



IMPORTANT

Molina Healthcare Phone Numbers:

Member Services:

1-888-483-0760

24 Hour Nurse Advice Line:

1-888-275-8750

(TTY: 1-866-735-2929)

Spanish:

1-866-648-3537

(TTY: 1-866-833-4703)



About Our Members: Protecting Your Privacy

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

Your Protected Health Information

PHI stands for these words: protected health information. PHI means 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 Healthcare.

Why does Molina Healthcare 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 Healthcare need your written authorization (approval) to use or share your PHI?

Molina Healthcare 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 Healthcare protect your PHI?

Molina Healthcare 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 Healthcare protects PHI:

- Molina Healthcare has policies and rules to protect PHI.
- Only Molina Healthcare staff with a need to know PHI may use PHI.
- Molina Healthcare staff is trained on how to protect and secure PHI.
- Molina Healthcare staff must agree in writing to follow the rules and policies that protect and secure PHI.
- Molina Healthcare 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 or write Molina Healthcare and file a complaint.
- File a complaint with the U.S. Department of Health and Human Services.

The above is only a summary. Our Notice of Privacy Practices has more information about how we use and share our members' PHI. Our Notice of Privacy is on our website at **www.molinahealthcare.com**. You also may get a copy of our Notice of Privacy Practices by calling our Member Services Department.



We Care About Your Health Improving Services to Molina Healthcare Members

Your health care is important to us. We want to hear how we are doing. That's why you may receive a survey about Molina Healthcare and your health care services. One of these surveys is called CAHPS.

CAHPS stands for the Consumer Assessment of Healthcare Providers and Systems. This survey asks questions about your health care. It asks about the care you or your child receives from Molina Healthcare. We may send you a few questions about how we are doing and what is important to you. Please take the time to complete the survey if you receive it.

HEDIS is another tool we use to improve care. HEDIS stands for Healthcare Effectiveness Data and Information Set. This is a process where we collect information on services that you or your child may have received. These services include shots, well-child exams, Pap and mammogram screenings, diabetes care, and prenatal and after-delivery care. Through this process we can find out how many of our members actually got needed services. This information is made available to you. It can be used to compare one health plan to another plan.

Each year Molina Healthcare strives to improve all services provided. This is done by setting goals. These goals are included in a Quality Improvement (QI) plan. Our goal is to help you take better care of yourself and your family.

As part of the QI plan, Molina Healthcare helps you take care of your health and get the best service possible.

Some of the ways we do this include:

- Reminders about getting well-child exams and immunizations
- Asthma and diabetes education
- Education on prenatal care and after-delivery exams
- Reminders about getting Pap and mammogram screenings
- Better processing of member grievances (complaints)
- Help finding the Molina Healthcare website
- Telling you about special services for members

To learn more or to request a copy of our QI plan, call your Molina Healthcare Member Services Team.



Molina Healthcare Patient Safety Program:

Molina Healthcare wants you and your family to be safe and healthy. We have a Patient Safety Program to help us meet this goal. This program gives you safety facts so you can make better health care choices. Here are a few of the things we do to improve your safety:

- Give providers and hospitals information on safety issues and where to get help.
- Keep track of our members' complaints about safety problems in their provider's office or hospital.
- Look at reports from groups that check hospital safety. Reports tell us about enough staff in the Intensive Care Unit (ICU), use of computer drug orders, and so forth.

These groups are:

- Leap Frog Quality Index Ratings (www.leapfroggroup.org)
- JCAHO National Patient Safety Goal Ratings (www.jointcommission.org)

You can look at these websites to:

- See what hospitals are doing to be safer.
- Help you know what to look for when you pick a provider or a hospital.
- Get information about programs and services for patients with problems like diabetes and asthma.



We also let you know:

- How to make your home safer.
- How to keep poisons and medicines out of the reach of your children.
- About people selling unsafe medicine.
- How to have fun and still be safe outdoors.
- Why exercise is good for you.

Call our Member Services Department to get more information about our Patient Safety Program. You can also visit us on line at www.molinahealthcare.com



We Want to Give You Good Care!

