



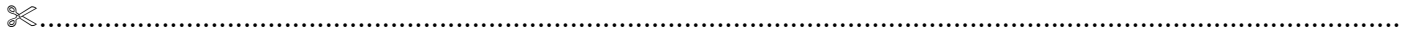
Your Hearing Aid Benefit

As a Fallon Senior Plan™ Premier HMO or Fallon Senior Plan™ Premier Preferred PPO member, you have a hearing aid benefit of up to \$500 toward the purchase of hearing aids every 36 months. To confirm your eligibility, please call Customer Service at the number listed below.

To use your hearing aid benefit:

1. Please bring the attached certificate to an in-network hearing aid provider. (PPO members, you may go to an out-of-network hearing aid provider, but you may pay more.)
2. Present the certificate to the cashier at the time of payment.
3. If the in-network provider does not accept the certificate, you may submit it directly to Fallon Health—at the address below—for reimbursement of your purchase for up to \$500. Be sure to include a copy of your purchase receipt with the certificate.

Please detach.



Fallon Senior Plan™ Premier HMO/Fallon Senior Plan™ Premier Preferred PPO Member Hearing Aid Benefit Certificate

Amount: up to \$500

This certificate entitles the member to a benefit of up to \$500 toward the purchase of hearing aids in a 36-month period.

- If the hearing aid provider is in-network, please reduce the purchase price of the member's hearing aid by \$500. Please furnish the member with a receipt for their records and for future purchases or adjustments.
- For PPO members: If the hearing aid provider is out-of-network, the member pays the cost of the hearing aid and submits the receipt to Fallon Health for reimbursement.

Member name: _____

Member mailing address: _____

Member ID number: _____

Date of purchase: _____

**Questions? Call Fallon Customer Service at 1-800-325-5669 (TRS 711),
8 a.m.–8 p.m., Mon.–Fri. (Oct. 1–Feb. 14, seven days a week).**

Not redeemable in cash.

Return this form to:

**Fallon Health
Attn: Claims Department
P.O. Box 15121
Worcester, MA 01521**



Fallon Senior Plan is an HMO/HMO-POS plan with a Medicare contract. Enrollment in Fallon Senior Plan depends on contract renewal. The benefit information provided is a brief summary, not a complete description of benefits. For more information contact the plan. Limitations, copayments, and restrictions may apply. Benefits, formulary, pharmacy network, provider network, premium and/or copayments/coinsurance may change on January 1 of each year.