



2027

Summary of Benefits



Commonwealth Care Alliance®

CCA Senior Care Options (HMO D-SNP)

This is a summary of drug and health services covered by Commonwealth Care Alliance from January 1, 2027 - December 31, 2027.

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CCA Senior Care Options, HMO DSNP | 2027 Summary of Benefits

Introduction

This document is a brief summary of the benefits and services covered by Commonwealth Care Alliance® (CCA) Senior Care Options (HMO D-SNP). It includes answers to frequently asked questions, important contact information, an overview of benefits and services offered, and information about your rights as a member of CCA Senior Care Options. Key terms and their definitions appear in alphabetical order in the last chapter of the Member Handbook (formerly known as the Evidence of Coverage or EOC).

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A. Disclaimers



This is a summary of health services covered by CCA Senior Care Options for 2027. This is only a summary. Please read the *Member Handbook* for the full list of benefits. To get the *Member Handbook*, call Member Services at **1-866-610-2273 (TTY: 711)** We are open Monday through Friday, 8 a.m. to 8 p.m. Eastern Time (ET), and from October 1 to March 31, the same hours, seven days a week. You can also find it online at **CommonwealthCareAlliance.org/MA**

- ❖ CCA Senior Care Options (HMO D-SNP) is a Dual Special Needs Plan (D-SNP) that contracts with both Medicare and MassHealth (Medicaid) to provide benefits of both programs to enrollees. Enrollment in the plan depends on the plan's contract renewal with Medicare.
- ❖ This plan is a voluntary program that is available to anyone 65 and older who qualifies for MassHealth Standard and Original Medicare and does not have any other comprehensive health insurance, except Medicare.
- ❖ Under CCA Senior Care Options you can get your Medicare and MassHealth (Medicaid) services in one health plan called a Senior Care Options plan. A CCA care coordinator will help manage your health care needs.
- ❖ This is not a complete list. The benefit information is a brief summary, not a complete description of benefits. For more information contact the plan or read the Member Handbook.
- ❖ Estate Recovery Awareness: MassHealth (Medicaid) is required by federal law to recover money from the estates of certain MassHealth (Medicaid) members who are age 55 years or older, and who are any age and are receiving long-term care in a nursing home or other medical institution. For more information about MassHealth (Medicaid) estate recovery, please visit www.mass.gov/estatercovery.
- ❖ For more information about Medicare, you can read the *Medicare & You* handbook. It has a summary of Medicare benefits, rights, and protections and answers to the most frequently asked questions about Medicare. You can get it at the Medicare website (www.medicare.gov) or by calling 1-800-MEDICARE (1-800-633-4227), 24 hours per day, 7 days a week. TTY users should call 1-877-486-2048.
- ❖ For more information about MassHealth (Medicaid), you can contact the Office of the Ombudsman by phone at 1-855-781-9898 (Toll Free), videophone (VP) users may call (339) 224-6831, Monday - Friday, 9 am - 4 pm.



If you have questions, please call CCA Senior Care Options (HMO D-SNP) at **1-866-610-2273 (TTY: 711)**. We are open Monday through Friday, 8 a.m. to 8 p.m. Eastern Time (ET), and from October 1 to March 31, the same hours, seven days a week. The call is free. **For more information**, visit **CommonwealthCareAlliance.org/MA**.

- ❖ We have free interpreter service to answer any questions that you may have about our health or drug plan. To get an interpreter just call us at 1-866-610-2273 (TTY: 711). We are open Monday through Friday, 8 a.m. to 8 p.m. Eastern Time (ET), and from October 1 to March 31, the same hours, seven days a week. Someone that speaks English can help you. This is a free service.

You can get this document for free in other formats, such as large print, braille, or audio. Call 1-866-610-2273 (TTY: 711). We are open Monday through Friday, 8 a.m. to 8 p.m. Eastern Time (ET), and from October 1 to March 31, the same hours, seven days a week. The call is free.

- ❖ ATTENTION: If you speak Spanish, language assistance services, free of charge, are available to you. Call Member Services at 1-866-610-2273 (TTY: 711). The call is free.
- ❖ ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-610-2273 (TTY 711). La llamada es gratuita.
- ❖ This document is available for free in other languages.
- ❖ We will keep your request for alternative formats and special language on file for future mailings. Please contact Member Services to change your request for a preferred language and/or format.



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B. Frequently asked questions (FAQ)

The following table lists frequently asked questions.

Frequently Asked Questions	Answers
What's a Senior Care Options (SCO) Plan?	Senior Care Options (SCO) is a managed care program that combines MassHealth (Medicaid) and Medicare benefits into a single plan with one card and one care team for people ages 65 or older. With SCO, you'll have a care coordinator to help you manage your care, stay healthy, and access the services you need. People eligible for SCO generally have no or low monthly premiums, no copays, and little to no out-of-pocket costs for most covered services. SCO covers medical, behavioral health, and prescription medications, plus specialized geriatric support services. CCA Senior Care Options is a SCO Plan that provides benefits of MassHealth (Medicaid) and Medicare to enrollees in the SCO program. CCA Senior Care Options has doctors, hospitals, pharmacies, providers of long-term services and supports, and other providers. It also provides care coordinators and Geriatric Support Services Coordinators (GSSC) to help you manage all your providers and services and supports. They all work together to provide the care you need. Through SCO, members have access to medical and drug benefits at no cost to them. Members must be over 65 years of age, and have MassHealth Standard eligibility, in addition to Medicare eligibility to enroll in the plan. Members must also live within our service area.

