



CCA One Care (Medicare-Medicaid Plan) offered by Commonwealth Care Alliance, Inc.

Annual Notice of Changes for 2022

Introduction

You are currently enrolled as a member of CCA One Care. Next year, there will be some changes to the plan's benefits, coverage, and rules. This Annual Notice of Changes tells you about the changes and where to find more information about them. Key terms and their definitions appear in alphabetical order in the last chapter of the **Member Handbook**.



If you have questions, please call CCA One Care at 866-610-2273 (TTY 711), 8 am to 8 pm, 7 days a week, from October 1 to March 31. (April 1 to September 30: 8 am to 8 pm, Monday to Friday, and 8 am to 6 pm, Saturday and Sunday.) The call is free. **For more information**, visit www.commonwealthonecare.org.

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A. Disclaimers

- ❖ Limitations and restrictions may apply. For more information, call Member Services. This means that you may have to pay for some services and that you need to follow certain rules to have CCA One Care pay for your services.
- ❖ The List of Covered Drugs (formulary), pharmacy network, and/or provider network may change at any time. You will receive notice when necessary.
- ❖ Benefits may change on January 1 of each year.

B. Reviewing your Medicare and MassHealth (Medicaid) coverage for next year

It is important to review your coverage now to make sure it will still meet your needs next year. If it does not meet your needs, you may be able to leave the plan. Refer to section E2 for more information. **If you are over 65 and you decide to leave One Care, you will not be able to enroll in a One Care plan later.**

Your membership will end on the last day of the month that you tell Medicare or MassHealth (Medicaid) you want to leave the plan.

As long as you are still eligible for Medicare and MassHealth (Medicaid), you can leave One Care or your One Care plan and keep your Medicare and MassHealth (Medicaid) benefits.

If you leave One Care, you will usually go back to getting your Medicare and MassHealth (Medicaid) services separately.

- You will have a choice about how to get your Medicare benefits (go to page 12).
- You will get your MassHealth (Medicaid) services directly from doctors and other providers by using your MassHealth (Medicaid) card. This is called “fee-for-service.” Your MassHealth (Medicaid) services include behavioral healthcare and most long-term services and supports (LTSS).



If you have questions, please call CCA One Care at 866-610-2273 (TTY 711), 8 am to 8 pm, 7 days a week, from October 1 to March 31. (April 1 to September 30: 8 am to 8 pm, Monday to Friday, and 8 am to 6 pm, Saturday and Sunday.) The call is free. **For more information**, visit www.commonwealthonecare.org.

B1. Additional resources

- **ATTENTION:** If you speak Spanish, language assistance services, free of charge, are available to you. Call 866-610-2273 (TTY 711), 8 am to 8 pm, 7 days a week, from October 1 to March 31. (April 1 to September 30: 8 am to 8 pm, Monday to Friday, and 8 am to 6 pm, Saturday and Sunday.) The call is free.
- **ATENCIÓN:** si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 866-610-2273 (TTY 711), de 8:00 a. m. a 8:00 p. m., los 7 días de la semana, del 1.º de octubre al 31 de marzo (del 1.º de abril al 30 de septiembre: de 8:00 a. m. a 8:00 p. m., de lunes a viernes; y de 8:00 a. m. a 6:00 p. m., sábados y domingos). Las llamadas a esta línea son gratuitas.
- You can get this document for free in other formats, such as large print, formats that work with screen reader technology, braille, or audio. Call 866-610-2273 (TTY 711), 8 am to 8 pm, 7 days a week, from October 1 to March 31. (April 1 to September 30: 8 am to 8 pm, Monday to Friday, and 8 am to 6 pm, Saturday and Sunday.) The call is free.
- We will keep your request for alternative formats and special languages on file for future mailings. Please contact Member Services at 866-610-2273 (TTY 711) to change your preferred language and/or format.

B2. Information about CCA One Care

- Commonwealth Care Alliance (CCA) One Care (Medicare-Medicaid Plan) is a health plan that contracts with both Medicare and MassHealth (Medicaid) to provide benefits of both programs to enrollees.
- **Coverage under CCA One Care is qualifying health coverage** called “minimum essential coverage.” It satisfies the Patient Protection and Affordable Care Act’s (ACA) individual shared responsibility requirement. Visit the Internal Revenue Service (IRS) website at www.irs.gov/Affordable-Care-Act/Individuals-and-Families for more information on the individual shared responsibility requirement.
- CCA One Care (Medicare-Medicaid Plan) is offered by Commonwealth Care Alliance, Inc. When this **Annual Notice of Changes** says “we,” “us,”

or “our,” it means Commonwealth Care Alliance, Inc. When it says, “the plan” or “our plan,” it means CCA One Care (Medicare-Medicaid Plan).

