

Medicare Advantage Plan  
**2024 Benefit Highlights**

**Better  
Medicare for**



**SCAN Balance**  
(HMO C-SNP)

**SCAN Heart First**  
(HMO C-SNP)

**Riverside County**  
**San Bernardino County**

Plan Details	SCAN Balance	SCAN Heart First
Monthly Plan Premium	\$0	\$0
Annual Plan Deductible	\$0	\$0

Comprehensive Care	SCAN Balance	SCAN Heart First
Primary Care Office Visits	\$0	\$0
Specialist Office Visits	\$0	\$0
Diabetic Self-Management Training	\$0	\$0
Diabetic Supplies (lancets, test strips, monitor)	\$0	\$0
Annual Physical Exam	\$0	\$0
Preventive Services (Medicare-covered screenings)	\$0	\$0
Lab Services and X-rays	\$0	\$0
Diagnostic Tests and Procedures	\$0	\$0
Outpatient Rehabilitation (e.g. PT, OT, ST)	\$0	\$0
Diagnostic Radiology (e.g. MRI, CT, ultrasound)	\$0	\$0
Durable Medical Equipment	\$0	\$0
Outpatient Mental Health (Individual/Group)	\$0–\$10	\$0–\$10

Hospital and Emergency Care	SCAN Balance	SCAN Heart First
Inpatient Hospital Care	\$0 (unlimited days)	\$0 (unlimited days)
Skilled Nursing Facility	\$0 per day (1–20) \$30 per day (21–100)	\$0 per day (1–20) \$30 per day (21–100)
Outpatient Surgery	\$0–\$50	\$0–\$50
Emergency Care	\$90 (worldwide) \$0 (if admitted immediately)	\$90 (worldwide) \$0 (if admitted immediately)
Urgent Care Services	\$0 (worldwide)	\$0 (worldwide)
Ambulance Services	\$200	\$200

Maximum Out-of-Pocket	SCAN Balance	SCAN Heart First
Annual Maximum Out-of-Pocket (MOOP)	\$399	\$399

Prescription Drug Coverage	SCAN Balance		SCAN Heart First	
	PREFERRED	STANDARD	PREFERRED	STANDARD
PHARMACY NETWORK				
Part D Deductible	\$0	\$0	\$0	\$0
Initial Coverage Stage – SCAN Contracted Retail Pharmacies (1-month/30-day supply)				
TIER 1: Preferred Generic	\$0	\$5	\$0	\$7
TIER 2: Generic	\$0	\$9	\$0	\$14
TIER 3: Preferred Brand	Insulin	\$0	\$25	\$35
	Other Drugs	\$30	\$35	\$47
TIER 4: Non-Preferred Drug	\$95	\$100	\$95	\$100
TIER 5: Specialty Tier	33%	33%	33%	33%
TIER 6: Select Care Drugs	\$0	\$0	\$0	\$0
Coverage Gap	Tiers 1 and 2	Tiers 1 and 2	Tiers 1 and 2	Tiers 1 and 2
	Tier 3 (insulin only)	Tier 3 (insulin only)	Tier 3 (insulin only)	Tier 3 (insulin only)

### Check out the BIG SAVINGS on your medications!

If you take Eliquis, Xarelto, Entresto, Januvia, Tradjenta, Jardiance, Farxiga, or other drugs on new Tier 6, SCAN is the Plan for you! With SCAN, you pay nothing for these drugs.\* In addition, you pay nothing for Tiers 1 and 2 at SCAN Preferred pharmacies.\*

\*The copay/coinsurance may vary by plan and may change during Coverage Gap.