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Frequently Asked Questions	Answers
Will I get the same Medicare and MassHealth (Medicaid) benefits in CCA Senior Care Options that I get now?	You'll get most of your covered Medicare and MassHealth (Medicaid) benefits directly from CCA Senior Care Options. You'll work with a team of providers who will help determine what services will best meet your needs. This means that some of the services you get now may change based on your needs, and your doctor and care team's assessment. You may also get other benefits outside of your health plan the same way you do now, directly from a state agency like the Department of Behavioral Health or the Department of Developmental Services. When you enroll in CCA Senior Care Options, you and your care team will work together to develop a care plan to address your health and support needs, reflecting your personal preferences and goals. If you're taking any Medicare Part D drugs that CCA Senior Care Options doesn't normally cover, you can get a temporary supply and we'll help you to transition to another drug or get an exception for CCA Senior Care Options to cover your drug if medically necessary. For all other services, you can keep using your doctors and getting your current services for 90 days, or until your assessment and care plan is complete. For more information, call Member Services at the number listed at the bottom of the page.

Frequently Asked Questions	Answers
Can I use the same doctors I use now? (continued on next page)	This is often the case. If your providers (including doctors, hospitals, therapists, pharmacies, and other health care providers) work with CCA Senior Care Options and have a contract with us, you can keep going to them. • Providers with an agreement with us are “in-network.” Network providers participate in our plan. That means they accept members of our plan and provide services our plan covers. You must use the providers in CCA Senior Care Option’s network. If you use providers or pharmacies that aren’t in our network, the plan may not pay for these services or drugs. • If you need urgent or emergency care or out-of-area dialysis services, you can use providers outside of CCA Senior Care Option’s plan. • If you are currently under treatment with a provider that is out of CCA Senior Care Options’ network, or have an established relationship with a provider that is out of CCA Senior Care Options’ network, call Member Services at the number listed at the bottom of the page to check about staying connected.

Frequently Asked Questions	Answers
Can I use the same doctors I use now? (continued from previous page)	To find out if your providers are in the plan's network, call Member Services at the number listed at the bottom of the page or read CCA Senior Care Option's Provider and Pharmacy Directory on the plan's website at CommonwealthCareAlliance.org/MA. Out-of-network/non-contracted providers are under no obligation to treat Plan members, except in emergency situations. Please call Member Services or see your Member Handbook for more information, including the cost-sharing that applies to out-of-network services. If CCA Senior Care Options is new for you, we'll work with you to develop a care plan to address your needs.
What's a CCA Senior Care Options care coordinator?	A CCA Senior Care Options care coordinator is one main person for you to contact. This person helps to manage all your providers and services and make sure you get what you need.
What are Long-term Services and Supports (LTSS)?	Long-term Services and Supports (LTSS) are help for people who need assistance to do everyday tasks like bathing, toileting, getting dressed, making food, and taking medicine. Most of these services are provided at your home or in your community but could be provided in a nursing home or hospital. In some cases, a county or other agency may administer these services, and your care coordinator or care team will work with that agency.

Frequently Asked Questions	Answers
What happens if I need a service but no one in CCA Senior Care Option's network can provide it?	Most services will be provided by our network providers. If you need a service that can't be provided within our network, CCA Senior Care Options will pay for the cost of an out-of-network provider.
Where's CCA Senior Care Options available?	The service area for this plan includes: Bristol, Essex, Franklin, Hampden, Hampshire, Middlesex, Norfolk, Plymouth, Suffolk and Worcester Counties, Massachusetts. You must live in one of these areas to join the plan.
What's prior authorization? (continued on next page)	Prior authorization means an approval from CCA Senior Care Options to seek services outside of our network or to get services not routinely covered by our network before you get the services. CCA Senior Care Options may not cover the service, procedure, item, or drug if you don't get prior authorization. If you need urgent or emergency care or out-of-area dialysis services, you don't need to get prior authorization first. CCA Senior Care Options can provide you or your provider with a list of services or procedures that require you to get prior authorization from CCA Senior Care Options before the service is provided. Refer to Chapter 3 of the <i>Member Handbook</i> to learn more about prior authorization. Refer to the Benefits Chart in Chapter 4 of the <i>Member Handbook</i> to learn which services require a prior authorization. If you have questions about whether prior authorization is required for specific services, procedures, items, or drugs, call Member Services at the number listed at the bottom of this page for help.

Frequently Asked Questions	Answers
Do I pay a monthly amount (also called a premium) under CCA Senior Care Options?	Most members won't have to pay monthly premiums, including the Medicare Part B premium, for their health coverage. Some MassHealth (Medicaid) members with higher incomes may need to pay Medicare Part B Premiums. Additionally, if you pay a premium to MassHealth (Medicaid), you must continue to pay the premium to MassHealth (Medicaid) to keep your coverage. For more information, call the MassHealth (Medicaid) Customer Service Center at 1-800-841-2900 or 711 for people who have difficulty with hearing or speaking. You must have special telephone equipment to call it.
Do I pay a deductible as a member of CCA Senior Care Options?	No. You don't pay deductibles in CCA Senior Care Options.
What's the maximum out-of-pocket amount that I'll pay for medical services as a member of CCA Senior Care Options?	There's no cost sharing for medical services in CCA Senior Care Options, so your annual out-of-pocket costs will be \$0.
What's a Geriatric Support Services Coordinator (GSSC)?	A CCA Senior Care Options GSSC is a person on your care team who is an expert in long-term services and supports and/or recovery services. This person helps you get services that help you live independently in your home. Please tell your care coordinator if you're interested in a referral to a GSSC.

