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CarePartners of Connecticut
HMO and PPO plans
Summer 2024

Get more out of your plan with MyWire

Page 4

How to use your dental benefit

Page 6

Is it safe to exercise with arthritis?

Page 10

A guide to staying in your own home as you get older



Page 12





Get the answers you need.

Whether you're looking for information about medical benefits, drug coverage, choosing a doctor, or finding the right form or document, get the answers you need on our website.



[carepartnersct.com](https://www.carepartnersct.com)



Email us:

CPCTmemberexperience@carepartnersct.com



Or call Member Services

HMO members: **1-888-341-1507 (TTY: 711)**

PPO members: **1-866-632-0060 (TTY: 711)**

In This Issue



Protect yourself against fraud

Page 5



New way to use your OTC benefit

Page 8



How Community Health Workers can help you

Page 14

- 4** Get more out of your plan with MyWire
- 6** How your dental benefit works
- 10** Q&A: Exercising with chronic pain and swelling
- 12** A guide to staying in your home as you get older



Get even **more** from your membership!

Get the most out of your plan with a secure online account on our website:

24/7 online access—Check your claims and referrals anytime

Secure payments—Easily pay your monthly premium

Sign up for eDelivery—Get certain documents electronically instead of by mail

Creating a secure account only takes a few minutes. Sign up today!

mycarepartnersct.com



You can opt out of automated messages

Occasionally, CarePartners of Connecticut contacts you to provide plan information. If you would prefer not to receive automated phone calls from us, you can opt out of these communications (except for medically necessary messages) by calling the Member Services number located on your ID card.

Common Questions:

How can I get more out of my plan with MyWire?

Your Member Services team responds to common questions from members.

MyWire is a secure text messaging service from CarePartners of Connecticut that helps you get the most out of your plan and live a healthier lifestyle.



Q: How does MyWire work?

A: CarePartners of Connecticut sends out weekly messages using a platform called Relay. You will receive a text on your mobile phone that says you have a message from CarePartners of Connecticut. Click on the link to go to a Relay log-in page (**this is not the same login as your secure online account, where you pay your monthly premium, view claims, etc.**). After you are logged in, you will be able to view the full message. There is no cost to use MyWire. Message and data rates may apply.

Q: What types of messages will I receive through MyWire?

A: The messages are designed to help you live healthy and take advantage of your plan benefits. You'll receive messages with:

- Tips for healthy living
- Information about using your plan benefits
- Benefit reminders
- Member-only discounts and savings
- And more!

Q: Can I opt out of receiving text messages?

A: Yes. If you decide that you would not like to receive text messages via MyWire, all you have to do is reply "STOP" to the most recent text.

If you would like to re-enroll in MyWire, you can sign up at carepartnersct.com/mywire.


Q: Is MyWire secure?

A: Yes. MyWire is a secure communication program that is password protected and compliant with HIPAA, the federal law that protects your personal health information.



Not receiving MyWire texts?

If you're not currently receiving MyWire texts from CarePartners of Connecticut, you can sign up by going to carepartnersct.com/mywire.



Protect yourself against fraud


There are many types of scams that target older adults. But knowing what to watch for can help you protect your money and identity.

Keep your identity safe

Be suspicious of anyone who contacts you to ask for your Social Security Number, banking account number, or Medicare or health plan number. Medicare and CarePartners of Connecticut will not call to ask for banking or Social Security information.

Avoid companies offering “free” services or supplies

You may be asked to provide personal information in exchange for “free” or discounted medical testing, equipment, supplies, or medication. Some online pharmacies promise savings, but many are designed to steal your personal information.



Know what you ordered

If you receive medical supplies that you or your doctor did not order, or you receive more than you ordered, you may be the target of a fraud scheme. Refuse or return any medical supplies you didn't order and report the company. Medicare does not sell or mail medical supplies.

Make sure you are billed correctly

When you get a bill, check it over to make sure everything looks correct, you received the services or items billed, and no service has been billed more than once.

Watch out for common schemes

According to the FBI, criminals commonly target older adults by impersonating government officials, technical support specialists, home repair companies, romantic interests (through social media or online dating websites), family members (such as a grandchild claiming to need money immediately), and caregivers who promise care in exchange for money or bank account access.



