GEISINGER GOLD

2027 Summary of benefits

Geisinger Gold Secure Rx (HMO D-SNP)

Jan. 1 – Dec. 31, 2027



Geisinger
HEALTH PLAN

dsnp_sb_27e



Have questions? We've got answers.

Come meet your local Geisinger Gold agent and discuss your options. Or let us help you enroll.

Call 866-684-5172 (TTY: 711).
Oct. 1 – Dec. 7, daily, 8 a.m. – 8 p.m.
Dec. 8 – Sept. 30, weekdays, 8 a.m. – 8 p.m.

Or visit our website:
geisingergold.com

Members call: **800-498-9731 (TTY: 711)**
8 a.m. – 8 p.m. (Daily, October – March)
8 a.m. – 8 p.m. (Monday - Friday, April – September)
8 a.m. – 2 p.m. (Saturday, April – September)



Be confident in your Medicare plan choice.

Medicare Advantage plans offered by Geisinger Gold give you coverage you can feel good about. See the doctors and specialists you trust, from your local Geisinger doctor to more than 30,000 others across Pennsylvania. And make sure you get the support you need from local, licensed Medicare advisors.

Whether you're deciding which plan is right for you or need help enrolling or figuring out your benefits, you have an entire team ready to help — every step of the way.

We'll work with you to be sure you have affordable, quality coverage that's right for your health and budget.

Get more than just health insurance.

Geisinger Gold Medicare Advantage plans provide affordable health coverage that works the way it should.

In this booklet, you'll find an overview of the Geisinger Gold Secure Rx (HMO D-SNP) plan, including its coverage, benefits and member costs.

- The HMO D-SNP is a dual special needs plan available to anyone who has both Medicare and full medical assistance from the state of Pennsylvania. With this plan, you'll have access to a network that includes Geisinger doctors and facilities, plus more than 30,000 community- and regional-based doctors across Pennsylvania — including local and chain pharmacies, specialists and primary care physicians.
- The benefit information provided is a summary of what we cover and what you pay. It does not list every service that we cover or list every limitation or exclusion. For a complete list of services we cover, call Customer Care at 800-498-9731 (TTY: 711 or 800-654-5984) and request the Evidence of Coverage, or access it online at **geisingergold.com**.

This is the HMO D-SNP plan you'll find detailed in this booklet:

Geisinger Gold Secure Rx (HMO D-SNP)
H3954, Plan 097

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Pre-enrollment checklist

Before making an enrollment decision, be sure you fully understand our benefits and rules. Questions? Call and speak to a customer service representative at **800-498-9731 (TTY: 711)**, 8 a.m. – 8 p.m. (daily, October – March), 8 a.m. – 8 p.m. (Monday – Friday, April – September), and 8 a.m. – 2 p.m. (Saturday, April – September).

Understanding the benefits

- [ ] The Evidence of Coverage (EOC) provides a complete list of all coverage and services. Review plan coverage, costs and benefits before you enroll. Visit **geisingergold.com** or call **800-498-9731 (TTY: 711)** to view a copy of the EOC.
- [ ] Review the provider directory (or ask your doctor) to make sure the doctors you see now are in the network. If they aren't listed, you will likely have to select a new doctor.
- [ ] Review the pharmacy directory to make sure the pharmacy you use for any prescription medicines is in the network. If the pharmacy is not listed, you'll likely have to choose a new pharmacy for your prescriptions.
- [ ] Review the formulary to be sure your drugs are covered.

Understanding important rules

- [ ] In addition to your monthly plan premium, you must continue to pay your Medicare Part B premium (unless Medicaid is paying your Part B premium). This premium is normally taken out of your Social Security check each month.
- [ ] Benefits, premiums and/or copays/coinsurance may change on Jan. 1, 2027.
- [ ] Except in emergency or urgent situations, we do not cover services by out-of-network providers (doctors who are not listed in the provider directory).
- [ ] This plan is a Dual Eligible Special Needs Plan (D-SNP). Your ability to enroll will be based on verification that you are entitled to both Medicare and full Medical Assistance from a state plan under Medicaid.

Geisinger Gold Secure Rx (HMO D-SNP) plan

Our Geisinger Gold Secure Rx (HMO D-SNP) plan is a Medicare Advantage HMO plan (HMO stands for health maintenance organization) and D-SNP (Dual Eligible Special Needs Plan) with a Medicare contract. Enrollment in the plan depends on contract renewal.

