



FALL / 2025

2026 Medicare Advantage Member Handbook

MyAdvocate Medicare Advantage GOLD (HMO-POS)

MyAdvocate Medicare Advantage SILVER (HMO-POS)



MyAdvocateMA.com


MEDICARE ADVANTAGE

Welcome to

my Advocate

MEDICARE ADVANTAGE

Use this handbook to get started making the most of your benefits. Inside, you'll find steps for how to access your benefits, file a claim and more.

If you can't find what you are looking for in this handbook, please visit MyAdvocateMA.com or contact our customer service team at **(888) 298-4650 (TTY: 711)**.

You can also access all your plan information on your online Member portal. Portal access and benefits begin with the start of your plan coverage on or after Jan. 1, 2026 at member.MyAdvocateMA.com

Thank you for trusting us on your health journey.



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We're here to help

Customer Service

Our customer service team is only a phone call away when you have questions or need assistance.



Call **(888) 298-4650 (TTY: 711)**



Email **memberservices@MyAdvocateMA.com**



Standard hours are Monday through Friday from 8 a.m. to 8 p.m. local time.
From October through March, our hours are extended to seven days a week from 8 a.m. to 8 p.m. local time

Health Navigators

Our health navigators act as your personal health assistants. Health navigators can help answer questions and connect you to the right resources for your health needs. They can also help you find a doctor, schedule appointments, and even provide trusted partners to accompany you to appointments. This service is confidential and provided at no additional cost. Call **(877) 701-0788 (TTY: 711)**

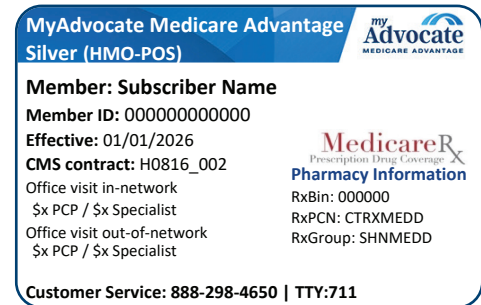
Other departments	Questions about:	Phone number
Pharmacy	Prior authorization of prescription drug coverage and covered medications (formulary)	(844) 504-5955 (TTY: 711)
Utilization management	Prior authorization of medical services and utilization review	(888) 298-4650 (TTY: 711)
Care management	Care management, health management and social work programs	(888) 298-4650 (TTY: 711)
Vision impaired services	Large print materials or recorded versions of our documents	(888) 298-4650 (TTY: 711)
Language assistance	Language assistance for those who speak a language other than English	(888) 298-4650 (TTY: 711)

To report potential fraud, waste and abuse, send an email to **compliance@MyAdvocateMA.com** or call our anonymous hotline at **(877) 473-0911 (TTY: 711)**.

Steps to get started with your plan

- 1 **Use your ID card:** Bring your ID card to doctor's appointments and the pharmacy when you fill prescriptions. Your ID card is also available on your Member portal. If your ID card is damaged, lost or stolen, contact our customer service team or log into your Member portal to order a new card.

Acceptance of your ID card does not ensure medical or pharmacy services will be covered under your benefits.



- 2 **Register for your Member portal:** Your portal gives you easy access to your plan information online whenever you need it. It is secure and personalized to your plan. Visit member.MyAdvocateMA.com to register for your portal.
- 3 **Read your plan documents:** Use your portal to read your plan documents, like your Evidence of Coverage (EOC), and review claims, balances, prior authorizations and more.
- 4 **Choose a primary care provider:** Visit MyAdvocateMA.com to search for doctors near you using our provider directory. Then, schedule your annual wellness visit.

Tip: Add your primary care provider to your Member portal to personalize your health care experience.

- 5 **Fill your prescriptions:** Save on medication costs by using a preferred pharmacy for your prescriptions. To learn more about your pharmacy coverage, call (844) 504-5955 (TTY: 711).

Important Documents



These important documents contain details about your benefits and coverage. You can easily access them at any time on your secure Member portal.

Evidence of Coverage (EOC): This is your main guide for reviewing all your benefits and provisions. It provides a complete overview and description of all benefits, exclusions, prescriptions, appeals, denials, claims, enrollment, notices, policies and more.

Summary of Benefits (SOB): Deductible and copay information, out-of-pocket limits, information about covered services, provider network, referral information, pharmacy information and costs.

Covered medication list (formulary): A list of regular and specialty medications that are covered, not covered, or require prior authorization or step therapy.

