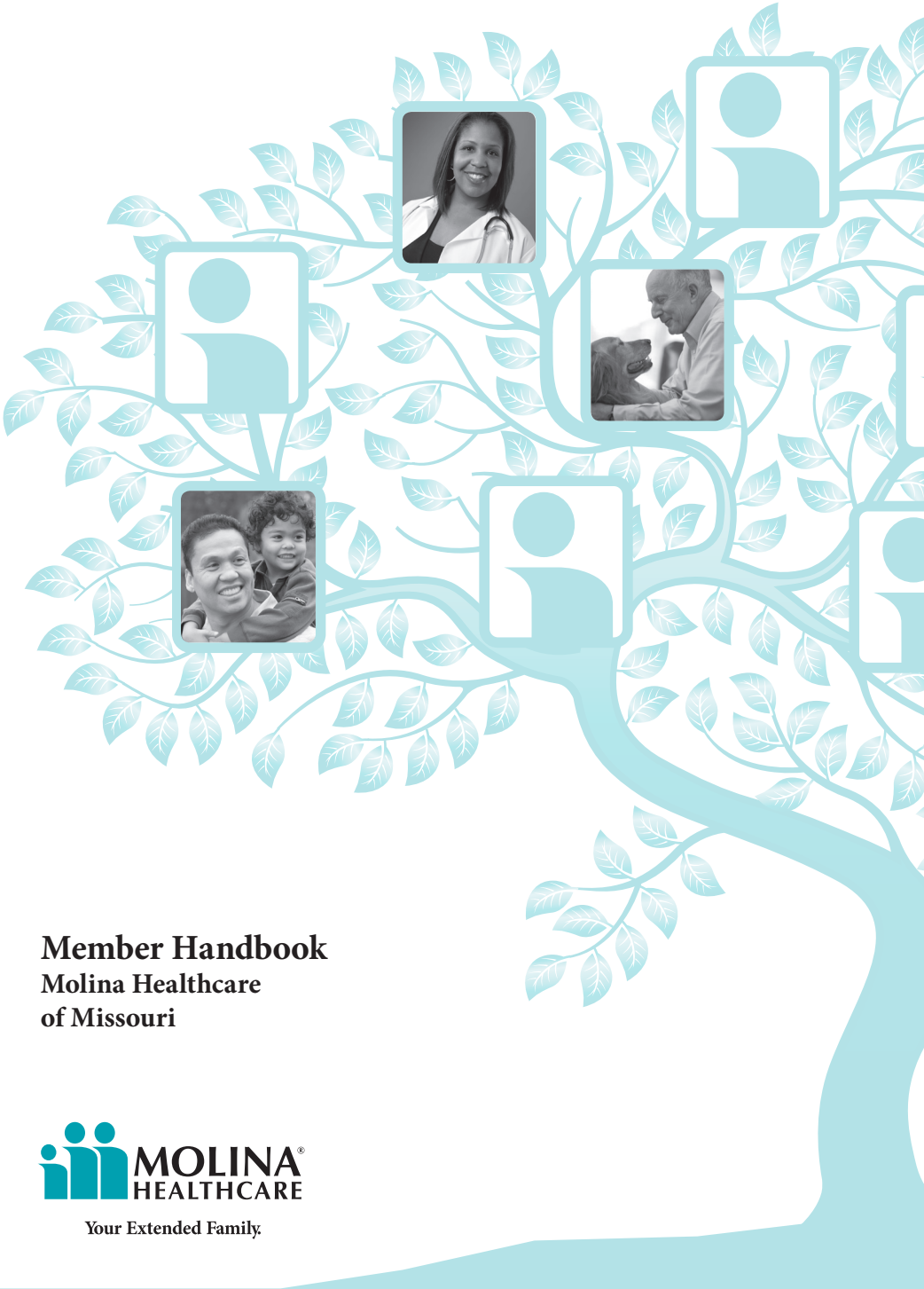


# Welcome to the Molina family.



## Member Handbook Molina Healthcare of Missouri



Your Extended Family.



**Welcome** and thank you for choosing Molina Healthcare as your health care plan. We know how important your health is to you. We will do all that we can to help you and your family with your health care needs.

Please read this handbook. It tells you about your physical health care, behavioral health, dental, and vision benefits.

As part of our extended family, you will receive:

- 24 hour access to help
- Transportation to and from health care appointments at no cost for eligible members
- Member newsletters
- Dr. Cleo's *Cool Cat Club* for Kids
- motherhood matters<sup>sm</sup> program for our expectant mothers
- breathe with ease<sup>sm</sup> program for members with asthma

Please don't hesitate to contact us if you:

- would like help in understanding the services you may receive
- would like more information on the structure and organization of Molina Healthcare
- have ideas on how we can serve you better
- have suggestions for policy changes
- would like to tell us about any concerns

You can call us at 1-800-875-0679 between 8 am and 5 pm CST Monday through Friday. You may also write to us at Molina Healthcare of Missouri, 12400 Olive Boulevard, Suite 100, St. Louis, Missouri 63141 or visit our website at [www.molinahealthcare.com](http://www.molinahealthcare.com). We are here to help!

If you need this book in a language other than English or in a different format because of special needs, please contact our Member Services Department at 1-800-875-0679.

Molina assesses the cultural, ethnic, racial, and linguistic needs of our members and assigns participating providers who can meet those needs. You should contact Molina at 1-800-875-0679 to express any cultural needs so that Molina can help connect you with an appropriate provider.

**Thank you for choosing Molina Healthcare!**

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# Welcome to MO HealthNet Managed Care

You live in an area of the state where you get most of your benefits from a MO HealthNet Managed Care health plan. Each MO HealthNet Managed Care health plan member must have a Primary Care Provider (PCP). A PCP manages the member's health care. In non-health plan areas of the state, individuals eligible for MO HealthNet receive health care services through MO HealthNet Fee-for-Service. There are a few services that members in a MO HealthNet Managed Care health plan will receive from MO HealthNet Fee-for-Service. MO HealthNet Fee-for-Service members must go to a MO HealthNet approved provider. You can do an on-line search to find a MO HealthNet approved provider at [www.dss.mo.gov/mhd/](http://www.dss.mo.gov/mhd/) or you can call 1-800-392-2161 for a list of MO HealthNet approved providers.

## KEEPING YOUR INSURANCE

It is very important you let your Family Support Eligibility Specialist know when your address changes. Important letters and information will be mailed to the address you have given. You or your children could lose your MO HealthNet coverage if you do not respond to State requests for information. Please make sure that you answer all mail from the State.

## ADDITIONAL TIPS ON KEEPING YOUR INSURANCE

- Open all mail from the Family Support Division. Do what it tells you or you may lose your benefits.
- Update your address with the Family Support Division and the United States Post Office. The post office will not forward mail from the State of Missouri.
- Some families enrolled in the Children's Health Insurance Program (CHIP) may be required to pay a monthly premium. Be sure you pay it by the due date or you may lose coverage.

If you have any questions, please call the Member Services Department at 1-800-875-0679 or your local Family Support Division office.

## **VISUALLY AND HEARING IMPAIRED MEMBERS**

We have this handbook in an easy to read format for people with poor eyesight. Please call us at 1-800-875-0679 for help. We have a special phone number for people with poor hearing. Members who use a Telecommunications Device for the Deaf (TDD) can call Relay Missouri. For text telephone call 1-800-735-2966 and for voice call 1-866-735-2460 you may also visit the website at [www.relaymissouri.com](http://www.relaymissouri.com)

## **INTERPRETER SERVICES**

If you do not speak or understand English, call 1-800-875-0679 to ask for help. We can help if you do not speak or understand English.

- We will get you a translator when needed.
- We may have this book in your language.
- We will get a copy of the grievance and appeal rules in your language.

## **SERVICIOS DE INTERPRETACION**

Si usted no habla o entiendaingles, llame al 1-800-875-0679 para pedir asistencia. Llame al 1-800-875-0679 para ayuda para adquirir servicios de MO HealthNet Managed Care.

- Se le ayudara si no habla o entiende el ingles.
- Se le consiguira un interprete cuando necesario.
- Quizas tengamos este libro en su idioma.
- Se le obtendra una copia de las reglas de reclamos y quejas en su idioma.

## **PREVODILAČKE USLUGE**

Ako ne govorite ili razumijete engleski nazovite 1-800-875-0679 i zatražite pomoć. Možemo vam pomoći ako ne govorite ili ne razumijete engleski.

- Obezbijedit ćemo vam prevodioca kada vam je to potrebno.
- Ovu knjižicu možemo imati na vašem jeziku.
- Obezbijedit ćemo primjerak pravila o pritužbama i žalbama na vašem jeziku.

# Member Services

## Member Services Department

Molina provides you with a direct line to our locally operated Member Services Department, which will answer your questions about plan benefits and help you with any concerns you may have about our services.

You may contact Member Services by:

- Calling the Member Services Department at 1-800-875-0679 during normal business hours, Monday through Friday, from 8 a.m. until 5 p.m.; or,
- Visiting our website at [www.molinahealthcare.com](http://www.molinahealthcare.com); or,
- Visiting the Member Services Department at 12400 Olive Blvd., Suite 100 St. Louis, Missouri, 63141.

## Member Services Responsibilities

- Explaining the operation of the health plan and assisting members in the selection of a primary care provider
- Educating the family about Managed Care, including the way services are typically accessed under Managed Care and the role of the primary care provider
- Explaining members' rights and responsibilities
- Explaining covered benefits
- Assisting members to make appointments and obtain services
- Arranging medically necessary transportation for eligible members
- Handling, recording and tracking member inquiries promptly and in a timely manner
- Assisting with changing primary care providers
- Providing the following information to members requesting the names of providers:
  - Whether the provider currently participates with Molina
  - Whether the provider is currently accepting new patients
  - Any restrictions on services, including any referral or prior authorization requirements you must meet to obtain services from the provider
- Informing members about fraud and abuse policies and procedures, and providing assistance in reporting suspected fraud and abuse

## Website Information

You can get up-to-date information about your MO HealthNet Managed Care health plan on our website at [www.MolinaHealthcare.com](http://www.MolinaHealthcare.com). You can visit our website to get information about the services we provide, our provider network, frequently asked questions, contact phone numbers and e-mail addresses.

You may also get information about the MO HealthNet Program at [www.dss.mo.gov/mhd](http://www.dss.mo.gov/mhd).

## The Molina Website

Check out our website at [www.MolinaHealthcare.com](http://www.MolinaHealthcare.com). “Click” on the member button. Choose your state in the drop-down box.

### You can get information on our website about:

- Molina’s contracted providers
- Your benefits
- What to do if you get a bill or a claim
- FAQs (frequently asked questions and answers)
- How to contact Utilization Management (UM) staff about a UM issue or question
- How to get primary care, hospital, specialty, and emergency services
- How to get care after normal office hours
- Preventive health guidelines and immunization (shot) schedule
- Your rights and responsibilities and the privacy of your information
- Restrictions on benefits or how to obtain care outside the Molina service area
- Quality Improvement, Health Education and Disease Management programs
- How to voice a complaint or appeal a medical decision

## Changes You Need To Report

If you move, it is important that you **report your new address** by calling your local Family Support Division Office and the MO HealthNet Managed Care Enrollment Helpline at 1-800-348-6627. Then call Molina at 1-800-875-0679. Your MO HealthNet Managed Care coverage may be affected. If we do not know where you live, you will miss important information about your coverage. Changes you need to report to your local Family Support Division Office include:

- family size (including the birth of any babies);
- income;
- address;
- phone number; and
- availability of insurance.

## Membership ID Card

When you become a member of Molina, you will get a Molina ID card. You will need to carry this card and your red or white MO HealthNet card with you at all times. You must show your Molina ID card when getting health care.

