

Introduction

THANK YOU FOR CHOOSING MOLINA HEALTHCARE AS YOUR HEALTH PLAN.

This Member Service Guide is called your “Combined Evidence of Coverage and Disclosure Form” or your “EOC.” This booklet tells you how you can get services through Molina Healthcare. It also tells you your rights and responsibilities as a Molina Healthcare member and how to contact Molina Healthcare. Please read this booklet completely and carefully and keep it in a safe place where you can get to it quickly. If you have special health care needs, carefully read the sections that apply to you.

This Combined Evidence of Coverage and Disclosure Form constitutes only a summary of the health plan. The health plan contract must be consulted to determine the exact terms and conditions of coverage. You may review a copy of the health plan contract on request.

Some of the words used in this booklet do not have their usual meaning. Health care companies use these words in a special way. Turn to page 50 to find words that you are not used to, to see what they mean.

Molina Healthcare is here to serve you.

Call Molina Healthcare if you have questions or concerns. Our helpful and friendly staff will be happy to help you. We can help you choose a doctor, make an appointment, or arrange for an interpreter. We can also listen and respond to your questions (or complaints!) about your benefits, Molina Healthcare, your doctor, or any other Molina Healthcare services.

Call us toll-free at 1 (888) 665-4621 between 7:00

a.m. to 7:00 p.m. Monday through Friday. If you are deaf or hard of hearing, call our dedicated TTY line toll-free at 1 (800) 479-3310 or by dialing 711 for the California Relay Service.

If you move from the address you had when you enrolled with Molina Healthcare or change phone numbers, please contact our Member Services Department to update that information.

Sharing your updated address and phone number with Molina Healthcare will help us get information to you. This will allow us to send newsletters and other materials, or to reach you by phone if we need to contact you.

Please contact your Social Services case worker to update this information.

ELIGIBILITY AND ENROLLMENT

Who is eligible for Molina Healthcare?

You or your dependent child may enroll in Molina Healthcare if:

1. You can get Medi-Cal benefits.
2. You live in one of the counties where Molina Healthcare gives health care.

A dependent child may be:

- Your own child
- Your adopted child
- Your step-child
- Your foster child
- A child you support

How do I enroll in Molina Healthcare?

Your “county eligibility worker” can tell you if you can get Medi-Cal benefits. If you can get Medi-Cal benefits, you fill out an enrollment form.

The enrollment form comes from Health Care Options. Health Care Options enrolls Medi-Cal members into health plans. You can choose Molina Healthcare from a list of health plans. Then it takes up to forty-five (45) days before you become a Molina Healthcare member.

How do I know if I am a Molina Healthcare member?

You get a member identification (ID) card from Molina Healthcare. Your ID card comes in the mail. Your ID card lists your doctor’s name and phone number. Carry your ID card with you at all times. You must show your ID card every time you get health care. If you lose your ID card, call Molina Healthcare toll-free at 1 (888) 665-4621. We will be happy to send you a new card.

What if I have a baby?

Your newborn baby is covered for the birth month and for the month after birth under your Medi-Cal. You must enroll your new baby in Molina Healthcare for continued coverage.

To sign your new baby up for Molina Healthcare, you must call your “eligibility worker” as soon as possible after delivery to add your baby to Medi-Cal.

If you have any questions about enrolling your new baby in Molina Healthcare, call Molina Healthcare toll-free at 1 (888) 665-4621.

SUMMARY OF MAJOR BENEFITS AND COVERAGE

This chart is intended to be used to help you compare coverage benefits and is a summary only. The evidence of coverage and plan contract should be consulted for a detailed description of coverage benefits and limitations. Some services are not offered in all counties.

A service marked as “Two Plan Only” is for members who live in Riverside or San Bernardino counties. A service marked as “GMC Only” is for members who live in Sacramento or San Diego counties. If you have questions about a service, you can call Molina Healthcare Member Services toll-free at 1 (888) 665-4621.

All medical services covered below are provided at no cost to eligible Medi-Cal program members.

