

## Farm Bureau Supplemental Benefit Guide

We're happy that you have joined the Farm Bureau Family. With a Farm Bureau Advantage HMO plan you have additional benefits and services provided to you. These benefits and services are considered additional benefits that Original Medicare doesn't cover. In addition to Original Medicare plus Prescription Drug coverage we have added Dental, Vision, Hearing coverages plus a Fitness benefit, and for 2024 a new \$150 Over The Counter (OTC) card allowance.

This Guide highlights some of these added benefits and is not a comprehensive list of all your available benefits and services. For more details related to these and your other Medicare and Prescription drug benefits please visit <u>www.fbhp.com/medicareadvantage</u> to review your Evidence of Coverage (EOC). If you have any additional questions or concerns reach out to a Member Service representative at 1-833-999-0103 (TTY 711). Our hours of operation are October 1st through March 31st, 8AM – 8PM, 7 days/ week local time, and April 1st through Sept 30th, 8 AM – 8 PM, Monday – Friday local time. An automated system may answer your calls during weekends and holidays.

Farm Bureau Health Plans is an HMO with a Medicare contract. Enrollment in Farm Bureau Health Plans depends on contract renewal. Farm Bureau Advantage HMO is not available in all Tennessee counties. Please refer to the Tennessee county list at www.fbhp.com/medicare-advantage to confirm eligibility. H4863 FBTNMK24105SVB C



## **NEW - Farm Bureau's OTC Network Card**

Your Farm Bureau Advantage HMO coverage includes a \$150 Over The Counter (OTC) allowance.

We know how difficult it may be to cover the small things. So, we added the OTC card for members like you who value every dollar and can use some peace of mind.

Once you enroll with Farm Bureau Advantage HMO you will receive your OTC Network Card in the mail. To access your benefits go to <u>www.</u> <u>mybenefitscenter.com</u>; from there, simply set up your login ID, and password. Then you're all set to explore the benefits catalog to find retail goods, see your available balance, track purchases, and find locations near you where you can spend your allowance amounts. It's that simple. Remember – amounts do not roll over from one period to the next. Every three months or quarter, depending on your date of enrollment, you'll lose any unused balances. Your allowances will zero out on March 31st, June 30th, September 30th, and December 31st – but they also regenerate at \$150 every January 1st, April 1st, July 1st, and October 1st.

## If you don't use them, you lose them. So, take advantage, it's on us!

Thank you for trusting Farm Bureau Health Plans for all your Medicare needs.

Your supplemental benefits	How to access	Your contact
Dental Benefits		
Farm Bureau Advantage HMO plan offers additional dental benefits to members through Delta Dental.	Access Delta Dental: 1. Find a Delta Dental Medicare Advantage network provider	<b>Delta Dental:</b> Call us at: 1-866-327-0274 Hours of Operation:
<ul> <li>Dental benefits, services and allowances are provided through Delta Dental's National Medicare Advantage Network Providers.</li> <li>Your benefits include allowances up to a maximum of \$3,500.00 per year and cover everything from Preventive Services to Comprehensive Services. These include, but are not limited to: <ul> <li>Annual dental examination,</li> <li>2 cleanings annually,</li> <li>X-rays,</li> <li>Fillings,</li> <li>Crown repairs,</li> <li>Implant Services,</li> <li>Bridges,</li> <li>Simple extractions</li> </ul> </li> <li>And much more to see all the benefits and your costs please review your Evidence</li> </ul>	online: <u>www.providers4you.com/</u> <u>nationalmedicareadvantageppo</u> 2. Call the network provider you have selected and schedule an appointment. 3. Be sure to provide the Dental office your Farm Bureau Advantage HMO ID Card.	7 a.m. to 7 p.m. (CST) Monday thru Friday
of Coverage (EOC) at <u>www.fbhp.com/medicare-advantage</u> . Cost-sharing amounts do not count toward your plan's Annual Maximum Out Of Pocket. After you reach your Dental maximum allowance, you will be responsible for 100% of charges. If you select a Dental provider that is not in the Delta Dental National Medicare Advantage Network, you will be responsible for charges incurred.		
Fitness Benefit		1
Your fitness benefits are provided by Farm Bureau Advantage HMO and Silver&Fit® program. You can sign up for the Silver&Fit program once you become a member of Farm Bureau Advantage HMO. Your Fitness benefits include a \$10.00 annual fee for a Home Fitness Kit, and/or a \$25.00 annual membership to a Fitness Center in the Silver&Fit Standard Network.	<ul> <li>To enroll in Silver&amp;Fit:</li> <li>1. Go to <u>www.SilverandFit.com</u></li> <li>Choose a participating fitness center in the Standard network. Or choose a buy-up fitness center in a Premium network*.</li> <li>Select a home fitness kit.</li> <li>2. Or call Silver&amp;Fit Customer</li> </ul>	Silver&Fit® program: 1-877-427-4788 (TTY 711) Hours of Operation: 7 a.m. to 8 p.m. (CST) Monday thru Friday. <u>www.SilverandFit.com</u>
The program offers a national network of fitness center options, on demand workout videos, healthy age coaching, and virtual personal fitness training sessions*. For more information on this benefit you can review your Evidence of Coverage (EOC) online at <u>www.fbhp.com/medicare-advantage</u> . *Additional costs apply.	service.	
Copayment amounts do not count towards your plan's Annual Maximum Out of Pocket (MOOP). Additional charges may apply if you select a fitness center that is in the Silver&Fit Premium network. You are responsible for any additional charges related to training sessions or fitness center selection.		

