

2019

Tufts Health Unify
**Annual Notice
of Changes**



TUFTS
Health Plan

Tufts Health Unify offered by Tufts Health Plan

Annual Notice of Changes for 2019

Introduction

You are currently enrolled as a member of *Tufts Health Unify*. Next year, there will be changes to the plan's benefits and rules. This *Annual Notice of Changes* tells you about the changes and where to find more information about them. Key terms and their definitions appear in alphabetical order in the last chapter of the *Member Handbook*.

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If you have questions, please call *Tufts Health Unify* at **1.855.393.3154** (TTY: 711), seven days a week, from 8 a.m. to 8 p.m. The call is free. **For more information**, visit TuftsHealthUnify.org.

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A. Disclaimers

Limitations and restrictions may apply. For more information, call *Tufts Health Unify* Member Services. This means that you may have to pay for some services and that you need to follow certain rules to have *Tufts Health Unify* pay for your services.

The *List of Covered Drugs* and/or pharmacy and provider networks may change throughout the year. We will send you a notice before we make a change that affects you.

Benefits may change on January 1 of each year.

B. Reviewing Your Medicare and MassHealth Coverage for Next Year

It is important to review your coverage now to make sure it will still meet your needs next year. If it does not meet your needs, you may be able to leave the plan. See section F for more information. **If you are over 65 and you decide to leave One Care, you will not be able to enroll in a One Care plan later.**

Your membership will end on the last day of the month that you tell Medicare or MassHealth you want to leave the plan.

As long as you are still eligible for Medicare and MassHealth, you can leave One Care or your One Care plan and keep your Medicare and MassHealth benefits.

If you leave One Care, you will usually go back to getting your Medicare and MassHealth services separately.

- You will have a choice about how to get your Medicare benefits (go to page 10 to see your options).
- You will get your MassHealth services directly from doctors and other providers by using your MassHealth card. This is called “fee-for-service.” Your MassHealth services include most long-term services and supports and behavioral health care.

NOTE: If you are in a drug management program, you may not be able to join a different plan. See Chapter 5 of your *Member Handbook* for information about drug management programs.

B1. Additional Resources

- **ATTENTION:** If you speak Spanish, language assistance services, free of charge, are available to you. Call **1.855.393.3154** (TTY: 711), seven days a week, from 8 a.m. to 8 p.m. The call is free.
- Si habla español, tiene disponible los servicios de asistencia de idioma gratis. Llame al **1.855.393.3154** (TTY: 711), los siete días de la semana, de 8 a.m. a 8 p.m. La llamada es gratuita.
- You can get this *Annual Notice of Changes* for free in other formats, such as large print, braille, or audio. Call **1.855.393.3154** (TTY: 711), seven days a week, from 8 a.m. to 8 p.m. The call is free.
- Call Member Services to request materials in languages other than English or in an alternative format.

B2. Information about *Tufts Health Unify*

- *Tufts Health Unify* is a health plan that contracts with both Medicare and MassHealth to provide benefits of both programs to enrollees.
- Coverage under *Tufts Health Unify* qualifies as minimum essential coverage (MEC). It satisfies the Patient Protection and Affordable Care Act's (ACA) individual shared responsibility requirement. Please visit the Internal Revenue Service (IRS) website at <https://www.irs.gov/Affordable-Care-Act/Individuals-and-Families> for more information on the individual shared responsibility requirement for MEC.
- *Tufts Health Unify* is offered by Tufts Health Plan. When this *Annual Notice of Changes* says "we," "us," or "our," it means Tufts Health Plan. When it says "the plan" or "our plan," it means *Tufts Health Unify*.



If you have questions, please call *Tufts Health Unify* at **1.855.393.3154** (TTY: 711), seven days a week, from 8 a.m. to 8 p.m. The call is free. **For more information**, visit TuftsHealthUnify.org.

B3. Important things to do:

- **Check if there are any changes to our benefits that may affect you.**
 - Are there any changes that affect the services you use?
 - It is important to review benefit changes to make sure they will work for you next year.
 - Look in section D1 for information about benefit changes for our plan.
- **Check if there are any changes to our prescription drug coverage that may affect you.**
 - Will your drugs be covered? Are they in a different tier? Can you continue to use the same pharmacies?
 - It is important to review the changes to make sure our drug coverage will work for you next year.
 - Look in section D2 for information about changes to our drug coverage.
- **Check to see if your providers and pharmacies will be in our network next year.**
 - Are your doctors in our network? What about your pharmacy? What about the hospitals or other providers you use?
 - Look in section C for information about our *Provider and Pharmacy Directory*.
- **Think about whether you are happy with our plan.**

**If you decide to stay with
Tufts Health Unify:**

If you want to stay with us next year, it's easy – you don't need to do anything. If you don't make a change, you will automatically stay enrolled in our plan.

