# Health Partners Medicare Living Well

**SPRING 2022** 



### **Thank You!**

Thank you for being a Health Partners Medicare member!

We are thrilled to be your partner in better health. Everyone at Health Partners Medicare and all our partners want to make sure you are getting the care you need.

As a member, you have access to many benefits and programs created to help you. This newsletter includes information about your benefits. More information can be found on our website, too. Just visit **HPPMedicare.com** to learn more.

We're so happy you picked Health Partners Medicare. Thank you again for being a member!

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## Health Partners •••• Medicare

The plan you need. The care you deserve.



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### **Member Resources**

Member Relations: 1-866-901-8000 (TTY 1-877-454-8477) available 24/7

Website: HPPMedicare.com

Social Media: 1 Health Partners Plans

Member Portal: HPPMedicare.com/portal **Newsletters:** HPPMedicare.com/newsletters

### How Do I....

#### Replace my ID card?

If you've misplaced your ID card, that's OK - we can help you get a new one! You can call Member Relations at 1-866-901-8000 (TTY 1-877-454-8477) and we'll order a new ID card for you. Member Relations representatives are available 24 hours a day, seven days a week.

You can also request a new ID card through HP Connect, the online member portal. Visit **HPPMedicare.com/portal** to access the portal.

#### Change my PCP?

If you'd like to change your primary care provider (PCP), we can help with that, too! Member Relations is here to help you find a new PCP.

Visit HPPMedicare.com/directory to see a full list of doctors and hospitals. You can search our online directory for PCPs near you.

#### See all my benefits?

A full explanation of your benefits is available online at **HPPMedicare.com/details**. Select your plan and you can review the Summary of Benefits and Evidence of Coverage documents, which have all the information you need about your benefits.

Health Partners Medicare is an HMO plan with Medicare and Pennsylvania State Medicaid program contracts. Enrollment in Health Partners Medicare depends on contract renewal.

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## **Benefits Corner**

## Swipe with Confidence: Using Your OTC Benefits

More benefits. More extras. Offering you convenience, choice and value through your OTC card.

During these challenging economic times, we know how important it is for you to maximize your budget. As a Health Partners Medicare member, you have access to eligible over-the counter (OTC) medicines and health related items. With the Health Partners Medicare OTC card, you can use your OTC card at many participating retail locations, including several independent pharmacies, and for home delivery.

Have you used your card this year? Do you know how to get the most bang out of our benefit? Let's learn more about this great extra benefit for all Health Partners Medicare members.

#### **How Your Benefit Works**

At the beginning of every calendar quarter, your OTC card is loaded with the quarterly OTC amount, according to your plan. This is done on January 1, April 1, July 1 and October 1.

Your balance does not carry over. This benefit is a use-it or lose-it benefit. Try to spend the full amount before the end of each quarter.

Don't throw out your card. Please keep your card. Your OTC card will remain active as long as you are a Health Partners Medicare member. You do not need to request a new one unless it is misplaced or lost.



#### **Easy Ways to Use Your OTC benefits**



#### In Person

You can use your OTC benefit at many of the stores you already shop in! Your OTC benefit is accepted at ACME, Giant Supermarkets, Rite Aid, CVS, Dollar General, Walgreens, Family Dollar and Walmart. You can choose from multiple brands at a price that fits your needs. Just present your OTC card at the register every time you make a purchase, and swipe with confidence!



#### **Online**

If you want to shop online, you can do that too! To shop online, go to **www.conveybenefits.com**. The first time you access the **Convey** website, you will need to create a username and password.



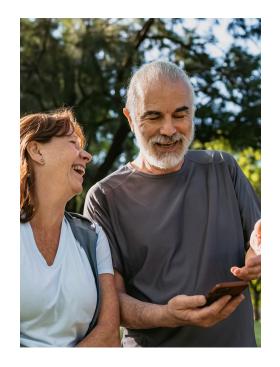
#### By Phone

You can shop by phone, too – now that's convenience! You can order OTC items over the phone by calling **Convey** at **1-855-858-5937 (TTY 711)**. Orders can be placed Monday through Friday, 8 a.m. - 11 p.m.