The Silver&Fit program is provided by American Specialty Health Fitness, Inc. (ASH Fitness), a subsidiary of American Specialty Health Incorporated (ASH). Silver&Fit is a trademark of ASH and used with permission herein. Kits are subject to change. Fitness center participation may vary by location and is subject to change.

Your supplemental benefits	How to access	Your contact
Hearing Benefits		
Your hearing benefits are provided by TruHearing. This covers your annual hearing examination and one TruHearing hearing aid, per ear, per year provided by a TruHearing Provider. Copayment amounts are \$599 - \$899, per aid authorized by TruHearing. For more information on hearing benefits, you can review your Evidence of Coverage (EOC) at <u>www.fbhp.com/medicare- advantage</u> . Copayment amounts do not count towards your plan's Annual Maximum Out of Pocket (MOOP).	<ul> <li>Access TruHearing Benefits:</li> <li>1. Call TruHearing and speak with a consultant.</li> <li>2. The consultant will match you with a TruHearing Provider, and can schedule your appointment for you.</li> <li>3. Go to the appointment.</li> <li>4. The provider will order your TruHearing aid(s).</li> <li>5. Return to the TruHearing provider office to pick up your hearing aids and get them adjusted.</li> </ul>	TruHearing: 1-888-939-9557 (TTY 711) Hours of Operation: 8 a.m. to 8 p.m. Monday thru Friday. <u>https://www.truhearing.com/</u>
Home Rx Delivery - Mail Order Drug Ber	hefits	
Home Prescription Drug Delivery and mail order up to 100-day supply for most drugs through Optum Rx. You can order up to a 100-day supply of your maintenance medications – ones you take regularly. OptumRx® fills your order, and lets you know when to expect your delivery. Your medications should arrive within 4 to 7 days of placing the order. OptumRx will also notify you if there is a delay in your order. Tier 5 Specialty Drugs are not available in 60-day or 100-day supplies. Insulin drug medications are covered under any Tier at no more than \$35.00 per month/30-day supply.	<ul> <li>Access OptumRx:</li> <li>1. Your doctor can send an electronic prescription to Optum Rx.</li> <li>2. Log on to our website at <u>www.optumrx.com</u>.</li> <li>3. Call us.</li> <li>4. Or, complete the form attached separately in this Welcome Kit, and mail it to: OptumRx, P.O. Box 2975, Mission, KS 66201</li> <li>Optum Rx will notify you that your prescription drugs will be mailed to your home.</li> </ul>	<b>Optum Rx:</b> Phone number 1-800-356-3477 (TTY 711) Hours of Operation: Representatives are available 24 hours a day, 7 days a week. <u>https://www.optumrx.com/</u>
Over-The-Counter (OTC) Drug Card	-	
Your Farm Bureau Advantage HMO plan includes \$150.00 allowance every three months (or quarterly) for covered over the counter (OTC) items. This includes items you use to stay healthy such as vitamins, pain relievers, toothpaste, first aid supplies and more. Benefit allowances are provided on the first day of each quarter (in January, April, July and October) and expire on the last day of each quarter (March 31, June 30, September 30, and December 31). OTC allowances do not carry over from one quarter to the next, or from one year to the next. Does not apply toward your plan's Annual Maximum Out of Pocket (MOOP).	Access OTC Network:Visit one of the participating networks of providers listed on the website or access CVS Home Delivery Services at www. mybenefitscenter.com.Here you will also find a list of eligible products and locations.	OTC Benefits: 1-833-684-8472 (TTY 711) Hours of Operation: Customer service is available 24 hours a day, 7 days a week. www.mybenefitscenter.com

Your supplemental benefits	How to access	Your contact
TeleHealth Services		
Farm Bureau Advantage is proud to offer enhanced TeleHealth Services. Many of the routine doctor and mental health visits that you need access to have now become easier to reach. These services are part of your Farm Bureau Advantage HMO plan, find specific details about access and type of providers available for this service in your Evidence of Coverage (EOC) located at <u>www.fbhp.com/medicare-advantage</u>	Access Telehealth: Simply contacting your provider and requesting a Telehealth appointment. If you need help determining if your provider services will qualify as a Telehealth provided service call Member Services or review benefits online at: <u>www.fbhp.com/medicare-advantage</u>	Telehealth: Call Member Services at 1-833-999-0103 Hours of Operation: 8 a.m. to 8 p.m. 7 days a week Oct 1 - Mar 31 8 a.m. to 8 p.m. Monday thru Friday Apr 1 - Sept 30 (Excluding Holidays)
Vision Benefits		
Your Farm Bureau Advantage HMO plan includes Medicare covered vision services that provide eye exams for high risk conditions such as glaucoma and diabetic retinal disease. You also have additional vision benefits provided through Vision Service Providers - VSP that covers your annual routine eye exam, contacts, frame, and costs of lenses*. You will have allowances of up to: • \$200 for contact and contact lens exam. • \$20% additional savings over the allowed amount. • 20% off on lens enhancements. VSP has a large nationwide network of providers. Be sure to present your Farm Bureau Advantage HMO ID Card at your appointment. For more information on your vision benefits you can review your Evidence of Coverage (EOC) at <u>www.fbhp.com/medicare- advantage</u> . Allowances do not count toward your plan's Annual Maximum Out Of Pocket. After you reach your VSP maximum allowance, you will be responsible for 100% of charges. If you select a Vision provider that is not in the VSP Advantage Network, you will be responsible for charges incurred.	Access VSP Network: 1. Go to <u>www.VSP.com</u> 2. Create an account. 3. Review your benefit information. 4. Find an Advantage Only Network provider online or by calling VSP.	VSP: 1-844-290-8924 Hours of Operation: 8 a.m. to 8 p.m. Monday thru Saturday. http://www.vsp.com/ advantageonly