

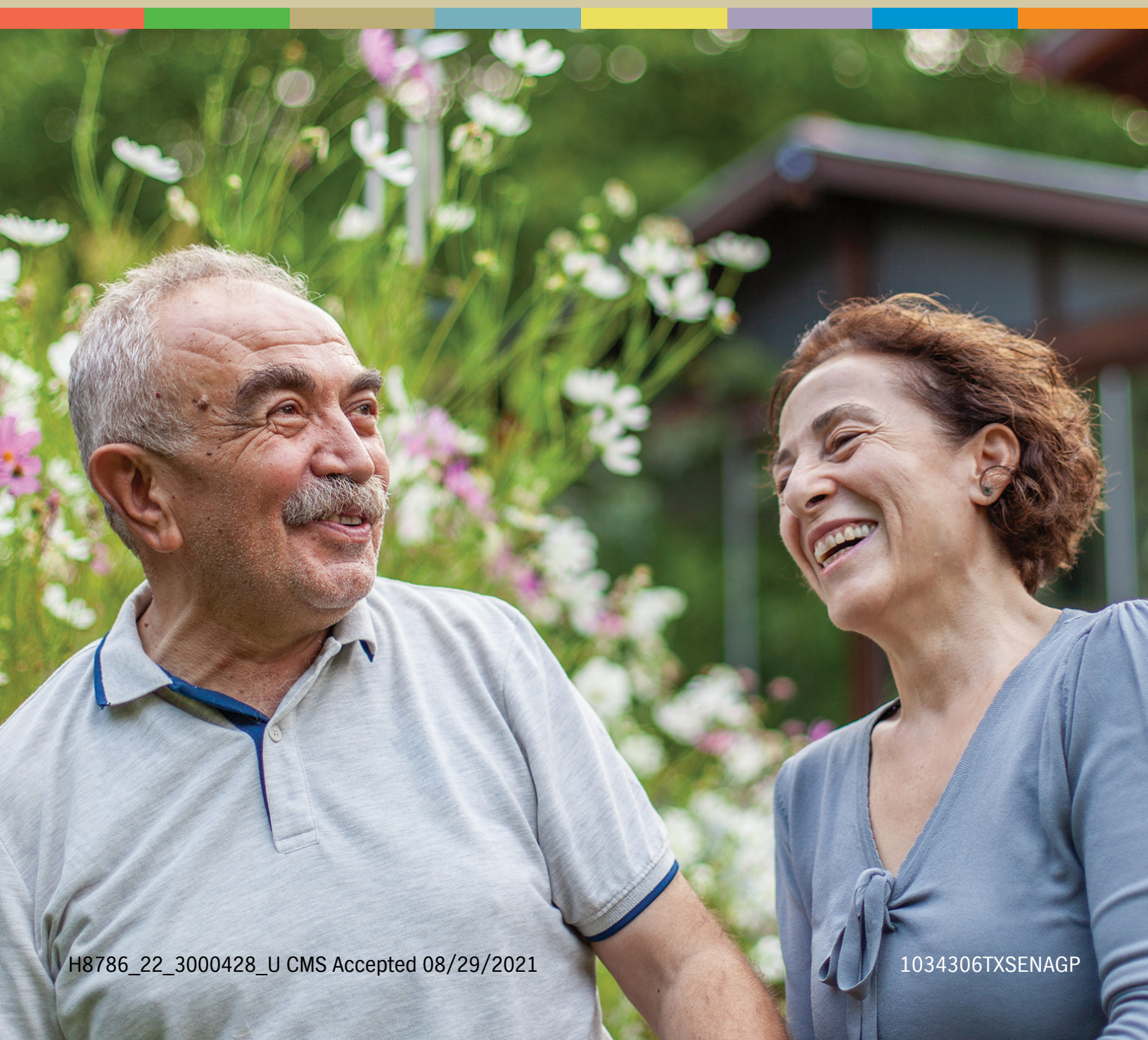


Annual Notice of Changes for 2022

Member Services: **1-855-878-1784** (TTY: **711**)

