

2026 BEST START Member Handbook



"I am so glad I chose Senior Care Plus. They work with my doctors to ensure I get the care I need when I need it."

Fran K. – Senior Care Plus Member

**Your Personal Assistant
MAGNET IS INSIDE!**

PLACE IT WHERE YOU CAN USE IT.

Senior Care
Plus 

Discover helpful tips and information. **GET STARTED NOW!**

**“Senior Care Plus gives my wife
and I great health care coverage.
And it saves us money too!”**

John R. – Senior Care Plus Member



HOW TO USE YOUR
2026 BEST START
Member Handbook

Welcome to Senior Care Plus! Whether you are a new or a returning member, we are happy you have selected Senior Care Plus as your Medicare Advantage Plan. The 2026 Best Start Member Handbook contains important information you need to start your healthcare journey with us. Getting familiar with this information early in the year is the best way to ensure you are able to navigate your healthcare options with confidence. We encourage you to take the time to read it in its entirety and use it for reference as needed throughout the year.

SENIOR CARE PLUS
10315 Professional Cir. • Reno, NV 89521

LOBBY HOURS
Monday – Friday • 8 a.m. to 5 p.m.

CALL CENTER HOURS
April 1 – September 30
Monday – Friday • 7 a.m. to 8 p.m.
October 1 – March 31
Monday – Friday • 7 a.m. to 8 p.m.
Saturday – Sunday • 8 a.m. to 8 p.m.

- Local – **775-982-3112**
- Toll Free – **888-775-7003**
- Información en español – **775-982-3242**
- TTY Relay Service – **711**

Email us at Customer_Service@HometownHealth.com.
Visit our website at SeniorCarePlus.com.

Senior Care
Plus 

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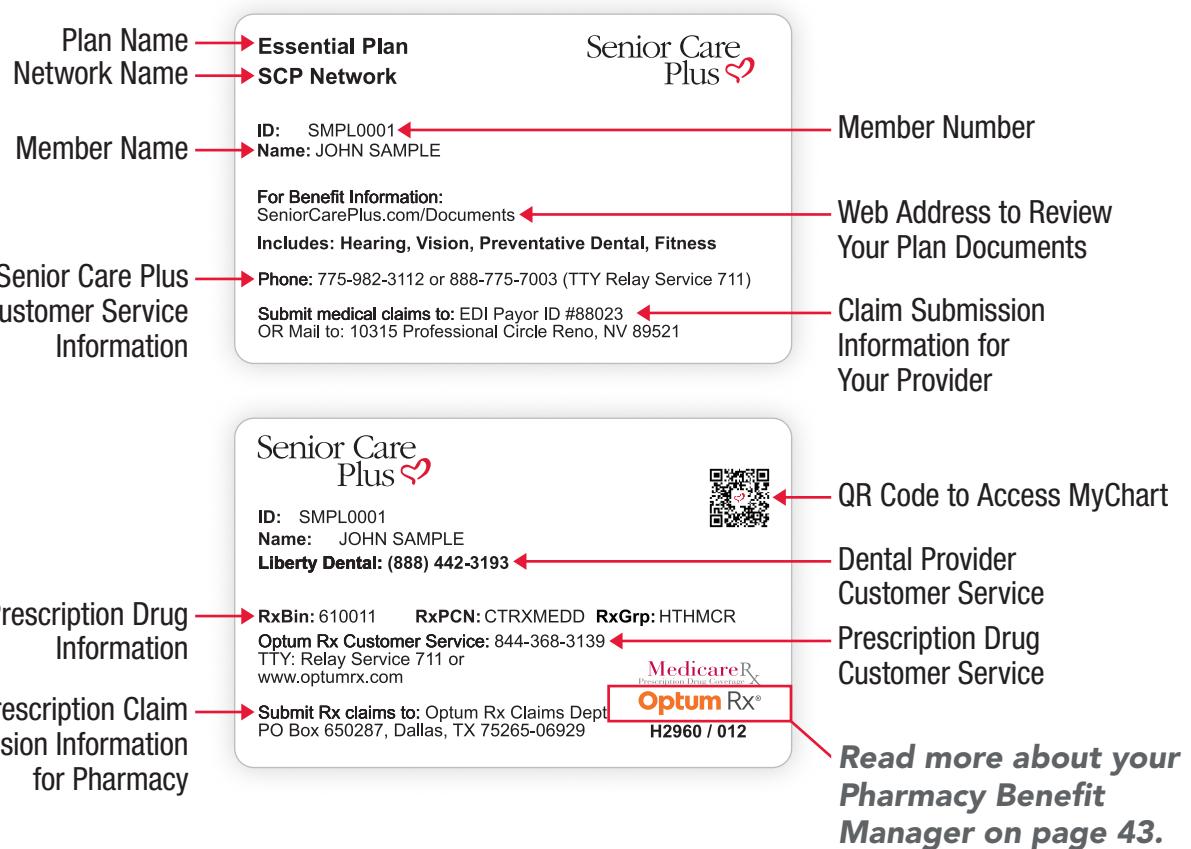
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BEFORE WE GET STARTED

Using your ID Card

As a Senior Care Plus member, show your ID card whenever you access healthcare services and, if applicable, for prescription drugs at network pharmacies.

View the sample ID card below to understand the various sections of your ID card.



In this handbook, we will walk through how to do various things in MyChart.

THESE ITEMS WILL BE MARKED WITH THIS SYMBOL:

To access an electronic version of your ID Card in MyChart:

1. Log into your MyChart account
2. In the menu, scroll down to the **Insurance** section
3. Click on **Insurance Cards**

See page 5 for information on creating a MyChart account.

If you lose your membership ID card, please call customer service at 775-982-3112 and we will send you a new one.

BEFORE WE GET STARTED

Register with MyChart

In your web browser, enter mychart.renown.org to access the login page.

If you have not received an activation code, you will need to request an activation code online:

- At the login page, under **No Activation Code?** click on **Sign Up Now**.
- Enter your information, and in the next step, we will verify your identity. Once your identity is verified, you will be able to create your MyChart username and password.

If you have already received your activation code:

- Click **Enter Code** in the **New User?** section.
- Enter your activation code and other personal verification items, click **Next**.

Creating your MyChart Username and Password:

- **MyChart username** – This should be something that others would not likely guess but easy to remember. It cannot be changed.
- **Password** – This should be a unique combination of numbers and letters, using both uppercase and lowercase letters.
- **Security question** – This question will be used to verify your identity if you forget your MyChart password. Choose a security question from the list and enter your answer. Your answer cannot include your MyChart password.

Already Have a MyChart Account?

Be sure to review the **Make The Most of Your MyChart Account** section of this handbook (see pages 52-56). Put the power of MyChart to work for you to schedule appointments, communicate with providers and so much more!

BEFORE WE GET STARTED

Register with OptumRx

Once your Senior Care Plus membership card arrives, you will want to visit OptumRx.com. You'll need the information from your member ID card to sign up and access your account details and prescriptions.



- **Price a drug**

Search your current or new medications to see costs at pharmacies near you. If you're taking a brand-name drug, you can also see prices for generic options, if available.



- **My prescriptions**

See your current prescriptions along with information about how to use them and possible side effects.



- **View my claims**

See which prescriptions you've filled and how much you paid.



- **Pharmacy locator**

Search for in-network pharmacies near you – or find a pharmacy when you're traveling.



- **Manage prescriptions on-the-go**

For added convenience, download the Optum Rx app.



STEP 1: Schedule Your Care Connect Visit



What is a Care Connect visit?

The Care Connect visit is a comprehensive health visit designed to help you make the most of your Senior Care Plus benefits. During this appointment, our team will take extra time to understand your health history, current needs and goals for the year ahead.

We will also review all of your health needs and share them in a summary to your Primary Care Provider so they have the most up-to-date information about your health.

Your annual Care Connect visit looks at the whole picture of your health – physical, emotional and social, so we can connect you with the right resources and support.

During your Care Connect visit, you can expect:

- A full review of your medications and health conditions
- Time to complete or schedule preventive screenings and complete a physical exam
- A check on your emotional, social and home-based needs
- Help connecting you with additional programs such as Community Resources (see pages 60-61), Senior Care Plus Personal Assistants (see page 57) or other home and community-based services.

How is it different from seeing my Primary Care Provider (PCP)?

Your PCP focuses on diagnosing and treating medical conditions and managing your day-to-day care.

The Care Connect visit focuses on prevention, coordination and uncovering any unmet needs, allowing your PCP to spend more time on treatment.

After your Care Connect visit, we share a summary with your PCP to keep your care team fully informed and aligned.

Together, your Care Connect Team and PCP work hand-in-hand to keep you healthy, supported and connected to the care you need.

To schedule your Care Connect visit, call at 775-982-2605 or 888-775-7003.

AND HERE'S A BONUS!

When you complete your Care Connect visit, you can earn \$50 or more through our Healthy Rewards Program. First time visits earn \$100 and returning visits earn \$50.

YOU CAN ONLY EARN ONE REWARD PER YEAR.

Call today for your no-cost Care Connect visit!

Population Health Programs: Better Health, Together

Our team is here to make healthcare easier to navigate – especially if you're living with multiple health conditions or need extra help coordinating your care. Together, we'll create a plan of care that supports your health goals, whether it's managing medications or a chronic condition, recovering from a hospital stay, or staying active and independent at home. You're never alone in your care journey with Senior Care Plus.

ONLINE HEALTH LIBRARY

Looking for evidence-based health education?
Visit HometownHealth.com/health-library for easy to read articles, videos, and self assessment tools on prevention, managing chronic conditions and staying healthy.

	Specialized Case Management	Case Manager	Personal Assistants	Transitional Care Navigators	Transitional Care Management
AVAILABLE TO	Members With Complex Medical Conditions Including: <ul style="list-style-type: none">• Maternal/Child Health• Behavioral Health• Organ Transplant	Members with multiple chronic conditions and other complex care needs.	Any Senior Care Plus member. If you have a Renown Primary Care Provider they can provide additional Renown Health scheduling services.	Members who are admitted to Renown Regional Medical Center with highly complex discharge needs.	Members with a recent ER visit or hospital discharge from Renown Regional or Renown South Meadows Medical Center.
THEIR ROLE	Provide education, care coordination and support navigating complex conditions.	Health education, care coordination and creating a personalized plan of care that supports your health goals; helping you access health plan and community resources to address other health-related needs (such as transportation, housing or food insecurity).	Act as a liaison between your healthcare and health insurance. This team is trained specifically regarding your benefits as well as accessing services within Renown Health.	Assist Members with their discharge planning needs to ensure they are discharged to the appropriate level of care as well as ensuring that applicable home needs are coordinated prior to going home.	Assist members with a telephonic or home-based visit to ensure all needs are met and follow-up care is scheduled after a hospital discharge.
THEY CAN HELP WITH	<ul style="list-style-type: none"> • Coordination of Care and Care Planning – arranging and overseeing healthcare services; creating a personalized plan of care to meet individual goals and needs • Member advocacy – acting as a liaison between members and providers to secure appropriate resources and services • Providing health education on complex conditions, treatments and resources • Assisting members with following treatment plans and adhering with medications or planned therapies • Coordinating smooth transitions between care settings, such as hospital to home 	<ul style="list-style-type: none"> • Managing medications and chronic conditions such as: diabetes, heart failure, Chronic Obstructive Pulmonary Disease (COPD) or kidney disease • Coordinating appointments, tests and referrals • Coordinating additional support for health-related needs, such as: food delivery, transportation, housing and financial assistance programs • Connecting you to home care and home health services • Supporting caregivers and other family members who help you with everyday tasks • Assisting with referrals to community resources if you or a loved one are living with memory problems or have been diagnosed with dementia • Assessing the safety of your home and working with you to reduce the risk of falls and other injuries • Assisting with Advance Care Planning 	Appointment Scheduling For Renown Health and UNR Primary Care: <ul style="list-style-type: none"> • Schedule annual and follow-up visits with your Primary Care Provider • Schedule Mammogram and Bone Density Screenings • Schedule Lab Appointments Health Care Coordination: <ul style="list-style-type: none"> • Request Medication refills • Request referrals and orders on your behalf • Help get you set-up with mail-order pharmacy Health Plan Coordination: <ul style="list-style-type: none"> • Look up your past medical claims • Schedule an Uber ride for your medical appointments • Check the status of prior-authorizations • Answer questions about your plan benefits • Assist with placing OTC orders 	<ul style="list-style-type: none"> • Assisting members discharging from the hospital or emergency department with setting up home health or coordinating Durable Medical Equipment (DME) delivery • Coordination of care in skilled nursing and acute rehabilitation • Ensuring members have timely follow-up care scheduled when transitioning from the hospital to home, or from a post-acute facility (skilled nursing) to home • Assessing needs and making appropriate referrals to Care Management goals and values 	<ul style="list-style-type: none"> • Reviewing the discharge plan and instructions from providers • Patient and family education • Reviewing all medications, including any new medications after a hospitalization • Reviewing any warning signs or red flags for when to seek care • Scheduling follow-up with the member's Primary Care Provider • For members who are home-bound, conducting a visit in your home to ensure all needs are being met
THEY WILL REACH OUT TO YOU WHEN	You have been identified as having a qualifying diagnosis or when a triggering event takes place.	You have changes in your health, recent hospital or emergency room visits, or gaps in your care.	When you are due for an appointment or health screening, such as: <ul style="list-style-type: none">• Annual Wellness Visit• Care Connect Visit• Hospital Follow-up• Preventive Health Screenings	If you meet criteria, they will meet with you in your hospital room.	You have had a hospital discharge or a discharge from Renown Regional Medical Center or South Meadows Medical Center.
CALL THEM IF	You require additional support managing your healthcare needs.	You require additional support managing your chronic conditions or other healthcare-related needs.	You need to schedule an appointment with Renown Health or you have questions regarding your health insurance.	This team does not take inbound calls.	You have recently been discharged from the hospital and need assistance coordinating follow up care.
HOW TO CONTACT		Call our Care Management Team directly at 775-982-7222 to speak directly with a care coordinator Monday through Friday from 8 a.m. to 5 p.m.	SEE PAGE 57 to learn more and or call 775-982-2605 to get started.	This team is available to members who meet clinical criteria while at Renown Regional.	Members can access Transitional Care Management services by calling 775-982-7222 .
FIND MORE ONLINE AT	HometownHealth.com/PopulationHealth	HometownHealth.com/PopulationHealth	SeniorCarePlus.com	HometownHealth.com/PopulationHealth	HometownHealth.com/PopulationHealth
HOW TO OPT IN/OUT OF THE PROGRAM		Our team is embedded into Renown Medical Group locations. Ask your PCP for a referral to Hometown Health Care Management, call 775-982-7222 to reach Care Management directly or connect with a Personal Assistant at 775-982-2605 to get started. Members who would no longer want to participate in the program they can let their Care Manager know or can call 775-982-7222 or 800-336-0123 .	SEE PAGE 57 to learn more and or call 775-982-2605 to get started. You can also opt out of the Personal Assistant program by calling 775-982-2605 .	Members who would no longer want to participate in the program they can let their Transitional Care Navigator know or can call 775-982-3112 or 800-336-0123 .	Members who would no longer want to participate in the program they can let their Transitional Care Manager know or can call 775-982-7222 or 800-336-0123 .

