



A member of SSM Health

## DeanCare Gold Enhanced (Cost) offered by Dean Health Plan Annual Notice of Changes for 2023

You are currently enrolled as a member of DeanCare Gold Basic. Next year, there will be changes to the plan's costs and benefits. ***Please see page 4 for a Summary of Important Costs, including Premium.***

This document tells about the changes to your plan. To get more information about costs, benefits, or rules please review the *Evidence of Coverage*, which is located on our website at [deancare.com/medicare](http://deancare.com/medicare). You may also call the Customer Care Center to ask us to mail you an *Evidence of Coverage*.)

- **If you wish to enroll in a Medicare Advantage health plan or Medicare prescription drug plan, you have from October 15 until December 7 to make changes to your Medicare coverage for next year. If you decide other cost plan coverage better meets your needs, you can switch cost plans anytime the cost plan is accepting members. You may also change to Original Medicare. For more information see Section 3.2 of this document.**

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### What to do now

#### 1. ASK: Which changes apply to you

- Check the changes to our benefits and costs to see if they affect you.
  - Review the changes to Medical care costs (doctor, hospital).
  - Think about how much you will spend on premiums, deductibles, and cost sharing.
- Check to see if your primary care doctors, specialists, hospitals and other providers will be in our network next year.
- Think about whether you are happy with our plan.

#### 2. COMPARE: Learn about other plan choices

- Check coverage and costs of plans in your area. Use the Medicare Plan Finder at [www.medicare.gov/plan-compare](http://www.medicare.gov/plan-compare) website or review the list in the back of your *Medicare & You 2023* handbook.
- Once you narrow your choice to a preferred plan, confirm your costs and coverage on the plan's website.

#### 3. CHOOSE: Decide whether you want to change your plan

- If you don't join another plan by December 7, 2022, you will stay in **DeanCare Gold Enhanced.**

- To change to a Medicare Advantage health plan or Medicare prescription drug plan, you can switch plans between October 15 and December 7. Your new coverage will start on **January 1, 2023**. This will end your enrollment with DeanCare Gold Basic.
- If you recently moved into, currently live in, or just moved out of an institution (like a skilled nursing facility or long-term care hospital), you can switch plans or switch to Original Medicare (either with or without a separate Medicare prescription drug plan) at any time.

### **Additional Resources**

- Please contact the Customer Care Center number toll-free at 1-888-422-3326 for additional information. (TTY users should call 711.) Hours are 8 am to 8 pm, seven days per week. However, please note that our automated phone system may answer your call during all Federal holidays and weekends from April 1 to September 30. Please leave your name and telephone number, and we'll call you back by the end of the next business day.
- The Customer Care Center has free language interpreter services available for non-English speakers.
- This information is available for free in other formats. Please call the Customer Care Center if you need plan information in another format. ).

### **About DeanCare Gold Enhanced**

- DeanCare Gold is a Cost plan with a Medicare contract. Enrollment in DeanCare Gold depends on contract renewal.
- When this document says “we,” “us,” or “our,” it means Dean Health Plan. When it says “plan” or “our plan,” it means DeanCare Gold Enhanced.

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## **Annual Notice of Changes for 2023 Table of Contents**

<b>Summary of Important Costs for 2023 .....</b>	<b>4</b>
<b>SECTION 1 Unless You Choose Another Plan, You Will Be Automatically Enrolled in DeanCare Gold Enhanced in 2023 .....</b>	<b>5</b>
<b>SECTION 2 Changes to Benefits and Costs for Next Year .....</b>	<b>5</b>
Section 2.1 – Changes to the Monthly Premium .....	5
Section 2.2 – Changes to the Provider Network.....	5
Section 2.3 – Changes to Benefits and Costs for Medical Services .....	6
<b>SECTION 3 Deciding Which Plan to Choose .....</b>	<b>8</b>
Section 3.1 – If you want to stay in DeanCare Gold Enhanced.....	8
Section 3.2 – If you want to change plans .....	9
<b>SECTION 4 Deadline for Changing Plans.....</b>	<b>10</b>
<b>SECTION 5 Programs That Offer Free Counseling about Medicare .....</b>	<b>10</b>
<b>SECTION 6 Programs That Help Pay for Prescription Drugs .....</b>	<b>11</b>
<b>SECTION 7 Questions?.....</b>	<b>12</b>
Section 7.1 – Getting Help from DeanCare Gold Enhanced .....	12
Section 7.2 – Getting Help from Medicare.....	12

## Summary of Important Costs for 2023

The table below compares the 2022 costs and 2023 costs for DeanCare Gold Enhanced in several important areas. **Please note this is only a summary of costs.**

