

Geisinger

Geisinger Gold Secure Rx (HMO D-SNP) offered by Geisinger Health Plan

Annual Notice of Changes for 2023

You are currently enrolled as a member of Geisinger Gold Secure Rx (HMO D-SNP). Next year, there will be changes to the plan's costs and benefits. ***Please see page 5 for a Summary of Important Costs, including Premium.***

This document tells about the changes to your plan. To get more information about costs, benefits, or rules please review the *Evidence of Coverage*, which is located on our website at www.GeisingerGold.com. You may also call Member Services to ask us to mail you an *Evidence of Coverage*.

What to do now

1. ASK: Which changes apply to you

- Check the changes to our benefits and costs to see if they affect you.
 - Review the changes to Medical care costs (doctor, hospital).
 - Review the changes to our drug coverage, including authorization requirements and costs.
 - Think about how much you will spend on premiums, deductibles, and cost sharing.
- Check the changes in the 2023 Drug List to make sure the drugs you currently take are still covered.
- Check to see if your primary care doctors, specialists, hospitals and other providers, including pharmacies will be in our network next year.
- Think about whether you are happy with our plan.

2. COMPARE: Learn about other plan choices

- Check coverage and costs of plans in your area. Use the Medicare Plan Finder at www.medicare.gov/plan-compare website or review the list in the back of your *Medicare & You 2023* handbook.
- Once you narrow your choice to a preferred plan, confirm your costs and coverage on the plan's website.

3. **CHOOSE:** Decide whether you want to change your plan

- If you don't join another plan by December 7, 2022, you will stay in Geisinger Gold Secure Rx (HMO D-SNP)
- To **change to a different plan**, you can switch plans between October 15 and December 7. Your new coverage will start on **January 1, 2023**. This will end your enrollment with Geisinger Gold Secure Rx (HMO D-SNP).
- Look in Section 3.2 to learn more about your choices.
- If you recently moved into, currently live in, or just moved out of an institution (like a skilled nursing facility or long-term care hospital), you can switch plans or switch to Original Medicare (either with or without a separate Medicare prescription drug plan) at any time.

Additional Resources

- Please contact our Member Services number at 1-800-498-9731 for additional information. TTY users should 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 and speaking). Calls to these numbers are free.

Our business hours:

October 1– March 31 8 a.m. – 8 p.m. 7 days a week

April 1 – September 30 8 a.m. – 8 p.m. Monday – Friday, 8 a.m. – 2 p.m. Saturday

- Member Services has free language interpreter services available for non-English speakers. Please call the numbers listed in Section 7.1 of this document. We can also give you plan information in braille, audio, large print, or other alternate formats if you need it.
- **Coverage under this Plan qualifies as Qualifying Health Coverage (QHC)** and satisfies the Patient Protection and Affordable Care Act's (ACA) individual shared responsibility requirement. Please visit the Internal Revenue Service (IRS) website at www.irs.gov/Affordable-Care-Act/Individuals-and-Families for more information.

About Geisinger Gold Secure Rx (HMO D-SNP)

- Geisinger Gold Medicare Advantage HMO, PPO, and HMO D-SNP plans are offered by Geisinger Health Plan/Geisinger Indemnity Insurance Company, health plans with a Medicare contract. Continued enrollment in Geisinger Gold depends on contract renewal. Geisinger Health Plan/Geisinger Indemnity Insurance Company are part of Geisinger, an integrated health care delivery and coverage organization.
- When this document says “we,” “us,” or “our”, it means Geisinger Health Plan. When it says “plan” or “our plan,” it means Geisinger Gold Secure Rx (HMO D-SNP).

Geisinger Gold Secure Rx (HMO D-SNP) has been approved by the National Committee for Quality Assurance (NCQA) to operate as a Special Needs Plan (SNP) until December 31, 2023, based on a review of Geisinger Gold Secure Rx (HMO D-SNP)'s Model of Care.

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Summary of Important Costs for 2023

The table below compares the 2022 costs and 2023 costs for Geisinger Gold Secure Rx (HMO D-SNP) in several important areas. **Please note this is only a summary of costs.** If you are eligible for Medicare cost-sharing assistance under Pennsylvania Medical Assistance (Medicaid), you pay \$0 for your deductible, doctor office visits, and inpatient hospital stays.

*If at any time during the benefit year you lose your Pennsylvania Medical Assistance (Medicaid) eligibility, you will be given a 6-month grace period to get your Pennsylvania Medical Assistance (Medicaid) eligibility back. During this 6-month grace period, you are responsible for paying the 20% coinsurance to the provider for the portion of the cost sharing that Pennsylvania Medical Assistance (Medicaid) would have otherwise paid on your behalf.

