

2023 Quick Start Guide Keystone 65 HMO



**“It’s great
to be a member.”**

Independence 

Welcome to **Keystone 65**

Dear Medicare Beneficiary:

Thank you for your interest in choosing Keystone 65 HMO (Keystone 65) as your Medicare Advantage plan in 2023. It's great to be a member!

At Independence Blue Cross (Independence), our goal is to provide rich benefits at a price our members can afford. That's been our mission here in the Philadelphia area for more than 80 years.

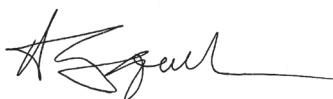
This *Quick Start Guide* has some easy-to-understand information about your benefits and what you can expect as a new member. But first, here are two important things you should know:

- You'll get a confirmation letter once your membership in Keystone 65 has been approved by the Centers for Medicare & Medicaid Services (CMS) — the federal agency that runs the Medicare program. **Don't cancel any existing coverage until you get that letter.**
- Within 10 days of CMS approval, you'll get your member ID card in the mail — as well as a *Welcome Kit*, which includes your *Evidence of Coverage* (EOC). You can also find your EOC online anytime at ibxmedicare.com/eoc.

We're always here to help. If you ever have any questions about your plan, our Member Help Team is ready to answer them. Simply call our Member Help Team at the phone number that appears on page 27 of this guide.

Thanks again for selecting Keystone 65!

With care,



Heidi J. Syropoulos, M.D.
Medical Director, Government Markets



Table of contents

Your card, plan, and premium

Member ID card	4
Digital resources	5
Plan details	6
Ways to pay your premium	6

Your benefits and coverage

Doctor visits	10
Emergency services	10
Virtual care	11
Dental	12
Hearing	13
Vision	13
Preferred pharmacies	14
Mail order	15
Resources to ease living with diabetes	17
Care and services for COVID-19	19
Part B Giveback	20

Programs and services available to you

Over-the-counter benefit	22
One Pass™ fitness program	23
Meal delivery	24
Acupuncture	25
Chiropractic care	25
Specialty services	26
Member Help Team	27
Key terms	28



Member ID card

You will receive your member ID card within ten days after CMS approves your enrollment application. Your Keystone 65 member ID card includes all the information your doctor and other specialists will need to process your health care claims with us. Bring it with you anytime you seek health care. Below is an example of the information on your card:

The diagram shows a sample member ID card for Independence Keystone 65 HMO. Callouts on the left identify sections: Personal member ID (PLAN: 80840, MEMBER ID, ID Number, Member Name), Pharmacy information (RxBIN, RxPCN, RxGRP, CMS), Copayment information (MEDICARE ADVANTAGE, HMO, Vision, Dental, Medicare Rx), and Primary Care Physician (PCP) name (Keystone 65 HMO). Callouts on the right identify PCP phone number (PCP Name, Provider Phone Number, Provider Lab), Lab information (PCP Visit, SPEC Visit, ER), and Important phone numbers (Member Help Team, Mental Health/Substance Abuse, Men's Health Promotions, Claims Receipt Center).

Independence		Keystone 65 HMO	
PLAN: 80840 MEMBER ID ID Number Member Name		PCP Name Provider Phone Number Provider Lab	
RxBIN 610011 RxPCN CTRXMEDD RxGRP MDCMEDD CMS H3952 049		PCP Visit \$ SPEC Visit \$ ER \$	
MEDICARE ADVANTAGE HMO		Vision	Dental
		Medicare[®] <small>Prescription Drug Coverage</small>	

Member: Present this card to providers when seeking care. Contact your Primary Care Physician first for routine medical care. See your Evidence of Coverage for additional benefit information.		Visit www.ibxmedicare.com for benefit information
Out-of-network providers submit paper claims to your local Blue Cross® Blue Shield® Plan.		Member Help Team 1-800-645-3965 TTY/DD 711 Mental Health/Substance Abuse 1-800-688-1911 Men's Health Promotions 1-888-678-7015
Please send all written inquiries to: Keystone 65 HMO, P.O. Box 7799, Philadelphia, PA 19101-7799.		Submit paper medical claims to: Claims Receipt Center P.O. Box 211184 Eagan, MN 55121
Submit prescription claims to Prescription Drug Claims P.O. Box 650297 Dallas, TX 75295-0297		<small>Benefits underwritten by Keystone Health Plan East, a subsidiary of Independence Blue Cross - Independent Enterprise of the Blue Cross and Blue Shield Association. Vision services administered by Davis Vision. Dental Services administered by United Concordia Companies, Inc.</small>