#### We Are Here to Help You!

Health Partners Medicare is here to help you if you have any questions about your OTC benefit. If you have any further questions, please call Member Relations at 1-866-901-8000 (TTY 1-877-454-8477). Our representatives are available 24 hours a day, 7 days a week.

Your quarterly OTC allowance can be used to purchase Medicare-approved OTC items from the catalog. OTC items may only be purchased for the enrollee, not family members or friends. Some OTC items may be covered through your Medicare Part B medical or Part D prescription drug coverage.





## **Spread the Word about Health Partners Medicare!**

Do you know a family member or friend that wants to learn more about Health Partners Medicare? Encourage them to call our friendly, licensed representatives at 1-833-477-4773 (TTY 1-877-454-8477) to learn about our Medicare Advantage plans.

## Get Stronger, Feel Happier and Have Fun with Friends!

Whether you're starting an exercise routine for the first time or looking to mix up your workouts, SilverSneakers® classes—virtual or in real life—have something for you. Here's more information about the exercise classes and the wide variety of options that are available to you as a Health Partners Medicare member.

#### You'll Get Fit and Make Friends

Even if you have not exercised in a while, you'll find strength and balance through SilverSneakers classes. You'll gain energy, improve your balance and find yourself with more friends! While most people don't join SilverSneakers to meet new friends specifically, friendships are what keep them coming back. In fact, 49 percent of active members say that they are motivated to continue exercising because they have met a new friend through a SilverSneakers activity.

#### **Your Instructors Have Your Back**

You'll encounter SilverSneakers instructors of all ages. Some have spent their entire careers in fitness. Others decided to become instructors in their 60s or 70s. But all SilverSneakers instructions have two things in common: they are trained in senior fitness, and they'll support you on your exercise journey.

SilverSneakers partners with over 16,000 fitness centers and gyms nationwide, and offers in-person and online classes, or an at-home fitness kit. With SilverSneakers, you're sure to find the right fitness program for you. To learn more about your SilverSneakers benefit, contact Member Relations at 1-866-901-8000 (TTY 1-877-454-8477) at any time.



### More Benefits for You - and No Cost!



#### **Transportation**

All members can use the transportation benefit for routine trips to medical, dental or vision appointments within our service area, as well as trips to innetwork pharmacies so you can pick up medications.

 Special: Unlimited one-way rides

• Prime: 50 one-way rides

• Complete: 22 one-way rides

To schedule a ride, call Health Partners Medicare's transportation line at 1-866-213-1681 (8 a.m.-5 p.m., Monday-Saturday). Please call at least two business days before you need a ride.



#### **Wellness Partners**

Wellness Partners is an HPP initiative that offers everyone a happier approach to a healthy lifestyle. Our Wellness Partners team hosts cooking demonstrations, fitness classes, life skills classes and more. Wellness Partners events are free and are open to the public. Bring a guest – there's enough wellness to go around! Visit hpplans.com/wellnesspartners or call Member Relations to learn more.



#### Teladoc®

Teladoc® is a phone and video service that connects you with board-certified doctors who can help you with many non-emergency medical conditions. Teladoc should be used when your doctor is not available. Teladoc is provided at no cost to you. Teladoc is not for emergencies and will not replace your doctor.

View all your benefits online at HPPMedicare.com/details. Our Member Relations team is also available to help you; just call 1-866-901-8000 (TTY 1-877-454 -8477) at any time.

## The Benefits of Mail Order Pharmacy

Medications only work if you take them, but it is also important to take them as directed. If you don't take your medications as intended, it could lead to your condition worsening or more visits to the doctor or hospital.