B3. Important things to do:

- **Check if there are any changes to our benefits that may affect you.**
 - Are there any changes that affect the services you use?
 - It is important to review benefit changes to make sure they will work for you next year.
 - Look in section D1 for information about benefit changes for our plan.
- **Check if there are any changes to our prescription drug coverage that may affect you.**
 - Will your drugs be covered? Are they in a different tier? Can you continue to use the same pharmacies?
 - It is important to review the changes to make sure our drug coverage will work for you next year.
 - Look in section D2 for information about changes to our drug coverage.
- **Check if your providers and pharmacies will be in our network next year.**
 - Are your doctors, including your specialists, in our network? What about your pharmacy? What about the hospitals or other providers you use?
 - Look in section C for information about our **Provider Directory**.
- **Think about whether you are happy with our plan.**



If you have questions, please call CCA One Care at 866-610-2273 (TTY 711), 8 am to 8 pm, 7 days a week, from October 1 to March 31. (April 1 to September 30: 8 am to 8 pm, Monday to Friday, and 8 am to 6 pm, Saturday and Sunday.) The call is free. **For more information**, visit www.commonwealthonecare.org.

If you decide to stay with CCA One Care:	If you decide to change One Care plans or leave One Care:
<p>If you want to stay with us next year, it's easy – you don't need to do anything. If you don't make a change, you will automatically stay enrolled in our plan.</p>	<p>If you decide another One Care plan will better meet your needs, you may be able to switch plans (see section E2 for more information). If you enroll in a new plan, your new coverage will begin on the first day of the following month.</p> <p>If you leave One Care, your membership in the plan will end at the end of the month.</p> <p>Look in section E, page 13 to learn more about your choices.</p>

C. Changes to the network providers and pharmacies

Our provider and pharmacy networks have changed for 2022.

We strongly encourage you to review our current Provider Directory to see if your providers or pharmacy are still in our network. An updated **Provider Directory** is located on our website at www.commonwealthonecare.org. You may also call Member Services at 866-610-2273 (TTY 711) for updated provider information or to ask us to mail you a **Provider Directory**.

It is important that you know that we may also make changes to our network during the year. If your provider does leave the plan, you have certain rights and protections. For more information, refer to Chapter 3 of your **Member Handbook**.

D. Changes to benefits for next year

D1. Changes to benefits for medical services

We are changing our coverage for certain medical services next year. The following table describes these changes.

	2021 (this year)	2022 (next year)
Annual Wellness Visit Reward	N/A	<p>See the Member Handbook for full details under Physician/provider services, including doctor’s office visits.</p> <p>An annual wellness visit or annual physical exam qualifies for one \$25 reimbursement per year after you’ve completed the visit. Routine PCP visits, like a follow-up or sick visit, don’t qualify for the reward. To earn this reward, you must have an Annual Wellness Visit or an annual exam. These annual visits are longer than routine PCP visits. During an annual wellness visit or annual exam, you and your doctor will review your overall health in detail.</p>
Hearing Services	Hearing services are covered. See the Member Handbook for details.	<p>Hearing services are covered. See the Member Handbook for details.</p> <p>The plan uses NationsHearing as the benefit administrator for hearing services, including exams and hearing aids. Members must use NationsHearing to be covered for this benefit. To contact NationsHearing, please call 877-277-9196 (TTY 711).</p>



If you have questions, please call CCA One Care at 866-610-2273 (TTY 711), 8 am to 8 pm, 7 days a week, from October 1 to March 31. (April 1 to September 30: 8 am to 8 pm, Monday to Friday, and 8 am to 6 pm, Saturday and Sunday.) The call is free. **For more information**, visit www.commonwealthonecare.org.

<p>Physician/ Practitioner Services, including Doctor's Office Visits</p>	<p>See the Member Handbook for full details.</p>	<p>See the Member Handbook for details.</p> <ul style="list-style-type: none"> • Certain telehealth services, including: urgently needed services; home health services; primary care provider services; occupational therapy services; individual sessions for mental health specialty services; other healthcare professional; individual sessions for psychiatric services; physical therapy and speech-language pathology services; individual sessions for outpatient substance use
<p>Vision Care</p>	<p>See the Member Handbook for details.</p>	<p>See the Member Handbook for details.</p> <p>VSP is the benefit administrator for the plan's vision care services, including exams and eyewear. Member's must use the VSP network of providers to be covered. To contact VSP, please call 855-492-9028.</p>

D2. Changes to prescription drug coverage

Changes to our Drug List

An updated **List of Covered Drugs** is located on our website at www.commonwealthonecare.org. You may also call Member Services for updated drug information or to ask us to mail you a List of Covered Drugs at 866-610-2273 (TTY 711), 8 am to 8 pm, 7 days a week, from October 1 to March 31. (April 1 to September 30: 8 am to 8 pm, Monday to Friday, and 8 am to 6 pm, Saturday and Sunday.) The **List of Covered Drugs** is also called the “Drug List.”

