EXHIBIT F. Example of “Important things to know about your drug coverage and your rights” page

The page that follows show an example of the “Important things to know about your drug coverage and your rights” page in the model Part D EOB.

The example in this exhibit is for a fictional MA-PD plan called “Birchwood Medicare Plus.” It shows a version of the Part D EOB for a plan member with LIS. We chose to show a version for LIS because it includes additional text that directs the member to the LIS rider for the details about what they pay for drugs. (In the non-LIS version, members are only directed to the *Evidence of Coverage* for this information.)

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| Important things to know about your drug coverage and your rights |

**See mistakes or have questions?**

If you have questions, see mistakes, or suspect fraud, call us at Birchwood Member Services at   
1-800-222-3333 (TTY 1-888-444-5555). You can also find answers to many questions online at [www.birchwood.com.](http://www.birchwood.com/) Or, call Medicare at   
1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.

You can also call your State Health Insurance Assistance Program (SHIP). The name and phone numbers for your state SHIP are in Chapter 2, Section 3 of your *Evidence of Coverage*.

### Get help with your options

Here are some things you can do to help you and your doctor manage any changes in coverage:

* **Call Birchwood** **Member Services to ask for a list of covered drugs that treat the same medical condition.** This list can help your doctor to find a covered drug that might work for you and have fewer restrictions or a lower cost.
* You and your doctor **can ask us to make an exception for you.** This means asking us to agree that the change in coverage or cost-sharing tier of a drug doesn’t apply to you. To learn how to ask for an exception, see Chapter 9 in the *Evidence of Coverage*, “What to do if you have a problem or complaint.”

### Get more details in the *Evidence of* Coverage and “LIS Rider”

The *Evidence of Coverage* is our plan’s benefits booklet. It explains your drug coverage and the rules you need to follow to use your coverage. To get a copy of the *Evidence of Coverage* in your mail or email, call Birchwood Member Services at   
1-800-222-3333 (TTY 1-888-444-5555). You can also get this document online at [www.birchwood.com.](http://www.birchwood.com/)

Your“LIS Rider” *(Evidence of Coverage Rider for People Who Get Extra Help Paying for their Prescriptions*) is a short separate document that tells what you pay for your prescriptions.

### Get help with drug coverage or payment problems

Your *Evidence of Coverage* explains what to do if you have problems related to your drug coverage and costs. Here are the chapters to look for:

* **Chapter 7:** Asking the plan to pay its share of a bill you got for covered services or drugs
* **Chapter 9:** What to do if you have a problem or complaint (coverage decisions, appeals, complaints)

### Your right to appeal

When we decide whether a drug is covered and how much you must pay, it’s called a “coverage decision.” If you disagree with our coverage decision, you can appeal (see Chapter 9 in the *Evidence of Coverage*).

Medicare sets the rules for how coverage decisions and appeals are handled. These are legal procedures and the deadlines are important. The process can be expedited if your doctor tells us that your health requires a quick decision.

### Get help paying for your drug coverage

**“Extra Help” from Medicare.** If you meet certain income and resource limits, you may qualify for Extra Help. This program helps pay for your Medicare drug coverage costs, such as plan premiums, deductibles, and costs when you fill your prescriptions. To see if you qualify for Extra Help, complete an application online at https://secure.ssa.gov/i1020/start. You can also call Social Security toll-free at 1-800-772-1213   
(TTY 1-800-325-0778).

**Help from your State Pharmaceutical Assistance Program.** Many states have State Pharmaceutical Assistance Programs (SPAPs) that help people pay for prescription drugs based on financial need, age, or medical condition. Each state has different rules. To find out if your state has a State Pharmaceutical Assistance Program, visit Medicare.gov and search for “SPAP.” Or, check with your local State Health Insurance Assistance Program (SHIP).