



Mass General Brigham
Health Plan

Medicare Advantage Product Training



Agenda

Welcome

Agenda: Medicare Advantage

Agenda: Plan Details
Agenda: Network

Agenda: Helpful Resources

Agenda: What to expect next

Q & A



Medicare Plans



Plan Membership Card

Mass General Brigham Health Plan | Mass General Brigham Advantage

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MedicareRx
Prescription Drug Coverage

RXBIN: XXXXXX
RXPCN: MEDDADV
RXGROUP: XXXXXX

IN-NETWORK
Primary Care/Specialist: \$XX/XX
Emergency Room: \$XXX

OUT-OF-NETWORK
Primary Care/Specialist: \$
Emergency Room: \$XXX

Other providers/pharmacies are included in our network.

Members
Customer Service: 855-833-3668 (TTY 711)
24/7 Nurse Advice Line: 866-772-5580
For plan information, sign in at member.mgbhealthplan.org
Mass General Brigham Health Plan
399 Revolution Drive, Suite 850, Somerville, MA 02145

Providers
Where to submit claims
Mass General Brigham Health Plan: 855-444-4647 | Payer ID: 04293
Optum Behavioral Health: 844-357-0946 | Payer ID: 87726
For more information, visit mgbhealthplan.org/claims
Pharmacy Help Desk: CVS Caremark | 866-693-4620

This card does not guarantee coverage. ID-17 (09/23)

Plan Membership Card

- Mass General Brigham Health Plan will issue new plan membership cards to **all** Mass General Brigham Advantage members.
- Plan membership cards will release mid-December.
- There will be no change to a member's plan membership card number.



Medicare plan enrollment periods

Initial Enrollment Period

A seven-month window where members can sign up for Medicare Parts A and B, as well as choose a Medicare Advantage plan. This period begins three months before members turn 65 and lasts until three months after their birthday month.

Annual Enrollment Period

October 15–December 7
Medicare beneficiaries have an open enrollment window to switch their Medicare plan for the following year.

Open Enrollment Period

January 1–March 31
Medicare Advantage plan members can make a one-time election to go to another Medicare Advantage plan or Original Medicare, and may add or drop Part D coverage at the same time.

Special Enrollment Period

In certain situations, members are eligible to enroll outside of the Annual Enrollment Period, for example, moving, or leaving an employer group health plan.



Plan Details



2025 Medicare Advantage quick plan compare

New for 2025

	<u>Advantage</u> \$0 PPO In network/out of network	<u>Advantage Secure</u> \$52 HMO-POS In network/out of network	<u>Advantage Premier</u> \$140 PPO In network/out of network	<u>Advantage Signature</u> \$299 PPO In network/out of network
Maximum out of pocket	\$5,500/\$9,500	\$3,350/\$7,000	\$3,150/\$5,450	\$0/\$0
PCP copays	\$0/\$20	\$0/\$20	\$0/\$10	\$0/\$0
Specialist copays	\$50/\$65	\$45/\$50	\$25/\$40	\$0/\$0
Inpatient cost share	\$350 days 1-5 / 30%	\$250 days 1-5 / 30%	\$150 days 1-3 / 20%	\$0
Outpatient surgery	\$0-\$300 / 40%	\$0-\$200 / 30%	\$0-\$125 / 20%	\$0
X-ray	\$15/40%	\$10/20%	\$0/\$10	\$0
Vision allowance	\$200	\$250	\$300	\$300
Dental benefit allowance	\$1,500	\$2,000	\$2,500	\$3,000
Over-the-counter (OTC) quarterly allowance	\$85	\$95	\$120	\$130
Transportation quarterly allowance	\$120	\$120	\$120	\$120 



Medical Product Overview – Skilled Nursing Facility

- Our plans do not require the three-day hospital stay that original Medicare requires
- We do follow the Medicare standard 100 days per benefit period

	Mass General Brigham Advantage Secure (HMO-POS)		Mass General Brigham Advantage (PPO)		Mass General Brigham Advantage Premier (PPO)	
	In-Network	Out of Network	In-Network	Out of Network	In-Network	Out of Network
Skilled Nursing Facility	\$0 copay per day days 1-20 \$160 copay per day days 21-44 \$0 copay per day days 45-100	30% coinsurance per admission	\$0 copay per day days 1-20 \$160 copay per day days 21-44 \$0 copay per day days 45-100	40% coinsurance per admission	\$0 copay per day days 1-20 \$160 copay per day days 21-44 \$0 copay per day days 45-100	20% coinsurance per admission



