



WHAT YOU NEED TO KNOW: Medicare EnhanceSM

Thank you for your interest in **Medicare Enhance**.^{*} While Medicare remains your primary insurer, this plan complements your coverage by paying for Medicare Parts A and B deductibles and coinsurance. With Medicare Enhance:

- You can live anywhere in the United States as long as you are enrolled in Medicare Parts A and B.
- You can visit any doctor, hospital or other provider that accepts Medicare.
- You'll have coverage for emergency care anywhere in the country.

Eligibility

To be eligible for Medicare Enhance, you can live anywhere in the United States as long as you are a benefits-eligible employee or a retiree of an employer that offers this plan and you are enrolled in Medicare Parts A and B.

Depending on your employer's eligibility rules, your spouse may be able to join Medicare Enhance if he or she is also enrolled in Medicare Parts A and B. Check with your employer for more information.

Each year your employer has an open enrollment period when you choose your health benefits. If you're not eligible for Medicare Enhance during your employer's open enrollment period, you can become eligible to enroll on the date when you retire and sign up for Medicare Parts A and B.

^{*} This is a limited health benefit policy. Its benefits complement Medicare benefits and are not intended to cover all medical expenses.

Receiving care

Medicare Enhance is an indemnity plan. That means you can receive care from any doctor, hospital or other health care provider that accepts Medicare. You're not locked into a provider network and you don't have to choose a primary care provider, which means you're free to visit specialists for covered services. You don't need referrals or any kind of prior authorization from HPHC Insurance Company (HPHC).

After you enroll, you will receive a member identification (ID) card. **It will be important for you to show *both* your HPHC and Medicare ID cards whenever you visit the doctor, hospital or other providers.**

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Paying for services

Most providers will charge you a fixed copayment at the time of service for office visits and emergency room visits, and then bill Medicare directly for the balance of the claim. Some providers may bill you directly for the services after receiving Medicare's payment, and you will need to submit a claim to HPHC.

When you become a member, your Benefit Handbook will have more information about provider billing and submitting claims to HPHC. But if you need help or have questions, you can always call our Member Services department.

Please see the Schedule of Benefits for Medicare Enhance cost sharing and coverage amounts.

Emergency coverage throughout the country

In a medical emergency, go to the nearest emergency room or call 911 or another local emergency number. Emergency room visits are subject to a copayment that will be waived if you are admitted to the hospital. Medicare Enhance has you covered when you need emergency care anywhere in the country.



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** These savings programs are not insurance products. Rather, they are discounts for programs and services designed to keep members healthy and active. All programs subject to change without advance notice.

QUESTIONS?

- If you're not yet a member, call **(800) 848-9995** weekdays between 8:30 a.m. and 5 p.m.
- If you're already a member, call Member Services with questions at **(888) 333-4742**. Representatives are available Monday, Tuesday and Thursday from 8 a.m. to 6 p.m., Wednesday from 10 a.m. to 6 p.m. and Friday from 8 a.m. to 5:30 p.m.
- For TTY service, call **711**.

To learn more about us in general, visit www.harvardpilgrim.org.

For questions about Medicare, visit www.medicare.gov or call **(800) MEDICARE**. For TTY service, call **(877) 486-2048**.