



Astiva Health Member Services

1-866-688-9021 TTY: 711

Hours of Operation are:

8:00 A.M. to 8:00 P.M. seven days a week

Astiva Health Benefits 2021

Benefits	Astiva Health Advantage (HMO) Orange County 001	Astiva Health Advantage (HMO) San Diego County 003
Monthly Plan Premium	\$0	\$0
Maximum Out of Pocket (MOOP)	\$1,899	\$3,000
Medicare Part B Premium Rebate	\$7	\$7
Primary Care Physician Visit	\$0 Copay	\$0 Copay
Specialist Physician Visit	\$0 Copay	\$0 Copay
Inpatient Hospital Care	\$0 Copay unlimited days	\$0 days 1 - 4 \$75 days 5 - 9 \$0 days 10 - 90
Outpatient Services / Surgery	\$0 Copay	\$0 Copay
Emergency Room Visit	\$90 Copay; waived if admitted to hospital	\$90 Copay; waived if admitted to hospital
Worldwide Emergency Coverage	\$90 Copay; waived if admitted to hospital \$25,000 limit per year; emergency services only	\$90 Copay; waived if admitted to hospital \$25,000 limit per year; emergency services only
Urgent Care Visit	\$0 Copay	\$0 Copay
Ambulance Services	\$99 Copay	\$99 Copay
Skilled Nursing Facility Stay Care	Days 1 - 20: \$0 Copay per day Days 21 - 100: \$184 Copay per day	Days 1 - 20: \$0 Copay per day Days 21 - 100: \$184 Copay per day
Durable Medical Equipment	\$0 Copay up to \$100; 20% of cost over \$101	\$0 Copay up to \$100; 20% of cost over \$101
Lab Services	\$0 Copay	\$0 Copay
Routine X-rays	\$0 Copay	\$0 Copay
Eyeglasses	\$0 Copay; up to \$200 value every year	\$0 Copay; up to \$200 value every year
Preferred Generic Drugs T1	\$0 Copay 30 - day supply \$0 Copay 90 - day supply	\$0 Copay 30 - day supply \$0 Copay 90 - day supply
Generic Drugs T2	\$0 Copay 30 - day supply \$0 Copay 90 - day supply	\$0 Copay 30 - day supply \$0 Copay 90 - day supply
Preferred Brand Drugs T3	\$32 Copay 30 - day supply \$64 Copay 90 - day Mail Order	\$32 Copay 30 - day supply \$64 Copay 90 - day Mail Order
Non-Preferred Brand Drugs T4	\$95 Copay 30 - day supply \$190 Copay 90 - day Mail Order	\$95 Copay 30 - day supply \$190 Copay 90 - day Mail Order
Specialty Drugs T5	33% of the drug cost to the plan Coinsurance	33% of the drug cost to the plan Coinsurance
Transportation Services	\$0 Copay; 48 one - way trip(s) to plan - approved locations within 25 miles.	\$0 Copay; 48 one - way trip(s) to plan - approved locations within 25 miles.
Fitness	\$0 Copay	\$0 Copay
Over The Counter (OTC)	\$75 quarterly allowance (no rollover)	\$75 quarterly allowance (no rollover)

Astiva Health Advantage (HMO) is a HMO plan with Medicare contracts. Enrollment in Astiva Health depends on contract renewal. You must continue to pay your Medicare Part B premium. This information is not a complete description of benefits. Call 1-866-688-9021 (TTY: 711) for more information. Our Call Center hours of operations are 8:00 A.M. – 8:00 P.M. seven days a week.

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