

<Date>

<Name>

<Address>

<City>, <State> <ZIP>

## Changes to your 2023 health plan

Dear <Member Name>,

In October, we sent you a letter to tell you that all Cal MediConnect plans, including <CMC plan name>, are changing on January 1, 2023. A Medicare Medi-Cal Plan (“Medi-Medi” plan) called <EAE D-SNP name> will provide your Medicare benefits. It will work with its matching Medi-Cal plan to provide and coordinate your Medicare and Medi-Cal benefits and Medicare prescription drugs under **one** plan.

Starting January 1, 2023, you will be in <EAE D-SNP name>, unless you make another choice.

The <EAE D-SNP plan-specific branding name> is very similar to your current Cal MediConnect plan. With <EAE D-SNP plan-specific branding name>, you will still have a <EAE D-SNP plan-specific branding name> <care coordinator or similar plan-specific term> to get help for your needs. **You will not have a gap in your coverage.**

<plans must choose one of the three following options:>

[*Insert if applicable:* <You can keep your primary care physician (PCP) for your health care needs with <EAE D-SNP name>].

[*Insert if applicable:* Your primary care physician (PCP), [insert name of PCP], does not work with [EAE D-SNP name]. You may be able to keep your PCP for up to 12 months. [EAE D-SNP name] can help you find a new PCP you like if your PCP doesn’t join your new plan’s network. To get help, call <EAE D-SNP Customer Service Number>.]

[*Insert if applicable:* To ask if your PCP or other providers are in our network, call your <CMC plan name> <care coordinator or similar plan-specific term>.]

If you have questions about this letter, call us at <D-SNP/MCP phone number> (TTY: <EAE D-SNP/MCP TTY number>). We can help in your language.

To learn more, read the *Notice of Additional Information*. It came with this letter.

Read below to learn more about <EAE D-SNP> and other choices for you.

### What services will my Medicare Medi-Cal Plan cover?

Your Medicare Medi-Cal Plan will cover many of the Medicare and Medi-Cal benefits you get now, including:

- All Medicare covered services, including doctors, hospitals, labs, and x-rays
- You will have access to a provider network that includes many of the same providers as your current plan
- Prescription drugs covered by Medicare
- Coordination of services you get now or that you might need
- Transportation to medical services
- Nursing home care
- Community-Based Adult Services (CBAS)
- Medical supplies
- Durable Medical Equipment (DME)
- <Plans insert supplemental benefits and/or Community Supports>

## How will this change affect me?

- You won't pay a premium or pay for doctor visits and other medical care if your provider works with our health plan. To learn more about your prescription drug costs, call [EAE D-SNP name and number].
- Every health plan has a network of providers, like doctors and hospitals, who give you health care services. If your providers are not in the plan's network, the health plan may work with your provider for as long as 12 months. Your plan can help you find a new provider you like if your provider does not join your health plan's network.

## What is not changing?

- In Home Supportive Services (IHSS) provided through the IHSS Program
- Specialty mental health or substance use disorder services you access through the Medi-Cal Specialty Mental Health Services (SMHS) program in your county

## How do <EAE D-SNP name> and Medi-Cal work together?

<EAE D-SNP name> is a Medicare Medi-Cal plan. <EAE D-SNP name> will provide your Medicare benefits and work with its matching Medi-Cal plan to provide and coordinate your Medi-Cal benefits under **one** <EAE D-SNP name> plan.

A Medicare Medi-Cal Plan coordinates care for people who have **both** Medicare and Medi-Cal. The Medicare Medi-Cal Plan offers a network of providers and pharmacies to provide your Medicare and Medi-Cal services and Medicare prescription drugs under **one** [EAE D-SNP name] plan.

The Medicare Medi-Cal Plan gives the same services you get now from <CMC Plan Name name>. You will still have a <EAE D-SNP name> <care coordinator or care team or other D-SNP-specific term> who will help you get all the services you need.

