

Pre-Enrollment Checklist

Before making an enrollment decision, it is important that you fully understand our benefits and rules. If you have any questions, you can call and speak with Member Services at 1-844-637-4770 (TTY 1-833-312-0044) 8 am - 8pm local time, 7 days a week from October 1st – March 31st and 5 days a week from April 1st – September 30th. Member Services is closed Memorial Day, Independence Day, Labor Day, Thanksgiving, and Christmas. This checklist applies to all Simpra Advantage plans.

Understanding the Benefits

- The *Evidence of Coverage* (EOC) provides a complete list of all coverage and services. It is important to review plan coverage, costs, and benefits before you enroll. Visit Simpra.com or call 1-844-637-4770 (TTY 1-833-312-0044) to view a copy of the EOC.
- Review the provider directory (or ask your doctor) to make sure the doctors you see now are in the network. If they are not listed, it means you will likely have to select a new doctor.
- Review the pharmacy directory to make sure the pharmacy you use for any prescription medicine is in the network. If the pharmacy is not listed, you will likely have to select a new pharmacy for your prescriptions.
- Review the formulary to make sure your drugs are covered.

Understanding Important Rules

- In addition to your monthly plan premium, you must continue to pay your Medicare Part B premium. This premium is normally taken out of your Social Security check each month.
- Effect on Current Coverage:** Your current health care coverage will end once your new Medicare coverage starts. For example, if you are in Tricare or a Medicare plan, you will no longer receive benefits from that plan once your new coverage starts.
- Benefits, premiums and/or copayments/co-insurance may change on January 1, 2025.

- Our plan allows you to see providers outside of our network (non-contracted providers). However, while we will pay for covered services the provider must agree to treat you. Except in an emergency or urgent situation, non-contracted providers may deny care. In addition, you will pay a higher co-pay for services received by non-contracted providers.

- For Simpra Advantage Dual Care (PPO D-SNP) enrollees only:** This plan is a dual eligible special needs plan (PPO D-SNP). Your ability to enroll will be based in part on verification that you are entitled to both Medicare and medical assistance from a state plan under Medicaid.

- For Simpra Advantage Nursing Home Plan (PPO I-SNP) and Simpra Advantage Assist (PPO I-SNP) enrollees only:** These plans are institutional special needs plans (I-SNP). Your ability to enroll will be based on verification that you, for 90 days or longer, have had or are expected to need the level of services provided in a skilled nursing facility, a nursing facility, an assisted living facility, an intermediate care facility for individuals with intellectual and developmental disabilities, a psychiatric hospital or unit, a rehabilitation hospital or unit, a long-term care hospital, a swing-bed hospital, or a facility approved by CMS that furnishes similar services.

Simpra Advantage is a PPO I-SNP and a PPO D-SNP with a Medicare contract. Enrollment in Simpra Advantage depends on contract renewal.

Out-of-network/non-contracted providers are under no obligation to treat Simpra Advantage members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

Simpra Advantage complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.