



Going beyond what's required

to give you peace of mind



Portland Area (Clackamas, Multnomah, and Washington Counties)



Rewards for healthy actions!



Earn up to \$190 per year!

We think healthy behaviors should be rewarded. So we're pleased to offer members incentives for completing important preventive care activities.

Just complete one or more of the activities (right) and you'll receive a gift card redeemable at more than 100 popular retailers, such as

- Delta Air Lines
- Barnes & Noble
- Starbucks
- The Home Depot
- IHop®

- Best Buy
- Petco
- 1-800-Flowers
- and many more

\$0 copay services	Gift card reward	
Routine physical or annual wellness visit	\$50	
Mammogram	\$25	
A1c (blood glucose test)	First test \$15 Second test \$25	
Diabetic eye exam	\$25	
NEW!		
Flu shot	\$10	
DEXA bone density scan	\$20	
At-home colon cancer test or colonoscopy	\$20	

Why PacificSource?

We go beyond what's required to put members first.

Here's the thing: All health plans do what's required by law, and any Medicare Advantage plan will give you more coverage than Medicare alone. But as a not-for-profit since 1933, PacificSource goes above and beyond all of that.

With PacificSource Medicare, you can expect:



A plan that works closely with local providers to deliver the best possible care, experience, and cost. Together, we help make your healthcare easier and more effective.



Quality, affordable coverage, including \$0 copay preventive care, plus vision, hearing aids, and dental options.



Real, local people ready to help when you call— no automated phone trees or offshore call centers.



A broad network of highly rated doctors, hospitals, and specialists, with no referrals required.



No-cost programs that support your well-being, such as an extensive fitness program, over-the-counter drug reimbursement, and post-hospital meal delivery.

Support beyond healthcare

We go beyond what's required to support your health needs. If you're struggling with everyday challenges, such as food insecurity, housing, or transportation, our Member Support Specialists partner with providers and the community to find ways to help.

Giving back to our communities

PacificSource is right here in the community where we live and work. We offer support through financial aid and access to healthcare for diverse populations and those most in need.



Partnering for your best health, experience, and cost

With PacificSource Medicare, your provider network is more than a list of approved doctors. It's a unique, local partnership with a shared commitment to serve your individual healthcare needs.

How we work together for you:



- Improved coordination of care helps you prevent and manage chronic conditions
- Focus on high-value, effective treatments
- Use of data and technology to support high-quality, personalized care
- Providers rewarded based on value, quality outcomes, and patient experience, not volume

In-network hospitals and clinics in your state and beyond



Broad network access: All the facilities listed below, plus in-network coverage in each of our four states: Oregon, Washington, Idaho, and Montana.



Urgent care, emergency care, and ambulance service is covered worldwide with in-network copays.

Oregon

















Find more in-network providers at Medicare.PacificSource.com.

Idaho

St. Luke's Health Partners

Montana



Washington



Legacy Health, OHSU, and other providers working for you



In addition to other highly rated providers noted above, our partnerships with Legacy Health and OHSU Health give you access to hundreds of choices for your healthcare.



- Six Medical Centers: Legacy Salmon Creek Legacy Good Samaritan Legacy Meridian Park Legacy Emanuel Legacy Mount Hood Legacy Silverton
- 3,000 in-network providers at 63 primary care clinics and 150 specialty care locations
- 18 urgent care centers, including Legacy-GoHealth Urgent Care, 20 laboratories, and 10 imaging centers
- Legacy Cancer Institute is among the nation's top cancer programs, accredited by the American College of Surgeons, Commission on Cancer



- 3,000+ OHSU Health system providers
- The No. 1 Oregon hospital, OHSU Hospital,* partnering with Adventist Health Portland, and OHSU Health Hillsboro Medical Center
- Specialties ranked in the top 50* nationally: Cancer; ear, nose, and throat; gastroenterology; geriatrics; neurology, and more
- Specialties ranked high-performing* nationally: Cardiology, ophthalmology and urology
- Virtual and in-person visits for primary, same-day, and specialty care

^{*} U.S. News and World Report's "Best Hospitals 2021-2022"

2022 PacificSource Medicare Advantage plan at a glance

IVI	y Gaile In
	In-netv
highlights	You p
y premium	\$0
deductible	\$0
are office visit	\$0
t (referrals not required)	\$30
hospital care \$3	380/day (1–5),
ent surgery	\$23
, DEXA, and mammogram	\$0
/ Other diagnostic lab	\$0 / \$
T & Nuclear / MRI & PET	\$235 / \$
cal therapy	\$30
nd and air, worldwide)	\$32
cy (worldwide)	\$90
re (worldwide)	\$40
-pocket maximum	\$4,9!
benefits	You p
led dental	Preventi
e 5 for details)	Comprehens
o to \$190 in gift cards cover for details)	Includ
rimary care and specialists	Same cost as
nsitional & chronic care	\$0
opathy and non-Medicare-	\$25
	mit 12 visits/ye
m, once every 2 years	\$0
eyeglasses every 2 years	\$200 reimbu
nearing exam	\$0
(see page 8 for details)	Starting a
vith fitness tracker option	\$0
(see page 9 for details)	\$0
cription drugs	Includ