Monday through Friday from 8 a.m. to 8 p.m. local time

www.myamerigroup.com/TXmmp



Amerigroup STAR+PLUS MMP (Medicare-Medicaid Plan) offered by Amerigroup Texas, Inc. (Amerigroup)

Annual Notice of Changes for 2022

Introduction

You are currently enrolled as a member of Amerigroup STAR+PLUS MMP. Next year, there will be some changes to the plan's benefits, coverage, rules, and costs. 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 Amerigroup STAR+PLUS MMP at **1-855-878-1784** (TTY: **711**), Monday through Friday from 8 a.m. to 8 p.m. local time. The call is free. **For more information**, visit www.myamerigroup.com/TXmmp.

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A. Disclaimers

- ❖ Amerigroup STAR+PLUS MMP (Medicare-Medicaid Plan) is a health plan that contracts with both Medicare and Texas Medicaid to provide benefits of both programs to enrollees.
- ❖ This is not a complete list. The benefit information is a brief summary, not a complete description of benefits. For more information contact the plan or read the Amerigroup STAR+PLUS MMP Member Handbook.
- ❖ Using opioid medications to treat pain for more than seven days has serious risks like - addiction, overdose, or even death. If your pain continues, talk to your doctor about alternative treatments with less risk. Some choices to ask your doctor about are: Non opioid medications, acupuncture, or physical therapy to see if they are right for you. Find out how your plan covers these options by calling Member Services at **1-855-878-1784** (TTY: **711**).

B. Reviewing your Medicare and Texas Medicaid 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. Refer to section F2 for more information.

If you leave our plan, you will still be in the Medicare and Texas Medicaid programs as long as you are eligible.

- You will have a choice about how to get your Medicare benefits (go to page 11).
- If you do not want to enroll in a different Medicare-Medicaid plan after you leave Amerigroup STAR+PLUS MMP, you will go back to getting your Medicare and Texas Medicaid services separately.



If you have questions, please call Amerigroup STAR+PLUS MMP at **1-855-878-1784** (TTY: **711**), Monday through Friday from 8 a.m. to 8 p.m. local time. The call is free. **For more information**, visit www.myamerigroup.com/TXmmp.

B1. Additional resources

- **ATTENTION:** If you speak English, language assistance services, free of charge, are available to you. Call **1-855-878-1784** (TTY: **711**), Monday through Friday from 8 a.m. to 8 p.m. local time. The call is free.
- **ATENCIÓN:** Si habla español, le ofrecemos servicios de asistencia de idiomas sin cargo. Llame al **1-855-878-1784** (TTY: **711**), de lunes a viernes, de 8 a.m. a 8 p.m., hora local. La llamada no tiene costo.
- You can get this *Annual Notice of Changes* for free in other formats, such as large print, braille, or audio. Call **1-855-878-1784** (TTY: **711**), Monday through Friday from 8 a.m. to 8 p.m. local time. The call is free.
- You can get this document for free in other languages and formats, such as large print, braille, or audio. Call Member Services at the number listed on the bottom of this page.
 - When calling, let us know if you want this to be a standing order. That means we will send the same documents in your requested format and language every year.
 - You can also call us to change or cancel a standing order. You can also find your documents online at www.myamerigroup.com/TXmmp.

B2. Information about Amerigroup STAR+PLUS MMP

- Amerigroup STAR+PLUS MMP is a health plan that contracts with both Medicare and Texas Medicaid to provide benefits of both programs to enrollees.
- Coverage under Amerigroup STAR+PLUS MMP is qualifying health coverage called “minimum essential coverage.” It satisfies the Patient Protection and Affordable Care Act’s (ACA) individual shared responsibility requirement. Visit the Internal Revenue Service (IRS) website at www.irs.gov/affordable-care-act/individuals-and-families for more information on the individual shared responsibility requirement.
- Amerigroup STAR+PLUS MMP is offered by Amerigroup Texas, Inc. (Amerigroup). When this *Annual Notice of Changes* says “we,” “us,” or “our,” it means Amerigroup Texas, Inc. (Amerigroup). When it says “the plan” or “our plan,” it means Amerigroup STAR+PLUS MMP.