To enroll in this plan, you must live in our service area, be entitled to Medicare Part A, be enrolled in Medicare Part B, and be eligible for full Pennsylvania Medical Assistance (Medicaid) benefits.

Monthly premiums by county

	Counties available	Premium
Geisinger Gold Secure Rx	Adams, Allegheny, Armstrong, Beaver, Bedford, Berks, Blair, Bradford, Bucks, Butler, Cambria, Cameron, Carbon, Centre, Chester, Clarion, Clearfield, Clinton, Columbia, Crawford, Cumberland, Dauphin, Delaware, Elk, Fayette, Forest, Franklin, Fulton, Greene, Huntingdon, Jefferson, Juniata, Lackawanna, Lancaster, Lebanon, Lehigh, Luzerne, Lycoming, McKean, Mifflin, Monroe, Montgomery, Montour, Northampton, Northumberland, Perry, Philadelphia, Pike, Potter, Schuylkill, Snyder, Somerset, Sullivan, Susquehanna, Tioga, Union, Venango, Warren, Washington, Wayne, Westmoreland, Wyoming and York	**$0**

Deductibles and out-of-pocket maximum

	Geisinger Gold Secure Rx *Plan 097*
Monthly premium Includes both medical and drugs	$0
Part B premium reduction	Not applicable
Yearly medical deductible	$0
Out-of-pocket maximum* (Does not include Part D coverage)	$9,850

**Once you've reached this amount, all remaining covered services will be paid for by the plan.*

Medical and hospital benefits

	Geisinger Gold Secure Rx *Plan 097*
Inpatient hospital stays*	$0 copay
Outpatient hospital visits*	$0 copay
Ambulatory Surgical Center (ASC)*	$0 copay
Doctor visits	
Primary care In-person and telehealth visits	$0 copay
Specialty care* In-person and telehealth visits	$0 copay
Preventive care Such as cancer screenings, cardiovascular care, diabetes care, routine screenings and immunizations, and counseling services	$0 copay
Emergency care	$0 copay
Urgent care	$0 copay
Diagnostic services*	$0/day copay
• Labs • Outpatient X-rays • Radiology services • Tests and procedures • Therapeutic radiology	
Hearing services includes:	
Medicare-covered diagnostic exam	$0 copay
Hearing aids, all types	$0 copay per ear; $2,950 maximum benefit per ear every 3 years
Hearing aid evaluation/fitting	$0 copay
Routine exam (1/year)	$0 copay
Dental services	
Medicare-covered exam*	$0 copay
Comprehensive • Endodontics • Extractions • Periodontics • Removable prosthodontics • Restorative services	$0 copay *(Up to $4,500/year combined allowance for comprehensive and preventive dental services)*

	Geisinger Gold Secure Rx *Plan 097*
Dental services — *continued* **Preventive** • Cleanings (2/year) • Exams (2/year) • Fluoride treatments (2/year) • X-rays	$0 copay
Vision services	
Medicare-covered vision exam	$0 copay
Eyewear after cataract surgery	$0 copay
Routine exam (1/year)	$0 copay
Supplemental vision benefit — such as contacts, eyeglass lenses and frames (separate or as a set)	Up to $500 annual allowance
Medicare-covered diabetic eye exam	$0 copay
Mental health services*	
Inpatient visit	$0 copay for each stay $0 copay 60 lifetime days
Partial hospitalization (PHP)	$0 copay
Intensive outpatient program (OP)	$0 copay
Outpatient substance abuse services (Medicare-covered)	$0/individual & group therapy session copay
Skilled nursing facility*	$0 copay for each stay $0 copay 100 days/benefit period
Physical & speech therapy*	$0 copay
Ambulance services* *(ground and air)*	$0 copay (each way)
Transportation services Non-emergency, medical-related	$0 copay *Up to $325 allowance/year*
Nonemergent ambulance transport*	$0 copay (each way)
Medicare Part B prescription drugs includes: • Chemotherapy and radiation* • Other Part B drugs*	$0 copay
Insulin	Capped at $35/month

**Certain services may require authorization from Geisinger Gold. Contact us for details.*
NOTE: Medicaid covers the Medicare portion of most costs.