Cost	2022 (this year)	2023 (next year)
Monthly plan premium*		

*Your premium may be higher than this amount. See Section 1.1 for details.

Adams	\$0	\$0
Armstrong	Plan not available	\$0
Beaver	Plan not available	\$0
Bedford	Plan not available	\$0
Berks	\$0	\$0
Blair	\$0	\$0
Bradford	\$0	\$0
Bucks	\$0	\$0
Butler	Plan not available	\$0
Cambria	\$0	\$0
Cameron	\$0	\$0
Carbon	\$0	\$0
Centre	\$0	\$0
Chester	\$0	\$0
Clarion	Plan not available	\$0
Clearfield	\$0	\$0
Clinton	\$0	\$0
Columbia	\$0	\$0
Crawford	Plan not available	\$0

Cost**Monthly plan premium*****2022 (this year)****2023 (next year)**

*Your premium may be higher than this amount. See Section 1.1 for details.

Cumberland	\$0	\$0
Dauphin	\$0	\$0
Delaware	Plan not available	\$0
Elk	Plan not available	\$0
Forest	Plan not available	\$0
Franklin	\$0	\$0
Fulton	\$0	\$0
Greene	Plan not available	\$0
Huntingdon	\$0	\$0
Jefferson	\$0	\$0
Juniata	\$0	\$0
Lackawanna	\$0	\$0
Lancaster	\$0	\$0
Lebanon	\$0	\$0
Lehigh	\$0	\$0
Luzerne	\$0	\$0
Lycoming	\$0	\$0
McKean	Plan not available	\$0
Mifflin	\$0	\$0
Monroe	\$0	\$0
Montour	\$0	\$0
Northampton	\$0	\$0
Northumberland	\$0	\$0
Perry	\$0	\$0
Philadelphia	Plan not available	\$0
Pike	\$0	\$0
Potter	\$0	\$0
Schuylkill	\$0	\$0
Snyder	\$0	\$0
Somerset	\$0	\$0
Sullivan	\$0	\$0

Cost**Monthly plan premium*****2022 (this year)****2023 (next year)**

*Your premium may be higher than this amount. See Section 1.1 for details.

Susquehanna	\$0	\$0
Tioga	\$0	\$0
Union	\$0	\$0
Venango	Plan not available	\$0
Warren	Plan not available	\$0
Washington	Plan not available	\$0
Wayne	\$0	\$0
Westmoreland	Plan not available	\$0
Wyoming	\$0	\$0
York	\$0	\$0

Cost	2022 (this year)	2023 (next year)
*Doctor office visits	<p>Primary care visits: \$0 copayment per visit</p> <p>Specialist visits: 20% coinsurance per visit</p> <p>If you are eligible for Medicare cost sharing assistance under Pennsylvania Medical Assistance (Medicaid), you pay \$0 per visit.</p>	<p>Primary care visits: \$0 copayment per visit</p> <p>Specialist visits: 20% coinsurance per visit</p> <p>If you are eligible for Medicare cost-sharing assistance under Pennsylvania Medical Assistance (Medicaid), you pay \$0 per visit.</p>
*Inpatient hospital stays	<p>In 2022, you pay \$1,556 for each benefit period: \$0 for days 1-60, \$389 per day for days 61-90 and \$778 per each "lifetime reserve day" after 91 days of each benefit period (up to a maximum of 60 days over your lifetime).</p> <p>If you are eligible for Medicare cost sharing assistance under Pennsylvania Medical Assistance (Medicaid), you pay \$0.</p>	<p>These are 2022 cost-sharing amounts and may change for 2023. Geisinger Gold Secure Rx (HMO D-SNP) will provide updated rates as soon as they are released. In 2022, you pay (2023 info not available yet) \$1,556 for each benefit period: \$0 for days 1-60, \$389 per day for days 61-90 and \$778 per each "lifetime reserve day" after 91 days of each benefit period (up to a maximum of 60 days over your lifetime).</p> <p>If you are eligible for Medicare cost sharing assistance under Pennsylvania Medical Assistance (Medicaid), you pay \$0.</p>
* Inpatient hospital stays (Psychiatric)	<p>In 2022, you pay \$1,556 for each benefit period: \$0 for days 1-60, \$389 per day for days 61-90 and \$778 per each "lifetime reserve day" after 91 days of each benefit period (up</p>	<p>These are 2022 cost-sharing amounts and may change for 2023. Geisinger Gold Secure Rx (HMO D-SNP) will provide updated rates as soon as they are released. In 2022, you pay (2023 info</p>

