



General questions about the Benefits Mastercard

Q: Why did Samaritan Advantage Health Plans add the Benefits Mastercard?

A: A benefit Samaritan Advantage began offering to our members in 2022 is a quarterly dollar amount that can be used to purchase over-the-counter (OTC) items like Tylenol or cold medicine. In prior years, these items were not covered under the plan. Additionally, we have added increased dental benefits and continue to offer our routine vision hardware and hearing aid benefits from past years. We wanted to ensure that accessing these benefits was as convenient as possible for our members. Members also told us that many dental providers were not familiar with Samaritan or will not bill insurance, and therefore would not see our members. For these reasons, we elected to use a benefits card that allows members to pay for OTC items and certain dental, vision and hearing aid services up front, with no need to submit a claim. The intent of the Benefits Mastercard is to enhance our members' ability to access these benefits efficiently. Providing you with a prepaid Benefits Mastercard also eliminates the need for a provider to have to bill insurance.

Q: Do I have to use my Benefits Mastercard to pay for services?

A: Yes. You must use the card to pay for the service we have outlined as being covered using the Benefits Mastercard. If a provider submits a claim to the plan for these services, it will be denied and direct the provider to seek payment from the member using the Benefits Mastercard. If you pay out-of-pocket for any services that should be covered by the card, you can submit for reimbursement.

Q: Does this card work like an FSA (flexible spending account) card?

A: No. The Benefits Mastercard can only be used to pay for eligible OTC items, routine vision hardware, dental services, hearing aids, hearing aid supplies and repairs. It cannot be used to pay for prescriptions or copays.

Q: Where can I find the reimbursement form?

A: The reimbursement form can be found on our website at samhealthplans.org/AdvantageForms. Complete and mail in the form titled "Request Reimbursement for Benefits Card Expenses."

Q: Whom do I call if I never received or lost my card?

A: Log in at myhealthplan.samhealth.org and click on Benefits Card login to manage your card status and replace a lost or stolen card. You can also call our Customer Service team for card support at 800-832-4580 (TTY 800-735-2900).

Q: Whom do I call if my card is not working?

A: Log in at myhealthplan.samhealth.org and click on Benefits Card login to view your account activity details. Call our Customer Service team at 800-832-4580 (TTY 800-735-2900) with additional questions about your card and card activity.

Q: How can I check my balance?

A: Log in at myhealthplan.samhealth.org and click on Benefits Card login to view your balance. You can also check your balance 24/7 by calling 888-831-4668.

Q: Whom do I call if I have a complaint about my Benefits Mastercard or services?

A: You can call 800-832-4580 (TTY 800-735-2900) and ask to be forwarded to an Appeals and Grievance team member who can assist you.

Q: What is a Merchant Category Code (MCC)?

A: A MCC is a four-digit number that describes a merchant's primary business activities. MCC's are used by credit card issuers to identify the type of business in which a merchant is engaged. The Benefits Mastercard uses MCCs to control where eligible purchases can and cannot be made. For example, 8021 is the MCC for dentists and orthodontists and 8041 is the MCC for chiropractors. The Benefits Mastercard will work at a dental office with an MCC of 8021. It will not work if used at a chiropractor's office.

Q: How do I check if a provider is on the Medicare opt-out list?

A: Ask the provider if they have opted out of Medicare, call our Customer Service team at 800-832-4580 (TTY 800-735-2900) or visit data.cms.gov/tools/provider-opt-out-affidavits-look-up-tool to search for the provider.

Over-the-counter (OTC) benefit questions

Q: Where can I use the card to purchase OTC items?

A: The card can be used at most pharmacies, stores and online merchants who accept Mastercard. Examples of common retailers are Bi-Mart, Walmart and Walmart.com, Fred Meyer, Rite Aid, Walgreens, Amazon.com and Samaritan pharmacy locations. You can visit sig-is.org/card-holders/store-locator to find a retailer near you.

The card can also be used to make purchases from our online OTC store at samaritanOTC.com. These items can also be purchased over the phone or by mail. The catalog is available online at samhealthplans.org/Advantage or you can contact Customer Service if you would like this catalog mailed to you.

Q: Where can I find a list of OTC items that are eligible to purchase?

A: A list of eligible OTC items that can be purchased at retail stores, pharmacies and online merchants can be found on our website at samhealthplans.org/AdvantageBenefits. This is not a comprehensive list, but rather a list of categories and examples of common items. Unfortunately, we are not able to provide a list that is more detailed than this.

