

MyCare Ohio

Connecting Medicare + Medicaid

MyCare Ohio: What You Need to Know

MyCare Ohio is a managed care program designed for Ohioans who receive **BOTH** Medicaid and Medicare benefits.

The State of Ohio works closely with the federal government to improve the way healthcare services are provided by these programs. Through the health plan **YOU** choose, you receive all the medical, behavioral, and long-term services and supports you need.

These questions will help you learn more about MyCare Ohio:

1 Q: I receive my healthcare 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 full Medicaid services and Medicare parts A, B and D.

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

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 your chosen MyCare Ohio plan.

Choosing to receive both your Medicaid and Medicare benefits through your MyCare Ohio plan will provide you the following benefits:

- One care coordinator for both your Medicaid and Medicare benefits.
- One organization responsible for both your Medicaid and Medicare benefits.
- You only receive communications from one organization, alleviating confusion.
- If you need to appeal a denial, you only need to contact one organization.

2 Q: What will happen if I do not select a MyCare Ohio plan?

A: If you do not make a choice, Ohio Department of Medicaid will select a MyCare Ohio plan for you.

3 Q: What is my role in healthcare decisions?

A: YOU are in charge of your healthcare. 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 healthcare.
- 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.

4 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.

5 Q: How will MyCare Ohio improve my healthcare?

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 healthcare needs.

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

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Q: How does MyCare Ohio work?

A: Once you are enrolled in the MyCare Ohio plan, you will get a welcome letter and your member identification card in the mail.

The MyCare Ohio plan will supply you with a member handbook that will assist you with understanding your benefits.

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.