

2021 Benefit Highlights

CareOregon Advantage Plus (HMO-POS SNP) is for people who are dual eligible for both Medicare and Medicaid. You'll get Medicare benefits, plus other special benefits just for CareOregon Advantage Plus members. And you can see providers either in our network or out of network (under certain conditions).

Available in Clackamas, Columbia, Jackson, Multnomah, Tillamook and Washington counties

Benefits	You pay
Monthly premium¹	\$0
Annual deductible	\$0
Doctor office visits²	
Annual wellness visit and/or routine physical	\$0
Primary care or specialist (in-network or out-of-network)	\$0
Prescription drugs (30-day supply)	
Generic drugs or brand drugs treated as generic	\$0, \$1.30 or \$3.70
Brand drugs	\$0, \$4.00 or \$9.20
Diabetic supplies	\$0
Lab tests and X-rays	\$0
Outpatient surgery and services	\$0
Inpatient hospitalization	\$0
Urgent care (nationwide coverage)	\$0
Emergency room (nationwide coverage)	\$0
Ambulance (nationwide coverage)	\$0
Additional Benefits for CareOregon Advantage Plus Members	
Routine foot care (unlimited podiatry services)	\$0
Routine eye exam (every 12 months)	\$0
Eyeglasses or contact lens allowance (every 12 months)	
Basic or standard progressive lenses	\$0
Frames	You get \$175
Contact lenses (instead of eyeglasses)	You get \$100
Silver&Fit[®] gym membership and home fitness kits	\$0
OTC <i>plus</i> Card	You get \$190 per calendar quarter in Q1 and Q2 of 2021. You get \$600 per calendar quarter in Q3 and Q4 of 2021.
Meal delivery after inpatient stay (2 meals per day for 2 weeks)	\$0
24-hour nurse advice line (866-209-0905)	\$0

CareOregon Advantage Plus is an HMO-POS SNP with a Medicare/Medicaid contract. Enrollment in CareOregon Advantage Plus depends on contract renewal.

Benefits for people with Medicare and Medicaid (Oregon Health Plan)

The benefits listed below are covered by your Medicaid coverage, not CareOregon Advantage Plus. If you have questions about your Medicaid coverage and benefits, please call your Medicaid plan. You can also call your local Aging and People with Disabilities office. Your Medicaid plan member handbook will also have information about your Medicaid benefits, cost sharing and more.

Additional dental care	
Exams and X-rays (includes oral cancer screening)	Covered
Cleanings and fluoride	Covered
Fillings	Covered
Extractions	Covered
Full dentures every 10 years and partials every 5 years if recommended by your dentist, no matter how long you've been without teeth (Authorization required)	Covered
Denture adjustments, replacing missing or broken false teeth	Covered
Deep cleaning for gum disease	Covered
Emergency dental services	Covered
Hearing benefits	
Exam (every 12 months)	Covered
Hearing aids (authorization required, up to 2 aids every 5 years)	Covered
Hearing aid batteries (60 per calendar year)	Covered
Incontinence supplies (adult diapers, disposable briefs/pads, bed pads, gloves)	Covered
Acupuncture and chiropractic care (authorization required)	Covered
Naturopathic care	Covered
Transportation (unlimited rides to health care appointments)	Covered
Interpreter services for office visits	Covered

To learn more about CareOregon Advantage, call us toll-free at 888-712-3258, TTY 711.

Our hours of operation are October 1 through March 31: 8 a.m. to 8 p.m. daily.

April 1 through September 30: 8 a.m. to 8 p.m., Monday through Friday.

Visit our website at careoregonadvantage.org/plans

¹ The \$36 premium is covered through Low-Income Subsidy. Copayments for members of CareOregon Advantage Plus (HMO-POS SNP) and its Oregon Medicaid subsidiaries are covered through the Oregon Health Plan (Medicaid).

² The Point-of-Service benefit can be used only with PCP and Specialist office visits. A \$1,000 annual maximum benefit applies to out-of-network provider visits. Out-of-network/non-contracted providers are under no obligation to treat CareOregon Advantage Plus HMO-POS SNP 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.

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