

NaviCare® HMO SNP and NaviCare® NHC HMO SNP Summary of Benefits

January 1, 2027–December 31, 2027

The NaviCare service area includes the following Massachusetts counties:
Barnstable, Berkshire, Bristol, Essex, Franklin, Hampden, Hampshire, Middlesex,
Norfolk, Plymouth, Suffolk, and Worcester



Introduction

This document is a brief summary of the benefits and services covered by NaviCare. It includes answers to frequently asked questions, important contact information, an overview of benefits and services offered, and information about your rights as a member of NaviCare. Key terms and their definitions appear in alphabetical order in the last chapter of the *Member Handbook* (formerly known as the *Evidence of Coverage or EOC*).

Table of Contents

A. Disclaimers	3
B. Frequently Asked Questions (FAQ)	8
C. List of covered services.....	13
D. Benefits covered outside of NaviCare.....	26
E. Services that NaviCare, Medicare, and MassHealth (Medicaid) don't cover	26
F. Your rights as a member of the plan.....	27
G. How to file a complaint or appeal a denied service	29
H. What to do if you suspect fraud.....	29
I. What to do if you want independent help with a complaint or concern	29



A. Disclaimers

 This is a summary of health services covered by Fallon Health's NaviCare program for 2027. This is only a summary. Please read the *Member Handbook* for the full list of benefits. If you don't have a *Member Handbook*, call NaviCare Enrollee Services at the numbers listed at the bottom of this page to get one. Or you can visit our website, fallonhealth.org/navicare, and click on the banner titled "Benefits and services."

- NaviCare HMO SNP/NaviCare NHC HMO SNP is a Dual Special Needs Plan (D-SNP) with a Medicare contract and a contract with the Commonwealth of Massachusetts MassHealth (Medicaid) program. Enrollment in the plan depends on the plan's contract renewal with Medicare. This plan is a voluntary program that is available to anyone 65 and older who qualifies for MassHealth Standard and Original Medicare and does not have any other comprehensive health insurance, except Medicare.
- For more information about Medicare, you can read the Medicare & You handbook. It has a summary of Medicare benefits, rights, and protections and answers to the most frequently asked questions about Medicare. You can get it at the Medicare website (www.medicare.gov) or by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.
- For more information about MassHealth (Medicaid), you can contact the Office of the Ombudsman by phone at 1-855-781-9898 (Toll Free). Videophone (VP) users may call 339-224-6831, Monday-Friday, 9 a.m.–4 p.m.
- You can get this document for free in other formats, such as large print, braille, or audio. Call 1-877-700-6996 (TTY 711), 8 a.m. to 8 p.m., Monday through Friday (7 days a week, Oct. 1 through March 31). The call is free.
- This document is available for free in Khmer, Spanish, and Vietnamese, and other languages are available for free upon request.
- Your preferred language, both written and spoken, or request for information in an alternate format is requested by the plan on each enrollment form. Your language preference will be captured and stored in the plan's central operating system as a standing request for future mailings and communications.

Disclaimers, continued

- Once enrolled, you may change your preferred language or communications format by informing a member of your Care Team or by calling NaviCare Enrollee Services at the numbers listed at the bottom of this page.
- Estate Recovery Awareness: MassHealth (Medicaid) is required by federal law to recover money from the estates of certain MassHealth (Medicaid) members who are age 55 years or older, and who are any age and are receiving long-term care in a nursing home or other medical institution. For more information about MassHealth (Medicaid) estate recovery, please visit www.mass.gov/estater recovery.



NaviCare HMO SNP and NaviCare NHC HMO SNP Summary of Benefits

Notice of availability of language assistance services and auxiliary aids and services

You can get this document for free in other formats, such as large print, braille, or audio. Call 1-877-700-6996 (TTY 711) 8 a.m.–8 p.m., Monday–Friday (7 days a week, Oct. 1–March 31). The call is free.

English: We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-877-700-6996. Someone who speaks English can help you. The call is free. We also provide free auxiliary aids and services, such as large print, braille, or audio. Just call us at the number above to make this request.

Spanish: Contamos con servicios de intérprete gratuitos para responder cualquier pregunta que tenga sobre nuestro plan de salud o medicamentos. Para obtener un intérprete, solo llámenos al 1-877-700-6996. Alguien que habla español podrá ayudarle. La llamada es gratuita. También ofrecemos ayudas y servicios auxiliares gratuitos, como impresión en letra grande, braille o audio. Solo llámenos al número mencionado arriba para hacer esta solicitud.

Chinese: 我們提供免費口譯服務，以解答您有關我們的健康或藥物計劃的任何問題。如需口譯服務，請撥打 1-877-700-6996。會有說中文的人為您提供幫助。此為免付費電話。我們也提供免費的輔助工具和服務，例如大號字體印刷版、盲文或音訊。請撥打上述電話向我們提出請求。

French: Nous disposons de services d'interprétation gratuits pour répondre à toutes les questions que vous pourriez avoir sur notre régime de santé ou d'assurance médicaments. Pour obtenir un interprète, il vous suffit de nous appeler au 1-877-700-6996. Une personne parlant français pourra vous aider. L'appel est gratuit. Nous fournissons également gratuitement des aides et des services auxiliaires, tels que des documents en gros caractères, en braille ou audio. Il vous suffit de nous appeler au numéro ci-dessus pour en faire la demande.

