Find out more about your Johns Hopkins Advantage MD options.

There's a Medicare Advantage plan at a price that's right for you.

Call toll free 1-888-403-7662 (TTY: 711)

8 a.m. to 8 p.m., 7 days a week

8 a.m. to 8 p.m., Monday – Friday between April 1 and September 30



**The benefits mentioned are part of a special supplemental program for the chronically ill. Not all members qualify. §From April I – September 30, you will need to leave a message on holidays and weekends.

Johns Hopkins Advantage MD is a Medicare Advantage Plan with a Medicare contract offering HMO and PPO products. Enrollment in Johns Hopkins Advantage MD HMO or PPO depends on contract renewal.

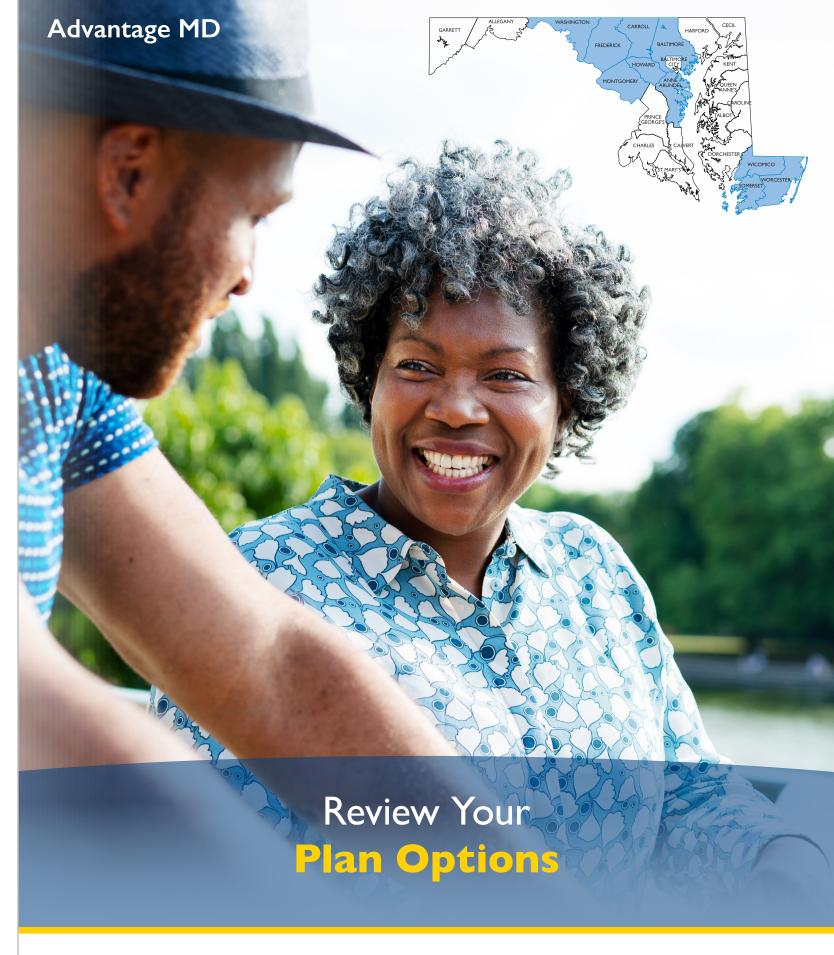
Johns Hopkins Advantage MD D-SNP is an HMO D-SNP plan with a Medicare contract and a State of Maryland Medicaid contract. Enrollment in Johns Hopkins Advantage MD D-SNP (HMO) depends on contract renewal.

To join a Johns Hopkins Advantage MD plan, you must have Medicare Part A and Part B, and live in the service area. Please contact the plan for more details.

Out-of-network/non-contracted providers are under no obligation to treat Johns Hopkins Advantage MD members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

Advantage MD products are offered by Hopkins Health Advantage, Inc., a Maryland health insurer.

Johns Hopkins Advantage MD (PPO) and Johns Hopkins Advantage MD (HMO) comply with applicable Federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex. Johns Hopkins Advantage MD does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. Foreign Language Assistance; Spanish: ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al I-877-293-5325 (TTY: 711); Chinese: 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 I-888-403-7662 (TTY: 711)。





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Which plan is right for me?



Medical Benefits	Johns Hopkins Advantage MD Tribute (HMO)	Johns Hopkins Advantage MD (HMO)	Johns Hopkins Advantage MD D-SNP (HMO)	Johns Hopkins Advantage MD Primary (PPO)	Johns Hopkins Advantage MD (PPO)	Johns Hopkins Advantage MD Plus (PPO)
Counties	Anne Arundel, Baltimore, Frederick, Howard, Montgomery	Anne Arundel, Baltimore, Carroll, Frederick, Howard, Montgomery, Somerset, Washington, Wicomico, Worcester	Anne Arundel, Baltimore, Carroll, Frederick, Howard, Montgomery, Somerset, Washington, Wicomico, Worcester	Anne Arundel, Baltimore, Frederick, Howard, Montgomery	Anne Arundel, Baltimore, Carroll, Frederick, Howard, Montgomery, Somerset, Washington, Wicomico, Worcester	Anne Arundel, Baltimore, Carroll, Frederick, Howard, Montgomery, Somerset, Washington, Wicomico, Worcester
Monthly Plan Premium	\$0	\$20	\$0	\$0	\$95	\$135
Medical Deductible	\$0	\$0	\$0	\$950 IN/OON	\$0	\$0
Primary Care Provider Visits	\$0	\$0	\$0	\$10 IN 50% OON	\$5 IN 40% OON	\$0 IN 30% OON
Specialist Visits	\$50	\$45	\$0	\$45 IN 50% OON	\$45 IN 40% OON	\$40 IN 30% OON
Referral Required	Yes	Yes	Yes	No	No	No
Comprehensive Dental	\$2,000 allowance	\$20 cleaning, exam, x-ray Optional Supplemental Benefit	\$2,500 allowance	\$2,000 IN 50% coinsurance OON	\$1,000 IN 50% coinsurance OON	2 cleanings \$0 cost share Optional Supplemental Benefit
Eyewear Allowance	\$300 allowance/2 yrs	\$250/yr	\$400/yr	\$200/yr IN 50% coinsurance OON	\$300/yr	\$150/yr
Hearing Aid Discount	\$399-\$699 copay per aid	\$699 - \$999 copay per aid	\$1,500 allowance/2 yrs	Not covered	\$699 - \$999 copay per aid	\$699 - \$999 copay per aid
Transportation	24 round trips	12 one-way trips	24 one-way trips	Not Covered	Not Covered	Not Covered
OTC Allowance	\$35/qtr	\$60/qtr	\$100/qtr	\$50/qtr no rollover	Not Covered	Not Covered
Part B Premium Reduction	\$40	N/A	N/A	N/A	N/A	N/A
Flexible Spending Card**	Not covered	Not covered	\$90 (\$45 Groceries/ 45\$ Utilities)	Not covered	Not covered	Not covered

^{*}Johns Hopkins Advantage MD Tribute does not include Part D Coverage

Not all plans are available in all counties.

IN = In Network OON = Out of Network



Benefits based on in-network cost sharing amounts unless otherwise stated.