

Nascentia HealthPLUS

TOMORROW'S HEALTHCARE TODAY



Summary of Benefits

Nascentia Skilled Nursing Facility

2020

2020 Summary of Benefits Nascentia Skilled Nursing Facility

H9066-002 January 1, 2020 - December 31, 2020.

Nascentia Health Plus is a Medicare Advantage Health Maintenance Organization (HMO) Special Needs Plan (SNP) with a Medicare contract and a Coordination of Benefits Agreement with New York State Department of Health. Enrollment in Nascentia Health Plus depends on contract renewal.

The benefit information provided does not list every service that we cover or list every limitation or exclusion. To get a complete list of services we cover, please request the “Evidence of Coverage.” You can also find it online at www.nascentiahealthplus.org or you can call member services at 1-888-477-HOME (4663) (TTY 711) with questions you may have.

ELIGIBILITY:

This plan is an institutional special needs plan (I-SNP)

- Must be enrolled in Medicare Part A and Part B
- Must for 90 days or longer, require or are expected to need the level of services provided in a long-term care (LTC) skilled nursing facility (SNF).
- Must continue to pay your Medicare Part B premium if it's not paid for by Medicaid or another third party
- Must live in the Nascentia Health Plus service area.
- Must not have End-Stage Renal Disease (ESRD), with limited exceptions



Nascentia Health Institutional Plan is an Institutional Special Needs Plan for beneficiaries whose condition makes it likely that either the length of stay or the need for an institutional level of care would be at least 90 days. Your ability to enroll will be based on verification that you, for 90 days or longer, have had or are expected to need the level of services provided in a long-term care (LTC) skilled nursing facility (SNF).

Our service area includes the following counties in Upstate New York: **Albany, Broome, Columbia, Delaware, Erie, Greene, Niagara, & Onondaga Counties**

Except in emergency situations, if you use providers or pharmacies that are not in our network, we may not pay for these services. You can find network providers and pharmacies online at www.nascentiahealthplus.org or you can call and ask for a copy of the Provider and Pharmacy Directories.

You can see our list of covered drugs online at www.nascentiahealthplus.org

This document may be available in other formats such as Braille, large print or audio.

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Exploring Your Options

Choosing the health plan that best meets your needs is an important decision. There are various options to explore and compare. This Summary of Benefits booklet provides you with a brief overview of what Nascentia Health Dual Plan covers and what you would pay.

You can compare our plan with other Medicare health plans using the Medicare Plan Finder online at www.medicare.gov or asking the other plans for their Summary of Benefits booklets.

For coverage and costs of Original Medicare, look in your current “Medicare & You” handbook. View it online at www.medicare.gov or get a copy by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

Medicare & More

Nascentia Health provides you with even more benefits than you get with Original Medicare. Be sure to review the Evidence of Coverage document for full benefit information. You can access it at www.nascentiahealthplus.org, or you can call 1-888-477-HOME (4663) (TTY 711), 7 days a week from 8:00am - 8:00pm to request a copy.

FOR MORE INFORMATION, PLEASE CALL US AT:

1-888-477-HOME (4663) (TTY 711)
7 days a week, 8:00am - 8:00pm October 1st - March 31st
Monday - Friday, 8:00am - 8:00pm the rest of the year
or visit us at www.nascentiahealthplus.org

COMBINED PART C & D PREMIUM, DEDUCTIBLE & LIMITS

If you don't qualify for Low-Income Subsidy (LIS), you pay the Medicare Part D cost share as outlined in the Evidence of Coverage. If you do qualify for LIS you pay:

Part D Premium	\$0 to \$36.60 per month, depending on the level of Extra Help
Part D Deductible	\$0 or \$89, depending on the level of Extra Help
Monthly Plan Premium	\$0 for Part C benefits. You must continue to pay your Medicare Part B Premium.
Annual Deductible	\$0 There is no deductible for Part C benefits.
Maximum Out-of-Pocket (does not include prescription drugs)	\$6,700 annually (includes co-insurance for medical services per year)