Once you are enrolled in a Keystone 65 plan with Independence, you must use your member ID card to get covered services. You should always show your member ID card to receive the benefits to which you are entitled.

Be sure that your PCP's information appears on the card. As a reminder, Keystone 65 members are required to select a PCP. You can find a list of in-network providers at ibxmedicare.com/providerfinder. If you have any questions or need to change your PCP, call our Member Help Team at the number that appears on page 27.



Digital resources

Learn about important plan information, manage your benefits, and discover healthy activities when you engage with us online. Check out these three options for ways to connect with your health plan.

- **ibx.com**

Once you receive your confirmation letter, your health and benefit information will be available in one place, anytime and anywhere by logging into **ibx.com**. Access your member ID card, the *Provider/Pharmacy Finder*, status of recent claims, and view important messages. Additionally, members with Part D coverage can manage their prescription drug benefit, search for lower-cost alternatives, order and track medications through our mail-order home delivery service, and more.

- **ibxmedicare.com/connect**

Sign up for email and text to stay informed about:

- Important plan information
- Personalized screening reminders
- Tips for maximizing your benefits
- And more

- **[Facebook.com/ibxmedicare](https://facebook.com/ibxmedicare)**

Join the conversation on Facebook. Designed just for Medicare members, our Facebook page offers lots of information, including health news, wellness tips, and seasonal recipes.



Plan details

Monthly premiums

Below is the amount that should appear on your invoice each month, unless you qualify for additional assistance:

Plan	Chester, Delaware, or Montgomery counties	Bucks or Philadelphia counties
Keystone 65 Basic Rx HMO	\$0	\$0
Keystone 65 Focus Rx HMO-POS	\$15	\$0
Keystone 65 Preferred Medical-Only HMO	\$170	\$176
Keystone 65 Preferred Rx HMO	\$241	\$214
Keystone 65 Select Medical-Only HMO	\$49.50	\$34.50
Keystone 65 Select Rx HMO	\$81.50	\$55.50
Keystone 65 Liberty Medical-Only HMO	\$0	\$0

Note: "Rx" plans include Part D, or drug coverage.



Ways to pay your premium

When it comes to paying your monthly premium, you've got options. Keep reading to learn more and determine which will work best for you.

Option 1: Use Electronic Funds Transfer (EFT) to have your plan premium withdrawn directly from your checking or savings account each month. There are no sign-up fees or charges per transaction, and you'll save money on postage. If there are insufficient funds in your bank account, no money will be withdrawn, and you will be billed through the mail for your monthly premium.

To sign up, download a form at ibxmedicare.com or call our Member Help Team at the number that appears on page 27.



Ways to pay your premium (continued)

Option 2: You can pay your premium online directly from your bank account through our e-Bill system. To access e-Bill, log in at ibx.com and click *Manage Account* in the left-hand corner.

Option 3: Pay by check via Direct Pay. Your monthly premium bill is sent to your home. You write the check payable to Keystone 65 — not payable to CMS or Health and Human Services (HHS) — and send it directly to us.

Option 4: You can have the plan premium taken out of your monthly Railroad Retirement Board (RRB) benefit check or your monthly Social Security check. For more information on how to pay your plan premium this way, please contact our Member Help Team at the number that appears on page 27. We will be happy to help you set this up.

Your benefits and coverage



Doctor visits

When it comes to your health, annual wellness visits and preventive screenings go a long way. Start by scheduling a visit with your primary care physician (PCP) to review your medical history and current medications. You can also discuss preventive screenings, such as a mammogram or colonoscopy, and vaccinations, like flu shots.

