

What People on Medicare need to know about Private-Fee-for-Service Plans

The Any, Any, Any Plan is a Medicare Advantage Private-Fee-for-Service (PFFS)* plan authorized by the Centers for Medicare & Medicaid Services (CMS). A PFFS plan is different than Original Medicare or an HMO, PPO, or Medicare supplement plan.

The Any, Any, Any Plan gives you the ability to choose your health care provider. However not all providers may accept this plan, even Medicare providers may not accept this plan. If you choose this plan, it is very important that all the providers you choose know, before providing services to you, that you have the Any, Any, Any Plan coverage in place of Medicare. This gives your provider the right to choose whether or not to accept the Any, Any, Any Plan terms and conditions of payment for treating you. Providers have the right to decide if they will accept the Any, Any, Any Plan each time they see you. This is why you must show your Any, Any, Any Plan ID card every time you visit a health care provider.

If your provider agrees to the Any, Any, Any Plan terms and conditions of payment

If your provider decides to accept the Any, Any, Any Plan, they must follow our plan's terms and conditions for payment. They must thereafter bill the Any, Any, Any Plan for those services. However, providers have the right to decide if they will accept the Any, Any, Any Plan each time they see you.

If your provider does not agree to the Any, Any, Any Plan terms and conditions of payment

A provider may decide not to accept the Any, Any, Any Plan's terms and conditions of payment. If this happens, you will need to find another provider that will. You may contact us at 1-866-690-4842, Monday – Friday from 8am to 11pm EST and 8am to 8pm on Saturday and Sunday for assistance locating another provider in your area willing to accept our plan's terms and conditions of payment.

What happens if a provider declines to accept the Any, Any, Any Plan's terms and conditions of payment?

1. They should not provide services to you except for emergencies.
2. If they choose to provide services, they may not bill you. They must bill the Any, Any, Any Plan for your covered health care services. You must pay the appropriate co-pays or coinsurance at the time of service.

For more information about PFFS plans see Beneficiary Qs & As at CMS's web site <http://www.cms.hhs.gov/PrivateFeeForServicePlans/>. If you have questions about the Any, Any, Any Plan, please call our Member Services Department at 1-866-690-4842, Monday - Friday from 8am to 11pm and Saturday and Sunday from 8am to 8pm.

* A Medicare Advantage Private Fee-for-Service plan works differently than a Medicare supplement plan. Your doctor or hospital is not required to agree to accept the plan's terms and conditions, and thus may choose not to treat you, with the exception of emergencies. If your doctor or hospital does not agree to accept our payment terms and conditions, they may choose not to provide health care services to you, except in emergencies. Providers can find the plan's terms and conditions on our website at www.univhc.com.