Your card will have your name and ID number on it as well as your Primary Care Provider (PCP) name and number. New ID cards will be sent to you when you change PCPs or when you call to report a lost or stolen card.

Each family member will have his or her own ID card. Only the person on the card may use it for service. You may be asked to show a picture ID when using your Molina ID card. This is to make sure no one else is using your card.

## MEMBERSHIP AND COVERAGE OF NEWBORNS

### Newborn Coverage

If you have a baby you must:

- Call your Family Support Eligibility Specialist at your local Family Support Division Office as soon as possible to report the birth of your child. The State of Missouri will give your baby an identification number, known as a DCN or MO HealthNet number.
- Call Molina at 1-800-875-0679, and
- Pick a PCP for your baby in the Molina network

Your baby will be enrolled in Molina. Call the MO HealthNet Managed Care Enrollment Helpline at 1-800-348-6627 if you want a different MO HealthNet Managed Care health plan for your baby. This is the only phone number you can use to change your baby's MO HealthNet Managed Care health plan. You cannot enroll your baby before birth. You cannot change MO HealthNet Managed Care health plans for your baby until after your baby is born and has a MO HealthNet number. The Family Support Division staff cannot change your baby's MO HealthNet Managed Care health plan.

To be sure your baby gets all the services he or she needs, continue to use your current MO HealthNet Managed Care health plan and PCP until the new MO HealthNet Managed Care health plan is effective. If you want to change your baby's MO HealthNet Managed Care health plan it will be, at most, 15 days before the new MO HealthNet Managed Care health plan is effective.

## **Medical Disability/MO HealthNet Fee-For-Service**

If you get Supplemental Security Income (SSI), meet the SSI medical disability definition, or get adoption subsidy benefits you may stay in MO HealthNet Managed Care or you may choose to get MO HealthNet Fee-for-Service using MO HealthNet approved providers. Call the MO HealthNet Managed Care Enrollment Helpline at 1-800-348-6627 for information and to make your choice.

## **Insurance**

You have MO HealthNet Managed Care health care coverage through Molina. You may have other health insurance too. This may be from a job, an absent parent, union, or other source. If you have other health insurance besides MO HealthNet Managed Care, that insurance company must pay for most of your health services before Molina pays. If your other health insurance covers a service not covered by MO HealthNet Managed Care, you will owe your provider what your insurance does not pay. It is important that you show all your insurance ID cards to your health care provider.

Molina and your other health insurance policy have rules about getting health care. You must follow the rules for each policy. There are rules about

going out-of-network. Some services need prior approval. You may have to pay for the service if you don't follow the rules. For help, call Molina at 1-800-875-0679.

If you have health insurance other than MO HealthNet Managed Care or your insurance changes, details about your insurance are needed. Have your insurance card with you when you call the following numbers.

You must call:

- Molina at 1-800-875-0679; and
- the MO HealthNet Managed Care Enrollment Helpline at 1-800-348-6627; or
- your local Family Support Division Office.

You must report insurance you get through your job or you could lose your MO HealthNet benefits. MO HealthNet has a program that can pay the cost of other health insurance. The name of the program is Health Insurance Premium Payment (HIPP).

- Call your local Family Support Division Office if your job has health insurance.
- Call Third Party Liability (TPL) at 573-751-2005 to ask about the HIPP program.

You must call Molina at 1-800-875-0679 or your local Family Support Division Office within 30 days if:

- you get hurt in a car wreck;
- you get hurt at work;
- you get hurt and have a lawyer; or
- you get money because of an accident.

## **Changing To Another MO HealthNet Managed Care Health Plan**

You may change MO HealthNet Managed Care health plans for any reason during the first 90 days after you become a MO HealthNet Managed Care health plan member. You will also be able to change during your annual open enrollment time. Call the MO HealthNet Managed Care Enrollment Helpline at 1-800-348-6627 for help in changing MO HealthNet Managed Care health plans.

You may be able to change MO HealthNet Managed Care health plans after 90 days. Some reasons for changing include but are not limited to:

- you have moved out of the MO HealthNet Managed Care area;
- your PCP is no longer with Molina and is in another MO HealthNet Managed Care health plan; or
- your specialist or other health care provider you are currently getting services from is no longer with Molina and is in another MO HealthNet Managed Care health plan.

Molina cannot make you leave our MO HealthNet Managed Care health plan because of a health problem.

## **DISENROLLMENT**

Molina may ask that you be disenrolled from its membership. You may be disenrolled from Molina if:

- You are no longer eligible for MO HealthNet
- You let someone else use your ID card
- Your behavior is uncooperative or abusive
- You select another MO HealthNet Managed Care health plan during special enrollment periods
- You continue to ignore your PCP's treatment plan or don't follow the rules of the MO HealthNet Managed Care health plan
- You often miss PCP appointments or do not call to change appointments
- You request a home birth service

You have the right to appeal a disenrollment decision.

## **QUALITY IMPROVEMENT PROGRAM**

### **Improving Services for Molina Members**

Molina wants you and your family to get good health care. We have a Quality Improvement (QI) Program to measure how we do. Each year, Molina sets goals to improve our services. One goal is to help you take better care of you and your family. We measure this by sending you surveys to fill out.

To learn more or to request a copy of our Quality Improvement Program call our Member Services Department at 1-800-875-0679.

## **Satisfaction Surveys**

CAHPS stands for Consumer Assessment of Healthcare Providers and Systems. This survey asks about your health care. It asks about the care you or your child receive from Molina. This tells us if you are happy with your care and your healthcare provider. It also tells us what we can do better.

## **Getting Good Care**

We also measure the quality of the care that you receive with HEDIS which stands for Healthcare Effectiveness Data and Information Set. The HEDIS scores tell us if you and your family got your preventive health care.

To learn more or to request a copy of our Quality Improvement Program, call Molina at 1-800-875-0679.

# **Provider Services**

## **Your Primary Care Provider (PCP)**

PCP stands for primary care provider. A PCP can be a nurse practitioner or a doctor of obstetrics (OB), family practice, a clinic, internal medicine, general practice, or a pediatrician. Your PCP is your health care provider who should provide and arrange most, if not all, of your care. Please schedule an appointment with your PCP once you become a Molina member. You should see your PCP for well-care check-ups and medical problems.

Your PCP helps keep you healthy by:

- Teaching you how to stay healthy
- Providing treatment before health problems become serious
- Keeping immunizations up to date
- Providing care when you are sick

## **What To Do When Your Provider's Office Is Closed**

Your PCP's telephone number is on your Molina ID card.

If you are trying to reach your PCP after normal office hours, call your PCP's after hour's number. If you cannot reach your PCP, call Molina's 24-hour Nurse Advice line at 1-888-275-8750 or TTY/TDD 1-866-735-2929 (for hearing impaired).

You may get a list of Molina providers by:

- Calling the Member Services Department at 1-800-875-0679. They will help you find a provider or send you a paper copy of our list of providers.
- Visiting our website: [www.molinahealthcare.com](http://www.molinahealthcare.com).

## **Choosing And Changing Your Primary Care Provider (PCP)**

You must choose a PCP. If you do not, we will choose one for you. Your PCP will manage your health care. The PCP knows Molina's network and can guide you to specialists if you need one. You may ask for a specialist as your PCP if you have a chronic illness or disabling condition. We will work out a plan to make sure you get the care you need.

You have a right to change PCPs in our MO HealthNet Managed Care health plan. You may change your PCP two (2) times a year with no cause. Children in state custody may change PCPs as often as needed. To do this, call us at 1-800-875-0679. Requests that you make will take effect immediately.

## **Additional Information About Choosing And Changing Your Primary Care Provider (PCP)**

If you request a specialist to be your PCP, the specialist must agree, in writing, to accept you as a primary care patient and to assume the responsibilities of a primary care provider.

## **Getting the Care You Need**

Your primary care provider (PCP) can help you with the majority of your healthcare needs, including your annual health check up. Sometimes you may need to visit a specialist, which is a provider with special training. If you need to see a specialist, your PCP will make sure you see the right one and may be able to get you an appointment faster. Routine care is

not covered outside of the Molina service area, unless you are being seen by a Molina participating provider. You must obtain prior authorization (approval) before you obtain services from a provider who is not part of the Molina network. If you travel outside the service area, Molina pays for emergency care for you. Show them your Molina ID card and your MO HealthNet ID card. A complete listing of participating providers and hospitals can be found on our website: [www.molinahealthcare.com](http://www.molinahealthcare.com).

## Getting Medical Care

Call your Primary Care Provider (PCP) when you need health care. Your PCP's phone number is on your Molina card. Your PCP will help you get the care you need or refer you to a specialist.

These services do not need a PCP referral:

- Birth control or family planning - You may go to our providers or a MO HealthNet approved provider. We will pay for this care, even if the provider is not in Molina.
- Behavioral health care - You may go to any of our behavioral health providers. Just call 1-800-642-3694 or 1-800-875-0679.
- Local public health agencies - Children may go to local public health agencies for shots. Members may go to local public health agencies for tests and treatment of sexually transmitted diseases and tuberculosis; HIV/AIDS tests; or for lead poisoning screening, testing and treatment.
- Women's health service - You may go to any of our GYN providers.
- Dental Services - You may go to any dental provider on the dental provider's list of providers: 1-866-642-9512.
- Vision Services - You may go to any of the March Vision Care Group, Inc., vision providers. Just call this toll free number: 1-888-493-4070.

You may have to pay for services you get if:

- You choose to get medical services that are not covered by MO HealthNet Managed Care.
- You go to a provider that is not a Molina provider without prior approval.
- You do not have prior approval for services that need it.

## **Travel Distance Standards**

Molina has contracted providers, hospitals, advanced practice nurses, behavioral health providers, substance abuse providers, dentists, and ancillary health care services throughout the three regional service areas. In the event that you are not able to access a contracted provider within 30 miles of your home address, please call our Member Services Department at 1-800-875-0679 for immediate assistance.

## **Regular Health Care Appointments**

Your health care providers must see you within 30 days when you call for a regular health care and dental appointment. Call 1-800-875-0679 if you need help.

Pregnant women can see a health care provider sooner. In the first six months of pregnancy, you must be seen within seven days of asking. In the last three months of your pregnancy, you must be seen within three days of asking.

You should not have to wait longer than one hour from the time of your appointment. For example, if your appointment time is 2:00 p.m., you should be seen by 3:00 p.m. Sometimes you may have to wait longer because of an emergency. Please call Molina at 1-800-875-0679 if you have problems or need help with an appointment. It is always important that you take all your health insurance cards to your appointments.

## **How to Make an Appointment with Your PCP**

To make an appointment with your PCP:

- Call your PCP. The telephone number is listed on your Molina ID card;
- Tell the office what kind of problem you are having;
- Tell them if you need a check-up;
- The office will give you a date and time to see your PCP;
- Make sure you go to your visit. If you cannot go, call your PCP at least twenty-four (24) hours before the visit to cancel. You should then call to make a new appointment; and

- Your PCP may send you to an urgent care center or to the emergency room if they feel you need this kind of care.

## **How To Get Specialist or Hospital Services**

Sometimes you may need to visit a specialist, which is a provider with special training. If you need to see a specialist, your PCP will make sure you see the right one and may be able to get an appointment faster.

You need to see your PCP if you think you need hospital care that is not an emergency. All hospital services except emergency services must be approved and/or arranged by your PCP or Molina except as otherwise stated in this handbook.

## **Urgent Health Care Appointments**

Sometimes you need medical care soon, but it is not an emergency. Some examples of urgent care are:

- a fever that won't go away;
- earaches;
- a rash that won't go away;
- a pulled or strained muscle; or
- vomiting or diarrhea that doesn't stop.

