



2026 Summary of Benefits

Delaware

Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)

H4661 | 003

Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Introduction

This document is a brief summary of the benefits and services covered by Wellcare Delaware First Health Dual Align (HMO-POS D-SNP). It includes answers to frequently asked questions, important contact information, an overview of benefits and services offered, and information about your rights as a member of Wellcare Delaware First Health Dual Align (HMO-POS D-SNP). Key terms and their definitions appear in alphabetical order in the last chapter of the Evidence of Coverage.

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If you have questions, please call Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) at 1-844-536-2167 (TTY: 711). Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. The call is free. **For more information**, visit go.wellcare.com/DEFIRST.



Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

A. Disclaimers



This is a summary of health services covered by Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) for 2026. This is only a summary. Please read the Evidence of Coverage for the full list of benefits. You can find the Evidence of Coverage on our website at <https://www.wellcarede.com/>. To request a copy, please call Member Services at 1-844-536-2167 (TTY: 711). Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. Please note during after hours, weekends and federal holidays from April 1 to September 30, our automated phone system may answer your call. If you leave a voicemail message, please include your name, and telephone number and a team member will return your call within one (1) business day.

- ❖ Wellcare is the Medicare brand for Centene Corporation, an HMO, PPO, PFFS, PDP plan with a Medicare contract and is an approved Part D Sponsor. Our D-SNP plans have a contract with the state Medicaid program. Enrollment in our plans depends on contract renewal.
- ❖ Based on a Model of Care review, Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) has been approved by the National Committee for Quality Assurance (NCQA) to operate a Special Needs Plan (SNP) through 2028.
- ❖ Out-of-network/non-contracted providers are under no obligation to treat Plan members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.
- ❖ For more information about Medicare, you can read the *Medicare & You* handbook. It has a summary of Medicare benefits, rights, and protections and answers to the most frequently asked questions about Medicare. You can get it at the Medicare website (www.medicare.gov) or by calling 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.
- ❖ For more information about Wellcare Delaware First Health Dual Align (HMO-POS D-SNP), you can check the Division of Medicaid and Medical Assistance website at www.dhss.delaware.gov/dmma or by phone at 302-571-4900, Monday-Friday 8:00-4:30.



If you have questions, please call Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) at 1-844-536-2167 (TTY: 711). Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. The call is free. **For more information**, visit go.wellcare.com/DEFIRST

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- ❖ **New members to Delaware First Health Dual Align (HMO-POS D-SNP):** In most instances you'll be enrolled in Delaware First Health Dual Align (HMO-POS D-SNP) for your Medicare benefits the 1st day of the month after you request to be enrolled in Delaware First Health Dual Align (HMO-POS D-SNP). In some cases you may still receive your Delaware Medicaid from your previous Delaware Medicaid health plan for one additional month. After that, you'll receive your Delaware Medicaid services through Delaware First Health Dual Align (HMO-POS D-SNP). There will be no gap in your Delaware Medicaid coverage. Please call us at the number at the bottom of the page if you have any questions.
- ❖ The Delaware Medicare Assistance Bureau (DMAB), formerly known as ELDERinfo, provides free health insurance counseling for people with Medicare, including those under 65 years of age. You can call DMAB at 302-674-7364 to set up a free counseling session with a trained volunteer at a convenient site near you. More information can be found at <https://insurance.delaware.gov/divisions/dmab/>.
- ❖ The Delaware Long Term Care Ombudsman Program helps people get information about nursing homes and resolve problems between nursing homes and residents or their families. To contact the Ombudsman, call 1-855-773-1002 or visit <https://dhss.delaware.gov/dhss/lcopp>.
- ❖ You can get this document for free in other formats, such as large print, braille, or audio. Call 1-844-536-2167 (TTY: 711), Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. Please note during after hours, weekends and federal holidays from April 1 to September 30, our automated phone system may answer your call. If you leave a voicemail message, please include your name, and telephone number and a team member will return your call within one (1) business day. The call is free.
- ❖ This document is available for free in Spanish.

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- ❖ Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) wants to make sure you understand your health plan information. We can send future materials to you in a language other than English or in alternate formats if you ask for it this way. This is called a “standing request.” That language and/or alternative format will be saved and all future communications will come to you as you requested. If you need help understanding your plan materials or wish to change the language and/or alternative format of your mailings and communications, please contact Member Services at 1-844-536-2167 (TTY: 711). Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m.

B. Frequently asked questions (FAQ)

The following table lists frequently asked questions.

Frequently Asked Questions	Answers
What’s a HIDE SNP?	<p>Our plan is a highly integrated dual eligible (HIDE) special needs plan (SNP). A HIDE SNP is a health plan that contracts with both Medicare and Delaware Medicaid to provide benefits of both programs to enrollees. A HIDE SNP Plan is an organization made up of doctors, hospitals, pharmacies, providers of long-term services, and other providers. It also has care coordinators to help you manage your providers and services. They all work together to provide the care you need.</p> <p>This plan is for people who live within our plan's service area, have Medicare and get full Delaware Medicaid benefits. When you enroll in this plan, you get your health care, prescription drugs, Long Term Services and Supports (LTSS), and other extra benefits through us.</p>



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Frequently Asked Questions	Answers
<p>I've enrolled in the Wellcare Delaware First Health Dual Align D-SNP, do I also need to enroll in Delaware First Health Medicaid?</p>	<p>No. Once you enroll in the Wellcare Delaware First Health Dual Align (HMO-POS D-SNP), you will automatically be enrolled in Delaware First Health Medicaid. You do not need to do anything.</p>
<p>Will I get the same Medicare and Medicaid benefits in Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) that I get now?</p>	<p>You'll get most of your covered Medicare and Medicaid benefits directly from Wellcare Delaware First Health Dual Align (HMO-POS D-SNP). You'll work with a team of providers who will help determine what services will best meet your needs. This means that some of the services you get now may change based on your needs, and your doctor and care coordinator assessment. You may also get other benefits outside of your health plan the same way you do now, directly from the Division of Medicaid and Medical Assistance.</p> <p>When you enroll in Wellcare Delaware First Health Dual Align (HMO-POS D-SNP), you and your care coordinator will work together to develop an Individualized Plan of Care to address your health and support needs, reflecting your personal preferences and goals.</p> <p>If you're taking any Medicare Part D drugs that Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) doesn't normally cover, you can get a temporary supply and we'll help you to transition to another drug or get an exception for Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) to cover your drug if medically necessary. For more information, call Member Services at the numbers listed at the bottom of this page.</p>

If you have questions, please call Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) at 1-844-536-2167 (TTY: 711). Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. The call is free. **For more information**, visit go.wellcare.com/DEFIRST.



