

NaviCare® HMO SNP offered by Fallon Community Health Plan (Fallon Health)

Annual Notice of Change for 2027

Introduction

You're currently enrolled as a member of our plan. Next year, there will be some changes to our benefits and coverage. This *Annual Notice of Change* tells you about the changes and where to find more information about them. To get more information about costs, benefits, or rules please review the *Member Handbook*, which is located on our website at fallonhealth.org/navicare. Call Enrollee Services at the number at the bottom of the page to get a copy by mail. Key terms and their definitions appear in alphabetical order in the last chapter of your *Member Handbook*.

Additional resources

- This document is available for free in Khmer, Spanish, and Vietnamese. Other languages are available for free upon request.
- You can get this *Annual Notice of Change* for free in other formats, such as large print, braille, or audio. Call 1-877-700-6996 (TTY 711), from 8 a.m. to 8.p.m., Monday through Friday (7 days a week, Oct. 1 through March 31). The call is free.
- A member's preferred language, both written and spoken, or request for information in an alternate format is requested by the plan on each member's enrollment form. The member's language preference will be captured and stored in the plan's central operating system for all communications, so the members will not need to make a separate request each time.
- Enrolled members may change their preferred language or communications format by informing a member of their Interdisciplinary Care Team (ICT) or by calling NaviCare Enrollee Services at 1-877-700-6996 (TTY 711).

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If you have questions, please call NaviCare at 1-877-700-6996 (TTY 711), from 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.



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A. Disclaimers

- NaviCare 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.
- MassHealth is required by federal law to recover money from the estates of certain MassHealth 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 estate recovery, please visit mass.gov/info-details/massachusetts-medicaid-estate-recovery.

B. Reviewing your Medicare and MassHealth (Medicaid) coverage for next year

It's important to review your coverage now to make sure it will still meet your needs next year. If it doesn't meet your needs, you may be able to leave our plan. Refer to **Section D** for more information on changes to your benefits for next year.

If you choose to leave our plan, your membership will end on the last day of the month in which your request was made. You'll still be in the Medicare and MassHealth (Medicaid) programs as long as you're eligible.

If you leave our plan, you can get information about your:

- Medicare options in the table in **Section F2**.
- MassHealth (Medicaid) options and services in **Section F2**.

B1. Information about NaviCare HMO SNP

- Fallon Health is a health plan that contracts with both Medicare and MassHealth (Medicaid) to provide benefits of both programs to members.
- When this *Annual Notice of Change* says "we," "us," "our," or "our plan," it means NaviCare HMO SNP.

If you have questions, please call NaviCare at 1-877-700-6996 (TTY 711), from 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.



B2. Important things to do

- **Check if there are any changes to our benefits that may affect you.**
 - Are there any changes that affect the services you use?
 - Review benefit changes to make sure they'll work for you next year.
 - Refer to **Section D1** for information about benefit changes for our plan.
- **Check if there are any changes to our drug coverage that may affect you.**
 - Will your drugs be covered? Can you use the same pharmacies? Will there be any changes such as prior authorization, step therapy, or quantity limits?
 - Review changes to make sure our drug coverage will work for you next year.
 - Refer to **Section D2** for information about changes to our drug coverage.
- **Check if your providers and pharmacies will be in our network next year.**
 - Are your doctors, including your specialists, in our network? What about your pharmacy? What about the hospitals or other providers you use?
 - Refer to **Section C** for information about our *Provider and Pharmacy Directory*.
- **Think about your overall costs in the plan.**
 - How do the total costs compare to other coverage options?
- **Think about whether you're happy with our plan.**

If you decide to stay with NaviCare:

If you want to stay with us next year, it's easy – you don't need to do anything. If you don't make a change, you automatically stay enrolled in NaviCare HMO SNP.

If you decide to change plans:

If you decide other coverage will better meet your needs, you may be able to switch plans (refer to **Section F2** for more information). If you enroll in a new plan, or change to Original Medicare, your new coverage will begin on the first day of the following month.



If you have questions, please call NaviCare at 1-877-700-6996 (TTY 711), from 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.

C. Changes to our network providers and pharmacies

Our provider and pharmacy networks have changed for 2027.