For urgent health care appointments, you must be seen within the following time frames:

- for serious illnesses or injuries, appointments will be available at all times;
- for things like a high temperature and vomiting or diarrhea that won't stop, you must be seen within 24 hours;
- for things like a rash, non-life threatening pain or fever, your provider must see you within five business days or one week, whichever is earlier

Your health care provider will treat you if he or she can. Your health care provider will send you to someone else if he or she is not able to see you that soon. It is always important that you take all your health insurance cards to your appointments.

## **SECOND OPINION AND THIRD OPINION**

You may want an opinion from a different health care provider. In such cases, you may ask your PCP or Molina to get a second opinion. Molina will pay for it.

You may get an opinion from a third provider if your PCP and second opinion provider do not agree. Molina will pay for a third opinion. It is always important that you take all your health insurance cards to your appointments.

## **Behavioral Health Care**

Molina will cover your behavioral health needs. A PCP referral is not needed for behavioral health care. You may go to any behavioral health provider on Molina's list of providers. You may get twelve (12) visits a year for adults and twenty (20) visits a year for children without our okay. Be sure to go to a behavioral health provider in the network. Behavioral health care includes care for people who abuse drugs or alcohol or need other behavioral health services. Call 1-800-642-3694 or 1-800-875-0679, to get behavioral health services.

Children who are in Alternative Care or get Adoption Subsidy get behavioral health care through MO HealthNet Fee-for-Service using MO HealthNet approved providers. These children get their physical health care from Molina network providers.

## **Behavioral Health Care Appointments**

Appointments for behavioral health care are the same as for regular and urgent health care appointments.

You may see a Molina behavioral health care provider twelve (12) times yearly for adults and twenty (20) times a year for children without approval. Then after the 12 behavioral health visits for adults and 20 behavioral health visits for children, Molina Healthcare must okay more visits. Call 1-800-642-3694 or 1-800-875-0679. It is always important that you take all your health insurance cards to your appointments.

## **Dental Appointments**

Appointments for dental services are the same as for regular and urgent health care appointments.

## **Additional Dental Information**

Molina pays for preventive and restorative dental care for children under (21) and pregnant women. Dental services for age 21 and over related to trauma to the mouth, jaw, teeth, or other contiguous sites as a result of injury are covered for members. Molina will cover dental services when the absence of dental treatment would adversely affect a pre-existing medical condition. Some dental procedures may require prior authorization from your dental provider. For a listing of Molina dentists or to make arrangements for dental care, call 1-866-642-9512.

## **Eye Care**

March Vision Care provides routine eye exams and other vision services. Call March Vision at 1-888-493-4070 to make an eye appointment or ask questions about routine eye care.

## **If You Are Billed**

Molina will pay for all covered MO HealthNet Managed Care services. You should not be getting a bill if the medical service you got is a covered MO HealthNet Managed Care benefit. If you choose to pay for a service, you must agree in writing that you will be responsible for the payment before getting the service.

You will not have to pay for covered health care services even if:

- The State does not pay your MO HealthNet Managed Care health plan.
- Your MO HealthNet Managed Care health plan does not pay your provider.
- Your provider's bill is more than your MO HealthNet Managed Care health plan will pay.
- Your MO HealthNet Managed Care health plan cannot pay its bills.

You may have to pay for services you get if:

- You choose to get medical services that are not covered by MO HealthNet Managed Care.
- You go to a provider that is not a Molina provider without prior approval.

If you get a bill, do not wait! Call our Member Services Department at 1-800-875-0679. Molina will look into this for you.

## **Changes to Benefits**

You will be notified by mail within 30 days before any changes are made to your benefits.

## **New Medical Technology**

Molina wants to make sure that our Members get the best care. We look at procedures and technology relating to healthcare on a regular basis. When we learn about something new we take this into consideration. We try to make sure it is the best thing for our members. A committee of practitioners looks at and tells us about new treatments. Molina then decides if it is a service our members can get. If you want to know how Molina makes these decisions, please call our Member Services Department at 1-800-875-0679.

# **Emergency & Out of Area Services**

## **EMERGENCY MEDICAL SERVICES**

In an emergency, go to the nearest emergency room even if it is not in Molina's network or call 911. When you go to the emergency room, a health care provider will check to see if you need emergency care. You can call the number listed on the back of your MO HealthNet Managed Care health plan card anytime day or night if you have questions about going to the emergency room. Call your PCP after an emergency room visit.

An emergency is when you call 911 or go to the nearest emergency room for things like:

- chest pain;
- stroke;
- difficulty breathing;
- bad burns;
- deep cuts/heavy bleeding; or
- gunshot wound.

If you are not sure about the medical condition, get help right away or call your PCP's office for advice. Ask for a number you can call when the office is closed. You can also call Molina Nurse Advice Helpline at 1-888-275-8750.

It's best to call or go to your PCP's office for things that are not emergencies, like:

- earaches;
- sore throat;
- backaches;
- small cuts; or
- cold/flu.

You should call your PCP to be treated for these things. If you go to the emergency room and it is not an emergency, you may have to pay for the care you get.

Emergency medical services are those health care items and services furnished that are required to evaluate or stabilize a sudden and unforeseen situation or occurrence or a sudden onset of a medical, or behavioral health or substance abuse condition manifesting itself by acute symptoms of sufficient severity (including severe pain) that the failure to provide immediate medical attention could reasonably be expected by a prudent lay person, possessing average knowledge of health and medicine, to result in:

- placing the patient's physical or behavioral health (or with respect to a pregnant woman, the health of the woman or her unborn child) in serious jeopardy; or
- serious impairment of bodily functions; or
- serious dysfunction of any bodily organ or part; or
- serious harm to self or others due to an alcohol or drug abuse emergency; or
- injury to self or bodily harm to others; or
- with respect to a pregnant woman who is having contractions:
  - o There is inadequate time to effect a safe transfer to another hospital before delivery; or
  - o Transfer may pose a threat to the health or safety of the woman or the unborn.

The following is a list of Molina's Hospital Provider Network:

**ADAIR COUNTY**

**NORTHEAST REGIONAL  
MEDICAL CENTER**  
315 S OSTEOPATHY  
KIRKSVILLE, MO 63501  
660-785-1028

**ADAMS COUNTY**

**BLESSING HOSPITAL**  
11TH & BROADWAY  
QUINCY, IL 62301  
217-223-8400 FAX 217-223-9552

**AUDRAIN COUNTY**

**AUDRAIN MEDICAL CENTER**  
620 E MONROE ST.  
MEXICO, MO 65265  
573-582-5000

**BARRY COUNTY**

**ST JOHNS - CASSVILLE**  
94 MAIN  
CASSVILLE, MO 65625  
417-847-6000

**BATES COUNTY**

**BATES COUNTY  
MEMORIAL HOSPITAL**  
615 W NURSERY ST.  
BUTLER, MO 64730  
660-200-7000

**BOONE COUNTY**

**BOONE HOSPITAL CENTER**  
1600 E BROADWAY  
COLUMBIA, MO 65201  
573-815-8000 FAX 573-815-2638

**COLUMBIA REGIONAL HOSPITAL**

404 KEENE ST.  
COLUMBIA, MO 65201  
573-875-9000

**UNIVERSITY HOSPITAL**

ONE HOSPITAL DR.  
COLUMBIA, MO 65212  
573-882-7000

**CALLAWAY COUNTY**

**CALLAWAY COMMUNITY  
HOSPITAL**  
10 S HOSPITAL DR.  
FULTON, MO 65251  
573-642-3376 FAX 573-592-6679

**CAMDEN COUNTY**

**LAKE REGIONAL HEALTH SYSTEM**  
54 HOSPITAL DR.  
OSAGE BEACH, MO 65065  
573-348-8045 FAX 573-348-8046

**CASS COUNTY**

**RESEARCH BELTON HOSPITAL**  
17065 S 71 HWY  
BELTON, MO 64012  
816-348-1200

**CASS REGIONAL  
MEDICAL CENTER**

2800 E ROCK HAVEN RD.  
HARRISONVILLE MO, 64701  
816-380-3474

**CEDAR COUNTY**

**CEDAR COUNTY  
MEMORIAL HOSPITAL**  
1401 S PARK ST.  
EL DORADO SPRINGS, MO 64744  
417-876-2511 FAX 417-876-3812

**CLINTON COUNTY**

**CAMERON REGIONAL  
MEDICAL CENTER**  
1600 E EVERGREEN ST.  
CAMERON, MO 64429  
816-632-2101 FAX 816-649-3242

**COLE COUNTY**

**CAPITAL REGION  
MEDICAL CENTER**  
1125 MADISON ST.  
JEFFERSON CITY, MO 65101  
573-632-5000 FAX 573-632-5880

**ST MARYS HEALTH CENTER -  
JEFFERSON CITY**

100 ST MARYS MEDICAL PLZ  
JEFFERSON CITY, MO 65101  
573-761-7000

**COOPER COUNTY  
COOPER COUNTY  
MEMORIAL HOSPITAL**

17561 HWY B  
BOONVILLE, MO 65233  
660-882-7461 FAX 660-882-6093

**CRAWFORD COUNTY  
MISSOURI BAPTIST HOSPITAL  
OF SULLIVAN**

751 SAPPINGTON BRIDGE RD.  
SULLIVAN, MO 63080  
573-468-4186 FAX 573-468-2687

**ST JOHNS MERCY HOSPITAL**

901 E FIFTH ST.  
WASHINGTON, MO 63090  
636-239-8000

**GASCONADE COUNTY  
HERMANN AREA  
DISTRICT HOSPITAL**

509 W 18TH ST.  
HERMANN, MO 65041  
573-486-2191 FAX 573-486-2417

**GENTRY COUNTY  
NORTHWEST MEDICAL CENTER**

705 N COLLEGE  
ALBANY, MO 64402  
660-726-3941 FAX 660-726-3647

**GREENE COUNTY  
OZARKS COMMUNITY HOSPITAL**

2828 N NATIONAL  
SPRINGFIELD, MO 65803  
417-837-4000 FAX 417-875-4702

**ST JOHNS HOSPITAL-SPRINGFIELD**

1235 E CHEROKEE ST.

SPRINGFIELD, MO 65804

417-820-5454

**GRUNDY COUNTY  
WRIGHT MEMORIAL HOSPITAL**

701 E 1ST ST.  
TRENTON, MO 64683  
660-359-5621 FAX 660-359-3541

**IRON COUNTY  
IRON COUNTY HOSPITAL**

301 N HWY 21  
PILOT KNOB, MO 63663  
573-546-1260 FAX 573-546-1270

**JACKSON COUNTY  
CENTERPOINT MEDICAL CENTER**

19600 E 39TH ST.  
INDEPENDENCE, MO 64057  
816-698-7000 FAX 678-459-3110

**CHILDRENS MERCY HOSPITAL**

2401 GILLHAM RD.  
KANSAS CITY, MO 64108  
816-234-3000 FAX 816-855-1993

**CHILDREN'S MERCY NORTHLAND**

501 N.W. BARRY RD.  
KANSAS CITY, MO 64155  
816-413-2500

**RESEARCH MEDICAL CENTER**

2316 E MEYER BLVD.  
KANSAS CITY, MO 64132  
816-276-7000 FAX 816-276-4419

**TRUMAN MEDICAL CENTER**

2301 HOLMES  
KANSAS CITY, MO 64108  
816-404-1000 FAX 816-421-7379

**TRUMAN MEDICAL  
CENTER LAKEWOOD**

7900 LEE'S SUMMIT RD.  
KANSAS CITY, MO 64139  
816-404-7000 FAX 816-404-5381

**LEES SUMMIT HOSPITAL**

5309 NW MURRAY RD.

LEES SUMMIT, MO 64081  
816-282-5000  
**JASPER COUNTY**  
**MCCUNE-BROOKS**  
3125 DR RUSSEL SMITH WAY  
CARTHAGE, MO 64836  
417-358-8121 FAX 417-237-7240

