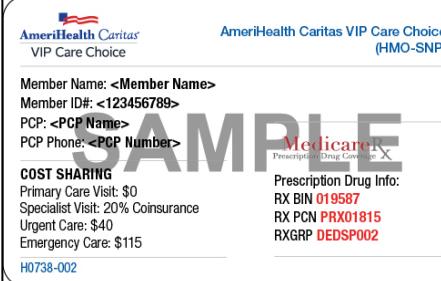


## IMPORTANT UPDATES FOR 2026

AmeriHealth Caritas VIP Care, a Medicare Advantage (MA) Dual Special Needs Plan (D-SNP), which is part of the AmeriHealth Caritas Delaware Family of Companies, would like to share important updates with you. Effective January 1, 2026, AmeriHealth Caritas VIP Care will be exclusively aligned with our AmeriHealth Caritas Delaware Medicaid plan. We will also be adding an additional plan called AmeriHealth Caritas VIP Care **Choice**, which will enroll partial dual eligible members. We are here to serve you, so we are hoping you will find the information below useful.

<b>AmeriHealth Caritas VIP Care – Updates</b>																						
<b>Exclusive Alignment with AmeriHealth Caritas Delaware Medicaid</b>	As of 1/1/26, Delaware Health and Social Services (DHSS) is requiring an “Exclusive Alignment” between D-SNPs and one of the three Delaware Medicaid Managed Care Organizations (MCOs), meaning members will receive their Medicare and Medicaid benefits from the same organization. Therefore, members in AmeriHealth Caritas VIP Care plan <u>will also be enrolled</u> in our AmeriHealth Caritas Delaware Medicaid MCO.																					
<b>Why is DHSS requiring Exclusive Alignment?</b>	This will allow for seamless access to high-quality care through coordination of services traditionally covered separately by Medicare and Medicaid. It also brings Delaware into alignment with the new Centers for Medicare & Medicaid Services (CMS) Final Rule requiring Medicare and Medicaid integration for the dual eligible population by 2030.																					
<b>How will Exclusive Alignment impact member's enrollment?</b>	<ul style="list-style-type: none"> <li>If a person elected to join one of the three D-SNPs, this will determine which Medicaid MCO they are assigned to.</li> <li>United Healthcare, Aetna, and Cigna can no longer operate D-SNPs in Delaware since they do not have Medicaid MCOs in Delaware. Members in one of these plans will have had to either select from one of the three D-SNPs with an aligned Medicaid MCO, a regular MA plan, or Traditional Medicare. Regardless of which plan type chosen, they will still have their Medicaid through one of the three Delaware Medicaid MCOs.</li> </ul>																					
<b>What will be integrated with Exclusive Alignment?</b>	<ul style="list-style-type: none"> <li>Single ID Card</li> <li>Claims Submission</li> <li>Member Appeals &amp; Grievances</li> <li>Prior Authorization</li> <li>Member/Provider Services</li> <li>Care Management</li> </ul>																					
<b>Eligibility Verification</b>	It will be especially important to verify the eligibility of a dual eligible after 1/1/26 due to this change as well as at every encounter due to special enrollment guidance which may allow them to change plans more frequently. Call Provider Services or use our provider portal, NaviNet, to verify eligibility.																					
<b>NEW* Single ID Card</b>	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><b>AmeriHealth Caritas VIP Care</b></p> <p><b>ID number</b></p> <p><b>AmeriHealth Caritas Delaware</b></p> <p><b>ID Number</b></p> </div> <div style="width: 50%;"> <p><b>AmeriHealth Caritas VIP Care</b> is an HMO-SNP plan that contracts with both Medicare and Delaware Medicaid program.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Member Name: &lt;Cardholder Name&gt;</td> <td>PCP Group Name: &lt;PCP/Group Name&gt;</td> <td>Medicare Rx</td> </tr> <tr> <td>Member ID #: &lt;123456789&gt;</td> <td>PCP Phone: &lt;PCP Phone&gt;</td> <td>RX BIN: 019587</td> </tr> <tr> <td colspan="2">PCP Specialist: \$0 ER: \$0</td> <td>RX PCN: PRX01815</td> </tr> <tr> <td colspan="2">Copays: PCP/Specialist: \$0 ER: \$0</td> <td>RX GRP: DE05P001</td> </tr> <tr> <td colspan="2">AmeriHealth Caritas Delaware</td> <td>RX BIN: 019586</td> </tr> <tr> <td colspan="2">Member ID: &lt;123456&gt;</td> <td>RX PCN: PRX00771</td> </tr> <tr> <td colspan="2"></td> <td>H0738-001</td> </tr> </table> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>If you have a medical emergency dial 911</p> <p>Member Services: 1-833-433-3767 (TTY 711)  Behavioral Health: 1-833-433-3767 (TTY 711)  Pharmacy Help Desk: 1-833-379-3767 (TTY 711)  Pharmacy Provider Services: 1-833-376-7790</p> <p>Website: <a href="http://www.amerihealthcaritasvipcare.com/de">www.amerihealthcaritasvipcare.com/de</a></p> <p>Send Claims To: AmeriHealth Caritas VIP Care Claims Processing Center  P.O. Box 7125  London, KY 40742-7125</p> <p>Claim Inquiry: 1-833-433-3767 (TTY 711)</p> </div> </div> </div>	Member Name: <Cardholder Name>	PCP Group Name: <PCP/Group Name>	Medicare Rx	Member ID #: <123456789>	PCP Phone: <PCP Phone>	RX BIN: 019587	PCP Specialist: \$0 ER: \$0		RX PCN: PRX01815	Copays: PCP/Specialist: \$0 ER: \$0		RX GRP: DE05P001	AmeriHealth Caritas Delaware		RX BIN: 019586	Member ID: <123456>		RX PCN: PRX00771			H0738-001
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**NEW** Claims submission information	AmeriHealth Caritas VIP Care	AmeriHealth Caritas Delaware
<b>Changes to claim filing process</b>	<ul style="list-style-type: none"> <li>File only one claim for both the Medicare and/or Medicaid covered services</li> <li>Claims will adjudicate through AmeriHealth Caritas VIP Care first for processing under Medicare</li> <li>Most* claims will then automatically <u>crossover</u> to AmeriHealth Caritas Delaware for processing under Medicaid</li> </ul>	<ul style="list-style-type: none"> <li>For Medicaid <u>only</u> covered services, claims can be submitted directly to AmeriHealth Caritas Delaware, bypassing the submission to AmeriHealth Caritas VIP Care</li> </ul> <p><i>*Claims submitted to Medicaid using a different bill type from Medicare (UB04 vs. CMS 1500) will not crossover and must be submitted separately with the AmeriHealth Caritas VIP Care remittance.</i></p>
<b>Claims Mailing Address</b>	AmeriHealth Caritas VIP Care Claims Processing Department P.O. Box 7125 London, KY 40742-7125	AmeriHealth Caritas Delaware Attn: Claims Processing Department P.O. Box 80100 London, KY 40742-0100
<b>Payer ID</b>	87406	77799
<b>Remittance Advice Information</b>	Providers will receive a remittance advice from both AmeriHealth Caritas VIP Care and AmeriHealth Caritas Delaware	Providers will only receive a remittance from AmeriHealth Caritas Delaware.
<b>Provider Services</b>	1-833-433-2177	

