

CARESOURCE[®] MYCARE OHIO (HMO D-SNP) 2027



**MEDICARE + MEDICAID
BETTER TOGETHER**


CareSource[®]

Get all your health coverage in one place – for \$0 a month! Medicare and Medicaid work better together with CareSource® MyCare Ohio (HMO D-SNP).

CareSource makes it simple to get the care and support you need in one easy, local plan.

ELIGIBILITY

Individuals who meet the following criteria are eligible for MyCare Ohio:

- You must be 21 or older
- Eligible for Medicare Parts A & B
- Have full Medicaid eligibility (Qualified Medicare Beneficiary Plus (QMB+), Specified Low-Income Medicare Beneficiary Plus (SLMB+), Full Benefit Dual Eligible (FBDE))
- Live in the state of Ohio

To see if you qualify and learn more:

- Scan this QR code with your phone
- Visit **CareSource.com/MyCare-SNP**
- Speak to your local agent or broker
- Contact CareSource MyCare Ohio at **1-844-607-2830 (TTY: 1-833-711-4711 or 711)**



CareSource MyCare Ohio includes the following extra benefits and services (at no cost to you!) to help support you and your health:

The Healthy Benefits+ debit card provides all members **\$300 per month** to purchase the following qualifying items, services and accessories at eligible locations:

- Over-the-counter (OTC) items
- Dental
- Vision
- Hearing

For members approved for Special Supplemental Benefits for the Chronically Ill, they may use their \$300 monthly allowance on the Healthy Benefits+ debit card for the following qualifying items and services at eligible locations:

- Healthy food¹
- Utilities¹
- Rent and mortgage assistance¹
- Household cleaning supplies¹
- Personal care items¹
- Haircut & barber services¹

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

CareSource MyCare Ohio benefits² include:

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Earn up to \$595 each year with My CareSource Rewards[®] program, which offers members incentives for completing wellness activities.³
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\$0 Medicare- & Medicaid-covered drugs
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Enhanced dental: Preventive and comprehensive services. Plus⁴ \$3,000 annual max for implants.
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Enhanced hearing: One hearing exam per year and two hearing aids (limit one per ear every 3 years).
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Enhanced vision: One eye exam plus a \$250 eyewear allowance per year.
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Unlimited transportation: Get unlimited health-related rides to doctor appointments, pharmacy, gym and grocery and community/wellness services.
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28 meals per discharge after inpatient or skilled nursing facility stay. (2 per day for up to 14 days, Community Well only⁵).
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Silver&Fit[®]: No-cost gym membership at participating locations, 1 home fitness kit per year, digital workouts and other personalized resources.
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Personal Emergency Response System (PERS) that connects you to 24-hour help with the push of a button. (Community Well Only⁵)



COVERED BENEFITS

Benefit ²	Copay / Coinsurance
Doctor visits (primary care provider and specialist)	\$0
Hospital stays	\$0
Emergency room (ER)	\$0
Urgent care visits	\$0
Preventive care	\$0
Home health care	\$0
Ambulance services	\$0
Durable medical equipment (DME)	\$0
Telehealth for behavioral health visits	\$0

CareSource is a nonprofit health insurance company based in Dayton, Ohio, that has been meeting the needs of members for over 35 years.

As a national leader in providing managed care, our mission is to make a lasting difference in our members' lives by improving their health and well-being.

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FOR MORE
INFORMATION
OR TO ENROLL:

Scan this QR code to visit

CareSource.com/MyCare-SNP



Speak to your local agent or broker

Contact CareSource MyCare Ohio at **1-844-607-2830 (TTY: 1-833-711-4711 or 711)**. We are open 8 a.m. to 8 p.m., Monday through Friday, and from Oct. 1 through March 31, we are open the same hours, seven days a week.



¹The benefits mentioned are Special Supplemental Benefits for the Chronically Ill (SSBCI). You may qualify for SSBCI if you are at high risk for hospitalization and require intensive care coordination to manage one or more chronic conditions such as cardiovascular disorders, diabetes, overweight/obesity/metabolic syndrome, chronic and disabling mental health conditions or neurologic disorders. For a full list of qualifying chronic conditions or to learn more about other eligibility requirements for SSBCI, please contact Member Services or your Care Coordinator.

²Prior authorization is required for some benefits. Contact an agent for details.

³Rewards 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.

⁴\$3,000 supplemental dental covers 1 oral exam, 1 cleaning, 2 fluoride treatments, plus implants.

⁵Only for community-well members who are getting their long-term services and support in their own homes or communities. Excludes those in home- and community-based services waiver and long-term care members.



**Department of
Medicaid**

Next Generation MyCare

CareSource is an HMO D-SNP with a Medicare and state Medicaid contract. Enrollment in CareSource depends on contract renewal.

If you wish to file a complaint about an agent or marketing materials, please contact Member Services at 1-855-475-3163 (TTY: 1-833-711-4711 or 711), October 1 to March 31, seven days a week from 8 a.m. to 8 p.m., and April 1 to September 30, Monday through Friday, from 8 a.m. to 8 p.m. When possible, please include the agent or broker's name in your complaint.