



MICHIGAN ENROLLS

Questions? Call 1-800-975-7630
TTY 1-888-263-5897

Keep this notice for your records

<LetterDate>

Case Number: <CaseID>



00002

<FullName>
<Line1>
<Line2>
<City>, <State> <Zip>

Dear <BeneFull>:

IMPORTANT: YOU ARE BEING ENROLLED INTO A NEW HEALTH AND DRUG PLAN FOR YOUR MEDICARE AND MEDICAID SERVICES

You are getting this letter because you have both Medicare and Medicaid and the way you get your health care is changing. You will soon be enrolled in a new program called MI Health Link that replaces your current Medicare and Medicaid plans with a combined plan. The new plan includes all the benefits you currently receive under Medicare and Medicaid.

If you do nothing, you will automatically be enrolled in <HealthPlan> on <StartDate>. Enrolling into this MI Health Link health plan will **not** change your Medicare or Medicaid eligibility.

You will receive a plan ID card from <HealthPlan>. Starting <StartDate>, you need to show your new plan ID card when you get services. You must use your new health plan when you need medical services and prescription drugs on or after <StartDate>.

You can choose to not be enrolled in this new plan. **If you do not want to be enrolled, you need to contact us no later than <ResponseDate>.**

How will this change affect me?

- You will have one plan for all your Medicare and Medicaid provider and pharmacy benefits.
- You will not pay a plan premium, deductible or copayment when you get services from a provider or pharmacy in your health plan's provider network.
- You will have your own Care Coordinator who will ask you about your health care needs and choices and will work with you to create a personal care plan based on your goals.
- Your Care Coordinator will help you get what you need, when you need it. This person will answer your questions and make sure that your health care issues get the attention they deserve.
- If assistance is needed to live independently, you will have access to home and community based supports and services that are medically necessary.
- You will have care coordination of physical and behavioral health care benefits.

What should I do now?

You have options:

1. **Enroll in a new MI Health Link health plan - <HealthPlan>.** If you want to be enrolled and receive both your Medicare and Medicaid benefits from <HealthPlan>, there is nothing more you need to do.



2. **Join a different plan that will include your Medicare, Medicaid, and prescription drug benefits.** Call Michigan ENROLLS at toll-free 1-800-975-7630 (TTY: 1-888-263-5897), Monday-Friday from 8 AM - 7 PM before <CutoffDate> and tell them you don't want to be in <HealthPlan> and you want to join a different plan.
3. **Keep your Medicare the way it is now and discuss other Medicaid options.** Call Michigan ENROLLS at toll-free 1-800-975-7630 (TTY: 1-888-263-5897) before <StartDate>. Tell them you do not want to be in <HealthPlan>. They can help you keep your current Medicare and Medicare prescription drug coverage and discuss Medicaid options available to you. You can also call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

Note: Remember, you have the right to join Original Medicare and a Medicare prescription drug plan at any time.

<HealthPlan> and Medicare Part D

You may have received a letter from your current Medicare Part D prescription drug plan telling you that beginning <StartDate>, your prescription drug plan won't cover your prescription drugs. That is because you are being enrolled in a new health care and drug plan. <HealthPlan> will become your new Medicare Part D plan, which means your last day of coverage in your current prescription drug plan will be <EndDate>. You cannot keep your current Part D plan and be in <HealthPlan> at the same time. You will continue to receive your prescription drug benefits from your current plan through <EndDate>. Your new prescription coverage from <HealthPlan> will start on <StartDate>. There will be no gap in your prescription drug coverage.

What if I am not the person this letter is addressed to?

You may have received this letter because you assisted <BeneFull> with completing eligibility paperwork for the Michigan Department of Health and Human Services (MDHHS). If you are not an authorized representative of <BeneFull>, it is your responsibility to provide this letter to <BeneFull> in a timely matter so that he or she can make an enrollment decision. In addition, you should advise <BeneFull> to provide updated information to MDHHS so that they can receive these notices and other information directly.

For help or more information

If you have questions about enrollment or disenrollment, please call Michigan ENROLLS toll-free at 1-800-975-7630. Persons with hearing and speech disabilities may call the TTY number at 1-888-263-5897. The office hours are Monday through Friday 8 AM to 7 PM.

You can also call the Michigan Medicare/Medicaid Assistance Program (MMAP) at 1-800-803-7174 if you have general questions about your Medicare enrollment options. They are open Monday through Friday 8 AM to 5 PM.

If you have questions about Medicare, call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048. You can also visit www.medicare.gov.

Sincerely,
MICHIGAN ENROLLS

If you need this letter in another language or alternate format, like large print, audio, or Braille; or if you need help understanding this letter, please call Michigan ENROLLS at toll free 1-800-975-7630 (TTY: 1-888-263-5897), Monday-Friday from 8am to 7pm.

Si tiene preguntas, favor de llamar a Michigan ENROLLS al 1-800-975-7630.
1-800-975-7630 إذا أحتجت لأى مساعدة يرجى الإتصال على الرقم المجانى

