

The Advantage

A NEWSLETTER FOR OUR MEMBERS | ISSUE 4 | 2022



Proud to be the only 5-star Medicare plans of their kind in Maine and New Hampshire for 2023! See page 2 for details.



MARTIN'S POINT[®]
MEDICARE ADVANTAGE PLANS

GENERATIONS ADVANTAGE

In this edition:

- 5 Stars Earned in Maine and New Hampshire for 2023!
- Holiday Hosting on a Budget with Foodsmart™
- Outpatient Surgery for Safety and Savings
- Part D Formulary and Vaccine Savings



Proud to Be among the Few!

Dear Neighbor,

Every year during their Annual Enrollment Period, the Centers for Medicare and Medicaid Services (CMS) publish their Star Ratings to help seniors compare the quality and service of Medicare Advantage plans in their area. Ratings are based on measures of customer service, member experience, chronic conditions management, prescription services, how the plan helps members stay healthy, and more.

For 2023, Medicare rated over 507 Medicare Advantage contracts nationwide with only 57 earning their top rating. Our Martin’s Point Generations Advantage Prime (HMO-POS), Value Plus (HMO), Alliance (HMO), and Focus DC (HMO SNP) are the only HMO-style plans in Maine to earn Medicare’s highest rating and are the only 5-Star plans in New Hampshire. Our Select (LPPO) plan earned an excellent 4.5-Star rating.

We know you have many options for your Medicare coverage. As a local not-for-profit, we work hard to earn your continued membership, competing with national, for-profit insurance companies. We believe our commitment to put you and your health first is what makes Generations Advantage stand out from the rest.

With our great 5-Star news comes the comfort (and pride) of knowing you’ve made an excellent choice for your health plan! We look forward to delivering top-quality benefits and service to you now and for years to come.

Your Member Services Team

It’s Not Too Late for Your Flu Shot

Flu season usually peaks from December to February so, if you haven’t gotten your flu shot yet, now is the time. Yearly shots are recommended because immunity fades over time and the vaccine formula changes to fight the most common flu strains expected for each season.

The Center for Disease Control and Prevention (CDC) recommends yearly flu shots especially for those 65 years of age or older and those with chronic conditions like asthma, heart disease, diabetes, or weakened immune systems. Even if you do come down with the flu, having gotten the vaccine can help reduce your risk of severe illness, hospitalization, and death associated with flu.

In addition to getting vaccinated, make sure to cover your sneezes and coughs, wash your hands frequently, avoid sick people, and disinfect surfaces.

For more information, please visit: <https://www.cdc.gov/flu/prevent/flushot.htm>

Members get flu shots at *no cost!*

Go to MartinsPoint.org/Flu or call Member Services at 1-866-544-7504 (TTY: 711) to learn more.



Protect Yourself from COVID-19

To stay up to date with the latest COVID-19 information and vaccine/booster guidance, visit the US Centers for Disease Control and Prevention website at www.CDC.gov/Coronavirus. To find a vaccine location near you, visit your state’s COVID-19 website.

Prescription Drug Formulary and Brand-Name Drugs

Our drug formulary is a list of drugs that are covered by your health plan if your plan includes Part D Prescription Drug coverage. We review our Generations Advantage formulary regularly to make sure it is efficient, effective, and helps keep member costs as low as possible. You can search our formulary on our website at MartinsPoint.org/PartD.

In some cases, we may decide to keep a brand-name medication on the formulary and

leave its generic form as a “non-formulary” medication (not covered). To receive the formulary brand-name medication, your prescriber must specify “brand medically necessary” on the prescription to ensure you receive the formulary medication rather than the non-formulary, generic medication at the pharmacy. The table below is a current list of medications where the brand-name version is preferred over the generic.*

| Formulary Brand-Name Medication (“brand medically necessary” required on Rx) | Non-formulary Generic Medication*** (not covered) |
|---|--|
| Advair Diskus® | Wixela Inhub®, fluticasone propionate/salmeterol |
| Breo Ellipta® | fluticasone furoate/vilanterol |
| Combigan® eye drops | brimonidine/timolol |
| Flovent HFA® | fluticasone HFA |
| Mitigare® | colchicine capsules |
| Novolog® by Novo Nordisk** | insulin aspart |
| Restasis® eye emulsion | cyclosporine eye emulsion |
| Symbicort® | budesonide/formoterol |

*Subject to change at any time, always check the most current formulary for any changes.

