2018 ANNUAL NOTICE OF CHANGES



Important changes to your plan

UnitedHealthcare Connected® for MyCare Ohio (Medicare-Medicaid Plan)

- Toll-Free 1-877-542-9236, TTY 711 8 a.m. – 8 p.m. local time, Monday – Friday (voicemail available 24 hours a day/7 days a week)
- www.UHCCommunityPlan.com www.myuhc.com/CommunityPlan

Do we have the right address for you?

Please let us know so we can keep you informed about your plan.





UnitedHealthcare Connected® for MyCare Ohio (Medicare-Medicaid Plan) offered by UnitedHealthcare.

Annual Notice of Changes for 2018



You are currently enrolled as a member of UnitedHealthcare Connected® for MyCare Ohio.

Next year, there will be some changes to the plan's benefits, coverage, rules, and costs. This Annual Notice of Changes tells you about the changes.

You can end your membership in UnitedHealthcare Connected® for MyCare Ohio at any time.

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If you have questions, please call UnitedHealthcare Connected® for MyCare Ohio at 1-877-542-9236 (TTY 711), 8 a.m. – 8 p.m. local time, Monday – Friday (voicemail available 24 hours a day/7 days a week). If you need to speak to your care manager, please call 1-800-542-8630, 24 hours a day/7 days a week. These calls are free. For more information, visit www.UHCCommunityPlan.com.

A. Think about Your Medicare and Medicaid Coverage for Next Year

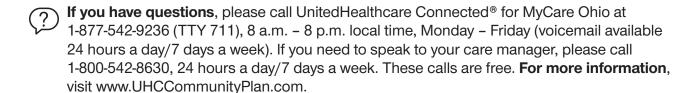
It is important to review your coverage now to make sure it will still meet your needs next year. If it does not meet your needs, you can leave the plan at any time.

If you leave our plan, you will still be in the Medicare and Medicaid programs as long as you are eligible.

- You will have a choice about how to get your Medicare benefits (go to page 11 to see your choices).
- You must receive your Medicaid benefits from one of the MyCare Ohio managed care plans available in our region (go to page 13 for additional information).

Additional Resources

- If you speak Spanish, language assistance services, free of charge, are available to you. Call 1-877-542-9236 (TTY 711), 8 a.m. 8 p.m. local time, Monday Friday (voicemail available 24 hours a day/7 days a week). The call is free.
- Si habla español, hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al 1-877-542-9236 (TTY 711), de lunes a viernes, de 8 a.m. a 8 p.m., hora local (correo de voz disponible las 24 horas del día, los 7 días de la semana). La llamada es gratuita.
- If you speak Somali, language assistance services, free of charge, are available to you. Call 1-877-542-9236 (TTY 711), 8 a.m. 8 p.m. local time, Monday Friday (voicemail available 24 hours a day/7 days a week). The call is free.
- Haddii aad ku hadasho Soomaali, adeegyada taageerada luqadda, oo bilaasha ah, ayaad heli kartaa. Wac 1-877-542-9236 (TTY 711), 8 subaxnimo – 8 habeenimo waqtiga deegaanka, Isniin – Jimce (fariin cod ah ayaa la heli karaa 24 saac maalintii/7 maalmood toddobaadkii). Wicitaanku waa bilaash.
- You can get this Annual Notice of Changes for free in other formats, such as large print, braille or audio. Call 1-877-542-9236 (TTY 711), 8 a.m. 8 p.m., local time, Monday Friday (voicemail available 24 hours a day/7 days a week). The call is free.
- You can call Member Services and ask us to make a note in our system that you would like this document in Spanish, large print, braille, or audio now and in the future.



