

Michigan Complete Health (Medicare-Medicaid Plan) offered by Michigan Complete Health, Inc.

Annual Notice of Changes for 2021

Introduction

You are currently enrolled as a member of Michigan Complete Health (Medicare-Medicaid Plan). Next year, there will be some changes to the plan's benefits, coverage, and rules. This *Annual Notice of Changes* tells you about the changes and where to find more information about them. Key terms and their definitions appear in alphabetical order in the last chapter of the *Member Handbook*.

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If you have questions, please call Michigan Complete Health at 1-844-239-7387 (TTY: 711) from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.michigancompletehealth.com.

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A. Disclaimers

- ❖ This is not a complete list. The benefit information is a brief summary, not a complete description of benefits. For more information contact the plan or read the Michigan Complete Health Member Handbook.

B. Reviewing Your Medicare and Michigan Medicaid Coverage for Next Year

It is important to review your coverage now to make sure it will still meet your needs next year. If it does not meet your needs, you may be able to leave the plan. See section F2 for more information.

If you leave our plan, you will still be in the Medicare and Michigan Medicaid programs as long as you are eligible.

- You will have a choice about how to get your Medicare benefits (go to page 13 to see your choices).
- If you do not want to enroll in a different Medicare-Medicaid Plan after you leave Michigan Complete Health, you will go back to getting your Medicare and Michigan Medicaid services separately.



If you have questions, please call Michigan Complete Health at 1-844-239-7387 (TTY: 711) from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.michigancompletehealth.com.

B1. Additional Resources

- **ATTENTION:** If you do not speak English, language assistance services, free of charge, are available to you. Call 1-844-239-7387 (TTY: 711) from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free.
- You can also get this document for free in other formats, such as large print, braille, or audio. Call 1-844-239-7387 (TTY: 711) from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free.
- If you want to get documents in a different language and/or format for future mailings, please call Member Services. This is called a “standing request”. We will document your choice. If later, you want to change the language and/or format choice, please call Member Services. Find the Member Services phone number at the bottom of this page.

B2. Information about Michigan Complete Health

- Michigan Complete Health is a health plan that contracts with both Medicare and Michigan Medicaid to provide benefits of both programs to enrollees.
- Coverage under Michigan Complete Health is qualifying health coverage called “minimum essential coverage.” It satisfies the Patient Protection and Affordable Care Act’s (ACA) individual shared responsibility requirement. Visit the Internal Revenue Service (IRS) website at www.irs.gov/Affordable-Care-Act/Individuals-and-Families for more information on the individual shared responsibility requirement.
- Michigan Complete Health (Medicare-Medicaid Plan) is offered by Michigan Complete Health, Inc. When this *Annual Notice of Changes* says “we,” “us,” or “our,” it means Michigan Complete Health, Inc. When it says “the plan” or “our plan,” it means Michigan Complete Health (Medicare-Medicaid Plan).



If you have questions, please call Michigan Complete Health at 1-844-239-7387 (TTY: 711) from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.michigancompletehealth.com.

B3. Important things to do:

- **Check if there are any changes to our benefits that may affect you.**
- Are there any changes that affect the services you use?
- It is important to review benefit changes to make sure they will work for you next year.
- Look in sections C and D for information about benefit changes for our plan.
- **Check if there are any changes to our prescription drug coverage that may affect you.**
 - Will your drugs be covered? Are they in a different tier? Can you continue to use the same pharmacies?
 - It is important to review the changes to make sure our drug coverage will work for you next year.
 - Look in section C for information about changes to our drug coverage.
- **Check to see if your providers and pharmacies will be in our network next year.**
 - Are your doctors, including specialists you see regularly, in our network? What about your pharmacy? What about the hospitals or other providers you use?
 - Look in section C for information about our *Provider and Pharmacy Directory*.
- **Think about your overall costs in the plan.**
 - How do the total costs compare to other coverage options?

Think about whether you are happy with our plan.



