

Annual Notice of Change

CareMore Cal MediConnect Plan
(Medicare-Medicaid Plan)

Los Angeles County, CA

2018



For more information, visit
duals.caremore.com.

If you have questions, please call CareMore Cal MediConnect Plan
Member Services at **1-888-350-3447 (TTY 711)**,
Monday through Friday from 8 a.m. to 8 p.m. Pacific time.

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CareMore Cal MediConnect Plan (Medicare-Medicaid Plan)
ANNUAL NOTICE OF CHANGES FOR 2018

CareMore Cal MediConnect Plan (Medicare-Medicaid Plan) offered by CareMore Health Plan

Annual Notice of Changes for 2018

You are currently enrolled as a member of CareMore Cal MediConnect Plan. **Next year, there will be some changes to the plan's benefits, coverage, and rules. This *Annual Notice of Changes* tells you about the changes.**



If you have questions, please call CareMore Cal MediConnect Plan at 1-888-350-3447 (TTY 711), Monday through Friday from 8 a.m. to 8 p.m. After-hours messaging is available, 24 hours a day, 7 days a week, including holidays. The call is free. **For more information**, visit duals.caremore.com.

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A. Think about Your Medicare and Medi-Cal Coverage for Next Year

It is important to review your coverage now to make sure it will still meet your needs next year. If it does not meet your needs, you can leave the plan at any time. If you choose to leave CareMore Cal MediConnect Plan, your membership will end on the last day of the month in which your request was made.

If you leave our plan, you will still be in the Medicare and Medi-Cal programs as long as you are eligible.

- You will have a choice about how to get your Medicare benefits (go to page 13 to see your choices).
- You will get your Medi-Cal benefits through a Medi-Cal managed care plan of your choice (go to page 15 for more information).

Resources



If you have questions, please call CareMore Cal MediConnect Plan at 1-888-350-3447 (TTY 711), Monday through Friday from 8 a.m. to 8 p.m. After-hours messaging is available, 24 hours a day, 7 days a week, including holidays. The call is free.
For more information, visit duals.caremore.com.

Additional Resources

- If you speak English, language assistance services, free of charge, are available to you. Call 1-888-350-3447 (TTY: 711), Monday through Friday from 8:00 a.m. to 8:00 p.m. The call is free.

Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-350-3447 (TTY: 711), de lunes a viernes de 8:00 a.m. a 8:00 p.m. Esta llamada es gratuita. Spanish

如果您講中文，將可提供您免費的語言協助服務。請致電 1-888-350-3447 (TTY: 711)，週一至週五上午 8 點至下午 8 點。此為免費電話。 Chinese

Nếu quý vị nói tiếng Việt, chúng tôi có thể cung cấp các dịch vụ hỗ trợ ngôn ngữ miễn phí cho quý vị. Hãy gọi số 1-888-350-3447 (TTY: 711), thứ Hai đến thứ Sáu, từ 8 giờ sáng đến 8 giờ tối. Cuộc gọi này miễn phí. Vietnamese

Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-888-350-3447 (TTY: 711), Lunes hanggang Biyernes mula 8 a.m. hanggang 8 p.m. Libre ang tawag. Tagalog

한국어를 사용하시는 경우, 통역 서비스를 무료로 이용하실 수 있습니다. 1-888-350-3447 (TTY: 711) 월요일부터 금요일까지 오전 8시에서 오후 8시 사이에 통화 가능합니다. 통화는 무료입니다. Korean

Եթե ՚ուր խոսում եք հայերեն, սպա լիզվական աշակցություն ծաայություններն անվար մատչելի են Ձեզ: Չանսահարեք՝ 1-888-350-3447 (TTY: 711), երկուշաբթից ուրբաթ՝ 08:00-20:00: Այս զանգն անվար է: Armenian

توجه: اگر به زبان فارسی گفتگو می کنید، خدمات زبانی بصورت رایگان به شما ارائه می شود. با شماره 1-888-350-3447 (TTY: 711) تماس بگیرید. از دوشنبه تا جمعه 8 صبح تا 8 شب. این تماس رایگان است. Persian (Farsi)

Если вы говорите по-русски, вам доступны бесплатные услуги переводчика. Звоните по тел. 1-888-350-3447 (TTY: 711) с понедельника по пятницу с 08:00 до 20:00. Звонок бесплатный. Russian

日本語を話される場合、無料の言語支援をご利用いただけます。月曜日から金曜日の午前8時から午後8時まで1-888-350-3447 (TTY: 711)へ、お電話にてご連絡ください。通話料は無料です。 Japanese