We also have a catalog of items that can be purchased through our online OTC store at samaritanOTC.com. This list is available at samhealthplans.org/AdvantageBenefits. These items can also be purchased over the phone or by mail. You can also contact Customer Service if you would like this catalog mailed to you.

Q: How does the Benefits Mastercard know what is and is not an eligible purchase?

A: The Benefits Mastercard functions using inventory information approval system (IIAS) technology. Merchants who accept the card use this IIAS technology to compare the item being purchased to a list that is nationally maintained by SIGIS (The Special Interest Group for IIAS Standards). This list contains only items that the Centers for Medicare and Medicaid Services (CMS) has allowed to be covered under a Medicare OTC benefit.

Q: Why did an item that is on the OTC list decline at the register?

A: There are a couple different reasons this can happen:

1. The item being purchased is not on the SIGIS (The Special Interest Group for IIAS Standards) maintained list of eligible items (see next question for additional details).
2. The merchant's payment system did not send any IIAS (inventory information approval system) data for that item.

You may choose to pay for the item out-of-pocket and submit for reimbursement or use your remaining benefit balance toward a different purchase in that quarter.

Q: Do I have to purchase brand name items?

A: You do not have to purchase brand name items, but you may find that brand name items process successfully more often. Because the SIGIS (The Special Interest Group for IIAS Standards) list is nationally maintained it is less likely that generics and store brands are included on the list. Merchants do have the ability to manually update their system to indicate store branded or generic items as eligible. It is more likely that bigger name stores such as Walmart have taken steps to add their store brand items. However, we have heard from members that the experience of purchasing generics and store-branded items is still inconsistent. Our data shows that purchases made at Bi-Mart and Walmart are most likely to be successful.

Q: What are “dual-purpose” items?

A: Dual-purpose items are ones that the Centers for Medicare and Medicaid Services have determined have both a health-related and non-health related use. Examples of dual-purpose items include vitamins and minerals, weight loss items, in-home testing and monitoring supplies and more.

Q: Why can't I purchase “dual-purpose” items like vitamins and minerals in store?

A: Because dual-purpose items have both health-related and non-health related uses, the Centers for Medicare and Medicaid (CMS) want members to have had a conversation with their providers about the use of the items prior to purchase. For this reason, the items cannot be purchased in stores using the card.

Dual-purpose items can be purchased through our online OTC store, which has a catalog of specific items that are eligible for purchase. These items can also be purchased by phone or mail. For more information visit the online OTC store at samaritanOTC.com or see the catalog available at samhealthplans.org/AdvantageBenefits. You can also contact our Customer Service team if you would like us to mail you a hard copy of the catalog.

Online OTC Store

Q: How do I access the online OTC store?

A: The online OTC store can be accessed by going to [samaritanOTC.com](https://www.samaritanOTC.com). Orders can also be placed over the phone by calling **800-752-3730** (TTY: 711) Monday through Friday from 8 a.m. to 5 p.m. You may also place an order by mailing in the order form to:

Samaritan Health Plans OTC Orders
4613 N. University Drive, Unit #586
Coral Springs, FL 33067

The catalog is available at [samhealthplans.org/AdvantageBenefits](https://www.samhealthplans.org/AdvantageBenefits). You can also contact our Customer Service team if you would like us to mail you a hard copy of the catalog.

Q: What payment methods can be used to make purchases on the online OTC store or from the catalog?

A: You must use your Samaritan Advantage Health Plans Benefits Mastercard when placing an order. Cash, checks, personal credit cards or money orders are not accepted to make purchases from this catalog.

Q: Is there a minimum purchase amount or shipping fees?

A: No, there is no minimum purchase amount required and no shipping fees.

Q: How long does it take for my order to be delivered?

A: Your order should arrive within five to seven business days from the time the order is placed.

Q: Whom do I contact if I have a problem with my order?

A: Call **800-752-3730** (TTY: 711). Customer Service representatives are available Monday through Friday from 8 a.m. to 5 p.m.

Q: How do I get a hard copy of the catalog?

A: The catalog is available at [samhealthplans.org/AdvantageBenefits](https://www.samhealthplans.org/AdvantageBenefits). You can also contact our Customer Service team if you would like us to mail you a hard copy of the catalog.

Q: What if my order amount is greater than the amount I have left on my card?

A: Your order total may exceed the benefit amount available on your Benefits Mastercard. You will need to adjust your order to be equal to or less than your remaining benefit amount. You may make another purchase from this catalog in the next quarter when your quarterly benefit amount has been replenished.