Cost	2022 (this year)	2023 (next year)
	<p>to a maximum of 60 days over your lifetime).</p> <p>If you are eligible for Medicare cost sharing assistance under Pennsylvania Medical Assistance (Medicaid), you pay \$0.</p>	<p>not available yet) \$1,556 for each benefit period: \$0 for days 1-60, \$389 per day for days 61-90 and \$778 per each "lifetime reserve day" after 91 days of each benefit period (up to a maximum of 60 days over your lifetime).</p> <p>If you are eligible for Medicare cost sharing assistance under Pennsylvania Medical Assistance (Medicaid), you pay \$0.</p>
<p>Part D prescription drug coverage (See Section 1.5 for details.)</p>	<p>Deductible: \$480</p> <p>Coinsurance during the Initial Coverage Stage:</p> <p>You pay a 25% coinsurance</p> <p>If you receive “Extra Help” to pay your prescription drugs, this payment stage does not apply to you. If you do not receive “Extra Help,” you begin in this payment stage when you fill your first prescription of the year.</p> <p>Please refer to your Low-Income Subsidy Rider (LIS Rider) for your deductible amount.</p>	<p>Deductible: \$505</p> <p>Coinsurance during the Initial Coverage Stage:</p> <p>You pay a 25% coinsurance</p> <p>If you receive “Extra Help” to pay your prescription drugs, this payment stage does not apply to you. If you do not receive “Extra Help,” you begin in this payment stage when you fill your first prescription of the year.</p> <p>Please refer to your Low-Income Subsidy Rider (LIS Rider) for your deductible amount.</p>

Cost	2022 (this year)	2023 (next year)
Maximum out-of-pocket amount	\$3,400	\$7,550
This is the <u>most</u> you will pay out-of-pocket for your covered Part A and Part B services. (See Section 1.2 for details.)	If you are eligible for Medicare cost-sharing assistance under Pennsylvania Medical Assistance (Medicaid), you are not responsible for paying any out-of-pocket costs toward the maximum out-of-pocket amount for covered Part A and Part B services.	If you are eligible for Medicare cost-sharing assistance under Pennsylvania Medical Assistance (Medicaid), you are not responsible for paying any out-of-pocket costs toward the maximum out-of-pocket amount for covered Part A and Part B services.

SECTION 1 Changes to Benefits and Costs for Next Year

Section 1.1 – Changes to the Monthly Premium

Cost	2022 (this year)	2023 (next year)
Monthly premium		
(You must also continue to pay your Medicare Part B premium unless it is paid for you by Medicaid.)		
Adams	\$0	\$0
Armstrong	Plan not available	\$0
Beaver	Plan not available	\$0
Bedford	Plan not available	\$0
Berks	\$0	\$0
Blair	\$0	\$0
Bradford	\$0	\$0
Bucks	\$0	\$0
Butler	Plan not available	\$0
Cambria	\$0	\$0
Cameron	\$0	\$0
Carbon	\$0	\$0

Cost**Monthly premium****2022 (this year)****2023 (next year)**

(You must also continue to pay your Medicare Part B premium unless it is paid for you by Medicaid.)

Centre	\$0	\$0
Chester	\$0	\$0
Clarion	Plan not available	\$0
Clearfield	\$0	\$0
Clinton	\$0	\$0
Columbia	\$0	\$0
Crawford	Plan not available	\$0
Cumberland	\$0	\$0
Dauphin	\$0	\$0
Delaware	Plan not available	\$0
Elk	Plan not available	\$0
Forest	Plan not available	\$0
Franklin	\$0	\$0
Fulton	\$0	\$0
Greene	Plan not available	\$0
Huntingdon	\$0	\$0
Jefferson	\$0	\$0
Juniata	\$0	\$0
Lackawanna	\$0	\$0
Lancaster	\$0	\$0
Lebanon	\$0	\$0
Lehigh	\$0	\$0
Luzerne	\$0	\$0
Lycoming	\$0	\$0
McKean	Plan not available	\$0
Mifflin	\$0	\$0
Monroe	\$0	\$0
Montour	\$0	\$0
Northampton	\$0	\$0
Northumberland	\$0	\$0
Perry	\$0	\$0

Cost**Monthly premium****2022 (this year)****2023 (next year)**

(You must also continue to pay your Medicare Part B premium unless it is paid for you by Medicaid.)

Philadelphia	Plan not available	\$0
Pike	\$0	\$0
Potter	\$0	\$0
Schuylkill	\$0	\$0
Snyder	\$0	\$0
Somerset	\$0	\$0
Sullivan	\$0	\$0
Susquehanna	\$0	\$0
Tioga	\$0	\$0
Union	\$0	\$0
Venango	Plan not available	\$0
Warren	Plan not available	\$0
Washington	Plan not available	\$0
Wayne	\$0	\$0
Westmoreland	Plan not available	\$0
Wyoming	\$0	\$0
York	\$0	\$0

Section 1.2 – Changes to Your Maximum Out-of-Pocket Amount

Medicare requires all health plans to limit how much you pay “out-of-pocket” for the year. This limit is called the “maximum out-of-pocket amount.” Once you reach this amount, you generally pay nothing for covered Part A and Part B services for the rest of the year.