If you have questions, please call Michigan Complete Health at 1-844-239-7387 (TTY: 711) from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.michigancompletehealth.com.

If you decide to stay with Michigan Complete Health:

If you want to stay with us next year, it's easy – you don't need to do anything. If you don't make a change, you will automatically stay enrolled in our plan.

If you decide to change plans:

If you decide other coverage will better meet your needs, you may be able to switch plans (see section F2 for more information). If you enroll in a new plan, your new coverage will begin on the first day of the following month. Look in section F2, page 13 to learn more about your choices.

C. Changes to the network providers and pharmacies

Our provider and pharmacy networks have changed for 2021.

We strongly encourage you to **review our current *Provider and Pharmacy Directory*** to see if your providers or pharmacy are still in our network. An updated *Provider and Pharmacy Directory* is located on our website at mmp.michigancompletehealth.com. You may also call Member Services at 1-844-239-7387 (TTY: 711) for updated provider information or to ask us to mail you a *Provider and Pharmacy Directory*.

It is important that you know that we may also make changes to our network during the year. If your provider does leave the plan, you have certain rights and protections. For more information, see Chapter 3 of your *Member Handbook*.

D. Changes to benefits for next year

D1. Changes to benefits for medical services

We are changing our coverage for certain health care services next year. The table below describes these changes.



If you have questions, please call Michigan Complete Health at 1-844-239-7387 (TTY: 711) from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.michigancompletehealth.com.

	2020 (this year)	2021 (next year)
Additional Telehealth Services	Additional Telehealth services are not covered.	<p>You pay a \$0 copay for additional telehealth for the following services:</p> <ul style="list-style-type: none"> • Primary Care Physician Services • Physician Specialist Services • Individual sessions for Mental Health Specialty Services • Group Sessions for Mental Health Services • Other Health Care Professional • Individual sessions for Psychiatric Services • Group sessions for Psychiatric Services
Diabetes supplies and services	You pay a \$0 copay	<p>You pay a \$0 copay</p> <p>Diabetic glucometer and supplies are limited to Accu-Chek and OneTouch when obtained at a Pharmacy. Other brands are not covered unless pre-authorized.</p>



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<p>Prior Authorization and Referrals</p>	<p><i>The following required prior authorization:</i></p>	<p><i>The following no longer require prior authorization:</i></p>
	<ul style="list-style-type: none"> • Cardiac and Pulmonary Rehabilitation Services • Chiropractic Services • Physician Specialist Services excluding Psychiatric Services • Podiatry Services • Other Health Care Professional Services • Opioid Treatment Program Services • Outpatient Blood Services • Transportation Services • Dialysis Services • Meal Benefit • Medicare-covered Zero Cost-Sharing Preventive Services • Kidney Disease Education Services • Other Medicare-Covered Preventive Services <ul style="list-style-type: none"> ○ Glaucoma Screening ○ Diabetes Self-Management Training ○ Other Medicare-covered 	<ul style="list-style-type: none"> • Cardiac and Pulmonary Rehabilitation Services • Chiropractic Services • <i>Physician Specialist Services excluding Psychiatric Services</i> • <i>Podiatry Services</i> • <i>Other Health Care Professional Services</i> • <i>Opioid Treatment Program Services</i> • <i>Outpatient Blood Services</i> • <i>Transportation Services</i> • <i>Dialysis Services</i> • <i>Meal Benefit</i> • <i>Medicare-covered Zero Cost-Sharing Preventive Services</i> • <i>Kidney Disease Education Services</i> • <i>Other Medicare-Covered Preventive Services</i> <ul style="list-style-type: none"> ○ Glaucoma Screening ○ Diabetes Self-Management Training ○ Other Medicare-covered



