MyCare Ohio is a new managed care program designed for Ohioans who receive BOTH Medicaid and Medicare benefits.

The State of Ohio has worked closely with the federal government to improve the way health care services are provided by these programs. Through the health plan YOU choose, you will receive all of the medical, behavioral, and long-term services and supports you need.

THESE QUESTIONS WILL HELP YOU LEARN MORE ABOUT MyCare Ohio:

1. Q: I am enrolled on the Ohio Home Care Waiver or the Transitions Carve-out Waiver and receive Medicaid and Medicare. Do I have to enroll in a MyCare Ohio plan?
   A: Yes, you must enroll in a MyCare Ohio plan. You may choose to continue to receive your Medicare services in the way you do today.

2. Q: What happens after I enroll?
   A: Your current health care and long term care providers and the services you receive will not immediately change.
   - The MyCare Ohio plan you choose will receive information about your current care needs and services and will work with you on a plan of care designed to meet your needs.

3. Q: Will I continue to receive my waiver services?
   A: Yes. Several other services will be available to you based on your assessed needs: services that are designed to help you be more independent in your home, like Homemaker and Choices Home Care Attendant, and services to improve the safety of your home, like Chore and Pest Control.
Q: Will I still be able to use independent providers?

A: Yes. Independent providers will still be able to provide waiver nursing and personal care services. Your MyCare Ohio plan will contract with your independent provider for at least one year following your enrollment, unless a change is required.

Q: I am interested in directing my own care. Will I be able to do this through the MyCare Ohio plan I choose?

A: Yes. Your MyCare Ohio plan will offer you the opportunity to direct certain waiver services.

- You will be able to recruit, hire, train, direct and terminate providers of personal care and/or Choices home care attendant services. Workers may include friends, neighbors and some relatives. You can also use agency-based providers to furnish hands-on care.

- You will also be able to negotiate rates for providers of certain services including Choices home care attendant services.

- You will be given information about directing your own care when you enroll in a MyCare Ohio plan. Information about self-direction will also be available in the Waiver Handbook given to you by your MyCare Ohio plan.

- You can request information about directing your own care from your MyCare Ohio care manager at any time. Your team will talk to you about this option to see if it is right for you.

Q: Can I keep my current case manager?

A: Each MyCare Ohio plan is responsible for the care coordination of its enrollees. This means you may need to change case managers when you enroll. You will be able to choose from the list of service coordination providers that your MyCare Ohio plan contracts with.
Q: How does MyCare Ohio work? When do I need to enroll?

A: Enrollment into MyCare Ohio will be in phases, by region, over several months beginning in spring and summer of 2014.

- You will receive a letter informing you of the date when you must enroll. This letter will also give you instructions on how to pick a plan and how to enroll. You will be able to enroll by phone, online, or by mail.
- There will be assistance in the community to help you understand your options.

Below is a list of other things that may remain the same or may change as a result of your enrollment in a MyCare Ohio plan:

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<th>WHAT WILL NOT CHANGE:</th>
<th>WHAT WILL CHANGE:</th>
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<tr>
<td>1. Your Medicaid eligibility will still be determined by the County Department of Job and Family Services.</td>
<td>1. You will have more choice and control in the way you receive your services.</td>
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<td>2. Your Medicaid and Medicare health care benefits.</td>
<td>2. Your MyCare Ohio plan will work with you and your providers to make sure your service needs are met with efficiency and high quality.</td>
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<td>3. You will not have any additional cost. If you currently pay a patient liability or a Medicare Part B Premium, you will continue to do so.</td>
<td>3. The kinds of waiver services available to you are expanded. (please note: waiver service planning will continue to be based on medical necessity).</td>
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<td>4. You will be able to direct a portion of your waiver services.</td>
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DEFINITIONS:

MEDICARE PART B PREMIUM: A monthly fee that Medicare recipients pay for medical insurance to cover services not provided through Part A.

CO-PAYS: A specified amount of money that you are required to pay every time you receive a certain type of services. In MyCare Ohio, co-pays are only allowed for medications.

PATIENT LIABILITY: Is the amount of money you pay every month towards the cost of your waiver services.

Q: What will happen if I do not select a MyCare Ohio plan?

A: If you do not make a choice, a MyCare Ohio plan will be selected for you. After you enroll, you will have at least 90 days to change your MyCare Ohio plan, if you choose.
PLEASE NOTE: You do not have to receive your Medicare benefits from your MyCare Ohio plan. You may choose to continue to receive your Medicare benefits in the way you do today. However, your Medicaid benefits will only be available through your chosen MyCare Ohio Plan.

THERE IS NO ADDITIONAL COST TO PARTICIPATE IN THIS PROGRAM.

For more information, call the Ohio Medicaid Consumer Hotline: (800) 324-8680, Monday - Friday 7 a.m. to 8 p.m. and Saturdays 8 a.m. to 5 p.m. or visit online at www.ohiomh.com.