



JOHN OR JANE SAMPLE  
1234 SAMPLE STREET  
ANYTOWN CA 90000

## Your Medi-Cal Benefits are Changing

Dear [Member Name]:

This letter is about your health benefits. There is a change in your health coverage. You will now get your health care through a **Medi-Cal health plan**.

We sent you a *My Medi-Cal Choice* packet in early January. The packet tells how to choose a Medi-Cal health plan. If you do not choose a Medi-Cal health plan by **March 1, 2020**, we will enroll you in these plans:

<b>Name:</b>	<b>Health Plan:</b>	<b>Dental Plan:</b>	<b>Start Date:</b>
<Insert Bene's Namexxxx>	<Insert MCPxxxxxxxxxxxxxxxx>	Medi-Cal Dental	3/1/2020

### What is changing?

Your health coverage has changed to **full scope** Medi-Cal services. You now have more benefits. You will get care through a Medi-Cal health plan.

With full scope Medi-Cal, you can keep getting health care for up to two months from any doctor that accepts Medi-Cal Fee-For-Service (regular Medi-Cal). Once you enroll in a Medi-Cal health plan, you will get your medically necessary services through the health plan.

### What is a Medi-Cal health plan?

A Medi-Cal health plan gives you medically necessary services through a "network" (group) of doctors. They give primary and preventive care. When you join a Medi-Cal health plan, the plan will:

- Help manage your care
- Help you find doctors and specialists
- Have a 24-hour nurse advice line
- Have member services to help you

- Help you with transportation to medical visits
- Help you get services that you may need that the plan does not cover

### **What happens next?**

You should have gotten your *My Medi-Cal Choice* packet in the mail. It tells how to choose a health plan and a doctor. To enroll in a plan by phone, call Health Care Options (HCO) at **1-800-430-4263** (TTY: 1-800-430-7077).

### **What are my choices?**

1. You can choose to do nothing. We will enroll you in the Medi-Cal health plan listed above on **March 1, 2020**.
2. You can enroll in the Medi-Cal health plan listed above and choose a doctor or clinic **before March 1, 2020**.
3. You can enroll in a **different** Medi-Cal health plan and choose a doctor or clinic in that plan.

If you want to enroll in the plan listed above or a different plan now, call HCO at **1-800-430-4263** (TTY: 1-800-430-7077). Or mail the choice form that came in your packet. If you enroll in a health plan before March 1, 2020, your health plan may start as early as **February 1, 2020**.

### **How do I get dental services?**

You will get **dental** services from the Medi-Cal Dental Program. You can read more on dental services in the Frequently Asked Questions (FAQ) page that came with this letter. You will need to go to a dentist that accepts Medi-Cal Dental. To find a dentist near you, call Medi-Cal Dental Customer Service at **1-800-322-6384** (TTY: 1-800-735-2922).

The Frequently Asked Questions (FAQ) page that came with this letter has more on other services available through Medi-Cal. They include mental health services, alcohol and drug treatment services, vision (eye) care, and other medically needed services.

### **What should I do now?**

- Talk to your doctor or clinic to find out if they work with a Medi-Cal plan.
- Choose one choice from "**What are my choices?**" above in this letter.
- Call HCO at **1-800-430-4263** (TTY: 1-800-430-7077) for more on plan choices. Or wait for your *My Medi-Cal Choice* packet in the mail. The packet comes in a large envelope from the Department of Health Care Services.
- You can also visit our website at: **[www.healthcareoptions.dhcs.ca.gov](http://www.healthcareoptions.dhcs.ca.gov)**.

If you need more help, call the Department of Health Care Services Ombudsman at 1-888-452-8609 Monday through Friday, 8 a.m. to 5 p.m. The call is free.

## **What if I have more questions?**

### **Substance Use Disorder Services**

For help with emergency counseling, detoxification services, and residential or long-term outpatient treatment, contact your local program listed on the Alcohol and Other Drugs Program County Directory website at:

**[www.dhcs.ca.gov/individuals/Pages/SUD\\_County\\_Access\\_Lines.aspx](http://www.dhcs.ca.gov/individuals/Pages/SUD_County_Access_Lines.aspx)**

### **Mental Health Services**

For non-crisis questions, general services or information, contact your local mental health department listed on the County Mental Health Plan Contact List website at:

**[www.dhcs.ca.gov/individuals/Pages/MHPContactList.aspx](http://www.dhcs.ca.gov/individuals/Pages/MHPContactList.aspx)**

After you are enrolled in the Medi-Cal health plan listed above, you can also call your plan's member services phone number for help with mental health services.

### **Health Care Options**

For questions about the changes in your Medi-Cal benefits, help enrolling by phone, help enrolling in a dental plan, or getting this letter in another language, large print, audio, or Braille:

Call: **1-800-430-4263** (TTY: 1-800-430-7077), Monday through Friday, 8 a.m. to 6 p.m.

Or go to: **[www.healthcareoptions.dhcs.ca.gov](http://www.healthcareoptions.dhcs.ca.gov)**

### **Medi-Cal Dental Customer Service**

For help finding a Medi-Cal dental provider in all counties except Sacramento, clinical screening appointment information, or general Medi-Cal Dental program questions:

Call **1-800-322-6384** (TTY: 1-800-735-2922), Monday through Friday, 8 a.m. to 5 p.m.

Or go to: **[www.denti-cal.ca.gov/Beneficiaries/Denti-Cal](http://www.denti-cal.ca.gov/Beneficiaries/Denti-Cal)**