



# 2020 Plan Overview

Tufts Health Plan Senior Care Options (HMO-SNP)



**Extra Care at No Cost**

for individuals 65 and older with MassHealth Standard

# Welcome

## Thank you for your interest in Tufts Health Plan Senior Care Options (HMO-SNP).

Whether you are looking to learn more about our plan for yourself or for a loved one, this guide will provide you with all of the information you'll need to get started.

### Speak with a representative today.



**1-866-974-0081 (TTY: 711)\***

\*7 days a week, 8 a.m.–8 p.m. (Apr. 1–Sep. 30: Mon.–Fri., 8 a.m.–8 p.m.)

Representatives are also available for in-home consultations.

### Explore our plan benefits online.



**[www.thpmp.org/sco](http://www.thpmp.org/sco)**

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# Experience Top-Rated Care and Support

## What is Tufts Health Plan Senior Care Options?

Tufts Health Plan Senior Care Options is a nationally recognized health plan for individuals ages 65 or older who qualify for MassHealth Standard (Medicaid).

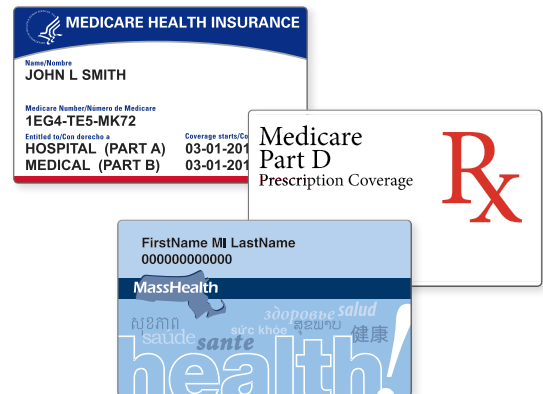
## Why choose Tufts Health Plan Senior Care Options?

As the only Senior Care Options (SCO) plan in Massachusetts to receive 5 out of 5 Stars from Medicare, we know what it takes to keep our members happy and healthy.

As a member, you'll receive:

- More covered health benefits than MassHealth Standard and Original Medicare alone, all for \$0.
- A primary care team to monitor your health needs and provide necessary treatments.
- A Care Manager to work with you AND your doctor, caregiver(s), and community to get you the services you need.
- Access to multilingual representatives and interpreter services.
- Plus all of the 2020 benefits listed on page 4 and more!

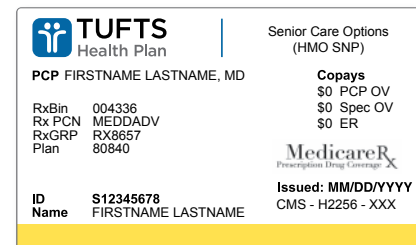
Get all the care you need  
with just ONE card!



## Who can enroll?

In order to enroll, individuals must be<sup>1</sup>:

- Age 65 or older.
- Eligible for MassHealth Standard.
- A Massachusetts resident living in our service area.<sup>2</sup>
- Not diagnosed with end-stage renal disease.



# Enjoy Extra Health Benefits—All For \$0



**Up to \$420/year** on Instant Savings card to purchase health care supplies, including bandages, toothbrushes, pain relievers, and more.

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**Up to \$100/year** on DailyCare+ card to purchase personal health and hygiene products, including shampoo, deodorant, toilet paper, and more.

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**Free** covered prescription drugs and over-the-counter (OTC) medications.

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**Free** dental exams, dentures, root canals, implants, crowns, and more.<sup>3</sup>

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**Free** rides to and from your medical appointments, plus 12 non-medical rides per year.<sup>4</sup>

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**Free** annual vision exam, with up to \$300 eyewear allowance.

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**Free** shower chairs, grab bars, and other supportive products for the home.

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**Free** protective underwear, pads, catheters, and other disposable medical supplies.

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Up to three (3) **free** pairs of therapeutic custom molded shoes for members with diabetes per year.

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**Free** routine hearing exams and hearing aids.

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**Free** primary care and specialist visits, plus emergency coverage available worldwide.

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**\$200 per year** for Weight Management Programs such as Weight Watchers®, Jenny Craig®, or other hospital based programs.

