MyCare Ohio: What You Need to Know

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. You will receive through the MyCare Ohio health plan that you choose all of the medical, behavioral and long-term services and supports you need.

THESE QUESTIONS WILL HELP YOU LEARN MORE:

1. Q: I receive my health care through Medicaid and Medicare. Do I need to sign up for MyCare Ohio?
   
   A: You must enroll in a MyCare Ohio plan if you:
   
   1) are 18 or older; and
   2) live in one of the 29 demonstration counties; and
   3) currently receive services from BOTH Medicaid and Medicare.

   You will receive a letter from Ohio Medicaid asking you to choose from at least two MyCare Ohio plans.

2. 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.

   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 the MyCare Ohio Plan you choose.
Q: Who will make my health care decisions?
A: YOU are in charge of your health care. MyCare Ohio has a team approach - with you at the center.

- You will be able to express your preferences and make choices about how you want to receive your health care.
- You will have a care team that consists of yourself, your family and/or caregiver (if you wish), care managers, your primary care doctor, any specialists and other providers.
- Your team will meet with you regularly and help you plan your care based on your specific needs.

Q: Will my benefits be different?
A: Your MyCare Ohio plan will include all benefits available through traditional Medicare and Medicaid programs, including long-term care services and supports (if applicable), and behavioral health services.

- You may also be eligible to receive added services that your current programs cannot offer (for example: extra dental visits), depending on which MyCare Ohio plan you choose.

Q: How will MyCare Ohio improve my health care?
A: The MyCare Ohio program will help to make sure you get the care you need in a more organized way. Each person enrolled in a MyCare Ohio plan will have:

SINGLE POINT OF CONTACT: The MyCare Ohio plan you choose will be your single point of contact to talk about your Medicaid and Medicare benefits. By dialing one phone number, you can talk to someone about all of your health care needs.

PERSON-CENTERED CARE: The plans will provide information and help you to make choices about your health care, provide support for you to remain independent and in the community, and provide care management that includes face-to-face visits in your home.
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.

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.

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.