There are many ways to help you remember to take your medications, such as setting up refill reminders with your pharmacy, using pillboxes or blister packs, and switching from a 30-day supply to a 90-day supply of your medications. As a Health Partners Medicare member, you have the option to fill medications for 90-day supplies for eligible medications.



Continued on next page Benefits Corner

There's another benefit of filling medications for 90 days – **you save money!** You'll pay less when you switch to a 90-day supply of eligible medications compared to refilling every 30 days.

In addition, you can obtain these prescriptions through mail order pharmacy. Please note that some medications may not be available through mail order.

#### What is mail order?

Mail order pharmacy is a fast and convenient way to get the medications you need delivered right to your door. And it's included with your pharmacy benefits with Health Partners Medicare.

Health Partners Medicare relies on a single mail order pharmacy provider, CVS Caremark Mail Service Pharmacy, to better serve our members.

#### **Next Steps**

## Q: How can I get started with mail order pharmacy?

- A: To start filling by mail, you will need your prescriptions sent to CVS Caremark Mail Service Pharmacy.
- You can call your doctor and ask to have your prescriptions sent to CVS Caremark Mail Service Pharmacy electronically.

#### **OR**

 Request that CVS Caremark contact your doctor and get the process started for you.
 Visit caremark.com/mailservice or call or call 1-800-552-8159.

## Q: How long will it take to get my medication if I fill by mail?

A: Once CVS Caremark Mail Service Pharmacy receives your prescription for your medication, you can expect to get your medication in 7 to 10 business days.

#### Q: How do automatic refills work?

A: Once you start automatic refills for a medication you take regularly, CVS Caremark Mail Service Pharmacy will automatically mail your medication before your refill due date. If your prescription is out of refills, CVS Caremark Mail Service Pharmacy will contact your doctor to have it renewed.

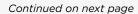
If you do have any questions or concerns about your medications, ask your doctor or pharmacist. They are there to help and can assist you with taking your medications. Understanding your medications is important in improving your health!

You may receive a call from a pharmacist on behalf of Health Partners Medicare to discuss your medications.

## Special Plan Members, Have You Completed Your HRA?

If you have not completed your yearly Health Risk Assessment (HRA), now is the perfect opportunity!

The HRA helps us learn more about your health and how we can better assist you. Plus, you may be eligible to earn Wellness Rewards!





#### There are two ways for you to complete the HRA:

- **1.** Over the phone by calling us toll-free at **1-855-748-3415 (TTY 711)**. Our HRA team is available Monday Friday from 8 a.m. to 8 p.m. and Saturday from 9 a.m. to 1 p.m.
- 2. Complete the HRA online. Just follow these easy steps:
  - a) Visit HPPMedicare.com/portal and click "Login"
  - b) Log into your account. If this is your first time logging in, you will need your member ID card to create a username and password.
  - c) Once you are logged in, click on "Health Survey (HRA)." You will see a pop-up to alert you that you are leaving the Member Portal, but this is OK.

- d) When the HRA loads, your contact information will appear. If any of this information has changed, please update it when completing the HRA.
- e) Once you have answered all the questions, click on "Submit" and you are finished.

Completing the HRA will not change your benefits or health care coverage with Health Partners Medicare in any way. We appreciate your cooperation with completing your Health Risk Assessment and allowing us to provide you with the best health care and service possible.

## You May Be Eligible for SNAP Food Benefits

At Health Partners Medicare, we know how important access to nutritious food is to your health. We want to provide you with important information about the **Supplemental Nutrition Assistance Program, also called SNAP**.

#### **SNAP** is for Older Adults

In Pennsylvania, SNAP provides help to low-income individuals and families. You can use SNAP dollars to buy:

- Fresh fruits and vegetables
- Dairy (milk, yogurt and eggs)
- Canned goods

- Meats, fish and poultry
- Packaged foods

• Bread

SNAP dollars are loaded onto an ACCESS card each month. It is used like a debit card. SNAP dollars cannot be used for pet food, alcohol or hot, prepared foods.