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C. List of covered services

The following table is a quick overview of what services you may need, your costs, and rules about the benefits.

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need hospital care	Inpatient hospital stay	\$0	Except in an emergency, your health care provider must tell the plan of your hospital admission. Prior authorization is required except for inpatient substance use and emergency admissions.
	Outpatient hospital services, including observation	\$0	Prior authorization is required for some services.
	Ambulatory surgical center (ASC) services	\$0	Prior authorization is required for some services.
	Doctor or surgeon care	\$0	Prior authorization is required for some services.
You want a doctor (continued on next page)	Visits to treat an injury or illness	\$0	Prior authorization is required for some services.
	Care to keep you from getting sick, such as flu shots and screenings to check for cancer	\$0	

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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You want a doctor (continued from previous page)	Wellness visits, such as a physical	\$0	
	“Welcome to Medicare” (preventive visit one time only)	\$0	
	Specialist care	\$0	Prior authorization is required for some services.
	Transportation to a doctor’s office	\$0	You may get rides to covered medical appointments (for non-emergencies) up to 50 miles each way by taxi, ride share services, bus/subway, or van. • You need to schedule your ride 72 hours ahead of time. • You must use the plan-approved transportation company. Prior authorization is required for rides over 50 miles.

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need emergency care	Emergency room services	\$0	Emergency room services are provided both in and out-of-network. For coverage outside the United States and its territories see Worldwide Coverage. Prior authorization is not required.
	Urgent care	\$0	Urgent care services are provided both in and out-of-network. For coverage outside the United States and its territories see Worldwide Coverage. Prior authorization is not required.
You need medical tests	Diagnostic radiology services (for example, X-rays or other imaging services, such as CAT scans or MRIs)	\$0	Prior authorization is required for some services.
	Lab tests and diagnostic procedures, such as blood work	\$0	Prior authorization is required for some services.
	Screening tests, such as tests to check for cancer	\$0	

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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need hearing/auditory services	Hearing screenings	\$0	You must use a CCA plan provider for non-routine hearing services. You must use a NationsHearing provider for routine hearing services.
	Hearing aids	\$0	You can get 1 hearing aid for each ear every 60 months, with up to \$500 in coverage. You must use a NationsHearing provider to get your hearing aids. Prior authorization is required for some services.
You need dental care (continued on next page)	Dental check-ups and preventive care	\$0	You must use a network CCA dental provider. Prior authorization is required for some services.
	Restorative and emergency dental care	\$0	Periodontics: Deep Cleanings are covered 1 every 24 months and maintenance visits are covered 1 every 3 months per calendar year. Gum surgery may be covered if medically necessary with an approved prior authorization. Prior authorization may be required for additional services.

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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need dental care (continued from previous page)	Restorative and emergency dental care	\$0	Prosthodontics: Complete and partial dentures are covered 1 every 60 months without prior authorization. Implants are covered up to a maximum of 4 per year, 1 tooth/site per lifetime with prior authorization. Oral and Maxillofacial Surgery: Extractions (simple and surgical) are covered one per tooth per lifetime without prior authorization. Extractions for impacted teeth are covered if medically necessary, prior authorization is required. Biopsy, soft tissue surgery and bone grafting are covered if medically necessary. Prior authorization is required. Other rules and limitations may apply. You must use a CCA network dental provider. For more information, please call Member Services. Prior authorization is required for some services.

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need eye care	Eye exams	\$0	One routine eye exam every 24 months. You must receive routine services from providers in the EyeMed provider network and non-routine services from providers in the CCA provider network.
	Glasses or contact lenses	\$0	Members receive up to \$300 each year that covers eyeglasses, contact lenses, and upgrades. You must use a participating EyeMed Vision Care provider. Other limitations may apply.
	Other vision care	\$0	Services include: • Comprehensive eye exams • Vision training • One glaucoma screening each year for people at high risk of glaucoma • One screening for diabetic retinopathy per year for people with diabetes

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need behavioral health services	Behavioral health services	\$0	Prior authorization is required for some services.
	Inpatient and outpatient care and community-based services for people who need behavioral health services	\$0	Prior authorization is required for some services.
You need substance use disorder services	Substance use disorder services	\$0	Prior authorization is required for some services.



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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need a place to live with people available to help you	Skilled nursing care	\$0	Prior authorization is required for some services.
	Nursing home care	\$0	If MassHealth (Medicaid) determines you have a monthly Patient Paid Amount (PPA) for your custodial care, you are responsible for these payments. Prior authorization is required for some services.
	Adult Foster Care and Group Adult Foster Care	\$0	Prior authorization is required for some services.
You need therapy after a stroke or accident	Occupational, physical, or speech therapy	\$0	Prior authorization is required for some services.

