

# CareSource® MyCare Ohio (HMO D-SNP)

2026



**BETTER TOGETHER**  
MEDICARE + MEDICAID

# Welcome!

Thank you for considering  
**CareSource MyCare Ohio!**

**Our goal today:**

Help you by sharing the information you need so you can make  
an **informed decision** about your health care choices.



# CARESOURCE

## Our Vision

Transforming lives through  
innovative health and life services.

It's not just about making a **change**.  
It's about making a ***difference***.



# Today's Discussion

Today we will review the following topics to provide information about your Medicare options, including:

- Medicare eligibility
- ABCDs of Medicare
- Accessing your care
- CareSource MyCare Ohio benefits
- How to enroll
- What to expect (after you enroll)



# Our Mission

To make a lasting difference in our members' lives by improving their health and well-being.

## About Us

<2.1>M+  
MEMBERS

- A nonprofit health care plan and national leader in Managed Care
- 30+ year history of serving varied populations across multiple states and insurance products
- Currently serving more than <2.1> million members\* in Arkansas, Georgia, Indiana, Kentucky, Michigan, North Carolina, Ohio, West Virginia, Florida, Mississippi, Wisconsin, Nevada, Massachusetts and New York
- <4,900> employees located across <45> states

MEDICAID

HEALTH INSURANCE MARKETPLACE

DUAL ELIGIBLE

\*Based on members enrolled in all CareSource product lines across all states as of 6/1/2024

# ABOUT Me

## MY EXPERIENCE

- My background and expertise
- My personal mission

## As a Licensed Sales Agent:

- I do not represent the government, Medicare or Medicaid.
- I may be compensated based on your enrollment.
- I want you to know that you are under no obligation to join a plan.



# ABCDs of Medicare

Original Medicare





# CareSource® MyCare Ohio (HMO D-SNP)

## What is the “Next Generation of MyCare Ohio”?

The Next Generation MyCare Ohio refers to the innovative changes the Ohio Department of Medicaid (ODM) is making to upgrade the current MyCare Ohio program. The goal is to deliver a better person-centered experience for Ohioans across the state. ODM designed its Next Generation MyCare Ohio program to:

- Focus on the individual.
- Improve individual and population wellness and health outcomes.
- Create a personalized care experience.
- Support providers in continuously improving care.
- Improve care for individuals with complex needs to promote independence in the community.
- Increase program transparency and accountability.

## Who can join Next Generation of MyCare Ohio?

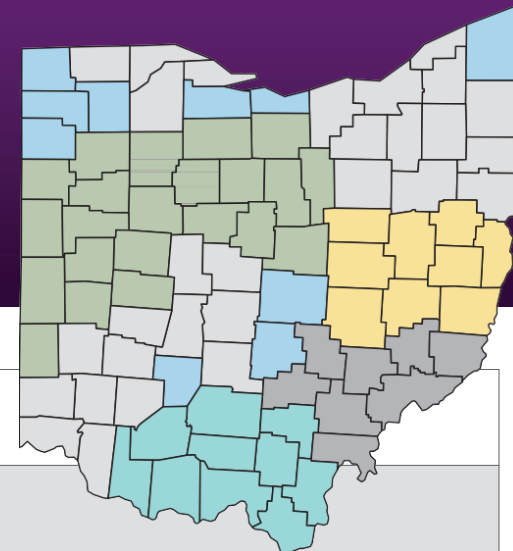
To be eligible, you must:

- Be 21 or older
- Qualify for full Medicare and Medicaid benefits (Qualified Medicare Beneficiary Plus, Specified Low-Income Medicare Beneficiary Plus, Full Benefit Dual Eligible)
- Live in one of the 29 counties where MyCare is currently offered until it expands statewide





# Next Generation MyCare Ohio Program Rollout



## What are the benefits?

- One Care Coordinator to help manage both Medicare and Medicaid benefits.
- One ID card.
- Only one organization will handle care, making it simple.
- Receive communications from just one source, reducing any confusion. We're here to make our members' health care experiences smoother and more straightforward!

## Why CareSource?

- Community focus: We're Ohio's only nonprofit Medicaid managed care organization, making decisions that benefit our local communities.
- Easy access to care: Our strong local network means less hassle for providers, so they can focus on taking care of our members.
- Personalized support: We provide tailored care that respects members' unique needs and culture.
- Experience you can trust: We've served Ohio since 1989, so we know how to take care of our members.
- Quick solutions: We're here to help our members find the support they need, right when they need it.