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**Free** membership to your local Massachusetts YMCA facility, plus a **\$200/year** wellness allowance to use on fitness classes, to buy a fitness tracker, and more.<sup>5</sup>

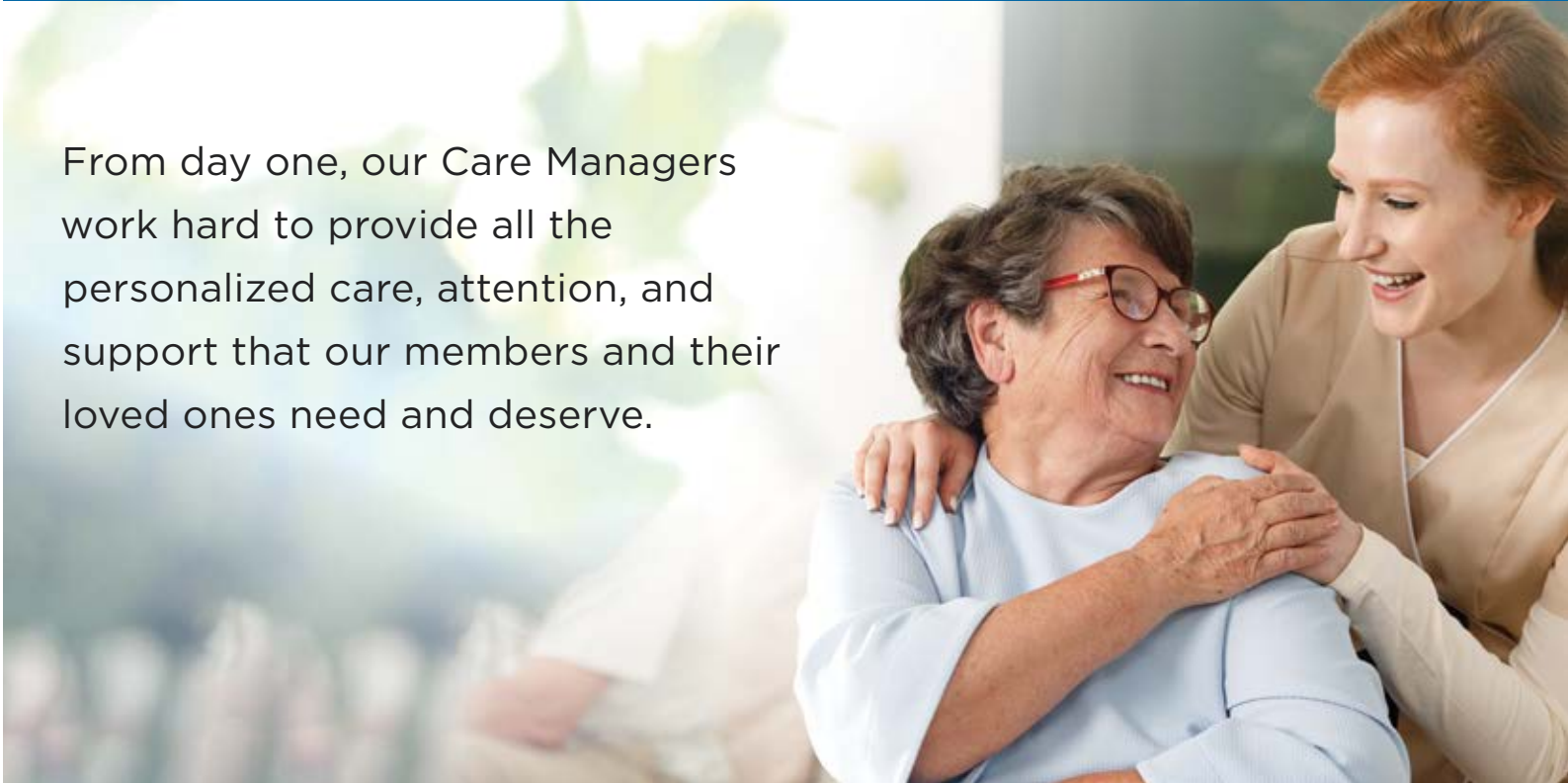
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**Free** acupuncture visits for pain management services—up to 20 per year.<sup>6</sup>

# Supporting Members From the Start

From day one, our Care Managers work hard to provide all the personalized care, attention, and support that our members and their loved ones need and deserve.