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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need help getting to health services (continued on next page)	Ambulance services	\$0	Prior authorization is required for some services.
	Emergency transportation	\$0	
	Transportation to medical appointments and services	\$0	You may get rides to covered medical appointments (for non-emergencies) up to 50 miles each way by taxi, ride share services, bus/subway, or van. - You need to schedule your ride 72 hours ahead of time. - You must use the plan-approved transportation company. Prior authorization is required for rides over 50 miles.
	Transportation to non-medical appointments and services	\$0	For members approved for Special Supplemental Benefits for the Chronically Ill* (SSBCI), you may use up to ten (10) one-way trips each month for non-medical purposes to CCA-approved destinations such as grocery shopping, pharmacy for prescription pick-up, church, gym and other community events for up to 50 miles each way.

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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need help getting to health services (continued from previous page)	Transportation to non-medical appointments and services (continued)	\$0	- You need to schedule your ride at least 72 hours in advance. - You must use the transportation company approved by your plan. Remember to complete your Health Risk Assessment with your care coordinator or have your provider complete and submit a provider attestation form validating your condition. *The benefits mentioned are Special Supplemental Benefits for the Chronically Ill (SSBCI). You may qualify for SSBCI if you are at high risk for hospitalization and require intensive Care Coordination to manage one or more chronic conditions such as cardiovascular disorders, diabetes, overweight/obesity/ metabolic syndrome, chronic and disabling behavioral health conditions or neurologic disorders. For a full list of qualifying chronic conditions or to learn more about other eligibility requirements for SSBCI, please contact Member Services or your care coordinator.

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need drugs to treat your illness or condition (continued on next page)	Medicare Part B drugs	\$0	Part B drugs include drugs given by your doctor in their office, some oral cancer drugs, and some drugs used with certain medical equipment. Read the <i>Member Handbook</i> for more information on these drugs. We may require you to try a different drug first before we agree to cover the drug you ask for. This is known as Step Therapy. Prior authorization is required for some services.



Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need drugs to treat your illness or condition (continued from previous page)	Medicare Part D drugs Drugs on the CCA formulary have \$0 copays. This also includes over-the-counter drugs on the MassHealth list.	\$0 for a 31-day supply	There may be limitations on the types of drugs covered. Please refer to CCA Senior Care Options' <i>List of Covered Drugs (Drug List)</i> for more information. Most Medicare Part D drugs are available for a 102-day supply through mail-order services or at a retail pharmacy. Specialty drugs are available for a 31-day supply through mail-order services, retail pharmacy, or specialty pharmacy. Your cost is \$0. Quantity Limits and/or Step Therapy may apply. Prior authorization is required for some services.
	Over-the-counter (OTC) drugs	\$0	There may be limitations on the types of drugs covered. Please refer to CCA Senior Care Options' <i>List of Covered Drugs (Drug List)</i> for more information. Please see the Healthy Savings® card for additional over-the-counter benefit coverage.

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need help getting better or have special health needs	Rehabilitation services	\$0	Prior authorization is required for some services.
	Medical equipment for home care	\$0	Prior authorization is required for some services.
	Dialysis services	\$0	
You need foot care	Podiatry services	\$0	
	Orthotic services	\$0	Prior authorization is required for some services.

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need durable medical equipment (DME) Note: This isn't a complete list of covered DME. For a complete list, contact Member Services or refer to Chapter 4 of the <i>Member Handbook</i> .	Wheelchairs, crutches, and walkers	\$0	Prior authorization is required for some services.
	Nebulizers	\$0	Prior authorization is required for some services.
	Oxygen equipment and supplies	\$0	Prior authorization is required for some services.
You need help living at home (continued on next page)	Home health services	\$0	Prior authorization is required for some services.
	Home services, such as cleaning or housekeeping, or home modifications such as grab bars	\$0	Prior authorization is required for some services.
	Adult Day Health or other support services	\$0	Prior authorization is required for some services.
	Day habilitation services	\$0	Prior authorization is required for some services.

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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need help living at home (continued from previous page)	Services to help you live on your own (home health care services or personal care attendant services)	\$0	Prior authorization is required for some services.
Additional services (continued on next page)	Chiropractic services	\$0	Prior authorization is required after 20 visits.
	Diabetes supplies and services	\$0	Diabetic supplies and services are limited to specified manufacturers: Glucometers: • Accu-Chek Guide Care® • Accu-Chek Me Care® • FreeStyle Lite® • FreeStyle Freedom Lite® • FreeStyle InsuLinx® • FreeStyle Precision Neo® • Precision Xtra® Test Strips: • Accu-Chek Aviva Plus® • Accu-Chek SmartView® • AccuChek Guide® • FreeStyle® • FreeStyle Lite®

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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
Additional services (continued from previous page)	Diabetes supplies and services	\$0	• FreeStyle InsuLinx® • FreeStyle Precision Neo® • Precision Xtra Blood Glucose® • Precision Xtra Ketone® Prior authorization is required for some services.
	Prosthetic services	\$0	Prior authorization is required for some services.
	Radiation therapy	\$0	Prior authorization is required for some services.
	Services to help manage your disease	\$0	Prior authorization is required for some services.
	Acupuncture	\$0	Routine Acupuncture: Prior authorization is required after 20 visits. Medicare-Covered Acupuncture: Prior authorization is required for chronic lower back pain

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
Additional services (continued from previous page)	Telehealth	\$0	Telehealth services may be offered through network providers. The same authorization rules apply to telehealth services as corresponding in-person visits.
	Telehealth (Teladoc) – Additional Services	\$0	Telehealth is offered through Teladoc for general and medical urgent services to treat flu, allergies, sinus infection, rash, sore throat and more. Contact Teladoc for services at 1-800-835-2362, 24 hours a day, 7 days a week.