STEP 2: Learn How To Find Care



Senior Care Plus is here to help you get the care you need as soon as you need it.

This section will cover:

- How to use the provider directory to find in-network providers
- Deciding where to go when you need care urgently
- Choosing and seeing a Primary Care Provider
- Seeing Renown specialists
- Getting a referral and/or an authorization
- How to file a complaint (grievance)

WHERE TO GO FOR CARE

General Care

Call 911 or go to the ER immediately for:

- Chest pain or pressure, especially with shortness of breath
- Sudden severe headache, confusion, or loss of consciousness
- Difficulty breathing or severe shortness of breath
- Signs of stroke (balance, blurred vision, facial drooping, arm weakness, speech difficulty)
- Severe bleeding or injuries, broken bones
- Severe allergic reaction, high fever with confusion

Call 988 for:

- Suicidal thoughts or thinking about harming yourself
- Severe emotional distress or feeling unable to cope
- Mental health crisis (panic, severe anxiety, overwhelming feelings)
- Concerns about someone else who may be in crisis
- Substance use crisis affecting mental health

Decision guide for common health concerns

Common Health Concerns	Symptoms	Business Hours (8 a.m. to 5 p.m.)	After Hours & Weekends
Minor Illness	• Cold, flu, sore throat, ear pain, minor fever	• See your PCP • Call Teladoc • Urgent-Care Walk-In	• Call the On-Call Provider • Call Teladoc • Contact Doctoroo
Sprains • Strains Minor Injuries	• Twisted ankle, minor cuts, bruises, back pain	• See your PCP • Urgent-Care Walk-In	• Contact Doctoroo
UTI • Rashes Skin Conditions	• Painful urination, skin irritation, minor allergic reactions	• Call Teladoc • See your PCP • Urgent-Care Walk-In	• Call Teladoc • Contact Doctoroo if severe
Mental Health	• Worsening depression or anxiety, hallucinations or delusions, distress from recent traumatic events, symptom changes from medications	• See your established mental health provider • See your PCP • Call Teladoc	• Call the On-Call Provider • Call Teladoc • Call 988 if severe
Preventive Care Routine Care	• Annual exams, vaccinations, chronic disease management	• See your PCP	• Call your PCP during business hours
For Specific Chronic Disease Management Issues		• SEE PAGE 12	• SEE PAGE 12
Health Concerns Not Listed On This Chart		• Call the On-Call Provider	• Call the On-Call Provider

Important Contact Information:

For patients of Renown Medical Group only* / On-Call Provider:

775-982-5000 (ask for the On-Call Provider)

Renown Medical Group / Urgent Care Scheduling: **775-982-5000**

Teladoc (Telehealth): **800-TELADOC** (800-835-2362)

Doctoroo (Mobile Urgent Care): **888-888-9930**

Transportation Assistance (Personal Assistant Team): **775-982-2605**

*For other Primary Care Providers, please contact your provider's office to ask about on-call provider options

WHERE TO GO FOR CARE

Warning signs and where to go for help

Chronic Disease Management	EMERGENCY	URGENT	ROUTINE
Diabetes	<ul style="list-style-type: none"> Blood sugar below 70 or above 300 Confusion, fainting, seizures Severe vomiting, unable to keep fluids down Difficulty breathing with high blood sugar <p>WHERE TO GO: CALL 911 OR GO TO THE EMERGENCY ROOM IMMEDIATELY</p>	<ul style="list-style-type: none"> Blood sugar 250-300 or 50-70 Foot wound or infection Persistent high sugars (>200) for 2+ days Unusual thirst, frequent urination <p>WHERE TO GO: DURING BUSINESS HOURS</p> <ul style="list-style-type: none"> Call your PCP immediately Renown PCP patients can call the Personal Assistant team at 775-982-2605 and request a same-day visit AFTER HOURS & WEEKENDS Call the On-Call Provider at 775-982-5000* Contact Doctoroo at or 888-888-9930 or visit Doctoroo.com 	<ul style="list-style-type: none"> Blood sugar trends upward Medication refills needed Questions about diet or management Routine A1c check needed <p>WHERE TO GO: DURING BUSINESS HOURS</p> <ul style="list-style-type: none"> Schedule an appointment with your PCP
Chronic Obstructive Pulmonary Disease (COPD)	<ul style="list-style-type: none"> Severe shortness of breath at rest Chest pain with difficulty breathing Blue lips or fingernails Confusion or drowsiness with breathing problems Rescue inhaler not helping <p>WHERE TO GO: CALL 911 OR GO TO THE EMERGENCY ROOM IMMEDIATELY</p>	<ul style="list-style-type: none"> Increased shortness of breath with activity Change in mucus color Fever with worsening cough Using rescue inhaler more than usual Swelling in ankles or legs <p>WHERE TO GO: DURING BUSINESS HOURS</p> <ul style="list-style-type: none"> Call your PCP immediately Renown PCP patients can call the Personal Assistant team at 775-982-2605 and request a same-day visit AFTER HOURS & WEEKENDS Call the On-Call Provider at 775-982-5000* Contact Doctoroo at or 888-888-9930 or visit Doctoroo.com 	<ul style="list-style-type: none"> Stable symptoms, no change Medication refills Questions about oxygen use Routine follow-up needed <p>WHERE TO GO: DURING BUSINESS HOURS</p> <ul style="list-style-type: none"> Schedule an appointment with your PCP
Congestive Heart Failure (CHF)	<ul style="list-style-type: none"> Sudden severe shortness of breath Chest pain or pressure Coughing up pink, frothy sputum Fainting or severe dizziness Rapid or irregular heartbeat with symptoms <p>WHERE TO GO: CALL 911 OR GO TO THE EMERGENCY ROOM IMMEDIATELY</p>	<ul style="list-style-type: none"> Weight gain of 2-3 lbs in one day or 5 lbs in a week Increased swelling in legs, ankles, or abdomen Worsening shortness of breath with minimal activity Difficulty breathing when lying flat Persistent cough or wheezing <p>WHERE TO GO: DURING BUSINESS HOURS</p> <ul style="list-style-type: none"> Call your PCP immediately Renown PCP patients can call the Personal Assistant team at 775-982-2605 and request a same-day visit AFTER HOURS & WEEKENDS Call the On-Call Provider at 775-982-5000* Contact Doctoroo at or 888-888-9930 or visit Doctoroo.com 	<ul style="list-style-type: none"> Stable condition, managing well Medication refills or adjustments Questions about diet or fluid intake Routine follow-up needed <p>WHERE TO GO: DURING BUSINESS HOURS</p> <ul style="list-style-type: none"> Schedule an appointment with your PCP or Cardiologist (depending on who is primarily managing your condition)

*On-Call Provider requires a Renown Primary Care Provider to access.

Skip the Emergency Room for non-emergencies!

Feeling under the weather? In-network services like Doctoroo and Teladoc offer quick and convenient care when you need it. See the back cover for quick contact information.

DAYTIME – 7 a.m. to 7 p.m.	NIGHTTIME – 7 p.m. to 7 a.m.
<p>LOCATIONS</p> <p>IN-OFFICE: Renown Primary Care Provider Call your Renown PCP to ask for a same-day appointment. Renown Medical Group patients can call the Personal Assistant team at 775-982-2605 for help with scheduling a same-day visit.</p> <p>IN-HOME: Doctoroo VIRTUAL: Teladoc</p>	<p>LOCATIONS</p> <p>IN-HOME: Doctoroo (Until Midnight) PHONE: Only for Patients of Renown Medical Group – call the Provider Line at 775-982-5000 and ask for the on-call provider. VIRTUAL: Teladoc (Anytime)</p>
<p>CONDITIONS – For non-emergency issues, such as:</p> <ul style="list-style-type: none"> Sinus problems Respiratory infections Flu symptoms Rashes Stomach bugs Urinary tract infections Allergies Sore throats Minor injuries and wound care <p>Urgent Care / Doctoroo only</p>	

SCAN THE QR CODES to explore your care options – without the Emergency Room wait!



Renown
HEALTH

Urgent Care



doctoroo

House Calls



Teladoc
HEALTH

Account Registration



As a Senior Care Plus member, you have access to Doctoroo, a service that brings urgent care directly to you – providing a convenient alternative to a crowded emergency room or urgent care waiting room.

Doctoroo's mobile care teams (a Nurse Practitioner or Physician Assistant paired with an EMT or Medical Assistant) evaluate you in your home and can deliver treatments, prescribe medications and coordinate follow-up care in-person, without you having to travel to seek care.

KEY MEMBER TIP

When you prefer to receive care directly from providers in the comfort of your own home, Doctoroo is for non-life-threatening but uncomfortable conditions, such as:

- Fever, cold and flu symptoms
- Minor cuts, burns or skin rashes
- Urinary tract infections
- Other urgent, non-emergent medical needs

Senior Care Plus Medicare Plan	Renown Preferred Essential Select	Extensive Duals	Patriot
Doctoroo Co-pay	\$20 per visit	\$0 per visit	\$30 per visit

Services are available in Reno, Sparks and Carson City.

Doctoroo's mobile care teams are available 7 a.m. to midnight, seven days per week.

Contact Doctoroo toll free at **888-888-9930** • Doctoroo.com

Please have your address and insurance information ready when you contact Doctoroo.

IMPORTANT: In an emergency, always dial 911.

Virtual visits made easy with TELADOC® includes dermatology benefit



Senior Care Plus has partnered with Teladoc to offer virtual visits through your phone, tablet or computer-anytime, from anywhere you are. You can talk to a doctor by telephone or video anytime day or night, in all 50 states. Teladoc connects Senior Care Plus members with U.S. board-certified doctors, therapists and other care providers.

KEY MEMBER TIP

Teladoc is a convenient option when you seek a virtual visit for a non-emergency health issue, need quick access to a specialty provider or prefer tele-therapy for mental health support, such as:

- Sinus and bronchitis problems
- Cold and flu symptoms; upper respiratory infections
- Ear infections
- Sore throats
- Allergies, rashes or other skin conditions
- Non-urgent mental health needs

Senior Care Plus Medicare Plan	Renown Preferred • Essential • Select Extensive Duals • Patriot
Teladoc Co-pay	\$0 per visit

You can call Teladoc 24 hours per day, seven days per week.