We've got you covered

If you're new to Medicare, we cover an initial in-network Welcome to Medicare visit, and annual wellness visits thereafter. For any other in-network PCP visits, you'll have a **\$0 copay**.

Visit ibxmedicare.com/providerfinder to search for PCPs in your plan's network.



Emergency services

Emergency care

You are covered for medically necessary services for emergency care.

- There is a \$95 copay per emergency room (ER) visit in and out of network.
- If you're admitted to the hospital, you will not pay a copay on the day of discharge.

Worldwide emergency room coverage

If you receive emergency care outside of the United States, you will be responsible for paying for your care. But once home, you can submit the *International Claim Form*. This form is available when you log in to ibx.com via the *Resources* tab. Worldwide ambulance service is not covered.



Virtual care

MDLIVE® telemedicine services — \$0 copay

You have access to board-certified doctors for medical, behavioral health, and dermatology telemedicine services through MDLIVE. Connect virtually from the comfort of your home via your computer, tablet, or smartphone.

Medical visits — Physicians are available 24/7 to treat non-urgent medical conditions (such as COVID-19, cold, flu, allergies, etc.) when your PCP isn't available.

Behavioral health visits — Behavioral health specialists can help treat mental and behavioral health issues like depression, anxiety, loss and grief, stress and challenges of everyday life, and relationship problems. You can schedule recurring visits with the same therapist or psychiatrist for each visit. Weekend and holiday appointments may be available. Convenient access to scheduling appointments is based on providers' specified hours.

Dermatology consultations — Available through MDLIVE 24/7. Dermatologists can diagnose and treat skin, hair, and nail conditions. No appointments are needed. You can upload and send an image of your condition to a dermatologist through the MDLIVE secure portal.

Access to the MDLIVE portal and scheduling support is available 24/7, 365 days per year. To schedule, visit ibxmedicare.com/mdlive or call **1-888-961-4188** (TTY/TDD: **1-800-770-5531**).



Dental

All Keystone 65 members have routine dental coverage included in their plan.

Your in-network dental benefits include:

- **\$0 copay** for exam/cleaning once every six months if provided by a United Concordia dental provider
- **\$0 copay** for dental X-ray
 - One set of dental bitewing X-rays every year
 - One set of periapical, panoramic, and full-mouth X-rays once every three years
- **\$2,500** comprehensive allowance every year for Keystone 65 Basic members — services include fillings, root canals, crowns, partial bridges, dentures, and more
- **\$2,000** comprehensive allowance every year for Keystone 65 Focus, Keystone 65 Liberty, and Keystone 65 Select members — services include fillings, root canals, crowns, partial bridges, dentures, and more
- 100% coverage for anesthesia during oral surgery (per 60-minute session) for Keystone 65 Basic, Keystone 65 Focus, Keystone 65 Liberty, and Keystone 65 Select members

Find a dentist

Search for network dentists through our *Find a Dentist* tool at ibxmedicare.com/findadentist.



Hearing

Your routine hearing benefits include:

- **\$0 copay** for one routine hearing exam every year if provided by a TruHearing® provider
- Unlimited hearing aid fittings and evaluations at no cost every year
- Up to two hearing aids every year (one per ear, per year), including advanced and premium digital hearing aids, both with a rechargeable option; cost-sharing applies

Find a TruHearing provider

To schedule an appointment, call **1-855-541-6173** (TTY/TDD: **711**). Use our *Find a Provider* tool at ibxmedicare.com/providerfinder to see a list of participating providers.



Vision

Your routine vision benefits through Davis Vision include:

- **\$0 copay** for one routine eye exam every year
- Eyeglasses/lenses (one pair every year):
 - 100% covered if purchased from the Davis Vision Collection
 - **\$250** allowance every year if purchased from Visionworks (a Davis Vision provider)
 - **\$150** allowance every year if purchased from a network Davis Vision provider
- Contact lenses:
 - **\$150** allowance every year in lieu of routine eyewear (frames and lenses)

Find a vision provider

Visit ibxmedicare.com/providerfinder to find a participating Davis Vision provider.



Preferred pharmacies

Some pharmacies contract with our plan to offer lower cost-sharing to plan members with Part D coverage. This is known as preferred pharmacy cost-sharing. At a preferred pharmacy, you will:

- Have a **\$0 copay** for Tier 1 preferred generic prescriptions
- Pay lower copays on Tier 2 generic prescriptions

It's easy to move prescriptions if you switch pharmacies:

- Take your prescription bottle/bag to your new pharmacy, or
- Ask your new pharmacy to contact your current pharmacy, or
- Ask your doctor to contact your new pharmacy.

Preferred pharmacies	Standard pharmacies
CVS	Acme
Giant	Costco
Rite Aid	Sam's Club
ShopRite	Sav-On Pharmacy
Target	Walgreens
Wegmans	Walmart
Other independent pharmacies	Other independent pharmacies

To find the preferred pharmacy near you, visit our *Find a Pharmacy* tool at ibxmedicare.com/pharmacyfinder.

Rx plans only

Mail order

If you would like your prescriptions delivered right to your door, sign up for our mail-order service through OptumRx[®] Home Delivery. Mail order is an easy way to get the medications you take regularly.

Mail order offers you:

- **Cost savings** — You may pay less than retail.
- **Convenience** — Receive up to a 90-day supply of maintenance medications with free shipping.
- **24/7 access** — Speak to a pharmacist at any time, any day.

When switching to mail order:

If you are filling a prescription at a retail pharmacy and would like to switch to mail order:

1. Log in to ibx.com to transfer a retail prescription or call **1-888-678-7015** (TTY/TDD: **711**) to find out if the prescription is eligible and ask to change to mail order.
2. If you call, provide your name, address, prescription number (located on your prescription bottle or package), and billing information.

If you have a new prescription:

1. Ask your doctor to send the prescription to be filled by OptumRx Home Delivery.
2. OptumRx Home Delivery will call you to confirm any details. Pharmacies must get consent prior to shipping or delivering any prescriptions that your prescriber sends.
3. Log in to ibx.com to track the status of your mail-order prescription.



Mail order (continued)

If you need to refill a mail-order prescription:

- 1.** Log in to ibx.com or call **1-888-678-7015** (TTY/TDD: **711**) and request a refill.
- 2.** Confirm your information. Please note, your prescription drug benefit does not offer automatic refills for mail order.

You can also fill out and mail in the *Prescription Mail-Order Form* available at ibxmedicare.com.

Your prescriptions should arrive within 7 to 10 business days after we receive your complete order.

Questions? Please call **1-888-678-7015** (TTY/TDD: **711**), 7 days a week, 24 hours a day.



Resources to ease living with diabetes

Special health conditions, like diabetes and congestive heart failure (CHF), require special care – which can be costly. To help lower costs for our members, we offer the following programs.

Vital Care

Keystone 65 Basic, Liberty, Preferred, and Select members must have both diabetes and CHF to participate.

Benefit	Cost
Cardiology Specialist Visits	\$10
Endocrinology Specialist Visits	\$10
Medicare-covered Podiatry Visits	\$5
Routine Podiatry Visits Up to 6 routine podiatry visits per year	\$5

Vital Care Plus

Keystone 65 Focus members must have diabetes to participate.

Benefit	Cost
Cardiology Specialist Visits	\$10
Endocrinology Specialist Visits	\$10
Pulmonology Specialist Visits	\$10
Medicare-covered Podiatry Visits	\$5
Routine Podiatry Visits Up to 6 routine podiatry visits per year	\$5

\$80 allowance per quarter for over-the-counter (OTC) items
(additional \$10 from base allowance)



Resources to ease living with diabetes (continued)

Ride to medical appointments safely and comfortably with Roundtrip!

This transportation service makes it easier for you to get to and from your essential health visits. Enjoy transportation exactly when and where you need it.

- Available to Keystone 65 Basic, Keystone 65 Focus, Keystone 65 Preferred, and Keystone 65 Select members who have both diabetes and congestive heart failure.
- Receive **24 one-way rides** (or 12 round-trip rides) per year to plan-approved facilities at **no added cost**.
- Use a variety of transportation options such as rideshare services, medical sedans, vans, wheelchair vans, and taxis. Limit of 80 miles per one-way ride.
- Request rides 48 hours in advance or schedule them weeks or months in advance (within the benefit period).