We made changes to our Drug List, including changes to the drugs we cover and changes to the restrictions that apply to our coverage for certain drugs.

Review the Drug List to **make sure your drugs will be covered next year** and to find out if there will be any restrictions.

If you are affected by a change in drug coverage, we encourage you to:

- Work with your doctor (or other prescriber) to find a different drug that we cover.
 - You can call Member Services at 866-610-2273 (TTY 711), 8 am to 8 pm, 7 days a week, from October 1 to March 31. (April 1 to September 30: 8 am to 8 pm, Monday to Friday, and 8 am to 6 pm, Saturday and Sunday.) Or, contact your care partner to ask for a list of covered drugs that treat the same condition.
 - This list can help your provider find a covered drug that might work for you.
- Work with your doctor (or other prescriber) and ask the plan to make an exception to cover the drug.
 - You can ask for an exception before next year and we will give you an answer within 72 hours after we get your request (or your prescriber’s supporting statement).



If you have questions, please call CCA One Care at 866-610-2273 (TTY 711), 8 am to 8 pm, 7 days a week, from October 1 to March 31. (April 1 to September 30: 8 am to 8 pm, Monday to Friday, and 8 am to 6 pm, Saturday and Sunday.) The call is free. **For more information**, visit www.commonwealthonecare.org.

- To learn what you must do to ask for an exception, refer to Chapter 9 of the 2022 **Member Handbook** or call Member Services at 866-610-2273 (TTY 711), 8 am to 8 pm, 7 days a week, from October 1 to March 31. (April 1 to September 30: 8 am to 8 pm, Monday to Friday, and 8 am to 6 pm, Saturday and Sunday.)
- If you need help asking for an exception, you can contact Member Services.
- Ask the plan to cover a temporary supply of the drug.
 - In some situations, we will cover a **temporary** supply of the drug during the first 90 days of the calendar year.
 - This temporary supply will be for up to 31 days. (To learn more about when you can get a temporary supply and how to ask for one, refer to Chapter 5 of the **Member Handbook**.)
 - When you get a temporary supply of a drug, you should talk with your doctor to decide what to do when your temporary supply runs out. You can either switch to a different drug covered by the plan or ask the plan to make an exception for you and cover your current drug.

Formulary exceptions are usually valid for 12 months from the approval date unless the prescription is written for shorter amount of time and/or shorter approval duration is noted in the approval letter.

Changes to prescription drug costs

There are no changes to the amount you pay for prescription drugs in 2022. Read below for more information about your prescription drug coverage.

We moved some of the drugs on the Drug List to a lower or higher drug tier. To see if your drugs will be in a different tier, look them up in the Drug List.

The following table shows your costs for drugs in each of our five drug tiers.

CCA One Care ANNUAL NOTICE OF CHANGES FOR 2022

	2021 (this year)	2022 (next year)
<p>Drugs in Tier 1 (Preferred Generic Drugs) Cost for a one-month supply of a drug in Tier 1 that is filled at a network pharmacy</p>	Your copay for a one-month (31-day) supply is \$0 per prescription.	Your copay for a one-month (31-day) supply is \$0 per prescription.
<p>Drugs in Tier 2 (Generic Drugs) Cost for a one-month supply of a drug in Tier 2 that is filled at a network pharmacy</p>	Your copay for a one-month (31-day) supply is \$0 per prescription.	Your copay for a one-month (31-day) supply is \$0 per prescription.
<p>Drugs in Tier 3 (Preferred brand name drugs) Cost for a one-month supply of a drug in Tier 3 that is filled at a network pharmacy</p>	Your copay for a one-month (31-day) supply is \$0 per prescription.	Your copay for a one-month (31-day) supply is \$0 per prescription.
<p>Drugs in Tier 4 (Non-Preferred brand name drugs) Cost for a one-month supply of a drug in Tier 4 that is filled at a network pharmacy</p>	Your copay for a one-month (31-day) supply is \$0 per prescription.	Your copay for a one-month (31-day) supply is \$0 per prescription.