Please review the 2027 Provider and Pharmacy Directory to find out if your providers (primary care provider, specialists, hospitals, etc.) or pharmacy are in our network. An updated *Provider and Pharmacy Directory* is located on our website at fallonhealth.org/navicare. You may also call Enrollee Services at the numbers at the bottom of the page for updated provider information or to ask us to mail you a *Provider and Pharmacy Directory*.

It's important that you know that we may also make changes to our network during the year. If your provider leaves our plan, you have certain rights and protections. For more information, refer to **Chapter 3** of your *Member Handbook* or call Enrollee Services at the number at the bottom of the page for help.

D. Changes to benefits for next year

D1. Changes to benefits for medical services

We're changing our coverage for certain medical services next year. The table below describes these changes.

	2026 (this year)	2027 (next year)
Diabetic self-management training, services, and supplies <i>(continued on the next page)</i>	Our preferred blood glucose monitors are Accu-Chek® glucose monitors and test strips (up to five test strips per day) manufactured by Roche. Plan members can obtain an Accu-Chek glucose monitor at network pharmacies.	Our preferred blood glucose monitors are Accu-Chek®, FreeStyle, and Precision glucose monitors and test strips (up to five test strips per day). Plan members can obtain an Accu-Chek glucose monitor at network pharmacies. Plan members can obtain a FreeStyle or Precision glucose monitor at network pharmacies by providing the pharmacy with the following information: RxBIN: 610020 Group #: 99992432 ID #: ERXMASSHEAL or by calling Abbott Diabetes Care at 1-866-224-8892 with Offer Code A35ABII0.

If you have questions, please call NaviCare at 1-877-700-6996 (TTY 711), from 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.



	2026 (this year)	2027 (next year)
Diabetic self-management training, services, and supplies, continued		Freestyle can also be ordered by signing up at ChooseFreeStyle.com with Offer Code A35ABII0.
Special Supplemental Benefits for the Chronically Ill	You pay \$0 for: • Use of \$200 per calendar quarter from the Save Now OTC funds designated for the purchase of Fallon Health-approved food and produce at network retailers. You pay all costs over \$200 per calendar quarter. • 100 one-way trips to non-emergent non-medical approved locations per year.	You pay \$0 for: • Use of \$375 per calendar quarter from the Save Now OTC funds designated for the purchase of Fallon Health-approved food and produce at network retailers. You pay all costs over \$375 per calendar quarter. • 100 one-way trips to non-emergent non-medical approved locations per year.
Medicare Part B prescription drugs <i>(continued on the next page)</i>	Step Therapy is required for the following Part B prescription drugs: • Avsola • Boruxu • Durolane • Ontruzant • Riabni • Treanda Step Therapy is <u>not</u> required for the following Part B prescription drugs: • Armlupeg • Avgemsi/Inlexzo • Bendeka/Belrapzo (Bendamustine Apotex/Baxter) • Bilprevda/Bildyos/Aukelso/Bosaya/Xtrenbo/Enoby/	Step Therapy is required for the following Part B prescription drugs: • Armlupeg • Avgemsi/Inlexzo • Bendeka/Belrapzo (Bendamustine Apotex/Baxter) • Bilprevda/Bildyos/Aukelso/Bosaya/Xtrenbo/Enoby/Boncresa/Oziltus/Osvyrti/Jubereq • Exdensur • Eydenzelt • Kanjinti • Nufymco • Paclitaxel • Pemetrexed dipotassium/Pemrydi • Stelara/Imuldosa/Yesintek/Pyzchiva/Selsardi/Otulf/Starjezma

If you have questions, please call NaviCare at 1-877-700-6996 (TTY 711), from 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.



	2026 (this year)	2027 (next year)
Medicare Part B prescription drugs, continued	Boncresa/Oziltus/Osvyrti/ Jubereq • Exdensur • Eydenzelt • Kanjinti • Nufymco • Paclitaxel • Pemetrexed dipotassium/Pemrydi • Stelara/Imuldosa/Yesintek/ Pyzchiva/Selsardi/Otulfi/ Starjezma • Trazimera	• Trazimera Step Therapy is not required for the following Part B prescription drugs: • Avsola • Boruxu • Durolane • Ontruzant • Riabni • Treanda

D2. Changes to drug coverage

Changes to our *Drug List*

Our *List of Covered Drugs* is also called the *Formulary* or *Drug List*. A copy of our *Drug List* is posted online at fallonhealth.org/navicare.

