

Sanford Health Plan

Medicare Advantage

Over-the-Counter Benefits Member FAQ



Q: How does NationsOTC® work with my coverage?

A: Sanford Health Plan has partnered with NationsOTC to administer the over-the-counter benefit for Medicare Advantage Plans.

Q: How do I place an OTC order?

A: There are several convenient ways you can place an order:

- Call (877) 280-1649 (Align/MA), TTY: 711 to speak with a Member Experience Advisor
- Visit NationsBenefits.com/AlignSanfordHealthPlan. You'll have to create an account to log in and order.
- Complete an order form from within the OTC catalog and mail it to NationsOTC

Important: Members should mail the order form no later than the 20th of the month to ensure the order total is applied to the current benefit period. If you need your order sooner, please go online or call.

Q: Are member materials available in any other languages?

A: Yes, contact NationsOTC Customer Service at (877) 280-1649 to request additional or alternative language materials.

Q: Are TTY/Language Line services available?

A: Yes, contact NationsOTC Customer Service at (877) 280-1649 if language assistance is needed.

Q: Is there a NationsOTC member portal?

A: Yes, go to www.nationsbenefits.com/alignsanfordhealthplan to create an account and log in.

Q: When will my order be delivered?

A: Allow two days for delivery.

Q: What type of products are available to order?

A: You have access to a variety of OTC medications, health and wellness products, first-aid supplies, and other qualifying items. Reference your catalog or log into the portal to view and order products at NationsBenefits.com/AlignSanfordHealthPlan.

Q: How do I get or view the current OTC product listing?

A: Members should receive an OTC catalog in the mail, or they can log in to their Member Portal to shop OTC products at NationsBenefits.com/AlignSanfordHealthPlan.

Q: Can I cancel my order?

A: Yes, you can cancel your order any time prior to shipping by calling NationsOTC at (877) 280-1649 (TTY: 711). You can also cancel your order in your member portal within one hour after your order is placed.

Q: Where does NationsOTC ship?

A: Orders can be shipped anywhere in the U.S., including Hawaii and Puerto Rico.

Q: Is there a cost for shipping?

A: No, your order will be shipped at no additional cost.

Q: How do I track my order?

A: You can track your order by logging into your member portal. After logging in, go to My Account > Order History> Order Details to access your tracking ID and get real-time updates.

Q: What is the return or exchange policy?

A: Due to the personal nature of these products, we do not require products to be returned.

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Hearing Benefit Member FAQ



Q: How does NationsHearing® work with my coverage?

A: Sanford Health Plan has partnered with NationsHearing to administer our hearing aid benefit.

Q: What benefits are standard with NationsHearing coverage?

A: All coverage/plans include the following:

- Annual hearing test with no out-of-pocket cost
- Access to a nationwide network of 8,000+ providers
- Hearing aids available from all major manufacturers
- Low pricing and a 60-day, 100% money-back guarantee
- Three follow-up visits
- 3-year manufacturer's repair warranty
- 3 years of batteries included (not applicable to the purchase of rechargeable hearing aid models)
- One-time replacement coverage for lost, stolen or damaged hearing aids (Deductibles may apply)
- 12-and 18-month financing options available with 0% APR, no money down

Q: How do I take a hearing test?

A: Members have two convenient ways to take a hearing test:

- Call (877) 280-1649 (Align/MA), (877)212-0859 (GPMA/ISNP), TTY: 711 to speak with a Member Experience Advisor who will schedule a no-cost hearing test with a local provider. Member Experience Advisors are available 24 hours per day, 7 days per week, 365 days per year.
- Visit NationsBenefits.com/AlignSanfordHealthPlan (Align/MA) or NationsBenefits.com/GPMA (GPMA/ISNP) to access the online hearing test (available 1/1/2022).

Q: How do members use their hearing benefits?

A: Members have two options:

Option 1:

1. Contact NationsHearing to schedule a hearing test.
2. Visit a local provider for hearing test and receive test results.
3. Use their benefit allowance to order hearing aids.
4. Work with the provider to fit and tune hearing aids.
5. All members receive a follow-up call to ensure complete satisfaction.

Option 2:

1. Access online hearing test from their computer or mobile device
2. Receive digital record of their hearing test results.
3. Use their benefit allowance to order hearing aids online.
4. Receive home delivery of their hearing aids at no additional cost.
5. Connect with an online representative for remote tuning.

Q: How do I contact NationsHearing Customer Service and what are their hours?

A: Call (877) 280-1649 TTY: 711 to speak with a Member Experience Advisor who will schedule a hearing test with a local provider. Member Experience Advisors are available 24 hours per day, 7 days per week, 365 days per year.

