

MEDICARE

# **Reliable** Medicare Plans

### from the team that's always **Right Here, For You.**

Medicare Advantage + Prescription Drug (MAPD) Plans

#### 2025 Benefit Highlights

- **NEW:** National provider network for our PPO plans
- Preventive dental included in most plans with NO copayment
- Comprehensive dental included in most plans with \$1,000 annual allowance
- NEW: \$2,000 limit on out-of-pocket Part D prescription drug costs on ALL plans
- Over-the-counter benefit up to \$360/year included in most plans

- PPO plan with \$250 flex card for dental, hearing, and vision expenses
- HMO plan with \$47/month Part B refund
- FREE routine hearing and vision exams in ALL plans
- NEW: FREE enhanced, flexible fitness benefit in ALL plans

For residents in Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Niagara, Orleans, & Wyoming counties, NY.

## A network on **another level.**

With Univera Healthcare's robust network, you'll always have access to the quality health care you deserve. Our network of doctors and hospitals covers 19 counties, including the bordering regions of Pennsylvania and Rochester.



#### Local

All plans offer an expansive network of doctors, hospitals, and pharmacies, allowing you to receive care from the providers you know and trust. Univera Healthcare members have access to many area hospitals, including:

- Roswell Park Institute
- BryLin Hospital
- Erie County Medical Center (ECMC)
- Hospitals within the Kaleida Health System
- Hospitals within the Catholic Health System



#### National

If you choose one of our HMO-POS or PPO plans and find yourself traveling out of our network, you still have the freedom to receive covered services from other doctors and hospitals without having to pay the full cost.



#### Worldwide

Enjoy peace of mind if you travel abroad, with worldwide coverage for urgent and emergency care included on every plan.

### Access to care from anywhere.

#### New for 2025:

We've expanded our provider network for our PPO plans to offer coverage that spans the entire country. If you're enrolled in the **Univera SeniorChoice® Access (PPO)** or **Univera SeniorChoice® Core (PPO)**, that means you'll have access to providers throughout the United States, and you'll pay in-network cost shares for care.

Not enrolling in one of our PPO plans? No problem. We have additional health services and resources available on all Univera Healthcare Medicare plans to ensure you have access to the care you need. So, whether you find yourself away from home on a pre-planned trip or an unexpected adventure, there's a team that will always be **right here, for you** – no matter where life takes you.





### Telehealth for medical and behavioral health:

Connect with a doctor, therapist, or psychiatrist and **receive affordable care from anywhere through your phone, tablet, or computer.** Cost shares differ by plan, but all plans offer:

- \$0 \$5 copay for medical telehealth appointments with an MDLive provider
- \$15 \$45 copay for behavioral telehealth appointments with an MDLive provider

#### 24/7 Nurse Care Line:



### Our specially trained registered nurses are available by phone 24/7

to answer your general questions and provide support for chronic or complex health conditions for no charge.



#### Wellframe® app:

Get instant access to care managers, dietitians, nurses, and other health care professionals that can **help you meet your health and wellness goals, all for free.** 

# Have confidence in your coverage, **no matter which plan you pick.**

We're constantly pushing the boundaries of affordable, accessible care because that's exactly what our members deserve. Take comfort in knowing you have comprehensive coverage, since our MAPD plans include:

#### Free features



**\$0 preventive dental\*** – Covers 100% of preventive dental services - which includes two cleanings, two oral exams, and two bitewing X-rays - all for no copay.



**\$0 Tier 1 generic drugs** – A \$0 copay makes generic medications more affordable and convenient when purchased at a preferred pharmacy.



**\$0 preventive vaccines** – Includes flu, pneumonia, RSV, COVID-19 vaccines, and the shingles vaccine, SHINGRIX.



**\$0 hearing exams** – Annual routine hearing exams from a TruHearing<sup>®</sup> provider are covered for a \$0 copay.



**\$0 vision exams** – Your annual routine vision exam is covered with no copay from any participating provider.



**\$0 preventive care services** – Includes annual wellness visits, prostate cancer screenings, cervical cancer screenings, colorectal cancer screenings, mammograms, diabetes screenings, and more.



**NEW \$0 flexible fitness package** – Our enhanced fitness benefit provides flexibility to use it at multiple in-network facilities, and to switch fitness centers whenever you may need to throughout the year. Split and spend monthly credits however you'd like toward gym memberships, specialty studio classes, and at-home fitness accessories.