We made changes to our *Drug List*, which could include removing or adding drugs, changing drugs we cover and changes to the restrictions that apply to our coverage for certain drugs.

Review the *Drug List* to **make sure your drugs will be covered next year** and to find out if there are any restrictions.

Most of the changes in the *Drug List* are new for the beginning of each year. However, we might make other changes that are allowed by Medicare and/or the state that will affect you during the calendar year. We update our online *Drug List* at least monthly to provide the most up to date list of drugs. If we make a change that will affect a drug you're taking, we'll send you a notice about the change.

If you're affected by a change in drug coverage, we encourage you to:

- Work with your doctor (or other prescriber) to find a different drug that we cover.
 - You can call Enrollee Services at the numbers at the bottom of the page or contact your care coordinator to ask for a *List of Covered Drugs* that treat the same condition.

If you have questions, please call NaviCare at 1-877-700-6996 (TTY 711), from 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.



- This list can help your provider find a covered drug that might work for you.
- Work with your doctor (or other prescriber) and ask us to make an exception to cover the drug.
 - You can ask for an exception before next year, and we'll give you an answer within 72 hours after we get your request (or your prescriber's supporting statement).
 - To learn what you must do to ask for an exception, refer to **Chapter 8** of your *Member Handbook* or call Enrollee Services at the number at the bottom of the page.
 - If you need help asking for an exception, contact Enrollee Services or your Navigator. Refer to **Chapters 2 and 3** of your *Member Handbook* to learn more about how to contact your Navigator.
- Ask us to cover a temporary supply of the drug.
 - In some situations, we cover a **temporary** supply of the drug during the first 108 days of the calendar year.
 - This temporary supply is for up to 30 days. (To learn more about when you can get a temporary supply and how to ask for one, refer to **Chapter 5** of your *Member Handbook*.)
 - When you get a temporary supply of a drug, talk with your doctor about what to do when your temporary supply runs out. You can either switch to a different drug our plan covers or ask us to make an exception for you and cover your current drug.
 - Formulary exceptions can be requested at any time and are reviewed and approved throughout the course of the plan year. If you have a current approved formulary exception for a medicine, it will still be valid through its expiration date even if it's into a different plan year. If the expiration date is coming up and you still need the medicine, you and your provider will need to submit a new formulary exception request.



E. Administrative changes

The following administrative change will take effect on January 1, 2027, and will not affect your eligibility, enrollment, covered benefits, or covered services as a member of the plan.

	2026 (this year)	2027 (next year)
Your plan has a new plan benefit package (PBP) number with the Centers for Medicare & Medicaid Services (CMS).	Your plan's PBP number is 001.	Your plan's PBP number is 002.

F. Choosing a plan

F1. Staying in our plan

We hope to keep you as a plan member. You don't have to do anything to stay in our plan. Unless you sign up for a different Medicare plan or change to Original Medicare, you'll automatically stay enrolled as a member of our plan for 2027.

F2. Changing plans

Because you have Medicare and Medicaid (MassHealth), you can leave our plan by enrolling in another plan that covers all of your benefits, called a Dual Eligible Special Needs Plan (D-SNP). You can enroll in another D-SNP at any time during the year.

When you enroll in another D-SNP, your membership in our plan will end automatically. You don't need to call to disenroll.

If you want to switch to a different type of coverage you can end your membership in our plan during the following times each year:

- The **Open Enrollment Period**, which lasts from October 15 to December 7. If you choose a new plan during this period, your membership in our plan ends on December 31 and your membership in the new plan starts on January 1.
- The **Medicare Advantage (MA) Open Enrollment Period**, which lasts from January 1 to March 31. If you choose a new plan during this period, your membership in the new plan starts the first day of the next month.