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Frequently Asked Questions	Answers
Can I use the same doctors I use now? (continued on the next page)	<p>This is often the case. If your providers (including doctors, hospitals, therapists, pharmacies, and other health care providers) work with Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) and have a contract with us, you can keep going to them.</p> <ul style="list-style-type: none">• Providers with an agreement with us are “in-network.” Network providers participate in our plan. That means they accept members of our plan and provide services our plan covers. You must use the providers in Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)’s network. If you use providers or pharmacies that aren’t in our network, the plan may not pay for these services or drugs.• If you need urgent or emergency care or out-of-area dialysis services, you can use providers outside of Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)’s plan.• If you’re currently under treatment with a provider that’s out of Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)’s network or have an established relationship with a provider that’s out of Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)’s network, call Member Services to check about staying connected. <p>To find out if your providers are in the plan’s network, call Member Services at the numbers listed at the bottom of this page or read Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)’s <i>Provider and Pharmacy Directory</i> on the plan’s website at go.wellcare.com/2026providerdirectories.</p>



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Frequently Asked Questions	Answers
<p>Can I use the same doctors I use now? (continued)</p>	<p>If Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) is new for you, we'll work with you to develop a care plan to address your needs.</p> <p>If you join Delaware First Health from another health plan, we will work with your old health plan to get your health information, like your service history, service authorizations, and other information about your current care.</p> <p>You can finish getting any services that have already been authorized by your previous health plan. After that, if your provider is not in our network, we will help you find a provider who is so that you can continue getting the services and care you need.</p> <p>In almost all cases, your providers under your former plan will also be Wellcare Delaware First Health Dual Align providers. If one or more of your providers is not part of our network, there are some instances when you can still see the provider you had before you joined our plan. If your provider is not in-network, they can join by calling Delaware First Health at 877-236-1341 or visiting us at www.delawarefirsthealth.com/providers/become-a-provider.html.</p>
<p>What's a Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) care coordinator?</p>	<p>A Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) care coordinator is one main person for you to contact. This person helps to manage all your providers and services and make sure you get what you need.</p>

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Frequently Asked Questions	Answers
<p>What’s a Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) case manager?</p>	<p>Depending on your care needs, you’ll be assigned either a care coordinator or a case manager. At Wellcare Delaware First Health Dual Align (HMO-POS D-SNP), your care coordinator or case manager is the main person for you to contact. This person helps to manage your specific needs.</p>
<p>What are Long-term Services and Supports (LTSS)?</p>	<p>Long-term Services and Supports are help for people who need assistance to do everyday tasks like bathing, toileting, getting dressed, making food, and taking medicine. Most of these services are provided at your home or in your community but could be provided in a nursing home or hospital. In some cases, the Division of Developmental Disabilities Services may administer these services, and your care coordinator or care team will work with that agency.</p>
<p>What happens if I need a service but no one in Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)’s network can provide it?</p>	<p>Most services will be provided by our network providers. If you need a service that can’t be provided within our network, Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) will pay for the cost of an out-of-network provider.</p>
<p>Where’s Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) available?</p>	<p>The service area for this plan includes: Kent, New Castle, Sussex Counties, Delaware. You must live in one of these areas to join the plan.</p>



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Frequently Asked Questions	Answers
<p>What's prior authorization?</p>	<p>Prior authorization means an approval from Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) to seek services outside of our network or to get services not routinely covered by our network before you get the services. Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) may not cover the service, procedure, item, or drug if you don't get prior authorization.</p> <p>If you need urgent or emergency care or out-of-area dialysis services, you don't need to get prior authorization first. Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) can provide you or your provider with a list of services or procedures that require you to get prior authorization from Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) before the service is provided.</p> <p>Refer to Chapter 3, of the Evidence of Coverage to learn more about prior authorization. Refer to the Benefits Chart in Chapter 4 of the Evidence of Coverage to learn which services require a prior authorization.</p> <p>If you have questions about whether prior authorization is required for specific services, procedures, items, or drugs, call Member Services at the numbers listed at the bottom of this page for help.</p>
<p>What's a referral? (continued on next page)</p>	<p>A referral means that your primary care provider (PCP) must give you approval to go to someone that isn't your PCP. A referral is different than a prior authorization. If you don't get a referral from your PCP, Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) may not cover the</p>

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Frequently Asked Questions	Answers
What's a referral? (continued)	<p>services. Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) can provide you with a list of services that require you to get a referral from your PCP before the service is provided.</p> <p>Refer to the Evidence of Coverage to learn more about when you'll need to get a referral from your PCP.</p>
Do I pay a monthly amount (also called a premium) under Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)?	No. Because you have Medicaid you won't pay any monthly premiums, including your Medicare Part B premium, for your health coverage.
Do I pay a deductible as a member of Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)?	No. You don't pay deductibles in Wellcare Delaware First Health Dual Align (HMO-POS D-SNP).
What's the maximum out-of-pocket amount that I'll pay for medical services as a member of Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)?	There's no cost sharing for medical services in Wellcare Delaware First Health Dual Align (HMO-POS D-SNP), so your annual out-of-pocket costs will be \$0.