Vietnamese: Chúng tôi cung cấp dịch vụ thông dịch miễn phí để giải đáp mọi thắc mắc liên quan đến chương trình bảo hiểm sức khỏe hoặc chương trình thuốc của chúng tôi. Để yêu cầu chúng tôi bố trí thông dịch viên, vui lòng gọi điện đến số 1-877-700-6996. Một nhân viên nói tiếng Việt sẽ hỗ trợ quý vị. Cuộc gọi này hoàn toàn miễn phí. Chúng tôi cũng cung cấp các công cụ và dịch vụ hỗ trợ miễn phí, chẳng hạn như bản in khổ chữ lớn, chữ nổi Braille hoặc băng thu âm. Quý vị chỉ cần gọi cho chúng tôi theo số điện thoại bên trên để yêu cầu các dịch vụ này.

Korean: 저희는 건강 플랜 또는 의약품 플랜에 관한 질문에 답변해 드릴 무료 통역 서비스를 제공합니다. 통역사를 이용하시려면 1-877-700-6996로 전화해 주십시오. 한국어를 구사하는 직원이 도와드릴 수 있습니다. 통화는 무료입니다. 또한 큰 활자, 점자 또는 오디오와 같은 무료 보조 지원과 서비스도 제공합니다. 이러한 요청을 하시려면 위의 번호로 전화해 주십시오.

Russian: Мы можем предоставить вам бесплатные услуги переводчика, чтобы вы могли получить ответы на все ваши вопросы о нашем плане медицинского обслуживания и обеспечения лекарственными препаратами. Чтобы запросить услуги переводчика, просто позвоните по номеру 1-877-700-6996. Сотрудник, владеющий русским языком, сможет вам помочь. Звонок бесплатный. Мы также предлагаем бесплатные вспомогательные средства и услуги, например материалы,



If you have questions, please call NaviCare at 1-877-700-6996 (TTY 711), 8 a.m. to 8 p.m., Monday through Friday (7 days a week, Oct. 1 through March 31). The call is free. For more information visit fallonhealth.org/navicare.

NaviCare HMO SNP and NaviCare NHC HMO SNP Summary of Benefits

напечатанные крупным шрифтом, шрифтом Брайля или в виде аудиозаписи. Просто позвоните нам по вышеуказанному номеру, чтобы сделать соответствующий запрос.

Arabic:

لدينا خدمات مترجم فوري مجانية للإجابة على أي أسئلة التي قد تكون لديك حول خططنا للرعاية الصحية أو خطة الأدوية الخاصة بنا. للحصول على مترجم فوري، فقط اتصل بنا على الرقم 1-800-325-5669. يمكن لشخص يتكلم اللغة الإنجليزية أن يساعدك. إن المكالمات مجانية. نحن نقدم أيضًا مساعدات وخدمات مساعدة مجانية، مثل طباعة بأحرف كبيرة، أو بطريقة برايل، أو ملفات صوتية. فقط اتصل بنا على الرقم المذكور أعلاه لتقديم هذا الطلب.

Hindi: हमारे स्वास्थ्य या दवा योजना के बारे में आपके किसी भी प्रश्न का उत्तर देने के लिए हमारे पास निःशुल्क दुभाषिया सेवाएँ हैं। दुभाषिया पाने के लिए बस हमें 1-877-700-6996 पर कॉल करें। कोई हिन्दी बोलने वाला व्यक्ति आपकी मदद कर सकता है। कॉल निःशुल्क है। हम बड़े प्रिंट, ब्रेल या ऑडियो जैसी निःशुल्क सहायक सामग्री और सेवाएँ भी प्रदान करते हैं। इस अनुरोध के लिए बस हमें ऊपर दिए गए नंबर पर कॉल करें।

Italian: Disponiamo di servizi gratuiti di interpretariato per rispondere a eventuali domande sul nostro piano sanitario o farmaceutico. Per chiedere un interprete basta chiamarci al numero 1-877-700-6996. La assisterà un operatore che parla italiano. La chiamata è gratuita. Forniamo inoltre servizi e supporti ausiliari gratuiti, come ad esempio stampa in caratteri grandi, braille o audio. Per questa richiesta basta chiamarci al numero sopra indicato.

Portuguese: Temos serviços de intérprete gratuitos para responder a quaisquer perguntas que possa ter sobre o nosso plano de saúde ou medicamentos. Para obter um intérprete, ligue para 1-877-700-6996. Alguém que fala português poderá prestar assistência. A chamada é gratuita. Também fornecemos recursos e serviços auxiliares gratuitos, como impressão em letras grandes, braile ou áudio. Basta ligar para o número acima e fazer tal solicitação.

Haitian Creole: Nou gen sèvis entèprèt gratis pou reponn nenpòt kesyon ou ka genyen sou plan sante ouwa medikaman nou an. Pou jwenn yon entèprèt, jis rele nou nan 1-877-700-6996. Yon moun ki pale kreyòl ka ede w. Apèl la gratis. Nou bay èd ak sèvis oksilyè gratis tou, tankou gwo lèt, bray ouwa odyo. Jis rele nou nan nimewo ki anwo a pou fè demann sa a.

Polish: Oferujemy bezpłatne usługi tłumaczeniowe, aby odpowiedzieć na wszystkie Państwa pytania dotyczące planu ubezpieczenia zdrowotnego lub refundacji leków. Aby skorzystać z usług tłumacza, należy zadzwonić pod numer 1-877-700-6996. Osoba mówiąca po polsku udzieli Państwu pomocy. Połączenie jest bezpłatne. Zapewniamy również wsparcie i usługi pomocnicze, takie jak materiały pisane dużym drukiem, alfabetem Braille'a lub nagrania głosowe. Aby o nie poprosić, wystarczy zadzwonić pod podany powyżej numer telefonu.