**If you decide to change One
Care plans or leave One Care:**

If you decide another One Care plan will better meet your needs, you may be able to switch plans (see section F for more information). If you enroll in a new plan, your new coverage will begin on the first day of the following month.

If you leave One Care, your membership in the plan will end at the end of the month.

Look in section F to learn more about your choices.

C. Changes to the network providers and pharmacies

Our provider and pharmacy networks have changed for 2019.

We strongly encourage you to **review our current *Provider and Pharmacy Directory*** to see if your providers and pharmacy are still in our network. An updated *Provider and Pharmacy Directory* is located on our website at TuftsHealthUnify.org. You also may call Member Services at **1.855.393.3154** for updated provider information or to ask us to mail you a *Provider and Pharmacy Directory*.

Please note that we may make changes to our network during the year. If your provider leaves the plan, you have certain rights and protections. For more information, see Chapter 3 of your *Member Handbook*.

D. Changes to benefits for next year

D1. Changes to benefits for medical services

We are changing our coverage for certain medical services next year. The following table describes these changes.



If you have questions, please call *Tufts Health Unify* at **1.855.393.3154** (TTY: 711), seven days a week, from 8 a.m. to 8 p.m. The call is free. **For more information**, visit TuftsHealthUnify.org.

	2018 (this year)	2019 (next year)
Transitional Living Program	Transitional Living Program services are not covered.	Transitional Living Program services are covered.
Clinically Managed Population-Specific High Intensity Residential Services (ASAM Level 3.3)	Clinically Managed Population-Specific High Intensity Residential Services (ASAM Level 3.3) are not covered.	Clinically Managed Population-Specific High Intensity Residential Services (ASAM Level 3.3) are covered.
Enhanced Residential Rehabilitation Services for Dually Diagnosed (ASAM Level 3.1 co-occurring enhanced)	Enhanced Residential Rehabilitation Services for Dually Diagnosed (ASAM Level 3.1 co-occurring enhanced) are not covered.	Enhanced Residential Rehabilitation Services for Dually Diagnosed (ASAM Level 3.1 co-occurring enhanced) are covered.
Recovery Coaching	Recovery Coaching is not covered.	Recovery Coaching is covered.
Recovery Support Navigators	Recovery Support Navigators are not covered.	Recovery Support Navigators are covered.
Residential Rehab Services (ASAM 3.1)	Residential Rehab Services (ASAM 3.1) are not covered.	Residential Rehab Services (ASAM 3.1) are covered.
Transitional Support Services (TSS) for Substance Use Disorders	Transitional Support Services (TSS) for Substance Use Disorders are not covered.	Transitional Support Services (TSS) for Substance Use Disorders are covered.

D2. Changes to prescription drug coverage

Changes to our Drug List

An updated *List of Covered Drugs* is located on our website at TuftsHealthUnify.org. You also may call Member Services at **1.855.393.3154** for updated drug information or to ask us to mail you a *List of Covered Drugs*.

We made changes to our Drug List, including changes to the drugs we cover and changes to the restrictions that apply to our coverage for certain drugs.

Review the Drug List to **make sure your drugs will be covered next year** and to see if there will be any restrictions.

If you are affected by a change in drug coverage, we encourage you to:

- Work with your doctor (or other prescriber) to find a different drug that we cover.
 - You can call Member Services at **1.855.393.3154** or contact your Care Manager to ask for a list of covered drugs that treat the same condition.
 - This list can help your provider find a covered drug that might work for you.
- Work with your doctor (or other prescriber) and ask the plan to make an exception to cover the drug.
 - You can ask for an exception before next year and we will give you an answer within 72 hours after we get your request (or your prescriber's supporting statement).
 - To learn what you must do to ask for an exception, see Chapter 9 of the 2019 *Member Handbook* or call Member Services at **1.855.393.3154**.
 - If you need help asking for an exception, you can contact Member Services or your Care Manager. See Chapter 2 and Chapter 3 of the *Member Handbook* to learn more about how to contact your Care Manager.
- Ask the plan to cover a temporary supply of the drug.
 - In some situations, we will cover a **temporary** supply of the drug during the first 90 days of the calendar year.
 - This temporary supply will be for up to 30 days. (To learn more about when you can get a temporary supply and how to ask for one, see Chapter 5 of the *Member Handbook*.)
 - When you get a temporary supply of a drug, you should talk with your doctor to decide what to do when your temporary supply runs out. You can either switch to a different drug covered by the plan or ask the plan to make an exception for you and cover your current drug.
 - If we approve your request for an exception, our approval usually is valid until the end of the plan year. This is true as long as your doctor continues to prescribe the drug for you, and the drug continues to be safe and effective for treating your condition.



