

# 2023 Summary of Benefits

## WellSense Senior Care Options (HMO D-SNP)




# WellSense Senior Care Options (HMO D-SNP): Summary of Benefits 2023

## Introduction

This document is a brief summary of the benefits and services covered by WellSense Senior Care Options (HMO D-SNP). It includes answers to frequently asked questions, important contact information, an overview of benefits and services offered, and information about your rights as a member of WellSense Senior Care Options (HMO D-SNP). Key terms and their definitions appear in alphabetical order in the last chapter of the Evidence of Coverage.

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 **If you have questions**, please call WellSense Senior Care Options (HMO D-SNP) at 855-833-8125, TTY: 711. From October 1 to March 31, we are available 7 days a week from 8 a.m. to 8 p.m. EST, and from April 1 to September 30, we are available from Monday through Friday from 8 a.m. to 8 p.m. EST. The call is free. **For more information**, visit [wellsense.org/sco](https://wellsense.org/sco).

# WellSense Senior Care Options (HMO D-SNP): Summary of Benefits 2023

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## A. Disclaimers



This is a summary of health services covered by WellSense Senior Care Options (HMO D-SNP) for January 1, 2023 through December 31, 2023. This is only a summary. Please read the Evidence of Coverage for the full list of benefits. If you don't have an Evidence of Coverage, call WellSense Senior Care Options (HMO D-SNP) Member Services at the number at the bottom of this page to get one.

- ❖ WellSense Senior Care Options (HMO D-SNP) is an HMO plan with a Medicare Advantage contract and a contract with the Commonwealth of Massachusetts/Executive Office of Health and Human Services Medicaid program. Enrollment in WellSense Senior Care Options (HMO D-SNP) depends on contract renewal. WellSense Senior Care Options (HMO D-SNP) is a voluntary MassHealth (Medicaid) program in association with Executive Office of Health and Human Services and the Centers for Medicare & Medicaid Services. WellSense Senior Care Options (HMO D-SNP) is a health plan that contracts with both Medicare and MassHealth (Medicaid) to provide benefits of both programs to enrollees. It is for people with MassHealth Standard (Medicaid) and Medicare age 65 and older and must not have any other comprehensive health insurance.
- ❖ Under WellSense Senior Care Options (HMO D-SNP), you can get your Medicare and MassHealth Standard (Medicaid) services in one health plan called a Senior Care Options plan. A WellSense Senior Care Options (HMO D-SNP) care manager will help manage your health care needs.
- ❖ MassHealth is required by federal law to recover money from the estates of certain MassHealth members who are age 55 years or older, and who are any age and are receiving long-term care in a nursing home or other medical institution. For more information about MassHealth estate recovery, please visit [mass.gov/estatercovery](https://mass.gov/estatercovery). This information is not a complete description of benefits. Contact the plan for more information.
- ❖ For more information about **Medicare**, you can read the Medicare & You handbook. It has a summary of Medicare benefits, rights, and protections and answers to the most frequently asked questions about Medicare. You can get it at the Medicare website ([medicare.gov](https://medicare.gov)) or by calling 800-MEDICARE (800-633-4227), 24 hours a day, 7 days a week. TTY users should call 877-486-2048. For more information about **MassHealth**, call 800-841-2900. TTY users should call 800-497-4648.
- ❖ ATENCIÓN: Si habla Español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 855-833-8125 (TTY: 711).
- ❖ You can get this document for free in other formats, such as large print, braille, or audio. Call WellSense Senior Care Options (HMO D-SNP) at 855-833-8125, TTY: 711, from October 1 to



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March 31, we are available 7 days a week from 8 a.m. to 8 p.m. EST, and from April 1 to September 30, we are available from Monday through Friday from 8 a.m. to 8 p.m. EST. The call is free.


- ❖ If you need a translator to help with reading this document in another language or an alternate format, please call Member Services. We will assist with translation, note your request, and support future translation needs. If you need to change this request, please feel free to call our Member Services Department. The phone number is listed at the bottom of each page.

