

Liberty Health Advantage (HMO)

ENDING YOUR MEMBERSHIP WITH LIBERTY HEALTH HMO

Ending your membership in our Plan 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 also limited situations where we are required to end your membership. For example, if you move permanently out of our geographic service area.

Voluntarily ending your membership

Dual Power Plan:

If you are a Dual Power (HMO/SNP) member you may end your membership at any time during the year. Please contact Member Services.

(Preferred Choice Plan:

There are only certain times during the year when you may voluntarily end your membership in our Plan. The key time to make changes is the Medicare fall open enrollment period (also known as the “Annual Election Period”), which occurs every year from **October 15 through December 7**. This is the time to review your health care and drug coverage for the following year and make changes to your Medicare health or prescription drug coverage. Any changes you make during this time will be effective January 1. Certain individuals, such as those with Medicaid, those who get extra help, or who move, can make changes at other times. For more information on when you can make changes see the enrollment period table later in this section. If you want to end your membership in our plan during this time, this is what you need to do:

If you are planning on enrolling in a new Medicare Advantage plan: Simply join the new plan. You will be disenrolled from our plan when your new plan’s coverage begins on January 1.

If you are planning on switching to the Original Medicare Plan and joining a Medicare Prescription drug plan: Simply join the new Medicare Prescription drug plan. You will be disenrolled automatically from our plan when your new coverage begins on January 1.

If you are planning on switching to the Original Medicare Plan without a Medicare Prescription drug plan: Contact Member Services for information on how to request disenrollment. You can contact Liberty Health Advantage Member Services at 1.866.542.4269, TTY: 1.800.662.1220, Sunday - Saturday 8:00AM - 8:00PM.

You may also call 1.800.MEDICARE (1.800.633.4227) to request disenrollment from our plan. TTY users should call 1.877.486.2048. Your enrollment in Original Medicare will be effective January 1.

Enrollment Period	When?	Effective Date
<p><i>Fall Open Enrollment (Annual Election Period)</i> Time to review health and drug coverage and make changes.</p>	Every year from October 15 to December 7	January 1
<p><i>Medicare Advantage Disenrollment Period (MADP)</i> You can switch from Liberty Health Advantage HMO to Original Medicare. If you choose to switch to Original Medicare during this period, you can also enroll in a separate Medicare prescription drug plan at the same time</p>	Every year from January 1 to February 14	First day of next month after plan receives your enrollment request
<p><i>Special Enrollment Periods for limited special exceptions, such as:</i></p> <ul style="list-style-type: none"> • You have a change in residence • You have Medicaid • You are eligible for extra help with Medicare prescriptions • You live in an institution (such as a nursing home) 	Your enrollment period may be different based on the type of SNP in which you are enrolled. Contact Member Services for more information.	Generally, first day of next month after plan receives your enrollment request

For more information about the options available to you during these enrollment periods, contact Medicare at 1.800.MEDICARE (1.800.633.4227.) TTY users should call 1.877.486.2048. Additional information can also be found in the “Medicare & You” handbook. This handbook is mailed to everyone with Medicare each fall. You may view or download a copy from www.medicare.gov - under “Search Tools,” select “Find a Medicare Publication.”

Until your membership ends, you must keep getting your Medicare services and/or prescription drug coverage through our Plan. If you leave our Plan, it may take some time for your membership to end and your new way of getting Medicare to take effect (we discuss when the change takes effect earlier in this section). While you are waiting for your membership to end, you are still a member and must continue to get your care and/or prescription drugs as usual through our Plan. If you happen to be hospitalized on the day your membership ends, generally you will be covered by our Plan until you are discharged. Call Member Services for more information and to help us coordinate with your new plan. You can contact Liberty Health Advantage Member Services at 1-866-542-4269 (TTY only, call 1-800-662-1220). Monday - Friday 8:00AM - 8:00PM.

Until your prescription drug coverage with our Plan ends, use our network pharmacies to fill your prescriptions. While you are waiting for your membership to end, you are still a member and must continue to get your prescription drugs as usual through our Plan’s network pharmacies. In most cases, your prescriptions are covered only if they are filled at a network pharmacy or our mail-order-pharmacy service, are listed on our formulary, and you follow other coverage rules.

We cannot ask you to leave the Plan because of your health

We cannot ask you to leave your health plan for any health-related reasons. If you ever feel that you are being encouraged or asked to leave our Plan because of your health, you should call 1.800.MEDICARE

(1.800.633.4227), which is the national Medicare help line. TTY users should call 1.877.486.2048. You may call 24 hours a day, 7 days a week.

Involuntarily ending your membership

If any of the following situations occur, we will end your membership in our Plan.

- If you do not stay continuously enrolled in Medicare A or B (or both)
- If you move out of the service area or are away from the service area for more than 6 months you cannot remain a member of our Plan , And we must end your membership (“disenroll” you)”. If you plan to move or take a long trip, please call Member Services to find out if the place you are moving to or traveling to is in our Plan’s service area. Section 10 gives more information about getting care when you are away from the service area. You can contact Liberty Health Advantage Member Services at 1-866-542-4269 (TTY only, call 1-800-662-1220) Monday - Friday 8:00 AM - 8:00 PM. After February 14, Member Services hours on Saturday and Sunday will be operated by alternate technology.
- If you knowingly falsify or withhold information about other parties that provide reimbursement for your prescription drug coverage.
- If you intentionally give us incorrect information on your enrollment request that would affect your eligibility to enroll in our Plan.
- If you behave in a way that is disruptive, to the extent that you continued enrollment seriously impairs our ability to arrange or provide medical care for you or for others who are members of our Plan. We cannot make you leave our Plan for this reason unless we get permission first from Medicare.
- If you let someone else use your plan membership card to get medical care. If you are disenrolled for this reason, CMS may refer your case to the Inspector General for additional investigation.

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 will tell you our reasons in writing and explain how you may file a complaint against us if you want to.

For additional information, please contact Liberty Health Advantage Member Services at 1-866-542-4269 (TTY only, call 1-800-662-1220), Monday – Friday 8 AM to 8 PM. After February 14, Member Services hours on Saturday and Sunday will be operated by alternate technology.