Molina Healthcare works with your providers and hospitals to give you good health care. We make choices about your care based on what you need. We also look at your benefits. We do not reward providers to deny you care. We also do not reward staff or other people to deny you care or give you less care. We do not pay extra money to providers or our staff to deny tests or treatments that you need to get better or stay healthy.

If you ever have a concern about your health care, you may call our Member Services team. You can also talk to our nurses about getting needed care. Our staff are here to take your call Monday through Friday (except holidays) between 8 a.m. and 5 p.m. They

can answer questions about how we make health care choices. Just call the toll-free Member Services number at 1-888-483-0760. This number is also listed on your I.D. card. If you call after 5 p.m. or over the weekend, please leave a message and your phone number. The Utilization Management staff will call you back during the next normal business day.

After Hours Care

There may be times when you may need care and your Primary Care Provider (PCP) is closed. If it is after hours and your PCP's office is closed you can call your PCP or Molina Healthcare's Nurse Advice Line. Nurses are available to help you at any time of the day. Call 1-888-275-8750, 24 hours a day, 7 days a week.



Molina Healthcare's Nurse Advice Line has highly trained nurses. They can help you decide if you or your child should see a provider right away. The nurses can also help you make an appointment if you need to see a provider quickly. Sometimes, you have questions but you do not think you need to see your PCP. You can call the Nurse Advice Line and talk to a nurse. They will help you.

Emergency Care

Emergency care is for sudden or severe problems that need care right away. It can also be care that is needed if your life or health is in danger. Emergency care is a covered benefit. If you need

For more information, go to www.molinahealthcare.com

emergency care, call 911 or go to the nearest hospital. You do not need prior approval. If you have an urgent matter that does not threaten your life, you can also call Molina Healthcare's Nurse Advice Line. Highly trained nurses are available to help you at any time of the day. Call 1-888-275-8750, 24 hours a day, 7 days a week.

Looking at What's New

We also look at new types of services. And we look at new ways to provide those services. We review new studies to see if new services are proven to be safe and should be added to your benefit package. Molina Healthcare reviews the type of services listed below at least once a year:

- Medical services
- Mental health services
- Medicines
- Equipment

Complex Case Management

Living with health problems and dealing with the things to manage those health problems can be hard. Molina Healthcare has a program that can help. The Complex Case Management program is for members with difficult health problems that need extra help with their health care needs. The program allows you to talk with a nurse about your health problems. The nurse can help you learn about those problems and teach you how to better manage them. The nurse may also work with your family or caregiver and provider to make sure you get the care you need. There are several ways you can be referred for this program. One way is through medical or pharmacy claims. Another way is through your provider. There are also certain requirements that you must meet. It is your choice to be in these programs. You can choose to be removed from the program at any time.

If you would like more information about the program, please call Member Services. The phone number is listed on your ID card.

You Have a Right to Appeal a Denial

What is a denial? A denial means Molina Healthcare has made a decision to:

- Deny a request to cover a healthcare service;
- Reduce, suspend or stop care you are already receiving;
- Deny payment for a service you received that is not covered.

If your service or claim is denied, you will get a letter from Molina Healthcare telling you about this decision. This letter will tell you about your right to appeal. You can read about these rights in your Member Handbook. You can find out how to file an appeal on our website, **www.molinahealthcare.com**. Member Services also can help you file an appeal.

If you are not happy with the result of your appeal, you can ask for an independent review. This means providers outside Molina Healthcare review all the facts in your case and make a decision. We will accept that finding.

Would you like to ask for a review of an appeal? Call Member Services and ask them to help set this up for you.



Your Rights as a Molina Healthcare Member

Did you know that as a member of Molina Healthcare you have certain rights and responsibilities? Knowing your rights and responsibilities will help you, your family, your provider and Molina Healthcare ensure that you get the covered services and care that you need.

You have the following rights:

- To receive all services that Molina Healthcare must provide.
- To be treated with respect, consideration and dignity by Molina Healthcare and its providers.