#### Allowances and savings opportunities



**\$1,000 for comprehensive dental\*** – Covers more extensive dental services like restorative care or major procedures such as dentures and select crowns, up to a \$1,000 annual allowance.



**90-day prescription supply\*\*** – Only pay two copays for a three-month supply at most retail pharmacies, or through mail order from Express Scripts or Wegmans.



**Hearing aids** – Care is more affordable and accessible for all with hearing aid costs of \$499 (advanced) and \$799 (premium) when ordered through TruHearing<sup>®</sup>.

\* Included in all MAPD plans except the Univera SeniorChoice® Core (PPO) plan.

\*\* Applies to prescription drugs in Tier 1-4 for the Univera SeniorChoice<sup>®</sup> Core (PPO) plan, Tier 1-3 for all other MAPD plans.

\*\*\* Receive 14 meals for seven days after a hospital observation, inpatient acute stay, or skilled nursing facility stay.

### Stretch your dollars even further with more unique features.

Aside from the services and benefits that are built into many of our MAPD plans, some include even more value-add benefits that you might not expect from a Medicare Advantage plan.



Over-the-counter (OTC) items – Receive up to \$90 a guarter to spend on over-the-counter health and wellness items such as aspirin, vitamins, cold and cough medications, bandages, and more.



**Eyewear** – Receive an eyewear allowance of up to \$350 a year to use toward contact lenses and eyeglasses.



Flex card – Receive \$250 annually to use toward dental, vision, and hearing services that may not be covered by your plan. Plus, earn up to \$100 in additional funds for completing certain plan-determined healthy activities. The flex card is available on our Univera SeniorChoice® Access (PPO) plan.



**Transportation** – Get 12 one-way rides per year (50-mile limit per ride) to health-related locations. Our transportation benefit is included in our Univera SeniorChoice® Secure (HMO-POS) plan.



Mom's Meals<sup>®</sup> – Get healthy, balanced meals delivered to your home while you're recovering from a medical event or procedure.\*\*\* Mom's Meals is included in our Univera SeniorChoice® Secure (HMO-POS) plan.

	OTC (Quarterly)	Eyewear (Annual)
Univera SeniorChoice <sup>®</sup> Access (PPO)		
Univera SeniorChoice <sup>®</sup> Extra (HMO)	\$90	\$350
Univera SeniorChoice <sup>®</sup> Basic (HMO)	\$90	\$325
Univera SeniorChoice <sup>®</sup> Advanced (HMO-POS)	\$50	\$150
Univera SeniorChoice <sup>®</sup> Value Plus (HMO-POS)	\$50	\$200
Univera SeniorChoice <sup>®</sup> Secure (HMO-POS)	\$50	\$250



#### Don't need all the "extras"?

Ask about our new Univera SeniorChoice<sup>®</sup> Core (PPO) plan that focuses more on filling in the gaps of Original Medicare with extensive medical and hospital coverage that helps limit your out-of-pocket costs in those areas.

#### Important note for 2025:

All Medicare Advantage plans with Part D coverage will have annual out-of-pocket costs capped at \$2,000 for Part D drugs.In addition, the coverage gap phase has been eliminated for 2025.

	PF	<b>PO</b>	НМО		
	Univera SeniorChoice® Access		Univera SeniorChoice® Extra	Univera SeniorChoice <sup>®</sup> Basic	
Monthly Premium	<b>\$20.90</b> with a \$250 Flex Card		<b>\$0</b> with a \$47 Part B Refund	d <b>\$0</b>	
Medical Benefit	IN	OON			
Primary Care Physician (PCP)	\$0	\$20	\$5	\$5	
Specialist	\$35	\$50	\$45	\$35	
Laboratory Services (Routine/Diagnostic)	\$0	30%	\$0/\$15	\$0	
X-Rays	\$60	\$70	\$60	\$50	
Diagnostic Imaging (CAT/MRI/MRA)	\$300	30%	\$325	\$200	
Outpatient Hospital/ Ambulatory Surgery/ Observation Stay	\$300	30%	\$400	\$285	
Inpatient Hospital Care	<b>\$375/day</b> (Days 1-5)	<b>\$435/day</b> (Days 1-28)	<b>\$400/day</b> (Days 1-5)	<b>\$390/day</b> (Days 1-5)	
Ambulance	\$325	\$325	\$300	\$170	
<b>Urgent Care</b> (Worldwide)	\$45	\$45	\$45	\$45	
<b>Emergency Room</b> (Worldwide)	\$110	\$110	\$110	\$110	
Maximum Out-of-Pocket	\$7,900	<b>\$11,700</b> (IN + OON)	\$8,500	\$8,500	
Part D Prescriptions					
30-day supply	Tiers 1/2/3/4/5		Tiers 1/2/3/4/5	Tiers 1/2/3/4/5	
Preferred Pharmacy	\$0/\$12/\$42/50%/28%		\$0/\$12/\$42/50%/28% \$0/\$14/\$42/50%/3		
Standard Pharmacy	\$5/\$17/\$47/50%/28%		\$5/\$17/\$47/50%/28%	\$5/\$19/\$47/50%/30%	
Deductible	<b>\$350</b> (Tiers 3-5)		<b>\$350</b> (Tiers 3-5)	<b>\$200</b> (Tiers 3-5)	

