

<Date>

<Barcode> <Letter Code>
<Name>
<Address>
<City>, <State>, <Zip>

You will be in <FIDA Plan> on <effective date>.

Dear <Member Name>:

<CIN>

On <effective date>, you will be enrolled in <FIDA Plan>. As of this date, you will get all your Medicaid and Medicare services through <FIDA Plan>. New York State and the federal government created this type of health and long-term care plan to make it easier for you to get the services you need. Be sure to read this letter carefully.

What is a FIDA plan?

- It is a type of plan that covers all health, long-term care, and Medicare Part D drug benefits. This means that you will be able to get all of your medical care like doctor and hospital visits, long-term care like home care, and medicines – all from one plan.
- A team of doctors and specialists will provide the most complete care for you. Why? Because they will have more time to spend with you and share with each other their expert opinions about the care you need.
- A dedicated person ("Care Manager") will work with you to schedule your doctor's appointments, arrange transportation and help you get your medicine.
- A FIDA plan will *not* cost you more than what you pay today for your care. You will *not* pay deductibles, premiums, or copayments/coinsurance.
- Learning about your benefits will be easier: for all questions, you will call one phone number. So you will no longer need to make separate calls to 1-800 Medicare, your Medicare health or drug plan, and your current Medicaid plan about your coverage.

Before you decide:

- Read this letter carefully before making any decisions;
- Share this letter with your family or the people who help you make choices about your health care;
- Call New York Medicaid Choice at 1-855-600-3432 or the Independent Consumer Advocacy Network (ICAN) at 1-844-614-8800 to learn about FIDA plans and your options.

What are my choices?

- **Join a FIDA plan now.** Call New York Medicaid Choice at 1-855-600-3432 to sign up.
- **Do nothing.** We will move you from <current MLTC plan> to <FIDA Plan>, and your new coverage will start on <effective date>. <FIDA Plan> will send you a new card to use for all of your medical care and medicines. This new card will replace the cards you use now.
- **Stay in the Medicare and Medicaid programs you have now.** Call New York Medicaid Choice by <date>. Tell them that you do not want to be in a FIDA plan (you want to "opt out").

What are my choices after I join a FIDA plan?

- You will be able to change your FIDA plan for any reason and at any time.
- You will have the right to go back, at any time, to your previous Medicaid plan, Original Medicare and a Medicare Part D drug plan.

Will I get a letter from Medicare Part D?

You will get a letter from your current Medicare health or Part D prescription drug plan. The letter says that on <effective date> you will stop getting your prescription drugs through that plan. This is because <FIDA plan> will cover all the medicines that you get now through your current Medicare health or Part D plan. <FIDA Plan> will become your new Medicare Part D plan starting <effective date>.

Can someone help me understand this letter?

If you have questions about this letter, please call the Independent Consumer Advocacy Network (ICAN) at 1-844-614-8800.

Thank you,
New York Medicaid Choice

FIDA plans available in your county. (NEW YORK CITY VERSION)

Please see, in the left column below, a list of FIDA plans available in your county. For your convenience, we included, in the right column, short versions of corresponding MLTC plan names.

FIDA PLAN	MLTC/MAP/PACE PLAN
Aetna Better Health FIDA Plan	Aetna
AgeWell New York FIDA	AgeWell
AlphaCare Signature FIDA Plan	AlphaCare
HealthPlus Amerigroup FIDA Plan	HealthPlus/Amerigroup
ArchCare Community Advantage FIDA Plan	Archcare
CenterLight Healthcare FIDA Plan	CenterLight
FIDA Care Complete	Centers Plan
Elderplan FIDA Total Care	Elderplan/HomeFirst
RiverSpring FIDA Plan	ElderServe
Fidelis Care FIDA Plan	Fidelis
GuildNet Gold Plus FIDA Plan	GuildNet
Healthfirst AbsoluteCare FIDA Plan	HealthFirst/Senior Health Partners
EmblemHealth Dual Assurance FIDA Plan	EmblemHealth/HIP
ICS Community Care Plus FIDA MMP	ICS/Independence Care System
Integra FIDA Plan	Integra
MetroPlus FIDA Plan	MetroPlus
North Shore-LIJ FIDA LiveWell	North Shore
SWH Whole Health FIDA	Senior Whole Health
VillageCareMAX Full Advantage FIDA Plan	VillageCare
VNSNY Choice FIDA Complete	VNS/VNS
WellCare Advocate Complete FIDA	WellCare

NYLAG NOTE: See next page for NASSAU COUNTY LIST

FIDA plans available in your county. (NASSAU COUNTY VERSION)

Please see, in the left column below, a list of FIDA plans available in your county. For your convenience, we included, in the right column, short versions of corresponding MLTC plan names.