Dental Services	SCAN Balance and SCAN Heart First	
	Embedded Dental	PPO Dental
Dental benefit with unlimited covered services. Coverage lasts all year long.	These dental services are included in your plan	\$42 monthly premium
<b>PREVENTIVE</b>		
Oral Exam & Cleaning (2 per year)	\$0	\$0
X-Ray (2 per year)	\$0	\$0
Deep Cleaning (4 quadrants per year)	\$0	\$0
<b>COMPREHENSIVE</b>		
Diagnostic (screenings, x-rays)	\$0-\$5	\$0-\$5
Restorative (fillings, crowns)	\$8-\$395	\$8-\$395
Endodontics (root canals)	\$5-\$395	\$5-\$395
Prosthodontics (tooth replacement/dentures)	\$13-\$395	\$13-\$395
<b>PLAN COVERAGE</b>		
Annual Maximum	No annual max	No max in-network; \$2,000 max out-of-network

# Included extras you get with SCAN

Core Extras	SCAN Balance	SCAN Heart First
<b>Vision Services</b> (routine)		
Eye exam	\$0 (1 every 12 months)	\$0 (1 every 12 months)
Coverage for eyewear	\$200 limit every year	\$250 limit every year
<b>Transportation</b> (routine)*	\$0 (34 one-way trips per year)	\$0 (34 one-way trips per year)
Non-medical**	16 of the 34 trips	16 of the 34 trips
<b>Acupuncture and Chiropractic Services</b> (routine)	\$0 per visit (30 visits/year combined)	\$0 per visit (30 visits/year combined)
<b>Hearing Services</b> (routine)		
Hearing aid copay	\$450-\$750 per aid/year	\$450-\$750 per aid/year
<b>SCAN Travel Assurance Kit</b>	Urgent or emergency care when outside of the U.S.	Urgent or emergency care when outside of the U.S.

Solutions for Virtual Care Access	SCAN Balance	SCAN Heart First
<b>Telehealth</b>		
Urgent Medical	\$0	\$0
Behavioral Health	\$0	\$0
<b>Nurse Advice Line</b>	\$0 (per phone visit)	\$0 (per phone visit)
<b>HEALTHtech+</b>	\$0 support line or home visit	\$0 support line or home visit
<b>Abridge Mobile App</b>	\$0 to capture care visits	\$0 to capture care visits

Solutions for Healthy Living	SCAN Balance	SCAN Heart First
<b>Health Club Membership</b>	\$0 (One Pass)	\$0 (One Pass)
<b>Over-the-Counter</b> (OTC)	\$100 allowance per quarter with rollover	\$75 allowance per quarter with rollover
<b>Fitbit™ Fitness Tracker with Fitbit Care powered by Google</b>	Covered	Covered
<b>Brain Fitness</b>	\$0 online brain games	\$0 online brain games

\*75-mile limit will apply to each one-way trip. \*\*Trips to: health club, grocery store, or senior center. This benefit is a part of a special supplemental program for the chronically ill. Not all members may qualify.

**SCAN is committed to offering the comprehensive and affordable care you need to stay at your healthiest.**

Please refer to your Summary of Benefits for more details about all the benefits and services you get with your Medicare Advantage Plan. If you have any questions, just call us. An authorized SCAN representative will be happy to help you.

**1-877-870-4867**  
**(TTY: 888-SCAN-TTY)**

October 1 to March 31:  
 8 a.m. to 8 p.m., 7 days a week  
 April 1 to September 30:  
 8 a.m. to 8 p.m., Monday through Friday



# About SCAN

SCAN has been keeping seniors healthy and independent for more than 45 years. With quality, low-cost benefits—plus award-winning service when you need it—you can count on SCAN to help you stay healthy, vibrant and connected for years to come.

## Solutions for Independence

For members who need a little more support at home, we're pleased to offer these special benefits.

### SCAN Returning to Home\* 1 2

Extra help at home after a hospital stay can mean all the difference in your recovery. SCAN is there for you with:

- \$0 personal in-home care visits (bathing/dressing, etc.) up to 60 hours per year – 4-hour minimum per visit
- \$0 home-delivered meals up to 28 days per year

### SCAN Home Advantage 1 2

As you age you want the confidence that your home can safely support your changing needs. SCAN provides you with a:

- \$0 cost in-home safety evaluation

### Emergency Response System 1 2

Personal emergency response system that enables members to remain at home, living safely and independently.

- \$0 (includes installation and monthly fees)

### Care Navigator, For You\* 2

If you need support using the healthcare system to your advantage, SCAN is here for you. With the Care Navigator, *For You* benefit, you'll have a dedicated care professional to answer your questions and find the right clinical and social resources to ensure you get the care you need to feel your best. And, depending on your needs and concerns, you may qualify for a geriatric assessment to tailor your services even more.

