



Are you ready to enroll?

Step 1

Review all the materials, including the Summary of Benefits enclosed.

Step 2

Review Drug List

Take a moment to review our drug list to ensure that your medications are covered.

Or, visit us online at

MolinaHealthcare.com/Medicare to review our drug formulary or call us for verification of our drug listing.

Step 3

Choose Your Primary Care Provider (PCP)

Choose your PCP. You can use our Provider Directory, or visit us online at

MolinaHealthcare.com/Medicare or call us for a list of PCPs near you.

Step 4

Locate your Medicare and Medicaid ID Cards.

When you are applying, make sure to have your Medicare and Medicaid ID cards available, or some form of proof that you are entitled to Medicare and Medicaid.

Step 5

Complete the Enrollment Form

Be sure to complete all the sections of the enrollment form. Sign and date the form.

If applying by mail, send the signed copy to:

Molina Healthcare, Inc
Attn: Enrollment Accounting
PO BOX 22800
Long Beach, CA 90801-9945.

Keep the yellow copy for your records.

You are eligible to join Molina Medicare Complete Care HMO SNP, a Medicare Advantage Prescription Drug Special Needs Plan (SNP) if:

- You reside in the Molina Medicare Complete Care service area; and
- You are entitled to Medicare Part A; and
- You are enrolled in Medicare Part B; and
- You are entitled to full Medicaid; and
- You do not have End Stage Renal Disease (ESRD) with limited exceptions (such as if you develop ESRD when you are already a member of a plan that we offer).

If you have questions about becoming a Molina Medicare Complete Care member, call:
(Molina Medicare # (866) 403-8293 (TTY: 711)
Monday to Saturday, 8 a.m. to 8 p.m. local time.
MolinaHealthcare.com/Medicare

This information is available in other formats such as Braille, large print and audio.