**Select Insulin on Senior Savings Program Important Note: Insulins used in an insulin pump fall under the Medicare Part B medical benefit (not the Part D Prescription Drug benefit). Like all Part B medications, these insulins are subject to a 20% cost share for members.

***EXCEPTIONS: Under some circumstances, the plan allows you to get a “transition fill”—a one-time temporary fill (up to a 31-day supply)—of a noncovered medication without prior authorization from the plan. See Chapter 5 of your Evidence of Coverage for details. This transition fill allows time to find alternatives or request a formulary exception before your next fill. If an exception is approved, it would have a Tier 4 copay. To learn more, call Member Services at 1-866-544-7504 (TTY: 711).

New Law Affects Most Part D Vaccines

In August, President Biden signed the Inflation Reduction Act of 2022 into law. Part of that law goes into effect January 1, 2023, covering most Medicare Part D adult vaccines at no cost to members. As of 1/1/2023, our plans that include Part D Prescription Drug coverage will cover most Part D vaccines at no cost to you even if you haven’t paid any applicable Part D deductible.

Getting a vaccine at your doctor’s office: *You may be charged an office visit copay, if applicable.* You may also have to pay upfront for the vaccine and submit for reimbursement for the vaccine.

Getting the vaccine at a pharmacy: Some vaccines require a prescription from your doctor and/or a coverage determination from CVS Caremark (for example, tetanus vaccine). We recommend you check with your pharmacy to see if you need to schedule an appointment. Please see details below.

Common Vaccines Covered under Medicare Part B or Medicare Part D

| Vaccine | Name/ Type | Your Cost at Doctor’s Office* | Your Cost at a Pharmacy |
|------------------------------------|---|--|---|
| COVID-19 Medicare Part B | All COVID-19 Vaccines | Medicare covers COVID-19 vaccines for members with no out-of-pocket costs. Visit your state’s CDC website for vaccine locations. | |
| Flu (influenza) Medicare Part B | Quadrivalent Trivalent Intradermal High Dose | You pay \$0 for the vaccine. | |
| Pneumonia Medicare Part B | Pneumovax® Pprevnar 13® Pprevnar 20® | You pay \$0 for the vaccine. | You pay \$0. You must bring a prescription to pharmacy. |
| Shingles Medicare Part D | Shingrix® | You may have to pay full cost and submit to plan for 100% reimbursement for vaccine. Shingrix® requires two shots and two payments/reimbursements. | You pay \$0. You must bring a prescription to pharmacy. |
| TDAP Medicare Part D | Adacel® Boostrix® | You may have to pay full cost and submit to plan for 100% reimbursement for vaccine. | You pay \$0. You must bring a prescription to pharmacy. |

IMPORTANT: before you get any tetanus vaccine, your doctor or pharmacist must call CVS Caremark for a coverage determination.

| | | |
|--|--|---|
| Tetanus (preventive, NOT treatment of wound—Medicare Part D) | You may have to pay full cost and submit to plan for 100% reimbursement for vaccine. Coverage determination is required for reimbursement. | You pay \$0. You must bring a prescription to pharmacy. Coverage determination is required. |
| Tetanus (treatment of wound—Medicare Part B) | You pay 20% of the cost of the vaccine. | Not available at a pharmacy. |

*You will also pay any applicable office visit copay when you get your vaccine from your doctor.

Planning Cataract, Knee, or Hip Surgery?

An Outpatient Procedure May Be a Great Choice for Savings and Safety

Did you know? If you’re planning an upcoming surgery, you may have the option of having it performed as an “outpatient” procedure (often called “day surgery.”) These procedures can take place at an ambulatory surgery center (ASC) or a hospital, but the key is that you avoid the expense and inconvenience of an overnight, “inpatient” hospital stay.

The number of outpatient surgeries performed at ASCs and hospitals grows every year. For patients with a low risk for complications, common procedures—like cataract removal, as well as knee

and hip joint replacements—are safely performed without the need for an overnight hospital stay. In fact, for more than a decade, most cataract surgeries have been performed safely and conveniently in ASCs.¹

The American Association of Orthopaedic Surgeons has also reported that, for low-risk patients, outpatient procedures at ASCs and hospitals are as medically safe, more convenient, and less costly than an inpatient hospital stay for joint replacements and other musculoskeletal surgeries.²

If your doctor says you have a low risk for complications, you may want to discuss the

option of having outpatient surgery at an ASC or hospital. For the right patient and procedure, choosing to avoid an inpatient hospital stay can provide savings of several hundred dollars without sacrificing quality.

