

# **Provider Memorandum**

# New Member Population Coming to Molina January 2024

Molina Healthcare of Illinois (Molina) is informing providers of a new member population that we are preparing to serve—Health Benefits for Immigrant Adults (HBIA) and Health Benefits for Immigrant Seniors (HBIS). We expect to begin welcoming qualifying individuals as new Molina members on **January 1, 2024**.

## What Are These Programs?

The HBIS program provides Medicaid-like health care coverage to individuals aged **65 and older** who would be eligible for Medicaid but for their immigration status. HFS also operates the HBIA program, which provides similar coverage for individuals aged **42 to 64**.

## **HBIA Eligibility Requirements**

- Ages 42 to 64
- A resident of Illinois
- A permanent resident (lawful permanent resident or green card holder) for less than five years OR

An undocumented immigrant (including individuals in a Temporary Protected Status)

- At or below 138% of the federal poverty level
- No individual asset requirements

#### **HBIS Eligibility Requirements**

- Ages 65 or older
- A resident of Illinois
- A permanent resident (lawful permanent resident or green card holder) for less than five years OR

An undocumented immigrant (including individuals in a Temporary Protected Status)

- At or below 100% of the federal poverty level
- An individual with assets below \$2,000 OR

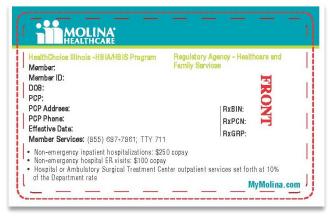
   a couple with assets below \$3,000

**Note**: Molina does **not** determine eligibility or enrollment requirements, which are subject to the Department of Healthcare and Family Services (HFS) guidance.

# What Providers Can Expect

Molina is currently configuring our internal system for our new members, including covered benefits, rates, OBRA codes, etc. Additional details and coding practices will follow as they are finalized.

- HBIS and HBIA members will be included in Molina's existing Medicaid Family Health Plan (FHP).
- This membership will have a copay for certain services. We are still defining the configuration details. HFS is also evaluating this aspect.
- Members will have a Medicaid ID card.



• The additional statement "State Non-Citizen Program Yes" will be displayed in the Eligibility Determination Group (EDG) information:

Eligibility Begin Date 05/01/2022		Eligibility End Date	
Non Financial Pass	Qualifying Member EDG N/A	Last authorized amount for this month	
Assets Not Applicable	Migrant Household No	Current Benefit / Spenddown Amount	
Financial Pass	Expedited No	Supplement/Overpayment	
Verification Pass	SNAP Out of Funds N/A	Spenddown Met Date	
SNAP Reporting Type N/A	SNAP Homeless Household N/A	SNAP Homeless Shelter Standard N/A	
Special Approval Type	Funding Indicator N/A	Categorically Eligible N/A	
LTC ACA Group: No	Penalty Begin Date(mm/yyyy)	Penalty End Date(mm/yyyy)	
TSNAP Indicator No	Prior Month 0	State Non-Citizen Program Yes	

## **Cost Sharing**

This group will have a copay for certain services. **Important**: Providers should tell the member if they will charge cost sharing **and** an estimate of the amount **prior to** providing the service. At this time, cost share will be limited to:

- Inpatient hospitalizations—Up to a \$250 copay.
- Nonemergency hospital or Ambulatory Surgical Treatment Center (ASTC) outpatient services—Up to 10% of the Medicaid payment. The amount charged will vary depending on the service.
  - o Update: Providers should provide HBIA/HBIS members with an estimate of the cost in advance.
- Note: Dental, transportation, and vision—No copays.
- Update: Hospital emergency room visits—No copays.

# **Covered Services**

Most services covered by the Health Benefits for Immigrant Adults program will be free to Members, including:

- Doctor care (PCPs and specialists).
- Hospital care.
- Lab tests.
- Rehabilitative services such as physical and occupational therapy.
- Home health, mental health, and Substance Use Disorder services.
- Kidney and stem cell transplant services.
- Dental, transportation, and vision services.
- Prescription drugs.
- Post-inpatient nursing rehab (up to 90 days); Molina is not responsible for reimbursement beyond 90 days.

## **Services Not Covered**

- Long-Term Care (nursing home, etc.).
- Transplant services (exception: kidney and stem cell transplant services are Covered Services).
- Home and Community-Based Services (waiver services).

## **Emergency Medical Need**

Individuals enrolled in HBIA (ages 42 to 64) with emergency medical needs may qualify for Emergency Medical Coverage for Noncitizens. Providers can find more detailed information on the <u>HFS</u> and <u>IDHS</u> websites.

Thank you for providing quality care to Molina members.

## **Questions?**

We're here to help. Contact your dedicated Provider Relations Manager or email the Provider Network Management team at <u>MHILProviderNetworkManagement@MolinaHealthcare.com</u>. For help identifying your dedicated Provider Relations Manager, visit <u>Molina's Service Area page</u> at <u>MolinaHealthcare.com</u>.

## **Provider Portal Alert**

Providers no longer have direct access to the Molina Legacy Provider Portal. Ensure that you and your staff have access to streamlined claims management, authorizations, eligibility/benefit verification, and more. Get started with Availity Essentials Provider Portal today! <u>Click here</u>.

# **Get Critical Updates**

Receive news and updates about Molina services and plan requirements delivered straight to your inbox! <u>Click here</u> to receive Molina's provider updates.

**Note**: Molina's website and documents are best viewed in Google Chrome or Microsoft Edge.