

Ascension
Complete

Welcome to Ascension Complete!


Member Welcome Session

Presented for Plan Year 2023

This Welcome Session is for new members of Ascension Complete, with the goal of helping our members understand their benefits and care.



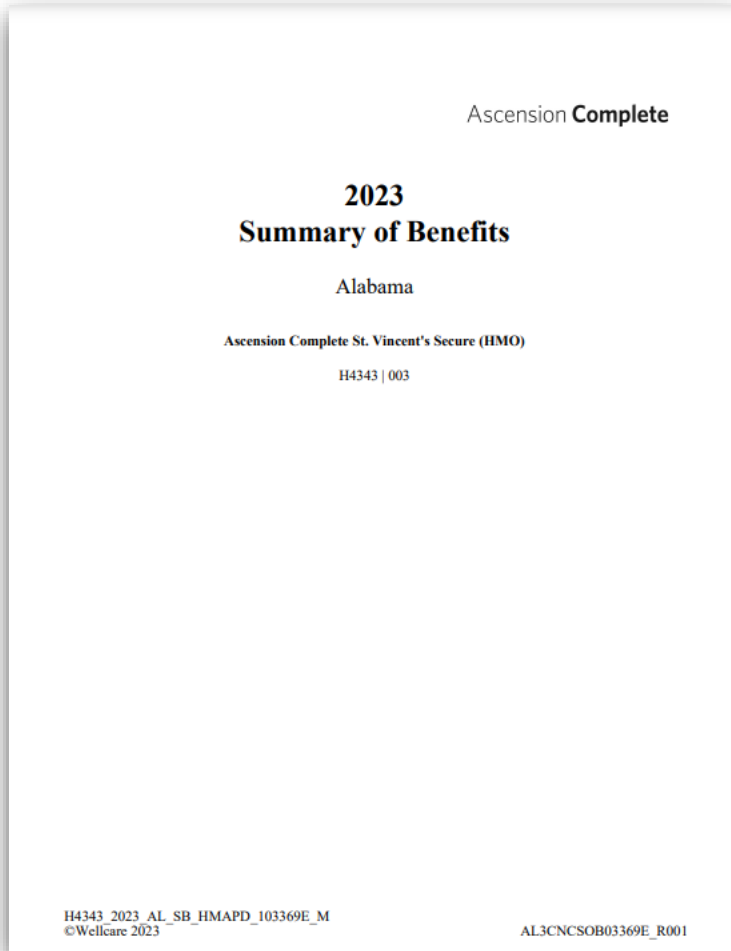
Goals of this presentation

-  Understanding Your Plan
-  Getting Started
-  Extra Benefits
-  Finding Answers



Understanding Your Plan

Your Plan Documents



Summary of Benefits (SB)

- Came with your pre-enrollment kit
- Easy to access on our website or from your Member Account
- Call the Member Services number on the back of your ID card to request one mailed to your home

AscensionComplete.com/PlanMaterials

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January 1 – December 31, 2023

Evidence of Coverage:

Your Medicare Health Benefits and Services and Prescription Drug Coverage as a Member of Ascension Complete Providence Reward (HMO)

This document gives you the details about your Medicare health care and prescription drug coverage from January 1 – December 31, 2023. **This is an important legal document. Please keep it in a safe place.**

For questions about this document, please contact Member Services at 1-833-623-0771 for additional information. (TTY users should call 711). Hours are: Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m.

This plan, Ascension Complete Providence Reward (HMO), is offered by Centene Venture Company Alabama Health Plan, Inc. (When this *Evidence of Coverage* says “we,” “us,” or “our,” it means Centene Venture Company Alabama Health Plan, Inc. When it says “plan” or “our plan,” it means Ascension Complete Providence Reward (HMO).)

We must provide information in a way that works for you (in audio, in braille, in large print, or other alternate formats, etc.). Please call Member Services if you need plan information in another format.

Benefits, deductibles, and/or copayments/coinsurance may change on January 1, 2024.

The formulary, pharmacy network, and/or provider network may change at any time. You will receive notice when necessary. We will notify affected enrollees about changes at least 30 days in advance.

This document explains your benefits and rights. Use this document to understand about:

- Your plan premium and cost sharing;
- Your medical and prescription drug benefits;
- How to file a complaint if you are not satisfied with a service or treatment;
- How to contact us if you need further assistance; and,
- Other protections required by Medicare law.

