

<Date>

**Keep this notice for your records**

<First Name> <Last Name>  
<Address>  
<City>, CA <Zip>

<HPSM ID>

**Read this notice carefully and keep it for your records.**

**Important Information  
about your Medicare and Medi-Cal benefits**

You are getting this letter because you have BOTH Medicare and Medi-Cal. The way you get your health care is changing. You will now have more choices to meet your health care needs.

This is the second letter telling you about your new choices. You may choose to join our Cal MediConnect plan, or choose to stay with regular Medicare and in the Health Plan of San Mateo (HPSM) for your Medi-Cal services. Unless you choose to stay with regular Medicare, you do not need to do anything and your coverage in our Cal MediConnect plan will become effective on 4/1/2014:

**What is a Cal MediConnect plan?**

A Cal MediConnect plan is a Medicare/Medi-Cal plan that will manage your Medicare and Medi-Cal benefits. Enrolling in a Cal MediConnect plan means that you keep your Medicare and Medi-Cal benefits with no extra cost but you must use your Cal MediConnect providers. You can also get additional transportation and vision benefits. The Health Plan of San Mateo (HPSM) is operating the Cal MediConnect plan in San Mateo County. Our plan is called HPSM CareAdvantage Cal MediConnect Plan (Medicare-Medicaid Plan) or CareAdvantage CMC.

**Enrolling in CareAdvantage CMC will:**

- Keep all your Medicare and Medi-Cal services and benefits you receive now without any extra costs, including In-Home Supportive Services (IHSS), Multipurpose Senior Services Program (MSSP), Community-Based Adult

Services (CBAS), and nursing home care.

- Ensure that all of your doctors, specialists, and other providers work together to get you the care you need.
- Give additional transportation and vision benefits.

### **How does CareAdvantage CMC help me?**

CareAdvantage CMC helps you because your Medicare and Medi-Cal benefits work together and work better for you.

Your doctors, pharmacists, IHSS, CBAS, MSSP, and other providers work together to care for you. They will coordinate and assist you in getting the care and services that you need. This is called “care coordination.”

### **Your choices include:**

- 1. Enrolling in CareAdvantage CMC.** CareAdvantage CMC covers both Medicare and Medi-Cal services. If you join the Cal MediConnect plan, you will receive IHSS, MSSP, CBAS, and nursing home care through CareAdvantage CMC. They also cover vision care and transportation. CareAdvantage CMC will work with you, your doctors and providers to ensure you get the care you need.
- 2. Keep your Medi-Cal and Medicare the way it is now.** You will remain in HPSM for your Medi-Cal health plan if you choose not to enroll in CareAdvantage CMC. You will keep your Medicare doctors and hospitals, and you will receive your Medi-Cal benefits like IHSS, MSSP, CBAS, and nursing home care through HPSM Medi-Cal. You will not lose any services.

### **What should I do now?**

Review the choices above and decide which is best for you. Ask your doctors and other health care providers to see which plans they work with.

You do not need to do anything if you want to be enrolled in CareAdvantage CMC.

If you do not want to enroll in CareAdvantage CMC, you must contact the CareAdvantage Unit at **1-866-880-0606** by 03/31/2014 to cancel your enrollment OR fill out and mail back the form included with this letter so that we receive it by 03/31/2014. A postage-paid envelope is included. You can also fax the form to **650-616-2190**.

### **Who should I call if I have questions about CareAdvantage CMC?**

If you have questions, please call the CareAdvantage Unit at 1-866-880-0606 or **650-616-2174**. CareAdvantage Navigators are available to answer your questions Monday through Sunday, 8:00 a.m. to 8:00 p.m. Members with hearing or speech impairments can call **1-800-735-2929** (TTY) or dial 7-1-1 (the California Relay Service). You can visit [www.hpsm.org](http://www.hpsm.org).

For general questions about enrollment, you can call the California Health Insurance Counseling & Advocacy Program (HICAP) at **1-800-434-0222**. You can also call the Cal MediConnect Ombudsman Program at **1-855-501-3077**. This number will be operational starting 4/1/2014.

If you have questions about **Medicare**, call **1-800-MEDICARE (1-800-633-4227)**, 24 hours a day, 7 days a week or visit [www.Medicare.gov](http://www.Medicare.gov). TTY users should call **1-877-486-2048**.

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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 the CareAdvantage Unit at **1-866-880-0606**.

Si necesita esta carta en otro idioma o en un formato alternativo — como letra grande, audio o Braille (sólo en inglés) — o si necesita ayuda para entender esta carta, por favor llame al Departamento de CareAdvantage al **1-866-880-0606**.

如果您需要本函的另一種語言或格式版本，例如大字版、錄音版或點字版，或需要他人協助以了解本函內容，請致電 CareAdvantage Unit，電話是 **1-866-880-0606**。

Kung kailangan mo ang sulat na ito sa ibang wika o alternatibong format - tulad ng malaking printa, audio o Braille – o kung kailangan mo ng tulong upang maunawaan ang sulat na ito, mangyaring tumawag sa CareAdvantage Unit sa telepono **1-866-880-0606**.

Чтобы получить данное письмо в другом формате (например, крупным шрифтом, в виде аудиозаписи или напечатанное шрифтом Брайля), или если вам нужна помощь, чтобы понять содержание письма, позвоните в подразделение CareAdvantage Unit по номеру **1-866-880-0606**.

HPSM CareAdvantage 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. Limitations, co-pays, and restrictions may apply. For more information, call the CareAdvantage Unit or read the CareAdvantage CMC Member Handbook. Benefits, List of Covered Drugs, pharmacy and provider networks may change on January 1 of each year.