C. List of covered services

The following table is a quick overview of what services you may need, your costs, and rules about the benefits.



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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need hospital care	Inpatient hospital stay	\$0	Except in an emergency, your health care provider must tell the plan of your hospital admission. Prior authorization may be required, except in an emergency.
	Outpatient hospital services, including observation	\$0	Prior authorization may be required.
	Ambulatory surgical center (ASC) services	\$0	Prior authorization may be required.
	Doctor or surgeon care	\$0	Prior authorization may be required.
You want a doctor	Visits to treat an injury or illness	\$0	None

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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You want a doctor (continued)	Care to keep you from getting sick, such as flu shots and screenings to check for cancer	\$0	None
	Wellness visits, such as a physical	\$0	None
	“Welcome to Medicare” (preventive visit one time only)	\$0	None
	Specialist care	\$0	Prior authorization may be required.
You need emergency care (continued on next page)	Emergency room services	\$0	<p>You may get covered emergency care from either in-network or out-of-network providers whenever you need it. You do not need prior authorization for emergency care.</p> <p>\$115 copay for worldwide emergency services. You are covered up to \$50,000 every year for worldwide emergency and urgent care services.</p>



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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>You need emergency care (continued)</p>			<p>No prior authorization is necessary for emergency room services.</p>
	<p>Urgent care</p>	<p>\$0</p>	<p>You may get covered urgent care from either in-network or out-of-network providers whenever you need it. You do not need prior authorization for urgent care.</p> <p>\$115 copay for Worldwide emergency services. You are covered up to \$50,000 every year for worldwide emergency and urgent care services.</p> <p>No prior authorization is necessary for urgent care services.</p>

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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need medical tests	Diagnostic radiology services (for example, X-rays or other imaging services, such as CAT scans or MRIs)	\$0	Prior authorization may be required.
	Lab tests and diagnostic procedures, such as blood work	\$0	Prior authorization may be required.
You need hearing/auditory services	Hearing screenings	\$0	Routine hearing exam: 1 every year. Prior authorization may be required.
	Hearing aids	\$0	Hearing aid fitting(s)/evaluation(s): 1 every year. Hearing aids: 2 (1 per ear) every year up to a \$2,000 allowance per ear every year for hearing aids. Prior authorization may be required.



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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>You need dental care (continued on the next page)</p>			<p>Covered preventive services include:</p> <ul style="list-style-type: none"> • Oral exam and cleaning – 2 every year • Dental x-rays* • Other diagnostic services - 1 per visit • Other preventive services – 1 per tooth per 6 months <p>Prior authorization may be required.</p> <p>*Benefit frequency limits vary based on services you get. Refer to the Evidence of Coverage for more details.</p>



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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>You need dental care (continued on the next page)</p>	<p>Restorative and emergency dental care</p>	<p>\$0</p>	<p>For more information about dental services covered under our Medicaid benefits or our dental provider network, visit: www.delawarefirsthealth.com/members/medicaid/benefits-services/children-dental-program.html</p> <p>Our plan also covers routine dental care under your Medicare benefit. You may use either in-network or out-of-network dentists for routine dental care (non-Medicare-covered services). If you use out-of-network providers, you will pay a 25% coinsurance for covered services. Out-of-network providers are not contracted to accept plan payment as payment in full. They might charge you more than the plan pays.</p>

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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>You need dental care (continued on the next page)</p>			<p>This plan includes coverage up to \$3,000 per plan year for all in-network and out-of-network covered routine comprehensive dental services</p> <p>Covered comprehensive services include:</p> <ul style="list-style-type: none"> • Restorative services* • Endodontics – once per tooth per lifetime • Periodontics* • Prosthodontics, removable & fixed* • Oral maxillofacial surgery* • Adjunctive general services*



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<p>You need dental care (continued)</p>			<p>*Benefit frequency limits vary based on services you get. Refer to the Evidence of Coverage for more details.</p> <p>Prior authorization may be required.</p>

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<p>You need eye care (continued on the next page)</p>	Eye exams	\$0	<p>Routine eye exam: 1 every year.</p> <p>Prior authorization may be required.</p>
	Glasses or contact lenses	\$0	<p>Up to a \$500 combined allowance for eyeglasses (frames and lenses) and contact lenses.</p> <p>Prior authorization may be required.</p>



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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need eye care (continued)	Other vision care	\$0	<p>Exam to diagnose and treat diseases and conditions of the eyes (including yearly glaucoma screening).</p> <p>Prior authorization may be required.</p>
You need behavioral health services (continued on the next page)	Behavioral health services	\$0	<p>Our plan pays for mental health care services including, but not limited to, inpatient stay, outpatient counseling, partial hospitalization program and intensive outpatient program.</p> <p>For members participating in the PROMISE program (Promoting Optimal Mental Health for Individuals through Supports and Empowerment), the state also covers licensed behavioral health practitioner services. For specialized behavioral health services see Section D.</p>



If you have questions, please call Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) at 1-844-536-2167 (TTY: 711). Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. The call is free. **For more information**, visit go.wellcare.com/DEFIRST.

Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>You need behavioral health services (continued)</p>	<p>Inpatient and outpatient care and community-based services for people who need mental health services</p>	<p>\$0</p>	<p>Our plan covers services such as inpatient stay and outpatient counseling services.</p> <p>For members participating in the PROMISE program, these services are covered by the State.</p> <ul style="list-style-type: none"> • Community psychiatric support and treatment. • Community-based residential supports, excluding assisted living. • Community transition services. <p>Prior authorization may be required.</p>
<p>You need substance use disorder services</p>	<p>Substance use disorder services</p>	<p>\$0</p>	<p>Our plan covers services such as inpatient stay and outpatient counseling.</p>



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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>You need substance use disorder services (continued)</p>			<p>For members participating in the PROMISE program, the state also covers substance use disorder (SUD) services other than medically managed intensive inpatient detoxification.</p> <p>Prior authorization may be required.</p>
<p>You need a place to live with people available to help you (continued on the next page)</p>	<p>Skilled nursing care</p>	<p>\$0</p>	<p>Prior authorization may be required.</p>
	<p>Nursing home care</p>	<p>\$0</p>	<p>Prior authorization may be required.</p>
	<p>Adult Foster Care and Group Adult Foster Care</p>	<p>\$0</p>	<p>Prior authorization may be required.</p>

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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need a place to live with people available to help you (continued)	Long Term Services and Supports (LTSS)	\$0	LTSS benefits include, but are not limited to, adult day services, cognitive services, community-based residential alternatives, day habilitation, home-delivered meals, minor home modification, nursing facility, personal emergency response system (PERS), respite care, nursing facility transition (NFT) services.
You need therapy after a stroke or accident	Occupational, physical, or speech therapy	\$0	Prior authorization may be required.
You need help getting to health services (continued on the next page)	Ambulance services	\$0	Prior authorization may be required for non-emergency ambulance services.
	Emergency transportation	\$0	



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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>You need help getting to health services (continued)</p>	<p>Transportation to medical appointments and services</p>	<p>\$0</p>	<p>Your Medicare coverage provides up to 12 one-way trips to plan-approved health-related locations.</p> <p>Limitations and exclusions may apply. Delaware Medicaid provides unlimited one-way trips every year to plan-approved health-related locations.</p> <p>Call Member Services at the numbers listed at the bottom of this page at least 3 days before or as soon as possible before your appointment to schedule your ride.</p> <p>Prior authorization may be required.</p>

If you have questions, please call Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) at 1-844-536-2167 (TTY: 711). Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. The call is free. **For more information**, visit go.wellcare.com/DEFIRST.



Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>You need drugs to treat your illness or condition</p>	<p>Medicare Part B drugs</p>	<p>\$0</p>	<p>Part B drugs include drugs given by your doctor in their office, some oral cancer drugs, and some drugs used with certain medical equipment. Read the Evidence of Coverage for more information on these drugs. Prior authorization may be required.</p>
<p>You need drugs to treat your illness or condition (continued on the next page)</p>	<p>Medicare Part D drugs Tier 1: (Preferred Generic) Tier 2: (Generic) Tier 3: (Preferred Brand)</p>	<p>\$0 copay for up to a 100-day supply at a retail pharmacy.</p>	<p>With our Medicaid Value-Added Benefit (“\$0 Pharmacy Co-Pays for Duals”), you do not pay pharmacy co-pays.</p>



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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>You need drugs to treat your illness or condition (continued on the next page)</p>	<p>Tier 4: (Non-Preferred Drug) Tier 5: (Specialty Tier) Tier 6: (Select Care Drugs)</p>	<p>\$0 copay for a 35 to 100-day supply at a mail order pharmacy.</p> <p>Copays for drugs may vary based on the level of Extra Help you get. Please contact the plan for more details.</p>	<p>There may be limitations on the types of drugs covered. Please refer to Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)'s <i>List of Covered Drugs (Drug List)</i> for more information.</p> <p>Some prescription drugs may require prior authorization or may require that you try a different drug first. Quantity limits may apply.</p> <p>Tier 5 drugs are limited to a 30-day supply per fill.</p> <p>An extended-day supply of some drugs is available through mail order and certain retail pharmacies. For more information, please refer to our <i>List of Covered Drugs</i> to view those drugs available for an extended-day supply.</p>



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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>You need drugs to treat your illness or condition (continued)</p>	<p>Over-the-counter (OTC) drugs</p>	<p>\$0</p>	<p>There may be limitations on the types of drugs covered. Please refer to Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)'s <i>List of Covered Drugs (Drug List)</i> for more information.</p> <p>See the Wellcare Spendables® later in this chart for coverage under the Medicare benefit.</p> <p>Additionally, you get an extra \$120 per household per year to spend on select OTC products through your Medicaid OTC Pharmacy Catalog Value-Added Benefit. Learn more about all Value-Added Benefits at www.delawarefirsthealth.com/vab.</p>



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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need help getting better or have special health needs	Rehabilitation services	\$0	
	Medical equipment for home care	\$0	Prior authorization may be required.
	Dialysis services	\$0	
You need foot care	Podiatry services	\$0	Prior authorization may be required.
	Orthotic services	\$0	Prior authorization may be required.

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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>You need durable medical equipment (DME)</p> <p>Note: This isn't a complete list of covered DME. For a complete list, contact Member Services or refer to Chapter 4 of the Evidence of Coverage</p>	Wheelchairs, crutches, and walkers	\$0	Prior authorization may be required.
	Nebulizers	\$0	Prior authorization may be required.
	Oxygen equipment and supplies	\$0	Prior authorization may be required.



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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need help living at home (continued on next page)	Home health services	\$0	Prior authorization may be required.
	Home services, such as cleaning or housekeeping, or home modifications such as grab bars	\$0	Some services are covered for individuals on the Home and Community Based Services Waiver. Prior authorization may be required.
	Adult day health, Home and Community Based Services (HCBS), or other support services	\$0	Prior authorization may be required.
	Day habilitation services	\$0	Prior authorization may be required.