OMB Approval 0938-1051 (Expires: February 29, 2024)

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H4343002000

H4343_002_2023_AL_EOC_HMAPD_105819E_C

Evidence of Coverage (EOC)

- Your primary tool for copayments, exclusions, and limitations
- Easy to access on our website
- Call the Member Services number on the back of your ID card to request one mailed to your home

AscensionComplete.com/PlanMaterials



Member Welcome Kit

- Keep as a reference guide
- Includes glossary of terminology
- Full of educational material on how to use your plan
- If you didn't receive one by mail, call using the number on the back of your ID card to receive one by mail

Your ID Card

- You should have an ID card
- Take this card with you whenever you use services
- Print an ID card or request one from your Member Account (member portal)
- Or, call Member Services to request one to be mailed to you

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Via Christi Reward (HMO)
CMS#: H5398-001
Effective: 01/01/2021

MEMBER INFORMATION
Name: John Doe
Member ID#: C49212526-01
Issuer ID#: (89840) 9151014609

PHARMACY INFORMATION
MedicareRx
Prescription Drug Coverage
RX Claims Processor:
CVS Caremark®
RXBIN: 004336
RXPCN: MEDDADV
RXGRP: RX8922

PROVIDER INFORMATION
PCP Name: Doe, Jane
PCP Phone: 1-999-999-9999
PCP Office Visit: \$0

FOR MEMBERS
Member Services: 1-833-431-1356 (TTY: 711)
Website: AscensionComplete.com
Nurse Advice Line*: 1-877-236-0230 (TTY: 711)
Teladoc 24/7 Virtual Visit*: 1-800-835-2362 (TTY: 711)

FOR EMERGENCIES
Dial 911 or go to the
nearest Emergency
Room (ER).

FOR PROVIDERS
Medical eligibility & Prior Auth: 1-833-623-0771
Pharmacy Prior Auth: 1-800-867-6564
For help: (Pharmacy use only) 1-888-865-6567
Involve Dental with United Concordia National
Medicare Advntage Network*: 1-833-910-0117
Involve Vision*: 1-833-910-0117
*Please refer to your EOC for your extra covered benefits.

Submit Part D Drug
claims to:
Ascension Complete
Attn: Member
Reimbursement Dept.
P.O. Box 31577
Tampa, FL 33631-3577

MEDICAL CLAIMS

EDI Payor
ID: 68069

Ascension Complete Via Christi
Attn: Claims
P.O. Box 8050 Farmington, MO 63640-8050



Contact Information

- You should have a list of phone numbers with your ID card
- Put this on your refrigerator
- Lists how to reach all Ancillary Providers for your Extra Benefits

Explanation of Benefits (EOB)

- You'll receive an EOB every 2 weeks
- First page summarizes benefits used per statement
- Includes Claims summary for benefits used
- Closes with year-to-date summary and *How-to* document

Ascension Complete
PO BOX 10420

THIS IS NOT A BILL

Claims recently processed for:

Claims recently processed for:

Claims recently processed for:
Member Name: John Doe

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A guide to understanding your Explanation of Benefits (EOB)

Ascension Complete sends a summary of medical charges to members each month. This summary is called an Explanation of Benefits (EOB). EOBs are only sent if a member utilizes services the month prior. It is important to know that these documents are not invoices. They are intended to help you keep a record of what medical services were provided to you.

Each EOB will provide a Statement Period Overview on the first page (page 1). Page 2 includes useful information and instructions for reading the EOB, while page 3 contains information if you need to file an appeal. On page 4 (highlighted below) is where your outline of claims for the month begins.

1 Line Number - Service lines ending in 00 signify an original service line. Service lines ending in an odd number (01, 03, etc.) signify the money on the service line is being recouped. Service lines ending in an even number (02, 04, etc.) signify an adjusted service line.

2 Service Description - Each service you received from your provider begins with this.

3 Billed - The total amount that your provider billed your Ascension Complete Medicare Advantage plan for the service.

4 Allowed - This is the amount that Medicare allows the provider to charge for the service.

5 Disallowed - This amount is what Ascension Complete paid the provider for the service.

6 Copay and Coinsurance - If the service requires a copayment (copay) or Coinsurance, this is where you find the total paid of both cost shares for each service line number.

7 Deductible - If your plan requires a deductible, this is where we will indicate how much of this claim will require you to pay towards your deductible.

Y0020_21_21021FLY_C

In-network deductible	\$289.88	\$8,300.00	You have paid \$ 289.88
Out-of-network deductible	\$0.00	\$10,000.00	You have paid \$ 0.00