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
Additional services (continued from previous page)	Healthy Savings Card for over-the-counter (OTC) items, personal care items and more	\$0	\$433 per calendar quarter (every three months). Any unused amounts will not carry over to the next quarter. Amounts can be used to purchase CCA covered over-the-counter (OTC) items without a prescription. Use your card to purchase OTC items including: first aid supplies, COVID-19 tests, body wash, dental care, cold and flu remedies at participating retailers. For members approved for Special Supplemental Benefits for the Chronically Ill (SSBCI) you may use your quarterly allowance for the purchase of CCA covered food at in-network retailers as well as towards utility payments such as natural gas, electric and internet/cable. Remember to complete your Health Risk Assessment with your care coordinator or have your provider complete and submit a provider attestation form validating your condition. The benefits mentioned are Special Supplemental Benefits for the Chronically Ill

If you have questions, please call CCA Senior Care Options (HMO D-SNP) at **1-866-610-2273 (TTY: 711)**. We are open Monday through Friday, 8 a.m. to 8 p.m. Eastern Time (ET), and from October 1 to March 31, the same hours, seven days a week. The call is free. **For more information**, visit **CommonwealthCareAlliance.org/MA**.

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
Additional services (continued from previous page)	Healthy Savings Card for over-the-counter (OTC) items, personal care items and more	\$0	(SSBCI). You may qualify for SSBCI if you are at high risk for hospitalization and require intensive Care Coordination to manage one or more chronic conditions such as cardiovascular disorders, diabetes, overweight/obesity/ metabolic syndrome, chronic and disabling behavioral health conditions or neurologic disorders. For a full list of qualifying chronic conditions or to learn more about other eligibility requirements for SSBCI, please contact Member Services or your care coordinator.
	Fitness	\$0	This benefit includes: • Access to a network of participating fitness centers • One home fitness kit each year (choose from options like: strength, toning, yoga, self-care, or walking kits; options may vary based on availability). • Online fitness and wellness resources through the Well-Being Club, including: ○ On-demand workout videos ○ Live virtual classes and events ○ Health and wellness coaching sessions

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
Additional services (continued from previous page)	Worldwide Coverage		The plan covers emergency services, emergency transportation, and urgently needed care outside of the United States and its territories up to \$100,000 maximum plan coverage for all services combined.

The above summary of benefits is provided for informational purposes only and isn't a complete list of benefits. For a complete list and more information about your benefits, you can read the CCA Senior Care Options *Member Handbook*. If you don't have a *Member Handbook*, call CCA Senior Care Options Member Services at 1-866-610-2273 (TTY: 711) to get one. If you have questions, you can also call Member Services or visit **CommonwealthCareAlliance.org/MA**.



If you have questions, please call CCA Senior Care Options (HMO D-SNP) at **1-866-610-2273 (TTY: 711)**. We are open Monday through Friday, 8 a.m. to 8 p.m. Eastern Time (ET), and from October 1 to March 31, the same hours, seven days a week. The call is free. **For more information**, visit **CommonwealthCareAlliance.org/MA**.

D. Benefits covered outside of CCA Senior Care Options

There are some services that you can get that aren't covered by CCA Senior Care Options but are covered by Medicare, MassHealth (Medicaid), or a State or county agency. This isn't a complete list. Call Member Services at **1-866-610-2273 (TTY: 711)** to find out about these services.

Other services covered by Medicare, MassHealth (Medicaid), or a State Agency	Your costs
Certain hospice care services covered outside of CCA Senior Care Options	\$0
Psychosocial rehabilitation	\$0
Targeted case management	\$0
Rest home room and board	\$0
Transitional Support Services (TSS) for substance use disorders	\$0

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E. Services that CCA Senior Care Options Medicare, and MassHealth (Medicaid) don't cover

This isn't a complete list. Call Member Services at **1-866-610-2273 (TTY: 711)** to find out about other excluded services.

Services CCA Senior Care Options, Medicare, and MassHealth (Medicaid) don't cover

Services that are not medically necessary according to the standards of Medicare and MassHealth (Medicaid) unless otherwise approved or entered in your Personal (Individualized) Care Plan.

Naturopath services (the use of natural or alternative treatments).

Personal items in your room at a hospital or a skilled nursing facility, such as a telephone or a television.

Services provided by an out-of-network provider are not covered unless approved in advance. This does not apply to emergency or urgently needed care.

E-cigarettes.

Experimental medical and surgical treatments, items, and drugs, unless covered by Medicare or under a Medicare-approved clinical research study or by our plan. (Please see your Member Handbook for more information on clinical research studies.)

Elective or voluntary enhancement procedures or services (including weight loss, hair growth, sexual performance, athletic performance, cosmetic purposes, anti-aging, and behavioral performance), except when medically needed.

Cosmetic surgery or other cosmetic work unless it is needed because of an accidental injury or when medically necessary. However, the plan will pay for reconstruction of a breast after a mastectomy and for treating the other breast to match it. Radial keratotomy, LASIK surgery, vision therapy, and other low-vision aids.

Reversal of sterilization procedures and nonprescription contraceptive supplies unless these supplies are covered under the MassHealth (Medicaid) benefit. Private room in a hospital, except when it is considered medically necessary.

Routine services provided outside of the service area are not covered unless approved in advance. Services that you get without prior authorization when prior authorization is required.



