

# Before you enroll

It's important that you understand this Dual Special Needs Plan (D-SNP) and what benefits are covered. You can find the Drug List, Provider and Pharmacy directories, Evidence of Coverage and more at [myPreferredCare.com](https://myPreferredCare.com).



## **Are your drugs covered? Check the Drug List (Formulary) to make sure.**

Drugs not covered by the plan may have alternative covered drugs that can be used instead.



## **Are your providers in the network?**

If your providers are not in the network, you will need to select a new network provider.



## **Is your pharmacy in the network?**

If your pharmacy is not in the network, you will need to select a new network pharmacy.



## **Did you review the Summary of Benefits?**

These are just some of the benefits covered by the plan. You can find a complete list of coverage, costs, benefits and plan rules in the Evidence of Coverage online.



## **You're eligible to enroll if:**



You're enrolled in Original Medicare Parts A and B



You receive state Medicaid benefits



You live in the plan's service area