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## B. Frequently Asked Questions (FAQ)


The following chart lists frequently asked questions.

Frequently Asked Questions	Answers
<b>What is a Senior Care Options Plan?</b>	A Senior Care Options Plan is a health plan that contracts with both Medicare and MassHealth (Medicaid) to provide benefits of both programs to enrollees. It is for people age 65 and older with Medicare and MassHealth Standard coverage, and no other comprehensive health insurance. A Senior Care Options Plan is an organization made up of doctors, hospitals, pharmacies, providers of long-term services and supports (LTSS), and other providers. It also has care coordinators to help you manage all your providers and services and supports. They all work together to provide the care you need.

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Frequently Asked Questions	Answers
<b>Will you get the same Medicare and MassHealth Standard benefits in WellSense Senior Care Options (HMO D-SNP) that you get now?</b>	<p>You will get your covered Medicare and MassHealth Standard benefits directly from WellSense Senior Care Options (HMO D-SNP). You will work with a team of providers who will help determine what services will best meet your needs. This means that some of the services you get now may change. You may also get other benefits the same way you do now, directly from a State Agency like the Department of Mental Health or the Department of Developmental Services.</p> <p>When you enroll in WellSense Senior Care Options (HMO D-SNP), you and your care team will work together to develop an Individualized Plan of Care to address your health and support needs, reflecting your personal preferences and goals.</p> <p>If you are taking any Medicare Part D prescription drugs that WellSense Senior Care Options (HMO D-SNP) does not normally cover, you can get a temporary supply and we will help you to transition to another drug or get an exception for WellSense Senior Care Options (HMO D-SNP) to cover your drug if medically necessary. For more information, call Member Services.</p>

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Frequently Asked Questions	Answers
<b>Can you go to the same doctors you see now?</b>	<p>Often that is the case. If your providers (including doctors, hospitals, therapists, pharmacies, and other health care providers) work with WellSense Senior Care Options (HMO D-SNP) and have a contract with us, you can keep going to them.</p> <ul style="list-style-type: none"><li>• Providers with an agreement with us are “in-network.” Network providers participate in our plan. That means they accept members of our plan and provide services our plan covers. <b>You must use the providers in WellSense Senior Care Options (HMO D-SNP) network.</b> If you use providers or pharmacies that are not in our network, the plan may not pay for these services or drugs. If you need urgent or emergency care or out-of-area dialysis services, you can use providers outside of WellSense Senior Care Options (HMO D-SNP) plan</li><li>• To find out if your doctors are in the plan’s network, call Member Services or read WellSense Senior Care Options Plan’s (HMO D-SNP) Provider and Pharmacy Directory.</li><li>• If WellSense Senior Care Options (HMO D-SNP) is new for you, we will work with you to develop an Individualized Plan of Care to address your needs.</li></ul>

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# WellSense Senior Care Options (HMO D-SNP): Summary of Benefits 2023

Frequently Asked Questions	Answers
<p><b>What is a WellSense Senior Care Options (HMO D-SNP) care coordinator?</b></p>	<p>A WellSense Senior Care Options (HMO D-SNP) care coordinator is one main person for you to contact. This person helps to manage all your providers and services and make sure you get what you need.</p>
<p><b>What are long-term services and supports (LTSS)?</b></p>	<p>Long-term services and supports are help for people who need assistance to do everyday tasks like taking a bath, getting dressed, making food, and taking medicine. Most of these services are provided at your home or in your community but could be provided in a nursing home or hospital.</p>
<p><b>What is a Geriatric Services Supports Coordinator (GSSC)?</b></p>	<p>A WellSense Senior Care Options (HMO D-SNP) GSSC is a person for you to contact and have on your care team who is an expert in home and community-based services and supports. This person helps you get services that help you live independently in your home.</p>
<p><b>What happens if you need a service but no one in WellSense Senior Care Options (HMO D-SNP) network can provide it?</b></p>	<p>Most services will be provided by our network providers. If you need a service that cannot be provided within our network, WellSense Senior Care Options (HMO D-SNP) will pay for the cost of an out-of-network provider.</p>
<p><b>Where is WellSense Senior Care Options (HMO D-SNP) available?</b></p>	<p>The service area for this plan includes: Barnstable, Bristol, Hampden, Plymouth and Suffolk Counties, Massachusetts. You must live in one of these areas to join the plan.</p>