Medical Product Overview - Hospital services benefits



- Inpatient hospital and observation stays
- Inpatient mental health stays, including substance use disorder
- Emergency and urgent care coverage are covered worldwide

If member is moved to different levels of care, the member will only pay one co-pay. For example, if a member goes from emergency to observation to inpatient, member pays only their inpatient hospital co-pay (the level of care the member was in when discharged).



Mass General Brigham Advantage Health Plans Changes for 2025



Mass General Brigham Advantage (PPO) Benefit Changes

Benefit	2024 (CY)	2025 (CY)
Annual Maximum Out-of-Pocket (MOOP) In-network/Out-of-network	\$6,400/\$9,700	\$5,500/\$9,550
Dental Benefit Vendor	Liberty Dental Plan	DentaQuest Dental
Flexible Benefits Card (Fitness Benefit /Equipment, Prescription Hearing Aids, OTC, Transportation, & Weight Loss)	Reimbursement Process	Convey
Prescription Supply (Pharmacy or Mail Order)	90 Days	100 Days
Over-the-counter (OTC)	Web/Catalog	In-Store*/Web/Catalog
Wigs for Chemotherapy (\$350)	Not Covered	Covered
Specialist Copay	\$45 IN / \$65 OUT	\$50 IN / \$65 OUT
Inpatient Hospital & Mental Health	\$335 days 1 – 5 IN / 40% OUT	\$350 days 1 – 5 IN / 30% OUT
Inpatient Hospital & Mental Health & Skilled Nursing Facility (SNF)	40% OON	30% OON
Prescription Copay	\$0 / \$3 / \$37 / \$100 / 33%	\$0 / \$5 / \$47 / \$100 / 33%

IN = In-network providers, OUT = Out-of-network providers

*Flexible Benefits Card



Mass General Brigham Advantage Premier (PPO) Benefit Changes

Benefit	2024 (CY)	2025 (CY)
Dental Benefit Vendor	Liberty Dental Plan	DentaQuest Dental
Flexible Benefits Card (Fitness Benefit/Equipment, Prescription Hearing Aids, OTC, Transportation, & Weight Loss)	Reimbursement Process	Convey
Prescription Supply (Pharmacy or Mail Order)	90 Days	100 Days
Over-the-counter (OTC)	Web/Catalog	In-Store*/Web/Catalog
Wigs for Chemotherapy (\$350)	Not Covered	Covered
Specialist Copay	\$20 IN / \$40 OUT	\$25 IN / \$40 OUT
Inpatient Hospital & Mental Health	\$125 days 1 - 3 IN / 20% OUT	\$150 days 1 - 3 IN / 20% OUT
Prescription Copay	\$0 / \$3 / \$37 / \$100 / 33%	\$0 / \$5 / \$47 / \$100 / 33%



IN = In-network providers, OUT = Out-of-network providers

*Flexible Benefits Card



Mass General Brigham Advantage Secure (HMO-POS) Benefit Changes

Benefit	2024 (CY)	2025 (CY)
Dental Benefit Vendor	Liberty Dental Plan	DentaQuest Dental
Flexible Benefits Card (Fitness Benefit/ Equipment, Prescription Hearing Aids, OTC, Transportation, & Weight Loss)	Reimbursement Process	Convey
Prescription Supply (Pharmacy or Mail Order)	90 Days	100 Days
Over-the-counter (OTC)	Web/Catalog	In-Store*/Web/Catalog
Wigs for Chemotherapy (\$350)	Not Covered	Covered
Specialist Copay	\$40 IN / \$50 OUT	\$45 IN / \$50 OUT
Inpatient Hospital & Mental Health	\$230 days 1 – 5 IN / 30% OUT	\$250 days 1 – 5 IN / 30% OUT
Prescription Copay	\$0 / \$3 / \$37 / \$100 / 33%	\$0 / \$5 / \$47 / \$100 / 33%

IN = In-network providers, OUT = Out-of-network providers

*Flexible Benefits Card



NEW Mass General Brigham Advantage Signature (PPO)