## Care Managers work to:

- ▶ Help you access your benefits and explain your coverage.
- ▶ Work with your doctors to design a care plan specific to your health needs and goals.
- ▶ Assist with the management of your medications.
- ▶ Help monitor health conditions like diabetes and heart disease.
- ▶ Coordinate services like home-delivered meals.
- ▶ Provide in-home safety assessments.
- ▶ Discuss treatment options and answer your questions.
- ▶ And much more!

# What Our Members Say



“Jean, my [Tufts Health Plan Senior Care Options] Care Manager, **is amazing**. I had a toothache, and she arranged for transportation for me the day of the dentist appointment.”

—Joan D., member since 2014.

“When we made the switch to Tufts Health Plan Senior Care Options, we were a bit skeptical—the benefits seemed too good to be true. But within the first month, we knew it was **the best change we could have made.**”

—Manuel and Maria F., members since 2016.

“I’m very pleased with everything—**can’t ask for a better company** than Tufts [Health Plan].”

—Beverly R., member since 2013.



# 3 Easy Steps to Becoming a Member

## 1 Review plan benefits and compare

Tufts Health Plan Senior Care Options offers you more benefits than Original Medicare and MassHealth Standard alone.

## 2 Speak with a representative

Our multilingual representatives are available by telephone or in person to review plan benefits, determine eligibility, and help you enroll.

## 3 Enroll!

Complete and sign the Tufts Health Plan Senior Care Options enrollment forms.

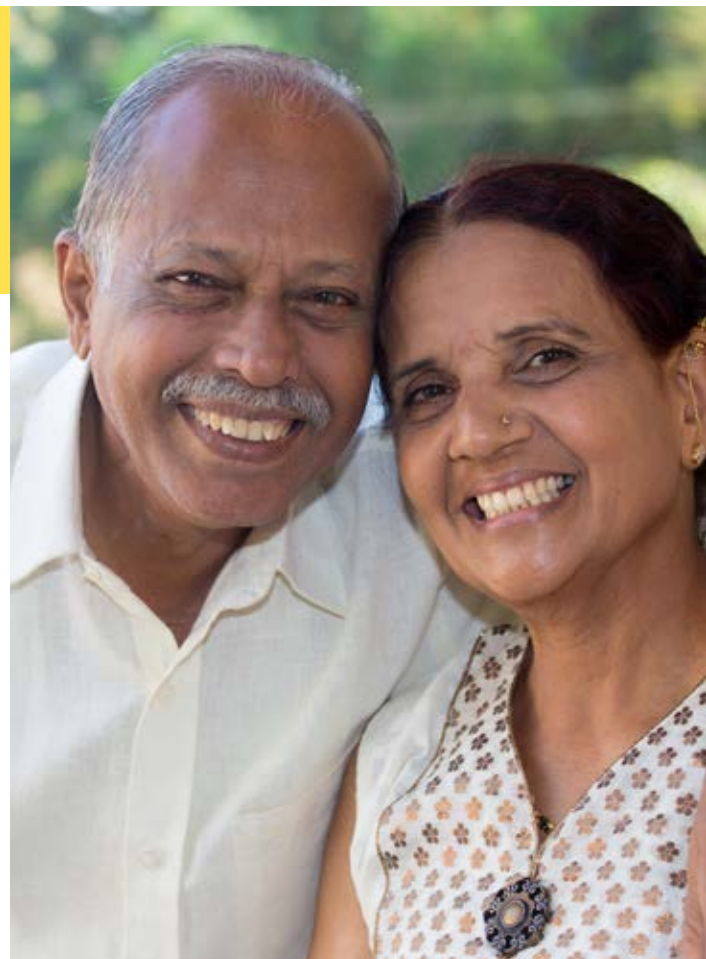
**Our plan has been  
rated 5 out of 5 Stars,  
five years in a row!**



2016 2017  
2018 2019  
**2020**

This is Medicare's highest rating for **excellence in quality of care, performance, and service**, and is a reflection of our ability to keep our members happy and healthy.

Not only does this make us one of the best SCO plans in the country, **we are also the only 5-Star rated SCO plan in Massachusetts!**





# What to Expect Next



## After you submit your application, you will receive:



### **Member ID Card and Enrollment Confirmation**

A letter will be sent confirming that your enrollment application is complete and approved<sup>7</sup>. Be sure to bring your Member ID card to the doctor, hospital, or pharmacy.



### **Member Welcome Kit**

Includes important information about the plan and how to access your benefits.