Provider Network: Visit MyAdvocateMA.com or log in to your Member portal account to access the most up-to-date Provider and Pharmacy Network Directory.

Member Portal

Visit member.MyAdvocateMA.com to sign in or register for 24/7 access to all your benefit information including:



- Summary of Benefits (SOB)
- Evidence of Coverage (EOC)
- Pharmacy benefit information
- Claims and Explanation of Benefits (EOB)
- Supplemental benefits
- Provider and pharmacy directory
- Referral information
- Health insurance forms
- Federal and state guidelines and notices

When you use your Member portal, choose the “Go paperless” option to get email notifications instead of paper mail for your EOBs and other important documents.

Medicare Advantage Health Assessment

As a Member, we want to make sure we connect you to the right resources to help meet your health care needs. The assessment will ask for your input on your health, including any current or past health conditions, areas you may need help and more. To complete the assessment over the phone, please call **(877) 701-0788 (TTY: 711)** and our health navigators will assist you. This information will provide a better snapshot of your needs as a Member and your answers will be kept confidential.

Care Options



You have multiple choices regarding when and where you receive care. Choosing the appropriate care setting helps you to maximize your health insurance benefits and save on out-of-pocket costs

Routine office visit

Your primary care provider (PCP) is best for routine, preventive or visits that could wait 24 to 48 hours or longer. If same-day care is needed, your PCP may be able to see you or the clinic may be able to help you find another available provider. If seeing a new provider, remember to confirm they are in-network. Be sure to make time to schedule your annual wellness exam with your primary care provider. If you don't have a PCP, no problem. We can help you find one and even assist in getting your first appointment scheduled.

On-demand health services

Urgent (acute) care: An urgent care situation is not a serious health threat, but requires medical attention within 24 hours, and may include stitches, pain, urinary tract or respiratory infections, fever, or flu. During the day, contact your primary care provider first. Visit participating urgent care clinics or consider Video Visits after normal business hours or holidays.

Emergency care: Emergency medical conditions require immediate care to avoid serious harm. Emergent conditions may include severe pain, suspected heart attack or stroke, difficulty breathing, bleeding that won't stop, severe burns, seizures, poisoning or trauma. For emergency care, call 911 or visit the nearest emergency department.

If you go to an out-of-network facility in an emergency situation:

- MyAdvocate Medicare Advantage must be notified within 48 hours or as soon as reasonably possible following the emergency.
- Prior authorization is not necessary in a true emergency situation (even out-of-network).
- If you are hospitalized (admitted overnight as an inpatient) at an out-of-network facility, arrangements may be made to transfer you to an in-network facility when it is medically safe to do so. This helps maximize your insurance benefits, as your out-of-pocket costs will be much lower with an in-network provider.

Care Options



On-demand health services (continued)

Specialty care

If you need to see a specialist, you don't need a referral if the provider is in-network. If you want to go out-of-network, please contact the plan for approval **before** you receive care.

Behavioral health care services

If you feel you need Behavioral Health Care Services, please call our Care Management Department.

Hospital services

If you require elective or emergent inpatient (hospital) services, please notify us as soon as possible.

Emergency transportation

Ground transportation or air ambulance will be covered per your plan if deemed medically necessary and you are taken to the nearest in-network participating provider who is able to provide the necessary health care services.

Care when traveling

Care outside of the service area will be covered per your plan in urgent or emergent situations. If you need urgent or emergent care while traveling, please contact MyAdvocate Medicare Advantage within 48 hours of seeking care.

Case Management Services

Our case managers are available to help support you in managing your health condition(s). Assistance is available for health conditions including kidney disease, cancer, transplants and chronic conditions.



Navigating your network



Find a doctor in a few easy steps using our provider directory:

- 1 Visit MyAdvocateMA.com and click “Doctors and Pharmacies”
- 2 Select “Find a Doctor”
- 3 Enter an address, city and state, zip code or county

Pharmacy and medication benefits



All MyAdvocate Medicare Advantage plans include prescription drug coverage (Part D). Your plan has a list (formulary) of FDA-approved brand name and generic medications that are covered under your benefit plan. Some medications are noted with letters next to them to help you see which ones may have coverage requirements or limits. Your benefit plan determines how these medications may be covered for you.

ST **Step Therapy**

Trial of lower-cost medication(s) is required before a higher-cost medication can be covered.

PA **Prior Authorization**

Your doctor is required to provide additional information to determine coverage.