**ST JOHNS REGIONAL**  
**MEDICAL CENTER**  
2727 MCCLELLAND BLVD.  
JOPLIN, MO 64804  
417-781-2727 FAX 417-625-2910

**JEFFERSON COUNTY**  
**JEFFERSON MEMORIAL HOSPITAL**  
1400 US HWY 61 S  
FESTUS, MO 630284100  
636-933-1000 FAX 636-933-1819

**JOHNSON COUNTY (KANSAS)**  
**CHILDRENS MERCY SOUTH**  
5808 W 110TH ST.  
LEAWOOD, KS 66211  
913-696-8000

**DOCTORS HOSPITAL**  
4901 COLLEGE BLVD.  
LEAWOOD, KS 66211  
913-529-1801 FAX 913-754-2168

**MENORAH MEDICAL CENTER**  
5721 W 119TH ST.  
OVERLAND PARK, KS 66209  
913-498-6000

**OVERLAND PARK REGIONAL**  
**MEDICAL CENTER**  
10500 QUIVIRA RD.  
OVERLAND PARK, KS 66215  
913-541-5000

**JOHNSON COUNTY (MISSOURI)**  
**WESTERN MISSOURI**  
**MEDICAL CENTER**  
403 BURKARTH RD.  
WARRENSBURG, MO 64093  
660-747-2500

**LACLEDE COUNTY**  
**ST JOHNS HOSPITAL - LEBANON**  
100 HOSPITAL DR.  
LEBANON, MO 65536  
417-533-6100 FAX 417-533-6021

**LAFAYETTE COUNTY**  
**LAFAYETTE REGIONAL**  
**HEALTH CENTER**  
1500 STATE ST.  
LEXINGTON, MO 64067  
660-259-2203 FAX 660-259-6189

**LAWRENCE COUNTY**  
**ST JOHNS HOSPITAL - AURORA**  
500 PORTER AVE.  
AURORA, MO 65605  
417-678-2122 FAX 417-678-7863

**LEAVENWORTH COUNTY**  
**CUSHING MEMORIAL HOSPITAL**  
711 MARSHALL ST.  
LEAVENWORTH, KS 66048  
913-684-1100 FAX 913-684-1239

**LINCOLN COUNTY**  
**LINCOLN COUNTY**  
**MEDICAL CENTER**  
1000 E CHERRY ST.  
TROY, MO 63379  
636-528-5431

**LINN COUNTY**  
**PERSHING MEMORIAL HOSPITAL**  
130 E LOCKLING AVE.  
BROOKFIELD, MO 64628  
660-258-2222 FAX 660-258-5668

**LIVINGSTON COUNTY**  
**HEDRICK MEDICAL CENTER**  
100 CENTRAL ST.  
CHILLICOTHE, MO 64601  
660-646-1480 FAX 660-646-3850

**MACON COUNTY**  
**SAMARITAN**  
**MEMORIAL HOSPITAL**  
1205 N MISSOURI ST.

MACON, MO 63552  
660-385-8700 FAX 660-385-8701

MADISON COUNTY  
MADISON MEDICAL CENTER  
611 W MAIN  
FREDERICKTOWN, MO 63645  
573-783-3341 FAX 573-783-1096

MARION COUNTY  
HANNIBAL REGIONAL HOSPITAL  
6000 HOSPITAL DR.  
HANNIBAL, MO 63401  
573-248-1300 FAX 573-248-5264

PERRY COUNTY  
PERRY COUNTY  
MEMORIAL HOSPITAL  
434 N WEST ST.  
PERRYVILLE, MO 63775  
573-547-2536 FAX 573-517-0347

PETTIS COUNTY  
BOTHWELL REGIONAL  
HEALTH CENTER  
601 E 14TH ST.  
SEDALIA, MO 65301  
660-826-8833 FAX 660-827-6784

PHELPS COUNTY  
PHELPS COUNTY REGIONAL  
MEDICAL CENTER  
1000 W 10TH ST.  
ROLLA, MO 65401  
573-458-8899

PIKE COUNTY  
PIKE COUNTY  
MEMORIAL HOSPITAL  
2305 W GEORGIA ST.  
LOUISIANA, MO 63353  
573-754-5531 FAX 573-754-5874

POLK COUNTY  
CITIZENS MEMORIAL HOSPITAL  
1500 N OAKLAND  
BOLIVAR, MO 65613  
417-326-6000

RAY COUNTY  
RAY COUNTY  
MEMORIAL HOSPITAL  
904 WOLLARD BLVD.  
RICHMOND, MO 64085  
816-470-5432 FAX 816-470-8382

SAINT CHARLES  
ST JOSEPH HOSPITAL WEST  
100 MEDICAL PLAZA DR.  
LAKE SAINT LOUIS, MO 63367  
636-625-5200 FAX 636-625-5438

PROGRESS WEST  
HEALTHCARE CENTER  
2 PROGRESS POINT PKWY  
O FALLON, MO 63368  
636-344-1000 FAX 636-344-1041

ST JOSEPH HEALTH CENTER  
300 FIRST CAPITOL DR.  
SAINT CHARLES, MO 63301  
636-947-5000

BARNES JEWISH ST  
PETERS HOSPITAL  
10 HOSPITAL DR.  
SAINT PETERS, MO 63376  
636-916-9000 FAX 636-916-9414

ST JOSEPH HEALTH  
CENTER - WENTZVILLE  
500 MEDICAL DR.  
WENTZVILLE, MO 63385  
636-327-1010 FAX 636-327-5413

SAINT CLAIR COUNTY  
ELLETT MEMORIAL HOSPITAL  
610 N OHIO ST.  
APPLETON CITY, MO 64724  
660-476-2111 660-476-5591

SAC OSAGE HOSPITAL  
700 GEISLER DR.  
OSCEOLA, MO 64776  
417-646-8181 FAX 417-646-8379

**SAINT FRANCOIS COUNTY**  
**MINERAL AREA REGIONAL**  
**MEDICAL CENTER**  
1212 WEBER RD.  
FARMINGTON, MO 63640  
573-756-4581 FAX 573-756-5834

**PARKLAND HEALTH CENTER**  
**1101 W LIBERTY ST.**  
FARMINGTON, MO 63640  
573-756-6451 FAX 573-756-9472

**SAINT LOUIS COUNTY**  
**DEPAUL HEALTH CENTER**  
12303 DEPAUL DR.  
BRIDGETON, MO 63044  
314-344-6000 FAX 314-344-6840

**ST JOHNS MERCY**  
**REHAB HOSPITAL**  
14561 N OUTER 40 RD.  
CHESTERFIELD, MO 63017  
314-881-4000 FAX 314-881-4197

**ST CLARE HEALTH CENTER**  
1015 BOWLES AVE.  
FENTON, MO 63026  
636-496-2000

**NORTHWEST HEALTHCARE**  
1225 GRAHAM RD.  
FLORISSANT, MO 63031  
314-495-3600

**RANKEN JORDAN A PEDIATRIC**  
**SPECIALITY HOSPITAL**  
11365 DORSETT RD.  
MARYLAND HEIGHTS, MO 63043  
314-872-6400 FAX 314-872-6500

**BARNES JEWISH WEST**  
**COUNTY HOSPITAL**  
12634 OLIVE BLVD.  
SAINT LOUIS, MO 63141  
314-996-8000 FAX 314-996-8616

**CHRISTIAN HOSPITAL NE/NW**  
11133 DUNN RD.  
SAINT LOUIS, MO 63136  
314-653-5000  
**DES PERES HOSPITAL**  
2345 DOUGHERTY FERRY RD.  
SAINT LOUIS, MO 63122  
314-966-9100

**MISSOURI BAPTIST**  
**MEDICAL CENTER**  
3015 N BALLAS RD.  
SAINT LOUIS, MO 63131  
314-996-5000 FAX 314-996-5090

**ST ANTHONYS MEDICAL CENTER**  
10010 KENNERLY RD.  
SAINT LOUIS, MO 63128  
314-525-1200

**ST JOHNS MERCY MEDICAL CENTER**  
615 S NEW BALLAS RD.  
SAINT LOUIS, MO 63141  
314-251-6000

**ST MARYS HEALTH CENTER**  
6420 CLAYTON RD.  
SAINT LOUIS, MO 63117  
314-768-8000

**SAINT LOUIS CITY COUNTY**  
**BARNES JEWISH HOSPITAL**  
216 S KINGSHIGHWAY BLVD.  
SAINT LOUIS, MO 63110  
314-362-5000

**CARDINAL GLENNON**  
**CHILDRENS HOSPITAL**  
1465 S GRAND BLVD.  
SAINT LOUIS MO, 63104  
314-577-5600 FAX 314-577-5304

**ST LOUIS CHILDRENS HOSPITAL**  
1 CHILDRENS PLACE  
SAINT LOUIS, MO 63110  
314-454-6000 FAX 314-454-2101

**ST LOUIS UNIVERSITY HOSPITAL**  
3635 VISTA BLVD.  
SAINT LOUIS, MO 63110  
314-577-8000

**I-70 COMMUNITY HOSPITAL**  
105 HOSPITAL DR.  
SWEET SPRINGS, MO 65351  
660-335-4700 FAX 660-335-7487

**SAINTE GENEVIEVE COUNTY**  
**STE GENEVIEVE COUNTY**  
**MEMORIAL HOSPITAL**  
800 STE GENEVIEVE DR.  
SAINTE GENEVIEVE, MO 63670  
573-883-2751

**VERNON COUNTY**  
**NEVADA REGIONAL**  
**MEMORIAL HOSPITAL**  
800 S ASH  
NEVADA, MO 64772  
417-667-3355 FAX 417-448-3848

**SALINE COUNTY**  
**JOHN FITZGIBBON**  
**MEMORIAL HOSPITAL**  
2305 S 65 HWY  
MARSHALL, MO 65340  
660-886-7431 FAX 660-886-9001

**WASHINGTON COUNTY**  
**WASHINGTON COUNTY**  
**MEMORIAL HOSPITAL**  
300 HEALTH WAY  
POTOSI, MO 63664  
573-438-5451

## Prior Authorization

Only participating providers/facilities may perform services requiring prior authorization. Prior authorization is not required for Urgent Care Centers and emergency services. In case of an emergency, please go to the nearest emergency room.

## Emergencies at Home

Little emergencies can happen at home. A first aid kit can help take care of you and your family when small emergencies happen. A first aid kit should have such things as:

<b>Drugs and Medication</b>	<b>Other Supplies</b>
Hydrogen Peroxide to cleanse wounds	Scissors
Antibiotic ointments	Tweezers
Alcohol swabs	Thermometer
Non-Aspirin and Aspirin tablets	First Aid Book
Diarrhea Medication	Tissues
Anti-itch cream for rashes	Instant Cold Pack for Sprains
Dressing Supplies	Heating Pad
Band-aids: various sizes for minor cuts and wounds	Emergency Phone Numbers
Rolled Gauze	Non-Stick Sterile Pads and Tape

## Health Care Away From Home

- If you need urgent health care when you are away from home, call your PCP or Molina at 1-800-875-0679 for help.
- In an emergency, you do not need to call your PCP first. Go to the nearest emergency room or call 911.
- Call your PCP after an emergency room visit.
- Get your follow up care from your PCP.
- Routine health care services must be received from your PCP when you get back home.
- All services outside the United States and its Territories are not covered.

# Covered Services

## YOUR HEALTH BENEFITS IN MO HEALTHNET MANAGED CARE

Some benefits are limited based on your eligibility group or age. The benefits that may be limited have an “\*” next to them. Some services need prior approval before getting them. Call Molina at 1-800-875-0679 for information about your health benefits.

