

Very Important Information

If you were on Medicaid fee-for-service the month before you became a managed care plan (MCP) member and have health care services already approved and/or scheduled, it is important that you call your MCP's member services immediately (today or as soon as possible).

In certain situations, for a brief time after you enroll, your MCP may allow you to receive the care from a provider that is not contracted with the MCP. Additionally, your MCP may allow you to continue to receive services that were authorized by Medicaid fee-for-service. **However, you must call the MCP before you receive the care.** If you do not call the MCP, you may not be able to receive the care and/or the claim may not be paid. For example, you need to call your MCP's member services if you have the following services already approved and/or scheduled:

- Organ, bone marrow, or hematopoietic stem cell transplant
- Third trimester prenatal (pregnancy) care, including delivery
- Inpatient/outpatient surgery
- Appointment with a specialty provider
- Chemotherapy or radiation treatments
- Non-routine dental or vision services (for example braces or surgery)
- Medical equipment
- Services you receive at home, including home health, therapies, and nursing

After you enroll, your MCP will tell you if any of your current medications require prior authorization that did not require authorization when they were paid by Medicaid fee-for-service. It is very important that you look at the information the MCP provides and contact your MCP's member services if you have any questions. You can also look on your MCP's website to find out if your medication(s) require prior authorization. You may need to follow up with the prescriber's office to submit a prior authorization request to your MCP if it is needed. If your medication(s) requires prior authorization, you cannot get the medication(s) until your provider submits a request to your MCP and it is approved.