QL **Quantity Limit**

Medication may be limited to a certain quantity.

A complete list of in-network pharmacies and all other pharmacy-related benefit information can be found in the directory or by contacting customer service. You can also have your prescription drugs mailed by using the Optum Rx member portal.

Medicare Prescription Payment Plan

The Medicare Prescription Payment Plan, also called M3P and MPPP, is a new payment option to help you manage your out-of-pocket drug costs. This new payment option works with your current drug coverage, and it can help you manage your drug costs by spreading them across monthly payments that vary throughout the year.

Visit MyAdvocateMA.com/pharmacy-and-drug-coverage to review your eligibility. Have questions? Call (844) 504-5955 (TTY: 711).

Referrals, prior authorization and other insurance coverage FAQs



Do I need a referral to see a specialist?

MyAdvocate Medicare Advantage does not require a referral to see an in-network specialty care provider. Some specialty care services may be excluded from your coverage, even if your doctor recommends them, such as acupuncture and cosmetic procedures. See your Evidence of Coverage (EOC) for additional details on non-covered services.

Do I need a prior authorization?

For some services, as noted in your Evidence of Coverage (EOC), you may be required to get prior authorization, especially when using out-of-network providers. It is best to always contact Customer Service before any planned procedures to see if a prior authorization is needed. Please contact us at least three days before the requested service to ensure timely processing of your request.

What if I am injured at work or in a motor vehicle accident?

If you need medical care and another person or company is responsible, please contact us. If you receive a call or form in the mail, please respond within 10 days or your claims may be denied. You can reach us by calling **(888) 298-4650 (TTY: 711)**. Additionally, you can visit **MyAdvocateMA.com** to complete the accidental injury/third-party liability questionnaire.

What if I have other health insurance?

If you are covered by another insurance policy or are eligible for Medicaid or TRICARE, you will work with the other insurance company to coordinate benefits to ensure claims are processed in a timely manner. Please complete any forms you receive or contact us, if requested, to ensure your claims are not denied.



MyAdvocate Medicare Advantage helps streamline your care by putting your doctor in the driver's seat to determine the best treatment plan for your needs. Restrictions may apply. For a complete list of services requiring prior authorization, call **(888) 298-4650 (TTY: 711)** to speak with our customer service team.



Stay on track with your health goals

Healthy Benefits+ flex card

The MyAdvocate Medicare Advantage Benefits+ flex card gives you the flexibility to choose how to spend your allowance dollars, helping your benefits go further. The flex card works like a debit card and includes a quarterly allowance for over-the-counter (OTC) products at in-network retailers. For questions, visit healthybenefitsplus.com/MyAdvocate or call (833) 818-8918 (TTY: 711). See your Evidence of Coverage (EOC) for details on qualifying purchases.

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Funds expire. See cardholder agreement.

**Healthy
Benefits+**
Benefit Award Card





Dental coverage

Because our dental benefits focus on prevention, services like cleanings, exams and x-rays are covered at 100%. To find a dentist, visit www.DeltaDentalNE.org/MyAdvocate-dentists if you live in Nebraska. If you have questions about your dental coverage, call **(866) 406-2172 (TTY: 711)**.



Hearing benefits

Our hearing benefits are provided through TruHearing. If you could benefit from hearing aids, providers in our network can help you select hearing aids that best fit your lifestyle. Review your Evidence of Coverage (EOC) to determine your benefit details. Call **(833) 723-6610 (TTY: 711)** or visit TruHearing.com/check to schedule your annual hearing test or for help with your hearing benefits.



Vision benefits

Our vision benefits are provided through VSP Vision Care. With this coverage, you can get an annual routine exam and up to your plan's allowance for eyewear through a VSP Advantage network provider. Please refer to your Evidence of Coverage (EOC) for your benefit details. To use your VSP benefits, or to find an in-network doctor near you, please visit vsp.com/advantageonly or call **(844) 344-4768 (TTY: 711)**.



Optum OnePass

As a Member, you can enjoy multiple tools and features with this healthy aging and exercise program at no cost to you. By answering a few online questions about your fitness level and goals, you can receive a personal exercise plan that includes suggested workout videos and more. Create your account by visiting www.YourOnePass.com to get started, or call **(877) 504-6830 (TTY: 711)** for additional support.



Travel

Your plan also includes a \$250 reimbursement for emergency/urgent services outside of the United States. If you have questions, please connect with our customer service team by calling **(888) 298-4650 (TTY: 711)**.

