UCare Connect + Medicare (HMO D-SNP): Summary of Benefits 2020

Introduction

This document is a brief summary of the benefits and services covered by UCare Connect + Medicare. It includes answers to frequently asked questions, important contact information, an overview of benefits and services offered, and information about your rights as a member of UCare Connect + Medicare. Key terms and their definitions appear in alphabetical order in the last chapter of the Evidence of Coverage.

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If you have questions, please call UCare Connect + Medicare Customer Services at 612-676-3310 or 1-855-260-9707 (toll free), TTY 612-676-6810 or 1-800-688-2534 (toll free), 8 am – 8 pm, seven days a week. The call is free. For more information, visit ucare.org.
Attention. If you need free help interpreting this document, call the above number.

Malaysia: 03-9734 2777, 03-9734 2788

لاحظة: إذا أردت مساعدة مجانية لترجمة هذه الوثيقة، اتصل على الرقم أعلاه.

Hubachiisa. Dokumentiin kun tola akka siif hiikamu gargaarsa hoo feete, lakoobsa gubbatti kennaame bilbili.

Внимание: если вам нужна бесплатная помощь в устном переводе данного документа, позвоните по указанному выше телефону.

Atención. Si desea recibir asistencia gratuita para interpretar este documento, llame al número indicado arriba.

Chú ý. Nếu quý vị cần được giúp đỡ dịch tài liệu này miễn phí, xin gọi số bên trên.
Civil Rights Notice

Discrimination is against the law. UCare does not discriminate on the basis of any of the following:
- race
- color
- national origin
- creed
- religion
- sexual orientation
- public assistance status
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)
- marital status
- political beliefs
- medical condition
- health status
- receipt of health care services
- claims experience
- medical history
- genetic information

Auxiliary Aids and Services. UCare provides auxiliary aids and services, like qualified interpreters or information in accessible formats, free of charge and in a timely manner, to ensure an equal opportunity to participate in our health care programs. Contact UCare at 612-676-3200 (voice) or 1-800-203-7225 (voice), 612-676-6810 (TTY), or 1-800-688-2534 (TTY).

Language Assistance Services. UCare provides translated documents and spoken language interpreting, free of charge and in a timely manner, when language assistance services are necessary to ensure limited English speakers have meaningful access to our information and services. Contact UCare at 612-676-3200 (voice) or 1-800-203-7225 (voice), 612-676-6810 (TTY), or 1-800-688-2534 (TTY).

Civil Rights Complaints
You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by UCare. You may contact any of the following four agencies directly to file a discrimination complaint.

U.S. Department of Health and Human Services’ Office for Civil Rights (OCR)
You have the right to file a complaint with the OCR, a federal agency, if you believe you have been discriminated against because of any of the following:
- race
- color
- national origin
- age
- disability
- sex

Contact the OCR directly to file a complaint:
Director
U.S. Department of Health and Human Services’ Office for Civil Rights
200 Independence Avenue SW, Room 509F, HHH Building
Washington, DC 20201
800-368-1019 (Voice)
800-537-7697 (TDD)
Complaint Portal – https://ocrportal.hhs.gov/ocr/portal/lobby.jsf
American Indians can continue or begin to use tribal and Indian Health Services (IHS) clinics. We will not require prior approval or impose any conditions for you to get services at these clinics. For enrollees age 65 years and older this includes Elderly Waiver (EW) services accessed through the tribe. If a doctor or other provider in a tribal or IHS clinic refers you to a provider in our network, we will not require you to see your primary care provider prior to the referral.

**Minnesota Department of Human Rights (MDHR)**

In Minnesota, you have the right to file a complaint with the MDHR if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- religion
- creed
- sex
- sexual orientation
- marital status
- public assistance status
- disability

Contact the MDHR directly to file a complaint:

Minnesota Department of Human Rights
Freeman Building, 625 North Robert Street
St. Paul, MN 55155
651-539-1100 (voice)
800-657-3704 (toll free)
711 or 800-627-3529 (MN Relay)
651-296-9042 (Fax)
Info.MDHR@state.mn.us (Email)

**Minnesota Department of Human Services (DHS)**

You have the right to file a complaint with DHS if you believe you have been discriminated against in our health care programs because of any of the following:

- race
- color
- national origin
- creed
- religion
- sex (including sex stereotypes and gender identity)
- marital status
- political beliefs
- medical condition
- public assistance status
- age
- disability (including physical or mental impairment)
- health status
- receipt of health care services
- claims experience
- medical history
- genetic information

Complaints must be in writing and filed within 180 days of the date you discovered the alleged discrimination. The complaint must contain your name and address and describe the discrimination you are complaining about. After we get your complaint, we will review it and notify you in writing about whether we have authority to investigate. If we do, we will investigate the complaint.

DHS will notify you in writing of the investigation's outcome. You have the right to appeal the outcome if you disagree with the decision. To appeal, you must send a written request to have DHS review the investigation outcome. Be brief and state why you disagree with the decision. Include additional information you think is important.

If you file a complaint in this way, the people who work for the agency named in the complaint cannot retaliate against you. This means they cannot punish you in any way for filing a complaint. Filing a complaint in this way does not stop you from seeking out other legal or administrative actions.

