



Dear Member,

Welcome to Molina Healthcare!

As a member of Molina Healthcare, you will receive all your health care from Molina doctors and hospitals. Enclosed is Molina's member handbook for you to use. You may also call our Member Services Department for help or to answer any questions you may have.

Molina has Member Services staff who speak English, Spanish and Hmong. We also have interpreter services for other languages. You can call Member Services toll-free at 1-888-999-2404 or at 414-847-1776.

As a Molina member, you can call also our Nurse Advice Line and talk with a nurse 24 hours a day, 7 days a week. Our nurses can answer questions that you have about your health. For example, you can call if you have a health care question after your provider's normal business hours or when your child is sick and you are not sure what to do. You can call if you have a follow up question after a medical appointment or if you are not sure where to go for care. The phone lines are staffed by registered nurses. Call 1-888-275-8750, Espanol 1-866-648-3537. For the hearing impaired, please call 1-800-688-4889, Espanol TTY / 1-866-833-4703.

Please read all your welcome material carefully. Call us if you have any questions.

- **You will receive a letter from us which will tell you who your Primary Care Physicians (PCP) is, you can change your Primary Care Physician (PCP).** Every member must have a PCP. You may have been auto-assigned a PCP that is not the one you desire. You may choose a new PCP from those in the PCP Provider Directory.
 - To change your PCP you may either visit our website: www.molinahealthcare.com, call Molina Healthcare at (414) 847-1776 or (888) 999-2404 or you can fill out the Primary Care Physician (PCP) Selection form in this welcome kit and return it in the self-addressed stamped envelope that has been provided.
- **ALL new members need to fill out the Other Insurance section of the form.** Mail the form back to us in the self-addressed stamped envelope that is in this welcome kit.
- Please post the Nurse Advice line magnet and the Urgent Care listing where you will have easy access to it.

Medicaid SSI members: A Molina Care Manager will call you in the next few weeks to complete an assessment of your physical and emotional needs. If you do not want to wait for us to call you, you may call the Care Management Department at 1-888-999-2404 or 414-847-1776.

Respectfully,

A handwritten signature in black ink, appearing to read 'A. Bhugra'.

Andy Bhugra, Plan President

Interpreter Services

If you need this printed material interpreted, need an alternative format (such as Braille, large print, or audio tape) or need assistance in using any of our services, please contact our Member Services Department toll-free at 1-888-999-2404 or 414-847-1776 for local numbers; TTY (for the hearing impaired) 1-800-947-3529. We can provide a list of all available member materials if you would like to request translations or alternative formats.

For help to translate or understand this, please call 1-888-999-2404 or (TTY) 1-800-947-3529

Si necesita ayuda para traducir o entender este texto, por favor llame al teléfono
1-888-999-2404 o 1-800-947-3529 (TTY).

Если вам не всё понятно в этом документе, позвоните по телефону
1-888-999-2404 or 1-800-947-3529 (TTY).

Yog xav tau kev pab txhais cov ntaub ntauv no kom koj totaub, hu rau
1-888-999-2404 or 1-800-947-3529 (TTY).

Interpreter services are provided free of charge to you.



***Be sure to see your doctor for a well-check visit this year!
Regular check-ups and physicals can help you stay healthy.***

Why are regular check-ups important?

- Regular health exams and tests can help find problems before they start.
- If a problem is found early, your chances for treatment and cure are better.
- By getting the right health services, screenings, and treatments, you are taking steps that help your chances for living a longer, healthier life.



Ready for your appointment? Call us at
888-999-2404 and we can help you make an
appointment with your doctor.





Prenatal care is medical care you get during pregnancy. At each visit, your provider checks on you and your growing baby. Go for prenatal care as soon as you know you are pregnant. Go to every appointment, even if you're feeling fine.

Why should you go to all your prenatal care visits?

- You are more likely to be and stay healthy during pregnancy.
- You are more likely to have a normal-weight, full-term, healthy baby.
- You can learn what you need to do to have a healthy pregnancy.
- You give your health care provider time to get to know you and your baby.
- You can have prenatal tests that may be important for you and your baby.
- Your provider can measure your baby's growth.
- You can hear your baby's heartbeat.
- You can get expert care if there are problems during pregnancy.
- You can take your partner with you. Your partner may feel closer to the baby and can take an active part in helping you have a healthy pregnancy.

*If you have Molina Healthcare and need help finding a doctor
please call us at 1-414-847-1776 or 1-888-999-2404 we can help you.*

For help to translate or understand this, please call 1-888-999-2404 or 414-847-1779 (TTY).

Si necesita ayuda para traducir o entender este texto, por favor llame al teléfono 1-888-999-2404 o 414-847-1779 (TTY).

Если вам не всё понятно в этом документе, позвоните по телефону 1-888-999-2404 or 414-847-1779 (TTY).

Yog xav tau kev pab txhais cov ntaub ntauv no kom koj totaub, hu rau 1-888-999-2404 or 414-847-1779 (TTY).