ا كنت تتحدث اللغة العربية، ستكون خدمات المساعدة اللغوية متوفرة لك مجاناً. اتصل على الرقم 1-888-350-3447 (TTY: 711) من الإثنين إلى الجمعة من الساعة 8:00 صباحاً وحتى الساعة 8:00 مساءً. تكون المكالمات مجانية. Arabic

ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। 1-888-350-3447 (TTY: 711) 'ਤੇ ਫੋਨ ਕਰੋ, ਸੋਮਵਾਰ ਤੋਂ ਸ਼ੁੱਕਰਵਾਰ ਸਵੇਰੇ 8 ਵਜੇ ਤੋਂ ਰਾਤ 8 ਵਜੇ ਤੱਕ। ਇਹ ਕਾਲ ਮੁਫਤ ਹੈ। Punjabi



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បើលោកអ្នកនិយាយភាសាខ្មែរ សេវាកម្មជំនួយផ្នែកភាសាមានផ្តល់ជូនលោកអ្នកដោយឥតគិតថ្លៃ។ សូមហៅទូរស័ព្ទមកលេខ 1-888-350-3447 (TTY: 711) ថ្ងៃចន្ទដល់ថ្ងៃសុក្រចាប់ពីម៉ោង 8:00 ព្រឹកដល់ម៉ោង 8:00 យប់។ ការហៅទូរស័ព្ទនេះគឺឥតគិតថ្លៃ។

Cambodian

Yog koj hais lus Hmoob, muaj kev pab txhais lus pub dawb rau koj. Hu rau 1-888-350-3447 (TTY: 711), Txij hnuv Monday txog hnuv Friday thaum 8:00 teev sawv ntxov txog 8:00 teev tsaus ntuj. Tus xov tooj no yog hu dawb xwb.

Hmong

यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। सोमवार से शक्रवार सुबह 8:00 बजे से शाम 8:00 तक, 1-888-350-3447 (TTY: 711) पर कॉल करें। यह कॉल मुफ्त है।

Hindi

ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 1-888-350-3447 (TTY: 711), วันจันทร์ถึงวันศุกร์ เวลา 8:00 a.m. ถึง 8:00 p.m. โดยที่ไม่เสียค่าใช้จ่ายใดๆ

Thai

- You can get this Annual Notice of Changes for free in other formats, such as large print, braille, or audio. Call 1-888-350-3447 (TTY 711), Monday through Friday from 8 a.m. to 8 p.m. The call is free.
- You can request to have health plan information sent to you in your language or in other formats. You can make a standing request at any time, call Member Services at 1-888-350-3447 (TTY 711), Monday through Friday from 8 a.m. to 8 p.m. PST. The call is free.

About CareMore Cal MediConnect Plan

- CareMore Cal MediConnect Plan (Medicare-Medicaid Plan) is a health plan that contracts with both Medicare and Medi-Cal to provide benefits of both programs to enrollees. CareMore administers the contract on behalf of an affiliate of CareMore. ®CareMore is a registered trademark of CareMore Health System.
- Coverage under CareMore Cal MediConnect Plan qualifies as minimum essential coverage (MEC). It satisfies the Patient Protection and Affordable Care Act's (ACA) individual shared responsibility requirement. Please visit the Internal Revenue Service (IRS) website at <https://www.irs.gov/Affordable-Care-Act/Individuals-and-Families> for more information on the individual shared responsibility requirement for MEC.
- CareMore Cal MediConnect Plan is offered by CareMore Health Plan. When this Annual Notice of Changes says “we,” “us,” or “our,” it means CareMore Health Plan. When it says “the plan” or “our plan,” it means CareMore Cal MediConnect Plan.



If you have questions, please call CareMore Cal MediConnect Plan at 1-888-350-3447 (TTY 711), Monday through Friday from 8 a.m. to 8 p.m. After-hours messaging is available, 24 hours a day, 7 days a week, including holidays. The call is free. **For more information**, visit duals.caremore.com.

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Disclaimers

Limitations and restrictions may apply. For more information, call CareMore Cal MediConnect Plan Member Services or read the CareMore Cal MediConnect Plan *Member Handbook*. This means that you may have to pay for some services and that you need to follow certain rules to have CareMore Cal MediConnect Plan pay for your services.

The List of Covered Drugs and/or pharmacy and provider networks may change throughout the year. We will send you a notice before we make a change that affects you.

Benefits and/or copays may change on January 1 of each year.