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Frequently Asked Questions	Answers
<p><b>What is prior authorization?</b></p>	<p>Prior authorization means an approval from WellSense Senior Care Options (HMO D-SNP) to seek services outside of our network or to get services not routinely covered by our network <b>before</b> you get the services. WellSense Senior Care Options (HMO D-SNP) may not cover the service, procedure, item, or drug if you don't get prior approval.</p> <p><b>If you need urgent or emergency care or out-of-area dialysis services, you don't need to get approval first.</b> WellSense Senior Care Options (HMO D-SNP) can provide you or your provider with a list of services or procedures that require you to get prior authorization from WellSense Senior Care Options (HMO D-SNP) before the service is provided. If you have questions about whether prior authorization is required for specific services, procedures, items, or drugs, call Member Services for help.</p> <p>Please note that the plan covers emergency or urgent care services outside the United States or its territories but does NOT cover transportation to return you to the United States or its territories.</p>
<p><b>Do you pay a monthly amount (also called a premium) under WellSense Senior Care Options (HMO D-SNP)?</b></p>	<p>No. Because you have MassHealth Standard, you will not pay any monthly premiums, including your Medicare Part B premium, for your health coverage.</p>
<p><b>Do you pay a deductible as a member of WellSense Senior Care Options (HMO D-SNP)?</b></p>	<p>No. You do not pay deductibles in WellSense Senior Care Options (HMO D-SNP).</p>
<p><b>What is the maximum out-of-pocket amount that you will pay for medical services as a member of WellSense Senior Care Options (HMO D-SNP)?</b></p>	<p>There is no cost sharing for medical services in WellSense Senior Care Options (HMO D-SNP), so your annual out-of-pocket costs will be \$0.</p>

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# WellSense Senior Care Options (HMO D-SNP): Summary of Benefits 2023

## C. List of Covered Services

The following chart is a quick overview of what services you may need, your costs, and rules about the benefits.

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<b>You need hospital care</b>	Hospital stays	\$0	Prior Authorization is required for an inpatient stay.
	Doctor or surgeon care	\$0	N/A
	Outpatient hospital services, including observation	\$0	Prior Authorization may be required for certain outpatient hospital services.
	Ambulatory surgical center (ASC) services	\$0	Prior Authorization may be required for some ambulatory surgical center (ASC) procedures.
<b>You want to see a doctor</b>  <b>(continued on next page)</b>	Visits to treat an injury or illness	\$0	N/A
	Specialist care	\$0	Prior Authorization may be required for certain specialist office visit services.
	Wellness visits, such as a physical	\$0	N/A

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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p><b>You want to see a doctor</b></p> <p><b>(continued)</b></p>	<p>Care to keep you from getting sick, such as flu shots and screenings to check for cancer</p>	<p>\$0</p>	<p>N/A</p>
	<p>“Welcome to Medicare” (preventive visit one time only)</p>	<p>\$0</p>	<p>N/A</p>
<p><b>You need emergency care (continued on next page)</b></p>	<p>Emergency room services</p>	<p>\$0</p>	<p>There is coverage for emergency services outside the United States and its territories but NOT to return you to the United States or its territories.</p> <p>You can see out-of-network providers for emergency services. However, if you receive emergency care at an out-of-network hospital and need inpatient care after your emergency condition is stabilized, the plan must authorize your inpatient stay at the out-of-network hospital.</p>
	<p>Urgent care</p>	<p>\$0</p>	<p>There is coverage for urgent care services outside the United States and its territories but NOT to return you to the United States or its territories.</p> <p>You can see out-of-network providers for urgent care services.</p>

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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<b>You need emergency care (continued)</b>	Emergency Ambulance services	\$0	Prior Authorization is NOT required.
<b>You need medical tests</b>	Diagnostic radiology services, (for example, X-rays or other imaging services, such as CAT scans or MRIs)	\$0	Prior Authorization may be required for some outpatient diagnostic radiology services, including but not limited to, CT scans, MRIs and nuclear cardiac imaging.
	Lab tests and diagnostic procedures, such as blood work	\$0	Prior Authorization may be required for some lab tests (such as genetic testing), diagnostic tests and therapeutic services and supplies.
<b>You need hearing/auditory services</b>	Hearing screenings	\$0	N/A
	Hearing aids	\$0	N/A
<b>You need dental care</b>	Dental check-ups and preventive care	\$0	N/A
	Restorative and emergency dental care; Oral and maxillofacial surgery, periodontics, and prosthodontics	\$0	Prior Authorization is required for most non-routine dental services. Replacement dentures are limited to coverage once every 7 years unless authorized differently by your Primary Care Provider or Primary Care Team.
	Eye exams	\$0	N/A

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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<b>You need eye care</b>	Glasses or contact lenses	\$0	Prior Authorization is needed after the first replacement for additional lost or stolen eyeglasses within 12 months.
	Other vision care	\$0	The plan also provides you with an extra benefit of \$325 per year for glasses, lenses, frames or contact lenses.
<b>You have a behavioral health condition</b>	Behavioral health services	\$0	Prior Authorization is required for Inpatient Behavioral Health services.
	Inpatient and outpatient care and community-based services for people who need behavioral health care	\$0	Prior Authorization is required for Inpatient Behavioral Health services.
<b>You have a substance use disorder</b>	Substance use services	\$0	N/A

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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<b>You need a place to live with people available to help you</b>	Skilled nursing care	\$0	You are covered up to 100 days per calendar year. Additional days may be covered under the Medicaid Institutional Long-term Nursing Home Care (custodial care) benefit. Prior Authorization is required. We waive the 3 day hospital stay prior to admission to the SNF.
	Nursing home care	\$0	Prior Authorization is required.
	Adult Foster Care and Group Adult Foster Care	\$0	Prior Authorization is required.
<b>You need therapy after a stroke or accident</b>	Occupational, physical, or speech therapy	\$0	Prior Authorization is required.
<b>You need help getting to health services (continued on next page)</b>	Ambulance services	\$0	Prior Authorization may be required for non-emergency transportation/ambulance services.
	Emergency transportation	\$0	N/A
	Transportation to medical appointments and services	\$0	Prior Authorization may be required for non-emergency medical transportation/ambulance services. Please see the Evidence of Coverage for information on how to arrange this transportation.

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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p><b>You need drugs to treat your illness or condition</b></p> <p><b>(Continued on next page)</b></p>	<p>Medicare Part B prescription drugs</p>	<p>\$0</p>	<p>Part B drugs include drugs given by your doctor in his or her office, some oral cancer drugs, and some drugs used with certain medical equipment. Read the Evidence of Coverage for more information on these drugs.</p> <p>Prior Authorization may be required for some Part B Drugs.</p>

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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<b>You need drugs to treat your illness or condition</b>  <b>(continued)</b>	Generic drugs (no brand name)	\$0	There may be limitations on the types of drugs covered. Please see WellSense Senior Care Options (HMO D-SNP)'s List of Covered Drugs (Drug List) for more information.
	Brand name drugs	\$0	There may be limitations on the types of drugs covered. Please see WellSense Senior Care Options (HMO D-SNP)'s List of Covered Drugs (Drug List) for more information.

