

D-SNP Benefits

A Quick Guide to Understanding the AmeriHealth Caritas VIP Care D-SNP Benefits



Benefits — AmeriHealth Caritas VIP Care Benefits Overview



AmeriHealth Caritas VIP Care provides coverage for:

- Medicare Parts A and B.
- Medicare Part D prescription drug benefits.
- Supplemental benefits.
- Coordination of the care of members who are receiving Medicaid benefits from the state.

Benefits — Medicare vs. Medicaid: Which Program Pays for Which Service?

Plan name	Medicare Parts A and B	Medicare Part D	Medicaid
Medicaid Pennsylvania Department of Public Welfare (PA DPW)	N/A	N/A	✓
Medicare Advantage MAPD	✓	✓	Not applicable for non-dual-eligible Medicare beneficiaries
			Fee-for-service (FFS) for dual-eligible beneficiaries
Dual-eligible special needs plans (D-SNP) AmeriHealth Caritas VIP Care	✓	✓	State

Benefits — Medicare Part A and B Benefits*

- Ambulance services.
- Cardiac and pulmonary rehabilitation services.
- Catastrophic coverage.
- Chiropractic care.
- Dental services.
- Diabetes program and supplies.
- Diagnostic tests, X-rays, lab services and radiology services.
- Doctor office visits
- Durable medical equipment.
- Emergency care.
- Hearing services.
- Home health care.
- Hospice — initial consultation.
- Inpatient hospital care.
- Inpatient mental health care.
- LTC pharmacy.
- Mail order prescriptions.
- Out-of-network catastrophic coverage.
- Out-of-network catastrophic prescriptions.
- Out-of-network initial coverage.
- Outpatient mental health care.
- Outpatient prescription drugs.
- Outpatient rehabilitation.
- Outpatient services and surgery.
- Outpatient substance abuse care.
- Pharmacy.
- Podiatry.
- Preventive services and wellness education.
- Prosthetic devices.
- Skilled nursing facility services.
- Urgent care.

*Exceptions may apply, see provider manual for full list of benefits. Referral or prior authorization may be required.

Benefits — Supplemental Benefits

Dental services

Preventive dental:

- Oral exams: one every six months.
- Cleaning: one every six months.
- Fluoride treatment: one every six months.
- Dental X-rays: two every year.
- \$1,000 limit every year.

Comprehensive dental:

- Non-routine services.
- \$3,000 every year.
- Coverage for minor restorations.
- Fillings, simple extractions, dentures, denture repairs, surgical extractions, oral surgery, periodontics, endodontics, crowns, and mini-implants.

Hearing services

- One routine hearing exam every year.
- Three hearing aid fittings every three years.
- 48 batteries per aid for non-rechargeable models every three years.
- \$1,500 allowance for hearing aids every three years.

Vision services

- Up to one supplemental routine eye exam every year.
- Up to one pair of eyeglasses or contact lenses every year - \$350 limit.

Fitness center membership

- SilverSneakers® is a free fitness benefit which includes access to participating SilverSneakers fitness facilities, online wellness resources, and classes.

Benefits — Supplemental Benefits (Continued)

Telemedicine

- MDLive offers all members 24/7 access throughout the year to a participating doctor via telephone, desktop, or mobile device.
- Members have the ability to immediately have a medical, counseling, or psychiatry consultation with a physician.

Transportation services

- Must be plan-approved location.
- 100 one-way trips per year to a plan-approved location.
- Car, shuttle and van services include non-emergent transportation to doctor visits, preventive services, pharmacies and fitness centers.
- Authorization and scheduling rules apply.
- Members may call Member Services at 1-800-450-1166 or their care managers to arrange transportation.

Over the counter (OTC)

- Typically includes medicines or products that alleviate or treat injuries or illness.
- May use the benefit without a statement or documentation of a diagnosis from a medical provider.
- Up to \$365 every quarter.
- No rollover quarter to quarter.
- Member may fill out OTC Catalog or call Member Services at 1-800-450-1166 to order OTC products.
- Fieldtix keeps track of OTC utilization and will inform members, providers and pharmacy when limit is reached.

Benefits — Supplemental Benefits (Continued)

Meal Benefit and COVID-19 Meal Benefit

- 14 meals/week for 4 weeks for qualified homebound members after discharge from an inpatient facility or a skilled nursing facility.
- The COVID-19 Meal Benefit allows for a maximum of 28 meals (28 meals is two week's worth of meals at 2 meals/day for 14 days) to any qualified member who is ordered to in home-isolation/quarantine or has tested positive to COVID-19 and in need of food services.
- Prior authorization is required.

Additional Smoking and Tobacco Use Cessation

- Four additional face-to-face PCP visits for smoking/tobacco cessation annually.

Nurse Hotline

- If members are unable to reach their PCPs' offices, registered nurses are available 24 hours/7 days to assist members through the toll-free AmeriHealth Caritas VIP Care Nurse Call Line at **1-855-809-9199** .



Benefits — Supplemental Benefits (Continued)

Care Management Team

The Care Management Team (CMT) consists of care managers (nurses and social workers) trained to help members investigate and overcome barriers to achieve their health care goals. Outreach services include:

- Contacting members.
- Educating members.
- Calling providers.
- Calling pharmacies.
- Completing surveys and assessments to support special projects.

Providers may request CMT support directly by calling toll-free: 1-855-859-4082, 8 a.m. – 5 p.m., Monday through Friday.

Benefits — Additional Information



For additional information on benefits, please refer to the Provider Manual or call Provider Services at 1-800-521-6007.

More than
30 YEARS
of making
care the heart
of our **work.**