If you have questions, please call CareMore Cal MediConnect Plan at 1-888-350-3447 (TTY 711), Monday through Friday from 8 a.m. to 8 p.m. After-hours messaging is available, 24 hours a day, 7 days a week, including holidays. The call is free. **For more information**, visit duals.caremore.com.

Important things to do:

- Check if there are any changes to our benefits that may affect you.** Are there any changes that affect the services you use? It is important to review benefit changes to make sure they will work for you next year. Look in section C for information about benefit changes for our plan.
- Check if there are any changes to our prescription drug coverage that may affect you.** Will your drugs be covered? Are they in a different tier? Can you continue to use the same pharmacies? It is important to review the changes to make sure our drug coverage will work for you next year. Look in section C for information about changes to our drug coverage.
- Check to see if your providers and pharmacies will be in our network next year.** Are your doctors in our network? What about your pharmacy? What about the hospitals or other providers you use? Look in section B for information about our *Provider and Pharmacy Directory*.
- Think about your overall costs in the plan.** How do the total costs compare to other coverage options?
- Think about whether you are happy with our plan.**

If you decide to stay with CareMore Cal MediConnect Plan:

If you want to stay with us next year, it's easy – you don't need to do anything. If you don't make a change, you will automatically stay enrolled in our plan.

If you decide to change plans:

If you decide other coverage will better meet your needs, you can switch plans at any time. If you enroll in a new plan, your new coverage will begin on the first day of the following month. Look in section E, page 13 to learn more about your choices.

B. Changes to the network providers and pharmacies

Our provider and pharmacy networks have changed for 2018.

We strongly encourage you to review our current *Provider and Pharmacy Directory* to see if your providers or pharmacy are still in our network. An updated *Provider and Pharmacy Directory* is located on our website at duals.caremore.com. You



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may also call Member Services at 1-888-350-3447 (TTY 711), Monday through Friday from 8 a.m. to 8 p.m. for updated provider information or to ask us to mail you a *Provider and Pharmacy Directory*.

It is important that you know that we may also make changes to our network during the year. If your provider does leave the plan, you have certain rights and protections. For more information, see Chapter 3 of your *Member Handbook*.

C. Changes to benefits for next year

Changes to benefits for medical services

We are changing our coverage for certain medical services next year. The table below describes these changes.

	2017 (this year)	2018 (next year)
Non-Medical Transportation	You will have access to 30 one-way trips per year to plan-approved locations to obtain health care services. Once you have used your transportation benefit, your additional transportation will be covered under The Medicaid Assurance of Transportation provisions.	You will have access to unlimited trips per year to plan-approved locations to obtain health care services. Once you have used your transportation benefit, your additional transportation will be covered under The Medicaid Assurance of Transportation provisions.
Non- Medical Transportation	Cancellation Policy Members must notify CareMore of any cancellation 24 business hours prior to your scheduled ride. If your scheduled ride is not cancelled, it may count towards your trip limit. If you need to cancel a Monday appointment, please call on Friday to make sure the trip does not count towards your trip limit.	Cancellation Policy Members must notify CareMore of any cancellation 24 business hours prior to your scheduled ride. If you need to cancel a Monday appointment, please call on Friday.



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	2017 (this year)	2018 (next year)
<i>In-Home Supportive Services (IHSS)</i>	<p>Long-term services and supports help you stay at home instead of going to a nursing home or hospital. Long-term services and supports consist of Community-Based Adult Services (CBAS), In-Home Supportive Services (IHSS), Multipurpose Senior Services Program (MSSP), and Nursing Facilities (NF).</p>	<p>Long-term services and supports help you stay at home instead of going to a nursing home or hospital. Long-term services and supports consist of Community-Based Adult Services (CBAS), Multipurpose Senior Services Program (MSSP), and Nursing Facilities (NF).</p> <p>Please note:</p> <p>The county will cover your In-Home Supportive Services (IHSS) benefit instead of CareMore Cal MediConnect Plan. You will continue to receive your In-Home Supportive Services (IHSS) benefit.</p>