If you have questions, please call NaviCare at 1-877-700-6996 (TTY 711), from 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.



There may be other situations when you're eligible to make a change to your enrollment. For example, when:

- you moved out of our service area,
- your eligibility for MassHealth (Medicaid) or Extra Help changed, **or**
- you recently moved into or are currently getting care in an institution (like a skilled nursing facility or a long-term care hospital). If you recently moved out of an institution, you can change plans or change to Original Medicare for two full months after the month you move out.

Your Medicare services

You have three options for getting your Medicare services listed below any month of the year. You have an additional option listed below during certain times of the year including the **Open Enrollment Period** and the **Medicare Advantage Open Enrollment Period** or other situations described in **Section F2**. By choosing one of these options, you automatically end your membership in our plan.



1. You can change to: Another plan that provides your Medicare and most or all of your MassHealth (Medicaid) benefits and services in one plan, also known as an integrated dual-eligible special needs plan (D-SNP) or a Program of All-inclusive Care for the Elderly (PACE) plan, if you qualify.	Here is what to do: Call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048 to enroll in a new integrated D-SNP. For Program of All-inclusive Care for the Elderly (PACE) inquiries, call 1-800-841-2900. If you need help or more information: • Call the SHINE Program (Serving Health Insurance Needs of Everyone) at 1-800-243-4636. TTY users may call 1-800-439-2370. For more information or to find a local SHINE office in your area, please visit mass.gov/info-details/serving-the-health-insurance-needs-of-everyone-shine-program. OR Enroll directly with a new integrated D-SNP. You'll automatically be disenrolled from our plan when your new plan's coverage begins.
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2. You can change to: Original Medicare with a separate Medicare drug plan	Here is what to do: Call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048 to enroll in Original Medicare with a separate Medicare drug plan. If you need help or more information: • Call the SHINE Program (Serving Health Insurance Needs of Everyone) at 1-800-243-4636. TTY users may call 1-800-439-2370. For more information or to find a local SHINE office in your area, please visit mass.gov/info-details/serving-the-health-insurance-needs-of-everyone-shine-program. OR Enroll in a new Medicare drug plan. You'll automatically be disenrolled from our plan when your Original Medicare coverage begins.
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3. You can change to: Original Medicare without a separate Medicare drug plan if you have a valid disenrollment reason NOTE: If you switch to Original Medicare and don't enroll in a separate Medicare drug plan, Medicare may enroll you in a drug plan, unless you tell Medicare you don't want to join. You should only drop drug coverage if you have drug coverage from another source, such as an employer or union. If you have questions about whether you need drug coverage, call the SHINE Program at 1-800-243-4636, Monday through Friday from 8 a.m. to 5 p.m. TTY users should call 1-800-439-2370. For more information or to find a local SHINE office in your area, please visit mass.gov/info-details/serving-the-health-insurance-needs-of-everyone-shine-program.	Here is what to do: Call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048 to enroll in Original Medicare. If you need help or more information: • Call SHINE Program (Serving Health Insurance Needs of Everyone) at 1-800-243-4636. TTY users should call 1-800-439-2370. You'll automatically be disenrolled from our plan when your Original Medicare coverage begins.
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4. You can change to: Any Medicare health plan during certain times of the year including the Open Enrollment Period and the Medicare Advantage Open Enrollment Period or other situations described in Section F2.	Here is what to do: Call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048 to enroll in a new Medicare plan. For Program of All-Inclusive Care for the Elderly (PACE) inquiries, call 1-800-841-2900. If you need help or more information: • Call the SHINE Program (Serving Health Insurance Needs of Everyone) at 1-800-243-4636. TTY users should call 1-800-439-2370. OR Enroll in a new Medicare plan. You're automatically disenrolled from our Medicare plan when your new plan's coverage begins.
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Your MassHealth (Medicaid) services

For questions about how to get your MassHealth (Medicaid) services after you leave our plan, contact the MassHealth Customer Service at 1-800-841-2900. TTY: 711 (for people who are deaf, hard of hearing, or speech disabled). You can call Monday through Friday, 8 a.m. to 5 p.m. Ask how joining another plan or returning to Original Medicare affects how you get your MassHealth (Medicaid) coverage.

