

FOR RESIDENTS OF

**Cooke, Deaf Smith, Fannin, Gray, Grayson,
Moore, Potter and Randall Counties**

Welcome to your

2025 Member Guide

Great coverage, from people who care



Prominence
Medicare Advantage

[ProminenceMedicare.com](https://www.ProminenceMedicare.com)

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The logo for Prominence Medicare Advantage is located in the top-left corner. It features the word "Prominence" in a large, white, sans-serif font, with "Medicare Advantage" in a smaller, white, sans-serif font directly below it. The text is set against a background of overlapping teal and dark blue geometric shapes.

Prominence

Medicare Advantage

Great coverage, from people who care.

ProminenceMedicare.com

Welcome

THANK YOU FOR BEING A MEMBER

Dear Member,

Thank you for choosing Prominence Medicare Advantage as your healthcare partner. We know you have many options to choose from and are thankful that you trusted us with your healthcare journey.

If you are a new member, welcome! We are excited to have you be a part of our plan. If you are an existing member, thanks again for trusting us, and welcome back!

Our goal is to help create healthier and more empowered communities by providing you access to compassionate, affordable and high-quality care.

We understand that your healthcare needs are unique, and we're dedicated to providing products and services that can help you take the first (or next) step towards living a healthier life.

This member guide will serve as a resource for you to learn the best way to improve your quality of life through the services and benefits provided to you as a valued member.

We are here to give great coverage and peace of mind. Should you have any questions, please call our dedicated Member Services team at 1-855-969-5882 (TTY: 711).

Thank you,



A stylized, handwritten signature in black ink, appearing to read 'KJ'.

Kamal Jemmoua
CEO, Prominence Health Plan

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I Have My Member Guide What Should I Expect Next?

WELCOME AND WELCOME BACK CALL

To kick-off 2025 with a great start, we want to walk you through the highlights of our new benefits with our 2025 Welcome or Welcome Back Call. During the call, a member of our outreach team will:

- Confirm your contact information, communication preferences and Primary Care Provider (PCP)
- Give an overview of your plan, additional services and benefits
- Schedule your annual Prominence Health Assessment
- Give you options to complete your Health Risk Assessment Tool

To complete your 2025 Welcome Call, please call us promptly upon the receipt of this Member Guide at 877-397-7320 (TTY: 711).

YOUR MEMBER ID CARD

You will receive your Prominence ID card separately in the mail. Your membership ID card includes important information, such as:

- Pharmacy Information
- Your Prominence Health Plan identification number
- Your plan number
- Member Services toll-free number

NEW DENTAL PARTNER

All of our plans have an included Dental plan at no additional cost, and most plans have the option to upgrade to a Premium Dental plan if you want more coverage. Find out more about our dental plans in our dental section of this book or visit ProminenceMedicare.com/dental.

Our dental partner is FCL dental and you are part of the FCL and Dentemax dental networks.

Please note: you will not need a separate dental card. Just show your new ID card to your dentist and the network logos are on the back.

EXTRA BENEFITS/OVER-THE-COUNTER (OTC) CARD (Not available with the Giveback Plan)

In 2025 we've renamed our OTC card the Extra Benefit Card because members of our Extra Help and Dual plans can use their OTC allowance to buy healthy food, over-the-counter medicines and supplies, and even pay for utilities like power and water. Members of our Plus, Beyond, and Diabetes and Heart plans can use their OTC allowance to buy over-the-counter medicines and supplies. If you are a returning member, please keep your current OTC card.

For new members, you will be receiving your OTC card in the mail. Please call the phone number included on your card to activate it as soon as you receive it so you can unlock all the benefits we have for you in 2025.



Your Member Guide

What's new for 2025? Options!

EXISTING MEMBERS

This year, in addition to our Plus plan and our Giveback plan, you have 4 new options to consider in our North Texas Region. You have the opportunity to switch to one of our new plans during the annual enrollment period from October 15 through December 7. (Note: there may be other times during the year when you can switch.)

QUICK STEPS

1. Decide if you want to switch plans and/or upgrade to our Premium Dental Plan (available on most plans.)
2. To switch to a new plan, contact your broker, call us at 956-269-0248 or enroll online at prominencemedicare.com/enroll.

Contact your broker or call Prominence Medicare Advantage at 855-969-5885 (TTY: 711) for more information.

NEW PLANS FOR 2025:

DIABETES & HEART PLAN – Specially designed for people with diabetes or a heart condition.