IN=In-network. OON=Out-of-network

	HMO-POS							
Univ SeniorChoic		Univera SeniorChoice® Value Plus		Univera SeniorChoice <sup>®</sup> Secure				
\$32	\$32.30 \$57.30		\$72.40					
IN	OON	IN	OON	IN	OON			
\$5	30%	\$0	30%	\$0	30%			
\$30	30%	\$35	30%	\$25	30%			
\$0	30%	\$0	30%	\$0	30%			
\$55	30%	\$50	30%	\$40	30%			
\$225	30%	\$175	30%	\$150	30%			
\$330	30%	\$260	30%	\$200	30%			
<b>\$360/day</b> (Days 1-5)	30%	<b>\$310/day</b> (Days 1-5)	30%	<b>\$225/day</b> (Days 1-5)	30%			
\$275	\$275	\$200	\$200	\$100	\$100			
\$45	\$45	\$50	\$50	\$50	\$50			
\$110	\$110	\$110	\$110	\$110	\$110			
\$7,500	Not Applicable	\$6,700	Not Applicable	\$6,000	Not Applicable			
Tiers 1/2/3/4/5 Tiers 1/2		2/3/4/5	Tiers 1/2/3/4/5					
\$0/\$14/\$42	\$0/\$14/\$42/50%/31% \$0/\$10/\$42/50%/33%		2/50%/33%	\$0/\$5/\$42/50%/33%				
\$5/\$19/\$47	\$5/\$19/\$47/50%/31% \$5/\$15/\$47/50%/33%		\$5/\$10/\$47/50%/33%					
<b>\$100</b> (Tiers 3-5)		No Deductible		No Deductible				

HMO-POS plans provide out-of-network coverage. Coverage limit of \$3,000 per year on the Univera SeniorChoice<sup>®</sup> Advanced plan. Coverage limit of \$1,500 per year on the Univera SeniorChoice<sup>®</sup> Value Plus and Univera SeniorChoice<sup>®</sup> Secure plan. Out-of-network coverage does not apply to maximum out-of-pocket.

#### Get the conversation started.

Have a question? We're right here in Western New York to help. Call your local Medicare Customer Care Advocate today.

#### Call

#### 1-877-883-9577 (TTY: 711)

Open hours: October 1 through March 31: 8 a.m. to 8 p.m., 7 days a week April 1 through September 30: 8 a.m. to 8 p.m., Monday - Friday

Click MyUniveraMedicare.com/PlanInfo





Univera Healthcare is an HMO and PPO plan with a Medicare contract. Enrollment in Univera Healthcare depends on contract renewal. SafeRide<sup>®</sup> is an independent company, offering transportation services in the Univera Healthcare service area. Mom's Meals<sup>®</sup> is an independent company providing home delivered meals and nutritional services to Univera Healthcare members. FitOn Health is an independent company offering members a fitness benefit. TruHearing<sup>®</sup> is an independent company that offers hearing products and services to Univera Healthcare members. You must continue to pay Medicare Part B premium. No-cost pricing may vary by plan. Please check the Summary of Benefits for full plan details. Dollar amounts listed for various benefits are applicable to providers within our network unless otherwise noted. Out-of-network/ non-contracted providers are under no obligation to treat Univera Healthcare members, except in emergency situations. Please call our Customer Care number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services. Our Health Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-877-883-9577 (TTY 711). 注意: 如果您使用繁體中文,您可以免費獲得語言援助服務。請致電 1-877-883-9577 (TTY 711)。

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