Cost	2022 (this year)	2023 (next year)
<p>Maximum out-of-pocket amount</p> <p>Because our members also get assistance from Pennsylvania Medical Assistance (Medicaid), very few members ever reach this out-of-pocket maximum.</p> <p>If you are eligible for Pennsylvania Medical Assistance (Medicaid) with Part A and Part B copays, you are not responsible for paying any out-of-pocket costs toward the maximum out-of-pocket amount for covered Part A and Part B services.</p> <p>Your costs for covered medical services (such as copays) count toward your maximum out-of-pocket amount. Your costs for prescription drugs do not count toward your maximum out-of-pocket amount.</p>	<p>\$3,400</p>	<p style="text-align: center;">\$7,550</p> <p>Once you have paid \$7,550 out-of-pocket for covered Part A and Part B services, you will pay nothing for your covered Part A and Part B services for the rest of the calendar year.</p>

Section 1.3 – Changes to the Provider and Pharmacy Networks

We included a copy of our *Provider Directory* in the envelope with this document. Updated directories are also located on our website at www.GeisingerGold.com. You may also call Member Services for updated provider and/or pharmacy information or to ask us to mail you a directory.

There are changes to our network of providers for next year. **Please review the 2023 *Provider Directory* to see if your providers (primary care provider, specialists, hospitals, etc.) are in our network.**

There are changes to our network of pharmacies for next year. **Please review the 2023 *Provider Directory* to see which pharmacies are in our network.**

It is important that you know that we may make changes to the hospitals, doctors and specialists (providers), and pharmacies that are a part of your plan during the year. If a mid-year change in our providers affects you, please contact Pharmacy Member Services so we may assist.

Section 1.4 – Changes to Benefits and Costs for Medical Services

Please note that the *Annual Notice of Changes* tells you about changes to your Medicare benefits and costs.

We are making changes to costs and benefits for certain medical services next year. The information below describes these changes.

***All member cost sharing is dependent on member’s Pennsylvania Medical Assistance (Medicaid) eligibility.**

Cost	2022 (this year)	2023 (next year)
Dental Services Comprehensive/Preventive	\$3,500 combined benefit annually	\$4,500 combined benefit annually
	<ul style="list-style-type: none"> • Fillings • Simple Extractions • Crowns • Non-surgical periodontic services for treatment of gum disease • Root Canals • Dentures • Oral Exams (2 per year) • Routine Cleanings (2 per year) • Dental X-rays (2 per year) • Fluoride Treatment (2 per year) 	<ul style="list-style-type: none"> • Fillings • Simple Extractions • Crowns • Non-surgical periodontic services for treatment of gum disease • Root Canals • Dentures • Oral Exams (2 per year) • Routine Cleanings (2 per year) • Dental X-rays (2 per year) • Fluoride Treatment (2 per year)

Cost	2022 (this year)	2023 (next year)
<p>*Diabetic Services and Supplies</p>	<p>Continuous Glucose Monitor is <u>not</u> covered</p>	<p>You pay a 20% coinsurance for continuous Glucose Monitor</p> <p>Continuous Glucose Monitors <u>may</u> be covered for people who use insulin and meet the medical necessity criteria.</p> <p>If you are eligible for Medicare cost sharing assistance under Pennsylvania Medical Assistance (Medicaid), you pay \$0.</p>
<p>*Emergency Care</p>	<p>You pay a \$120 copayment per visit</p> <p>(Waived if admitted to the hospital within 3 days for the same condition)</p> <p>If you are eligible for Medicare cost sharing assistance under Pennsylvania Medical Assistance (Medicaid), you pay \$0.</p>	<p>You pay a \$95 copayment per visit</p> <p>(Waived if admitted to the hospital within 3 days for the same condition)</p> <p>If you are eligible for Medicare cost sharing assistance under Pennsylvania Medical Assistance (Medicaid), you pay \$0.</p>
<p>Home Health Agency Care</p>	<p>You pay a \$35 copayment per visit</p> <p>If you are eligible for Medicare cost sharing assistance under Pennsylvania Medical Assistance (Medicaid), you pay \$0.</p>	<p>You pay a \$0 copayment per visit</p>