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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p><b>You need drugs to treat your illness or condition</b></p> <p><b>(continued)</b></p>	<p>Over-the-counter (OTC) drugs</p>	<p>\$0</p>	<p>There may be limitations on the types of drugs covered. Please see WellSense Senior Care Options (HMO D-SNP)'s List of Covered Drugs (Drug List) for more information.</p> <p>The Plan provides coverage for both Medicare and Medicaid (MassHealth) covered OTC items and services. Please see the Evidence of Coverage for more information.</p> <p>The plan will give you one card to use for a combined OTC and Food and Produce benefit. Each month you will have \$75 to spend (\$900 per calendar year). You can use this monthly amount for any combination of OTC items and Food and Produce, described below. Any unused amounts will not roll-over to the next month during the same calendar year. You must use it at a network provider.</p>

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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<b>You need help with food:</b>	Food and Produce	\$0	The plan will give you one card to use for a combined OTC and Food and Produce benefit. Each month you will have \$75 to spend (\$900 per calendar year). You can use this monthly amount for any combination of Food and Produce and OTC items, described above. Any unused amount will not rollover to the next month. You must use it at a network provider.
<b>You need help getting better or have special health needs</b>	Rehabilitation services	\$0	Prior Authorization is required.
	Medical equipment for home care	\$0	Prior Authorization is required.
	Dialysis services	\$0	N/A
	Diabetes self-management training, diabetic services and supplies	\$0	Including but not limited to glucose monitors and supplies, therapeutic custom-molded shoes (limits apply) for members with severe diabetic foot disease and who meet the Medicare and/or MassHealth (Medicaid) requirements.
<b>You need foot care</b>	Podiatry services	\$0	Routine foot care is not covered except for members with certain medical conditions affecting the lower limbs. Prior Authorization may be required.

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	Orthotic services	\$0	Orthotic services are not covered except for members with certain medical conditions affecting the lower limbs. Prior Authorization may be required.
<b>You need durable medical equipment (DME)</b>  Note: This is not a complete list of covered DME. For a complete list, contact Member Services or refer to Chapter 4 of the Evidence of Coverage.	Wheelchairs, crutches, and walkers	\$0	Prior Authorization is required.
	Nebulizers	\$0	Prior Authorization is required.
	Oxygen equipment and supplies	\$0	Prior Authorization is required.
<b>You need help living at home (continued next page)</b>	Home health services	\$0	Prior Authorization is required.
	Home services, such as cleaning or housekeeping	\$0	N/A
	Adult day health or other support services	\$0	Prior Authorization is required.
<b>You need help living at home (continued)</b>	Day habilitation services	\$0	Prior Authorization is required.
	Services to help you live on your own (home health care services or personal care attendant services)	\$0	Prior Authorization is required for many of these services. Please see your Evidence of Coverage for more information.

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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<b>Additional services</b>  <b>(continued next page)</b>	Chiropractic services	\$0	Coverage is provided for manual manipulation of subluxation of the spine (Medicare) and all other conditions are covered up to a maximum of up to 20 visits per calendar year (MassHealth (Medicaid)).
	Transportation (non-medical purposes)	\$0	Eight (8) one-way transports per month are covered for social transportation, not to exceed 15 miles each way.
	Prosthetic services	\$0	Prior Authorization is required.
	Radiation therapy	\$0	Prior Authorization may be required.
	Services to help manage your disease	\$0	N/A
	Acupuncture services for certain conditions	\$0	20 office visits per year for pain management. Medicare covers acupuncture for chronic low back pain and Medicaid covers acupuncture for the relief of pain. Prior authorization is required beyond the 20 visits.
	Short-term respite care not related to hospice care.	\$0	Prior Authorization is required.

**?** **If you have questions**, please call WellSense Senior Care Options (HMO D-SNP) at 855-833-8125, TTY: 711. From October 1 to March 31, we are available 7 days a week from 8 a.m. to 8 p.m. EST, and from April 1 to September 30, we are available from Monday through Friday from 8 a.m. to 8 p.m. EST. The call is free. **For more information**, visit [wellsense.org/sco](https://wellsense.org/sco).

# WellSense Senior Care Options (HMO D-SNP): Summary of Benefits 2023

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
	Personal emergency response system	\$0	N/A
<b>Additional services (continued)</b>	Home and community-based services, including long-term services and supports, including but not limited to, home delivered meals under certain circumstances, chore services, laundry services, and grocery shopping	\$0	Prior Authorization may be required for some of these services. Please see your Evidence of Coverage for more information.
	Fitness Services – Supplemental Benefit	\$0	Silver Sneakers Program- Members will have access to a network of gyms for their fitness benefit.