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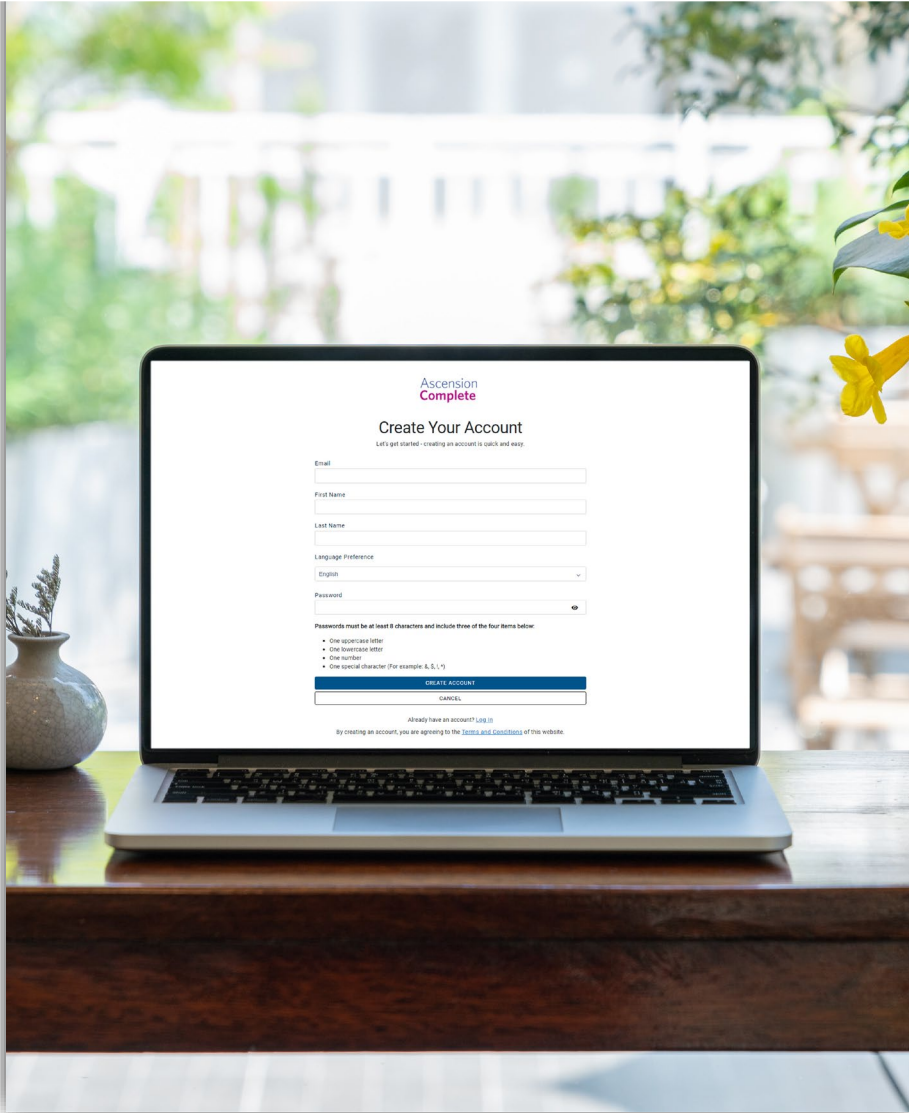
08/17/2020 THIS IS NOT A BILL



Getting Started

Create Your Online Account

- One of the first steps once eligible
- You can change your primary doctor
- You can print or request a replacement ID card
- eMail in secure environment
- Receive member newsletters, reminders to use benefits, and coming soon, online EOBs



Member.AscensionComplete.com

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Paying for Services

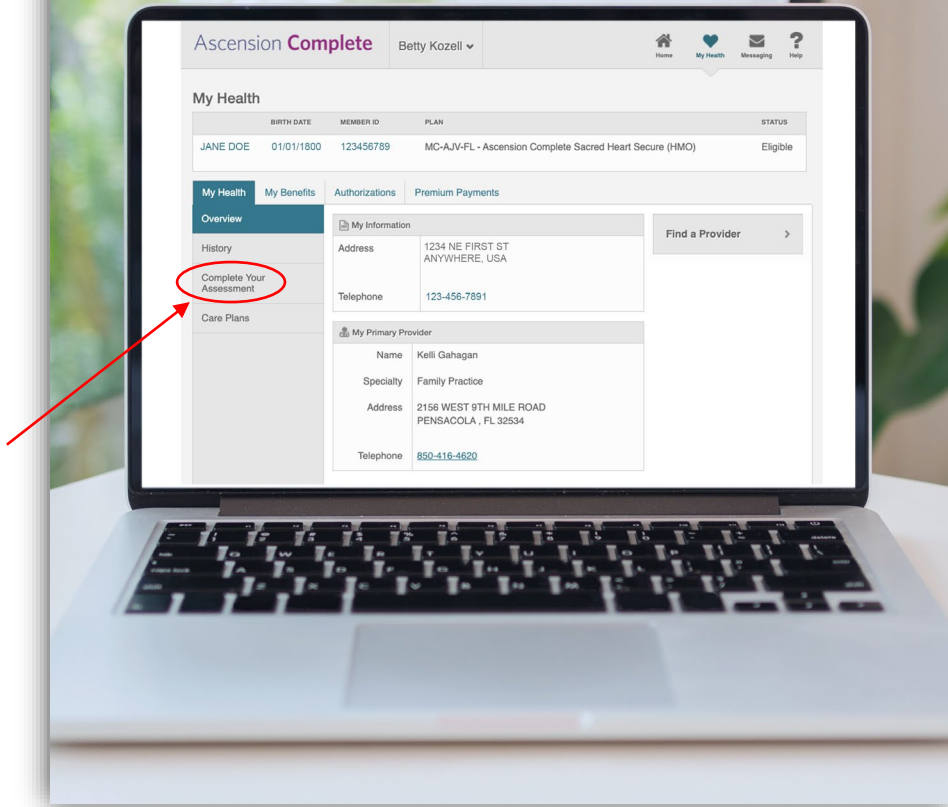
- If you have a monthly Part B premium, pay online, Social Security withhold, or send a check by mail
- Primary care visits, \$0
- Copays or Coinsurance for other services are paid at provider office
- Some plans have prescription drug deductibles