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	2017 (this year)	2018 (next year)
<i>LiveHealth Online</i>	<p><i>LiveHealth Online provides an easy way to interact with a doctor via live, two-way video on a computer or mobile device using a free application. You can get it by visiting www.livehealthonline.com. Go to www.livehealthonline.com and click "Sign Up".</i></p> <ul style="list-style-type: none"> <i>• You must enter your health plan name and Member ID Card number during enrollment, so have your card ready when you sign up.</i> <i>• Once you finish signing up, you'll see a list of available physicians.</i> <p><i>LiveHealth Online complements face-to-face visits with a physician. For conditions such as colds and flu, infections, rashes and allergies, when you cannot see your regular doctor, a doctor will be quickly available to see you.</i></p> <p><i>The service is available 24 hours a day/7 days a week, giving members the chance to talk to a doctor within a few minutes.</i></p>	<p><i>LiveHealth Online provides convenient access to interact with a board-certified doctor or licensed psychologist or therapist via live, two-way video on a computer or mobile device (tablet or smartphone) using a free application. It can be accessed by visiting www.livehealthonline.com or downloading the mobile application and sign up.</i></p> <ul style="list-style-type: none"> <i>• Click Sign Up and enter the CareMore Service Key CM1 when setting up your account.</i> <i>• Once you're logged in, click LiveHealth Online Medical and LiveHealth Online Psychology to review the profiles of the doctors, psychologists, or therapists available and select the one you'd like to see.</i> <i>• For a medical visit, you will be asked about your health history and can select the pharmacy you would like to use if a prescription is needed. After answering this information, you'll be connected to the doctor you selected in about 10 minutes or less.</i>



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	2017 (this year)	2018 (next year)
LiveHealth Online (continued)		<ul style="list-style-type: none"> • <i>After the evaluation, a treatment plan is developed which may include a prescription from the doctor that is routed to a selected pharmacy. Online psychologists and therapists cannot prescribe medication(s).</i> <p><i>LiveHealth Online is available for use as follows:</i></p> <ul style="list-style-type: none"> • <i>A board-certified doctor will quickly be available to see you when you cannot see your regular doctor for common conditions such as:</i> <ul style="list-style-type: none"> » Cold and flu symptoms such as cough, fever and headaches » Allergies » Sinus infections » Bronchitis » Urinary tract infections • <i>A licensed psychologist or therapist will be available by appointment to see you when you are:</i> <ul style="list-style-type: none"> » Feeling stressed or worried and/or » Having a tough time



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CareMore Cal MediConnect Plan (Medicare-Medicaid Plan)
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Changes to prescription drug coverage

Changes to our Drug List

An updated *List of Covered Drugs* is located on our website at duals.caremore.com. You may also call Member Services at 1-888-350-3447 (TTY 711), Monday through Friday from 8 a.m. to 8 p.m. for updated drug information or to ask us to mail you a *List of Covered Drugs*.

The *List of Covered Drugs* is also called the “Drug List.”

We made changes to our Drug List, including changes to the drugs we cover and changes to the restrictions that apply to our coverage for certain drugs.

Review the Drug List to make sure your drugs will be covered next year and to see if there will be any restrictions.

If you are affected by a change in drug coverage, we encourage you to:

- **Work with your doctor (or other prescriber) to find a different drug** that we cover. You can call Member Services at 1-888-350-3447 (TTY 711), Monday through Friday from 8 a.m. to 8 p.m. to ask for a list of covered drugs that treat the same condition. This list can help your provider find a covered drug that might work for you.
- **Ask the plan to cover a temporary supply** of the drug. In some situations, we will cover a **one-time**, temporary supply of the drug during the first 90 days of the calendar year. This temporary supply will be for up to 30 days. (To learn more about when you can get a temporary supply and how to ask for one, see Chapter 5 of the *Member Handbook, Section D*.) When you get a temporary supply of a drug, you should talk with your doctor to decide what to do when your temporary supply runs out. You can either switch to a different drug covered by the plan or ask the plan to make an exception for you and cover your current drug.

Formulary exceptions are granted until the end of the plan year. Any formulary exceptions granted during the current plan year would need to be resubmitted for the 2018 plan year.



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Changes to prescription drug costs

There are no changes to the amount you pay for prescription drugs in 2018. Read below for more information about your prescription drug coverage.

The following table shows your costs for drugs in each of our four drug tiers.