## What do I have to do to join <EAE D-SNP>?

You do not have to do anything. You will be automatically enrolled. Your new coverage will start January 1, 2023.

## Do I have choices for coverage?

Yes. You have five [Orange County: replace with "four"] options for coverage. If you want to talk to someone about your options, read the list of phone numbers in the chart at the end of this letter. Here are your five [Orange County: replace with "four"] options:

### **Option 1: Keep [EAE D-SNP name].**

You will be automatically enrolled in the Medicare Medi-Cal Plan offered by [EAE D-SNP name]. This Medicare Medi-Cal Plan will start January 1, 2023. You do not need to do anything.

The Medicare Medi-Cal Plan:

- Will cover all of your current Medicare and many Medi-Cal benefits, such as prescription drugs
- May offer extra coverage such as vision, hearing, or dental
- Has a network of doctors and other providers to give you care

### **[remove for Orange County and renumber subsequent options] Option 2: Join a different health plan that combines your Medicare and Medi-Cal coverage.**

Choose from the list of plans in your county that combine Medicare and Medi-Cal. The list came with this letter. You can call other plans for more information and can call the

plan you choose directly to enroll. These plans work directly with Health Plan of San Mateo for the coordination of your Medi-Cal benefits and enrollment.

The Medicare Medi-Cal Plans on the list:

- Will cover all of your Medicare, including Medicare Part D, and many Medi-Cal benefits, such as prescription drugs
- May offer extra coverage such as vision, hearing, or dental
- Has a network of doctors and other providers you can see to receive care

To learn more about Medicare Medi-Cal Plans in your county, call 1-800-MEDICARE (1-800-633-4227) (TTY: 1-877-486-2048), 24 hours a day, 7 days a week and ask about dual eligible special needs plans (D-SNPs). Or go to [www.Medicare.gov](http://www.Medicare.gov).

### **Option 3: Join a Medicare Advantage health plan.**

Medicare Advantage plans:

- Cover all services that Original Medicare covers
- May offer extra coverage such as vision, hearing, or dental
- May **not** coordinate with your Medi-Cal plan.

**Remember**, if you decide to join a Medicare Advantage plan:

- Your Medi-Cal plan may change.
- If the Medicare Advantage plan doesn't also offer a Medi-Cal plan, you can enroll in any Medi-Cal plan in your county.
- If the Medicare Advantage plan has a matching Medi-Cal plan in your county, you will be enrolled in that Medi-Cal plan.

To join a Medicare Advantage plan, call 1-800-MEDICARE (1-800-633-4227) (TTY: 1-877-486-2048), 24 hours a day, 7 days a week. Or go to [www.Medicare.gov](http://www.Medicare.gov).

### **Option 4: You can change to Original Medicare (sometimes called Fee-For-Service).**

- The federal government manages Original Medicare.
- If you choose Original Medicare and don't choose a Part D prescription drug plan by December 31, Medicare will enroll you in a separate Part D prescription drug plan. They will send you a letter telling you the name of your new drug plan.
- If you choose Original Medicare, your Medi-Cal plan will be <CMC Plan's MCP name>.

To change to Original Medicare, call 1-800-MEDICARE (1-800-633-4227) (TTY: 1-877-486-2048), 24 hours a day, 7 days a week or go to [www.Medicare.gov](http://www.Medicare.gov).

### **Option 5: If you qualify, you can join the Program of All-Inclusive Care for the Elderly (PACE).**

PACE will cover your Medicare and Medi-Cal benefits, including prescription drugs. It will coordinate your healthcare, homecare, transportation and dental care. PACE also offers social centers and senior gyms. If you choose to join a PACE plan, your Medi-Cal Plan and Medicare Advantage Plan will change, and your providers may change.

To find out if PACE is available in your county or to learn more about PACE, go to [www.CalPACE.org](http://www.CalPACE.org).

### **Questions?**

Find contact information for your questions on the next page.

