

+MyCareOhio

Connecting Medicare + Medicaid

Information for individuals receiving **COMMUNITY ALCOHOL OR OTHER DRUG TREATMENT AND/OR MENTAL HEALTH SERVICES**

MyCare Ohio is a new managed care program designed for Ohioans who receive **BOTH Medicaid and Medicare** benefits.

The State of Ohio has worked closely with the federal government to improve the way health care services are provided by these programs. Through the health plan **YOU** choose, you will receive all of the medical, behavioral, and long-term services and supports you need.

THESE QUESTIONS WILL HELP YOU LEARN MORE ABOUT MyCare Ohio:

1 Q: I receive Alcohol or other Drug Treatment and/or Mental Health services from a community provider and I receive Medicare and Medicaid. Do I have to enroll in a MyCare Ohio plan?

A: Yes, you must enroll in a MyCare Ohio plan. You may choose to continue to receive your Medicare services in the way you do today.

2 Q: What happens after I enroll?

A: Your current health care, behavioral health care, and long-term care providers and the services you receive will not immediately change.

- The MyCare Ohio plan you choose will receive information about your current care needs and services and will work with you on a plan of care designed to meet your needs.

3 Q: Will I continue to have access to the same services that I receive today?

A: Yes. MyCare Ohio plans must cover all available Medicaid services. Your MyCare Ohio plan must also continue to cover your community behavioral health services provided by your current provider or agency under your existing care plan for up to one year. Your MyCare Ohio plan will be involved in coordination of your care and service planning.

4 Q: How does MyCare Ohio work? When do I need to enroll?

A: Enrollment into MyCare Ohio will be in phases, by region, over several months beginning in spring and summer of 2014.

- You will receive a letter informing you of the date when you must enroll. This letter will also give you instructions on how to pick a plan and how to enroll. You will be able to enroll by phone, online, or by mail.
 - There will be assistance in the community to help you understand your options.
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5 Q: What will happen if I do not select a MyCare Ohio plan?

A: If you do not make a choice, a MyCare Ohio plan will be selected for you. After you enroll, you will have at least 90 days to change your MyCare Ohio plan.

PLEASE NOTE: You do not have to receive your Medicare benefits from your MyCare Ohio plan. You may choose to continue to receive your Medicare benefits in the way you do today. However, your Medicaid benefits will only be available through your chosen MyCare Ohio Plan.

Below is a list of other things that may remain the same or may change as a result of your enrollment in a MyCare Ohio plan:

WHAT WILL NOT CHANGE:

- ① Your Medicaid eligibility will still be determined by the County Department of Job and Family Services.
- ② Your Medicaid and Medicare health care benefits.
- ③ You will not have any additional cost. If you currently pay a Medicare Part B Premium, you will continue to do so.

WHAT WILL CHANGE:

- ① All of your health care will be coordinated by your MyCare Ohio plan unless you are enrolled in a Severe Persistent Mental Illness (SPMI) Health Home. If you are enrolled in a SPMI Health Home, your Health Home provider will continue to coordinate your services.
- ② Your care will be coordinated by your MyCare Ohio plan to meet your specific needs.

DEFINITION:

MEDICARE PART B PREMIUM: A monthly fee that Medicare recipients pay for medical insurance to cover services not provided through Part A.

THERE IS NO ADDITIONAL COST TO PARTICIPATE IN THIS PROGRAM.

For more information, call the Ohio Medicaid Consumer Hotline:
(800) 324-8680, Monday - Friday 7 a.m. to 8 p.m.
and Saturdays 8 a.m. to 5 p.m. or visit online at www.ohiomh.com.

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