

December [TBD], 2013

Dear Provider:

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

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 plan (described below) has additional eligibility requirements.

In New Jersey, we offer the Amerivantage Specialty + Rx plan, a Medicare Advantage Dual-Eligible Special Needs Plan (D-SNP), which includes coverage of Medicaid- and Medicare-covered services under an agreement with the state of New Jersey. This plan is available to beneficiaries who are eligible for both Medicare and Medicaid benefits (dual eligibles) and enrolled in the following Medicare savings programs: Specified Low-Income Medicare Beneficiary Plus and Qualified Medicare Beneficiaries Plus. The Balance + Rx plan will no longer be offered as of January 1, 2014. Coverage for members currently enrolled in the plan will end on December 31, 2013.

New Jersey Counties where Amerivantage is offered:

We offer Amerivantage plans in Bergen, Burlington, Essex, Hudson, Middlesex, Monmouth, Ocean, Passaic, Somerset and Union counties.

2014 Plan Benefit Highlights			
Benefit	Details	Vendor	
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	System and monitoring equipment only.	Critical Signals Technologies (CST)	
Routine hearing services	Medicaid-covered routine hearing services	HearUSA	
Preventive and comprehensive dental coverage	 Two dental exams, two cleanings and one set of X-rays per year. Medicaid-covered preventive and comprehensive dental services. 	Healthplex	
Routine vision coverage	 One routine eye exam each year. Medicaid-covered eyeware and comprehensive dental services. 	Block Vision	

2014 Plan Benefit Highlights			
Benefit	Details	Vendor	
Over-The-Counter (OTC)	\$100 quarterly allowance for certain OTC	DrugSource	
items	items. Benefit rolls from quarter to quarter		
	but not year to year.		
Routine medical	Unlimited one-way trips per year for plan	Local contracted providers	
transportation	covered services with no copayment.		
Silver Sneakers fitness	Access to a network of fitness facilities.	Healthways	
program			
Weight management	Monthly membership. Participation in person	Weight Watchers	
	at local facilities or online with no		
	copayment. No food or meal preparation is		
	included.		
Part D prescription drugs	Coverage of all copays for Part D	Caremark	
	prescription drugs.		
Telemonitoring	Coverage of in-home equipment and	Critical Signals Technologies	
	telecommunication technology to monitor	(CST)	
	specific health conditions. Telemonitoring		
	services supplement care but do not replace		
	face-to-face physician visits.		

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 2014 benefits and market-specific details, please refer to the 2014 Medicare Advantage provider manual online at www.providers.amerigroup.com/NJ.

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 New Jersey, 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 according to state Medicaid rules 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 plan members other than those cost-sharing amounts specified in the members' plan Summary of Benefits.
- For dual-eligible members, you may only collect amounts 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
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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