

May 11, 2018

John Smith
12345 Anywhere St
City, ST ZIP

Your case number:
999999

Information Only – No Action Required

Dear <FIRST> <LAST>,

We are excited to let you know that Health First Colorado (Colorado's Medicaid Program) is changing the way we deliver services. We have contracted with one regional organization to manage both your physical and behavioral health care.

What does this mean for me?

Your eligibility is not changing. Your benefits and services are not changing.

Starting July 1, 2018, your primary care provider and regional organization are:

Member Name	Member Number	Primary Care Provider (call to make an appointment)	Regional Organization
John Smith	XXXXXXXX	[PCP Name] at xxx-xxx-xxx	[Regional Organization] at xxx-xxx-xxx
Mary Smith	XXXXXXXX	[PCP Name] at xxx-xxx-xxx	[Regional Organization] at xxx-xxx-xxx
Peggy Smith	XXXXXXXX	[PCP Name] at xxx-xxx-xxx	[Regional Organization] at xxx-xxx-xxx
Johnny Smith	XXXXXXXX	[PCP Name] at xxx-xxx-xxx	[Regional Organization] at xxx-xxx-xxx

What else do I need to know?

- You can change your primary care provider at any time by calling Health First Colorado Enrollment at 303-839-2120, Monday-Friday, 8:00 a.m. to 5:00 p.m.; or State Relay: 711 for callers with hearing or speech disabilities.
- You can get your Member Handbook at HealthFirstColorado.com, CO.gov/PEAK or by calling 303-839-2120.
- Help us get to know you! Answer a few questions at HealthFirstColorado.com/health-survey.

Thank you,

Health First Colorado Enrollment

11 de mayo de 2018

John Smith
12345 Anywhere St
City, ST ZIP

Su número de caso::
999999

Información solamente - No tiene que hacer nada

Estimado <FIRST> <LAST>,

Nos complace avisarle que Health First Colorado (el programa de Medicaid de Colorado) está cambiando la manera en que presta sus servicios. Hemos contratado una organización regional para administrar sus cuidados de salud física y de salud del comportamiento.

¿Qué significa esto para mí?

Su elegibilidad no cambiará. Sus beneficios y servicios no cambiarán.

A partir del 1º de julio de 2018 su proveedor de cuidados primarios y su organización regional serán:

Nombre del miembro	Número del miembro	Proveedor de cuidados primarios (llame para hacer una cita)	Organización regional
John Smith	XXXXXXXX	[PCP Name] a xxx-xxx-xxxx	[Regional Organization] a xxx-xxx-xxxx
Mary Smith	XXXXXXXX	[PCP Name] a xxx-xxx-xxxx	[Regional Organization] a xxx-xxx-xxxx
Peggy Smith	XXXXXXXX	[PCP Name] a xxx-xxx-xxxx	[Regional Organization] a xxx-xxx-xxxx
Johnny Smith	XXXXXXXX	[PCP Name] a xxx-xxx-xxxx	[Regional Organization] a xxx-xxx-xxxx

¿Qué más tengo que saber?

- Usted puede cambiar su proveedor de cuidados primarios en cualquier momento llamando a Health First Colorado Enrollment al 303-839-2120, de lunes a viernes de 8:00 a.m. a 5:00 p.m. o a State Relay: 711, para las personas que tengan discapacidades del oído o del habla.
- Usted puede obtener su Manual del miembro en HealthFirstColorado.com, CO.gov/PEAK o llamando al 303-839-2120.
- ¡Ayúdenos a conocerlo! Responda algunas preguntas en HealthFirstColorado.com/health-survey.

Muchas gracias,

Health First Colorado Enrollment