

## **SECTION 1 Introduction**

### **Section 1.1 This chapter focuses on ending your membership in our plan**

Ending your membership in Medi-Pak Rx Basic (PDP) may be voluntary (your own choice) or involuntary (not your own choice):

- You might leave our plan because you have decided that you want to leave.
  - There are only certain times during the year, or certain situations, when you may voluntarily end your membership in the plan. Section 2 tells you when you can end your membership in the plan.
  - The process for voluntarily ending your membership varies depending on what type of new coverage you are choosing. Section 3 tells you how to end your membership in each situation.
- There are also limited situations where you do not choose to leave, but we are required to end your membership. Section 5 tells you about situations when we must end your membership.

If you are leaving our plan, you must continue to get your Part D prescription drugs through our plan until your membership ends.

## **SECTION 2 When can you end your membership in our plan?**

You may end your membership in our plan only during certain times of the year, known as enrollment periods. All members have the opportunity to leave the plan during the Annual Enrollment Period. In certain situations, you may also be eligible to leave the plan at other times of the year.

### **Section 2.1 Usually, you can end your membership during the Annual Enrollment Period**

You can end your membership during the Annual Enrollment Period (also known as the “Annual Coordinated Election Period”). This is the time when you should review your health and drug coverage and make a decision about your coverage for the upcoming year.

- When is the Annual Enrollment Period? This happens from November 15 to December 31 in 2010.
- What type of plan can you switch to during the Annual Enrollment Period? During this time, you can review your health coverage and your prescription drug coverage. You can choose to keep your current coverage or make changes to your coverage for the upcoming year. If you decide to change to a new plan, you can choose any of the following types of plans:
  - Another Medicare prescription drug plan.
  - Original Medicare without a separate Medicare prescription drug plan.
  - or – A Medicare Advantage plan. A Medicare Advantage plan is a plan offered by a private company that contracts with Medicare to provide all of the Medicare Part A (Hospital) and Part B (Medical) benefits. Some Medicare Advantage plans also include Part D prescription drug coverage.
    - If you enroll in most Medicare Advantage plans, you will be disenrolled from Medi-Pak Rx Basic (PDP) when your new plan’s coverage begins. However, if you choose a Private Fee-for-Service plan without Part D drug coverage, a Medicare Medical Savings Account plan, or a Medicare Cost Plan, you can enroll in that plan and keep Medi-Pak Rx

Basic (PDP) for your drug coverage. If you do not want to keep our plan, you can choose to enroll in another Medicare prescription drug plan or drop Medicare prescription drug coverage.

**Note:** If you disenroll from a Medicare prescription drug plan and go without creditable prescription drug coverage, you may need to pay a late enrollment penalty if you join a Medicare drug plan later. (“Creditable” coverage means the coverage is at least as good as Medicare’s standard prescription drug coverage.)

- When will your membership end? Your membership will end when your new plan’s coverage begins on January 1.

## **Section 2.2 You may be able to end your membership during the Medicare Advantage Annual Disenrollment Period, but your choices are more limited**

If you are a member of a Medicare Advantage Private Fee-for-Service Plan that does not have drug coverage, you have the opportunity to make one change to your health coverage during the **Medicare Advantage Annual Disenrollment Period**.

- **What is the Medicare Advantage Annual Disenrollment Period?** This is the time when a member of a Medicare Advantage plan can disenroll from that plan to switch to Original Medicare. Members who use this opportunity to switch to Original Medicare can also choose a new Part D plan at this time.
- **When is the Medicare Advantage Annual Disenrollment Period?** This happens every year from January 1 to February 14.
- **What type of plan can you switch to during the Medicare Advantage Annual Disenrollment Period?** You can switch at this time only if you are a member of a Medicare Advantage plan. If you are enrolled in a Medicare Advantage Private Fee-for-Service Plan that does not have drug coverage, you could disenroll from that plan and switch to Original Medicare. If you choose to switch to Original Medicare, you can also choose a new prescription drug plan.
- **When will your membership end?** Your membership in your Private-Fee-for-Service plan will end on the first day of the month after we get your request to switch to Original Medicare. If you also choose to enroll in a new Medicare prescription drug plan, your membership in our plan will end and your membership in your new plan will begin at the same time.