Member.AscensionComplete.com

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Your Health Risk Assessment (HRA)



- Personalized health care
- If not completed online, you will receive a telephone call from our Care Managers
- Notifies our Care Management team of current health conditions
- Offers the best member experience once completed

Member.AscensionComplete.com

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My Wellness Rewards

My Wellness Rewards provides gift cards for receiving specific services. When you receive one of the following services, you will earn funds that can be used for gift cards on the *My Wellness Rewards* website or mobile app*.

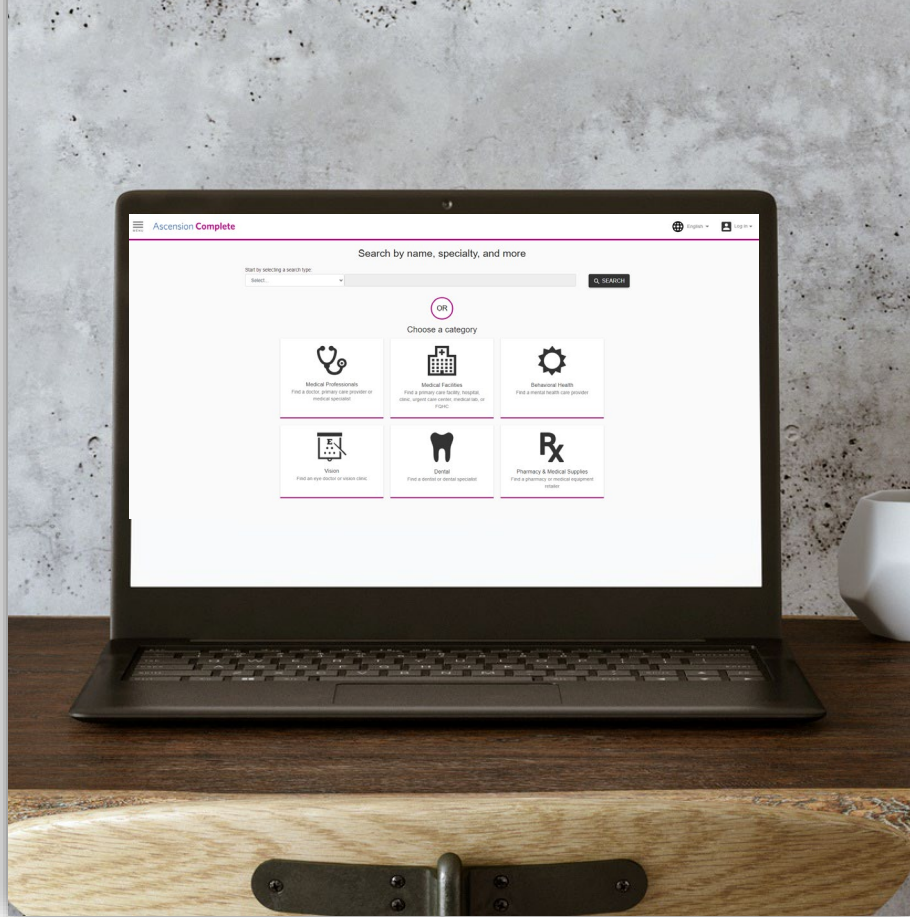
- \$25 for your Annual Wellness Visit
- \$15 for your Annual Flu Vaccine
- \$40 for Breast Cancer Screening
- \$25 for a Diabetes Eye Exam
- \$25 for Diabetic HbA1c Testing
- \$50 for Osteoporosis Management
- \$25 for your Colon Cancer Screening
- \$10 for digital registration
- \$10 per quarter for Online Engagement Learn and Earn activities

Dates of service and redemption of reward must be in the current plan year.

