



HealthChoices Expansion Notice Summary: Private Coverage Option to HealthChoices Transition

Why are you receiving this notice?

1. You receive health care coverage through the Private Coverage Option (PCO).
2. You will still have access to health care coverage, but the PCO is ending and you are eligible for the HealthChoices Medical Assistance (MA) program.
3. You will receive MA through the HealthChoices program, under the Adult benefit package.
4. To let you know that you will receive information about HealthChoices health care plans and to inform you of the options you have, when selecting a health plan (or one that can be assigned to you). DHS wants to inform you about which card to use when receiving health care services.
5. No changes have been made to health care coverage for children.

What you need to do:

Right now, you do not need to take any action.

After you receive information about HealthChoices health plans:

1. Enroll in a health plan at enrollnow.net or call 1-800-440-3989
or
2. Take no action. If you do this you will automatically be enrolled in a HealthChoices health plan.

Potential Questions:

What's happening to my family members who are not listed on the notice?

If a member of your household is not listed in this notice, it means they are not affected at this time. Members of the household who are also in a PCO plan but are not listed in the notice will be transitioned to the HealthChoices Medical Assistance plan before September 2015, if they remain eligible.

What is my assigned HealthChoices health plan?

You will receive a welcome packet from the HealthChoices enrollment broker with detailed information regarding your plan and how to select a different plan, if you want to.

Will I have to pay anything/more?

There are no changes to cost sharing.

Please visit www.HealthChoicesPA.com for more information.



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Will I be able to keep my current doctors?

If you are in a course of treatment, the HealthChoices plan will be required to maintain continuity of that course of treatment for 60 days. During that 60 day period, the plan will assess whether to continue with the course of treatment or to set forth a new treatment plan.

This also includes the provider who was servicing you. If the provider is enrolled with the HealthChoices plan, then it is likely that you will be able to continue with that provider. If the provider is not in the HealthChoices plan, the plan can try to establish an agreement with that provider either as in network or out of network or determine if you can safely transition to an in network provider.

Will I be issued a new ACCESS/medical insurance card?

No, continue to use the ACCESS card that you are currently using. If you do not currently have an ACCESS card, you can

- Call the Statewide Customer Service Center at 1-877-395-8930 (if you live in Philadelphia call 215- 560-7226).
- Contact your local County Assistance Office.

After receiving information about HealthChoices health plans, you will also receive information about a medical insurance/identification card.

Information listed on the Notice for the household's income and expenses is wrong/incomplete. How do I correct this?

You may report changes to the CAO in person, by phone, fax, mail, or through a My COMPASS Account. You may also report changes at any time to the Statewide Customer Service Center at 1-877-395-8930 or for Philadelphia-area residents 1-215-560-7226.

I want to appeal. How can I do that?

If you do not agree with our decision, you have the right to request that the Department of Human Services review our decision. To ask for a Fair Hearing, you can call the County Assistance Office (CAO) to request one, mail the completed Fair Hearing Form to the CAO, or take the completed Fair Hearing Form to the CAO. The Fair Hearing Form is attached to the Notice.