

Inter Valley Health Plan
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 Vitality Plus (HMO) *	Monthly Premium for Inter Valley Health Plan Service To Seniors (HMO) and Desert Preferred Choice (HMO) *
100%	\$0.00	\$0.00
75%	\$8.30	\$0.00
50%	\$16.60	\$0.00
25%	\$24.90	\$0.00

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

Inter Valley Health Plan’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 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 our Inter Valley Health Plan Pharmacy Care Team at 1-800-523-3142, TTY users should call 711. **October 1 to March 31: 8 am to 8 pm, 7 days a week.** We are closed on Thanksgiving Day and Christmas Day. Contact us **April 1 – September 30: 8 am to 8 pm, Monday through Friday.** We are closed on federal holidays. **NOTE:** When we are closed you have the option to leave a message. Messages received will be returned within one (1) business day. Or at, www.ivhp.com.

Inter Valley Health Plan is a not-for-profit HMO with a Medicare contract. Enrollment in Inter Valley Health Plan depends on contract renewal. Inter Valley Health Plan complies with applicable federal civil right laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. Inter Valley Health Plan cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo. Inter Valley Health Plan 遵守适用的联邦民权法律规定，不因种族、肤色、民族血统、年龄、残障或性别而歧视任何人。