



If you have limited income or resources, you may qualify for the **Extra Help program** and Medicare may pay some or all of your Part D premium. Extra Help is only available for Part D prescription costs and not for medical benefits. The reduced amounts in the charts below reflect the premium you would pay and do not include Part B premiums.

## YOU MUST CONTINUE TO PAY YOUR PART B PREMIUM.

If you are already getting Extra Help, you may receive (or have received) a letter from Medicare or the Social Security Administration about your eligibility. Read this important information carefully.

To apply for Extra Help, call Social Security at **(800) 772-1213** (TTY (800) 325-0778) to apply over the phone or to request a paper application. You can also apply online at ssa.gov or at your local Social Security office.

## **Minnesota**

Your level of Extra Help	Align ChoicePlus PPO MAPD	Align ChoiceElite PPO MAPD
Reduced Monthly Premium	\$0	\$28.40

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

## South Dakota, North Dakota and Iowa

Your level of Extra Help	Align ChoicePlus PPO MAPD	Align ChoiceElite PPO MAPD
Reduced Monthly Premium	\$0	\$13.40

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

Sanford Health Plan premiums include coverage for both medical services and prescription drug coverage.

If you aren't getting extra help, you can see if you qualify by calling: 1-800-Medicare or TTY users call 1-877-486-2048 (24 hours a day/7 days a week), Your State Medicaid Office, or The Social Security Administration at 1-800-772-1213. TTY users should call 1-800-325-0778 between 7 a.m. and 7 p.m., Monday through Friday.

If you have any questions, please call Member Services at (877) 509-4979 (TTY: 711). We are open 7 days a week, 8 a.m. to 8 p.m., Oct. 1 – March 31; and Monday through Friday, 8 a.m. to 8 p.m., April 1 – Sept. 30. This call is free.

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., Oct. 1-March 31; and Monday through Friday, 8 a.m. to 8 p.m., 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).