As always, you and your surgeon will determine the most appropriate surgery setting for you, with your Generations Advantage plan offering excellent coverage for all your options.

You can use the chart below to compare your costs (copays or coinsurance) under your 2023 Generations Advantage plan.

Benefits for your greatest adventures.

2023 Surgery Cost (Copay or Coinsurance) Comparison by Setting

| Plan Name | Ambulatory Surgery Center | Hospital (Outpatient) | Hospital (Inpatient)** |
|------------------------------|--|--|--|
| Prime (HMO-POS) | \$175 in network \$200 out of network | \$275 or \$325* in network \$400 out of network | \$375 or \$425* in network 40% out of network |
| Value Plus (HMO) | \$200 in network | \$275 in network | \$425 in network |
| Select (LPPO) | \$175 or \$200* in network 30% out of network | \$250 or \$275* in network 30% out of network | \$350 or \$385* in network 40% out of network |
| Alliance (HMO) | \$10 in network | \$275 in network | \$375 in network |
| Focus DC (HMO SNP) | \$175 in network | \$275 in network | \$375 in network |

*Copay varies by county. See your Evidence of Coverage document for details.
**Costs are per day for days 1-5. See your Evidence of Coverage document for details.
1 <https://jamanetwork.com/journals/jamaophthalmology/fullarticle/2664081>
2 <https://orthoinfo.aaos.org/en/treatment/outpatient-joint-replacement-surgery/>

Holiday Hosting on a Budget from Foodsmart™

*Do you love
hosting holiday
gatherings but
often overspend?*

Your free Foodsmart benefit can make menu planning, finding deals, and shopping on a budget as easy as 1, 2, 3.

*Download the Foodsmart app or go to MartinsPoint.Zipongo.com to set up a Foodsmart account on your computer. Your Sign-On Group is “Martin’s Point Generations Advantage.”

Use your Foodsmart app to:*

1

Create a set menu.

Then get the right amount of food. Find healthy recipes under ‘Budget Friendly Fare,’ or filter all recipes by your grocery budget.

2

Shop the discounts and opt for generic brands.

Use the ‘Deals’ feature to browse sales at your local grocery stores.

3

Avoid the grocery store madness.

Add selected items to your digital grocery list and check out for delivery or pickup.

Be a Full Partner in Your Care

Have you heard the term “health care advocacy”? It means becoming an active participant in driving your health care experience. It goes beyond taking medications and attending appointments. It involves speaking up for your own health—discussing your preferences, challenges, questions, and desires in a collaborative way with your doctor.

Examples of advocacy are:

- Coming to your visits with a notebook of questions or concerns
- Asking questions about a diagnosis or prescribed medication
- Letting your doctor know if you’re having any trouble affording your medications or other treatments
- Getting contact information for the specialist you are being referred to and a timeframe for when you should call their office to follow up

- Asking when you should get lab results back
- Following up on appointment availability

Advocacy takes a little more work but ensuring you receive the care you need is well worth the effort.



Remaining on Your Plan for 2023?

Relax and watch for your new 2023 member ID card in the mail!

If you’re not making changes to your plan selection for 2023, you don’t need to take any action—you’ll be automatically re-enrolled in your plan for next year.*

2023 Member ID Cards Coming

Watch for your new 2023 Generations Advantage member ID card in your mailbox in mid-late December. Please dispose of your old card and begin using your new card on January 1, 2023.

- **Please review your card and call us if there are errors.** We will send you a corrected card.
- **Always present this card at your doctors’ offices or hospital** as proof of your Generations Advantage coverage. (Do not present your red, white, and-blue Medicare card. Store this card in a safe place.)

- **When you go to the pharmacy on or after January 1,** make sure to present this new card (even if they have your information on file).

***All current Flex (RPPO) members and New Hampshire Value Plus (HMO) members MUST enroll in a new plan for 2023 or your coverage will revert to Original Medicare on January 1. Please call Member Services at 1-866-544-7504 (TTY: 711) for assistance.**



We're Here for You

As part of our Generations Advantage quality efforts, **health plan pharmacists may email or call you about ways to help** reduce barriers you may have to taking your medications, find possible cost savings, and ensure you are getting the most out of your medications.

Meet our Health Plan Pharmacists!



Lindsey Piirainen, PharmD, BCGP

Hometown: Oxford, ME

Favorite things to do: Surfing, snowboarding, mountain biking

Favorite thing about pharmacy:

“Medication therapies can be confusing; I like being able to help problem-solve to make members’ lives easier.”