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	2021 (this year)	2022 (next year)
Drugs in Tier 5 (Non-Medicare Rx/OTC Drugs) Cost for a one-month supply of a drug in Tier 5 that is filled at a network pharmacy	Your copay for a one-month (31-day) supply is \$0 per prescription.	Your copay for a one-month (31-day) supply is \$0 per prescription.

E. How to choose a plan

E1. How to stay in our plan

We hope to keep you as a member next year.

You do not have to do anything to stay in your health plan. If you do not sign up for a different One Care plan, change to a Medicare Advantage Plan, or change to Original Medicare, you will automatically stay enrolled as a member of our plan for 2022.

E2. How to change plans

You can end your membership at any time during the year by enrolling in another Medicare Advantage Plan, enrolling in another One Care plan, or moving to Original Medicare.

You can change to a different One Care plan at any time. If you want to do this, call MassHealth (Medicaid) Customer Service at 800-841-2900. TTY: 800-497-4648 (for people who are deaf, hard of hearing, or speech disabled). You can call Monday through Friday, 8am to 5pm. You will automatically be disenrolled from CCA One Care at the end of the month, and your coverage in your new One Care plan will begin on the first day of the next month.

E3. Leaving One Care

As long as you are still eligible for Medicare and MassHealth (Medicaid), you can leave One Care or your One Care plan and keep your Medicare and MassHealth (Medicaid) benefits. If you leave One Care, you will usually go back to getting your Medicare and MassHealth (Medicaid) services separately.

You will get your MassHealth (Medicaid) services directly from doctors and other providers by using your MassHealth (Medicaid) card. This is called “fee-for-service.” Your MassHealth (Medicaid) services include most long-term services and supports (LTSS) and behavioral healthcare.

You will have a choice about how to get your Medicare benefits.

<p>1. You can change to:</p> <p>A Medicare health plan, such as a Medicare Advantage Plan or a Program of All-inclusive Care for the Elderly (PACE)</p>	<p>Here is what to do:</p> <p>Call Medicare at 800-MEDICARE (800-633-4227), 24 hours a day, 7 days a week. TTY users should call 877-486-2048 to enroll in a Medicare health plan or PACE</p> <p>If you need help or more information:</p> <ul style="list-style-type: none">• Call the SHINE Program (Serving Health Insurance Needs of Everyone) at 800-243-4636. TTY users may call 800-439-2370. <p>Your coverage with CCA One Care will end on the last day of the month before your new plan’s coverage begins.</p>
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If you have questions, please call CCA One Care at 866-610-2273 (TTY 711), 8 am to 8 pm, 7 days a week, from October 1 to March 31. (April 1 to September 30: 8 am to 8 pm, Monday to Friday, and 8 am to 6 pm, Saturday and Sunday.) The call is free. **For more information**, visit www.commonwealthonecare.org.

<p>2. You can change to:</p> <p>Original Medicare with a separate Medicare prescription drug plan</p>	<p>Here is what to do:</p> <p>Call Medicare at 800-MEDICARE (800-633-4227), 24 hours a day, 7 days a week. TTY users should call 877-486-2048 to enroll in Original Medicare with a separate Medicare prescription drug plan.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> • Call the SHINE Program (Serving Health Insurance Needs of Everyone) at 800-243-4636. TTY users may call 800-439-2370. <p>Your coverage with CCA One Care will end on the last day of the month before your Original Medicare coverage begins.</p>
<p>3. You can change to:</p> <p>Original Medicare without a separate Medicare prescription drug plan</p> <p>NOTE: If you switch to Original Medicare and do not enroll in a separate Medicare prescription drug plan, Medicare may enroll you in a drug plan, unless you tell Medicare you don't want to join.</p> <p>You should only drop prescription drug coverage if you have drug coverage from another source, such as an employer, or union. If you have questions about whether you need drug coverage, call the SHINE Program at 800-243-4636. TTY users should call 800-439-2370.</p>	<p>Here is what to do:</p> <p>Call Medicare at 800-MEDICARE (800-633-4227), 24 hours a day, seven days a week. TTY users should call 877-486-2048 to enroll in Original Medicare and opt out of a separate Medicare prescription drug plan</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> • Call the SHINE Program (Serving Health Insurance Needs of Everyone) at 800-243-4636. TTY users should call 800-439-2370. <p>Your coverage with CCA One Care will end on the last day of the month before your Original Medicare coverage begins.</p>

F. How to get help

F1. Getting help from CCA One Care

Questions? We're here to help. Please call Member Services at 866-610-2273 (TTY 711). We are available for phone calls from 8 am to 8 pm, 7 days a week, from October 1 to March 31. (April 1 to September 30: 8 am to 8 pm, Monday to Friday, and 8 am to 6 pm, Saturday and Sunday.) Calls to these numbers are free.

