

# **DSNP**Resource Guide | 2023

An informational D-SNP guide that will help provide all Business Units pertinent information and/or help with development of Marketing and Member Materials.

# **General Information**

# **Plan Type:**

L.A. Care Medicare Plus (HMO D-SNP) is a Medicare Medi-Cal Plan (MMP or Medi-Medi plan), which is an Exclusively Aligned Enrollment Dual Eligible Special Needs Plan.

#### Contract/ PBP Number

2022 CMC Plan	2023 DSNP Plan
H8258-001	H1224-001

**Plan Name** - Plan Type must be included when the plan name is first mentioned. Plan type is not required thereafter.

2022 CMC Plan	2023 DSNP Plan
Plan Marketing Name with Plan Type: L.A. Care Cal MediConnect Plan (Medicare-Medicaid Plan)	Plan Marketing Name with Plan Type: L.A. Care Medicare Plus (HMO D-SNP)  Optional: L.A. Care Medicare Plus (HMO D-SNP), a Medicare Medi-Cal Plan
Plan Marketing Name: L.A. Care Cal MediConnect Plan	Plan Marketing Name L.A. Care Medicare Plus

# **Member Phone Number and Hours of Operation**

2022 CMC Plan	2023 DSNP Plan
<b>888.522.1298</b> (TTY: <b>711</b> ) 24 hours a day, 7 days a week, including holidays.	<b>833.522.DSNP</b> ( <b>833.522.3767</b> ) (TTY: <b>711</b> ) 24 hours a day, 7 days a week, including holidays.

# **Prospect Phone Number and Hours of Operation:**

2022 CMC Plan	2023 DSNP Plan
<b>888.522.8243</b> (TTY: <b>711</b> ) 24 hours a day, 7 days a week, including holidays.	<b>833.522.DSNP</b> ( <b>833.592.3767</b> ) (TTY: <b>711</b> ) 24 hours a day, 7 days a week, including holidays.

#### **Website URL:**

2022 CMC Plan	2023 DSNP Plan
www.calmediconnectla.org	medicare.lacare.org

#### **::** Logo / Brand / Style Guidelines



#### **Link to Logo and Brand Guide**

**Disclaimers (Chapter 3, Medicare Communications and Marketing Guidelines (MCMG):** 

\*\*Note: does not include all disclaimers, please refer to MCMG

# Required on all materials:

- [You can get this document for free in other formats, such as large print, braille, and/or audio. Call <1.833.522.3767 > (TTY: 711), 24 hours a day, 7 days a week, including holidays. > The call is free.]
- Non-Discrimination Notice\* (Non-Discrimination Notice)
  - o Included in Member Handbook, member information, and all other information notices targeted to members, potential enrollees and the public.
    - Informational notices include not only documents intended for the public, such as outreach, education, and marketing materials, but also written notices requiring a response from an individual and written notices to an individual such as those pertaining to rights or benefits.
  - Small-sized (Small Publications NDN and Taglines)
    - (Postcards, pamphlets, newsletters, brochures, and flyers or folded in a way that is smaller than 8.5 by 11 inches) information notices: The abbreviated nondiscrimination statement must be accompanied by the full set of language taglines in 18 non-English languages required
    - **IMPORTANT PRODUCTION NOTICE:** The "Small Publications NDN and Taglines" is three pages and not sufficiently abbreviated to be paired with specific communication formats including but not limited to: Postcards and Flyers. Special production considerations must be made for communication formats to accommodate the entirety of the "Small Publications NDN and Taglines".
- **Language and Interpreter Taglines\* (Language and Interpreter Taglines)**
- **APL 21-004\*** Standards for determining Threshold Languages, Nondiscrimination requirements, and Language Assistance Services:
- # Federal Contracting Statement (422.2267(e) (30), 423.2267(e)(32))

Required on all marketing materials except: Banners and banner-like advertisements, outdoor advertisements, text messages, social media, and envelopes.

[L.A. Care Medicare Plus (HMO D-SNP) is a health plan that contracts with both Medicare and Medi-Cal to provide benefits of both programs to enrollees. Enrollment in L.A. Care Medicare Plus depends on contract renewal.]

#### **\*\*** Accommodations (422.2267(e)(33)423.2267(e)(34))

Must be in any advertisement of invitations to all events as described under §§422.2264(c) and 423.2264(c).

[For accommodations of persons with special needs at meetings call <1.833.522.3767 (TTY: 711)>]

### Special Supplemental Benefits for the Chronically III (SSBCI) (422.2267(e)(32))

Must be used whenever SSBCI benefits mentioned.

**Note:** SSBCI Benefit for DSNP 2023: Food and Produce (\$25 monthly); Member will need to be participating in a Care Management Program with a chronic condition to qualify.

[The benefits mentioned are a part of special supplemental program for the chronically ill. Not all members qualify.]

## **Mailing Statements (422.2267(e)(34),423.2267(e)(35))**

Must be included when mailing applicable information to current members.; Must include the plan name. If the plan name is elsewhere on the envelope, it does not need to be repeated in the disclaimer.; Delegated or sub-contracted entities and downstream entities that conduct mailings on behalf of a multiple plans must also comply with this requirement; however, they do not have to include a plan name.

- Include the following statement when mailing information about the enrollee's current plan: [Important L.A. Care Medicare Plus HMO D-SNP information.]
- o Include the following statement when mailing health and wellness information: [Health and wellness or prevention information.]

# **Promotional Give-Away (422.2267(e)(35)423.2267(e)(36))**

Required when offering promotional giveaways such as drawings, prizes, or free gifts.

#### **Star Ratings (422.2267(e)(31), 423.2267(e)(33))** \*Not applicable during 2023.

Must be used whenever Star Ratings are mentioned in marketing materials, with the exception of when Star Ratings are published on small objects (e.g., pens or rulers).

\*Note: New plans that have no Star Ratings are not required to provide until the following contract year.

Must be uploaded within 21 calendar days of the release of the updated information.

[Every year, Medicare evaluates plans based on a 5- star rating system.]