



<BENEFICIARY FULL NAME>
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<CITY STATE ZIP>

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IMPORTANT NOTICE: Your Medicare Cost Plan won't be available in 2019.

Keep this letter. It's proof that you have a special right to buy a Medicare Supplement Insurance (Medigap) policy or join a Medicare health or drug plan.

Your Medicare cost plan won't be offered in your county in 2019. This means your medical and/or drug coverage through <cost plan name> will end December 31, 2018. You must take action before December 31, or you'll only have Original Medicare starting January 1, 2019.

Note: If you have a separate Medicare Part D plan or other prescription drug coverage outside of <cost plan name>, it won't be affected by this change.

You have 2 options for Medicare coverage

Option 1: You can join another Medicare health plan.

You have the right to join a different Medicare health plan any time between October 15, 2018 and February 28, 2019. Call 1-800-MEDICARE (1-800-633-4227) 24 hours a day, 7 days a week or visit Medicare.gov to choose a new Medicare health plan. TTY users can call 1-877-486-2048. Medicare health plans cover all services that Original Medicare covers, and most offer prescription drug coverage. Many also offer extra benefits like vision, hearing or dental.

Option 2: Stay in Original Medicare.

If you do nothing, you'll only be covered by Original Medicare for your health care services starting January 1. If you don't already have a separate Medicare Part D drug plan, you'll need to join one to get drug coverage. Original Medicare is coverage managed by the federal government. Generally, there's a cost for each service. You may also want to buy a Medicare Supplement Insurance (Medigap) policy to get help with costs Original Medicare doesn't cover.

Important: If you're losing your drug coverage from <cost plan name>, you'll need to join a Medicare health plan with Medicare Part D (or join a Medicare Part D plan if you choose to stay with Original Medicare) by December 31, 2018 to have prescription drug coverage on January 1. If you don't join a plan with prescription drug coverage by February 28, 2019, you won't have prescription drug coverage in 2019. You may also have to pay a lifetime Part D late enrollment penalty to join a Medicare prescription drug plan later.



You have a special right to buy a Medigap policy

Because your plan is ending, you have a special right to buy a Medigap policy (without health history review) through March 4, 2019. This letter is your proof that you have a special right to buy a Medigap policy. See the enclosed Medigap fact sheet for more information on your Medigap rights.

What to do next

Consider your options carefully. If you do nothing, you'll have Original Medicare for your health coverage. If you want to join a different Medicare health or drug plan, it's a good idea to do so before December 31, 2018. Remember, your right to change plans ends on February 28, 2019.

If you have VA benefits or TRICARE for Life, contact your insurer or benefits administrator. Ask how joining a plan or returning to Original Medicare affects your coverage.

If you only have Medicare Part B, you'll also need to get Part A if you want to join a Medicare Advantage Plan or buy a Medigap policy. Contact Social Security at 1-800-772-1213 for information on enrolling in Part A. TTY users can call 1-800-325-0778.

Transition of care

If you have a medical appointment or procedure scheduled on or just before December 31, 2018, please call your plan at the number listed on the back of your Member ID card for arrangements. It is important for your plan to be aware of this information in order to ensure you receive appropriate coverage and care.

Get help & more information

It's important to find a plan that covers your doctor visits and prescription drugs.

Please visit Medicare.gov or refer to your Medicare & You Handbook for a list of all Medicare health and prescription drug plans in your area. If you want to join one of these plans, contact the plan to get additional information about their costs, rules, and coverage. Please note Medicare isn't part of the Health Insurance Marketplace. Following the instructions in this letter will ensure that you are reviewing Medicare plans and not Marketplace options.

You can also get help comparing plans if you:

- **Call your local State Health Insurance Program (SHIP) at <SHIP phone>.** Counselors are available to answer your questions, discuss your needs, and give you information about your options. All counseling is **free**.
- **Call 1-800-MEDICARE (1-800-633-4227).** Tell them you got a letter saying your plan isn't going to be offered next year and you want help choosing a new plan. This toll-free help line is available 24 hours a day, 7 days a week. TTY users can call 1-877-486-2048.
- **Visit Medicare.gov.** Medicare's official web site has tools that can help you compare plans and answer your questions. Click "Find health & drug plans" to compare the plans in your area.

If you need more information, please call your plan at the number listed on your Member ID card. Tell the customer service representative you got this letter.



