## Notice of Removal of LIS Period(s) for PDPs, MA-PD Plans, and Cost Plans that offer Part D (Losing LIS)

Dear <Name of Member>:

### Medicare has informed us that your eligibility for Extra Help has been terminated from <start date > to <end date>. This means you did not qualify for Extra Help with your Medicare prescription drug costs during this period. You will continue to be a member of <plan name> unless you choose to switch to a new plan.

Since you didn’t qualify for Extra Help during this time period, you may owe money back to <Plan name>. If you filled prescriptions during <start date> to <end date>, you may have been charged less than you should have paid. <Plan name> will send you a notice telling you what you owe for past charges, if any. You may call us for more information at <Customer/Member> Services at <toll- free number><days and hours of operation>. TTY users should call <toll-free TTY number>.

**You may still qualify for Extra Help, but you must apply to find out.** If you haven’t already filled out an application for Extra Help, you can get an application or apply over the phone by calling Social Security at 1-800-772-1213, or apply online at [https://www.SSA.gov/medicare/part-d-extra-help.](https://www.ssa.gov/medicare/part-d-extra-help%20%20.) TTY users should call 1-800-325-0778. If you don’t qualify for Extra Help from Social Security, you can change plans if you wish to do so.

### What are your options?

**Option 1:** You can stay a member of our plan

Even if you don’t qualify for Extra Help, you can continue to be a member of <plan name>. You will pay the following costs for your coverage. [Insert standard cost sharing]

**Option 2:** You can switch to a new plan

If you no longer qualify for Extra Help, you can switch to a different Medicare drug plan within three months of losing Extra Help, or notification of losing Extra Help, whichever is later. You may want to choose a different drug plan with costs and coverage that better meet your needs.

* [Insert, if applicable: We offer (an)other plan(s) that may lower your prescription drug plan costs]
* Visit [Medicare.gov](http://www.medicare.gov/)  or call 1-800-MEDICARE (1-800-633-4227) for more information about Medicare drug plans available in your area. They can also refer to you a State Health Insurance Program in your state to obtain additional assistance on choosing another plan. TTY users should call 1-877-486-2048.

**Option 3:** You can find other ways to get help with your prescription drug costs

Your state may have programs that can help pay your prescription drug costs. Contact your State Medical Assistance (Medicaid) office for more information. Call 1-800-MEDICARE (1-800-633-4227) or visit [www.medicare.gov](http://www.medicare.gov/) on the Web for their telephone number. TTY users should call 1-877-486-2048.

### For More Information

If you have any questions about this letter, please call <Customer/Member> Services at <toll- free number><days and hours of operation>. TTY users should call <toll-free TTY number>.

Thank you.