Call Teladoc toll free at **800-TELADOC** (800-835-2362)

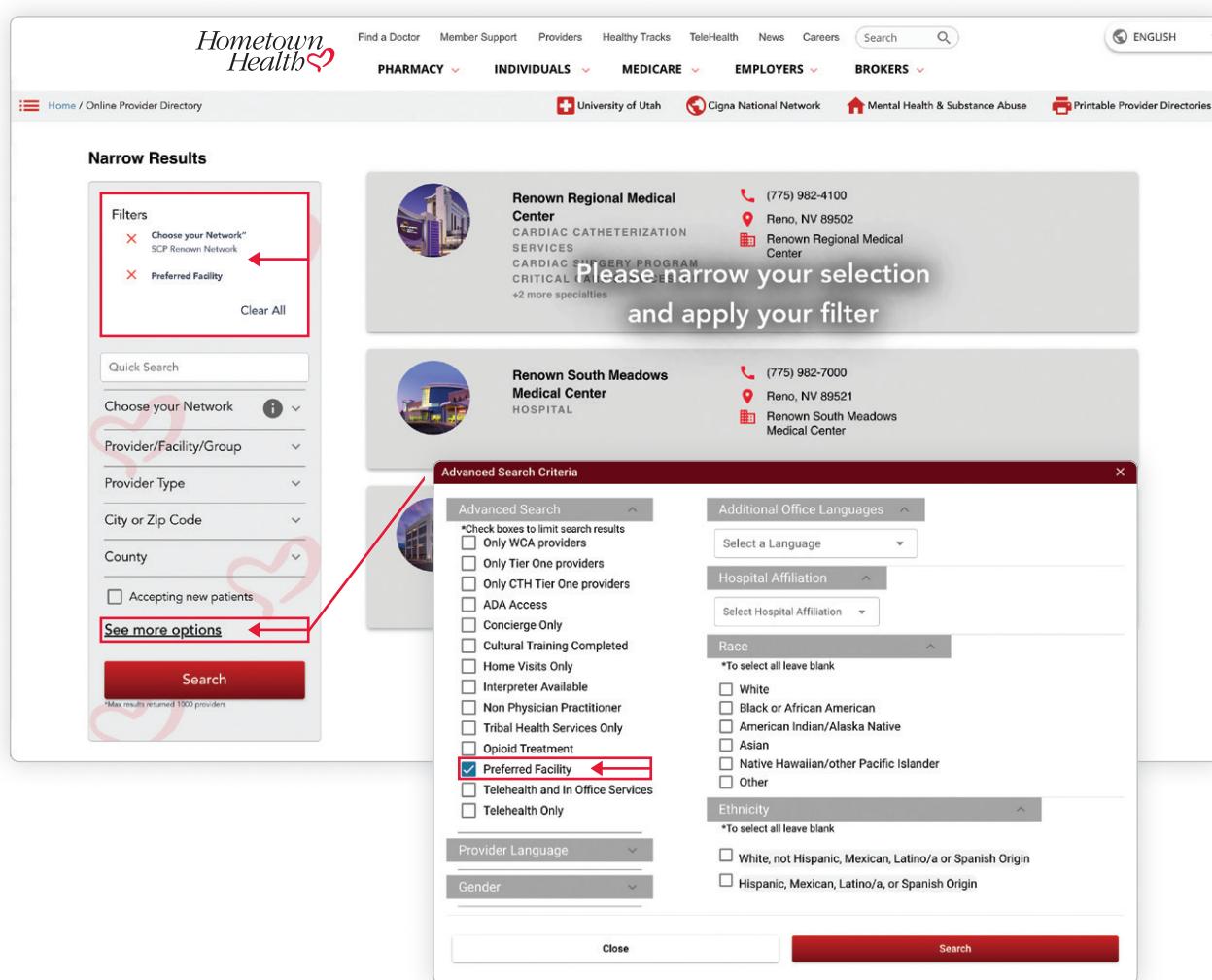
Be sure to have your Senior Care Plus card ready.

IMPORTANT: In an emergency, always dial 911.

Use the online Provider Directory

We recommend using the online provider directory (instead of a printed copy). The online directory is updated with changes daily. Printed directories are only up to date on the day they were printed. By using the online directory, you will have the most up to date information on which providers are considered in network for your plan. **How to Access:**

1. Go to SeniorCarePlus.com and click Directories.
2. Select the plan listed on your ID card. That will preload your network in the online provider directory.
3. You can then click on See more options and select the Preferred Facility checkbox. Afterwards, click the Search button and then the Preferred Facilities in your network will show in the search results.



IF YOU DO NOT HAVE ACCESS TO A COMPUTER, SMART PHONE OR TABLET,

CALL CUSTOMER SERVICE AT **775-982-3212**.

Our agents will be able to help you find an in network provider.

Choosing a Primary Care Provider

Your Primary Care Provider (PCP) is your main point of contact for your health. They handle your regular checkups, help prevent illness and support your overall wellness. They treat common conditions, provide screenings and help you make healthy choices. If you need specialty care your PCP will refer you to the right specialist.

TIPS FOR CHOOSING A PRIMARY CARE PROVIDER

1. Pick an in-network PCP.

Choosing an in-network provider helps you avoid surprise costs. Find one at SeniorCarePlus.com/Directories (see page 16) or call **775-982-2605** (TTY Relay Service – **711**). Interpreter services are available.

**IF YOU ARE ON THE RENOWN PREFERRED PLAN,
YOU MUST CHOOSE A PCP ON THE
Senior Care Plus Renown Preferred Network.**

2. Choose a provider with the right experience.

- **Family Medicine** – treats all ages and many conditions.
- **Internal /General Medicine** – focuses on adults, prevention and chronic conditions.
- **Geriatric Medicine** – specializes in older adults with complex needs.
- **Nurse Practitioner (NP)** – can diagnose illnesses, develop treatment plans and prescribing medications under the guidance of supervising physician.
- **Physician Assistant (PA)** – can diagnose, prescribe medications and manage most health needs under the guidance of supervising physician.

IMPORTANT NOTE ABOUT NURSE PRACTITIONERS AND PHYSICIAN ASSISTANTS:
Visits with a Nurse Practitioner or a Physician Assistant are backed by a supervising physician, so you get the benefit of two providers in one! It's coordinated care that ensures in-clinic availability and access to care when you need it.

If your Primary Care Provider leaves the network, get established with a new PCP as soon as possible! CALL THE PERSONAL ASSISTANT TEAM AT **775-982-2605** TO ESTABLISH WITH A NEW PCP RIGHT AWAY.

Provider Discussion Checklist

USE THIS CHECKLIST TO GUIDE YOUR DISCUSSION AT EACH PRIMARY CARE VISIT.

Get ready for a better PCP appointment

What to bring, what to ask and how to use our Provider Discussion Checklist

Preparing for your Primary Care Provider visit helps you get more out of your time together. A few simple steps can make your appointment smoother, more focused and more helpful for your long-term health.

- **Bring a full list of your medications** and review them with your provider. Ask if you are taking them correctly, if any side effects are expected and if there is a lower cost option available.
- **List any specialists or other providers you see** so your PCP can coordinate your overall care.
- **Be ready to discuss your physical activity**, including any limits with daily tasks, pain that interferes with work, limits with social activities or whether none of these apply.
- **Note any risks or concerns**, including falls, balance issues or bladder control problems.
- **Check in on your mental health** by noting how you feel day to day. This may include calmness, energy, sadness, sleep issues, or anything else you want to share.

Use our easy Provider Discussion Checklist on the next page to guide your visit and make sure nothing important is missed.

A NOTE ON TEST RESULTS: The back page of the Provider Discussion Checklist discusses Medical Test (see page 20), please review. If you use MyChart, remember that test results appear as soon as they are available. Give your provider time to review them and follow up with a plan and ask how your results will be communicated so you know what to expect.

MEDICATIONS

We review your medical records including your medication regimen before each visit, but it's always a good idea to quickly discuss them with your provider.

Ask:

• Am I taking them correctly?	YES	NO
• Are there any side effects?	YES	NO
<hr/>		
• Is there a lower-cost option?	YES	NO
<hr/>		

CARE TEAM

List any specialists or other providers you're seeing. This will help your Primary Care Provider coordinate your overall care.

PHYSICAL ACTIVITY

Discuss your level of physical activity with your Primary Care Provider. They will work with you to determine if you should start, increase or maintain your current exercise level.

Mark any that apply:

- I have limitations with my regular daily activities.
- I have pain that interferes with my normal work.
- I have limitations with my social activities.
- I don't experience any of the above.

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Plus 

RISK OF FALLS

Mark the option that best describes you:

- I have had a fall.
- I have problems with balancing or walking.
- I don't have problems with balancing or falling.

BLADDER CONTROL

Mark any that apply to you:

- I have problems with bladder control.
- I have problems with leaking of urine.
- I don't have bladder or urine leakage problems.

MENTAL HEALTH

Mark all that currently apply:

- I feel calm and peaceful.
- I have a lot of energy.
- I feel sad or blue.
- I am having difficulty sleeping.
- Other

MyChart:

An important note about test results

We believe that sharing information builds trust and that you should be able to see your results as soon as they are available. By law, test results will be shared with you via MyChart at the same time your provider gets them. Please be patient in allowing your provider to review them and reach out to you with a plan of care. Test results may be difficult to interpret, and may depend upon individual circumstances. We recommend that any time a test is ordered, you ask your provider what the process of getting your test results will be, so you know what to expect.

Medical Test Instructions and Results Notification

Your healthcare provider has ordered a medical test for you. Medical tests can help detect a condition, determine a diagnosis, check to see if treatment is working, or monitor a condition over time.

PLEASE REVIEW THIS PAGE WITH YOUR PROVIDER
to make the most of your medical test and to
understand when and how you will receive your test results.

HOW DO I KNOW WHAT MEDICAL TESTS WERE ORDERED TODAY?

- The medical tests your health care provider ordered will be listed on your After Visit Summary.
- You can also view your medical test orders in MyChart.

HOW DO I SCHEDULE MY MEDICAL TEST?

- Call **775-982-5000** to schedule both a blood work test at Renown Lab Services or an imaging test at Renown Imaging. You can also schedule lab services and select imaging tests through MyChart.

DO I NEED TO FAST FOR MY BLOOD WORK TEST?

YES – For best results you should fast before this test.

NO – Fasting is not required for this test.

YOUR PROVIDER WILL FILL OUT THIS BOX

Senior Care Plus **Renown**[®]
HEALTH

IMPORTANT RESULTS INFORMATION

HOW LONG WILL IT TAKE TO GET MY RESULTS IN MyChart?

- Medical test result timing varies. Federal law requires the release of medical results to the patient as soon as they are available. This means you will always get your results in a timely fashion, and you will most likely receive them through MyChart BEFORE your next visit with your health care provider.

Please understand providers may take 48-72 hours to contact you once your results become available.

HOW WILL MY PROVIDER FOLLOW UP WITH ME?

- If your results are within the expected range – ***no follow up is required and you will not be contacted.***
- Your provider will contact you with your results through MyChart.
- A follow-up appointment is recommended – ***please schedule that appointment for a few days AFTER your medical test to ensure your provider will have your results.***

WHAT IF I HAVE QUESTIONS ABOUT MY RESULTS?

- If you want to discuss your results or have questions, we recommend making a follow up appointment with our provider.

– 20 – Please call **775-982-5000** to schedule.

Clip and take to your next PCP appointment.



Renown Specialists – what to expect

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HEALTH

WHEN YOU NEED CARE FROM A SPECIALIST, there are several steps behind the scenes to make sure you see the right specialist at the right time. Understanding some of the steps that happen behind the scenes may help you know what to expect when you receive a specialist referral.

- **Urgent referrals**

If your care is urgent, your referral is sent for expedited review. The specialist office will review your situation to make sure you are seen as quickly as needed.

- **Right specialist**

Referrals are triaged to match you with a provider who has the right experience for your specific care needs.

Specialty care teams are diverse. Renown's Specialty Care Teams may include medical doctors as well as Advanced Practice Providers, Physician Assistants and Nurse Practitioners. To ensure you are getting the appropriate specialty care for your unique needs a referral from your PCP may be needed.

- **Primary Care Provider**

Your PCP and specialist may communicate directly through secure messages in the electronic medical record system.

- **Pre-visit planning**

This step helps make sure lab work or tests are done ahead of time, preventing delays.

- **E-Consultations**

Your PCP can consult with a specialist and get guidance without you needing to go to a specialist's office.

- **On-call specialists**

Some specialties have providers available 24/7 to give advice and real-time assessment.

These steps are all designed to make sure you get the best, safest, and most effective care as efficiently as possible.

Preferred, In-Network and Out-of-Network – understanding these terms

Preferred Facility

Preferred facilities are in-network facilities that provide inpatient and/or outpatient services to members for a lower co-payment than other in-network facilities.

In-Network Facility

An in-network provider is a healthcare professional, facility or organization that has entered into a contractual agreement with Senior Care Plus to provide medical services to our members. Through this agreement, the provider and Senior Care Plus have established mutually accepted terms that define quality standards, service expectations and reimbursement rates. By participating in the network, providers agree to deliver care in alignment with Senior Care Plus' commitment to accessible, high-quality and cost-effective healthcare. In return, members benefit from lower out-of-pocket costs and coordinated care experiences.

Out-of-Network Facility/Provider

Out-of-network refers to a provider or facility with which we have not arranged to coordinate or provide covered services to members of our plan. Out-of-network providers are not under contract to deliver covered services and you may be responsible for all costs.



Referrals and Authorizations

Did you know that "referral" and "authorization" mean different things?