For more information, go to www.molinahealthcare.com

- To be able to take part in choices about your healthcare.
- To be able to file a grievance (complaint) about Molina Healthcare services, the providers or the care you received.
- To change your Primary Care Provider (PCP).
- To talk about medically necessary treatment options with your provider.

You also have the responsibility to:

- Learn and ask questions about your health benefits.
- Give information to your provider or Molina Healthcare that is needed to care for you and your family.
- Follow the care plan that you have agreed on with your provider.
- Keep appointments and be on time. If you're going to be late or cannot keep an appointment, call your PCP.
- Report any fraud or wrongdoing to Molina Healthcare or the proper authorities.
- Inform Molina Healthcare of any changes of address, telephone number, or any changes that could affect your eligibility.

These are only a few of your rights and responsibilities. For a list of all your rights and responsibilities, look in your Member Handbook. You can also visit the Molina Healthcare website at www.molinahealthcare.com or call Member Services.

Grievances and Appeals

Are you having problems with your medical care or our services? If so, you have a right to file a grievance or appeal.

A grievance can be for things like:

- The care you get from your provider or hospital;
- The time it takes to get an appointment or be seen by a provider or;
- Provider availability in your area

An appeal can be filed when you do not agree with Molina Healthcare's decision to:

- Stop, change, suspend, reduce or deny a service or;
- When payment for services is denied, this may make you responsible for the bill.

You may expedite your request if a delay in the decision may risk your health. You may also ask for a Fair Hearing through the Division of Health Care Financing.

Check our website, www.molinahealthcare.com or your Member Handbook to read about:

- Grievance, appeal & Fair Hearing processes and rights;
- Grievance, appeal & Fair Hearing timeframes;
- Who can file a grievance/appeal?

Disease Management Programs

Molina Healthcare wants you to know all you can to help you stay healthy. We have programs that can help you manage your condition. There are many ways you can be enrolled in our programs. One way is through medical or pharmacy claims. Another way is through your provider. It is your choice to be in these programs. You can choose to be removed from the program at any time. For more details about our programs, please call the Health Education Department at 1-888-483-0760, extension 170458 or visit www.molinahealthcare.com.

- The **breathe with ease**sm asthma program is for children and adults ages 2 years and over with asthma. You and/or your child will learn how to manage your/or your child's asthma and work with your provider.
- The **Healthy Living with Diabetes** sm program is for adults age 18 years and over with diabetes. You will learn about diabetes self-care (meal planning, exercise tips, diabetes medicines and much more).

- The Chronic Obstructive Pulmonary Disease (COPD) program is for members who are 21 years and older who have emphysema and chronic bronchitis. With this program you can learn how to better control your breathing.
- The **Heart-Healthy Living Cardiovascular** program is for members 18 years and older who have one or more of these conditions: coronary artery disease, congestive heart failure or high blood pressure.

motherhood matters sm

motherhood matters sm pregnancy program is a simple program to follow. It can really help you and your baby during your pregnancy. Pregnant mothers get support and education as well as follow up by telephone from nurses or health educators. Special care is given to those who have a high risk pregnancy. To find out more, just call Molina Healthcare's motherhood matters sm Program at 1-888-483-0760, extension 170458.



Getting the Care You Need

Here are some tips to help you get the health care you need.

See your primary care provider (PCP) for a health checkup. Many people wait until they are very sick to see a provider. You do not need to wait. Make sure you schedule a checkup before you get sick. This will help keep you and your children well.

Your PCP can handle most of your health care needs. But sometimes you have special problems such as a broken bone or heart disease. You may need to visit a provider who has extra training. This provider is called a specialist. If you need to see a specialist, your PCP will make sure you see the right one and may be able to help you get an appointment faster.

When you travel away from your hometown, Molina Healthcare pays for emergency care for you. You may go to a local emergency room (ER) or an urgent care clinic. Tell them you are a Molina Healthcare member. Show them your Molina Healthcare ID card. But don't forget, routine care is not covered when you travel away from home.

Are you having trouble speaking to your provider in English? You have a right to an interpreter. There is no cost to you. Tell the office staff if you would prefer to talk in your own language. If you need help, call Member Services.

