Pre-Enrollment Checklist



Before making an enrollment decision, you should fully understand our benefits and rules. If you have any questions, you can call and speak to a customer service representative at **1-800-468-9449** (**TTY 711**), October 1 – March 31: 8 a.m. – 8 p.m., seven days a week; April 1 – September 30: 8 a.m. – 8 p.m., Monday through Friday.

Understanding the benefits	
	The Evidence of Coverage (EOC) provides a complete list of all coverage and services. It is important to review plan coverage, costs, and benefits before you enroll. Visit www.amerihealthcaritasvipcare.com/mi or call 1-800-468-9449 (TTY 711), October 1 – March 31: 8 a.m. – 8 p.m., seven days a week; April 1 – September 30: 8 a.m. – 8 p.m., Monday through Friday, to view a copy of the EOC.
	Review the provider directory (or ask your doctors) to make sure the doctors you see now are in the network. If they are not listed, it means you will likely have to select a new doctor.
	Review the pharmacy directory to make sure the pharmacy you use for any prescription medicines is in the network. If the pharmacy is not listed, you will likely have to select a new pharmacy for your prescriptions.
	Review the formulary to make sure your drugs are covered.
Understanding important rules	
	You must continue to pay your Medicare Part B premium. This premium is normally taken out of your Social Security check each month.
	Benefits, premiums, and/or copayments/coinsurance may change on January 1, 2027.
	Except in emergency or urgent situations, we do not cover services by out-of-network providers (doctors who are not listed in the provider directory).
	If you are currently enrolled in a Medicare Advantage plan, your current Medicare Advantage health care coverage will end once your new Medicare Advantage coverage starts. If you have TRICARE, your coverage may be affected once your new Medicare Advantage coverage starts. Please contact TRICARI for more information. If you have a Medigap plan, once your Medicare Advantage coverage starts, you may want to drop your Medigap policy because you will be paying for coverage you cannot use.
	This plan is a dual-eligible special needs plan (D-SNP). Your ability to enroll will be based on verification that you are entitled to both Medicare and Medical Assistance from a state plan under Medicaid and at one of the following categories of aid:
	✓ Qualified Medicare Beneficiary Plus (QMB+).
	✓ Specified Low-Income Medicare Beneficiary Plus (SLMB+).
	✓ Full Benefit Dual-Eligible (FBDE).

AmeriHealth Caritas VIP Care is an HMO D-SNP plan that contracts with both Medicare and Michigan Medicaid to provide benefits of both programs to members. Enrollment in AmeriHealth Caritas VIP Care depends on contract renewal.