Effective Date: January 1, 2020

Evidence of Coverage Rider
for People Who Get Extra Help Paying for Prescription Drugs
(also called a Low-Income Subsidy Rider or LIS Rider)

Please keep this notice - it is part of Magellan Complete Care of Arizona, Inc. (MCC of AZ) (HMO SNP)’s Evidence of Coverage.

Our records show that you qualify for extra help paying for your prescription drug coverage. This means that you will get help paying your monthly premium and prescription drug cost-sharing.

As a member of our Plan, you will receive the same coverage as someone who is not getting extra help. Your membership in our Plan will not be affected by the extra help. This also means that you must follow all the rules and procedures in the Evidence of Coverage.

Please see the chart below for a description of your prescription drug coverage:

<table>
<thead>
<tr>
<th>Your monthly plan premium is</th>
<th>Your yearly deductible is</th>
<th>Your cost sharing amount for generic/preferred multi-source drugs is no more than</th>
<th>Your cost sharing amount for all other drugs is no more than</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0</td>
<td>$0</td>
<td>$0/$1.30/ $3.60 (each prescription)</td>
<td>$0/$3.90/ $8.95 (each prescription)</td>
</tr>
</tbody>
</table>

*The monthly plan premium does not include any Medicare Part B premium that you may still need to pay. The plan premium you pay has been calculated based on the Plan’s premium and the amount of extra help you get.

Please refer to your Evidence of Coverage for more information on paying your plan premium.

In addition, the amount you pay when you fill a prescription for these non-Part D drugs (supplemental drugs) does not count towards your deductible, total drug costs or total out-of-pocket expenditures (that is, the amount you pay does not help move you through the benefit or reach catastrophic coverage). Please contact Member Services to find out to which drugs this applies. Our contact information appears at the end of this notice.

Once the amount both you and Medicare pay (as the extra help) reaches $6,350 in a year, your copayment amount(s) will go down to zero ($0.00.) Medicare or Social Security will periodically review your eligibility to make sure that you still qualify for extra help with your Medicare prescription drug plan costs. Your eligibility for extra help might change if there is a change in your income or resources, if you get married or become single, or you lose Medicaid.

If you have any questions about this notice, please contact MCC of AZ (HMO SNP) Member Services at 1-800-424-4509 (TTY 711) 8 a.m. to 8 p.m., Monday through Friday (from October 1-March 31, 7 days a week) or at www.mccofaz.com/dsnp.

Magellan Complete Care of Arizona, Inc. (HMO SNP) is a managed care plan with a Medicare Advantage contract. Enrollment in MCC of AZ (HMO SNP) depends on contract renewal.

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