Use the CarePartners of Connecticut Fraud Hotline to report possible fraud

If you have concerns about possible fraud, call the CarePartners of Connecticut Fraud Hotline 24 hours a day, 7 days a week, at **1-877-824-7123** with questions, concerns, or complaints.

You can choose to give your name or remain anonymous. Reporting any concerns will not affect your right to health care coverage and services.

How your dental benefit works

Wondering how to get the most out of your dental benefit this year? Your dental coverage is dependent on whether you're enrolled in our HMO or PPO plan. Here's what you need to know to take advantage of this benefit.



CareAdvantage Preferred HMO members

CareAdvantage Preferred HMO members have a \$3,000 supplemental dental benefit with a \$0 deductible that covers preventive, basic, and major dental services. The plan is administered by Dominion National. You have a separate Dominion Dental card that allows you to access your benefit.¹

Know before you go—Before you schedule a procedure, you can ask your dentist to submit a pre-treatment estimate to Dominion National. This process confirms whether a service is covered and how much it costs. A pre-treatment estimate is not required to receive care, but it's recommended to obtain one prior to all major services or when the charge is expected to be more than \$300.

Find a participating dentist—The dental network is provided by Dominion National. To view a list of participating dentists in the Dominion PPO Network, visit carepartnersct.com/search-dentists.

For additional dental coverage details for HMO plan members, see the 2024 HMO Dental Guide found at carepartnersct.com/2024-cpct-dental-guide.



CarePartners Access PPO Members

As a CarePartners Access PPO plan member, there's no need to worry about a network when it comes to your dental coverage. That's because your new Visa® Flex Advantage spending card gives you the freedom to see any dentist in the country who accepts Visa®.

\$1,200 of dental coverage with more freedom:

- Your Visa® Flex Advantage spending card is loaded with the full \$1,200 amount at the beginning of the year.²
- You can see any dentist in the country who accepts Visa®—there's no network to worry about.
- Use your Visa® Flex Advantage spending card to pay for dental services at your dentist's office.
- You are covered up to the \$1,200 annual limit, and you are responsible for costs above this amount.
- You have until December 31, 2024, to spend the \$1,200 dental benefit. Any unused balance at the end of the year will not carry over to next year.



No hassles

Not only are there no network restrictions, but there is also no deductible, no claims, no cost sharing, no balance billing, and no referrals.



Comprehensive services

You can use your Visa® Flex Advantage spending card to pay for non-cosmetic dental procedures including implants and composite fillings.



Payment is easy

Just present your Visa® Flex Advantage spending card when you go to the dentist to pay for your procedure.



Know before you go

Before you go to your appointment, you can ask a dentist for a pre-treatment estimate. You can also ask other dentists to quote their fees for the same procedures to compare costs. To find out how much money you have on your Visa® Flex Advantage spending card at any time, call **1-833-684-8472**, or go to carepartnersct.com/mybenefitscenter.

Your over-the-counter (OTC) benefit is also on your Visa® Flex Advantage spending card

Your Visa® Flex Advantage spending card is for more than just your dental benefit—it also includes your OTC benefit.

- Your \$65 quarterly OTC amount is loaded onto your Visa® Flex Advantage spending card at the beginning of each quarter (Jan 1, Apr 1, Jul 1, Oct 1).
- Use your \$65 each calendar quarter to buy health-related, over-the-counter items such as toothbrushes, toothpaste, bandages, and more.
- Any unused balance at the end of the quarter will not carry over to the next quarter.

Remember, your Visa® Flex Advantage spending card is one card, but you use it to access both your dental benefit and your OTC benefit! With your Visa® Flex Advantage spending card, your \$1,200 dental benefit can be used for dental services and your \$65 quarterly OTC amount can be used for eligible over-the-counter items. The benefit amounts aren't interchangeable.

NEW

way to use your OTC benefit

Your plan includes an over-the-counter (OTC) benefit, with a quarterly allowance that you can spend on eligible health-related items—like toothbrushes, cold and flu medications, and more.

