

GOVERNMENT OF THE DISTRICT OF COLUMBIA



IMPORTANT INFORMATION ABOUT YOUR MEDICAID BENEFITS

«Date of Notice»

<Medicaid ID >

«Primary First Name » « Primary Last Name »

«Primary Address 1»

«Primary Address 2»

«Primary City», «Primary State» «Primary Zip»

Subject: Change in Medicaid Enrollment to Managed Care Organization (MCO)

Dear < First Name> <Last Name>:

The District of Columbia (DC) is changing the way you receive your health care services. DC has changed its requirements regarding mandatory enrollment into a Managed Care Organization (MCO) for certain beneficiaries who are currently enrolled in the Fee-for-Service program. Starting October 1, 2020, you will be enrolled in the following MCO. This agency action is supported by Section 1932(a)(1)(A) of the Social Security Act.

<Mandatory MCO Assignable Person's First Name >	<Mandatory MCO Eligible Person's Last Name >	<Managed Care Organization (MCO) health plan name >
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If you are an American Indian or Alaska Native, you may choose to remain in fee-for-service. If you think you qualify for an exemption from being part of managed care, please contact DC Healthy Families at (202) 639-4030 or 1 (800) 620-7802.

If you are dissatisfied with your assigned health plan or would like to change your MCO for any reason, you have until December 31, 2020 to choose from the following:

- AmeriHealth Caritas District of Columbia
- CareFirst BlueCross BlueShield Community Health Plan of District of Columbia
- MedStar Family Choice District of Columbia

You may contact DC Healthy Families to get help in choosing a different MCO plan:

By phone:

- DC Healthy Families at (202) 639-4030 or 1 (800) 620-7802.
- For the hearing impaired, call the TDD/TTY line at (202) 639-4041.

Online:

- Go online at www.DCHealthyFamilies.com (this is the fastest and easiest way!).
 - On the “Home” page, click “Enroll Now.”
 - Enter your Member ID and PIN.
 - Click on “Continue.” Follow the easy instructions to choose your health plan and doctor.

By mail:

- Fill out the Health Plan Selection form and all other forms in the Welcome Packet from DC Health Families.
 - Mail the forms back in the enclosed envelope, or
 - fax to (202) 289-6764

In person:

- To schedule a one-on-one face-to-face or virtual (Zoom) meeting contact the DC Health Families Outreach Team.
 - Go online at <https://www.dchealthyfamilies.com/Home/Contact.aspx>
 - Call (202) 639-4030 or 1 (800) 639-7802

You will receive a welcome packet from your assigned MCO that will tell you all about your assigned MCO. The packet will list the doctors, hospitals, and clinics that the MCO works with. It will also explain the services the MCO provides. The MCO will have someone available to talk to you if you have any questions about:

- The services the MCO provides
- The doctors or clinics where you can see you
- Picking or changing your primary care doctor
- Getting a health assessment

If you disagree with this notice, you have the right to appeal. You may request an appeal by **<Date of Notice + 90 calendar days>**. Your appeal may be requested by phone, in person, online, or by mail (D.C. Code § 4202 F.R. §431.220.). **See the insert for more information on your appeal rights.**

What is a Managed Care Organization (MCO)?

An MCO is a group of doctors, clinics, and hospitals who work together to help you manage your health. DC Medicaid works with select MCOs to help you get the health care services you need.

What Information Should I Know?

Your Medicaid benefits will not change. What's changing is the way you access health care services. After your mandatory enrollment on October 1, 2020, you will need to go through your MCO for your health care needs in order for Medicaid to cover or pay for your medical expenses.

If your doctor is **not** enrolled with your assigned MCO, you will still be able to receive care from your doctor until December 31, 2020. After December 31, 2020, if your doctors are not enrolled in your MCO, your MCO will work with your doctors so that you can continue to get your health care services or work with you to find new doctors that can continue your care.

After December 31, 2020

Starting January 1, 2021, you will need to receive health care services through your MCO provider group. If you receive services outside of your MCO provider group after January 1, 2021, you may be asked to pay for these services.

After December 31, 2020, changes to your MCO can only be made for specific reasons included in 42 CFR § 438.56 of federal regulations until the next period of Open Enrollment. Examples of these reasons include if the MCO does not cover the services you seek due to moral or religious objections, you need services that are not currently available within the provider network, and for reasons related to quality, lack of access to services or providers. During the next open enrollment period from November 1, 2021 to January 31, 2022 you may choose a new MCO for any reason. If you have any questions, please contact DC Healthy Families at (202) 639-4030 or 1 (800) 620-7802.

Frequently Asked Questions Related to Managed Care Enrollment Changes

1. Will my benefits change?

No, your Medical benefits will not change. Call DC Healthy Families, Immigrant Children's and DC Healthcare Alliance Programs at (202) 639-4030 to find out about extra benefits and services that are offered by the new health plans.

2. Will I have to change my doctor(s)?

You will be allowed to keep your current doctor(s) until December 31, 2020 at 11:59 pm. If your doctor(s) is not enrolled in your health plan, you may have to choose another doctor or enroll in a different health plan. Call (202) 639-4030 to find out which doctor(s) are in each health plan.

3. What about my medications?

You will be able to get your medications refilled. If you have a new doctor(s), you may need to make an appointment to get a new prescription.

4. What about ID cards and an Enrollee Handbook?

Your health plan will send you a new ID card(s) for each eligible Enrollee in the household and one (1) Enrollee Handbook.

5. Do I need to schedule a dental or doctor "HealthCheck" or "Well-Child (EPSDT)" visit with a new health plan if my child has already had this visit?

Check with your doctor or dentist to find out if you need to make another appointment for your child and contact your new health plan to inform them of your child's well-child or periodic dental visit status.

6. What happens with my non-emergency medical transportation needs?

Your new health plan will help schedule your transportation needs.

7. What if I have a scheduled surgery or treatment?

You can keep your scheduled appointments until December 31, 2020. Your new health plan will help you schedule a new appointment.

8. Will my family be in the same health plan?

Yes, you will be assigned to the same health plan. Unless you choose to change to another health plan by December 31, 2020.

9. Who can I call if I have questions?

The DC Healthy Families HELPLINE at (202) 639-4030 or (800) 620-7802. If you are hearing impaired, call the TDD/TTY line at (202) 639-4041.

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