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PREMIUM, DEDUCTIBLE AND LIMITS	
Monthly Plan Premium	\$0 for Part C benefits. You must continue to pay your Medicare Part B Premium.
Annual Deductible	\$0 There is no deductible for Part C benefits.
Maximum Out-of-Pocket (does not include prescription drugs)	\$6,700 annually (includes co-insurance for medical services per year)
COVERED MEDICAL AND HOSPITAL BENEFITS*	
Inpatient Hospital Care	You pay the original Medicare Cost sharing amounts. \$1,364 deductible for each benefit period \$0 copay days 1-60 for each benefit period \$341/day for days 61-90 for each benefit period \$682/day for days 91-150 for each benefit period These are 2019 cost-sharing amounts and may change for 2020. Nascentia Health Institutional (HMO I-SNP) will provide updated rates as soon as they are released.
Outpatient Hospital	20% co-insurance of Medicare-covered services
Doctor Office Visits	20% co-insurance per visit for primary care and specialists
Preventive Care	\$0

PREMIUM, DEDUCTIBLE AND LIMITS

Medicare Covered Preventive Care Including:

- Abdominal aortic aneurysm screening
- Alcohol misuse counseling
- Annual “wellness” visit
- Bone mass measurement
- Breast cancer screening (mammogram)
- Cardiovascular disease (behavioral therapy)
- Cardiovascular screening
- Cervical and vaginal cancer screening
- Colorectal cancer screenings (colonoscopy, fecal occult blood test, flexible sigmoidoscopy)
- Depression screening
- Diabetes prevention program
- Diabetes screenings and monitoring
- HIV screenings
- Lung cancer screenings
- Medical nutrition therapy services
- Obesity screenings and counseling
- Prostate cancer screenings (PSA)
- Sexually transmitted infections screenings and counseling
- Tobacco use cessation counseling (counseling for people with no sign of tobacco-related disease)
- Vaccines, including flu shots, hepatitis B shots, pneumococcal shots
- “Welcome to Medicare” preventive visit (one-time)

And any preventive services approved by Medicare will be covered

*All Cost sharing in this Summary of Benefits is based on your level of Medicaid Eligibility

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Emergency Care	20% co-insurance, up to \$90
Urgently Needed Services	20% co-insurance, up to \$65
Diagnostic Services, Labs and Imaging	20% co-insurance of Medicare-covered services (includes diagnostic tests, procedures, labs, radiology, and x-rays)
Hearing Services	20% co-insurance of Medicare-covered services
Dental Services	20% co-insurance of Medicare-covered services
Vision Services	20% co-insurance of Medicare-covered services
Routine Eye Exam 1 per year	\$0 co-insurance for routine exam.
Routine Eye Wear (lenses & frames)	\$100 upgrade available for frames, lenses, or contact lenses per year
Mental Health Care	20% co-insurance of Medicare-covered services
Skilled Nursing Facility (SNF)	You pay the original Medicare Cost sharing amounts. Up to 100 days covered in a SNF, requires 1 hospital day prior to SNF admission \$0 copay days 1-20 \$170.50/day for days 21-100
Physical Therapy	20% co-insurance of Medicare-covered services
Ambulance	20% co-insurance of Medicare-covered services
Part B Drugs	
Chemotherapy	20% co-insurance of Medicare-covered services
Other Part B Drugs	20% co-insurance of Medicare-covered services

*All Cost sharing in this Summary of Benefits is based on your level of Medicaid Eligibility

For Enrollment Questions Please Call:

1.888.477.4663
TTY 711

**8:00am - 8:00pm, 7 days a week from October 1 - March 31,
then Monday - Friday for the rest of the year.**

Or access information online at
nascentiahealthplus.org

Nascentia Health Plus is an HMO SNP plan with a Medicare contract and a Coordination of Benefits Agreement with New York State Department of Health. Enrollment in Nascentia Health Plus depends on contract renewal. This information is not a complete description of benefits. For more information, call 1-888-477-HOME (4663) (TTY 711), 7 days a week 8am-8pm October 1-March 31, Monday-Friday for the rest of the year. Assistance services for other languages are available, free of charge at the number above. This information is not a complete description of benefits. Contact the plan for more information.

Limitations, copayments, and restrictions may apply. Benefits, formulary, pharmacy network, premium and/or co-payments/co-insurance may change on January 1 of each year. You must continue to pay your Medicare Part B premium. The formulary pharmacy network, and/or provider network may change at any time. You will receive notice when necessary. Nascentia Health Plus complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.



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1050 West Genesee Street
Syracuse, NY 13204

888.477.4663 TTY 711
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