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F. Your rights as a member of the plan

As a member of CCA Senior Care Options, you have certain rights. You can exercise these rights without being punished. You can also use these rights without losing your health care services. We'll tell you about your rights at least once a year. For more information on your rights, please read the *Member Handbook*. Your rights include, but aren't limited to, the following:

- **You have a right to respect, fairness, and dignity.** This includes the right to:
 - Get covered services without concern about medical condition, health status, receipt of health services, claims experience, medical history, disability (including behavioral impairment), marital status, age, sex, sexual orientation, national origin, race, color, religion, creed, or public assistance
 - Get information in other languages and formats (for example, large print, braille, or audio) free of charge
 - Be free from any form of physical restraint or seclusion
- **You have the right to get information about your health care.** This includes information on treatment and your treatment options. This information should be in a language and format you can understand. This includes the right to get information on:
 - Description of the services we cover
 - How to get services
 - How much services will cost you
 - Names of health care providers and care coordinator
- **You have the right to make decisions about your care, including refusing treatment.** This includes the right to:
 - Choose a primary care provider (PCP) and change your PCP at any time during the year
 - Choose a Geriatric Support Services Coordinator (GSSC) Use a women's health care provider without a referral
 - Get your covered services and drugs quickly
 - Know about all treatment options, no matter what they cost or whether they're covered. SCO members have \$0 costs.
 - Refuse treatment, even if your health care provider advises against it
 - Stop taking medicine, even if your health care provider advises against it
 - Ask for a second opinion. CCA Senior Care Options will pay for the cost of your second opinion visit
 - Make your health care wishes known in an advance directive



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- **You have the right to timely access to care that doesn't have any communication or physical access barriers.** This includes the right to:
 - Get timely medical care for covered services within the time frames described in the *Member Handbook* and to file an appeal if you don't receive your care within those timeframes
 - Get in and out of a health care provider's office. This means barrier-free access for people with disabilities, in accordance with the Americans with Disabilities Act.
 - Have interpreters to help with communication with your doctors, other providers, and your health plan. Call **1-866-610-2273 (TTY: 711)** if you need help with this service.
 - Have your *Member Handbook* and any printed materials from CCA Senior Care Options translated into your prevalent language, and/or to have these materials read out loud to you if you have trouble seeing or reading. Oral interpretation services will be made available upon request and free of charge
 - Be free of any form of physical restraint or seclusion that would be used as a means of coercion, force, discipline, convenience or retaliation

- **You have the right to seek emergency and urgent care when you need it.** This means you have the right to:
 - Get emergency services without prior authorization in an emergency
 - Use an out-of-network urgent or emergency care provider, when necessary

- **You have a right to confidentiality and privacy.** This includes the right to:
 - Ask for and get a copy of your medical records in a way that you can understand and to ask for your records to be changed or corrected
 - Have your personal health information kept private
 - Have privacy during treatment

- **You have the right to make complaints about your covered services or care.** This includes the right to:
 - File a complaint or grievance against us or our providers
 - File a complaint with My Ombudsman Program at 1-855-781-9898 (or use MassRelay at 711 to call 1-855-781-9898 or Videophone (VP) (339-224-6831). The CCA Senior Care Options website **CommonwealthCareAlliance.org/MA** complaint forms and instructions available online.
 - Appeal certain decisions made by CCA Senior Care Options or our providers.
 - Ask for a State Hearing
 - Get a detailed reason for why services were denied

For more information about your rights, you can read the *Member Handbook*. If you have questions, you can call CCA Senior Care Options Member Services at the numbers listed at the bottom of this page.

You can also call My Ombudsman at 1-855-781-9898 (or use MassRelay at 711 to call 1-855-781-9898 or Videophone (VP) (339-224-6831)

G. How to file a complaint or appeal a denied service

If you have a complaint or think CCA Senior Care Options should cover something we denied, call Member Services at the numbers listed at the bottom of this page. You may be able to appeal our decision.

For questions about complaints and appeals, you can read **Chapter 9** of the *Member Handbook*. You can also call CCA Senior Care Options Member Services at the numbers listed at the bottom of this page.

If you have a problem, concern or questions related to your benefits or care, please call CCA Senior Care Options Member Services at **1-866-610-2273 (TTY: 711)**.

H. What to do if you suspect fraud

Most health care professionals and organizations that provide services are honest. Unfortunately, there may be some who are dishonest.

If you think a doctor, hospital or other pharmacy is doing something wrong, please contact us.

- Call us at CCA Senior Care Options Member Services. Phone numbers are listed at the bottom of the page.
- Or, call MassHealth (Medicaid) Customer Service Center at 1-800-841-2900. TTY users may call 1-800-497-4648.
- Or, call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users may call 1-877-486-2048. You can call these numbers for free.



If you have questions, please call CCA Senior Care Options (HMO D-SNP) at **1-866-610-2273 (TTY: 711)**. We are open Monday through Friday, 8 a.m. to 8 p.m. Eastern Time (ET), and from October 1 to March 31, the same hours, seven days a week. The call is free. **For more information**, visit **CommonwealthCareAlliance.org/MA**.