### Phase 1: Current MyCare Counties

On Jan. 1, 2026, ODM will roll out the Next Generation MyCare program in the 29 counties where MyCare is currently available today.

<b>Jan. 1, 2026</b>	AAA1: Butler, Warren, Clinton, Hamilton, Clermont AAA2: Montgomery, Clark, Greene AAA6: Franklin, Delaware, Union, Madison, Pickaway AAA4: Lucas, Fulton, Ottawa, Wood AAA10a: Lorain, Cuyahoga, Medina, Lake, Geauga AAA10b: Summit, Portage, Stark, Wayne AAA11: Columbiana, Mahoning, Trumbull
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### Phase 2\*: Remaining Counties

Starting on Apr. 1, 2026, and continuing through the year, ODM will roll out the Next Generation MyCare program in the remaining counties.

<b>Apr. 1, 2026</b>	AAA4: Sandusky, Erie, Henry, Williams, Defiance, Paulding AAA6: Fayette, Fairfield, Licking AAA11: Ashtabula
<b>May 1, 2026</b>	AAA2: Preble, Darke, Miami, Shelby, Champaign, Logan AAA3: Van Wert, Putnam, Hancock, Allen, Mercer, Auglaize, Hardin AAA5: Seneca, Huron, Wyandot, Crawford, Richland, Ashland, Marion, Morrow, Knox
<b>June 1, 2026</b>	AAA7: Ross, Vinton, Highland, Pike, Jackson, Gallia, Brown, Adams, Scioto, Lawrence
<b>July 1, 2026</b>	AAA9: Holmes, Tuscarawas, Carroll, Jefferson, Coshocton, Harrison, Belmont, Guemsey, Muskingum
<b>Aug. 1, 2026</b>	AAA8: Hocking, Perry, Morgan, Noble, Monroe, Washington, Athens, Meigs

# When will Next Generation MyCare Ohio be available?

The Next Generation MyCare Ohio program is set to launch **January 1, 2026**, using a phased rollout to ensure a seamless transition for Ohioans who are dual eligible for Medicare and Medicaid.

## KEY DATES

### Fall 2025:

- The Ohio Department of Medicaid will distribute information to members and providers regarding the Next Generation MyCare Ohio program.
- Supplemental benefit information will also be shared in the fall of 2025.

### January 1, 2026 (Phase 1):

- The Next Generation MyCare Ohio program will begin covering the full spectrum of Medicare and Medicaid services in 29 counties.

### April - August 2026 (Phase 2):

- The program will expand into the remaining 59 counties across Ohio.



# Healthy Benefits+ Debit Card

**OHIO:**  
**\$287 MONTHLY**

ROLL OVER INCLUDED!

One debit card with access to multiple benefits.

## Shared Healthy Benefits+ Allowance:

- Over-the-counter items (OTC)
- **Flex Allowance:** Dental, Vision and Hearing services and accessories. Not limited to network providers.
- \*Utilities
- \*Rent and mortgage assistance
- \*Home and bathroom safety items
- \*Pest control retail items
- \*Indoor air quality items
- \*Personal care items
- \*Household cleaning supplies
- \*Pet care item's (not including veterinary or grooming)
- \*Healthy food

Unused amounts will roll over month-to-month and expire at the end of the year.

## Healthy Benefits+



\*Those with one or more listed conditions may qualify for the Healthy Benefits+ allowance for additional items and services. To learn if you qualify, talk to your Care Coordinator



# Special Supplemental Benefits for the Chronically Ill Eligible Conditions

## SSBCI Conditions =

1. Autoimmune disorders
2. Cancer
3. Cardiovascular disorders
4. Chronic alcohol use disorder and other substance use disorders (SUDs)
5. Chronic and disabling mental health conditions
6. Chronic conditions that impair vision, hearing (deafness), taste, touch and smell
7. Chronic gastrointestinal disease
8. Chronic heart failure
9. Chronic kidney disease (CKD)
10. Chronic lung disorders
11. Conditions associated with cognitive impairment
12. Conditions that require continued therapy services for individuals to maintain or retain functioning
13. Conditions with functional challenges
14. Dementia
15. Diabetes mellitus
16. HIV/AIDS
17. Immunodeficiency and Immunosuppressive disorders
18. Neurologic disorders
19. Overweight obesity and metabolic syndrome
20. Post-organ transplantation
21. Severe hematologic disorders
22. Stroke



Those with one or more qualifying conditions may use the Healthy Benefits+ allowance for additional items and services. To learn if you to qualify, talk to your Care Coordinator.