American Indians can continue or begin to use tribal and Indian Health Services (IHS) clinics. We will not require prior approval or impose any conditions for you to get services at these clinics. For enrollees age 65 years and older this includes Elderly Waiver (EW) services accessed through the tribe. If a doctor or other provider in a tribal or IHS clinic refers you to a provider in our network, we will not require you to see your primary care provider prior to the referral.
Contact **DHS** directly to file a discrimination complaint:
Civil Rights Coordinator
Minnesota Department of Human Services
Equal Opportunity and Access Division
P.O. Box 64997
St. Paul, MN 55164-0997
651-431-3040 (voice) or use your preferred relay service

**UCare Complaint Notice**

You have the right to file a complaint with UCare if you believe you have been discriminated against in our health care programs because of any of the following:

- medical condition
- health status
- receipt of health care Services
- claims experience
- medical history
- genetic information
- disability (including mental or physical impairment)
- marital status
- age
- sex (including sex stereotypes and gender identity)
- sexual orientation
- national origin
- race
- color
- religion
- creed
- public assistance status
- political beliefs

You can file a complaint and ask for help in filing a complaint in person or by mail, phone, fax, or email at:

**UCare**
Attn: Appeals and Grievances
PO Box 52
Minneapolis, MN 55440-0052
Toll free: 1-800-203-7225
TTY: 1-800-688-2534
Fax: 612-884-2021
Email: cag@ucare.org
UCare Connect + Medicare (HMO D-SNP): Summary of Benefits 2020

A. Disclaimers

This is a summary of health services covered by UCare Connect + Medicare for 2020. Please read the Evidence of Coverage for the full list of benefits. If you don’t have an Evidence of Coverage, call UCare Connect + Medicare Customer Services at the number at the bottom of this page to get one.

- UCare Connect + Medicare is for people who:
  - Are at least 18 years of age and under age 65
  - Have a certified disability through Social Security Administration or the State Medical Review Team
  - Live in the service area
  - Have Medicare Parts A and B and Medical Assistance (Medicaid)

- Under UCare Connect + Medicare you can get your Medicare and Medical Assistance (Medicaid) services in one health plan. A UCare Connect + Medicare case manager will help manage your health care needs.

- For more information about Medicare, you can read the Medicare & You Handbook. It has a summary of Medicare benefits, rights, and protections and answers to the most frequently asked questions about Medicare. You can get it at the Medicare website (www.medicare.gov) or 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. For more information about Medical Assistance (Medicaid), call the Minnesota Department of Human Services at 1-651-431-2670 or toll-free at 1-800-657-3739. TTY users should call 1-800-627-3529.

- You can get this document for free in other formats, such as large print, braille, or audio. Call Customer Services at the number at the bottom of this page.

- To make or change a standing request to get this document, now and in the future, in a language other than English or in an alternate format, call Customer Services at the number at the bottom of this page.

- This information is not a complete description of benefits. Call Customer Services at the bottom of this page for more information.

- UCare Connect + Medicare (HMO D-SNP) is a health plan that contracts with both Medicare and the Minnesota Medical Assistance (Medicaid) program to provide benefits of both programs to enrollees. Enrollment in UCare Connect + Medicare depends on contract renewal.

If you have questions, please call UCare Connect + Medicare Customer Services at 612-676-3310 or 1-855-260-9707 (toll free), TTY 612-676-6810 or 1-800-688-2534 (toll free), 8 am – 8 pm, seven days a week. The call is free. For more information, visit ucare.org.
B. Frequently Asked Questions

The following chart lists frequently asked questions.

<table>
<thead>
<tr>
<th>Frequently Asked Questions (FAQ)</th>
<th>Answers</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is a Special Needs BasicCare (SNBC) plan?</td>
<td>Our plan is part of the Special Needs BasicCare (SNBC) program. This program was designed by the Minnesota Department of Human Services (DHS) to provide special care for people with disabilities ages 18 through 64. Our plan combines your Medicare and Medical Assistance (Medicaid) services. It combines your doctors, hospital, pharmacies, home health care, nursing home care, and other health care providers into one coordinated care system. It also has case managers to help you manage all your providers and services. They all work together to provide the care you need. Our SNBC program is called UCare Connect + Medicare.</td>
</tr>
<tr>
<td>Will you get the same Medicare and Medical Assistance (Medicaid) benefits in UCare Connect + Medicare that you get now?</td>
<td>If you are coming to UCare Connect + Medicare from Original Medicare or another Medicare plan, you may get benefits or services differently. You will get almost all of your covered Medicare and Medical Assistance (Medicaid) benefits directly from UCare Connect + Medicare. You will work with a team of providers who will help determine what services will best meet your needs. When you enroll in UCare Connect + Medicare, you and your care team will work together to develop an Individualized Care Plan to address your health and support needs. When you join our plan, if you are taking any Medicare Part D prescription drugs that UCare Connect + Medicare does not normally cover, you can get a temporary supply. We will help you get another drug or get an exception for UCare Connect + Medicare to cover your drug, if medically necessary. For more information, call Customer Services.</td>
</tr>
<tr>
<td>Frequently Asked Questions (FAQ)</td>
<td>Answers</td>
</tr>
<tr>
<td>----------------------------------</td>
<td>---------</td>
</tr>
<tr>
<td>Can you go to the same health care providers you see now?</td>
<td>That is often the case. If your providers (including doctors and pharmacies) work with UCare Connect + Medicare and have a contract with us, you can keep going to them.</td>
</tr>
<tr>
<td></td>
<td>• Providers with an agreement with us are “in-network.” In most cases, you must use the providers in UCare Connect + Medicare’s network.</td>
</tr>
<tr>
<td></td>
<td>• If you need urgent or emergency care or out-of-area dialysis services, you can use providers outside of UCare Connect + Medicare’s network. You may also use out-of-network providers for <strong>open access</strong> services and in cases when UCare Connect + Medicare authorizes the use of out-of-network providers.</td>
</tr>
<tr>
<td></td>
<td>To find out if your providers are in the plan’s network, call Customer Services or read UCare Connect + Medicare’s <strong>Provider and Pharmacy Directory</strong>. You can also visit our website at <a href="http://ucare.org">ucare.org</a> for the most current listing.</td>
</tr>
<tr>
<td></td>
<td>If UCare Connect + Medicare is new for you, you can continue seeing the providers you go to now for up to 120 days in certain situations. For more information call Customer Services.</td>
</tr>
<tr>
<td>What happens if you need a service but no one in UCare Connect + Medicare’s network can provide it?</td>
<td>Most services will be provided by our network providers. If you need a covered service that cannot be provided within our network, UCare Connect + Medicare will pay for the cost of an out-of-network provider. A prior authorization may be required before getting services from out-of-network providers.</td>
</tr>
<tr>
<td>What is a case manager?</td>
<td>A case manager is your main contact person. This person helps manage all your providers and services and makes sure you get what you need.</td>
</tr>
</tbody>
</table>
### Frequently Asked Questions (FAQ)