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Service	Coverage
Deductibles and copayments (Money some people have to pay to get a service)	You have no Co-payments or deductibles in Medi-Cal
Professional services (General medical care provided by a licensed medical person)	Shots (Immunizations), periodic health exams, vision exams (by your PCP or an optometrist*), hearing exams, prenatal/postnatal care, pap smear including human papilloma virus (HPV) screening test and vaccine, topical fluoride varnish (children under 6yrs, up to three (3) times in a twelve (12) month period), routine diagnostic testing and lab services, physician visits in a hospital, office visits, and allergy tests and treatments.
Outpatient services (Medical care services outside of the hospital)	Maternity care, diagnostic, therapeutic and surgical services performed at a hospital or outpatient facility, use of operating room, treatment room, ancillary services, surgically implanted devices, and required drugs, radiation therapy, chemotherapy, dialysis, x-ray, and laboratory services. Physical therapy, occupational therapy, and speech therapy*.
Hospitalization services	Room and board, maternity and newborn care, use of operating rooms and related ancillary charges, surgically implanted devices, medically needed drugs, x-rays and lab services, chemotherapy, and various diagnostic services.
Emergency health services	Emergency Room and Urgent Care Center services for an illness or injury requiring immediate diagnosis and treatment.
Well-Baby care	Office visits, health examinations, shots (immunizations), newborn hospital visits, and other office visits.
Ambulance services	Use of an ambulance in an emergency situation, or when requested by your PCP to transfer you from one facility to another.
Prescription drug coverage (Your doctor may be able to get approval for a drug not on the Molina Healthcare “Drug Formulary”)	<ul style="list-style-type: none"> • FDA approved drugs prescribed by a doctor that are listed in our approved drug list or “Drug Formulary.” • Drugs approved by Molina Healthcare’s committee of pharmacists & doctors • Drugs and devices for birth control. <p>For brand name or generic drugs:</p> <ul style="list-style-type: none"> • Up to a 30 day supply for brand name drugs and up to a 60 day supply for generic drugs through pharmacies with Molina Healthcare.
Durable medical equipment (Such as peak-flow meter, wheel chair, crutches etc...)	Equipment designed to serve a repeated medical purpose.

Service	Coverage
Home health services	Health services provided by health care professionals. Long term care is not covered.
Hospice care	When elected by a terminally ill member.
Chiropractic* (GMC Counties only - limited to excepted members)	With prior authorization, up to two (2) treatments per calendar month
Acupuncture* (GMC Counties only - limited to excepted members)	Acupuncture is covered when all other therapies have been tried and failed.

*Please refer to Page 32-34 for a description of benefit limitations and applicable exceptions.

WHAT DO I DO FIRST?

1. Look at your Molina Healthcare member ID card. Check that your name and date of birth are correct. Your card will tell you the name of your doctor. This person is called your “primary care doctor” or “PCP”. This is your main doctor. Your ID card also contains the following information:

- Your name (Member)
- Your member Identification Number (ID#)
- Your date of Birth (DOB)
- Your primary care physician’s name (Provider)
- Your primary care physician’s office phone number (Provider Phone)
- The name of the medical group your physician is associated with (Provider Group)
- Molina Healthcare’s 24 hours Nurse Help Line toll-free number
- The toll-free number to Nurse help Line Spanish speaking members

- Toll free number for prescription related questions and the identifier for Molina Healthcare’s prescription benefit
- Toll free number for hospitals’ to notify Molina Healthcare of admissions for our members
- Toll free number for emergency rooms to notify Molina Healthcare of emergency room admissions for our members

Your ID card is used by health care providers such as your physician, pharmacist, hospital and other health care providers to determine your eligibility for services through Molina Healthcare. When accessing care you may be asked to present your ID card before services are provided.

2. Molina Healthcare wants all new members to see their primary care practitioner (PCP) (Also known as a personal doctor) for an Initial Health Assessment (IHA) to become involved in their healthcare. This first meeting with your new doctor is important. This meeting

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helps you get to know your doctor and review your health status. Your doctor will help you to understand your medical needs. He or she will inform you of ways to support staying healthy. You should see your PCP for an IHA within 120 days of becoming a member. Children 18 months old or younger should see their PCP for an IHA within 60 days of becoming a member.

It is important for you to be active in your healthcare by keeping your IHA and other appointments and being on time. If you are going to be late or cannot keep your appointment, call your doctor's office.

Call your PCP and make an appointment for your Initial Health Assessment. If you need to see a specialist (for example, a heart doctor or cancer doctor), your doctor will arrange it for you.

you get it. Your PCP and you work together to keep you and your child healthy.

If you want to know more about your PCP or other Molina Healthcare doctors, call Molina Healthcare Member Services toll-free at 1 (888) 665-4621. We can give you information about your doctor's qualifications, such as

- medical school attended
- residency completed
- board certification status
- languages your doctor speaks

WHAT IS A PRIMARY CARE DOCTOR?

(Primary Care Physician or "PCP")

A PCP takes care of your health care needs. A PCP knows you well. Call your PCP when you or your child is sick and you do not know what to do. You do not have to go to the emergency room unless you have something that is so serious that your life is in danger.

You may think that you should not see your PCP until you are sick. That is not true.

Get to know your PCP even when you are well. Go for yearly check-ups to stay healthy. Go to your PCP for check-ups, tests and test results, shots, and – of course – when you are ill. Seeing your PCP for check-ups allows problems to be found early. If you or your child needs special care, your PCP will help

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