



OHIO DEPARTMENT OF MEDICAID
OHIO MEDICAID CONSUMER HOTLINE
505 SOUTH HIGH STREET
COLUMBUS OH 43215

If you need assistance with this letter, contact us.
Ohio Medicaid Consumer Hotline: (800) 324-8680
Monday - Friday: 7 AM to 8 PM and
Saturday: 8 AM to 5 PM
<http://www.ohiomh.com>

<mail_name>
<mail_address_1>
<mail_address_2>

<mail_city>, <mail_state> <mail_zip>-<mail_zip4>

<dte_mailed>

<id_medicaid>

<ATTN: Authorized Representative for> <first_name_recip>
<last_name_recip>

The Ohio Department of Medicaid is pleased to make you aware that you have the option to enroll in a managed care plan to receive your Medicaid healthcare benefits.

50 W. Town Street, Suite 400
Columbus, Ohio 43215
medicaid.ohio.gov

To help coordinate your Medicaid health benefits, you have the option to enroll in a Medicaid managed care plan. You can choose to enroll now or any time in the future. If you choose to enroll, the plan you select will provide your Medicaid healthcare benefits.

What is a managed care plan?

A managed care plan is a private health care insurance company, which works with the Ohio Department of Medicaid to provide all of the same benefits as traditional Medicaid. The managed care plan also coordinates your care and provides care management. Some of the additional benefits you will receive at no additional cost are:

- Nurse advice line, available 24 hours a day, 7 days a week.
- Care management to help you coordinate your medical care.

Some managed care plans offer additional benefits, such as:

- Transportation to and from medical and Medicaid renewal appointments.
- No or lower co-pays for prescriptions, dental services, routine eye exams, eye glasses, and non-emergency services provided in a hospital emergency room.

Do I have choices?

- **Yes.** You have choices, including:
 - **Enroll in a managed care plan.** If you would like to enroll in a managed care plan and access their network of health care providers, pharmacies, and supplemental benefits and incentives, the managed care plans in your area are:

<ProviderName>	<ProviderWebAddress>	<ProviderServicePhoneNumber>
<ProviderName>	ss>	<ProviderServicePho
<ProviderName>	<ProviderWebAddress>	neNumber>
<ProviderName>	ss>	<ProviderServicePhon
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- **Keep your fee-for-service Medicaid.** If you do not wish to enroll in a managed care plan at this time and continue to have your healthcare benefits provided through traditional fee-for-service Medicaid coverage, you do not have to do anything at this time.
- **Return to traditional Medicaid.** After you have been enrolled in a managed care plan, if you decide that you no longer wish to be in managed care you can

return to traditional fee-for-service Medicaid for your healthcare benefits. You must call the Ohio Medicaid Consumer Hotline at (800)-324-8680 to make this change.

Before making any decisions about enrolling in a managed care plan, review all of your choices carefully. For assistance with your decision, you can call the Ohio Medicaid Consumer Hotline at (800)-324-8680. They can help you identify which managed care plan works with your doctors, pharmacy, and hospital, answer your questions about Medicaid, change your managed care plan, or return you to traditional fee-for-service Medicaid. Representatives are available from 7 a.m. to 8 p.m., Monday through Friday and 8 a.m. to 5 p.m., Saturday or visit www.ohiomh.com.

If you enroll in managed care, you can change your managed care plan within the first three months after enrollment, during annual open enrollment, or for Just Cause. Changes in managed care enrollment are effective the first day of the month following your request.

Do I have to enroll in a managed care plan?

No: Enrollment in managed care is your choice and is voluntary.

You cannot enroll in a managed care plan if you are enrolled in the Program of All-Inclusive Care for the Elderly (PACE) or are

living in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF-IID).

What happens next?

If you choose to enroll in a managed care plan, your managed care plan will send you your member ID card and a member handbook. Your plan will also give you access to their health care provider directory. You will get health care from doctors and hospitals that work with your plan.