Jennifer Soucy, PharmD, BCGP

Hometown: Biddeford, ME

Favorite things to do: Camping, going to the beach, hiking

Favorite thing about pharmacy:

“Helping to develop solutions if patients are having issues with their medications such as side effects or costs.”

Fast Facts: *Urinary Incontinence*

1 Urinary incontinence is not inevitable. Although older age is a risk factor and many people experience it, it is a treatable condition with many types. Speak with your doctor about your type and best treatment.

3 Cold weather can worsen urinary incontinence. One phenomenon known as “cold diuresis” causes increased urination as your body tries to keep your internal organs warm—bundle up this winter!

2 Kegels exercises are for men, too! Toning pelvic floor muscles, known as Kegels, can also help men who have overactive bladders, prostate issues, or certain surgeries that can cause incontinence. Visit the National Association for Continence website at www.nafc.org/kegel-exercises-for-men to learn how to perform these exercises.

4 Urinary incontinence increases your likelihood of having a fall. A study of 6049 women found that there was a 35% increased risk of falling if they experienced daily “urge incontinence” (the feeling that you need to urinate immediately).^{*} A toileting schedule can help avoid a rushed trip to the bathroom!

Did you know?

Incontinence supplies are available through your Generations Advantage CVS Over-the-Counter benefit. Learn more on our website at MartinsPoint.org/OTC.

^{*}Urge urinary incontinence was associated with increased risk of falls and non-spinal, non-traumatic fractures in older women. *Evidence-Based Nursing* 2001;4:26.

To Contact Generations Advantage:

Member Services (for current members):
1-866-544-7504 (TTY: 711)

Call us 8 am–8 pm, seven days a week from October 1 to March 31; and Monday through Friday the rest of the year.

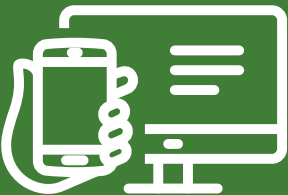
Interested in becoming a member?
Please call:
1-888-640-4423 (TTY: 711)

Generations Advantage Website:
MartinsPoint.org/MedicareMember

Material presented in this newsletter is not intended to replace your health care provider’s medical advice. Every year, Medicare evaluates plans based on a 5-star rating system. Generations Advantage 2023 Overall Ratings: 5 out of 5 Stars for HMO Contract H5591; 4.5 out of 5 Stars for LPPO Contract H1365. Visit www.Medicare.gov for more information. Martin’s Point Generations Advantage is a health plan with a Medicare contract offering HMO, HMO-POS, HMO SNP, and local PPO products. Enrollment in a Martin’s Point Generations Advantage plan depends on contract renewal. Material presented in this newsletter is not intended to replace your health care provider’s medical advice. Martin’s Point Health Care complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

Try the Member Portal

The Generations Advantage Member Portal makes it easy to find the information you need and take the actions you want—all online!



- Update your Primary Care Provider (PCP)
- View the status of authorizations
- Request/print a replacement member ID card
- View/print claims
- Find a network provider or facility
- Pay plan premiums
- Find plan documents, benefits information, and much more

To set up a Member Portal account, click on the “Sign In” tab at the top right of the **MartinsPoint.org** website and register.



Do you have a friend who deserves 5-Star benefits like you have? Refer them!

Please let your friends and family know they can start enjoying the highest-quality Medicare benefits and service by joining one of our 5-Star plans right NOW—they don't have to wait to switch!

Ask them to call 1-866-544-7502.

Health and Wellness or Prevention Information



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Let's 'Stay' Physical this Winter

Staying active boosts physical and mental health and has been linked to better sleep and balance. It can also reduce stress and the risk of chronic conditions like diabetes, high blood pressure, and some cancers.

When winter brings shorter days, cold temperatures, and slippery conditions, it's time to find new ways to stay active. We recommend you **discuss with your doctor** what new activities are best for you.



Use Your Wellness Wallet to Help Stay Active!

Below are some reimbursable activities and gear:

- Attend a local gym or pool
- Go skiing/snowshoeing or bowling
- Use a treadmill/stationary bike at home
- Join an online exercise program
- Add crampons for safe winter walking

*The Wellness Wallet benefit reimburses up to your plan's annual amount. As we approach the end of the year, make sure to check your balance. Learn more at [MartinsPoint.org/Wellness Wallet](https://MartinsPoint.org/WellnessWallet).



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