

Brand New Day 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 Brand New Day Harmony Choice Plan (HMO SNP), Plan 020*	Monthly Premium for Brand New Day Harmony Care Plan (HMO SNP) Plan 032*
100%	\$0	\$0
75%	\$8.70	\$0
50%	\$17.40	\$0
25%	\$26.10	\$0

Your level of extra help	Monthly Premium for Brand New Day Access Plan (HMO SNP), Plan 024*	Monthly Premium for Brand New Day, Classic Care I (HMO), Plan 025*
100%	\$0	\$0
75%	\$8.70	\$0
50%	\$17.40	\$0
25%	\$26.10	\$0

Your level of extra help	Monthly Premium for Brand New Day Bridges Care Plan (HMO SNP), Plan 028*	Monthly Premium for Brand New Day Bridges Choice Plan (HMO SNP), Plan 029*
100%	\$0	\$0
75%	\$0	\$8.70
50%	\$0	\$17.40
25%	\$0	\$26.10

Your level of extra help	Monthly Premium for Classic Choice Medi-Medi (HMO), Plan 033
100%	\$0
75%	\$8.70
50%	\$17.40
25%	\$26.10

Your level of extra help	Monthly Premium for Classic Care II Plan (HMO), Plan 037	Monthly Premium for Embrace Care Plan (HMO), Plan 039-1
100%	\$0	\$0
75%	\$0	\$0
50%	\$0	\$0
25%	\$0	\$0

Your level of extra help	Monthly Premium for Embrace Care Plan (HMO), Plan 039-2	Monthly Premium for Embrace Choice Medi-Medi Plan (HMO), Plan 040-1
100%	\$0	\$0
75%	\$0	\$8.70
50%	\$0	\$17.40
25%	\$0	\$26.10

Your level of extra help	Monthly Premium for Embrace Choice Medi-Medi Plan (HMO), Plan 040-2	Monthly Premium for Select Care Plan (HMO), Plan 041
100%	\$0	\$0
75%	\$8.70	\$0
50%	\$17.40	\$0
25%	\$26.10	\$0

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

Brand New Day's 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:

- 1-800-Medicare of 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 Service at 1-866-255-4795, (TTY/TDD: 1-866-321-5955) from 8 a.m. to 8 p.m., 7 days a week (October 1 – March 31) and 8 a.m. to 8 p.m. Monday through Friday (April 1 – September 30) PST.

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-866-255-4795 (TTY: 1-866-321-5955).

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-255-4795 (TTY: 1-866-321-5955).

Brand New Day is a HMO Plan with a Medicare contract. Enrollment in Brand New Day depends on contract renewal. You must continue to pay your Medicare Part B premium. Members may enroll in the plan only during specific times of the year. Premiums, co-pays, co-insurance and deductibles may vary based on the level of Extra Help that you receive. Please contact the plan for further details. Premiums, co-payments and/or co-insurance may change on January 1st of each year. Limitations and restrictions may apply. The benefit information provided is a brief summary, not a complete description of benefits. For more information contact the plan.

Brand New Day complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

Brand New Day cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo.