<DATE>

<Member Name>

<Street Address>

<City, State, Zip>

Dear <Member Name>,

My name is <CC's name>. I am <"your" or "member's full name"> Blue Plus Care Coordinator. Thank you for our recent conversation. Here is a summary of what we discussed:

Review of the facility services  Immunization or other medical needs

Additional SecureBlue (HMO SNP) benefits  BlueRide transportation

Dental and mental health benefits  Advanced Health Care Directives

Prescription drug coverage  Medical supply and equipment needs

Other

Remember, my job as <"your" or "member's full name"> Care Coordinator is to:

* Provide information on resources and services available to you
* Coordinate your care between your primary care clinic and specialists
* Provide information to help you and your family make decisions about your health care
* Assist with relocation to the community, as desired

To contact me, please call <Phone Number>. Our hours of operation are from <8:00 am to 4:30 pm>. Please leave a message on my voicemail if I am not available to answer your call. I will call you back. If you do not speak English, let me know the language you speak. To help me talk with you, I will use an over-the-phone interpreter. If you have a hearing impairment and use TTY, please call 711.

Sincerely,

<Care Coordinator Name, Title>

Blue Plus Care Coordinator

<Name of County/Clinic/Organization>

SecureBlueSM (HMO SNP) is a health plan that contracts with both Medicare and the Minnesota Medical Assistance (Medicaid) program to provide benefits of both programs to enrollees. Enrollment in SecureBlue depends on contract renewal.

H2425\_001\_112718\_JJ01 Internal Approved 11/27/2017

DHS\_112718\_JJ03 Internal Approved 11/27/2017