FIDA Plan	MLTC/MAP/PACE PLAN
Aetna Better Health FIDA Plan	Aetna
AgeWell New York FIDA	AgeWell
CenterLight Healthcare FIDA Plan	CenterLight
Elderplan FIDA Total Care	Elderplan/HomeFirst
RiverSpring FIDA Plan	ElderServe
Fidelis Care FIDA Plan	Fidelis
GuildNet Gold Plus FIDA Plan	GuildNet
Healthfirst AbsoluteCare FIDA Plan	HealthFirst/Senior Health Partners
EmblemHealth Dual Assurance FIDA Plan	EmblemHealth/HIP
Integra FIDA Plan	Integra
North Shore-LIJ FIDA LiveWell	North Shore
VNSNY Choice FIDA Complete	VNS/VNS
WellCare Advocate Complete FIDA	WellCare

Questions?

New York Medicaid Choice

For questions about FIDA program and your Medicaid benefits

Call: 1-855-600-3432
TTY users: 1-888-329-1541
A free interpreter: 1-855-600-3432

Monday-Friday, 8:30 am – 8:00 pm
Saturday, 10:00 am – 6:00 pm

The call and the help are free.

Online: www.nymedicaidchoice.com

Medicare

For questions about your Medicare benefits

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

The call and the help are free.

Online: www.medicare.gov

Independent Consumer Advocacy Network (ICAN)

For questions about your rights

Call: 1-844-614-8800
A free interpreter: 1-844-614-8800

Monday-Friday, 8:00 am – 8:00 pm

The call and the help are free.

Online: www.icannys.org

English

This is an important document. If you need help to understand it, please call 1-855-600-3432. We can give you an interpreter for free.

Español

Spanish

Éste es un documento importante. Si necesita ayuda para entenderlo, por favor llame al 1-855-600-3432. Le proporcionaremos un intérprete gratuito.

繁體字

Traditional Chinese

這是一份重要文件, 如果您需要翻譯服務閱讀此文件, 請撥打電話至 1-855-600-3432. 該項服務免費。

Kreyòl Ayisyen

Haitian Creole

Sa a se yon dokiman enpòtan. Si ou bezwen èd pou konprann li, tanpri rele: 1-855-600-3432. Y ap ba ou yon entèprèt gratis.

Italiano

Italian

Il presente documento è importante. Per qualsiasi chiarimento può chiamare il numero 1-855-600-3432. Un interprete sarà disponibile gratuitamente.

한국어

Korean

이것은 중요한 문서입니다. 문서를 이해하는 데 있어 도움이 필요하시면, 연락해 주십시오: 1-855-600-3432. 무료통역이 제공됩니다.

Русский

Russian

Это важный документ. Если Вам нужна помощь для понимания этого документа, позвоните по телефону 1-855-600-3432. Переводчик предоставляется бесплатно.

NOT YET UPDATED

New York

30-day

Medicaid Choice

New York State's Medicaid managed care enrollment program

1-855-600-FIDA

Ask • Choose • Enroll

P.O. Box XXXX, New York, NY 10274-

XXXX

<Date>

<Barcode> <Letter Code>

<Name>

<Address>

<City>, <State>, <Zip>

Dear <Consumer Name>:

<CIN>

You will be enrolled into <Plan name> on <Effective date>!

We are writing to remind you that New York State would be enrolling you into <FIDA Plan>, one of the new Fully Integrated Duals Advantage (FIDA) Plans available in New York beginning on <effective date> unless you chose a different plan or told us you didn't want to join any FIDA Plan. We are writing now to tell you that unless you choose a different FIDA Plan or choose not to participate in FIDA at all, you will be enrolled into <plan name> on <effective date>.

FIDA promotes your health and your goal to live independently. FIDA is for eligible adults age 21 and older who have disabilities or long term health problems and who have both Medicare and Medicaid. The FIDA program will bring together your Medicare and Medicaid benefits and will cover additional services. The goal of FIDA is to make it easier for you to receive the complete care you need. Through FIDA, you can choose a managed care plan (a FIDA Plan) to provide all your Medicare and Medicaid items, services, and drugs. FIDA Plans cover all the health care, the community-based or facility-based long term services, and supports, and drugs that you get now or that you might need. You will continue to have access to everything you have now plus additional items and services you don't have now.

How will I get my items, services, and drugs once I join the FIDA Plan?