Q: What is the Hearing Hunt game?

A: A fun and educational word search game app that sharpens clarity of hearing with challenges, rewards and health tips. The app is designed to provide an environment for auditory training that leads to improved auditory perception. Members can search for “Hearing Hunt” on the Google Play store or Apple App Store to download.



Q: Are there any claims to submit?

A: No, there are no claims or forms to complete when seeing a Nations Benefits network doctor as the doctor verifies coverage, bills NationsHearing for services rendered and NationsHearing pays the doctor directly.

Q: How do I find an in-network doctor?

A: Members should contact Customer Service at (877) 280-1649 TTY: 711 to find an in-network provider.

Q: Are member materials available in any other languages and language line services?

A: Yes, contact NationsHearing Customer Service at (877) 280-1649 to request additional or alternative language materials.

Q: Is there a NationsHearing member portal?

A: No, there is not a NationsHearing member portal.

Q: What types and brands of hearing aids does NationsHearing offer?

A: NationsHearing offers the latest hearing aids from all major manufacturers. This allows members to choose from a robust selection of state-of-the-art hearing aids to meet their needs and lifestyle.

Q: What if the member loses or damages their hearing aids?

A: All hearing aids purchased through NationsHearing come with a three-year manufacturers' warranty to cover repairs, one-time loss and damage replacement coverage (per hearing aid).

Q: Is there a cost for hearing aid batteries?

A: No, members' benefit includes three years of batteries (per hearing aid) at no additional cost.

Q: Is there a return policy on hearing aids?

A: Yes, NationsHearing offers a 60-day, 100% money-back guarantee. The member should contact Customer Service to begin the return process.

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Fitness Benefit Member FAQ



Q: How does Silver&Fit® work with my coverage?

A: Sanford Health Plan has partnered with Silver&Fit to administer our fitness benefit.



Q: What is included in the Silver&Fit Healthy Aging and Exercise program?

A: The Silver&Fit program provides its members with fitness options and healthy aging resources to empower them to get fit. Members receive access to a no-cost fitness membership through a robust network of participating fitness centers and select YMCAs. Members also have the option to buy up to receive discounts at more specialized gym options through the Premium Fitness Network. Members who also like the flexibility of working out at home can choose one Home Fitness Kit per benefit year.

Members can participate in the Get Started program by answering a few online questions to receive their personal exercise plan. In addition, Silver&Fit members can enjoy 8,000+ digital workout videos on the Silver&Fit website and the Silver&Fit ASHConnect mobile app, one-on-one Silver&Fit Healthy Aging Coaching by phone and activity tracking through the Silver&Fit Connected!™ tool. Members may also view Healthy Aging classes, The Silver Slate quarterly newsletter and other exclusive videos and articles in the online library of resources at www.SilverandFit.com.

Q: What are the different types of fitness centers that participate in the Silver&Fit program??

A: Members can select from the following:

- **STANDARD**

- **Full Coed Fitness Centers**, which offer Silver&Fit-endorsed exercise classes in addition to their standard membership with cardiovascular and resistance training equipment
- **Gender-Specific Fitness Centers**, which offer a standard membership and the opportunity to work out with others of the same gender
- **Fitness Studios**, which may include pools, yoga studios, and/or Pilates studios

- **PREMIUM**

- **Premium Fitness Network Choices**, a network of additional options, like full-service fitness centers, studios, and unique fitness experiences, such as rock climbing and martial arts. Fees vary, depending on the fitness location members choose.

Q: How do members participate in the Silver&Fit program?

A: Members go to the Silver&Fit website at www.SilverandFit.com to register, select a participating fitness center or select YMCAs and/or choose their Home Fitness Kit. Members who choose a fitness center should print a paper copy of the Silver&Fit card, or download it on their phone, and bring it to the fitness center or YMCA location they selected. If members

prefer to speak with a Customer Service agent, they may call toll-free 1.877.427.4788 (TTY/TTD: 711).

Q: How do member's contact Silver&Fit?

A: Members can create their account at www.SilverandFit.com or if they prefer to speak with a Customer Service agent, they may call toll-free 1.877.427.4788 (TTY/TTD: 711).

Q: How does the Premium Fitness Network buy-up option work?

A: Interested members can select from Premium locations offering additional fitness center choices at a variety of price points. Fees vary, depending on the location selected, and are charged monthly to the member's credit card. Upon joining, members will be charged for the current month, plus the next month's fee.

Q: Can members enroll in multiple fitness centers or YMCAs?

A: Yes, members can utilize one or more participating fitness centers at a time. If members enroll into more than one Premium fitness location, they must pay fees for each individual location. Members can log in to the website or call for information on how their payments may change.

