

Senior Care Plus

A Medicare Advantage Plan from Hometown Health.

SENIOR CARE PLUS IS PROUD TO OFFER THE **Extensive Duals Plan**

FOR INDIVIDUALS WITH MEDICARE AND MEDICAID IN WASHOE COUNTY AND CARSON CITY.

The Extensive Duals Plan from Senior Care Plus is an outstanding Medicare Advantage plan option for individuals who also qualify for Medicaid. The Extensive Duals Plan is an HMO plan with priority access to all that Renown Health has to offer.

Call **775-982-3158** or visit **SeniorCarePlus.com** to enroll in the Extensive Duals Plan today.

Signing up has many benefits - HERE ARE JUST A FEW OF THEM:

 **Priority access to Renown Health providers and services**

Personal Assistant to coordinate all your healthcare needs



 **\$2,000 comprehensive dental benefit**

Hearing exam and hearing aid coverage



Eye exam and glasses or contact lens coverage



Gym benefit included



\$190 Over-the-Counter (OTC) quarterly benefit



Rewards card – get rewarded for healthy activities



**All copays are for a 30-day supply unless otherwise noted. | Preferred Pharmacies offer savings. Rx 90-day retail you pay 2.5 times for a 30-day supply. | Rx 90-day mail order you pay 2 times a 30-day supply.*
This is an advertisement. Senior Care Plus is a Medicare Advantage HMO organization with a Medicare contract. Enrollment in Senior Care Plus depends on contract renewal. This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits and premiums and or copayments/coinsurance may change on January 1 of each year. Other providers are available in our network. A salesperson will be present with information and applications. For accommodation of persons with special needs at sales meetings call 775-982-3158 and 711 for TTY for more information. Material ID: H2960_2023_ExtensiveDualsDataSheet_M (CMS Accepted)

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2023 PLAN BENEFITS - PLAN BENEFICIARIES MUST RESIDE IN WASHOE COUNTY OR CARSON CITY.

HMO Benefits	Copays for Members with Medicaid & Extra Help - 024
MONTHLY PLAN PREMIUM	\$0
Maximum Out-of-Pocket	\$0 per year
PHYSICIAN OFFICE VISITS	
PCP Visit (Must use Renown PCP)	\$0 per visit
Specialist Visit	\$0 per visit
Preventive (ACA Covered) Screenings	\$0 per visit
LAB, IMAGING AND DIAGNOSTICS	
Routine Lab Services	\$0 per visit
X-Ray Services	\$0 per test
Imaging (CT / PET / MRI)	\$0 / \$0 / \$0
FACILITY / SURGICAL	
Inpatient Hospital Services	\$0 per stay
Outpatient Hospital Services	\$0 per visit
Skilled Nursing	\$0 days 1-20, \$0 days 21-100
EMERGENCY AND URGENT CARE	
Urgent Care Center Services	\$0 In-Network / \$0 Out-of-Network
Emergency Room Services	\$0 per visit
Ambulance Services (ground / air)	\$0 per trip
Rx	
Rx - Annual Deductible*	\$0 Deductible per year
Rx - Coverage in the Gap*	N/A
Rx - Preferred Generic (1)*	Generic \$0 - \$4.15
Rx - Non-Preferred Generic (2)*	Generic \$0 - \$4.15
Rx - Preferred Brand (3)*	Brand \$0 - \$10.35
Rx - Non-Preferred Brand (4)*	Brand \$0 - \$10.35
Rx - Specialty (5)*	33% Coinsurance
Rx - Select Drugs (6)*	Generic \$0 - \$4.15 / Brand \$0 - \$10.35
OTHER	
Teladoc / Dispatch Health	\$0 per visit / \$0 per visit
Durable Medical Equipment	20% per item / supply
Chiropractic Services	\$0 per visit
Vision (Routine Coverage / EyeMed)	\$0 per exam, \$250 allowance
Hearing Exam / Hearing Aid Coverage	\$0 per exam (yearly) / 2 hearing aids per year; \$495 - \$1,970
Fitness Benefit	Included - See list of gyms on website
Dental Coverage (LIBERTY Dental Plan)	\$2,000 Comprehensive, first dollar coverage
Over-the-Counter Benefit (NationsOTC®)	\$190 per quarter
Acupuncture (Low back pain only)	0% - 20% per visit