MyCare™ Rx 40 (HM0)				
In-network				
You pay:				
\$0				
\$0				
\$0				
\$30				
\$380/day (1–5), \$0/day (6+)				
\$235 \$0				
\$0 \$0 / \$20				
\$0 / \$20 \$235 / \$320				
\$30				
\$325				
\$90				
\$40				
\$4,950				
You pay:				
Preventive: \$0				
Comprehensive: 30%				
Included				
Same cost as in-person				
\$0				
\$25				
(limit 12 visits/year, combined)				
\$0				
\$200 reimbursement				
\$0 Starting at \$599				
\$0				
Included				
\$0 Included				
iiividdud				

MyCaraTM Dy 10 (UNIO)

This plan is available to residents of Clackamas, Multnomah, and Washington Counties, Oregon.

This is a brief summary. Contact us for plan details or to see a plan's Summary of Benefits.

*You cannot combine Medicare Part D prescription drug coverage from any other company with this plan.



Call today: 888-530-1426, TTY 711



NEW!

Dental care to fit your needs



Our plan includes dental benefits

- No deductible or waiting periods
- Up to \$500 per year at no additional premium
- HMO plan—uses a dental network.
 To find an in-network dentist, visit
 Medicare.PacificSource.com.

Included Preventive

- **\$0** for one routine exam, one cleaning, and one bitewing x-ray per calendar year
- **\$0** for one set of full-mouth x-rays every five years

Included Comprehensive

\$0 for the preventive benefits noted to the left,

plus

30% coinsurance on many more services, such as fillings, simple extractions, and stainless steel crowns

Supplemental dental options

If you want more coverage, you may add supplemental dental for an additional premium.

- Freedom to see any licensed dentist in the <u>United States</u>
- \$0 copay for covered preventive services (at in-network dentists, or any dentist who accepts our payment as payment in full)
- No deductible or waiting periods

	Supplemental Comprehensive		
Premium (monthly)	\$57		
Deductible (annual)	\$0		
Annual maximum benefit	\$1,000		
Preventive and diagnostic services	\$0		
Restorative and extraction services	20%		
Endodontics and periodontics	50%		

This is a brief summary of our dental benefits.

Please contact us for more details.

Part D prescription drug benefits included in the following plan

	MyCare™ Rx 40 (HM0)			
Stage 1			MO)	
Pharmacy Deductible All Tiers	\$0			
Stage 2	When the total drug costs* are between \$0 and \$4,430, you pay:			
Pharmacy* Supply	Preferred Retail 30/90-day	Standard Retail 30/90-day	Preferred Mail Order 90-day SAVE!	
Tier 1 Preferred Generic	\$0	\$8/\$24	\$0	
Tier 2 Generic	\$9/\$27	\$17/\$51	\$18	
Tier 3 Preferred Brand	\$37/\$111	\$47/\$141	\$74	
Tier 4 Nonpreferred	31%	33%	31%	
Tier 5 Specialty (30-day supply only)	33%	33%	30-day supply only; retail cost applies	
Tier 6 Select Care	\$0	\$0	\$0	
Stage 3 ("coverage gap")	After tota	al drug costs* reach \$4,43 0) , you pay:	
Most Generic	25%			
Most Brand	25%			
All Drugs in Tier 6	\$0 during coverage gap			
Stage 4	After your out-of-pocket costs reach \$7,050, the maximum you pay until the end of the calendar year is:			
All Covered Drugs	Whichever is the larger amount: 5% of the cost OR \$3.95 for generic drugs \$9.85 all other drugs			

To find out your medication's tier, visit Medicare. Pacific Source.com or call 888-530-1426, TTY 711.

^{*}Your cost may differ relative to the pharmacy's status as preferred or standard, mail order, long-term care, home infusion, or quantity.

Spend less on medications you need



Preferred pharmacies

Sav-on/Albertsons, Costco, Fred Meyer/Kroger, Safeway, CVS/Target, Walmart, and more

Freedom to choose from more than 68.000* network pharmacies throughout the U.S.

- Save money with CVS Caremark mail order
- Lower copays at preferred pharmacies

For a complete list of preferred pharmacies, go to Medicare.PacificSource.com.

*Based on CVS Medicare contracted pharmacy data.



Over-the-counter (OTC) drug benefit

Take aspirin or calcium? They're on us! All our Medicare plans include reimbursement for up to \$100 per year for OTC aspirin, calcium, and calcium-vitamin D combinations.