Q: What kinds of Home Fitness Kits are available to members?

A: Members can go to the Home Kits page on the Silver&Fit website to explore the selection of available kits. Options include:*

- Fitbit® Wearable Fitness Tracker Kit
- Garmin® Wearable Fitness Tracker Kit
- Pilates Kit with a Pilates ball and hand towel
- Beginner Strength Kit with 2-pound dumbbells and exercise bands
- Intermediate Strength Kit with 3-pound dumbbells and exercise bands
- Advanced Strength Kit with 5-pound dumbbells and exercise bands
- Beginner Swim Kit with swimming goggles and a kickboard
- Advanced Swim Kit with aquatic resistance gloves and a pull float
- Beginner Yoga Kit with a mat and hand towel
- Intermediate/Advanced Yoga Kit with a yoga strap and 2 yoga blocks

Members will need to follow the instructions on the Silver&Fit website to receive their promotional code. Once they've redeemed the code online through a third-party vendor website, their kit will be mailed directly to them. Kits are shipped within 10 days of code redemption and once selected, they cannot be exchanged. Kits are subject to change.

Q: Can members that are new to the Silver&Fit program continue to use their existing fitness center or YMCA?

A: Yes, if the fitness center or YMCA is part of the Silver&Fit Standard network. Members can advise the fitness center or YMCA to freeze their membership. After registering on the website, selecting a fitness center, and paying any applicable fee(s), they can print a paper copy of the Silver&Fit card, or download it on their phone, and bring it with them to their first visit. If the fitness center is not a part of the Silver&Fit network, members can nominate a fitness center for network participation. To use their Silver&Fit benefit, members must switch to a participating

fitness center within the Standard Fitness Center Network. Members should go online to www.SilverandFit.com for more information.

Q: How do members nominate a fitness center or YMCA?

A: Members can nominate a fitness center or YMCA by going online to www.SilverandFit.com, using the Silver&Fit mobile app, or by calling Silver&Fit Customer Service.

Q: Do Silver&Fit members get a Silver&Fit card? If so, how is one obtained?

A: The Silver&Fit Welcome Letter includes the Silver&Fit card, along with the name and location of the member's chosen fitness center and their fitness ID number. Members who join the program online can print a paper copy of the Silver&Fit card, or download it on their phone, and bring it with them to their first visit.**

Q: If members belong to a fitness center that leaves the network, what is the process for notifying them?

A: Members will receive a letter notifying them that the fitness center is leaving the network, 30 days in advance (when possible). This letter includes a listing of up to 10 fitness centers closest to the member's address and advises the member to go online or call Silver&Fit Customer Service to choose a new participating fitness center.

Q: What is the investigative process for complaints against a fitness center or YMCA?

A: American Specialty Health Fitness, Inc., provider of the Silver&Fit program, will assess complaints and follow up accordingly. Sanford Health Plan will then work with Silver&Fit to investigate and respond to the complaint. Some methods of investigation are an inquiry letter, a site visit or a secret shopper call.

Q: Do members ever have to pay a fitness center directly for Silver&Fit benefits?

A: No. However, members are responsible for paying any fees associated with upgrading their fitness center or YMCA membership, or for using any non-standard services or amenities that require separate, non-standard fees.

Q: What digital fitness tools and resources are available to Silver&Fit members?

A: Members have access to 8,000+ digital workout videos on the Silver&Fit website and mobile app. Members who would like to track their activity can utilize the Silver&Fit Connected! tool. Additional digital resources, such as Healthy Aging classes and The Silver Slate newsletter, can also be found on the Silver&Fit website in the online library of resources.

Q: What is Silver&Fit Healthy Aging Coaching and how does it work?

A: At no additional cost, members can join the Silver&Fit Healthy Aging Coaching program which includes one-on-one telephonic sessions with a coach. These sessions are tailored towards older adults and cover health and wellness areas like being active, healthy eating, lifestyle choices, aging well, managing conditions, and brain health. The initial kick-off session lasts for up to 30 minutes, with subsequent sessions lasting approximately 15 minutes.

Q: What is the Silver&Fit Connected! tool?

A: The Silver&Fit Connected! tool is available through www.SilverandFit.com. The Connected! tool allows members to track their activity from approved wearable fitness trackers and mobile apps (a full list is available online). After logging into their information on their chosen tracker,

members need to pair their tracker with the Silver&Fit Connected! tool so their exercise and activity can be converted into points to earn rewards (if applicable). Purchase of a wearable fitness tracker or app may be required to use the Connected! tool and is not reimbursable by the Silver&Fit program. Members' use of the Connected! tool serves as their consent for American Specialty Health Fitness, Inc. (ASH Fitness) to receive information about their tracked activity and to use that data to process and administer rewards to them under the program.