REFERRAL	AUTHORIZATION
<p>What it is: Your PCP's recommendation for you to see a specialist or receive specialized care. Most specialists require a referral before scheduling an appointment. Senior Care Plus does not require a referral for payment.</p>	<p>What it is: A check by the health plan to make sure treatments, tests, or medicines are safe, necessary, and effective. Some services need prior authorization to be covered.</p>
<p>How it works:</p> <ol style="list-style-type: none">1. Your PCP sends a referral and your medical records to the specialist's office.2. Specialist office may call you to schedule, or you can call them. Processing time may vary.3. After your visit, the specialist develops a treatment plan, which may need prior authorization.	<p>How it works:</p> <ol style="list-style-type: none">1. The provider submits an authorization request with treatment details and supporting medical records.2. A nurse, pharmacist, or doctor reviews the request, your records, and plan benefits to see if it's medically necessary.3. You and your provider are notified in writing of the decision.
<p>Key note: Referrals help your PCP and specialists coordinate care.</p>	<p>Key note: Prior authorization ensures care is safe and meets standards, but does not guarantee payment. Coverage depends on eligibility, deductible and plan rules.</p>
<p>MEDICAL NECESSITY</p> <p>Services/Treatment must be needed to prevent, diagnose, or treat a condition.</p> <p>They must also meet nationally recognized standards of care to be approved.</p>	

How to File a Complaint (Grievance)

Senior Care Plus is here to support you. If you are unhappy with any aspect of your care or service, you have the right to file a complaint (also called a grievance).

Ways you can contact us.

You can submit your complaint in any of the following ways:

- Phone or email – Call Customer Service at **775-982-3112** or send an email to customer_service@hometownhealth.com.
-  MyChart – Send us a secure message through your MyChart account.
- In Person – For more complex concerns, you may ask a Customer Service representative to help schedule an in-person appointment.

What to expect when you contact us.

A Customer Service representative will:

- Listen to your concerns and explain how the complaint process works.

Answer questions such as:

- How long do I have to file a complaint and what happens after I submit my complaint?
- When should I expect a resolution?

Information to have ready.

To help us understand and resolve your concern, please provide:

- Dates of service or events and a description of what happened
- Any supporting documents such as letters, billing statements, or notes

What happens after you file a complaint?

Our Customer Service Department will address any immediate needs and notify you with a resolution when possible.

If your concern needs further review, your case may be sent to our Appeals and Grievances Department. The Appeals and Grievances team will:

- Complete a thorough investigation
- Coordinate with the appropriate departments, providers, or partners
- Request any additional information needed

You will receive a written response.

Once the review is complete, you will receive a letter explaining the outcome of your complaint. Most decisions are sent within 30 calendar days. If more time is needed, we will contact you.

STEP 3: Review Your Benefits



IN THIS SECTION WE WILL:

- Introduce you to your Evidence of Coverage (EOC)
- Where to find your EOC
- Instruct you on how to use your EOC
- Explain common insurance terms
- Provide you with instructions on how to ready your EOC
- Explain how to use your supplemental benefits
(dental, vision, healthy rewards, etc.)

WHAT IS THE EVIDENCE OF COVERAGE (EOC)?

Your EOC is an important document that explains how your health plan works. It tells you about your benefits, costs, rights, and responsibilities, and what services are covered or not covered. Think of it as a map that shows how decisions about your care and coverage are made. It helps you understand what your plan includes and what steps to take when you need care. The EOC is also a legal document, which means both you and the health plan must follow it. If there is ever a question about your coverage, we use the EOC to decide what the plan can pay for. Keep it in a safe place and use it to learn more about your benefits.

WHERE DO I FIND MY EOC?

Visit SeniorCarePlus.com/Documents.

Find the current year's plan documents: Scroll down to the section with your plan year (for example, 2026 Senior Care Plus Plan Documents).

Check your plan name: Your plan name can be found on your member ID card (for example, Renown Preferred Plan, Essential Plan, etc.).

Match your plan name on the website: On the Documents page, find the heading that matches your plan name. Under that heading, you'll see links to important plan materials.

View your EOC: Once you find your plan section, click the link labeled **Evidence of Coverage** to open or download the document.

Save or print your EOC: You can read it online, save a copy to your device or print it out so you can refer to it later.

Need a printed copy? If you'd like a paper copy mailed to you, click the link on the page that says **Request Plan Document** and fill out the short form.

Important chapters to know in the Evidence of Coverage (EOC)

Chapter 3

Using our plan for your medical services

Overview: How to get medical care, the importance of using in-network providers, how to get care in an emergency, rules for ownership of durable medical equipment

Chapter 4

Medical Benefits Chart (what's covered and what you pay)

Overview: Details the services and items covered by the plan, how much your cost share will be, as well as exclusions

Chapter 5

Using plan coverage for Part D drugs

Overview: Outlines the prescription medication benefits, including formularies and coverage rules



Common insurance terms to know

- **Premium** – The money you pay every month for your plan.
- **Deductible** – The amount you pay for care before your plan starts helping.
- **Copay (Copayment)** – A set fee you pay for a doctor visit or medicine.
- **Coinsurance** – The percentage of a cost you pay after meeting your deductible.
- **Out-of-Pocket Maximum** – The most you'll pay in a year for covered services. After this, the plan pays 100%.
- **Formulary** – The list of medicines your plan covers.
- **Prior Authorization** – Approval from your plan before you can get certain services or medicines.
- **Network / In-Network** – Doctors, hospitals, and pharmacies that work with your plan.
- **Out-of-Network** – Providers that don't work with your plan. Using them usually costs more.
- **Annual Notice of Change (ANOC)** – A letter that tells you about changes to your plan for next year.
- **Appeal** – A request to have the plan review a decision you disagree with.
- **Grievance** – A complaint about your care or plan service.
- **Step Therapy** – A rule that asks you to try a cheaper medicine before a more expensive one.
- **Coverage Determination** – A decision from your plan about whether a service or medicine is covered.
- **Benefit Period** – The time Medicare uses to count hospital or nursing care costs.
- **Explanation of Benefits (EOB)** – A paper or online statement that shows what the plan paid and what you may owe. An EOB is NOT a bill.

How to read your Explanation of Benefits (EOB)

Once your claim has been processed, both you and your provider will receive an EOB. If any part of the EOB is not clear, call Senior Care Plus customer service at **775-982-3112**. They will look up the claim and answer any questions you may have.

MyChart: View claims and EOBS

- To view your claims, click on **Your Menu** in the upper left corner of the page.
- Scroll to the **Insurance** section click on **Claims**.
- You will be able to see EOBS for any claims that have completed by, those that have not completed will display a **Processing** message.

EXPLANATION OF BENEFITS

Claim Information		Service Details							
Member Name	Member ID: C00077777	Group: SCP RENOWN PREFERRED PBP 023	Date: 3/30/21	Provider: Provider Name	Location: 20/20 VISION	Paid to: 20/20 VISION	Reason Code: 3	Patient Total: 45.00	
Reference Number: CLM-1129254		Total cost of services 110.00							
Date: 3/30/21		In-plan savings -1.30							
Provider: Provider Name		Covered by this plan -63.70							
Location: 20/20 VISION		Total expected cost 7 45.00							
Paid to: 20/20 VISION		1 This is not a bill. There is no payment due for these services at this time.							
Service: 2 OFFICE/OUTPATIENT ESTABLISHED MOD MDM 30-39 MIN		Billed: 3 110.00	Allowed: 4 110.00	Not Covered: 5 0.00	Copay: 6 45.00	Deductible: 0.00	Co-Insurance: 0.00	Reason Code: 8 3	Patient Total: 45.00
Claim Totals: 110.00 110.00 0.00 45.00 0.00 0.00 45.00		Code Summary 3 - 3-Co-payment Amount							

The numbers on the diagram to the left correspond to the numbered explanations below.

- 1. An EOB is not a bill.** It is an overview of the total amount the provider charged, how much Senior Care Plus paid, and the amount you are responsible for. You may get a bill separately from the provider.
- 2. Service** description is an overview of the healthcare services you received, like a medical visit, lab tests, or screenings.
- 3. Billed** charges is the amount your provider billed Senior Care Plus for your visit.
- 4. Allowed** charges is the amount your provider will be reimbursed based on your plan's benefits and the amount the in-network provider is contracted to be paid. If the provider is not contracted with Senior Care Plus, we allow the same amount Medicare would pay for the same service. This may not be the same as the billed charges.
- 5. Not covered** amount is the difference between the billed charges and the allowed charges.
- 6. Copay, deductible and co-insurance** is the amount you are responsible for according to your plan's benefits. You will see this broken-down service-by-service (line-by-line) in this section.
- 7. Total expected cost** is the sum of the deductible, copay, coinsurance and any non covered amounts you are responsible for. You may have paid the total expected cost at the time of the service in the form of your copayment.
- 8. Reason code** is a code that explains more about the costs, charges and paid amounts for your visit.
- 9. Code summary** is a note that corresponds with the reason code that explains more about the costs, charges and paid amounts for your visit.

What if I have questions about a bill I received from a medical provider?

If you have questions about a medical bill or the services you received from a healthcare provider, it's important to know who to ask for help. Reaching out to the right person or group can make it easier and faster to solve your problem. Usually, you should ask the group responsible for the issue, whether it's Senior Care Plus or your doctor.

WHEN TO CONTACT SENIOR CARE PLUS

You should call Senior Care Plus if your questions are about:

- Plan benefits, like your copays
- Denied Payment or Authorization of Services
- An Explanation of Benefits you received from Senior Care Plus
- Problems finding in-network providers or services
- Unresolved issues with your provider
- Rules or policies of your health plan

WHEN TO CONTACT YOUR PROVIDER

If your concerns are about the care you received or a bill you received from your provider, contact your provider's office. This includes:

- Questions about charges or a bill
- Concerns about staff behavior
- Difficulty getting information about your health
- Concerns about care, like scheduling or cleanliness
- Immediate health or safety issues

IF YOU'RE CALLING TO SUBMIT A COMPLAINT

- Your Customer Service representative will explain what to expect during the complaint process.
- Don't hesitate to ask questions—such as when you can expect a resolution or how long you have to file your complaint.
- **See page 24 to better understand what to expect with the grievance process.**

Senior Care Plus partners with NationsHearing®

to make it easy and affordable to take care of your hearing.

Your benefit includes:

- A free hearing test every year
- Access to 8,000+ providers across the country
- Top hearing aid brands with low prices
- A 60-day money-back guarantee
- Free repairs and batteries for 3 years
- Three follow-up visits each year
- One-time replacement if your hearing aids are lost or damaged



HOW TO GET STARTED

1. Call **877-200-4189** (TTY Relay Service – **711**) or visit **SeniorCarePlus.NationsBenefits.com**.
2. Have your Senior Care Plus Member ID ready.
3. Create a password to sign in and schedule your hearing test.

Help is available:

Member Experience Advisors are available 8 a.m. to 8 p.m. (PST), seven days per week. Language support services are available free of charge.

What's the difference between my medical hearing benefit and my supplemental hearing benefit?



Medical (Part C) Hearing Benefit	Supplemental Hearing Benefit NationsHearing®
Covers medically necessary hearing exams when ordered by your doctor.	Covers routine hearing tests and hearing aids through NationsHearing.
Used to diagnose or treat a medical condition related to hearing loss.	Designed to help improve hearing and quality of life with affordable options.
You may have a copay or coinsurance, depending on your plan.	Free annual hearing test with low-cost hearing aids and extra services.
Does not include hearing aids or batteries.	Includes hearing aids from major brands, 3-year warranty, batteries and follow-up visits.
Visits are billed to Senior Care Plus medical coverage.	Managed through NationsHearing, a partner company.
Schedule through your Primary Care Provider or Ear, Nose and Throat Provider.	Schedule directly by calling 877-200-4189 (TTY Relay Service – 711) or visiting SeniorCarePlus.NationsBenefits.com .

Technology Level and Pricing	Description
LEVEL 1 \$495 Per Device	<ul style="list-style-type: none"> Best for people who live a quieter lifestyle Intended for simpler sound situations such as home or small meetings Great for one-on-one, smaller or closer conversations
LEVEL 2 \$670 Per Device	<ul style="list-style-type: none"> Helps in listening situations with minimal background noise Good for one on one conversations in small groups (<i>three people or less</i>)
LEVEL 3 \$970 Per Device	<ul style="list-style-type: none"> Designed for people who are moderately active Good for sound environments with moderate levels of background noise Ideal for quieter restaurants or shopping
LEVEL 4 \$1,270 Per Device	<ul style="list-style-type: none"> Designed for active people Improved speech clarity Binaural processing (<i>hearing aids communicate with each other</i>) Superior sound quality Assists with background noise
LEVEL 5 \$1,570 Per Device	<ul style="list-style-type: none"> Designed for very active people Designed to deliver the best possible hearing and speech clarity even in complex sound situations Binaural processing (<i>hearing aids communicate with each other</i>) Greater adjustability Best noise reduction and sound isolation Best wind noise manager (<i>great for golfers, boaters & outdoor lifestyles</i>)
LEVEL 6 Premium Specialty \$1,970 Per Device	<ul style="list-style-type: none"> Designed for extremely active people Exceptional sound quality with the very best possible hearing and speech clarity, even in complex sound situations Provides a larger range of sounds and tones Binaural processing (<i>hearing aids communicate with each other</i>) Greater adjustability, includes automatic adjustment Best noise reduction and sound isolation that allow conversations to be free of distortion Best wind noise manager (<i>great for golfers, boaters & outdoor lifestyles</i>)

HEARING AID PLAN COVERAGE

Renown Preferred Plan • Extensive Duals Plan • Essential Plan:

Up to two hearing aids per year. Hearing aids: \$495 – \$1,970 copayment

Copay varies based on the technology level selected.

