



Alliance CompleteCare
1240 South Loop Road
Alameda, California 94502
Phone: 1-877-585-7526
CRS/TTY: 711 or 1-800-735-2929
7 days a week, 8 a.m. – 8 p.m.
www.alliancecompletecare.org

October 2, 2014

IMPORTANT NOTICE: Your Medicare plan won't be offered in 2015

<Member Name>
<Member Address>
<Address>

Dear <member name>,

Alliance CompleteCare (HMO SNP) won't offer your Medicare plan in 2015. This means your coverage through Alliance CompleteCare will end December 31, 2014. You need to make some decisions about your Medicare coverage. If you don't take action by December 31, Medicare will choose a new drug plan for you and you'll have Original Medicare starting January 1, 2015.

Because you have Medicaid, you can join a Medicare plan at any time. If you join a new Medicare plan AFTER December 31, your coverage in the new plan won't start until the month after you join.

What do you need to do?

You need to choose how you want to get your health and prescription drug coverage. Here are your options for Medicare coverage:

Option 1: You can join another 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.

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. You'll get a blue letter in November telling you the name of your new drug plan. You will only be enrolled into the separate prescription drug plan if you do not make another selection by December 31.

Keep this letter. It's proof that you have a special right to join a Medicare plan.



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Important Information:

If you have an employer or union group health plan, VA benefits, or TRICARE for Life, contact your insurer or benefits administrator. Ask how joining another plan or returning to Original Medicare affects your coverage.

If you have End-Stage Renal Disease (ESRD), you have a one-time right to join a new Medicare Advantage plan. Keep a copy of this letter as proof of your right to join a new Medicare Advantage plan.

For questions about Medicaid, contact 1-800-430-4263, CRS/TTY 1-800-430-7077, 8 a.m. to 5 p.m. Ask how joining another plan or returning to Original Medicare affects your Medicaid coverage.

Get Help Comparing Your Options

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

Please visit 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 California Health Insurance Counseling and Advocacy Program (HICAP) at 510-839-0393.** 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 CRS 711.
- **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.** 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.

If you need more information, please call us at Toll-Free: 1-877-585-7526, (CRS/TTY: 711 or 1-800-735-2929) 7 days a week, 8 a.m. – 8 p.m. Tell the customer service representative you got this letter.

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We thank you for your membership in Alliance CompleteCare. We regret the closing of this program and apologize for problems that the non-renewal of Alliance CompleteCare may cause.

Sincerely,
Alameda Alliance for Health/Alliance CompleteCare

This information is available for free in other languages. Please call our customer service number at:
1-877-585-7526 (CRS/TTY: 711 or 1-800-735-2929), 7 days a week, 8 a.m. – 8 p.m.

Esta información está disponible, sin ningún costo, en otros idiomas. Llame al número de Servicios al Miembro al:
1-877-585-7526 (CRS/TTY: 711 o 1-800-735-2929), de 8 a.m. a 8 p.m., los siete días de la semana.

此資訊以其他語言免費提供。請聯絡客戶服務部，電話號碼是：**1-877-585-7526**（加州電話轉接服務
(CRS/TTY專線：711或1-800-735-2929)，每週7天服務，服務時間為早上8點至晚上8點

H7292_ENLT184 CMS Accepted

Alliance CompleteCare (HMO SNP) is a Health plan with a Medicare contract and a contract with the California Medicaid program

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