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	<p style="text-align: center;">Preventive Services</p> <p>The following required a referral for services:</p> <ul style="list-style-type: none"> • Inpatient Hospital-Acute • Skilled Nursing Facility (SNF) • Home Health Services • Chiropractic Services • Occupational Therapy Services • Physician Specialist Services excluding Psychiatric Services • Podiatry Services • Other Health Care Professional Services • Physical Therapy and Speech-language Pathology Services • Outpatient Diagnostic Procedures, Tests and Lab Services • Outpatient Diagnostic and Therapeutic Radiological Services • Outpatient Hospital Services • Outpatient Hospital Observation Services • Ambulatory Surgical Center (ASC) Services • Kidney Disease Education Services 	<p style="text-align: center;">Preventive Services</p> <p>The following no longer require a referral for services:</p> <ul style="list-style-type: none"> • Inpatient Hospital-Acute • Skilled Nursing Facility (SNF) • Home Health Services • Chiropractic Services • Occupational Therapy Services • Physician Specialist Services excluding Psychiatric Services • Podiatry Services • Other Health Care Professional Services • Physical Therapy and Speech-language Pathology Services • Outpatient Diagnostic Procedures, Tests and Lab Services • Outpatient Diagnostic and Therapeutic Radiological Services • Outpatient Hospital Services • Outpatient Hospital Observation Services • Ambulatory Surgical Center (ASC) Services • Kidney Disease Education Services
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If you have questions, please call Michigan Complete Health at 1-844-239-7387 (TTY: 711) from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.michigancompletehealth.com.

D2. Changes to prescription drug coverage

Changes to our Drug List

An updated *List of Covered Drugs* is located on our website at mmp.michigancompletehealth.com/formulary. You may also call Member Services at 1-844-239-7387 (TTY: 711) for updated drug information or to ask us to mail you a *List of Covered Drugs*. Member Services hours are from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day.

The *List of Covered Drugs* is also called the “Drug List.”

We made changes to our Drug List, including changes to the drugs we cover and changes to the restrictions that apply to our coverage for certain drugs.

Review the Drug List to **make sure your drugs will be covered next year** and to see if there will be any restrictions.

If you are affected by a change in drug coverage, we encourage you to:

- Work with your doctor (or other prescriber) to find a different drug that we cover.
 - You can call Member Services at 1-844-239-7387 (TTY: 711) to ask for a list of covered drugs that treat the same condition. Member Services hours are from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day.
 - This list can help your provider find a covered drug that might work for you.
- Work with your doctor (or other prescriber) and ask the plan to make an exception to cover the drug.
 - You can ask for an exception before next year and we will give you an answer within 72 hours after we get your request (or your prescriber’s supporting statement).
 - To learn what you must do to ask for an exception, see Chapter 9 of the *2021 Member Handbook* or call Member Services at 1-844-239-7387 (TTY: 711). Member Services hours are from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day.



If you have questions, please call Michigan Complete Health at 1-844-239-7387 (TTY: 711) from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.michigancompletehealth.com.

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- If you need help asking for an exception, you can contact Member Services or your Care Coordinator. See Chapter 2 and Chapter 3 of the *Member Handbook* to learn more about how to contact your Care Coordinator.
- Ask the plan to cover a temporary supply of the drug.
 - In some situations, we will cover a **temporary** supply of the drug during the first 90 days of the calendar year.
 - This temporary supply will be for up to 30 days of medication at a retail pharmacy and at a long-term care pharmacy, up to 31 days of medication. (To learn more about when you can get a temporary supply and how to ask for one, see Chapter 5 of the *Member Handbook*.)
 - When you get a temporary supply of a drug, you should talk with your doctor to decide what to do when your temporary supply runs out. You can either switch to a different drug covered by the plan or ask the plan to make an exception for you and cover your current drug.
 - If you have a current formulary exception that our plan approved in 2020, and you remain a member of Michigan Complete Health for 2021, we may continue to cover this exception during 2021. You will receive a letter with approval dates if we decide to continue to cover your exception during 2021. However, if we decide not to continue to cover the exception during 2021, your doctor (or other prescriber) must work with Michigan Complete Health to request a new exception for the 2021 calendar year. To learn what you must do to ask for an exception, see Chapter 9 of the *2021 Member Handbook* or call Member Services at 1-844-239-7387 from 8 a.m. to 8 p.m., seven days a week. TTY users call 711. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day.

