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XX/XX/XXXX

# Final Notice: Important Reminder on Your Medicare and Medi-Cal

You are getting this letter because you have **BOTH** Medicare and Medi-Cal. The way you get your health care is changing. This is the third and final letter telling you about these changes. Please read this notice carefully.

Unless you choose a different option, 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 to stay in regular Medicare or to select a different Medi-Cal health plan.

## How will this change affect me?

Enrolling in a Cal MediConnect plan will:

- Keep your Medicare or Medi-Cal benefits without any extra costs.
- Combine your Medicare and Medi-Cal benefits into a single plan.
- Help ensure that all of your doctors, specialists, and other providers work together to get you the care you need.
- Give you additional transportation and vision benefits.

#### How does a Cal MediConnect plan help me?

The change is happening so your Medicare and Medi-Cal benefits can work better together, and work better for you.

Your doctors, pharmacists, Long Term Services and Supports caregivers, and other providers will work together to care for you. The Cal MediConnect plan will help them coordinate the services that you need. This is called "care coordination."

### What are my plan choices?

You have several choices. You can contact Health Care Options at 1-844-580-7272 to make a choice to:

- Stay in the Cal MediConnect plan we have selected for you. If you decide that this plan is right for you, you do not need to do anything.
- Select a different Cal MediConnect plan in your county. You may review the plans available in your county to see if one of those is better for you.
- Choose the Program of All-Inclusive Care for the Elderly (PACE). You may be eligible to join a PACE plan.
- **Keep your Medicare the way it is now.** Even if you choose to stay in regular Medicare, you will still be required to select a Medi-Cal managed care plan to receive your Medi-Cal services.

Contact Health Care Options by MM/DD/YYYY to make a choice.

#### For help or more information

If you want to talk to a health insurance counselor about these changes and your choices, please call the **California Health Insurance Counseling & Advocacy Program (HICAP) at 1-800-434-0222.** 

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 Cal MediConnect plan, stay in regular Medicare, 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.

If you need further help, please call the **Cal MediConnect Ombudsman** at 1-855-501-3077. This number will be operational starting 4/1/2014.