If you have questions, please call Amerigroup STAR+PLUS MMP at **1-855-878-1784** (TTY: **711**), Monday through Friday from 8 a.m. to 8 p.m. local time. The call is free. **For more information**, visit www.myamerigroup.com/TXmmp.

B3. Important things to do:

- **Check if there are any changes to our benefits and costs that may affect you.**
 - Are there any changes that affect the services you use?
 - It is important to review benefit and cost changes to make sure they will work for you next year.
 - Look in sections D and 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 cost-sharing 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.
 - Your drug costs may have risen since last year.
 - Talk to your doctor about lower cost alternatives that may be available for you; this may save you in annual out-of-pocket costs throughout the year.
 - To get additional information on drug prices, visit www.medicare.gov/drug-coverage-part-d/costs-for-medicare-drug-coverage. (Click the “dashboards” link in the middle of the Note toward the bottom of the page. These dashboards highlight which manufacturers have been increasing their prices and also show other year-to-year drug price information.)
 - Keep in mind that your plan benefits will determine exactly how much your own drug costs may change.
- **Check if your providers and pharmacies will be in our network next year.**
 - Are your doctors, including your specialists, 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*.



If you have questions, please call Amerigroup STAR+PLUS MMP at **1-855-878-1784** (TTY: **711**), Monday through Friday from 8 a.m. to 8 p.m. local time. The call is free. **For more information**, visit www.myamerigroup.com/TXmmp.

- **Think about your overall costs in the plan.**
 - How much will you spend out-of-pocket for the services and prescription drugs you use regularly?
 - How do the total costs compare to other coverage options?
- **Think about whether you are happy with our plan.**

If you decide to stay with Amerigroup STAR+PLUS MMP:

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 plans:

If you decide other coverage will better meet your needs, you may be able to switch plans (refer to section F2 for more information). If you enroll in a new plan, your new coverage will begin on the first day of the following month. Look in section F2, page 11 to learn more about your choices.

C. Changes to the network providers and pharmacies

Our provider and pharmacy network(s) have changed for 2022.

We strongly encourage you to **review our current *Provider and Pharmacy Directory*** to find out if your providers or pharmacy are still in our network. An updated *Provider and Pharmacy Directory* is located on our website at www.myamerigroup.com/TXmmp. You may also call Member Services at **1-855-878-1784** (TTY: **711**) for updated provider information or to ask us to mail you a *Provider and Pharmacy Directory*.

It is important that you know that we may also make changes to our network during the year. If your provider does leave the plan, you have certain rights and protections. For more information, refer to Chapter 3 of your *Member Handbook*.

D. Changes to benefits and costs for next year

D1. Changes to benefits for medical services

There are no changes to your benefits for medical services. Our benefits will be exactly the same in 2022 as they are in 2021.



If you have questions, please call Amerigroup STAR+PLUS MMP at **1-855-878-1784** (TTY: **711**), Monday through Friday from 8 a.m. to 8 p.m. local time. The call is free. **For more information**, visit www.myamerigroup.com/TXmmp.

D2. Changes to prescription drug coverage

Changes to our Drug List

An updated *List of Covered Drugs* is located on our website at www.myamerigroup.com/TXmmp. You may also call Member Services at **1-855-878-1784** (TTY: **711**) 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 find out 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 **1-855-878-1784** (TTY: **711**) or contact your Service Coordinator 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, refer to Chapter 9 of the *2022 Member Handbook* or call Member Services at **1-855-878-1784** (TTY: **711**).
 - If you need help asking for an exception, you can contact Member Services or your Service Coordinator. Refer to Chapter 2 and Chapter 3 of the *Member Handbook* to learn more about how to contact your Service Coordinator.
- 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 31 days. (To learn more about when you can get a temporary supply and how to ask for one, refer to Chapter 5 of the *Member Handbook*.)