Plan Details	
Monthly premium: (This is paid in addition to regular Part B premium.)	\$299
Doctor visits: Primary Care & Specialist	\$0 copay: IN and OUT
Emergency Care : Emergency care, urgent care, and emergency ambulance (ground transportation)	\$0 copay: IN and OUT
Hospital, surgery, and rehabilitation services: Inpatient hospital stays, outpatient hospital, outpatient physical, occupational, and speech therapy, and cardiac rehabilitation	\$0 copay : IN and OUT
Diagnostic Services: Outpatient X-ray (radiology) outpatient CT scans, PET scans, and MRIs, and lab	\$0 copay : IN and OUT
Plus more value	
Comprehensive dental services allowance / preventive services	\$3,000/ \$0 copay
Hearing aids / routine hearing exam	\$699-\$999 copay per hearing aid per year / \$0 copay



IN = In-network providers, OUT = Out-of-network providers



NEW Mass General Brigham Advantage Signature (PPO)

Plan Details (cont.)	
Plus more value (cont.)	
Eyewear allowance / routine eye exam	\$300 per year / \$0 copay
Fitness Benefit/Equipment, Prescription Hearing Aids, & Weight Loss combined allowance*	\$450 per year
Transportation allowance*	\$120 per quarter
Over-the-counter (In-Store*/Web/Catalog)	\$130 per quarter
Maximum out-of-pocket: This is the most you pay for covered medical services in a calendar year. If you reach the maximum amount, Mass General Brigham Health Plan pays 100% of the cost of covered services, including Part B drugs, through December 31.	\$0: IN and OUT
Prescription Copay (No deductible)	\$0 / \$5 / \$47 / \$100 / 33%

IN = In-network providers, OUT = Out-of-network providers

*Flexible Benefits Card



NEW Mass General Brigham Advantage Group (PPO)

Plan Details		
Deductible	\$0	
Out-of-Pocket Maximum	\$3,050 IN	\$7,000 OUT
Inpatient Hospital-Acute	\$50 per admission IN	20% OUT
Inpatient Hospital-Psychiatric	\$0 per admission IN	20% OUT
Skilled Nursing Facility (SNF)	\$0 up to 100 days IN	20% OUT
Cardiac and Pulmonary Rehabilitation Services	\$15 IN	\$15 OUT
Emergency Services	\$50 IN and OUT	
Urgently Needed Services	\$15 IN and OUT	
Worldwide Emergency/Urgent Coverage	\$50/\$15 IN and OUT	
Partial Hospitalization	\$0 IN	20% OUT