Check out the Molina Healthcare Website

Check out our website at **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 Healthcare's contracted providers and hospitals
- Your benefits, including co-payments and other charges (if they apply)

- What to do if you get a bill or a claim
- FAQs (frequently asked questions and answers)
- Drug formulary (approved drugs that providers can prescribe)
- How to contact 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 schedule
- Your rights and responsibilities and the privacy of your information
- Restrictions on benefits or how to obtain care outside the Molina Healthcare service area
- Quality Improvement, Health Education, and Disease Management programs
- How to voice a complaint or appeal a medical decision
- How we decide about using new technology

You can ask for printed copies of anything posted on the website by calling Member Services. Your member handbook is also a good resource. You can find it on our website.

Preventive Health Guidelines

	Children & Teens (0 to 18 years)	
Well Visits	 Infants (0-12 months): Visits at 1, 2, 4, 6, 9 & 12 months Early Childhood (12 months – 4 years): Visits at 15, 18, 24 & 30 months & at 3 & 4 years Late childhood & adolescents (5-20 years): Visits once a year 	
Immunizations	 Hepatitis B (HepB): 3 doses Rotavirus (Rota): 3 doses Diphtheria, Tetanus, Pertussis (DTaP): 6 doses Haemophilus influenza type b (Hib): 4 doses Pnuemococcal (PCV): 4 doses Inactivated Poliovirus (IPV): 4 doses Influenza (Flu Shot): Yearly, 6 months & older Measles, Mumps, Rubella (MMR): 2 doses Varicella: 2 doses Hepatitis A (HepA): 2 doses Meningococcal (MCV4): 2 doses HPV: 3 doses, for females age 11-12 years 	

Adult Women (19 years and over)	Adult Men (19 years and over)
Every 1 – 3 years	Every 1 – 3 years
 Influenza (flu shot): Yearly Tetanus-diphtheria (TD): Every 10 years Meningococcal: 1 dose, for high risk Pneumococcal: 1 dose, 65 years & older Measles, Mumps, Rubella (MMR): 1 dose, if no proof of shots or immunity Hepatitis A (HepA): 2 doses, for high risk Hepatitis B (HepB): 3 doses, for high risk HPV: 3 doses, age 26 years or younger Herpes Zoster (Shingles): 60 years & older Varicella (Chickenpox): 2 doses if no proof of shots or immunity 	 Influenza (flu shot): Yearly Tetanus-diphtheria (TD): Every 10 years Meningococcal: 1 dose, for high risk Pneumococcal: 1 dose, 65 years & older Measles, Mumps, Rubella (MMR): 1 dose, if no proof of shots or immunity Hepatitis A (HepA): 2 doses, for high risk Hepatitis B (HepB): 3 doses, for high risk Herpes Zoster (Shingles): 60 years & older Varicella (Chickenpox): 2 doses if no proof of shots or immunity

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Preventive Health Guidelines - Continued

	Children & Teens (0 to 18 years)
Exams & Screenings	 Physical examination (height, weight, blood pressure, body mass index (BMI), anemia, metabolic exams) Developmental assessment Behavioral assessment Lead testing Hearing & vision screenings TB test Pap test, Chlamydia, HIV, Sexually Transmitted Infection (STI) test for sexually active teens

Adult Women Adult Men (19 years and over) (19 years and over) Height, weight & body mass Height, weight & body mass index (BMI) index (BMI) • Blood Pressure: Yearly • Blood Pressure: Yearly • Cholesterol screening: • Cholesterol screening: Every 5 years Every 5 years • Chlamydia & STI for sexually • Colorectal cancer screening: active women 25 & younger. Every 5-10 years based on Other asymptomatic women at provider recommedations2 increased risk for infection • Abdominal Aortic Aneurysm • Mammogram: Yearly for 40 (AAA) screening: once for men years of age and over 65 to 75 years of age who have ever smoked • Pap test & pelvic exam: Yearly • Bone density for osteoporosis: 65 years & older. 60 and older at increased risk for osteoporotic fractures • Colorectal cancer screening:

Every 5-10 years based on provider recommendations



Your Extended Family.