- Adult day health care\*
- Ambulance
- Ambulatory surgical center, birthing center
- Behavioral health and substance abuse
- Cancer screenings
- Dental services related to trauma to the mouth, jaw, teeth or other contiguous sites as a result of injury. Dental services when the absence of dental treatment would adversely affect a pre-existing medical condition
- Durable Medical Equipment (DME)
- Emergency medical, behavioral health, and substance abuse services and post-stabilization services
- Family planning
- Home health services
- Hospice, if you are in the last six months of your life
- Hospital, when an overnight stay is required
- Laboratory tests and x-rays
- Maternity benefits, including certified nurse midwife
- Optical, services include one comprehensive or one limited eye examination every two years for refractive error, services related to trauma or treatment of disease/medical condition (including eye prosthetics), and one pair eyeglasses every two years (during any 24 month period of time)
- Outpatient hospital, when an overnight stay is not required
- Personal care
- Podiatry, limited medical services for your feet
- Primary Care Provider (PCP) services

- Specialty care
- Transplant related services
- Transportation to medical appointments\*
- You may get these services from your MO HealthNet Managed Care health plan or a local public health agency:
  - screening, testing, and treatment for sexually transmitted diseases
  - screening and testing for HIV
  - screening, testing, and treatment for tuberculosis
  - immunizations (shots) for children
  - screening, testing, and treatment for lead poisoning

## **More Benefits For Children And Women In A MO HealthNet Category of Assistance For Pregnant Women**

A child is anyone less than twenty-one (21) years of age. Some services need prior approval before getting them. Call 1-800-875-0679 to check. Women must be in a MO HealthNet category of assistance for pregnant women to get these extra benefits.

- Comprehensive day rehabilitation, services to help you recover from a serious head injury
- Dental services
- Diabetes education and self management training
- Hearing aids and related services
- Podiatry, medical services for your feet
- Vision – Children get all their vision care from the health plan. Some pregnant women will get their vision care from the health plan, which includes one (1) comprehensive or one (1) limited eye exam a year for refractive error, and one (1) pair of eyeglasses a year.
- MO HealthNet has a special program for children to provide medically necessary services. The program is called Early Periodic Screening, Diagnosis and Treatment (EPSDT) or Healthy Children and Youth (HCY). Your Primary Care Provider (PCP) can give your child these EPSDT/HCY services.

Some examples of EPSDT/HCY services include:

- child's medical history
- an unclothed physical exam
- blood and/or urine tests
- immunizations (shots)
- screening and testing lead levels in blood
- checking the growth and progress of the child
- vision, hearing, and dental screens
- dental care and braces for teeth when needed for health reasons
- private duty nurses in the home
- special therapies such as physical, occupational, and speech
- aids to help disabled children talk
- personal care to help take care of a sick or disabled child
- health care management
- psychology/counseling
- health education
- developmental and mental health
- fine motor/gross motor

## EPSDT/HCY

An EPSDT/HCY Health Screen helps children stay healthy or find problems that may need medical treatment. Your child needs to get regular checkups. Children between 6 months and 6 years old need to get checked for lead poisoning. You may use the chart below to record when your child gets a health screen or lead poison screen.

<b><i>Health Screen &amp; Lead Poison Assessment Record</i></b>		
<b><i>Age</i></b>	<b><i>Date of Health Screen</i></b>	<b><i>Date of Lead Poison Screen</i></b>
Newborn		
By one month		
2-3 months		
4-5 months		
6-8 months		
9-11 months		
12-14 months		<b>Your child needs a Blood Lead Level at 12 and 24 months</b>
15-17 months		
18-23 months		
24 months		
3 years		<b>Your child needs a Blood Lead Level each year until age 6 if in a high-risk area</b>
4 years		
5 years		
6-7 years		
8-9 years		
10-11 years		
12-13 years		<b>A Blood Lead Level is recommended for women of child-bearing age</b>
14-15 years		
16-17 years		
18-19 years		
20 years		

Important tests your child needs are shown on the chart below: Please note these are not all the tests your child may need. Talk with your child's PCP.

<i>Age</i>	<i>Test</i>
Birth	PKU Test
1-2 Weeks	PKU and Thyroid Tests
12 months	TB Test, Blood Count, Blood Lead Level
2 years	Blood Lead Level Test
3 years	Blood Lead Level Test if in a high-risk area
4 years	Blood Lead Level Test if in a high-risk area
5 years	Blood Lead Level Test if in a high-risk area
6 years	Blood Lead Level Test if in a high-risk area

# IMMUNIZATIONS (SHOTS) SCHEDULE FOR CHILDREN

Immunizations (shots) help prevent serious illness. This record will help keep track when your child is immunized. If your child did not get their shots at the age shown, they still need to get that shot. Talk to your PCP about your child’s immunizations (shots). Children must have their immunizations (shots) to enter school.

<i><b>Immunization Record</b></i>		
Age	Shot (Immunization)	Date Received
Birth	HepB*	
2 months	DTaP, Hib, Polio, PCV, RV, HepB	
4 months	DTaP, Hib, Polio, PCV, RV, HepB*	
6 months	HepB, DTaP, Hib, Polio, PCV, RV	
12 months	Hib, PCV, MMR, DTaP, Varicella, HepA	
18 months	HepA	
4 - 6 years	DTaP, Polio, MMR, Varicella	
11-12 years	Tdap, MCV, HPV (3 dose series-for females only)	
13-19 years Catch-Up	Tdap, MCV, HPV (3 dose series-for females only)	
Every Year	Influenza (after 6 months)	

**\*If the birth dose of HepB is given, the 4 month dose may be omitted.**

## **Dr. Cleo's *Cool Cat Club* for Kids**

As a young member of Molina, you are already a part of Dr. Cleo's *Cool Cat Club*. This club is just for children to help them do better in school and offer health and other safety activities.

Dr. Cleo's *Cool Cat Club* recognizes members for good grades, *purrfect* attendance and the most books read in a year, and sends birthday cards with a special surprise for the birthday boy or girl.

Mail report cards and attendance records to:

Molina Healthcare  
Attention: Dr. Cleo  
12400 Olive Blvd., Suite 100  
St. Louis, MO 63141

If you would like more information on Dr. Cleo's *Cool Cat Club* for Kids, call our Member Services Department at 1-800-875-0679.

## **Family Planning**

All MO HealthNet Managed Care health plan members can get family planning services no matter what age. These services will be kept private. You may go to a Molina provider or a MO HealthNet Fee-for-Service approved provider to get family planning services. You do not need to ask Molina first. Molina will pay for your family planning services.

## **motherhood matters<sup>sm</sup>**

If you are pregnant, Molina has a program just for you and your baby. It is called motherhood matters<sup>sm</sup>. You and your growing baby are important to us. We want you to have a healthy pregnancy and healthy baby.

Molina has a special nurse case manager to work with you and your health care providers to make sure you and your baby get the care you need. All Molina mothers-to-be, including teens and high risk pregnancies, will receive information about the importance of prenatal care and support services.

We can:

- help you find a health care provider for you and your new baby
- help you set up health care provider visits during your pregnancy and after your baby is born
- help you get a ride to your health care provider visits
- help you stay healthy
- help you with special needs while you are pregnant
- help you find counseling services, and childbirth and parenting classes
- help you find information for getting baby items, food, housing, and clothes and give you information about what to expect while you are pregnant
- keep in touch with you and your health care provider

It is good to get early and regular prenatal care and keep all your visits with your health care provider, even if this is not your first baby. Call our Member Services Department at 1-800-875-0679 if you need help.

## **Women, Infants & Children Services Program (WIC)**

The Women, Infants and Children (WIC) Program offers pregnant women and young children food and other services. You do not need to ask your PCP to get services from WIC. Ask your healthcare provider for a list of WIC sites in your area. If you need a ride to your WIC appointment, please call 1-866-642-9305.

## **Nurse Visits For You And Your Baby**

You and your Primary Care Provider (PCP) may agree for you to go home early after having a baby. If you do, you may get two nurse visits in your home. You may get the home health nurse visits if you leave the hospital less than 48 hours after having your baby, or less than 96 hours after a C-Section. The first nurse visit will be within two days of leaving the hospital. The second nurse visit is within two weeks of leaving the hospital. You may be able to get more nurse visits if you need them.

At a home visit, the nurse will:

- check your health and your baby;
- talk to you about how things are going;
- answer your questions;
- teach you how to do things such as breast feeding; and
- do lab tests if your PCP orders them.

## **Lead Screening For Children & Pregnant Women**

Your child may be at risk for lead poisoning if:

- You live in or visit a house built before 1978.
- Someone in your house works as a:
  - plumber;
  - auto mechanic;
  - printer;
  - steel worker;
  - battery manufacturer;
  - gas station attendant; or
  - other jobs that contain lead.
- There are other ways your child can be poisoned.  
Call 1-800-875-0679 if you have questions about lead poisoning.

High levels of lead can cause brain damage or even death. Lead in children is a common health concern. Children must be tested for lead.

- Missouri state law says that children must be tested yearly if the child is between six months and six years and lives in a high-risk area;
- When the child is one year old and again at two years;
- When the child is between six months and six years and might have been exposed to lead; and
- If the child is less than six years old and has never been tested for lead.

A lead screen has two parts. First, the Primary Care Provider (PCP) will ask questions to see if your child may have been exposed to lead. Then the PCP may take some blood from your child to check for lead. This is called a blood lead level test. Children at one year old and again at two years old must have a blood lead level test. Children with high lead levels in their blood must have follow up services for lead poisoning.

High lead levels in a pregnant woman can harm her unborn child. If you are pregnant, talk with your PCP or obstetrician to see if you may have been exposed to lead.

## **First Steps**

Molina can help your family get services from the First Steps Program. First Steps is Missouri's Early Intervention system for infants and toddlers, birth to age 3, who have delayed development or diagnosed conditions that are associated with developmental disabilities, including:

- A 50% or greater delay in development or
- A diagnosed medical condition known to cause developmental delay.

Children are eligible for First Steps if they have a significant delay in one or more of the following areas:

- cognition (learning);
- communication (speech);
- adaptive (self help);
- physical (walking); or
- social-emotional (behaviors).

Children are referred to First Steps through:

- Physicians
- Hospitals, including prenatal and postnatal care facilities
- Parents
- Child-care programs
- Local educational agencies (including school districts and Parents as Teachers)
- Public health facilities
- Other social service agencies
- Other health care providers

An assessment is done to establish eligibility and determine the needs of the child. The assessment is:

- Provided at no charge to the family and
- Arranged by the regional System Point of Entry (SPOE) office in which the child and family lives.

Once a child is determined eligible, the services are determined by an Individualized Family Service Plan (IFSP) team. Molina can refer you to First Steps. First Steps and Molina will work together to manage your child's care.

## **Special Health Care Needs**

If you have a special health care need, call Molina at 1-800-875-0679. Molina will work with you to make sure you get the care you need. If you have a chronic illness and are seeing a specialist for your medical care, you may ask Molina for a specialist to be your PCP.

## **Non Emergency Medical Transportation (NEMT)**

NEMT stands for Non-Emergency Medical Transportation. NEMT can be used when you do not have a way to get to your health care appointment without charge. We may use public transportation or bus tokens, vans, taxi, or even an ambulance, if necessary to get you to your health care appointment. Molina will give you a ride that meets your needs. You do not get to choose what kind of car or van or the company that will give you the ride. You may be able to get help with gas costs if you have a friend or a neighbor who can take you. This must be okayed before your appointment.

## **Who can get NEMT services?**

- You must be in Molina on the day of your appointment.
- Some people do not get NEMT as part of their benefits. To check, call the Member Services Department at 1-800-875-0679.
- We will only pay for one child and one parent or guardian and/or an attendant if your child is under 21 and needs to be away from home overnight or needs someone to be with him/her. We will not pay for other children or adults.
- Your medical appointment requires an overnight stay, and
- Volunteer, community, or other ancillary services are not available at no cost to you.