Select Plan • Patriot Plan:

Up to \$400 copayment allowance toward the cost of up to two hearing aids from NationsHearing® every benefit period.

You are responsible for any remaining cost after the plan's benefit maximum is applied.

NationsBenefits® Healthy Rewards Program

As a Senior Care Plus member, you can earn rewards for completing health-related activities that help you stay healthy. Your rewards are added to a Healthy Rewards card, which you can use to buy items and services.

HOW IT WORKS – STEP BY STEP

1. Complete a healthy activity.

Activities may include preventive visits, screenings, or other health-promoting actions. See a list of all qualifying activities at SeniorCarePlus.com/Rewards.

2. Receive your card – your first reward is pre-loaded on your card.

After your first activity, your card is mailed to you with your initial reward amount pre-loaded. This can take 4–6 weeks, so please be patient. Keep your card!

3. Earn more rewards – each completed activity adds to your card

(allow 4–6 weeks). Each time you complete a qualifying activity, your rewards are added to the card you received for your first qualifying event.

4. Activate your card.

Visit SeniorCarePlus.NationsBenefits.com or call **877-200-4189** (TTY Relay Service – **711**).

5. Spend your rewards

Use your card anywhere MasterCard is accepted, including gas. Run it as credit – no PIN needed.

IMPORTANT: Do not use the card for alcohol, tobacco, firearms or restricted items. Rewards end if your membership ends.



How to order Over-the-Counter products with NationsOTC®

Every Senior Care Plus member is awarded a quarterly allowance to order Over-The-Counter (OTC) products through our partner, NationsOTC.

Quarterly allowance varies by plan:

PLAN NAME / COVERAGE AMOUNT

Renown Preferred Plan • \$50 per quarter

Essential Plan • \$50 per quarter

Extensive Duals Plan • \$205 per quarter

Select Plan • \$140 per quarter

Patriot Plan • \$25 per quarter



STEP-BY-STEP GUIDE

1. View the catalog.

- Visit SeniorCarePlus.com/OTC to see all available OTC products.
- You can also request a printed copy of the catalog by calling Senior Care Plus at **775-985-3112** or **888-775-7003** (TTY Relay Service – **711**).

2. Set up your account for online orders.

- Go to SeniorCarePlus.NationsBenefits.com and register on the MyBenefits portal.

3. Place your order online.

- Once registered, you can view all products and order your quarterly supply online.

4. Order by phone.

- Call **877-200-4189** (TTY Relay Service – **711**) to place an order with a Member Experience Advisor. Advisors are available 24 hours per day, seven days per week, 365 days per year.

Your medical transportation service Uber Health

Your medical rides with Uber Health and Uber Wheelchair-Accessible Vehicle (WAV)

Senior Care Plus members can use Uber Health, a ride service for medical appointments. Drivers use their own cars to take you to and from appointments. The rides are available as a benefit on your Senior Care Plus plan. If you use Uber as primary transportation, please ask your representative about long term options to support your needs.

RIDE LIMITS

Uber Health covers up to 24 one-way rides
(12 round trips) **or \$1,250, whichever comes first.**

IF YOU'RE ON THE EXTENSIVE DUALS PLAN,
the limit is 36 one-way rides (18 round trips) **or \$1,250.**

CHECK YOUR RIDE BALANCE

Call Customer Service at **775-982-3112**.

SCHEDULE A RIDE

Call **775-982-3112** to schedule a ride.

Things to know before your ride: Rides depend on driver availability in your area.
Drivers cannot help you in or out of the car.

AFTER YOUR APPOINTMENT

Call **775-982-3112** to schedule your ride home.

This service cannot be used within 24 hours of anesthesia or sedation or upon discharge from the hospital. Drivers are not trained for medical emergencies.

FLEXIBLE RIDES

This option lets you set a 24-hour window for pickup and drop-off.

You get a text and can choose when to ride by replying.

IF YOU USE A WHEELCHAIR

You must be able to transfer to the car yourself and fold your wheelchair to fit in the trunk. If you cannot transfer or use a motorized wheelchair, Uber WAV may help. WAV drivers cannot lift you up steps, but they can help with ramps and secure your wheelchair in the vehicle. Uber WAV rides must be scheduled the same day. Call three to four hours in advance.

AREAS COVERED

Carson City, Cold Springs, Hidden Valley, Lemmon Valley, Red Rock, New Washoe City, North Reno, Reno, Pleasant Valley, South Reno, Southwest Reno, Spanish Springs, Sparks, Sun Valley, Verdi, Washoe Valley

Your dental benefits are provided by
LIBERTY Dental Plan

VISIT THE DENTAL PAGE AT SeniorCarePlus.com/resources/dental/ to view the Liberty Dental provider directory.

Here are a few tips about your dental benefits. We want to help make your dental benefits easier to understand!

Here are a few things to keep in mind:

- If your dentist leaves Liberty Dental**
You'll need to choose a new dentist who still works with Liberty Dental.
- No out-of-network coverage**
Your plan is a closed HMO, which means Liberty Dental only covers care from dentists in their network.
- Dentist contracts may change anytime**
Liberty Dental's dentist contracts don't always follow the calendar year, so sometimes a dentist's contract can end in the middle of the year.
- Get a pre-treatment review**
If your dentist recommends a treatment, ask them to send a pre-treatment request to Liberty Dental first. This helps you find out if the service is covered. If it's not covered your dentist may bill you for it.

Comprehensive coverage amounts shown below are first dollar coverage – meaning you have no out-of-pocket expense until the coverage limit is reached!

PLAN NAME / COVERAGE AMOUNT

Renown Preferred Plan • **\$500 Comprehensive Coverage**

Essential Plan • **Preventive Dental Coverage**

Extensive Duals Plan • **\$2,500 Comprehensive Coverage**

Select Plan • **\$1,500 Comprehensive Coverage**

Patriot Plan • **\$1,500 Comprehensive Coverage**

Your EyeMed vision benefit



Senior Care Plus partners with EyeMed Vision Care to provide you with a \$0 copay annual eye exam and coverage for contacts or glasses. Please see your plan documents for an explanation of medical vision services and emergencies.

Senior Care Plus vision benefits are provided exclusively by EyeMed. **To access your vision benefits you must use an EyeMed Provider.**

You can find an EyeMed Provider by:

- Call toll free, **866-723-0513**
- Monday through Saturday from 7:30 a.m. to 11 p.m. (EST)
- Sunday from 11 a.m. to 8 p.m. (EST)
- Go to eyemed.com and click on **Find an eye doctor** and then select the **Advantage Network** from the **Choose your Network** drop down menu. Then simply enter your zip code to find an in-network eye doctor near you.

PLAN NAME / COVERAGE AMOUNT

Renown Preferred Plan • \$250 allowance

Essential Plan • \$250 allowance

Extensive Duals Plan • \$400 allowance

Select Plan • \$250 allowance

Patriot Plan • \$170 allowance



STEP 4: Understanding Your Prescription Drug Benefit



Are my medications covered?

The list of medications that are covered by your plan are found in the formulary. You can use the online formulary search at welcome.optumrx.com/seniorcareplus/prescription-drug-list to see if the medications your doctors prescribed are covered by your plan. You can also download a copy of the formulary at SeniorCarePlus.com/prescriptions/formulary-search.

IMPORTANT THINGS TO KNOW ABOUT YOUR MEDICATION FORMULARY

Access to medications:

- You will always have access to the medications you need. The formulary includes at least two medications in the most common categories.
- Using covered medications saves money. If you use a medication not on the formulary, you'll pay full price unless you get a formulary exception.
- Generic medication are the same as brand-name medications. They have the same ingredients, strength, and safety, but usually cost less.

WHY THE FORMULARY MAY CHANGE

Most changes happen at the start of the year; rare changes may happen during the year.

Changes may happen if:

- The Food & Drug Administration (FDA) approves a new medication.
- A medication is approved for a new use.
- A medication is withdrawn for safety.
- A medication becomes available over-the-counter (OTC). OTC medications are not covered with your prescription benefit, but Senior Care Plus offers a separate OTC benefit. **See page 35.**
- A generic medication becomes available, replacing the brand-name version.

How do I make sure my prescription medications are covered?

Some prescriptions need approval from your health plan before they can be covered. This is called prior authorization. It helps make sure you get the right medications, keeps care safe, and can lower your costs.

If a medicine needs prior authorization, your pharmacy will tell your doctor, and your doctor will start the process of applying for a prior authorization.

You can check if a medicine needs prior authorization by looking at the online formulary.

For a prior authorization medication request, the health plan usually makes a decision within 24 to 72 hours. The time depends on the type of request and how quickly your doctor sends the needed information.

You can track your prior authorization in the Optum Rx Portal.

Learn how to set up your Optum Rx Portal account. [See page 43.](#)

WHAT IF MY REQUEST FOR COVERAGE IS DENIED?

In the event a medication prior authorization request is denied, the decision letter will include an explanation and next steps to help you get the medications you need.

To learn more visit the **Coverage Determinations & Appeal Rights** page.
SeniorCarePlus.com/prescriptions/coverage-determinations-appeal-rights

If your plan doesn't cover a prescription because it is not covered by Medicare Part D, you can still choose to fill it and pay out-of-pocket. Use your Optum Perks Card to get the lowest price!

Which pharmacies can I use to fill my prescriptions?

Using in-network pharmacies ensures your medications are covered and helps lower your costs. You can see which retail pharmacies are in-network with Senior Care Plus at welcome.optumrx.com/seniorcareplus/pharmacy-locator.

If you prefer to have your prescriptions delivered, we offer two mail order pharmacies. Renown Mail Order and Optum Rx Home Delivery. Read more about each mail order service below and on the following page.



Renown Pharmacy – Senior Care Plus' choice

Here to serve Senior Care Plus members and the preferred pharmacy of Renown Health providers.

Renown Pharmacy offers best in class service by delivering directly to your door!

With helpful pharmacists, hard-to-find prescriptions, and a money-saving mail order program, Renown Pharmacy has convenient local pharmacies for all your prescription drug needs. Vaccinations are also available at all locations.

Three Renown Pharmacy locations to choose from:

- 21 Locust St., Reno, NV 89502 • **775-982-5280**
- 75 Pringle Way, Reno, NV 89502 • **775-982-7737**
24 hours per day, seven days per week
- 10105 Double R Blvd., Reno, NV 89521 • **775-982-5366**

Optum Rx Home Delivery (mail order)

Setting up Optum Rx® Home Delivery to receive mail order prescription medication in a convenient and cost-effective way is easy.

Create your account at OptumRx.com.

It takes just minutes to register on OptumRx.com and access your health plan. You'll need to:

1. Enter the number on your health plan ID card.
2. Choose a username and password.
3. Enter an email address.
4. Enter a phone number or choose security questions.

ONCE YOUR OPTUM RX ACCOUNT IS CREATED, YOU CAN THEN TRANSFER AND ADD EXISTING PRESCRIPTIONS TO HOME DELIVERY BY CLICKING ON Medication List.

Optum Home deliver offers the following benefits:

- 24/7 pharmacist access to answer your questions
- A 100-day supply to help you stay on track
- An average savings of \$10-\$12 per order with free shipping.

Medications usually arrive 2-5 days after the order is received. Eligible medications can also be enrolled in auto-refill for your convenience. Track your order status online or with the Optum Rx mobile app.



FROM LEFT TO RIGHT:

Renown Pharmacy Locust - 21 Locust St., Reno, NV 89502 • Renown Pharmacy South Meadows - 10105 Double R Blvd., Reno, NV 89521 • Renown Pharmacy Pringle - 75 Pringle Way, Reno, NV 89502

Mail order prescriptions

USING A MAIL ORDER PHARMACY IS AN EASY AND COST-SAVING WAY TO GET YOUR MEDICATIONS.

FIVE REASONS TO TRY MAIL ORDER

1. Save Money

You can get a 3-month (100-day) supply of your medicine for the cost of just two copays.

2. Convenient

Order your regular medications (like those for blood pressure, cholesterol, allergies or diabetes) by phone or online. Your medicine is delivered right to your home, so you don't have to make extra trips or wait in line at the pharmacy.

3. Safe and Accurate

The pharmacy checks your prescriptions each time they're filled to make sure the amount you take, strength, and medication combinations are safe. A pharmacist reviews your medications from all your doctors and will contact you or your doctor if there's a concern.

4. Great Service

You'll get the same quality service as your local pharmacy, plus FREE STANDARD SHIPPING right to your doorstep.

5. Helps You Stay on Track

People who use mail order pharmacies are more likely to take their medicines as prescribed. Automatic refills and home delivery make it easier to stay on schedule with your medications.

