

Beneficiary Notice - SNP Error – Beneficiary Does Not Have Medicare A & B

Date:

Dear <Name of Beneficiary>:

A few months ago, we notified you that we were going to enroll you in <MA Plan> effective January 1, 2006. However, we cannot enroll you because:

1. _____ You do not have Medicare Part A.
2. _____ You do not have Medicare Part B.

You need to have coverage under both Medicare Part A and Part B to be enrolled in a Medicare Advantage plan.

This means that you will remain in the Original Medicare Plan as of January 1, 2006. Medicare will enroll you in a Medicare Prescription Drug Plan for your drug coverage, also as of January 1, 2006. You should have received a letter that tells you what Medicare Prescription Drug Plan you have. You can also call 1-800-MEDICARE and a customer service representative can give you information about your drug coverage.

We are sorry for this error and for any inconvenience it may have caused. We will make sure that any services you have received under <MA Plan> are billed to Medicare. [insert beneficiary-friendly language here about how they should not be worried about getting a bill.] If you do receive a bill for services, or have any questions, please contact us at [insert customer service number and hours].

If you believe the checked item(s) is/are wrong, and you want to stay a member of our plan, or if you have any questions, please call us at <phone number>. TTY users should call <TTY number>. We are open <days and hours of operation>. >

Thank you.