



Visit www.SCchoices.com

- Learn about the program
- Enroll in a health plan
- Search for doctors and hospitals near you



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SANDRA SIMPLER
214 RANWOOD CIR
SUMMERVILLE SC 29485

May 2, 2011

Dear SANDRA SIMPLER,

Welcome to Healthy Connections Choices!

South Carolina Medicaid is excited to offer you a choice of how you receive your health care. People in Medicaid may enroll in a health plan. It's your choice! Ask your doctor what health plans they work with and choose the one that fits your needs.

All of the health plans offer the same basic services but they also offer extras as explained in the attached information. You are not required to choose a plan but may find one listed in this information that meets your needs better than fee-for-service Medicaid. It's your choice!

These people can choose a plan

People in one household can be in the same plan or in different plans.

MEMBER NAME	MEDICAID ID
SANDRA SIMPLER	7070707070
CHRIS SIMPLER	6767676767
ANDRA SIMPLER	9382738491

If you wish to enroll in a health plan

It's easy to enroll in a health plan (*enroll* means sign up, or join).

- Read the brochure that came with this letter, called *Choosing a Health Plan*. It has tips on how to choose the health plan that is best for you.
- Look at the *Health Plan Chart*. It shows you the health plans in your area, and the services each health plan offers. It also lists each plan's phone number and website, so you can get information from the plans as well.

PLEASE TURN THIS PAGE OVER ➔

If you have questions, call South Carolina Healthy Connections Choices, 1-877-552-4642.

Call Monday to Friday, 8 a.m. to 6 p.m. TTY: 1-877-552-4670. The call is free. Call for help in any language, to get this letter in Braille, on tape or in large type. Usted puede obtener este paquete de información en español.



- When you are ready to enroll in a health plan, enroll in one of these ways:
 - Call the enrollment center at 1-877-552-4642 and enroll by phone. An enrollment counselor will help you.
 - Fill out the *Health Plan Enrollment Form* and mail it to us in the return envelope. You don't need a stamp. Or you can fax it to us at 1-877-552-4672.
 - Enroll on our website at: www.SCchoices.com.

There may be other persons in your household who are not listed in this letter. Those not listed in the letter do not need to do anything if they want to keep getting Medicaid the way they get it now. However if they wish to obtain information about other options, they may call Healthy Connections Choices at 1-877-552-4642.

If you have questions

Call 1-877-552-4642 to speak with an enrollment counselor. The call is free and private. Some of our enrollment counselors speak Spanish, and we have free interpreter services for other languages.

Sincerely,

Healthy Connections Choices Enrollment Center

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Health Plan Enrollment

Use this form to choose a health plan and doctor for each person in your family. Family members do not need to be in the same plan or have the same doctor.

✓ Read the brochure and chart that came with this form to learn about choices you can make.

✓ Who is the person filling out this form?

Name _____

Address _____

✓ What is the best way to contact you? Cell phone, home phone, email, or other? Write the phone number, including area code, or the email address:

✓ What language do you mostly speak at home?

English Spanish Other _____

1. SANDRA SIMPLER, 01/11/1972

Medicaid ID: 7070707070

➔ **Choose a health plan.** Put an X in the box of the health plan you want.

Absolute Total Care BlueChoice HealthPlan Carolina Medical Homes

First Choice by Select Health of SC Palmetto Physician Connections

South Carolina Solutions Unison Health Plan

➔ **Choose a doctor (or clinic).**

Provider name (first and last): _____

Provider address: _____

2. CHRIS SIMPLER, 02/15/2002

Medicaid ID: 6767676767

➔ **Choose a health plan.** Put an X in the box of the health plan you want.

Absolute Total Care BlueChoice HealthPlan Carolina Medical Homes

First Choice by Select Health of SC Palmetto Physician Connections

South Carolina Solutions Unison Health Plan

➔ **Choose a doctor (or clinic).**

Provider name (first and last): _____

Provider address: _____

OVER ➔

If you have questions, call South Carolina Healthy Connections Choices, 1-877-552-4642.

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3.

ANDRA SIMPLER, 06/24/2005

Medicaid ID: 9382738491

➔ **Choose a health plan.** *Put an X in the box of the health plan you want.*

- Absolute Total Care BlueChoice HealthPlan Carolina Medical Homes
 First Choice by Select Health of SC Palmetto Physician Connections
 South Carolina Solutions Unison Health Plan

➔ **Choose a doctor (or clinic).**

Provider name (first and last): _____

Provider address: _____

SAMPLE
Outreach Only

- ✓ Mail this form in the return envelope, or fax the form to 1-877-552-4672.
- ✓ You can also enroll by phone at 1-877-552-4642, or on our website at www.SCchoices.com.

If you have questions, call South Carolina Healthy Connections Choices, 1-877-552-4642.

Call Monday to Friday, 8 a.m. to 6 p.m. TTY: 1-877-552-4670. The call is free. Call for help in any language or to get this letter in Braille, on tape or in large type. Usted puede obtener este paquete de información en español.