



This letter is your only notice about this change.

If you are hearing impaired call TTY: 1-888-876-8864

Alternative formats of this document will be provided upon request. For more information call 303-839-2120.



<Name>
<Address 1>
<Address 2>
<City, State ZIP>

<Date Letter mailed>

<Client ID>

Welcome! You or other family members listed below have been specially selected for enrollment into Colorado Medicaid’s newest health plan - the Accountable Care Collaborative (ACC). The ACC is a plan where you will have a regional organization to connect you to the right doctors, coordinate your care with other providers, and help you find social and community services in your area.

Enrollment is automatically effective on <effective date> for:

<Client 1> <Client 2> <Client 3>
<Client 4> <Client 5> <Client 6>

Primary Care Provider: <PCP Name and Contact>
Your Regional Organization: <RCCO and Contact>

If you want to stay in the ACC plan

If you are happy with your primary care provider, **you don’t have to do anything**. If you want to change your primary care provider, call **HealthColorado** at <phone number>. **HealthColorado** is open Monday through Friday, 8 a.m. to 5 p.m.

If you want to be a member in a different health plan

You can make that choice by calling **HealthColorado** at <phone number> before < DATE >. **HealthColorado** will help you to choose another health care plan. You may change to a different health plan for any reason within the first 90 days after you enroll. Each member will have another chance to change health plans in the 60 days before their month of birth.

If you need behavioral health services

Your choice of health plan does not change where you can get your behavioral health services for you or for your family members. All behavioral health services will continue to be provided by **<BHO>** at <BHO number>.