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Where is UCare Connect + Medicare available?</td>
<td>The service area for this plan includes the following counties in Minnesota: Aitkin, Anoka, Becker, Benton, Blue Earth, Carlton, Carver, Cass, Chippewa, Chisago, Clay, Cook, Cottonwood, Crow Wing, Dakota, Faribault, Fillmore, Hennepin, Houston, Isanti, Itasca, Jackson, Kandiyohi, Kittson, Koochiching, Lac qui Parle, Lake, Lake of the Woods, Le Sueur, Lincoln, Lyon, Mahnomen, Marshall, Martin, Mille Lacs, Mower, Murray, Nicollet, Nobles, Norman, Olmsted, Otter Tail, Pennington, Pine, Polk, Ramsey, Red Lake, Redwood, Rice, Rock, Roseau, Scott, Sherburne, St. Louis, Stearns, Swift, Washington, Watonwan, Wilkin, Winona, Wright, Yellow Medicine. You must live in one of these counties to join the plan. Call Customer Services for more information about whether the plan is available where you live.</td>
</tr>
<tr>
<td>What is prior authorization?</td>
<td>Prior authorization means that you must get approval from UCare Connect + Medicare before you can get a specific service or drug or see an out-of-network provider. UCare Connect + Medicare may not cover the service or drug if you don’t get approval. If you need urgent or emergency care or out-of-area dialysis services, you don't need to get approval first. See Chapter 3, of the <em>Evidence of Coverage</em> to learn more about prior authorization. See the Benefits Chart in Chapter 4 of the <em>Evidence of Coverage</em> to learn which services require a prior authorization.</td>
</tr>
<tr>
<td>What is Extra Help?</td>
<td>Extra Help is a Medicare program that helps people with limited incomes and resources reduce their Medicare Part D prescription drug costs such as premiums, deductibles, and copays. Extra Help is also called the “Low-Income Subsidy,” or “LIS.” Your prescription drug copays under UCare Connect + Medicare already include the amount of Extra Help you qualify for. For more information about Extra Help, contact your local Social Security Office, or call Social Security at 1-800-772-1213. TTY users should call 1-800-325-0778. These calls are free.</td>
</tr>
</tbody>
</table>

**If you have questions**, please call UCare Connect + Medicare Customer Services at 612-676-3310 or 1-855-260-9707 (toll free), TTY 612-676-6810 or 1-800-688-2534 (toll free), 8 am – 8 pm, seven days a week. The call is free. **For more information**, visit [ucare.org](http://ucare.org).
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<tr>
<th>Frequently Asked Questions (FAQ)</th>
<th>Answers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you pay a monthly amount (also called a premium) as a member of UCare Connect + Medicare?</td>
<td>No. Because you have Medical Assistance (Medicaid), you will not pay any monthly premiums for your health coverage. You must continue to pay your Medicare Part B premium unless your Part B premium is paid for you by Medical Assistance (Medicaid) or another third party.</td>
</tr>
<tr>
<td>Do you pay a deductible as a member of UCare Connect + Medicare?</td>
<td>No. You do not pay deductibles in UCare Connect + Medicare.</td>
</tr>
<tr>
<td>What is the maximum out-of-pocket amount that you will pay for medical services as a member of UCare Connect + Medicare?</td>
<td>There is no cost-sharing for medical services in UCare Connect + Medicare, so your annual out-of-pocket costs will be $0.</td>
</tr>
</tbody>
</table>
C. List of Covered Services

The following chart is a quick overview of what services you may need, your costs, and rules about the benefits.