- Special plans and programs to keep you healthy
- Health monitoring equipment/programs
- \$0 primary care provider and no or lower specialist copays
- Coverage for dental, eyeglasses and hearing aids
- Option to buy up to our Premium Dental Plan with \$7,500 worth of coverage and implants included

BEYOND PLAN – More supplemental benefit coverage and worldwide travel

- More coverage for dental and eyeglasses than our standard plans.
- Routine chiropractic coverage
- \$0 primary care provider visits with slightly higher specialist copays
- Two implants included in our Included Dental plan
- Option to buy up to our Premium Dental Plan with \$7,500 worth of coverage.

EXTRA HELP – Medicare has an Extra Help for Prescription Drugs Program, for members who have too much income to qualify for Medicaid.

- Must have Medicare's Extra Help (which is estimated to be worth about \$5,300 per year*), to pay \$0 monthly premium and get prescription drug discounts
- \$0 for all covered Part D prescription drugs with no deductibles
- \$0 primary care provider and low specialist copays
- Coverage for dental, eyeglasses and hearing aids
- An Extra Benefits Card that can be used for over-the-counter (OTC) items, healthy food and utilities like power & water
- Included dental coverage with no copayments
- Option to buy up to our Premium Dental Plan with \$7,500 worth of coverage and implants included.

DUAL – This plan is for people with both Medicare and Medicaid

- No copayments on covered medical services
- No copayments on prescription drugs
- Enhanced benefits for dental, vision & hearing aids
- An Extra Benefits Card that can be used for over-the-counter (OTC) items, healthy food and utilities like power & water
- No copayment for covered Part D prescription drugs
- Monthly plan premium is covered with no cost to you
- \$0 primary care provider and specialist copays
- \$0 hospital fees
- Coverage for transportation to health-related, and non-health related locations.

If you are happy with your plan, don't forget our Member Referral Program! Help your friends get the great service and coverage that Prominence provides by having them request more information at prominencemedicare.com/refer. They could also call 877-733-8542 (TTY: 711). We're happy to answer their questions, discuss their needs and see if Prominence is right for them too.

All plans have a fitness and Included Dental benefit. Contact your broker or call Prominence Medicare Advantage at 956-269-0248 (TTY: 711) for more information.

This is a highlight of the changes from last year. There may be additional changes for 2025. See your Annual Notice of Changes (existing members), your 2025 enrollment book (new members) or contact our Member Services team.

*<https://www.ssa.gov/pubs/EN-05-10508.pdf>

Welcome New Members!

Welcome to Prominence Health Plan. We are happy you've chosen to join the Prominence family.

You may have received an enrollment book that included a page for important phone numbers. Feel free to use that full-size sheet to keep track of contact information you might need. We have also included a smaller version of that document in this booklet as well.

Continuity of Care Form

As a new member, we want to make sure we have the most updated information about the care you are currently receiving and anything you may need to complete or transition as you start your Prominence Medicare Advantage coverage.

IN THIS GUIDE YOU WILL FIND:

- Continuity of Care
- How to Use Our Network – What Kind of Care is Right for You
- Prominence Health Plan Care Management Team
- Important 2025 Pharmacy Information
- Prominence Perks Program – Rewarding You for Keeping Healthy
- Prominence Health Assessment
- Exclusive Benefits Just for Prominence Members
- Member Portal – Taking Ownership of Your Health at Your Fingertips
- Prominence is Here to Help

Continuity of Care

If you are a new Medicare Advantage member, we need some information to make sure your transition from your prior insurer to Prominence (or from your old provider to your new provider) is as smooth as possible.

What is Continuity of Care?

Our Continuity of Care program helps ensure that you continue to get the care you need while you are switching health plans. Our team of nurses and medical directors will review the prior authorization for medical necessity and work with you and your provider to redirect services to an in-network provider.

The attached Continuity of Care form is for you to fill out and return to help us get to know you and your medical needs better.

Fill out the form completely, and do not leave any blanks. Please use N/A if the information requested does not apply to your situation.

If you have internet access, please visit our member portal at **ProminenceMedicare.com** to complete the Continuity of Care form.



Please complete this Prominence Health Plan (PHP) CoC form electronically on our Member Portal: <https://prominence.gopatientportal.com> if you are a new member with ongoing healthcare needs. This information will assist us in transitioning your care when you become effective. Important: If you are seeing an out of network provider for any service within the next 90 days, have your provider complete a new authorization request electronically on our PHP Provider Portal (phproviders.com).

