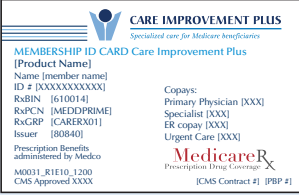



Care Improvement Plus Chronic Condition Special Needs Plan (RPPO)

Member ID Card	Patient Eligibility Requirements	Highlights of Benefit Design			
	<ul style="list-style-type: none"> Entitled to Medicare Part A and enrolled in Part B (Members must continue to pay their Medicare Part B Premium if not otherwise paid for under Medicaid or another third party) Reside in Texas Diagnosed with diabetes and/or heart failure 		Silver Rx Plan	Gold Rx Plan	Gold Rx Advantage Plan
		Monthly Premium	\$27.50*	\$0.00	\$12.00**
		Retail Pharmacy (30 day supply – generic)	\$9.00*	\$4.00	\$4.00
		Inpatient Hospital 90 days per benefit period 60 lifetime reserve days	\$1,100* deductible \$0* Days 1-60 \$275* Days 61-90	\$225 Days 1-10 \$0 Days 11-90	\$220 Days 1-10 \$0 Days 11-90
		Outpatient Care PCP Specialist	20%* 20%*	\$15.00 \$35.00	\$10.00 \$25.00


*The Silver Rx Plan has \$0 premium and \$0 cost sharing for medical expenses for Medicare beneficiaries with full Medicaid.

**With the Gold Rx Advantage Plan your cost may be as low as \$0 a month depending on your level of low income subsidy (LIS).

Care Improvement Plus Dual Advantage Special Needs Plan (RPPO)

Member ID Card	Patient Eligibility Requirements	Highlights of Benefit Design	
	<ul style="list-style-type: none"> Entitled to Medicare Part A and enrolled in Part B (Members must continue to pay their Medicare Part B Premium if not otherwise paid for under Medicaid or another third party) Reside in Texas Enrolled in state Medicaid (QMB, QMB Plus or SLMB+, or other dual eligibles held harmless for Parts A and B cost-sharing) 		Dual Advantage Plan
		Monthly Premium	\$0
		Retail Pharmacy (30 day supply – generic)	\$0
		Inpatient Hospital 90 days per benefit period 60 lifetime reserve days	\$0 deductible \$0 Days 1-60 \$0 Days 61-90
		Outpatient Care PCP Specialist	\$0 \$0

Care Improvement Plus Medicare Advantage Plan (RPPO) and (PPO)

Member ID Card	Patient Eligibility Requirements	Highlights of Benefit Design		
	<ul style="list-style-type: none"> Entitled to Medicare Part A and enrolled in Part B (Members must continue to pay their Medicare Part B Premium if not otherwise paid for under Medicaid or another third party) Reside in Texas 		Medicare Advantage (RPPO) Plan	Medicare Advantage (PPO) Plan
		Monthly Premium	\$33.00	\$0.00
		Retail Pharmacy (30 day supply – generic)	\$9.00	\$9.00
		Inpatient Hospital 90 days per benefit period 60 lifetime reserve days	\$295 Days 1-10 \$0 Days 11-90	\$290 Days 1-10 \$0 Days 11-90
		Outpatient Care PCP Specialist	\$25.00 \$40.00	\$25.00 \$40.00



HELPFUL TIPS FOR ALL CARE IMPROVEMENT PLUS PLANS

Care Improvement Plus is owned by XLHealth, an industry leader in improving the quality of care for chronically ill and underserved Medicare beneficiaries.

Provider Portal:

Need claims and eligibility information? Visit our Provider Portal. You can access critical information whenever you need it!

Just visit www.careimprovementplus.com

Click “Learn More” under “For Providers”, this will route you to the provider portal.

Open Network of Physicians:

Members can go to any provider who participates with Medicare and is willing to bill Care Improvement Plus for services.^{††} Referrals are not required. Providers may refer to any provider who participates with Medicare and is willing to bill Care Improvement Plus.

Preauthorization (or Authorization)

Required for the Following:

Call 1-888-625-2204 for Medical/Surgical Services

Call 1-888-751-1235 for Behavioral Health Services

- Hospital Admissions (Emergency, Direct and Elective admissions including Transplant and Bariatric Procedures whether inpt or outpt)
- Long Term Acute Care Facility
- Skilled Nursing Facility
- Inpatient Rehabilitation Facility
- Select Durable Medical Equipment - Power Wheelchair/POV Scooter (MAE), Lower Limb Prosthetics, Negative Pressure Wound Therapy (Wound Vac, etc), Bone Growth Stimulators (Ultrasonic Osteogenesis Stimulator), Spinal Cord Stimulators (Dorsal Column Stimulators), Low air loss & air fluidized beds such as Clinitron and Flexicair beds when used in the home setting), Lymphedema Pumps (Pneumatic Compression Devices)
- To obtain preauthorization for certain Part B office administered medications Call **1-866-904-6561**

^{††}Cost sharing may be higher for out-of-network DME and home health providers.

Claims:

Care Improvement Plus accepts EDI Claims. Please use Emdeon to submit claims electronically using Payor ID # 77082 for submission.

Begin EDI Submission Today!

If you do not yet submit any claims electronically, and would like more information about Emdeon Business Services EDI solutions, please call **1-800-845-6592**.

Completed paper claims can be mailed to:

Care Improvement Plus
Attn: Claims Department
P.O. Box 488
Linthicum, MD 21090-0488



We are now partnering with Optum Health to provide claims processing for our Mental Health/Substance abuse claims.

Behavioral Health Claims:

OptumHealth
P.O. Box 30757
Salt Lake City, UT 84130-0757
Payor ID# 87726
1-888-751-1235

Claims Processing:

Log onto www.careimprovementplus.com and in the Provider Portal click on the “Eligibility and Claims Status” section for important information.

How do I Appeal a Claim?

Mail a letter that contains a narrative description of why you are appealing along with the claim(s) and clinical documentation to:

Care Improvement Plus
Attn: Appeals Department
351 W. Camden Street, Suite 100
Baltimore, MD 21201

The toll-free number to call for additional Part C appeal information is: **1-800-213-0672**

Part D Appeals: **1-866-683-3275**

Other Important Information:

- MTM Transportation Services: **1-888-240-6435**
- Vision/Dental Services provided by Avesis: **1-800-828-9341** or www.avesis.com

For additional information about joining our network, billing questions, member eligibility inquiries, or any other issues that require assistance, call Provider Relations at:

1-866-679-3119 or email us at providerrelations@careimprovementplus.com