Dear Member,

We are celebrating 5 years of providing Medicare Advantage to Monterey County. And we are growing. We have you to thank for that. You and many others have made the decision to entrust us with your healthcare needs. We want to extend our sincerest thanks to you for being a valued member of Aspire Health Plan.

We also want to promise that we’re committed to serving you. We offer a full range of healthcare services, and we coordinate access to those services in a way that makes it easiest on you. Healthcare is complicated enough — we know the last thing you need is another layer of complexity from your insurance coverage.

Based on customer surveys and a wide range of government measures, we are proud to announce that Aspire has achieved a 4-star rating out of 5 stars from the Centers for Medicare & Medicaid Services for 2019. This is an indication of your satisfaction with our services, access to care when and where you need it, the quality of the care you receive, and many other components. Only 25 percent of Medicare Advantage plans in the nation achieved 4 stars or higher this year. We celebrate this together with you, and we are aware that we must continue to earn your trust and satisfaction with our service every day. This is why we encourage your feedback and want to hear from you when things aren’t up to your expectations and/or when you see areas where we can improve on your experience.

With this in mind, we are covering a number of topics in this edition of the Aspire Advocate that we hope you will find informative and helpful as we go into 2019.

Thank you for your trust in Aspire. We are happy to be working with your interests in mind to help you attain and keep your best state of health. One of the best things you can do for Aspire is to tell a friend about Aspire. We will be delighted to introduce them to their options.

Yours in good health,
Scott Kelly, COO
Aspire Health Plan
“I want to be healthier, but it’s just so hard to get started. Life gets in the way.”

“My doctor told me I need to lose weight to reduce my health risks, but I’ve tried everything. Losing weight feels impossible.”

Do these thoughts sound familiar? Maybe you’ve had them yourself or heard a family member say something similar. The bottom line: Eating better, exercising more, and learning how best to manage your health can be challenging. Aspire Health Plan is here to help.

We understand that what works for one person does not always work for another. It’s important to customize a plan that will work long-term, rather than create a “one-size-fits-all” approach that can be difficult to maintain. With chronic conditions such as diabetes and prediabetes becoming more prevalent in Monterey County and across the country, there is no better time than today to focus on your health and wellness.

As an Aspire Health Plan member, you have access to a variety of programs designed to help you achieve your own unique health goals. With options for telephone, online, and in-person support, these programs offer the opportunity to partner with a live health coach who will work with you to foster the accountability, motivation, and information you need to succeed.

### Coach’s corner
with Community Health Innovation’s Natalie Plinneke, Health Coach, DTR

**AVAILABLE PROGRAMS:**

**Diabetes Prevention Program** offered in-person through the YMCA or online through Omada

- **YMCA**
  - This one-year program has 25 sessions and is led by a trained lifestyle coach. You will meet in small groups (no more than 15) to learn about healthy lifestyle changes
  - Available to eligible Aspire Health Plan members at no cost and includes an adult YMCA membership

- **Omada**
  - An online lifestyle change program that inspires healthy habits that last. You’ll get a wireless smart scale, weekly online lessons, a small group of participants, and interaction with a professional health coach
  - Available to eligible Aspire Health Plan members at no cost — a $650 value. Take a 1-minute health test to see if you’re eligible today: www.omadahealth.com/aspire

**Health Coaching Program** provides one-on-one telephone appointments with a professional health coach based on your schedule. Trained in chronic-condition management and preventive health and wellness, your coach works with you in goal setting, problem solving, and building a healthy lifestyle plan. No eligibility requirements; available to all Aspire Health Plan members at no cost.

**Silver&Fit™ — NEW fitness benefit starting in 2019**

A program designed to keep you moving and feeling strong. Choose between two options:

- **Fitness center access.** Pay a $25 annual membership fee and gain access to a wide variety of facilities including Montage Wellness Center, Curves®, Fit Republic, Gold’s Gym®, In-Shape®, Snap Fitness™, and more

- **Home fitness kits.** Pay $10 for two home exercise kits (34 available kits) including chair exercises, yoga, cardio, barre, vài chi, and more

Also included at no cost: healthy aging educational topics online or mailed, Silver Slate newsletter four times a year, and the opportunity to track your fitness, on the Silver&Fit™ website, to earn rewards.

Aspire members now have access to Montage Wellness Centers through the Silver&Fit™ benefit.
Still need Enhanced Benefits?

It’s not too late to enroll in an Enhanced Benefits package. The deadline is February 28, for a March 1 effective date.

Enhanced Benefits are optional, additional benefits you may add for an additional monthly premium. This year Aspire is offering our members two options for Enhanced Benefits.

**Option A** is $44.90 per month and includes comprehensive dental and vision benefits.

**Option B** is $49.90 per month and includes dental, vision, hearing, additional transportation, and post-discharge, home-delivered meals.