Cost	2022 (this year)	2023 (next year)
<b>Monthly plan premium</b> See Section 2.1 for details. (You must also continue to pay your Medicare Part B premium.)	\$139	\$157
<b>Doctor office visits</b>	<b>Primary care visits:</b> You pay \$0 copay per visit  <b>Specialist visits:</b> You pay \$0 copay per visit	<b>Primary care visits:</b> You pay \$0 copay per visit  <b>Specialist visits:</b> You pay \$0 copay per visit
<b>Inpatient hospital stays</b>	You pay \$0 per stay	You pay \$0 per stay

## **SECTION 1 Unless You Choose Another Plan, You Will Be Automatically Enrolled in DeanCare Gold Enhanced in 2023**

On January 1, 2023, Dean Health Plan will be combining DeanCare Gold Basic with one of our plans, DeanCare Gold Enhanced. The information in this document tells you about the differences between your current benefits in DeanCare Gold Basic and the benefits you will have on January 1, 2023 as a member of DeanCare Gold Enhanced.

**If you do nothing by December 31, 2022, we will automatically enroll you in our DeanCare Gold Enhanced.** You have choices about how to get your Medicare coverage. If you want to change to a different cost plan you may do so anytime the cost plan is accepting members. If you want to change plans, you can do so between October 15 and December 7. If you want to change to Original Medicare, you may do so at any time. If you are eligible for Extra Help, you may be able to change plans during other times.

## **SECTION 2 Changes to Benefits and Costs for Next Year**

### **Section 2.1 – Changes to the Monthly Premium**

<b>Cost</b>	<b>2022 (this year)</b>	<b>2023 (next year)</b>
<b>Monthly premium</b> (You must also continue to pay your Medicare Part B premium.)	\$139	\$157

### **Section 2.2 – Changes to the Provider Network**

Updated directories are located on our website at [deancare.com/medicare](https://deancare.com/medicare). You may also call the Customer Care Center for updated provider information or to ask us to mail you a *directory*.

There are changes to our network of providers for next year. **Please review the 2023 Provider Directory to see if your providers (primary care provider, specialists, hospitals, etc.) are in our network.**

It is important that you know that we may make changes to the hospitals, doctors and specialists (providers) that are part of your plan during the year. If a mid-year change in our providers affects you, please contact the Customer Care Center so we may assist.

## Section 2.3 – Changes to Benefits and Costs for Medical Services

We are making changes to costs and benefits for certain medical services next year. The information below describes these changes.

Cost	2022 (this year)	2023 (next year)
Screening for lung cancer with low dose computed tomography (LDCT)	Eligible members are aged 55 – 77 with 30 pack-year history of smoking.	Eligible members are aged 50 – 77 with 20 pack-year history of smoking.
Chiropractic Services: Routine Care	Not Covered	You pay \$0 copay per visit
Dental: Preventive Oral Exam	Not Covered	You pay \$0 copay per visit for 2 visits every calendar year
Dental: Preventive Prophylaxis (Cleaning)	Not Covered	You pay \$0 copay per visit for 2 visits every calendar year
Dental: Preventive X-Ray	Not Covered	You pay \$0 copay per visit for 1 visit every calendar year
Dental: Maximum Plan Benefit Coverage Amount	Not Applicable	We cover up to \$300 every calendar year for dental services
Dental: Comprehensive Non-Routine Services	Not Covered	You pay 50% coinsurance

<b>Cost</b>	<b>2022 (this year)</b>	<b>2023 (next year)</b>
Dental: Comprehensive Diagnostic Services	Not Covered	You pay 50% coinsurance
Dental: Comprehensive Restorative Services	Not Covered	You pay 50% coinsurance
Dental: Comprehensive Periodontics	Not Covered	You pay 50% coinsurance
Dental: Comprehensive Extractions	Not Covered	You pay 50% coinsurance
Dental: Comprehensive Endodontics	Not Covered	You pay 50% coinsurance
Dental: Comprehensive Prosthodontics, Other Oral/Maxillofacial Surgery, Other Services	Not Covered	You pay 50% coinsurance
Hearing Services: Routine Hearing Exam	Not Covered	You pay \$0 copay per visit for 1 visit every calendar year
Hearing Services: Hearing Aid Fitting / Evaluation	Not Covered	You pay \$0 copay per visit for 1 visit every 3 years
Hearing Services: Hearing Aid Allowance	Not Covered	You pay \$0 copay  We pay up to \$500 both ears combined every 3 years for hearing aids