	2017 (this year)	2018 (next year)
<p>Drugs in Tier 1 (Generic Drugs)</p> <p>Cost for a one-month supply of a drug in Tier 1 that is filled at a network pharmacy</p>	<p>Your copay for a one-month (31-day) supply is \$0 per prescription.</p>	<p>Your copay for a one-month (31-day) supply is \$0 per prescription.</p>
<p>Drugs in Tier 2 (Brand-name Drugs)</p> <p>Cost for a one-month supply of a drug in Tier 2 that is filled at a network pharmacy</p>	<p>Your copay for a one-month (31-day) supply is \$0 per prescription.</p>	<p>Your copay for a one-month (31-day) supply is \$0 per prescription.</p>
<p>Drugs in Tier 3 (Prescription Drugs covered by Medi-Cal)</p> <p>Cost for a one-month (31-day) supply of a drug in Tier 3 that is filled at a network pharmacy</p>	<p>Your co-pay for a one-month (31-day) supply is \$0 per prescription.</p>	<p>Your co-pay for a one-month (31-day) supply is \$0 per prescription.</p>
<p>Drugs in Tier 4 (Over-the-Counter (OTC) Drugs covered by Medi-Cal)</p> <p>Cost for a one-month (31-day) supply of a drug in Tier 4 that is filled at a network pharmacy</p>	<p>Your co-pay for a one-month (31-day) supply is \$0 per prescription.</p>	<p>Your co-pay for a one-month (31-day) supply is \$0 per prescription.</p>



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D. Administrative changes

A referral is required for the following benefit:

	2017 (this year)	2018 (next year)
Cardiac (heart) rehabilitation services – Referral is required	<i>Authorization rules may apply.</i>	<i>Authorization and/or referral rules may apply. You should talk to your provider to get a referral.</i>

E. Deciding which plan to choose

If you want to stay in CareMore Cal MediConnect Plan

We hope to keep you as a member next year.

To stay in our plan, you don't need to do anything. If you do not sign up for a different Cal MediConnect plan, change to a Medicare Advantage Plan, or change to Original Medicare, you will automatically stay enrolled as a member of our plan for 2018.

If you want to change to a different Cal MediConnect plan

If you want to keep getting your Medicare and Medi-Cal benefits together from a single plan, you can join a different Cal MediConnect plan.

To enroll in a different Cal MediConnect plan, call Health Care Options at 1-844-580-7272, Monday through Friday from 8:00 a.m. to 5:00 p.m. TTY users should call 1-800-430-7077.

If you want to leave the Cal MediConnect program

If you do not want to enroll in a different Cal MediConnect plan after you leave CareMore Cal MediConnect Plan, you will go back to getting your Medicare and Medi-Cal services separately.

How you will get Medicare services

You will have three options for getting your Medicare services. By choosing one of these options, you will automatically end your membership in our Cal MediConnect plan:



If you have questions, please call CareMore Cal MediConnect Plan at 1-888-350-3447 (TTY 711), Monday through Friday from 8 a.m. to 8 p.m. After-hours messaging is available, 24 hours a day, 7 days a week, including holidays. The call is free.

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<p>1. You can change to:</p> <p>A Medicare health plan, such as a Medicare Advantage plan or, if you meet eligibility requirements, Programs of All-inclusive Care for the Elderly (PACE)</p>	<p>Here is what to do:</p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, seven days a week. TTY users should call 1-877-486-2048 to enroll in the new Medicare-only health plan.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none">▪ Call the California Health Insurance Counseling and Advocacy Program (HICAP) at 1-800-434-0222, Monday through Friday from 8:00 a.m. to 5:00 p.m. For more information or to find a local HICAP office in your area, please visit http://www.aging.ca.gov/HICAP/. <p>You will automatically be disenrolled from CareMore Cal MediConnect Plan when your new plan's coverage begins.</p>
<p>2. You can change to:</p> <p>Original Medicare <i>with</i> a separate Medicare prescription drug plan</p>	<p>Here is what to do:</p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, seven days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none">▪ Call the California Health Insurance Counseling and Advocacy Program (HICAP) at 1-800-434-0222, Monday through Friday from 8:00 a.m. to 5:00 p.m. For more information or to find a local HICAP office in your area, please visit http://www.aging.ca.gov/HICAP/. <p>You will automatically be disenrolled from CareMore Cal MediConnect Plan when your Original Medicare coverage begins.</p>



If you have questions, please call CareMore Cal MediConnect Plan at 1-888-350-3447 (TTY 711), Monday through Friday from 8 a.m. to 8 p.m. After-hours messaging is available, 24 hours a day, 7 days a week, including holidays. The call is free. **For more information**, visit duals.caremore.com.