**For more information, go to AscensionComplete.com/Rewards*

Find-A-Doctor Tool

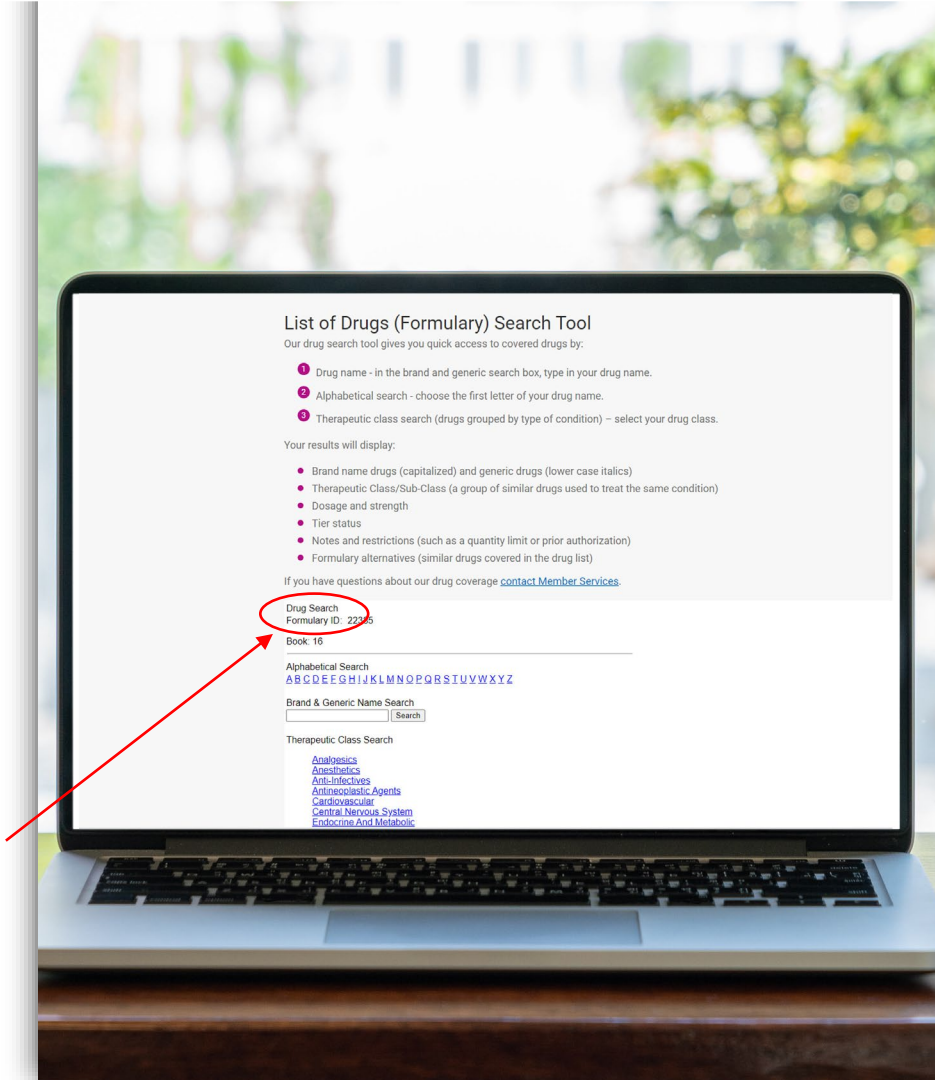
- Provides providers' *in-network* status
- Most up-to-date data source available
- Search physicians, specialists, facilities, dentists, optometrists, & pharmacies
- Call the Member Services number on the back of your ID card to have a printed version mailed to your home



AscensionComplete.com/FindADoctor

Formulary Drug Search Tool

- Search alphabetically, by name, or therapeutic drug class
- Most up-to-date data source available
- For assistance, or if you would like a Formulary Drug List mailed to your home, call the Member Services number on the back of your ID card



AscensionComplete.com/Formulary

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Options for Saving Money

- Use Preferred Pharmacies
- Mail-Order for Maintenance Drugs
- Use Tier 6 drugs
- Choose In-network providers
- Use Telehealth for Urgent Care
- Call the Nurse Advice Line for expert advice
- Use OTC benefit and other Extra Benefits



Extra Benefits



Meals after Hospitalizations*

- Must be discharged from hospital before accessing benefit
- Includes 3 meals per day, up to 14 days
- High-quality meals designed by dietitians
- Shipped in temperature-controlled cooler
- Freeze for up to 6 months
- Call the Member Services number on the back of your ID card to start the benefit

Not available on all benefit plans.

**Prior authorization may be required.*

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Silver & Fit Fitness Membership

- Must register on Silver & Fit website
- Sign-up for gym and Home Fitness Program
- Access to *Healthy Aging* online classes
- Online tools available, including *Silver & Fit Connected* app to track activity using wearable fitness device and earn rewards
- Print off your Silver & Fit identification card and take it with you to the gym