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Urgent Care Centers



Visit an urgent care center when you need care sooner than a routine doctor's visit. Some examples of urgent care are:

- Most broken bones
- Bruises or sprains
- Minor cuts
- Non-severe bleeding
- Minor burns
- Most drug re-actions

Please see the list of urgent care centers for a location near you.

BROWN COUNTY

Aurora BayCare Health Center
Urgent Care
(920) 327-7300
2253 W Mason St
Green Bay, WI 54303
Mon - Fri 8am - 8pm; Sat and Sun
9am - 5pm; Closed all Holidays

Aurora BayCare Medical Center -
Urgent Care
(920) 288-4060
2845 Greenbrier Rd
Green Bay, WI 54311
Mon - Fri 8am - 8pm; Sat and Sun
9am - 5pm; Closed all Holidays

Aurora Health Center Walk-In Clinic
(920) 403-8000
1881 Chicago St
De Pere, WI 54115
Mon - Fri 8am - 8pm; Sat and Sun
9am - 5pm; Open Christmas day
and New Years day

DODGE COUNTY

Watertown Regional Medical Center
- UW Health Partners
(920) 262-4222
125 Hospital Dr
Watertown, WI 53098
Mon - Sun and all Holidays 10 am
- 8pm

DOOR COUNTY

Aurora Health Center Walk-In Clinic
(920) 746-7200
1910 Alabama St
Sturgeon Bay, WI 54235
Mon - Fri 8am - 8pm; Sat and Sun
8am - 4pm; Closed Christmas day
and New Years day

FOND DU LAC COUNTY

Aurora Health Center Walk-In Clinic
(920) 907-7000
210 Wisconsin American Dr
Fond Du Lac, WI 54937
Mon - Fri 7am - 7pm; Sat 8am -
2pm; Sun 8am - 12pm; Closed
Thanksgiving, Christmas and New
Years Day

GREEN LAKE COUNTY

CHN Walk-In Care (in Berlin
Memorial Hospital
(920) 361-5535
225 Memorial Dr
Berlin, WI 54923
Mon - Fri 11am - 7pm; Sat, Sun and
all Holidays 10am - 6pm

JEFFERSON COUNTY

Fort Healthcare Lake Mills Urgent
Care
(920) 648-3113
200 E Tyrannena Park Rd
Lake Mills, WI 53551
Mon - Fri 5pm - 10pm; Sat 8am -
8pm; Sun Noon - 10pm; Call for
Holiday Hours

Fort Memorial Hospital Urgent Care
(920) 568-5330
611 Sherman Ave E
Fort Atkinson, WI 53538
Mon - Fri 5pm - 11pm; Sat, Sun and
all Holidays Noon - 11pm

KENOSHA COUNTY

Aurora Health Center Walk-In Clinic
(262) 948-7030
10400 75th St
Kenosha, WI 53142
Mon - Thur 8:30am - 9pm; Fri, Sat
and Sun 8:30am - 5pm; Closed
Thanksgiving, Christmas Day and
New Years Day

LINCOLN COUNTY

Good Samaritan Health Urgent Care
(715) 536-5511
601 S Center Ave
Merrill, WI 54452
Mon - Fri 8am - 8:30pm; Sat, Sun
and Holidays 8am - 6:30pm

MANITOWOC COUNTY

Aurora Health Center Walk-In Clinic
(920) 755-2101
175 S State St
Mishicot, WI 54228
Mon - Thur 8am - 4:30pm; Fri 8am
- 12pm; Closed Sat, Sun and all
Holidays

Aurora Manitowoc Clinic South
Walk-In Clinic
(920) 686-5700
4100 Dewey St
Manitowoc, WI 54220
Mon - Fri 7am - 7pm; Sat 8am
- 5pm; Sun 8am - 3pm; Call for
Holiday Hours

Aurora Two Rivers Walk-In Clinic
(920) 793-6350
2219 Garfield St
Two Rivers, WI 54241
Mon - Fri 8am - 5pm; Sat 8am -
12pm; Closed Sun and all Holidays

MARINETTE COUNTY

Marinette Menominee Clinic Walk-
In Clinic
(715) 735-7421
3130 Shore Drive
Marinette, WI 54143
Mon - Fri 7am - 5pm; Sat 8am
- 12pm; Closed Sunday and all
Holidays

MILWAUKEE COUNTY

Aurora Advanced Healthcare -
Walk-In Clinic
(414) 771-8602
3289 N Mayfair Rd
Wauwatosa, WI 53222
Mon - Sun 8am - 8pm; All Holidays
9am - 5pm; Closed Christmas; Open
New Years 9am - 5pm

Aurora Advanced Healthcare Walk-
In Clinic
(414) 352-7951
3003 W Good Hope Rd
Milwaukee, WI 53209
Mon - Fri 8am-7pm; Sat and Sun
9am - 5pm; Closed Christmas; Open
New Years

Aurora Health Center Walk-In Clinic
(414) 257-8500
7220 W National Ave
West Allis, WI 53227
Mon - Thur 5pm - 6:30pm; Fri
8:30am - 4:30pm; Sat 9am -
12:30pm; Closed Sundays and all
Holidays

