital services list the copay as:	You pay \$100 for each Medicare-covered visit at a non-hospital-affiliated outpatient hospital facility or ambulatory surgical center.	You pay \$50 for each Medicare-covered visit at a non-hospital-affiliated outpatient hospital facility or ambulatory surgical center.	You will pay \$50 copay for Medicare-covered visit at a non-hospital-affiliated outpatient hospital facility or ambulatory surgical center in 2022.

You are not required to take any action in response to this document, but we recommend you keep this information for future reference. If you have any questions, please call us at 1-800-782-8633 for additional information. (TTY users should call 711.) Hours are October 1-March 31, 8 am-8pm, 7 days a week; April 1-September 30, 8 am-8pm, Monday-Friday, 9 am-1 pm, Saturday.

We apologize for any inconvenience this may have caused, and we remain fully committed to you and your health. We appreciate the opportunity to serve you.

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

ATTENTION: If you speak Spanish, language assistance services, free of charge, are available to you. Call 1-800-782-8633 (TTY 711)