<HeadOfHousehold>

<AddressLine1> <AddressLine2>

<RecipientCity> <RecipientState> <Zip>   123

<Letter Date>

Welcome to the Statewide Medicaid Managed Care program.

Our records show that the people listed below are a part of the Medically Needy program and have met their Share of Cost as of the date of this letter. This means each person listed must enroll in a dental plan as part of the Statewide Medicaid Managed Care program.

Name and Medicaid Number	Program	Plan Name	Start Date	Enrollment Cutoff Date
<Recipient Name> <Recipient Number>	<Medicaid Program>	<Health Plan Name>	<Start Date>	<Enrollment Change Date>

If you want to be enrolled in the plan(s) listed above, you do not need to do anything. If your eligibility has not changed, your plan will automatically begin on the start date listed above.

If you want to choose a different plan, follow these steps:

Step 1: Review	Step 2: Choose	Step 3: Enroll
Review the information in this packet.	**Choose the plan(s) that best meet the needs of each person listed.**	• Enroll online at: www.flmedicaidmanagedcare.com • Enroll by phone at: 1-877-711-3662
To enroll each person, you will need his or her birth year and Medicaid ID or Gold Card number. **To gain quicker access to your case, please use the following security PIN to enroll: <PIN>**		

See the back for Your Rights to Change Plans while Medically Needy. ➡️

Return Address: Agency for Health Care Administration 2727 Mahan Drive, MS 62 Tallahassee, FL 32308
Call Center Hours: Monday-Thursday - 8 a.m. - 8 p.m.; Friday - 8 a.m. - 7 p.m. TTY/TDD users ONLY call 1-866-467-4970
If you need Choice Counseling materials in large print, audio or Braille, call the Toll-free Helpline 1-877-711-3662.

() 1

YOUR RIGHTS TO CHANGE PLANS

Once you are enrolled in your plan, you will have 120 days to change plans, unless you make a change during Open Enrollment. If you want to pick a different plan, you must pick that plan by the enrollment cutoff date listed above. After this date, if you want to change your plan, you can do so once a year during a special time called Open Enrollment. Before your Open Enrollment period begins, you will receive a reminder letter and information about your plan choices.

If you want to change plans at a time other than during Open Enrollment, you may need a state-approved For Cause reason. For more information or to find out if you need a For Cause reason, call 1-877-711-3662 or visit www.flmedicaidmanagedcare.com.

Your request to change plans while you are Medically Needy will be processed and made effective at the next possible date in which you have active eligibility.