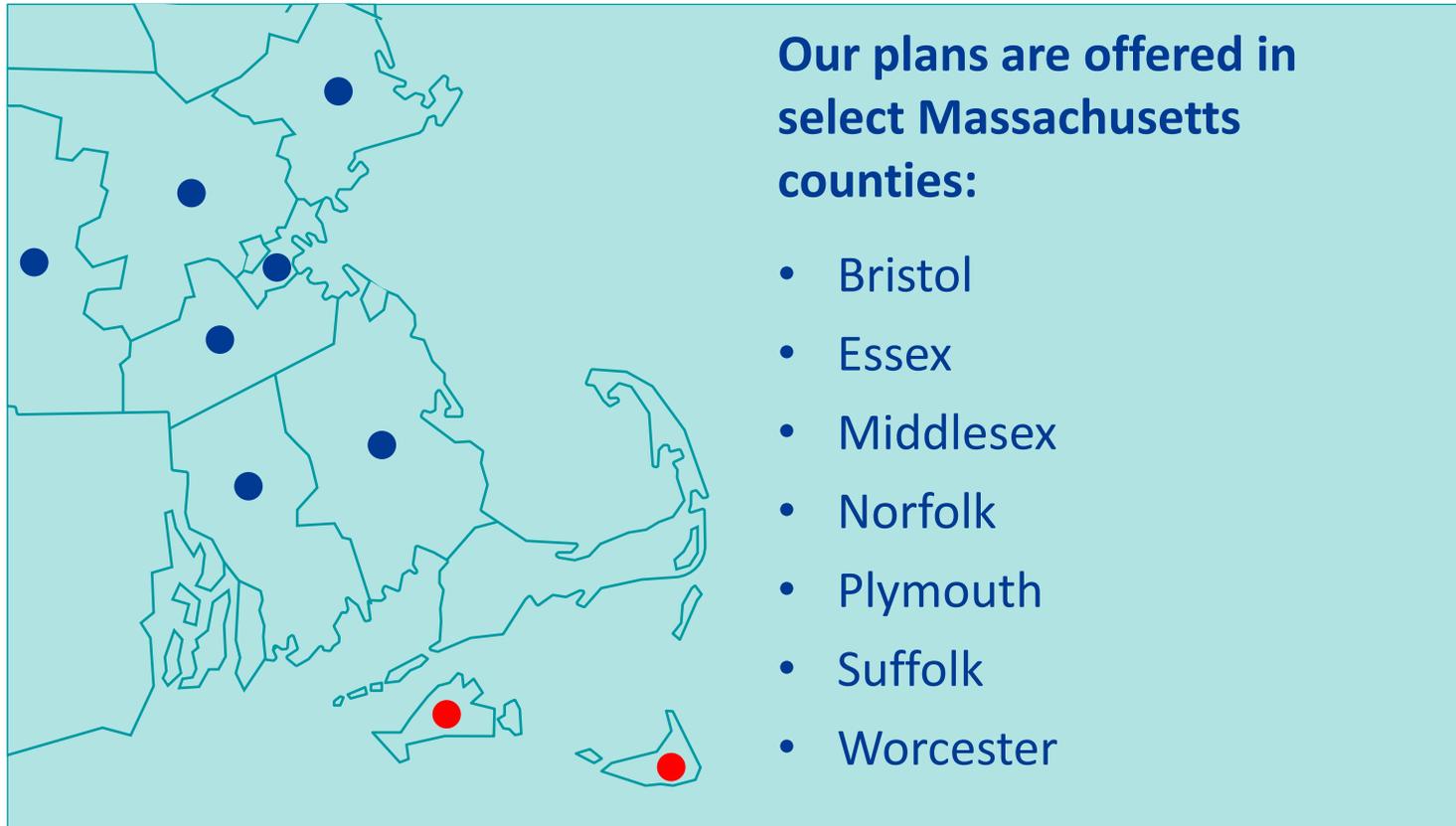
IN = In-network providers, OUT = Out-of-network providers



Network Information



Expansion of the Service Area



Expansion of the Service Area

- Dukes
- Nantucket



The Medicare Advantage Network Is Not the Same As The Full Commercial Network

This information is still evolving as the network team continues to add additional hospital systems for this product.

Please see a snapshot below of facilities included in the Medicare Advantage Provider Network:

- MGB Facilities
- UMASS*
- South Shore
- DFCI
- Heywood
- Signature Healthcare Brockton Hospital
- Athol Memorial Hospital
- Milford Regional Medical Center
- Emerson Hospital
- Lawrence General Hospital

*Hospital/SPC Only

Please reference the Medicare Advantage Provider Directory for the most up to date listing of providers within this network.



Medicare Advantage Provider Directory

For a complete listing of participating provider please use the Medicare Advantage Provider Directory [Home \(sapphirecareselect.com\)](https://sapphirecareselect.com)



English

Log In

Good Morning!

Browse or search to find the care you need.

Network
Mass General Brigham ...

City, state or zip
Boston, MA — 02108

Search for Names and Specialties



Browse by

Estimate Medical



Medical Care



Medicare Advantage Prior Authorizations and Notification Guidelines



Medicare Advantage Prior Authorizations and Notification Guidelines

Per CMS guidelines Authorizations for services may be required for Medicare Advantage members. For information regarding Medicare Advantage services that require prior authorization or notification for the Medicare Advantage Plan, go to [Authorization guidelines- Mass General Brigham Health Plan Health Partners](#) and click on View the Medicare Advantage prior authorization and notification guidelines [PA Grid Medicare Advantage](#).

Please note: Medicare Advantage members can see specialists without obtaining a referral from Mass General Brigham Health Plan.