About UnitedHealthcare Connected® for MyCare Ohio

- UnitedHealthcare Community Plan of Ohio, Inc. is a health plan that contracts with both Medicare and Ohio Medicaid to provide benefits of both programs to enrollees. It is for people with both Medicare and Medicaid.
- Coverage under UnitedHealthcare Connected® for MyCare Ohio qualifies as minimum essential coverage (MEC). It satisfies the Patient Protection and Affordable Care Act's (ACA) individual shared responsibility requirement. Please visit the Internal Revenue Service (IRS) website at https://www.irs.gov/Affordable-Care-Act/Individuals-and-Families for more information on the individual shared responsibility requirement for MEC.
- This UnitedHealthcare Connected® for MyCare Ohio plan is offered by UnitedHealthcare Community Plan of Ohio, Inc. When this Annual Notice of Changes says "we," "us," or "our," it means UnitedHealthcare Community Plan of Ohio, Inc. When it says "the plan" or "our plan," it means UnitedHealthcare Connected® for MyCare Ohio.

Disclaimers

Limitations, copays, and restrictions may apply. For more information, call UnitedHealthcare Connected® for MyCare Ohio Member Services. This means that you may have to pay for some services and that you need to follow certain rules to have UnitedHealthcare Connected® for MyCare Ohio pay for your services.

The List of Covered Drugs and/or pharmacy and provider networks may change throughout the year. We will send you a notice before we make a change that affects you.

Benefits and/or copays may change on January 1 of each year.

Copays for prescription drugs may vary based on the level of Extra Help you get. Please contact the plan for more details.



Important things to do:

Check if there are any changes to our benefits that may affect you. Are there any changes that affect the services you use? It is important to review benefit changes to make sure they will work for you next year. Look in section C for information about benefit changes for our plan.
Check if there are any changes to our prescription drug coverage that may affect you. Will your drugs be covered? Are they in a different cost-sharing tier? Can you continue to use the same pharmacies? It is important to review the changes to make sure our drug coverage will work for you next year. Look in section C for information about changes to our drug coverage.
Check to see if your providers and pharmacies will be in our network next year. Are your doctors in our network? What about your pharmacy? What about the hospitals or other providers you use? Look in section B for information about our Provider and Pharmacy Directory.
Think about your overall costs in the plan. How much will you spend out-of-pocket for the prescription drugs you use regularly? How do the total costs compare to other coverage options?
Think about whether you are happy with our plan.

If you decide to stay with UnitedHealthcare Connected® for MyCare Ohio:

If you want to stay with us next year, it's easy - you don't need to do anything. If you don't make a change, you will automatically stay enrolled in our plan.

If you decide to change plans:

If you decide other coverage will better meet your needs, you can switch plans at any time. If you enroll in a new plan, your new coverage will begin on the first day of the following month. Look in section D, page 11 to learn more about your choices.



B. Changes to the Network Providers and Pharmacies

Our provider and pharmacy networks have changed for 2018.

We strongly encourage you to review our current Provider and Pharmacy Directory to see if your providers or pharmacy are still in our network.

An updated Provider and Pharmacy Directory is located on our website at www.UHCCommunityPlan.com. You may also call Member Services at 1-877-542-9236 (TTY 711) for updated provider information or to ask us to mail you a *Provider and Pharmacy Directory*.

It is important that you know that we may also make changes to our network during the year. If your provider does leave the plan, you have certain rights and protections. For more information, see Chapter 3 of your *Member Handbook*.



C. Changes to Benefits and Costs for Next Year

Changes to Benefits for Medical Services

We are changing our coverage for certain medical services next year. The following table describes these changes.

