PrimeWest HEALTH™

PrimeWise

Winter 2025
Member Services: 1-866-431-0801

Welcome to PrimeWise!

This newsletter is intended to help you make the most of your PrimeWest Health coverage and help you access resources available to you in your community. We're here for you!

Make Connections at Local Senior Centers

Senior centers are great places for older adults to meet friends, have fun, and stay active. Many offer activities such as games, classes, and exercise. These help to keep the mind and body healthy as we age. Senior centers also offer support and information about health and social services, making it easier for seniors to get the help they need. If you want help finding a senior center in your area, call PrimeWest Health Member Services at **1-866-431-0801**, TTY **1-800-627-3529** or **711**. The call is free.

Are you getting the most out of your PrimeWest Health benefits?

Could you use an **extra $204 a month for healthy foods**? Would you like to have **$0 copays** for **all** of your covered **prescription drugs**? **Look inside to learn more** about our programs for seniors and find out if you're getting the full range of benefits you're eligible for in 2025.

"It's wonderful I will have no copays for medication in 2025."
- Larry, Douglas County

What's in the Cards for You?
ID cards, that is.

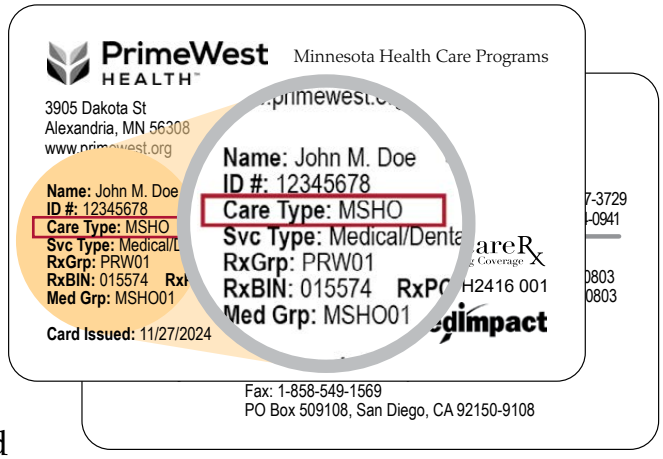
Do you ever wonder why you have so many ID cards? Health insurance can be confusing, and having a wallet full of cards can make it tough to know which ones to use. But it is important that you keep them all and know what they are for.

You have a Minnesota Health Care Programs (MHCP) card. This tells you that you are eligible for Medical Assistance. You may also have a red, white, and blue Medicare card showing your Part A and B coverage dates. And when you join PrimeWest Health, you get a PrimeWest Health Member ID Card that tells you which program you are in as well as other helpful information. But what cards you need to use depends on which program you are in.

PrimeWest Senior Health Complete or Minnesota Senior Care Plus (MSC+)?

If you are a PrimeWest Senior Health Complete member, your Member ID Card will show your Care Type as MSHO.

- PrimeWest Health pays for your Medical Assistance and Medicare services and prescription drug coverage. You **only** need to show your PrimeWest Health Member ID Card to providers.



If you are an MSC+ member, your Member ID Card will show your Care Type as MSC+.

- Use your PrimeWest Health Member ID Card when you get Medical Assistance-covered services at a clinic, chiropractor, or other health care provider.
- You should also show providers your Medicare card as most services are billed to both Medicare *and* PrimeWest Health.
- You may also have a Medicare Advantage or supplement card to cover non-pharmacy expenses.
- You may also have a Part D plan ID card to pay for most of your prescriptions. Give this card to your pharmacy whenever you fill a prescription.

For more information about these programs, visit **www.primewest.org/members** or call PrimeWest Health Member Services at **1-866-431-0801**. TTY users call **1-800-627-3529** or **711**. The calls are free. Hours are Monday – Friday, 8 a.m. – 8 p.m.

County Case Management and Care Coordination

PrimeWest Health members have access to a care coordinator or case manager. This is a person trained to help you manage the care you need. Care coordinators/case managers work with you and your care team to help you reach your health goals. They can help you make and get to appointments, refer you to other community resources that our plan may not provide, and answer questions about your health care. To learn more about care coordination/case management, please call PrimeWest Health Member Services at **1-866-431-0801**, TTY **1-800-627-3529** or **711**. The call is free.

"PrimeWest Health isn't just a business, it's a group of people who really do care."
- Cynde, Stevens County

Is PrimeWest Senior Health Complete Right for You?

Did you know that PrimeWest Senior Health Complete is easier to use and offers more complete coverage than Minnesota Senior Care Plus (MSC+)? PrimeWest Senior Health Complete has all the benefits you get from MSC+ and more!

