



## **Ending Your Membership in UCare's Minnesota Senior Health Options (MSHO)**

Ending your membership in our Plan may be **voluntary** (your own choice) or **involuntary** (not your own choice):

- You might leave our Plan because you have decided that you *want* to leave.
- There are also limited situations where we are required to end your membership. For example, if you move permanently out of our geographic service area.

### **Voluntarily ending your membership**

You can choose to disenroll from our Plan at anytime. You will be enrolled until the end of the month. To tell us you want to leave our Plan, you can write or fax a letter to us or fill out a disenrollment form and send it to Member Services or to our fax number at 612-884-2219. Be sure to sign and date your letter or form.

### **Until your membership ends, you must keep getting your health care services and prescription drugs through our Plan**

Your membership terminates at the end of the month in which your request to end your membership was made. While you are waiting for your membership to end, you are still a member and must continue to get your care and prescription drugs as usual through our Plan. Until your prescription drug coverage with our Plan ends, use our network pharmacies to fill your prescriptions. In most cases, your prescription drugs are covered only if they are filled at a network pharmacy including our mail-order pharmacy service, are listed on our formulary, and you follow coverage rules.

If you happen to be hospitalized on the day your membership ends, generally you will be covered by our Plan until you are discharged. Call Member Services for more information and to help us coordinate with your new plan.

### **What are my choices for receiving health care services if I leave the Plan?**

Our Plan currently provides both Medicare and Medical Assistance services. By disenrolling from our Plan, your coverage for Medicare and Medical Assistance services will change. In some cases you have choices to make.

### **Coverage for Medical Assistance**

If you choose to leave our Plan, you will be automatically enrolled in our Minnesota Senior Care Plus (MSC Plus) plan for your Medical Assistance services if our MSC Plus plan is offered in your county. You can ask in writing to be enrolled in the MSC Plus plan you were enrolled in before our MSHO enrollment. If our Plan does not have an MSC Plus plan in your county, you will be enrolled in the MSC Plus plan that is available in your county. Contact your county financial worker if you have questions.

If you currently have a medical spenddown and you choose to leave our Plan, your Medical Assistance will be provided fee-for-service. You will not be enrolled in another health plan for Medical Assistance services.

**We cannot ask you to leave the Plan because of your health.**

We *cannot* ask you to leave the Plan for any health-related reasons. If you ever feel that you are being encouraged or asked to leave our Plan because of your health, you should call 1-800-MEDICARE (1-800-633-4227), which is the national Medicare help line. TTY users should call 1-877-486-2048. You may call 24 hours a day, seven days a week.

**Involuntarily ending your membership**

If any of the following situations occur, we will end your membership in our Plan.

- If you lose eligibility for Medical Assistance – If you have Medicare and lose eligibility for Medical Assistance, our Plan will continue to provide plan benefits for up to three months. If after three months you have not regained Medical Assistance, coverage with our Plan will end. You will need to choose a new Part D plan in order to continue getting coverage for Medicare-covered drugs.
- If you move out of the service area or are away from the service area for more than six (6) months in a row you cannot remain a member of our Plan and we must end your membership (“disenroll” you). If you plan to move or take a long trip, please call Member Services to find out if the place you are moving to or traveling to is in our Plan’s service area.
- If you do *not* stay continuously enrolled in Medicare Parts A and B.
- If you knowingly falsify or withhold information about other parties that provide reimbursement for your Part D prescription coverage.
- If you intentionally give us incorrect information on your enrollment request that would affect your eligibility to enroll in our Plan.
- If you behave in a way that is disruptive, to the extent that your continued enrollment seriously impairs our ability to arrange or provide medical care for you or for others who are members of our Plan. We cannot make you leave our Plan for this reason unless we get permission first from Medicare.
- If you let someone else use your plan membership card to get medical care. If you are disenrolled for this reason, CMS may refer your case to the Inspector General for additional investigation.

**You have the right to make a complaint if we end your membership in our Plan**

If we end your membership in our Plan, we will tell you our reasons in writing and explain how you may file a complaint against us if you want to.