Khmer: យើងមានសេវាកម្មអ្នកបកប្រែផ្ទាល់មាត់ឥតគិតថ្លៃដើម្បីឆ្លើយសំណួរណាមួយ ដែលអ្នកអាចមានអំពីគម្រោងសុខភាព ឬគម្រោងឱសថរបស់អ្នក។ ដើម្បីទទួលបានអ្នកបកប្រែផ្ទាល់មាត់ម្នាក់ សូមទូរសព្ទមកយើងតាមលេខ 1-877-700-6996។ នរណាម្នាក់ដែលនិយាយ ភាសាអង់គ្លេស អាចជួយអ្នកបាន។ ការទាក់ទងតាមទូរសព្ទនេះគឺពុំគិតថ្លៃឡើយ។ យើងផ្តល់ជំនួយបន្ថែម និងសេវាកម្មជំនួយដោយឥតគិតថ្លៃផងដែរ ដូចជាអក្សរពុម្ពធំ អក្សរស្នាប ឬសំឡេង។ គ្រាន់តែទូរសព្ទមកយើងខ្ញុំតាមលេខខាងលើដើម្បីធ្វើការស្នើសុំនេះ។

Greek: Διαθέτουμε δωρεάν υπηρεσίες διερμηνείας για να απαντάμε σε οποιοσδήποτε ερωτήσεις μπορεί να έχετε σχετικά με το πρόγραμμα ιατρικής ή φαρμακευτικής περίθαλψης που παρέχουμε. Για να βρείτε διερμηνέα, απλώς καλέστε μας στον αριθμό 1-877-700-6996. Κάποιος που μιλά αγγλικά μπορεί να σας βοηθήσει. Η κλήση είναι χωρίς χρέωση. Επίσης, παρέχουμε δωρεάν βοηθήματα και βοηθητικές υπηρεσίες, όπως μεγάλη γραμματοσειρά, μπράιγ ή ηχητική μορφή. Απλώς καλέστε μας στον παραπάνω αριθμό για να υποβάλετε αυτό το αίτημα.

NaviCare HMO SNP and NaviCare NHC HMO SNP Summary of Benefits

Gujarati: અમારી આરોગ્ય અથવા દવા યોજના વિશે તમને હોય શકે તેવા કોઈપણ પ્રશ્નોના જવાબ આપવા માટે અમારી પાસે મફત દુભાષિયા સેવા છે. દુભાષિયા સેવા મેળવવા માટે, અમને 1-877-700-6996 પર કોલ કરો. ગુજરાતી બોલતી વ્યક્તિ તમને મદદ કરી શકે છે. કોલ મફત છે. અમે મોટા પ્રિન્ટ, બ્રેઇલ અથવા ઓડિઓ જેવી મફત વધારાની સહાય અને સેવાઓ પણ પ્રદાન કરીએ છીએ. આ વિનંતી કરવા માટે અમને ફક્ત ઉપરના નંબર પર કોલ કરો.

Laotian: ພວກເຮົາມີການບໍລິການນາຍແປພາສາພຣີ ເພື່ອຕອບທຸກຄໍາຖາມທີ່ທ່ານອາດຈະມີກ່ຽວກັບແຜນປະກັນສຸຂະພາບ ຫຼື ແຜນປະກັນຢາຂອງພວກເຮົາ ເພື່ອຂໍນາຍແປພາສາ, ພຽງແຕ່ໂທຫາພວກເຮົາທີ່ເບີ 1-877-700-6996. ຈະມີຄົນທີ່ສາມາດເວົ້າພາສາລາວມາຊ່ວຍທ່ານ. ການໂທແມ່ນບໍ່ເສຍຄ່າ. ນອກຈາກນີ້, ພວກເຮົາຍັງໃຫ້ການຊ່ວຍເຫຼືອ ແລະ ການບໍລິການເສີມແບບບໍ່ເສຍຄ່າອີກດ້ວຍ ເຊັ່ນ: ການພິມເປັນຕົວໃຫຍ່, ຕົວອັກສອນນຸນ ຫຼື ສຽງບັນທຶກ. ພຽງແຕ່ໂທຫາພວກເຮົາຕາມເບີຂ້າງເທິງ ເພື່ອຮ້ອງຂໍສິ່ງນີ້.

H8928_250863_C Approved 04092025

25-676-012 Rev. 00 3/25



B. Frequently Asked Questions (FAQ)

The following table lists frequently asked questions.

Frequently Asked Questions	Answers
What's a Senior Care Options (SCO) Plan?	Senior Care Options (SCO) is a managed care program that combines MassHealth (Medicaid) and Medicare benefits into a single plan with one care team for people ages 65 or older. With SCO, you'll have a Navigator to help you manage your care, stay healthy, and access the services you need. People eligible for SCO generally have no or low monthly premiums, no copays, and little to no out-of-pocket costs for most covered services. SCO covers medical, behavioral health, and prescription medications, plus specialized geriatric support services. NaviCare is a SCO Plan that provides benefits of MassHealth (Medicaid) and Medicare, including covered drug benefits, to enrollees in the SCO program. NaviCare enrollees must be age 65 or older, have MassHealth Standard and Medicare Parts A and B, and live in the service area.
Will I get the same Medicare and MassHealth (Medicaid) benefits in NaviCare that I get now?	You'll get most of your covered Medicare and MassHealth (Medicaid) benefits directly from NaviCare. You'll work with a team of providers who will help determine what services will best meet your needs. This means that some of the services you get now may change based on your needs, and your doctor and Care Team assessment. You may also get other benefits outside of your health plan the same way you do now, directly from a state agency like the Department of Mental Health or the Department of Developmental Services. When you enroll in NaviCare, you and your Care Team will work together to develop a care plan to address your health and support needs, reflecting your personal preferences and goals. If you're taking any Medicare Part D drugs that NaviCare doesn't normally cover, you can get a temporary supply and we'll help you to transition to another drug or get an exception for NaviCare to cover your drug if medically necessary. For all other services, you can keep using your doctors and getting your current services for 90 days, or until your assessment and care plan are complete. For more information, call Enrollee Services at the numbers listed at the bottom of this page.