## Solutions for Togetherness

Life takes a toll on both mental and physical health. That's why SCAN is pleased to offer solutions that will help you get connected and improve your health.

### SCAN Learning Communities 1 2

Learning Communities brings like-minded people together for in-person health education classes to maintain good mental and physical health.

## Solutions for Caregivers

SCAN understands the critical role caregivers play — and the challenges they face. Solutions for Caregivers is for SCAN members who are caregivers themselves, or for the unpaid caregiver to a SCAN member.

### SCAN Respite Care Services\* 1 2

Providing a short-term break from the demands of caregiving, SCAN offers respite care for full-time, unpaid caregivers caring for SCAN members.

- Up to 40 hours per year (4-hour minimum per visit) in the member's home where the primary care giving takes place

### Care Coordination Sessions 1 2

This series of classes provides information, skills training and support for caregivers.

### Home-delivered Meals\* 1 2

Up to 28 days of home-delivered meals are available to members with chronic conditions.

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2 **SCAN Heart First**  
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\*Criteria and limitations apply.

# Contact a SCAN representative today



Call  
**1-877-870-4867**

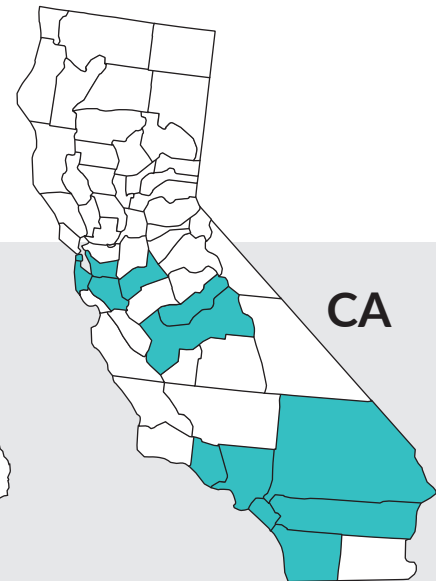
Or visit:  
**[www.scanhealthplan.com](http://www.scanhealthplan.com)**

## TTY users: 888-SCAN-TTY

October 1 to March 31  
8 am - 8 pm  
7 days a week

April 1 to September 30  
8 am - 8 pm  
Monday through Friday

## You can find us in:



SCAN Balance (HMO C-SNP) and SCAN Heart First (HMO C-SNP) are HMO plans with Medicare contracts. Enrollment in SCAN Health Plan depends on contract renewal. You must continue to pay your Medicare Part B premium.

You won't pay more than \$35 for a one-month supply and no more than \$105 for a three-month supply of each insulin product covered by our plan, no matter what cost-sharing tier it's on. Most adult Part D vaccines are covered by our plan at no cost to you. For more information, please refer to your "Drug List" (Formulary). If you have questions about the Drug List, you can also call Member Services. Prescription copay/coinsurance may vary by plan, county, pharmacy type (e.g., Preferred or Standard, etc.), day supply, Part D benefit phase, or in members who receive "Extra Help." You can fill your prescriptions at any of our network pharmacies, but you may pay less at a Preferred pharmacy. Check your Evidence of Coverage or call Member Services for details (phone numbers for Member Services are printed on the back cover of your Evidence of Coverage).

You can get prescription drugs shipped to your home through our network mail-order delivery program. Express Scripts Pharmacy<sup>SM</sup> is our Preferred mail-order pharmacy. While you can fill your prescription medications at any of our network mail-order pharmacies, you may pay less at the Preferred mail-order pharmacy. Typically, you should expect to receive your prescription drugs within 14 days from the time that Express Scripts mail-order pharmacy receives the order. If you do not receive your prescription drug(s) within this time, please contact SCAN Health Plan's Member Services. For your mail-order prescriptions, you have the option to sign up for an automatic refill program by contacting Express Scripts Pharmacy at 1-866-553-4125, 24 hours a day, 7 days a week. TTY users call 711. You may opt out of automatic deliveries at any time.