

Frequently Asked Questions



In 2026, the Ohio Department of Medicaid (ODM) is implementing the Next Generation MyCare program across Ohio to better serve Ohioans who have both Medicaid and Medicare. It will be available in the rest of Ohio later in 2026. This document provides answers to the most commonly asked questions about the Next Generation MyCare program for members.

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Introduction

What is the Next Generation MyCare program?

The Next Generation MyCare program provides enhanced healthcare benefits to Ohioans who have both Medicaid and Medicare. This program helps you get the care you need all in one plan.

ODM designed the program to:

- Focus on the individual
- Help individuals and communities be healthier
- Give everyone the best care for your needs
- Help providers keep making care better
- Improve care for individuals with complex needs and help you live independently in your communities
- Make the program more transparent and responsive

What is the timeline for the Next Generation MyCare program?

In the program, the plans partner with the Area Agencies on Aging (AAA) to serve you. AAAs are regional agencies that work with your plan to support your care. Because of this, the program rollout is based on the AAA regions and the counties they serve. Locate your county in the [Rollout Schedule](#) to see when the program will be available for you.

Phase 1: Original MyCare Counties (January 1, 2026)

On January 1, 2026, the program started in 29 Ohio counties. These include:

- AAA1: Butler, Warren, Clinton, Hamilton, Clermont
- AAA2: Montgomery, Clark, Greene
- AAA4: Lucas, Fulton, Ottawa, Wood
- AAA6: Franklin, Delaware, Union, Madison, Pickaway
- AAA10a: Lorain, Cuyahoga, Medina, Lake, Geauga
- AAA10b: Summit, Portage, Stark, Wayne
- AAA11: Columbiana, Mahoning, Trumbull

What plans are available in the Next Generation MyCare program?

There are four Next Generation MyCare plans. Three of the plans are available for you to select statewide. These plans cover your Medicare and Medicaid benefits.

The plans available statewide are:

- [Anthem Blue Cross and Blue Shield](#)
- [CareSource](#)
- [Molina Healthcare of Ohio](#)

[Buckeye Health Plan](#) is not an option for new members in the program in plan year 2026.

What are the benefits of having one plan for both my Medicaid and Medicare services?

Having a Next Generation MyCare plan for both your Medicare and Medicaid benefits means you have:

- One care coordinator for your Medicaid and Medicare benefits
- One organization responsible for your entire healthcare benefit
- Communications coming from one source
- One member ID card
- One organization to contact if you need to file an appeal

If your Next Generation MyCare plan only covers your Medicaid benefits, you may have:

- Multiple care coordinators for both your Medicaid and Medicare benefits
- Multiple organizations responsible for both your Medicaid and Medicare benefits, including long-term care services and behavioral health services
- Communications coming from multiple sources
- Multiple member ID cards, up to three
- Multiple organizations to contact if you need to file an appeal

Your plan may also give you extra benefits like additional transportation, rewards, and more. View the **Next Generation MyCare Plan Comparison** at www.ohiomh.com by clicking the “Compare Next Generation MyCare Plans” button under “Compare Plans and Find a Provider” section to learn more.



Eligibility and Enrollment

Am I eligible?

You are eligible to be enrolled [when the program is available in your county](#) if you meet the following criteria*:

- Have full Medicaid
- Have Medicare parts A, B, and D
- Are 21 or older

*If you are already enrolled in a Program for All-Inclusive Care for the Elderly (PACE), a Developmental Disabilities waiver, an Intermediate Care Facility, or have other health insurance that covers both inpatient hospital stays and doctor visits, you are not enrolled in the program.

I am eligible for the Next Generation program and live in a county where it's available. What does that mean for me?

Once enrolled, you should receive a letter from ODM or your plan with important information, including:

- The name of your plan
- The date your new plan begins
- Your options for changing your plan or coordinating your Medicare and Medicaid coverage

You should also receive your new member ID card and other materials from your plan explaining your benefits. Contact your plan if you did not receive or have questions about these materials.

- [Anthem Blue Cross and Blue Shield](#): (833) 727-2169
- [Buckeye Health Plan](#): (855) 445-3562
- [CareSource](#): (855) 475-3163
- [Molina HealthCare of Ohio](#): (866) 856-8295

Contact the Ohio Medicaid Consumer Hotline at 800-324-8680 if:

- You do not know your plan
- You want to pick a different plan
- You want to align your Medicaid and Medicare benefits into one plan
- You did not receive your member ID card or need help with your benefits



I am eligible for the Next Generation MyCare program and live in a county where the program will be available later in 2026. What should I expect?

