



Get *More Than*
Original Medicare

2022

Benefit Highlights



COMMUNITY HEALTH PLAN
of Washington™

The power of community

MEDICARE ADVANTAGE

Important questions to ask when choosing your Medicare Advantage plan.



What costs should I expect for my coverage?

It's important to know how much you will pay out of your own pocket for things such as monthly premiums, cost-sharing on health care services, and prescription drugs.

Does the plan cover any services that Original Medicare does not?

Many Medicare Advantage plans offer extra benefits like hearing, vision, dental, fitness, and prescription drug coverage.

Will I be able to keep my doctors?

You'll want to know whether the doctor you want to see or the hospital you need to go to are in the plan's network. Call us or visit our website to view our network of providers at medicare.chpw.org.

What about drug coverage?

Remember, Original Medicare does not cover prescription drugs. You can get drug coverage either through a Medicare Advantage plan or through a separate Part D plan.

Your preventive care is our focus.
We cover 100% of the following services:



When you choose a CHPW Medicare Advantage Plan, you choose a statewide network of thousands of primary care doctors and specialists and 100+ hospitals. You get access to the services you need when and where you need them. Our plans vary by county. To enroll you must reside in our service area.

† Benefits shown are in-network and administered by VSP. You have a number of options for frames and basic lenses within this benefit amount.

* All cost sharing on this plan, including premiums, medical, and prescription drug costs, is based upon your level of Medicaid eligibility. If you are enrolled with the State or another plan for Medicaid benefits, Community Health Plan of Washington (CHPW) will help you resolve any billing issues. If you have full Dual status your doctor cannot bill you for cost sharing covered under your Medicaid benefits. Your doctor must accept our plan payment as payment-in-full or bill the correct Medicaid source.

** Your monthly plan premium of \$40.40 is paid for as long as you qualify for 100% Low Income Subsidy ("Extra Help").

CHPW MA Plan/Benefit	Dual Plan* (HMO SNP)
Monthly Premium	\$0**
Out-of-Pocket Maximum	\$7,550
Part A Inpatient Hospital	\$0 or 20%
Outpatient Hospital Observation	\$0 or 20%
Part B Deductible	Without full Medicaid cost-share assistance, deductible of \$203 applies. This amount changes every year.
Primary Care/Telehealth (per visit)	\$0 or 20%
Mental Health (per visit)	\$0 or 20%
Specialist Care/Telehealth (per visit)	\$0 or 20%
Medicare-covered Lab Services	\$0 or 20%
Urgent Care (per visit)	\$0 or 20%; \$65 limit
Emergency Care (per visit)	\$0 or 20%; \$90 limit
Outpatient X-Rays	\$0 or 20%
Ambulance (per service)	\$0 or 20%
Diabetic Supplies	\$0 or 20%
Vision Exams and Hardware [†]	\$0 copay – up to 1 routine eye exam per year, \$400 plan coverage limit every two years for hardware
Dental Services	\$0 copay for supplemental preventive and comprehensive services combined, up to \$4,500 per year
Alternative Medicine	\$0 copay for 12 visits/year for acupuncture, naturopathy, non-Medicare chiropractic combined
Fitness Program	Fitness kit, gym membership
Meals Post-Discharge	2 meals/day for 14 days upon discharge from hospital or SNF
Over-the-Counter Products	Up to \$350 benefit for health related products every quarter
Hearing Aids, Exams and Fittings	Up to \$1,700 plan benefit limit every year; \$0 copay for exam and fitting
Transportation	Up to 75 one-way trips every calendar year
Part D Deductible	\$0
Part D Prescription	Generic Drugs: \$0 to \$3.95 Brand Drugs: \$0 to \$9.85

How can you enroll?



By Phone

A licensed Community Health Plan of Washington (CHPW) Medicare Advantage (MA) expert will be happy to help you apply over the phone. Call **1-800-944-1247** (TTY Relay: Dial 711) between 8:00 a.m. and 8:00 p.m., 7 days a week.



Face-to-Face

Medicare can be difficult to tackle alone. If you prefer to meet face-to-face with one of our Medicare Advantage experts please call us to schedule a free appointment.



Online

Visit medicare.chpw.org to apply online. We make it easy to enroll online with a 6-step application.



By Mail

Simply complete the enrollment application and return it using the postage-paid orange envelope. If you do not already have an enrollment application, call us and we will be happy to help you with the application process.



By Video Meeting

Schedule a virtual appointment with a licensed CHPW Medicare Advantage expert via our website at medicare.chpw.org/reprs.

- Bone Mass Measurements
- Colorectal Screening Exams
- Immunizations
- Mammograms
- Pap Smears and Pelvic Exams
- Prostate Cancer Screenings

Having trouble choosing? Let us help.

We are your Medicare Advantage (MA) Experts.
Contact us at: **1-800-944-1247** (TTY: Dial 711)
between 8:00 a.m. and 8:00 p.m., 7 days a week.



Enrollment Questions:

1-800-944-1247

Customer Service Questions:

1-800-942-0247

TTY Relay:

Dial 711

8:00 a.m. to 8:00 p.m.

7 days a week

Web:

medicare.chpw.org

Mailing Address:

**Community Health Plan
of Washington**

**1111 3rd Ave, Suite 400
Seattle, WA 98101-3207**

Community Health Plan of Washington (CHPW) is an HMO plan with a Medicare contract and a contract with the Washington State Medicaid program. Enrollment in Community Health Plan of Washington depends on contract renewal. Benefits, formulary, pharmacy network, premium and/or copayments/coinsurance may change on January 1, 2023. Limitations, copayments, and restrictions may apply. Individuals must have both Part A and Part B to enroll. You must continue to pay your Medicare Part B premium unless covered by Washington DSHS. The benefit information provided herein is a brief summary, not a complete description of benefits.

Attention: This information is also available for free in alternative formats such as Braille, large print, or audio. Call 1-800-942-0247 (TTY: 711).

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-942-0247 (TTY:711).

注意：如果您使用中文，您可以免費獲得語言援助服務。請致電 1-800-942-0247 (TTY: 711)。

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-942-0247 (TTY: 711).