Annual Notice of Changes for 2020

Your Medicare Health Benefits and Services as a Member of Geisinger Gold

This mailing gives you a summary about your Medicare health coverage from January 1 - December 31, 2020 and explains how to get the health care you need. This is an important legal document. Please keep it in a safe place.

Why am I receiving this information?

We are sending this Annual Notice of Change (ANOC) so you can review the 2020 coverage offered through this plan. Each year from October 15 through December 7, you may make a change to your Medicare plan and Medicare prescription drug coverage. Changes to your new plan with be effective beginning January 1. If you want to stay in our Plan, you don't need to do anything. You will still be a member of our Plan for 2020.

Note: Since you are a member of an employer group, you may be required to belong to a specific plan in order to get any additional benefits you may be receiving. Please check with your employer before switching to another health plan.

About Geisinger Gold

- Geisinger Gold (HMO) is offered by Geisinger Health Plan, a Medicare Advantage HMO with a Medicare Contract. Continued enrollment in Geisinger Gold depends on annual contract renewal.
- This Plan is offered by Geisinger Gold, referred throughout the ANOC as "we", "us" or "our." Classic is referred to as "Plan" or "our Plan." Our organization contracts with the Federal government.

How Your Plan Will Change For 2020?

This is the time of year when we like to thank you for your membership. Please refer to your Summary of Benefits for any changes in 2020. Also, additional benefits may be available to you. Please contact your human resources department for more information. If your employer changes your benefits after this mailing has been sent, you will receive updated information on your benefits in January.

What if I *don't* have drug coverage that expects to pay, on average, at least as much as standard Medicare prescription drug coverage?

Please contact your human resources department for information on prescription drug coverage that is available to you. We have included a *List of Covered Drugs*. We call it the "Drug List" for short.

If you join another Medicare Health Plan or a Medicare Prescription Drug Plan you will be disenrolled from our Plan when your enrollment in the new plan begins.

The Provider Directory: Your guide to all providers and pharmacies in the plan's network

The *Provider Directory* lists our network providers, network pharmacies and durable medical equipment suppliers.

What are "network providers" and "network pharmacies"?

Network providers are the doctors and other health care professionals, medical groups, durable medical equipment suppliers, hospitals, and other health care facilities that have an agreement with us to accept our payment and any plan cost-sharing as payment in full. We have arranged for these providers to deliver covered services to members in our plan.

Network pharmacies are all of the pharmacies that have agreed to fill covered prescriptions for our plan members. We have arranged for these providers to deliver covered services to members in our plan. We strongly suggest that you review our current Provider Directory to see if your pharmacy is still in our network. This is important because, with few exceptions, you must get your prescriptions filled at a network pharmacy if you want our plan to cover (help you pay for) them.

If you don't have your copy of the *Provider Directory*, you can request a copy from Member Services (phone numbers are printed at the end of this letter). You may ask Member Services for more information about our network providers, including their qualifications. You can also see the *Provider Directory* at www.GeisingerGold.com or download it from this website. Both Member Services and the website can give you the most up-to-date information about changes in our network providers and pharmacies.

Why do you need to know which providers and pharmacies are part of our network?

It is important to know which providers are part of our network because, with limited exceptions, while you are a member of our plan you must use network providers to get your medical care and services. The only exceptions are emergencies, urgently needed services when the network is not available (generally, when you are out of the area), out-of-area dialysis services, and cases in which Geisinger Health Plan authorizes use of out-of-network providers.

Where can I get more information?

Please call Member Services if you have any questions. You can also get information about the Medicare program and other Medicare plans available by visiting www.medicare.gov or by calling 1-800-MEDICARE (1-800-633-4227) 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

Geisinger Gold Member Services: For help or information, please call the Customer Service Team or visit our Plan website at www.GeisingerGold.com.

Method	Member Services – Contact Information
CALL	 1-800-498-9731 or Pharmacy Member Services 1-800-988-4861 Calls to this number are free. Our business hours: October 1– March 31 8 a.m. – 8 p.m. seven days a week April 1 – September 30 8 a.m. – 8 p.m. Monday – Friday 8 a.m. – 2 p.m. Saturday After hours, an automated voice messaging service is available. If you leave a message, please include your name, phone number and the time you called. A Customer Service Representative will return your call no later than one business day. Member Services also has free language interpreter services available for non-English speakers.
ΤΤΥ	TTY users call PA Relay: 711 or 1-800-654-5984 This number requires special telephone equipment and is only for people who have difficulties with hearing or speaking. Calls to this number are free. Our business hours: October 1– March 31 8 a.m. – 8 p.m. seven days a week April 1 – September 30 8 a.m. – 8 p.m. Monday – Friday 8 a.m. – 2 p.m. Saturday
FAX	570-271-5871
WRITE	Geisinger Gold 100 North Academy Avenue Danville, PA 17822-2580
WEBSITE	www.GeisingerGold.com