### **Member Education and Verification Letter**

This letter confirms your plan and benefits.



### **Welcome Call**

A Customer Relations representative will welcome you to the plan, answer your questions, and confirm you have received your member materials.



### **Initial Clinical Assessment**

A member of the clinical team will contact you to schedule an in-home assessment, and evaluate your medical and social support needs to maximize your health.

# Getting Started After Enrollment

## Has your application been submitted and approved?

If you answered yes, we would like to officially welcome you to Tufts Health Plan Senior Care Options (HMO-SNP)! As a new member of the plan, you will soon be receiving quite a few pieces of mail from us. To help you keep track of everything, we wanted to share a list of important materials that you will receive in the mail or that can be accessed online.

### Welcome Kit/Member Guide

When you first join the plan, you will receive your Welcome Kit. Inside this kit you will find a Member Guide that offers an overview of many of the benefits and services you receive as a member. The kit also includes many useful flyers and forms that you should keep for your records.

### Evidence of Coverage (EOC) Booklet

You receive your EOC booklet with your Welcome Kit shortly after becoming a member. It provides all your coverage details for medical services and prescription drugs. Members will receive an updated EOC annually.

### Over-the-Counter (OTC) Allowance Brochure

You receive your OTC Allowance Brochure with your Welcome Kit. The brochure includes information on how to use your Instant Savings card and DailyCare+ card.

### MassHealth Over-the-Counter (OTC) Drug List

You receive your MassHealth OTC Drug List with your Welcome Kit. This is a list of the over-the-counter drugs you're covered for under MassHealth Standard (Medicaid).

### Summary of Benefits

The Summary of Benefits offers a brief overview of the benefits and services covered by our plan, as well as answers to frequently asked questions, important contact information, and information about your rights as a member. A copy will be included in your initial Enrollment Kit.

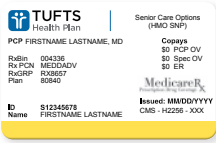
### Provider and Pharmacy Directory

The Provider and Pharmacy Directory includes information about the providers, facilities, and pharmacies that are covered in the Tufts Health Plan Senior Care Options network. You can access the directory at [www.thpmp.org/sco-directory](http://www.thpmp.org/sco-directory).

### Formulary

The Formulary, also known as the "List of Covered Drugs," tells you which prescription drugs are covered by our plan and if there are any special rules or restrictions on any of the covered medications. You can access the directory at [www.thpmp.org/sco-formulary](http://www.thpmp.org/sco-formulary).

# Important Cards and Forms



## Tufts Health Plan Senior Care Options Member ID card

Your **member ID card** includes all your important member information, including your member ID number. Be sure to carry it with you everywhere you go, including to doctor appointments and/or the pharmacy.



## Instant Savings card

Your **Instant Savings card** is loaded with an allowance of \$105 at the start of each quarter and can be used to buy certain over-the-counter (OTC) items at participating retailers. More details can be found on page 13.



## DailyCare+ card

Your **DailyCare+ card** is loaded with an allowance of \$25 at the start of each quarter and can be used to buy certain over-the-counter (OTC) items at participating retailers. More details can be found on page 13.

## Important Forms

A library of important forms can be found online at [www.thpmp.org/sco-member](http://www.thpmp.org/sco-member), including:

- Weight Management Reimbursement Form
- Wellness Allowance Reimbursement Form
- Out-of-Network Vision Services Claim Form
- CVS/Caremark Prescription Reimbursement Form
- Member Reimbursement Form
- Caremark Mail Order Prescription Drug Form
- Authorization to Disclose Protected Health Information Form
- Appointment of Personal Representative (AOR) Form
- And more!

**Have questions? Give us a call or visit us online:**



**1-866-974-0081 (TTY: 711)**



**[www.thpmp.org/sco](http://www.thpmp.org/sco)**

# Benefit Spotlight: Rides



## Need a ride? We can help!

As a member of Tufts Health Plan Senior Care Options, you will receive:

- Unlimited rides to and from medical appointments at the doctor, hospital, lab, and pharmacy.
- One FREE round-trip ride per month to a location of your choice. This includes visiting a friend's house, running errands, attending a religious service, and more! Must be within 20 miles each way of trip.<sup>4</sup>


All transportation will be provided by approved plan vendor. Rides must be scheduled at least **three business days in advance** of desired pickup.

