

KEEP THIS NOTICE FOR YOUR RECORDS

<DATE>

<FNAME> <LNAME>
<ADDRESS1> <ADDRESS2>
<CITY>, <STATE> <ZIPCODE>

IMPORTANT: Your health and drug plan is changing.

Dear <FNAME>:

We are writing to let you know about important changes to your medical and prescription drug coverage. As your Medicaid plan, we'd like to thank you for your membership in Optima Health Community Care, offered by Optima Health Plan.

Because you will be eligible for Medicare soon, Optima Health Plan will **automatically enroll you into Optima Community Complete (HMO D-SNP) for your Medicare benefits. This coverage will start on <insert effective date = Part A and B effective date>, the same day your Medicare benefits start.**

You currently have Commonwealth Coordinated Care Plus (Medicaid). Optima Community Complete (HMO D-SNP) offered by Optima Health Plan, helps your Medicare and Commonwealth Coordinated Care Plus benefits work together.

If you don't want Optima Community Complete (HMO D-SNP) to provide your Medicare coverage, you can choose to get your Medicare coverage through another plan or through Original Medicare. **If you don't make another choice by <insert date before effective date>, you'll be enrolled with Optima Community Complete (HMO D-SNP) starting <insert effective date>.**

Your Commonwealth Coordinated Care Plus coverage won't change due to enrollment in Optima Community Complete (HMO D-SNP). You will continue to get your CCC Plus coverage through Optima Health Community Care.

You don't have to do anything unless you don't want to be automatically enrolled in Optima Community Complete (HMO D-SNP). If you don't make another choice by <insert day before effective date>, your new coverage will start on <insert effective date>.

For more information about your Optima Community Complete (HMO D-SNP) and the benefits and services your new plan covers, or **to find out if you can still see your current providers in your new plan and whether your new plan covers all of your prescription drugs**, call

Optima Community Complete (HMO D-SNP) at 1-800-927-6048, option 3. TTY users should call 1-800-828-1140 or 711. We are open 8:00 a.m.–5:00 p.m. Monday through Friday.

Frequently Asked Questions

What is Optima Community Complete (HMO D-SNP)?

Optima Community Complete (HMO D-SNP) is a Medicare Advantage health plan that includes prescription drug coverage and other supplemental benefits. Enrolling in Optima Community Complete (HMO D-SNP) will allow us to coordinate all of your Medicare and Commonwealth Coordinated Care Plus benefits, including your hospital, medical, prescription drug, and long term care needs. You will be eligible for Optima Community Complete (HMO D-SNP) as long as you have both Medicare and Commonwealth Coordinated Care Plus coverage and continue to live within the approved plan service area.

How much will I pay for Optima Community Complete (HMO D-SNP)?

Like with Optima Health Community Care, you won't have any monthly premium in Optima Community Complete (HMO D-SNP).

Your costs for prescription drugs in Medicare, including in Optima Community Complete (HMO D-SNP) will be no more than:

\$0/\$1.30/ \$3.60 for each prescription of generic/preferred multi-source drugs and
• \$0/\$3.90/ \$8.95 for each prescription for all other drugs. This is a little more than what you pay now under CCC Plus, which is \$0.

• Like with Optima Health Community Care, you won't have any costs for doctor or hospital visits with Optima Community Complete (HMO D-SNP).

How do I get Medicare services through Optima Community Complete (HMO D-SNP)?

You can continue to see your current Primary Care Physician (PCP) for your health care needs with Optima Community Complete (HMO D-SNP).

Beginning on the date your Optima Community Complete (HMO D-SNP) coverage begins, you must get all of your Medicare health care services from Optima Community Complete (HMO D-SNP), with the exception of emergency or urgently needed services or out-of-area dialysis services.

Services authorized by Optima Community Complete (HMO D-SNP) and other services contained in the Evidence of Coverage document (also known as a member contract or subscriber agreement) will be covered. If you go to a provider not in Optima Community Complete (HMO D-SNP) without authorization, **neither Medicare nor Optima Community Complete (HMO D-SNP) will pay for Medicare-covered services.**

Once you are a member of Optima Community Complete (HMO D-SNP), you have the right to appeal plan decisions about payment or services if you disagree. Read the Evidence of

Coverage from Optima Community Complete (HMO D-SNP) when you get it to know which plan rules you must follow to get coverage with this plan.

