

«Todays_Date»

«Meme_First_Name» «Meme_Last_Name»

«Meme_Addr1_Mail»

«Meme_Addr2_Mail»

«Meme_Addr3_Mail»

«Meme_City_Mail», «Meme_State_Mail» «Meme_Zip_Mail»

Dear Parent/Guardian of «Meme_First_Name»,

At CDPHP, your child's health is our top priority. **That is why we regret to inform you that CDPHP has made the difficult decision to no longer offer its Child Health Plus product in the counties listed below effective August 1, 2023.**

Broome, Chenango, Clinton, Delaware, Dutchess, Essex, Franklin, Herkimer, Madison, Oneida, Orange, Otsego, Tioga, Ulster

As a not-for-profit health plan, CDPHP takes seriously our commitment to improving the health and well-being of the communities we serve. Unfortunately, after several years of financial challenges related to our state programs products, it is no longer feasible for us to continue offering these services in your community.

What should you do next?

Is it very important that your child maintains health care coverage. To enroll with a new plan, please contact NY State of Health at www.nystateofhealth.ny.gov or 1-855-355-5777. **You need to complete this step by July 15, 2023 to make sure your child doesn't have a gap in coverage.** You can choose one of the plans in the attachment to this letter.

Is your child pregnant, in an ongoing course of treatment, or does your child have health care services scheduled for August?

Members in an ongoing course of treatment should pay close attention to the new plan's network. In order to continue care without interruptions, check the new plan's provider directory to see if your child's current provider is in the network, or you can call the new plan to confirm.

Members who have a life-threatening disease or condition, or a degenerative and disabling disease or condition, or who have entered the second trimester of pregnancy by August 1, 2023, should contact the new plan for more information on continuing care with their current provider.

If your child has a health care procedure scheduled for August that CDPHP already approved, please call us to let us know the new plan that you selected. The new plan should accept the CDPHP approval letter, but if you have any trouble, we can assist.

If your child works today with a CDPHP case manager, you are encouraged to contact his/her case manager for assistance. The case manager can help you understand how this change could impact your child's care.

Questions?

Please call CDPHP member services at 1-800-388-2994, Monday through Friday, 8 a.m. to 6 p.m. TTY/TDD: 711.

This notice is available in other formats for members with special needs and can be read to you in your preferred language.

Sincerely,

«SignatureName»

«SignatureTitle»

«SignatureLOB»

Available Child Health Plus Plans

Please contact NY State of Health at <https://nystateofhealth.ny.gov> or 1-855-355-5777 to change to a new health plan.

You need to complete this step by July 15, 2023 to make sure your child doesn't have a gap in coverage.

County	Child Health Plus Plan Options
BROOME	EXCELLUS BCBS
	FIDELIS CARE
	UNITED HEALTHCARE COMMUNITY PLAN
CHENANGO	EXCELLUS BCBS
	FIDELIS CARE
	UNITED HEALTHCARE COMMUNITY PLAN
CLINTON	EXCELLUS BCBS
	FIDELIS CARE
	UNITED HEALTHCARE COMMUNITY PLAN
DELAWARE	EXCELLUS BCBS
	FIDELIS CARE
DUTCHESS	EMPIRE BLUECROSS BLUESHIELD HEALTHPLUS
	FIDELIS CARE
	MVP HEALTH PLAN, INC.
	UNITED HEALTHCARE COMMUNITY PLAN
ESSEX	EXCELLUS BCBS
	FIDELIS CARE
	UNITED HEALTHCARE COMMUNITY PLAN
FRANKLIN	EXCELLUS BCBS
	FIDELIS CARE
HERKIMER	EXCELLUS BCBS
	FIDELIS CARE
	UNITED HEALTHCARE COMMUNITY PLAN
MADISON	EXCELLUS BCBS
	FIDELIS CARE
	UNITED HEALTHCARE COMMUNITY PLAN
ONEIDA	EXCELLUS BCBS
	FIDELIS CARE
	MVP HEALTH PLAN, INC.
	UNITED HEALTHCARE COMMUNITY PLAN
ORANGE	EMPIRE BLUECROSS BLUESHIELD HEALTHPLUS
	FIDELIS CARE
	HEALTHFIRST PHSP, INC.
	MOLINA HEALTHCARE OF NEW YORK
	MVP HEALTH PLAN, INC.
OTSEGO	EXCELLUS BCBS
	FIDELIS CARE
TIOGA	EXCELLUS BCBS
	FIDELIS CARE
	UNITED HEALTHCARE COMMUNITY PLAN
ULSTER	EMPIRE BLUECROSS BLUESHIELD HEALTHPLUS
	FIDELIS CARE
	MVP HEALTH PLAN, INC.
	UNITED HEALTHCARE COMMUNITY PLAN

NOTICE OF NON-DISCRIMINATION

Capital District Physicians' Health Plan, Inc. (CDPHP®) complies with Federal civil rights laws. **CDPHP** does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

CDPHP provides the following:

- Free aids and services to people with disabilities to help you communicate with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Free language services to people whose first language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, call **CDPHP** at 1-800-388-2994. For TTY/TDD services, call 711.

If you believe that **CDPHP** has not given you these services or treated you differently because of race, color, national origin, age, disability, or sex, you can file a grievance with **CDPHP** by:

Mail: CDPHP Civil Rights Coordinator,
500 Patroon Creek Blvd., Albany, New York 12206
Phone: 1-844-391-4803 (for TTY/TDD services, call 711)
Fax: (518) 641-3401
In person: 500 Patroon Creek Blvd., Albany, New York 12206
Email: <https://www.cdphp.com/customer-support/email-cdphp>

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights by:

Web: Office for Civil Rights Complaint Portal at
<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>
Mail: U.S. Department of Health and Human Services

200 Independence Avenue SW., Room 509F, HHH Building
Washington, DC 20201

Complaint forms are available at

<http://www.hhs.gov/ocr/office/file/index.html>

Phone: 1-800-368-1019 (TTY/TDD 800-537-7697)

ATTENTION: Language assistance services, free of charge, are available to you. Call 1-800-388-2994 (TTY: 711).	English
ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-388-2994 (TTY: 711).	Spanish
注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-388-2994 (TTY: 711)。	Chinese
ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-800-388-2994 (رقم هاتف الصم والبكم) 711	Arabic
주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다 1-800-388-2994 (TTY: 711). 번으로 전화해 주십시오.	Korean
ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-388-2994 (телетайп: 711).	Russian
ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-800-388-2994 (TTY: 711).	Italian
ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-388-2994 (TTY: 711).	French
ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-800-388-2994 (TTY: 711).	French Creole
אויפמערקזאם: אויב איר רעדט אידיש, זענען פארהאן פאר אייך שפראך הילף סערוויסעס פריי פון אפצאל. רופט > 1-800-388-2994 (TTY: 711).	Yiddish
UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-800-388-2994 (TTY: 711).	Polish
PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-388-2994 (TTY: 711).	Tagalog
লক্ষ্য করুনঃ যদি আপনি বাংলা, কথা বলতে পারেন, তাহলে নিঃখরচায় ভাষা সহায়তা পরিষেবা উপলব্ধ আছে ফোন করুন ১-৮০০-৩৮৮-২৯৯৪ (TTY: ৭১১)।	Bengali
KUJDES: Nëse flitni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. Telefononi në 1-800-388-2994 (TTY: 711).	Albanian
ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 1-800-388-2994 (TTY: 711).	Greek
خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں۔ کال کریں 1-800-388-2994 (TTY: 711)۔	Urdu