

UVM Health Advantage

Created with You. Guided by Doctors.

2025 Medicare Plan Benefits Guide

Complete coverage for wherever you are in your health journey.

Discover a completely new kind of Medicare Advantage plan. UVM Health Advantage can help you live life to the fullest.

\$0 Preferred Generic Drugs

Part D prescription drug coverage makes it easy to manage your prescription needs and expenses. Tier 1 of the Formulary, Preferred Generic Drugs, covers commonly used generic medications at no additional cost.

Eyewear Allowance/ Routine Eye Exams

Coverage for routine eye exams with co-pays as low as \$0. You also get up to \$225 to use annually for any kind of eyewear, from glasses to prescription sunglasses to contact lenses.

NEW FOR 2025! One convenient card with two separate funds for Dental and OTC!

Flexible Dental Allowance

See any dentist you want and utilize a \$1,500 annual dental allowance. No claims and no network restrictions.



Your plan includes a quarterly allowance to use on over-the-counter medicine and health-related purchases. Order online, through mail order or shop at participating retailers.

Hearing Aid Allowance/Routine Hearing Exams

Hearing exams from an in-network provider are covered in full. Your hearing benefit covers up to two hearing aids per year at low co-payments, or you can apply an allowance to a broader catalogue of hearing aids.



Take advantage of free rides to and from your medical, dental or even your local pharmacy appointments. Ride share, medical sedan and wheelchair van options available.

Look inside for additional plan details.

UVM HEALTH ADVANTAGE Benefits at a Glance

UVM HEALTH ADVANTAGE SELECT (PPO)

\$0

IN \$0 co-pay | **OUT** \$5 co-pay

IN \$35 co-pay | **OUT** \$50 co-pay

IN \$20 co-pay individual service; IN \$10 co-pay group services

\$0 co-pay

IN Only \$7,900/IN and OUT Combined \$9,000

Monthly Premium

Doctor Visits (IN=In-network providers, OUT=Out-of-network providers)

Primary Care Specialist

Mental Health Specialist

Gia[®] Virtual Care Services

Emergency Care Worldwide Coverage

Emergency Room Care	\$110 co-pay
Urgently Needed Care	\$40 co-pay
Ambulance (Ground)	\$300 co-pay

Out-of-Network Coverage

Non-Urgent/Non-Emergency Services/Admissions Up to \$50 co-pay for office visits, 40% co-insurance for other

Hospital, Surgery, Rehabilitation Services Covers skilled nursing facility care.

IN \$375 per day for days 1–3, then \$0 per day for days 4+ OUT \$500 per day for days 1–5, then \$0 per day for days 6+
IN \$325 OUT \$400 co-pay
IN \$325 OUT \$400 co-pay
IN \$225 OUT \$325 co-pay
IN \$30 co-pay OUT \$50 co-pay
apply.
IN \$35 co-pay OUT \$35 co-pay
IN \$200 co-pay OUT 40% co-insurance
IN \$0 OUT 40% co-insurance
\$1,500 annual dental allowance. See any dental provider.
\$699 or \$999 per hearing aid OR get up to \$600 per hearing aid toward your choice of top models; batteries included!
IN and OUT \$0 co-pay, \$225 per year
\$50 allowance per quarter
12 free rides to and from medical appointments

Transportation (60 mile max per ride)

Maximum Out-of-Pocket Protection¹

¹The most you pay for covered medical services in a calendar year, excluding Part D drug costs. If you reach the maximum amount, MVP pays 100% of the cost of covered services, including Part B drugs, through December 31.

Part D Prescription Drugs

The Medicare Part D Formulary lists the drugs your plan covers. Generic and brand-name drugs are sorted into 'Tiers' with varying costs for generic, brand, preferred or specialty drugs.

After your deductible is met, you pay your cost-share for covered prescription drugs. Your cost for a 30-day supply from a participating retail pharmacy is below. Or save money using the CVS Caremark Mail Service Pharmacy. A threemonth supply of many prescriptions is available for only two co-pays. Refer to the Medicare Part D Formulary for details.