How much will my prescription cost?

Your cost at the pharmacy is based on:

- If your prescribed medicine is covered by your plan
- Your medicine's "tier" (generic, brand, or specialty)
- The pharmacy's price
- Whether you use an in-network pharmacy or out-of-network pharmacy

You'll never pay more than your plan's set copay or coinsurance for that tier, even if the pharmacy's price is higher. If the pharmacy price is lower, you'll pay the lower amount.

WHAT ARE "TIERS"?

Covered prescriptions on your plan are grouped into tiers. Each tier shows how much you'll pay for a medication. Lower tiers usually include generic medications and cost less. Higher tiers often include brand-name or specialty medications and cost more. Tiers exist to help you save money and make it easier to understand the cost of your medications. Choosing medications in a lower tier whenever possible can help you spend less.



How can I save money on my prescriptions?

We are all feeling the impact of higher prices and that includes medication costs. That's why we are here to help you save! Here are 4 ways to make sure you are saving every penny possible.

1. Safe and effective generics

Generic medications are copies of brand-name medications. They work the same way, have the same strength and safety, and are made to treat the same conditions. Using generic medications can save you money while giving you the same medicine your doctor prescribes.

2. Convenient mail order options

See pages 41-44 to read more about mail order.

3. M3P Program (Medicare Prescription Payment Plan)

Senior Care Plus offers a new way to pay for your prescription medications. Instead of paying each time at the pharmacy, you can pay in monthly installments for the year. Think of it like a level-pay plan: you get a monthly bill for any costs you owe, rather than paying at the counter each time.

To learn more or get help signing up, call OptumRx at **844-368-8729**.

4. Manufacturer Discount Programs

If you can't afford your medications, call Senior Care Plus Customer Service at **775-982-3112**, so they can connect you to one of our pharmacy services representatives who will see if you are eligible for a discount program.

PLEASE KNOW THAT MANUFACTURER DISCOUNT PROGRAMS CAN CHANGE THEIR RULES AT ANY TIME. The approval process can take a while and often requires proof of income and paperwork from both you and your provider.

NOTE: THE OPTUM PERKS CARD DOES NOT REPLACE YOUR SENIOR CARE PLUS ID CARD FOR PRESCRIPTION DRUG PURCHASES.

Save up to 80% on prescriptions! Optum Perks®

Optum Perks is here to help you save:

- Your card is pre-loaded with discounts on most FDA-approved medications.
- **Optum Perks can be used for medications not covered by Senior Care Plus.** If the pharmacist tells you a medication is not covered, present your Optum Perks card to receive a discount.
- Save up to 80% simply by showing the pharmacist your Optum Perks card.
- Use your card at thousands of pharmacies nationwide.
- There is no limit to how often you can use your card.
- It is important to remember that medications purchased with the Optum Perks card cannot be included in the Prescription Payment Program.

Start using your card right away. Visit perks.optum.com/seniorcareplus for more details.

OPTUM PERKS CARDS ARE ACCEPTED AT THOUSANDS OF PHARMACIES NATIONWIDE, FROM THE LARGE CHAINS TO THE LOCAL PHARMACY AROUND THE CORNER.



Who do I contact to request a medication refill?

IF YOU HAVE REFILLS AVAILABLE		
	Renown Pharmacy	Other In-Network pharmacy (examples: CVS & Raley's)
Renown Provider	<p>Use MyChart to send a request to Renown Pharmacy.</p> <ol style="list-style-type: none"> 1. Select the check box next to the medication you need refilled. Click Next. 2. Enter any comments or notes for the pharmacists, select a delivery method, pharmacy, pickup date and time if applicable. 3. Select the option of whether you'd like to pay now or pay later for your cost share. Click Next. 4. Review the details of your refill request. Click Submit. 	Contact the pharmacy via phone or their dedicated online customer portal.
Other Provider	<p>If the provider does not use MyChart, your medication may not appear in the list of refillable meds in the app.</p> <p>Contact the pharmacy via phone or their dedicated online patient portal.</p>	Contact the pharmacy via phone or their dedicated online customer portal.

NO REFILLS REMAINING		
	Renown Pharmacy	Other In-Network pharmacy (examples: CVS & Raley's)
Renown Provider	<p>Use MyChart to send a request to the ordering provider who will review the refill request.</p> <p>If it is approved, they will send the prescription to the pharmacy. If it is denied, your provider's office will notify you and work with you directly to meet your needs.</p>	<p>Use MyChart to send a request to the ordering provider who will review the refill request.</p> <p>If it is approved they will send the prescription to your preferred pharmacy to fill. If it is denied, your provider's office will notify you of the reason and work with you directly to meet your needs.</p>
Other Provider	<p>Contact your pharmacy to send a refill request to your provider, or call the provider's office to initiate a refill request.</p> <p>If it is approved, they will send the prescription to the Renown Pharmacy to fill. If it is denied, your provider's office will notify you and work with you directly to meet your needs.</p>	<p>Contact your pharmacy to send a refill request to your provider, or call the provider's office to initiate a refill request. The ordering provider will review the request.</p> <p>If it is approved, they will send the prescription to the pharmacy to fill. If it is denied, your provider's office will notify you of the reason and work with you directly to meet your needs.</p>

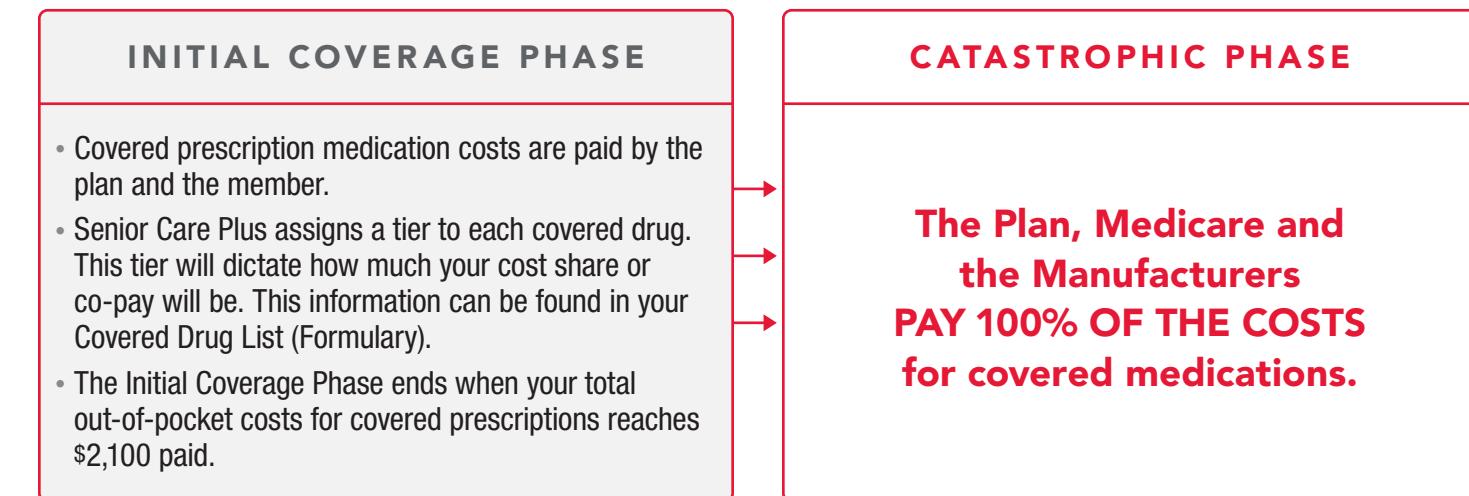
2026 prescription drug coverage phases

Initial Coverage Phase

Covered prescription medication costs are paid by the plan and the member. Senior Care Plus assigns a tier to each covered medication. This tier will dictate how much your cost share or co-pay will be. This information can be found in your Covered Drug List (Formulary). The Initial Coverage Stage ends when your total out-of-pocket costs for covered prescriptions reaches \$2,100 paid.

Catastrophic Phase

In this phase Senior Care Plus pays 100% of the cost for covered drugs. You, the member, will pay \$0 for all covered prescription drugs.



Pharmacy frequently asked questions and phone numbers

I need help with this...who can help me?	Senior Care Plus (SCP) Call toll free, 888-775-7003	Medical Provider	Pharmacy/Pharmacist
My medication is not covered	Call to ask, or write a letter to SCP for a coverage exception.	Ask your provider what medications in the same drug class are covered by Senior Care Plus.	Ask the pharmacy to submit a prior authorization request to your provider to start the exception process
Why did my copay/coinsurance go up/down?	Call SCP customer service so they can connect you with one of our pharmacy services representatives		
I cannot afford my medication. Are there less expensive options?	Call SCP customer service so they can connect you with one of our pharmacy services representatives.	Discuss with your provider to see if there is a less expensive alternative to treat your condition.	
Am I on the right plan for the medications I take?	Call SCP customer service/sales to help 775-982-3112 .		
I would like to talk to a pharmacist about my medications.	Call SCP customer service so they can connect you with one of our pharmacists		Call the pharmacy that fills your prescriptions and ask to talk with the pharmacist.
How do I synchronize my refills so I can pick them up/have them delivered at the same time?	If the pharmacy needs help with overriding requests to synchronize your refills, you can reach out to SCP for assistance.		Call the pharmacy that fills your prescriptions and ask them to get your fills aligned together.

I need help with this...who can help me?	Senior Care Plus (SCP) Call toll free, 888-775-7003	Medical Provider	Pharmacy/Pharmacist
How do I get my prescriptions delivered?	Sign up for one of our preferred mail order pharmacies. <i>See pages 23-25 for contact information.</i>		Call your pharmacy to see if they offer a delivery service. Delivery service may not be included in your copay amount for the prescription. Please discuss with your pharmacy.
I stopped taking my medication due to side effects.		Discuss alternative treatments with your provider to see if there is another way to treat your condition without causing side effects.	Discuss with your pharmacist to see if there is an alternative to treat your condition without causing side effects.
I would like to learn more about the Prescription Payment Plan.			Contact Renown Pharmacy at 775-982-7739 .
My doctor has prescribed a compound medication.			Contact Renown Pharmacy at 775-982-7739 .

Senior Care Plus is a Medicare Advantage HMO organization with a Medicare contract. Enrollment in Senior Care Plus depends on contract renewal. This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits and premiums and or copayments/coinsurance may change on January 1 of each year. Other providers are available in our network. The formulary, pharmacy network, and/or provider network may change at any time. You will receive notice when necessary. All attempts have been made to ensure the accuracy of the information in this document, but errors may occur. Please refer to your Evidence of Coverage for detailed benefit information. Material ID: H2960_2026_BestStartWelcome1_C (CMS Accepted)

STEP 5: Make the Most of Your MyChart Account



MyChart is a secure web-based application offered by Renown Health and Senior Care Plus. You can use it on your computer, phone, or tablet to get the care and information you need, as soon as you need it, from anywhere.

With MyChart, you can view all of your health information in one secure place.

MyChart allows you to:

- Send messages to Renown providers and their staff.
- See a list of your current medications and request medication refills.
- View your test results as soon as you need them.
- View your referrals and authorizations.
- View your claims and explanation of benefits.

MyChart is the key to your healthcare, even if you don't see a Renown Primary Care Provider.

If you have any questions about MyChart, you may call the MyChart customer service line at **775-982-2781** (TTY Relay Service – **711**). They are available Monday through Friday, 7:30 a.m. to 5 p.m. (PST). Language assistance services are available.

MyChart:

What if I forget my Username or Password?

Click the **Forgot Username?** or **Forgot Password?** link below the login fields for assistance. You will be prompted to answer some security questions to verify your identity so you can recover your username or password. You may also contact the MyChart customer service line at **775-982-2781**. They are available Monday through Friday from 7:30 a.m. to 5 p.m. (PST).

How to download the MyChart app

To install the MyChart app, go to the Apple App Store or Google Play Store and search for **MyChart**.

