# Alterwood Advantage Freedom (HMO) offered by Alterwood Advantage, Inc.

# **Annual Notice of Change for 2026**

You're enrolled as a member of Alterwood Advantage Freedom.

This material describes changes to your plan's costs and benefits next year.

- You have from October 15 December 7 to make changes to your Medicare coverage for next year. If you don't join another plan by December 7, 2025, you'll stay in Alterwood Advantage Freedom.
- To change to a **different plan**, visit <u>www.Medicare.gov</u> or review the list in the back of your *Medicare & You* 2026 handbook.
- Note this is only a summary of changes. More information about costs, benefits, and rules is in the *Evidence of Coverage*. Get a copy at www.AlterwoodAdvantage.com or call Member Services at 1-866-675-3944 (TTY users call 711) to get a copy by mail.

#### **More Resources**

- Call Member Services at 1-866-675-3944 (TTY users call 711) for additional information. Hours are 8 am to 8 pm local time, seven (7) days a week from October 1 through March 31 and Monday through Friday from April 1through September 30. This call is free.
- This document may be made available in other alternative formats such as braille or large print.

#### **About Alterwood Advantage Freedom**

- Alterwood Advantage is an HMO and HMO-SNP plan with a Medicare contract and a State of Maryland Medicaid contract. Enrollment in Alterwood Advantage depends on contract renewal.
- When this material says "we," "us," or "our," it means Alterwood Advantage, Inc. When it says "plan" or "our plan," it means Alterwood Advantage Freedom.
- If you do nothing by December 7, 2025, you'll automatically be enrolled in Alterwood Advantage Freedom. Starting January 1, 2026, you'll get your medical coverage through Alterwood Advantage Freedom. Go to Section 2 for more information about how to change plans and deadlines for making a change.
- This plan doesn't include Medicare Part D drug coverage, and you can't be enrolled in a separate Medicare Part D drug plan and this plan at the same time. Note: If you don't

have Medicare drug coverage, or creditable drug coverage (as good as Medicare's) for 63 days or more, you may have to pay a late enrollment penalty if you enroll in Medicare drug coverage in the future.

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# **Summary of Important Costs for 2026**

	2025 (this year)	2026 (next year)
Monthly plan premium*  * Your premium can be higher than this amount. Go to Section 1 for details.	\$0	\$0
Maximum out-of-pocket amount This is the most you'll pay out of pocket for covered Part A and Part B services. (Go to Section 1 for details.)	\$9,350	\$9,250
Primary care office visits	\$0 per visit	\$0 per visit
Specialist office visits	\$35 per visit	\$35 per visit
Inpatient hospital stays Includes inpatient acute, inpatient rehabilitation, long-term care hospitals, and other types of inpatient hospital services. Inpatient hospital care starts the day you're formally admitted to the hospital with a doctor's order. The day before you're discharged is your last inpatient day.	You pay a \$345 copay each day for days 1 – 6 of a Medicare-covered inpatient hospital stay.  You pay nothing each day from days 7 – 90 of a Medicare-covered inpatient hospital stay.	You pay a \$345 - \$405 copay each day for days 1 - 6 of a Medicare- covered inpatient hospital stay. Copay is based on preferred vs non-preferred facilities.  You pay nothing each day from days 7 - 90 of a Medicare-covered inpatient hospital stay.

# **SECTION 1** Changes to Benefits & Costs for Next Year

# Section 1.1 Changes to the Monthly Plan Premium

	2025 (this year)	2026 (next year)
Monthly plan premium  (You must also continue to pay your Medicare Part B premium.)	\$0	\$0
Part B premium reduction  This amount will be deducted from your Part B premium. This means you'll pay less for Part B.	Up to \$75 per month	Up to \$75 per month

## **Section 1.2 Changes to Your Maximum Out-of-Pocket Amount**

Medicare requires all health plans to limit how much you pay out of pocket for the year. This limit is called the maximum out-of-pocket amount. Once you've paid this amount, you generally pay nothing for covered Part A and Part B services for the rest of the calendar year.

	2025 (this year)	2026 (next year)
Maximum out-of-pocket amount	\$9,350	\$9,250
Your costs for covered medical services (such as copayments)  count toward your maximum out- of-pocket amount.		Once you've paid \$9,250 out of pocket for covered Part A and Part B services, you'll pay nothing for your covered Part A and Part B services for the rest of the calendar year.
Your costs for prescription drugs don't count toward your maximum out-of-pocket amount.		

# **Section 1.3 Changes to the Provider Network**

Our network of providers has changed for next year. Review the 2026 *Provider Directory* at www.AlterwoodAdvantage.com to see if your providers (primary care provider, specialists, hospitals, etc.) are in our network. Here's how to get an updated *Provider Directory*:

- Visit our website at www.AlterwoodAdvantage.com.
- Call Member Services at 1-866-675-3944 (TTY users call 711) to get current provider information or to ask us to mail you a *Provider Directory*.