TIER 1	
TIER 2	
TIER 3	
TIER 4	
TIER 5	

The most you pay for covered prescriptions in 2025 is **\$2,000**. If your total drug costs reach **\$2,000**, you will pay nothing for covered prescriptions through December 31.

() Drugs purchased outside the United States are not Medicare-approved and are not covered.

*Members living with diabetes have extra support. Plan-covered insulin drugs are not subject to Part D deductibles and are covered at a maximum \$35 co-pay or the tier co-pay, whichever is less. OneTouch, FreeStyle, Precision, and Prodigy brand diabetic supplies are covered with a \$0 co-pay.

Scan the QR code with your smartphone to view the Formulary.

UVM HEALTH ADVANTAGE SELECT (PPO)

Deductible Stage

\$350 Deductible for Tiers 3-5*

Initial Coverage Stage

\$0 No Deductible

\$10 No Deductible

\$47 After Deductible

25% After Deductible

28% After Deductible

Part D Out-of-pocket Maximum

Benefits that focus on your health and well-being.

Live life to the fullest. UVM Health Advantage provides benefits to help you better manage your health, and reduce the likelihood of health challenges down the road.

SilverSneakers' Fitness

Enjoy a free SilverSneakers membership with your plan. Your membership includes a full library of on-demand videos and live online classes, so you can stay active from home or anywhere. Plus, gain access to thousands of participating gyms and fitness centers nationwide.

GetSetUp

GetSetUp from SilverSneakers offers virtual instructor-led classes where participants can learn new skills and connect with peers who share their interests. Hundreds of classes are available every week on a wide range of topics, including technology, cooking, travel, creativity and more.

MVP Living Well Classes and Activities

UVM Health Advantage offers innovative health and well-being programs throughout the year. Enjoy a mix of in-person and virtual classes on topics such as brain fitness, healthy eating, stress reduction, fall prevention and more. You even have access to tobacco cessation and nutritional counseling at no additional cost.

Be Well Rewards

Get rewarded for focusing on your health with the *Be Well Rewards*

program. Earn a \$100 reward card for seeing your doctor for an Annual Wellness Visit. This appointment helps you keep up with preventive screenings, and discuss any other health needs. Your Annual Wellness Visit is covered at no cost under your UVM Health Advantage plan.

Care Guides

Our expert Care Guides are your resource for personalized support with your UVM Health Advantage plan. They are available to help you understand your benefits, get the right care, and support you on your own personal health journey.



Questions?

UVM Health Advantage Plan Guides are here to help.

Get expert guidance and support.

Call 1-800-665-7924 (TTY 711) Visit UVMHealthAdvantage.com

Seven days a week, 8 a.m. – 8 p.m. Eastern Time April 1 – September 30, call Monday – Friday, 8 a.m. – 8 p.m.

MVP Health Care[®] offers UVM Health Advantage in the following counties in **New York State:** Clinton, Essex, Franklin, Hamilton and St. Lawrence.

Your Medicare Member Rights

MVP Health Care encourages members to learn about and exercise their rights and responsibilities, including timely access to covered services, privacy protections and the right to make decisions about health care. Visit mvphealthcare.com/privacy-notices and select Member Rights and Responsibilities, then Medicare Member Rights and Responsibilities. Or refer to Chapter 8 of your plan's Evidence of Coverage.

MVP Health Plan, Inc. complies with Federal civil rights laws. MVP Health Plan, Inc. does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex (including sexual orientation and gender identity).

ATTENTION: If you speak English, language assistance services are available to you free of charge, call 1-844-946-8010 (TTY 711).

注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電1-844-946-8010 (TTY 711).

MVP Health Plan, Inc. is an HMO-POS/ PPO organization with a Medicare contract. Enrollment in MVP Health Plan depends on contract renewal. Out-of-network/ non-contracted providers are under no obligation to treat MVP Health Plan 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. Other physicians/providers are available in the MVP Health Care network.

For accommodations of persons with special needs at meetings call, 1-800-665-7924 (TTY 711).

MVP virtual care services through Gia[•] are available at no cost-share for most members. In-person visits and referrals are subject to costshare per plan.

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