



## **VNSNY CHOICE Total (HMO D-SNP) Member Rights and Responsibilities upon Disenrollment**

"Disenrollment" from VNSNY CHOICE Total means ending your membership in VNSNY CHOICE Total. Disenrollment can be voluntary (your own choice) or involuntary (not your own choice):

- You might leave VNSNY CHOICE Total because you have decided that you want to leave. You can do this at any time for any reason.
- There are also a few situations where you would be required to leave. For example, you would have to leave VNSNY CHOICE Total if you move permanently out of our geographic service area or if VNSNY CHOICE Total leaves the Medicare program. We are not allowed to ask you to leave the plan because of your health.

To disenroll, you may:

- Call us at 1-866-783-1444 (TTY: 711), 7 days a week, 8 am – 8 pm.
- Call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.
- Mail your written disenrollment request to:

VNSNY CHOICE Total  
PO Box 3806  
Scranton, PA 18505

For information on Member and Plan rights and responsibilities upon disenrollment, please see Chapter 10 of your Member Handbook (Evidence of Coverage). For rights and responsibilities, you have as a plan member, please see Chapter 8 of your Member Handbook.

If you have any questions, please call us at **1-866-783-144 (TTY: 711)**.