### When calling to schedule a ride, please have the following information available:

- Member's first and last name or member ID number.
- Member's date of birth.
- Member's home address.
- Member's phone number.
- Pickup location (home or other address).
- Drop off location (doctor's office or other address).
- Date and time for pickup/drop off .
- Name of doctor and doctor's office phone number (for medical rides only).
- Will return ride be needed?



For questions about scheduling a ride, or for help with an existing ride, contact **Customer Relations:**

 **1-855-670-5934**  
**(TTY: 711)**

You may also contact the transportation vendor directly by calling the number on the key chain you receive in your Welcome Kit.

# Benefit Spotlight: Dental




## Dental benefits that give you a reason to smile!

As a member, you will receive comprehensive dental benefits that cover:

- Routine dental exams
- Fillings
- Dentures
- Root canals
- Implants (now includes five per year per member!)
- Crowns
- Bone grafting
- And more!<sup>5</sup>

Services must be performed by a DentaQuest provider. Benefit and network limitations may apply.

**For questions about your dental benefits, call Customer Relations:**

 **1-855-670-5934**  
**(TTY: 711)**

You can also contact DentaQuest directly by calling the number on the back of your member ID card.



“I had to have a couple of things done over the last year and over the last three months and I didn’t have to worry about paying this or paying that [because it was all covered by Tufts Health Plan Senior Care Options]. That was very good for me.”

**—Helen, Member since 2018**

# Benefit Spotlight: OTC Allowance

## Two Cards. Big Savings.

In 2020, members will be receiving TWO quarterly allowances to spend on over-the-counter (OTC) health and hygiene items at participating retailers.

### Instant Savings card—\$105/quarter



The Instant Savings card will be used for the purchase of Medicare-approved items, such as adhesive bandages, toothbrushes, sunscreen, and more!

### DailyCare+ card—\$25/quarter



The DailyCare+ card can be used to purchase certain Medicaid-approved items, such as shampoo, body wash, toilet paper, etc.

## How it works:

At the beginning of each of the four calendar quarters, your cards will be loaded with an allowance of \$105 (Instant Savings) and \$25 (DailyCare+).<sup>8</sup> You can use your cards at the following participating stores:



*Your Instant Savings card can also be used for purchases at Rite Aid stores.*

Make sure you present both your Instant Savings card and DailyCare+ card at the register when purchasing your items. Also, **please note:**

- Your balance does not carry over, so try to spend the full allowance before the end of each quarter.
- Don't throw out your card—it will be reloaded at the start of the next calendar quarter.

**See next page for examples of products you can buy with each card. For a full list of covered and non-covered items for both cards, visit [www.thmp.org/OTC](http://www.thmp.org/OTC).**



## Covered Examples

### Cold and Allergy

- Allergy and sinus medications
- Cough, cold, and flu (adult)
- Nasal/sinus (sprays, drops)
- Respiratory treatments

### Diabetes Care

- Diabetes care accessories
- Urine testing supplies

### Digestive Health

- Upset stomach remedies
- Digestive aids, lactose intolerance, probiotics

### Smoking Deterrents

- Nicotine patch, gum, etc

### Eye and Ear Care

- Ear care (drops, syringes)
- Eye care (drops, wash, contact lens care and contact solution)

### Oral Care

- Denture care products
- Oral remedies (ex: pain relief—excludes mouthwash)
- Toothbrushes and toothpaste

### Pain Relief

- Pain relief (adult)
- External pain relief

### Skin Care

- Acne medication
- Moisturizers, barriers, and protectants
- Sun protection (SPF 15+, adult)

### Fitness

- Pedometers
- Fitness trackers

### Foot Care

- Foot treatments
- Wart removal treatments

### Health Supports

- Abdominal supports/binders
- Hot/cold therapy (heating pads)
- Orthopedic/surgical supports and braces

### First Aid & Home Health Care

- Antibiotic creams
- Anti-itch medications
- Bandages (adhesive)
- First aid kit and supplies
- Diagnostic products (ex: thermometer)



## Non-Covered Examples

- Baby medicines and products
- Cosmetic products
- Dehydration drinks
- Feminine products
- Hair color
- Herbal supplements
- Perfumes
- Teeth whitening strips/treatment