# My CareSource Rewards

**\*Earn up to <\$715> each year!**

- As a CareSource member you are automatically enrolled in the My CareSource Rewards® program. The rewards available are different depending on your health and needs.
- If not used, rewards will expire two year from the date they are added to your card.

Annual Physical (\$50)	Colorectal Cancer Screening (\$50)
A1C Test -1 (\$50)	Breast Cancer Screening (\$50)
A1C Test - 2 (\$50)	Follow up for Osteoporosis w/ Fracture (\$10)
Retinal Eye Exam with Eye Care Provider (\$50)	Engagement / MyLife app (\$10)
Kidney Evaluation for Patients with Diabetes (\$25)	Engagement with Care Coordinator within 30 days of Hospital discharge (\$50)
Flu Shot -1 (\$50)	Postpartum Visit each Pregnancy (\$25)
Flu Shot - 2 (\$50)	7 Prenatal Visits each Pregnancy (\$85)
Health Risk Assessment (HRA) - 1 (\$50)	Dental cleaning 1x / year (\$10)
Health Risk Assessment (HRA) - 2 (\$50)	

Rewards are subject to change. Rewards may vary by age, gender, and health needs. Rewards may expire based on date of issuance. If you are no longer a CareSource member, your access to the rewards portal will be deactivated, but the reward amount will remain on the card



# \$0 Copay for Covered Drugs

## Exceptional Drug Coverage

- **Simplify your life** with Medicare & Medicaid drug coverage in one plan!
  - **\$0 copay for covered drugs**
  - CareSource offers a lengthy Medicare Part D List of Covered Drugs
  - Enjoy add-on Medicaid drug coverage including:
    - Drugs not covered under Medicare Part D
    - Over-the-counter (OTC) products
- Choose the pharmacy option that suits you best!
  - 30-day, 60-day and 102-day supplies at your local drugstore or home delivery.<sup>†</sup>
- No cost- dedicated CareSource pharmacists help you manage your meds and your health. Just a phone call away!



<sup>†</sup> See <[www.CareSource.com/oh/plans/mycare/plan-documents](https://www.CareSource.com/oh/plans/mycare/plan-documents)> for more details. Home delivery is available for most, but not all medications. See List of Covered Drugs <<https://www.CareSource.com/oh/plans/mycare/plan-documents/>>. Express Scripts requires at least 35-day supply for most meds.





# \$0 Copay Covered Medical Benefits

- Primary care provider (PCP)/Specialist office visits
- Inpatient hospital care
- Emergency room (ER) Visits
- Urgent care visits
- Preventive care
- Routine podiatry
- Part D drugs
- Home health care
- Ambulance services
- Durable medical equipment (DME)
- Telehealth or behavioral health visit
- Annual physical
- Personal emergency response system  
(community well only)



# Dental Benefits

**Plus: \*\$5,000 annual max  
for implants!**

## Preventive Services

- Oral Exam – *1x per 6 months*
- Cleaning – *1x per 6 months*
- X-ray – *1x per year*
- Fluoride – *1x per 6 months*



## Comprehensive Services

- Restorations – *fillings/crowns*
- Endodontics – *root canals*
- Periodontics – *gum treatment*
- Prosthodontics – *bridges, dentures, implants*
- Oral Surgery – *extractions/other*
- Other Procedures – *sedation/anesthesia*

\*Medicaid covers many dental services including preventive and comprehensive dental services. To view Medicaid dental coverage, visit <https://medicaid.ohio.gov/families-and-individuals/srvcs/dental>

\*Prior authorization may be required.

\*\$5,000 supplemental dental covers 1 oral exam, 1 cleaning, 2 fluoride treatments, plus implants





# Hearing Benefit

## CareSource MyCare Ohio:

\$0 Copay Hearing exam

## TruHearing:

32 Channels | 8 Styles

Superior hearing in most environments

- 2 TruHearing Advanced Level Hearing Aids every 3 years. (limit 1 hearing aid per ear every 3 years)
- Rechargeable styles are available.