Changes to prescription drug costs

There are no changes to the amount you pay for prescription drugs in 2021. Read below for more information about your prescription drug coverage.

We moved some of the drugs on the Drug List to a lower or higher drug tier. To see if your drugs will be in a different tier, look them up in the Drug List.

The following table shows your costs for drugs in each of our three drug tiers.



If you have questions, please call Michigan Complete Health at 1-844-239-7387 (TTY: 711) from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.michigancompletehealth.com.

	2020 (this year)	2021 (next year)
<p>Drugs in Tier 1 (Generic Drugs)</p> <p>Cost for a one-month supply of a drug in Tier 1 that is filled at a network pharmacy</p>	<p>Your copay for a one-month (30-day) supply is \$0 per prescription.</p>	<p>Your copay for a one-month (30-day) supply is \$0 per prescription.</p>
<p>Drugs in Tier 2 (Brand Drugs)</p> <p>Cost for a one-month supply of a drug in Tier 2 that is filled at a network pharmacy</p>	<p>Your copay for a one-month (30-day) supply is \$0 per prescription.</p>	<p>Your copay for a one-month (30-day) supply is \$0 per prescription.</p>
<p>Drugs in Tier 3 (Non-Medicare Prescription and Over-the-Counter Drugs)</p> <p>Cost for a one-month supply of a drug in Tier 3 that is filled at a network pharmacy</p>	<p>Your copay for a one-month (30-day) supply is \$0 per prescription.</p>	<p>Your copay for a one-month (30-day) supply is \$0 per prescription.</p>

E. Administrative changes

Administrative changes may change how you get your services, items, or prescription drugs. Read below for more information about these changes.



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	2020 (this year)	2021 (next year)
Mail Order Pharmacy	<p>There are two mail order pharmacies:</p> <ul style="list-style-type: none"> • CVS Caremark Mail Service Pharmacy • Homescrpts Mail Order Pharmacy 	<p>There is one mail order pharmacy:</p> <ul style="list-style-type: none"> • CVS Caremark Mail Service Pharmacy

F. How to choose a plan

F1. How to stay in our plan

We hope to keep you as a member next year.

You do not have to do anything to stay in your health plan. If you do not sign up for a different Medicare-Medicaid Plan, change to a Medicare Advantage Plan, or change to Original Medicare, you will automatically stay enrolled as a member of our plan for 2021

F2. How to change plans

You can end your membership at any time during the year by enrolling in another Medicare Advantage Plan, enrolling in another Medicare-Medicaid Plan, or moving to Original Medicare.

These are the four ways people usually end membership in our plan:

<p>1. You can change to:</p> <p>A different Medicare-Medicaid Plan</p>	<p>Here is what to do:</p> <p>Call Michigan ENROLLS toll-free at 1-800-975-7630. Persons with hearing and speech disabilities may call the TTY number at 1-888-263-5897. Office hours are Monday through Friday, 8 AM to 7 PM.</p> <p>Your coverage in our plan will end the last day of the month after you tell us you want to leave.</p>
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If you have questions, please call Michigan Complete Health at 1-844-239-7387 (TTY: 711) from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.michigancompletehealth.com.

<p>2. You can change to:</p> <p>A Medicare health plan (such as a Medicare Advantage Plan or Program of All-inclusive Care for the Elderly (PACE))</p>	<p>Here is what to do:</p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none">• Call the State Health Insurance Assistance Program (SHIP) at 1-800-803-7174. Persons with hearing and speech disabilities may call 711. The call is free. Office hours are Monday through Friday, 8 AM to 5 PM. In Michigan, the SHIP is called the Michigan Medicare/Medicaid Assistance Program (MMAP). <p>You will automatically be disenrolled from Michigan Complete Health when your new plan's coverage begins.</p>
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If you have questions, please call Michigan Complete Health at 1-844-239-7387 (TTY: 711) from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.michigancompletehealth.com.