## Covered Examples

## DailyCare+ card

### Eye and Ear Care

- Ear plugs and protection

### Feminine Personal Care

- Deodorants and powders
- Feminine moisturizers
- Wipes and external washes

### Foot Care

- Mixed/miscellaneous odor and wetness treatments

### Oral Care

- Mouthwash

### Household Products

- Bath tissue

### Patient Cleansing and Bathing

- Cleansers and washes
- Wipes and towelettes

### Hair Care

- Shampoo/conditioner
- Therapeutic shampoo, conditioner, and scalp treatment

### Physical Fitness and Exercise Equipment

- Scales (incl. body fat analyzers)

### Skin Care

- Hand/body cleansing liquids and soap
- Instant hand sanitizers
- Mixed/miscellaneous hand and body cleansing (towelettes, foaming, etc)
- Beauty and therapeutic hand and body moisturizers
- Therapeutic hand and body treatments

### Shaving and Grooming

- Disposable/reusable razors and refills



## Non-Covered Examples

- Alternative medicines
- Baby medicines
- Dehydration drinks
- Food products or supplements
- Cosmetic products of any kind, including hair color, perfumes, and teeth whitening products

# Benefit Spotlight: Wellness

## Stay fit with your wellness benefits!

Tufts Health Plan Senior Care Options makes it easier for you to stay healthy and active thanks to a variety of wellness offerings, including:



### **NEW for 2020:**

Members receive a free annual membership to their local Massachusetts YMCA facility! Classes are not covered by membership and would need to be purchased at member's expense.<sup>5</sup>



**\$200 Wellness Allowance** you can use on a variety of programs that help you lead a healthy lifestyle:

- Join a gym (in addition to the YMCA membership you already are covered for).
- Take a fitness class (such as yoga, pilates, tai chi, or aerobics).
- Purchase a fitness tracker.<sup>9</sup>
- Participate in a wellness program (such as nutritional counseling).
- Plus many more options!



**\$200 Weight Management Benefit** to be reimbursed for program fees on weight loss programs like Weight Watchers®, Jenny Craig®, and hospital-based programs.





# Benefit Spotlight: Vision and Hearing

## Keep your eyes and ears strong!

With Tufts Health Plan Senior Care Options, members receive FREE vision and hearing coverage:



### Free vision exams and eyewear allowance!

Not only does Tufts Health Plan Senior Care Options cover you for a free annual vision exam, but you get up to \$300/year for eyeglasses or contact lenses through an EyeMed network provider (\$180/year for non-EyeMed provider).<sup>10</sup>

Plus, for people who are at high risk of glaucoma, we will cover one glaucoma screening each year. For people with diabetes, screening for diabetic retinopathy is covered once per year.




### Free hearing exams—and hearing aids!

As a member you pay \$0 for routine hearing exams through Hearing Care Solutions. You can also get free hearing aids with a free evaluation and fitting from an audiologist, as well as:

- 2-year supply of batteries at no charge.
- 1-year in-office servicing at no charge.
- 3-year comprehensive warranty, including loss, damage, and repairs.



**If you have questions about your vision or hearing benefits, you may contact Customer Relations:**

 **1-855-670-5934**  
**(TTY: 711)**

Customer Relations can also provide contact information if you would like to speak with EyeMed or Hearing Care Solutions directly.



Tufts Health Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Tufts Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

**Tufts Health Plan:**

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, contact Tufts Health Plan at 1-855-670-5934 (TTY: 711).

If you believe that Tufts Health Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

**Tufts Health Plan, Attention:**

Civil Rights Coordinator, Legal Dept.  
705 Mount Auburn St., Watertown, MA 02472  
Phone: 1-888-880-8699 ext. 48000, (TTY: 711)  
Fax: 1-617-972-9048  
Email: [OCRCoordinator@tufts-health.com](mailto:OCRCoordinator@tufts-health.com)

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Tufts Health Plan Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

**U.S. Department of Health and Human Services**  
200 Independence Avenue, SW  
Room 509F, HHH Building Washington, D.C. 20201  
1-800-368-1019 (TDD: 1-800-537-7697)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

[thpmp.org/sco](http://thpmp.org/sco) | 1-855-670-5934 (TTY: 711)

**English:** ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-855-670-5934 (TTY: 711).

**Arabic:** ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-855-670-5934 (رقم هاتف الصم والبكم: 711).

**Chinese:** 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-855-670-5934 (TTY: 711)。

**Farsi:** توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با تماس بگیرید. 1-855-670-5934 (TTY: 711) فراهم می باشد.