Member's Details

1. Please select one: <input type="checkbox"/> New PHP Member <input type="checkbox"/> Existing PHP Member Whose Provider Is No Longer on Plan				
2. Member Name:				
2.1 Medicare Number (MBI #) found on Medicare Health Insurance Card:				
3. Member Date of Birth (mm/dd/yyyy):			4. Relationship to Member: <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Child	
5. Cell Phone (with area code):			6. Home Phone (with area code):	
7. Mailing Address:				
8. City:		9. State:		10. Zip:
11. Your Email Address:				
12. Your Employer:				
13. Select your PHP plan: HMO: Health Maintenance Organization - Medicare Advantage (MA) / Commercial (Cmcl) PPO: Preferred Provider Organization - Commercial SNP: Special Needs Plan - Medicare & Medicaid Dual Plan				
13.1 <input type="checkbox"/> MA HMO	13.2 <input type="checkbox"/> CMCL HMO	13.3 <input type="checkbox"/> CMCL PPO	13.4 <input type="checkbox"/> DSNP/CSNP	
14. Primary Care Provider (PCP): <input type="checkbox"/> Yes <input type="checkbox"/> I need a Primary Care Provider				
14.11 Please provide PCP name:				
15. Are you covered by any other health insurance, including Medicaid or VA? If so, please complete the information below:				
15.1 <input type="checkbox"/> Insurance Carrier:		15.2 <input type="checkbox"/> Plan Name:		
15.3 <input type="checkbox"/> Group #:		15.4 <input type="checkbox"/> Policy Number:		
16. Medical Information				
16.1 Do you expect to be in the hospital when coverage with PHP begins or in the next 90 days?			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
16.2 Do you have a surgery scheduled after your effective date of coverage?			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
16.2.1 If yes to above, what type of surgery?				
16.2.2 If yes to above, when is your surgery scheduled?				
16.2.3 If yes to above, who is your surgeon?				
16.2.4 If yes to above, where is your surgery taking place?				
16.3 Are you currently under the care of a specialist?			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
16.3.1 If yes to above, Specialist name and specialty?				

16.3.2 If yes to above, Diagnosis?	
16.4 Are you pregnant? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
16.4.1 If pregnant, who is your OB doctor?	
16.4.2 If pregnant, which hospital are you scheduled to deliver at?	
16.4.3 If pregnant, is your pregnancy considered high risk (e.g., twins, diabetes, age) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
16.4.4 If yes, what is your due date:	
16.5 Are you currently receiving chemotherapy or radiation oncology therapy? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
16.5.1 If yes, what is your diagnosis?	
16.5.2 If yes, who is your treating doctor?	
16.5.3 If yes, where are you receiving chemotherapy or radiation therapy?	
16.6 Do you have Kidney Failure <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A OR	16.7 End Stage Renal Disease <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
16.8 Are you receiving: Pre-Dialysis <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A OR	16.9 Dialysis <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
16.8.1 If yes, what type of dialysis?	
16.8.2 If yes, where are you receiving dialysis?	
16.10 Are you currently a candidate for an organ transplant? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
16.10.1 If yes, what type of organ? <input type="checkbox"/> Kidney <input type="checkbox"/> Liver <input type="checkbox"/> Heart <input type="checkbox"/> Lungs <input type="checkbox"/> Pancreas <input type="checkbox"/> Intestines <input type="checkbox"/> Other:	
16.10.2 If yes, approximately when?	
16.8.1 If yes, which facility?	
16.11 Are you currently using Home Health? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
16.11.1 If yes, who is your Home Health Provider?	
16.12 Are you currently using Durable Medical Equipment (c-pap, bi-pap, oxygen) ? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
16.12.1 If yes, who is your supplier?	
16.13 Please list any questions that you may have for our nurses in regards to your continuity of care. <input type="checkbox"/> N/A	

17. Pharmacy Information

17.1 Prior to your effective date, please make sure you have enough medication refills. Contact your Primary Care Provider (PCP) if you have any questions about your ongoing medication needs. If you have prescription drug questions please call 844-587-7389.

17.2 Are you currently taking any pain medication drugs? - If yes please list below Yes No N/A

17.3 What medications are you currently taking? List each medication separately Not taking any medications

1		2	
3		4	
5		6	
7		8	
9		10	
11		12	
13		14	
15		16	
17		18	
19		20	

For a complete list of covered medications please visit www.prominencemedicare.com or call 855-969-5882 (TTY: 711)

Signature of Member (Required)

I hereby authorize the above provider to give Prominence Health Plan (PHP) or any affiliated PHP company any and all information and medical records necessary to make an informed decision concerning my request for Continuity of Care Benefits under PHP. I understand I am entitled to a copy of this authorization form.

Signature of Member, Authorized Representative

Date (mm/dd/yyyy)

**Submit this form electronically at PHP Member Portal <https://prominence.gopatientportal.com>.
If you need to contact our Customer Service call: 855-969-5882 (TTY:711).**

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Your Key Health Care Partner

Prominence Health has a network of the finest Primary Care Providers (PCPs) in your area.