If you have questions, please call *Tufts Health Unify* at **1.855.393.3154** (TTY: 711), seven days a week, from 8 a.m. to 8 p.m. The call is free. **For more information**, visit TuftsHealthUnify.org.

Changes to prescription drug costs

There are no changes to the amount you pay for prescription drugs in 2019.

The following table shows your costs for drugs in each of our three drug tiers.

	2018 (this year)	2019 (next year)
Drugs in Tier 1 (generic drugs) Cost for a one-month supply of a drug in Tier 1 that is filled at a network pharmacy	Your co-pay for a one-month (30-day) supply is \$0 per prescription.	Your co-pay for a one-month (30-day) supply is \$0 per prescription.
Drugs in Tier 2 (brand-name drugs) Cost for a one-month supply of a drug in Tier 2 that is filled at a network pharmacy	Your co-pay for a one-month (30-day) supply is \$0 per prescription.	Your co-pay for a one-month (30-day) supply is \$0 per prescription.
Drugs in Tier 3 (over-the-counter drugs) Cost for a one-month supply of a drug in Tier 3 that is filled at a network pharmacy	Your co-pay for a one-month (30-day) supply is \$0 per prescription.	Your co-pay for a one-month (30-day) supply is \$0 per prescription.

E. Administrative changes

We are changing our prior authorization for certain medical services next year. The following table describes these changes.

	2018 (this year)	2019 (next year)
Non-emergency transportation	Requires prior authorization from us.	Does not require prior authorization from us.

F. How to choose a plan

F1. How to stay in our plan

We hope to keep you as a member next year.

You do not have to do anything to stay in your health plan. If you do not sign up for a different One Care plan, change to a Medicare Advantage Plan, or change to Original Medicare, you will automatically stay enrolled as a member of our plan for 2019.

F2. How to change plans

You can end your membership at any time during the year by enrolling in another Medicare Advantage Plan, enrolling in another One Care plan, or moving to Original Medicare.

NOTE: Effective January 1, 2019, if you are in a drug management program, you may not be able to join a different plan. See Chapter 5 of your *Member Handbook* for information about drug management programs.

F3. Leaving One Care

As long as you are still eligible for Medicare and MassHealth, you can leave One Care or your One Care plan and keep your Medicare and MassHealth benefits. If you leave One Care, you will usually go back to getting your Medicare and MassHealth services separately.

You will get your MassHealth services directly from doctors and other providers by using your MassHealth card. This is called “fee-for-service.” Your MassHealth services include most long-term services and supports (LTSS) and behavioral health care.

You will have a choice about how to get your Medicare benefits.



If you have questions, please call *Tufts Health Unify* at **1.855.393.3154** (TTY: 711), seven days a week, from 8 a.m. to 8 p.m. The call is free. **For more information**, visit TuftsHealthUnify.org.

<p>1. You can change to:</p> <p>A Medicare health plan (such as a Medicare Advantage Plan or a Program of All-inclusive Care for the Elderly [PACE])</p>	<p>Here is what to do:</p> <p>Call Medicare at 1.800.MEDICARE (1.800.633.4227), 24 hours a day, seven days a week. TTY users should call 1.877.486.2048 to enroll in a Medicare health plan or PACE.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> • Call the SHINE Program (Serving the Health Insurance Needs of Everyone) at 1.800.243.4636. TTY users may call 1.800.439.2370. <p>Your coverage with <i>Tufts Health Unify</i> will end on the last day of the month before your new plan’s coverage begins.</p>
<p>2. You can change to:</p> <p>Original Medicare with a separate Medicare prescription drug plan</p>	<p>Here is what to do:</p> <p>Call Medicare at 1.800.MEDICARE (1.800.633.4227), 24 hours a day, seven days a week. TTY users should call 1.877.486.2048 to enroll in Original Medicare with a separate Medicare prescription drug plan.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> • Call the SHINE Program (Serving the Health Insurance Needs of Everyone) at 1.800.243.4636. TTY users may call 1.800.439.2370. <p>Your coverage with <i>Tufts Health Unify</i> will end on the last day of the month before your Original Medicare coverage begins.</p>

