




Your Medicare Advantage Extra Benefits



DELTA DENTAL MEDICARE ADVANTAGE COVERAGE

	Network Health Medicare Bravo Network Health Armor	Network PlatinumPlus Network PlatinumPremier	Network PlatinumPlus Pharmacy Network PlatinumPremier Pharmacy	Network PlatinumChoice Network Health Medicare Anywhere
DIAGNOSTIC AND PREVENTIVE SERVICES*				
Cleaning and exam	Unlimited 100% coverage for in-network dental**	One per year for \$30 copayment	One per year for \$30 copayment	Two per year for \$0 copayment
Bite-wing X-rays	Unlimited 100% coverage for in-network dental**	Not covered	One per year for \$0	One per year for \$0
Out-of-network coverage	50% of the cost**	Up to \$100 reimbursement for covered services	Up to \$100 reimbursement for covered services	Up to \$100 reimbursement for covered services
Comprehensive Coverage Gum disease maintenance, bridge and bridge repairs, dentures and denture repairs, extractions, root canals and crowns	Unlimited 100% coverage for in-network dental**	Not covered	Not covered	Not covered
NEED MORE COVERAGE?				
Network Health offers optional comprehensive dental coverage for a \$39 monthly premium ·\$0 exams, cleanings, X-rays and fluoride treatments in-network (20% coverage out-of-network) ·50% coverage on basic and major services, including root canal, extractions, oral surgery, crowns, implants, bridges and dentures ·Maximum benefit amount of \$1,000; if your plan has embedded dental coverage, those diagnostic and preventive services do not count toward your annual maximum ·\$100 deductible applies to most services (not diagnostic and preventive services) ·Available during the annual open enrollment period and upon initial enrollment				

**Deductible does not apply. **This benefit does not include implants, implant repairs and cosmetic services.*

FREQUENTLY ASKED QUESTIONS

Will I receive a Delta Dental ID card?

You can use your Network Health member ID card for your embedded Delta Dental Medicare Advantage benefits. If you enroll in the optional comprehensive dental coverage for an additional \$39 monthly premium, you will receive a separate ID card from Delta Dental.

When can I enroll in the optional dental benefit?

The optional comprehensive dental coverage is only available upon initial enrollment and during the annual enrollment period.

When does my dental coverage start?

Your dental coverage begins on your plan's effective date.

Is Delta Dental Medicare Advantage different than Delta Dental? Yes.

Delta Dental, like Network Health, is an insurance provider that offers different types of dental plans. Medicare members need to use a Delta Dental Medicare Advantage network provider to ensure coverage. Find a participating provider at medicareadvantage.deltadentalwi.com.

What happens if my dentist does not participate in Delta Dental's Medicare Advantage network?

If you see an out-of-network dentist, you must submit proof of services and payment to Delta Dental in order to receive your reimbursement. Your dentist may also be able to submit your claims directly to Delta Dental. Visit networkhealth.com/medicare/extra-benefits to learn more.

VISION BENEFITS NEVER LOOKED SO GOOD

Network Health Medicare PPO plan members have the following vision benefits.

- Annual routine vision exam for a \$10 copayment, with many plans when performed by an EyeMed in-network provider, one of the nation's largest networks of independent eye doctors and national retail providers
- With our new Network Health Medicare Bravo and Network Health Armor plans, you are covered for an annual routine vision exam for \$0 copayment.
- The tools and resources that make it easy to use your benefits
 - Enhanced provider search to find the right provider
 - Customer care, day or night

How do I know if my exam is a routine vision exam or a medical eye exam?

Routine Vision Exam

This type of exam screens for eye diseases and provides measurements for eyeglasses and/or contacts. A refraction test and/or dilation is covered when they're performed as part of this exam, as recommended by your doctor.

When do I need a routine eye exam?

- Your vision is blurry
- You have trouble reading up close
- You find yourself squinting to see far away
- Annually, even if you don't experience issues

Is this type of exam covered by my Network Health Medicare Advantage plan?