## **What health care services can I get NEMT to take me to?**

- The appointment is to a health care provider that is in Molina or takes MO HealthNet Fee-for-Service.
- The appointment is to a service covered by Molina or MO HealthNet Fee-for-Service.
- The appointment is to a health care provider near where you live. If the provider is far away, you may need to say why and get a note from your PCP. There are rules about how far you can travel to a health care appointment and get a ride.
- Some services already include NEMT. We will not give you a ride to these services. Examples are: Comprehensive Substance Treatment Abuse and Rehabilitation (CSTAR) services; hospice services; Developmental Disability (DD) Waiver services; some Community Psychiatric Rehabilitation (CPR) services; adult day health care services; and services provided in your home. School districts must supply a ride to a child's Individual Education Plan (IEP) services and IEP medical related services.
- The NEMT program can take you to durable medical equipment (DME) provider only if the DME provider cannot mail or deliver your equipment to you.

## **How do I use the NEMT program?**

You must call at least three (3) business days before the day of the appointment or you may not get NEMT. You may be able to get a ride sooner if your health care provider gives you an urgent care appointment. You can call this number 1-866-642-9305. If you have an emergency, dial 911, or the local emergency phone number.

## **Emergency Transportation**

Call 911 or the closest ambulance.

## **Pharmacy Benefits**

All pharmacy benefits are covered by MO HealthNet Fee-for-Service. For more information, please contact 1-800-392-2161 or visit the MO HealthNet website at [www.dss.mo.gov/mhk](http://www.dss.mo.gov/mhk).

## **Pharmacy Dispensing Fees**

Pharmacy Dispensing Fees - Children under 19 do not have to pay a pharmacy-dispensing fee. Members nineteen (19) and older pay a pharmacy-dispensing fee for each drug they get. This fee is \$0.50 up to \$2.00 for each drug. The amount of this fee is based on the cost of the drug. You should never pay a fee of more than \$2.00 for each drug. Remember, if you get more than one drug at the same time, you will pay these fees for each drug you get.

You will not pay a dispensing fee when the medicine is for an emergency, family planning, a foster child, EPSDT/HCY services, or a pregnancy related reason.

To ask what you have to pay call MO HealthNet Division Participant Services, at 1-800-392-2161.

You will be able to get your prescription even if you cannot pay. You will still owe the fee and must pay it like your other bills.

## **CASE MANAGEMENT SERVICES**

Molina will give case management services for members who are:

- pregnant
- children ages 6 years of age or younger with elevated blood lead levels

Within thirty (30) days of enrollment, Molina will do a case management assessment for new members with the following conditions:

- Cancer
- Cardiac Disease
- Chronic Pain
- Hepatitis C

- HIV/AIDS
- Children with special health care needs including Autism Spectrum Disorder
- Sickle Cell Anemia
- Anxiety Disorders; and
- Pervasive Developmental Disorder

You may ask for an assessment for case management services at any time.

## **Disease Management Services**

Molina's disease management programs are designed to help members manage their disease or syndrome. We believe in prevention and maintenance. We have nurses on site that will lend a hand in helping you adopt behaviors to improve your health. Please contact the Member Services Department if you would like to learn more about how you can talk with a case manager at 1-800-875-0679. We offer the following Disease Management Programs:

- Asthma (*breathe with ease<sup>sm</sup>*)
- Diabetes
- Major Depression
- Lead
- Adult Cardiovascular Disease
- Chronic Obstructive Pulmonary Disease
- Obesity

## **Medical Necessity**

Medical necessity means the services, equipment or supplies necessary for the diagnosis, care or treatment of your physical or behavioral health condition as determined by the Medical Director in accordance with accepted medical practices and standards at the time of treatment.

Medical necessity does not in any event include any of the following:

- Services rendered by a health professional that do not require the technical skills of such a provider; or
- Services, equipment and supplies furnished mainly for the personal comfort or convenience of the member, any individual who cares for the member, or any individual who is part of the member's family

- That part of the cost of a service, equipment or supply which exceeds that of any other service, equipment or supply that would have been sufficient to safely and adequately diagnose or treat the member's physical or behavioral health condition, except when rendered by or provided upon the referral of a Primary Care Provider or otherwise authorized by Molina, in accordance with Molina's procedures.

A service shall be considered medically necessary if it:

- prevents, diagnoses or treats a physical or behavioral health or injury
- is necessary for the member to achieve age appropriate growth and development
- minimizes the progression of disability
- is necessary for the member to attain, maintain or regain functional capacity

A service shall not be considered reasonable and medically necessary if it can be omitted without adversely affecting the member's condition or the quality of medical care rendered.

Behavioral health services shall be provided in accordance with a process of behavioral health assessment that accurately determines the clinical condition of the member and the acceptable standards of practice for such clinical conditions. The process of behavioral health assessment shall include distinct criteria for children and adolescents.

The health plan shall provide children (birth through age 20) with medical services that are necessary to treat or improve defects, physical or behavioral health, or conditions identified by an HCY/EPSTD screen. Services must be sufficient in amount, duration, and scope to reasonably achieve their purpose and may only be limited by medical necessity.

## **Utilization Process**

The utilization process is the review of services and care provided. This information helps Molina determine if the right type of care is being given and if the care given is helpful to the member's health. It also gives us information to decide if we have the best providers to take care of our members.

The process starts with the providers calling to get approval for care services that require prior authorization. The care is reviewed by medical standards.

Molina's nursing staff works closely with your PCP to provide the options available to complete the treatment of your case. The nurses also work with FSD, social workers, and other nursing or therapy staff to make sure your PCP's plan is carried out.

You can contact Molina's Utilization Management (UM) staff about a UM issue or question at 1-800-875-0679.

## **POST-STABILIZATION CARE**

Post-stabilization care services means covered services, related to an emergency medical condition that are provided after a member is stabilized in order to maintain the stabilized conditions or to improve or resolve the member's condition.

## **POST-STABILIZATION CARE SERVICES**

Post-stabilization care is given after a medical emergency. The goal of this care is to maintain, improve or resolve a member's condition after the emergency.

Molina will pay for post-stabilization care that is:

- Received within or outside of our network that was preapproved by a Molina provider or representative
- Received within or outside of our network that was not pre-approved by Molina, but provided to maintain the member's condition within thirty (30) minutes of a request to Molina for pre-approval of further post-stabilization care services
- Received within or outside of our network that was not pre-approved by a Molina provider or representative but provided to maintain, improve or resolve the member's condition if:
  - Molina does not respond to a request for pre-approval within thirty (30) minutes;
  - Molina cannot be reached;
  - The Molina representative and the treating provider cannot reach an agreement about the member's care and a Molina

provider is not available to discuss the member's care. If this happens, Molina will give the treating provider the chance to discuss the care with a Molina provider. The treating provider may continue with care until a Molina provider is reached. But if a Molina provider can treat the member at the hospital, he will take over the member's care.

Molina must not charge the member more for this care than what it would charge if the member received services by a Molina provider. Molina will reach an agreement with the out-of-network providers for payment and timeframes for the post-stabilization care.

Molina no longer pays for post-stabilization that was not pre-approved when:

- A Molina provider can treat the member at the hospital and takes over the member's care
- A Molina provider takes over the member's care through transfer
- A Molina representative and the treating provider reach an agreement concerning the member's care; or
- The member is transferred.

## **Authorization Process**

Molina has an authorization process to verify member eligibility, provider access and coverage of benefits.

Medical care that is considered routine and not an emergency is to be ordered by your Molina Primary Care Provider (PCP). Approval of services should be requested prior to the care being given. The provider or hospital is required to contact Molina prior to the date of the scheduled appointment or procedure.

- Approval of services or care is based on medical necessity and benefits.
- Approval of services is also based on whether or not the care is being provided by a Molina provider. Non-participating providers must be reviewed for approval by the Molina Medical Director prior to services.
- Molina will pay for services approved as long as the member receiving the service(s) IS STILL A MEMBER WITH MOLINA ON THE DATE THE CARE IS GIVEN. This is important because approval can

be given for care that is to be done in the future. If you or your family loses eligibility, Molina will not pay the bill.

- Molina members may receive services from an out-of-network provider when Molina does not have an in-network provider with the appropriate training and experience to meet a particular health care need of a member. To obtain such a referral, please have your Primary Care Provider(PCP) call Molina at: 1-800-875-0679.
- Molina members with a condition that requires ongoing care from a specialist do not need a referral for an in-network specialist. The member or the PCP may request a standing referral to an out-of-network specialist. To obtain a standing referral, please call Molina at 1-800-875-0679.
- Molina members with a condition requiring on-going care and/or a life-threatening condition or diseases requiring specialized medical care over a prolonged period of time may obtain a standing referral for care with a specialist and/or a specialty care center. A request for the specialist or specialty care center to evaluate and treat the member is intended to be a standing referral for the episode of care necessary to treat the condition or disease. To obtain a standing referral to a specialist, please call Molina at 1-800-875-0679.

### **Services that Require Prior Authorization:**

- Services provided by all non-participating providers
- Behavioral Health Services (including Alcohol and Substance Abuse services) - inpatient, partial hospitalization, day treatment, intensive outpatient programs (IOP), Electroconvulsive Therapy (ECT), and greater than 12 office visits/year for adults and 20 office visits/year for children
- C-PAP and Bi-PAP devices
- Comprehensive Day Rehabilitation Services
- Dental surgeries and Orthodontics
- Diabetic Self-Management Education for non-pregnant members older than 21 years of age
- Dialysis
- Durable Medical Equipment (DME)/Medical Supplies: if greater than \$300 reimbursement per line item; all rent to purchase items
- Experimental/investigational/cosmetic services/procedures
- Formula & Nutritional Supplements
- Genetic testing, counseling and chromosomal analysis

- Hearing Aids/Auditory Enhancement Devices
- Home Healthcare, Home Infusion, Hospice Care
- Imaging – CT Scans, MRIs, SPECT, PET, and other Nuclear Scans
- Inpatient Hospitalizations/Surgeries (including inpatient hospice, Acute Rehab and Skilled Nursing Facility)
- Neuropsychological testing
- Non-emergent ambulance
- Observation, including OB Observations greater than 6 hours
- OB Prenatal Care
- Orthotic and prosthetics: if greater than \$300 reimbursement per line item
- Outpatient Hospital and Ambulatory Surgery Center (ASC) Procedures
- Oxygen therapy
- Pain Management Procedures
- Physical/Occupational/Speech/Vision Therapy
- Sleep Studies
- Unlisted Procedures

**Note:** The following do not require authorization:

- Endoscopic procedures, non-interventional cardiac catheterizations and sterilizations (MO HealthNet Sterilization Consent Form must be submitted with the claim)

# Non-Covered Services

## Services Not Covered By MO HealthNet

The following services are not covered by MO HealthNet:

- Abortions (elective) and related services. Abortions and related services are covered when medically necessary to save the life of the mother or if the pregnancy is a result of rape or incest.
- Services for treatment of infertility.
- Experimental/investigational drugs, procedures, or equipment; and
- Cosmetic surgery (elective).

If you have questions about these health care services, please call our Member Services Department at 1-800-875-0679.

## **Care You Can Get Using The Red Card Or The White MO HealthNet Card**

You can get some health care that is not covered by Molina. These services are covered by MO HealthNet Fee-for-Service using MO HealthNet approved providers. Molina can help you find a MO HealthNet approved provider for that care. Please let your Primary Care Provider (PCP) know about the care you get. This helps your PCP take care of you. This care may include the following:

- Pharmacy
- Therapy services for children in a school Individual Education Plan (IEP) or Individualized Family Service Plan (IFSP). Parents, the school, or the Department of Mental Health may start an IEP or IFSP.
- Visits by a health worker to see if lead is in your home.
- Bone marrow and organ transplants.
- SAFE/CARE exams for abused children.
- Children who are in Alternative Care or get Adoption Subsidy get behavioral health care through MO HealthNet Fee-for-Service using MO HealthNet approved providers. These children get their physical health care from Molina network providers
- Community Psychiatric Rehabilitation is a special program run by the Missouri Department of Mental Health for the seriously mentally ill or seriously emotionally disturbed.
- Drug and alcohol treatment from a Comprehensive Substance Treatment and Rehabilitation (CSTAR) provider. Call Molina Member Services Department at 1-800-875-0679 for a list of CSTAR providers.
- Targeted case management for behavioral health services.
- Abortion - (termination of a pregnancy resulting from rape, incest, or when needed to save the mother's life).