What you should know about Medigap

Medigap basics

A Medigap policy (also called Medicare Supplement Insurance) is private health insurance that supplements Original Medicare. This means it helps pay some of the costs (“gaps”) that Original Medicare doesn’t cover (like copayments, coinsurance, and deductibles). If you have Original Medicare and a Medigap policy, Medicare will pay its share for covered health care costs then your Medigap policy pays its share.

Medigap coverage is different from your **<cost plan name>** coverage. Medigap policies only help pay if you are in Original Medicare. You don’t need a Medigap policy if you’re in a Medicare health plan.

Medigap policies must follow Federal and state laws designed to protect you. In most states, Medigap insurance companies can only sell you a “standardized” Medigap policy identified by letters A through N. Each standardized Medigap policy must offer the same basic benefits, no matter which insurance company sells it. Cost is usually the only difference between Medigap policies with the same letter sold by different companies.

Your right to buy a Medigap policy

Guaranteed issue rights (also called “Medigap protections”) are rights you have when insurance companies must offer you certain Medigap policies. In most cases, you have a guaranteed issue right when you lose coverage in your Medicare health plan. When you have guaranteed issue rights, the insurance company must sell you a policy, must cover pre-existing conditions, and can’t charge you more because of any health problems.

Because you’re losing coverage with **<cost plan name>, you have a guaranteed issue right to buy a Medigap policy. Make sure you keep a copy of the letter that says your coverage is ending. To protect your rights, you must buy a Medigap policy no later than 63 calendar days after your coverage with **<cost plan name>** ends.**

- Because your coverage under your plan ends December 31, 2018, you must buy a Medigap policy no later than March 4, 2019. If you leave your plan before December 31, 2018, you have 63 calendar days from the day your coverage ends to buy a Medigap policy.
- You have the right to buy Medigap Plan A, B, C, F, K, or L from any company selling these policies in your state.

You may also have the right to buy any Medigap policy in these situations:

- You joined a Medicare Advantage plan or Programs of All-Inclusive Care for the Elderly (PACE) when you were first eligible for Medicare Part A at 65, and within the first 12 months (in some cases 24 months) of joining, you decide you want to switch to Original Medicare.
- You dropped a Medigap policy to join a Medicare Advantage plan (or to switch to a Medicare SELECT policy) for the first time, you have been in the plan less than a year, and you want to switch back.



- You were initially enrolled in Part B based on disability before turning 65, and you turned 65 within the past 6 months.

You can buy a Medigap policy now

If you want to buy a Medigap policy, follow these steps:

1. Call your local State Health Insurance Program to learn more about which policies are available. You may also call your State Insurance Department. Visit [Medicare.gov/contacts](https://www.Medicare.gov/contacts) for your State Insurance Department's phone number.
2. Contact the company that sells the Medigap policy and ask for an application.
3. Fill out the application, and make a copy of the letter that came with this mailing. It will prove that you have special rights to buy a Medigap policy.
4. Mail the application and a copy of the letter to the Medigap insurance company.

Remember, you must buy a Medigap policy no later than 63 days from the day your coverage in <cost plan name> ends. It's best to buy before your coverage with your plan ends so that your Medigap policy starts the same day as your Original Medicare coverage.

Get help comparing your options

- **Call your local State Health Insurance Program at <SHIP Phone>.** Counselors are available to answer your questions, discuss your needs, and give you information about your options and Medigap policies. All counseling is **free**.
- **Visit Medicare.gov.** Click on "Supplements & Other Insurance" for information on Medigap policies and tools that can help you find plans available in your area.
- **Call 1-800-MEDICARE (1-800-633-4227).** This toll-free help line is available 24 hours a day, 7 days a week. TTY users can call 1-877-486-2048.



Nondiscrimination Notice - The Centers for Medicare & Medicaid Services (CMS) doesn't exclude, deny benefits to, or otherwise discriminate against any person on the basis of race, color, national origin, disability, sex, or age. If you think you've been discriminated against or treated unfairly for any of these reasons, you can file a complaint with the Department of Health and Human Services, Office for Civil Rights by:

- Calling 1-800-368-1019. TTY users can call 1-800-537-7697.
- Visiting [hhs.gov/ocr/civilrights/complaints](https://www.hhs.gov/ocr/civilrights/complaints).
- Writing: Office for Civil Rights, U.S. Department of Health and Human Services, 200 Independence Avenue SW, Room 509F, HHH Building, Washington, D.C. 20201

Notice of Availability of Auxiliary Aids & Services - We're committed to making our programs, benefits, services, facilities, information, and technology accessible in accordance with Sections 504 and 508 of the Rehabilitation Act of 1973. We'll take appropriate steps to make sure that people with disabilities, including people who are deaf, hard of hearing or blind, or who have low vision or other sensory limitations, have an equal opportunity to participate in our services, activities, programs, and other benefits. We provide various auxiliary aids and services to communicate with people with disabilities, including:

- Relay service — TTY users can call 1-877-486-2048.
- Alternate formats — This notice is available in alternate formats, including large print, Braille, data CD and audio CD. To request your notice in an alternate format, call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.