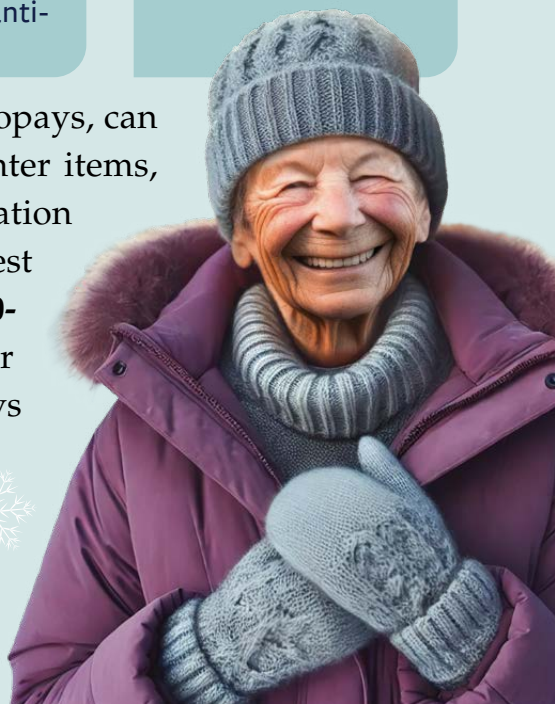
PRESCRIPTIONS:
No copays for covered prescription drugs

HEALTHY FOODS & OVER-THE-COUNTER ITEMS:
$204 per month for healthy foods and over-the-counter items

VISION:
$300 for progressive lenses; up to $150 for special lenses like tint/polarized and anti-glare

DENTAL:
Crowns and replacement dentures

PrimeWest Senior Health Complete members have $0 Part D copays, can get up to $204 per month for healthy food and over-the-counter items, and expanded vision and dental coverage. For more information or to enroll, visit **www.primewest.org/pwshc** or call PrimeWest Health Member Services at **1-800-366-2906**. TTY users call **1-800-627-3529** or **711**. The calls are free. Hours are: April 1 – September 30, Monday – Friday, 8 a.m. – 8 p.m.; October 1 – March 31, 7 days a week, 8 a.m. – 8 p.m.



PrimeWest Health contracts with Medicare and Minnesota Medical Assistance to offer PrimeWest Senior Health Complete (HMO SNP). Enrollment depends on contract renewal.

PrimeWest HEALTH™

3905 Dakota St
Alexandria, MN 56308
PrimeWest.org

Health and wellness or prevention information

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CMS_Accepted_01/27/2025/DHS_Approved_01/22/2025

Note: The information in this magazine is not professional medical advice. It is not a substitute for diagnosis or treatment. Do not ignore your health care provider's advice or wait to ask for it because of something you read here. Links to other websites are provided as a resource only. PrimeWest Health does not endorse, recommend, or pay for products or services offered by such sites.

1-866-431-0801 (toll free); TTY **1-800-627-3529** or **711**

Attention. If you need free help interpreting this document, call the above number.

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ملاحظة: إذا أردت مساعدة مجانية لترجمة هذه الوثيقة، اتصل على الرقم أعلاه.

သတိ။ ဤစွက်စာတမ်းအားအခမဲ့ဘာသာပြန်ပေးခြင်း အကူအညီလိုအပ်ပါက၊ အထက်ပါဖုန်းနံပါတ်ကိုခေါ်ဆိုပါ။

កំណត់សំគាល់ ។ បើអ្នកត្រូវការជំនួយក្នុងការបកប្រែឯកសារនេះដោយឥតគិតថ្លៃ សូមហៅទូរស័ព្ទតាមលេខខាងលើ ។

請注意，如果您需要免費協助傳譯這份文件，請撥打上面的電話號碼。

Attention. Si vous avez besoin d’une aide gratuite pour interpréter le présent document, veuillez appeler au numéro ci-dessus.

Thov ua twb zoo nyeem. Yog hais tias koj xav tau kev pab txhais lus rau tsab ntaub ntawv no pub dawb, ces hu rau tus najnpawb xov tooj saum toj no.

ဟ်သူဉ်ဟ်သးဘဉ်တကွ၊်. ဖဲနမ့၊်လိဉ်ဘဉ်တ၊်မၤစၢၤကလီလၢတ၊်ကကျိးထံဝဲဇဉ်လံာ် တီလံာ်မီတခါအံၤန့ဉ်,ကိးဘဉ် လီတဲစိနီ၊်ဂံ၊်လၢထးအံၤန့ဉ်တကွ၊်.

알려드립니다. 이 문서에 대한 이해를 돕기 위해 무료로 제공되는 도움을 받으시려면 위의 전화번호로 연락하십시오.

ໂປຣດຊາບ. ຖ້າຫາກ ທ່ານຕ້ອງການການຊ່ວຍເຫຼືອໃນການແປເອກະສານນີ້ຟຣີ, ຈົ່ງ ໂທຣໄປທີ່ໝາຍເລກຂ້າງເທິງນີ້.