G. Getting help

G1. Our plan

We're here to help if you have any questions. Call Enrollee Services at the number at the bottom of the page during the days and hours of operation listed. These calls are toll-free.

If you have questions, please call NaviCare at 1-877-700-6996 (TTY 711), from 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.



Read your *Member Handbook*

Your *Member Handbook* is a legal, detailed description of our plan's benefits. It has details about benefits for 2027. It explains your rights and the rules to follow to get services and drugs we cover.

The *Member Handbook* for 2027 will be available by October 15. An up-to-date copy of the *Member Handbook* is available on our website at fallonhealth.org/navicare. You may also call Enrollee Services at the number at the bottom of the page to ask us to mail you a *Member Handbook* for 2027.

Our website

You can visit our website at fallonhealth.org/navicare. As a reminder, our website has the most up-to-date information about our provider and pharmacy network (*Provider and Pharmacy Directory*) and our *Drug List (List of Covered Drugs)*.

G2. SHINE Program (Serving Health Insurance Needs of Everyone)

You can also call the state health insurance program (SHIP). In Massachusetts the SHIP is called the SHINE (Serving the Health Insurance Needs of Everyone). SHINE can help you understand your plan choices and answer questions about switching plans. SHINE isn't connected with us or with any insurance company or health plan. SHINE has trained counselors within every county of our service area and services are free. SHINE phone number is 1-800-243-4636. TTY (for people who are deaf, hard of hearing, or speech disabled): 1-800-439-2370 (Massachusetts only). For more information or to find a local SHINE office in your area, please visit mass.gov/shine-program.

G3. My Ombudsman

The Ombudsman Program can help you if you have a problem with our plan. The ombudsman's services are free and available in all languages. The Ombudsman Program:

- works as an advocate on your behalf. They can answer questions if you have a problem or complaint and can help you understand what to do.
- makes sure you have information related to your rights and protections and how you can get your concerns resolved.
- isn't connected with us or with any insurance company or health plan. The phone number for the Ombudsman Program is 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.

If you have questions, please call NaviCare at 1-877-700-6996 (TTY 711), from 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.



- Use Videophone (VP) 339-224-6831. This number is for people who are deaf or hard of hearing.
- Email info@myombudsman.org or contact My Ombudsman through its website at 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, setting up an appointment, and walk-in hours.

G4. Medicare

To get information directly from Medicare:

- call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048
- chat live at [Medicare.gov/talk-to-someone](https://www.Medicare.gov/talk-to-someone)
- write to Medicare at PO Box 1270, Lawrence, KS 66044.

Medicare's Website

You can visit the Medicare website ([Medicare.gov](https://www.Medicare.gov)). If you choose to disenroll from our plan and enroll in another Medicare plan, the Medicare website has information about costs, coverage, and quality ratings to help you compare plans.

You can find information about Medicare plans available in your area by using Medicare Plan Finder on Medicare's website. (For information about plans, refer to [Medicare.gov](https://www.Medicare.gov) and click on "Find plans.")

Medicare & You 2027

You can read the *Medicare & You 2027* handbook. Every year in the fall, this booklet is mailed to people with Medicare. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare. This handbook is also available in Spanish, Chinese, and Vietnamese.

If you don't have a copy of this booklet, you can get it at the Medicare website ([medicare.gov/Pubs/pdf/10050-medicare-and-you.pdf](https://www.Medicare.gov/Pubs/pdf/10050-medicare-and-you.pdf)) or by calling 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.



If you have questions, please call NaviCare at 1-877-700-6996 (TTY 711), from 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.

G5. MassHealth (Medicaid)

MassHealth (Medicaid) Customer Service can answer questions you may have about our plan and your options for getting your services. You can call MassHealth (Medicaid) Customer Service at 1-800-841-2900. TTY: 711 (for people who are deaf, hard of hearing, or speech disabled). You can call Monday through Friday, 8 a.m. to 5 p.m.

PRA Disclosure Statement According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1444. If you have comments or suggestions for improving this form, write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.



If you have questions, please call NaviCare at 1-877-700-6996 (TTY 711), from 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.