

GuildNet Gold Plus FIDA Plan MMP-POS offered by GuildNet, Inc.

Annual Notice of Changes for 2016

You are currently enrolled as a Participant of GuildNet Gold Plus FIDA Plan. Next year, there will be changes to the plan's benefits. Section B tells you about the changes.

You can end your membership in GuildNet Gold Plus FIDA Plan at any time.

Additional Resources

- You can get this information for free in other languages. Call 1-800-815-0000 and 1-800-662-1220 during 8am to 8pm, Monday through Sunday. The call is free.
- Usted puede obtener esta información en otros idiomas gratis. Llame al 1-800-815-0000 o TTY/TDD al 1-800-662-1220, de lunes a domingo de 8am a 8pm. La llamada es gratis.
- Queste informazioni sono disponibili gratuitamente in altre lingue.
 Chiamare il numero verde 1-800-815-0000 o 1-800-662-1220 mediante un telefono testuale per non udenti (TTY/TDD), da lunedì a domenica, dalle 8 alle 20. La chiamata è gratuita.
- 您可以免費獲得本信息的其他語言版本。請撥打 1-800-815-0000 或*聽障*/ 語障人士專線 (TTY/TDD) 1-800-662-1220,星期一至星期日上午 8 時至晚上 8 時。撥打該電話免費。
- Вы можете бесплатно получить эту информацию на других языках.
 Вы можете позвонить по телефону 1-800-815-000 и 1-800-662-1220 (ТТҮ/ТDD). Служба работает с понедельника по воскресенье с 8:00 до 20:00. Звонок бесплатный.
- Ou kapab jwenn enfòmasyon sa yo gratis nan lòt lang. Rele nimewo 1-800-815-0000 oswa TTY/TDD 1-800-662-1220, lendi jiska dimanch, depi 8am jiska 8pm. Koutfil la gratis.

- 다른 언어로 작성된 이 정보를 무료로 얻으실 수 있습니다. 월요일 일요일 오전 8 시부터 오후 8 시 사이에 1-800-815-0000 번이나 TTY/TDD 1-800-662-1220 번으로 전화주세요. 통화는 무료입니다.
- You can get this information for free in other formats, such as large print, braille or audio. Call 1-800-815-0000 and 1-800-662-1220 during 8am to 8pm, Monday through Sunday. The call is free.

About GuildNet Gold Plus FIDA Plan

- GuildNet Gold Plus FIDA Plan is a managed care plan that contracts with both Medicare and the New York State Department of Health (Medicaid) to provide benefits of both programs to Participants through the Fully Integrated Duals Advantage (FIDA) Demonstration.
- This GuildNet Gold Plus FIDA Plan is offered by GuildNet, Inc. When this *Annual Notice of Changes* says "we," "us," or "our," it means GuildNet, Inc. When it says "the plan" or "our plan," it means GuildNet Gold Plus FIDA Plan.

Disclaimers

GuildNet Gold Plus FIDA Plan is a managed care plan that contracts with both Medicare and the New York State Department of Health (Medicaid) to provide benefits of both programs to Participants through the Fully Integrated Duals Advantage (FIDA) Demonstration.

Limitations and restrictions may apply. For more information, call GuildNet Gold Plus FIDA Plan Participant Services or read the GuildNet Gold Plus FIDA Plan Participant Handbook. This means that you need to follow certain rules to have GuildNet Gold Plus FIDA Plan pay for your services. If you don't follow the rules or exceed service limits, you may have to pay for the services.

The List of Covered Drugs and/or pharmacy and provider networks may change throughout the year. We will send you a notice before we make a change that affects you.

Benefits may change on January 1 of each year.

The State of New York has created a participant ombudsman program called the Independent Consumer Advocacy Network (ICAN) to provide Participants free,

confidential assistance on any services offered by GuildNet Gold Plus FIDA Plan. ICAN may be reached toll-free at 1-844-614-8800 or online at icannys.org

Think about Your Medicare and 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 can leave the plan at any time.

If you leave our plan, you will still be in the Medicare and Medicaid programs. You will have a choice about how to get your Medicare and Medicaid benefits (go to section C starting on page 8 to see your options).

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 section B 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 B 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 in our network? What about your pharmacy? What about the hospitals or other providers you use? Look in section A for information about our *Provider and Pharmacy Directory*.
- ☐ Think about whether you are happy with our plan.

If you decide to <u>stay</u> with GuildNet Gold Plus FIDA Plan:

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 can switch plans at any time. If you enroll in a new plan, your new coverage will begin on the first day of the following month. Look in section C to learn more about your choices.

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A. Changes to the network providers and pharmacies

Our network of providers and pharmacies has changed for next year.

An updated *Provider and Pharmacy Directory* is located on our website at www.guildnetny.org. You may also call Participant Services at 1-800-815-0000 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 Participant Handbook.