Services that require referrals or authorizations

- Enter a code to check standard prior authorization requirements
- Log into the provider portal for member-specific information
- View a PDF of all services that require referrals, authorizations, or notifications
- **View the Medicare Advantage prior authorization and notification guidelines**
- View a PDF of durable medical equipment, medical supplies, oxygen related equipment, orthotics prosthetics and hearing aids that require prior authorization



“Mass General Brigham Health Plan Health Partners d/b/a Mass General Brigham Health Plan”



Well-being benefits and extras



Dental, hearing, vision, fitness, weight-loss and other supplemental benefits

Benefit	Vendor	MASS GENERAL BRIGHAM ADVANTAGE (PPO)	MASS GENERAL BRIGHAM ADVANTAGE SECURE (HMO-POS)	MASS GENERAL BRIGHAM ADVANTAGE PREMIER (PPO)
Routine and Comprehensive Dental	Liberty Dental	\$750	\$1,000	\$1,500
Routine Eye Exams and Eyewear	EyeMed	\$0 / \$200	\$0 / \$250	\$0 / \$300
Routine Hearing Exams and Hearing Aids	TruHearing	\$0 / \$699-\$999	\$0 / \$699-\$999	\$0 / \$699-\$999
OTC Drugs and Supplies	Convey Health Solutions	\$50/quarter	\$60/quarter	\$75/quarter
Post-Discharge Meals	Community Servings	Up to 10 meals per week for 2 weeks	Up to 10 meals per week for 2 weeks	Up to 10 meals per week for 2 weeks
Fitness Reimbursement	N/A	\$300	\$300	\$300
Weight Loss Reimbursement	N/A	\$150	\$150	\$150
Worldwide Emergency/Urgent/Ambulance	N/A	\$90/\$50/\$275	\$105/\$50/\$200	\$90/\$30/\$200
Annual Physical Exam	N/A	✓	✓	✓
Waiver of First 3 Pints of Blood Deductible	N/A	✓	✓	✓
Additional Inpatient Acute Days	N/A	✓	✓	✓

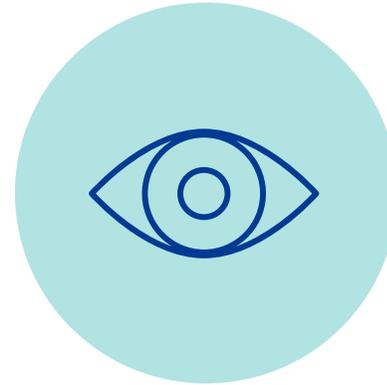


Additional Benefits Allowance



Dental:

- Mass General Brigham Advantage (PPO)
 - \$1,500 / \$0 copay
- Mass General Brigham Advantage Secure (HMO-POS)
 - \$2,000 / \$0 copay
- Mass General Brigham Advantage Premier (PPO)
 - \$2,500 / \$0 copay
- Mass General Brigham Advantage Signature (PPO)
 - \$3,000 / \$0 copay



Eye Exam & Eyewear:

- Mass General Brigham Advantage (PPO)
 - \$200 / \$0 copay
- Mass General Brigham Advantage Secure (HMO-POS)
 - \$250 / \$0 copay
- Mass General Brigham Advantage Premier (PPO)
 - \$300 / \$0 copay
- Mass General Brigham Advantage Signature (PPO)
 - \$300 / \$0 copay



Additional Benefits Allowance

New for 2025 Covered by Flexible Benefits Card



Over-the-counter purchases

- Mass General Brigham Advantage (PPO) **\$85** per quarter
- Mass General Brigham Advantage Secure (HMO-POS) **\$95** per quarter
- Mass General Brigham Advantage Premier (PPO) **\$120** per quarter
- Mass General Brigham Advantage Signature (PPO) **\$130** per quarter

Fitness, weight loss, and prescription hearing aid combined allowance

\$450 per year

Transportation allowance

\$120 per quarter



Well-being benefits and extras



FREE meal delivery
after an eligible inpatient hospital admission. Receive up to 20 refrigerated meals delivered to member homes.



TruHearing hearing aids—
save thousands of dollars on high-quality hearing aids.



Assistance we can provide to your patients turning 65

Our Medicare advisors can be a resource, providing critical information about traditional Medicare, the process of enrolling in Medicare, and our Mass General Brigham Advantage product information for people turning 65.

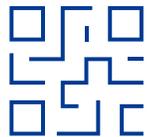


Support. We're available to host on-site Medicare 101 info sessions with patients, helping to navigate their choices, including pointing them to resources on **medicare.gov**.