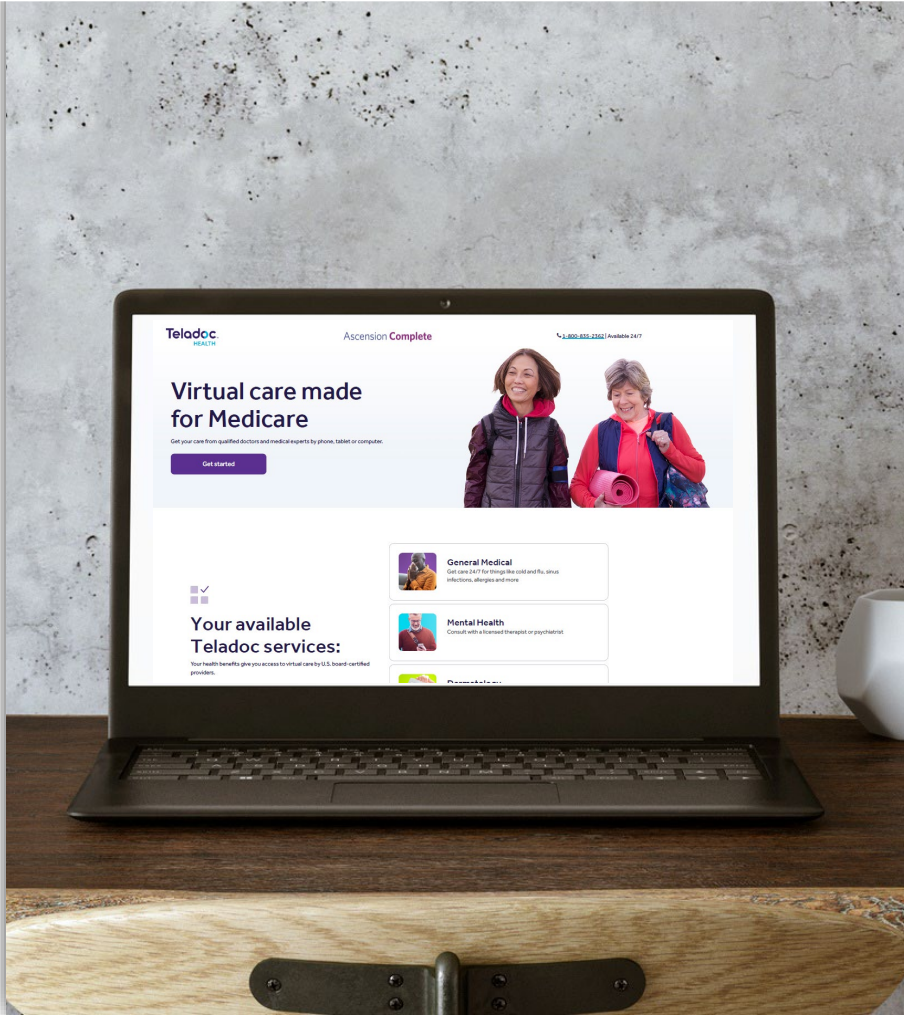


SilverandFit.com

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Telehealth or Virtual Visits

- Also called *Telemedicine*
- In-Network Providers
- For urgent care or non-emergency care
- Register in advance
- Used for mental health visits
- Tobacco Cessation