Your PCP can diagnose, treat and manage healthcare problems, coordinate services, and track your health and wellness. Your medical condition will typically determine how often you should see your PCP. Those with chronic medical conditions are usually seen routinely every three to six months. This frequency increases as you age or as your condition changes. PCP visits are at no cost to you. Following are some of the common health services your PCP can provide:

- Treat patients with flu, colds, strep throat and other infectious diseases
- Prescribe medications and give advice about over-the-counter medications
- Treat patients with lacerations, sprains, back pain and other injuries
- Help manage chronic conditions, including hypertension, asthma, diabetes and high cholesterol
- Conduct routine health exams and physicals
- Treat anxiety, depression and other mild to moderate behavioral health conditions
- Perform screening and diagnostic tests
- Discuss treatment options and make recommendations for the most appropriate care
- Give acute care for symptoms such as high fever, stomach pain or cough



Where To Get Care?

Need Healthcare in a Hurry? We've Got Options!

YOUR PRIMARY CARE PROVIDER

Your primary care provider (PCP) is your key health care partner, and may offer same or next day appointments. There are several options to get care quickly if your PCP is unavailable.



Provides access to board-certified doctors, pediatricians and behavioral health specialists by phone or video 24-hours a day, every day of the year. Some of the things that can be treated are:

- Allergies
- Cold or flu
- Coughs
- Earaches
- Sore throat or cough
- Sinus infection
- Bronchitis
- Pink eye
- Non-severe allergic reactions

For treatment, call 1-800-TELADOC (835-2362).

Visit teladoc.com to establish your health history before you need care.

Cost: \$0

EMERGENCY CARE

Call 911 or go to the nearest emergency room for life-threatening illness and injuries, such as serious trauma, poisoning, serious breathing issues, severe bleeding, chest pain, sudden loss of body function or consciousness.

Cost varies by plan.

Not Sure What to Do? We Can Help!

Have problems getting an appointment with your PCP or specialist? Call Member Services at **855-969-5882** (TTY: 711) M-F, 8 a.m.-5 p.m.

URGENT CARE

Receive prompt in-person care for non-life threatening medical conditions, such as:

- Rashes
- Cuts
- Burns
- Sprains and strains
- Colds
- Most stomach pain
- Headaches
- Urinary tract infections
- Nausea, vomiting and diarrhea

For the closest urgent care location, visit ProminenceMedicare.com or call the Prominence Care Advocate team at:

1-855-969-5882 (TTY:711)

Cost varies by plan.



Quality Healthcare When and Where You Need It

As a Prominence Health Plan member, you have phone or video access to Teladoc's® national network of U.S. board-certified doctors and therapists. They are available anywhere, 24/7 to treat many of your medical issues.

Telemedicine services provided by Teladoc have a \$0 copay.

Teladoc is a convenient and affordable option that allows you to talk to a doctor who can diagnose, recommend treatment and prescribe medication, when appropriate, for many medical issues including:

- Sinus problems
- Bronchitis
- Allergies
- Cold and flu
- Respiratory infection
- Ear infection
- Pink eye

In addition, if the challenges of everyday life are affecting your well-being, talking to a therapist can help you regain your sense of happiness and improve your overall mental health. Teladoc's licensed therapists are available seven days a week.

Choose one that's right for you, pick a convenient time and then have a private conversation from your home or anywhere you feel comfortable.

Teladoc therapists can help treat:

- Anxiety
- Depression
- Panic disorder
- Stress/post-traumatic stress disorder (PTSD)
- Family and marriage issues

It's quick and easy to set up an account online or over the phone.

Visit teladoc.com and provide the required information.

You can also call Teladoc at 1-800-TELADOC (835-2362).

Care Management and Transitional Care

At Prominence, we're dedicated to helping you achieve and maintain optimal health. Our team of nurse care managers and care coordinators may reach out to support you in enhancing your care, improving outcomes, and making the most of your healthcare resources.

In Care Management, we focus on overseeing and coordinating your healthcare needs. We create personalized care plans to help you manage chronic conditions, prevent complications, and improve your overall health.

If you need to go to the hospital, our Transitions of Care Team is here to support you. We ensure continuity of care, minimize the risk of readmission, and assist you in making a smooth recovery.

To learn more about our care management program, please call our Member Services team at **1-855-969-5882 (TTY: 711)**.



Your 2025 Pharmacy Benefits

\$0 PRESCRIPTION DRUGS

We know that paying for prescriptions can sometimes be a challenge and that is why we have made more prescription drugs available at a \$0 copay. Medications in Tier 1 (Preferred Generic) and Tier 6 (Select Care Drugs) are a **\$0 copay for 2025**.