What if Medicaid pays for my prescription drugs now?

Medicaid won't cover drugs after <effective date for Medicare coverage.> **Now you must get drug coverage from Medicare.** To continue to have prescription drug coverage, you must be enrolled in a Medicare prescription drug plan. By enrolling in Optima Community Complete (HMO D-SNP), you will get this coverage.

Do I have to join Optima Community Complete (HMO D-SNP)?

No. You can decide to join a different Medicare plan or Original Medicare. If you do not want to get your Medicare benefits through Optima Community Complete (HMO D-SNP), please call us at 1-800-927-6048, option 3. by <insert date before effective date>. TTY users should call 1-800-828-1140 or 711. Our hours of operation are 8:00 a.m.–5:00 p.m. Monday through Friday.

You can also return the enclosed opt out form to: Optima Health, Attention: Medicare Enrollment Department, 4417 Corporation Lane, Virginia Beach, VA 23462.

If you choose not to enroll in Optima Community Complete (HMO D-SNP) at this time, you will still keep your Optima Health Community Care membership.

Do I have other choices for how I get my Medicare?

Yes. If you don't want to be enrolled in Optima Community Complete (HMO D-SNP), you have other choices in how you get your Medicare coverage, including:

Option 1: You can join another Medicare health plan, sometimes called a Medicare Advantage plan. You will want to check whether your providers and prescription drugs are covered by the plan.

A Medicare health plan is offered by a private company that contracts with Medicare to provide benefits. Medicare health plans cover all services that Original Medicare covers and most also include your prescription drug coverage. They may also offer extra coverage such as vision, hearing, or dental services.

Make sure the plan you want to join receives your enrollment request before <insert effective date>.

If you don't join another Medicare health plan during this time, you'll only be able to change plans during certain times of the year or in certain situations.

Option 2: You can change to Original Medicare and join a Medicare drug plan.

Original Medicare is coverage managed directly by the Federal government.

- To change to Original Medicare, call Optima Community Complete (HMO D-SNP) at 1-800-927-6048, option 3. Call 1-800-828-1140 or 711 if you use TTY. We are open 8:00 a.m.–5:00 p.m. Monday through Friday. Tell them you don't want to be in Optima Community Complete (HMO D-SNP) (you want to “opt out”).
- If you change to Original Medicare, you need to enroll in a separate Medicare prescription drug plan. You should pick a plan that covers the drugs you take. (See the question below for help in choosing.) If you don't enroll in a drug plan yourself, Medicare will enroll you in a Medicare prescription drug plan and send you a letter telling you the name of your new drug plan.

How can I get help comparing my Medicare plan choices?

It's important to find a plan that covers your doctor visits and prescription drugs.

You can get help comparing your plan choices if you:

- **Call the Virginia Insurance Counseling and Assistance Program (VICAP)** at 1-800-552-3402. Representatives provide free, personalized health insurance counseling. Virginia Insurance Counseling and Assistance Program (VICAP) counselors are not affiliated with any health plan.
- **Visit Medicare.gov.** Medicare's web site has tools that can help you compare plans and answer your questions. **Click** “Find health & drug plans” to compare plans in your area.
- **Call 1-800-MEDICARE (1-800-633-4227).** Tell them you got a letter saying you have Medicaid now and are going to be eligible for Medicare. Say that you want help with your Medicare choices. This toll-free help line is available 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.
- **Refer to your Medicare & You Handbook** for a list of all Medicare health and prescription drug plans in your area. If you want to join one of these plans, you can call the plan to get information about their costs, rules, and coverage.

What's Next?

We will send you a membership card to show when you use health services or go the pharmacy after <effective date.>

Enclosed with this letter is a Summary of Benefits, which will tell you about your additional benefits. We will call you to welcome you and answer any questions you have.

If you have questions about your Commonwealth Coordinated Care Plus coverage, offered by Optima Health Community Care please call 1- 888-512-3171. This includes questions about staying enrolled in Optima Health Community Care for your CCC Plus benefits. Call 1- 844-552-8148 if you use TTY.

If you have any other questions, call Optima Community Complete (HMO D-SNP) at 1-800-927-6048, option 3. Call 1-800-828-1140 or 711 if you use TTY. We are open 8:00 a.m.–5:00 p.m. Monday through Friday.

Keep a copy of this letter for your records.

Sincerely,

<signature>