The above summary of benefits is provided for informational purposes only and is not a complete list of benefits. For a complete list and more information about your benefits, you can read the WellSense Senior Care Options (HMO D-SNP) Evidence of Coverage. If you don't have an Evidence of Coverage, call WellSense Senior Care Options (HMO D-SNP) Member Services at the number at the bottom of this page to get one. If you have questions, you can also call WellSense Senior Care Options Member Services or visit [wellsense.org/sco](https://wellsense.org/sco).

## D. Services that WellSense Senior Care Options (HMO D-SNP), Medicare, and MassHealth (Medicaid) do not cover

This is not a complete list. Call Member Services to find out about other excluded services.

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# WellSense Senior Care Options (HMO D-SNP): Summary of Benefits 2023

## Services WellSense Senior Care Options (HMO D-SNP), Medicare, and MassHealth do not cover

Services considered not reasonable and necessary, according to the standards of Original Medicare.	Experimental medical and surgical procedures, equipment and medications except as described in the Evidence of Coverage.
Personal items in your room at a hospital	Fees charged for care by your immediate relatives or members of your household.
Naturopath services (uses natural or alternative treatments)	

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# WellSense Senior Care Options (HMO D-SNP): Summary of Benefits 2023

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## E. Your rights as a member of the plan

As a member of WellSense Senior Care Options (HMO D-SNP), you have certain rights. You can exercise these rights without being punished. You can also use these rights without losing your health care services. We will tell you about your rights at least once a year. For more information on your rights, please read the Evidence of Coverage. Your rights include, but are not limited to, the following:


- ❖ **You have a right to respect, fairness, and dignity.** This includes the right to:
  - Get covered services without concern about medical condition, health status, receipt of health services, claims experience, medical history, disability (including mental impairment), marital status, age, sex (including sex stereotypes and gender identity) sexual orientation, national origin, race, color, religion, creed or public assistance
  - Get information in other formats (for example, large print, braille, or audio) free of charge
  - Be free from any form of physical restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation
  
- ❖ **You have the right to get information about your health care.** This includes information on treatment and your treatment options. This information should be in a format you can understand. This includes the right to get information on:
  - Description of the services we cover
  - How to get services
  - How much services will cost you (\$0; this plan is not subject to cost-sharing).
  - Names of health care providers
  
- ❖ **You have the right to make decisions about your care, including refusing treatment.** This includes the right to:
  - Choose a primary care provider (PCP). You can change your PCP at any time during the year
  - See a women's health care provider without a referral
  - Get your covered services and drugs quickly
  - Know about all treatment options, no matter what they cost or whether they are covered
  - Refuse treatment, even if your health care provider advises against it
  - Stop taking medicine, even if your health care provider advises against it
  - Ask for a second opinion. WellSense Senior Care Options (HMO D-SNP) will pay for the cost of your second opinion visit

 **If you have questions**, please call WellSense Senior Care Options (HMO D-SNP) at 855-833-8125, TTY: 711. From October 1 to March 31, we are available 7 days a week from 8 a.m. to 8 p.m. EST, and from April 1 to September 30, we are available from Monday through Friday from 8 a.m. to 8 p.m. EST. The call is free. **For more information**, visit [wellsense.org/sco](https://wellsense.org/sco).

# WellSense Senior Care Options (HMO D-SNP): Summary of Benefits 2023

- Make your health care wishes known in an advance directive
- ❖ **You have the right to timely access to care that does not have any communication or physical access barriers.** This includes the right to:
  - Get timely medical care
  - Get in and out of a health care provider's office. This means barrier free access for people with disabilities, in accordance with the Americans with Disabilities Act
  - Have interpreters to help with communication with your health care providers and your health plan
- ❖ **You have the right to seek emergency and urgent care when you need it.** This means you have the right to:
  - Get emergency services without prior approval in an emergency
  - See an out-of-network urgent or emergency care provider, when necessary
- ❖ **You have a right to confidentiality and privacy.** This includes the right to:
  - Ask for and get a copy of your medical records in a way that you can understand and to ask for your records to be changed or corrected
  - Have your personal health information kept private
- ❖ **You have the right to make complaints about your covered services or care.** This includes the right to:
  - File a complaint or grievance against us or our providers
  - Ask for a state fair hearing
  - Get a detailed reason for why services were denied

For more information about your rights, you can read the Evidence of Coverage. If you have questions, you can also call WellSense Senior Care Options (HMO D-SNP) Member Services.