I. What to do if you want independent help with a complaint or concern

My Ombudsman is an independent program that can help you if you have questions, concerns, or problems related to SCO. You can contact My Ombudsman to get information or assistance. My Ombudsman services are free. My Ombudsman staff:

- can answer your questions or refer you to the right place to find what you need.
- can help you address a problem or concern with SCO or your SCO plan, CCA Senior Care Options. My Ombudsman staff will listen, investigate the issue, and discuss options with you to help solve the problem.
- help with appeals. An appeal is a formal way of asking your SCO plan, MassHealth (Medicaid), or Medicare to review a decision about your services. My Ombudsman staff can talk with you about how to make an appeal and what to expect during the appeal process.

You can call, write, or visit My Ombudsman at its office.

- Call 1-855-781-9898, Monday through Friday from 9:00 A.M. to 4:00 P.M.
 - Use 7-1-1 to call 1-855-781-9898. This number is for people who are deaf, hard of hearing, or speech disabled.
 - Use Videophone (VP) 339-224-6831. This number is for people who are deaf or hard of hearing.
- Email info@myombudsman.org
- Write to or visit the My Ombudsman office at 25 Kingston Street, 4th floor, Boston, MA 02111
 - Please refer to the My Ombudsman website or contact them directly for updated information about location and walk-in hours.
- Visit My Ombudsman online at www.myombudsman.org



If you have questions, please call CCA Senior Care Options (HMO D-SNP) at **1-866-610-2273 (TTY: 711)**. We are open Monday through Friday, 8 a.m. to 8 p.m. Eastern Time (ET), and from October 1 to March 31, the same hours, seven days a week. The call is free. **For more information**, visit **CommonwealthCareAlliance.org/MA**.

If you have general questions or questions about our plan, services, service area, billing, or Member ID Cards, please call Senior Care Options Member Services:

1-866-610-2273 (TTY: 711) We are open Monday through Friday, 8 a.m. to 8 p.m. Eastern Time (ET), and from October 1 to March 31, the same hours, seven days a week. Calls to this number are free. For more information, visit **CommonwealthCareAlliance.org/MA**

Member Services also has free language interpreter services available for Non-English speakers.

TTY: 711. We are open Monday through Friday, 8 a.m. to 8 p.m. Eastern Time (ET), and from October 1 to March 31, the same hours, seven days a week. Calls to this number are free.

If you have questions about your health:

Call your primary care provider (PCP). Follow your PCP's instructions for getting care when the office is closed. If your PCP's office is closed, you can also call 24/7 Nurse Help Line. A nurse will listen to your problem and tell you how to get care. (*Example:* urgent care, emergency room).

The number for the 24/7 Nurse Help Line is: 1-866-610-2273 (TTY; 711)

Calls to this number are free. Available 24/7

CCA Senior Care Options also has free language interpreter services available.

TTY: 711 Calls to this number are free. Available 24/7

If you need immediate behavioral health care, please call the Behavioral Health Crisis Line:

1-866-610-2273

Calls to this number are free Available 24/7

CCA Senior Care Options also has free language interpreter services available.

TTY: 711 Calls to this number are free. Available 24/7



Notice of Availability

Interpreter Services

English: If you speak English, free language assistance services are available. Auxiliary aids and services to provide information in accessible formats are also available free of charge. Call 1-866-610-2273 (TTY: 711).

Spanish: Si habla español, tiene a su disposición servicios de asistencia lingüística gratuitos. También están disponibles sin costo recursos auxiliares y servicios para proporcionar información en formatos accesibles. Llame al 1-866-610-2273 (TTY: 711).

Chinese Mandarin: 如果您讲普通话，我们可以提供免费的语言协助服务。此外，还免费提供以无障碍格式提供信息的辅助工具和服务。请致电 1-866-610-2273 (TTY: 711)。

Chinese Cantonese: 如果您講粵語，我們可以提供免費的語言協助服務。此外，還免費提供以無障礙格式提供資訊的輔助工具和服務。請致電 1-866-610-2273 (TTY: 711)。

Tagalog: Kung nagsasalita ka ng Tagalog, magagamit ang mga libreng serbisyo sa tulong sa wika. Ang mga pantulong na tulong at serbisyo para magbigay ng impormasyon sa mga naa-access na format ay makukuha rin nang walang bayad. Tumawag sa 1-866-610-2273 (TTY: 711).

French: Si vous parlez français, des services d'assistance linguistique gratuits sont disponibles. Des aides et services auxiliaires permettant de fournir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le 1-866-610-2273 (TTY : 711).

Vietnamese: Nếu quý vị nói tiếng Việt, chúng tôi cung cấp dịch vụ hỗ trợ ngôn ngữ miễn phí. Các dịch vụ và phương tiện phụ trợ cung cấp thông tin ở định dạng dễ tiếp cận cũng được miễn phí. Gọi 1-866-610-2273 (TTY: 711).

German: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachunterstützungsdienste zur Verfügung. Hilfsmittel und Dienstleistungen zur Bereitstellung von Informationen in barrierefreien Formaten sind ebenfalls kostenlos verfügbar.



If you have questions, please call CCA Senior Care Options (HMO D-SNP) at **1-866-610-2273 (TTY: 711)**. We are open Monday through Friday, 8 a.m. to 8 p.m. Eastern Time (ET), and from October 1 to March 31, the same hours, seven days a week. The call is free. **For more information**, visit **CommonwealthCareAlliance.org/MA**.

Rufen Sie die Nummer
+1-866-610-2273 (TTY: 711) an.

Korean: 한국어를 구사하는 경우, 무료 언어 지원 서비스를 이용할 수 있습니다. 접근 가능한 형식으로 정보를 제공하는 보조 도구와 서비스도 무료로 제공됩니다. 1-866-610-2273 (TTY: 711) 으로 전화하세요.

