

oscar

 Holy Cross

 Memorial

Access to care
tips and tricks to
keep in your back
pocket (literally)

A little Oscar guidebook made just for you

This guidebook is small in size, but it's filled to the max with insider knowledge to help you get the care you need. That way you get the most out of your Oscar Plan. Keep it handy and actually use it! It's a great resource when you need to find a provider, schedule an appointment, or just want to benefit from your plan.









Bring this with you to an
upcoming appointment!

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Here's everything you'll find in here

Have questions about something here?

Or about scheduling, costs, coverage, etc? You can always call or text your Care Guides at (855) 672-2720 (TTY:711).

-  **Oscar resources** This is where you'll find out what Oscar puts at your fingertips.
-  **Provider 101** A crash course on all the different types of providers and how to find one that really works for you.
-  **Scheduling** Pro tips on how to schedule appointments.
-  **Visit preparation & post visit follow ups**
How to make the most of your visit and what to do after your visit.
-  **Out-of-state coverage** Need a doctor when you're on vacation or out-of-town? Here's what you need to know.
-  **Oscar & Holy Cross & Memorial** What you get in Broward
-  **The Oscar provider care dictionary** Would this even be a guidebook if it didn't include lots of useful definitions? (Of course not.)
-  **Notes** Extra space to write down whatever you want. You can even doodle in it. (It's your booklet, after all.)

1. Oscar Resources



Let's look at all the things available to you as an Oscar member.

Your Oscar member account is the place where you'll find everything you need.

We want you to get the most of your plan. For real. Setting up your Oscar account will help you do just that. **With it, you can:**

- Communicate with your Care Team
- Search your plan and find new healthcare providers
- Use Virtual Urgent Care

Hang tight! We'll go into all of the three things above in a bit.

But first, let's show you how to set up an Oscar member account (if you haven't already). **Just follow these simple steps:**

- 1 Visit hioscar.com/register. Enter your email address. Create a password. Then, just hit 'create an account.'
- 2 Verify your email. We'll ask for a few details so we can match you with your enrollment info.
- 3 Then enjoy, enjoy, enjoy.



You have a Care Team whose only job is to help you get the most of your plan.



They can help you schedule appointments, help you find in-network providers, and set up Virtual Urgent Care appointments for you. They're also available to answer any of your questions.

It's super easy to get in touch with your Care Team:

Text them – just like you would text a friend. Opt in here: (855) 672-2720. It'll only take a min. Then you can text questions like “ is Doctor so-and-so in-network?”

Message them through your member account at hioscar.com/login. It's kind of like an email, but even more secure. So if you're looking for a new specialist (for example), just send us the details and we'll help you find one.

Call them at (855) 672-2720.

Consider Oscar's search tool your go-to.



It's the best place to look for providers, meds, benefits, and anything related to your plan.

To start searching for care:

- 1 Log in to your account or your Oscar mobile app.**
- 2 Type what you're looking for into the search bar.** You can search meds, doctors, facilities, and even by provider specialty (ie. primary care provider, dermatologist), condition, or specific treatment. You can use the search tool to help you find other healthcare resources and information, such as your benefits, Oscar's drug formulary, your health survey, and more. And don't worry, all of your results will be in-network.

3 Narrow your results by what matters most to you. Use the filters to find providers based on distance, appointment availability, gender, language, and more. This is super helpful when trying to find a provider who's accepting new patients or when looking for facilities within a certain mile radius from you.

4 Save your favorites. It's always a good idea to get to know your in-network options even before you need care. That's why we make it easy to save your favorites! Simply click the heart icon that says "save for later" at the top of a provider page. And to make things even easier, you can access your favorites online or in the Oscar app.



There's also \$0 Virtual Urgent Care

So you can talk to a provider 24/7 (in as little as 15 min) over the phone or by message.

When is it best to use Virtual Urgent Care?

For things like sore throats, rashes, UTIs, and prescription refills. In other words, urgent, but non-life threatening issues.

And it's really easy to connect with a Virtual Urgent Care provider.

Just request a consultation through your online account or Oscar app. Once you're in, click "Talk to the first available doctor" and follow the prompts to request a consult. You can also call your Care Team at (855) 672-2720 to help you request a Virtual Urgent Care consult too.

2. Provider 101

There are a lot of different types of healthcare providers, and together they can help you take care of all of you.

Doctors are either primary care providers (PCPs) or specialists. But what's the difference?