Frequently Asked Questions (FAQ) *continued*

Frequently Asked Questions	Answers
Can I use the same doctors I use now?	This is often the case. If your providers (including doctors, hospitals, therapists, pharmacies, and other health care providers) work with NaviCare and have a contract with us, you can keep going to them. - Providers with an agreement with us are “in-network.” Network providers participate in our plan. That means they accept members of our plan and provide services our plan covers. You must use the providers in NaviCare’s network. If you use providers or pharmacies that aren’t in our network, the plan may not pay for these services or drugs. - If you need urgent or emergency care or out-of-area dialysis services, you can use providers outside of NaviCare’s plan. Urgent and emergency care services are covered worldwide. Out-of-area dialysis services are only covered at Medicare-certified dialysis facilities anywhere in the United States or its territories. - If you have providers that you currently go to and they aren’t in our network, you may continue to see them for the first 90 days of your NaviCare membership, or until you are assessed by your Care Team and your care plan is implemented, whichever is sooner. To find out if your providers are in the plan’s network, call Enrollee Services at the numbers listed at the bottom of this page or read NaviCare’s Provider and Pharmacy Directory on the plan’s website at fallonhealth.org/navicare. If NaviCare is new for you, we’ll work with you to develop a care plan to address your needs.
What’s a NaviCare Navigator?	A NaviCare Navigator is one main person for you to contact. This person helps to manage all your providers and services and make sure you get what you need.



Frequently Asked Questions (FAQ) *continued*

Frequently Asked Questions	Answers
What are Long-term Services and Supports (LTSS)?	Long-term Services and Supports are help for people who need assistance to do everyday tasks like bathing, toileting, getting dressed, making food, and taking medicine. Most of these services are provided at your home or in your community but could be provided in a nursing home or hospital. In some cases, a county or other agency may administer these services, and your Navigator or Care Team will work with that agency.
What happens if I need a service but no one in NaviCare's network can provide it?	Most services will be provided by our network providers. If you need a service that can't be provided within our network, NaviCare will pay for the cost of an out-of-network provider.
Where's NaviCare available?	The service area for this plan includes: Barnstable, Berkshire, Bristol, Essex, Franklin, Hampden, Hampshire, Middlesex, Norfolk, Plymouth, Suffolk, and Worcester counties in Massachusetts. You must live in this area to join the plan.



Frequently Asked Questions (FAQ) *continued*

Frequently Asked Questions	Answers
What's prior authorization?	Prior authorization means an approval from NaviCare to seek services outside of our network or to get services not routinely covered by our network before you get the services. NaviCare may not cover the service, procedure, item, or drug if you don't get prior authorization. If you need urgent or emergency care, or out-of-area dialysis services, you don't need to get prior authorization first. NaviCare can provide you or your provider with a list of services or procedures that require you to get prior authorization from NaviCare before the service is provided. Refer to Chapter 3 of the <i>Member Handbook</i> to learn more about prior authorization. Refer to the Benefits Chart in Chapter 4 of the <i>Member Handbook</i> to learn which services require a prior authorization. If you have questions about whether prior authorization is required for specific services, procedures, items, or drugs, call Enrollee Services at the numbers listed at the bottom of this page for help.
What's a referral?	A referral means that your primary care provider (PCP) must give you approval to go to someone that isn't your PCP. A referral is different than a prior authorization. If you don't get a referral from your PCP, NaviCare may not cover the services. NaviCare can provide you with a list of services that require you to get a referral from your PCP before the service is provided. You don't need a referral to use certain specialists, such as women's health specialists. Refer to the <i>Member Handbook</i> to learn more about when you'll need to get a referral from your PCP.



Frequently Asked Questions (FAQ) *continued*

Frequently Asked Questions	Answers
Do I pay a monthly amount (also called a premium) under NaviCare?	Most members won't have to pay monthly premiums, including the Medicare Part B premium, for their health coverage. Some MassHealth (Medicaid) members with higher incomes may need to pay Medicare Part B Premiums. Additionally, if you pay a premium to MassHealth (Medicaid), you must continue to pay the premium to MassHealth (Medicaid) to keep your coverage. For more information, call the MassHealth (Medicaid) Customer Service Center at 1-800-841-2900 or 711 for people who have difficulty with hearing or speaking. You must have special telephone equipment to call it.
Do I pay a deductible as a member of NaviCare?	No. You don't pay deductibles in NaviCare.
What's the maximum out-of-pocket amount that I will pay for medical services as a member of NaviCare?	There's no cost-sharing for medical services in NaviCare, so your annual out-of-pocket costs will be \$0.
What's a Geriatric Support Services Coordinator (GSSC)?	A NaviCare GSSC is a person on your Care Team who is an expert in long-term services and supports and/or recovery services. This person helps you get services that help you live independently in your home. Please tell your Navigator if you're interested in a referral to a GSSC.
What if I live in a long-term care facility?	If you are—or become—a resident of a long-term care facility, you must continue to pay your Patient Paid Amount (PPA) to the nursing home. The PPA is the portion of monthly income that a member in a nursing facility must contribute to the cost of care.