# Grievance and Appeals

You may not always be happy with Molina. We want to hear from you. Molina has people who can help you. Molina **cannot take your benefits away because you make a grievance, appeal, or ask for a State Fair Hearing.**

There are two (2) ways to tell Molina about a problem:

## GRIEVANCE or APPEAL

A Grievance is a way for you to show dissatisfaction about things like:

- The quality of care or services you received;
- The way you were treated by a provider; or
- A disagreement you may have with a MO HealthNet Managed Care health plan policy.

An Appeal is a way for you to ask for a review when your MO HealthNet Managed Care health plan:

Takes action to:

- Deny or give a limited approval of a requested service;
- Deny, reduce, suspend, or end a service already approved; or
- Deny payment for a service;

Or fails to:

- Act within required time frames for getting a service;
- Make a grievance decision within thirty (30) days of receipt of request;
- Make an expedited decision within three (3) days of receipt of request;
- Make an appeal decision within thirty (30) days of receipt of request.

Molina must give you a written Notice of Action if any of these actions happen. The Notice of Action will tell you what we did and why and give you your rights to appeal or ask for a State Fair Hearing.

## **YOU HAVE SOME SPECIAL RIGHTS WHEN MAKING A GRIEVANCE OR APPEAL:**

1. A qualified clinical professional will look at medical grievances or appeals.
2. If you do not speak or understand English, call 1-800-875-0679 to get help from someone who speaks your language.
3. You may ask anyone such as a family member, your minister, a friend, or an attorney to help you make a grievance or an appeal.
4. If your physical or behavioral health is in danger, a review will be done within 3 working days or sooner. This is called an expedited review. Call Molina and tell Molina if you think you need an expedited review.
5. Molina may take up to 14 days longer to decide if you request the change of time or if we think it is in your best interest. If Molina changes the time we must tell you in writing the reason for the delay.
6. If you have been getting medical care and your MO HealthNet Managed Care health plan reduces, suspends, or ends the service, you can appeal. In order for medical care not to stop while you appeal the decision you must appeal within 10 days from the date the notice of action was mailed and tell us not to stop the service while you appeal. If you do not win your appeal you may have to pay for the medical care you got during this time.
7. You may request enrollment in another MO HealthNet Managed Care health plan if the issue cannot be resolved.

## HOW TO MAKE A GRIEVANCE OR APPEAL OR ASK FOR A STATE FAIR HEARING:

1. GRIEVANCE - You may file a grievance on the telephone, in person, or in writing. Call Molina at 1-800-875-0679 to file a grievance.
  - Molina will write you within 10 days and let you know we got your grievance.
  - Molina must give written notice of a decision within 30 days.
2. APPEAL - You may file an appeal orally or in writing to Molina. Unless you need an expedited review, you must complete a written request even if you filed orally.
  - You must appeal within 90 days from the date of our Notice of Action.
  - For help on how to make an appeal, call Molina at 1-800-875-0679.
  - Send your written appeal to: Molina Healthcare of Missouri Grievance and Appeals Unit, 12400 Olive Blvd., Suite 100 St. Louis MO. 63141
  - Molina must write you within 10 days and let you know we got your appeal.
  - Molina must give written notice of a decision within 30 days unless it is an expedited review.
3. STATE FAIR HEARING – You have the right to ask for a State Fair Hearing when your MO HealthNet Managed Care health plan takes an action or when your appeal is not decided in your favor. You may ask for a State Fair Hearing orally or in writing. Unless you need an expedited review, you must complete a written request even if you asked orally.
  - You must ask for a State Fair Hearing within 90 days from the date of the MO HealthNet Managed Care health plan's written Notice of Action or Appeal Decision Letter.
  - For help on how to ask for a State Fair Hearing, call the MO HealthNet Division at 1-800-392-2161.

- If you do not speak or understand English, call 1-800-392-2161 to get help from someone who speaks your language.
- You can send your written request to Participant Services Unit, MO HealthNet Division, P.O. Box 6500, Jefferson City, MO 65102-6500.
- You will be sent a form to complete. Once you send the form back, a date will be set for your hearing.
- You may ask anyone such as a family member, your minister, a friend, or an attorney to help you with a State Fair Hearing.
- A decision will be made within 90 days from the date you asked for a hearing.
- If your physical or behavioral health is in danger, a decision will be made within 3 working days. This is called an expedited hearing. Call 1-800-392-2161 if you think you need an expedited hearing.
- If you have been getting medical care and your MO HealthNet Managed Care health plan reduces, suspends, or ends the service, you can ask for a State Fair Hearing. In order for medical care not to stop you must ask for a State Fair Hearing within 10 days of the date the written notice of action was mailed and tell us not to stop the service while you appeal. If you do not win, you may have to pay for the medical care you got during this time.

# Your Rights and Responsibilities

## Your Rights As A MO HealthNet Managed Care Health Plan Member

### You have the right to:

- Be treated with respect and dignity;
- Receive needed medical services;
- Privacy and confidentiality (including minors) subject to state and federal laws;
- Select your own PCP;
- Refuse treatment;
- Receive information about your health care and treatment options;
- Participate in decision making about your health care;
- Have access to your medical records and to request changes, if necessary
- Have someone act on your behalf if you are unable to do so;
- Get information on our physician incentive plan if any by calling Molina at 1-800-875-0679;
- Be free of restraint or seclusion from a provider who wants to:
  - Make you do something you should not do,
  - Punish you,
  - Get back at you,
  - Make things easier for him or her;
- Be free to exercise these rights without retaliation;
- Receive one copy of your medical records once a year at no cost to you.

### Molina members have the additional rights and responsibilities to:

- Carry your Molina ID card and your red or white MO HealthNet card with you at all times
- Show your Molina card at all visits
- Call your PCP about any changes in your health
- Follow instructions and guidelines given to you by your health care provider
- Make and keep PCP appointments, or call ahead to cancel
- Only use the emergency room if your life is in danger or for a serious condition
- Call your family PCP before you see any other health care provider.
- Make sure to see your PCP for regular check-ups and shots for your children

- Call us at 1-800-875-0679 if your Molina card does not come in the mail or if you lose your card
- Learn all you can about good health and work to keep your family healthy
- Supply information that Molina and its providers need in order to provide care
- Understand your health problems and participate in developing mutually agreed-upon treatment goals
- Receive information about Molina, its services, its providers, and your rights and responsibilities
- A candid discussion of appropriate or medically necessary treatment options for your condition, regardless of cost or benefit coverage
- Voice grievances or appeals about Molina or the care it provides
- Make recommendations regarding Molina's member rights and responsibilities policy

## **YOUR PRIVACY MATTERS**

Your privacy is important to us. We take confidentiality very seriously. Molina wants to let you know how your health information is shared or used.

### **Your Protected Health Information (PHI)**

PHI stands for: Protected Health Information. PHI is health information that includes your name, member number or other things that can be used to identify you, and that is used or shared by Molina.

#### **Why does Molina use or share our members' PHI?**

- To provide for your treatment
- To pay for your health care
- To review the quality of the care you get
- To tell you about your choices for care
- To run our health plan
- To use or share PHI for other purposes as required or permitted by law.

## **When does Molina need your written authorization (approval) to use or share your PHI?**

Molina needs your written approval to use or share your PHI for purposes not listed above.

## **What are your privacy rights?**

- To look at your PHI
- To get a copy of your PHI
- To amend your PHI
- To ask us to not use or share your PHI in certain ways
- To get a list of certain people or places we have given your PHI

## **How does Molina protect your PHI?**

Molina uses many ways to protect PHI across our health plan. This includes PHI in written word, spoken word, or PHI in a computer. Below are some ways Molina protects PHI:

- Molina has policies and rules to protect PHI.
- Only Molina staff with a need to know PHI may use PHI.
- Molina staff is trained on how to protect and secure PHI.
- Molina staff must agree in writing to follow the rules and policies that protect and secure PHI.
- Molina secures PHI in our computers. PHI in our computers is kept private by using firewalls and passwords.

## **What can you do if you feel your privacy rights have not been protected?**

- Call Molina at 1-800-875-0679 or write to Molina Healthcare of Missouri at 12400 Olive Blvd., Suite 100 St. Louis, MO 63141.
- File a complaint with the U.S. Department of Health and Human Services.

## Notice of Privacy Practices

(For the use and disclosure of private health information.)

Molina understands the importance of keeping your personal Protected Health Information (PHI) secure and private. A federal law known as the Health Insurance Portability and Accountability Act (HIPAA) requires us to make sure your PHI is kept private. We are required by law to provide you with this notice and inform you of our legal duties and privacy practices with your PHI. We may at times update this notice; if we do, we will post the new notice on Molina's website and send a copy to each head of household within 30 days.

PHI is information that we have created or received about your health or medical condition. This information could be used to identify you. It also includes information about medical treatment you have received and about payment for health care you have received. It includes your name, age, and address. Molina must tell you how, when, and why we use and/or share your PHI.

We collect PHI from you and your health care provider. We may get PHI from your health care provider when they submit a claim to be paid for services you have received that are covered benefits. We also get PHI from you when you fill out your application for health care coverage.

HIPAA and other laws allow or require us to disclose your PHI. There may be times Molina may use your PHI without getting your permission. The ways we can use and disclose information may fall within one of the descriptions listed below; however, not every use or disclosure is listed.

- **Receive Treatment:** We may use or disclose your PHI to persons that provide you with health care services or who are involved in your care. These people may be doctors, nurses or other health care professionals. For example, if you are being treated for a back injury, we may provide PHI to the person providing your physical therapy.
- **Receive Payment for Treatments:** We may use or disclose your PHI to pay providers for treatment and/or services you receive. For example, we may give your PHI to our claims department to make sure your health care provider is paid correctly for the health care services you receive under Molina.

- **Business Operations:** We may use or disclose your PHI to run our health plan. We may use your PHI in order to review and improve the quality of health care services you get. Before we share PHI with quality review organizations or consultants, they must agree to keep your PHI private.
- **Reporting to Public Health Agencies:** We may share PHI with public health agencies that collect public health information such as information about births, deaths, and some diseases with local and state health departments.
- **Appointment Reminders:** We may use PHI to send you appointment reminders. We may also use PHI to give you information about other health care treatments, services or benefits.
- **Oversight Activities:** We may share PHI if a government agency is investigating or inspecting a health care provider or organization.
- **Legal Requirements:** We may share PHI with government or law enforcement agencies when federal, state or local laws require us to do so. We may also share PHI when in a court or legal proceeding. For example, if a law says we must share PHI for persons that may have been abused, neglected or a victim of domestic violence, then we are obligated by law to share PHI.

Keeping your PHI safe is very important to Molina. We limit access to your PHI to only those who need it. We protect access to our building and computer systems. Our staff is trained on keeping PHI protected and confidential.

To ensure your personal health information remains secure, our Member Services staff will ask for certain information when accepting calls from you or your PCP. It is important for them to verify the call is from you or a representative of yours such as your PCP or in relation to a minor, the legal guardian or parent. Please make sure when you are calling to check status of benefit coverage, make requests to change PCPs or have any other inquiries related to your health care benefits to have the following information:

- Member name
- Member MO HealthNet Managed Care Number (DCN)
- Date of birth

We will not release any information if someone calls about you or your dependent without having the above information. Your MO HealthNet Managed Care Number (DCN) is a number assigned only to you. This number will be on your Red or White MO HealthNet Card and your Molina ID card. It is important that you do not share that number with anyone that should not be calling to help you or your family or that should not have access to your PHI.