 **If you have questions**, please call WellSense Senior Care Options (HMO D-SNP) at 855-833-8125, TTY: 711. From October 1 to March 31, we are available 7 days a week from 8 a.m. to 8 p.m. EST, and from April 1 to September 30, we are available from Monday through Friday from 8 a.m. to 8 p.m. EST. The call is free. **For more information**, visit [wellsense.org/sco](https://wellsense.org/sco).



# WellSense Senior Care Options (HMO D-SNP): Summary of Benefits 2023

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## F. How to file a complaint or appeal a denied service

If you have a complaint or think WellSense Senior Care Options (HMO D-SNP) should cover something we denied, call the number at the bottom of the page. You may be able to appeal our decision.

For questions about complaints and appeals, you can read Chapter 8 of the Evidence of Coverage. You can also call WellSense Senior Care Options (HMO D-SNP) Member Services.

For phone numbers and addresses to call or write related to complaints, grievances, and appeals, please refer to Chapter 2 of the Evidence of Coverage.


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## G. What to do if you suspect fraud

Most health care professionals and organizations that provide services are honest. Unfortunately, there may be some who are dishonest.

If you think a doctor, hospital or other pharmacy is doing something wrong, please contact us.

- Call us at WellSense Senior Care Options (HMO D-SNP) Member Services. Phone numbers are on the cover of this summary.
- Or call the MassHealth Customer Service Center at 800-841-2900. TTY users may call 800-497-4648.
- Or call Medicare at 800-MEDICARE (800-633-4227). TTY users may call 877-486-2048. You can call these numbers for free, 24 hours a day, 7 days a week.

 **If you have questions**, please call WellSense Senior Care Options (HMO D-SNP) at 855-833-8125, TTY: 711. From October 1 to March 31, we are available 7 days a week from 8 a.m. to 8 p.m. EST, and from April 1 to September 30, we are available from Monday through Friday from 8 a.m. to 8 p.m. EST. The call is free. **For more information**, visit [wellsense.org/sco](https://wellsense.org/sco).

# WellSense Senior Care Options (HMO D-SNP): Summary of Benefits 2023

**If you have general questions or questions about our plan, services, service area, billing, or Member ID Cards, please call WellSense Senior Care Options (HMO D-SNP) Member Services:**

855-833-8125

Calls to this number are free. Representatives are available Monday – Friday, 8:00 a.m. – 8:00 p.m. (Representatives are available 7 days a week, 8:00 a.m. – 8:00 p.m. from October 1 – March 31.)


Member Services also has free language interpreter services available for non-English speakers.  
TTY - 711

This number requires special telephone equipment and is only for people who have difficulties with hearing or speaking.

Calls to this number are free. Representatives are available Monday – Friday, 8:00 a.m. – 8:00 p.m. (Representatives are available 7 days a week, 8:00 a.m. – 8:00 p.m. from October 1 – March 31). Calls to this number are free.

**If you have questions about your health:**

- Call your primary care provider (PCP). Follow your PCP's instructions for getting care when the office is closed.

 **If you have questions**, please call WellSense Senior Care Options (HMO D-SNP) at 855-833-8125, TTY: 711. From October 1 to March 31, we are available 7 days a week from 8 a.m. to 8 p.m. EST, and from April 1 to September 30, we are available from Monday through Friday from 8 a.m. to 8 p.m. EST. The call is free. **For more information**, visit [wellsense.org/sco](https://wellsense.org/sco).