#### Who Qualifies for SNAP?

SNAP eligibility is based on income and family size. You can call the PA Department of Human Services Helpline, toll-free, at **1-800-692-7462** (1-800-451-5886 for individuals with hearing impairments) or your county assistance office for more information about qualifying for SNAP food benefits.

#### **Applying for SNAP**

Fill out the Simple SNAP application from the Department of Human Services if everyone in the household is age 60 or older or has a disability, purchases and prepares food together, and does not receive any earnings from work. You can also apply for SNAP by calling or visiting your county assistance office or filling out an application at www.compass.state.pa.us.

If you have questions, visit HPPMedicare.com/SNAP or call Member Relations anytime at 1-866-901-8000 (TTY 1-877-454-8477). We can help you connect with local food resources.

## **Your Voice Matters**

## **Healthcare 101: The CAHPS Survey**

Do you know what CAHPS is and why this important survey is sent out? Here's your guide to CAHPS – an important survey for Medicare beneficiaries like you!

#### **WHAT is CAHPS?**

The Medicare Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey tries to understand how members interact with doctors and health insurance plans.

This confidential survey asks about your experience with your doctor and other healthcare providers/services, as well as your insurance plan.

#### WHO receives the survey?

If you receive a survey, you're a lucky one! CAHPS is randomly sent to Medicare beneficiaries enrolled in a Medicare Advantage plan.

#### WHY does CAHPS ask about these topics?

CAHPS wants to answer an important question: are you satisfied with your health and your experiences with your doctors and healthcare company?

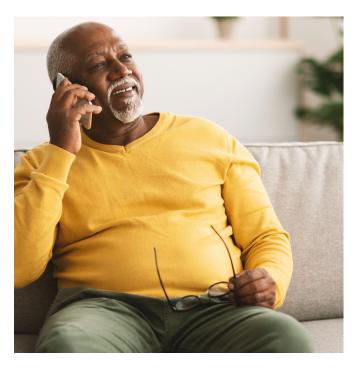


The information beneficiaries provide helps doctors and others in the healthcare system improve the critical aspects of your healthcare experience in the future.

#### What's In It for Me?

This is your chance to tell Health Partners Medicare how we can improve! Your opinion matters and your experiences are important to us. If you would like to take part in improving the quality of your healthcare, please complete the survey! Thank you for your help!

Please note that completing the CAHPS survey **will not** change your benefits or health care coverage with Health Partners Medicare in any way.



## Tell Us More About Your Experience

To help make sure you are satisfied with the care you're receiving, you may receive a 10-question phone survey asking about the health care services you received during a recent doctor's appointment.

Your answers will help HPP and your doctors improve your experience during future visits at your provider's office. This survey is voluntary and confidential. Your answers will not affect your health care coverage or your benefits in any way.

Please complete the phone survey entirely and honestly. It will only take about 5 minutes of your time. We're working hard to make sure you get the care and attention you deserve.

## **Healthy Living**

## Do You Have Bladder Control Concerns?

If you experience any urinary issues, you are not alone. More than 50% of individuals over the age of 65 experience urinary incontinence – or bladder leakage.

Two of the most common forms of bladder leakage can be caused by stress incontinence and urge incontinence (often called overactive bladder). The severity ranges from occasionally leaking urine when you cough or sneeze to having an urge to urinate that's so sudden and strong you are not able to get to a toilet in time.

The good news is that many bladder control issues can be treated. Your doctor understands the medical causes of bladder leakage and can help you find the right treatment. The next time you visit your doctor, talk about your concerns about bladder control. The sooner you talk about your health issues with your doctor, the less worry you will have about any bladder control issues you may be experiencing, and you'll have more time to live your life.

