



Get more out of your
healthcare coverage at
no extra cost to you!

**Want more
information?
We can help!**

Extra benefits at no additional cost include:



\$3,500 Dental

allowance towards
diagnostic, preventive, and
comprehensive services like
crowns, fillings, extractions,
bridges, and dentures



\$50 allowance

every 3 months toward
over-the-counter
health items



\$350 Vision

allowance for eyeglasses
and/or contacts,
and 1 routine eye exam



Two Hearing Aids,

one per ear, every 3 years,
unlimited evaluation/fittings,
and 1 routine hearing exam



\$225 Food and Produce Card

allowance every 3
months toward healthy
food purchases*



Health Care Buddy

Every member is assigned
a Health Care Buddy.
Your buddy is just a
phone call away!

PLUS:

- **Personal Emergency Response System (PERS)**
- **Fitness Benefit**
- **Transportation Services**

**Don't miss out.
Enroll Now!**

1-855-243-3935, TTY: 711

8 a.m. – 8 p.m., 7 days a week

Scan to
learn more!



azblue.com/DualBenefits

Please fill out this card and mail it
back to us (no postage necessary).
An expert team member will contact
you to answer your questions.

Name: _____

Address: _____

City: _____

State: _____

ZIP: _____

Email: _____

Phone: _____

Best time to call me: _____



An Independent Licensee of the Blue Cross Blue Shield Association

**Health
Choice**

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 788 PHOENIX, AZ

POSTAGE WILL BE PAID BY ADDRESSEE

HEALTH CHOICE PATHWAY (HMO D-SNP)
P.O. BOX 52033
PHOENIX AZ 85072-9679



Health Choice Pathway (HMO D-SNP) is a Health Plan with a Medicare contract and a contract with the state Medicaid program. Enrollment in Health Choice Pathway (HMO D-SNP) depends on contract renewal.

Health Choice Pathway is a subsidiary of Blue Cross® Blue Shield® of Arizona (AZ Blue), an independent licensee of the Blue Cross Blue Shield Association.

*To be eligible for this Special Supplemental Benefits for the Chronically Ill (SSBCI) benefit, you must be diagnosed with a chronic condition, such as cardiovascular disorders; chronic conditions that impair vision, hearing (deafness), taste, touch, and smell; overweight, obesity, and metabolic syndrome; chronic and disabling mental health conditions; chronic alcohol use disorder and other substance use disorders; or another qualifying condition. Not all members qualify, as other coverage criteria may also apply. Contact the plan for more information.

Health Choice Pathway (HMO D-SNP) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-800-656-8991**, **TTY: 711**.

Díí baa akó nínízin: Díí saad bee yáníłti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiik'eh, éi ná hólq, koji' hódíłłnih **1-800-656-8991**, **TTY: 711**.

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8220 N. 23rd Avenue
Phoenix, AZ 85021

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Have Medicare
and Medicaid?
**Get more care
and extra benefits
at no cost.**