<p>3. You can change to:</p> <p>Original Medicare <i>without</i> a separate Medicare prescription drug plan</p> <p>NOTE: If you switch to Original Medicare and do not enroll in a separate Medicare prescription drug plan, Medicare may enroll you in a drug plan, unless you tell Medicare you don't want to join.</p> <p>You should only drop prescription drug coverage if you get drug coverage from an employer, union or other source. If you have questions about whether you need drug coverage, call the California Health Insurance Counseling and Advocacy Program (HICAP) at 1-800-434-0222, Monday through Friday from 8:00 a.m. to 5:00 p.m. For more information or to find a local HICAP office in your area, please visit http://www.aging.ca.gov/HICAP/.</p>	<p>Here is what to do:</p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, seven days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none">▪ Call the California Health Insurance Counseling and Advocacy Program (HICAP) at 1-800-434-0222, Monday through Friday from 8:00 a.m. to 5:00 p.m. For more information or to find a local HICAP office in your area, please visit http://www.aging.ca.gov/HICAP/. <p>You will automatically be disenrolled from CareMore Cal MediConnect Plan when your Original Medicare coverage begins.</p>
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How you will get Medi-Cal services

If you leave our Cal MediConnect plan, you will be enrolled in a Medi-Cal managed care plan of your choice. Your Medi-Cal services include most long-term services and supports and behavioral health care.

When you ask to end your membership in our Cal MediConnect plan, you will need to let Health Care Options know which Medi-Cal managed care plan you want to join. You can call Health Care Options at 1-844-580-7272, Monday through Friday from 8:00 a.m. to 5:00 p.m. TTY users should call 1-800-430-7077.



If you have questions, please call CareMore Cal MediConnect Plan at 1-888-350-3447 (TTY 711), Monday through Friday from 8 a.m. to 8 p.m. After-hours messaging is available, 24 hours a day, 7 days a week, including holidays. The call is free. **For more information**, visit duals.caremore.com.

F. Getting help

Getting help from CareMore Cal MediConnect Plan

Questions? We're here to help. Please call Member Services at 1-888-350-3447 (TTY only, call 711). We are available for phone calls Monday through Friday from 8 a.m. to 8 p.m.

Read your 2018 Member Handbook

The *2018 Member Handbook* is the legal, detailed description of your plan benefits. It has details about next year's benefits. It explains your rights and the rules you need to follow to get covered services and prescription drugs.

An up-to-date copy of the *2018 Member Handbook* is always available on our website at duals.caremore.com. You may also call Member Services at 1-888-350-3447 (TTY 711), Monday through Friday from 8 a.m. to 8 p.m. to ask us to mail you a *2018 Member Handbook*.

Visit our website

You can also visit our website at duals.caremore.com. As a reminder, our website has the most up-to-date information about our provider and pharmacy network (*Provider and Pharmacy Directory*) and our Drug List (*List of Covered Drugs*).

Getting help from the state enrollment broker

The state enrollment broker, Health Care Options, can help you sign-up for a health plan or answer any of your enrollment questions.

You can call Health Care Options at 1-844-580-7272, Monday through Friday from 8:00 a.m. to 5:00 p.m. TTY users should call 1-800-430-7077.

Getting help from the Cal MediConnect Ombuds Program

The Cal MediConnect Ombuds Program can help you if you are having a problem with CareMore Cal MediConnect Plan. The Cal MediConnect Ombuds Program is not connected with us or with any insurance company or health plan. The phone number for the Cal MediConnect Ombuds Program is 1-855-501-3077. The services are free.

Getting help from the Health Insurance Counseling and Advocacy Program

You can also call the Health Insurance Counseling and Advocacy Program (HICAP). The HICAP counselors can help you understand your Cal MediConnect plan choices and answer questions about switching plans. The HICAP is not connected with us or with any insurance company or health plan. The HICAP has trained counselors in every county, and services are free. The HICAP phone number is 1-800-434-0222. For more



If you have questions, please call CareMore Cal MediConnect Plan at 1-888-350-3447 (TTY 711), Monday through Friday from 8 a.m. to 8 p.m. After-hours messaging is available, 24 hours a day, 7 days a week, including holidays. The call is free. **For more information**, visit duals.caremore.com.

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information or to find a local HICAP office in your area, please visit <http://www.aging.ca.gov/HICAP/>.

Getting help from Medicare

To get information directly from Medicare:

Call 1-800-MEDICARE (1-800-633-4227).

You can call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

Visit the Medicare Website

You can visit the Medicare website (<http://www.medicare.gov>). If you choose to disenroll from your Cal MediConnect plan and enroll in a Medicare Advantage plan, the Medicare website has information about costs, coverage, and quality ratings to help you compare Medicare Advantage plans. You can find information about Medicare Advantage plans available in your area by using the Medicare Plan Finder on the Medicare website. (To view the information about plans, go to <http://www.medicare.gov> and click on “Find health & drug plans.”)