Primary care providers (aka family doctors, personal doctors, internists, or general practitioners) help you manage your health day-to-day for the long term. So when something comes up, they're the first person you talk to when it's not an emergency. They're great because they're trained to diagnose a wide variety of medical conditions. PCPs are pros at helping you track your health over time and coordinating care if you're seeing a few specialists. Think of them as your healthcare quarterback.

Specialists are doctors (as well as physician's assistants, or nurse practitioners) focused on just one branch of medicine. Like the heart or bones. If you have something going on, your PCP may recommend that you see a specialist to take a more detailed look at the issue and provide you with treatment and/or surgery if needed.

There are other kinds of healthcare providers too:

Behavioral health providers are trained to provide support for mental health and substance use conditions. They're your social workers, psychiatrists, therapists, etc. They offer services like therapy, coaching, and/or medication management. If you need support during life changes, in handling stress, or to help manage more complex mental health conditions, they're precisely the right providers to call.



Pharmacists are healthcare providers who specialize in prescription meds. They fill prescriptions from your doctor or other healthcare providers. They're experts in meds, the side effects, and drug interaction. Don't hesitate to ask them questions about your meds in addition to your healthcare provider.

Now, let's find you a healthcare provider!



First things first, it's always good to start by understanding which providers are in-network. This is super important. Why? Because if you go out of network, you have to pay the full cost of your care. And we don't want you to have to do that.

What do we mean when we say 'network?' We mean a list of healthcare providers, clinics, and hospitals that your Oscar plan covers.



Here's how to find in-network providers:

Just login to your Oscar member account (visit hioscar.com/login) and search for doctors, meds, and facilities covered by your plan. You can search by specialty and filter the results by distance, hospital affiliation, gender, language, availability, condition, or even treatment. Our search tool is designed to help you find the best providers to meet your needs.

And because you deserve the best provider experience possible, here are some tips to help you find the right provider for you:

- **Ask local friends and family for recommendations. Just make sure their recommendations are in-network with your plan.**

- **Make a list of what's important to you in a provider. Ideas include:**
 - Do they speak my preferred language?
 - Are they close to home or work?
 - Do they specialize in a specific condition that matters to me?
 - Are they part of a practice? Or are they an independent doctor?
 - Do they have weekend or evening appointments?
 - Do they offer emergency care support?
 - Do they have preferred Hospital Affiliations?
- **Ask your PCP for recommendations or referrals for specialists.**
- **Search online to see if they have an online video introducing themselves. (We find these super helpful.)**

Call or text your Care Guide at (855) 672-2720 (TTY:711). They'll have recommendations for you based on your location and/or specific needs. Plus, they know which providers your plan covers.

Specialist tips

If your PCP recommends a specialist or you're looking for one, here are some super important things to keep in mind:

Inform your PCP of any preferences that are important to you when considering a referral to a specialist. This could include language preferences or location.

Always remember to check if a specialist is in-network.

Reminder: Typically your PCP will coordinate your care with your specialist so that someone has a full view of your health, which is great!



Where to go when you need care

There are lots of choices for where to get your care when something comes up. Let’s break it down so you know exactly where to go.

Choosing the right place for care can save you time and money. And you deserve that!

*Specialist office visits are \$0 for Oscar + Holy Cross + Memorial (HMO), Oscar + Holy Cross + Memorial with \$1,500 O-Card (HMO) and \$5 for Oscar + Holy Cross + Memorial with Refund Bonus (HMO) plans.

Primary care provider (PCP) \$0	Virtual Urgent Care \$0	Urgent care \$	Specialist visit \$*	Emergency room \$\$\$
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Your PCP knows you and your health history.

Visit them for:

- Preventive care
- Annual Wellness Visit
- Non-emergency health concerns

Appointment needed. Check your Oscar app to find an in-network PCP near you or call your Care Team.

When you need care quickly but it’s not an emergency, 24/7 & \$0 Urgent Care is the way to go.

They can help with:

- Cold & flu or COVID-19 symptoms
- Pink eye
- UTIs
- Prescription refills

No appointment needed. Just login through your Oscar member account (hioscar.com/login) and request a call. A provider will reach out in as little as 15 minutes.

Same-day care for more urgent, but not life-threatening issues.

Go here for:

- Rashes
- Cuts & burns
- Sprains
- Allergies & sinus infections

No appointment needed. Check your Oscar app to find an in-network Urgent Care near you or call your Care Team.

