

## IMPORTANT INFORMATION

Please note the following change to information in your Molina Healthcare member handbook, effective October 1, 2011. Insert this information into your member handbook so you can refer to it again in the future. The changes will affect everyone in your family who gets health care through an Ohio Medicaid managed care plan (MCP).

### MEMBER HANDBOOK INSERT

Please read this carefully and call Molina Healthcare Member Services if you have any questions.  
Molina Healthcare Member Services:

Covered Families and Children (CFC)	1-800-642-4168
Aged, Blind or Disabled (ABD)	1-866-408-9501
Hearing Impaired	1-800-750-0750 or 711

Representatives are committed to treating you with respect and getting you the help you need. A representative will be available to assist you from 7:00 a.m. to 7:00 p.m. Monday through Friday.

The following information explains changes and/or updates to your pharmacy services.

There are several places in your Member Handbook that indicate Ohio Medicaid covers prescription drugs and certain medical supplies and that you can use any provider that accepts Ohio Medicaid to get the services. These services are still covered but there is a change. **Effective October 1, 2011, Molina Healthcare will pay for all medically necessary Medicaid-covered prescription drugs and medical supplies. This means that you will need to get your prescription drugs and medical supplies at pharmacies and suppliers that accept Molina Healthcare.**

While Molina Healthcare covers all medically necessary Medicaid-covered prescription drugs, we use a preferred drug list (PDL). These are the drugs that we prefer that your provider prescribe. We may also require that your provider submit information to us (a prior authorization request) to explain why a specific medication and/or a certain amount of a medication is needed. We must approve the request before you can get the medication. Reasons why we may prior authorize a drug include:

- There is a generic or pharmacy alternative drug available.
- The drug can be misused/abused.
- There are other drugs that must be tried first.

Also, some drugs may also have quantity (amount) limits and some drugs are never covered, such as drugs for weight loss. Molina Healthcare requires the use of generic drugs if they are available.

You can call member services to request information on our PDL and drugs that require prior authorization or you can look on our website at [www.MolinaHealthcare.com](http://www.MolinaHealthcare.com). If you were on Medicaid fee-for-service the month before you became our member, we will tell you if any of your current medications require prior authorization that did not require authorization when they were paid by Ohio Medicaid. If we do not approve a prior authorization request for a medication, we will send you information on how you can appeal our decision and your right to a state hearing.

The State of Ohio permits MCPs to develop and implement programs to assist certain members that have received drugs that are not medically necessary to establish and maintain a relationship with one provider and/or pharmacy to coordinate treatment. Members selected for Molina Healthcare's program will be provided additional information and notified of their state hearing rights, as applicable.

## FREQUENTLY ASKED QUESTIONS

**Question:** Do I need to let my pharmacy know that Molina Healthcare will pay for my prescriptions effective October 1, 2011?

**Answer:** Yes, make sure to show your pharmacy your new ID card beginning October 1, 2011.

**Question:** Does my provider need to submit a prior authorization request for prescription drugs I am currently taking?

**Answer:** The pharmacy will refill a prescription that usually requires Molina Healthcare prior authorization if Ohio Medicaid paid to fill the prescription on or after April 1, 2011, until the following dates:

- October 31, 2011, if the prescription is a controlled substance.
- January 31, 2012, if the prescription is a standard tablet/capsule antidepressant, standard tablet/capsule antipsychotic or injectible antipsychotic medication prescribed by a provider other than a psychiatrist.
- December 31, 2011, for all other prescriptions that require prior authorization by Molina Healthcare.

After the above dates, your provider will need to request prior authorization with Molina Healthcare for your prescription.

**Question:** Will I have to pay a co-payment for prescription drugs after the change?

**Answer:** No, you will no longer be required to pay a co-pay, and you will continue to receive your prescription drugs and medical supplies at no cost to you.

**Question:** Will I be able to receive over the counter prescription drugs?

**Answer:** Yes, your provider must write a prescription for the qualifying over the counter medication.

**Question:** If I plan to travel out-of-state will I be able to fill my prescriptions?

**Answer:** Please plan accordingly and fill your prescription drugs before you travel out-of-state.

**Question:** How do I find out if Molina Healthcare covers my prescription drugs?

**Answer:** Visit our website at [www.MolinaHealthcare.com](http://www.MolinaHealthcare.com) to review the PDL or call Member Services.

**Question:** I am currently taking brand name prescription drugs. Will Molina Healthcare cover brand name prescription drugs?

**Answer:** Molina Healthcare requires the use of generic drugs if they are available. If your provider believes that it is medically necessary for you to have a brand name drug, the provider may submit a prior authorization request to Molina Healthcare. Molina Healthcare will review the request and determine whether to approve the brand name medication.