Read *Medicare & You 2018*

You can read the *Medicare & You 2018* handbook. Every year in the fall, this booklet is mailed to people with Medicare. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare. If you don't have a copy of this booklet, you can get it at the Medicare website (<http://www.medicare.gov>) or by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

Getting help from the California Department of Managed Health Care

The California Department of Managed Health Care is responsible for regulating health care service plans. If you have a grievance against your health plan, you should first telephone your health plan at 1-888-350-3447 (TTY 711), Monday through Friday from 8 a.m. to 8 p.m. and use your health plan's grievance process before contacting the Department. Utilizing this grievance procedure does not prohibit any potential legal rights or remedies that may be available to you.

If you need help with a grievance involving an emergency, a grievance that has not been satisfactorily resolved by your health plan, or a grievance that has remained unresolved for more than 30 days, you may call the Department for assistance.

You may also be eligible for an Independent Medical Review (IMR). If you are eligible for IMR, the IMR process will provide an impartial review of medical decisions made by a health plan related to the medical necessity of a proposed service or treatment,



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coverage decisions for treatments that are experimental or investigational in nature and payment disputes for emergency or urgent medical services.

The Department also has a toll-free telephone number (1-888-HMO-2219) and a TDD line (1-877-688-9891) for the hearing and speech impaired. The Department's Internet Web site <http://www.hmohelp.ca.gov> has complaint forms, IMR application forms and instructions online.

It's important we treat you fairly

That's why we follow Federal civil rights laws in our health programs and activities. We don't discriminate, exclude people, or treat them differently on the basis of race, color, national origin, sex, age or disability. For people with disabilities, we offer free aids and services. For people whose primary language isn't English, we offer free language assistance services through interpreters and other written languages. Interested in these services? Call Customer Service for help 1-888-350-3447 (TTY: 711).

If you think we failed to offer these services or discriminated based on race, color, national origin, age, disability, or sex, you can file a complaint, also known as a grievance. You can file a complaint with our Compliance Coordinator in writing to Compliance Coordinator, 12900 Park Plaza Drive, Suite 150, Mailstop 6150 Cerritos, CA 90703-9329. Or you can file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights at 200 Independence Avenue, SW; Room 509F, HHH Building; Washington, D.C. 20201 or by calling 1-800-368-1019 (TTY: 1-800-537-7697) or online at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>. Complaint forms are available at <http://www.hhs.gov/civil-rights/for-individuals/section-1557/translated-resources>

Get help in your language

Separate from our language assistance program, we make documents available in alternate formats for members with visual impairments. If you need a copy of this document in an alternate format, please call the Customer Service 1-888-350-3447 (TTY: 711).

If you speak English, language assistance services, free of charge, are available to you. Call 1-888-350-3447 (TTY: 711), Monday through Friday from 8:00 a.m. to 8:00 p.m. The call is free.

Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-350-3447 (TTY: 711), de lunes a viernes de 8:00 a.m. a 8:00 p.m. Esta llamada es gratuita.

Spanish

如果您講中文，將可提供您免費的語言協助服務。請致電 1-888-350-3447 (TTY: 711)，週一至週五上午 8 點至下午 8 點。此為免費電話。

Chinese

Nếu quý vị nói tiếng Việt, chúng tôi có thể cung cấp các dịch vụ hỗ trợ ngôn ngữ miễn phí cho quý vị. Hãy gọi số 1-888-350-3447 (TTY: 711), thứ Hai đến thứ Sáu, từ 8 giờ sáng đến 8 giờ tối. Cuộc gọi này miễn phí.

Vietnamese



If you have questions, please call CareMore Cal MediConnect Plan at 1-888-350-3447 (TTY 711), Monday through Friday from 8 a.m. to 8 p.m. After-hours messaging is available, 24 hours a day, 7 days a week, including holidays. The call is free. **For more information**, visit duals.caremore.com.

Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-888-350-3447 (TTY: 711), Lunes hanggang Biyernes mula 8 a.m. hanggang 8 p.m. Libre ang tawag.

Tagalog

한국어를 사용하시는 경우, 통역 서비스를 무료로 이용하실 수 있습니다. 1-888-350-3447 (TTY: 771) 월요일부터 금요일까지 오전 8 시에서 오후 8 시 사이에 통화 가능합니다. 통화는 무료입니다.