Cost	2022 (this year)	2023 (next year)
*Inpatient Hospital Care	<p>In 2022, you pay \$1,556 for each benefit period: \$0 for days 1-60, \$389 per day for days 61-90 and \$778 per each "lifetime reserve day" after 91 days of each benefit period (up to a maximum of 60 days over your lifetime).</p> <p>If you are eligible for Medicare cost sharing assistance under Pennsylvania Medical Assistance (Medicaid), you pay \$0.</p>	<p>These are 2022 cost-sharing amounts and may change for 2023. Geisinger Gold Secure Rx (HMO D-SNP) will provide updated rates as soon as they are released. In 2022, you pay (2023 info not available yet) \$1,556 for each benefit period: \$0 for days 1-60, \$389 per day for days 61-90 and \$778 per each "lifetime reserve day" after 91 days of each benefit period (up to a maximum of 60 days over your lifetime).</p> <p>If you are eligible for Medicare cost sharing assistance under Pennsylvania Medical Assistance (Medicaid), you pay \$0.</p>

Cost	2022 (this year)	2023 (next year)
<p>*Inpatient Services in a Psychiatric Hospital</p>	<p>In 2022, you pay \$1,556 for each benefit period: \$0 for days 1-60, \$389 per day for days 61-90 and \$778 per each "lifetime reserve day" after 91 days of each benefit period (up to a maximum of 60 days over your lifetime).</p> <p>If you are eligible for Medicare cost sharing assistance under Pennsylvania Medical Assistance (Medicaid), you pay \$0.</p>	<p>These are 2022 cost-sharing amounts and may change for 2023. Geisinger Gold Secure Rx (HMO D-SNP) will provide updated rates as soon as they are released. In 2022, you pay (2023 info not available yet) \$1,556 for each benefit period: \$0 for days 1-60, \$389 per day for days 61-90 and \$778 per each "lifetime reserve day" after 91 days of each benefit period (up to a maximum of 60 days over your lifetime).</p> <p>If you are eligible for Medicare cost sharing assistance under Pennsylvania Medical Assistance (Medicaid), you pay \$0.</p>
<p>Over the Counter Items (OTC)</p>	<p>\$95 benefit limit per month</p> <p>(Excluded Nicotine Replacement Therapy)</p>	<p>\$130 benefit limit per month</p> <p>(Includes Nicotine Replacement Therapy)</p>

Cost	2022 (this year)	2023 (next year)
Prior Authorizations	Cardiac Rehabilitation Services does <u>not</u> require Prior Authorization	Cardiac Rehabilitation Services <u>require</u> Prior Authorization
	Home Health Agency Care does <u>not</u> require Prior Authorization	Home Health Agency Care <u>requires</u> Prior Authorization
	Home Infusion Therapy does <u>not</u> require Prior Authorization	Home Infusion Therapy <u>requires</u> Prior Authorization
	Opioid Treatment Program Services does <u>not</u> require Prior Authorization	Opioid Treatment Program Services <u>require</u> Prior Authorization
	Outpatient Mental Health Services does <u>not</u> require Prior Authorization	Outpatient Mental Health Services <u>require</u> Prior Authorization
	Outpatient Rehab Occupational Therapy does <u>not</u> require Prior Authorization	Outpatient Rehab Occupational Therapy <u>requires</u> Prior Authorization
	Outpatient Rehab Physical Therapy does <u>not</u> require Prior Authorization	Outpatient Rehab Physical Therapy <u>requires</u> Prior Authorization
	Outpatient Rehab Speech Therapy does <u>not</u> require Prior Authorization	Outpatient Rehab Speech Therapy <u>requires</u> Prior Authorization
	Outpatient Substance Abuse Services does <u>not</u> require Prior Authorization	Outpatient Substance Abuse Services <u>require</u> Prior Authorization
	Pulmonary Rehab does <u>not</u> require Prior Authorization	Pulmonary Rehab <u>requires</u> Prior Authorization
	Supervised Exercise Therapy does <u>not</u> require Prior Authorization	Supervised Exercise Therapy <u>requires</u> Prior Authorization

Cost	2022 (this year)	2023 (next year)
*Skilled Nursing Facility	<p>These are 2022 cost-sharing amounts. In 2022, you pay \$1,556 for each benefit period: \$0 for days 1-20, \$194.50 per day for days 21-100, days 101 and beyond: You pay all costs. Part A deductible does apply.</p> <p>If you are eligible for Medicare cost sharing assistance under Pennsylvania Medical Assistance (Medicaid), you pay \$0.</p>	<p>These are 2022 cost-sharing amounts and may change for 2023. Geisinger Gold Secure Rx (HMO D-SNP) will provide updated rates as soon as they are released. In 2022, you pay (2023 info not available yet) \$1,556 for each benefit period: \$0 for days 1-20, \$194.50 per day for days 21-100, days 101 and beyond: You pay all costs. Part A deductible does apply.</p> <p>If you are eligible for Medicare cost sharing assistance under Pennsylvania Medical Assistance (Medicaid), you pay \$0.</p>

Section 1.5 – Changes to Part D Prescription Drug Coverage

Changes to Our Drug List

Our list of covered drugs is called a Formulary or “Drug List.” A copy of our Drug List is in this envelope.