If you have questions, please call Amerigroup STAR+PLUS MMP at **1-855-878-1784** (TTY: **711**), Monday through Friday from 8 a.m. to 8 p.m. local time. The call is free. **For more information**, visit www.myamerigroup.com/TXmmp.

- 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.

Formulary exceptions are granted until the end of the plan year. Any formulary exceptions granted during the current plan year would need to be resubmitted for the 2022 plan year.

Changes to prescription drug costs

There are two payment stages for your Medicare Part D prescription drug coverage under Amerigroup STAR+PLUS MMP. How much you pay depends on which stage you are in when you get a prescription filled or refilled. These are the two stages:

Stage 1 Initial Coverage Stage	Stage 2 Catastrophic Coverage Stage
During this stage, the plan pays part of the costs of your drugs, and you pay your share. Your share is called the copay. You begin this stage when you fill your first prescription of the year.	During this stage, the plan pays all of the costs of your drugs through December 31, 2022. You begin this stage when you have paid a certain amount of out-of-pocket costs.

The Initial Coverage Stage ends when your total out-of-pocket costs for prescription drugs reaches **\$7,050**. At that point, the Catastrophic Coverage Stage begins. The plan covers all your drug costs from then until the end of the year. Refer to Chapter 6 of your *Member Handbook* for more information on how much you will pay for prescription drugs.

D3. Stage 1: “Initial Coverage Stage”

During the Initial Coverage Stage, the plan pays a share of the cost of your covered prescription drugs, and you pay your share. Your share is called the copay. The copay depends on what cost-sharing tier the drug is in and where you get it. You will pay a copay each time you fill a prescription. If your covered drug costs less than the copay, you will pay the lower price.

We moved some of the drugs on the Drug List to a lower or higher drug tier. If your drugs move from tier to tier, this could affect your copay. To find out if your drugs will be in a different tier, look them up in the Drug List.



If you have questions, please call Amerigroup STAR+PLUS MMP at **1-855-878-1784** (TTY: **711**), Monday through Friday from 8 a.m. to 8 p.m. local time. The call is free. **For more information**, visit www.myamerigroup.com/TXmmp.

The table below shows your costs for drugs in each of our 4 drug tiers. These amounts apply **only** during the time when you are in the Initial Coverage Stage.

	2021 (this year)	2022 (next year)
Drugs in Tier 1 (Medicare Part D preferred generic and brand-name drugs) Cost for a one-month supply of a drug in Tier 1 that is filled at a network pharmacy	Your copay for a one-month (31-day) supply is \$0 per prescription.	Your copay for a one-month (31-day) supply is \$0 per prescription.
Drugs in Tier 2 (Medicare Part D preferred and nonpreferred generic and brand-name drugs) Cost for a one-month supply of a drug in Tier 2 that is filled at a network pharmacy	Your copay for a one-month (31-day) supply is \$0-\$9.20 per prescription.	Your copay for a one-month (31-day) supply is \$0-\$9.85 per prescription.
Drugs in Tier 3 (Texas Medicaid State approved prescription generic and brand-name drugs) Cost for a one-month supply of a drug in Tier 3 that is filled at a network pharmacy	Your copay for a one-month (31-day) supply is \$0 per prescription.	Your copay for a one-month (31-day) supply is \$0 per prescription.
Drugs in Tier 4 (Texas Medicaid State approved over-the-counter (OTC) drugs that require a prescription from your provider) Cost for a one-month supply of a drug in Tier 4 that is filled at a network pharmacy	Your copay for a one-month (31-day) supply is \$0 per prescription.	Your copay for a one-month (31-day) supply is \$0 per prescription.