INSULIN SAVINGS AND PART D BENEFIT REDESIGN (INFLATION REDUCTION ACT)

To ensure our members have affordable access to prescriptions they need, we will be changing the structure of pharmacy benefits for 2025.

- Insulin available at \$35/month per covered prescription
- A yearly cap (\$2,000 in 2025) on out-of-pocket prescription drug costs in Medicare
- Elimination of the coverage gap (donut hole)

DON'T RUN OUT OF YOUR MEDICATIONS — TAKE ADVANTAGE OF OUR 100-DAY SUPPLY PROGRAM

We have created a convenient 100-day supply program where you can get ten (10) more days of your prescription drug supply for the same copayment as the usual 90-day supply. This applies to Tier 1, 2, 3, 4 and 6 drugs (excludes Tier 5). The copayment is the same whether you go to your local retail pharmacy or you choose mail order. Ask your provider about this option, so you can prevent lapses in refills and save time waiting to fill prescriptions monthly!

WHY GO TO THE PHARMACY IF YOU CAN GET YOUR PRESCRIPTIONS MAILED TO YOUR HOME?

Don't miss out on a convenient way to easily refill your prescription drugs. As a Prominence Medicare Advantage member, you may obtain a 100-day supply of ongoing medication(s) by mail. With mail order, you can save time by having prescriptions for maintenance medication(s) conveniently delivered right to your home.

Important Note: You will need a 100-day supply prescription for your first custom delivery order and will need to register with BirdiRx, formerly MedImpact Direct, our mail-order pharmacy partner.



Three ways to get prescriptions by mail:

- 1 CALL 833-775-MEDS (6337)**
Monday - Friday is 8 a.m. to 8 p.m. (Eastern)
Saturday 9 a.m. to 1 p.m. (Eastern)

With a simple call, BirdiRx will contact your provider or your local pharmacy to help transfer your prescription.

- 2 MAIL IN YOUR PRESCRIPTION**
Download and complete the Medication Order Form available on the "Prescription Drug Forms and Resources" page under the "Prescription Drugs" section at ProminenceMedicare.com.

You must mail your paper prescription and any payment with the form.







- 3 FROM YOUR PRESCRIBER**
Ask your doctor to send your prescription to BirdiRx electronically or via fax: 877-395-4836.



2025 Prominence Perks Program

Earn rewards* while getting healthier. We want you to be your healthiest this year. Part of that means completing certain screenings and managing your chronic conditions.

From January 1 to December 31, 2025, you can earn gift cards for completing recommended preventive screenings based on your current health status, age and past medical history, including:

Health Screening	Eligible Gift Card Amount	Description
 Prominence Health Assessment (PHA)	\$50	A 60 minute visit performed by an approved PHA provider in 2025
 Breast Cancer Screening	\$75	Mammography performed in 2025
 Colorectal Cancer Screening – Colonoscopy	\$85	Colonoscopy performed in 2025
Colorectal Cancer Screening – FIT/ FOBT/ Colonoscopy completed in 2024 or earlier	\$20	Specific to FIT lab test/FOBT and/or previously performed service, such as an older colonoscopy
 Diabetic Exam Bundle**	\$50	Diabetic patients who complete all of the following in 2025: diabetic eye exam, A1C and kidney health evaluation
 Comprehensive Primary Care Provider Visit (Jan 1 – Jun 30, 2025)	\$50	PCP Visit to discuss health and wellness.
Comprehensive Primary Care Provider Visit (Jul 1 – Dec 31, 2025)	\$25	PCP Visit to discuss health and wellness.
 Health Screening: Health Risk Assessment Tool (HRAT)***	\$20	Complete Health Risk Assessment Tool via mail or the online member portal.

For more information about the program, visit ProminenceMedicare.com/perks.

*Rewards are non-transferable and may be subject to applicable restrictions. Individual rewards based on current eligibility status. Prominence Health Plan may discontinue this program at any time.

**Consult with your doctor about the appropriateness of these services based on your risk factors and medical history.

***Dual, Diabetes & Heart Plan (SNP) Members only.

What is the Prominence Health Assessment (PHA)?

It is a no-cost health assessment that is part of your benefits as a Prominence member. It is an opportunity for our skilled providers to develop a personalized preventive care plan, ensure you get any needed care and complete your screenings.

What happens during your PHA?

- We review your medical and family history
- We develop or update your list of providers and prescriptions
- We assess any changes in your ability to remember or process things, which may impact decision making
- We evaluate your risk factors and treatment options
- We perform preventive care screenings – making it easier for you to redeem your Prominence Perks Rewards
- We complete routine measures like height, weight and blood pressure
- We provide personalized health advice

Added bonus: The PHA is so important to us that we will give you a **\$50 gift card** just for completing it!*

Please note: Your Prominence Health Assessment does not replace your annual physical exam with your Primary Care Provider (PCP). We collaborate with your PCP to provide you the appropriate care and this assessment helps support your overall wellness. The information from the visit will be shared with your PCP.