## Talk to your doctor about any issues you are having, including:

- How often you empty your bladder
- How many times you wake up at night to empty your bladder
- What prescription or over-the-counter medication you take
- How much caffeine, alcohol and other liquids you drink daily
- If you have any pain or burning when you urinate





## Help is Available if You're Struggling with Addiction

Thanks to innovations and new policies, access to doctors is more readily available to help people struggling with addiction.

To increase access for patients, many doctors and health care clinics have increased their telehealth capabilities during the pandemic. Ask your primary care providers (PCP) if they can offer treatment or refer you to another treatment program with telehealth options, such as online meetings or visits.

## If you or someone you care about is using alcohol or other substances, help is available:

Contact your PCP and ask about treatment. As a Health Partners
 Medicare member, you can visit a mental health or substance
 abuse provider through Magellan of PA. For help finding a mental

- health or substance abuse provider, please call Magellan of PA at 1-800-424-3704, 24 hours a day, seven days a week.
- Visit findtreatment.samhsa.gov to find virtual treatment and recovery programs.
- Get treatment for opioid addiction at a Centers of Excellence (COE). COEs are clinics that provide support and resources for people seeking services and treatment. Visit HPPMedicare.com/GetHelp.
- Medication-assisted treatment for alcohol or opioid use disorders may be an option. If you use tobacco, Health Partners Medicare covers nicotine replacement therapy (sometimes called NRT) for treatment for tobacco cessation. For more information about medication-assisted treatment and our tobacco cessation resources, call Member Relations at 1-866-901-8000 (TTY 1-877-454-8477).
- If you want to stop using tobacco, another option is the PA Free Quitline: 1-800-QUIT-NOW. This telephone-based tobacco cessation counseling service offers free coaching with no judgment. This program has a proven record of increasing your chances of staying smoke free for good.
- Take all your medicine as prescribed and continue your therapy, treatment and support appointments (in person or through telehealth services).
- Call the National Drug and Alcohol Treatment Referral Routing Service at 1-800-662-HELP to speak with someone about an alcohol or substance use problem.

### **Prevent Falls in Your Home**

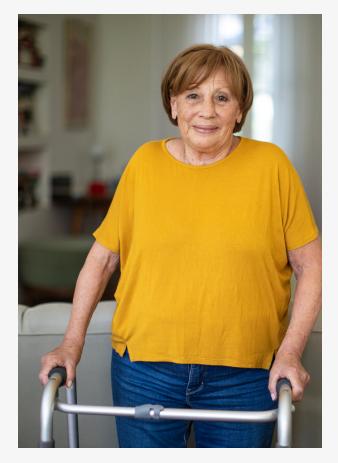
A fall can put you at risk for many types of injuries, such as broken bones and head and back injuries. You and your family can help prevent falls in your home by:

- Remove hazards (loose rugs, long cords, etc.) from common areas, such as your bedroom, living room and kitchen
- Store frequently used items in easy-to-reach places
- Remove clutter from common areas and don't store things on the floor
- Wear slip-resistant shoes
- Maintain an active lifestyle to keep muscles and joints flexible and limber

As a Health Partners Medicare member, you have access to fitness centers through the SilverSneakers network. These fitness centers have classes that can help you improve your balance and strength. Many classes are designed just for seniors.

#### **Talk to Your Doctors**

Talk to your doctors about all your medications. Your doctor can tell you more about the potential side effects of your prescription drugs and over the counter medications.



Always tell your doctor if you do fall while in your home. Tell your doctor when you fell, what you were doing when you fell and if you hurt yourself.

## If You've Been in The Hospital, Follow Up with Your Doctor

It is very important to follow up with your primary care provider (PCP) or your specialist after you've been hospitalized.

Try to call your PCP on the same day you are discharged to make a follow-up appointment. When you call your doctor's office, tell them you are making this appointment because you were recently discharged from the hospital and need a follow-up appointment.

Health Partners Medicare can help you make doctor's appointments. Call Member Relations anytime at 1-866-901-8000 (TTY 1-877-454-8477) to get help or to find a doctor near you.