- **Access PPO members receive \$65 per calendar quarter**
- **CareAdvantage Preferred HMO members receive \$67 per calendar quarter**

And now, there's a convenient new way to spend your allowance: online and by phone through CVS Health. Here's a look at all the ways you can use your benefit:



Shop in stores

Swipe your OTC card at participating physical retailers including CVS, Dollar General, Family Dollar, Rite Aid, Stop & Shop, Walgreens, and Walmart.

For a complete list of participating retailers and locations, log in at carepartnersct.com/order-OTC (HMO members) or carepartnersct.com/mybenefitscenter (PPO members). After logging in, you can also check item eligibility (including national and store brands) by clicking “Products” at the top of the homepage.

Order at CVS Health online

You can use your OTC benefit at CVS Health online, a curated site where you can shop for only eligible OTC items. To log in:

- **HMO members**—Go to carepartnersct.com/order-OTC and use the number listed on your OTC card and your nine-digit member ID number from your CarePartners of Connecticut member ID card.
- **PPO members**—Go to carepartnersct.com/mybenefitscenter and use the number listed on your Visa® Flex Advantage spending card and your nine-digit member ID number from your CarePartners of Connecticut member ID card.

Once you're logged in, select “Locations” at the top of the homepage, then select “Online” on the left panel, where you'll see a link to CVS Health. You can also order by phone. Call **1-833-875-1816**, Mon.–Fri., 9 a.m.–11 p.m., and a CVS Health representative will take your order.





Place an order through Medline

Like CVS Health, Medline is a website that carries only eligible OTC items. Follow the steps on the previous page to log in, but instead of selecting the link to CVS Health, select “Medline.”

You can also order by phone. Call **1-833-569-2331**, Mon.–Fri., 8 a.m.–7 p.m. ET, and a Medline representative will take your order.

Alternatively, you can fill out and return the mail-order form included in the Medline OTC benefits catalog found at carepartnersct.com/2024-cpct-medline-catalog. If you need a paper catalog, please call Member Services at **1-888-341-1507** (HMO) or **1-866-632-0060** (PPO) (TTY: 711).

Walmart.com carries both eligible OTC items and other non-eligible items. At checkout, select “pay with card” and enter your OTC card number (HMO members) or your Flex Advantage spending card number (PPO members). Your OTC benefit can only be used to pay for eligible OTC items up to the balance on your card at the time of the transaction. Shipping fees may apply and will not be covered by your OTC benefit. Choose in-store pickup to avoid shipping fees.

For more information about **Walmart.com** including applicable shipping fees, visit carepartnersct.com/otc.

Order online through Walmart.com

Order online through Walgreens.com

Walgreens.com carries both eligible OTC items and other non-eligible items. At checkout, enter your OTC card number (HMO members) or your Flex Advantage spending card number (PPO members). Your OTC benefit can only be used to pay for eligible OTC items up to the balance on your card at the time of the transaction. Shipping fees may apply and will not be covered by your OTC benefit. Choose in-store pickup to avoid shipping fees.

For more information about **Walgreens.com** including applicable shipping fees, visit carepartnersct.com/otc.



Q&A

with Jonathan Harding, M.D.

Exercising with chronic pain and swelling

You likely already know that regular exercise is a key component to good health. But if you have pain and swelling in your legs, feet, or other parts of your body during or after exercise, it can make it difficult to stick to a routine. Dr. Jonathan Harding, Medical Director at CarePartners of Connecticut, answers some questions about common causes of pain and swelling, and strategies to help you stay active with these conditions.



Jonathan Harding, M.D.
Medical Director,
CarePartners of Connecticut

Q: What is gout, and how do I know if my pain and swelling is caused by gout?

A: Gout is a type of arthritis, which is a condition that affects the joints or tissues around your joints.

It's caused by an excess of uric acid in the body, which can cause crystals to build up in your joints, fluids, and tissues. Gout is a common cause of swelling in the feet, particularly the big toe joint. Talk to your health care provider if you suspect you may have gout, as the signs and symptoms can look like other inflammatory diseases that cause swelling in the joints.

Q: Is it safe to exercise with gout and other types of arthritis?

A: Yes. The Centers for Disease Control and Prevention says that physical activity is beneficial for arthritis. It can reduce the pain and stiffness related to arthritis—meaning it can actually help you move better!