- Starting <start date>, you must see providers from <Plan> for all your services. You will also go to the plan's pharmacy to get your medicines.
- You will have a Care Manager who will lead your Interdisciplinary Team (IDT). This IDT is a team of you, your chosen representatives, and your providers who will work with you to authorize many of your services and to develop your new Person-Centered Service Plan.
 - Your Person-Centered Service Plan should be in place no later than <90 days from date of enrollment>.
 - The Interdisciplinary Team (IDT) arranges and approves many of your covered items and services, with some exceptions that are outlined in your Participant Handbook.

- <Plan> will pay for your covered items and services from the plan’s network of providers.
- If you need to see a provider who isn’t in <plan>, you must obtain “prior authorization” from your Interdisciplinary Team so that <plan name > will cover your items and services from the provider who isn’t in <plan name>. Prior authorization means your Interdisciplinary Team or <plan name > gives you advanced permission to see a provider who isn’t in <plan name >.
 - At any time, you may go to providers outside your plan when you need certain services, like urgent or emergency care, out-of-area dialysis or family planning. You may also go to providers outside of <Plan> when <Plan> says this is ok.
- Because you are new to <plan name >, you will have a transition period until at least <date> during which time:
 - you won’t need prior authorization for services you are already receiving at the time you join <Plan>;
 - you may use providers who aren’t in <plan> if you have already been seeing them at the time you join <Plan>; and
 - you may continue to use prescription drugs and other medications you are using at the time you join <Plan>.

How much will I have to pay for items, services, or drugs once I join the FIDA Plan?

You do not have to pay a plan premium, deductible, or copayments when getting covered items, services, or prescription drug coverage and other medications through <Plan>.

FIDA and Medicare Part D

You may have received a letter from your current Medicare Part D prescription drug plan telling you that beginning <effective date>, your prescription drug plan won’t cover your prescription drugs. That is because you are being enrolled in a new health care and drug plan. Your FIDA Plan will become your new Medicare Part D plan, which means your last day of coverage in your current prescription drug plan will be <1 day prior to effective date>. You cannot keep your current Part D plan and be in a FIDA Plan at the same time. You will continue to receive your prescription drug benefits from your current plan through <1 day prior to effective date>. Your new prescription coverage from the FIDA Plan will start on <effective date>. There will be no gap in your prescription drug coverage.

You will start with your new FIDA Plan on <effective date>

If you want to join <Plan>, you do not have to do anything. You will be automatically enrolled in the plan. Look in the mail for a welcome letter and other information from the plan.

Call New York Medicaid Choice to find out more about <Plan>. New York Medicaid Choice helps the state with FIDA Plan enrollments. Call 1-855-600-FIDA. TTY users can call 1-888-329-1541. Counselors will go over the items, services, and drugs that the plan will cover. They can also tell you if your providers work with the Plan. The call and the assistance are free.

You have other options

If you want to choose another FIDA Plan, you must call New York Medicaid Choice at 1-855-600-FIDA before <INSERT: voluntary enrollment cutoff date, 20th day of the month preceding the passive enrollment effective date>. When you call, New York Medicaid Choice’s counselors can help you review your other FIDA Plan options.

If you do not want to join <Plan> and want to remain in your current Medicare and Medicaid programs, please call New York Medicaid Choice at 1-855-600-FIDA, Monday to Friday from 8:30 am to 8:00 pm and Saturday from 10:00 am to 6:00 pm. TTY users can call 1-888-329-1541. Tell New York Medicaid Choice that you don’t want to be enrolled into FIDA by <Date - day before the effective date>. They can help you keep your current coverage.

If you have questions about Medicare or need help with your Medicare options, call 1-800-MEDICARE (1-800-633-4227) 24 hours a day, 7 days a week or visit www.medicare.gov. TTY users should call 1-877-486-2048. The call and the assistance are free.

Review all of your options carefully before making any decisions about your health care coverage. To talk about your options, call 1-855-600-FIDA. We recommend that you share this letter with your family or the persons who help you make your service choices. The call and the assistance are free.

Thank you,
New York Medicaid Choice

QUESTIONS?

Call: 1-855-600-FIDA
(TTY users: 1-888-329-1541)

Monday-Friday, 8:30 am – 8:00 pm
Saturday, 10:00 am – 6:00 pm

New York Medicaid Choice

We have free interpreter services to answer any question you may have about the FIDA program. To get an interpreter, just call us at 1-855-600-FIDA.
(TTY users: 1-888-329-1541)

- Spanish
- Russian
- Chinese
- Italian
- Haitian-Creole
- Korean

New York Medicaid Choice

The FIDA booklet is also in Braille and large-print edition. To get a copy, please call 1-855-600-FIDA. (TTY users: 1-888-329-1541)

- Spanish
- Russian
- Chinese
- Italian
- Haitian-Creole
- Korean