Home delivery

Save money with CVS Caremark mail order

- **\$0 copay** on all preferred generic (Tier 1) and select care drugs (Tier 6)
- 90-day supply for 60-day cost for generic (Tier 2) and preferred brand (Tier 3)
- Free shipping and optional auto-refills



\$0 select medications

Select care (Tier 6) drugs are included in all Rx plans. Benefit includes:

- \$0 copay for up to a 90-day supply (at in-network pharmacies)
- Includes many medications for blood pressure, cholesterol, and diabetes

Below is a partial list of the most common select care (Tier 6) drugs. For a complete list of covered drugs, go to Medicare.PacificSource.com.

Blood pressure

Amlodipine Besylate-Benazepril HCL Amlodipine Besylate-Valsartan HCL Amlodipine Besylate-Valsartan HCL-HCTZ Benazepril HCL Enalapril Maleate Enalapril Maleate-HCTZ Fosinopril Sodium Fosinopril Sodium-HCT7 Irbesartan Irbesartan-HCTZ Lisinopril Lisinopril-HCTZ Losartan Potassium Losartan Potassium-**HCTZ** Moexipril HCL

Moexipril HCL-HCTZ Perindopril Erbumine Quinapril HCL Quinapril HCL-HCTZ Ramipril

Telmisartan Trandolapril Valsartan

Valsartan-HCTZ

Cholesterol

Atorvastatin Calcium Lovastatin Pravastatin Sodium Rosuvastatin Calcium Simvastatin

Diahetes

Acarbose Glimepiride Glipizide ER/IR Glipizide-Metformin HCI Metformin HCL ER/IR Natealinide Pioglitazone Repaglinide

Osteoporosis

Alendronate Ibandronate

Benefits to ensure peace of mind



Hearing aid benefits

PacificSource Medicare partners with TruHearing® to offer a hearing aid benefit.

- \$0 copay for hearing exam
- Up to 2 hearing aids per year (\$599, \$799, or \$999 copay per aid), batteries included
- 1 year of unlimited follow-up visits



Eyeglass and vision benefits

All our Medicare Advantage plans cover:

- Routine vision exams
- Eyeglasses or contacts: \$200 reimbursement every two calendar years
- Freedom to choose the frame style you like best, from any licensed provider



\$0 fitness program

The Silver&Fit Healthy Aging and Exercise Program includes, all at no cost to you:

- Thousands of digital workout videos
- Home Fitness Kits including a free fitness tracker option
- Fitness center membership
- One-on-one coaching by phone, and more
- Substantial discounts on membership fees at premium fitness centers



Alternative care

It's good to have choices in the kind of care you receive. That's why our Medicare plans cover alternative care not covered by Original Medicare (\$25 copay, at in-network providers). The benefit includes 12 office visits per year (combined) for:

- Chiropractic
- Acupuncture
- Naturopathy



Telehealth

Telehealth is a convenient way to get care via phone or video. Our plans cover telehealth with in-network primary care doctors and specialists. Your cost is the same as an in-person visit.

Availability varies by provider and region, and some limitations apply.



24-Hour NurseLine

Sometimes you just need to talk with a healthcare professional. Determining whether or not urgent care is needed can be difficult, especially in those after-hours moments.

If your situation is not life-threatening, and you just want professional advice, you can call our 24-Hour NurseLine. This service is included at no extra cost with PacificSource Medicare plans.



\$0 preventive care services

Preventive services are covered at no cost to you when you get care from in-network providers. Benefits include:

- Routine physical exam
- Flu and pneumonia vaccines
- Bone-mass measurement
- Medical nutrition therapy services
- Tobacco-use cessation counseling
- Preventive screenings, such as mammograms and colonoscopies
- Chronic and transitional care



Worry-free travel

Whether you're visiting family in the next state or on a dream trip in another country, you can relax, knowing your plan includes:

- In-network copays for emergency or urgent care (at any facility)
- Worldwide coverage for ambulance, emergency, and urgent care
- Global emergency medical assistance through Assist America®



Care coordination

Our Health Services team provides direct assistance when you need help managing your healthcare. Nurse Case Managers will:

- Work collaboratively with you and your providers
- Offer resources and support in navigating the healthcare system
- All at no extra cost to you



Meals as medicine

Our plans include 14 home-delivered meals after a recent hospital or nursing facility stay.

- Two meals per day for seven days
- Condition-specific menus, such as heart-healthy, diabetic-friendly, and low-sodium
- Vegetarian and kosher options
- No extra cost to you, and no limit per calendar year



NEW!

Dual special needs plan

for those eligible for both Medicare and Medicaid

Our PacificSource Dual Care (HMO D-SNP) plan offers:

- \$0 or low premium*
- \$250/year for eyewear
- \$0 alternative care
- \$0 post-hospital meal benefit
- Gift card rewards for healthy actions
- And much more!