- Monthly scheduled info sessions
- Info tables where advisors are available on specific days/times of the week to answer your questions about Medicare and our plans



Training. We can provide your office team an easy info session for who to call when patients are turning 65 or looking for a new coverage option.



Resources. We'll make it easy for patients to learn more with QR codes to informative web pages, info sheets, and additional signage in waiting room.



Confidential: for internal audiences only

Care Management

The goal of the Mass General Brigham Health Plan care managers is to educate members and make sure they have the support they need when navigating their health concerns.

Care managers provide the following support:

- Educate members about their discharge plan
- Ensure members understand the discharge plan
- Inform members about their prescriptions and why they need them
- Help members set up follow up appointments with PCP/Specialist
- Check in to see if the member has issues caring for themselves at home
- Look at the members social aspect to determine their needs.

The Care Management program also have specialized case managers on the team like Nutritionists and rehab specialists that members can talk with directly about their care.

Contact Care Management with referrals:

healthplancaremanagement@mgb.org

Connect with our Tobacco-Cessation Specialist:

HealthPlanQuitSmoking@mgb.org

Learn more:

MGBHP.org/providers/care-management



Care Guides and 24/7 support for members

With every Mass General Brigham Health Medicare Advantage plan, members have access to a Care Guide.

Care Guides offer 1:1 direct support and help members:

- Understand their benefits
- Find in-network providers
- Get the right care—including special resources and programs.

In addition, all plans include a 24/7 clinical advice line and on-demand virtual care services:

- **Clinical advice line:** Speak with a registered nurse about any healthcare concerns.
- **On-demand virtual care:** Urgent care services for minor illnesses and injuries.



Part D prescription drug coverage



NEW Medicare Prescription Payment Plan

The Medicare Prescription Payment Plan, originally called “copay smoothing” is part of the Inflation Reduction Act (IRA) that was signed into law in August of 2022. The IRA includes a wide range of provisions for clean energy, tax revenues, and healthcare costs.

The Medicare Prescription Payment Plan requires Medicare Part D plans to provide their members the option to pay for Part D prescriptions through monthly payments to their plan instead of paying at the pharmacy starting January 1, 2025.



While the IRA contains other provisions aimed at lowering prescription drug costs, the Medicare Prescription Payment Plan does not change the amount that members pay for their prescriptions.



NEW Medicare Prescription Payment Plan

All Part D members are eligible to participate in Medicare Prescription Payment Plan.



No Out-of-Pocket Minimums



No Credit Checks



No Income Requirements



NEW Medicare Prescription Payment Plan

Terminology

CMS requested the plan avoid the term “enrollment” for Medicare Prescription Payment Plan.

Part D Plan

- Members enroll in and are disenrolled from *their Part D plan*.