Or, call Member Services at (855) 570-1600, TTY 711 and ask to have an Enhanced Benefits application mailed to your home.

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Member experience surveys coming soon

Every year surveys are mailed to randomly selected Aspire Health Plan members asking for information about the health plan and healthcare services received. These surveys are called the Consumer Assessment of Healthcare Providers and Systems survey (CAHPS) and the Health Outcomes Survey (HOS), conducted by our partner, DataStat, Inc.

Health plans are given Star ratings based on a number of performance measures, including member survey responses. **You can help just by completing the anonymous survey and giving us your honest feedback. It helps Aspire know how we are doing at helping members get the care they need.**

Past member feedback has helped us make important changes to simplify you getting the care you need when you need it. Your feedback, both positive and negative, helps us stay connected to what matters most to you. **If you receive a survey, please answer and return it. Your voice makes a difference. We want to hear from you.**

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You don’t have to wait for a survey.

You can always call Member Services with your feedback.

(855) 570-1600
At Aspire Health Plan, our goal is to support your well-being with the kind of care and expertise you value and trust. That’s a tall order, so we collaborate with the local hospitals you know and a handful of valued partners who provide expertise in a variety of services. These trusted partners are part of a team of people with your best interests in mind.

If you are a new member, you have likely completed a Health Risk Assessment. If that assessment was missing any information, our Member Services team will call you. Based on the information you provide to us, you may receive a call from one of our health coaches or care managers to discuss programs that might benefit your health.

Throughout the year, all members may hear from the following:
Your primary care doctor (PCP) will reach out to new members at the start of the year, and to existing members later in the year, to schedule your Annual Wellness Visit. During this visit, your PCP will learn your family and personal medical history to determine what healthcare risk factors you may have so you can develop a personalized plan to address those risks. By scheduling your Annual Wellness Visit early in the year, you can create a plan for addressing recommended preventive screenings, which can be scheduled throughout the year.

Aspire also partners with Signify Health to offer a wellness and prevention program called Health at Home. Health at Home is a no-cost, in-home assessment with a licensed clinician. This visit is a wonderful complement to the Annual Wellness Visit with your primary care physician.

To check on your prescriptions, Pharm MD pharmacists and technicians often reach out to members with certain chronic conditions, we want to make sure you are on the best medicines for your medical conditions, and that you are taking them as intended by your doctor. This is a great opportunity to ask questions to ensure you are getting the desired results.

We also partner with CastiaRX. These are pharmacists who provide Medication Therapy Management, at no cost, to members. They review medications, answer questions, address drug interactions, and may be able to find ways to reduce your prescription drug costs.

All of our trusted partners will identify themselves as calling on behalf of Aspire Health Plan. If you are ever in doubt about who is calling you, please call Member Services at (855) 570-1600, and one of our representatives will be able to confirm if the caller is one of our partners.
MEDICATION THERAPY MANAGEMENT

Medication Therapy Management (MTM) is a no-cost program offered by Aspire that is designed to help ensure our members are getting the most out of their prescription medications. **You are eligible for this program if you:**

- Take 7 or more routine medications covered by Medicare (Part D) within 3 months
- Have 3 or more qualifying conditions like diabetes, Chronic Heart Failure (CHF), high cholesterol, mental health/depression, Alzheimer’s disease, or Chronic Obstructive Pulmonary Disease (COPD)
- Spend more than $4,044 a year on Medicare (Part D)-covered medications

If you meet these criteria, our team of clinical pharmacists and nurses will provide you with a one-on-one phone consultation. The consultation may help you save money or help identify potential drug interactions.

At the end of your consultation, we will send you a summary of everything that was discussed, which can then be shared with your doctor during your next appointment.

MAIL ORDER

Did you know that Aspire offers a mail-order pharmacy option that can save you time and money? If you take long-term medications, choosing to have your medications filled by our mail-order pharmacy may be right for you. This can help save time by having your prescription drugs delivered right to your home, allowing you to skip the line and the inconvenience of visiting your local pharmacy each month.

This option can also help you save money. Shipping is free, and you can also save by receiving a three-month supply for the cost of two co-payments. Over time, that savings can really add up.

You can manage your prescriptions by phone, email, or online. Pharmacy specialists are available 24 hours a day, seven days a week to help answer questions.

**If you would like more information about our mail-order pharmacy option, call us at (866) 516-1121.**

GETTING TO KNOW ASPIRE HEALTH PLAN’S PRESCRIPTION DRUG TRANSITION POLICY

As a new or continuing member of Aspire, you may be taking drugs that are not on our prescription drug formulary for 2019, or that may be subject to certain restrictions. If so, we encourage you to talk to your doctor to decide if it would be appropriate to switch to a drug that we do cover. While you and your doctor determine the right course of action, we can minimize any disruption in your treatment by allowing a transition fill in certain situations. We may cover your medication with a temporary supply while you are discussing options with your doctor. **Our transition policy applies most commonly during the first 90 days of new membership with Aspire or for existing Aspire members during your first 90 days of the 2019 plan year.**
We asked our Member Services team to share the questions they hear most often.

