



Information on Rights and Responsibilities upon Disenrollment

Ending your membership in Lasso Healthcare MSA may be **voluntary** (your own choice) or **involuntary** (not your own choice):

- You might leave our plan because you have decided that you *want* to leave.
 - There are only certain times during the year, or certain situations, when you may voluntarily end your membership in the plan.
 - The process for voluntarily ending your membership varies depending on what type of new coverage you are choosing.
- There are also limited situations where you do not choose to leave, but we are required to end your membership.

If you are leaving our plan, you must continue to get your medical care through our plan until your membership ends.

When can you end your membership in our plan?

You may end your membership in our plan only during certain times of the year, known as enrollment periods. All members have the opportunity to leave the plan during the Annual Enrollment Period. In certain situations, you may also be eligible to leave the plan at other times of the year.

<h3>You can end your membership during the Annual Enrollment Period</h3>
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You can end your membership during the **Annual Enrollment Period** (also known as the “Annual Coordinated Election Period”). This is the time when you should review your health and drug coverage and make a decision about your coverage for the upcoming year.

- **When is the Annual Enrollment Period?** This happens from October 15 to December 7.
- **What type of plan can you switch to during the Annual Enrollment Period?** You can choose to keep your current coverage or make changes to your coverage for the upcoming year. If you decide to change to a new plan, you can choose any of the following types of plans:
 - Keep your Medicare Savings Account (MSA) plan and enroll in a separate prescription drug plan (or enroll in a new prescription drug plan if you do not currently have one);
 - Another Medicare health plan (You can choose a plan that covers prescription drugs or one that does not cover prescription drugs.);
 - Original Medicare *with* a separate Medicare prescription drug plan;
 - – *or* – Original Medicare *without* a separate Medicare prescription drug plan.
- **When will your membership end?** Your membership will end when your new plan’s coverage begins on January 1.

**In certain limited situations, you can end your membership during a
Special Enrollment Period**

In certain limited situations, members of Lasso Healthcare MSA may be eligible to end their membership at other times of the year. This is known as a **Special Enrollment Period**.

- **Who is eligible for a Special Enrollment Period?** If any of the following situations apply to you, you are eligible to end your membership during a Special Enrollment Period. These are just examples, for the full list you can contact the plan, call Medicare, or visit the Medicare website (<https://www.medicare.gov>):
 - Usually, when you have moved.
 - If we violate our contract with you.
 - If you are getting care in an institution, such as a nursing home or long-term care (LTC) hospital.
 - If you enroll in the Program of All-inclusive Care for the Elderly (PACE).
 - If you have Medicaid. (Please note that people with Medicaid coverage are not eligible for a Medicare MSA plan.)
- **When are Special Enrollment Periods?** The enrollment periods vary depending on your situation.
- **What can you do?** To find out if you are eligible for a Special Enrollment Period, please call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users call 1-877-486-2048. If you are eligible to end your membership because of a special situation, you can choose to change both your Medicare health coverage and prescription drug coverage. This means you can choose any of the following types of plans:
 - Another Medicare health plan (You can choose a plan that covers prescription drugs or one that does not cover prescription drugs.);
 - Original Medicare *with* a separate Medicare prescription drug plan (or enroll in a new prescription drug plan if you do not currently have one);
 - – *or* – Original Medicare *without* a separate Medicare prescription drug plan.
- **When will your membership end?** Your membership will usually end on the first day of the month after we receive your request to change your plan.

Where can you get more information about when you can end your membership?

If you have any questions or would like more information on when you can end your membership:

- You can **call Member Services** at 1-866-766-2583, 8 a.m. - 8 p.m., seven days a week from October 1 through March 31, and Monday - Friday from April 1 through September 30. TTY users should call 711.
- You can find the information in the ***Medicare & You*** Handbook.
 - Everyone with Medicare receives a copy of *Medicare & You* each fall. Those new to Medicare receive it within a month after first signing up.
 - You can also download a copy from the Medicare website (<https://www.medicare.gov>). Or, you can order a printed copy by calling Medicare at the number below.