#### **Get Your COVID Shot**

Have you been vaccinated against COVID-19? Your Health Partners Medicare benefits cover vaccinations. including COVID-19 vaccination. If you haven't been vaccinated, make a plan to get the shot as soon as you can! Visit vaccines.gov to find COVID-19 vaccine locations near you.



### Wellness and Health Care Planning

#### What you should know about Living Wills and Power of Attorney

Although it may be uncomfortable to think about, it is important to let your loved ones and health care providers know about the treatment you do or do not want to receive should you face a life-threatening illness. You have the right to ensure your wishes are followed through a legal document called an advance directive.

You do not need to be sick to create an advance directive. Having one before life-threatening conditions or health emergencies occur can help reduce confusion for you and your loved ones.

There are two types of advance directives: living will and health care power of attorney.

#### **Living Will**

This legal document spells out how you want your care to be handled if you are no longer able to make decisions for yourself. Your living will can include information on the use of dialysis and breathing machines, resuscitation efforts, feeding tubes and organ or tissue donation.

#### **Health Care Power of Attorney**

This document enables you to authorize someone to act as your agent to make decisions about your health care if you are unable to communicate your wishes. You can appoint anyone you wish to have power of attorney privileges, including a relative, friend or lawyer.

#### To help ensure your wishes are met

- You should give a copy of your advance directive to your primary care provider (PCP) and to the individual(s) you have named to make decisions for you in the event you cannot speak for yourself.
- Tell your care coordinator at Health Partners Medicare if you have an advance directive. We can note it in our system with your permission.

Call Member Relations at 1-866-901-8000 (TTY 1-877-454-8477) at any time or call your care coordinator if you would like us to mail you standard advance directive forms or if you want more details.

## **Just for Members**

## Important Information About Medical Assistance Health Care Coverage

HPP wants you to know that renewing Medical Assistance (Medicaid) eligibility will resume when the COVID-related public health emergency ends. When the public health emergency ends, the Department of Human Services (DHS) will begin re-evaluating each person's eligibility. People with Medicaid benefits could lose their coverage if they don't provide the information DHS needs to verify their income or residency.

The most important thing you can do is to ensure you receive your Medical Assistance renewal packet:

- **1.** Make sure your current address is on file with your County Assistance Office.
- 2. Notify your County Assistance Office if your address has changed. Having the correct address on file will ensure that you receive your renewal packet.

## We're Improving Your Online Experience

## Health Partners Medicare has exciting news for you – the online member portal is getting bigger and better!

Soon, you'll be able to do more with the member portal, including:

- Find providers and change your PCP
- Review your benefits

- View claims history
- Manage your contact information
- Interact with your care manager
- Access health education

We'll let you know more soon as we roll out the updates. We think this new online portal will improve your experience with HPP!

## Do You Know These Appointment Standards?

Providers in our network are given standards to meet for appointment availability and office wait times for their patients. Health Partners Plans (HPP) recognizes that emergencies happen. Providers need to treat very sick patients, which sometimes causes longer-than-expected wait times.

Type of Visit	Primary Care Provider (PCP)	Specialist
<b>Routine Office Visit</b>	Within 10 days	Within 10-15 days*
Routine Physical	Within 3 weeks	N/A
<b>Preventive Care Appointment</b>	Within 3 weeks	N/A
<b>Urgent Care Visit</b>	Within 24 hours	Within 24 hours
<b>Emergency Care</b>	Immediately	Immediately
In-Office Wait Time	30 minutes	30 minutes

<sup>\*</sup> requirements differ by specialty.

As a reminder, you can call Teladoc or go to urgent care centers and walk-in clinics if your doctor is not available right away. You can find a list of urgent care centers and walk-in clinics in our Provider Directory; you can search the online directory by going to **HPPMedicare.com/directory**. To learn more about Teladoc, flip to page 5.