You may start receiving your benefits through a Next Generation MyCare plan on the [date the program is available in your county](#). When your benefits begin depends on whether – and when – you select a plan or are automatically assigned one.

- If you choose a plan before the program is available in your county, you will begin receiving care from the plan you selected on the date the program becomes available in your county.
- If you do not select a plan before the program is available in your county, you will be automatically enrolled in a plan for your Medicaid benefits. You should receive a letter from ODM with more information including:
 - » The name of your plan
 - » The date your new plan begins
 - » Your options for changing your plan or coordinating your Medicare and Medicaid coverage
- If you want to get your benefits through a Next Generation MyCare plan sooner or change your plan, you should call the Ohio Medicaid Consumer Hotline at 800-324-8680. Once you select a plan, you will start receiving care from that plan on the first day of the following month. You cannot begin receiving care through a Next Generation MyCare plan ahead of the date the program becomes available in your county.

Once you are enrolled with your plan, you should receive a new member ID card and other information explaining your benefits.

I am in the Next Generation MyCare program. What if I move to another county where the program is available?

If you move to a different county where the program is available, you can stay with your current plan.

*Buckeye Health Plan will not be available in Belmont and Ashtabula counties for plan year 2026. Members who move to one of these counties should receive a letter from ODM with additional information.

I am in the Next Generation MyCare program. What if I move to a county where the program is not available?

If you move to a county where the program is not available, you will no longer get your



benefits through your Next Generation MyCare plan. Until the program is available in your county, you will be enrolled in Medicaid fee-for-service for your Medicaid benefits. You will continue to get your Medicare benefits from your existing Medicare plan.

When the program is available [in your county](#), you will receive a letter from ODM with important information, including:

- The name of your plan
- The date your new plan begins
- Your options for changing your plan or coordinating your Medicare and Medicaid coverage

I am not in the Next Generation MyCare program. What if I move to a county where the program is available?

If you move to a county where the program is available, you will be enrolled in a Next Generation MyCare plan.

You will receive a letter from ODM with important information, including:

- The name of your plan
- The date your new plan begins
- Your options for changing your plan or coordinating your Medicare and Medicaid coverage

Contact the Ohio Medicaid Consumer Hotline at 800-324-8680 if:

- You do not know your plan
- You want to pick a different plan
- You want to align your Medicaid and Medicare benefits into one plan

I want to pick a different Next Generation MyCare plan. When can I do that?

If you only get your Medicaid benefits through your Next Generation MyCare plan and want to pick a different plan for your Medicaid benefits, you can pick a different plan for up to 90 days after you joined the program. You can also change plans throughout the year for just cause. Just cause is when you are concerned with or have issues getting care due to the plan you are on.

If you get your Medicaid and Medicare benefits through a Next Generation MyCare plan, you can change your plan at any time through Medicare. Your new plan and benefits will begin on the first day of the following month.

Contact the Ohio Medicaid Consumer Hotline at 800-324-8680 to discuss your options for picking a new plan.

I want to align my Medicare and Medicaid benefits through a Next Generation MyCare plan. When can I do that?

If you only get your Medicaid benefits through your Next Generation MyCare plan and want to align your Medicare and Medicaid benefits through that plan, you can enroll at any time through Medicare. Your new plan and benefits will begin on the first day of the following month.

Contact Medicare at 800-633-4227 or the Ohio Medicaid Consumer Hotline at 800-324-8680 to discuss your options for getting your benefits through one plan.

Member Identification (ID) Cards and Other Plan Materials

Do I have a new member ID card?

Once you are enrolled with your plan, you should receive a Next Generation MyCare member ID card in the mail from your plan. You should use this card at your appointments.

If you have a Next Generation MyCare plan for both your Medicaid and Medicare benefits, you have only one member ID card to use at your appointments. If your plan only covers your Medicaid benefits, you could have up to three cards for your benefits.

View the [Next Generation MyCare Member ID Card One-Pager](#) to see the what the card looks like.

I don't have a Next Generation MyCare member ID card. What do I do?

Once you are enrolled with your plan, if you did not receive your member ID card, need to replace it, or your information needs updated, call your plan. You can print a copy of your ID card at any time from your plan portal. If you order a card by telephone, it should arrive in the mail in 7-10 business days from the date of your request.