NaviCare HMO SNP and NaviCare NHC HMO SNP Summary of Benefits

C. List of covered services

The following table is a quick overview of what services you may need, your costs, and rules about the benefits.

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, and benefit information (rules about benefits)
You need hospital care	Inpatient hospital stay	\$0	Requires prior authorization and PCP referral.
	Outpatient hospital services, including observation	\$0	May require prior authorization and PCP referral.
	Ambulatory surgical center (ASC) services	\$0	Requires prior authorization and PCP referral.
	Doctor or surgeon care	\$0	May require prior authorization.
You want a doctor	Visits to treat an injury or illness	\$0	
	Care to keep you from getting sick, such as flu shots and screenings to check for cancer	\$0	May require prior authorization.
	Wellness visits, such as a physical	\$0	
	"Welcome to Medicare" (preventive visit one time only)	\$0	
	Specialist care	\$0	May require prior authorization and PCP referral.
	Transportation to a doctor's office	\$0	May require prior authorization.

NaviCare HMO SNP and NaviCare NHC HMO SNP Summary of Benefits

List of covered services *continued*

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, and benefit information (rules about benefits)
You need emergency care	Emergency room services	\$0	Emergency room services are covered worldwide, both in and out of network, and don't require prior authorization.
	Urgent care	\$0	Urgent care services are covered worldwide, both in and out of network, and don't require prior authorization.
You need medical tests	Diagnostic radiology services (for example, X-rays or other imaging services, such as CAT scans or MRIs)	\$0	May require prior authorization and PCP referral.
	Lab tests and diagnostic procedures, such as blood work	\$0	May require prior authorization and PCP referral.
	Screening tests, such as tests to check for cancer	\$0	May require prior authorization and PCP referral.
You need hearing/auditory services	Hearing screenings	\$0	May require prior authorization.
	Hearing aids	\$0	One (1) hearing aid per ear every 60 months.

NaviCare HMO SNP and NaviCare NHC HMO SNP Summary of Benefits

List of covered services *continued*

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, and benefit information (rules about benefits)
You need dental care	Dental check-ups and preventive care	\$0	
	Restorative and emergency dental care (For more information, please see the NaviCare HMO SNP and NaviCare NHC HMO SNP <i>Member Handbook</i>) List of dental providers is available online at fallonhealth.org/navicare	\$0	May require prior authorization. Benefit frequency limits apply. Includes: • Dental X-rays • Fillings, dentures, crowns, extractions, implants, oral surgery, and root canals
You need eye care	Eye exams	\$0	Routine exam (1 per year)
	Glasses or contact lenses	\$0	Includes: • One (1) pair of Medicare-covered eyeglasses or contact lenses after cataract surgery • Up to 2 pairs of eyeglasses, contacts, lenses, frames, or upgrades up to the \$403 annual plan coverage limit
	Other vision care	\$0	Includes: • Medicare-covered glaucoma tests • Medicare-covered exams to treat diseases of the eye

NaviCare HMO SNP and NaviCare NHC HMO SNP Summary of Benefits

List of covered services *continued*

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, and benefit information (rules about benefits)
You need behavioral health services	Behavioral health services	\$0	Inpatient: Requires prior authorization. Transcranial Magnetic Stimulation Therapy (TMS), Electro-Convulsive Therapy (ECT), and Intensive Outpatient Therapy (IOP) require prior authorization. May require PCP referral.
	Inpatient and outpatient care and community-based services for people who need mental health services	\$0	Inpatient: requires prior authorization. Includes: • Outpatient individual or group therapy visit with or without a psychiatrist • Diversionary services, such as: ○ Observation ○ Community support services ○ Crisis assessment, intervention, and stabilization ○ Psychiatric day treatment • Behavioral health emergency services • Medication management services • Day treatment residential programs

NaviCare HMO SNP and NaviCare NHC HMO SNP Summary of Benefits

List of covered services *continued*

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, and benefit information (rules about benefits)
You need substance use disorder services	Substance use disorder services	\$0	Inpatient: MassHealth (Medicaid) covers your inpatient hospital stay beyond the 90-day limit as medically necessary. Requires prior authorization. Intensive Outpatient Therapy (IOP) requires prior authorization. Outpatient covered services include, but are not limited to: • Psychotherapy (individual or group therapy visits) • Member education regarding diagnosis and treatment MassHealth (Medicaid) covers additional services including: • Acupuncture ◦ Coverage includes unlimited treatments with a network acupuncturist • Methadone maintenance • Structured Outpatient Addiction Program • Clinical Support Services • Adult Residential Rehabilitation Services • Program of Assertive Community Treatment (PACT) • Community support services • Crisis assessment, intervention, and stabilization Contact a Community Behavioral Health Center (CBHC) at 1-877-382-1609 to find substance use disorder services near you.

NaviCare HMO SNP and NaviCare NHC HMO SNP Summary of Benefits

List of covered services *continued*

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, and benefit information (rules about benefits)
You need a place to live with people available to help you	Skilled nursing care	\$0	Requires prior authorization and PCP referral.
	Nursing home care	\$0	Requires prior authorization and PCP referral. If MassHealth (Medicaid) determines that you have a monthly Patient Paid Amount (PPA), you are responsible for the PPA payments.
	Adult Foster Care and Group Adult Foster Care	\$0	Requires prior authorization and PCP referral. This may include daily assistance in personal care, managing medication, meals, snacks, homemaking, laundry, and medical transportation from a contracted qualified State-approved Adult Foster Care or Group Adult Foster Care Provider.
You need therapy after a stroke or accident	Occupational, physical, or speech therapy	\$0	Physical and occupational therapy visits beyond the 60th visit each require prior authorization. Speech language therapy visits beyond the 35th visit require prior authorization.