	2017 (This year)	2018 (Next year)
Diabetic Services	The plan covers the following brands of blood glucose monitors and test strips: OneTouch Ultra® 2 System, OneTouch Ultra Mini®, OneTouch Verio®, OneTouch Verio® Sync, OneTouch Verio® IQ, OneTouch Verio® Flex System Kit, ACCU-CHEK® Nano SmartView, ACCU-CHEK® Aviva Plus"	The plan covers the following brands of blood glucose monitors and test strips: OneTouch® Ultra® 2, OneTouch® UltraMini®, OneTouch® Verio®, OneTouch® Verio® IQ, OneTouch® Verio® Flex™, ACCU-CHEK® Guide, ACCU-CHEK® Aviva Plus, ACCU-CHEK® Nano SmartView, ACCU-CHEK® Aviva Connect"

Changes to Prescription Drug Coverage

Changes to our Drug List

We sent you a copy of our 2018 List of Covered Drugs in this envelope. The List of Covered Drugs is also called the "Drug List."

We made changes to our Drug List, including changes to the drugs we cover and changes to the restrictions that apply to our coverage for certain drugs.

Review the Drug List to make sure your drugs will be covered next year and to see if there will be any restrictions.



If you are affected by a change in drug coverage, we encourage you to:

- Work with your doctor (or other prescriber) to find a different drug that we cover. You can call Member Services at 1-877-542-9236 (TTY 711), 8 a.m. 8 p.m. local time, Monday Friday (voicemail available 24 hours a day/7 days a week), to ask for a list of covered drugs that treat the same condition. This list can help your provider find a covered drug that might work for you.
- Ask the plan to cover a temporary supply of the drug. In some situations, we will cover a one-time, temporary supply of the drug during the first 90 days of the calendar year. This temporary supply will be for at least 30 days. (To learn more about when you can get a temporary supply and how to ask for one, see Chapter 5 of the Member Handbook.) When you get a temporary supply of a drug, you should talk with your doctor to decide what to do when your temporary supply runs out. You can either switch to a different drug covered by the plan or ask the plan to make an exception for you and cover your current drug. A new formulary exception needs to be submitted every year. If you or your prescriber believes your health may be harmed by waiting 72 hours, you can ask for an expedited exception and we will give you an answer within 24 hours after we get your prescriber's supporting statement.

Changes to prescription drug costs

There are two payment stages for your Medicare Part D prescription drug coverage under UnitedHealthcare Connected® for MyCare Ohio. How much you pay depends on which stage you are in when you get a prescription filled or refilled. These are the two stages:

Stage 1 Initial Coverage Stage	Stage 2 Catastrophic Coverage Stage
During this stage, the plan pays part of the costs of your drugs, and you pay your share. Your share is called the copay.	During this stage, the plan pays all of the costs of your drugs through December 31, 2018.
You begin this stage when you fill your first prescription of the year.	You begin this stage when you have paid a certain amount of out-of-pocket costs.



Stage 1: "Initial Coverage Stage"

During the Initial Coverage Stage, the plan pays a share of the cost of your covered prescription drugs, and you pay your share. Your share is called the copay. The copay depends on what cost-sharing tier the drug is in and where you get it. You will pay a copay each time you fill a prescription. If your covered drug costs less than the copay, you will pay the lower price.

The following table shows your costs for drugs in each of our 3 drug tiers. These amounts apply only during the time when you are in the Initial Coverage Stage.

	2017 (This year)	2018 (Next year)
Drugs in Tier 1 (Generic Drugs) Cost for a one-month supply of a drug in Tier 1 that is filled at a network pharmacy	Your copay for a one month (30-day) supply is \$0 - \$3.30 per prescription (depending on income level)	Your copay for a one month (30-day) supply is \$0 – \$3.35 per prescription (depending on income level)
Drugs in Tier 2 (Brand Drugs) Cost for a one-month supply of a drug in Tier 2 that is filled at a network pharmacy	Your copay for a one month (30-day) supply is \$0 - \$8.25 per prescription (depending on income level)	Your copay for a one month (30-day) supply is \$0 – \$8.35 per prescription (depending on income level)
Drugs in Tier 3 (OTC/Non-Part-D Drugs) Cost for a one-month supply of a drug in Tier 3 that is filled at a network pharmacy	Your copay for a one month (30-day) supply is \$0 per prescription.	Your copay for a one month (30-day) supply is \$0 per prescription.