Yes. You are covered for a routine eye exam for a \$10 copayment or up to \$40 reimbursement if you visit an out-of-network provider for this service. The new Network Health Medicare Bravo and Network Health Armor plans cover an annual routine vision exam for \$0 copayment. You can find an EyeMed provider by visiting networkhealth.com/medicare/extra-benefits and clicking **Find a Vision Provider**.

Note: The EyeMed network of providers is different from our Network Health medical vision providers.

Did you know these health conditions may be identified through a vision exam?

- Diabetes
- High blood pressure
- Lupus
- Multiple sclerosis
- Rheumatoid arthritis

If you have one of these conditions, get your annual routine vision exam.

Medical Eye Exam*

Performed to evaluate abnormalities found during your routine eye exam and to monitor existing medical conditions. A refraction test is not covered when performed as part of this exam. If you have questions about the type of exam you receive, contact your provider.

Why might I need a medical exam instead of a routine exam?

- You have cataracts
- You have diabetes
- You have glaucoma
- You have macular degeneration

Is this type of exam covered by my Network Health Medicare Advantage Plan?

Yes. This is considered a Medicare-covered exam, and a copayment will apply. To find a Network Health medical vision provider, visit networkhealth.com/find-a-doctor, select your plan type and search for **Optometry** or **Ophthalmology**.

You can add your city or zip code under Advanced Search to narrow your search to providers near you.

POWERED BY

eye
Med

EyeMed Customer Service Toll Free

833-279-4359 (TTY 711)

**Monday–Saturday from 6:30 a.m. to 10 p.m.
and Sunday from 10 a.m. to 7 p.m.**

**A refraction test is not included in a medical eye exam.*

HEARING WELL HELPS YOU LIVE WELL

Good hearing is important to your health. That's why Network Health partners with TruHearing to offer your hearing benefit. This includes an annual routine hearing exam for \$0 when you see an in-network provider. To find a location near you and schedule your appointment, call TruHearing at **877-759-8131** (TTY 711), Monday-Friday from 8 a.m. to 8 p.m. Once you're at the appointment, present your Network Health member ID card and the provider will handle the rest.

If you choose to see an out-of-network provider for a routine hearing exam, you will pay \$40. At your appointment, you should show your Network Health ID card. Your out-of-network provider may bill Network Health directly for your service, or may require you to pay the full amount of your visit up-front. If this happens, you can submit your claim to Network Health for reimbursement using the form found at networkhealth.com/medicare/extra-benefits.

Hearing Aids

Your hearing benefit includes high-quality hearing aids at reduced prices.

Level	Cost	Features
Basic	\$495 per aid	Moderately priced devices that offer exceptional value
Standard	\$895 per aid	Devices with good hearing performance and features such as wind and noise reduction
Advanced	\$1,295 per aid	Advanced devices equipped to handle challenging listening environments
Premium	\$1,695 per aid	Full-featured devices that offer top-of-the-line hearing in all listening environments



TruHearing®

You can get up to two hearings aids per year, and each aid includes these great extras.

- Unlimited follow up visits for one year after purchase, for fitting and adjustments
- 60-day return period and three-year warranty for loss or damage
- One-year supply of free batteries per aid (included with non-rechargeable models)



800-378-5234 (TTY 800-947-3529)
Monday – Friday, 8 a.m. to 8 p.m.

Network Health Medicare Advantage Plans include MSA and PPO plans with a Medicare contract. Enrollment in Network Health Medicare Advantage Plans depends on contract renewal. Out-of-network/non-contracted providers are under no obligation to treat Network 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. Please note Delta Dental's Medicare Advantage Network dental benefit can be taken with you when you travel. If you receive services from a dentist that does not participate in Delta Dental's Medicare Advantage Network you will be responsible for the difference between Delta Dental's payment to you and the amount charged by the nonparticipating dentist.

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