

Ohio Department of Medicaid
Ohio Medicaid Consumer Hotline
505 South High Street
Columbus, OH 43215

If you need assistance with this form, contact us.

Ohio Medicaid Consumer Hotline: (800) 324-8680
Monday - Friday: 7a.m. to 8p.m. and Saturday: 8a.m to 5p.m.
Aquí se habla español.

<http://www.ohiomh.com>

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06/09/2014

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MyCare Ohio - *Connecting Medicaid & Medicare*
Important information about your Medicaid and Medicare benefits

MYCARE OHIO BENEFITS CHANGE NOTICE

You are receiving this letter because our records show that you receive benefits from both Medicaid **and** Medicare. Your Medicaid benefits are currently being provided by AETNA BETTER HEALTH INC MyCare Ohio plan. However, your health care is changing.

To continue to improve the way your benefits work together, we are notifying you in advance that, AETNA BETTER HEALTH INC MyCare Ohio plan will begin providing your Medicare benefits as well as your Medicaid benefits. Unless you make a different choice, this enrollment will take effect on January 1, 2015. There are other MyCare Ohio plans available in your area. If you would like to join one of them for January 1, 2015, the Ohio Medicaid Consumer Hotline number listed below can provide information on the plans available in your area.

If you do not want to receive your Medicare benefits from AETNA BETTER HEALTH INC MyCare Ohio plan, you can keep your Medicare the way it is now and stay in MyCare Ohio plan for your Medicaid benefits. If this is the choice you prefer, please call the Ohio Medicaid Consumer Hotline at **(800) 324-8680** or visit www.ohiomh.com. Representatives are available from 7 a.m. to 8 p.m. Monday through Friday and 8 a.m. to 5 p.m., Saturday. They will help you with health plan options available to you. If you have questions about Medicare, you can call 1-800-MEDICARE (1-800-633-4227) 24 hours a day, 7 days a week or visit <http://www.medicare.gov>. TTY users should call 1-877-486-2048.

If you want to be enrolled and receive both your Medicare and Medicaid benefits from AETNA BETTER HEALTH INC MyCare Ohio plan, there is nothing more you need to do. This change will take effect on January 1, 2015. However, you may call a customer service representative at the Medicaid Hotline or your MyCare Ohio plan and they will answer any questions you have and provide you with additional information.

We hope you will choose to get both your Medicare and Medicaid benefits from AETNA BETTER HEALTH INC Plan. Choosing this option will make coordination between Medicare and Medicaid benefits easier for you and your health care providers and will improve the quality and coordination of the services you require to maintain and improve your health.

Do you need help?

If you need help reading or understanding this notice, please call the Ohio Medicaid Consumer Hotline at **(800) 324-8680**, Monday through Friday from 7:00 am to 8:00 pm and Saturday from 8:00 am to 5:00 pm. TTY users should call Ohio Relay Service at 7-1-1. You can also visit www.ohiomh.com. They can provide interpreters, explain the contents of this notice, as well as have it printed in certain other languages, or provide it to you in other ways.

Because you receive your Medicaid benefits from a MyCare Ohio plan, you are familiar with how the program works. The information provided below is a reminder of how the program functions and what benefits it provides.

MyCare Ohio is a managed care program that will coordinate physical, behavioral, and long-term care services for individuals age 18 and older, who are eligible for both Medicaid and Medicare. This includes people with disabilities, older adults, and individuals who receive behavioral health services.

Here are some of the benefits you receive **at no additional cost** from your **MyCare Ohio** plan:

- You will continue to have access to a **Nurse Advice line** available **24 hours a day, 7 days a week**, which will offer immediate assistance with your health care questions and concerns.
- You will continue to have a **care team**, which will include you, your family, your doctor(s), your MyCare Ohio health plan and anyone else you choose to help you make decisions about your health care.

In addition, if you choose to have a MyCare Ohio plan provide your Medicaid **and** Medicare benefits:

- The MyCare Ohio plan will serve as your **single point of contact** for all of your Medicare and Medicaid services.
- You will have a **single ID card** for all of your Medicare and Medicaid Services.

Will I have any cost after I enroll in a MyCare Ohio plan for my Medicare benefits?

There is no additional premium or deductible with MyCare Ohio.

You may have a copayment for some outpatient prescription drugs.

For answers to any questions you have, call the Ohio Medicaid Consumer Hotline at **(800) 324-8680** Monday through Friday from 7:00 am to 8:00 pm and Saturday from 8:00 am to 5:00 pm. TTY users should call Ohio Relay Service at 7-1-1. You can also visit www.ohiomh.com. You may also contact your MyCare Ohio plan directly if you have questions.

If you receive **both** Medicaid and Medicare services from your plan, you can change your plan or you can keep your Medicare the way it is now and stay in your MyCare Ohio plan for your Medicaid benefits.