Medicare Prescription Payment Plan

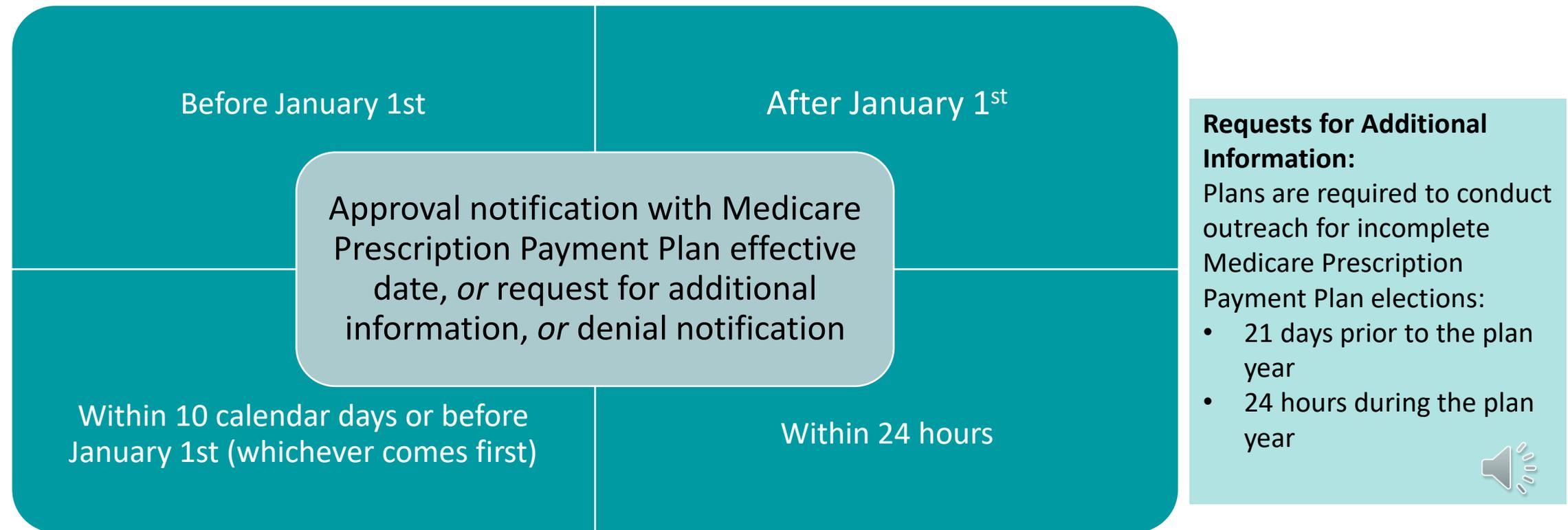
- Members elect, join, participate, opt-in, opt-out, and are removed or terminated from *the Medicare Prescription Payment Plan program*.



NEW Medicare Prescription Payment Plan

Acceptance of Member Medicare Prescription Payment Plan Elections

Available by phone, mail, or web starting October 15, 2024



Where members get prescriptions

- Many drugs are available through the CVS/Caremark Mail Service Pharmacy
 - Members pay only two co-pays for a 90-day supply of prescriptions (get a three-month supply for the price of two!)
- Part D prescription drugs are available at participating pharmacies, such as:
 - CVS
 - Rite Aid
 - Costco
 - Hannaford
 - Walgreens
 - Walmart
 - Wegmans
 - And others



Part D benefit structure

	MASS GENERAL BRIGHAM ADVANTAGE (PPO)	MASS GENERAL BRIGHAM ADVANTAGE SECURE (HMO-POS)	MASS GENERAL BRIGHAM ADVANTAGE PREMIER (PPO)
Deductible	\$275 Tiers 3-5	\$200 Tiers 3-5	No Deductible
Tier 1 Preferred Generics (includes low-cost generics and adherence generics)	\$0	\$0	\$0
Tier 2 Generics (lower cost generics)	\$3	\$3	\$3
Tier 3 Preferred brand (includes mid-cost generics)	\$37	\$37	\$37
Tier 4 Non-Preferred Drugs (includes higher cost generics)	\$100	\$100	\$100
Tier 5 Specialty Tier (high-cost generics and brands)	28%	29%	33%



Financial assistance and Medicare savings programs

Extra Help, Low Income Subsidy (LIS)

This program can assist with prescription drug costs and premiums for Medicare-eligible members who meet specific federal income requirements.

To check qualification status, call:

- Social Security Administration
1-800-772-1213 (TTY: 1-800-325-0778)
- Medicare at 1-800-MEDICARE
(1-800-633-4227) (TTY: 1-877-486-2048)
24 hours a day, 7 days a week

State Pharmaceutical Assistance Programs

These programs provide individuals enrolled in a Medicare Part D plan with help paying for monthly plan premiums and drug co-pays.

Prescription Advantage

P.O. Box 15153

Worcester, MA 01615-0153

1-800-243-4636

Monday – Friday , 9:00 AM – 5:00 PM



Helpful Provider Resources

Medicare Advantage Member landing page- [About our Medicare Advantage plans | Mass General Brigham Health Plan \(massgeneralbrighamadvantage.org\)](#)

Medicare Advantage Provider FAQ - [Medicare Advantage FAQ for Providers \(Mass General Brigham Health Planhealthpartners.org\)](#)

Medicare Advantage Prior Auth Grid- [PA Grid MA.pdf \(massgeneralbrighamhealthplan.org\)](#)

Provider Manual- [view the Medicare Advantage Provider Manual](#)

Medicare Advantage Provider Directory - [View the 2025 provider directory](#)



Thank you!