Next Generation MyCare plan phone numbers:

- [Anthem Blue Cross and Blue Shield](#): (833) 727-2169
- [Buckeye Health Plan](#): (855) 445-3562
- [CareSource](#): (855) 475-3163
- [Molina HealthCare of Ohio](#): (866) 856-8295

If you do not know your plan or have questions about the materials you received, contact the Ohio Medicaid Consumer Hotline at 800-324-8680 or visit www.ohiomh.com.

Your Healthcare Benefits

How is the Next Generation MyCare program improving my care?

The Next Generation MyCare program coordinates your Medicaid and Medicare benefits. If you receive both your Medicaid and Medicare benefits through a Next Generation MyCare plan, your plan covers your entire healthcare benefit. This includes behavioral health services and long-term care services for those in the community, assisted living, and in a nursing facility.

ODM has also improved the program to give you the best care possible. These changes include:

- Better transportation options to get you to and from your appointments
- More in-home providers available to you
- Shorter wait time for prior authorizations

With the program, you may notice updates to the services or benefits you receive. View your plan's website for more information about the benefits and services available to you.

- [Anthem Blue Cross and Blue Shield](#)
- [Buckeye Health Plan](#)
- [CareSource](#)
- [Molina HealthCare of Ohio](#)

Who is on my care team?

In the Next Generation MyCare program, you have a care coordinator who helps manage your health and support services. If you are on a **waiver or receive your Medicare benefits through a different plan**, you may need to work with additional people to get everything you need.

- If you have a **MyCare plan for both your Medicaid and Medicare benefits**, you have one care coordinator. Your care coordinator helps with all your care needs.
- If you have a **MyCare plan for both your Medicaid and Medicare benefits and you are on a waiver**, you may have a care coordinator and a waiver service coordinator. These two work together.
- If your **MyCare plan only covers your Medicaid benefits**, you may have separate teams who help you with your Medicaid and Medicare benefits. These two teams may not work together, and you may have to be more involved in your care.

If you don't know who your care coordinator is, you can call the Care Management number on the back of your member ID card for help.

Who is my care coordinator?

The Next Generation MyCare plans partner with the AAAs to serve you.

If you don't know who your care coordinator is, you can call the Care Management number on the back of your member ID card for help. If you want to change your care coordinator, you should call your plan.

- [Anthem Blue Cross and Blue Shield](#): (833) 727-2169
- [Buckeye Health Plan](#): (855) 445-3562
- [CareSource](#): (855) 475-3163
- [Molina HealthCare of Ohio](#): (866) 856-8295

I have complex health needs. What support is available to me?

Contact your care coordinator. They can help you get the care you need and can work with your plan to find programs that benefit you. For example, your plan may offer you a monthly allowance to cover costs related to your health conditions.

If you don't know who your care coordinator is, you can call the Care Management number on the back of your member ID card for help.

How do I get transportation to my appointments and other services?

Your plan can give you several free rides per year to help you get where you need to go. This can include medical appointments and services such as primary care, behavioral health, and chemotherapy, as well as errands to the grocery store, haircut, and more. Contact your plan or your [local County Department of Job and Family Services](#) to get help with transportation.

Contact your plan if:

- You use a non-folding wheelchair or power scooter that doesn't fit in a standard vehicle
- You need to sit in your folding wheelchair during transport
- You need to travel 30 miles or more (one way) because your treatment is not available at a closer location



Next Generation MyCare plan phone numbers:

- [Anthem Blue Cross and Blue Shield](#): (833) 727-2169
- [Buckeye Health Plan](#): (855) 445-3562
- [CareSource](#): (855) 475-3163
- [Molina HealthCare of Ohio](#): (866) 856-8295

I am enrolled in a Next Generation MyCare plan. What about the services I already have approved or scheduled from the previous program?

Next Generation MyCare plans provide transition of care benefits for services, including doctors and pharmacy. After the transition period, you must use doctors who are part of your plan.

If you have questions about approved or scheduled services, call your plan.

- [Anthem Blue Cross and Blue Shield](#): (833) 727-2169
- [Buckeye Health Plan](#): (855) 445-3562
- [CareSource](#): (855) 475-3163
- [Molina HealthCare of Ohio](#): (866) 856-8295

Who is my doctor?

Your doctor can be found on the front of your Next Generation MyCare member ID card in the “Primary Care Provider Name” field. To find doctors in your plan’s network, go to www.ohiomh.com/home/findaprovider. You should select your plan in the “Health Plan” dropdown and “MyCare Ohio” in the “Program” dropdown.