If you receive **only** Medicaid benefits through your plan, you may **only** make a change within the first three months (90 days) after your initial enrollment, during the annual open enrollment period, or at other times for just cause.

As a member of a MyCare Ohio plan, you have the option to:

- Go to certain doctors, clinics, or other health care professionals without getting a referral from your provider as explained in your member handbook.
- Ask your plan for help getting health care, finding a doctor, making an appointment, getting a referral, or arranging transportation.
- Go to doctors, clinics, or other health care professionals who do not work with the plan for emergency care.
- Change your primary care doctor by calling your plan.
- Apply for the Non-Emergency Transportation (NET) program at your local county department of job and family services for transportation to Medicaid-covered services.

How will my MyCare Ohio plan provide my health care?

AETNA BETTER HEALTH INC Plan will send you a new member handbook that will provide the following information about how to get Medicare and Medicaid services. You may also call the MyCare Ohio plan's member services toll-free number, or go to their website for answers to your questions such as:

- What health care services are available?
- How do you get health care services?
- When is prior authorization required?
- How do you get health care in an emergency?
- When can you go to a doctor, hospital, or other provider that does not work with your plan?
- How do you get a referral for specialty care or other services not provided by your primary doctor?
- How do you get post emergency health care services?
- How can you get information about benefits from doctors, clinics, hospitals, or other health care professionals who do not work with your plan?
- Where do I get information about a living will or a health care power of attorney?

What are the responsibilities of the MyCare Ohio plan I choose?

Your plan must:

- Provide you with all the same medically necessary health care Medicaid and Medicare covers.
- Give you a member handbook that explains how to get health care and the plan's guidelines.
- Give you an identification card to use every time you get health care. You will not get a Medicaid card after you are a plan member.
- Give you a directory of all doctors, specialists, hospitals, pharmacies and other health care professionals who work with the plan. You can get this information on your plan's website.
- Have a toll-free member services line to help you and answer your questions.
- Have a toll-free medical advice phone line that is open 24 hours a day, seven days a week.
- Have free translation services if you do not speak English.

- Allow you to change your primary care doctor within the plan's network.
- Allow you file a complaint if you are unhappy with your health care services.
- Help coordinate your care if you have special health care needs.
- Work with doctors, specialists, hospitals, and other health care professionals in your area and make sure that you can get quality care when you need it.
- Have a contract with Medicare and the Ohio Department of Medicaid to provide health care to you.
- Provide annual physical exams.
- Provide medically necessary transportation.
- Provide non-emergency transportation if you must travel 30 miles or more to see MyCare Ohio plan-authorized providers and you ask the plan to provide transportation.

What are my responsibilities as a member of a MyCare Ohio plan?

As a member of your plan, you must:

- Choose one of the plan's providers as your primary care doctor and agree to see your primary care doctor or the providers he or she refers you to.
- Follow all the rules in your plan's member handbook. Read it as soon as you get it. Keep it in a safe place.
- Receive your health care through the doctors, specialists, hospitals, pharmacies and other health care professionals that are in your plan's provider panel (network).
- Tell your county caseworker and your plan right away about address changes so they can send you important information about your health care and your benefits.

Where can I get more information?

Call the Ohio Medicaid Consumer Hotline toll-free at 800 324-8680, Monday through Friday from 7:00 am to 8:00 pm and Saturday from 8:00 am to 5:00 pm. TTY users should call Ohio Relay Service at 7-1-1 or visit www.ohiomh.com. If you have questions about Medicare, call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week or visit <http://www.medicare.gov>. TTY users should call 1-877-486-2048.

MyCare Ohio and Medicare Part D

When you join a MyCare Ohio plan, you will get health and prescription drug benefits from your new plan starting January 1, 2015. Your current Medicare health or Part D prescription drug plan will send you a letter telling you that beginning January 1, 2015, you will no longer be enrolled, and your prescription drug plan will not continue to cover your prescription drugs or other services due to your enrollment in MyCare Ohio.

Here is some important information about changes to your drug and health coverage when you join a MyCare Ohio plan.

- Unless you make a different choice, beginning **January 1, 2015**, you will receive all of your Medicaid and Medicare benefits, **including Medicare Part D**, from the MyCare Ohio plan.
- Your MyCare Ohio plan will become your new Medicare Part D plan, which means your last day of coverage in your current health or prescription drug plan will be December 31, 2014. You cannot keep your current Part D plan and be in a MyCare Ohio plan at the same time.
- You will continue to get your prescription drug benefits from your current plan through December 31, 2014. Your new prescription coverage from the MyCare Ohio plan will start on January 1, 2015. There will be no gap in your prescription drug coverage.
- If you do not want a MyCare Ohio plan to provide your prescription benefits, you may stay in your current prescription drug plan. You just need to let the Ohio Medicaid Consumer Hotline know your decision before January 1, 2015. The MyCare Ohio plan will continue to provide your Medicaid benefits.