1. On your mobile device, open the **Apple App Store** (if you have an iOS device) or the **Google Play Store** (if you have an Android device).
Look for one of the following icons to find the app store on your device:  

2. Search for **MyChart**.

Look for the following logo to make sure you have the right app: 

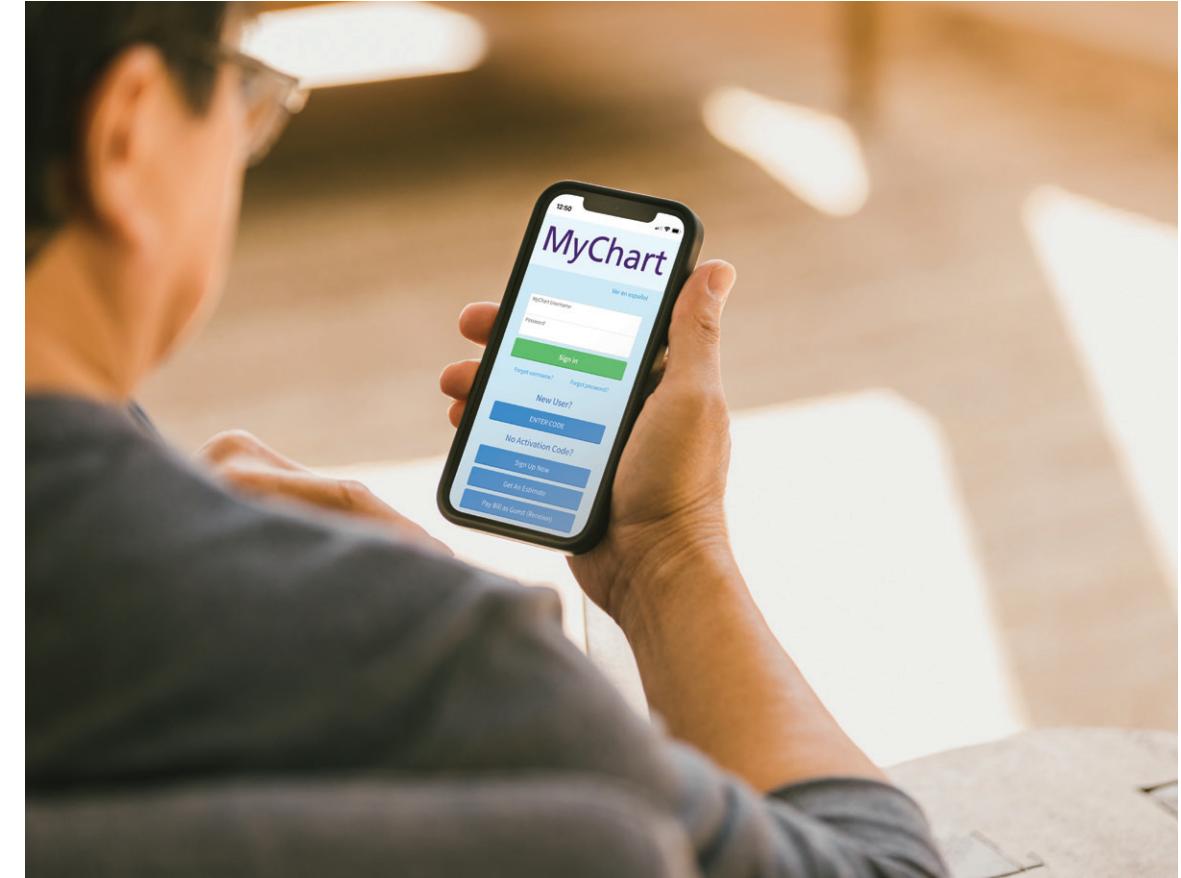
3. Tap **Install** or **Get**.

4. After you have installed the app, tap **Open** or find the **MyChart icon** on your device and **tap to open it**. 

5. Select **Renown** from the list of organizations.

If you do not see it right away, you can search for your healthcare organization by name, state, or ZIP code.

Renown
HEALTH



MyChart: Messaging your Renown providers

You can read messages sent by your provider or their staff members by going to your MyChart inbox. To get there go to **Messages** from the home screen. If you are looking for a specific message, enter key words in the search field on the inbox page.

NOTE ABOUT PROVIDER MESSAGING: **Messages to Renown Health providers are typically answered within two business days or less. The message will be answered by the Provider, the Provider's Medical Assistant, or another staff member. If you are asking a complex question, you may get a response asking that you make an appointment so that your concern can be appropriately addressed.**

MyChart: Scheduling an appointment with Renown

MyChart will only allow you to self-schedule with providers you have seen in the last year. If you do not see the provider you want to schedule an appointment with listed, please call Renown at **775-982-5000**.

You can only schedule lab and/or imaging appointments in MyChart if there is an existing order.

To schedule or request an appointment in MyChart, go to **Visits** and then **Schedule an Appointment**. Depending on the reason for scheduling or type of appointment you choose, you will be directed to the **Schedule an Appointment** or **Request an Appointment** page.

- **When you schedule an appointment**, you make the appointment yourself and do not need to wait to hear back from the clinic. After verifying your demographics and insurance information, you can choose a location and enter preferred dates and times. Pick an appointment from the list of available time slots to schedule it.
- **When you send an appointment request**, you are asked to enter the provider you want to see, the reason for the visit, preferred dates and times, and any comments regarding why you are requesting the appointment. After you submit your request, someone from the clinic will contact you to verify an appointment date and time.

MyChart: View Referrals and Authorizations

In MyChart referrals and authorizations are located in the **Referrals** page

1. To view your referrals, click on **Your Menu** in the upper left corner of the page.
2. Scroll to the **Insurance** section.
3. Click on **Referrals**.



MyChart:

View past or upcoming appointments

You can view your past or future appointments by going to **Visits** from the home page.

Select a scheduled future appointment or click **Details** to see info such as:

- The date, time, and location of the visit
- Any pre-visit instructions from the clinic
- Directions to your clinic

MyChart: View your After Visit Summary

For past appointments, you can click **View After Visit Summary**® to see a summary of the care you received during your visit. You can also view any of your provider's visit notes that are shared with you by clicking **View notes**.

MyChart:

View Test Results as soon as you need them

1. To view test results, go to **Test Results** from the home page.
2. Select a test to see more information about it, such as:
 - a. The standard range for the result
 - b. Any additional comments your provider entered about the result

To receive email or text messages when new MyChart messages or test results are available:

1. Go to **Menu** then scroll down to **Account Settings** and click on **Communication Preferences**.
2. Expand the messages section and select a notification option
3. Update your email address and mobile phone number if needed at the bottom of the page

Additional Resources

Now that you know the basics of your plan, the rest of the handbook has more information and resources to help you get the most from your coverage.

THIS SECTION WILL COVER

Additional Resources available to you as a member including:

- Personal Assistant Team
- Your Rights and Responsibilities
- International Coverage

Personal Assistant Team

IF YOU NEED ASSISTANCE, THEY CAN HELP YOU WITH:

- Appointment scheduling for Renown and UNR primary care
- Schedule mammograms, bone density screenings, and low dose CT lung cancer screening
- Schedule lab appointments
- Request medication refills
- Request referrals on your behalf and check the status of prior-authorizations
- Answer questions about your Senior Care Plus plan benefits
- Look up your past medical claims
- Schedule an Uber ride for your medical appointments
- Help you get set-up with a mail-order pharmacy

NOTE: Renown Primary Care Provider required for certain scheduling functions.

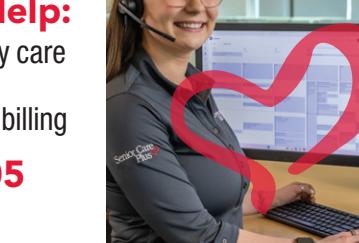
YOUR PERSONAL ASSISTANT

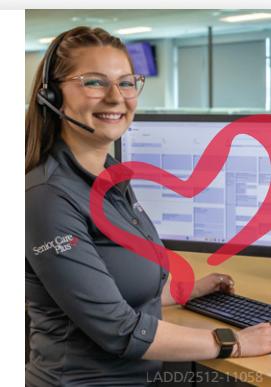
can be reached by calling **775-982-2605**.

Your Personal Assistant Can Help:

- Connect you to primary care
- Schedule your care
- Navigate benefits and billing

775-982-2605

Senior Care
Plus 



This magnet is here to make life easier. Put it somewhere you will see it often so you can reach your Personal Assistant whenever you need support.

Member rights and responsibilities

At Senior Care Plus, we care about your health and want to help you feel your best. Knowing your rights and responsibilities is an important part of getting the care you need and deserve.

Your rights protect you, making sure you are treated with respect and have access to the care you need. Your responsibilities help you play an active role in your health and work well with your doctors and care team.

We are here to support you every step of the way. By working together, we can help you stay healthy and make sure you get the care that's right for you. Let's team up for your health!

As a member, you have a right:

- A right to receive information about the organization, its services, its practitioners and providers and member rights and responsibilities.
- A right to be treated with respect and recognition of their dignity and their right to privacy.
- A right to participate with practitioners in making decisions about their health care.
- A right to a candid discussion of appropriate or medically necessary treatment options for their conditions, regardless of cost or benefit coverage.
- A right to voice complaints or appeals about the organization or the care it provides.
- A right to make recommendations regarding the organization's member rights and responsibilities policy.

As a member, you have the responsibility to:

- Supply information (to the extent possible) that the organization and its practitioners and providers need in order to provide care.
- Follow plans and instructions for care that they have agreed to with their practitioners.
- Understand your health problems and participate in developing mutually agreed-upon treatment goals, to the degree possible.

Benefits that travel with YOU!

TRAVELING IN THE U.S.	TRAVELING OUTSIDE THE U.S.
<p>You're covered for:</p> <ul style="list-style-type: none">• Virtual care through Teladoc, 24/7• Urgent and emergency care anywhere in the U.S.	<p>You're covered for:</p> <ul style="list-style-type: none">• Emergency care anywhere in the world• Go to the nearest medical facility if you need care right away
<p>You're not covered for:</p> <ul style="list-style-type: none">• Routine or preventive care (like check-ups or vaccines) while away <p>GET THOSE BEFORE YOUR TRIP</p>	<p>If you're admitted to a hospital:</p> <ul style="list-style-type: none">• Call the number on your ID card as soon as possible• You may need to pay upfront <p>KEEP YOUR RECEIPTS!</p>
<p>TIP:</p> <ul style="list-style-type: none">• For more details, check your Evidence of Coverage (EOC)	<p>After you're stable: YOU'LL NEED SENIOR CARE PLUS APPROVAL BEFORE GETTING THE FOLLOWING</p> <ul style="list-style-type: none">• More treatment• Transportation• Follow-up care
<p>ONLINE TRAVEL INFORMATION</p> <p>To better understand your travel benefits and for detailed instructions regarding international emergent care reimbursement claim submission, visit SeniorCarePlus.com/travel_benefits/.</p>	<p>After you're trip:</p> <ul style="list-style-type: none">• Contact your doctor to review your care• You can file a claim for reimbursement if you paid out-of-pocket <p>How to file a claim:</p> <ol style="list-style-type: none">1. Gather your bills and receipts2. Complete the Medical Claim Form at SeniorCarePlus.com/plans/enroll/forms-documents3. Submit your claim (may take up to 6 weeks) <p>Payment details:</p> <ul style="list-style-type: none">• You'll be reimbursed what Senior Care Plus would pay in the U.S. You're responsible for your normal copay or coinsurance <p>TIP:</p> <ul style="list-style-type: none">• TRAVEL INSURANCE CAN HELP COVER EXTRA COSTS

Community Resources for Northern Nevada

Access to Health Care

Health education, resources for disabled seniors.

887-385-2345

accesstohealthcare.org

SERVICES INCLUDE: Care Management, Transportation

CARE Chest

CARE Chest provides medical resources free of charge.

775-829-2273

carechest.org

SERVICES INCLUDE: Medical Resources

Cares Campus

Welcoming and supportive environment for individuals experiencing homelessness.

775-325-8200

washoecounty.gov/homeless/shelter_and_services/cares_campus/index.php

SERVICES INCLUDE: 24-hour Emergency Shelter, Supportive Case Management

Caring Transitions

Create customized plans that manage all aspects of a transition.

775-624-3030

caringtransitionsrenosparks.com

SERVICES INCLUDE: Senior Relocation, Downsizing and Decluttering, Estate Sales

Carson City Senior Center

To enhance the quality of life and independence of seniors.

775-883-0703

carsoncityseniorcenter.org

SERVICES INCLUDE: Food Insecurity, Social Programs, Senior Services

Catholic Charities of Northern Nevada

Providing support to those in need in the Reno/Sparks and rural communities,

775-322-7073

ccsnn.org

SERVICES INCLUDE: Food Insecurity, Housing Insecurity, Social Programs

Doctoroo

Local urgent care on wheels that covers Reno, Sparks and the Carson City area.

888-888-9930

doctoroo.com

SERVICES INCLUDE: Treatment of Common Illnesses

Food Bank of Northern Nevada

Connecting families and individuals to the food and resources they need to thrive.

775-331-3663

fbnn.org

SERVICES INCLUDE: Food Insecurity

Go-Go Grandparents

On demand services for seniors and people with disabilities.

855-970-9449 ext. 39460

gogograndparents.com

SERVICES INCLUDE: Rides, Grocery Deliveries, Prescription Deliveries

GMTCare – Reno

Provides non-emergency ground medical transport service.

775-204-7474

gmtcare.com/locations/reno

SERVICES INCLUDE: Medical Transportation Assistance

House Calls

Assists with specialized programs that provide daily reminders, assurance, and care.

775-575-2727

housecallsltd.org

SERVICES INCLUDE: Daily Computerized Telephone Reminder Calls

Jump Around Carson – RTC Carson City

Serving the community with a fleet of bright green and purple buses.

775-841-RIDE (7433)

EMAIL: JAC@carson.org

SERVICES INCLUDE: Transportation Assistance

NAMI Western Nevada – Warmline

Helping people impacted by mental illness with non-crisis peer support phone service.

WARMLINE: **775-241-4212**

CRISIS LINE DIAL: **988**

namiwesternnevada.org

SERVICES INCLUDE: Mental Health Support

Neighbor Network of Northern Nevada (N4)

N4 connects people with community-based services and volunteer opportunities.

