

<DATE>

<MEMBER NAME>

<ADDRESS>

<CITY, STATE ZIP>

Dear <MEMBER NAME>:

This letter is to inform you that we can no longer cover prescription medications effective <Effective Date of OIG Exclusion> that are [*Insert one* <prescribed> < dispensed><>distributed><manufactured>] by [*Insert one* <NAME OF PRESCRIBER> <NAME OF PHARMACY> <NAME OF DISTRIBUTOR><NAME OF MANUFACTURER>]. This includes new prescriptions, as well as any refills left on the prescriptions(s) you are currently taking.

IEHP DualChoice Cal MediConnect Plan (Medicare-Medicaid Plan) cannot cover medications [*Insert one* <prescribed> < dispensed><distributed> <manufactured>] by [*Insert one* <NAME OF PRESCRIBER> <NAME OF PHARMACY> <NAME OF DISTRIBUTOR><NAME OF MANUFACTURER>] because he/she/it has been excluded from participation in all federal health care programs as of <Effective Date of Exclusion>, including the Medicare program, by the U.S. Department of Health and Human Services’ Office of Inspector General (OIG). Medicare plans are prohibited from making payment for prescriptions prescribed, dispensed, or furnished by excluded individuals and entities. For more information about exclusions, you may visit the OIG’s website at <http://oig.hhs.gov/fraud/exclusions.asp>.

*{Sponsors should insert at least one of the three sentences below.}*

[Please call IEHP DualChoice Member Services at 1-877-273-IEHP (4347) (TTY users should call 1-800-718-4347) if you need assistance finding another <pharmacy>.] [Please call IEHP DualChoice Member Services at 1-877-273-IEHP (4347) (TTY users should call 1-800-718-4347) if you need assistance finding another provider in your area who can prescribe your medications.] [Please call your prescriber if you need assistance finding another medication.] If you have further questions regarding the status of your prescription(s), we are available from 8am – 8pm (PST) 7 days a week, including holidays. TTY users should call 1-800-718-4347. The call is free.

Sincerely,

<Plan Representative>

IEHP DualChoice Cal MediConnect Plan (Medicare-Medicaid Plan) is a Health Plan that contracts with both Medicare and Medi-Cal to provide benefits of both programs to enrollees.

Last Updated <Date>