Choose activities that are easier on the joints, like brisk walking, bicycling, and swimming. Other good choices are flexibility exercises (including yoga and tai chi) and strengthening exercises (such as weight lifting).

Q: How can I get started with exercise if I have pain and swelling?

A: Here are some strategies to help you start and stick with an exercise program:

- **Warm up and cool down**—A simple warm up could be a 5-minute walk followed by stretching (start at the top of your body and work your way down, feeling for a gentle, not painful, pull in your muscles).
- **As needed, modify your routine to decrease the intensity**—This can mean exercising fewer days per week, or exercising for shorter periods at a time.
- **Experiment with other forms of exercise**—If you discover walking is too much on your joints, try something else. Maybe swimming will feel good!
- **Remember exercise isn't "all or nothing"**—Generally, experts recommend about 30 minutes per day. But every minute counts, and whatever exercise you can do will always be better for you than none.
- It's important to remember each patient's situation is different so it's wise to run your exercise plan by your physician to ensure you aren't going to further damage vulnerable joints.

Q: Is it normal to experience pain after starting a new form of exercise?

A: It can be normal to experience pain, stiffness, and swelling in the days following a new exercise—simply because your body needs time to adjust to the movements you're asking it to do. As your body adapts, you'll experience less of this pain.

Q: If I'm experiencing a flare up, can I continue exercising?

A: It is common with gout and arthritis to experience periods when your symptoms are worse. You can continue to exercise by decreasing the intensity or by focusing on a different area of your body.



We take your privacy seriously

CarePartners of Connecticut is committed to protecting your personal health information in all settings. Our Notice of Privacy Practices provides detailed information about our privacy practices and your rights regarding your personal health information. The Notice is available on our website at carepartnersct.com/cpct-notice-privacy-practices. If you would like a copy sent to you, just call Member Services.

A GUIDE TO STAYING IN YOUR OWN HOME AS YOU GET OLDER

Many people hope to maintain their independence for as long as possible as they age. This includes staying in their own homes, called “aging in place.”

But to live safely in your own home as you get older requires planning, and it’s best to make your aging-in-place plan before you require a lot of care. Speak with your loved ones to ensure they understand your preferences, and that you understand the level of care they are able to provide.

HERE ARE SOME STEPS TO GET YOU STARTED:

Assess the help you currently need

“Help” is a wide category that includes anything from help with yard work to medication administration. Examples include:

- **Personal care**—Bathing, dressing, grooming, using the toilet, eating, getting in and out of bed, etc.
- **Household chores**—Housecleaning, grocery shopping, laundry, etc.
- **Money management**—Paying bills, filling out health insurance forms, etc.
- **Transportation**—Rides to appointments, the grocery store, etc.

Consider any illnesses that may require greater help in the future

If you are unsure about the progression of an illness (such as heart disease or diabetes), ask your health care provider. Your provider may also be able to suggest resources and agencies in your community that can provide the types of assistance you may need.

Account for resources

Generally, resources to support you living at home as you get older can be either formal or informal:

- Informal caregivers—friends, family, and neighbors—are often the biggest source of help for older adults. Your loved ones may be able to help you with needs such as transportation, household chores, and more.
- Formal services are provided by professionals and can be arranged for a variety of needs—from help with chores around the house to home health care services (assistance with medication, medical equipment, physical or occupational therapy, and more).

Consider your finances

Depending on your exact needs, you may need to budget for:

Medical alert systems and monthly service costs

These systems respond to medical and other emergencies—such as a fall—using an electronic monitor that you wear.

Adult day care services

These programs offer social activities, exercise, meals, personal care, and basic health care services in a safe environment under the supervision of trained staff. Generally, they’re less expensive than in-home or facility-based care, and some facilities may even offer pick up and drop off services.

Transportation services

Formal transportation services drive people to and from medical appointments, shopping centers, and other places in the community. Some community groups may offer free or discounted rides. Additionally, public transportation is often discounted for older adults and people with disabilities.

