

December [Date], 2013

Dear Provider:

Thank you for participating in the Amerivantage (Medicare Advantage) provider network. This year marks our sixth year providing health care services to elderly and disabled populations in Florida.

About our Amerivantage plans

We provide health care services to Medicare beneficiaries who are entitled to Part A and enrolled in Part B. Amerivantage refers to the Medicare Advantage Special Needs Plan (SNP) and Medicare Advantage Prescription Drug (MA-PD) plans we offer. All of our plans include Medicare Part D prescription drug coverage as well as supplemental benefits covering other health care services. Our SNP (described below) have additional eligibility requirements.

In Florida, we offer the Amerivantage Specialty + Rx plan to beneficiaries who are eligible for both Medicare and Medicaid benefits (dual eligibles) and enrolled in the following Medicare savings programs: Qualified Medicare Beneficiaries (QMB) and QMB Plus. We also offer the Amerivantage Classic + Rx plan, which includes supplemental benefits and copays for most services.

The new plan we are offering effective January 1, 2014, is Touch Plan (Institutional SNP only in Florida’s Broward and Miami/Dade counties). It’s an institutional SNP available to Medicare beneficiaries who either reside in nursing homes or require a nursing home level of care but reside in community settings. I-SNP benefits include Medicare and Part D-covered services and some supplemental benefits. The member is responsible for Medicare premiums, the plan premium and any Part A or B deductible unless the member has coverage for these under any Medicaid benefits he or she is eligible for. The Part D drug deductible is \$310, which could be covered by any Low-income Subsidy (LIS) the member is eligible for. This deductible is only applicable to tiers 2 through 5.

Florida counties where Amerivantage is offered

We offer Amerivantage plans in Broward, Hillsborough, Miami-Dade, Orange, Palm Beach, Pasco, Pinellas and Polk counties.

| 2014 Benefit Highlights | | |
|--|---|--|
| Benefit | Details | Vendors |
| Routine physical exams | Comprehensive physical exam with clinical review of body systems and appropriate laboratory services. | You may bill for one routine annual visit per year (e.g., 99385–99387, 99395–99397) with ICD-9 diagnosis code V70.0. |
| Personal emergency response system | Specialty + Rx and Classic + Rx only: System and monitoring equipment only; member must have a telephone landline. | Critical Signals Technologies (CST) |
| Preventive and comprehensive dental coverage | Specialty + Rx and I-SNP only: Two dental exams, two cleanings and one set of X-rays per year. Limited additional coverage is | DentaQuest |

| 2014 Benefit Highlights | | |
|---------------------------------|---|-------------------------------------|
| Benefit | Details | Vendors |
| | provided by the member's Medicaid benefit. Specialty + Rx only: Comprehensive dental services provided by the member's Medicaid benefit. | |
| Routine hearing services | One routine hearing exam per year <ul style="list-style-type: none"> • Specialty + Rx and I-SNP: a \$1,000 annual allowance for hearing aids. • Specialty + Rx only: Limited additional coverage is provided by the member's Medicaid benefit. | HearUSA |
| Over-The-Counter (OTC) items | Quarterly allowance for certain OTC items. Benefit rolls from quarter to quarter but not year to year: <ul style="list-style-type: none"> • Specialty + Rx and I-SNP only: \$50 quarterly allowance. • Specialty + Rx only: Limited additional coverage is provided by the member's Medicaid benefit. | DrugSource |
| Routine medical transportation | Specialty + Rx only: Limited additional coverage is provided by the member's Medicaid benefit. | LogistiCare |
| Weight management | Monthly membership. Participation in person at local facilities or online with no copayment. No food or meal preparation is included. | Weight Watchers |
| Silver Sneakers fitness program | Specialty + Rx and Classic + Rx only: Access to a network of fitness facilities. | Healthways (Silver Sneakers) |
| Part D prescription drugs | Generic coverage in the Part D coverage gap: <ul style="list-style-type: none"> • Specialty + Rx and I-SNP only: Coverage of Tier 1 drugs in the coverage gap at \$0 copayment. | Caremark |
| Telemonitoring | Coverage of in-home equipment and telecommunication technology to monitor specific health conditions. Telemonitoring services supplement care but do not replace face-to-face physician visits. | Critical Signals Technologies (CST) |

In addition to the benefits and services noted above, PCPs should conduct a Health Risk Assessment (HRA) for each Medicare member assigned to his/her panel on an annual basis. Please download the HRA from our website, complete it electronically, fax it to the number on page one and bill for the service. We will reimburse you \$200 for a properly completed HRA.

For more information about the 2014 Amerivantage benefits and market-specific details, refer to the 2014 Medicare Advantage provider manual online at providers.amerigroup.com/FL.

2014 Medicare enrollment process

- The Medicare Annual Enrollment Period (AEP) begins October 15 and ends December 7 of each year.
- The Medicare Advantage Disenrollment Period (MADP) begins January 1 and ends February 14 of each year. During the MADP, Medicare beneficiaries have the opportunity to disenroll from any Medicare Advantage plan and return to original Medicare and/or enroll in a stand-alone prescription drug plan (not offered by Amerigroup).
- The Initial Coverage Election Period: When a person first becomes eligible for Medicare hospital insurance (Part A) and medical insurance (Part B), he or she has a seven-month period to enroll in a Medicare Advantage plan. This usually happens around the person's 65th birthday.
- Special Election Period: The Centers for Medicare & Medicaid Services (CMS) identifies several circumstances when a person may change Medicare options outside of the annual or initial enrollment periods. For example, dual-eligible members can enroll in or disenroll from a Medicare Advantage plan at any time throughout the year.
- Special Needs Plan (SNP) enrollees may change Medicare Advantage plans at any time during the year with changes effective the first of the following month, subject to CMS approval.

Cost sharing

- In Florida, we partner with the state to process all Medicare cost-share amounts for services covered under the state SNP agreement. Cost sharing for covered services will be processed automatically in our system, so you do not have to bill the state. Please refer to the Explanation of Payment for all claims processed.
- You may not collect any additional payment from Amerivantage members other than those cost-sharing amounts specified in the members' plan Summary of Benefits.
- For dual-eligible members, you may not collect any amounts other than those permitted by the state Medicaid program or federal law.
- For dual-eligible members, federal law requires you to bill only the members' health plan or the state Medicaid agency for copayments or other cost-sharing amounts.

To keep you informed about Amerivantage plan updates, we will send monthly communications highlighting topics and resources. Let us know how we are doing and how we can better serve you by emailing your feedback to:

Michelle Moats
Manager of Provider Education
michelle.moats@amerigroup.com

If you have questions, please call our Dedicated Service Unit at 1-866-805-4589. We look forward to working with you for another successful year.

Sincerely,

Amerigroup Community Care