

[REMOVE PRIOR TO SENDING: Tab J - Model Non-Renewal Letter for Individuals in Non-Renewing D-SNP Whom State is Passively Enrolling into Organization's MMP]

<Date>

<Name>

<Address>

<City>, <State> <ZIP>

**IMPORTANT: YOUR MEDICARE PLAN WON'T BE OFFERED IN 2015
YOU'RE BEING ENROLLED IN A NEW HEALTH & DRUG PLAN**

<Name>:

Your Medicare plan won't be offered in 2015. This means your coverage through <D-SNP name> will end December 31, 2014. We will offer you health and drug coverage in <MMP name> instead of <D-SNP name> starting January 1, 2015. This new plan includes your <Medicaid or state-specific Medicaid name> (sometimes called "Medicaid"), Medicare, and prescription drug benefits. You will get a notice about your enrollment in <MMP name> from your state.

There will be no gap in your coverage. <State> will automatically enroll you in <MMP name>, so you don't have to do anything. If you don't make a different choice by December 31, your new coverage will start on January 1, 2015. See below for your other options.

<MMP name> network primary care providers and pharmacies will provide all of your health care services and prescription drugs as of January 1, 2015. If you need emergency or urgently needed care, or out-of-area dialysis services, you can use providers outside of <MMP name>'s network.

In a few weeks <MMP name> will send you a new member kit. **Your kit will include:**

- A welcome letter
- Summary of benefits
- List of covered drugs
- [*insert <Provider and pharmacy directory> or <Instructions for getting more information about network providers and pharmacies>*]

- [if including in the new member kit, insert <Member ID card>]
- [if including in the new member kit, insert <Member handbook>]

For questions about <MMP name>,

- Call <MMP name> <Member Services> at <toll-free phone number> <days and hours of operation>.
- Call <toll-free number> if you use TTY.
- Visit <web address>.

Do I have other options?

Yes. Here are your options for Medicare coverage:

[All Plans/Part D Sponsors outside of California should use the following Option 1:]

Option 1: You can join a different Medicare health 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 may offer extra coverage such as vision, hearing or dental. Some health plans are designed specifically for people who have both Medicare and Medicaid. These are called Dual Eligible Special Needs Plans.

[Plans/Part D Sponsors in California should use the following Option 1:]

Option 1: You can join a different Medicare health 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 may offer extra coverage such as vision, hearing or dental. You may not choose a Medicare health plan designed specifically for people who have both Medicare and Medicaid, called Dual Eligible Special Needs Plans.

Option 2: You can change to Original Medicare. Original Medicare is fee-for-service coverage managed by the Federal government. If you choose Original Medicare, Medicare will enroll you in a separate prescription drug plan.

Get Help Comparing Your Options

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

Please visit [Medicare.gov](https://www.Medicare.gov) or 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, call the

plan to get information about their costs, rules, and coverage. Please note Medicare isn't part of the Health Insurance Marketplace you may have been hearing about. Following the instructions in this letter will ensure that you are reviewing Medicare plans and not Marketplace options.

You can also get help comparing plans if you:

- **Call <Name of SHIP> at <SHIP phone>.** Counselors are available to answer your questions, discuss your needs, and give you information about your options. All counseling is **free**. TTY users should call <SHIP TTY>.
- **Call 1-800-MEDICARE (1-800-633-4227).** Tell them you got a letter saying your plan isn't going to be offered next year and you want help choosing a new plan. This toll-free help line is available 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.
- **Visit [Medicare.gov](https://www.medicare.gov).** Medicare's official web site has tools that can help you compare plans and answer your questions.
 - **Click "Find health & drug plans"** to compare the plans in your area.

What if I have questions about <name of state Medicaid program>?

If you have questions about <name of state Medicaid program>, call <Medicaid phone number>, <days and hours of operation>.

<plans may include language thanking the beneficiary for their membership and/or apologizing for any inconvenience>