## **Section 2.3 In certain situations, you can end your membership during a Special Enrollment Period**

In certain situations, members of Medi-Pak Rx Basic (PDP) may be eligible to end their membership at other times of the year. This is known as a **Special Enrollment Period**.

- **Who is eligible for a Special Enrollment Period?** If any of the following situations apply to you, you are eligible to end your membership during a Special Enrollment Period. These are just examples, for the full list you can contact the plan, call Medicare, or visit the Medicare website (<http://www.medicare.gov>):
  - If you have moved out of your plan’s service area.
  - If you have Medicaid.
  - If you are eligible for Extra Help with paying for your Medicare prescriptions.
  - If you live in a facility, such as a nursing home.
- **When are Special Enrollment Periods?** The enrollment periods vary depending on your situation.

- **What can you do?** If you are eligible to end your membership because of a special situation, you can choose to change both your Medicare health coverage and prescription drug coverage. This means you can choose any of the following types of plans:
  - Another Medicare prescription drug plan.
  - Original Medicare without a separate Medicare prescription drug plan.
  - - or - A Medicare Advantage plan. A Medicare Advantage plan is a plan offered by a private company that contracts with Medicare to provide all of the Medicare Part A (Hospital) and Part B (Medical) benefits. Some Medicare Advantage plans also include Part D prescription drug coverage.
    - If you enroll in most Medicare Advantage plans, you will automatically be disenrolled from Medi-Pak Rx Basic (PDP) when your new plan's coverage begins. However, if you choose a Private Fee-for-Service plan without Part D drug coverage, a Medicare Medical Savings Account plan, or a Medicare Cost Plan, you can enroll in that plan and keep Medi-Pak Rx Basic (PDP) for your drug coverage. If you do not want to keep our plan, you can choose to enroll in another Medicare prescription drug plan or to drop Medicare prescription drug coverage.
  - **Note:** If you disenroll from a Medicare prescription drug plan and go without creditable prescription drug coverage, you may need to pay a late enrollment penalty if you join a Medicare drug plan later. ("Creditable" coverage means the coverage is at least as good as Medicare's standard prescription drug coverage.)
- **When will your membership end?** Your membership will usually end on the first day of the month after we receive your request to change your plan.

## Section 2.4 Where can you get more information about when you can end your membership?

If you have any questions or would like more information on when you can end your membership:

- You can **call Member Services** (phone numbers are on the cover of the EOC).
- You can find the information in the *Medicare & You 2011* Handbook.
  - Everyone with Medicare receives a copy of Medicare & You each fall. Those new to Medicare receive it within a month after first signing up.
  - You can also download a copy from the Medicare website (<http://www.medicare.gov>). Or, you can order a printed copy by calling Medicare at the number below.
- You can contact **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.

## SECTION 3 How do you end your membership in our plan?

### Section 3.1 Usually, you end your membership by enrolling in another plan

Usually, to end your membership in our plan, you simply enroll in another Medicare plan during one of the enrollment periods (see Section 2 for information about the enrollment periods). There are a couple of exceptions:

- One exception is when you want to switch from our plan to Original Medicare without a Medicare prescription drug plan. In this situation, you must contact Medi-Pak Rx Basic (PDP) Member Services and ask to be disenrolled from our plan.

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- Another exception is if you join a Private Fee-for-Service plan without prescription drug coverage, a Medicare Medical Savings Account Plan, or a Medicare Cost Plan. In this case, you can enroll in that plan and keep Medi-Pak Rx Basic (PDP) for your drug coverage. If you do not want to keep our plan, you can choose to enroll in another Medicare prescription drug plan or to drop your Medicare prescription drug coverage.

The table below explains how you should end your membership in our plan.