We can make changes to the hospitals, doctors, and specialists (providers) that are part of your plan during the year. If a mid-year change in our providers affects you, call Member Services at 1-866-675-3944 (TTY users call 711) for help.

**Section 1.4 Changes to Benefits & Costs for Medical Services** 

	2025 (this year)	2026 (next year)
Ambulatory Surgical Center	You pay a \$245 copay for each Medicare-covered Ambulatory Surgical Center service.	You pay a \$50 copay for each Medicare-covered Ambulatory Surgical Center service.
Cardiac Rehabilitation Services	You pay a \$35 copay for each Medicare covered cardiac rehabilitation service.	You pay a \$30 copay for each Medicare covered cardiac rehabilitation service.
	You pay a \$45 copay for each Medicare covered intensive cardiac rehabilitation service.	You pay a \$40 copay for each Medicare covered intensive cardiac rehabilitation service.
Diagnostic Radiology Services	You pay a \$250 copay for each Medicare-covered diagnostic radiology service.	You pay a \$215 - \$535 copay for each Medicare-covered diagnostic radiology service. Copay is based on preferred vs non- preferred facilities.
Emergency Care	You pay a \$110 copay for each Medicare covered emergency care visit.	You pay a \$115 copay for each Medicare covered emergency care visit.

	2025 (this year)	2026 (next year)
Home Delivered Meals	You pay nothing for 14 meals after being released from an inpatient hospital or Skilled Nursing Facility stay. Limited to 8 times per year.	You pay nothing for 7 meals after being released from an inpatient hospital or Skilled Nursing Facility stay. Limited to 8 times per year.
Inpatient Hospital Care - Acute Stay	You pay a \$345 copay each day for days 1 – 6 of a Medicare-covered inpatient hospital stay.  You pay nothing each day from days 7 – 90 of a Medicare-covered inpatient hospital stay.	You pay a \$345 - \$405 copay each day for days 1 - 6 of a Medicare- covered inpatient hospital stay. Copay is based on preferred vs non-preferred facilities.  You pay nothing each day from days 7 - 90 of a Medicare-covered inpatient hospital stay.
Outpatient Hospital Services	You pay a \$300 copay for each Medicare-covered outpatient hospital service.	You pay a \$300 - \$750 copay for each Medicare-covered outpatient hospital service. Copay is based on preferred vs non- preferred facilities.

	2025 (this year)	2026 (next year)
Outpatient Hospital Observation	You pay a \$280 copay for each Medicare-covered outpatient hospital observation service.	You pay a \$280 - \$700 copay for each Medicare-covered outpatient hospital observation service. Copay is based on preferred vs non- preferred facilities.
Outpatient X-Ray Services	You pay a \$20 copay for each Medicare-covered outpatient x-ray service.	You pay a \$20 - \$50 copay for each Medicare-covered outpatient x-ray service. Copay is based on preferred vs non- preferred facilities.
Skilled Nursing Facility	You pay nothing each day from days 1 – 20 for a Medicare-covered skilled nursing facility stay.  You pay a \$214 copay each day from days 21 – 100 of a Medicare covered skilled nursing facility stay.	You pay nothing each day from days 1 - 20 for a Medicare-covered skilled nursing facility stay.  You pay a \$218 copay each day from days 21 - 100 of a Medicare covered skilled nursing facility stay.

# **SECTION 2** How to Change Plans

**To stay in Alterwood Advantage Freedom, you don't need to do anything.** Unless you sign up for a different plan or change to Original Medicare by December 7. you'll automatically be enrolled in our Alterwood Advantage Freedom.

If you want to change plans for 2026, follow these steps:

- **To change to a different Medicare health plan**, enroll in the new plan. You'll be automatically disenrolled from Alterwood Advantage Freedom.
- To change to Original Medicare with Medicare drug coverage, enroll in the new Medicare drug plan. You'll be automatically disenrolled from Alterwood Advantage Freedom.
- To change to Original Medicare without a drug plan, you can send us a written request to disenroll. Call Member Services at 1-866-675-3944 (TTY users call 711) for more information on how to do this. Or call Medicare at 1-800-MEDICARE (1-800-633-4227) and ask to be disenrolled. TTY users can call 1-877-486-2048. If you don't enroll in a Medicare drug plan, you may pay a Part D late enrollment penalty (go to Section 1.1).
- To learn more about Original Medicare and the different types of Medicare plans, visit <a href="www.Medicare.gov">www.Medicare.gov</a>, check the Medicare & You 2026 handbook, call your State Health Insurance Assistance Program (go to Section 4), or call 1-800-MEDICARE (1-800-633-4227). As a reminder, Alterwood Advantage. Inc. offers other Medicare health plans. These other plans can have different coverage, monthly plan premiums, and cost-sharing amounts.

# **Section 2.1 Deadlines for Changing Plans**

People with Medicare can make changes to their coverage from **October 15 – December 7** each year.