Home health care services

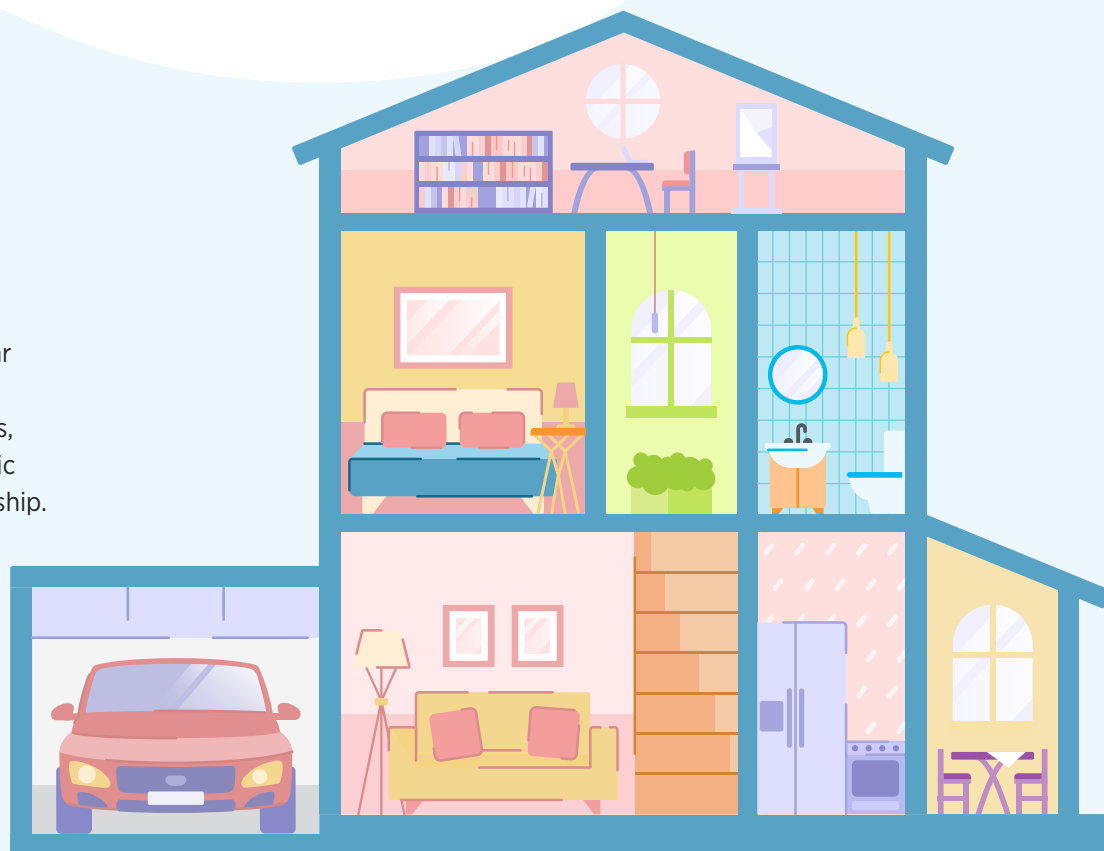
This includes skilled-care services like nursing care, physical and occupational therapy, speech-language therapy, medical social services, and more. Generally, services provided in-home are less costly than facility-based care.

Volunteer-based companion services

Look for organizations in your community that provide regular home visits at no cost to older adults. During these short visits, a volunteer can assist with basic needs and provide companionship.

Meal delivery services

Some charge a fee, whereas others may offer reduced rates based on eligibility (such as age, mobility, or economic need). Senior centers and religious organizations may provide free or lower-cost meals.



Take steps to ensure your ongoing safety and independence at home

According to the Centers for Disease Control and Prevention, falls are the leading cause of injury and death in older adults (age 65+). But falls do not have to be a normal part of aging, and you can reduce your risk:

- Improve your strength and balance through regular exercise—such as yoga, tai chi, walking, and strength training.
- Go around your home, and identify and correct any potential safety issues.
- If you have fallen, are afraid of falling, or feel unsteady, talk to your doctor. Also, review your medications (including any over-the-counter medications) with your doctor or pharmacist. Some side effects can increase your risk of falling.

Work with our Care Management team

Our Care Management team is available to CarePartners of Connecticut members at no extra cost. The team can help with identifying your needs, creating your wellness plan, and identifying additional services in your community that you may be eligible for.