<table>
<thead>
<tr>
<th>Health need or problem</th>
<th>Services you may need</th>
<th>Your costs for in-network providers</th>
<th>Limitations, exceptions, &amp; benefit information (rules about benefits)</th>
</tr>
</thead>
<tbody>
<tr>
<td>You need hospital care</td>
<td>Hospital stay</td>
<td>$0</td>
<td>Except in an emergency, your health care provider must tell the plan of your hospital admission.</td>
</tr>
<tr>
<td></td>
<td>Doctor or surgeon care</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Ambulatory surgical center (ASC) services</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td>You want to see a health care provider</td>
<td>Visits to treat an injury or illness</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Specialist care</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Wellness visits, such as a physical</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Care to keep you from getting sick, such as flu shots</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>“Welcome to Medicare” preventive visit (one time only)</td>
<td>$0</td>
<td></td>
</tr>
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</table>
# UCare Connect + Medicare (HMO D-SNP): Summary of Benefits 2020

## Health need or problem

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</tr>
</thead>
<tbody>
<tr>
<td>You need emergency care</td>
<td>Emergency room services</td>
<td>$0</td>
<td>You may go to any emergency room if you reasonably believe you need emergency care. You do not need prior authorization and you do not have to be in-network. Emergency room services are NOT covered outside of the U.S. and its territories except under limited circumstances. Contact the plan for details.</td>
</tr>
<tr>
<td>Urgently needed care</td>
<td>$0</td>
<td></td>
<td>Urgently needed care is NOT emergency care. You do not need prior authorization and you do not have to be in-network. Urgently needed care services are NOT covered outside the U.S. and its territories except under limited circumstances. Contact the plan for details.</td>
</tr>
<tr>
<td>You need medical tests</td>
<td>Lab tests, such as blood work</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>X-rays or other pictures, such as CAT scans</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Screening tests, such as tests to check for cancer</td>
<td>$0</td>
<td></td>
</tr>
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</thead>
<tbody>
<tr>
<td>You need hearing/auditory services</td>
<td>Hearing screenings</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Hearing aids</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td>You need dental care</td>
<td>Dental services, including preventive care</td>
<td>$0</td>
<td>Prior authorization may be required.</td>
</tr>
<tr>
<td>You need eye care</td>
<td>Eye exams</td>
<td>$0</td>
<td></td>
</tr>
</tbody>
</table>
|                        | Glasses or contact lenses | $0 | Eyeglasses limited to one pair every 24 months unless medically necessary.  
Limited to a pair of eyeglasses or contact lenses after each cataract surgery, or contact lenses for certain conditions when eyeglasses will not work.  
Anti-glare lens coating, once every two years. |
|                        | Other vision care including diagnosis and treatment for diseases and conditions of the eye | $0 |  |

If you have questions, please call UCare Connect + Medicare Customer Services at 612-676-3310 or 1-855-260-9707 (toll free), TTY 612-676-6810 or 1-800-688-2534 (toll free), 8 am – 8 pm, seven days a week. The call is free. For more information, visit ucare.org.
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</thead>
<tbody>
<tr>
<td>You have a mental health condition</td>
<td>Mental or behavioral health services</td>
<td>$0</td>
<td>Prior authorization may be required. State eligibility requirements may apply.</td>
</tr>
<tr>
<td></td>
<td>Inpatient care for people who need long-term mental health services</td>
<td>$0</td>
<td>Prior authorization may be required. State eligibility requirements may apply.</td>
</tr>
<tr>
<td>You have a substance use disorder</td>
<td>Substance use disorder services</td>
<td>$0</td>
<td>Prior authorization may be required.</td>
</tr>
<tr>
<td>You need a place to live with people available to help you</td>
<td>Skilled nursing care</td>
<td>$0</td>
<td>Prior authorization may be required.</td>
</tr>
<tr>
<td></td>
<td>Nursing home care</td>
<td>$0</td>
<td>Prior authorization may be required.</td>
</tr>
<tr>
<td>You need therapy after a stroke or accident</td>
<td>Occupational, physical, or speech therapy</td>
<td>$0</td>
<td>There may be limits on physical therapy, occupational therapy, and speech therapy services. If so, there may be exceptions to these limits. Prior authorization may be required.</td>
</tr>
</tbody>
</table>
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</thead>
<tbody>
<tr>
<td>You need help getting to health services</td>
<td>Ambulance services</td>
<td>$0</td>
<td>Ambulance services must be medically necessary. You do not need prior authorization for ambulance services and you do not have to be in-network.</td>
</tr>
<tr>
<td></td>
<td>Emergency transportation</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Transportation to a health care provider for medical appointments</td>
<td>$0</td>
<td>UCare Connect + Medicare is not required to provide transportation to your primary care clinic if it is over 30 miles from your home.</td>
</tr>
<tr>
<td></td>
<td>Transportation to other health services</td>
<td>$0</td>
<td>UCare Connect + Medicare is not required to provide transportation to your specialty care clinic if it is over 60 miles from your home.</td>
</tr>
</tbody>
</table>

*If you have questions, please call UCare Connect + Medicare Customer Services at 612-676-3310 or 1-855-260-9707 (toll free), TTY 612-676-6810 or 1-800-688-2534 (toll free), 8 am – 8 pm, seven days a week. The call is free. For more information, visit [ucare.org](http://ucare.org).*
## Health need or problem

### You need drugs to treat your illness or condition (continued on the next page)

### Services you may need

Medicare Part B prescription drugs

### Your costs for in-network providers

$0

### Limitations, exceptions, & benefit information (rules about benefits)

Part B drugs include drugs given by your health care provider in his or her office, some oral anti-cancer drugs, and some drugs used with certain medical equipment. Read the Evidence of Coverage for more information on these drugs.