<p>3. You can change to:</p> <p>Original Medicare without a separate Medicare prescription drug plan</p> <p>NOTE: If you switch to Original Medicare and do not enroll in a separate Medicare prescription drug plan, Medicare may enroll you in a drug plan, unless you tell Medicare you don't want to join.</p> <p>You should only drop prescription drug coverage if you get drug coverage from an employer, union, or other source. If you have questions about whether you need drug coverage, call the SHINE Program at 1.800.243.4636. TTY users may call 1.800.439.2370.</p>	<p>Here is what to do:</p> <p>Call Medicare at 1.800.MEDICARE (1.800.633.4227), 24 hours a day, seven days a week. TTY users should call 1.877.486.2048 to enroll in Original Medicare and opt out of a separate Medicare prescription drug plan.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none">• Call the SHINE Program (Serving the Health Insurance Needs of Everyone) at 1.800.243.4636. TTY users may call 1.800.439.2370. <p>Your coverage with <i>Tufts Health Unify</i> will end on the last day of the month before your Original Medicare coverage begins.</p>
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G. How to get help

G1. Getting help from *Tufts Health Unify*

Questions? We're here to help. Please call Member Services at **1.855.393.3154** (TTY only, call 711.) We are available for phone calls, seven days a week, from 8 a.m. to 8 p.m. Calls to these numbers are free.

Your 2019 *Member Handbook*

The 2019 *Member Handbook* is the legal, detailed description of your plan benefits. It has details about next year's benefits. It explains your rights and the rules you need to follow to get covered services and prescription drugs.

The 2019 *Member Handbook* will be available by October 15. An up-to-date copy of the 2019 *Member Handbook* is always available on our website at TuftsHealthUnify.org. You may also call Member Services at **1.855.393.3154** to ask us to mail you a 2019 *Member Handbook*.

Our website

You can also visit our website at TuftsHealthUnify.org. As a reminder, our website has the most up-to-date information about our provider and pharmacy network (*Provider and Pharmacy Directory*) and our Drug List (*List of Covered Drugs*).



If you have questions, please call *Tufts Health Unify* at **1.855.393.3154** (TTY: 711), seven days a week, from 8 a.m. to 8 p.m. The call is free. **For more information**, visit TuftsHealthUnify.org.

G2. Getting help from MassHealth Customer Service

MassHealth Customer Service can answer questions you may have about One Care and your other options for getting your services. MassHealth Customer Service can also help you enroll in a One Care plan, switch plans, or leave One Care. You can call MassHealth Customer Service at 1.800.841.2900. TTY: 1.800.497.4648 (for people who are deaf, hard of hearing, or speech disabled). You can call Monday through Friday, 8 a.m. to 5 p.m.

G3. Getting help from My Ombudsman

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

- Answer your questions or refer you to the right place to find what you need.
- Help you address a problem or concern with One Care or your One Care plan, *Tufts Health Unify*. My Ombudsman's 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 One Care plan, MassHealth, or Medicare to review a decision about your services. My Ombudsman's staff can talk with you about how to make an appeal and what to expect during the appeal process.

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

- Call 1.855.781.9898, Monday through Friday, from 9 a.m. to 4 p.m. People who are deaf, hard of hearing, or speech disabled should use MassRelay at 711 to call 1.855.781.9898.
- Email info@myombudsman.org or contact My Ombudsman through its website at www.myombudsman.org.
- Write to or visit the My Ombudsman office at 11 Dartmouth Street, Suite 301, Malden, MA 02148.
 - Visit My Ombudsman by appointment, or during walk-in hours:
 - Monday, from 1 p.m. to 4 p.m.
 - Thursday, from 9 a.m. to 12 p.m.

G4. Getting help from the State Health Insurance Assistance Program (called SHINE)

You can also call SHINE (Serving the Health Insurance Needs of Everyone). SHINE counselors can help you understand your One Care plan choices and answer questions about switching plans. SHINE is not connected with us or with any insurance company or health plan. SHINE has trained counselors in every state, and services are free. The phone number for SHINE is

1.800.243.4636. TTY (for people who are deaf, hard of hearing, or speech disabled):
1.800.439.2370 (Massachusetts only).

G5. Getting help from Medicare

To get information directly from Medicare, you can call 1.800.MEDICARE (1.800.633.4227), 24 hours a day, 7 days a week. TTY users should call 1.877.486.2048.