**French:** ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-855-670-5934 (TTY: 711).

**German:** ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-855-670-5934 (TTY: 711).

**Greek:** ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 1-855-670-5934 (TTY: 711).

**Gujarati:** સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-855-670-5934 (TTY: 711).

**Haitian Creole:** ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-855-670-5934 (TTY: 711).

**Italian:** ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-855-670-5934 (TTY: 711).

**Japanese:** 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-855-670-5934 (TTY: 711) まで、お電話にてご連絡ください。

**Khmer (Cambodian):** ប្រយ័ត្ន៖ បើសិនជាអ្នកនិយាយភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសា ដោយមិនគិតល្បួល គឺអាចមានសំរាប់បំរើអ្នក។ ចូរ ទូរស័ព្ទ 1-855-670-5934 (TTY: 711)

**Korean:** 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-855-670-5934 (TTY: 711) 번으로 전화해 주십시오.

**Laotian:** ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທ 1-855-670-5934 (TTY: 711).

**Navajo:** Díí baa akó nínízin: Díí saad bee yánílt'igo Diné Bizaad, saad bee áká'ánída'áwoḍęę, t'áá jiikeh, éí ná hóló, koji' hódílnih 1-855-670-5934 (TTY: 711).

**Polish:** UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-855-670-5934 (TTY: 711).

**Portuguese:** ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-855-670-5934 (TTY: 711).

**Russian:** ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-855-670-5934 (TTY: 711).

**Spanish:** ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-855-670-5934 (TTY: 711).

**Tagalog:** PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-855-670-5934 (TTY: 711).

**Vietnamese:** CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-855-670-5934 (TTY: 711).



Medicare's  
highest rating

## To learn more or enroll:



**1-866-974-0081 (TTY: 711)\***



**[www.thpmp.org/sco](http://www.thpmp.org/sco)**

<sup>1</sup>Other eligibility requirements may apply.

<sup>2</sup>Not available in Berkshire, Dukes, Franklin, or Nantucket Counties.

<sup>3</sup>Benefit and network limits may apply.

<sup>4</sup>Non-emergency. Non-medical rides limited to 1 round trip per month, 20 miles each way of trip. Members must use approved vendor to access benefit. Exceptions may apply.

<sup>5</sup>YMCA membership is valid at one local YMCA facility in Massachusetts. Membership does not include classes. \$200 wellness allowance can be used towards the purchase of classes at YMCA facility.

<sup>6</sup>Services must be provided by a licensed acupuncturist. Prior authorization required for additional visits.

<sup>7</sup>You become a member of the plan on the first day after your application has been approved. After you become a member of the plan, you may call toll free 1-855-670-5934 (TTY: 711), 24 hours a day, 7 days a week for access to a Care Manager.

<sup>8</sup>\$105/quarter allowance is for the purchase of Medicare-approved OTC items from participating retailers. Under certain circumstances, items may be covered under your Medicare Part B or Part D benefit. \$25/quarter allowance is for the purchase of Medicaid-approved OTC items from participating retailers.

<sup>9</sup>Valid for one fitness tracker per member per year.

<sup>10</sup>\$300 available toward the full retail price (not sale price) for eyeglasses (lenses, frames, or a combination) or contact lenses from a provider in the EyeMed vision care network or up to \$90 from a store not in the EyeMed network.

\*Representatives are available 7 days a week, 8 a.m.–8 p.m. (From April 1 to September 30, representatives are available Monday–Friday, 8 a.m.–8 p.m.) After hours and on holidays, please leave a message and a representative will return your call on the next business day.

Every year, Medicare evaluates plans based on a 5-Star rating system. Visit [www.medicare.gov](http://www.medicare.gov) for more information. Tufts Health Plan Senior Care Options received 5 out of 5 Stars for contract years 2016, 2017, 2018, 2019, and 2020. Tufts Health Plan Senior Care Options is a HMO-SNP with a Medicare contract. Enrollment in Tufts SCO depends on contract renewal. The HMO-SNP is available to anyone who has both MassHealth Standard (Medicaid) and Medicare Parts A and B. The SCO is available to anyone who has MassHealth Standard only. This information is not a complete description of benefits. Call 1-800-488-0229 (TTY: 711) for more information. H2256\_S\_2020\_17\_M