

Thank you for considering Providence Medicare Advantage Plans. Providence Medicare Advantage Plans is a health plan with a Medicare contract. In choosing Providence Medicare Advantage Plans, you're selecting a quality health plan dedicated to your well-being. Providence Medicare Advantage Plans offer all the coverage of Original Medicare plus additional benefits over and above what Original Medicare provides, including local customer service, a 24-hour nurse advice line, as well as a gym membership at no additional cost.

After completing and submitting your enrollment form, you will receive a letter confirming your enrollment, including an effective date, as well as the following materials:

- Introduction to Providence Medicare Advantage Plans
- Confirmation letter
- Member Handbook/Evidence of Coverage

After we confirm your enrollment with Medicare, you may cancel any Medigap or supplemental insurance that you have. If you were on a Medicare Advantage plan or Medicare Cost plan when you enrolled, your enrollment in that plan will automatically be cancelled. You do not have to notify the insurance carrier that you want to cancel. Medicare will take care of that when they transfer you to Providence Medicare Advantage Plans. Please note: if you are a first-time member of a Medicare health plan, Medicare Advantage or Medicare Cost plan, you may have a trial period during which you have certain rights to leave Providence Medicare Advantage Plans and purchase a Medigap policy. Please contact 1-800-MEDICARE (1-800-633- 4227) or visit www.Medicare.gov for further information about Medicare benefits and services. TTY users can call 1-877-486-2048 24 hours a day, seven days a week.

Once enrolled in our plan, you are generally limited to making changes between October 15th and December 7th. In special circumstances, Medicare may give you an opportunity to switch to another plan. Please contact Providence Medicare Advantage Plans for more information.

The Medicare Program rates all health and prescription drug plans each year, based on a plan's quality and performance. Medicare Plan Ratings help you know how good a job our plan is doing. You can use this Plan Rating to compare our plan's performance to other plans. Examples of the areas covered by this rating include: how our members rate our plan's services and care; how well our doctors detect illnesses and keep members healthy; and how well our plan helps our members use recommended and safe prescription medications. For more information on Plan Ratings, please visit www.Medicare.gov.

If you have any questions or concerns please call the Providence Medicare Advantage Plans Sales team at 503-574-5551 or 1-800-457-6064 (TTY: 711). Service is available between 8 a.m. to 8 p.m. (Pacific Time), seven days a week (Oct. 1-Mar. 31), and Monday through Friday (Apr. 1-Sept. 30).

Sincerely,

Providence Medicare Advantage Plans

Enrollment instructions

1. To complete the enrollment form, answer the questions and write the requested information on the enrollment form.
2. Review the information you entered.
3. Read the authorization and declaration information and sign your name at the bottom of the form.
4. Mail the completed enrollment form in the enclosed envelope to:
Providence Medicare Advantage Plans
P.O. Box 5548
Portland, OR 97228-5548
5. You also may fax the completed enrollment form to 503-574-8607.
6. Keep a copy of your completed enrollment form. Expect to receive a letter from Providence Medicare Advantage Plans confirming receipt of your enrollment form within 14 days.

Enroll through the Centers for Medicare & Medicaid

Medicare beneficiaries may enroll in Providence Medicare Advantage Plans through the Centers for Medicare & Medicaid Services Online Enrollment Center, online at www.Medicare.gov. For more information, contact Providence Medicare Advantage Plans at 503-574-5551 (TTY: 711).

Important contract information

By law, Providence Medicare Advantage Plans can choose not to renew its contract with CMS. CMS also may refuse to renew the contract, resulting in a termination or non-renewal. This may result in termination of the beneficiary's enrollment in the plan. If this happens, you are still considered a Medicare member and can transition your health insurance.

In addition, Providence Medicare Advantage Plans may reduce its service area and no longer offer services in the area where you live. If this happens, you are still considered a Medicare member and can transition your health insurance. We will notify you in advance if this occurs.

Low-income subsidy notice

People with limited incomes may qualify for extra help to pay for their prescription drug costs. If eligible, Medicare could pay for 75 percent of drug costs, including monthly prescription drug premiums, annual deductibles and coinsurance. Additionally, those who qualify will not be subject to the coverage gap or a late enrollment penalty. Many people are eligible for these savings and don't even know it. For more information about this extra help, contact your local Social Security office or call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, seven days a week. TTY users should call 1-877-486-2048.

You can contact customer service if you need additional information, including:

- How we control the use of services and costs;
- The number of appeals and grievances filed by our members;
- A summary description of how we pay our doctors; and
- A description of our financial condition, including a summary of our most recent audit statement.

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Providence Medicare Advantage Plans is an HMO, HMO-POS and HMO SNP with Medicare and Oregon Health Plan contracts. Enrollment in Providence Medicare Advantage Plans depends on contract renewal.

The benefit information provided is a brief summary, not a complete description of benefits. For more information, contact the plan. Limitations, copayments, and restrictions may apply. Benefits, premiums and/or copayments/coinsurance may change on January 1 of each year.