Once your transportation request is submitted, Roundtrip will match you with the right ride, provide an estimated time of arrival, and send you reminders to let you know the status of your ride.

Grocery delivery

We're making life a little easier for members who have both diabetes and depressive disorders, by providing four weeks of grocery deliveries **at no cost**.

Your grocery deliveries will contain fresh, local produce and food — along with a recipe guide that offers ideas on how to use them.

- Available to Keystone 65 Basic, Keystone 65 Focus, Keystone 65 Preferred, and Keystone 65 Select members who have both diabetes and depressive disorders
- **\$0 copay** for a maximum of four weeks per member per year



Resources to ease living with diabetes (continued)

Meal delivery

Members diagnosed with diabetes and congestive heart failure who have been recently discharged from a qualifying facility and participate in the Transitions of Care Program can opt to receive four weeks of medically tailored meals provided by MANNA **at no cost.**

- Each delivery includes breakfast, lunch, and dinner for each day of the week.
- Qualifying members can take advantage of the four-week meal delivery up to two times per year.



Care and services for COVID-19

We are committed to protecting your health during the COVID-19 (coronavirus) pandemic. And we're making it as easy as possible for you to get the care you need.

- **\$0 copay** for acute, in-network, inpatient hospital stays due to a COVID-19 diagnosis
- The COVID-19 vaccines and booster shots are available at **no cost** as a Part B vaccine
- **\$0 copay** for in-network laboratory testing for medically appropriate diagnostic and antibody testing ordered by an authorized health care professional
- For up-to-date information on COVID-19 visit ibx.com/covid19



Part B Giveback

Save on your Medicare Part B premium

Keystone 65 Liberty members have access to the Part B Premium Giveback, which provides a monetary credit toward your Part B premium.*

- Receive a \$90 credit per month on either your Social Security check or your Medicare Part B premium statement, depending on how you pay your Part B premium.
- It can take a few months for this Giveback to be processed, so you may receive the first few months as a lump sum.

Please note: Members who pay their own Part B premium are eligible for the Giveback. This means members cannot receive Medicaid or any other assistance from a health program that could potentially pay their Part B premium.

*The Giveback is set up by Medicare and administered through the Social Security Administration (SSA). The Giveback incentive only participates with Social Security. There are no direct payments made to beneficiaries by Independence.

Programs and services available to you



Over-the-counter benefit

Save with your IBX Care Card

As a member of Independence, you will receive an IBX Care Card with funds you can use to purchase approved over-the-counter (OTC) health and wellness items at participating retailers, including Walmart, CVS, Rite Aid, and more.

Your IBX Care Card can be used to purchase OTC items such as cold and allergy medications, first aid supplies, vitamins and minerals, and more.

- Your IBX Care Card is automatically reloaded each quarter (every three months) with your allowance.
- The balance remaining on the card at the end of a quarter does not carry forward to the next quarter if it is not used.
- You must purchase eligible OTC items at participating retailers.
- OTC items purchased from non-participating retailers will not be covered.

Visit ibxmedicare.com/carecard to learn more about your IBX Care Card.



One Pass™ fitness program

Stay active with a **no-cost** physical, mental, and social fitness membership through One Pass™.

Fitness Network

- The largest Medicare Advantage national fitness network with 24,000 locations.
- Access to local YMCAs; boutique studios; yoga, Pilates, and spinning studios; and virtual classes

Online Classes

- Over 32,000 on-demand library and livestreaming fitness classes, and free access to fitness platforms such as Burnalong, Les Mills, and Yogaworks

Social Activities

- More than 20,000 free social events and classes

Brain Training

- BrainHQ brain training program to help you keep your mind sharp

Home Kits

- Fitness kits sent to your home if you're unable to access a gym location

Learn more!

Visit ibxmedicare.com/onepass or call One Pass at **1-877-504-6830** (TTY/TDD: **711**) Monday through Friday, 9 a.m. to 10 p.m.

