Chapter 10: Ending your membership in our   
Cal MediConnect plan

**Note: This version of Chapter 10 should be used by COHS plans**.

[Plans should refer members to other parts of the handbook using the appropriate chapter number, section, and/or page number. For example, "see Chapter 9, Section A, page 1." An instruction [plans may insert reference, as applicable] is listed next to each cross reference throughout the handbook.]

Table of Contents

[Introduction 2](#_Toc378781479)

[A. When can you end your membership in our Cal MediConnect plan? 2](#_Toc378781480)

[B. How do you end your membership in our Cal MediConnect plan? 3](#_Toc378781481)

[C. If you leave our Cal MediConnect plan, how do you get Medicare and Medi-Cal services? 3](#_Toc378781482)

[How you will get Medicare services 3](#_Toc378781483)

[How you will get Medi-Cal services 4](#_Toc378781484)

[D. Until your membership ends in our Cal MediConnect plan, you will keep getting your medical services and drugs through our plan 5](#_Toc378781485)

[E. Your membership in our Cal MediConnect plan will end in certain situations 5](#_Toc378781486)

[F. We *cannot* ask you to leave our Cal MediConnect plan for any reason related to your health 6](#_Toc378781487)

[G. You have the right to make a complaint if we end your membership in our plan 6](#_Toc378781488)

[H. Where can you get more information about ending your plan membership? 6](#_Toc378781489)

Introduction

This chapter tells about ways you can end your membership in our Cal MediConnect plan and your health coverage options after you leave the plan. You will still qualify for both Medicare and Medi-Cal benefits if you leave our plan.

# When can you end your membership in our Cal MediConnect plan?

You can end your membership in <plan name> at any time. Your membership will end on the last day of the month that we get your request to change your plan. For example, if we get your request on January 18, your coverage with our plan will end on January 31. Your new coverage will begin the first day of the next month.

When you end your membership in Cal MediConnect, you will continue to be enrolled in [insert sponsor name] for your Medi-Cal services. You can choose your Medicare enrollment options when you end your membership in our Cal MediConnect plan.

* For information on Medicare options when you leave our Cal MediConnect plan, see the table on page <page number> [plans may insert reference, as applicable].
* For information about your Medi-Cal services when you leave our Cal MediConnect plan, see page <page number> [plans may insert reference, as applicable].

These are ways you can get more information about how you can end your membership:

* Call Member Services at <phone number>.
* Call the California Health Insurance Counseling & Advocacy Program (HICAP) at [*insert local HICAP number*]*.*
* Call the Cal MediConnect Ombuds Program at 1-855-501-3077. [*Delete the following sentence in handbooks published after April 1, 2014:*] This number will be available on April 1, 2014.
* Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, seven days a week. TTY users should call 1-877-486-2048.

# How do you end your membership in our Cal MediConnect plan?

If you decide to end your membership in <plan name>:

* Call Member Services at <phone number>; OR
* Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, seven days a week. TTY users (people who are deaf, hard of hearing, or speech disabled) should call 1-877-486-2048. When you call 1-800-MEDICARE, you can also enroll in another Medicare health or drug plan. More information on getting your Medicare services when you leave our plan is in the chart on page <page number>.

# If you leave our Cal MediConnect plan, how do you get Medicare and Medi-Cal services?

If you leave <plan name>, you will go back to getting your Medicare and Medi-Cal services separately.

## How you will get Medicare services

You will have a choice about how you get your Medicare benefits.

You have three options for getting your Medicare services. By choosing one of these options, you will automatically end your membership in our Cal MediConnect plan.

|  |  |
| --- | --- |
| **1. You can change to:**  **A Medicare health plan, such as a Medicare Advantage plan or Programs of All-inclusive Care for the Elderly (PACE)** | **Here is what to do:**  Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, seven days a week. TTY users should call 1-877-486-2048 to enroll in the new Medicare-only health plan.  If you need help or more information:   * Call the California Health Insurance Counseling & Advocacy Program (HICAP) at [*insert local HICAP number*].   You will automatically be disenrolled from <plan name> when your new plan’s coverage begins. |
| **2. You can change to:**  **Original Medicare *with* a separate Medicare prescription drug plan** | **Here is what to do:**  Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, seven days a week. TTY users should call 1-877-486-2048.  If you need help or more information:   * Call the California Health Insurance Counseling & Advocacy Program (HICAP) at [*insert local HICAP number*].   You will automatically be disenrolled from <plan name> when your new plan’s coverage begins. |
| **3. You can change to:**  **Original Medicare *without* a separate Medicare prescription drug plan**  **NOTE**: If you switch to Original Medicare and do not enroll in a separate Medicare prescription drug plan, Medicare may enroll you in a drug plan, unless you tell Medicare you don’t want to join.  You should only drop prescription drug coverage if you get drug coverage from an employer, union or other source. If you have questions about whether you need drug coverage, call the California Health Insurance Counseling & Advocacy Program (HICAP) at [*insert local HICAP number*]*.* | **Here is what to do:**  Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, seven days a week. TTY users should call 1-877-486-2048.  If you need help or more information:   * Call the California Health Insurance Counseling & Advocacy Program (HICAP) at [*insert local HICAP number*].   You will automatically be disenrolled from <plan name>when your Original Medicare coverage begins. |