Take advantage of your Welcome Call and schedule your PHA early in the year to start your personalized care plan right away.

You can also call our outreach team at 877-397-7320 (TTY: 711) to schedule your Prominence Health Assessment. Our outreach team is available Monday to Friday from 8:00 a.m. to 5:00 p.m. (PT).

*Prominence Health Plan will send you a \$50 gift card in the mail 6-8 weeks after you complete your PHA. Only one \$50 gift card per member per calendar year.

Dental Benefits

Dental health is an important part of your overall health and at Prominence we understand that. All of our plans include preventive and comprehensive dental coverage at no charge. Some plans also offer an optional dental benefit for an extra fee. Our dental benefit is provided through FCL Dental.

INCLUDED DENTAL PLAN

This is our base dental plan and all Prominence Medicare Advantage members have access to dental coverage. Review the benefit highlights or Summary of Benefit pages in this booklet for additional information on the amount of coverage included in each plan.

These plans include:

- ✓ **NO** Annual Deductible
- ✓ **NO** Copays on Cleaning, Exams or X-rays
- ✓ **NO** Copays on Comprehensive Dental Services**
- ✓ **NO** Waiting Periods
- ✓ Extra Help and Dual Plan member do not pay any copayments on dental in our Included dental plan.

*See ProminenceMedicare.com for details on covered dental codes and costs for comprehensive dental services.

**Extra Help and Dual plans only.

Preventive Dental Covers*:

- ✓ **Cleanings** – 1 every 6 months
- ✓ **Periodic Oral Evaluation** – 1 every 6 months
- ✓ **Routine X-rays** – every 12 months

Comprehensive Dental Covers Things Like:

- ✓ Fillings
- ✓ Crowns
- ✓ Root Canals
- ✓ Bridges
- ✓ Dentures
- ✓ Periodontal Maintenance

For more information, including access to our in-network provider list, you can visit our website at ProminenceMedicare.com/dental or call FCL Dental at 888-212-7681.

It's easy to add premium dental coverage to your existing plan. Call Member Services at 855-969-5882 (TTY: 711) for more information.

You can only enroll in the Premium dental plan during certain times of the year, including, but not limited to, the Annual Enrollment Period from October 15 to December 7 of each year, so check out ProminenceMedicare.com/dental for more information.

You must use a dentist in the FCL or Dentemax dental network for our dental plans. You can find a dentist online at ProminenceMedicare.com/dental.

Additional Extra Benefits

Vision Benefit

- Prominence Medicare Advantage Members must use the National Vision Administrators (NVA) network.
- You are entitled to one \$0 copay routine eye exam each calendar year with an NVA in-network provider.
- For Plus, Giveback, Diabetes & Heart and Extra Help plans, your vision benefit covers either eyeglasses or contact lenses up to \$200 total. Beyond and Dual plans provide \$300 per year. You will be responsible to pay any costs exceeding that amount.

Please note: You will also be responsible for all costs for services and/or materials from a provider not in the network.

If during the year, you would like an additional routine eye examination or additional eyeglasses or contact lenses, you may obtain the services or materials at a discounted rate.

To find an NVA in-network provider, please call 1-888-429-4550 (TTY:711) or visit prominencemedicare.com/vision

Hearing Aid Coverage

Hearing aid allowance: \$600 per ear/per year for the Plus, Beyond, Giveback, Diabetes & Heart and Extra Help plans. The Dual plan offers \$3,000 for both ears combined.

Your plan covers a routine hearing exam and the hearing aid benefit is included with no additional monthly premium.

You must receive your hearing tests from a Hearing Care Solutions network provider, where as a Prominence member you can receive:

- Comprehensive hearing exam at no charge
- Hearing aid evaluation at no charge
- Fixed, discounted pricing at multiple levels of technology
- A wide selection of fully digital instruments
- A choice of up to 9 major manufacturers
- Access to an audiology physician and product specialists to respond to your questions or make recommendations
- A choice of more than 4,500 locations nationwide

All instruments purchased through Hearing Care Solutions include:

- Hearing aid fitting at no charge (hearing aids must be purchased from Hearing Care Solutions, who will assist you through the entire process)
- Three year manufacturer's warranty including loss, damage & repair
- Two year supply of batteries (up to 64 cells per ear, per year)
- 60-day evaluation period
- 12 month interest-free financing available to qualified applicants.

To schedule an appointment or talk to a representative call 866-344-7756 (TTY:711).

