## Align DUALPartnership (HMO-D-SNP)



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 Great Plains Medicare Advantage
Reduced Monthly Premium	\$0.00

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

Align DUALPartnership (HMO D-SNP) 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:

- (800) Medicare (TTY: (877) 486-2048), 24 hours a day, seven days a week, or
- Your state Medicaid office, or
- The Social Security Administration at (800) 772-1213 (TTY: (800) 325-0778) between 8 a.m. and 7 p.m., Monday through Friday

If you have any questions about this notice, please contact Align DUALPartnership (HMO D-SNP) customer service at (877) 509-4979 (TTY: 711). We're available Monday through Friday from 8 a.m. to 8 p.m. local time.

Sanford Health Plan and Sanford Health Plan of Minnesota have HMO, PPO, I-SNP and D-SNP plans with a Medicare contract and contracts with state Medicaid programs. Enrollment in Sanford Health Plan and Sanford Health Plan of Minnesota depends on contract renewal. Sanford Health complies with applicable federal civil rights laws and does not discriminate, exclude or treat people differently on the basis of race, color, national origin, religion, pregnancy and related conditions, sex (including sexual orientation, gender identity, sex stereotypes, sex characteristics and intersex traits), age, disability, health status, marital status, arrest or conviction record or military participation in the administration of the plan, including enrollment and benefit determinations. If you have questions, please contact Customer Service at (877) 509-4979 (TTY: 711). We are open 7 days a week, 8 a.m. to 8 p.m. CST, Oct. 1-March 31; and Monday through Friday, 8 a.m. to 8 p.m. CST, April 1-Sept. 30.

Free interpretation services are available to you. Additional services and resources necessary to provide information on accessible formats are also available at no cost. Call 1-877-509-4979 (TTY: 711) or speak with your healthcare provider. Spanish: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al 1-877-509-4979 (TTY: 711) o hable con su proveedor. Oromo: Yoo afaan Oromoo dubbattu ta'e, tajaajilli gargaarsa afaanii bilisaa siniif ni argama. Gargaarsi gargaaraa fi tajaajilli sirrii ta'ee fi odeeffannoo bifa dhaqqabamaa ta'een kennuunis bilisaan ni argama. Bilbilaa 1-877-509-4979 (TTY: 711) yookiin dhiyeessaa kee waliin haasa'aa.

If you require materials in large print, please call (877) 509-4979 (TTY: 711).