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[Plans should refer to other parts of the Member Handbook using the appropriate chapter number, section, and/or page number. For example, "refer to Chapter 9, Section A, page 1." An instruction [insert reference, as applicable] appears with many cross references throughout the Member Handbook. Plans may always include additional references to other sections, chapters, and/or member materials when helpful to the reader.]

[Plans may include other legal notices, such as a notice of member non-liability or a notice about third-party liability, if they conform to Medicare and Medicaid laws and regulations.]

[Plans must update the Table of Contents to this document to accurately reflect where the information is found on each page after plan adds plan-customized information to this template.]

A.	2
B.	2
C. Medicare [Insert state-specific name of Medicaid program]	2



A.

《》 Medicare
[insert name of state-specific Medicaid program]

B.

[Plans may add language describing additional categories covered under state human rights laws as well as the appropriate contact information below.]

- 1-800-368-1019 (TTY) 1-800-537-7697
www.hhs.gov/ocr
- *[Plans insert contact information for the local office.]*
-

C. Medicare *[Insert state-specific name of Medicaid program]*

Medicare Medicare

[insert name of state-specific Medicaid program]

[Plans may also include Medicaid-related legal notices.]