If you enrolled in a Medicare Advantage plan for January 1, 2026, and don't like your plan choice, you can switch to another Medicare health plan (with or without Medicare drug coverage) or switch to Original Medicare (with or without separate Medicare drug coverage) between January 1 – March 31, 2026.

## Section 2.2 Are there other times of the year to make a change?

In certain situations, people may have other chances to change their coverage during the year. Examples include people who:

- Have Medicaid
- Get Extra Help paying for their drugs
- Have or are leaving employer coverage
- Move out of our plan's service area

If you recently moved into, or currently live in, an institution (like a skilled nursing facility or long-term care hospital), you can change your Medicare coverage **at any time**. You can change to any other Medicare health plan (with or without Medicare drug coverage) or switch to Original Medicare (with or without separate Medicare drug coverage) at any time. If you recently moved out of an institution, you have an opportunity to switch plans or switch to Original Medicare for 2 full months after the month you move out.

## **SECTION 3 Get Help Paying for Prescription Drugs**

You may qualify for help paying for prescription drugs. Different kinds of help are available:

- Extra Help from Medicare. People with limited incomes may qualify for Extra Help to pay for their prescription drug costs. If you qualify, Medicare could pay up to 75% or more of your drug costs including monthly drug plan premiums, yearly deductibles, and coinsurance. Also, people who qualify won't have a late enrollment penalty. To see if you qualify, call:
  - 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048, 24 hours a day, 7 days a week.
  - Social Security at 1-800-772-1213 between 8 a.m. and 7 p.m., Monday -Friday for a representative. Automated messages are available 24 hours a day. TTY users can call, 1-800-325-0778 or
  - Your State Medicaid Office.
- Help from your state's pharmaceutical assistance program (SPAP). Maryland has a
  program called Senior Prescription Drug Assistance Program (SPDAP) that helps
  people pay for prescription drugs based on their financial need, age, or medical
  condition. To learn more about the program, check with your State Health Insurance
  Assistance Program (SHIP). To get the phone number for your state, visit shiphelp.org,
  or call 1-800-MEDICARE.
- **Prescription Cost-sharing Assistance for Persons with HIV/AIDS.** The AIDS Drug Assistance Program (ADAP) helps ensure that ADAP-eligible people living with

HIV/AIDS have access to life-saving HIV medications. To be eligible for the ADAP operating in your state, you must meet certain criteria, including proof of state residence and HIV status, low income as defined by the state, and uninsured/underinsured status. Medicare Part D drugs that are also covered by ADAP qualify for prescription cost-sharing help through the Maryland AIDS Drug Assistance Program. For information on eligibility criteria, covered drugs, how to enroll in the program, or, if you're currently enrolled, how to continue getting help, call 410-767-6535. Be sure, when calling, to inform them of your Medicare Part D plan name or policy number.

## **SECTION 4 Questions?**

## **Get Help from Alterwood Advantage Freedom**

#### • Call Member Services at 1-866-675-3944. (TTY users call 711.)

We're available for phone calls from 8 am to 8 pm local time, seven (7) days a week from October 1 through March 31 and Monday through Friday from April 1 through September 30. Calls to these numbers are free.

#### • Read your 2026 Evidence of Coverage

This Annual Notice of Change gives you a summary of changes in your benefits and costs for 2026. For details, look in the 2026 Evidence of Coverage for Alterwood Advantage Freedom. The Evidence of Coverage is the legal, detailed description of your plan benefits. It explains your rights and the rules you need to follow to get covered services and prescription drugs. Get the Evidence of Coverage on our website at www.AlterwoodAdvantage.com or call Member Services at 1-866-675-3944 (TTY users call 711) to ask us to mail you a copy.

#### Visit www.AlterwoodAdvantage.com

Our website has the most up-to-date information about our provider network (*Provider Directory*).

# **Get Free Counseling about Medicare**

The State Health Insurance Assistance Program (SHIP) is an independent government program with trained counselors in every state. In Maryland, the SHIP is called State Health Insurance Assistance Program (SHIP).

Call State Health Insurance Assistance Program to get free personalized health insurance counseling. They can help you understand your Medicare plan choices and answer questions about switching plans. Call State Health Insurance Assistance Program at 410-767-1100.

Learn more about State Health Insurance Assistance Program by visiting https://aging.maryland.gov/pages/state-health-insurance-program.aspx.

## **Get Help from Medicare**

#### • Call 1-800-MEDICARE (1-800-633-4227)

You can call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users can call 1-877-486-2048.

#### Chat live with <u>www.Medicare.gov</u>

You can chat live at www.Medicare.gov/talk-to-someone.

#### • Write to Medicare

You can write to Medicare at PO Box 1270, Lawrence, KS 66044

#### • Visit <u>www.Medicare.gov</u>

The official Medicare website has information about cost, coverage, and quality Star Ratings to help you compare Medicare health plans in your area.

#### • Read Medicare & You 2026

The *Medicare & You 2026* handbook is mailed to people with Medicare every fall. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare. Get a copy at <a href="www.Medicare.gov">www.Medicare.gov</a> or by calling 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.