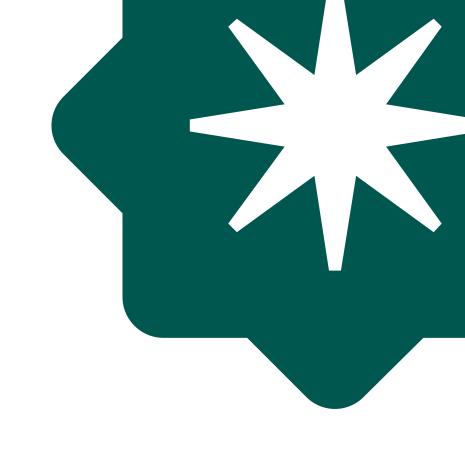


We're happy you're here.



And, we're here for you.

Our local Member Services team is here to answer your questions and offer help when you need it. Please don't hesitate to call if you have any questions at all. We're available 8am-8pm, every day from Oct. 1–Mar. 31 and weekdays from Apr. 1–Sep. 30.

1-866-544-7504 (TTY: 711)

Get off to a great start with these simple steps.

Please take these important actions within the first few weeks of your membership to help us serve you better.

1	Fill Out Important Forms
2	Get to Know Your Medicare Plan
3	Create Your Portal Account
4	Take Your Health Risk Assessment
5	Schedule Your 2025 Preventive CarePage 9

For a glossary see page 10.



First things first, let's talk about forms.

Please complete and return these forms promptly to help ensure the best experience when using your health plan.

Forms to return in the enclosed GREEN envelope:

Permission To Speak with Others
To let us discuss your health care with family or others, please complete and return the enclosed form as soon as possible with any power of attorney documentation.

✓ VA Health Coverage
If you also receive health benefits through the Veterans Administration, please fill out, sign, and return the enclosed VA Record Release form.

Form to return in the enclosed YELLOW envelope:

Continuity of Care Request

For those currently on an active course of treatment, "continuity of care" may help avoid care interruptions. Learn about eligibility and apply using the enclosed form.

Form to return in the enclosed CVS envelope:

Mail-Order Prescriptions

If your plan includes Part D

Prescription Drug coverage and you would like to receive your prescription by mail, please fill out the enclosed CVS Caremark Mail-Order form and mail to CVS.

Additional Actions

Other Health Insurance
If you have other health insurance,
please respond to the letter we send
or call Member Services as soon as
possible so we can coordinate your
benefits correctly.

☐ Premium Autopay
 If your plan has a monthly premium,
 you can set up automatic recurring
 payments. Go to MartinsPoint.org/
 WelcomeGA and complete the
 Automatic Payment Form or call

Member Services for help.

2

Get to know your Medicare plan.

Read over these enclosed documents to understand your benefits and take full advantage of your coverage.

Evidence of Coverage (EOC)

This booklet includes your plan's covered services and benefits, our obligations, and your rights and responsibilities.

Prescription Drug Formulary

If you chose a plan with Part D Prescription Drug coverage, this is a list of the medications covered by your plan.

Provider Network List

Find the current list of in-network providers and facilities on our website.

Extra Benefits

Review the Extra Benefits Guide enclosed in this packet.

Your Member ID Card

This card is mailed separately.

Please watch for it in your mailbox.

Always keep your Generations Advantage member identification card with you. In most cases, you will present ONLY this card when receiving health care services (including at the pharmacy if your plan covers Part D prescriptions). You will rarely need to present your red, white, and blue Medicare card.

Find up-to-date drug formularies, provider directories, and plan documents on our website or call Member Services.

MartinsPoint.org/WelcomeGA

Take care of business through our member portal.

Set up your online member portal account to:



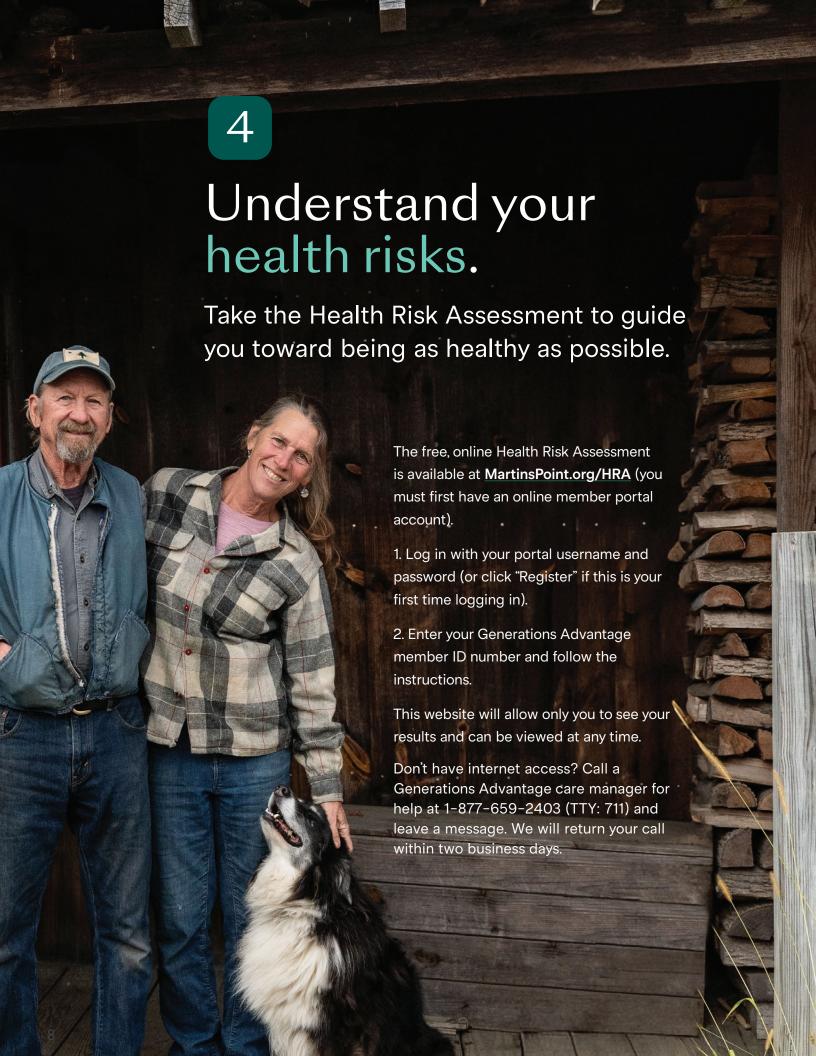


- Update Your Primary
 Care Provider (PCP)

 Make One-Time Plan
 Premium Payments
- Request a Member ID Card
- Access CVS Caremark
 Medication Explanations of Benefits (EOBs)

Sign up for the portal after the effective date listed on your member ID card.

MartinsPoint.org/MyAccount





Protect your health the easy way.

Schedule these two preventive care visits in the same appointment and avoid an extra trip to the doctor.

Annual Physical Exam

A hands-on examination to check your overall physical and mental health.



Medicare Annual Wellness Visit

A conversation to discuss your health goals, needed preventive screenings, vaccines, and more.



Comprehensive Visit

One, longer visit where you receive both these annual preventive services.

Your plan covers both of these in-network preventive services at a \$0 copay. Separate copays may apply if additional services are provided during your visit.



Learn about the coverage and costs for various vaccines at MartinsPoint.org/VaccinesGA

Glossary of Terms

Coinsurance: When you and your insurance plan share the cost of care based on a percentage. For example, a plan might pay 80% of the cost for a service and you pay the remaining 20%. Percentages vary by plan and service.

Copayment (Copay): When you and your insurance plan share costs based on a flat dollar amount that you pay. For example, at an office visit or a pharmacy, you may be asked to pay a \$10 or \$20 "copay" or other flat fee.

Deductible: The amount you must pay each year for health care or prescriptions before your insurance begins to share costs with you. *Generations Advantage plans do not include hospital or medical deductibles.*

Drug Formulary: A list of covered medications selected by Martin's Point Generations Advantage with health care providers. It includes essential drugs for quality treatment. Drugs on this list are generally covered if medically necessary, filled at a network pharmacy, and other plan rules are followed.

Maximum Out-of-Pocket: The total amount that you will have to pay "out-of-pocket" each year for hospital and medical copays and coinsurances before your insurance will start paying 100% of these costs for covered services.

NOTE: Monthly premiums and prescription drug costs are not included when figuring out-of-pocket costs.

Network: A set of health care providers who are contracted to provide health care services to patients with a particular health insurance plan. *The Generations Advantage network includes over 15,000 providers.*

Premium: The amount you pay to the government or to an insurance company each month/quarter in order to have health or prescription drug coverage.

Our Notice of Privacy Practices is available on our website at MartinsPoint.org/PrivacyGA. You may request a paper copy by calling Member Services.

Martin's Point

Martin's Point Generations Advantage is a health plan with a Medicare contract offering HMO, HMO-POS, and Local PPO products. Enrollment in a Martin's Point Generations Advantage plan depends on contract renewal. 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.

Martin's Point Health Care:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact the Martin's Point Generations Advantage Member Services Team.

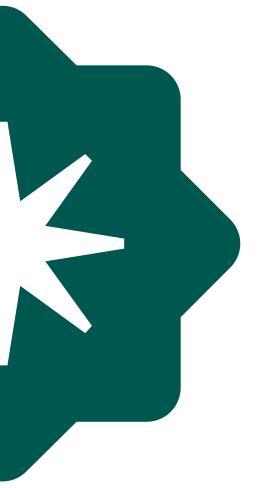
If you believe that Martin's Point Health Care has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with Member Services: Member Services. Martin's Point Generations Advantage, PO Box 9746, Portland, ME 04104, 1-866-544-7504, TTY: 711, Fax: 207-828-7847. (We're available 8 am-8 pm, seven days a week from October 1 to March 31; and Monday through Friday the rest of the year.) You can file a grievance in person, by mail, or by fax. If you need help filing a grievance, the Martin's Point Generations Advantage Member Services Team is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at ocrportal.hhs.gov/ocr/ portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201 1–800–368–1019 (TDD: 1–800– 537–7697)

Complaint forms are available at www.hhs. gov/ocr/office/file/index.html.

Resources and Requests





***** 24-Hour Nurse Line

Do you need to speak to a nurse about a health problem? The free 24-hour nurse line is available to you at all times. Call 1-800-530-1021 (TTY: 711)



Find Out If You Qualify for **Financial Help**

Our partner, My Advocate™, works with plan members to see if they qualify for a Medicare Savings Program or Medicare Part D Extra Help. If you qualify, My Advocate can help you sign up for the programs. There is no cost to you.

Contact My Advocate directly at 1-866-274-0369 (TTY: 1-855-368-9643). They're available Monday through Friday, 9 am-6 pm. Or visit their website at MyAdvocateHelps.com.



* How Are We Doing?

Please go to MartinsPoint.org/Survey and use our survey to tell us about your Martin's Point experience. Thank you!



Refer Friends and Family

Know someone who deserves the highest-quality Medicare benefits and service available in Maine and New Hampshire? Please ask them to call 1-833-436-0770 (TTY: 711).