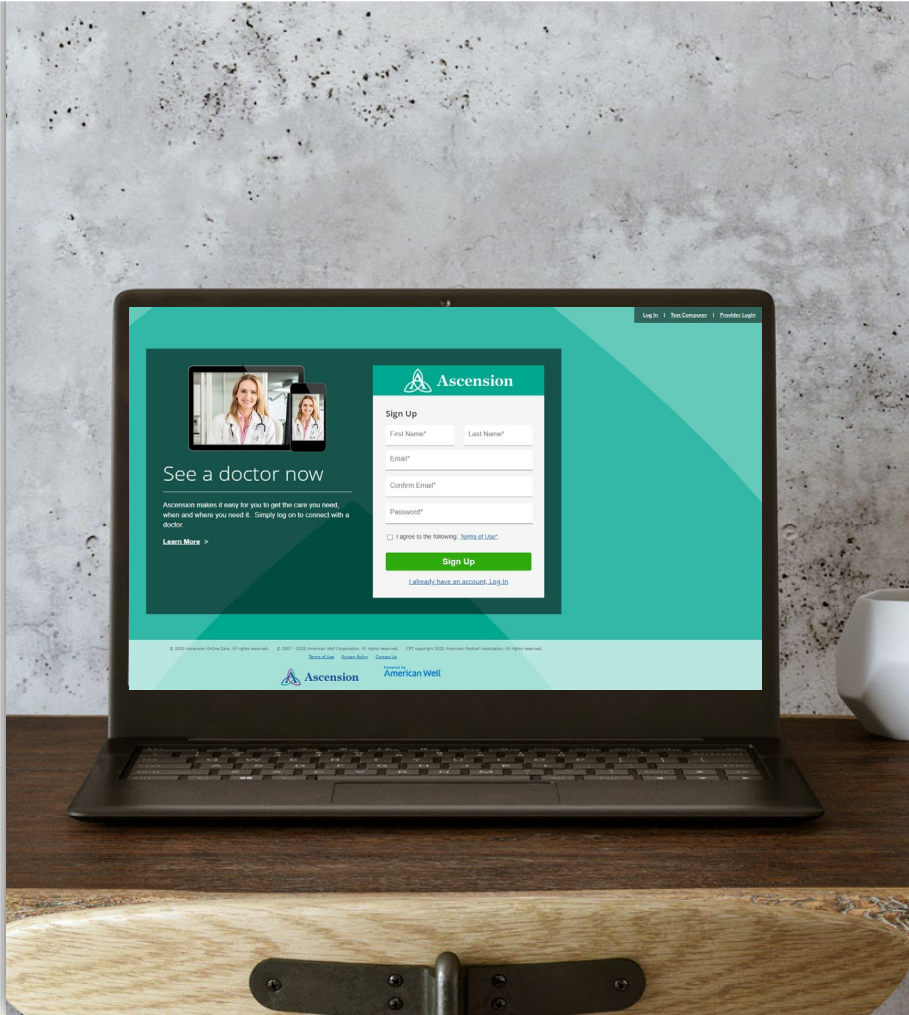


Teladoc.com/AscensionComplete

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Spiritual Care

- Compassionate, personalized care for body, mind, and soul
- Connect with professionally trained chaplain who will listen and offer spiritual guidance for the human spirit
- Helps in search for meaning and purpose
- Non-denominational
- Empowers you to find healing in-the-midst of life's struggles



AscensionOnlineCare.org

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Mail Order Pharmacy

- 90-day supply for \$0 copayment*
- Delivered from CVS Caremark® right to your front door
- Refill and renew prescriptions
- Get started by calling CVS Caremark® at 1-866-808-7471 (TTY: 711) 24 hours per day

Not available on all benefit plans.

**Tier 1, Tier 2, and Tier 6 medications only.*

**Must use Preferred Mail Order.*

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Support at the push of a button

Ascension Complete and VRI are working together to give you 24/7/365 support at no cost to you. With a personal emergency response system (PERS), you have a team available at the push of a button to help you stay safe, independent, and connected.

How PERS works



Press the button if you think you need help



A VRI representative will speak to you over the unit to confirm to make sure you need help



The representative will send appropriate assistance based on your preference, from a friend or family member to emergency responders

For more information or to enroll in this benefit:

- Visit AscensionPERS.com or
- Call 1-800-316-2273 (TTY: 711)
8 a.m. to 5 p.m. Monday-Friday to speak with a representative

Ascension **Complete** | **VRI**

v1.12/16/2021

Personal Emergency Response System (PERS)*

- Feel safe 24/7/365
- \$0 additional costs
- Administered by VRI
- Call 1-800-860-4230 (TTY: 711) to enroll from 8 a.m. to 5 p.m. Monday through Friday.

Not available on all benefit plans.

**May require Prior Authorization or specific medical criteria.*

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Acupuncture and Chiropractic Care

- For chronic low-back pain*
- Use network Chiropractors for the lowest out-of-pocket costs
- Copay or Coinsurance due at the time of each visit
- Please see EOC for exclusions and limitations

Not available on all benefit plans.

**Prior authorization may be required.*

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Transportation

- Check your Summary of Benefits for the number of trips on your plan
- Curb-to-curb transportation for plan-approved locations only
- Call the Member Services number on the back of your ID card to schedule a ride

Not available on all benefit plans.

Over-the-Counter (OTC) Benefit

- Catalog mailed with your Welcome Kit
- View Summary of Benefits for your quarterly allowance dollar amount
- Order by phone, online, or in some participating CVS stores
- Limited to 3 orders per quarter and some items may have limits
- Visit the website for a catalog or call the Member Services number on the back of your ID card to receive one by mail



[CVS.com/otchs/AscensionComplete](https://www.cvs.com/otchs/AscensionComplete)

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Not available on all benefit plans.

**Specific medical criteria required.*

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Special Supplemental Benefits for the Chronically Ill (SSBCI)*

- Extra benefits limited to Chronically Ill members
- Contact a Care Manager to learn more
- Must qualify to receive benefits, such as:
 - Financial help with utility bills
 - Extra help at home with Helper Bees
 - Companionship
 - Non-Medical Transportation to locations like grocery stores, fitness centers, barber and beauty shops, banking centers, worship centers or churches.

Benefits mentioned may be a part of Special Supplemental Benefits for the Chronically Ill. Not all members will qualify.

Flex Card*



- Annual Benefit amounts depend on your plan
- Helps offset and reduce out-of-pocket costs for dental, vision, and hearing
- Some plans have limitations for vision benefits
- Contact Member Services using number on the back of your ID card for more info
- Benefit must be used by end of year
- Use it or lose it
- Check your balance online

**Not available on all benefit plans.
AscensionComplete.com/flex-card*

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24-Hour Nurse Advice Line

- Available 24/7/365
- At no additional cost
- Always answered by a live representative
- Use when you have questions about treatment
- Use the Nurse Advice Line phone number on the back of your member ID card



Dental Benefits*

- Network available through Envolve Benefit Solutions
- Includes oral exam, cleanings, x-rays, and fluoride
- Use the Find-a-doctor tool to search for a dental provider
- Or call Member Services using the number on the back of your ID card

AscensionComplete.com/Dental

**Not available on all benefit plans.*

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Vision Benefits*

- One routine vision exam per calendar year
- Check your Summary of Benefits for annual benefit amount
- Includes lenses and contact lenses
- Use the Find-a-doctor tool to search for a vision provider
- Or call Member Services using the number on the back of your ID card

