

## Frequently Asked Questions for Medicare Advantage (MA)

### 1. What is Today's Options?

Today's Options is a Medicare Advantage Private Fee-for-Service (PFFS) plan. Beneficiaries have three plan options to choose from—Basic, Premier, and Value.

### 2. How do Private Fee-for-Service plans work?

- You may go to any doctor, specialist, or hospital anywhere in the U.S. that is willing to provide care and accepts Today's Options' terms and conditions.
- When you enroll in Today's Options, you are still in the Medicare program and are entitled to all medically necessary healthcare services that are covered by Medicare.
- Today's Options also has deductible, co-payment, and coinsurance amounts that are different than those under Original Medicare.

### 3. Who can join Today's Options?

You can join Today's Options if:

- You have both Medicare Part A (Hospital Insurance) and Part B (Medical Insurance).
- You do not have End-Stage Renal Disease (permanent kidney failure treated by dialysis or a transplant, sometimes called ESRD). If you have ESRD and are currently an enrollee with a Medicare Advantage organization offering a PFFS plan, you may join Today's Options.
- You live in the service area of the plan.

### 4. How is this plan different from HMO (Health Maintenance Organization) plans?

Today's Options does not restrict you to a network of providers. You can choose the provider you want to see, and you do not need a referral to see a specialist.

### 5. How do I obtain care when I am in a Medicare PFFS plan?

You need to inform your provider that you are enrolled in Today's Options. You do this by showing the Today's Options plan identification card.

- If your provider accepts the plan's terms and conditions, he/she must bill Today's Options for those services. You are only required to pay the cost-sharing amount allowed by the plan.
- If you have any questions about whether your Medicare PFFS plan will pay for a service, you have the right under the law to have a written/binding advance coverage determination made for the service.
- You are not required to get pre-approved before obtaining services. But you need to notify the plan of certain planned Inpatient Care, Outpatient Care, Outpatient Medical Services and Supplies. Please refer to your Summary of Benefits or Evidence of Coverage document if you are not sure.

### 6. How do I receive Emergency Care?

You have the right to get emergency care when and where you need it without any prior approval from Today's Options. If you think your health is in serious danger because you have severe pain, a bad injury, sudden illness, or an illness quickly getting much worse, you can get emergency care anywhere in the U.S.

### 7. What are the differences between Basic, Premier, and Value plans?

Today's Options offers the same Medicare Part A & B coverage, but varies by premium, copayment, and coinsurance. To find out which plan suits your needs, refer to the Summary of Benefits.

## 8. Are my doctors permitted to bill me for services?

No. Today's Options does not allow doctors, hospitals, and other providers to bill you more than the plan pays for services.

## 9. What if I already have coverage under a Medicare Supplement policy?

A Medicare Supplement policy will be of no use to you while you are in Today's Options. Generally, it is not legal for anyone to sell you a Medicare Supplement policy while you are enrolled in a Private Fee-for-Service plan or any other Medicare Advantage organization.

## 10. Do I have any protections if I drop my Medicare Supplement policy when I join Today's Options?

If you drop your Medicare Supplement policy when you join Today's Options, you may not have a right to get your old policy back or to buy a new Medicare Supplement policy. You could also be subjected to a pre-existing condition exclusion under any Medicare Supplement policy you are able to buy.

There are special circumstances under which you are guaranteed a right to buy a Medicare Supplement policy and be protected from pre-existing condition exclusions when you leave Today's Options. Ask your Today's Options agent for more details. These special circumstances include:

- Your Today's Options plan coverage ends (through no fault of your own).
- You join Today's Options for the first time (and you have not previously been in any kind of a Medicare-managed care organization or Medicare SELECT plan) AND within one year of joining, you voluntarily leave the plan:
  - If you joined Today's Options when you were new to Medicare at age 65, you will be able to choose any Medicare Supplement policy you want.

- If you were already in Medicare and had a policy before you joined Today's Options, you will be able to get the same policy back if it is still available from your old company.

If you have a Medicare Supplement policy and join Today's Options, you should keep your Medicare Supplement policy until you are satisfied you would like to remain enrolled in Today's Options.

## 11. What happens if my Today's Options plan coverage ends?

If your plan stops providing coverage in your area, you can join another Medicare Advantage health plan, if one is available, or you can return to Original Medicare.

Today's Options is offered by American Progressive Life & Health Insurance Company of New York and Pyramid Life Insurance Company, Medicare Advantage Private Fee-for-Service organizations that contract with the Centers for Medicare and Medicaid Services (CMS).

A Medicare Advantage Private Fee-for-Service plan works differently than a Medicare Supplement plan. Your doctor or hospital must agree to accept the plan's terms and conditions prior to providing healthcare services to you. If your doctor or hospital does not agree to accept our payment terms and conditions, they may not provide healthcare services to you, except in emergencies. Providers can find the plan's terms and conditions on our website at [www.todaysoptions.com/providers.aspx](http://www.todaysoptions.com/providers.aspx).

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