B. Changes to benefits for next year

Changes to benefits for medical and long term care services

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

	2015 (this year)	2016 (next year)
Comprehensive Psychiatric Emergency Programs (CPEPs)	CPEPs are not covered.	\$0
If you are having a mental health crisis, GuildNet Gold Plus FIDA Plan will pay for Office of Mental Health licensed programs that directly provide or help you get a full range of psychiatric emergency services. These services are provided 24 hours a day, seven days a week.		This service must be obtained from an innetwork provider.

Crisis Intervention Services If you are having a mental health crisis, GuildNet Gold Plus FIDA Plan will pay for clinical intervention through your crisis intervention clinic. Crisis services do not need to be in your treatment plan in order to be covered. These services may be provided by phone or in person, with some exceptions. At a minimum, each clinic will have a clinician that can help you by phone 24 hours a day, seven days a week. At the clinic's option, it may provide face-to-face crisis services 24 hours a day, seven days a week.	Crisis Intervention Services are not covered.	This service must be obtained from an innetwork provider.
Residential Addiction Services GuildNet Gold Plus FIDA Plan will pay for addiction treatment services delivered by an approved residential program.	Residential Addiction Services are not covered.	This service must be obtained from an innetwork provider.

Changes to prescription drug coverage

Changes to our Drug List

We sent you a copy of our 2016 *List of Covered Drugs* in this envelope. 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 Participant Services at 1-800-815-0000 to ask for a list of covered drugs that treat the same condition. 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 receive your request (or your prescriber's supporting statement). To learn what you must do to ask for an exception, see Chapter 9 of the 2016 Participant Handbook or call Participant Services at 1-800-815-0000. If you need help asking for an exception, you can contact Participant Services or your Care Manager.
- CURRENT FORMULARY EXCEPTIONS ARE ONLY VALID THROUGH THE END OF 2015. YOU WILL NEED TO REQUEST A NEW EXCEPTION IF ONE IS STILL NEEDED IN 2016.

Changes to prescription drug costs

There are no changes to the amount you pay for prescription drugs in 2016. 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 table below shows your costs for drugs in each of our four drug tiers.

	2015 (this year)	2016 (next year)
Drugs in Tier 1 (Part D generic drugs)	Your co-pay for a one- month (30-day) supply is \$0 per prescription.	Your co-pay for a one- month (30-day) supply is \$0 per prescription.
Cost for a one-month supply of a drug in Tier 1 that is filled at a network pharmacy		

Drugs in Tier 2 (Part D brand drugs) Cost for a one-month supply of a drug in Tier 2 that is filled at a network pharmacy	Your co-pay for a one- month (30-day) supply is \$0 per prescription.	Your co-pay for a one- month (30-day) supply is \$0 per prescription.
Drugs in Tier 3 (Medicaid covered prescription drugs) Cost for a one-month supply of a drug in Tier 3 that is filled at a network pharmacy	Your co-pay for a one-month (30-day) supply is \$0 per prescription.	Your co-pay for a one-month (30-day) supply is \$0 per prescription.
Drugs in Tier 4 (Medicaid covered over-the-counter drugs & items) Cost for a one-month supply of a drug in Tier 4 that is filled at a network pharmacy	Your co-pay for a one-month (30-day) supply is \$0 per prescription.	Your co-pay for a one-month (30-day) supply is \$0 per prescription.

C. Deciding which plan to choose

If you want to stay in GuildNet Gold Plus FIDA Plan

We hope to keep you as a Participant next year.

To stay in our plan you don't need to do anything. If you do not sign up for a different plan or change to Original Medicare, you will automatically stay enrolled as a Participant of our plan for 2016.

If you want to leave GuildNet Gold Plus FIDA Plan and still get your Medicare and Medicaid services together from a single plan

If you want to keep getting your Medicare and Medicaid services together from a single plan, you can join a different FIDA Plan. You can enroll in the new FIDA Plan by calling New York Medicaid Choice at 1-855-600-FIDA, Monday through Friday from 8:30 am to 8:00 pm and Saturday from 10:00 am to 6:00 pm. TTY users should call 1-888-329-1541.

If you don't want a different FIDA Plan but you still want to get your Medicare and Medicaid services together from a single plan, you may be able to enroll in the Program of All-Inclusive Care for the Elderly (PACE) or the Medicaid Advantage Plus (MAP) Program. For more information, call New York Medicaid Choice.

If you want to leave GuildNet Gold Plus FIDA Plan and get your Medicare and Medicaid services separately

If you do not want to enroll in a different FIDA, PACE, or MAP Plan after you leave GuildNet Gold Plus FIDA Plan, you will go back to getting your Medicare and Medicaid services separately.

How you will get Medicare services

You will have three options for getting your Medicare services. By choosing one of these options, you will automatically end your membership in our FIDA Plan:

1. You can change to:

A Medicare health plan, such as a Medicare Advantage plan

Here is what to do:

Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, seven days a week. TTY users should call 1-877-486-2048.