775-453-4774

neighbornv.org

SERVICES INCLUDE: Volunteer opportunities, Discounted Lyft Vouchers, dementia support

Nevada 211

State program committed connecting people with the services they need.

Call **211** or **866-535-5654**

nevada211.org/senior-services

SERVICES INCLUDE: Food and Housing Insecurity, Transportation, Social Programs

Newcomers and Neighbors Club of Northern Nevada

Provides activities and social opportunities for residents of Northern Nevada.

775-881-2040

nncnn.org

SERVICES INCLUDE: Social Club, Community Groups, Luncheons, Events

Northern Nevada Community Housing

Connecting low and moderate-income individuals to safe, high-quality housing.

775-337-9155

nnch.org

SERVICES INCLUDE: Affordable Housing

Northern Nevada Dream Center

Support to address hunger, homelessness, poverty, addiction, and spiritual well-being.

775-443-4090

nndreamcenter.org

SERVICES INCLUDE: Food Insecurity, Housing Insecurity, Social Programs

Our Place

Emergency shelter for women and families experiencing homelessness.

775-324-2622

voa-ncnn.org

SERVICES INCLUDE: Emergency Shelter, 24/7 Staffing Support, Meals and Basic Necessities, Case Management

Regional Transportation Commission – RTC Washoe

Serving the citizens of Reno and Sparks with quality transportation.

775-348-0400

rtcwashoe.com

SERVICES INCLUDE: Transportation Assistance

Reno Housing Authority

Help provide fair, sustainable, quality housing for those in need.

775-329-3630

renoха.org

SERVICES INCLUDE: Public housing, Housing Choice Voucher Program, Affordable Housing

Seniors in Service

Engaging vibrant and experienced volunteers to enrich Northern Nevada.

775-358-2768

seniorsinservicenevada.org

SERVICES INCLUDE: Companions, Caregiver Support

Washoe County Senior Services

Supporting seniors with aging issues in Washoe County.

775-328-2575

washoecounty.gov/seniorsrv

SERVICES INCLUDE: Food Insecurity, Companionship

Non-Discrimination Notice

DISCRIMINATION IS AGAINST THE LAW.

Senior Care Plus complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex (consistent with the scope of sex discrimination described at 45 CFR § 92.101(a)(2) (or sex, including sex characteristics, including intersex traits; pregnancy or related conditions; sexual orientation; gender identity, and sex stereotypes). Senior Care Plus does not exclude people or treat them less favorably because of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity).

SENIOR CARE PLUS:

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

If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance services, contact the Compliance Officer.

If you believe that Senior Care Plus 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:

COMPLIANCE OFFICER

10315 Professional Circle • Reno, NV 89521

800-611-5097 • 800-833-5833 (TTY)

DontDiscriminate@HometownHealth.com

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Compliance Officer 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 ocrportal.hhs.gov/ocr/smartscreen/main.jsf, or by mail or phone at:

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

200 Independence Ave., SW • Room 509F • HHH Building • Washington, D.C. 20201

800-368-1019 • 800-537-7697 (TDD)

Complaint forms are available at hhs.gov/ocr/office/file/index.html.

This notice is available at Senior Care Plus's website:

SeniorCarePlus.com/Documentation/Statement-of-Nondiscrimination/

Sincerely,

Senior Care Plus

Aviso de no discriminación

LA DISCRIMINACIÓN ES ILEGAL.

Senior Care Plus cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, origen nacional, edad, discapacidad o sexo (coherente con el alcance de la discriminación por sexo descrita en 45 CFR § 92.101(a)(2) (o sexo, incluidas las características sexuales, incluidos los rasgos intersexuales; embarazo o condiciones relacionadas; orientación sexual; identidad de género y estereotipos de género). Senior Care Plus no excluye a las personas ni las trata menos favorablemente por motivos de raza, color, origen nacional, edad, discapacidad o sexo.

SENIOR CARE PLUS:

- Proporciona a las personas con discapacidades modificaciones razonables y ayuda y servicios auxiliares adecuados y gratuitos para comunicarse eficazmente con nosotros, tales como:
 - Intérpretes calificados de lenguaje de señas.
 - Información escrita en otros formatos (letra grande, audio, formatos electrónicos accesibles, entre otros).
- Ofrece servicios gratuitos de asistencia lingüística a personas cuyo idioma principal no es el inglés, lo que puede incluir:
 - Intérpretes calificados.
 - Información escrita en otros idiomas.

Si necesita modificaciones razonables, ayudas y servicios auxiliares apropiados o servicios de asistencia lingüística, comuníquese con oficial de cumplimiento/Compliance Officer.

Si cree que Senior Care Plus no ha proporcionado estos servicios o ha discriminado de otra manera por motivos de raza, color, origen nacional, edad, discapacidad o sexo, puede presentar una queja ante oficial de cumplimiento.

COMPLIANCE OFFICER

10315 Professional Circle • Reno, NV 89521

800-611-5097 • 800-833-5833 (TTY)

DontDiscriminate@HometownHealth.com

Puede presentar una queja en persona o por correo, fax o correo electrónico. Si necesita ayuda para presentar una queja, oficial de cumplimiento/Compliance Officer está disponible para ayudarlo.

También puede presentar una queja sobre derechos civiles ante la Oficina de Derechos Civiles del Departamento de Salud y Servicios Humanos de EE. UU. electrónicamente a través del portal de quejas de la Oficina de Derechos Civiles, disponible en ocrportal.hhs.gov/ocr/smartscreen/main.jsf, o por correo o teléfono a:

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

200 Independence Ave., SW • Room 509F • HHH Building • Washington, D.C. 20201

800-368-1019 • 800-537-7697 (TDD)

Los formularios de queja están disponibles en hhs.gov/ocr/office/file/index.html.

SeniorCarePlus.com/Documentation/Statement-of-Nondiscrimination/

Atentamente,

Senior Care Plus

NOTICE OF AVAILABILITY OF LANGUAGE ASSISTANCE SERVICES AND AUXILIARY AIDS AND SERVICES

English – ATTENTION: If you speak a language other than English, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call 1-888-775-7003 (TTY: 711) or speak to your provider.

Spanish / Español – ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al 1-888-775-7003 (TTY: 711) o hable con su proveedor.

Tagalog / Tagalog – PAALALA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng serbisyon tulong sa wika. Magagamit din nang libre ang mga naaangkop na auxiliary na tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa 1-888-775-7003 (TTY: 711) o makipag-usap sa iyong provider.

Traditional Chinese / 台語 – 注意：如果您說[台語]，我們可以為您提供免費語言協助服務。也可以免費提供適當的輔助工具與服務，以無障礙格式提供資訊。請致電 1-888-775-7003 (TTY: 711) 或與您的提供者討論

Simplified Chinese / 中文 – 注意：如果您說[中文]，我们将免费为您提供语言协助服务。我们还免费提供适当的辅助工具和服务，以无障碍格式提供信息。致电 1-888-775-7003 (TTY: 711) 或咨询您的服务提供商。

Korean / 한국어 – 주의: [한국어]를 사용하시는 경우 무료 언어 지원 서비스를 이용하실 수 있습니다. 이용 가능한 형식으로 정보를 제공하는 적절한 보조 기구 및 서비스도 무료로 제공됩니다. 1-888-775-7003 (TTY: 711) 번으로 전화하거나 서비스 제공업체에 문의하십시오.

Vietnamese / Việt – LƯU Ý: Nếu bạn nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các hỗ trợ dịch vụ phù hợp để cung cấp thông tin theo các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi theo số 1-888-775-7003 (TTY: 711) hoặc trao đổi với người cung cấp dịch vụ của bạn.

Amharic / አማርኛ – ማስረጋገጫ፡፡ አማርኛ የሚገኘ ከሆኑ፣ የቁንቁ ደንብ አገልግሎት በኋላ ይቀርብል፡፡ መረጃን በተደረገ ቅርጫት ለማቅረብ ተገቢ የሆኑ ተጨማሪ አገዣም እና አገልግሎቶች አገልግሎት የገዢ በኋላ፡፡ በስልክ ቅርጫ

1-888-775-7003 (TTY: 711) ይደውሉ ወደም አገልግሎት አቅራቢዎን የኋገሩ፡፡

Thai / ไทย – หมายเหตุ: หากคุณใช้ภาษาไทย เรามีบริการความช่วยเหลือด้านภาษาฟรี นอกเหนือไปจากนี้ ยังมีเครื่องมือและบริการช่วยเหลือเพื่อให้ข้อมูลในรูปแบบที่เข้าถึงได้โดยไม่เสียค่าใช้จ่าย โปรดโทรติดต่อ 1-888-775-7003 (TTY: 711) หรือปรึกษาผู้ให้บริการของคุณ

Japanese / 日本語 – 注: 日本語を話される場合、無料の言語支援サービスをご利用いただけます。アクセシブル(誰もが利用できるよう配慮された)な形式で情報を提供するための適切な補助支援やサービスも無料でご利用いただけます。1-888-775-7003 (TTY: 711) までお電話ください。または、ご利用の事業者にご相談ください。

Arabic / العربية – تنبية: إذا كنت تتحدث اللغة العربية، فستتوفر لك خدمات المساعدة اللغوية المجانية. كما تتوفر وسائل مساعدة وخدمات مناسبة لتوفير المعلومات بتنسيقات يمكن الوصول إليها مجاناً. اتصل على الرقم 1-888-775-7003 (TTY: 711) أو تحدث إلى مقدم الخدمة.

Russian / РУССКИЙ – ВНИМАНИЕ: Если вы говорите на русский, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Позвоните по телефону 1-888-775-7003 (TTY: 711) или обратитесь к своему поставщику услуг.

French / Français – ATTENTION: Si vous parlez Français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et services auxiliaires appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le 1-888-775-7003 (TTY: 711) ou parlez à votre fournisseur.

Farsi / فارسی – توجه: اگر [وارد کردن زبان] صحبت می کنید، خدمات پشتیبانی زبان رایگان در دسترس شما قرار دارد. همچنین کمکها و خدمات پشتیبانی مناسب برای ارائه اطلاعات در قالب های قابل دسترس، به طور رایگان موجود می باشند. 1-888-775-7003 (TTY: 711) تماس بگیرید یا با ارائه دهنده خود صحبت کنید.

German / Deutsch – ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistenzdienste zur Verfügung. Entsprechende Hilfsmittel und Dienste zur Bereitstellung von Informationen in barrierefreien Formaten stehen ebenfalls kostenlos zur Verfügung. Rufen Sie 1-888-775-7003 (TTY: 711) an oder sprechen Sie mit Ihrem Provider.

Ilocano / ILOCANO – PANANGIKASO: No agsasaoka iti Ilocano, magun-odmo dagiti libre a serbisio ti tulong iti pagsasao. Libre met laeng a magun-odan dagiti maitutop a katulongan ken serbisio a mangipaay iti impormasion kadagiti ma-akses a pormat. Awagan ti 1-888-775-7003 (TTY: 711) wennon makisarita iti mangipapaay kenka.

Senior Care Plus

775-982-3112 • 888-775-7003 (Toll-Free)

Información en español **775-982-3242**

(TTY Relay Service – **711** / Toll-Free)

CALL CENTER HOURS

April 1 – September 30

Monday – Friday • 7 a.m. to 8 p.m.

October 1 – March 31

Monday – Friday • 7 a.m. to 8 p.m.

Saturday – Sunday • 8 a.m. to 8 p.m.

Renown Health

775-982-5000 (Appointments)

775-982-4100 (General Inquiries)

Monday – Sunday • 7 a.m. to 6 p.m.

LIBERTY Dental Plan

888-442-3193 (Toll-Free)

877-855-8039 (TTY / Toll-Free)

Monday – Friday • 5 a.m. to 5 p.m. (PST)

NationsHearing®

877-200-4189 (Toll-Free)

(TTY Relay Service – **711** / Toll-Free)

You can call NationsHearing®

8 a.m. to 8 p.m. (PST),

seven days per week

Senior Care Plus is a Medicare Advantage HMO organization with a Medicare contract. Enrollment in Senior Care Plus depends on contract renewal. This information is not a complete description of benefits. Call **888-775-7003** (TTY 711) for more information. Limitations, copayments, and restrictions may apply. Benefits, premiums and/or copayments/coinsurance may change on January 1 of each year. You must continue to pay your Medicare Part B premium. View the notice of privacy practices at SeniorCarePlus.com. All attempts have been made to ensure information accuracy, but errors may occur. Please refer to your Evidence of Coverage for detailed benefit information.

EyeMed

866-723-0513

Monday – Saturday • 7:30 a.m. to 11 p.m. (EST)

Sun. • 11 a.m. to 8 p.m. (EST)

Optum Rx

844-368-3139

You can call Optum Rx 24 hours a day, seven days per week.

Doctoroo

888-888-9930

You can call Doctoroo 7 a.m. to midnight, seven days per week.

TELADOC

800-835-2362

You can call TELADOC 24 hours per day, seven days per week.

988 | SUICIDE & CRISIS
LIFELINE

Dial **988**, for judgment-free mental health support, 24 hours per day, seven days per week.