Your 2022 Member Handbook

The **2022 Member Handbook** is the legal, detailed description of your plan benefits. It has details about next year's benefits. It explains your rights and the rules you need to follow to get covered services and prescription drugs.

The **2022 Member Handbook** will be available by October 15. An up-to-date copy of the **2022 Member Handbook** is available on our website at www.commonwealthonecare.org. You may also call Member Services at 866-610-2273 (TTY 711) to ask us to mail you a **2022 Member Handbook**.



If you have questions, please call CCA One Care at 866-610-2273 (TTY 711), 8 am to 8 pm, 7 days a week, from October 1 to March 31. (April 1 to September 30: 8 am to 8 pm, Monday to Friday, and 8 am to 6 pm, Saturday and Sunday.) The call is free. **For more information**, visit www.commonwealthonecare.org.

Our website

You can also visit our website at www.commonwealthonecare.org. As a reminder, our website has the most up-to-date information about our provider and pharmacy network (**Provider Directory**) and our **List of Covered Drugs** (Formulary/Drug List).

F2. Getting help from MassHealth (Medicaid) Customer Service

MassHealth (Medicaid) Customer Service can answer questions you may have about One Care and your other options for getting your services. MassHealth (Medicaid) Customer Service can also help you enroll in a One Care plan, switch plans, or leave One Care. You can call MassHealth (Medicaid) Customer Service at 800-841-2900. TTY: 800-497-4648 (for people who are deaf, hard of hearing, or speech disabled). You can call Monday through Friday, 8 am to 5 pm.

F3. Getting help from My Ombudsman

My Ombudsman is an independent program that can help you if you have questions, concerns, or problems related to One Care. You can contact My Ombudsman to get information or assistance. My Ombudsman's services are free. My Ombudsman can:

- Answer your questions or refer you to the right place to find what you need.
- Help you address a problem or concern with One Care or your CCA One Care plan. My Ombudsman's staff will listen, investigate the issue, **and** discuss options with you to help solve the problem.
- Help with appeals. An appeal is a formal way of asking your One Care plan, MassHealth (Medicaid), or Medicare to review a decision about your services. My Ombudsman's staff can talk with you about how to make an appeal and what to expect during the appeal process.

You can call, email, write, or visit My Ombudsman at its office.

- Call 855-781-9898, Monday through Friday from 9:00 am to 4:00 pm.
 - Use 711 to call 855-781-9898. This number is for people who are deaf, hard of hearing, or speech disabled.
 - Use Videophone (VP) 339-224-6831. This number is for people who are deaf or hard of hearing.
- Email info@myombudsman.org or contact My Ombudsman through its website at www.myombudsman.org.

- Write to the My Ombudsman office at 11 Dartmouth Street, Suite 301, Malden, MA 02148.
- For information about visiting the My Ombudsman office, please call 855-781-9898 or check the My Ombudsman website at www.myombudsman.org.

F4. Getting help from the State Health Insurance Assistance Program (called SHINE)

You can also call SHINE (Serving the Health Insurance Needs of Everyone). SHINE counselors can help you understand your One Care plan choices and answer questions about switching plans. SHINE is not connected with us or with any insurance company or health plan. SHINE has trained counselors in every state, and services are free. The phone number for SHINE is 800-243-4636. TTY (for people who are deaf, hard of hearing, or speech disabled): 800-439-2370 (Massachusetts only).

F5. Getting help from Medicare

To get information directly from Medicare, you can call 800-MEDICARE (800-633-4227), 24 hours a day, 7 days a week. TTY users should call 877-486-2048.

Medicare's Website

You can visit the Medicare website (www.medicare.gov). If you choose to disenroll from your One Care plan and enroll in a Medicare Advantage plan, the Medicare website has information about costs, coverage, and quality ratings to help you compare Medicare Advantage plans.

You can find information about Medicare Advantage plans available in your area by using the Medicare Plan Finder on the Medicare website. (To view the information about plans, go to www.medicare.gov and click on "Find plans.")



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Medicare & You 2022

You can read the **Medicare & You** 2022 handbook. Every year in the fall, this booklet is mailed to people with Medicare. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare.

If you don't have a copy of this booklet, you can get it at the Medicare website (www.medicare.gov) or by calling 800-MEDICARE (800-633-4227), 24 hours a day, 7 days a week. TTY users should call 877-486-2048.