<p>3. You can change to:</p> <p>Original Medicare with a separate Medicare prescription drug plan</p>	<p>Here is what to do:</p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none">• Call the State Health Insurance Assistance Program (SHIP) at 1-800-803-7174. Persons with hearing and speech disabilities may call 711. The call is free. Office hours are Monday through Friday, 8 AM to 5 PM. In Michigan, the SHIP is called the Michigan Medicare/Medicaid Assistance Program (MMAP). <p>You will automatically be disenrolled from Michigan Complete Health when your Original Medicare coverage begins.</p>
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If you have questions, please call Michigan Complete Health at 1-844-239-7387 (TTY: 711) from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.michigancompletehealth.com.

<p>4. You can change to:</p> <p>Original Medicare without a separate Medicare prescription drug plan</p> <p>NOTE: If you switch to Original Medicare and do not enroll in a separate Medicare prescription drug plan, Medicare may enroll you in a drug plan, unless you tell Medicare you don't want to join.</p> <p>You should only drop prescription drug coverage if you have drug coverage from another source, such as an employer or union. If you have questions about whether you need drug coverage, call MMAP at 1-800-803-7174.</p>	<p>Here is what to do:</p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> • Call the State Health Insurance Assistance Program (SHIP) at 1-800-803-7174. Persons with hearing and speech disabilities may call 711. The call is free. Office hours are Monday through Friday, 8 AM to 5 PM. In Michigan, the SHIP is called the Michigan Medicare/Medicaid Assistance Program (MMAP). <p>You will automatically be disenrolled from Michigan Complete Health when your Original Medicare coverage begins.</p>
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G. How to get help

G1. Getting help from Michigan Complete Health

Questions? We're here to help. Please call Member Services at 1-844-239-7387 (TTY only, call 711). We are available for phone calls 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. Calls to these numbers are free.

Your 2021 Member Handbook

The *2021 Member Handbook* is the legal, detailed description of your plan benefits. It has details about next year's benefits. It explains your rights and the rules you need to follow to get covered services and prescription drugs.

The *2021 Member Handbook* will be available by October 15. An up-to-date copy of the *2021 Member Handbook* is always available on our website at mmp.michigancompletehealth.com. You may also call Member Services at 1-844-239-7387 (TTY: 711) to ask us to mail you a *2021 Member Handbook*.



If you have questions, please call Michigan Complete Health at 1-844-239-7387 (TTY: 711) from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.michigancompletehealth.com.

Our website

You can also visit our website at mmp.michigancompletehealth.com. As a reminder, our website has the most up-to-date information about our provider and pharmacy network (*Provider and Pharmacy Directory*) and our Drug List (*List of Covered Drugs*).

G2. Getting help from Michigan ENROLLS

For questions about your enrollment, call **Michigan ENROLLS** toll-free at **1-800-975-7630**. Persons with hearing and speech disabilities may call the TTY number at 1-888-263-5897. Office hours are Monday through Friday, 8 AM to 7 PM.

G3. Getting help from the MI Health Link Ombudsman Program

The MI Health Link Ombudsman Program can help you if you are having a problem with Michigan Complete Health. The ombudsman's services are free.

- The MI Health Link Ombudsman Program works as an advocate on your behalf. They can answer questions if you have a problem or complaint and can help you understand what to do.
- The MI Health Link Ombudsman Program makes sure you have information related to your rights and protections and how you can get your concerns resolved.
- The MI Health Link Ombudsman Program is not connected with us or with any insurance company or health plan. Call 1-888-746-MHLO (1-888-746-6456). Office hours are Monday through Friday, 8 AM to 5 PM EST.