Additional benefits

	Geisinger Gold Secure Rx *Plan 097*
Annual routine physical exam	$0 copay
Medicare-covered chiropractic services Only manual manipulation of the spine to correct subluxation is covered	$0 copay
Diabetic needs • Monitoring supplies* • Therapeutic shoes or inserts	$0 copay
Durable medical equipment (DME)* And related supplies	$0 copay
Fitness benefit	$0 annual fee (Silver&Fit®) $0 copay 1 home fitness kit/year
Foot care	$0 copay routine foot care (4/year) $0 copay podiatry visits
Home health agency care*	$0 copay
Hospice	$0 copay
Kidney disease services Dialysis	$0 copay
Nursing hotline	$0 copay
Opioid treatment program services*	$0 copay
Outpatient rehabilitation services* Occupational therapy	$0 copay

	Geisinger Gold Secure Rx *Plan 097*
Over-the-counter items and home & bath safety devices Members who qualify for SSBCI may also use the allowance to purchase healthy foods and/or pay for utilities.**	Up to $155/month allowance
Personal emergency response system (PERS)	Up to $700/year
Prosthetic devices And related supplies*	$0 copay
Pulmonary rehabilitation services*	$0 copay
Welcome to Medicare preventive visit	$0 copay
Worldwide coverage Includes: • Emergency care • Emergency transportation • Urgent care	$0 copay

**Certain services may require authorization from Geisinger Gold. Contact us for details.*

***The benefits mentioned are a part of the Special Supplemental Program for the Chronically Ill (SSBCI). Not all members qualify. Qualifying conditions include but are not limited to diabetes, dementia, behavioral health conditions, cancer, and neurologic disorders. For more information, please review your Evidence of Coverage (EOC). Eligibility for these benefits cannot be guaranteed based solely on your condition. All applicable eligibility requirements must be met before the benefit is provided.*

NOTE: Medicaid covers the Medicare portion of most costs.

Geisinger Gold prescription drug benefits

Each plan has a "drug list" that tells you which Part D prescription drugs are covered in each Geisinger Gold Medicare Advantage plan's Part D benefits. This list also tells you if there are any rules that restrict coverage for your drugs.

To get the most complete and current information about which drugs are covered, visit **geisingergold.com** or call pharmacy Customer Care:

800-988-4861 (TTY: 711)

Monday – Friday, 8 a.m. – 8 p.m., Saturday, 8 a.m. – 2 p.m.

Spread out your prescription costs

The Medicare Prescription Payment Plan (M3P) lets you pay for your Part D prescriptions in monthly installments across the calendar year instead of all at once. You'll get a bill from your plan each month rather than paying the pharmacy directly.

- Available to anyone with a Medicare drug plan or Medicare health plan with drug coverage.
- Participation is voluntary, and there's no cost to use the plan.
- The plan does not lower your drug costs; it simply spreads them out across the calendar year to help with budgeting.



Geisinger Gold prescription drug benefits

		Geisinger Gold Secure Rx *Plan 097*
Deductible		$700 (Tiers 3 – 5)*
Tier 1 (Preferred generic)	30-day supply Retail	$0 copay
	100-day supply Retail	$0 copay
	100-day supply Mail-order	$0 copay
Tier 2 (Generic)	30-day supply Retail	$0 copay
	100-day supply Retail	$0 copay
	100-day supply Mail-order	$0 copay
Tier 3 (Preferred brand)	30-day supply Retail	25% coinsurance
	100-day supply Retail	25% coinsurance
	100-day supply Mail-order	25% coinsurance
Tier 4 (Non-preferred drug)	30-day supply Retail	25% coinsurance
	100-day supply Retail	25% coinsurance
	100-day supply Mail-order	25% coinsurance

**If you receive full Extra Help for your drugs, you will have a $0 deductible.*

If you receive Extra Help, you may pay less than the cost-sharing amounts listed. Depending on the level of Extra Help you receive, you pay:

Covered generic drugs (including brand drugs treated as generic)	$0, $1.65 or $5.80 copay
All other covered drugs	$0, $5 or $14.40 copay

		Geisinger Gold Secure Rx *Plan 097*
Tier 5 (Specialty)	30-day supply Retail	25% coinsurance
	100-day supply Retail	Not covered
	100-day supply Mail-order	Not covered
Tier 6 (Select care drugs)	30-day supply Retail	$0 copay
	100-day supply Retail	$0 copay
	100-day supply Mail-order	$0 copay

Save more with Geisinger Mail-Order Pharmacy

Save time
Skip the trips to the pharmacy and let your medications come to you.