Cost	2022 (this year)	2023 (next year)
In-Home Support	Not Covered	You pay \$0 copay per visit for 60 hours yearly
Meal Benefit	Not Covered	You receive 14 meals after a hospital stay at no cost to you
Vision Care: Routine Eye Exam	Not Covered	You pay \$0 copay per exam for 1 exam every calendar year
Vision Care: Eyewear Allowance	Not Covered	We cover \$250 every 2 years
Worldwide Emergency Coverage	Not Covered	You pay 20% coinsurance  Lifetime Limit for Worldwide Care services: \$50,000
Worldwide Urgent Coverage	Not Covered	You pay 20% coinsurance

## SECTION 3 Deciding Which Plan to Choose

### Section 3.1 – If you want to stay in DeanCare Gold Enhanced

**To stay in our plan, you don't need to do anything.** If you do not sign up for a different Medicare health plan or change to Original Medicare by December 7, you will automatically be enrolled in our DeanCare Gold Enhanced.



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## Section 3.2 – If you want to change plans

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We hope to keep you as a member next year but if you want to change plans for 2023 follow these steps:

### Step 1: Learn about and compare your choices

- You can join a different Medicare health plan,
- – *OR* – You can change to Original Medicare. If you change to Original Medicare, you will need to decide whether to join a Medicare drug plan if you don't already have one. If you do not enroll in a Medicare drug plan, there may be a potential Part D late enrollment penalty.

To learn more about Original Medicare and the different types of Medicare plans, use the Medicare Plan Finder ([www.medicare.gov/plan-compare](http://www.medicare.gov/plan-compare)), read the *Medicare & You 2023* handbook, call your State Health Insurance Assistance Program (SHIP) (see Section 5), or call Medicare (see Section 7.2).

As a reminder, Dean Health Plan offers other Medicare health plans. These other plans may differ in coverage, monthly premiums, and cost-sharing amounts.

### Step 2: Change your coverage

- To change to a **different Medicare health plan**, enroll in the new plan. You will automatically be disenrolled from DeanCare Gold Enhanced.
- To **add a Medicare prescription drug plan or change to a different drug plan**, enroll in the new drug plan. You will continue to receive your medical benefits from DeanCare Gold Enhanced.
- To **change to Original Medicare with a prescription drug plan**, you must enroll in the new drug plan and ask to be disenrolled from DeanCare Gold Enhanced. Enrolling in the new drug plan will not automatically disenroll you from DeanCare Gold Enhanced. To disenroll from DeanCare Gold Enhanced you must *either*:
  - Send us a written request to disenroll. Contact the Customer Care Center if you need more information on how to do so.
  - – *or* – Contact **Medicare**, at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week, and ask to be disenrolled. TTY users should call 1-877-486-2048.
- To **change to Original Medicare without a prescription drug plan**, you must either:
  - Send us a written request to disenroll. Contact the Customer Care Center if you need more information on how to do so.
  - – *or* – Contact **Medicare**, at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week, and ask to be disenrolled. TTY users should call 1-877-486-2048.

## SECTION 4 Deadline for Changing Plans

If you want to change to a different type of plan, like a Medicare Advantage plan, or make a change to your prescription drug coverage for next year, you can do it from **October 15 until December 7**. The change will take effect on January 1, 2023.

If you want to change to a different cost plan, you can do so anytime the plan is accepting members. The new plan will let you know when the change will take effect.

If you want to disenroll from our plan and have Original Medicare for next year, you can make the change up to December 31. The change will take effect on January 1, 2023.

### Are there other times of the year to make a change?

In certain situations, changes are also allowed at other times of the year. Examples include people with Medicaid, those who get “Extra Help” paying for their drugs, and those who move out of the service area.

If you recently moved into, currently live in, or just moved out of an institution (like a skilled nursing facility or long-term care hospital), you can change your Medicare coverage **at any time**. You can change to any other Medicare health plan (either with or without Medicare prescription drug coverage) or switch to Original Medicare (either with or without a separate Medicare prescription drug plan) at any time.

## SECTION 5 Programs That Offer Free Counseling about Medicare

The State Health Insurance Assistance Program (SHIP) is an independent government program with trained counselors in every state. The State Health Insurance Assistance Program in your area is:

- Wisconsin: Board on Aging and Long Term Care (BOALTC)

It is a state program that gets money from the Federal government to give **free** local health insurance counseling to people with Medicare.

