

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 to a customer service representative at **1-888-778-1478 (TTY 711) 8 am–8 pm local time**, 7 days a week. Between April 1 and September 30, alternate technologies (for example, voicemail) will be used on the weekends and holidays.

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 **cloverhealth.com/eoc** or call **1-888-778-1478 (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 new doctors. Visit **cloverhealth.com/doctors** or call **1-888-778-1478 (TTY 711)** to view a copy of in-network providers.
- 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. Visit **cloverhealth.com/find-pharmacy** or call **1-888-778-1478 (TTY 711)** to view a copy of in-network pharmacy locations.
- To make sure your drugs are covered by a certain plan, please check the formulary for that plan at **cloverhealth.com/formulary**. If you prefer to have a formulary mailed to you, please contact us at the number above.

Understanding Important Rules

- Effect on Current Coverage.** If you are currently enrolled in a Medicare Advantage plan, your current Medicare Advantage healthcare 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.
- In addition to paying your monthly plan premium (if applicable), you must continue to pay your Medicare Part B premium. This premium is normally taken out of your social security check each month.

Note: If your plan has a Part B giveback, this monthly amount will be credited to your social security account. Your premium must be at least the amount of the giveback in order for you to qualify for this benefit. If you don't pay your Part B premium through social security, the giveback will result in a reduced monthly amount paid directly to Medicare.
- Benefits, premiums and/or copays/coinsurance may change on January 1, 2024.
- For PPO plans:** Our plan allows you to see providers outside of our network (non-contracted providers). However, although we will pay for covered services, the provider must agree to treat you. Except in an emergency or urgent situations, non-contracted providers may deny care. **In addition, you may pay a higher cost-share for services received by non-contracted providers.**
- For HMO plans:** 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).

Clover Health is a Preferred Provider Organization (PPO) and a Health Maintenance Organization (HMO) plan with a Medicare contract. Enrollment in Clover Health depends on contract renewal.