When you need care in a specific area like cardiology or dermatology.

Schedule a visit:

- To complete certain tests and screenings, like a mammogram or colonoscopy
- When recommended by your PCP

Appointment needed. Call your Care Team to schedule something or to find an in-network specialist.

No referrals** required. (Isn’t it great?)

Same-day care for life-threatening concerns.

Visit the ER immediately if you have:

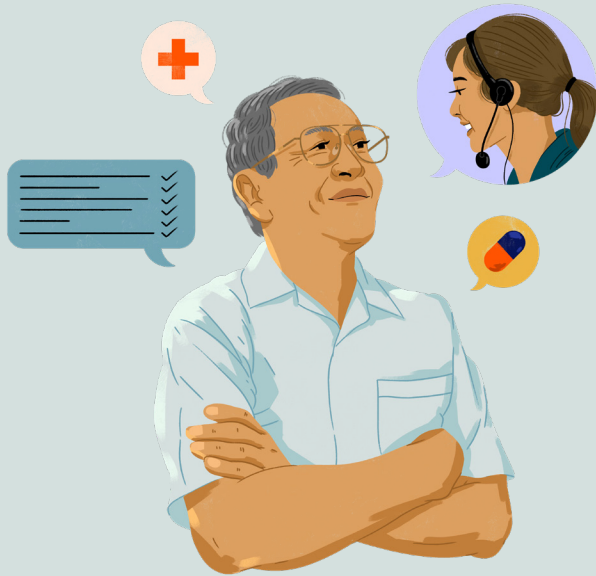
- Severe chest pain
- Difficulty breathing
- Broken bones
- Heavy bleeding
- Stroke
- Confusion, fainting or blacking out
- Changes in vision

**A specialist may require a referral from your PCP as part of their office policy, even though Oscar does not require one.

3. Scheduling

Really great insider tips on scheduling your care

Now you know about which kind of provider to see and where to go when you need care. We'll break things down for you to help you navigate healthcare provider appointments and make your life easier. So you get the most out of your benefits.



Oscar tip: New patients sometimes need to schedule a longer appointment for their first visit, which makes squeezing you in a little harder. The key takeaway: plan ahead instead of waiting until the last minute.

A few key things to do when it comes to scheduling:

Have a go-to primary care provider (aka PCP).

If you already have a PCP, skip this part. If you don't, it's best to find one and schedule an appointment with them while you're feeling well. That way you have someone to call when you need care.

Decide if you need a medical doctor. Often nurse practitioners or physician assistants within your PCP's office will do the trick (especially with routine things like allergies or vaccinations). They can be easier to get an appointment with and they'll coordinate with your primary doctor as needed.

Use \$0 Oscar Virtual Urgent Care. You have easy access to a doctor 24/7 with Virtual Urgent Care. It's another great benefit to help you get the care you need. Talk to a doctor about things like cold or flu symptoms, mild COVID, or even prescription refills—in as little as 15 minutes! It's a great way to supplement the care you get from your primary care physician. Log in to your Oscar member account at hioscar.com/login to schedule an appointment.

Some scheduling pro tips:

Schedule things in advance when you can.

Schedule your annual appointments or 6 month check-ins for the year in advance. That way you're more likely to get the time and date you want. It also lets you do things like coordinate different appointments on the same day, which can sometimes be easier. This includes your dental, hearing, and eye exams!

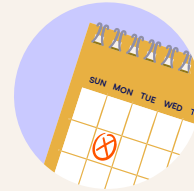
Book online. More and more providers are offering online booking, which is super convenient. Search online for appointments that open up or plan things months in advance.

Consider virtual options when it makes sense to do so. Providers might be able to schedule a phone discussion or virtual video visit sooner than an in-person visit. Take advantage of that and talk to your provider about your options.

Call provider offices during slow times.

Provider offices are usually the busiest when they just open in the morning and around noon. Try calling mid-morning and mid-afternoon instead.

Ask to be on a waitlist. Lots of patients (about 10 to 20%) cancel their appointments at the last minute or end up as no shows. This gives you a chance to get an appointment. Not all doctors keep a waitlist, but it's totally worth getting on one if they do.