What if my doctor or hospital is not part of the Next Generation MyCare program?

Most doctors and hospitals are part of the program. If your doctor or hospital is not in the program, you may need to choose a new doctor.

To check if your doctor is in the program, you can:

- Contact your plan’s Member Services found on the back of your member ID card.
- Call your Primary Care Provider’s phone number found on the front of your member ID card.
- Visit your plan’s website.
- Use the provider search available on the Ohio Medicaid Consumer Hotline at www.ohiomh.com/home/findaprovider. You should select your Next Generation MyCare plan in the “Health Plan” dropdown and “MyCare Ohio” in the “Program” dropdown.



MyCare Ohio Waiver

I was in the Ohio Home Care, Assisted Living, or PASSPORT waiver and live in a county where the Next Generation MyCare program is available. What does this mean for me?

If you were in the Ohio Home Care, Assisted Living, or PASSPORT waiver when you were enrolled in the Next Generation MyCare program, you are now enrolled in the MyCare Ohio Waiver. In the MyCare Ohio Waiver program, you have the same benefits, or more, available to you.

If you are not eligible for and not enrolled in the Next Generation MyCare program, you will remain on your original waiver.

If you have questions, contact your care coordinator. If you don't know who your care coordinator is, you can call the Care Management number on the back of your member ID card for help.

What are the benefits of the MyCare Ohio Waiver and how can I enroll?

The MyCare Ohio Waiver helps you receive services at home or in a home-like setting.

To enroll in the MyCare Ohio Waiver, contact your care coordinator. Your care coordinator can check if you are eligible and help you find the services that best meet your needs.

If you don't know who your care coordinator is, you can call the Care Management number on the back of your member ID card for help.

To learn more about the MyCare Ohio Waiver, review our [MyCare Ohio Waiver One-Pager](#).



Grievance and Appeals

How and when to file an appeal in the Next Generation MyCare program?

An appeal is a formal request to have your Next Generation MyCare plan review a decision to deny a service you requested. You may have a representative, like a family member or your doctor, submit an appeal for you.

You can find the member appeal form on your plan's website. The form will ask for:

- Your name and ID number as shown on your member ID card
- Your doctor's name
- The date of the service
- The reason you disagree with the denial
- Any other information to support your request

You can learn more about appeals in your plan's member handbook. To get a copy of your member handbook, find the appeal form, and submit a member appeal, go to your plan's website.

- [Anthem Blue Cross and Blue Shield](#)
- [Buckeye Health Plan](#)
- [CareSource](#)
- [Molina HealthCare of Ohio](#)

How and when to file a grievance in the Next Generation MyCare program?

A grievance is when you are not happy with your Next Generation MyCare plan or doctors. This can mean you are not happy with the operations, activities, or behaviors of your plan or doctors. You have the right to file a grievance without fear of discrimination or negative treatment.

You or your representative can file a grievance verbally or in writing at any time with your plan. You can mail your letter to your plan's address listed on their website, or you can call your plan's Member Services to help you file a grievance over the phone.

You can learn more about grievances in your plan's member handbook. To get a copy of your handbook, find your plan's address, and to file a grievance, go to your plan's website.

- [Anthem Blue Cross and Blue Shield](#)
- [Buckeye Health Plan](#)
- [CareSource](#)
- [Molina HealthCare of Ohio](#)

Additional Resources

Where do I go to learn more about the Next Generation MyCare program?

There are many resources available to help you understand more about the program and the changes coming.

Some of the resources available to you include:

- [Next Generation MyCare Program Overview One-Pager](#) shares information about the program, eligibility, and more.
- [Next Generation MyCare Member Help Desk One-Pager](#) provides guidance about which help desk you can contact for different kinds of questions or issues.
- [Next Generation MyCare Program Member ID Card One-Pager](#) shares the member ID card template.

Where can I go with questions about the Next Generation MyCare program?

If you want to learn more about the Next Generation MyCare plans or doctors available by plan, contact the Ohio Medicaid Consumer Hotline at 800-324-8680 or visit www.ohiomh.com. Representatives are available Monday through Friday 7 a.m. – 8 p.m. and Saturdays 8 a.m. – 5 p.m. Eastern Time.

If you need help comparing the plans available in your area, including the Next Generation MyCare plans, you can contact the Ohio Department of Insurance Ohio Senior Health Insurance Information Program (OSHIIP) at 800-686-1578 or oshiipmail@insurance.ohio.gov.