

# See if the Compass Rose Medicare Advantage (PPO) plan is right for you

Review this side by side plan comparison to help you determine if the Compass Rose Medicare Advantage plan will meet your needs.

Plan comparison	Compass Rose Health Plan with Medicare Parts A and B	Compass Rose Medicare Advantage
<b>Extras</b>		
Dental coverage <sup>1</sup>	Limited	✓
Vision materials (glasses & contacts)		✓
Monthly \$125 Medicare Part B premium reduction		✓
Foreign travel coverage	✓	✓
National network*	✓	✓
UnitedHealthcare® HouseCalls <sup>2</sup>		✓
Personal Emergency Response System <sup>3</sup>		✓
Free gym membership		✓
Aging Well program	✓	✓
\$40 quarterly over-the-counter item credit		✓
Sword Health Virtual Physical Care	✓	
Remain a Compass Rose member in the FEHB program	✓	✓
<b>Medical benefits</b>		
Annual medical deductible	\$0	\$0
Annual medical out-of-pocket maximum	\$0	\$0
Preventive services	\$0	\$0
Physician office visits (primary, specialist and virtual)	\$0	\$0
Hospital visits (inpatient and outpatient)	\$0	\$0
Emergency room or urgent care	\$0	\$0
Ambulance services	\$0	\$0
Physical, speech and occupational therapy	\$0/90 visits combined per year	\$0/unlimited visits per year
Durable medical equipment	\$0	\$0

Prosthetics	\$0	\$0
Diabetic supplies (test strips, lancets, glucose monitors)	\$0	\$0
Massage therapy	\$60 allowance/ 12 visits per year	\$60 allowance/ unlimited visits per year
Routine podiatry	N/A	\$0/6 visits per year
Hearing aid allowance is combined for both ears <sup>4</sup>	\$2,400 allowance every 3 years	\$2,400 allowance every 3 years
<b>Pharmacy – Retail</b>		
Tier 1 – Generic	\$5	\$1
Tier 2 – Preferred brand	\$50	\$25
Tier 3 – Non-preferred brand	\$75 or 40% (whichever is greater)	\$75
Tier 4 – Specialty	N/A	25% up to max of \$100
<b>Pharmacy – Mail Order</b>		
Tier 1 – Generic	\$10	\$2
Tier 2 – Preferred brand	\$100	\$50
Tier 3 – Non-preferred brand	\$150 or 40% (whichever is greater)	\$150
Tier 4 – Specialty tier	Up to a max of \$500	Up to max of \$100

You must continue to pay the High Option Compass Rose Health Plan premium if you elect to enroll in the Medicare Advantage plan. There is no additional premium for the Medicare Advantage plan.

If you currently have a part B income-related monthly adjustment amount (IRMAA), you may incur an additional part D IRMAA when enrolling in the Compass Rose Medicare Advantage plan. Please see next page for more information.

\*You have access to our national coverage. Unlike most PPO plans, with this plan, you pay the same share of cost in and out of network as long as providers are eligible to participate in the Medicare Program and accept the plan. Out-of-network/non-contracted providers are under no obligation to treat Plan members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

<sup>1</sup>Limited dental coverage under Compass Rose Health Plan with Medicare Parts A and B. Check the FEHB Plan brochure for additional details.

<sup>2</sup>HouseCalls may not be available in all areas.

<sup>3</sup>You must have a working landline and/or cellular phone coverage to use PERS.

<sup>4</sup>You must contact UHC Hearing and use a UHC Hearing provider for hearing aid coverage.

This information is not a complete description of benefits. Contact the plan for more information.

Benefits, features and/or devices vary by plan/area. Limitations and exclusions apply.

Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract. Enrollment in the plan depends on the plan's contract renewal with Medicare.