

DEPARTMENT OF MEDICAL ASSISTANCE SERVICES  
600 East Broad Street  
Richmond, VA 23219



COMMONWEALTH of VIRGINIA  
*Department of Medical Assistance Services*

<date>

John Q Sample  
1234 Any Street  
Any City, US 12345-6789

Dear John Q Sample:

**Our records show your Medicare starts soon.**

**When your Medicare starts, you will be automatically enrolled in a Medicare Health plan run by Medicaid <health plan>, the same company that provides your Commonwealth Coordinated Care Plus (CCC Plus) Medicaid coverage. This letter also tells you what to do if you do not want the same health plan for CCC Plus Medicaid and Medicare.**

You have choices for Medicare coverage. You can choose original Medicare (run by the government) or a Medicare Advantage plan (run by a health plan). If you choose a health plan for your Medicare benefits, you may get extra benefits that you do not get with original Medicare. To learn more about Medicare <health plan>, call <health plan phone number> for free. They can describe extra benefits and tell you if your providers are in their network.

Your CCC Plus health plan is Medicaid <health plan>. Your CCC Plus Medicaid enrollment will not end. Since you are eligible for Medicare, you will be automatically enrolled into the Medicare Advantage health plan. This Medicare Advantage plan is a Dual Eligible Special Needs Plan, or a "D-SNP." D-SNP plans are set up for people who have CCC Plus Medicaid and Medicare. They help you coordinate your CCC Plus and Medicare benefits. If you want to get your Medicare benefits from Medicare <health plan>, you do not have to do anything.

**Why enrolling in Medicare <health plan> is easier for you and your providers**

If you stay with Medicare <health plan> for your Medicare health plan, then they will:

- Help you with your Medicare and Medicaid benefits.
- Provide one number for you and your doctors to call for help with your services.

**If you do not want Medicare <health plan> as your Medicare health plan**

Medicare <health plan> will send you a letter in a few weeks before they enroll you in their health plan for your Medicare benefits. At that time, you can call or write to Medicare <health plan> to let them know you do not want them as your Medicare health plan. If you want to opt out today, call your health plan at <health plan phone number and times> or write to <health plan address>. You can enroll in a different Medicare Advantage plan or original Medicare with a Part D prescription drug plan.

**If you enroll in Medicare <health plan> but later change your mind**

You can change your Medicare health plan once every three months. You can enroll in a different Medicare plan or original Medicare.

**Getting Help**

If you would like to speak to someone about Medicare, please call Medicare toll-free at 1-800-633-4227, TTY 1-877-486-2048, 24 hours a day, 7 days a week or use the Medicare Plan Finder on [www.medicare.gov](http://www.medicare.gov). You can also contact the **Virginia Insurance Counseling and Assistance Program (VICAP)** at 1-800-552-3402. VICAP provides free, unbiased confidential information and assistance with you Medicare choices.

You might want to share this letter with someone you trust who knows your healthcare needs.

You can also get this information for free in other formats such as large print, audio or online at [cccplusva.com](http://cccplusva.com).