We made changes to our Drug List, including changes to the drugs we cover and changes to the restrictions that apply to our coverage for certain drugs. **Review the Drug List to make sure your drugs will be covered next year and to see if there will be any restrictions.**

Most of the changes in the Drug List are new for the beginning of each year. However, during the year, we might make other changes that are allowed by Medicare rules. For instance, we can immediately remove drugs considered unsafe by the FDA or withdrawn from the market by a product manufacturer. We update our online Drug List to provide the most up to date list of drugs.

If you are affected by a change in drug coverage at the beginning of the year or during the year, please review Chapter 5 of your Evidence of Coverage and talk to your doctor to find out your

options, such as asking for a temporary supply, applying for an exception and/or working to find a new drug. You can also contact Pharmacy Member Services for more information.

Changes to Prescription Drug Costs

Note: If you are in a program that helps pay for your drugs (“Extra Help”), **the information about costs for Part D prescription drugs may not apply to you.** We sent you a separate insert, called the “Evidence of Coverage Rider for People Who Get Extra Help Paying for Prescription Drugs” (also called the “Low Income Subsidy Rider” or the “LIS Rider”), which tells you about your drug costs. If you receive “Extra Help” and you haven’t received this insert by September 30, 2022, please call Member Services and ask for the “LIS Rider.”

There are four “drug payment stages.” The information below shows the changes to the first two stages – the Yearly Deductible Stage and the Initial Coverage Stage. (Most members do not reach the other two stages – the Coverage Gap Stage or the Catastrophic Coverage Stage.)

Changes to the Deductible Stage

Stage	2022 (this year)	2023 (next year)
<p>Stage 1: Yearly Deductible Stage</p> <p>During this stage, you pay the full cost of your Part D drugs until you have reached the yearly deductible.</p>	<p>Your deductible amount is either \$0 or \$480, depending on the level of “Extra Help” you receive. (Look at the separate insert, the “LIS Rider,” for your deductible amount.)</p>	<p>Your deductible amount is either \$0 or \$505, depending on the level of “Extra Help” you receive. (Look at the separate insert, the “LIS Rider,” for your deductible amount.)</p>

Changes to Your Cost Sharing in the Initial Coverage Stage

Stage	2022 (this year)	2023 (next year)
<p>Stage 2: Initial Coverage Stage Once you pay the yearly deductible, you move to the Initial Coverage Stage. During this stage, the plan pays its share of the cost of your drugs, and you pay your share of the cost.</p> <p>The costs in this row are for a one-month (30-day) supply when you fill your prescription at a retail network pharmacy. For information about the costs for a long-term supply at a retail network pharmacy or for mail-order prescriptions, look in Chapter 6, Section 5 of your <i>Evidence of Coverage</i>.</p>	<p>You pay 25% Coinsurance during the Initial Coverage Stage for a one-month supply filled at a retail network pharmacy.</p> <p>*You pay \$0 if you receive “Extra Help”. Please refer to your LIS Rider.</p> <p>Once your total drug costs have reached \$7,050, you will move to the next stage (the Catastrophic Coverage Stage).</p>	<p>You pay 25% Coinsurance during the Initial Coverage Stage for a one-month supply filled at a retail network pharmacy.</p> <p>*You pay \$0 if you receive “Extra Help”. Please refer to your LIS Rider.</p> <p>Once your total drug costs have reached \$7,400, you will move to the next stage (the Catastrophic Coverage Stage).</p>

*Since you are enrolled in Geisinger Gold Secure Rx (HMO D-SNP), you are automatically enrolled in a program called “Value Based Insurance Design” VBID. Because you receive “Extra Help” from Medicare, this program removes any out-of-pocket cost on your Part D prescription drug benefit, and you pay nothing for your prescriptions. **NOTE: The Value Based Insurance Design program is not applicable to any prescription drugs you might receive under your Pennsylvania Medical Assistance (Medicaid) benefit.**

Important Message About What You Pay for Vaccines - Our plan covers most Part D vaccines at no cost to you. Call Member Services for more information.