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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need help living at home (continued)	Services to help you live on your own (home health care services or personal care attendant services)	\$0	Prior authorization may be required.
Additional services (continued on the next page)	Chiropractic services	\$0	Prior authorization may be required.
	Diabetes supplies and services	\$0	<p>Therapeutic shoes or inserts are covered when medically necessary.</p> <p>Diabetic glucometer and supplies are limited to Accu-Chek™ Guide and True Metrix™ when obtained at a Pharmacy. Other brands and continuous glucose monitoring systems are not covered unless pre-authorized.</p> <p>Quantity limits may apply.</p>



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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
Additional services (continued on the next page)	Diabetes supplies and services	\$0	Prior authorization may be required.
	Prosthetic services	\$0	Prior authorization may be required.
	Radiation therapy	\$0	Prior authorization may be required.
	Services to help manage your disease	\$0	Prior authorization may be required.
	Special Supplemental Benefits for Chronically Ill (SSBCI) Benefits mentioned are a part of Special Supplemental Benefits for the Chronically Ill. Not all members will qualify. In addition to being high-risk, you must have one or more of the following chronic conditions: cancer, cardiovascular disorders, chronic	\$0	If eligible , you can use your Wellcare Spendables® allowance towards the additional benefits shown below. Once determined eligible these expanded benefits will be available in 7-10 business days. See the Wellcare Spendables® section in this chart for more information about the Wellcare Spendables® card. Your card allowance can be used towards:

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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>Additional services (continued on the next page)</p>	<p>and disabling mental health conditions, chronic lung disorders, diabetes. There are other eligible conditions not listed. Eligibility for this benefit cannot be guaranteed based solely on your condition. All applicable eligibility requirements must be met before the benefit is provided. For details, please contact us or see the plan's Evidence of Coverage.</p>		<ul style="list-style-type: none"> • Gas pay-at-pump - You can use your card to pay for gas directly at the pump. The card cannot be used to pay in-person at the cash register. Your card can only be used up to the available allowance amount. • Healthy Food - You can use your card to pay for healthy foods and produce at participating retailers. Delivery options for eligible grocery items may be available. Prepared meals are available for order via online portal. • Home Assistance and Safety Items - You can use your card to help with the cost and installation of home improvement and safety items. Log in to your member portal to purchase accepted items.



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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
Additional services (continued on the next page)			<ul style="list-style-type: none"> • Rent Assistance - You can use your card to help with the cost of rent/mortgage for your home. • Utility Assistance - You can use your card to help with the cost of utilities for your home. Your card can be used toward utility expenses including water, heating oil and natural gas, electricity, trash, cable TV service (excludes streaming services), landline or mobile phone and internet.
	Wellcare Spendables®	\$0	<p>You will receive \$233 monthly preloaded on your Wellcare Spendables® card to spend on OTC items, Dental, Vision, and Hearing services.</p> <p>Your monthly allowance rolls over to the following month if unused and expires at the end of the plan year.</p>

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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>Additional services (continued on the next page)</p>			<p>Your card allowance can be used towards:</p> <p>Over-the-Counter items (OTC) - Your card can be used at participating retail locations, through the mobile app, or log in to your member portal to place an order for home delivery. Examples of covered items include brand name and generic over-the-counter items, vitamins, pain relievers, cold and allergy items and diabetic items.</p> <p>Dental, Vision, and Hearing - You may use your card to help reduce your out-of-pocket expenses for eligible dental, vision, and hearing services.</p> <p>Benefits mentioned below are part of SSBCI. Not all members will qualify. You must meet eligibility criteria for the following plan benefits.</p>



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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
Additional services (continued on the next page)			<p><u>If you qualify</u>, your card allowance can also be used towards:</p> <ul style="list-style-type: none"> • Gas pay-at-pump • Healthy Food • Home Assistance and Safety Items • Pest Control Items and Services • Rent Assistance • Utility Assistance <p>Refer to Special Supplemental Benefits for the Chronically Ill (SSBCI) in this chart for more information on these benefits. For more information, limitations, and exclusions, please see your Evidence of Coverage.</p>

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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
Additional services (continued on the next page)	Fitness benefit	\$0	<p>To help support an active and healthy lifestyle, your plan provides a fitness program that offers access to fitness locations nationwide. You may access one or more gyms within the fitness network.</p> <p>Members have access to in-person fitness centers, available on-demand exercise programs, and a variety of Home Fitness Kits.</p>
	Meals benefit	\$0	<p>Post-Acute Meals: If you qualify, you get home delivered meals up to 45 days following an Inpatient hospital stay to aid in recovery. Limited to 3 meals per day for up to 14 days with a maximum of 42 meals per occurrence for an unlimited number of occurrences per year.</p>



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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>Additional services (continued on the next page)</p>	<p>Social Support Platform</p>	<p>\$0</p>	<p>Unlimited social support platform services every year.</p> <p>Our plan provides an online social support platform to help your overall well-being. The platform offers community engagement, therapeutic activities, and plan-sponsored resources to help manage stress and anxiety. The platform makes it easy for you to participate and remain involved. It is available online 24/7, so you can use it whenever you choose.</p> <p>The platform includes:</p> <ul style="list-style-type: none"> • Tailored Well-Being Programs • Peer and Expert Support • Personalized Digital Health Tools

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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
			Please refer to your Evidence of Coverage for more details.
Additional services (continued on the next page)	My Wellcare Rewards	\$0	<p>With My Wellcare Rewards, you can earn up to \$100 by completing eligible health activities and portal activities through your member portal.</p> <p>Rewards will be loaded onto your Wellcare Spendables[®] card.</p>
	Medicaid Value Added Benefits	\$0	<p>Our plan includes additional benefits that are not covered under Medicaid, such as:</p> <p>Community-Based Wellness Programs: Up to \$250/year to stay healthy with partner organizations including senior centers.</p>



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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
Additional services (continued)			<p>Housing Transition Allowance: Up to \$2500 per lifetime in housing resources available to eligible members who are homeless or moving from a facility to independent living (in addition to the state allowance for LTSS members).</p> <p>For more information on these and other Value-Added Benefits provided to you, visit https://www.delawarefirsthealth.com/vab.</p>

The above summary of benefits is provided for informational purposes only and isn't a complete list of benefits. For a complete list and more information about your benefits, you can read the Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) Evidence of Coverage. If you don't have an Evidence of Coverage, call Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) Member Services at the numbers listed at the bottom of this page to get one. If you have questions, you can also call Member Services or visit go.wellcare.com/DEFirst.