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## How you will get Medi-Cal services

If you leave our Cal MediConnect plan, you will continue to get your Medi-Cal services through [insert sponsor name].

Your Medi-Cal services include most long-term services and supports and behavioral health care. [Plans may add the specific Medi-Cal services they provide.]

When you end your membership with our CalMediConnect plan, you will get a new member ID card, a new Member Handbook, and a new Provider and Pharmacy Directory for your Medi-Cal coverage.

# Until your membership ends in our Cal MediConnect plan, you will keep getting your medical services and drugs through our plan

If you leave <plan name>, it may take time before your membership ends and your new Medicare and Medi-Cal coverage begins. See page <page number> [plans may insert reference, as applicable] for more information. During this time, you will keep getting your health care and drugs through our plan.

**You should use our network pharmacies to get your prescriptions filled.** Usually, your prescription drugs are covered only if they are filled at a network pharmacy[insert if applicable:including through our mail-order pharmacy services].

**If you are hospitalized on the day that your membership ends, your hospital stay will usually be covered by our Cal MediConnect plan until you are discharged.** This will happen even if your new health coverage begins before you are discharged.

# Your membership in our Cal MediConnect plan will end in certain situations

These are the cases when <plan name> must end your membership in the plan:

* If there is a break in your Medicare Part A and Part B coverage.
* If you no longer qualify for Medi-Cal. Our plan is for people who qualify for both Medicare and Medi-Cal. [Plans must insert rules for members who no longer meet special eligibility requirements.]
* If you move out of our service area.
* If you are away from our service area for more than six months. [Plans with visitor/traveler benefits should revise this bullet to indicate when members must be disenrolled from the plan.]
* If you move or take a long trip, you need to call Member Services to find out if the place you are moving or traveling to is in our plan’s service area.
* [Plans with visitor/traveler benefits, insert: See Chapter 4 [plans may insert reference, as applicable] for information on getting care when you are away from the service area through our plan’s visitor/traveler benefits.]
* If you go to prison.
* If you lie about or withhold information about other insurance you have for prescription drugs.

We can make you leave our plan for the following reasons only if we get permission from Medicare and Medi-Cal first:

* If you intentionally give us incorrect information when you are enrolling in our plan and that information affects your eligibility for our plan.
* If you continuously behave in a way that is disruptive and makes it difficult for us to provide medical care for you and other members of our plan.
* If you let someone else use your ID card to get medical care.
* If we end your membership because of this reason, Medicare may have your case investigated by the Inspector General.

# We *cannot* ask you to leave our Cal MediConnect plan for any reason related to your health

If you feel that you are being asked to leave our plan for a health-related reason, you should call Medicareat 1‑800‑MEDICARE (1‑800‑633‑4227). TTY users should call 1‑877‑486‑2048. You may call 24 hours a day, seven days a week.

You should also call the Cal MediConnect Ombuds Program at 1-855-501-3077. [*Delete the following sentence in handbooks published after April 1, 2014:*] This number will be available on April 1, 2014.

# You have the right to make a complaint if we end your membership in our plan

If we end your membership in our Cal MediConnect plan, we must tell you our reasons in writing for ending your membership. We must also explain how you can make a complaint about our decision to end your membership. You can also see Chapter 9 [plans may insert reference, as applicable] for information about how to make a complaint.

# Where can you get more information about ending your plan membership?

If you have questions or would like more information on when we can end your membership in Cal MediConnect, you can:

* Call Member Services at <phone number>.
  + - Call the California Health Insurance Counseling & Advocacy Program (HICAP) at [*insert local HICAP number*]*.*
* Call the Cal MediConnect Ombuds Program at 1-855-501-3077. [*Delete the following sentence in handbooks published after April 1, 2014:*] This number will be available on April 1, 2014.
* Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, seven days a week. TTY users should call 1-877-486-2048.