SECTION 2 Administrative Changes

Description	2022 (this year)	2023 (next year)
Over the counter (OTC) member portal web address	myotccard.com	mybenefitscenter.com
Supplemental Dental Network Changes	Supplemental dental benefits, up to your plan's allowed benefit maximum, <i>must</i> be provided by a participating provider.	Supplemental dental benefits, up to your plan's allowed benefit maximum, <i>can</i> be provided by a participating provider <i>OR</i> any licensed dentist. For more information, see your new 2023 member ID card or contact Member Services.

SECTION 3 Deciding Which Plan to Choose

Section 3.1 – If you want to stay in Geisinger Gold Secure Rx (HMO D-SNP)

To stay in our plan, you don’t need to do anything. If you do not sign up for a different plan or change to Original Medicare by December 7, you will automatically be enrolled in our Geisinger Gold Secure Rx (HMO D-SNP)

Section 3.2 – If you want to change plans

We hope to keep you as a member next year but if you want to change plans for 2023 follow these steps:

Step 1: Learn about and compare your choices

- You can join a different Medicare health plan,
- -- *OR*-- You can change to Original Medicare. If you change to Original Medicare, you will need to decide whether to join a Medicare drug plan.

To learn more about Original Medicare and the different types of Medicare plans, use the Medicare Plan Finder (www.medicare.gov/plan-compare), read the *Medicare & You 2023* handbook, call your State Health Insurance Assistance Program (see Section 5), or call Medicare (see Section 7.2).

As a reminder, Geisinger Health Plan offers other Medicare health plans. These other plans may differ in coverage, monthly premiums, and cost-sharing amounts.

Step 2: Change your coverage

- To **change to a different Medicare health plan**, enroll in the new plan. You will automatically be disenrolled from Geisinger Gold Secure Rx (HMO D-SNP).
- To **change to Original Medicare with a prescription drug plan**, enroll in the new drug plan. You will automatically be disenrolled from Geisinger Gold Secure Rx (HMO D-SNP).
- To **change to Original Medicare without a prescription drug plan**, you must either:
 - Send us a written request to disenroll. Contact Member Services if you need more information on how to do so.
 - – *or* – Contact **Medicare**, at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week, and ask to be disenrolled. TTY users should call 1-877-486-2048.

If you switch to Original Medicare and do **not** enroll in a separate Medicare prescription drug plan, Medicare may enroll you in a drug plan unless you have opted out of automatic enrollment.

SECTION 4 Changing Plans

If you want to change to a different plan or to Original Medicare for next year, you can do it from **October 15 until December 7**. The change will take effect on January 1, 2023.

Are there other times of the year to make a change?

In certain situations, changes are also allowed at other times of the year. Examples include people with Medicaid, those who get “Extra Help” paying for their drugs, those who have or are leaving employer coverage, and those who move out of the service area.

If you enrolled in a Medicare Advantage plan for January 1, 2023, and don’t like your plan choice, you can switch to another Medicare health plan (either with or without Medicare prescription drug coverage) or switch to Original Medicare (either with or without Medicare prescription drug coverage) between January 1 and March 31, 2023.

If you recently moved into, currently live in, or just moved out of an institution (like a skilled nursing facility or long-term care hospital), you can change your Medicare coverage **at any time**. You can change to any other Medicare health plan (either with or without Medicare prescription

drug coverage) or switch to Original Medicare (either with or without a separate Medicare prescription drug plan) at any time.

SECTION 5 Programs That Offer Free Counseling about Medicare and Medicaid

The State Health Insurance Assistance Program (SHIP) is an independent government program with trained counselors in every state. In Pennsylvania, the SHIP is called Pennsylvania Medicare Education and Decision Insight (PA MEDI).

It is a state program that gets money from the Federal government to give **free** local health insurance counseling to people with Medicare. PA MEDI counselors can help you with your Medicare questions or problems. They can help you understand your Medicare plan choices and answer questions about switching plans. You can call PA MEDI at 1-800-783-7067. You can learn more about PA MEDI by visiting their website at www.aging.pa.gov/aging-services/medicare-counseling/Pages/default.aspx

For questions about your Pennsylvania Medical Assistance (Medicaid) benefits, contact your Community HealthChoices (CHC) Plan. See Section 7.3 of this document. Ask how joining another plan or returning to Original Medicare affects how you get your Pennsylvania Medical Assistance (Medicaid) coverage.

