

**PrimeWest Health - H2416**

**CY 2012 Medicare Plan Ratings**

The Medicare Program rates how well Medicare health and drug plans perform in different categories (for example, detecting and preventing illness, ratings from patients, patient safety, drug pricing and customer service). The information provided below is an overall plan rating of our plan's performance. This information is available to help you make the best choice. If you would like to get additional information on our plan's performance please contact us at 800-366-2906 (toll-free) or 800-627-3529 (TTY/TDD) for prospective members, 800-366-2906 (toll-free) or 800-627-3529 (TTY/TDD) for current members, or you may visit [www.medicare.gov](http://www.medicare.gov).

Below is a summary of how our plan rated in quality and performance.

The number of stars shows how well our plan performs.

- ★★★★★ means excellent
- ★★★★ means above average
- ★★★ means average
- ★★ means below average
- ★ means poor

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<b>Overall Plan Rating</b>	★★★★★ 4 Stars
	The Overall Plan Rating combines scores for the types of services each plan offers:  <b>What is being measured?</b> <ul style="list-style-type: none"> <li>• <b>For plans covering health services</b>, the overall score for quality of those services covers <b>36 different topics in 5 categories</b>:                             <ul style="list-style-type: none"> <li>○ <b>Staying healthy</b>: screenings, tests, and vaccines: Includes how often members got various screening tests, vaccines, and other check-ups that help them stay healthy.</li> <li>○ <b>Managing chronic (long-term) conditions</b>: Includes how often members with different conditions got certain tests and treatments that help them manage their condition.</li> <li>○ <b>Ratings of health plan responsiveness and care</b>: Includes ratings of member satisfaction with the plan.</li> <li>○ <b>Health plan member complaints and appeals</b>: Includes how often members filed a complaint against the plan.</li> <li>○ <b>Health plan telephone customer service</b>: Includes how well the plan handles calls from members.</li> </ul> </li> </ul>

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- **For plans covering drug services**, the overall score for quality of those services covers **17 different topics in 4 categories**:
  - **Drug plan customer service**: Includes how well the drug plan handles calls and makes decisions about member appeals.
  - **Drug plan member complaints and Medicare audit findings**: Includes how often members filed a complaint about the drug plan.
  - **Member experience with drug plan**: Includes member satisfaction information.
  - **Drug pricing and patient safety**: Includes how well the drug plan prices prescriptions and provides updated information on the Medicare website. Includes information on how often members with certain medical conditions get prescription drugs that are considered safer and clinically recommended for their condition.
- **For plans covering both health & drug services**, the overall score for quality of those services covers **all of the 53 topics listed above**.

**Where does the information for the Overall Plan Rating come from?**

- For quality of **health services**, the information comes from sources that include:
  - Member surveys done by Medicare
  - Information from clinicians
  - Information submitted by the plans
  - Results from Medicare's regular monitoring activities
- For quality of **drug services**, the information comes from sources that include:
  - Results from Medicare's regular monitoring activities
  - Reviews of billing and other information that plans submit to Medicare
  - Member surveys done by Medicare

**Why is the Overall Plan Rating important?**

The Overall Plan Rating gives you a single summary score that makes it easy for you to compare plans based on quality and performance. Learn more about differences among plans by looking at the detailed ratings.

# PrimeWest Health Member Services 1-800-366-2906

Attention. If you want free help translating this information, call the above number.

Atención. Si desea recibir asistencia gratuita para traducir esta información, llame al número que aparece más arriba.

Ogow. Haddii aad dooneyso in lagaa kaalmeeyo tarjama dda macluumaadkani oo lacag la'aan ah, wac lambarka kore.

ملاحظة: إذا أردت مساعدة مجانية في ترجمة المعلومات، فاتصل على الرقم الموجود أعلاه.

ກໍ່ມາດສໍ່ຕາມ ເບີສູງກັບສໍ່ຖ້າວ່າຕົນຕ້ອງການບໍ່ຈ່າຍເງິນ ເພື່ອໃຫ້ບໍລິການ ທີ່ເປັນພິດຕິຖານ ສູງສູງກັບສູງ ເສດໄນຂາເສດໄນເບີ 1

Pažnja. Ako vam je potrebna besplatna pomoć za prevod ove informacije, nazovite gornji broj.

Ceeb toom. Yog koj xav tau kev pab txhais cov xov no dawb, thov hu rau tus xov tooj saud.

ໂປຼດຊາບ. ຖ້າຫາກທ່ານຕ້ອງການການຊ່ວຍເຫຼືອໃນການເປີດຂໍ້ຂວາມຕົວກ່າວນີ້ໄປ, ຈົ່ງ ໂທລະຄາມເລກ ໂທລະສັບຂ້າງເທິງນີ້.

Hubaddhu. Yoo akka odeeffannoon kun sii hiikamu gargaarsa tolaa feeta ta'e, lakkoofsa armaa olii bilbili.

Внимание. Если вам нужна бесплатная помощь в переводе этой информации, позвоните по указанному выше телефону.

Chú Ý. Nếu quý vị cần dịch thông tin này miễn phí, xin gọi số nêu trên.

This information is available in other forms to people with disabilities by calling:

**TOLL FREE**  
1-800-366-2906

**TOLL FREE MINNESOTA RELAY**  
TTY, Voice, ASCII, or Hearing Carry Over:  
1-800-627-3529 or 711

**TOLL FREE SPEECH-TO-SPEECH RELAY SERVICE**  
1-877-627-3848

PrimeWest Health will enroll all eligible people who select or are assigned to PrimeWest Health without regard to physical or mental condition, health status, need for health care services, claims experience, medical history, genetic information, disability, marital status, age, gender, sexual orientation, national origin, race, ethnicity, color, religion, political beliefs, or geographic location. PrimeWest Health will not use any policy or practice that discriminates based on such.

American Indians can continue or begin to use tribal and Indian Health Service (IHS) clinics. We will not require prior approval or impose any conditions for you to get services at these clinics. For enrollees age 65 years and older, this includes Elderly Waiver (EW) services accessed through the tribe. If a doctor or other provider in a tribal or IHS clinic refers you to a provider in our network, we will not require you to see your primary care provider prior to the referral.