Claims and Payment Services



- 1) **Claim:** After you receive medical care, most providers will file a claim for you. However, you may need to file a claim if your provider did not file one for you. Claim forms can be found in the Member Portal or by contacting customer service.
- 2) **Explanation of Benefits (EOB):** After your claim is received and processed according to your benefits, Sanford Health Plan will send payment to the provider and an EOB to you. The EOB explains how your insurance benefits were applied. You will receive your EOB in the mail unless you've signed up to receive electronic EOBs. Then you will receive email notification stating that a new EOB is available to view in the Member Portal. The EOB is NOT a bill or invoice.
- 3) **Appeals:** You have a right to appeal any decision made by Sanford Health Plan, which may include a review by an independent review organization, to not pay for an item or service. To file an appeal, complete an Appeal Form in the Member Portal, or contact customer service to file an appeal over the phone or to have a form mailed to you.
- 4) **Complaints:** To file a complaint, contact Sanford Health Plan by phone or by mail at **MyAdvocate Medicare Advantage, P.O. Box 8000, Marshfield, WI 54449-8000.**

Notice of Nondiscrimination

Discrimination is against the law. MyAdvocate Medicare Advantage complies with applicable federal civil rights laws and does not discriminate, exclude or treat people differently on the basis of race, color, national origin, religion, pregnancy and related conditions, sex (including sexual orientation, gender identity, sex stereotypes, sex characteristics and intersex traits), age, disability, health status, marital status, arrest or conviction record or military participation in the administration of the plan, including enrollment and benefit determinations.

MyAdvocate Medicare Advantage:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - 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, please contact Member Services at 1-888-298-4650 (TTY 711)

If you believe that MyAdvocate Medicare Advantage has failed to provide these services or discriminated in another way on the basis of race, color, national origin, religion, pregnancy and related conditions, sex (including sexual orientation, gender identity, sex stereotypes, sex characteristics and intersex traits), age, disability, health status, marital status, arrest or conviction record or military participation, you can file a grievance with the Section 504 Coordinator at:

Mailing Address: Section 504 Coordinator, 2301 E. 60th Street, Sioux Falls, SD 57103

Telephone Number: (877) 473-0911 (TTY 711)

Fax: (605) 312-9886

Email: compliance@MyAdvocateMA.com

You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, the Section 504 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, DC 20201

Phone: 1-800-368-1019 (TDD 800-537-7697)

More information is available at <http://www.hhs.gov/ocr/index.html>.

Notice of Availability

English: Free interpretation services are available to you. Additional services and resources necessary to provide information on accessible formats are also available at no cost. Call 1-888-298-4650 (TTY: 711) or speak with your healthcare provider.

Spanish: ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al 1-888-298-4650 (TTY: 711) o hable con su proveedor.

Vietnamese: LƯU Ý: Nếu bạn nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các hỗ trợ dịch vụ phù hợp để cung cấp thông tin theo các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi theo số 1-888-298-4650 (Người khuyết tật: 711) hoặc trao đổi với người cung cấp dịch vụ của bạn.

Karen: ဆို- နမ့်ကတိၤ တၢ်န့ၣ်လီၤဖဲအံၤ အဃိ, တၢ်အိၣ်ဒီး ကျိၣ်တၢ်ဆိၣ်ထွဲမၤစၢၤ လၢတလၢ် ဘျီၣ်လၢ်စ့ၤလၢနီၣ်လီၤ. တၢ်အိၣ်ဒီး တၢ်မၤစၢၤတၢ်န့ၣ်ဟ့ၣ်ပီးလီၤဒီး တၢ်မၤစၢၤတၢ်မၤ လၢအ ကြးအဘျီ လၢကဟ့ၣ်တၢ်ဂ့ၢ်တၢ်ကျိၤ လၢတၢ်မၤန့ၣ်အီၤသ့တဖၣ် လၢတလၢ်ဘျီၣ်လၢ်စ့ၤ လၢနီၣ်လီၤ. ကိး 1-888-298-4650 (TTY: 711) မ့တမ့ၢ် ကတိၤတၢ်ဒီး နပုၤလၢဟ့ၣ် နတၢ်ကွၢ်ထွဲမၤစၢၤတက့ၢ်.

Arabic:

نبيه: إذا كنت تتحدث اللغة العربية، فستتوفر لك خدمات المساعدة اللغوية المجانية. كما تتوفر وسائل مساعدة وخدمات مناسبة لتوفير المعلومات بتنسيقات يمكن الوصول إليها مجانًا. اتصل على الرقم 1-888-298-4650 (711) أو تحدث إلى مقدم الخدمة.