## Your hearing aid purchase includes:

- Risk-free 60-day trial period
- 1 year of follow-up visits
- 80 batteries per non-rechargeable hearing aid
- Full 3-year manufacturer warranty



**TruHearing®**



# Vision Benefit

## Benefits

EyeMed Comprehensive exam & Eyeglasses and contacts (medically-necessary) are covered:

- Age: 21-59 - 1 exam & 1 pair every 2 years
- Age: 60 years or older - 1 exam & 1 pair per year

*\*Deluxe frames, transitions and progressive lenses are not covered*

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- Flex Allowance
- Supplemental Vision Services and Accessories

*\*Not limited to Network Providers!*





# Fitness Benefit

**Fitness center membership** – *Gym membership*

**One home fitness kit** – *Choose one per benefit year*

**Workout plans** – *Customized workout plans*

**Digital workouts** – *On demand videos*

**Well-being club** – *Online resources*

**Well-being coaching** – *Lifestyle coaching*

**Silver&Fit Connected!** – *Tool to assist with tracking activity*

**5 Available  
Home Fitness  
Kits:**



# Transportation

## Rides to where?

- Health care visits
- Community/Wellness services
- Pharmacy
- Gym
- Grocery store

## How many trips?

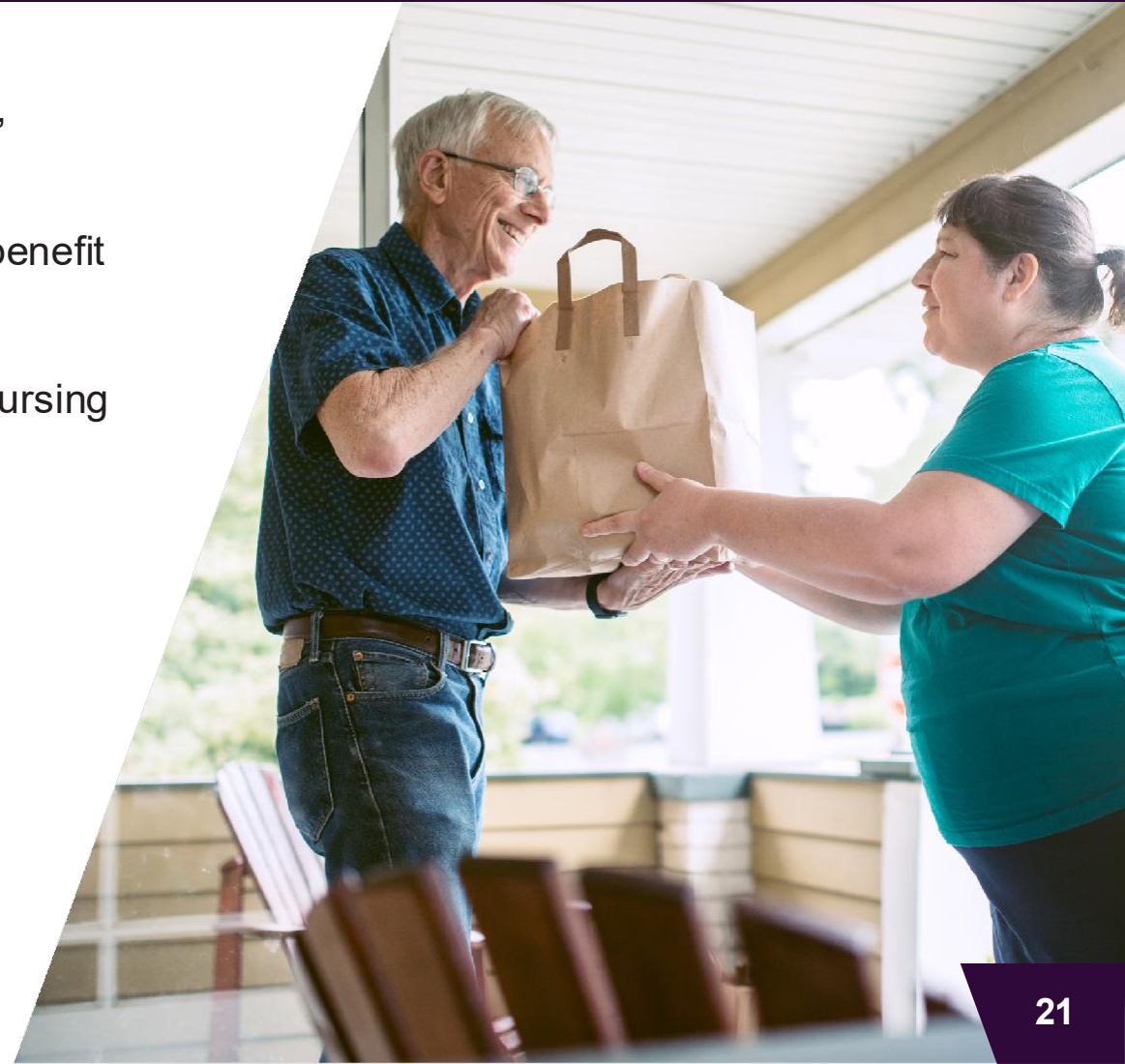
- ***Unlimited!***





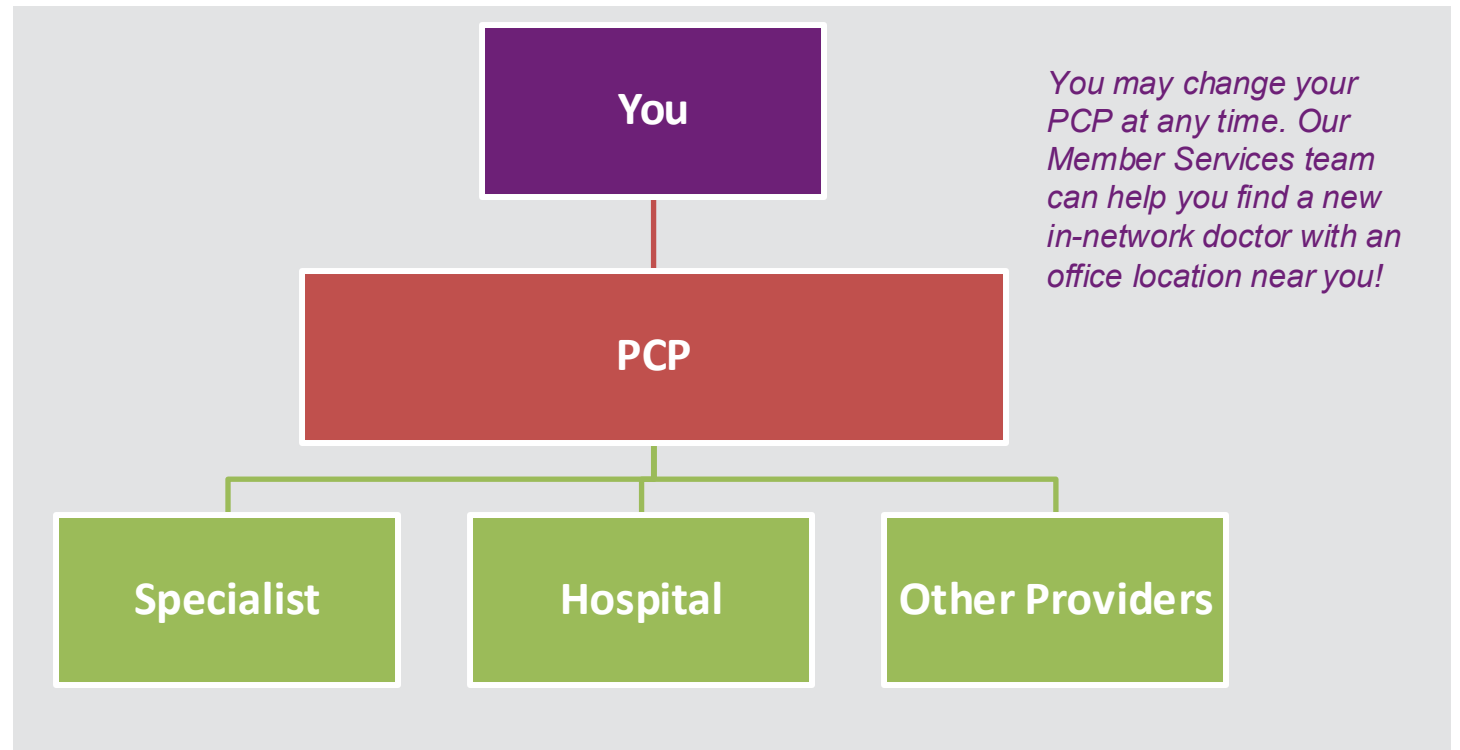
# Meals

- Nutritionally-balanced refrigerated meals, ready to heat and eat, delivered to your door.
- Meal options available based on preferences and needs. Meal benefit available following each inpatient stay or skilled nursing stay.
- 2 meals per day for 14 days following each inpatient or skilled nursing facility stay.
- (Community well only)