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The Initial Coverage Stage ends when your total out-of-pocket costs reach **\$7,050**. At that point the Catastrophic Coverage Stage begins. The plan covers all your drug costs from then until the end of the year. Refer to Chapter 6 of your *Member Handbook* for more information about how much you will pay for prescription drugs.

D4. Stage 2: “Catastrophic Coverage Stage”

When you reach the out-of-pocket limit **\$7,050** for your prescription drugs, the Catastrophic Coverage Stage begins. You will stay in the Catastrophic Coverage Stage until the end of the calendar year.

E. Administrative changes

We are changing certain addresses next year. The information below describes these changes.

	2021 (this year)	2022 (next year)
The mailing address to contact Case Management	Amerigroup STAR+PLUS MMP Case Management 7430 Remcon Circle Building C, Suite 120 El Paso, TX 79912	Amerigroup STAR+PLUS MMP Case Management 5959 Corporate Drive Suite 1300 Houston, TX 77036

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 Medicare-Medicaid Plan, change to a Medicare Advantage Plan, or change to Original Medicare, you will automatically stay enrolled as a member of our plan for 2022.

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 Medicare-Medicaid Plan, or moving to Original Medicare.



If you have questions, please call Amerigroup STAR+PLUS MMP at **1-855-878-1784** (TTY: 711), Monday through Friday from 8 a.m. to 8 p.m. local time. The call is free. **For more information**, visit www.myamerigroup.com/TXmmp.

These are the four ways people usually end membership in our plan:

<p>1. You can change to:</p> <p>A different Medicare-Medicaid Plan</p>	<p>Here is what to do:</p> <p>Call the STAR+PLUS help line at 1-877-782-6440, Monday through Friday from 8 a.m. to 6 p.m. Central time. TTY users should call 711 or 1-800-735-2989. Tell them you want to leave Amerigroup STAR+PLUS MMP and join a different Medicare-Medicaid plan. If you are not sure what plan you want to join, they can tell you about other plans in your area; OR</p> <p>Send Maximus an Enrollment Change Form. You can get the form by calling the STAR+PLUS help line at 1-877-782-6440 if you need them to mail you one.</p> <p>Your coverage with Amerigroup STAR+PLUS MMP will end on the last day of the month that we get your request.</p>
<p>2. 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, 7 days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> • Call the State Health Insurance Assistance Program (SHIP) at 1-800-252-3439. In Texas, the SHIP is called the Health Information Counseling & Advocacy Program of Texas (HICAP). <p>You will automatically be disenrolled from Amerigroup STAR+PLUS MMP when your new plan's coverage begins.</p>



If you have questions, please call Amerigroup STAR+PLUS MMP at **1-855-878-1784** (TTY: **711**), Monday through Friday from 8 a.m. to 8 p.m. local time. The call is free. **For more information**, visit www.myamerigroup.com/TXmmp.

<p>3. 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, 7 days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> • Call the State Health Insurance Assistance Program (SHIP) at 1-800-252-3439. In Texas, the SHIP is called the Health Information Counseling & Advocacy Program of Texas (HICAP). <p>You will automatically be disenrolled from Amerigroup STAR+PLUS MMP when your Original Medicare coverage begins.</p>
<p>4. 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 have drug coverage from another source, such as an employer or union. If you have questions about whether you need drug coverage, call the Health Information Counseling & Advocacy Program of Texas (HICAP) at 1-800-252-3439.</p>	<p>Here is what to do:</p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> • Call the State Health Insurance Assistance Program (SHIP) at 1-800-252-3439. In Texas, the SHIP is called the Health Information Counseling & Advocacy Program of Texas (HICAP). <p>You will automatically be disenrolled from Amerigroup STAR+PLUS MMP when your Original Medicare coverage begins.</p>



If you have questions, please call Amerigroup STAR+PLUS MMP at **1-855-878-1784** (TTY: **711**), Monday through Friday from 8 a.m. to 8 p.m. local time. The call is free. **For more information**, visit www.myamerigroup.com/TXmmp.