Some Medicare Part B drugs may need prior authorization or have step therapy requirements.
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</tr>
</thead>
<tbody>
<tr>
<td>You need drugs to treat your illness or condition (continued on the next page)</td>
<td>Tier 1 Generic drugs (no brand name)</td>
<td>$0/$1.30/$3.60 for a 30-day supply. Copays for prescription drugs may vary based on the level of Extra Help you get. Please contact the plan for more details.</td>
<td>There may be limitations on the types of drugs covered. Please see UCare Connect + Medicare’s List of Covered Drugs (Drug List) at ucare.org for more information. UCare Connect + Medicare may require you to first try one drug to treat your condition before it will cover another drug for that condition. Some drugs have quantity limits. Your provider must get prior authorization from UCare Connect + Medicare for certain drugs. You must go to certain pharmacies for a very limited number of drugs, due to special handling,</td>
</tr>
</tbody>
</table>
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<table>
<thead>
<tr>
<th>Health need or problem</th>
<th>Services you may need</th>
<th>Your costs for in-network providers</th>
<th>Limitations, exceptions, &amp; benefit information (rules about benefits)</th>
</tr>
</thead>
<tbody>
<tr>
<td>You need drugs to treat your illness or condition (continued on the next page)</td>
<td>When you reach the out-of-pocket limit of $6,350 for your Part D prescription drugs, the Catastrophic Coverage Stage begins. You will stay in the Catastrophic Coverage Stage until the end of the calendar year. During this stage, your copays for Part D drugs will be $0.</td>
<td>provider coordination, or patient education requirements that cannot be met by most pharmacies in your network. These drugs are listed on the plan’s website, <em>List of Covered Drugs</em> (Drug List), and printed materials, as well as on the Medicare Prescription Drug Plan Finder on <a href="http://www.medicare.gov">www.medicare.gov</a>. For some drugs, you can get a long-term supply (also called an “extended supply”) when you fill your prescription. A long-term supply is up to a 90-day supply. It costs you the same as a one-month supply and is available at retail pharmacy locations or through mail order.</td>
<td></td>
</tr>
<tr>
<td>Tier 1 Brand name drugs</td>
<td>$0/$3.90/$8.95 for a 30-day supply.</td>
<td>There may be limitations on the types of drugs covered. Please see UCare Connect + Medicare’s <em>List of Covered Drugs</em> (Drug List) at <a href="http://ucare.org">ucare.org</a> for more information. UCare Connect + Medicare may require you to first try one drug to treat your condition before it will cover another drug for that condition.</td>
<td></td>
</tr>
</tbody>
</table>
### Health need or problem

<table>
<thead>
<tr>
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<th>Limitations, exceptions, &amp; benefit information (rules about benefits)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>You need drugs to treat your illness or condition</strong> (continued on the next page)</td>
<td>Copays for prescription drugs may vary based on the level of Extra Help you get. Please contact the plan for more details. When you reach the out-of-pocket limit of $6,350 for your Part D prescription drugs, the Catastrophic Coverage Stage begins. You will stay in the Catastrophic Coverage Stage until the end of the calendar year. During this stage, your copays for Part D drugs will be $0. Some drugs have quantity limits. Your provider must get prior authorization from UCare Connect + Medicare for certain drugs. You must go to certain pharmacies for a very limited number of drugs, due to special handling, provider coordination, or patient education requirements that cannot be met by most pharmacies in your network. These drugs are listed on the plan’s website, <em>List of Covered Drugs</em> (Drug List), and printed materials, as well as on the Medicare Prescription Drug Plan Finder on <a href="http://www.medicare.gov">www.medicare.gov</a>. For some drugs, you can get a long-term supply (also called an “extended supply”) when you fill your prescription. A long-term supply is up to a 90-day supply. It costs you the same as a one-month supply and is available at retail pharmacy locations or through mail order.</td>
<td></td>
</tr>
</tbody>
</table>

| Over-the-counter (OTC) drugs | $0 | There may be limitations on the types of drugs covered. |

