

KTF DIABETES FORM DIABETES PLAN DISCLOSURE

Special benefits are provided to those members enrolled in this program. Prior to enrollment, benefits for diabetes prescriptions and supplies will be paid as provided under the basic plan and not this special program.

- This is a very important program that will assist you in maintaining your health and “quality of life” while dealing with a deadly, serious disease. You, to a very great extent, control your own destiny.
- **Self-management is essential!** You must follow your diet, get proper exercise, take your medications, and monitor your glucose levels, as directed. Medicine alone cannot make you well or maintain your quality of life!
- **Diabetic supplies will be available from Manifest Pharmacy, and they will be delivered to your door every 90 days. Call (888) 770-4009 to sign up for direct delivery of your test strips, monitor, etc.**

Note: If another plan is primary, all Rx must first be provided by that plan. This Plan pays as secondary plan and will cover out-of-pocket costs under the primary plan, except for demimis copays. If Medicare is primary, Medicare Part B must first cover certain supplies, and then this Plan will pay the balance at 100%.

SPECIAL DIABETIC BENEFITS PAID AT 100% FOR ENROLLED MEMBERS

1. Diabetic Training and Education – up to 20 visits per year for a certified diabetic trainer or dietician.
2. Nutrition Counseling – up to 20 visits per year.
3. Insulin Pumps – includes infusion pump and supplies.
4. Diabetic Supplies (test strips, syringes, swabs, and insulin) and Testing:

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| <ul style="list-style-type: none">• Annual eye exam and foot exam• Urine protein measurement, as needed• Lipid profile, as needed• Blood pressure exams, as needed• HbA1c exams• Supplies for administration of insulin (syringes, needles, alcohol swabs, gauze)• Inhaled insulin devices (inhalers) | <ul style="list-style-type: none">• Insulin (except insulin for insulin pump)• Glucophage• Meformin• Insulin for anyone on an insulin pump ##• Blood sugar (glucose) testing monitors ##• Blood sugar (glucose) test strips ##• Lancet devices and lancets ## |
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These supplies are not covered for Medicare Primary Diabetics as these supplies are covered by Medicare Part B. This Plan will cover the 20% that Medicare does not pay as the secondary plan. These supplies are covered at 100% for non-Medicare diabetics.

This is a summary. Your Plan document contains complete information on the KTF Diabetes Program. To enroll in the diabetes program, please complete the below information and return to enrollment@ktftrustfund.com.

Name: _____ **Member ID:** _____

Address: _____

Email: _____ **Cell:** _____