Medicare's Website

You can visit the Medicare website (<http://www.medicare.gov>). If you choose to disenroll from your One Care plan and enroll in a Medicare Advantage plan, the Medicare website has information about costs, coverage, and quality ratings to help you compare Medicare Advantage plans.

You can find information about Medicare Advantage plans available in your area by using the Medicare Plan Finder on the Medicare website. (To view the information about plans, go to <http://www.medicare.gov> and click on "Find health & drug plans.")

Medicare & You 2019

You can read the *Medicare & You 2019* handbook. Every year in the fall, this booklet is mailed to people with Medicare. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare.

If you don't have a copy of this booklet, you can get it at the Medicare website (<http://www.medicare.gov>) or by calling 1.800.MEDICARE (1.800.633.4227), 24 hours a day, 7 days a week. TTY users should call 1.877.486.2048.



DISCRIMINATION IS AGAINST THE LAW



Tufts Health Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Tufts Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Tufts Health Plan:

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

If you need these services, contact Tufts Health Plan Member Services at 855.393.3154.

If you believe that Tufts Health Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Tufts Health Plan

Attention: Civil Rights Coordinator, Legal Dept.
705 Mount Auburn St.
Watertown, MA 02472
Phone: 888.880.8699 ext. 48000, [TTY number—711 or 800.439.2370]
Fax: 617.972.9048
Email: OCRCoordinator@tufts-health.com

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Tufts Health Plan Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services

200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
Phone: 800.368.1019, 800.537.7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

TuftsHealthUnify.org | 855.393.3154

For no cost translation in English, call the number on your ID card.

Arabic للحصول على خدمة الترجمة المجانية باللغة العربية، يرجى الاتصال على الرقم المدون على بطاقة الهوية الخاصة بك.

Chinese 若需免費的中文版本，請撥打 ID 卡上的電話號碼。

French Pour demander une traduction gratuite en français, composez le numéro indiqué sur votre carte d'identité.

German Um eine kostenlose deutsche Übersetzung zu erhalten, rufen Sie bitte die Telefonnummer auf Ihrer Ausweiskarte an.

Greek Για δωρεάν μετάφραση στα Ελληνικά, καλέστε τον αριθμό που αναγράφεται στην αναγνωριστική κάρτα σας.

Haitian Creole Pou jwenn tradiksyon gratis nan lang Kreyòl Ayisyen, rele nimewo ki sou kat ID ou.

Italian Per la traduzione in italiano senza costi aggiuntivi, è possibile chiamare il numero indicato sulla tessera identificativa.

Japanese 日本語の無料翻訳については ID カードに書いてある番号に電話してください。

Khmer (Cambodian) សម្រាប់សេវាបកប្រែដោយឥតគិតថ្លៃជា ភាសាខ្មែរ សូមទូរស័ព្ទទៅកាន់លេខដែលមាននៅលើប័ណ្ណសម្គាល់សមាជិករបស់អ្នក។

Korean 한국어로 무료 통역을 원하시면, ID 카드에 있는 번호로 연락하십시오.

Laotian ສຳລັບການແປພາສາເປັນພາສາລາວທີ່ບໍ່ໄດ້ເສຍຄ່າໃຊ້ຈ່າຍ, ໃຫ້ໂທຫາເບີທີ່ຢູ່ເທິງບັດປະຈຳຕົວຂອງທ່ານ.

Navajo Doo bááh ilíní da Diné k'ehjí álnéehgo, hodiilnih béésh bee haní'é bee nées ho'dílzingo nantinígíí bikáá'.

Persian برای ترجمه رایگا فارسی به شماره تلفن مندرج در کارت شناسائی تان زنگ بزنید.

Polish Aby uzyskać bezpłatne tłumaczenie w języku polskim, należy zadzwonić na numer znajdujący się na Pana/i dowodzie tożsamości.

Portuguese Para tradução grátis para português, ligue para o número no seu cartão de identificação.

Russian Для получения услуг бесплатного перевода на русский язык позвоните по номеру, указанному на идентификационной карточке.

Spanish Por servicio de traducción gratuito en español, llame al número de su tarjeta de miembro.

Tagalog Para sa walang bayad na pagsasalin sa Tagalog, tawagan ang numero na nasa inyong ID card.

Vietnamese Để có bản dịch tiếng Việt không phải trả phí, gọi theo số trên thẻ căn cước của bạn.