NaviCare HMO SNP and NaviCare NHC HMO SNP Summary of Benefits

List of covered services *continued*

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, and benefit information (rules about benefits)
You need help getting to health services	Ambulance services	\$0	Non-emergency ambulance services require prior authorization.
	Emergency transportation	\$0	Worldwide coverage.
	Transportation to medical appointments and services	\$0	Unlimited rides to and from medical appointments and places where you receive health care, such as doctor office visits, physical therapy, counseling, and hospital visits. Get rides from Fallon Health's partner service or from your own friends and family, who can receive reimbursement for mileage of rides that have been pre-approved.
You need drugs to treat your illness or condition <i>(continued on the next page)</i>	Medicare Part B drugs	\$0	May require prior authorization. Part B drugs include drugs given by your doctor in their office, some oral cancer drugs, and some drugs used with certain medical equipment. Read the <i>Member Handbook</i> for more information on these drugs.

NaviCare HMO SNP and NaviCare NHC HMO SNP Summary of Benefits

List of covered services *continued*

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, and benefit information (rules about benefits)
You need drugs to treat your illness or condition <i>(continued from the previous page)</i>	Medicare Part D drugs Generic drugs (no brand name) Tier 1: Brand name and generic drugs	\$0 for a 30-day supply	There may be limitations on the types of drugs covered. Please refer to NaviCare's <i>List of Covered Drugs (Drug List)</i> for more information. Extended-day supplies are available for most drugs through mail-order and some retail pharmacies, with zero cost-sharing.
	Over-the-counter (OTC) drugs	\$0	There may be limitations on the types of drugs covered. Please refer to NaviCare HMO SNP and NaviCare NHC HMO SNP's <i>List of Covered Drugs (Drug List)</i> for more information.
You need help getting better or have special health needs	Rehabilitation services	\$0	May require prior authorization. Cardiac (heart) rehabilitation requires a PCP referral for a maximum of 2 one-hour sessions per day for up to 36 sessions for up to 36 weeks.
	Medical equipment for home care	\$0	Requires prior authorization.
	Dialysis services	\$0	
You need foot care	Podiatry services	\$0	Includes Medicare- and MassHealth (Medicaid)-covered visits, such as those for nail cutting. Requires prior authorization for services in a nursing home and podiatric surgery.
	Orthotic services	\$0	Requires prior authorization.



If you have questions, please call NaviCare at 1-877-700-6996 (TTY 711), 8 a.m. to 8 p.m., Monday through Friday (7 days a week, Oct. 1 through March 31). The call is free. **For more information** visit fallonhealth.org/navicare.

NaviCare HMO SNP and NaviCare NHC HMO SNP Summary of Benefits

List of covered services *continued*

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, and benefit information (rules about benefits)
You need durable medical equipment (DME) Note: This isn't a complete list of covered DME. For a complete list, contact Enrollee Services or refer to Chapter 4 of the <i>Member Handbook</i> .	Wheelchairs, crutches, and walkers	\$0	Requires prior authorization.
	Nebulizers	\$0	Requires prior authorization.
	Oxygen equipment and supplies	\$0	Requires prior authorization.
You need help living at home <i>(continued on the next page)</i>	Home health services	\$0	Requires prior authorization and PCP referral.
	Home services, such as cleaning or housekeeping, or home modifications such as grab bars	\$0	Requires prior authorization and PCP referral. Contact your Navigator for information about how to get these services.
	Adult day health or other support services	\$0	Requires prior authorization and PCP referral. This may include community-based services, such as nursing; assistance with activities of daily living; social; therapeutic; recreation; nutrition at a site outside the home; dementia-specific interaction; and transportation to a NaviCare-contracted adult day health site outside of the home. Contact your Navigator for information about how to get these services.

NaviCare HMO SNP and NaviCare NHC HMO SNP Summary of Benefits

List of covered services *continued*

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, and benefit information (rules about benefits)
You need help living at home <i>(continued from the previous page)</i>	Day habilitation services	\$0	Requires prior authorization and PCP referral. This includes a structured, goal-oriented, active treatment program of medically oriented, therapeutic, and habilitation services for developmentally disabled individuals who need active treatment.
	Services to help you live on your own (home health care services or personal care attendant services)	\$0	Requires prior authorization and PCP referral. This includes physical assistance with Activities of Daily Living (ADLs) not limited to bathing, dressing, grooming, eating, ambulating/mobility, toileting, transferring, medication administration, and passive range of motion exercise and Instrumental Activities of Daily Living (IADLs) including but not limited to household management tasks, meal preparation, and transportation to medical providers. Contact your Navigator for information about how to get these services.

NaviCare HMO SNP and NaviCare NHC HMO SNP Summary of Benefits

List of covered services *continued*

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, and benefit information (rules about benefits)
Additional services <i>(continued on the next page)</i>	Chiropractic services	\$0	
	Diabetes supplies and services	\$0	May require prior authorization. Includes blood glucose monitors and test strips, diabetes self-management training, and footwear.
	Prosthetic services	\$0	Requires prior authorization.
	Radiation therapy	\$0	Requires prior authorization and PCP referral.
	Services to help manage your disease	\$0	May require prior authorization and PCP referral.
	Telehealth	\$0	Includes primary care, specialist care, outpatient behavioral health services, outpatient opioid treatment, and outpatient substance use disorder services. 24/7 access to doctors for non-emergency conditions by phone, mobile app, or online.