# The role of your Primary Care Provider

You can depend on us to work with your health care providers and pharmacists to maintain your health. We encourage you to select a CareSource MyCare Ohio in-network primary care provider (PCP) that will coordinate all your health care needs except for urgent and emergency care and out-of-area dialysis services.



# Let's Get You Enrolled

## COMPLETE AN APPLICATION!

- By calling  
    <1-855-475-3163> <(TTY:1-833-711-4711 or 711)>
- Online at  
    <CareSource.com/MyCare-SNP/>
- Online at  
    <Medicare.gov>



# In the Next Few Weeks

- CareSource will process your application and confirm your eligibility.
- Medicare will confirm your enrollment.
- You'll receive your confirmation letter or call & Low-Income Subsidy rider (if eligible).
- Receive your CareSource member ID card within a few weeks after you enroll.
- Your New Member Kit will arrive in the mail.
- During the first 90 days of enrollment, you will receive a call from a Care Coordinator. They will assist you in completing the Health Risk Assessment (HRA) and ensure you get the care and resources that meet your specific needs. You can also complete the HRA at the time of enrollment.



# What to Expect

As a new CareSource member:

**1**

You will receive a welcome call from a CareSource representative to answer any questions about your new plan.

**2**

Help with scheduling an Annual Wellness Visit with an in-network provider (at no cost to you!) and other preventive screenings.

**3**

Expect to hear from our Care Coordination team within the next 90 days.





# CareSource Care Coordination

**CareSource has nurses and other outreach staff to help coordinate your health care needs. They may contact you by phone.**

Our staff is trained to help you with any special medical problems like asthma, cancer, diabetes or other medical conditions.

- Help completing your Health Risk Assessment (HRA)