If your doctor does not work with your managed care plan, you can talk to your doctor about becoming part of the plan's network. If you have a medical appointment or a scheduled service and your health care provider does not work with your plan, call your managed care plan right away.

If you do not choose to enroll in a managed care plan, Ohio Medicaid will continue to send you a paper medical card in the mail each month. You will continue to use your card to get health care from doctors and hospitals that accept Ohio Medicaid. If you decide later you want to enroll in managed care, you can call the Ohio Medicaid Consumer Hotline at (800)-324-8680.

Where can I get more information?

For more information or if you have questions, call the Ohio Medicaid Consumer Hotline at 800-324-8680 Monday through

Friday 7 a.m. to 8 p.m. and Saturday 8 a.m. to 5 p.m. or online at www.ohiomh.com.

Voluntary

Notice of Nondiscrimination

The Ohio Department of Medicaid complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. The Ohio Department of Medicaid does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

The Ohio Department of Medicaid:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact the Ohio Medicaid Consumer Hotline at 800-324-8680.

If you believe that Ohio Medicaid has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with:

Ohio Department of Medicaid

P.O. Box 182709

Columbus, Ohio 43218-2709

614-466-4693

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue SW.

Room 509F, HHH Building

Washington, DC 20201

1-800-368-1019, (TDD: 1-800-537-7697).

Complaint forms are available at

www.hhs.gov/ocr/office/file/index.html

English: ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-800-324-8680. (TTY: 711).

Spanish: ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-324-8680. (TTY: 711).

Chinese: 注意：如果你说中文,可以免費獲得語言援助服務。請電 1-800-324-8680 (TTY: 711)。

German: ACHTUNG: Wenn Sie Deutsch sprechen, koennen Sie kostenlos Hilfe fuer Sprachen zur Verfuegung haben. 1 800-324-8680 (TTY 711).

Arabic: (TTY: 711) 1-800-324-8680

ملاحظة : إذا كنت تتحدث العربية , سيكون بإمكانك استخدام خدمة المساعدة اللغوية المتاحة مجاناً من خلال الاتصال بالرقم التالي

Pennsylvanian Dutch: Wann du [Deutsch (Pennsylvania German / Dutch)] schwetzsch, kannscht du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schprooch. Ruf selli Nummer uff: Call 1-800-324-8680. (TTY: 711).

Russian: ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-324-8680. (телетайп: 711).

French: ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-324-8680. (TTY: 711).

Vietnamese: CHÚ Ý: Nếu bạn nói Tiếng Việt, chúng tôi có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-324-8680. (TTY: 711).

Cushite: XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 1-800-324-8680. (TTY: 711).

Korean: 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-324-8680 (TTY: 711) 번으로 전화해 주십시오.

Italian: ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-800-324-8680. (TTY: 711).

Japanese: 注意事項：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。1-800-324-8680（TTY: 711）まで、お電話にてご連絡ください。

Dutch: AANDACHT: Als u nederlands spreekt, kunt u gratis gebruikmaken van de taalkundige diensten. Bel: 1-800-324-8680. (TTY: 711).

Ukrainian: УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером 1-800-324-8680. (телетайп: 711).

Romanian: ATENȚIE: Dacă vorbiți limba română, vă stau la dispoziție servicii de asistență lingvistică, gratuit. Sunați la 1-800-324-8680. (TTY: 711).

Somali: DIGTOONI: Haddii aad ku hadasho Af Soomaali, adeegyada caawimada luqadda, oo lacag la'aan ah, ayaa lagu heli karaa adiga. Wac 1-800-324-8680. (TTY: 711).

Nepali: !यान िदनुहोस्: तपाईं01 2पा3ी बो6नु789 भ2 तपाईं0को नन<तत भाषा सहायता >वाह@ नान:Bu6क @पमा उप3Eध 9 । फोन गनुुहोस् 1-800-324-8680 (िदिंदवाई: 711) ।