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**If you have questions**, please call UCare Connect + Medicare Customer Services at 612-676-3310 or 1-855-260-9707 (toll free), TTY 612-676-6810 or 1-800-688-2534 (toll free), 8 am – 8 pm, seven days a week. The call is free. **For more information**, visit [ucare.org](http://ucare.org).
<table>
<thead>
<tr>
<th>Health need or problem</th>
<th>Services you may need</th>
<th>Your costs for in-network providers</th>
<th>Limitations, exceptions, &amp; benefit information (rules about benefits)</th>
</tr>
</thead>
<tbody>
<tr>
<td>You need drugs to treat your illness or condition (continued)</td>
<td>Diabetes medications</td>
<td>$0/$1.30/$3.60 or $0/$3.90/$8.95 for a 30-day supply. Copays for diabetes medications will vary depending on whether they are Generic or Brand and based on the level of Extra Help you get. Please contact the plan for more details. When you reach the out-of-pocket limit of $6,350 for your Part D prescription drugs, the Catastrophic Coverage Stage begins. You will stay in the Catastrophic Coverage Stage until the end of the calendar year. During this stage, your copays for Part D drugs will be $0.</td>
<td></td>
</tr>
<tr>
<td>Health need or problem</td>
<td>Services you may need</td>
<td>Your costs for in-network providers</td>
<td>Limitations, exceptions, &amp; benefit information (rules about benefits)</td>
</tr>
<tr>
<td>------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------</td>
<td>------------------------------------</td>
<td>---------------------------------------------------------------------</td>
</tr>
<tr>
<td>You need help getting better or have special health needs</td>
<td>Rehabilitation services</td>
<td>$0</td>
<td>Prior authorization may be required.</td>
</tr>
<tr>
<td></td>
<td>Medical equipment for home care</td>
<td>$0</td>
<td>Prior authorization may be required.</td>
</tr>
<tr>
<td>You need foot care</td>
<td>Podiatry services</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Orthotic services</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td>You need durable medical equipment (DME) or supplies</td>
<td>Wheelchairs, nebulizers, crutches, rollabout knee walkers, walkers, and oxygen equipment and supplies, for example</td>
<td>$0</td>
<td>Prior authorization may be required.</td>
</tr>
<tr>
<td>(Note: This is not a complete list of covered DME or supplies. Call Customer Services or read the Evidence of Coverage for more information.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>You need help living at home</td>
<td>Home health care services</td>
<td>$0</td>
<td>Prior authorization may be required. State eligibility requirements may apply.</td>
</tr>
<tr>
<td>Health need or problem</td>
<td>Services you may need</td>
<td>Your costs for in-network providers</td>
<td>Limitations, exceptions, &amp; benefit information (rules about benefits)</td>
</tr>
<tr>
<td>------------------------</td>
<td>-------------------------------------------</td>
<td>-------------------------------------</td>
<td>---------------------------------------------------------------------</td>
</tr>
<tr>
<td>You need interpreter services</td>
<td>Spoken language interpreter</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sign language interpreter</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td>Additional services (continued on the next page)</td>
<td>Acupuncture</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Care coordination</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Chiropractic services</td>
<td>$0</td>
<td>Prior authorization may be required.</td>
</tr>
<tr>
<td></td>
<td>Diabetic supplies</td>
<td>$0</td>
<td>There are limitations on the test strips and meters covered. Please see UCare Connect + Medicare’s List of Covered Drugs (Drug List) for more information.</td>
</tr>
<tr>
<td></td>
<td>Family planning</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Prosthetic services</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Services to help manage your disease</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>24/7 Nurse Line</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Connect to Wellness Kit</td>
<td>$0</td>
<td>At-home fitness and wellness kits.</td>
</tr>
</tbody>
</table>
## UCare Connect + Medicare (HMO D-SNP): Summary of Benefits 2020

<table>
<thead>
<tr>
<th>Health need or problem (continued on the next page)</th>
<th>Services you may need</th>
<th>Your costs for in-network providers</th>
<th>Limitations, exceptions, &amp; benefit information (rules about benefits)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Additional services</strong></td>
<td>Dental services</td>
<td>$0</td>
<td>One additional dental exam per year, one root planing and scaling per two years. Additional coverage limits may apply. One electric toothbrush every three years, one package of two electric toothbrush replacement heads per year.</td>
</tr>
<tr>
<td></td>
<td>Post-discharge Medication Reconciliation</td>
<td>$0</td>
<td>Medication reconciliation provided by a pharmacist at participating pharmacies within 30 days of discharge from an inpatient facility.</td>
</tr>
<tr>
<td></td>
<td>Routine foot care</td>
<td>$0</td>
<td>For routine foot care (not related to a specific diagnosis already covered by Medicare). Coverage limited to one routine foot care visit per month.</td>
</tr>
<tr>
<td></td>
<td>SilverSneakers® Fitness Program</td>
<td>$0</td>
<td>Fitness program including a free membership at participating locations.</td>
</tr>
<tr>
<td></td>
<td>Smoking and tobacco use cessation</td>
<td>$0</td>
<td>UCare members can get free help to quit smoking or chewing tobacco with the tobacco quit line. Call the tobacco quit line at 1-855-260-9713 to get started today. TTY users should call 711. Or online at <a href="https://myquitforlife.com/ucare">https://myquitforlife.com/ucare</a>.</td>
</tr>
</tbody>
</table>

### Additional services

- **Dental services**: $0
  - One additional dental exam per year, one root planing and scaling per two years. Additional coverage limits may apply.
  - One electric toothbrush every three years, one package of two electric toothbrush replacement heads per year.

- **Post-discharge Medication Reconciliation**: $0
  - Medication reconciliation provided by a pharmacist at participating pharmacies within 30 days of discharge from an inpatient facility.

- **Routine foot care**: $0
  - For routine foot care (not related to a specific diagnosis already covered by Medicare). Coverage limited to one routine foot care visit per month.

- **SilverSneakers® Fitness Program**: $0
  - Fitness program including a free membership at participating locations.

- **Smoking and tobacco use cessation**: $0
  - UCare members can get free help to quit smoking or chewing tobacco with the tobacco quit line. Call the tobacco quit line at 1-855-260-9713 to get started today. TTY users should call 711. Or online at [https://myquitforlife.com/ucare](https://myquitforlife.com/ucare).
**UCare Connect + Medicare (HMO D-SNP): Summary of Benefits 2020**

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<th>Health need or problem</th>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>Additional services</strong></td>
<td>Dental Care for U</td>
<td>$0</td>
<td><strong>UCare Dental Connection</strong></td>
</tr>
<tr>
<td>(continued)</td>
<td></td>
<td></td>
<td>651-768-1415 (local) or 1-855-648-1415 TTY/hearing impaired: 711</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Monday – Friday, 7 am – 7 pm</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>You can also call Customer Services at the number at the bottom of this page.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Mobile Dental Clinic Appointments</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>1-866-451-1555, TTY: 1-800-627-3529 Monday – Friday, 8 am – 4:30 pm</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><a href="http://www.ucare.org/mdc">www.ucare.org/mdc</a></td>
</tr>
</tbody>
</table>

This summary of benefits is provided for informational purposes only and is not a complete list of benefits. Call Customer Services or read the *Evidence of Coverage* to find out about other covered services.

