



5117 W. Terrace Drive, Suite 100 | Madison, WI 53718

My Choice Wisconsin Medicare Dual Advantage (HMO D-SNP)
Monthly Plan Premium for People who get Extra Help
from Medicare to Help Pay for their Prescription Drug Costs

If you get extra help from Medicare to help pay for your Medicare prescription drug plan costs, your monthly plan premium will be lower than what it would be if you did not get extra help from Medicare.

If you get extra help, your monthly plan premium will be \$0 for any of the plan(s) below. (This does not include any Medicare Part B premium you may have to pay.)

- My Choice Wisconsin Medicare Dual Advantage (HMO D-SNP)

My Choice Wisconsin Medicare Dual Advantage (HMO D-SNP)'s premium includes coverage for both medical services and prescription drug coverage.

If you are not getting extra help, you can see if you qualify by calling:

- 1-800-Medicare or TTY users call 1-877-486-2048 (24 hours a day/7 days a week),
- Your State Medicaid Office, or
- The Social Security Administration at 1-800-772-1213. TTY users should call 1-800-325-0778 between 7 a.m. and 7 p.m., Monday through Friday.

If you have any questions, please call Member Services at 1-800-963-0035 (TTY: Wisconsin Relay System 711) 24 hours a day, 7 days a week.

If you have any questions about this notice, please contact Member Services 1-800-963-0035 (TTY: Wisconsin Relay System 711), 8 a.m. – 8 p.m. CT, 7 days a week (office hours: Monday – Friday, 8 a.m. – 4:30 p.m. CT), or on our website at www.mychoicewi.org/medicare-dual-advantage/.

My Choice Wisconsin Medicare Dual Advantage is an HMO SNP with a Medicare contract. Enrollment in My Choice Wisconsin Medicare Dual Advantage depends on contract renewal.

To receive this information in an alternate format or language, contact Member Services at 1-800-963-0035 from 8:00 a.m. to 8:00 p.m. CT / 7 days a week. TTY users should call Wisconsin Relay System 711.

English: We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-800-963-0035. Someone who speaks English can help you. This is a free service.

Spanish: Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-800-963-0035. Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Russian: Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-800-963-0035. Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Hmong: Peb muaj tib neeg los pab ntxhais lus dawb rau koj yog koj muaj kev nug txog ntawm peb cov ntaub ntawv ua yog kev los pab kho mob los yog kev muab tshuaj noj. Yog xav tau kev pab txhais lus, hu tau rau peb tus xov tooj 1-800-963-0035. Muaj ib tus neeg ua paub hais lus Hmoob yuav los pab koj. Qhov no yog kev pab dawb xwb.

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My Choice Wisconsin Health Plan Inc. cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo.

My Choice Wisconsin Health Plan Inc. ua raws cov kev cailij choj yuam siv ntawm Tsom Fwv Nrub Nrab Teb Chaw hais txog pej xeem cov cai (Federal civil rights laws) thiab tsis ciav-cais leejtwg vim nws hom neeg, nqaij tawv, lub tebchaws tuaj, hnub nyoog, kev tsis taus, los yog poj niam txiv.