The Initial Coverage Stage ends when your total out-of-pocket costs reach \$5,000. At that point the Catastrophic Coverage Stage begins. The plan covers all your drug costs from then until the end of the year.

Stage 2: "Catastrophic Coverage Stage"

When you reach the out-of-pocket limit for your prescription drugs, the Catastrophic Coverage Stage begins. You will stay in the Catastrophic Coverage Stage until the end of the calendar year.



D. Deciding Which Plan to Choose

If You Want to Stay in UnitedHealthcare Connected® for MyCare Ohio

We hope to keep you as a member next year.

To stay in our plan you don't need to do anything. If you do not sign up for a different MyCare Ohio Plan, change to a Medicare Advantage Plan, or change to Original Medicare, your enrollment in UnitedHealthcare Connected® for MyCare Ohio will automatically stay the same for 2018.

If You Want to Join a Different MyCare Ohio Plan

If you want to keep getting your Medicare and Medicaid benefits together from a single plan, you can join another MyCare Ohio plan available in your region.

To enroll in a different MyCare Ohio plan, call the Ohio Medicaid Hotline at 1-800-324-8680, Monday through Friday from 7 a.m. – 8 p.m. and Saturday from 8 a.m. – 5 p.m. TTY users should call the Ohio Relay Service at 7-1-1.

The Hotline will let you know what other plans are available to you.

If You Want to Change your Membership in UnitedHealthcare Connected® for MyCare Ohio

You can change your membership in our plan by choosing to get your Medicare services separately (you will stay in our plan for your Medicaid services).

How you will get Medicare services

You have three options for getting your Medicare services. By choosing one of these options, you will automatically stop getting Medicare services from our plan.



1. You can change to:

A Medicare health plan (such as a Medicare Advantage 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 Ohio Medicaid Hotline at 1-800-324-8680, Monday through Friday from 7 a.m. – 8 p.m. and Saturday from 8 a.m. – 5 p.m. TTY users should call the Ohio Relay Service at 7-1-1.

You will automatically stop getting Medicare services through UnitedHealthcare Connected® for MyCare Ohio 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 Ohio Medicaid Hotline at 1-800-324-8680, Monday through Friday from 7 a.m. – 8 p.m. and Saturday from 8 a.m. – 5 p.m. TTY users should call the Ohio Relay Service at 7-1-1.

You will automatically stop getting Medicare Services through UnitedHealthcare Connected® for MyCare Ohio when your Original Medicare and prescription drug plan 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 your Ohio Medicaid Hotline at 1-800-324-8680 (TTY 7-1-1).

Here is what to do:

Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

If you need help or more information:

 Call the Ohio Medicaid Hotline at 1-800-324-8680, Monday through Friday from 7 a.m. – 8 p.m. and Saturday from 8 a.m. – 5 p.m. TTY users should call the Ohio Relay Service at 7-1-1.

You will automatically stop getting Medicare services through UnitedHealthcare Connected® for MyCare Ohio when your Original Medicare coverage begins.

How you will get Medicaid services

You must get your Medicaid benefits from a MyCare Ohio plan. Therefore, even if you don't want to get your Medicare benefits through a MyCare Ohio plan, you must still get your Medicaid benefits from UnitedHealthcare Connected® for MyCare Ohio or another MyCare Ohio managed care plan.

If you do not enroll in a different MyCare Ohio plan, you will remain in our plan to get your Medicaid services.

Your Medicaid services include most long-term services and supports and behavioral health care. Once you stop getting Medicare services through our plan, you will get a new Member ID Card and a new Member Handbook for your Medicaid services.

If you want to switch to a different MyCare Ohio plan to get your Medicaid benefits, call the Ohio Medicaid Hotline at 1-800-324-8680, Monday through Friday from 7 a.m. – 8 p.m. and Saturday from 8 a.m. – 5 p.m. TTY users should call the Ohio Relay Service at 7-1-1.