G. How to get help

G1. Getting help from Amerigroup STAR+PLUS MMP

Questions? We're here to help. Please call Member Services at **1-855-878-1784** (TTY only, call **711**). We are available for phone calls Monday through Friday from 8 a.m. to 8 p.m. local time. Calls to these numbers are free.

Your 2022 Member Handbook

The *2022 Member Handbook* is the legal, detailed description of your plan benefits. It has details about next year's benefits and costs. It explains your rights and the rules you need to follow to get covered services and prescription drugs.

The *2022 Member Handbook* will be available by October 15. An up-to-date copy of the *2022 Member Handbook* is always available on our website at www.myamerigroup.com/TXmmp. You may also call Member Services at **1-855-878-1784** (TTY: **711**) to ask us to mail you a *2022 Member Handbook*.

Our website

You can also visit our website at www.myamerigroup.com/TXmmp. 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*).

G2. Getting help from the STAR+PLUS help line

The STAR+PLUS help line can help if you want to leave Amerigroup STAR+PLUS MMP and join a different Medicare-Medicaid Plan. If you are not sure what plan you want to join, they can tell you about other plans in your area. You can call the STAR+PLUS help line at 1-877-782-6440, Monday through Friday from 8 a.m. to 6 p.m. Central time. TTY users should call 711 or 1-800-735-2989.

G3. Getting help from the HHSC Office of the Ombudsman

The HHSC Office of the Ombudsman helps people enrolled in Texas Medicaid with service or billing problems. The ombudsman's services are free.

- The HHSC Office of the Ombudsman is an ombudsman program that works as an advocate on your behalf. They can answer questions if you have a problem or complaint and can help you understand what to do.
- The HHSC Office of the Ombudsman can help you file a complaint or an appeal with our plan. They can help you if you are having a problem with Amerigroup STAR+PLUS MMP.
- The HHSC Office of the Ombudsman makes sure you have information related to your rights and protections and how you can get your concerns resolved.



If you have questions, please call Amerigroup STAR+PLUS MMP at **1-855-878-1784** (TTY: **711**), Monday through Friday from 8 a.m. to 8 p.m. local time. The call is free. **For more information**, visit www.myamerigroup.com/TXmmp.

- The HHSC Office of the Ombudsman is not connected with us or with any insurance company or health plan. The phone number for the HHSC Office of the Ombudsman is 1-866-566-8989.

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

You can also call the State Health Insurance Assistance Program (SHIP). The SHIP counselors can help you understand your Medicare-Medicaid Plan choices and answer questions about switching plans. In Texas, the SHIP is called the Health Information Counseling & Advocacy Program of Texas (HICAP). HICAP is not connected with any insurance company or health plan, and HICAP's services are free.

The HICAP phone number is 1-800-252-3439.

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 (www.medicare.gov). If you choose to disenroll from your Medicare-Medicaid 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 www.medicare.gov and click on "Find plans.")

Medicare & You 2022

You can read the *Medicare & You 2022* 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 (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.

G6. Getting help from Texas Medicaid

The phone number for Texas Medicaid is 1-800-252-8263. This call is free. TTY users should call 1-800-753-8583 or 711.



If you have questions, please call Amerigroup STAR+PLUS MMP at **1-855-878-1784** (TTY: **711**), Monday through Friday from 8 a.m. to 8 p.m. local time. The call is free. **For more information**, visit www.myamerigroup.com/TXmmp.

G7. Getting help from the Quality Improvement Organization (QIO)

Our state has an organization called TMF, Health Quality Institute. This is a group of doctors and other health-care professionals who help improve the quality of care for people with Medicare. TMF, Health Quality Institute is not connected with our plan. The phone number for the QIO is 1-800-725-9216. TTY users should call 1-877-486-2048.



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Have questions?

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