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**If you have questions**, please call UCare Connect + Medicare Customer Services at 612-676-3310 or 1-855-260-9707 (toll free), TTY 612-676-6810 or 1-800-688-2534 (toll free), 8 am – 8 pm, seven days a week. The call is free. For more information, visit [ucare.org](http://ucare.org).
D. Services covered outside of UCare Connect + Medicare

This is not a complete list. Call Customer Services to find out about other services not covered by UCare Connect + Medicare but available through Medicare.

<table>
<thead>
<tr>
<th>Other services covered by Medicare</th>
<th>Your costs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Some hospice care services</td>
<td>$0</td>
</tr>
</tbody>
</table>

E. Services not covered by UCare Connect + Medicare, Medicare, or Medical Assistance (Medicaid)

This is not a complete list. Call Customer Services to find out about other excluded services.

<table>
<thead>
<tr>
<th>Services not covered by UCare Connect + Medicare, Medicare, or Medical Assistance (Medicaid)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Services not considered “reasonable and necessary” according to standards of Medicare and Medical Assistance (Medicaid)</td>
</tr>
<tr>
<td>Experimental medical and surgical treatments, items, or drugs unless covered by Medicare or under a Medicare-approved clinical study</td>
</tr>
<tr>
<td>Surgical treatment for morbid obesity except when medically necessary</td>
</tr>
<tr>
<td>Elective or voluntary enhancement procedures</td>
</tr>
<tr>
<td>Cosmetic surgery or other cosmetic work unless criteria is met</td>
</tr>
<tr>
<td>LASIK surgery</td>
</tr>
</tbody>
</table>

F. Your rights as a member of the plan

As a member of UCare Connect + Medicare, you have certain rights. You can exercise these rights without being punished. You can also use these rights without losing your health care services. We will tell you about your rights at least once a year. For more information on your rights, please read the Evidence of Coverage. Your rights include, but are not limited to, the following:

If you have questions, please call UCare Connect + Medicare Customer Services at 612-676-3310 or 1-855-260-9707 (toll free), TTY 612-676-6810 or 1-800-688-2534 (toll free), 8 am – 8 pm, seven days a week. The call is free. For more information, visit ucare.org.
UCare Connect + Medicare (HMO D-SNP): Summary of Benefits 2020

- **You have a right to respect, fairness, and dignity.** This includes the right to:
  - Get covered services without concern about medical condition, health status, receipt of health services, claims experience, medical history, disability (including mental impairment), marital status, age, sex (including sex stereotypes and gender identity) sexual orientation, national origin, race, color, religion, creed, or public assistance
  - Get information in other formats (for example, large print, braille, or audio) free of charge
  - Be free from any form of physical restraint or seclusion

- **You have the right to get information about your health care.** This includes information on treatment and your treatment options. This information should be in a format you can understand. This includes the right to get information on:
  - Description of the services we cover
  - How to get services
  - How much services will cost you
  - Names of health care providers

- **You have the right to make decisions about your care, including refusing treatment.** This includes the right to:
  - Choose a primary care provider (PCP). You can change your PCP at any time during the year
  - See a women’s health care provider without a referral
  - Get your covered services and drugs quickly
  - Know about all treatment options, no matter what they cost or whether they are covered
  - Refuse treatment, even if your health care provider advises against it
  - Stop taking medicine, even if your health care provider advises against it
  - Ask for a second opinion. UCare Connect + Medicare will pay for the cost of your second opinion visit.
  - Make your health care wishes known in an advance directive

- **You have the right to timely access to care that does not have any communication or physical access barriers.** This includes the right to:
  - Get timely medical care
  - Get in and out of a health care provider’s office. This means barrier free access for people with disabilities, in accordance with the Americans with Disabilities Act.
  - Have interpreters to help with communication with your health care providers and your health plan

- **You have the right to seek emergency and urgently needed care when you need it.** This means you have the right to:
  - Get emergency services without prior approval in an emergency
  - See an out-of-network urgent or emergency care provider, when necessary

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If you have questions, please call UCare Connect + Medicare Customer Services at 612-676-3310 or 1-855-260-9707 (toll free), TTY 612-676-6810 or 1-800-688-2534 (toll free), 8 am – 8 pm, seven days a week. The call is free. For more information, visit ucare.org.
UCare Connect + Medicare (HMO D-SNP): Summary of Benefits 2020

- You have the right to confidentiality and privacy. This includes the right to:
  - Ask for and get a copy of your medical records in a way that you can understand and to ask for your records to be changed or corrected
  - Have your personal health information kept private

- You have the right to make complaints about your covered services or care. This includes the right to:
  - File a complaint or grievance against us or our providers
  - Ask for a State Appeal (State Fair Hearing)
  - Get a detailed reason for why services were denied

For more information about your rights, you can read the UCare Connect + Medicare Evidence of Coverage. If you have questions, you can also call UCare Connect + Medicare Customer Services.

