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XX/XX/XXXX



JOHN SAMPLE
1234 SAMPLE STREET
ADDRESS LINE 2
ANYTOWN CA 90000

Important news about your Medi-Cal coverage

Dear [Member Name],

You got this letter because you are a current or former foster child or youth and are in Fee-For-Service (FFS) Medi-Cal (Regular Medi-Cal). Foster children and youth in your county must be enrolled in a Medi-Cal health plan starting **January 1, 2025**. FFS Medi-Cal will not be available in your county starting January 1, 2025.

Your Medi-Cal eligibility and benefits will not change

This change does **not** affect your Medi-Cal eligibility and benefits. You do not need to call your eligibility worker unless you need to update personal information. If you have changes to report, contact your local Medi-Cal County office. You can find a list of county offices at www.dhcs.ca.gov/services/medi-cal/Pages/CountyOffices.aspx.

You will be automatically enrolled in this Medi-Cal health plan on January 1, 2025:

[MCP Name]

[xxx-xxx-xxxx]

You can keep your Medi-Cal primary care provider

You do not need to change your Medi-Cal primary care provider (PCP). Your Medi-Cal PCP is in your new Medi-Cal health plan network. They will work with that Medi-Cal health plan to give you care.

Primary Care Provider (PCP): [Provider Name]

To find out if your other providers work with your new Medi-Cal health plan, call your new health plan or Medi-Cal Health Care Options (HCO) at 1-800-430-4263 (TTY: 1-800-430-7077). If any of your providers do not work with your new Medi-Cal health plan, you can ask to keep them while you look for a new one.

You may be able to keep your Medi-Cal provider

If your provider works with your new Medi-Cal health plan, you can keep your Medi-Cal provider.

If your doctor does **not** work with your new Medi-Cal health plan, you might be able to keep your provider and other providers for up to 12 months if you ask your Medi-Cal health plan for "continuity of care." If you want continuity of care, call your Medi-Cal health plan's member services phone number once you join your Medi-Cal health plan.

To learn more about your Medi-Cal health plan choices and find providers who work with Medi-Cal health plans, call Medi-Cal Health Care Options (HCO) Monday – Friday, 8 a.m. to 6 p.m. at 1-800-430-4263 (TTY: 1-800-430-7077). Or go to **www.healthcareoptions.dhcs.ca.gov**.

American Indian and Alaska Native Members

If you are an American Indian or Alaska Native member enrolled in a Medi-Cal health plan, you may get services from an Indian Health Care Provider of your choice. If you have questions about your benefits, call your Medi-Cal health plan. Ask to speak to your Tribal Liaison. You can also call the Medi-Cal Ombudsman at 1-888-452-8609 for help.

Your Medicare benefits will not change

If you are enrolled in Medicare, your Medicare benefits and providers will not change when your Medi-Cal health plan changes, unless you change your Medicare Advantage plan. Your Medicare providers:

- Do not have to be in your Medi-Cal health plan network to keep caring for you.
- Cannot charge you co-pays, co-insurance, and deductibles if you have Medi-Cal.
- Should bill your Medi-Cal health plan for co-pays, co-insurance, and deductibles even if they are not in the Medi-Cal network.

You will keep getting these benefits the same way you get them today:

- Medicare
- Home and community-based services
- In-home supportive services (IHSS)
- Pharmacy services
- Substance use disorder (SUD) treatment services
- Specialty mental health services
- Dental services
- Regional Center services

Learn more

Read more about this change in the *Notice of Additional Information About Your Rights and Benefits (NOAI)* at www.dhcs.ca.gov/services/Pages/Mandatory-Enrollment-for-foster-care-Children-and-youth-in-single-plan-counties-2025.aspx. To read the NOAI, you can also use your smartphone to scan the Quick Response (QR) code at the bottom of this letter. The NOAI has more information about Medi-Cal health plan enrollment, your Medi-Cal health plan choices, Medicare and Medi-Cal services, continuity of care, and resources on who to call for questions.

If you want a printed NOAI mailed to you, call Medi-Cal HCO Monday – Friday, 8 a.m. to 6 p.m. at 1-800-430-4263 (TTY: 1-800-430-7077). If you want this notice in another language or format like large print, audio, or Braille, call Medi-Cal HCO Monday – Friday, 8 a.m. to 6 p.m. at 1-800-430-4263 (TTY: 1-800-430-7077).

How to Contact your Medi-Cal Managed Care Plan

To contact: <Insert Kaiser/COHS/Single Plan Name>

Call member services at: <Insert Member Services number here and TTY>

Or visit them online at: <Insert web address>

Your Medi-Cal health plan will send you a welcome packet. It explains how to choose a provider and how to ask to keep your providers if they are not in your new Medi-Cal health plan network (group). It also tells you about the benefits your new Medi-Cal health plan offers.

Questions

- To learn more about choices for health plans and providers (doctors or clinics), call Medi-Cal HCO Monday – Friday, 8 a.m. to 6 p.m. at 1-800-430-4263 (TTY: 1-800-430-7077). The call is free. Or go to Medi-Cal HCO at www.healthcareoptions.dhcs.ca.gov.
- If you have complaints or problems with Medi-Cal, call the Medi-Cal Ombudsman Office Monday – Friday, 8 a.m. to 5 p.m. at 1-888-452-8609 (TTY: 711 for California State Relay). The call is free. Or email them at MMCDOmbudsmanOffice@dhcs.ca.gov. They help people with Medi-Cal use their benefits and know their rights and responsibilities.
- If you have questions about Medi-Cal, call the Medi-Cal Helpline Monday – Friday, 8 a.m. to 5 p.m. at 1-800-541-5555. The call is free. They will help you learn more about what services you can get through Medi-Cal.

Thank you,

Medi-Cal

Department of Health Care Services