If you need help or more information, call the Health Insurance Information, Counseling and Assistance Program (HIICAP) at 1-800-701-0501.

You will automatically be disenrolled from GuildNet Gold Plus FIDA Plan when your new plan's coverage begins.

2. You can change to:

Original Medicare *with* a separate Medicare prescription drug plan

Here is what to do:

Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, seven days a week. TTY users should call 1-877-486-2048.

If you need help or more information, call the Health Insurance Information, Counseling and Assistance Program (HIICAP) at 1-800-701-0501.

You will automatically be disenrolled from GuildNet Gold Plus FIDA Plan when your Original Medicare coverage begins.

3. You can change to:

Original Medicare without a separate Medicare prescription drug plan

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.

You should only drop prescription drug coverage if you get drug coverage from an employer, union or other source. If you have questions about whether you need drug coverage, call the Health Insurance Information, Counseling and Assistance Program (HIICAP) at 1-800-701-0501.

Here is what to do:

Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, seven days a week. TTY users should call 1-877-486-2048.

If you need help or more information, call the Health Insurance Information, Counseling and Assistance Program (HIICAP) at 1-800-701-0501.

You will automatically be disenrolled from GuildNet Gold Plus FIDA Plan when your Original Medicare coverage begins.

How you will get Medicaid services

You will have the opportunity to switch to a Medicaid Managed Long-Term Care plan for your long-term services and supports and to receive your Medicaid physical and behavioral health services through Medicaid Fee-for-Service.

Note: You can choose to completely stop receiving long-term services and supports. However, it may take extra time to complete a safe discharge process. During that time, you will be enrolled into the Medicaid Managed Long-Term Care plan operated by the same company as GuildNet Gold Plus FIDA Plan. Your change request on your Medicare coverage will not be delayed and will take effect on the first day of the month after you request the change.

If you were receiving services through the Nursing Home Transition & Diversion (NHTD) 1915(c) waiver prior to enrolling in a FIDA Plan, you will have the opportunity to re-apply for the waiver. You will continue to receive any existing Nursing Home Transition & Diversion services from GuildNet Gold Plus FIDA Plan or enroll in a Medicaid Managed Long-Term Care plan to receive your Medicaid services until your NHTD application is approved. New York Medicaid Choice can help you with your NHTD application.

D. Getting help

Getting help from GuildNet Gold Plus FIDA Plan

Questions? We're here to help. Please call Participant Services at 1-800-815-0000 (TTY only, call 1-800-662-1220). We are available for phone calls Monday through Sunday, 8am to 8pm. Calls to these numbers are free

Read your 2016 Participant Handbook

The 2016 Participant 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.

We will send you a copy of the 2016 Participant Handbook by December 31. An up-to-date copy of the 2016 Participant Handbook is always available on our website at www.guildnetny.org. You may also call Participant Services at 1-800-815-0000 to ask us to mail you a 2016 Participant Handbook.

Visit our website

You can also visit our website at www.guildnetny.org. 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*).

Getting help from the state enrollment broker

New York Medicaid Choice is New York State's managed care enrollment program. New York Medicaid Choice counselors can tell you about all your managed care options. You can call New York Medicaid Choice at 1-855-600-FIDA, Monday through Friday from 8:30 am to 8:00 pm and Saturday from 10:00 am to 6:00 pm. TTY users should call 1-888-329-1541.

Getting help from the Independent Consumer Advocacy Network

The Independent Consumer Advocacy Network (ICAN) can help you if you are having a problem with GuildNet Gold Plus FIDA Plan. ICAN is not connected with us or with any insurance company or health plan. The phone number for ICAN is 1-844-614-8800. The services are free.

Getting help from the State Health Insurance Assistance Program

You can also call the State Health Insurance Assistance Program (SHIP). In New York State, the SHIP is called the Health Insurance Information, Counseling, and Assistance Program (HIICAP). The HIICAP counselors can help you understand your FIDA Plan choices and answer questions about switching plans. HIICAP is not connected with us or with any insurance company or health plan. The HIICAP phone number is 1-800-701-0501.

Getting help from Medicare

To get information directly from Medicare:

Call 1-800-MEDICARE (1-800-633-4227).

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.

Visit the Medicare Website

You can visit the Medicare website (http://www.medicare.gov). If you choose to disenroll from your FIDA 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 http://www.medicare.gov and click on "Find health & drug plans.")

Read Medicare & You 2016

You can read *Medicare & You 2016* 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 (http://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.

Getting help from Medicaid

To get information directly from Medicaid, call the Medicaid Helpline at 1-800-541-2831 (TTY: 1-877-898-5849). The Medicaid Helpline is available Monday through Friday from 8:00 am to 8:00 pm and Saturday from 9:00 am to 1:00 pm.