

[Date of Notice]

[FIRST NAME] [LAST NAME]
ADDRESS
[CITY], [STATE] [ZIP CODE]

INFORMATION ONLY

Dear [FIRST NAME]:

Thank you for choosing Optima Health for your healthcare needs. You have been identified as being enrolled in a Medicare or Medicare Advantage plan, either with Optima Health or another insurance carrier. As a result, beginning January 1, 2019, we will be unable to renew your current Individual & Family health insurance coverage.

Under Federal regulations, members enrolled in Medicare coverage cannot be enrolled in duplicate benefits from an Individual & Family health insurance plan, either through the Health Insurance Marketplace (healthcare.gov) or directly through an insurance carrier.

If you are enrolled in coverage through the Health Insurance Marketplace and receive an Advance Premium Tax Credit (APTC) to help pay your insurance premiums, you may be required to pay back the APTC for the months you were enrolled in both Medicare and Marketplace plans. You may contact the Marketplace directly at healthcare.gov or 1-800-318-2596 (TTY: 1-855-889-4325).

If you have questions about your Medicare coverage, please call 1-800-633-4227 (TTY: 1-877-486-2048).

If you believe this letter to be in error, please contact us 1-866-514-5916.

Sincerely,



John E. DeGruttola
Senior Vice President, Marketing and Sales