

LIS Premium Summary Table

Community First Health Plans, Inc. (HMO) Monthly Plan Premium for People Who Get Extra Help From Medicare to Help Pay for Their Prescription Drug Costs

If you get extra help from Medicare to help pay for your Medicare prescription drug plan costs, your monthly plan premium will be lower than what it would be if you did not get extra help from Medicare. The amount of extra help you get will determine your total monthly plan premium as a member of our plan.

This table shows you what your monthly plan premium will be if you get extra help.

Your Level of Extra Help	Monthly Premium for Community First Health Plans, Inc. Value*
100%	\$0
75%	\$0
50%	\$0
25%	\$0

**This does not include any Medicare Part B premium you may have to pay.*

Community First Health Plans, Inc. (HMO) premium includes coverage for both medical services and prescription drug coverage.

If you aren't getting extra help, you can see if you qualify by calling:

- Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, seven days a week (TTY users call 1-877-486-2048),
- Texas Medicaid at 1-800-252-8263, Monday through Friday, from 7 a.m. to 7 p.m. (TTY users call 1-800-964-2777), or
- Social Security Administration at 1-800-772-1213, Monday through Friday, from 7 a.m. to 7 p.m. (TTY users call 1-800-325-0778).

If you have any questions, please call Member Services at 1-833-434-2347 (TTY: 1-800-390-1175) from 8:00 a.m. to 8:00 p.m. (CST), seven days a week. Messaging services are available on weekends and holidays from Apr 1-Sept 30 each year.

Community First Health Plans, Inc. (HMO) complies with applicable federal civil rights laws and does not discriminate on the basis of race, religion, color, national origin, age, disability, or sex. We do not exclude people or treat them differently because of race, religion, color, national origin, age, disability, or sex.

Community First Health Plans, Inc. (HMO):

- provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written information in other formats (large print, accessible electronic formats, other formats).
- provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages.

If you need these services, contact Member Services at 1-833-434-2347 (TTY: 1-800-390-1175) from 8:00 a.m. to 8:00 p.m. (CST), seven days a week. Messaging services are available on weekends and holidays from Apr 1-Sept 30 each year.

If you believe that Community First Health Plans, Inc. (HMO) has failed to provide these services or discriminated in another way on the basis of race, religion, color, national origin, age, disability, or sex, you can file a grievance by calling the number above and telling them you need help filing a grievance. Community First Health Plans, Inc. (HMO) Member Services is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW, Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019 (TDD: 1-800-537-7697).

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

Community First Health Plans, Inc. (HMO) has a contract with Medicare to offer HMO plans. Enrollment in a Community First Health Plans, Inc. (HMO) plan depends on contract renewal.

You must continue to pay your Medicare Part B premium. However, for full-dual beneficiaries, the State will cover your Part B premium as long as you retain your Medicaid eligibility.

This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits, premiums and/or copayments/coinsurance may change on January 1 of each year. "Coinsurance" is the percentage you pay of the total cost of certain medical services. You pay a coinsurance at the time you get the medical service.