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## **Chapter 8. Ending your membership in the plan**

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## **SECTION 1 Introduction**

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<b>Section 1.1 This chapter focuses on ending your membership in our plan</b>
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Ending your membership in Welborn Health Plans 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 medical care through our plan until your membership ends.

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

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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 and during the Medicare Advantage Open Enrollment Period. In certain situations, you may also be eligible to leave the plan at other times of the year.

<b>Section 2.1 You can end your membership during the Annual Enrollment Period</b>
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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.

You can disenroll from this plan at any time. You may switch to Original Medicare or use a Special Enrollment Period to enroll in a Medicare Advantage Plan. If you have Medicare prescription drug coverage through our plan, you will also have a Special Enrollment Period to enroll in other Medicare prescription drug coverage.

- **When is the Annual Enrollment Period?** This happens every year from November 15 to December 31.
- **What type of plan can you switch to during the Annual Enrollment Period?** During this time, you can review your health coverage and. 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 Advantage plan. (You can choose a plan that covers prescription drugs or one that does not cover prescription drugs.)
  - Original Medicare *with* a separate Medicare prescription drug plan.
  - – *or* – Original Medicare *without* a separate Medicare prescription drug plan.

**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.)
- **What do you need to do to switch plans?**
  - If you want to switch to Original Medicare: You must request to disenroll from our plan. For more information on how to request disenrollment contact Customer Service, or call 1-800-MEDICARE (1-800-633-4227) to request disenrollment from our plan. TTY users should call 1-877-486-2048.
  - If you are already enrolled in a Medicare prescription drug plan, you will continue to be enrolled in your current plan. Disenrollment from our plan will not affect your enrollment. However, if you want to join a new drug plan, you must request enrollment in the plan of your choice. Enrollment in the new drug plan will not automatically disenroll you from our plan.
  - If you do not have Medicare prescription drug coverage with another plan, you can join another Medicare Advantage plan that does not offer drug coverage or you can switch to Original Medicare.
- **When will your membership end?** Your membership will end when your new plan’s coverage begins on January 1.

<b>Section 2.2</b>	<b>In certain situations, you can end your membership during a Special Enrollment Period</b>
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In certain situations, members of Welborn Health Plans 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>):
  - Usually, when you have moved.
  - If you have Medicaid.
  - 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 Advantage plan. (You can choose a plan that covers prescription drugs or one that does not cover prescription drugs.)
  - Original Medicare *with* a separate Medicare prescription drug plan.
  - – *or* – Original Medicare *without* a separate Medicare prescription drug plan.

**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.

<b>Section 2.3</b>	<b>Where can you get more information about when you can end your membership?</b>
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If you have any questions or would like more information on when you can end your membership:

- You can **call Customer Service** (phone numbers are on the cover of this booklet).
- You can find the information in the *Medicare & You 2010* 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.

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

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<b>Section 3.1</b>	<b>Usually, you end your membership by enrolling in another plan</b>
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You may end your membership in our plan at any time during the year and change to Original Medicare. Your membership will end on the first of the month following your request to our Plan. To end your membership, you must make this request in writing to us. Contact us if you need more information on how to do this.

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

<b>If you would like to switch from our plan to:</b>	<b>This is what you should do:</b>
<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.  You will automatically be disenrolled from Welborn Health Plans when your new plan’s coverage begins.</li> </ul>
<ul style="list-style-type: none"> <li>• Original Medicare <i>with</i> a separate Medicare prescription drug plan.</li> </ul>	<ul style="list-style-type: none"> <li>• Enroll in the new Medicare prescription drug plan.  You will automatically be disenrolled from Welborn Health Plans when your new plan’s coverage begins.</li> </ul>
<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 Customer Service and ask to be disenrolled from the plan (phone numbers are on the cover of this booklet).</b></li> </ul>

**If you would like to switch from our plan to:**

**This is what you should do:**

- You can also contact **Medicare** at 1-800-MEDICARE (1-800-633-4227) and ask to be disenrolled. TTY users should call 1-877-486-2048.
- You will be disenrolled from Welborn Health Plans when your coverage in Original Medicare begins.

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

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<b>Section 4.1      Until your membership ends, you are still a member of our plan</b>
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If you leave Welborn Health Plans, 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 medical care through our plan.

- **If you are hospitalized on the day that your membership ends, you will usually be covered by our plan until you are discharged** (even if you are discharged after your new health coverage begins).
- If you use out-of-network providers to obtain medical services, the services are covered under Original Medicare. You will be responsible for Original Medicare's cost-sharing for such services, with the exception of emergent and urgently needed services.

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## **SECTION 5      Welborn Health Plans must end your membership in the plan in certain situations**

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<b>Section 5.1      When must we end your membership in the plan?</b>
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**Welborn Health Plans must end your membership in the plan if any of the following happen:**

- If you do not stay continuously enrolled in Part B. Members must stay continuously enrolled in Medicare Part B.
- If you move out of our service area for more than 90 days.
  - If you move or take a long trip (90 days), you need to call Customer Service to find out if the place you are moving or traveling to is in our plan's area.
  - Chapter 3 and Chapter 4 give more information about getting care when you are away from the service area.
  - If you have been a member of our plan continuously since before January 1999 and you were living outside of our service area before January 1999, you may continue your membership. However, if you move and your move is to another location that is outside of our service area, you will be disenrolled from our plan. 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, unruly, uncooperative, abusive, or and makes it difficult for us to provide medical 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 medical care.
  - 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 60 days.
  - We must notify you in writing that you have 60 days 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 **Customer Service** for more information (phone numbers are on the cover of this booklet).

**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 10 for information about how to make a complaint.