

Department of Health Care Services



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XX/XX/XXXX

Important Final Reminder

The Way You Get Your Medi-Cal Benefits is Changing on [MM/DD/YYYY]

You **must** enroll in a Medi-Cal managed care health plan to receive Medi-Cal services. The reason for this change is to help bring your Medi-Cal services together in one place.

This is the FINAL reminder letter telling you about your options for choosing a Medi-Cal plan.

Unless you choose a different Medi-Cal plan, your coverage in [Health Plan Name]

will become effective on MM/DD/YYYY. We chose this plan for you based on your past services and health care needs, but you still have the right to choose a different Medi-Cal plan.

If you have Medicare, this change does not affect your Medicare coverage or your ability to see your Medicare doctor.

How will this change affect me?

- Your Medi-Cal plan will coordinate all of your Medi-Cal covered services, including Long Term Services and Supports.
- Your Medicare services and providers will NOT change.
- Your Medi-Cal services and benefits will NOT change.
- Your Medi-Cal eligibility does NOT change and it will not cost you extra.

If you have Medi-Cal only, you should check with your Medi-Cal plan to determine if your providers work with the plan.

What are Medi-Cal Long Term Services and Supports?

- In-Home Supportive Services (IHSS) are personal care services for people who
 need help to live safely in their homes. If you currently get IHSS, you do not have
 to change your IHSS providers and you can still hire, fire, and manage your
 providers.
- Community-Based Adult Services (CBAS) is daytime health care at centers that provide nursing, therapy, activities and meals for people with certain chronic health conditions.
- Multipurpose Senior Services Program (MSSP) provides social and health care coordination services for people age 65 and older. If you currently get MSSP, your Medi-Cal plan will work with your MSSP provider to better coordinate your care and you do not have to change your MSSP provider.
- **Nursing home care:** If you get care in a nursing home, your health plan will work with your doctor and nursing home to better coordinate your care. If you are currently in a nursing home, you do not have to change your nursing home.

If you do not get these services now, your Medi-Cal plan can help you get them in the future, if you need them.

What are my choices?

- Stay in the Medi-Cal plan we have selected for you. If you decide that [Health Plan Name] is right for you, you do not need to do anything. You will be enrolled in a Medi-Cal health plan starting MM/DD/YYYY.
- **Select a different Medi-Cal plan.** You may review the plans available in your county to see if one of those is better for you. We sent you a choice packet that gives you information about the plans you can choose.
 - You can contact Health Care Options at 1-844-580-7272 to make a choice, or fill out, sign, and return the Medi-Cal Health Plan Choice Form by MM/DD/YYYY. If you need another copy of the choice packet, call Health Care Options.

For help or more information

If you have Medicare, please call the **California Health Insurance Counseling & Advocacy Program (HICAP) at 1-800-434-0222 (TTY: 711).**

If you have questions about Medicare, please call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

If you want to select a different Medi-Cal plan and/or get this letter in another language or alternate format – like large print, audio, or Braille, please call Health Care Options Monday-Friday 8am-5pm at 1-844-580-7272 or TTY: 1-800-430-7077.