NaviCare HMO SNP and NaviCare NHC HMO SNP Summary of Benefits

List of covered services *continued*

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, and benefit information (rules about benefits)
Additional services <i>(continued from the previous page)</i>	Care Connect	\$0	24/7 phone access to registered nurses who will recommend where you should receive care or will connect you to your doctor.
	Non-emergency transportation	\$0	May require prior authorization. 48 one-way rides (within a 30-mile radius) to the pharmacy per year. Get rides from Fallon Health's partner service or your own friends and family who can receive reimbursement for mileage of pre-approved rides. Members who have qualifying chronic conditions also have access to 100 one-way rides* per year to run errands, visit friends, attend religious services, and more. Not all members qualify. To learn more, contact us at the numbers listed at the bottom of this page.
	Fitness reimbursement	Costs above \$400	\$400 per year to pay for fitness classes, a new fitness tracker, new cardiovascular fitness equipment, or a fitness/gym membership.

NaviCare HMO SNP and NaviCare NHC HMO SNP Summary of Benefits

List of covered services *continued*

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, and benefit information (rules about benefits)
Additional services <i>(continued from the previous page)</i>	Save Now card	Costs above \$375 per quarter	Get \$375 per calendar quarter on the Save Now card. Use the card to buy health and personal care items like cold medicine, toothpaste, and soap. You'll get a total of \$1,500 per year that can be used in a store or for online and phone orders. Members who have qualifying chronic conditions can also use the Save Now card to buy healthy food.* Not all members qualify. To learn more, contact us at the numbers listed at the bottom of this page.

The above summary of benefits is provided for informational purposes only and isn't a complete list of benefits. For a complete list and more information about your benefits, you can read the NaviCare HMO SNP and NaviCare NHC HMO SNP *Member Handbook*. If you don't have a *Member Handbook*, call NaviCare Enrollee Services at the numbers listed at the bottom of this page to get one. If you have questions, you can also call NaviCare Enrollee Services or visit fallonhealth.org/navicare.

* The 100 one-way rides per year to run errands, visit friends, attend religious services, and more and the Save Now card healthy food benefit are part of a special supplemental program for the chronically ill. To qualify, enrollees must have chronic-condition diagnoses documented with Fallon Health, such as cardiovascular disorders, chronic and disabling behavioral health conditions, chronic lung disorders, diabetes, and neurologic disorders. This isn't a complete list of eligible chronic conditions. Not all members with an eligible condition will qualify. Other eligibility and coverage criteria also apply.



D. Benefits covered outside of NaviCare

There are some services that you can get that aren't covered by NaviCare, but are covered by Medicare, MassHealth (Medicaid), or a State or county agency. This isn't a complete list. Call Enrollee Services at the numbers listed at the bottom of this page to find out about these services.

Other services covered by Medicare, MassHealth (Medicaid), or a State Agency	Your costs
Certain hospice care services covered outside of NaviCare	\$0
Targeted case management	\$0
Rest home room and board	\$0
Transitional Support Services (TSS) for substance use disorders	\$0

E. Services that NaviCare, Medicare, and MassHealth (Medicaid) don't cover

This isn't a complete list. Call Enrollee Services at the numbers listed at the bottom of this page to find out about other excluded services.

Services NaviCare, Medicare, and MassHealth (Medicaid) don't cover	
All services, procedures, treatments, medications, and supplies related to Workers' Compensation claims	
Elective or voluntary enhancement procedures	Includes weight loss procedures.
Functional medicine services/procedures and supplies (including labs and supplements)	Includes alternative, holistic, and naturopathic medicine.
Radial keratotomy and LASIK surgery	
Personal items in your room at a hospital or a skilled nursing facility, such as a telephone or television	



F. Your rights as a member of the plan

As a member of NaviCare, you have certain rights. You can exercise these rights without being punished. You can also use these rights without losing your health care services. We'll tell you about your rights at least once a year. For more information on your rights, please read the *Member Handbook*. Your rights include, but aren't limited to, the following:

- **You have a right to respect, fairness, and dignity.** This includes the right to:
 - Get covered services without concern about medical condition, health status, receipt of health services, claims experience, medical history, disability (including behavioral impairment), marital status, age, sex, sexual orientation, national origin, race, color, religion, creed, or public assistance
 - Get information in other languages and formats (for example, large print, braille, or audio) free of charge
 - Be free from any form of physical restraint or seclusion
- **You have the right to get information about your health care.** This includes information on treatment and your treatment options. This information should be in a language and format you can understand. This includes the right to get information on:
 - Description of the services we cover
 - How to get services
 - How much services will cost you
 - Names of health care providers and Navigator
- **You have the right to make decisions about your care, including refusing treatment.** This includes the right to:
 - Choose a primary care provider (PCP) and change your PCP at any time during the year
 - Choose a Geriatric Support Services Coordinator (GSSC)
 - Use a women's health care provider without a referral
 - Get your covered services and drugs quickly
 - Know about all treatment options, no matter what they cost or whether they're covered
 - Refuse treatment, even if your health care provider advises against it
 - Stop taking medicine, even if your health care provider advises against it
 - Ask for a second opinion. NaviCare will pay for the cost of your second opinion visit
 - Make your health care wishes known in an advance directive