**Not available on all benefit plans.*



Hearing Benefits*

- Routine hearing exams and hearing aid evaluation
- Limited to one hearing aid per ear, per calendar year
- Select from a wide selection of fully digital hearing instruments
- Check your Summary of Benefits for annual allowance towards hearing aid equipment

**Not available on all benefit plans.*

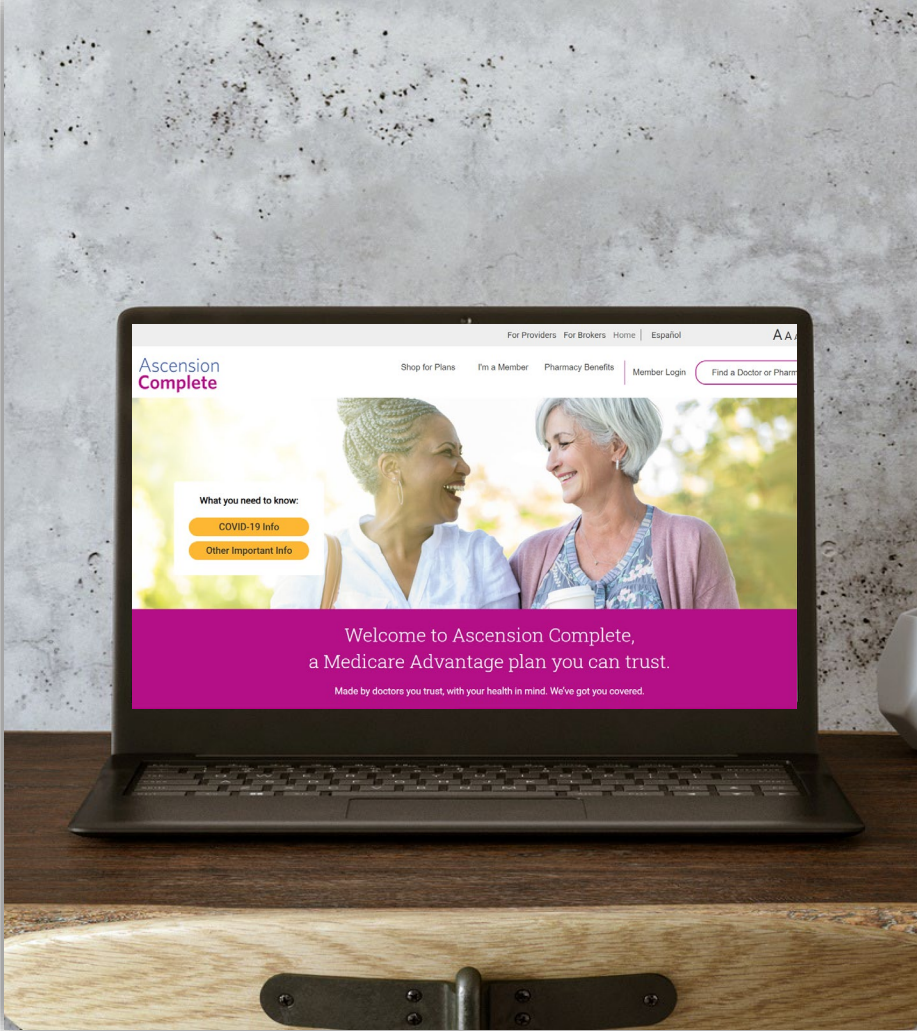
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Finding Answers

Our Website

- Access plan documents
- Find a doctor or pharmacy
- Check the formulary
- Logon to your Member Account
- Pay Part B Premium (if you have one)
- Access your Flex Card balance



AscensionComplete.com

Ascension **Complete**

We're just a phone call away.

ALABAMA

+ HMO, PPO

📞 1-833-623-0771

+ HMO D-SNP

📞 1-833-542-1677

FLORIDA

+ HMO, HMO-POS

📞 1-833-603-2971

+ HMO D-SNP

📞 1-833-542-1676

ILLINOIS

+ HMO

📞 1-833-293-5966

INDIANA

+ HMO, PPO

📞 1-833-525-0824

+ HMO D-SNP

📞 1-833-542-1679

KANSAS

+ HMO, PPO

📞 1-833-816-6623

MICHIGAN

+ HMO, PPO

📞 1-833-431-1356

+ HMO D-SNP

📞 1-833-542-1678

TENNESSEE

+ HMO, PPO

📞 1-833-906-2876

TEXAS

+ HMO, PPO

📞 1-833-705-1358

TTY FOR ALL OF THE ABOVE: 711

HOURS OF OPERATION

📅 **October 1 to March 31:** Monday-Sunday, 8 a.m. to 8 p.m.

📅 **April 1 to September 30:** Monday-Friday, 8 a.m. to 8 p.m.

Find us on 

 **YouTube**

Thank You!

Questions?