WE’VE COMPILED THEM HERE, WITH ANSWERS YOU CAN REFERENCE ALL YEAR LONG.

What do I do if I’m having trouble getting an appointment with my primary care physician?

You can always call Member Services. We would be happy to assist you in getting an appointment.

Do I have to visit the primary care physician listed on my Aspire Health Plan identification card?

We encourage you to coordinate all of your care through your primary care physician (PCP). You may change your PCP throughout the year by calling Member Services. If your PCP is out of town or unavailable, you may see any physician that is in-network.

Don’t forget, you have access to any urgent care or emergency department in the United States should you need immediate medical care while at home or while traveling.

I signed up for the Enhanced Benefits — Option A or Option B, and need help locating an in-network dentist or optometrist.

A list of in-network dentists and optometrists is available on our website www.aspirehealthplan.org. Click on “Find a Doctor” and then click on “Dental Providers” or “Routine Vision Providers/Hardware” in the middle of the page. You can also call Member Services, and we would be happy to assist you with finding a provider.

My doctor sent me a bill, but I’m not sure if the amount I owe is correct. What do I do?

Call Member Services and we will contact your doctor to determine if the billing is correct.

I’m having trouble affording my prescription drug co-payments. Is there a program available to help?

Yes, the Social Security Administration has a program called “Extra Help.” The Extra Help program is available to individuals with limited income and may help pay your prescription drug costs. You may apply directly with the Social Security Administration by calling (800) 772-1213, or at www.ssa.gov/benefits/medicare/prescriptionhelp. If you have questions or would like assistance with the application, please call Member Services.

Can I set up my monthly premium to be paid automatically?

Yes. Please call Member Services and we would be happy to mail you a form to be completed and returned to us. You can also request automatic deduction from your Social Security payment by calling Member Services.

Can I receive material by email?

Yes. You can opt in to receive material, such as the Aspire Advocate, by email. Simply call Member Services.

Member Services (855) 570-1600
Community Connections

Classes are open to the public. Bring a friend.

**Friday, January 25, 10-11:30 a.m.**

**IDENTIFYING GOALS AND BUILDING RESILIENCE**

Be the healthiest version of yourself. Understand the value of goal setting and how it can impact your overall health and vitality. Focus on how to set and achieve your goals, how to harness motivation, and re-train our habits.

Montage Wellness Center, 2920 2nd Ave., Marina

**Tuesday, January 29, 10-11:30 a.m.**

**NEW YEAR, NEW (CLUTTER FREE) HOME**

From chaos to clean — easy tips for organizing your home. Join professional organizer, and retired interior designer Deberra O’Brien as she leads us through easy, manageable techniques for creating spaces we love.

Point Pinos Grill, 79 Asilomar Blvd., Pacific Grove

**Thursday, January 31, 10:45-11:45 a.m.**

**IN-SHAPE FITNESS CENTER OPEN HOUSE AND CLASS DEMONSTRATIONS**

Join us for a no-obligation tour of this popular fitness center, see senior fitness class demonstrations, and enjoy some healthy snacks. Staff will be available to assist you in enrolling if you choose. Aspire Health Plan Members now have access to this gym through the Silver&Fit™ benefit.

In-Shape, 2370 N. Fremont St., Monterey

For more information or to register, please visit: www.aspirehealthplan.org/connections or call (877) 663-7651. Topics, locations, dates, and times are subject to change. Seating is limited.

The Silver&Fit program is provided by American Specialty Health Fitness, Inc., a subsidiary of American Specialty Health Incorporated (ASH). Silver&Fit, The Silver Slate are trademarks of ASH and used with permission herein.

Aspire Health Plan is a Medicare Advantage HMO plan sponsor with a Medicare contract. Enrollment in Aspire Health Plan depends on contract renewal. This information is not a complete description of benefits. Contact the plan for more information. Aspire Health Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATENCION: si habla español, tiene a su disposicion servicios gratuitos de asistencia lingüística. Llame al 1-855-570-1600 (TTY: 711) 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電1-855-570-1600 (TTY: 711) Medicare evaluates plans based on a 5-star rating system. Star Ratings are calculated each year and may change from one year to the next. Other providers are available in our network. We are open 8 a.m.–8 p.m PT Monday through Friday from April 1 through September 30 (except certain holidays) and 8 a.m.–8 p.m. seven days a week from October 1 through March 31.
We love referrals. The greatest compliment you can give Aspire is a referral to your friends and family. Thank you for your membership in Aspire Health Plan. Help us grow by sharing Aspire with the people you care about.