Aviso sobre la discriminación - Los Centros de Servicios de Medicare y Medicaid (CMS) no excluye, niega beneficios o discrimina contra ninguna persona por motivos de raza, color, origen nacional, incapacidad, género o edad. Si cree que ha sido discriminado o tratado injustamente por cualquiera de estos motivos, puede presentar una queja ante el Departamento de Salud y Servicios Humanos, Oficina de Derechos Civiles:

- Llamando al 1-800-368-1019. Los usuarios de TTY pueden llamar al 1-800-537-7697.
- Visitando [hhs.gov/ocr/civilrights/complaints](https://www.hhs.gov/ocr/civilrights/complaints).
- Escribiendo a la: Oficina de Derechos Civiles del Departamento de Salud y Servicios Humanos 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201

Ayuda y servicios auxiliares para personas con incapacidades - Medicare está dedicado a ofrecerles a todos sus beneficiarios los programas, beneficios, servicios, dependencias, información y su tecnología, en cumplimiento con las Secciones 504 y 508 de la Ley de Rehabilitación del 1973. Medicare tomará las medidas necesarias para asegurarse de que las personas incapacitadas, entre los que se incluyen los que tiene problemas auditivos, son sordos, ciegos, tienen problemas visuales u otro tipo de limitaciones, tengan las mismas oportunidades de participar y aprovechar los programas y beneficios disponibles. Medicare ofrece varios servicios y ayuda para facilitar la comunicación con las personas incapacitadas incluyendo:

- Servicios de retransmisión de mensajes — Los usuarios de TTY pueden llamar al 1-877-486-2048.
- Formatos alternativos — Los productos de Medicare, incluyendo este documento, están disponible en letra grande, versión digital, Braille y audio. Para ordenar su aviso en un formato alternativo, llame al 1-800-MEDICARE (1-800-633-4227). Los usuarios de TTY pueden llamar al 1-877-486-2048.



ATTENTION: If you speak a language other than English, language assistance services, free of charge, are available to you. Call 1-800-MEDICARE (TTY: 1-877-486-2048).

ةيبرعلا (Arabic) ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برق-1-800-MEDICARE (رقم هاتف الصم والبكم: 1-877-486-2048).

հայերեն (Armenian) ՈՒՇԱԴՐՈՒԹՅՈՒՆՆԵՐ Եթե խոսում եք հայերեն, ապա ձեզ անվճար կարող են տրամադրվել լեզվական աջակցության ծառայություններ: Չանգահարեք 1-800-MEDICARE (TTY (հեռատիպ)՝ 1-877-486-2048)

繁體中文 (Chinese) 注意: 如果您使用繁體中文, 您可以免費獲得語言援助服務。請致電 -800- 1-MEDICARE (TTY : 1 -877-486-2048) 。

فارسی (Farsi) توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با 1-800-MEDICARE تماس بگیرید. (TTY: 1-877-486-2048)

Français (French) ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-MEDICARE (ATS : 1-877-486-2048).

Kreyòl Ayisyen (French Creole) ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-800-MEDICARE (TTY: 1-877-486-2048).

Deutsch (German) ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-MEDICARE (TTY: 1-877-486-2048).

Italiano (Italian) ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-800-MEDICARE (TTY: 1-877-486-2048).

日本語 (Japanese) 注意事項 : 日本語を話される場合、無料の言語支援をご利用いただけます。1-800-MEDICARE (TTY:1-877-486-2048) まで、お電話にてご連絡ください。

한국어(Korean) 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-MEDICARE (TTY: 1-877-486-2048) 번으로 전화해 주십시오.

Polski (Polish) UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-800-MEDICARE (TTY: 1-877-486-2048).

Português (Portuguese) ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-800-MEDICARE (TTY: 1-877-486-2048).

Русский (Russian) ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-MEDICARE (телетайп: 1-877-486-2048).

Español (Spanish) ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-MEDICARE (TTY: 1-877-486-2048).

Tagalog (Tagalog) PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-MEDICARE (TTY: 1-877-486-2048).

Tiếng Việt (Vietnamese) CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-MEDICARE (TTY: 1-877-486-2048).



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