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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

D. Benefits covered outside of Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)

There are some services that you can get that aren't covered by Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) but are covered by Medicare, Medicaid, or a State or county agency. This isn't a complete list. Call Member Services at the numbers listed at the bottom of this page to find out about these services.

Other services covered by Medicare, Medicaid, or a State Agency	Your costs
<p>Additional behavioral health services:</p> <p>Members participating in PROMISE are eligible for State provided services. Please contact your care coordinator or case manager for more information</p>	\$0
<p>Certain hospice care services covered outside of Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)</p>	\$0
<p>Non-Emergency Medical Transportation:</p> <p>This is a State provided service. Members seeking to use this service will need to contact Member Services.</p>	\$0



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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Other services covered by Medicare, Medicaid, or a State Agency	Your costs
<p>Specialized services for nursing facility residents not included under our plan:</p> <p>The State will provide specialized services as determined necessary by the State.</p> <p>Please contact Member Services for more information.</p>	\$0
<p>For a complete and up-to-date-listing of Medicaid benefits and services available to you, please see: https://www.delawarefirsthealth.com/members/mcicaid/resources/handbooks-forms.html</p>	\$0

E. Services that Wellcare Delaware First Health Dual Align (HMO-POS D-SNP), Medicare, and Medicaid don't cover

This isn't a complete list. Call Member Services at the numbers listed at the bottom of this page to find out about other excluded services.

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Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

Services Wellcare Delaware First Health Dual Align (HMO-POS D-SNP), Medicare, and Medicaid don't cover	
Services that are not medically necessary	Cosmetic services.
Abortions, except for certain circumstances.	
Infertility treatments.	

F. Your rights as a member of the plan

As a member of Wellcare Delaware First Health Dual Align (HMO-POS D-SNP), you have certain rights. You can exercise these rights without being punished. You can also use these rights without losing your health care services. We'll tell you about your rights at least once a year. For more information on your rights, please read the Evidence of Coverage. Your rights include, but aren't limited to, the following:


- **You have a right to respect, fairness, and dignity.** This includes the right to:
 - Get covered services without concern about medical condition, health status, receipt of health services, claims experience, medical history, disability (including mental impairment), marital status, age, sex (including sex stereotypes and gender identity) sexual orientation, national origin, race, color, religion, creed, or public assistance
 - Get information in other languages and formats (for example, large print, braille, or audio) free of charge



If you have questions, please call Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) at 1-844-536-2167 (TTY: 711). Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. The call is free. **For more information**, visit go.wellcare.com/DEFIRST

Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) | 2026 Summary of Benefits

- Be free from any form of physical restraint or seclusion
- **You have the right to get information about your health care.** This includes information on treatment and your treatment options. This information should be in a language and format you can understand. This includes the right to get information on:
 - Description of the services we cover
 - How to get services
 - How much services will cost you
 - Names of health care providers and care coordinator
- **You have the right to make decisions about your care, including refusing treatment.** This includes the right to:
 - Choose a primary care provider (PCP) and change your PCP at any time during the year
 - Use a women's health care provider without a referral
 - Get your covered services and drugs quickly
 - Know about all treatment options, no matter what they cost or whether they're covered
 - Refuse treatment, even if your health care provider advises against it
 - Stop taking medicine, even if your health care provider advises against it
 - Ask for a second opinion. Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) will pay for the cost of your second opinion visit
 - Make your health care wishes known in an advance directive

 **If you have questions**, please call Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) at 1-844-536-2167 (TTY: 711). Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. The call is free. **For more information**, visit go.wellcare.com/DEFIRST.

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- **You have the right to timely access to care that doesn't have any communication or physical access barriers.** This includes the right to:
 - Get timely medical care
 - Get in and out of a health care provider's office. This means barrier-free access for people with disabilities, in accordance with the Americans with Disabilities Act
 - Have interpreters to help with communication with your health care providers and your health plan
- **You have the right to seek emergency and urgent care when you need it.** This means you have the right to:
 - Get emergency services without prior authorization in an emergency
 - Use an out-of-network urgent or emergency care provider, when necessary
- **You have a right to confidentiality and privacy.** This includes the right to:
 - Ask for and get a copy of your medical records in a way that you can understand and to ask for your records to be changed or corrected
 - Have your personal health information kept private
 - Have privacy during treatment
- **You have the right to make complaints about your covered services or care.** This includes the right to:
 - File a complaint or grievance against us or our providers
 - File a complaint with the Division of Medicaid and Medical Assistance at 302-571-490. The Wellcare Meridian Dual Align (HMO D-SNP) website <https://www.wellcarede.com/> has complaint forms, Independent Medical Review (IMR) application forms, and instructions available online.
 - Ask for an IMR of Medicaid services or items that are medical in nature
 - Appeal certain decisions made by our providers



If you have questions, please call Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) at 1-844-536-2167 (TTY: 711). Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. The call is free. **For more information**, visit [go.wellcare.com/DEFIRST](https://www.wellcare.com/DEFIRST)

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- Ask for a State Hearing
- Get a detailed reason for why services were denied

For more information about your rights, you can read the Evidence of Coverage. If you have questions, you can call Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) Member Services Doctor office visits at the numbers listed at the bottom of this page.

You can also call the Medicaid Office of the Ombudsperson at 1-855-773-1002, Monday-Friday 8:00-4:30.



If you have questions, please call Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) at 1-844-536-2167 (TTY: 711). Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. The call is free. **For more information**, visit go.wellcare.com/DEFirst.

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G. How to file a complaint or appeal a denied service

If you have a complaint or think Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) should cover something we denied, call Member Services at the numbers listed at the bottom of this page. You may be able to appeal our decision.

For questions about complaints and appeals, you can read **Chapter 9** of the *Evidence of Coverage*. You can also call Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) Member Services at the numbers listed at the bottom of this page.

