



## Notice of Availability of Electronic Materials

Georgia Health Advantage welcomes you to Georgia Health Advantage (HMO I-SNP) as your new Medicare Advantage plan. The enclosed documents provide important information about your benefits and coverage.

Member Services is available to answer any questions you may have about the enclosed information. You may call Member Services toll free at 1-844-917-0645 (TTY/TDD users call 711) or visit our website at [georgiahealthadvantage.com](http://georgiahealthadvantage.com). Member Services hours of operation are 8:00 A.M. to 8:00 P.M., seven days a week, October 1 through March 31; 8:00 A.M. to 8:00 P.M., Monday to Friday, April 1 through September 30.

As a member of Georgia Health Advantage Plus (HMO I-SNP), you are entitled to receive the Evidence of Coverage, a list of all network providers (Provider Directory), network pharmacies (Pharmacy Directory) and a list of covered drugs (Formulary). The Evidence of Coverage, Provider Directory, Pharmacy Directory and Formulary can be accessed electronically on our website as of October 15<sup>th</sup> at: [georgiahealthadvantage.com](http://georgiahealthadvantage.com).

Member Services is available if you have questions about covered medical items or services, questions about covered drugs, need help finding a network provider or network pharmacy. Please call Member Services at the number provided above or visit [georgiahealthadvantage.com](http://georgiahealthadvantage.com) to access your Evidence of Coverage or the online searchable Provider Directory, searchable Pharmacy Directory and Formulary.

You may ask us to send you the Evidence of Coverage, Provider Directory, Pharmacy Directory or Formulary by calling Member Services at the number provided above or by sending an email to: [MemberServices@AmHealthPlans.com](mailto:MemberServices@AmHealthPlans.com).

Please allow three (3) business days for mailing of the Evidence of Coverage, Provider Directory, Pharmacy Directory and/or Formulary. Thank you for choosing Georgia Health Advantage. We value your membership and look forward to serving you.

Thank you,

Georgia Health Advantage





## **Disclaimers**

### **English**

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

ATTENTION: If you speak limited English, language assistance services, free of charge, are available to you. Call 1-844-917-0645 (TTY/TDD: 711).

### **Español (Spanish)**

Georgia Health Advantage cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-844-917-0645 (TTY/TDD: 711).

### **Tiếng Việt (Vietnamese)**

Georgia Health Advantage tuân thủ luật dân quyền hiện hành của Liên bang và không phân biệt đối xử dựa trên chủng tộc, màu da, nguồn gốc quốc gia, độ tuổi, khuyết tật, hoặc giới tính.

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-844-917-0645 (TTY/TDD: 711).