You have certain rights pertaining to your PHI. You have the right to request a restriction on the use or sharing of your health information for treatment, payment, or health care operations. Molina Healthcare may not agree to a requested restriction.

You can request that we communicate with you about your health and related issues in a certain way. For example, you may request that we contact you by mail rather than telephone, or at work rather than at home.

You may ask us to amend your health information if you believe it is incorrect or incomplete. You must provide a reason that supports your request. We may deny your request if the information is accurate or allowed otherwise by law.

You may file a complaint with us if you feel your privacy rights have been violated. Complaints may be submitted to:

Molina Healthcare  
Appeals Department  
12400 Olive Blvd., Suite 100  
St. Louis, MO 63141

## **Advance Health Care Directive**

You have the right to accept or refuse any medical care. A time may come when you are too sick to talk to your PCP, family, or friends. You may not be able to tell anyone what health care you want. The law allows adults to do two things when this happens:

- An advance directive allows you to leave written directions about your medical treatment decisions
- Or ask someone to decide your care for you.

If you do not have an advance health care directive, your PCP may not know what health care you want. Talk to your PCP or call Molina at 1-800-875-0679 for information on an advance health care directive. Your PCP must keep a written and signed copy of what care you want. An advance directive becomes part of your medical record.

If there is a problem with things not being done the way they should with an advance directive, you may file a complaint with the Missouri Department of Health and Senior Services at 573-751-6400 or write them at P.O. Box 570, Jefferson City, Missouri 65102.

Advance Health Care Directives are available from the Missouri Bar:

326 Monroe  
Jefferson City, MO 65101  
573-635-4128

# Fraud & Abuse

Committing fraud or abuse is against the law.

Fraud is a dishonest act done on purpose.

Examples of member fraud are:

- Letting someone else use your MO HealthNet Managed Care health plan card(s) or red card or white MO HealthNet card or
- Getting prescriptions with the intent of abusing or selling drugs.

An example of provider fraud is:

- Billing for services not provided.

Abuse is an act that does not follow good practices.

An example of member abuse is:

- Going to the emergency room for a condition that is not an emergency.

An example of provider abuse is:

- Prescribing a more expensive item than is necessary.

You should report instances of fraud and abuse to:

Molina Healthcare

1-866-916-3229

or

MO HealthNet Division

Participant Services

1-800-392-2161

## How Can I Help Stop Health Care Fraud & Abuse?

Health care fraud and abuse takes money from a health care program, which leaves less money for real medical care.

An example of provider fraud is billing for services, procedures, and/or supplies that were not provided. Examples of member fraud include the use of altered and or stolen prescription pads or requesting or asking a transportation driver to take you to an unapproved location.

Here are some ways you can help stop fraud:

- Do not give your Molina ID card or ID number to anyone other than a healthcare provider, clinic or hospital and only when receiving care.
- Do not let anyone borrow your Molina ID card. If someone else uses your ID card, this is fraud.
- Check your mail for medical bills for services that you did not receive.
- Members may request an Explanation of Benefits (EOB) by calling our Member Services Department at 1-800-875-0679.

If you suspect fraud or abuse has taken place, report it today!

For anonymous or confidential reports, please contact:

Phone: Toll Free 1-866-916-3229

Fax: Compliance Officer 1-866-916-3246

email: [mhmo.confidentialcompliance@molinahealthcare.com](mailto:mhmo.confidentialcompliance@molinahealthcare.com)

mail:

Confidential:

Compliance Official

Molina Healthcare of Missouri

12400 Olive Blvd., Suite 100

St. Louis, MO 63141

# Advocates for Family Health

Advocates for Family Health is an ombudsman service. An ombudsman is a problem solver who can advise you and help you. Advocates for Family Health can help you if:

- You need help understanding your rights and benefits under MO HealthNet Managed Care.
- You feel your rights to health care are being denied.
- You are not able to solve the problem by talking to a doctor, a nurse, or your MO HealthNet Managed Care health plan.
- You need to talk to someone outside of your MO HealthNet Managed Care health plan.
- You want help when filing a grievance.
- You need help when appealing a decision by your MO HealthNet Managed Care health plan.
- You need help getting a State Fair Hearing.

**You can get legal help at no cost to you by contacting the legal aid office for your county:**

*For Franklin, Jefferson, Lincoln, Macon, Madison, Marion, Monroe, Montgomery, Perry, Pike, Ralls, Shelby, St. Charles, St. Francois, St. Louis, Ste. Genevieve, Warren, and Washington counties, and St. Louis City:*

Call Legal Services of Eastern Missouri at (314) 534-1263 or  
1 (800) 444-0514.

Ask for Advocates for Family Health.

*For Clay, Jackson and Platte counties:*

Call Legal Aid of Western Missouri at (816) 474-6750.

Ask for Advocates for Family Health.

*For Benton, Camden, Cass, Henry, Johnson, Lafayette, Morgan, Pettis, Ray, Saline, and St. Clair counties:*

Call Legal Aid of Western Missouri at 1 (800) 892-2943.

Ask for Advocates for Family Health.

For *Bates and Vernon counties*:

Call Legal Aid of Western Missouri at 1 (800) 492-7095.

Ask for Advocates for Family Health.

For *Linn county*:

Call Legal Aid of Western Missouri at 1 (800) 892-2101.

Ask for Advocates for Family Health.

For *Audrain, Boone, Callaway, Chariton, Cole, Cooper, Howard, Miller, Moniteau, Osage, and Randolph counties*:

Call Mid-Missouri Legal Services Corp. at 1 (888) 476-4545.

Ask for Advocates for Family Health.

For *Cedar, Gasconade, Laclede, Maries, Phelps, Polk, and Pulaski counties*:

Call Legal Services of Southern Missouri at (417) 881-0533 or

1 (800) 444-4863.

Ask for the Advocates for Family Health.

# Glossary

Adoption Subsidy - Subsidy services supporting a family adopting a child. Financial, medical, and support services for the child until age 18 or in some cases until age 21. These children may choose to get their health care as a MO HealthNet Managed Care health plan member, or may choose to get health care through MO HealthNet Fee-for-Service using MO HealthNet approved providers.

Advance Directive - An advance directive allows you to leave written directions about your medical treatment decisions and/or ask someone to decide your care for you.

DCN - Departmental Client Number - also known as your MO HealthNet number. This is your identification number for MO HealthNet.

Eligibility Group - Members who receive benefits based on age, family size, and income.

EPSDT - Early Periodic Screening, Diagnosis, and Treatment, also known as HCY.


HCY Program - Healthy Children and Youth, also known as EPSDT.

MO HealthNet Approved Provider - A doctor, nurse, clinic, pharmacy, hospital, or other providers enrolled with the MO HealthNet Division as a MO HealthNet approved provider. MO HealthNet approved providers provide services in MO HealthNet Fee-for-Service. You will show them your red or your white MO HealthNet card. MO HealthNet approved providers are sometimes also called MO HealthNet providers. You can do an on-line search to find a MO HealthNet approved provider at [www.dss.mo.gov/mhd/](http://www.dss.mo.gov/mhd/) or you can call 1-800-392-2161 for a list of MO HealthNet approved providers.

MO HealthNet Fee-for-Service - A way to get some health care services that are not covered by Molina. These services may be covered by MO HealthNet Fee-for-Service. You can go to any approved provider that takes MO HealthNet Fee-for-Service. Use only your red or white MO HealthNet card. You may call 1-800-392-2161 to check on how to get these services.

MO HealthNet Managed Care - A way to get your MO HealthNet coverage from a MO HealthNet Managed Care health plan in certain counties of the State. You must choose a MO HealthNet Managed Care health plan or one will be chosen for you. You must also choose a Primary Care Provider. Use your MO HealthNet Managed Care card and your red or white MO HealthNet card to get services. While you are waiting to get in a MO HealthNet Managed Care health plan for health care, you get services from MO HealthNet Fee-for-Service. There are a few services that members in a MO HealthNet Managed Care health plan will receive from MO HealthNet Fee-for-Service. You may call 1-800-392-2161 to check on how to get services.

MO HealthNet Managed Care Card - The card sent to you by your MO HealthNet Managed Care health plan.

 MOLINA HEALTHCARE Molina Healthcare of Missouri	
1-800-875-0679 EDI Payor #: 71079	
Name:	Primary Care Provider:
Date of Birth:	
MO HealthNet ID#:	PCP Phone:
www.MolinaHealthcare.com Fully Insured	

**IMPORTANT INFORMATION:** Carry this card with you at all times. Show this card whenever you receive medical services. Having this card does not certify eligibility or guarantee benefits. In an emergency you should go to the nearest emergency room or call 911. For medical advice or if you are not sure if you should go to the emergency room call your PCP. You may also call the 24 hour nurse advice line at 1-888-275-8750.

To verify eligibility call 1-800-875-0679 or visit the website at: [www.emomed.com](http://www.emomed.com)  
Pharmacy call Participant Services 1-800-392-2161  
Behavioral Health Services call 1-800-642-3694  
Dental Services call 1-866-642-9512  
Vision Services call March Vision Care Group, Inc. 1-888-493-4070  
Transportation Services call 1-866-642-9305

Submit claims to: Molina Healthcare, P.O. Box 22676, Long Beach, CA 90801  
[www.MolinaHealthcare.com](http://www.MolinaHealthcare.com)

Out of Home Care/Alternative Care Services (Foster Care) - Alternative Care is the care of children living in a home other than their birth parents. The juvenile court removes the child from their home. The Children's Division then sets a plan of services.

PCP - A Primary Care Provider is a health care provider who manages a member's health care.

Prior Authorization – Your MO HealthNet Managed Care health plan's method of pre-approving certain services.

Red MO HealthNet Card - The card sent to you before January 2008 when you are eligible for MO HealthNet.



White MO HealthNet Card (effective January 2008) – The card sent to you when you are eligible for MO HealthNet.

<b>MO HealthNet</b> Department of Social Services	
Name of Participant	
Date of Birth XX-XX-XXXX	MO HealthNet ID Number 9999999999
USE BY ANYONE WHOSE NAME IS NOT PRINTED ON THIS CARD IS FRAUDULENT AND SUBJECT TO PROSECUTION UNDER THE LAW	

<ul style="list-style-type: none"><li>• You must present this card each time you get medical services.</li><li>• You must tell the provider of services if you have other insurance.</li><li>• Some services may not be covered by MO HealthNet and you may have to pay for services that are not covered.</li></ul>	
<b>Participant Inquiries</b>	<b>1-800-392-2161 OR 1-573-751-6527</b>
<b>Fraud and Abuse</b>	<b>1-573-751-3285 OR <a href="mailto:ASK.MHD@DSS.MO.GOV">ASK.MHD@DSS.MO.GOV</a></b>
<b>Possession of the card does not certify eligibility or guarantee benefits.</b>	
<ul style="list-style-type: none"><li>• Restrictions may apply to some participants or for certain services.</li><li>• Services are covered as specified in the Rules and Regulations of the Family Support Division or the MO HealthNet Division.</li><li>• The holder of this card has made an assignment of rights to the Department of Social Services for payment of medical care from a third-party.</li></ul>	

Referrals - A process used by a PCP to let you get health care from another health care provider, usually for specialty treatment. Molina does not require a referral to see a specialist that is in the Molina's network



12400 Olive Blvd., Suite 100  
St. Louis, Missouri 63141  
800-875-0679  
[www.MolinaHealthcare.com](http://www.MolinaHealthcare.com)