Korean

Եթե խոսք խոսում եք հայերեն, սպաս լեզվական աջակցություն ծառայություններն անվճար մատչելի են Ձեզ: Զանգահարեք՝ 1-888-350-3447 (TTY: 711), երկուշաբթիից ուրբաթ՝ 08:00-20:00: Այս զանգն անվճար է:

Armenian

اگر به زبان فارسی گفتگو می‌کنید، خدمات زبانی بصورت رایگان به شما ارائه می‌شود. با شماره 1-888-350-3447 (TTY: 711) تماس بگیرید. از دوشنبه تا جمعه 8 صبح تا 8 شب. این تماس رایگان است.

Persian (Farsi)

Если вы говорите по-русски, вам доступны бесплатные услуги переводчика. Звоните по тел. 1-888-350-3447 (TTY: 711) с понедельника по пятницу с 08:00 до 20:00. Звонок бесплатный.

Russian

日本語を話される場合、無料の言語支援をご利用いただけます。月曜日から金曜日の午前8時から午後8時まで1-888-350-3447 (TTY: 711)へ、お電話にてご連絡ください。通話料は無料です。

Japanese

إذا كنت تتحدث اللغة العربية، ستكون خدمات المساعدة اللغوية متوفرة لك مجانًا. اتصل على الرقم 1-888-350-3447 (TTY: 711) من الإثنين إلى الجمعة من الساعة 8:00 صباحًا وحتى الساعة 8:00 مساءً. تكون المكالمات مجانية.

Arabic

ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। 1-888-350-3447 (TTY: 711) 'ਤੇ ਫੋਨ ਕਰੋ, ਸੋਮਵਾਰ ਤੋਂ ਸ਼ੁੱਕਰਵਾਰ ਸਵੇਰੇ 8 ਵਜੇ ਤੋਂ ਰਾਤ 8 ਵਜੇ ਤੱਕ। ਇਹ ਕਾਲ ਮੁਫਤ ਹੈ।

Punjabi

បើលោកអ្នកនិយាយភាសាខ្មែរ សេវាកម្មជំនួយផ្នែកភាសាមានផ្តល់ជូនលោកអ្នកដោយឥតគិតថ្លៃ។ សូមហៅទូរស័ព្ទមកលេខ 1-888-350-3447 (TTY: 711) ថ្ងៃចន្ទដល់ថ្ងៃសុក្រចាប់ពីម៉ោង 8:00 ព្រឹកដល់ម៉ោង 8:00 យប់។ ការហៅទូរស័ព្ទនេះគឺឥតគិតថ្លៃ។

Cambodian

Yog koj hais lus Hmoob, muaj kev pab txhais lus pub dawb rau koj. Hu rau 1-888-350-3447 (TTY: 711), Txij hnuv Monday txog hnuv Friday thaum 8:00 teev sawv ntxov txog 8:00 teev tsaus ntuj. Tus xov tooj no yog hu dawb xwb.

Hmong

यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। सोमवार से शुक्रवार सुबह 8:00 बजे से शाम 8:00 तक, 1-888-350-3447 (TTY: 711) पर कॉल करें। यह कॉल मुफ्त है।

Hindi



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ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 1-888-350-3447 (TTY: 711),
วันจันทร์ถึงวันศุกร์ เวลา 8:00 a.m. ถึง 8:00 p.m. โดยที่ไม่เสียค่าใช้จ่ายใดๆ

Thai

ຖ້າທ່ານເວົ້າພາສາລາວແມ່ນມີບໍລິການແປພາສາບໍ່ເສຍຄ່າໃຫ້ທ່ານ. ໂທຫາເບີ 1-888-350-3447 (TTY: 711),
ວັນຈັນ ຫາ ວັນສຸກ 8:00 ໂມງເຊົ້າ ຫາ 8:00 ໂມງແລງ. ການໂທແມ່ນຟຣີ.

Laotian



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For more information, visit duals.caremore.com.



This is not a complete list. The benefit information is a brief summary, not a complete description of benefits. For more information, contact the plan or read the Member Handbook.

Limitations, copays and restrictions may apply. For more information, call CareMore Cal MediConnect Plan Member Services or read the CareMore Cal MediConnect Plan Member Handbook.

Benefits and/or co-payments may change on January 1 of each year.

Copays for prescription drugs may vary based on the level of Extra Help you receive. Please contact the plan for more details.

CareMore Cal MediConnect Plan (Medicare-Medicaid Plan) is a health plan that contracts with both Medicare and Medi-Cal to provide benefits of both programs to enrollees. CareMore administers the contract on behalf of an affiliate of CareMore. ®CareMore is a registered trademark of CareMore Health System.