A very handy list of yearly appointments to make in advance:

- Annual Wellness Visit
- Dental exam & cleaning 2x per year
- Hearing exam annually
- Eye exam annually
- Breast cancer screenings (mammogram)
- Colon cancer screening (colonoscopy) — consult with your provider to see if you need this annually or less frequently

Specialist scheduling tips

Ask your PCP if they can help schedule your visit with the specialist. Some might! They often know the doctor and can get in touch with their office quickly. Plus, it's one less thing you have to do.

Navigate the wait time for an appointment if needed. Some specialists are booked up for a while, and you might need to wait. If that's the case, ask your PCP if they can help you find a specialist with an earlier availability. Or call Oscar for assistance in locating a specialist with earlier availability.

Schedule your routine specialist visits a year ahead (whenever possible).

We don't require referrals to see specialists at Oscar. (And we're happy about that.) But sometimes the specialist may require a referral from your PCP. Your referring PCP and specialist will take care of that for you.



4. Visit preparation & post visit follow ups

Now, let's get ready for a visit.

Here's exactly what you need to do before a visit:

- ☐ **Double check to make sure your provider visit is in-network.** You can filter a provider search by location, speciality, and more in your member account at hioscar.com/login.
- ☐ **Make sure you know the cost of your appointment.**
 - ☐ Most preventive care visits are \$0, but other office visits have a standard copay (see appendix on page 40 for more details on preventive vs. diagnostic)
 - ☐ Find benefit cost information in your member account at hioscar.com/login
 - ☐ Or call your Care Guide to find out more information

- ☐ **Prepare!** It's hard to remember everything, especially if you see your provider only once a year. Here's a few things you can do to prepare:
 - ☐ Bring a list of any questions you have. Think about what you want to ask your provider or need to check on.
 - ☐ Bring your medications to the visit
 - ☐ Also, bring a list of other providers you may be seeing (including dentists or eye doctors)
 - ☐ If you're seeing a new provider, have your family history and medical history available or have it sent to the provider's office
- ☐ **Be ready to share.** It can be hard to be open and honest with your provider. Just remember it's their job to help you. And they need information from you to do that.

Searching for some specialist tips? We've got you covered on page 14 and page 22.

And guess what? You can also arrange a ride to your appointment.*

Just call us and we'll set up a ride for you through your \$0 transportation benefit. It's best to call at least 24 hours before you need a ride. But if for some reason you can't, you can always call the same day too.

*Please note that Oscar + Holy Cross + Memorial - with Refund Bonus (HMO) plan does not have supplemental transportation benefits.

And what about preparing for your annual wellness visit? Here's a checklist of exactly what you should cover in your visit:

- ☐ **Make an overall health plan.** It's great to be proactive with your provider and make sure you're up to date on:
 - ☐ **Cancer Screenings:**
 - ☐ Breast cancer mammography
 - ☐ Colorectal cancer screening (ex: colonoscopy)
 - ☐ Lung cancer, if you're a smoker
 - ☐ Osteoporosis or bone density scan
 - ☐ Immunizations like the annual flu shot, shingles vaccine, and COVID-19 boosters

☐ **And if you're 65 and older, make sure you ask your doctor about:**

- ☐ Fall prevention to help prevent falls or treat any issues with balance or walking
- ☐ Urinary incontinence (or bladder control) and ways your doctor can help with treatment options
- ☐ Your physical activity and make sure you're getting enough

☐ **Condition management**

- ☐ If you're managing diabetes, make sure you're on track with your A1c levels. Also, schedule your yearly diabetic eye exam and your kidney screening.
- ☐ If you have high blood pressure, talk to your doctor about what you're doing to keep your blood pressure in check. And get a blood pressure reading (which they'll likely do anyway.)

☐ Medication management

- ☐ Talk to your doctor about issues getting prescriptions and/or side effects with your meds
- ☐ See if there's an opportunity to switch your meds to a 90-day supply
- ☐ For some medications, there may be a lower cost alternative. Ask your doctor if there is an option to switch to a lower cost drug.

Need blood work?

Remember to ask your provider to send your labs to Quest Diagnostics, Labcorp, or Bioreference Labs (Oscar's preferred partners). That way you'll avoid a surprise bill from an out of network lab.

Before you leave your visit:

Get an after visit summary

Ask your provider if they can print out a summary of your visit or send one to you with notes from your appointment, including reminders. If you need notes in Spanish, ask them if they're able to help you with that too.

