



Effective Date: September, 2020

**Evidence of Coverage Rider
for People Who Get Extra Help Paying for Prescription Drugs
(also called a Low Income Subsidy Rider or LIS Rider)**

Please keep this notice - it is part of Senior Care Options Program (HMO SNP) Evidence of Coverage.

As an individual who is covered by both Medicare and Medicaid (MassHealth) you qualify for extra help paying for your prescription drug coverage. This means you do not have any costs for prescription drug coverage under our plan. This also means that you must follow all the rules and procedures in the Evidence of Coverage.

Please see the chart below for a description of your prescription drug coverage:

Your monthly plan premium is	Your yearly deductible is	Your cost sharing amount for generic/preferred multi-source drugs is no more than	Your cost sharing amount for all other drugs is no more than
0*	\$0	\$0 (each prescription)	\$0 (each prescription)

* The monthly plan premium does not include any Medicare Part B premium that you may still need to pay. The plan premium you pay has been calculated based on the Plan’s premium and the amount of extra help you get.

Please refer to your Evidence of Coverage for more information on paying your plan premium.

We offer coverage of some supplemental prescription drugs not normally covered in a Medicare Prescription Drug Plan. These drugs are covered under your Medicaid (MassHealth) benefits.

Medicare or Social Security will periodically review your eligibility to make sure that you still qualify for extra help with your Medicare prescription drug plan costs. Your eligibility for extra help might change if there is a change in your income or resources, if you get married or become single, or you lose MassHealth (Medicaid).

If you have any questions about this notice, please contact Senior Care Options Program Member Services at 1-866-610-2273, Toll-free TTY: 711, 8 a.m. – 8 p.m., 7 days a week, or at www.commonwealthcaresco.org.

Benefits may change on January 1 of each year. You must continue to pay your Medicare Part B premium if it is not paid for on your behalf.

Commonwealth Care Alliance Senior Care Options Program (HMO SNP) is a Special Needs Plan with a Medicare contract and a contract with the Commonwealth of Massachusetts/Executive Office of Health and Human Services Medicaid program. Enrollment in Senior Care Options Program depends on contract renewal. Enrollment is voluntary.

You can get this document for free in other formats, such as large print, formats that work with screen reader technology, braille, or audio. Call 1-866-610-2273 (TTY: call MassRelay at 711), 8 a.m. – 8 p.m., 7 days a week from October 1st through March 31st. From April 1st through September 30th, Member Services is available 8 a.m. to 8 p.m., Monday through Friday, and 8 a.m. to 6 p.m. on Saturday and Sunday. The call is free.

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ATTENTION: If you speak Spanish, language assistance services, free of charge, are available to you. Call 1-866-610-2273 (TTY: call MassRelay at 711).

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-610-2273 (TTY: llamar a MassRelay al 711).

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

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