



Your **2025** Medicare Advantage Extra Benefits



SAY CHEESE DENTAL NETWORK COVERAGE



Network Health Bravo (PPO) Network Health Armor (PPO)	Network Health PlusRx (PPO)	Network Health PremierRx (PPO)	Network Health Choice (PPO)	Network Health Anywhere (PPO)
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DIAGNOSTIC AND PREVENTIVE SERVICES*

Cleaning and exam	Two per year 100% coverage in-network, \$5,000 combined in- and out-of-network annual maximum**	Two per year, 100% coverage in-network, \$750 combined in- and out-of-network annual maximum	One per year for \$30 copayment	Two per year 100% coverage in-network \$1,500 combined in- and out-of-network annual maximum**	Two per year 100% coverage in-network \$2,000 combined in- and out-of-network annual maximum**
Bitewing X-rays	One per year for \$0**	One per year for \$0	Not covered	One per year for \$0**	One per year for \$0**
Comprehensive Coverage Gum disease maintenance, bridge and bridge repairs, dentures and denture repairs, extractions, root canals and crowns	100% coverage in-network, \$5,000 combined in- and out-of-network annual maximum**	50% coverage in-network, \$750 combined in- and out-of-network annual maximum	Not covered	50% coverage in-network, \$1,500 combined in- and out-of-network annual maximum**	50% coverage in-network, \$2,000 combined in- and out-of-network annual maximum**
Out-of-network coverage	Member pays 50%**	Member pays 80%	Up to \$100 reimbursement for covered services	Member pays 80%**	Member pays 80%**

NEED MORE COVERAGE?

Network Health offers optional comprehensive dental coverage for a \$45 monthly premium.

- 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.
- 50% coverage on basic and major services, including root canal, extractions, oral surgery, crowns, implants, bridges and dentures.
- \$0 exams, cleanings, X-rays and fluoride treatments in-network (member pays 20% out-of-network).
- \$100 deductible applies to most services (not diagnostic and preventive services).
- Available during the annual open enrollment period and upon initial enrollment.
- Not available for Network Health Bravo, Network Health Armor, Network Health Choice and Network Health Anywhere plans.

**Say Cheese Dental Network
Customer Service**
888-454-4127 (TTY 711)
Monday-Friday from 7 a.m. to 10 p.m.
Saturday from 8 a.m. to 5:30 p.m.

*Deductible does not apply. **This benefit includes one implant and resin.

WHAT YOU SHOULD KNOW

ID card details. You may use your Network Health member ID card for your embedded dental benefits. If you enroll in the optional comprehensive dental coverage for an additional \$45 monthly premium, you will receive a separate ID card from Say Cheese Dental Network.

Enrollment in the optional dental coverage is only available upon initial enrollment and during the annual enrollment period.

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

Visit a Say Cheese Dental Network provider. Say Cheese Dental Network offers different dental plans and you need to use an in-network provider to ensure you receive your full coverage. To find an in-network dentist, visit saycheesedentalnetwork.com.

If you see an out-of-network dentist and the dentist is not able to submit your claims directly to Say Cheese Dental Network, you must pay at the time of service and submit proof of services and payment to Say Cheese Dental Network to receive your reimbursement. 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.

- With many plans, your annual routine vision exam is covered for a \$10 copayment, when performed by an EyeMed in-network provider, one of the nation's largest networks of independent eye doctors and national retail providers
- Annual routine vision exams are covered for a \$0 copayment with Network Health Bravo, Network Health Armor, Network Health Choice and Network Health Anywhere
- 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 eye exam tests for eye diseases and provides prescriptions 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
- Your eyes are uncomfortable or vision is inconsistent
- Annually, even if you don't experience issues

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

Yes. Depending on your plan, you are covered for a routine eye exam with a \$10 copayment or up to \$40 reimbursement if you visit an out-of-network provider for this service. The Network Health Bravo, Network Health Armor, Network Health Choice and Network Health Anywhere plans cover an annual routine vision exam for \$0 copayment. You can find an EyeMed in-network provider by visiting networkhealth.com/medicare/extra-benefits.

Note: The EyeMed network of providers for routine vision exams are 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
- High cholesterol
- Multiple sclerosis
- Lupus
- Rheumatoid arthritis

If you have one of these conditions, schedule 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**.

POWERED BY

eye
Med

EyeMed Customer Service Toll Free
833-279-4359 (TTY 711)

Monday – Saturday from 7 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. Your exam includes a fitting and must be scheduled through TruHearing. 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 have a \$40 copayment. 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. Hearing aids must be purchased through TruHearing.

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 hearing aids per year and each aid includes these great extras.

- First year of follow-up visits, for fitting and adjustments
- 60-day trial period
- Three-year extended warranty
- 80 batteries per aid for 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 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 member experience team or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services. Your dental plan offers both in- and out-of-network dental coverage. Out-of-network dentists are not contracted to accept plan payment as payment in full, so they may charge you for more than what the plan pays, even for services listed as \$0 copayment. Seeing an in-network provider can result in substantial savings. Benefits received out-of-network are subject to any in-network benefit maximums, limitations and/or exclusions.

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