Meal delivery

Members newly diagnosed with colorectal, endometrial, breast, lung, or prostate cancer who have been recently discharged from a qualifying facility, and who participate in the Transitions of Care Program, can opt to receive four weeks of medically tailored meals provided by MANNA **at no cost**.

- Each delivery includes breakfast, lunch, and dinner for each day of the week.
- Qualifying members can take advantage of the four-week meal delivery up to two times per year.



Acupuncture

Your plan covers up to six routine acupuncture visits per year for treating headaches (migraine and tension), post-operative nausea and vomiting, chemo-induced nausea and vomiting, low back pain, chronic neck pain, and pain from osteoarthritis of the knee and hip.

In addition, you have up to twelve Medicare-covered visits in 90 days, eight additional if it's determined that progress is being made, for low back pain only.



Chiropractic care

Your Keystone 65 plan offers six routine chiropractic visits in addition to the Medicare-covered visits.

You must choose a provider in the Keystone 65 network.

For a list of participating providers, use our *Find a Provider* tool online at ibxmedicare.com/providerfinder.



Specialty services

- **Personal health visits.** You have access to personal health visits, which are visits from a licensed health professional. These visits last about an hour and include a brief health assessment. They are a helpful and convenient way to get personalized health advice in the comfort of your home and are offered to you **at no extra cost.** This service is optional, and the visits will not affect your current health insurance benefits or premiums. You may receive a call or a letter in the mail from one of our health care vendors to see if you are interested in scheduling a visit. This visit should not replace an annual wellness visit with your primary care provider.
- Our **Nursing Hotline** is staffed by Registered Nurse Health Coaches and behavioral health case managers, who are specialized registered nurses and licensed social workers. This hotline is available 24 hours a day, 7 days a week. Health Coaches and case managers have access to your clinical history, including conditions, prescription drugs, recent tests and therapies, and patterns of treatment and procedures. To speak with a Health Coach, call **1-800-ASK-BLUE (1-800-275-2583)** (TTY/TDD: **711**), and when prompted, say "Health Coach."
- **Enhanced Disease Management** services are available to members with chronic health conditions. You may be referred to a Health Coach by your treating physician, or a Health Coach may call you to assess your overall health and well-being. You have the right to opt in or opt out of Health Coach services. If at any time you wish to end your relationship with your Health Coach, simply advise your Health Coach. You may also call the number on the back of your member ID card and ask that you not be contacted by a Health Coach in the future.



Member Help Team

Our Member Help Team is committed to providing you with the best service that meets your unique needs. Have a question about copays, prescription coverage, or a medical bill? Call our Member Help Team representatives.

Our Member Help Team is available to take your calls seven days a week from 8 a.m. to 8 p.m. at **1-800-645-3965** (TTY/TDD: **711**). Please note that on weekends and holidays from April 1 through September 30, your call may be sent to voicemail.



Key terms

Explanation of Benefits

When you use your Part C and Part D (Rx members only) benefits, we'll send you an *Explanation of Benefits* (EOB). EOBs can answer a lot of questions about your coverage.

EOBs are not bills. They summarize the medical and hospital care you have received (Part C) and (for Rx members) the prescriptions you have filled through your plan (Part D).

It's important to look at your EOBs, so you can track your health care expenses accurately and compare them to any statements you receive from Independence. For more information, go to ibx.com/eob.

Out-of-pocket costs

Under your plan, you are responsible for certain out-of-pocket costs:

- Some plans have a **premium** or monthly fee. If your plan has a premium, you will be responsible for paying that fee each month.
- A **copayment (copay)** is the fixed amount you pay each time you receive certain medical services or covered drugs and is due at the time of service. See your EOC for your copay amounts.
- **Coinsurance** is the percentage you pay of the total cost of certain medical services or covered drugs and is due when you receive them. See your EOC for your plan's coinsurance amounts.

The grocery benefit and meals program mentioned are a part of a special supplemental program for the chronically ill. Not all members qualify.

The transportation benefit is provided by Roundtrip, an independent company.

