

**MEDICARE CONTRACT DISCLAIMER****Important Note**

UPMC Health Plan is required to renew its contract with the Centers for Medicare & Medicaid Services (CMS) on an annual basis. As a Medicare Advantage Plan, we are required by CMS to provide you with notification if we leave the service area or the Medicare program entirely.

**What happens if UPMC *for Life* leaves the Medicare program or UPMC *for Life* leaves the area where you live?**

If we leave the Medicare program or change our service area so that it no longer includes the area in which you live, we will tell you in advance in writing. If this happens, your membership in UPMC *for Life* will end. All of the benefits and rules will continue until your membership ends, which means that you must continue to get your medical care in the usual way through UPMC *for Life* until your membership ends.

Your choices as to how to get your Medicare benefits will always include Original Medicare and joining a Prescription Drug Plan to complement your Original Medicare coverage. Your choices may also include joining another Medicare Advantage plan or a private fee-for-service plan, if these plans are available in your area and are accepting new members. Once we have told you in writing that we are leaving the Medicare program or the area where you live, you will have a chance to change to another way of getting your Medicare benefits. If you decide to change from UPMC *for Life* to Original Medicare, you will have the right to buy a Medigap policy regardless of your health status.

UPMC *for Life* has a contract with the Centers for Medicare & Medicaid Services (CMS), the government agency that runs Medicare. This contract renews each year. At the end of each year, the contract is reviewed, and either UPMC *for Life* or CMS can decide to end it. You will get 90 days advance notice in this situation. It is also possible for our contract to end at some other time during the year, too. In these situations we will try to tell you 90 days in advance, but your advance notice may be as little as 30 or fewer days if CMS must end our contract in the middle of the year.

Whenever a Medicare health plan leaves the Medicare program or stops serving your area, you will be provided a special enrollment period (SEP) to make choices about how you get Medicare, including choosing a Medicare Prescription Drug Plan and guaranteed issue rights to a Medigap policy.