Appeals for Part D (Drugs)

Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)
Attn: Medicare Part D Appeals
P.O. Box 31383
Tampa, FL 33631-3383
Phone: 1-844-536-2167 (TTY: 711)

Appeals for Part C (Medical and Part B Drugs) and Grievances or Complaints for Part C (Medical and Part B Drugs)

Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)
Appeals & Grievances
P.O. Box 10343
Van Nuys, CA 91410-0343
Phone: 1-844-536-2167 (TTY: 711)

Grievances or Complaints for Part D (Drugs)

Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)
Attn: Appeals & Grievances Medicare Operations
P.O. Box 10450
Van Nuys, CA 91410-0450
Phone: 1-844-536-2167 (TTY: 711)

To file a grievance (complaint) or appeal about a Delaware Medicaid service, please contact 1-866-843-7212 (TTY: 711), Monday – Friday from 8:00 a.m.- 4:30 p.m. ET.



If you have questions, please call Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) at 1-844-536-2167 (TTY: 711). Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. The call is free. **For more information**, visit go.wellcare.com/DEFIRST


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H. What to do if you suspect fraud

Most health care professionals and organizations that provide services are honest. Unfortunately, there may be some who are dishonest.

If you think a doctor, hospital or other pharmacy is doing something wrong, please contact us.

- Call us at Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) Member Services. Phone numbers are listed at the bottom of this page.
- Or, call the Medicaid Customer Service Center at 1-866-843-7212. TTY users may call (:711).
- Or, call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users may call 1-877-486-2048. You can call these numbers for free.
- Or, call Delaware Medicaid's Fraud Reporting line at 1-800-372-2002 or email SURreferrals@delaware.gov.

 **If you have questions**, please call Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) at 1-844-536-2167 (TTY: 711). Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. The call is free. **For more information**, visit go.wellcare.com/DEFIRST.

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If you have general questions or questions about our plan, services, service area, billing, or Member ID Cards, please call Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) Member Services:

1-844-536-2167

Calls to this number are free. Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. Please note during after hours, weekends and federal holidays from April 1 to September 30, our automated phone system may answer your call. If you leave a voicemail message, please include your name, and telephone number and a team member will return your call within one (1) business day. Member Services also has free language interpreter services available for non-English speakers.

(TTY: 711)

Calls to this number are free. Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. Please note during after hours, weekends and federal holidays from April 1 to September 30, our automated phone system may answer your call. If you leave a voicemail message, please include your name, and telephone number and a team member will return your call within one (1) business day.

If you have questions about your health:

Call your primary care provider (PCP). Follow your PCP's instructions for getting care when the office is closed.

If your PCP's office is closed, you can also call Nurse Advice Line. A nurse will listen to your problem and tell you how to get care. (*Example:* urgent care, emergency room). The numbers for the Nurse Advice Line are:

1-844-796-6811

Calls to this number are free. 24 hours a day, 7 days a week.

Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) also has free language interpreter services available for non-English speakers.

(TTY: 711)

Calls to this number are free. 24 hours a day, 7 days a week.



If you have questions, please call Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) at 1-844-536-2167 (TTY: 711). Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. The call is free. **For more information**, visit go.wellcare.com/DEFIRST

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Wellcare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex (including pregnancy and sexual orientation). **Wellcare** does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex (including pregnancy and sexual orientation).

Wellcare

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages
- If you need these services, contact us at 1-844-415-0010 (TTY: 711). From October 1 to March 31, you can call us seven days a week from 8 a.m. to 8 p.m. From April 1 to September 30, you can call us Monday through Friday from 8 a.m. to 8 p.m. A messaging system is used after hours, weekends, and on federal holidays.

If you believe that **Wellcare** has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex (including pregnancy and sexual orientation), you can file a grievance with:

1557 Coordinator

PO Box 31384, Tampa, FL 33631

855-577-8234

TTY: 711

FAX: 866-388-1769

SM_Section1557Coord@centene.com

You can file a grievance by mail, fax, or email. If you need help filing a grievance, our **1557 Coordinator** is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services

200 Independence Avenue SW

Room 509F, HHH Building

Washington, D.C. 20201

1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <https://www.hhs.gov/ocr/complaints/index.html>

Notice of Availability of Language Assistance Services and Auxiliary Aids and Services

ATTENTION: If you speak a language other than English, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call 1-844-415-0010 (TTY: 711).

Español ATENCIÓN: Contamos con servicios de asistencia lingüística que se encuentran disponibles para usted de manera gratuita. También se encuentran disponibles de manera gratuita ayudas y servicios auxiliares adecuados para proporcionar información en formatos accesibles. Llame al 1-844-415-0010 (TTY: 711).

简体中文 注意：我们为您提供免费的语言协助服务，同时也可免费提供适当的辅助设施与服务，以便提供无障碍格式的信息。请致电 1-844-415-0010（TTY：711）。

繁體中文 注意：我們為您提供免費的語言協助服務，還免費提供適當的輔助工具和服務，以無障礙格式提供資訊。請致電 1-844-415-0010 (TTY：711)。

Kreyòl Ayisyen ATANSYON: Sèvis èd gratis pou lang disponib pou ou. Aparèy oksilyè ki bay asistans ak sèvis ki apwopriye pou bay enfòmasyon nan fòm aksesib yo disponib gratis tou. Rele nan 1-844-415-0010 (TTY: 711).

Yorùbá ÀKÍYÈSÍ: Àwọn ìṣẹ̀ ìrànlówọ̀ tí èdè wà nílẹ̀ fún ọ̀ lófẹ̀. Àwọn ìṣẹ̀ àti àwọn ìrànwọ̀ arannílowọ̀ tóyẹ̀ láti pèsè iwífúnni ní àwọn ònà kíkòsílẹ̀ tóṣeé ráàyè sí tún wà nílẹ̀ bákan náà lófẹ̀ láisan owó rará. Pe 1-844-415-0010 (TTY: 711).