- Find community resources
- Schedule provider appointments
- Answer any questions you may have about your plan benefits
- Find in-network specialists or providers for you
- Scheduling transportation (rides) so you can get to your appointments
- Discuss medications (if applicable)





# CareSource MyLife<sup>SM</sup>

## Your Personal Online Account

### Get the most out of your member experience.

- Select or change your PCP
- Request a new CareSource member ID card
- View claims and plan details
- Update your contact information
- Receive a customized wellness plan
- And more

Visit [<MyLife.CareSource.com>](https://MyLife.CareSource.com) to sign up now! It's fast, easy and secure.

Want to talk to someone instead? Call us at

**<1-855-475-3163>**

**(<TTY: 1-833-711-4711 or 711>)**

We are open 8 a.m. to 8 p.m., Monday through Friday, and from October 1 through March 31, we are open the same hours, seven days a week.



THANKS FOR YOUR TIME  
Any Questions?

**Here's where to find information:**

- **<CareSource.com/MyCare-SNP/>**
- Call us!  
**<1-855-475-3163> (<TTY: 1-833-711-4711 or 711>)**



*CareSource® MyCare Ohio (HMO D-SNP) is a health plan that contracts with both Medicare and Ohio Medicaid to provide benefits of both programs to enrollees. Enrollment in CareSource depends on contract renewal.*

**Contact CareSource:**

Member Services: <1-855-475-3163> (<TTY: 1-833-711-4711 or 711>)

**Hours of operation for both Sales and Member Services:**

We are open 8 a.m. to 8 p.m., Monday through Friday, and from October 1 through March 31, we are open the same hours, seven days a week.

*Or call <1-800-MEDICARE> <(1-800-633-4227)> <(TTY: 1-877-486-2048)>, 24 hours a day / 7 days a week.*



<Include Notice of Availability and Non-Discrimination Notice>