French: ATTENTION: Si vous parlez Français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et services auxiliaires appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le 1-888-298-4650 (TTY: 711) ou parlez à votre fournisseur.

Simplified Chinese: 注意：如果您说[中文]，我们将免费为您提供语言协助服务。我们还免费提供适当的辅助工具和服务，以无障碍格式提供信息。致电 1-888-298-4650 (文本电话：711) 或咨询您的服务提供商。

Oromo: HUBADHAA: Yoo afaan Oromoo dubbattu ta'e, tajaajilli gargaarsa afaanii bilisaa siniif ni argama. Gargaarsi gargaaraa fi tajaajilli sirrii ta'ee fi odeeffannoo bifa dhaqqabamaa ta'een kennuunis bilisaan ni argama. Bilbilaa 1-888-298-4650 (TTY: 711) yookiin dhiyeessaa kee waliin haasa'aa.

German: ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistentendienste zur Verfügung. Entsprechende Hilfsmittel und Dienste zur Bereitstellung von Informationen in barrierefreien Formaten stehen ebenfalls kostenlos zur Verfügung. Rufen Sie 1-888-298-4650 (TTY: 711) an oder sprechen Sie mit Ihrem Provider.

Nepali: सावधान: यदि तपाईं नेपाली भाषा बोल्नुहुन्छ भने तपाईंका लागि निःशुल्क भाषिक सहायता सेवाहरू उपलब्ध छन्। पहुँचयोग्य ढाँचाहरूमा जानकारी प्रदान गर्न उपयुक्त सहायता र सेवाहरू पनि निःशुल्क उपलब्ध छन्। 1-888-298-4650 (TTY: 711) मा फोन गर्नुहोस् वा आफ्नो प्रदायकसँग कुरा गर्नुहोस्।

Swahili: MAKINIKA: Ikiwa wewe huzungumza Kiswahili, msaada na huduma za lugha bila malipo unapatikana kwako. Vifaa vya usaidizi vinavyofaa na huduma bila malipo ili kutoa taarifa katika mifumo inayofikiwa pia inapatikana bila malipo. Piga simu 1-888-298-4650 (TTY: 711) au zungumza na mtoa huduma wako.

Tagalog: PAALALA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng serbisyonang tulong sa wika. Magagamit din nang libre ang mga naaangkop na auxiliary na tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa 1-888-298-4650 (TTY: 711) o makipag-usap sa iyong provider.

Russian: ВНИМАНИЕ: Если вы говорите на русский, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Позвоните по телефону 1-888-298-4650 (TTY: 711) или обратитесь к своему поставщику услуг.

Telegu: తెలుగు సావధానం: మీరు తెలుగు మాట్లాడితే, మీకు ఉచిత భాషా సహాయ సేవలు అందుబాటులో ఉంటాయి. యాక్సెస్ చేయగల ఫార్మాట్‌లలో సమాచారాన్ని అందించడానికి తగిన సహాయక సహాయాలు మరియు సేవలు కూడా ఉచితంగా అందుబాటులో ఉంటాయి. 1-888-298-4650 (TTY: 711) కి కాల్ చేయండి లేదా మీ ప్రొవైడర్‌తో మాట్లాడండి.

Farsi:

توجه: اگر [وارد کردن زبان] صحبت می کنید، خدمات پشتیبانی زبانی رایگان در دسترس شما قرار دارد. همچنین کمک ها و خدمات پشتیبانی مناسب برای ارائه اطلاعات در قالب های قابل دسترس، به طور رایگان موجود می باشند. با شماره 1-888-298-4650 (711) تماس بگیرید یا با ارائه دهنده خود صحبت کنید.

Ukrainian: УВАГА: Якщо ви розмовляєте українська мова, вам доступні безкоштовні мовні послуги. Відповідні допоміжні засоби та послуги для надання інформації у доступних форматах також доступні безкоштовно. Зателефонуйте за номером 1-888-298-4650 (TTY: 711) або зверніться до свого постачальника.

Large print – If you require materials in large print, please call 1-888-298-4650 (TTY 711).

Contact us

MyAdvocate Medicare Advantage
P.O. Box 8000
Marshfield, WI 54449-8000

(888) 298-4650 (TTY: 711)
MyAdvocateMA.com

