



When does the Medicaid Annual Plan Change Request begin and end?

What is the timeline for letters to be mailed?

Does every member get their own letter?

Can family members choose different health plans?

How does a member change health plans?

If a member changes health plans, when is the change effective?

What happens if the members ignore the letter?

What should the member do if they lose the letter and want to make a change?

What if the member tells you that information is incorrect on the letter (ex. address)?

Are there any differences between the health plans?

What should the member do if they did not get a letter?

Can a member change their plan before they receive a letter?

Can a member change his/her health plan outside of this Medicaid Annual Plan Change Opportunity period?

Will the member's dental benefits change if they pick a new health plan?

When will the next Medicaid Annual Plan Change Opportunity period be?

What do I do if a member says that they have received multiple letters, one for open enrollment and one for a termination of their enrollment?

What should I tell a member who has prior authorizations or are in treatment? Participating Health Plans

When does the Medicaid Annual Plan Change Opportunity begin and end?

The Medicaid Annual Plan Change Opportunity is from September 6th through October 31st.

What is the timeline for letters to be mailed?

The letters are being mailed to members beginning in early September, continuing into early October. There will be 5 waves (mailings). See timeline posted at <http://www.eohhs.ri.gov/Home/PlanChange.aspx> for mailing dates.

Does every member get their own letter?

Letters are mailed to the head of household, and will list the member(s) the letter applies to. Some households may receive more than one letter if the members are enrolled in different managed care programs (Rite Care, Medicaid Expansion, or Rhody Health Partners).



Can family members choose different health plans?

All Rite Care members must choose the same health plan. Members in Rhody Health Partners and Medicaid Expansion may select their own health plan.

How does a member change health plans?

They have two choices:

- *Call HealthSource RI at 1-855-840-4774 and ask to make a change. Or*
- *The member can fill out the Plan Change Request form that is with the letter they received and mail it back in the enclosed envelope.*

Please Note:

- *Members can make a change anytime during the Open Enrollment period up to Oct 31st.*
- *If a member loses the Plan Change Request form, there is one on the EOHHS website for download from <http://www.eohhs.ri.gov/Home/PlanChange.aspx> The form can be printed and mailed in.*

If a member changes health plans, when is the change effective?

Changes may take up to 8 weeks to be effective. The change will be effective based on the date the request is received.

- *Rite Care – First date of the next month or first day of the following month, depending on cutoff date*
- *Rhody Health Partners and Medicaid Expansion – 1st day of next month depending on monthly cut-off*

What happens if the members ignore the letter?

Nothing. They will stay enrolled in their current plan.

What should the member do if they lose the letter and want to make a change?

They have two choices. They can call HealthSource RI at 1-855-840-4774 and ask to change their health plan. Or, they can print a Plan Change Request form at <http://www.eohhs.ri.gov/Home/PlanChange.aspx> fill it out, and mail it in to the address on the form.

What if the member tells you that information is incorrect on the letter (ex. address)?

The member should contact HealthSource RI at 1-855-840-4774 to update their information. It is important to have the correct address for all Medicaid beneficiaries.



Are there any differences between the health plans?

There are no differences in benefits. There may be differences in the provider network and the formulary. Beneficiaries should verify that their healthcare providers are in the plan, and that their prescriptions are covered before making a change. There could also be some special programs offered by each plan. The member would need to call the health plan to find out about any special programs. (See page 4 for contact information)

What should the member do if they did not get a letter?

The letters are being mailed out in groups. If they do not receive a letter by early October, they can call HealthSource RI at 1-855-840-4774. Even if they do not get their letter until October, they will have time to make a change. The Annual Plan Change Opportunity ends on Oct 31st. Some Medicaid populations are not part of this Annual Plan Change Opportunity, they include: RlteShare, Foster Care, Extended Family Planning (EFP), Incarcerated recipients, and Rhody Health Options.

Can a member change their plan before they receive a letter?

Yes, they can call HealthSource RI at 1-855-840-4774 to make the change or the member can download the Plan Change Request form to mail to EOHHS.

Can a member change his/her health plan outside of this Medicaid Annual Plan Change Opportunity period?

Once the Annual Plan Change Opportunity period ends, a member may only change their health plan for “just cause”. For more information, they should contact their current health plan.

Will the member’s dental benefits change if they pick a new health plan?

No, the member’s dental benefits will stay the same.

When will the next Medicaid Annual Plan Change Opportunity period be?

The next Medicaid Annual Plan Change Opportunity period has not been determined yet.

What do I do if a member says that they have received multiple letters, one for open enrollment and one for a termination of their enrollment?

Any notice regarding termination or a request for additional documentation is the priority. This should be addressed first. If the member would like to select a new plan, they can if they are still active, but that new plan change is contingent on their continued Medicaid eligibility.

What should I tell a member who has prior authorizations or are in treatment?

The member should be instructed to contact their existing plan to arrange a plan for transition of their care to their new health plan.



Participating Health Plans



1-401-459-6020 or 1-800-459-6019
nhpri.org/become-a-member



1-866-738-4116
tuftshhealthplan.com/member/tufts-health-ritogether/home



1-800-587-5187
UHCommunityPlan.com/ri