Q: How do members earn rewards through the Silver&Fit program?

A: Rewards, if available, are earned by accumulating points within the reward period. Members must opt in to receive rewards by logging on to the Silver&Fit website and going to the Points page under the Rewards section. Note: Activity completed before members opt in to the Rewards program will not count towards the first reward.

Q: What are the types of rewards members can choose from?

A: When members reach 300,000 points in a benefit quarter, they can choose to receive a Silver&Fit branded visor, baseball cap, or floppy hat. After the initial hat reward, members receive a collectible pin each time they reach 300,000 points in a subsequent quarter.

Q: How do Silver&Fit members leave the program?

A: Members must call Silver&Fit Customer Service at 1.877.427.4788 (TTY/TDD: 711). Fees are nonrefundable.

*Home Fitness Kit promotional codes cannot be used in combination with any other promotion on the third-party vendor website.

**Once materials are approved by the health plan.

The Silver&Fit program is provided by American Specialty Health Fitness, Inc. (ASH Fitness), a subsidiary of American Specialty Health Incorporated (ASH). All programs and services are not available in all areas. The people in this piece are not Silver&Fit members. Silver&Fit, Silver&Fit Connected!, The Silver Slate, and the Silver&Fit logo are trademarks of ASH and used with permission herein. Other names and logos may be trademarks of their respective owners. Kits are subject to change. Participating facilities and fitness chains may vary by location and are subject to change.

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Medicare Advantage Vision Benefits Member FAQ



Q: How do I use my VSP® (vision) benefit?

A:

1. Create an account at vsp.com.
2. Review your personalized benefit information.
3. Find an Advantage network eye doctor who's right for you (www.vsp.com/advantageonly or by phone at (844) 344-4768).
4. At your appointment, tell them you have VSP. Present your Sanford Health Plan Align ID card to your Advantage network doctor.

Q: Are there any claims to submit?

A: No, there are no claims or forms to complete when you see a VSP Advantage network doctor as the doctor verifies coverage, bills VSP for services rendered and VSP pays the doctor directly. If the member visits an out-of-network provider, they are responsible for paying the provider for services directly and filing a claim to VSP for reimbursement.

Q: How do I find an in-network doctor?

A: VSP Advantage network is a national network of doctors. All VSP doctors offer a dispensary on site. To locate a VSP network doctor, visit www.vsp.com/advantageonly.

Q: How do I contact VSP?

A: By phone, toll free (844) 344-4768, TTY: (800) 428-4833, or online at www.vsp.com

Q: What are VSP's hours?

A: Seven days a week, 8:00 A.M. to 8:00 P.M. (CST). There is a 24/7 IVR option available for plan information, to find a provider, determine out of network benefits, and if they have benefits available.

Q: Are VSP materials available in any other languages?

A: Yes, materials are available in English, Spanish, Korean, Vietnamese and Chinese by contacting Customer Service.

Q: Are TTY/Language Line services available?

A: Yes, more than 170 languages are available via Customer Service at (844) 344-4768, TTY: (800) 428-4833.

Q: What information is available in the VSP Member Portal?

A: Benefit information, provider directory, special offers and member extras, sign up to receive emails to make the most of your vision benefits and/or the Envision Newsletter, view VSP's eyewear gallery, eye care information and more.

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Travel Benefit

Align ChoicePlus PPO (MAPD) and Align ChoiceElite PPO (MAPD)



Q: How long can a member be outside of SD, ND, or MN and still receive in-network benefits, and be enrolled in the plan?

A: Six cumulative months of the calendar year.

Q: How does a member notify Sanford Health Plan they want to use their travel benefit?

A: The member should call customer service to notify Sanford Health Plan if they plan to be outside of SD, ND, or MN for more than one month. Customer service can be reached by calling (888) 278-6485 (TTY: (888) 279-1549) between 8 a.m. and 8 p.m. CST, 7 days per week Oct. 1 – March 31 and Monday – Friday April 1 – Sep. 30.

Q: When electing the travel benefit, which providers can be utilized by the member for in-network benefits?

A: The member can see any provider who accepts Medicare.

Q: How does Sanford Health Plan know to process a member's claims with in-network benefits when they are outside of ND, SD, or MN?

A: When the member calls customer service to turn on their travel benefit, a flag is placed on their record to indicate this election. The flag ensures the otherwise out-of-network claims be processed in-network. It will remain active six months or until a member notifies Sanford Health Plan they have traveled back home, whichever comes first.