Connect about your lab results and follow ups

Ask your physician when you should expect your lab results, and confirm when they plan to walk you through them. It's always a good idea to make sure they send your results through their provider portal as well. For labs sent to Quest, you'll automatically find them in your Oscar member account.

Schedule any follow ups and future appointments

Many offices will schedule appointments up to one year in advance, which is great. Use this to your advantage and set up your annual visits before you go. That way you'll easily get a time that works well for you. Also, schedule any follow up appointments while you're there. (It's one less thing on your to-do list).



Make sure you're totally clear on the costs

Be ready to pay your copay for the visit (if you have one) before leaving your provider's office. Ask your provider's office if you should expect a bill for any other part of the visit. (Like for any diagnostic testing performed during the visit, which may be charged separately from the visit copay). If there is another charge, find out when to expect the bill.

You did it. You visited the doctor. Now what?

Check in with your notes

Look at your after visit summary and make sure you're keeping up with your provider's recommendations.

Follow up about your lab results

How? Just check your Oscar member account and call the office if you have any questions. It's always great to stay on top of these things, so set a reminder in your calendar.

Earn Rewards

You could earn gift card rewards for completing routine exams during your visit or by completing preventive screenings your doctor recommends.

You may be eligible to earn by completing a:

Primary care physician visit - \$25
Breast cancer screening - \$25
Colorectal cancer screening - \$25
Osteoporosis screening - \$25

If you have diabetes, you could also earn for completing:

Diabetic eye exam - \$25
A1c Testing/Under Control - \$25
Kidney health evaluation - \$25
Bonus for completing all 3 - \$15

Visit the Health and Wellness Perks page in your account to learn more about how to earn and who is eligible.



5. Out-of-state coverage

When you're traveling or out-of-state and you need care, it's important to understand what's available to you. It's also good to know that if an emergency comes up, you're covered.

Here's what's covered if there's an emergency when you're out-of-state:

Oscar Medicare Advantage

- ✓ \$0 Virtual Urgent Care*
- ✓ ER and Urgent Care covered in the U.S. and internationally
- ✓ Network pharmacies throughout the U.S.**



Going away for a while? Do these things so your Medicare Advantage plan travels with you:

- Notify your PCP of your travel plans.
- Locate a preferred pharmacy (hioscar.com/search) near your destination. Don't worry, you'll have access to many nationwide pharmacies.
- Bring your ID card with you. (But don't sweat it. You can always find your digital ID in your member account at hioscar.com/login.)

*Virtual Urgent Care offerings are not available in US territories or internationally. **There may be state to state regulations on transferring prescriptions. Consult your doctor and pharmacist.

6. Oscar & Holy Cross & Memorial Health

For you, Broward

By bringing together Holy Cross and Memorial Health's extensive network with Oscar's patient-focused experience, we're able to give you better, smarter care for \$0.

Here are some of the things you'll get:

A network of the top South Florida hospitals and care centers. You'll find all of the locations included right in your Oscar member account. Search by location, facility, or provider.

A convenient Patient Portal. Holy Cross & Memorial both have Patient Portals where you can schedule appointments, view lab results, communicate with your provider, request prescription refills, and manage your appointments. To learn more or sign up, visit Memorial's website at mhs.net or Holy Cross's website at holy-cross.com.

How is this different from your member account?

Your Oscar account helps you understand what your Medicare Advantage plan covers, where to find an in-network provider, or your pharmacy coverage.

Access to the Holy Cross Agewell Center.

What is the Holy Cross AgeWell Center?

A new comprehensive, collaborative health destination focused on healthcare, well-being, and social interaction that helps you feel great now and years from now.

It's led by a medical director whose goal is to keep you well and take care of any new or long-term health issues. Members also get full support from a nurse, social worker, and patient concierge. So you'll be in good hands — a lot of them.

Search for open appointments and schedule one at holy-cross.com/find-a-service-or-specialty/agewell-center.

7. Provider care dictionary

Now here's something you'll probably need some day (and maybe even today). Let's look at some popular and often confusing healthcare terms and we'll do our best to make them a little easier to understand.

Claims: A claim contains a line-by-line account of all the services you received and how much each one costs. Your insurer will process your claim before they issue an explanation of benefits to show you how the claim was handled and who pays what.

Coinsurance: Coinsurance is how much you owe for a covered healthcare service or prescription, calculated as a percentage (e.g. 15%) of the amount. Unlike copayments, which are a flat fee, coinsurance varies based on the cost of the total service or order.