Russian: Если вы говорите на русском языке, вам могут предоставить бесплатные услуги переводчика. Также бесплатно предоставляются вспомогательные средства и услуги, позволяющие получать информацию в доступных форматах. Звоните по номеру 1-866-610-2273 (TTY: 711).

Arabic: إذا كنت تتحدث اللغة العربية، تتوفر خدمات المساعدة اللغوية المجانية. وتتوفر أيضًا مساعدات وخدمات إضافية لتوفير المعلومات بتنسيقات يسهل الوصول إليها مجانًا. اتصل على الرقم 1-866-610-2273 (TTY: 711).

Hindi: यदि आप हिन्दी बोलते हैं, तो निःशुल्क भाषा सहायता सेवाएँ उपलब्ध हैं। सुलभ प्रारूप में सूचना उपलब्ध कराने के लिए सहायक साधन और सेवाएं भी निःशुल्क उपलब्ध हैं। 1-866-610-2273 (TTY: 711) पर कॉल करें।

Italian: Se parla italiano, può usufruire di servizi di assistenza linguistica gratuiti. Sono disponibili gratuitamente anche dei servizi e supporti ausiliari che forniscono informazioni in formati accessibili. Chiama il numero 1-866-610-2273 (TTY: 711).

Portuguese: se você fala português, serviços de assistência linguística gratuitos estão disponíveis. Recursos e serviços auxiliares para fornecer informações em formatos acessíveis também estão disponíveis gratuitamente. Ligue para 1-866-610-2273 (TTY: 711).

Cape Verdean Creole: Si bu ta papia Kriolu di Kabu Verdi, sirvisus di apoiu lingustikui ta sta dispunível. També ta sta dispunível apoiu y sirvisus ausiliaris pa da informason na formatus asesível. Txoma pa 1-866-610-2273 (TTY: 711).

Haitian Creole: Si ou pale kreyòl Ayisyen, gen sèvis asistans lang gratis ki disponib. Gen èd ak sèvis oksilyè pou bay enfòmasyon nan fòma aksesib ki disponib gratis tou. Rele 1-866-610-2273 (TTY: 711).

Polish: Jeśli mówisz po polsku, możesz skorzystać z bezpłatnych usług pomocy językowej. Dodatkowe pomoce i usługi zapewniające informacje w dostępnych formatach są również dostępne bezpłatnie. Zadzwoń pod numer 1-866-610-2273 (TTY: 711).



If you have questions, please call CCA Senior Care Options (HMO D-SNP) at **1-866-610-2273 (TTY: 711)**. We are open Monday through Friday, 8 a.m. to 8 p.m. Eastern Time (ET), and from October 1 to March 31, the same hours, seven days a week. The call is free. **For more information**, visit **CommonwealthCareAlliance.org/MA**.

Japanese: 日本語を話せる方は、無料の言語支援サービスをご利用いただけます。受け入れ可能な方法で情報を入手するための補助手段やサービスも無料でご利用いただけます。

1-866-610-2273 (TTY: 711) にお電話ください。

Gujarati: જો તમે ગુજરાતી બોલનાર છો, તો મફત ભાષા સહાય સેવા ઉપલબ્ધ છે. માહિતીને સુલભ ફોર્મેટમાં પ્રદાન કરવા માટે સહાયક સહાય અને સેવા પણ મફતમાં ઉપલબ્ધ છે. 1-866-610-2273 (TTY: 711) પર કોલ કરો.

Lao/Laotian: ຖ້າທ່ານເວົ້າພາສາລາວ, ມີບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາພາສາພາສາ. ການຊ່ວຍເຫຼືອ ແລະ ການບໍລິການເພື່ອສະໜອງຂໍ້ມູນໃນຮູບແບບທີ່ສາມາດເຂົ້າເຖິງໄດ້ແມ່ນຍັງສາມາດໃຊ້ໄດ້ໂດຍບໍ່ເສຍຄ່າ. ໂທ 1-866-610-2273 (TTY: 711).

Greek: Εάν μιλάτε ελληνικά, διατίθενται δωρεάν υπηρεσίες γλωσσικής βοήθειας. Διατίθενται επίσης δωρεάν βοηθητικά μέσα και υπηρεσίες για την παροχή πληροφοριών σε προσβάσιμη μορφή. Καλέστε στο 1-866-610-2273 (TTY: 711).

Khmer: ប្រសិនបើអ្នកនិយាយភាសាខ្មែរ នោះនឹងមានការផ្តល់ជូនសេវាជំនួយផ្នែកភាសាដោយឥតគិតថ្លៃ។ ជំនួយ និងសេវាក្នុងការផ្តល់ព័ត៌មានជាទម្រង់ដែលអាចចូលប្រើបានក៏នឹងមានផ្តល់ជូនដោយឥតគិតថ្លៃផងដែរ។ ទូរសព្ទទៅ 1-866-610-2273 (TTY: 711)។



If you have questions, please call CCA Senior Care Options (HMO D-SNP) at **1-866-610-2273 (TTY: 711)**. We are open Monday through Friday, 8 a.m. to 8 p.m. Eastern Time (ET), and from October 1 to March 31, the same hours, seven days a week. The call is free. **For more information**, visit **CommonwealthCareAlliance.org/MA**.