NaviCare HMO SNP and NaviCare NHC HMO SNP Summary of Benefits

- **You have the right to timely access to care that doesn't have any communication or physical access barriers.** This includes the right to:
 - Get timely medical care for covered services within the time frames described in the *Member Handbook* and to file an appeal if you don't receive your care within those timeframes.
 - Get in and out of a health care provider's office. This means barrier-free access for people with disabilities, in accordance with the Americans with Disabilities Act
 - Have interpreters to help with communication with your doctors, other providers, and your health plan. Call 1-877-700-6996 (TTY 711) if you need help with this service.
 - Have your *Member Handbook* and any printed materials from NaviCare translated into your prevalent language, and/or to have these materials read out loud to you if you have trouble seeing or reading. Oral interpretation services will be made available upon request and free of charge.
 - Be free of any form of physical restraint or seclusion that would be used as a means of coercion, force, discipline, convenience or retaliation.
- **You have the right to seek emergency and urgent care when you need it.** This means you have the right to:
 - Get emergency services without prior authorization in an emergency
 - Use an out-of-network urgent or emergency care provider, when necessary
- **You have a right to confidentiality and privacy.** This includes the right to:
 - Ask for and get a copy of your medical records in a way that you can understand and to ask for your records to be changed or corrected
 - Have your personal health information kept private
 - Have privacy during treatment
- **You have the right to make complaints about your covered services or care.** This includes the right to:
 - File a complaint or grievance against us or our providers
 - File a complaint with MassHealth (Medicaid) by calling MassHealth (Medicaid) Customer Service at 1-800-841-2900. TTY users should call 711. The NaviCare website, fallonhealth.org/navicare has information about filing an appeal.
 - Ask for an independent medical review of MassHealth (Medicaid) services or items that are medical in nature
 - Appeal certain decisions made by MassHealth (Medicaid) or our providers



NaviCare HMO SNP and NaviCare NHC HMO SNP Summary of Benefits

- Ask for a State Hearing
- Get a detailed reason for why services were denied

For more information about your rights, you can read the *Member Handbook*. If you have questions, you can call NaviCare Enrollee Services at the numbers listed at the bottom of this page.

You can also call the Office of the Ombudsman at 1-855-781-9898 (or use MassRelay at 711 to call 1-855-781-9898 or Videophone (VP) 339-224-6831).

G. How to file a complaint or appeal a denied service

If you have a complaint or think NaviCare should cover something we denied, call Enrollee Services at the numbers listed at the bottom of this page. You may be able to appeal our decision.

For questions about complaints and appeals, you can read **Chapter 9** of the *Member Handbook*. You can also call NaviCare Enrollee Services at the numbers listed at the bottom of this page.

H. What to do if you suspect fraud

Most health care professionals and organizations that provide services are honest. Unfortunately, there may be some who are dishonest. If you think a doctor, hospital, or other pharmacy is doing something wrong, please contact us.

- Call NaviCare Enrollee Services. The phone numbers are listed at the bottom of this page.
- Or, call the MassHealth (Medicaid) Customer Service Center at 1-800-841-2900. TTY users may call 711.
- Or, call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users may call 1-877-486-2048. You can call these numbers for free.

I. What to do if you want independent help with a complaint or concern

My Ombudsman is an independent program that can help you if you have questions, concerns, or problems related to SCO. You can contact My Ombudsman to get information or assistance. My Ombudsman services are free. My Ombudsman staff:

- can answer your questions or refer you to the right place to find what you need.
- can help you address a problem or concern with SCO or your SCO plan, NaviCare. My Ombudsman staff will listen, investigate the issue, and discuss options with you to help solve the problem.
- help with appeals. An appeal is a formal way of asking your SCO plan, MassHealth (Medicaid),



NaviCare HMO SNP and NaviCare NHC HMO SNP Summary of Benefits

or Medicare to review a decision about your services. My Ombudsman staff can talk with you about how to make an appeal and what to expect during the appeal process.

You can call, write, or visit My Ombudsman at its office.

- Call 1-855-781-9898, Monday through Friday from 9 a.m. to 4 p.m.
 - Use 7-1-1 to call 1-855-781-9898. This number is for people who are deaf, hard of hearing, or speech disabled.
 - Use Videophone (VP) 339-224-6831. This number is for people who are deaf or hard of hearing.
- Email info@myombudsman.org
- Write to or visit the My Ombudsman office at 25 Kingston Street, 4th floor, Boston, MA 02111
 - Please refer to the My Ombudsman website or contact them directly for updated information about location and walk-in hours.
- Visit My Ombudsman online at www.myombudsman.org



If you have general questions or questions about our plan, services, service area, billing, or Member ID Cards, please call NaviCare Enrollee Services:

1-877-700-6996

Calls to this number are free. Representatives are available

8 a.m. to 8 p.m., Monday through Friday, (7 days a week Oct. 1 through March 31).

During all other times, callers may leave a voicemail.

Messages will be returned the following business day.

Enrollee Services also has free language interpreter services available for members who require translation services.

TTY 711

This number requires special telephone equipment and is only for people who have difficulties with hearing or speaking. Calls to this number are free and available 24/7.

If you have questions about your health:

- Call your primary care provider (PCP). Follow your PCP's instructions for getting care when the office is closed.
- If your PCP's office is closed, you can also call Care Connect. A nurse will listen to your problem and tell you how to get care. (*Example: urgent care, emergency room.*)

The number for Care Connect is:

1-800-609-6175

Calls to this number are free and available 24/7. NaviCare also has free language interpreter services available for members who require translation services.

TTY: 1-800-848-0160

Calls to this number are free and available 24/7.

If you need immediate behavioral health care, please call the Emergency Services Program/Mobile Crisis Intervention line:

1-877-382-1609

Calls to this number are free and available 24/7. NaviCare also has free language interpreter services available for members who require translation services.

TTY: 711

Calls to this number are free and available 24/7.