E. Getting help

Getting Help from UnitedHealthcare Connected® for MyCare Ohio

Questions? We're here to help. Please call Member Services at 1-877-542-9236 (TTY only, call 711). We are available for phone calls 8 a.m. – 8 p.m. local time, Monday – Friday (voicemail available 24 hours a day/7 days a week).

Read your 2018 Member Handbook

The 2018 Member Handbook is the legal, detailed description of your plan benefits. It has details about next year's benefits and costs. It explains your rights and the rules you need to follow to get covered services and prescription drugs.

An up-to-date copy of the *2018 Member Handbook* is always available on our website at www.UHCCommunityPlan.com. You may also call Member Services at 1-877-542-9236 (TTY 711) to ask us to mail you a *2018 Member Handbook*.

Visit our website

You can also visit our website at www.UHCCommunityPlan.com. As a reminder, our website has the most up-to-date information about our provider and pharmacy network (*Provider and Pharmacy Directory*) and our Drug List (*List of Covered Drugs*).

Getting Help from the Ohio Medicaid Hotline

The Ohio Medicaid hotline can help you find a Medicaid health care provider, explain Medicaid covered services, obtain Medicaid brochures and publications, and understand Medicaid benefits.

You can call the Ohio Medicaid Hotline at 1-800-324-8680, Monday through Friday from 7 a.m. – 8 p.m. and Saturday from 8 a.m. – 5 p.m. TTY users should call the Ohio Relay Service at 7-1-1.

Getting Help from MyCare Ohio Ombudsman

The MyCare Ohio Ombudsman can help you if you are having a problem with UnitedHealthcare Connected® for MyCare Ohio. The MyCare Ohio Ombudsman is not connected with us or with any insurance company or health plan. The MyCare Ohio Ombudsman helps with concerns about any aspect of care. Help is available to resolve disputes with providers, protect rights, and file complaints or appeals with our plan. The MyCare Ohio Ombudsman works together with the Office of the State Long-term Care Ombudsman, which advocates for consumers getting long-term services and supports.



The phone number for the MyCare Ohio Ombudsman is 1-800-282-1206. TTY users should call 1-800-750-0750. The MyCare Ohio Ombudsman is available Monday through Friday from 8 a.m. – 5 p.m. The services are free.

Getting Help from Medicare

To get information directly from Medicare:

Call 1-800-MEDICARE (1-800-633-4227).

You can call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

Visit the Medicare Website

You can visit the Medicare website (http://www.medicare.gov). If you choose to disenroll from your Medicare-Medicaid Plan and enroll in a Medicare Advantage plan, the Medicare website has information about costs, coverage, and quality ratings to help you compare Medicare Advantage plans. You can find information about Medicare Advantage plans available in your area by using the Medicare Plan Finder on the Medicare website. (To view the information about plans, go to http://www.medicare.gov and click on "Find health & drug plans.")

Read Medicare & You 2018

You can read the *Medicare & You 2018* handbook. Every year in the fall, this booklet is mailed to people with Medicare. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare. If you don't have a copy of this booklet, you can get it at the Medicare website (http://www.medicare.gov) or by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.





UnitedHealthcare Connected® for MyCare Ohio (Medicare-Medicaid Plan) Member Services:

Call 1-877-542-9236

Calls to this number are free. 8 a.m. – 8 p.m. local time, Monday – Friday (voicemail available 24 hours a day/7 days a week). Member Services also has free language interpreter services available for non-English speakers.

TTY **711**

Calls to this number are free. 8 a.m. – 8 p.m. local time, Monday – Friday (voicemail available 24 hours a day/7 days a week).

Write UnitedHealthcare Community Plan of Ohio, Inc. 9200 Worthington Rd. 3rd Floor Westerville, OH 43082

Website www.UHCCommunityPlan.com www.myuhc.com/CommunityPlan