

# Pre-enrollment checklist

## Ally Rx D-SNP

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 to a customer service representative at 1-877-998-0998 (TTY: 711).

### Understanding the benefits

- Review the full list of benefits found in the Evidence of Coverage (EOC), especially for those services that you routinely see a doctor. Visit <https://www.securityhealth.org/medicaredocuments> or call 1-877-998-0998 (TTY: 711) 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 medicines is in the network. If the pharmacy is not listed, you will likely have to select a new pharmacy for your prescriptions.

### 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. **NOTE: This bullet point does not accurately portray the Ally Rx D-SNP plan. This plan has a Medicare Part D Prescription Drug Plan premium that is paid on your behalf by Medicare Part D "Extra Help." You do not pay a separate monthly plan premium for Ally Rx D-SNP. You must continue to pay your Medicare Part B premium (unless your Part B premium is paid for you by Medicaid or another third party).**
- Benefits, premiums and/or copayments/coinsurance may change on January 1, 2020.
- Except in emergency or urgent situations, we do not cover services by out-of-network providers (doctors who are not listed in the provider directory).
- This plan is a dual-eligible special needs plan (D-SNP). Your ability to enroll will be based on verification that you are entitled to both Medicare and medical assistance from a state plan under Medicaid. **NOTE: This plan is available only to people who receive both Medicare and full-benefit Medicaid.**

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**Notice of Nondiscrimination**

Security Health Plan of Wisconsin, Inc., is an HMO-POS, MSA and D-SNP plan with a Medicare contract and a contract with the Wisconsin Medicaid program. Enrollment in Security Health Plan depends on contract renewal. Security Health Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, disability, age, sex, gender identity, sexual orientation or health status.

**Limited English Proficiency Language Services**

ATTENTION: If you speak a language other than English, language assistance services, free of charge, are available to you. Call 1-877-998-0998 (TTY: 711).

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-877-998-0998 (TTY: 711).

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1-877-998-0998 (TTY: 711).