Q: How long must the member be in the service area before they can reactivate their travel benefit?

A: There is no minimum amount of time before their travel benefit can be reactivated, however the member must live in the service area for six cumulative months of the calendar year to remain enrolled in the plan.

Q: Do the same prior authorization requirements apply as when a member is in-network?

A: Yes, the same prior authorization requirements apply.

Q: How are urgent care and emergency services covered?

A: Urgent care and emergency room visits for covered services received in the United States are always covered at an in-network benefit level. These plans do not cover services received outside the United States.

Q: What happens if a member forgets to notify Sanford Health Plan they are traveling and seeks care?

A: If a member uses non-urgent services, they should contact Sanford Health Plan and notify of the date travel began so claims can be processed (or reprocessed) appropriately. Traveling

for the specific intent of receiving care is an exclusion of the policy.

Q: Are out-of-network providers who accept Medicare required to provide care to Sanford Health Plan members?

A: Out-of-network/non-contracted providers are under no obligation to treat Align powered by Sanford Health Plan members, except in emergency situations.

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Mom's Meal Benefit Member FAQ



Q: How does the meal benefit work with my coverage?

A: Sanford Health Plan has partnered with Mom's Meals® to administer the post-discharge and chronic condition meal for Medicare Advantage Plans.

Q: Who is Mom's Meals:

A: Mom's Meals is a leading provider of fully prepared, refrigerated meals delivered direct to homes nationwide. Menus are tailored to support most common health conditions to help members remain healthy and independent.

Q: What diagnoses are eligible for the meal benefit?

A: Case managers will identify and screen members for the following conditions to enroll in the meal benefit.

- Alcohol dependence
- Drug dependence
- Cancer
- Autoimmune diseases
- Cardiovascular diseases
- Chronic lung disorders
- Hematological conditions
- Congestive Heart Failure
- Dementia
- Type 1 Diabetes Mellitus
- Type 2 Diabetes Mellitus
- End stage liver disease
- End stage renal disease (outpatient)
- End stage renal disease (inpatient)
- HIV/AIDS
- Stroke
- Members who are post-discharge will also be identified by case managers for participation.

Q: How do I use the meal benefit?

A: Members are identified for participation by Sanford Health Plan case managers. A referral is completed by clinical staff and sent to Mom's Meals when a member meets criteria to participate.

Q: How do member's contact Mom's Meals?

A: Mom's Meals Customer Service can be reached at (866) 204-6111 or to place an order, members can email orders@momsmeals.com.

A: Can Mom's Meals support members who speak multiple languages?

The Mom's Meals Language Line supports 160 different languages and all member materials are available in Spanish upon request.

Q: What types of menus are available from Mom's Meals?

- General Wellness
- Diabetes-Friendly
- Heart-Friendly
- Renal-Friendly
- Cancer Support
- Lower Sodium
- Pureed
- Vegetarian
- Gluten Free

Q: How are meals delivered?

A: Deliveries arrive in a cooler by Mom's Meals delivery drivers where available, otherwise meals are delivered by a third-party carrier such as FedEx, UPS, GSL or Spee-Dee.

Q: What should the member expect to receive?



Q: How long will the food last in the refrigerator?

Meals will last 14 days in the refrigerator.

Q: Can meals be stored in the freezer?

Yes, although we suggest storing them in the refrigerator to ensure the best quality. If the member is unable to consume the meals within the 14 days, meals can be stored in the freezer; however, meals should be thawed overnight in the refrigerator prior to heating.

Q: Is any preparation needed before consuming Mom's Meals?

A: No preparation required. The member can heat, eat and enjoy a nutritious meal within minutes.

Q: Does Mom's Meals use preservatives?

A: Mom's Meals does not add hormones, nitrates or preservatives to our meals. However, there may be nitrates or preservatives present in some ingredients that are purchased that extend shelf life. Whatever is listed in the product specification for an ingredient used is listed on the ingredient label.

Q: Are the gluten-free meals made in a gluten-free kitchen?

A: Our gluten-free meals are made in a USDA inspected kitchen, which is thoroughly cleaned according to the best food safety standards to reduce the risk of cross-contamination. It is not, however, a dedicated gluten-free kitchen.

Q: How are the gluten-free meals tested and to what level?

A: Gluten-free meals are tested at an ISO 17025 accredited laboratory using the ELISA method for gluten testing and are based on 20 ppm (parts per million) criteria, per the proposed FDA guidelines.

Q: Does Mom's Meals offer vegan meals?

A: Mom's Meals does not offer vegan meals at this time, however there is a selection of vegetarian meals available.

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