AmeriHealth Caritas VIP Care Choice – New Plan		
<b>What type of plan is this?</b>	AmeriHealth Caritas VIP Care <b>Choice</b> is a new plan we are offering, which is designed for partial dual eligibles. A partial dual is entitled to Medicare and qualifies for a Medicare Saving Program, in which Medicaid only pays their Medicare Part B premium, however they are not entitled to full Medicaid benefits. As part of Delaware's State Medicaid Agency Contract with D-SNPs, we are required to cover partial dual eligibles.	
<b>What claims to file and how</b>	<ul style="list-style-type: none"> <li>Submit claims for Medicare covered services only to the same PO Box and Payer ID as AmeriHealth Caritas VIP Care above.</li> <li>Since the member is <u>not eligible</u> for full Medicaid benefits, they are responsible for the Medicare cost sharing and claims should not be submitted to Medicaid for any additional payment.</li> </ul>	
<b>ID Card</b>	 <p><b>AmeriHealth Caritas VIP Care Choice (HMO-SNP)</b></p> <p>Member Name: &lt;Member Name&gt; Member ID#: &lt;123456789&gt; PCP: &lt;PCP Name&gt; PCP Phone: &lt;PCP Number&gt;</p> <p><b>COST SHARING</b> Primary Care Visit: \$0 Specialist Visit: 20% Coinsurance Urgent Care: \$40 Emergency Care: \$115 H0738-002</p> <p><b>Medicare X</b> Prescription Drug Coverage X</p> <p>Prescription Drug Info: RX BIN 019587 RX PCN PPKX01815 RXGRP DEDSP002</p>	
<b>Provider Services</b>	1-833-330-2577	