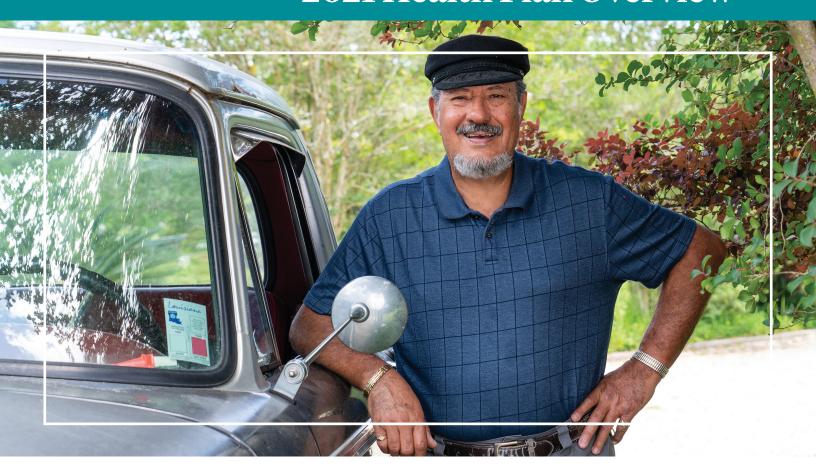


## **2021 Health Plan Overview**





Peoples Health Group Medicare (HMO-POS)

## **Peoples Health Group Medicare** (HMO-POS)

A Medicare Advantage Prescription Drug plan exclusively for Louisiana Office of Group Benefits retirees. This plan features the coordinated, in-network care for which Peoples Health is known. It also offers out-of-network coverage.



	Group Medicare			
	In-network	Out-of-network		
Out-of-Pocket Maximum	\$2,500	Does not apply		
Doctor Visits & NurseLine				
Primary Care Physician Visit	\$5	000/ 0-i		
Specialist Visit	\$10	20% Coinsurance		
Virtual Medical Visit or 24-Hour NurseLine	\$0	Available through contracted provider		
Preventive Care+				
Pap Smears, Pelvic Exams, Mammograms	\$0			
Prostate & Colorectal Cancer Screenings	\$0	20% Coinsurance		
Bone Mass Measurement	\$0			
Vaccinations (flu, pneumonia)	\$0	\$0		
Labs & Tests+		_		
Lab Services, Diagnostic Tests, X-rays and Advanced Imaging (MRI, MRA, CT, CTA, PET scans, etc.)	\$0	20% Coinsurance		
Outpatient Surgery (Outpatient Hospital or Ambulatory Surgical Center)				
Outpatient Surgery	\$0	20% Coinsurance		
Inpatient Hospital Care per admission				
Inpatient Deductible	\$0			
Inpatient Stay (days 1-10)	\$50 per day	Same as Medicare		
Inpatient Stay (days 11 and beyond)	\$0			
Worldwide Emergency and Urgent Care*				
Emergency Care (worldwide)	\$50	\$50		
Urgent Care (inside the U.S.)	\$10	\$10		
Urgent Care (outside the U.S.)		\$50		
Emergency Transportation (per one-way trip)				
Emergency Ambulance Services (ground or air)	\$50	\$50		

<sup>&</sup>lt;sup>+</sup>Office visit copay may apply. \*Emergency care copay waived if admitted to inpatient hospital care within 24 hours for the same condition.

	Group Medicare		
	In-network	Out-of-network	
Home Health & Skilled Nursing Facility Care			
Home Health	\$0	20% coinsurance	
Skilled Nursing Facility Care (semi private room and board, days 1-20)	\$0	\$0	
Skilled Nursing Facility Care (semi private room and board, per each additional day of the benefit period)	\$25 per day	\$25 per day	
Outpatient Services & Supplies			
Occupational, Physical or Speech Therapy Visit	\$0		
Durable Medical Equipment (wheelchairs, oxygen, etc.)	5% coinsurance	20% coinsurance	
Diabetes Monitoring Supplies (test strips, monitor, etc.)	\$0		
Mental Health & Substance Abuse Treatment			
Inpatient Mental Health (per day for days 1-5)	\$25 per day	Como oo Modicara	
Inpatient Mental Health (per day for days 6-90)	\$0	Same as Medicare	
Outpatient Mental Health or Substance Abuse Visit	\$0	20% coinsurance	
Virtual Mental Health Visit	\$0	Available through contracted provider	

Out-of-network/non-contracted providers are under no obligation to treat Peoples Health members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

Additional In-Network Benefits not Covered by Original Medicare			
Fitness Center Membership	\$0		
Routine Eye Exam	\$15		
Eyeglasses or Contact Lenses (one pair per year)	\$0		
Dental - Preventive (1 set of X-rays and 2 exams and cleanings per year)	\$0		
Dental - Comprehensive (fillings, dentures, etc.)	Copays vary, \$50 deductible applies		
Dental - Coverage Maximum	\$2,000		

Medicare Part D Prescription Drugs	Network Pharmacies		
Initial Coverage Period	30-Day Supply	90-Day Supply (from pharmacies with preferred cost-sharing)	
Tier 1 (covered through the gap)	\$0	\$0	
Tier 2 (covered through the gap)	\$0	\$0	
Tier 3 (covered through the gap)	\$20	\$40	
Tier 4 (covered through the gap)	\$40	\$80	
Tier 5 (covered through the gap)	20% coinsurance	30-day supply only	



For more information on Medicare or our plan benefits, call toll-free:

1-866-912-8304 (TTY: 711)

8 a.m. to 8 p.m.

Seven days a week *from October 1 through December 7*Monday through Friday *from December 8 through September 30*Asistencia disponible en español.

Three Lakeway Center 3838 N. Causeway Blvd., Suite 2200 Metairie, LA 70002 www.peopleshealth.com



Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract. Enrollment in the plan depends on the plan's contract renewal with Medicare.

On the cover: James B., Peoples Health plan member