G4. Getting help from the State Health Insurance Assistance Program (SHIP)

You can also call the State Health Insurance Assistance Program (SHIP). The SHIP has trained counselors in every state, and services are free. In Michigan, the SHIP is called the Michigan Medicare/Medicaid Assistance Program (MMAP). MMAP counselors can help you understand your Medicare-Medicaid Plan choices and answer questions about switching plans. MMAP is not connected with us or with any insurance company or health plan.

Call MMAP at 1-800-803-7174. Persons with hearing and speech disabilities may call 711. The call is free. Office hours are Monday through Friday, 8 AM to 5 PM.

G5. Getting help from Medicare

To get information directly from Medicare, you can call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.



If you have questions, please call Michigan Complete Health at 1-844-239-7387 (TTY: 711) from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.michigancompletehealth.com.

Medicare's Website

You can visit the Medicare website (www.medicare.gov). If you choose to disenroll from your Medicare-Medicaid Plan and enroll in a Medicare Advantage plan, the Medicare website has information about costs, coverage, and quality ratings to help you compare Medicare Advantage plans.

You can find information about Medicare Advantage plans available in your area by using the Medicare Plan Finder on the Medicare website. (To view the information about plans, go to www.medicare.gov and click on "Find plans.")

Medicare & You 2021

You can read the *Medicare & You 2021* Handbook. Every year in the fall, this booklet is mailed to people with Medicare. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare.

If you don't have a copy of this booklet, you can get it at the Medicare website (www.medicare.gov) or by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

G6. Getting help from Michigan Medicaid

Call the Beneficiary Help Line at 1-800-642-3195. Persons with hearing and speech disabilities may call the TTY number at 1-866-501-5656. Office hours are Monday through Friday, 8 AM to 7 PM.



If you have questions, please call Michigan Complete Health at 1-844-239-7387 (TTY: 711) from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.michigancompletehealth.com.

Notice of Non-Discrimination. Michigan Complete Health (Medicare-Medicaid Plan) complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Michigan Complete Health does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Michigan Complete Health:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written information in other formats (large print, audio, accessible electronic formats, other formats).
- Provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages.

If you need these services, contact Michigan Complete Health's Member Services at 1-844-239-7387 (TTY: 711) from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day.

If you believe that Michigan Complete Health has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance by calling the number above and telling them you need help filing a grievance; Michigan Complete Health's Member Services is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, (TDD: 1-800-537-7697).

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

Language Services

ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Call 1-844-239-7387 (TTY: 711).

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-844-239-7387 (TTY: 711).

ملحوظة: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-844-239-7387 (رقم هاتف الصم والبكم: 711).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請電1-844-239-7387 (TTY : 711)。

اوتوئو: سيه نساهو جه نسايحباهو ليوئو نساهوئو، نساي بهوه افطلباهو
يبلجيهو نساهوئو ليوئو نسايحباهو. مازو جل يئوئو 1-844-239-7387 (TTY: 711)

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-844-239-7387 (TTY: 711).

KUJDES: Nëse flitni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. Telefononi në 1-844-239-7387 (TTY: 711).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-844-239-7387 (TTY: 711) 번으로 전화해 주십시오.

লক্ষ্য করুনঃ যদি আপনি বাংলা, কথা বলতে পারেন, তাহলে নিঃখরচায় ভাষা সহায়তা পরিষেবা উপলব্ধ আছে। ফোন করুন ১-৮৪৪-২৩৯-৭৩৮৭ (TTY: ৭১১)।

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-844-239-7387 (TTY: 711).

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-844-239-7387 (TTY: 711).

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-844-239-7387 (TTY: 711).

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。1-844-239-7387 (TTY: 711) まで、お電話にてご連絡ください。

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-844-239-7387 (TTY: 711).

OBAVJEŠTENJE: Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite 1-844-239-7387 (TTY- Telefon za osobe sa oštećenim govorom ili sluhom: 711).

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-844-239-7387 (TTY: 711).