SHIP counselors can help you with your Medicare questions or problems. They can help you understand your Medicare plan choices and answer questions about switching plans. Call them or learn more by visiting their website:

Method	Wisconsin SHIP: Board on Aging and Long Term Care– Contact Information
CALL	1-800-242-1060

Method	Wisconsin SHIP: Board on Aging and Long Term Care– Contact Information
<b>WRITE</b>	State of Wisconsin - Board on Aging & Long Term Care 1402 Pankratz Street, Suite 111 Madison, Wisconsin 53704-4001
<b>WEBSITE</b>	<a href="http://longtermcare.wi.gov">http://longtermcare.wi.gov</a>

## SECTION 6 Programs That Help Pay for Prescription Drugs

You may qualify for help paying for prescription drugs. Below we list different kinds of help:

- **“Extra Help” from Medicare.** People with limited incomes may qualify for “Extra Help” to pay for their prescription drug costs. If you qualify, Medicare could pay up to 75% or more of your drug costs including monthly prescription drug premiums, annual deductibles, and coinsurance. Additionally, those who qualify will not have a coverage gap or late enrollment penalty. To see if you qualify, call:
  - 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048, 24 hours a day/7 days a week;
  - The Social Security Office at 1-800-772-1213 between 8 am and 7 pm, Monday through Friday for a representative. Automated messages are available 24 hours a day. TTY users should call 1-800-325-0778 or
  - Your State Medicaid Office (applications).
- **Help from your state’s pharmaceutical assistance program.** Wisconsin has a program called Wisconsin Senior Care that helps people pay for prescription drugs based on their financial need, age or medical condition. To learn more about the program, check with your State Health Insurance Assistance Program.
- **Prescription Cost-sharing Assistance for Persons with HIV/AIDS.** The AIDS Drug Assistance Program (ADAP) helps ensure that ADAP-eligible individuals living with HIV/AIDS have access to life-saving HIV medications. Individuals must meet certain criteria, including proof of State residence and HIV status, low income as defined by the State, and uninsured/under-insured status. Medicare Part D prescription drugs that are also covered by ADAP qualify for prescription cost-sharing assistance through the State AIDS/HIV Drug Assistance Program. For information on eligibility criteria, covered drugs, or how to enroll in the program, please call your State ADAP office listed below.

<b>Method</b>	<b>Wisconsin: Wisconsin AIDS/HIV Drug Assistance Program (ADAP) – Contact Information</b>
<b>CALL</b>	1-800-991-5532 Hours of operation are 8 am to 5 pm Monday through Friday
<b>WRITE</b>	Wisconsin AIDS/HIV Drug Assistance Program 1 West Wilson St, Madison, WI 53703
<b>WEBSITE</b>	<a href="http://www.dhs.wisconsin.gov/hiv/adap.htm">www.dhs.wisconsin.gov/hiv/adap.htm</a>

## SECTION 7 Questions?

### Section 7.1 – Getting Help from DeanCare Gold Enhanced

Questions? We're here to help. Please call the Customer Care Center 1-888-422-3326 toll-free. TTY only, call 711. We are available for phone calls from 8 am to 8 pm. However, please note that our automated phone system may answer your call during all Federal holidays and weekends from April 1 to September 30. Please leave your name and telephone number, and we'll call you back by the end of the next business day. Calls to 1-888-422-3326 and TTY 711 are free.

#### **Read your 2023 Evidence of Coverage (it has details about next year's benefits and costs)**

This *Annual Notice of Changes* gives you a summary of changes in your benefits and costs for 2023. For details, look in the 2023 *Evidence of Coverage* for DeanCare Gold Enhanced. The *Evidence of Coverage* is the legal, detailed description of your plan benefits. It explains your rights and the rules you need to follow to get covered services and prescription drugs. The *Evidence of Coverage* is located on our website at [deancare.com/medicare](http://deancare.com/medicare). You may also call the Customer Care Center for information or to ask us to mail you an *Evidence of Coverage*.

#### **Visit our Website**

You can also visit our website at [deancare.com/medicare](http://deancare.com/medicare). As a reminder, our website has the most up-to-date information about our provider network (*Provider Directory*).

### Section 7.2 – Getting Help from Medicare

To get information directly from Medicare:

#### **Call 1-800-MEDICARE (1-800-633-4227)**

You can call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

**Visit the Medicare Website**

Visit the Medicare website ([www.medicare.gov](http://www.medicare.gov)). It has information about cost, coverage, and quality Star Ratings to help you compare Medicare health plans in your area. (To view the information about plans, go to [www.medicare.gov/plan-compare](http://www.medicare.gov/plan-compare)).

**Read *Medicare & You 2023***

Read the *Medicare & You 2023* handbook. Every fall, this document 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. If you don't have a copy of this document, you can get it at the Medicare website (<https://www.medicare.gov/Pubs/pdf/10050-medicare-and-you.pdf>) or by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.