Hubachiisa. Dokumentiin kun tola akka siif hiikamu gargaarsa hoo feete, lakkoobsa gubbatti kenname bilbili.

Внимание: если вам нужна бесплатная помощь в устном переводе данного документа, позвоните по указанному выше телефону.

Digniin. Haddii aad u baahantahay caawimaad lacag-la’aan ah ee tarjumaadda (afcelinta) qoraalkan, lambarka kore wac.

Atención. Si desea recibir asistencia gratuita para interpretar este documento, llame al número indicado arriba.

Chú ý. Nếu quý vị cần được giúp đỡ dịch tài liệu này miễn phí, xin gọi số bên trên.

Civil Rights Notice

Discrimination is against the law. PrimeWest Health does not discriminate on the basis of any of the following:

- race
- color
- national origin
- creed
- religion
- sexual orientation
- public assistance status
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)
- marital status
- political beliefs
- medical condition
- health status
- receipt of health care services
- claims experience
- medical history
- genetic information

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by PrimeWest Health. You can file a complaint and ask for help filing a complaint in person or by mail, phone, fax, or email at:

Civil Rights Coordinator
PrimeWest Health
3905 Dakota St
Alexandria, MN 56308
Toll Free: 1-866-431-0801
TTY: 1-800-627-3529 or 711
Fax: 1-320-762-8750
Email: compliance@primewest.org

Auxiliary Aids and Services: PrimeWest Health provides auxiliary aids and services, like qualified interpreters or information in accessible formats, free of charge and in a timely manner to ensure an equal opportunity to participate in our health care programs. **Contact PrimeWest Health at memberservices@primewest.org, or call Member Services at 1-866-431-0801 or TTY 1-800-627-3529 or 711. The call is free.**

Language Assistance Services: PrimeWest Health provides translated documents and spoken language interpreting, free of charge and in a timely manner, when language assistance services are necessary to ensure limited English speakers have meaningful access to our information and services. **Contact PrimeWest Health at memberservices@primewest.org, or call Member Services at 1-866-431-0801 or TTY 1-800-627-3529 or 711. The call is free.**

Civil Rights Complaints

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by PrimeWest Health. You may also contact any of the following agencies directly to file a discrimination complaint.

U.S. Department of Health and Human Services Office for Civil Rights (OCR)
You have the right to file a complaint with the OCR, a federal agency, if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- age
- disability
- sex
- religion (in some cases)

Contact the **OCR** directly to file a complaint:

Office for Civil Rights
U.S. Department of Health and Human Services
Midwest Region
233 N. Michigan Avenue, Suite 240
Chicago, IL 60601
Customer Response Center: Toll-free: 800-368-1019
TDD Toll-free: 800-537-7697
Email: ocrmail@hhs.gov

Minnesota Department of Human Rights (MDHR)
In Minnesota, you have the right to file a complaint with the MDHR if you have been discriminated against because of any of the following:

- race
- color
- national origin
- religion
- creed
- sex
- sexual orientation
- marital status
- public assistance status
- disability

Contact the **MDHR** directly to file a complaint:

Minnesota Department of Human Rights
540 Fairview Avenue North, Suite 201
St. Paul, MN 55104
651-539-1100 (voice)
800-657-3704 (toll-free)
711 or 800-627-3529 (MN Relay)
651-296-9042 (fax)
Info.MDHR@state.mn.us (email)

Minnesota Department of Human Services (DHS)
You have the right to file a complaint with DHS if you believe you have been discriminated against in our health care programs because of any of the following:

- race
- color
- national origin
- religion (in some cases)
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity

Complaints must be in writing and filed within 180 days of the date you discovered the alleged discrimination. The complaint must contain your name and address and describe the discrimination you are complaining about. We will review it and notify you in writing about whether we have authority to investigate. If we do, we will investigate the complaint.

DHS will notify you in writing of the investigation's outcome. You have the right to appeal if you disagree with the decision. To appeal, you must send a written request to have DHS review the investigation outcome. Be brief and state why you disagree with the decision. Include additional information you think is important.

If you file a complaint in this way, the people who work for the agency named in the complaint cannot retaliate against you. This means they cannot punish you in any way for filing a complaint. Filing a complaint in this way does not stop you from seeking out other legal or administrative actions.

Contact **DHS** directly to file a discrimination complaint:

Civil Rights Coordinator
Minnesota Department of Human Services
Equal Opportunity and Access Division
P.O. Box 64997
St. Paul, MN 55164-0997
651-431-3040 (voice) or use your preferred relay service

American Indians can continue or begin to use tribal and Indian Health Services (IHS) clinics. We will not require prior approval or impose any conditions for you to get services at these clinics. For elders age 65 years and older this includes Elderly Waiver (EW) services accessed through the tribe. If a doctor or other provider in a tribal or IHS clinic refers you to a provider in our network, we will not require you to see your primary care provider prior to the referral.