

Tennessee 2022 Medicare Advantage plan changes

Annual benefit changes for Medicare Advantage plan members under Amerigroup Community Care will be effective January 1, 2022.

The following is a summary of these changes. Complete details are in the member's *Evidence of Coverage (EOC)*. Visit <https://shop.amerigroup.com/medicare> for *EOC*, formularies, and benefit summaries, or contact Provider Services at the number on the back of the member's ID card. Changes may include medical and Part D benefits, copays, coinsurance, deductibles, formulary coverage, pharmacy network, premiums, and out-of-pocket maximums.

Some group-sponsored Medicare Advantage plan benefits vary from the Medicare Advantage plans offered to individuals. Please refer to the member's *EOC* or call Provider Services at the number on the back of the member's ID card for more benefit details.

2022 highlights:

Not all benefits listed below are available to all Medicare Advantage members. Complete details are in the member's *EOC*:



Part D — Tier 1 and Tier 2 Mail-Order at a \$0 copay:

- Tier 1 and Tier 2 mail-order drugs are available at a \$0 copay. This offers a 30- to 90-day supply for Tier 1- and Tier 2-covered drugs at a \$0 copay if purchased through mail-order.



Everyday Extras:

- The following innovative benefits are still part of the EE options: Assistive Devices, Health & Fitness Tracker, Healthy Meals, Personal Home Helper, Pest Control and Transportation.
- NEW EE options: Flex Account — Dental, Vision, Hearing, Healthy Groceries, and In-Home Support* benefit.
- Service Dog and Healthy Pantry benefits will now be offered as embedded benefits available for eligible plans members not part of the EE selection options.
- Added option to allow members to choose two benefits in one of our plans.



Flex Account — Dental, Vision, Hearing benefit:

- Annual allowance to be used for out-of-pocket costs for dental/vision/hearing services
- Members would be provided a debit card that can only be used at certain provider or merchant types. Amerigroup funds the card, and any unused funds would be recouped at the end of the benefit period. Funds will not be rolled over from one benefit period to the next.
- No precertification will be needed to qualify for this benefit.
- This will be offered as an Everyday Extras selection option.

* In-House Support is an independent company providing member support services on behalf of Amerigroup Community Care. Availity, LLC is an independent company providing administrative support services on behalf of Amerigroup Community Care.



In-Home Support benefit:

- Members can receive 60 hours per year of In-Home support companionship to target social isolation. While the focus of the benefit is companionship, the In-Home support can provide limited assistance with activities of daily living (ADL).
- In-Home support can be trained to enforce gaps in care such as health risk assessments, flu shots, medication adherence, etc.
- No precertification will be needed to qualify for this benefit.
- This will be offered as an Everyday Extras selection option.



Value-Based Insurance Design (VBID) Model participant (D-SNP only):

- The VBID model allows Medicare Advantage organizations (MAOs) to further target benefit design to enrollees based on chronic condition and/or socioeconomic characteristics.
- Amerigroup VBID will be offered on D-SNP plans. Qualification is based on meeting income requirements, which means all Members in the pharmacy benefit program will be eligible to receive the VBID benefits without any additional prior authorization criteria.
- Advanced Directives: Members have access to an online advance care planning resource called, MyDirectives[®]. This resource helps them create an advance directive where they can combine the elements of a: Living will, medical power of attorney, Organ donation form and more, including religious preference statements. MyDirectives is available to the member and their designated medical providers 24 hours a day, seven days a week. To get started, log into the member portal and go to the Programs Dashboard and select Advance Directive Programs. It will take you to MyDirectives to create a new account or link your existing account.
- Benefits that were formerly Everyday Extras will move to VBID for D-SNP plans, which means all members in the participating plans will be eligible to receive the VBID benefits without any additional precertification criteria.

Medicare Advantage HMO

One new HMO plan will be launching in the following areas in 2022:

New plan for 2022	Counties
Amerivantage Comfort (HMO I-SNP)	Davidson, Rutherford, Shelby

Two HMO plans will be consolidating in the following areas in 2022:

2021 plan name	2022 plan name	Counties
Amerivantage Plus (HMO)	Amerivantage Classic (HMO)	Shelby
Amerivantage Select Plus (HMO)	Amerivantage Classic Plus (HMO-POS)	Shelby

Formulary and pharmacy

Encourage your patients to review the 2022 formulary information within their *Annual Notice of Change (ANOC)* mailing, their new member kit, or online. Ask your patients if the coverage for any of their prescriptions has been changed. If your patient has been impacted by changes to prescription coverage, consider alternative medications in a lower cost-sharing tier.



Prior authorization for Medicare Advantage plans

Prior authorization requirements are available at <https://www.availity.com>. Contracted and noncontracted providers who are unable to access Availity* may call Provider Services at the phone number on the back of the member's ID card for prior authorization requirements.

Please check the member's ID card for any identification and/or group number changes that may affect claim submissions.

Sample 2022 member ID cards will be available at <https://provider.amerigroup.com>.