Save money
Free shipping and lower copays add up to big cost savings.

Save hassle
Get refills shipped before you run out and online tracking.

And if you need to talk to a pharmacist or have questions about your medication, we're here to help.

Enroll by calling 844-878-5562 (TTY: 711).

Weekdays, 6:30 a.m. – 7 p.m.

Community HealthChoices Plan

Geisinger Gold Secure Rx (HMO D-SNP) members, who are eligible for both Medicare and Pennsylvania Department of Human Services (Medicaid), are required to select a Community HealthChoices (CHC) Plan to administer the Pennsylvania Department of Human Services (Medicaid) portion only of their health care coverage. For questions about your Pennsylvania Department of Human Services (Medicaid) benefits, contact the PA CHC Helpline at 844-824-3655 (TTY: 833-254-0690) or your Community HealthChoices (CHC) Plan at:

Community Health Choices – AmeriHealth Caritas Pennsylvania	
CHC	AmeriHealth Caritas Pennsylvania
Call	855-235-5115
TTY	855-235-5112
Website	amerihealthcaritaschc.com/
Community Health Choices – Keystone First Community HealthChoices	
CHC	Keystone First Community HealthChoices
Call	855-332-0729
TTY	855-235-4976
Website	keystonefirstchc.com/
Community Health Choices – PA Health & Wellness	
CHC	PA Health & Wellness
Call	844-824-3655
TTY	711
Website	pahealthwellness.com/members/ltss.html

Community Health Choices – UPMC Community HealthChoices	
CHC	UPMC Community HealthChoices
Call	844-833-0523
TTY	711
Website	upmchealthplan.com/chc

Your Pennsylvania Department of Human Services (Medicaid) coverage helps pay your Medicare cost-sharing amounts for Medicare-covered services. If you lose your Pennsylvania Department of Human Services (Medicaid) eligibility during the benefit year, Geisinger Gold will give you up to 6 months to regain your Medicaid eligibility. During this time, you will be responsible for paying any Medicare cost-sharing amounts that Pennsylvania Department of Human Services (Medicaid) would have paid on your behalf if you had remained eligible.

Eligibility and enrollment

Who is eligible?

You're eligible to join a Geisinger Gold Medicare Advantage plan as long as you live in the health plan's service area, have Medicare Parts A and B, and be eligible for full Pennsylvania Medical Assistance (Medicaid) benefits. Enrolling in a D-SNP plan also requires verification that you are entitled to both Medicare and full Medical Assistance from a state plan under Medicaid.

When can I enroll?

Medicare beneficiaries can enroll in Geisinger Gold Medicare Advantage coverage at certain times of the year.

Annual Election Period: Oct. 15 through Dec. 7

You can enroll in or switch to a new Medicare Advantage plan or Medicare Advantage prescription drug plan during the Annual Election Period (AEP). For 2027 coverage, the AEP is from Oct. 15 to Dec. 7, 2026.

Initial Coverage Election Period

When you turn 65 or otherwise become eligible for Medicare, you qualify for an Initial Election Period. This is usually a 7-month period — it begins 3 months before the month you turn 65 and ends 3 months after the month you turn 65.

Special Election Periods

Special Election Periods allow Medicare beneficiaries to make a plan change due to certain circumstances during the year. Reasons include a change in residence, delayed retirement, disability, loss of benefits if your existing plan's contract is not renewed by Medicare, loss of low-income subsidy or special needs status. Call for more information.

How do I enroll?

Enrolling is easy. Especially when local Geisinger Gold Medicare advisors give you personalized advice and assistance. Once you decide what plan is right for you, your Medicare advisor can complete your enrollment right over the phone. You can also visit **geisingergold.com** for plan information and to enroll online. In-person enrollment meetings may also be available.

When will my coverage become effective?

If you enroll between Oct. 15 and Dec. 7, 2026, your coverage will become effective on Jan. 1, 2027.

What if I change my mind?

During the Open Enrollment Period, from Jan. 1 to March 31, you can make a **one-time** plan selection change. Options include selecting a new Medicare Advantage plan, changing to a Medicare Supplement plan, or disenrolling from a Medicare Advantage plan and returning to Original Medicare. Depending on the change you make, you could be eligible to enroll in a standalone Prescription Drug Plan (PDP). You won't be able to make any further changes until the next Annual Election Period (unless you qualify for a Special Election Period during the year).