Dental benefit questions

Q: What dental services should I use my Benefits Mastercard to pay for?

A: Your Benefits Mastercard should be used to pay for all preventive and comprehensive dental care. This includes services such as exams, cleanings, x-rays, fillings, periodontal services, crowns, etc.

Q: What dental services are not covered?

A: Medicare-covered dental care (services by a dentist or oral surgeon limited to surgery of the jaw or related structures, setting of fractures of the jaw or facial bones, extraction of teeth to prepare the jaw for radiation treatment of neoplastic disease or services that would be covered when provided by a doctor) is a covered benefit, but should be billed to the plan using your Samaritan Advantage member ID card.

Orthodontia is not a covered benefit.

Q: What dentists can I see?

A: You can go to any dentist who has not opted out of Medicare.

You can call the dental office to ask if they have opted out of Medicare, call **800-832-4580** (TTY **800-735-2900**) or visit data.cms.gov/tools/provider-opt-out-affidavits-look-up-tool to search for a provider.

Q: I paid out of pocket for dental services I believe are covered, what should I do?

A: There are two ways that you can be reimbursed for out-of-pocket costs:

1. Contact the dental office and ask if they will charge the amount to your Benefits Mastercard and process a refund to the personal form of payment that you used.
2. Complete and mail in a reimbursement form. The reimbursement form can be found on our website at samhealthplans.org/AdvantageForms. Select the form titled “Request Reimbursement for Benefits Card Expenses.”

Hearing aid benefit questions

Q: What hearing aid services should I use my Benefits Mastercard to pay for?

A: Your Benefits Mastercard should be used to pay for hearing aids, hearing aid supplies and hearing aid repairs.

Q: What hearing aid services are not paid for using the Benefits Mastercard ?

A: You should not use your Benefits Mastercard for hearing exams. Please ask your provider to bill the plan directly for Medicare-covered or routine hearing exams. Copays may apply.

Q: Where can I use my Benefits Mastercard for hearing aid services?

A: You can use your Benefits Mastercard at any merchant that is considered a hearing aid vendor. If you try to purchase hearing aids at a provider or physician’s office (for example an ear, nose and throat specialist) the card may not work because they are designated as a physician office rather than a hearing aid vendor.

Q: I paid out of pocket for hearing aid services I believe are covered by the Benefits Mastercard, what should I do?

A: There are two ways that you can be reimbursed for out-of-pocket costs:

1. Contact the provider's office and ask if they will charge the amount to your Benefits Mastercard and process a refund to the personal form of payment that you used.
2. Complete and mail in a reimbursement form. The reimbursement form can be found on our website at samhealthplans.org/AdvantageForms. Select the form titled "Request Reimbursement for Benefits Card Expenses."

Q: My provider charged an item or service to the Benefits Mastercard that should have been billed to the plan, what should I do?

A: Contact the provider/merchant and ask that they refund the amount of the item or service to your Benefits Mastercard and ask them to bill the plan directly.

Routine vision hardware benefit questions

Q: What vision hardware services should I use my Benefits Mastercard to pay for?

A: You should use your Benefits Mastercard to pay for routine vision hardware. This includes glasses (frames and/or lenses), contacts and upgrades (anti-reflective coating, tinting, scratch resistant coating, etc.).

Q: What vision hardware services are not paid for using the Benefits Mastercard ?

A: You should not use your Benefits Mastercard to pay for vision exams, glaucoma screenings, or eyeglasses or contact lenses after cataract surgery. Ask your provider to bill the plan directly for these services. Copays may apply.

Q: Where can I use my Benefits Mastercard for vision hardware services?

A: You can use your Benefits Mastercard at any merchant that is considered an optometrist or ophthalmologist, optician or a seller of optical goods and eyeglasses.

Q: I paid out of pocket for vision hardware I believe should be covered by the Benefits Mastercard. What should I do?

A: There are two ways that you can be reimbursed for out-of-pocket costs:

1. Contact the provider's office and ask if they will charge the amount to your Benefits Mastercard and process a refund to the personal form of payment that you used.
2. Complete and mail in a reimbursement form. The reimbursement form can be found on our website at samhealthplans.org/AdvantageForms. Select the form titled "Request Reimbursement for Benefits Card Expenses."

Q: My provider charged an item or service to the Benefits Mastercard that should have been billed to the plan, what should I do?

A: Contact the provider/merchant and ask that they refund the amount of the item or service to your Benefits Mastercard and ask them to bill the plan directly.