Member out-of-pocket per hearing aid amount varies based on technology level selected.

Transportation Benefit

Our Plus and Diabetes & Heart plans provide 24-one way trips to transportation to health-related locations. Our Extra Help and Dual plans offer 48 trips to health related locations. Conditions and limitations apply. To schedule transportation, please call Member Services at least 72 hours in advance.

Extra Benefits Debit Card*

We've renamed our OTC card the Extra Benefit Card because members of our Extra Help and Dual plans can use their OTC allowance to buy healthy food, over-the-counter medicines and supplies, and even pay for utilities like power and water.

Members of our Plus, Beyond, and Diabetes and Heart plans can use their OTC allowance to buy over-the-counter medicines and supplies.

You can use this card to buy eligible OTC drugs and supplies at major retail stores, such as Walgreens, Walmart, Dollar General, HEB or CVS.

Visit ProminenceMedicare.com/OTC or call 833-569-2328 for more information on how to place an order.

Examples of Eligible OTC Items

- Acid controllers
- Adult cough, cold & flu treatments
- Adult pain relief
- Bandages (Band-Aids®)
- External pain relief
- First aid treatments
- Sleep aids, stimulants & motion sickness
- Stomach remedies
- Vitamins, multi-vitamins & minerals

Examples of Non-Eligible Items

- Alternative medicines; botanicals, herbals, probiotics, and nutraceuticals
- Cosmetic products of any kind
- Diabetic test strips
- Grooming devices
- Hair color/hair products
- Teeth whitening products
- Toiletries of any kind

For more information on the types of items covered or to find a participating retailer, call our Member Services team at 855-969-5882 (TTY:711) or visit ProminenceMedicare.com/OTC.

* Note: Not available on the Giveback plan



Prominence Fitness and Gym Access

Prominence Medicare Advantage offers members access to a network of fitness centers and gyms across our service areas. Learn more at [ProminenceMedicare.com/living-healthy](https://www.ProminenceMedicare.com/living-healthy).

For more information on signing up for this benefit contact Member Services. Your use of the Fitness Benefit serves as your consent for information to be shared with our fitness center/gym network partners and vendors. Participating facilities and fitness chains may vary by locations and are subject to change



Manage Your Health Online

SECURE MEDICARE MEMBER PORTAL

The Prominence Health Plan Medicare member portal is designed to help you easily manage your plan benefits and see your personal health information in a secure online setting.

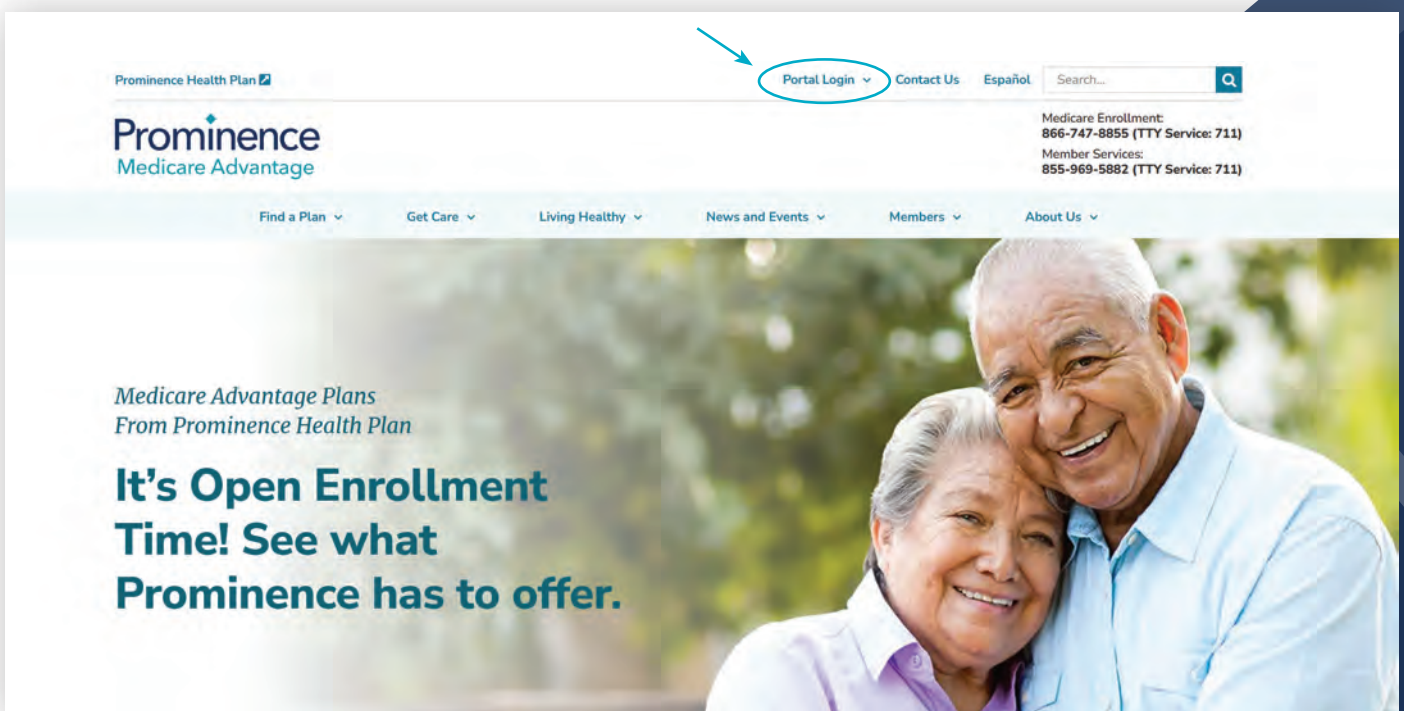
Registered users have access to:

- Member documents
- Continuity of Care Form (New Members Only)
- Reorder member ID cards
- Recent claims information and history
- Out-of-pocket balances
- Prior authorization status
- Health Risk Assessment Tool

You can also change or update your Primary Care Provider (PCP) selection and connect to your Teladoc telemedicine benefit.

If you aren't already registered for our online portal, you can do so by going to ProminenceMedicare.com and clicking on the Portal Login button at the top of the page.

To create a new account, you will be asked for your first name, last name, date of birth, member ID number and to create a password. You will then be sent a confirmation code to finalize your account set-up.



The screenshot shows the top navigation bar of the Prominence Medicare Advantage website. The 'Portal Login' button is circled in blue, and a blue arrow points to it from the left. Other navigation items include 'Contact Us', 'Español', and a search bar. Below the navigation bar, there is a main banner with the text: 'Medicare Advantage Plans From Prominence Health Plan', 'It's Open Enrollment Time! See what Prominence has to offer.', and a photograph of an elderly couple smiling.

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Prominence

Medicare Advantage

Important Information

Thank you for enrolling in Prominence Health Plan. Keep this document for important phone numbers and other information.

Proposed Effective Date: _____

We will send your enrollment application in for Medicare to approve. Once they have approved your enrollment, you will get a confirmation letter by mail.

My Agent:

Name: _____ Phone: _____

My Plan Name: _____

My Primary Care Provider (PCP):

Name: _____ Phone: _____

Urgent Care Near Me:

Name: _____ Phone: _____

Name: _____ Phone: _____

IMPORTANT PHONE NUMBERS:

Member Services (Care Advocate Team)

Feel free to call this number with any questions you might have.
If you have a specific question, we have other resources below.

855-969-5882
(TTY: 711)

Telemedicine – 24/7 phone or video – Teladoc	Teladoc.com	800-TELADOC (835-2362)
Prescription Drug Questions	Prominencemedicare.com/RX	833-775-MEDS (6337)
Dental Benefits – FCL Dental	Prominencemedicare.com/dental	888-212-7681
Vision Benefits – NVA	Prominencemedicare.com/vision	888-429-4550
Transportation		855-969-5882
Find A Doctor	Prominencemedicare.com/get-care/find-a-doctor/	855-969-5882

The following benefits may not be available on all plans.

Hearing Benefit – Hearing Care Solutions	hearingcaresolutions.com/prominencemedicare	866-344-7756
Extra Benefits/OTC	mybenefitscenter.com	855-969-5882



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Prominence Is Here to Help!

If you need additional support, we have staff at an office in your service area who can help you.

Our team is trained to provide you with the service and assistance that you deserve.

Don't hesitate to visit if you need assistance or have questions about your benefits.

North Texas Office Location

Texoma/Northwest Texas
305 W. Woodard Street, Ste 220
Denison, TX 75020
Phone: 903-400-9909

Great coverage, from people who care.

ProminenceMedicare.com

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Prominence Health Plan is an HMO plan with a Medicare contract. Enrollment in Prominence Health Plan depends on contract renewal.

Prominence Health Plan complies with applicable Federal civil rights laws and does not discriminate based on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-855-969-5882 (TTY: 711).

CONTACT US

1-855-969-5882

TTY: call 711

Contact Us

1-855-969-5882

(TTY: 711)

HOURS:

October 1 to March 31

7 days a week, 8 a.m. – 8 p.m.

April 1 to September 30

Monday through Friday

8 a.m. – 8 p.m.



Prominence
Medicare Advantage
ProminenceMedicare.com