Discrimination policy

Geisinger Health Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, creed, religious affiliation, ancestry, sex gender, gender identity or expression, or sexual orientation.

Geisinger Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, creed, religious affiliation, ancestry, sex gender, gender identity or expression, or sexual orientation.

Geisinger Health Plan provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)

Geisinger Health Plan provides free language services to people whose primary language is not English, such as:

- Qualified interpreters
- Information written in other languages

If you need these services, contact **Geisinger Health Plan** at **800-447-4000.**
If you believe that **Geisinger Health Plan** has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, creed, religious affiliation, ancestry, sex gender, gender identity or expression, or sexual orientation, you can file a complaint with:

Civil Rights Grievance Coordinator
Geisinger Health Plan Appeals Department
100 North Academy Avenue,
Danville, PA 17822-3220
Phone: (866) 577-7733, PA Relay 711,
Fax: (570) 271-7225, or
Email: GHPCivilRights@thehealthplan.com

The Bureau of Equal Opportunity,
Room 223, Health and Welfare Building,
P.O. Box 2675,
Harrisburg, PA 17105-2675,
Phone: (717) 787-1127, TTY/PA Relay 711,
Fax: (717) 772-4366, or
Email: RA-PWBEOAO@pa.gov

You can file a complaint in person or by mail, fax, or email. If you need help filing a complaint, Geisinger Health Plan and the Bureau of Equal Opportunity are available to help you.
You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf , or by mail, phone or email at:

U.S. Department of Health and Human Services,
200 Independence Avenue SW.,
Room 509F, HHH Building,
Washington, DC 20201,
1-800-368-1019, 800-537-7697 (TDD).
OCRMail@hhs.gov

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html

ATTENTION: If you speak a language other than English, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call 1-800-447-4000 (PA RELAY 711) or speak to your provider.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al 1-800-447-4000 (PA RELAY 711) o hable con su proveedor.

注意：如果您说[中文]，我们将免费为您提供语言协助服务。我们还免费提供适当的辅助工具和服务，以无障碍格式提供信息。致电 1-800-447-4000 (PA RELAY 711)或咨询您的服务提供商。

सावधान: यदि तपाईं नेपाली भाषा बोल्नुहुन्छ भने तपाईंका लागि निःशुल्क भाषिक सहायता सेवाहरू उपलब्ध छन्। पहुँचयोग्य ढाँचाहरूमा जानकारी प्रदान गर्न उपयुक्त सहायता र सेवाहरू पनि निःशुल्क उपलब्ध छन्। 1-800-447-4000 (PA RELAY 711) मा फोन गर्नुहोस् वा आफ्नो प्रदायकसँग कुरा गर्नुहोस्।

ВНИМАНИЕ: Если вы говорите на русский, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Позвоните по телефону 1-800-447-4000 (PA RELAY 711) или обратитесь к своему поставщику услуг.

تنبيه: إذا كنت تتحدث اللغة العربية، فستتوفر لك خدمات المساعدة اللغوية المجانية. كما تتوفر وسائل مساعدة وخدمات مناسبة لتوفير المعلومات بتنسيقات يمكن الوصول إليها مجانًا. اتصل على الرقم (PA RELAY 711) 1-800-447-4000 أو تحدث إلى مقدم الخدمة".

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd aladispozisyon w gratis pou lang ou pale a. Èd ak sèvis siplemantè apwopriye pou bay enfòmasyon nan fòma aksesib yo disponib gratis tou. Rele nan 1-800-447-4000 (PA RELAY 711) oswa pale avèk founisè w la.

LƯU Ý: Nếu bạn nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các hỗ trợ dịch vụ phù hợp để cung cấp thông tin theo các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi theo số 1-800-447-4000 (PA RELAY 711) hoặc trao đổi với người cung cấp dịch vụ của bạn.

УВАГА: Якщо ви розмовляєте українська мова, вам доступні безкоштовні мовні послуги. Відповідні допоміжні засоби та послуги для надання інформації у доступних форматах також доступні безкоштовно. Зателефонуйте за номером 1-800-447-4000 (PA RELAY 711) або зверніться до свого постачальника».