Here's an example. Let's say you visit a specialist for chronic migraines. Your insurance plan says the total cost of your visit is \$100, and your coinsurance is 20%. You'd pay \$20 for your visit, and your insurer would pay the remaining \$80.

Copayments (or copays): Copays are fixed dollar amounts (e.g. \$20) you're responsible for paying for a covered appointment, service, durable medical equipment, or prescription. Your copay amount will vary depending on the type of service or item you receive. Your insurance plan's *Schedule of Benefits* outlines what your copays are required for each type of care. Copayments often come into effect after you've met your deductible and apply toward your out-of-pocket max. Some plans also include copayments pre-deductible as well. In most cases, you'll be required to pay your copayment up front when you go in for an appointment or before your doctor orders you meds or durable medical equipment (DME).

Cost sharing: Cost sharing is a term for any and all covered medical expenses you pay out-of-pocket before your health insurance company picks up the full tab. **This includes:**

- Copayments
- Coinsurance
- Out-of-pocket expenses under your deductible

It doesn't include:

- Premium payments
- Balance billing amounts for out of network doctors or facilities
- Payments toward non-covered services

Formulary: A formulary (or drug list) is a list of prescription meds covered by an insurance plan's benefits.

Formularies usually include generic and brand-name meds that are classified in different tiers. Your cost sharing will vary depending on the drug type and tier. Check out your *Schedule of Benefits* at hioscar.com/medicare/forms for med details related to your plan.

Inpatient care is care and medical services that require you to be formally admitted to the hospital by a doctor. Inpatient care is generally for people with more serious conditions that require continuous monitoring, further diagnostic testing (such as labs and imaging), or rehabilitation services. They require you to stay overnight in the hospital for one or more days.

Outpatient care is care and medical services provided at a hospital or medical facility that doesn't require you to stay overnight. This includes an X-ray or MRI or minor surgery or laser procedure.



A service can be considered preventive (\$0) or diagnostic (not \$0)

Depending on why it’s performed and how it’s coded by your provider, the same service can be considered either preventive or diagnostic, with different cost implications for you.

	Preventive	Diagnostic
Reason for service	General screenings to ensure that you are healthy and to detect potential health concerns early, when no symptoms are present.	To diagnose specific conditions and/or determining a course of treatment based on your symptoms.
Your cost	Free, at no cost to you	You’ll be responsible for the entire cost — or a share of the cost — depending on your plan.
Example 1 Sexually transmitted infection (STI)	You don’t have any STI symptoms, but you receive an STI test as part of your annual physical. This is considered preventive, so the test is \$0.	You visit your provider because you’re experiencing itching and burning symptoms, so they give you an STI test. Regardless of the test’s outcome, this test is considered diagnostic. This means you’re responsible for the entire cost — or a share of the cost.

Don't forget: both preventive and diagnostic services can be performed in the same visit.

If a preventive service is performed during an office visit where it's not the primary purpose of your visit, the preventive service is \$0, but if you also receive services for care during your visit that requires a cost-share you may be responsible for that cost.

If new or existing health problems are identified and/or addressed during a preventive care visit, the visit itself and any preventive services performed during the visit will be \$0, but you may be responsible for the entire cost or a share of the cost for any non-preventive services performed during the visit. For more information on diagnostic costs, review the Diagnostic testing section under Coverage & Benefits in your account or review your Summary of Benefits.

Prior authorizations: Some health services, treatments, meds, and medical equipment require a pre-authorization (also called prior authorization, prior approval, or precertification) before your doctor can continue with your care plan.

Pre-authorizations are generally needed for highly-regulated or complex services, care, and medications.

Your doctor is responsible for filing a pre-authorization with your insurance company before they take action when authorization is required. Once the insurance company gives approval, they can schedule an appointment, fill a prescription, or order your equipment.

Pre-authorizations can sometimes take a day or two to file, so it's important to get them done well ahead of time. When your doctor is laying out a care plan for you, make sure to ask them if any items need authorizations, or call your health insurance company to check.



8. Notes

(Because it's nice to have a space that's all yours.)

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You deserve the best care possible.

And the best little
guidebook possible.

Call your Care Team at (855) 672-2720 (TTY: 711)
Hours: 8 a.m. - 8 p.m. seven days a week from
October 1st - March 31st & 8 a.m. - 8 p.m.
weekdays from April 1st - September 30th.