<Plans may include language thanking the enrollee for their membership and/or apologizing for any inconvenience.>

### Who can I contact with questions?

If you want to:	Contact:
Ask questions about your Medicare and Medi-Cal services provided by <CMC plan name>	<ul style="list-style-type: none"> <li>▪ Call &lt;CMC name&gt; Member Services at &lt;toll-free number&gt;, &lt;days and hours of operation&gt;</li> <li>▪ Call &lt;toll-free number&gt;, (TTY: &lt;number&gt;)</li> <li>▪ Go to &lt;web address&gt;</li> </ul>
Ask if your doctors are in the new health plan's network	<ul style="list-style-type: none"> <li>▪ Call &lt;EAE D-SNP name&gt; Member Services at &lt;toll-free number&gt;, &lt;days and hours of operation&gt;</li> <li>▪ Call &lt;toll-free number&gt; (TTY: &lt;number&gt;)</li> <li>▪ Go to &lt;web address&gt;</li> </ul>
Ask a question about Medicare	<ul style="list-style-type: none"> <li>▪ Call 1-800-MEDICARE (1-800-633-4227) (TTY: &lt;number&gt;)</li> </ul>
Talk to a health insurance counselor for free about these changes and your options	<ul style="list-style-type: none"> <li>▪ Call the California Health Insurance Counseling &amp; Advocacy Program (HICAP) at 1-800-434-0222</li> <li>▪ TTY: 711</li> <li>▪ Call the Medicare Medi-Cal Ombudsman Program (also known as Cal MediConnect Ombudsman) at 1-855-501-3077. The Cal MediConnect plan is another name for your current plan. The Ombudsman helps with complaints, grievances, and concerns for free. They are not part of your health plan.</li> </ul>
Ask a question about Medi-Cal or your Medi-Cal plan choices	<ul style="list-style-type: none"> <li>▪ [For non-COHS plans only: non-COHS plan name, phone number, and TTY number]</li> <li>▪ [COHS plan name, phone number, and TTY number]</li> <li>▪ Call the Medi-Cal Helpline at 1-800-541-5555, Monday through Friday, except national holidays, 8:00 a.m. to 5:00 p.m.</li> <li>▪ Call the Department of Health Care Services (DHCS), Office of the Ombudsman at 1-888-452-8609 (TTY: 711) Monday – Friday, except state holidays, 8:00 a.m. to 5:00 p.m.</li> </ul>

If you want to:	Contact:
Get help with health plan problems and complaints	<ul style="list-style-type: none"> <li>▪ Call &lt;CMC name&gt; Member Services at &lt;toll-free number&gt;, &lt;days and hours of operation&gt;</li> <li>▪ Call &lt;toll-free number&gt; (TTY: &lt;number&gt;)</li> <li>▪ Go to &lt;web address&gt;</li> <li>▪ Call the Medicare Medi-Cal Ombudsman Program (also known as Cal MediConnect Ombudsman) at 1-855-501-3077. The Cal MediConnect plan is another name for your plan</li> <li>▪ Call Health Consumer Alliance a.t 1-888-804-3536. Or go to <a href="http://www.healthconsumer.org">www.healthconsumer.org</a>.</li> </ul>
Learn more about my Medicare and Medi-Cal plan options.	<ul style="list-style-type: none"> <li>▪ A list of matching Medicare Medi-Cal Plans available in your county is included with this letter.</li> <li>▪ Visit <a href="http://Medicare.gov">Medicare.gov</a> or refer to your Medicare &amp; You handbook for a list of all Medicare health and prescription drug plans in your area.</li> <li>▪ Go to <a href="http://MyCareMyChoice.org">MyCareMyChoice.org</a> to compare different Medicare options. It's a tool just for people with Medicare and Medi-Cal.</li> </ul>

You can get this information for free in other formats, such as large print, braille, or audio. Call 1-877-555-5555. The call is free.

ATTENTION: If you speak a language other than English, language assistance services, free of charge, are available to you. Call 1-800-555-5555 (TTY: 1-877-555-5555).