- You can contact **Medicare** at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

What happens if you leave our plan during the year?

What happens to the money in your account if you leave our plan?

If you leave our plan in the middle of the year, part of the current year’s deposit will be refunded to Medicare. The amount recovered and refunded to Medicare depends on the number of months left in the current calendar year. For example, if you get a \$1,200 deposit in your account in January and you leave the plan in March, we will recover \$900 to return to Medicare. Funds remaining in your account from any previous year belong to you. Recovery applies only to funds deposited into your account for the current year. If you have any questions, please contact Member Services at 1-866-766-2583, 8 a.m. - 8 p.m., seven days a week from October 1 through March 31, and Monday - Friday from April 1 through September 30. TTY users should call 711.

How do you end your membership in our plan?

Usually, you end your membership by enrolling in another plan

Usually, to end your membership in our plan, you simply enroll in another Medicare health plan during one of the enrollment periods.

However, if you want to switch from our plan to Original Medicare, you must ask to be disenrolled from our plan. To disenroll from Lasso Healthcare MSA in this situation, you must make a request in writing to us. Contact Member Services if you need more information on how to do this. The table below explains how you should end your membership in our plan.

If you would like to switch from our plan to:	This is what you should do:
<ul style="list-style-type: none"> • Another Medicare health plan. 	<ul style="list-style-type: none"> • Enroll in the new Medicare health plan. You will automatically be disenrolled from Lasso Healthcare MSA when your new plan’s coverage begins.
<ul style="list-style-type: none"> • Original Medicare (either with or without a separate Medicare prescription drug plan). 	<ul style="list-style-type: none"> • Send us a written request to disenroll. Contact Member Services if you need more information on how to do this. • You will be disenrolled from Lasso Healthcare MSA when your coverage in Original Medicare begins.

Until your membership ends, you must keep getting your medical services through our plan

Until your membership ends, you are still a member of our plan

If you leave Lasso Healthcare MSA, it may take time before your membership ends and your new Medicare coverage goes into effect. During this time, you must continue to get your medical care through our plan.

- **If you are hospitalized on the day that your membership ends, your hospital stay will usually be covered by our plan until you are discharged** (even if you are discharged after your new health coverage begins).

Lasso Healthcare MSA must end your membership in the plan in certain situations

When must we end your membership in the plan?

Lasso Healthcare MSA must end your membership in the plan if any of the following happen:

- If you no longer have Medicare Part A and Part B.
- If you obtain other insurance (to include supplemental policies) that covers all or part of the annual Medicare MSA deductible such as through insurance primary to Medicare, or retirement health benefits.
- If you move out of our service area.
- If you are away from our service area for more than six months.
 - If you move or take a long trip, you need to call Member Services to find out if the place you are moving or traveling to is in our plan's area.
- If you become incarcerated (go to prison).
- If you are not a United States citizen or lawfully present in the United States.
- If you intentionally give us incorrect information when you are enrolling in our plan and that information affects your eligibility for our plan. (We cannot make you leave our plan for this reason unless we get permission from Medicare first.)
- If you continuously behave in a way that is disruptive and makes it difficult for us to provide medical care for you and other members of our plan. (We cannot make you leave our plan for this reason unless we get permission from Medicare first.)
- If you let someone else use your membership card to get medical care. (We cannot make you leave our plan for this reason unless we get permission from Medicare first.)
 - If we end your membership because of this reason, Medicare may have your case investigated by the Inspector General.

We cannot ask you to leave our plan for any reason related to your health

Lasso Healthcare MSA is not allowed to ask you to leave our plan for any reason related to your health.

What should you do if this happens?

If you feel that you are being asked to leave our plan because of a health-related reason, you should call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. You may call 24 hours a day, 7 days a week.

You have the right to make a complaint if we end your membership in our plan

If we end your membership in our plan, we must tell you our reasons in writing for ending your membership. We must also explain how you can file a grievance or make a complaint about our decision to end your membership. You can also look in your Evidence of Coverage for information about how to make a complaint.