

	"Welcome to Medicare" Visit**	Flex Allowance of \$500 for additional Dental, Vision and Hearing Services**
(Physical Exam)	fights, etc.)	
(IVammogram)	Non-Emergency Enhanced Transportation (health care visits, pharmacy, gym & grocery) (Scheduled Ride, Bus, Wheelchair Access)**	Mom's Meals (Two meals per day for 14 days after an observation or inpatient hospitalization)(Community Well Only)**
Colorectal Cancer Screening		Personal Emergency Response System (PERS)**
(Kidney Screening)		
(shots, fuvaccines)		
Medicare Diabetes Prevention Program (MDPP)**		

All covered services outlined in this document are subject to the conditions, exclusions, limitations, terms, and rules of the Member Handbook, which is the controlling document, including any rider/ enhancements or amendments. For more detailed information about your covered services, please refer to the Member Handbook at CareSource.com/MyCare.

CareSource® MyCare Ohio (Medicare-Medicaid Plan) is a health plan that contracts with both Medicare and Ohio Medicaid to provide benefts of both programs to enrollees.

KEY

Program®**

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hebii ** Medicaid and Medicare

Plan benefit only. + Each dental beneft/service may have a specific limit

My CareSource Rewards

Healthy activities you can

MvCare Medicare and Medicaid members only.

This information is not a complete description of benefts. Not everyone can get all of the benefts listed. Questions? Call Member Services at **1-855-475-3163** (TTY: 1-833-711-4711 or 711), 8 a.m. – 8 p.m. Monday through Friday.