*Your premium may vary if your Medicaid status changes. See our D-SNP brochure or contact us for more information.

PacificSource Community Health Plans is an HMO, HMO D-SNP, and PPO plan with a Medicare contract and a contract with Oregon Health Plan (Medicaid). Enrollment in PacificSource Medicare depends on contract renewal. Other pharmacies and providers are available in our network. TruHearing® is a registered trademark of TruHearing, Inc. The Silver&Fit Program is provided by American Specialty Health Fitness, Inc., a subsidiary of American Specialty Health Incorporated (ASH). Silver&Fit is a registered trademark of ASH and used with permission herein. Participating fitness centers and fitness chains may vary by location and are subject to change. Assist America is a registered service mark of Assist America, Inc. Accessibility help: For assistance reading this document, please call us at 888-863-3637, TTY 711.

Enrolling in PacificSource Medicare



When you become eligible for Medicare

The three months before your 65th birthday, the month of your 65th birthday, and the three months following your 65th birthday.



During the Annual Enrollment Period

(October 15 – December 7) Every year at this time, you can also change plans or add or drop Part D prescription drug coverage.



During the Open Enrollment Period

(January 1 – March 31) If you are already enrolled in a Medicare Advantage plan, you can change your plan or Part D prescription drug coverage during this time.

Special Enrollment Period: There are many other circumstances for which you could be eligible to enroll, outside these three periods. Call us for details.

Questions?

Contact us 888-530-1426, TTY 711

We're available:

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

Medicare.PacificSource.com

Contact a broker

PacificSource Medicare partners with a select group of local insurance producers (brokers). Call us for assistance.

Attend a free seminar

Learn more about Medicare and Medicare Advantage plans at: Medicare.PacificSource.com

For accommodation of persons with special needs at meetings, call 888-530-1426, TTY 711.

Discrimination Is Against the Law

PacificSource Community Health Plans complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. PacificSource Community Health Plans does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

PacificSource Community Health Plans:

- 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 services, contact Customer Service at (888) 863-3637 or, for TTY users, (800) 735-2900.

- October 1–March 31: 8:00 a.m. to 8:00 p.m., seven days a week
- April 1–September 30: 8:00 a.m. to 8:00 p.m. Monday–Friday

If you believe that PacificSource Community Health Plans 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: Civil Rights Coordinator, PO Box 7068, Springfield, OR 97475-0068, (541) 225-1967, fax (541) 684-5475, or email cro@pacificsource.com. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, our Customer Service department 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, DC 20201
- (800) 368-1019, (800) 537-7697 (TDD)

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

Arabic: مقرب لصت ناجملاب كال رفاوتت قيوغلال قدعاسمل تامدخ ناف ،قغلل الكذا شدحت تنك اذا قطوح الم مقرب لصت المورب المورب

Cambodian-Mon-Khmer: បុរយ័តុន៖ បរើសិនជាអុនកនិយាយ ភាសាខុមរែ, សវាជំនួយផុនកែភាសា ដរោយមិនគិតឈុនល គឺអាចមានសំរាប់បំរលីអុនកា ចូរ ទូរស័ពុទ (888) 863-3637, TTY: (800) 735-2900។

Chinese: 注意:如果您使用繁體中文, 您可以免費獲得語言援助服務。請致電 (888) 863-3637, TTY: (800) 735-2900。

Cushite-Oromo: XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa (888) 863-3637, TTY: (800) 735-2900.

French: ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez (888) 863-3637, ATS: (800) 735-2900.

German: ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: (888) 863-3637, TTY: (800) 735-2900.

Japanese: 注意事項:日本語を話される場合、無料の言語支援をご利用いただけます。(888) 863-3637, TTY: (800) 735-2900) まで、お電話にてご連絡ください。

Korean: 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. (888) 863-3637, TTY: (800) 735-2900 번으로 전화해 주십시오.

امش یارب ناگیار تروصب ینابز تالی هست ،دینک یم وگتفگ یسراف نابز هب رگا :هجوت :هجوت :هجوت :هجوت :هجوت :هجوت :هجو ف یم دشاب .اب 2900-735 (800) :888) سامت دیری گب.

Romanian: ATENŢIE: Dacă vorbiți limba română, vă stau la dispoziție servicii de asistență lingvistică, gratuit. Sunați la (888) 863-3637, TTY: (800) 735-2900.

Russian: ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните (888) 863-3637, телетайп: (800) 735-2900.

Spanish: ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al (888) 863-3637, TTY: (800) 735-2900.

Thai: เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร (888) 863-3637, TTY: (800) 735-2900.

Ukrainian: УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером (888) 863-3637, телетайп: (800) 735-2900.

Vietnamese: CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số (888) 863-3637, TTY: (800) 735-2900.