If you would like to switch from our plan to:	This is what you should do:
<ul style="list-style-type: none"> <li>• Another Medicare prescription drug plan.</li> </ul>	<ul style="list-style-type: none"> <li>• Enroll in the new Medicare prescription drug plan.</li> </ul> <p>You will automatically be disenrolled from Medi-Pak Rx Basic (PDP) when your new plan’s coverage begins.</p>
<ul style="list-style-type: none"> <li>• A Medicare Advantage plan.</li> </ul>	<ul style="list-style-type: none"> <li>• Enroll in the Medicare Advantage plan.</li> </ul> <p>With most Medicare Advantage plans, you will automatically be disenrolled from Medi-Pak Rx Basic (PDP) when your new plan’s coverage begins.</p> <p>However, if you choose a Private Fee-For-Service plan without Part D drug coverage, a Medicare Medical Savings Account plan, or a Medicare Cost Plan, you can enroll in that new plan and keep Medi-Pak Rx Basic (PDP) for your drug coverage. If you want to leave our plan, you must <i>either</i> enroll in another Medicare prescription drug plan <i>or</i> contact Member Services or Medicare and ask to be disenrolled.</p>
<ul style="list-style-type: none"> <li>• Original Medicare <i>without</i> a separate Medicare prescription drug plan.</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Contact Member Services and ask to be disenrolled from the plan (phone numbers are on the cover of the EOC).</b></li> <li>• You can also contact <b>Medicare</b> at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week, and ask to be disenrolled. TTY users should call</li> </ul>

<b>If you would like to switch from our plan to:</b>	<b>This is what you should do:</b>
1-877-486-2048.	

## **SECTION 4      Until your membership ends, you must keep getting your drugs through our plan**

### **Section 4.1    Until your membership ends, you are still a member of our plan**

If you leave Medi-Pak Rx Basic (PDP), it may take time before your membership ends and your new Medicare coverage goes into effect. (See Section 2 for information on when your new coverage begins.) During this time, you must continue to get your prescription drugs through our plan.

- You should continue to use our network pharmacies to get your prescriptions filled until your membership in our plan ends. Usually, your prescription drugs are only covered if they are filled at a network pharmacy including through our mail-order pharmacy services.

## **SECTION 5      Medi-Pak Rx Basic (PDP) must end your membership in the plan in certain situations**

### **Section 5.1    When must we end your membership in the plan?**

Medi-Pak Rx Basic (PDP) must end your membership in the plan if any of the following happen:

- If you do not stay continuously enrolled in Medicare Part A or Part B (or both).
- If you move out of our service area for more than twelve months.
  - If you move or take a long trip, you need to call Member Services to find out if the place you are moving or traveling to is in our plan's area.
- If you become incarcerated.
- If you lie about or withhold information about other insurance you have that provides prescription drug coverage.
- If you intentionally give us incorrect information when you are enrolling in our plan and that information affects your eligibility for our plan.
- If you continuously behave in a way that is disruptive and makes it difficult for us to provide care for you and other members of our plan.
  - We cannot make you leave our plan for this reason unless we get permission from Medicare first.
- If you let someone else use your membership card to get prescription drugs.
  - If we end your membership because of this reason, Medicare may have your case investigated by the Inspector General.
- If you do not pay the plan premiums for 3 months.
  - We must notify you in writing that you have 2 months to pay the plan premium before we end your membership.

### **Where can you get more information?**

If you have questions or would like more information on when we can end your membership:

- You can call **Member Services** for more information (phone numbers are on the cover of the EOC).

### **Section 5.2 We cannot ask you to leave our plan for any reason related to your health**

#### **What should you do if this happens?**

If you feel that you are being asked to leave our plan because of a health-related reason, you should call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. You may call 24 hours a day, 7 days a week.

### **Section 5.3 You have the right to make a complaint if we end your membership in our plan**

If we end your membership in our plan, we must tell you our reasons in writing for ending your membership. We must also explain how you can make a complaint about our decision to end your membership. You can also look in Chapter 7, Section 7 of the EOC for information about how to make a complaint.