Twi HYE NO NSO: Kasa ho mmoa dwumadie ahodoɔ wo ho ma wo a wontua hwee. Nneema a ebeboa wo ama wate nsem ne dwumadie ahodoɔ a ede nsem bema wo wo akwan bebree so nso wo ho a wontua hwee. Fre 1-844-415-0010 (TTY: 711).

Igbo NLERUANYA: A na-enye gi ọrụ enyemaka asụsụ n'efu. Enyemaka na ọrụ ndị kwesiri ekwesị iji nye ozi n'ụdị ndị dị mfe inweta dikrawa n'akwughị ụgwọ. Kpọọ 1-844-415-0010 (TTY: 711).

Français REMARQUE : des services d'assistance linguistique gratuits sont à votre disposition. Des services et aides pour obtenir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le 1-844-415-0010 (TTY : 711).

Français cadien COMMUNIQUE: Des services d'aide linguistique sans frais sont à votre disposition. Des aides et services auxiliaires appropriés pour fournir des informations en formats accessibles sont également proposés sans frais. Composez le 1-844-415-0010 (TTY : 711).

हिंदी ध्यान दें: आपके लिए निःशुल्क भाषा सहायता सेवाएं उपलब्ध हैं. एक्सेस करने योग्य फ़ॉर्मेट में जानकारी प्रदान करने के लिए उपयुक्त सहायक साधन और सेवाएं भी निःशुल्क उपलब्ध हैं. 1-844-415-0010 (TTY: 711) पर कॉल करें.

العربية انتباه: تتوفر لك خدمات مساعدة لغوية مجانية. تتوفر كذلك مجانًا مساعدات وخدمات إضافية ملائمة لتزويد المعلومات بتنسيقات قابلة للوصول إليها. اتصل على الرقم 1-844-415-0010 (TTY: 711).

ગુજરાતી ધ્યાન આપવાની જરૂર છે: તમારા માટે ભાષા સંબંધી સહાયતાની મફત સેવાઓ ઉપલબ્ધ છે. એક્સેસ કરી શકાય તેવાં ફોર્મેટમાં માહિતી પ્રદાન કરવા માટે યોગ્ય સહાયક સહાય અને સેવાઓ પણ મફતમાં ઉપલબ્ધ છે. 1-844-415-0010 (TTY: 711) પર કોલ કરો.

Tagalog ATENSYON: May mga libreng serbisyo ng tulong sa wika na available para sa inyo. Available din nang libre ang mga naaangkop na karagdagang tulong at serbisyo para makapagbigay ng impormasyon sa mga accessible na format. Tumawag sa 1-844-415-0010 (TTY: 711).

יידיש אויפֿמערקזאַמקייט: פֿרייע שפראך הילף סערוויסעס זענען פֿאַר אײַך פֿאַראַן. פֿאַסיקע הילפֿסמיטלען און סערוויסעס צו צושטעלן אינפֿאָרמאַציע אין צוגעגלעכע פֿאַרמאַטן זענען אויך פֿאַראַן פֿריי פֿון אָפּצאָל. רופֿט 1-844-415-0010 (TTY: 711).

Pennsylvania Deitsch GEB ACHT: Schprooch Hilfe sin meeglich mitaus Koscht. Rechtliche Auxiliary Aids un Hilfe um Information zu gewwe in helfreiche Formats sin aa meeglich mit aus Koscht. Ruf 1-844-415-0010 (TTY: 711).

Kiswahili TANBIHI: Huduma za usaidizi wa lugha zinapatikana bila malipo kwako. Nyenzo na huduma sahihi za usaidizi za kutoa maelezo katika miundo inayoweza kufikiwa pia zinapatikana bila malipo. Piga simu 1-844-415-0010 (TTY: 711).

Deutsch ACHTUNG: Sprachdienstleistungen stehen Ihnen kostenlos zur Verfügung. Geeignete zusätzliche Unterstützung und Dienstleistungen für Informationen in zugänglichen Formaten stehen Ihnen ebenfalls kostenlos zur Verfügung. Rufen Sie folgende Nummer an: 1-844-415-0010 (TTY: 711).

తెలుగు గమనిక: మీకు ఉచిత భాష సంబంధ సహాయక సేవలు అందుబాటులో ఉన్నాయి. యాక్సెస్ చేయదగిన ఫార్మాట్లలో సమాచారాన్ని అందించడానికి తగిన సహాయక టూల్స్, సేవలు కూడా ఉచితంగా అందుబాటులో ఉన్నాయి. 1-844-415-0010 (TTY: 711) నంబర్ కి కాల్ చేయండి.

한국어 주의: 무료 언어 지원 서비스를 이용하실 수 있습니다. 정보 제공을 위해 적합한 보조 도구 및 서비스 또한 액세스 가능한 형식으로 무료 이용이 가능합니다. 1-844-415-0010(TTY: 711)번으로 전화해 주십시오.

Pre-Enrollment Checklist

Before making an enrollment decision, it is important that you fully understand our benefits and rules. If you have any questions, you can call and speak to a Customer Service representative at 1-844-480-0680 (TTY 711). Hours are Sunday-Saturday, 8 am - 8 pm.

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 go.wellcare.com/DEFirst or call 1-844-480-0680 (TTY 711) to view a copy of the EOC. Hours are Sunday-Saturday, 8 am - 8 pm.
- Review the provider directory (or ask your doctor) 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 medicine 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

- Benefits may change on January 1, 2027.
- Effect on Current Coverage.** If you are currently enrolled in a Medicare Advantage plan, your current Medicare Advantage healthcare 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 Tricare 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. If you have a Marketplace plan, you will need to contact the Marketplace to cancel the plan. If you do not cancel your Marketplace plan, you may be paying for coverage you cannot use and there may be penalties on your next year's tax return.
- 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.