

# Pre-Enrollment Checklist

Before making an enrollment decision, it is important that you fully understand our benefits and rules.


Visit [mvphealthcare.com/plandocuments](https://mvphealthcare.com/plandocuments) or call **1-800-324-3899** (TTY 711) to view a copy of any of the documents mentioned below.

## 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.
- 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.
- Review the Medicare Part D Formulary to make sure the drugs you currently take are covered, and determine if there are any restrictions. If your drug(s) are not listed or if there are additional requirements or limits on coverage, the Medicare Part D Formulary will also provide additional guidance on how you can ask MVP to make an exception to our rules.

## 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.
- Benefits, premiums, and/or co-payments/co-insurance may change on January 1, 2025.
- You may see providers outside of our network (non-contracted providers), however, you may pay a higher co-payment or co-insurance for services received by non-contracted providers. Out-of-network services for non-contracted providers are limited for HMO-POS plans. PPO members can utilize non-contracted providers. Urgent and emergent services are covered worldwide across all plans.
- Effect on your current coverage**—if you are currently enrolled in a Medicare Advantage plan, your current Medicare Advantage health care coverage will end once your new Medicare Advantage coverage starts. If you have Tricare, your coverage may be affected once your new Medicare Advantage coverage starts. Please contact Tricare for more information. If you have a Medigap plan, once your Medicare Advantage coverage starts, you may want to drop your Medigap policy because you will be paying for coverage you cannot use.

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## **For MVP DualAccess (HMO D-SNP) Plans**

These are dual eligible needs plans (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.

MVP Health Care® restricts D-SNP enrollment to individuals who are deemed fully dual eligible by New York State.

### **Questions?**

Call an MVP Medicare Advisor at **1-800-324-3899** (TTY 711), seven days a week, 8 am–8 pm Eastern Time. April 1–September 30, call Monday–Friday, 8 am–8 pm.