Other Pharmacies are available in our network.

Telemedicine is provided by MDLIVE, an independent company.

TruHearing® is a registered trademark of TruHearing, Inc., an independent company.

Vision benefits are underwritten by Keystone Health Plan East and administered by Davis Vision, an independent company.

Dental benefits are underwritten by Keystone Health Plan East and administered by United Concordia Companies, Inc., an independent company.

The One Pass fitness benefit is a program provided by Rally Health, Inc. an independent company. ©2022 Rally Health, Inc. Rally, the Rally logo(s) and One Pass are trademarks of Rally Health, Inc. and/or its affiliates.

Independence Blue Cross offers Medicare Advantage plans with a Medicare contract. Enrollment in Independence Medicare Advantage plans depends on contract renewal.

Benefits underwritten by Keystone Health Plan East, a subsidiary of Independence Blue Cross — independent licensees of the Blue Cross and Blue Shield Association.

An affiliate of Independence Blue Cross has a financial interest in Visionworks, an independent company.

OptumRx is an Optum® company — an independent company that provides home delivery, specialty, and infusion pharmacy services.

MANNA is an independent company that administers our meals program benefit.

Multi-language Interpreter Services

English: We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-800-275-2583 (TTY: 711). Someone who speaks English/Language can help you. This is a free service.

Spanish: Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-800-275-2583 (TTY: 711). Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin: 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 1-800-275-2583 (TTY: 711)。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Cantonese: 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電 1-800-275-2583 (TTY: 711)。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

Tagalog: Mayroon kaming libreng serbisyo sa pagsasalang-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggamot. Upang makakuha ng tagasalang-wika, tawagan lamang kami sa 1-800-275-2583 (TTY: 711). Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French: Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-800-275-2583 (TTY: 711). Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese: Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi 1-800-275-2583 (TTY: 711) sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

German: Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter 1-800-275-2583 (TTY: 711). Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Arabic: إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول على مترجم فوري، ليس سيغوم 1-800-275-2583 (TTY: 711) عليك سوى الاتصال بنا على بمساعدتك. هذه خدمة مجانية شخص ما يتحدث العربية.

Korean: 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-800-275-2583 (TTY: 711) 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Russian: Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчиков, позвоните нам по телефону 1-800-275-2583 (TTY: 711). Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Hindi: हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं. एक दुभाषिया प्राप्त करने के लिए, बस हमें 1-800-275-2583 (TTY: 711) पर फोन करें. कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है. यह एक मुफ्त सेवा है.

Italian: È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero 1-800-275-2583 (TTY: 711). Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

Portugués: Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número 1-800-275-2583 (TTY: 711). Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole: Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan 1-800-275-2583 (TTY: 711). Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish: Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-800-275-2583 (TTY: 711). Ta usługa jest bezpłatna.

Japanese: 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするために、無料の通訳サービスがあります。通訳をご用命になるには、1-800-275-2583 (TTY: 711) にお電話ください。日本語を話す人が支援いたします。これは無料のサービスです。

Y0041_HM_22_108842_C
IBC11835 (06/22)

Discrimination is Against the Law

This Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. This Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

This Plan provides:

- Free aids and services to people with disabilities to communicate effectively with us, such as: qualified sign language interpreters, and written information in other formats (large print, audio, accessible electronic formats, other formats).
- Free language services to people whose primary language is not English, such as: qualified interpreters and information written in other languages.

If you need these services, contact our Civil Rights Coordinator. If you believe that This Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with our Civil Rights Coordinator.

You can file a grievance in the following ways:

- In person or by mail: ATTN: Civil Rights Coordinator, 1901 Market Street, Philadelphia, PA 19103
- By phone: 1-888-377-3933 (TTY: 711)
- By fax: 215-761-0245
- By email: civilrightscordinator@1901market.com

If you need help filing a grievance, our Civil Rights 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, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.



Keystone 65 HMO

Return Mail Center

P.O. Box 190

Dunmore, PA 18512-9978

**Important Keystone 65 HMO
information**

20609 1991440 (09/22)

KS11878 (07/22)

Y0041_H3952_KS_M_23_110404