



Benefits that travel with you

Our HAP Medicare Advantage plans allow you to travel with peace of mind.



VISITOR/TRAVELER BENEFIT***

Travel benefits on select HMO plans extend coverage for plan covered services from a Medicare-participating provider to Arizona, Florida, Michigan (out-of-service area) and Texas for up to 12 months. PPO extends coverage to members when traveling to any of the 49 states outside of Michigan for up to 12 months. HMO and PPO cover plan-covered services with Medicare-participating providers only.

These benefits travel with you:



DENTAL COVERAGE

Depending on your plan, your benefits will cover \$2,000 max for preventive and comprehensive services combined including 2 oral exams, 2 cleanings, 2 fluoride treatments and 1 set of bitewing X-rays per calendar year. Comprehensive dental is covered at 50% or 100% for most services[†].



VISION COVERAGE

\$0 copays for routine exams through our vision partner EyeMed and \$150 allowance for eyewear or contact lenses every year. *Plans 016 and 028 offer a flex card allowance that can be used toward this benefit[†].*



HEARING COVERAGE

\$0 copays for routine exams and hearing aid evaluations and fittings. Must be provided by NationsHearing. *Plans 016 and 028 offer a flex card allowance that can be used toward this benefit[†].*



FLEX CARD

Prepaid benefits Visa® for over-the-counter items and so much more. Flex cards roll over quarterly[†].



To get details: Call your agent or HAP sales at (800) 868-3153 (TTY: 711) 8 a.m. to 8 p.m., seven days a week. Or visit hap.org/medicare



PUTTING YOUR HEALTH FIRST

- **Telehealth** lets you see doctors 24/7 from a computer, tablet or smartphone.
- **Our preferred pharmacy network** gives you the lowest price on prescriptions. Our mail order pharmacy, Pharmacy Advantage, can deliver to you wherever you are when traveling.
- **\$0 with SilverSneakers™**, you'll be able to access memberships at 15,000+ fitness locations from national gyms to local community centers. Plus, access online classes by Burnalong and At-Home kits for members who are unable to participate at a fitness center or prefer to workout at home.
- **28 meals over 14 days** of fresh, nutritious, ready-to-heat food delivered to your home after discharge from the hospital with a qualifying diagnosis. Excludes 011, 015, 016, 028, 029.
- **Non-emergency transportation** to a doctor's office, pharmacy or other medically necessary appointment. 12 one-way trips annually (not covered for plans 011, 015, 029. Plans 016 and 028 offer a flex card allowance that can be used toward this benefit). For plans 016 and 028 review your EOC for more details.
- **Travel worry-free** with global travel emergency services from Assist America^{®**}, including identity theft protection, 24/7 professional fraud support and help with unexpected medical expenses.

+ Check your plan's Evidence of Coverage for full details.

* You must continue to pay your Part B premium.

** Our services are a supplement to your existing health insurance. Assist America[®] does not charge members for any of its services, but once you are safely in the care of a qualified physician, your health insurance should cover the costs of your actual treatment and hospitalization. assistamerica.com/hap.

*** This benefit is applicable in Arizona, Florida, Michigan (out of service area) and Texas. Members will be charged in-network cost-sharing for covered services received from providers that accept Medicare. PPO extends coverage to members when traveling to any of the 49 states outside of Michigan. Michigan is excluded from this benefit for PPO members. PPO members can use their out-of-network (OON) benefit to access OON providers in Michigan. All members are charged applicable cost-sharing for emergent and urgent care as listed in the Evidence of Coverage. Members should receive prior authorization for services listed in the Evidence of Coverage when traveling to Arizona, Florida, Michigan (out of service area) and Texas.

PPO Plans Only: Out-of-network/non-contracted providers are under no obligation to treat HAP Senior Plus PPO members, except in emergency situations. For a decision about whether we will cover an out-of-network service, we encourage you or your provider to ask us for a pre-service organization determination before you receive the service. Please call our Customer Service number or see the Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

Health Alliance Plan (HAP) has HMO, HMO-POS, PPO plans with Medicare contracts. Enrollment depends on contract renewal.