To work with our Care Management team, call Member Services at:

1-888-341-1507 (TTY: 711) (HMO) or
1-866-632-0060 (TTY: 711) (PPO)

How Community Health Workers get you the care you need

Community Health Workers (CHWs) provide hands-on, virtual, and telephonic support to ensure you have access to the social resources, digital tools, and health care services you need to get and stay healthy. They are familiar with the unique needs, experiences, languages, and cultures of our diverse community.

Health is a full picture

For many communities or individuals, it is challenging to access health care—for a variety of reasons. For example, when a basic need like food or housing is unmet, you may be unable to seek care for your health concerns.

CHWs identify and arrange services to address unmet needs, such as:

- Housing and transportation
- Education and health-harming legal issues
- Food security and/or nutrition
- Care coordination and chronic disease education
- And more

How can you work with a Community Health Worker?

All CarePartners of Connecticut members have access to our Care Management team—which is made up of health care experts, including CHWs.

There is no cost to you to work with the Care Management team. Your team works collaboratively to coordinate your care, and manage your health and social concerns.



To learn more, or to work with a CHW, call Member Services at **1-888-341-1507** (HMO)/**1-866-632-0060** (PPO) **(TTY: 711)**.

To learn more about your Care Management team, visit our website at carepartnersct.com/care-manager.





Are technology issues holding you back?

Using a computer, smart phone, or other digital device to access health information is now a common part of many people's health care process. But if issues with technology are holding you back, Community Health Workers can help you increase your digital literacy to make it easier to use digital tools to access care:



Do you or any member of your household have access to the internet using a phone or home computer?



Can you use applications/programs (like Zoom) on your cell phone, computer, or another electronic device without asking for help from someone else?



Can you set up a video chat using your cell phone, computer, or another electronic device without asking for help from someone else?



Can you resolve basic technical issues on your own?



Can you read and understand materials from providers on your own?

If you answered "No" to any of these questions, a Community Health Worker can help you with issues related to technology and digital literacy.

¹The plan is administered by Dominion Dental Services, Inc., which operates under the trade name Dominion National. Benefit limits apply. A member may choose to receive treatment from a non-participating dentist. Cost shares for out-of-network benefits, if applicable, are based on procedure classification. Benefits are calculated using a Maximum Allowable Charge (MAC). Members are responsible for any amount charged which exceeds the MAC per procedure. Billing arrangements are between the member and the non-participating dentist. If a member receives treatment from a non-participating dentist, the member may be required to make payment in full at the time of service. The member may then submit a claim to the Plan for benefit payment. Please refer to your Evidence of Coverage for more information. ²Dental services covered under the Flex Advantage spending card are limited to non-cosmetic, non-Medicare covered dental procedures. Coverage is up to the annual benefit limit, and the member is responsible for all costs above this amount. Unused balance at the end of the year does not roll over. Please refer to your Evidence of Coverage for more information. ³Eligibility restrictions apply. Representatives are available 8 a.m.–8 p.m., 7 days a week (Mon.–Fri. from Apr. 1–Sept. 30). CarePartners of Connecticut is an HMO and PPO plan, both with a Medicare contract. Enrollment in CarePartners of Connecticut depends on contract renewal. Every year, Medicare evaluates plans based on a 5-Star rating system. Visit www.medicare.gov for more information. CarePartners of Connecticut Medicare Advantage (HMO) plans received 4 out of 5 Stars for contract year 2024. CarePartners of Connecticut Access PPO plan did not meet the membership threshold to receive a Star rating for 2024. Benefits eligibility requirements must be met. Not all may qualify. CarePartners of Connecticut complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity). ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-341-1507 (HMO)/1-866-632-0060 (PPO) (TTY: 711).

**High-quality benefits,
low costs, and great savings**

With a CarePartners of Connecticut (PPO or HMO) plan, you get great benefits and services that help you stay healthy and save. From a \$0 monthly premium to a \$0 Rx deductible, dental coverage, a \$150 eyeglasses benefit, discounts on hearing aids, and much more, your plan makes it easier to save on programs and services that help you lead a healthy lifestyle.

**Make sure your friends
don't miss out.**

Refer your friends to CarePartners of Connecticut. Tell your friends to call today to learn more.³



1-844-360-6466
(TTY: 711)



**How to use your
dental benefit**

Summer 2024