SECTION 6 Programs That Help Pay for Prescription Drugs

You may qualify for help paying for prescription drugs. Below we list different kinds of help:

- **“Extra Help” from Medicare.** Because you have Medicaid, you are already enrolled in “Extra Help,” also called the Low Income Subsidy. “Extra Help” pays some of your prescription drug premiums, annual deductibles and coinsurance. Because you qualify, you do not have a coverage gap or late enrollment penalty. If you have questions about “Extra Help”, call:
 - 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048, 24 hours a day/7 days a week;
 - The Social Security Office at 1-800-772-1213 between 8 am and 7 pm, Monday through Friday for a representative. Automated messages are available 24 hours a day. TTY users should call, 1-800-325-0778; or
 - Your State Medicaid Office (applications).
- **Help from your state’s pharmaceutical assistance program.** Pennsylvania has a program called PACE and PACENET that helps people pay for prescription drugs based on their financial need, age, or medical condition. To learn more about the program, check with your State Health Insurance Assistance Program.
- **Prescription Cost-sharing Assistance for Persons with HIV/AIDS.** The AIDS Drug Assistance Program (ADAP) helps ensure that ADAP-eligible individuals living with

HIV/AIDS have access to life-saving HIV medications. Individuals must meet certain criteria, including proof of State residence and HIV status, low income as defined by the State, and uninsured/under-insured status. Medicare Part D prescription drugs that are also covered by ADAP qualify for prescription cost-sharing assistance through the Special Pharmaceutical Benefits Program (SPBP). For information on eligibility criteria, covered drugs, or how to enroll in the program, please call 1-800-922-9384. If you are currently enrolled in an ADAP, it can continue to provide you with Medicare Part D prescription cost-sharing assistance for drugs on the ADAP formulary. In order to be sure you continue receiving this assistance, please notify your local ADAP enrollment worker of any changes in your Medicare Part D plan name or policy number. For information please call the State Pharmaceutical Benefit Program (SPBP) customer service at 1-800-922-9384. For information on eligibility criteria, covered drugs, or how to enroll in the program, please call the State Pharmaceutical Benefits Program (SPBP) Customer Service number at 1-800-922-9384 or send questions to <https://www.health.pa.gov/topics/programs/HIV/Pages/Special-Pharmaceutical-Benefits.aspx>.

SECTION 7 Questions?

Section 7.1 – Getting Help from Geisinger Gold Secure Rx (HMO D-SNP)

Questions? We are here to help. Please contact our Member Services number at 1-800-498-9731 or Pharmacy Member Services at 1-800-988-4861 for additional information. TTY users should 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 and speaking). Calls to these numbers are free.

Our business hours:

October 1– March 31	8 a.m. – 8 p.m. 7 days a week
April 1 – September 30	8 a.m. – 8 p.m. Monday – Friday, 8 a.m. – 2 p.m. Saturday

Read your 2023 Evidence of Coverage (it has details about next year's benefits and costs)

This *Annual Notice of Changes* gives you a summary of changes in your benefits and costs for 2023. For details, look in the *2023 Evidence of Coverage* for Geisinger Gold Secure Rx (HMO D-SNP). The *Evidence of Coverage* is the legal, detailed description of your plan benefits. It explains your rights and the rules you need to follow to get covered services and prescription drugs. A copy of the *Evidence of Coverage* is located on our website at www.GeisingerGold.com. You may also call Member Services to ask us to mail you an *Evidence of Coverage*.

Visit our Website

You can also visit our website at www.GeisingerGold.com. As a reminder, our website has the most up-to-date information about our provider network (*Provider Directory*) and our list of covered drugs (Formulary/Drug List).

Section 7.2 – Getting Help from Medicare

To get information directly from Medicare:

Call 1-800-MEDICARE (1-800-633-4227)

You can call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

Visit the Medicare Website

Visit the Medicare website (www.medicare.gov). It has information about cost, coverage, and quality Star Ratings to help you compare Medicare health plans in your area. To view the information about plans, go to www.medicare.gov/plan-compare.

Read *Medicare & You 2023*

Read the *Medicare & You 2023* handbook. Every fall, this booklet is mailed to people with Medicare. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare. If you don't have a copy of this document, you can get it at the Medicare website (<https://www.medicare.gov/Pubs/pdf/10050-medicare-and-you.pdf>) 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.

Section 7.3 – Getting Help from Pennsylvania Medical Assistance (Medicaid)

For questions about your Pennsylvania Medical Assistance (Medicaid) benefits, contact the PA CHC Helpline at 1-844-824-3655 (TTY: 1-833-254-0690) or your Community HealthChoices (CHC) Plan at:

CHC Plan	Website	Call	TTY
AmeriHealth Caritas Pennsylvania	http://www.amerihealthcaritaschc.com	1-855-235-5115	1-855-235-5112
Keystone First Community HealthChoices	http://www.keystonefirstchc.com	1-855-332-0729	1-855-235-4976
PA Health & Wellness	https://www.pahealthwellness.com	1-844-626-6813	1-844-349-8916
UPMC Community HealthChoices	https://www.upmchealthplan.com/chc/	1-844-833-0523	1-866-407-8762