注意：如果您說[中文]，我們可以為您提供免費語言協助服務。也可以免費提供適當的輔助工具與服務，以無障礙格式提供資訊。請致電 1-800-447-4000 (PA RELAY 711)或與您的提供者討論。」

ATENÇÃO: Se você fala [inserir idioma], serviços gratuitos de assistência linguística estão disponíveis para você. Auxílios e serviços auxiliares apropriados para fornecer informações em formatos acessíveis também estão disponíveis gratuitamente. Ligue para 1-800-447-4000 (PA RELAY 711) ou fale com seu provedor.

মনোনোগ দিন: নদি আপনি বাংলা বলেন তাহলে আপনার জন্য বিনামূল্যে ভাষা সহায়তা পরিষেবাদি উপলব্ধ রয়েছে। অ্যাক্সেসনোগ্য ফরম্যাটে তথ্য প্রদানের জন্য উপনুক্ত সহায়ক সহনোগিতা এবং পরিষেছবা দওি বিনছা মূল্যে উপলব্ধ রয়েছে। 1-800-447-4000 (PA RELAY 711) নমববরে কল করুন ছ । আপনছা র দপরদছা নছকা রীর ছসা থে কথ ছা বলুন।

ATTENTION : Si vous parlez Français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et services auxiliaires appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le 1-800-447-4000 (PA RELAY 711) ou parlez à votre fournisseur. »

សូមយកចិត្តទុកដាក់៖ ប្រសិនបើអ្នកនិយាយ *ភាសាខ្មែរ* សេវាកម្មជំនួយភាសា ឥតគិតថ្លៃគឺមានសម្រាប់អ្នក។ ជំនួយ និងសេវាកម្មដែលជាការជួយដ៏សមរម្យ ក្នុងការផ្តល់ព័ត៌មានតាមទម្រង់ដែលអាចចូលប្រើប្រាស់បាន ក៏អាចរកបានដោយឥតគិតថ្លៃផងដែរ។ ហៅទូរសព្ទទៅ 1-800-447-4000 (PA RELAY 711) ឬនិយាយទៅកាន់អ្នកផ្តល់សេវារបស់អ្នក។

주의: [한국어]를 사용하시는 경우 무료 언어 지원 서비스를 이용하실 수 있습니다. 이용 가능한 형식으로 정보를 제공하는 적절한 보조 기구 및 서비스도 무료로 제공됩니다. 1-800-447-4000 (PA RELAY 711)번으로 전화하거나 서비스 제공업체에 문의하십시오.

ધ્યાન આપો: જો તમે ગુજરાતી બોલતા હો તો મફત ભાષાકીય સહાયતા સેવાઓ તમારા માટે ઉપલબ્ધ છે. યોગ્ય ઓક્ઝિલરી સહાય અને ઍક્સેસિબલ ફૉર્મેટમાં માહિતી પૂરી પાડવા માટેની સેવાઓ પણ વિના મૂલ્યે ઉપલબ્ધ છે. 1-800-447-4000 (PA RELAY 711) પર કૉલ કરો અથવા તમારા પ્રદાતા સાથે વાત કરો.

Our privacy policy

Organized Health Care Arrangement Designation

As covered entities, the below-listed separate GH corporate legal entities are participating in an Organized Health Care Arrangement ("OHCA"). These separate corporate legal entities may share PHI as necessary to carry out treatment, payment and healthcare operations related to the OHCA and for other purposes as permitted or required by law.

- Geisinger Affiliated Covered Entities
- Geisinger Indemnity Insurance Company
- Geisinger Quality Options, Inc.
- Geisinger Health Plan

Notes

GEISINGER GOLD

Geisinger
HEALTH PLAN

Want to know more about the coverage and costs of Original Medicare? Look in your "Medicare & You" handbook. See it online at **medicare.gov** or get a copy by calling **800-MEDICARE** (800-633-4227), 7 days a week, 24 hours a day. TTY users should call 877-486-2048.

Out-of-network/non-contracted providers are under no obligation to treat plan members, except in emergency situations. 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.

Geisinger Gold Medicare Advantage HMO, PPO, and HMO D-SNP plans are offered by Geisinger Health Plan/Geisinger Indemnity Insurance Company/Geisinger Quality Options, Inc., health plans with a Medicare contract. Continued enrollment in Geisinger Gold depends on contract renewal. Geisinger Health Plan, Geisinger Indemnity Insurance Company, and Geisinger Quality Options, Inc. are part of Geisinger, an integrated health care delivery and coverage organization. Risant Health is the parent organization of Geisinger.

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