G. What to do if you want to file a complaint or appeal a denied service or drug

If you have a complaint or think UCare Connect + Medicare should cover something we denied, call the number at the bottom of the page. You may be able to appeal our decision.

For questions about complaints and appeals, you can read Chapter 9 of the UCare Connect + Medicare Evidence of Coverage. You can also call UCare Connect + Medicare Customer Services.

- For oral grievances and complaints, call UCare Connect + Medicare Customer Services:
  612-676-3310 or 1-855-260-9707, TTY 612-676-6810 or 1-800-688-2534, 8 am – 8 pm, seven days a week.

- For oral appeals, call UCare Appeals and Grievances:
  612-676-6841 or 1-877-523-1517, TTY 612-676-6810 or 1-800-688-2534, 8 am – 4:30 pm, Monday – Friday.

- For written appeals, grievances and complaints, mail UCare at:
  UCare
  Attn: Appeals and Grievances
  P.O. Box 52
  Minneapolis, MN 55440-0052

- You can also fax your written appeal, grievance or complaint to UCare at: 612-884-2021 or 1-866-283-8015
- Or email us at: cag@ucare.org

If you have questions, please call UCare Connect + Medicare Customer Services at 612-676-3310 or 1-855-260-9707 (toll free), TTY 612-676-6810 or 1-800-688-2534 (toll free), 8 am – 8 pm, seven days a week. The call is free. For more information, visit ucare.org.
H. What to do if you suspect fraud

Most health care professionals and organizations that provide services are honest. Unfortunately, there may be some who are dishonest.

If you think a health care provider, hospital or pharmacy is doing something wrong, please contact us.

- Call UCare Connect + Medicare Customer Services. Phone numbers are at the bottom of the page.
- Call UCare’s Connect + Medicare Fraud Hot Line: 1-877-826-6847, 24 hours a day, seven days a week (Calls to this number are free). TTY users call 612-676-6810 or 1-800-688-2534 (Calls to this number are free), 8 am – 8 pm, seven days a week.
- Call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. You can call these numbers for free, 24 hours a day, 7 days a week.
- Or, call the Minnesota Fraud Hotline at 1-800-627-9977.
UCare Connect + Medicare (HMO D-SNP): Summary of Benefits 2020

Before making an enrollment decision, it is important that you fully understand our benefits and rules. If you have any questions, you can call and speak to a customer service representative at 612-676-3310 or 1-855-260-9707, TTY 612-676-6810 or 1-800-688-2534, 8 am – 8 pm, seven days a week.

Understanding the Benefits

- Review the full list of benefits found in the Evidence of Coverage (EOC), especially for those services for which you routinely see a doctor. Visit ucare.org or call 612-676-3310 or 1-855-260-9707, TTY 612-676-6810 or 1-800-688-2534 to view a copy of the EOC.
- Review the Provider and Pharmacy Directory (or ask your doctor) to make sure the doctors you see now are in the network. If they are not listed, it means you will likely have to select a new doctor.
- Review the Provider and Pharmacy Directory to make sure the pharmacy you use for any prescription medicine is in the network. If the pharmacy is not listed, you will likely have to select a new pharmacy for your prescriptions.

Understanding Important Rules

- You must continue to pay your Medicare Part B premium. This premium is normally taken out of your Social Security check each month.
- Benefits, premiums, and/or copayments/co-insurance may change on January 1, 2021.
- Except in emergency or urgent situations, we do not cover services by out-of-network providers (doctors who are not listed in the provider directory).
- This plan is a dual eligible special needs plan (D-SNP). Your ability to enroll will be based on verification that you are entitled to both Medicare and medical assistance from a state plan under Medicaid.

If you have questions, please call UCare Connect + Medicare Customer Services at 612-676-3310 or 1-855-260-9707 (toll free), TTY 612-676-6810 or 1-800-688-2534 (toll free), 8 am – 8 pm, seven days a week. The call is free. For more information, visit ucare.org.
If you have general questions or questions about our plan, services, service area, billing, or Member ID Cards, please call UCare Connect + Medicare Customer Services:

612-676-3310 or 1-855-260-9707 (Calls to this number are free.)
8 am – 8 pm, seven days a week.
Customer Services also has free language interpreter services available for non-English speakers.
TTY 612-676-6810 or 1-800-688-2534 (Calls to this number are free.)
8 am – 8 pm, seven days a week.
This number requires special telephone equipment and is only for people who have difficulties with hearing or speaking.

If you have questions about your health:

- Call your clinic if it’s open. Follow your clinic’s instructions for getting care when the clinic is closed.
- If your clinic is closed, you can also call the 24/7 Nurse Line. A nurse will listen to your problem and tell you how to get care. (Example: urgently needed care, emergency room). The numbers for the 24/7 Nurse Line are:
  
  1-800-942-7858 (Calls to this number are free.)
  24 hours a day, seven days a week.
  UCare Connect + Medicare also has free language interpreter services available for non-English speakers.
  TTY 1-855-307-6976 (Calls to this number are free.)
  24 hours a day, seven days a week.

If you need immediate behavioral health care, please call the Behavioral Health Triage Line

612-676-6533 or 1-833-276-1185 (Calls to this number are free.)
8 am – 5 pm, Monday – Friday
UCare Connect + Medicare also has free language interpreter services available for non-English speakers.
TTY 612-676-6810 or 1-800-688-2534 (Calls to this number are free.)
8 am – 5 pm, Monday – Friday