Aurora Healthcare Edgerton Urgent
Care
(414) 325-5244
6901 W Edgerton Ave
Greenfield, WI 53220
Mon - Fri 8am - 9pm; Sat and Sun
9am - 9pm; All Holidays 9am-3pm

Aurora Sinai Medical Center Urgent
Care
(414) 276-4242
946 N Van Buren St
Milwaukee, WI 53202
Mon - Fri 7am - 8pm; Sat and
Sun 8am - 4pm; Christmas Eve/
New Years Eve 7am - 3pm; Closed
Thanksgiving and Christmas day;
Open New Years day 10am - 3pm

Aurora St Lukes Healthcare Center -
Urgent Care
(414) 529-9200
9200 W Loomis Rd, Ste 212
Franklin, WI 53132
Mon - Fri 7am - 8pm; Sat and Sun
8am - 4pm; All Holidays 10am -
3pm; Christmas Eve and New Years
Eve 7am - 3pm

Children's Hospital of WI Urgent
Care
(414) 540-0011
6373 North Jean Nicolet Road
Glendale, WI 53217
Mon - Fri 5pm - 10pm; Sat and Sun
10am - 5pm; Closed all Holidays

Childrens Urgent Care - Children's
Hospital (2nd Floor of Clinic
Building
(414) 266-2280
9000 W Wisconsin Ave, Ste 260
Milwaukee, WI 53226
Mon - Fri 5pm - 10pm; Sat and Sun
11am - 5pm; Call for Holiday Hours

Columbia St Marys Cathedral
Square Urgent Care
(414) 277-6500
734 N Jackson St
Milwaukee, WI 53202
Mon - Fri 8am - 6pm; Sat and Sun
8am - 4pm; All Holidays 8am -
4pm; Photo ID needed and No
Infants under 6 months old

Urgent Care Centers

Columbia St Marys Gateway Medial Clinic
(414) 773-6600
801 South 70th Street
Milwaukee, WI 53214
Mon- Fri 8am - 7pm; Sat 8am - 12pm; Closed Sundays and all Holidays

CSM River Woods Urgent Care Center
(414) 963-7015
375 W River Woods Pkwy
Glendale, WI 53212
Mon - Sun 8am - 6pm; Closed all Holidays

Lake Shore Medical Clinic Walk-In Clinic
(414) 570-4330
331 E Puetz Rd
Oak Creek, WI 53154
Mon - Fri Noon - 8pm; Sat and Sun 10am - 4pm; All Holidays 10am - 2pm (Walk in Patients Only)

Lakeshore Medical Clinic
(414) 281-5153
4131 W Loomis Rd, Ste 110
Greenfield, WI 53221
Mon - Fri 2pm - 8pm; Sat and Sun 9am - 12pm and 5pm - 8pm; Call for Holiday Hours

Lakeshore Medical Clinic Urgent Care
(414) 525-2433
5250 S 108th St
Hales Corner, WI 53130
Mon - Fri 5pm - 8pm; Sat, Sun and all Holidays 9am - 1pm

Medpoint Family Care Center
(414) 461-9250
2501 W Silver Spring Dr, Ste 3
Glendale, WI 53209
Mon - Fri 8am - 5pm; Closed Sat, Sun and all Holidays

Milwaukee Health Services
(414) 372-8080
2555 N Martin Luther King Dr
Milwaukee, WI 53212
Mon - Fri 5pm - 9pm; Sat 11pm - 5pm; Closed Sun and all Holidays

Milwaukee Health Services - Isaacs
Coggs Heritage Health Center
(414) 760-3900
8200 W Silver Spring Dr
Milwaukee, WI 53218
Mon - Fri 8am - 11pm; Closed Sat, Sun and all Holidays

Milwaukee Immediate Care
(414) 873-9800
1971 W Capitol Dr
Milwaukee, WI 53206
Mon 1pm - 6pm; Tues 2pm - 8pm; Wed 10am - 8pm; Thurs 2pm - 8pm; Fri 10am - 1pm; Sat 10am - 2pm; Sun 11am - 2pm; Closed all Holidays

Oak Creek Urgent Care
(414) 570-1122
8201 S Howell Ave, Ste 400
Oak Creek, WI 53154
Mon - Fri 10am - 8pm; Sat 10am - 4pm; Sun 10am - 2pm; Closed all Holidays

Sixteenth Street Clinic
(414) 385-0646
1032 S Cesar E Chavez Dr, Lower Level
Milwaukee, WI 53204
Mon - Fri 5pm - 10pm; Sat and Sun 11am - 5pm; Closed all Holidays

South Eastern Pediatric Kids Urgent Care
(414) 463-6640
8532 W Capitol Dr
Milwaukee, WI 53222
Mon - Fri 6pm - 9pm; Sat 1pm - 7:30pm; Sun 2pm - 7pm; Call for Holiday hours (Ages 21/under)

WFHC St Joseph's Urgent Care
(414) 259-7235
201 N Mayfair Rd
Wauwatosa, WI 53226
24 Hours 7 Days a week including all Holidays

Wheaton Franciscan Healthcare - Brown Deer Walk-In Clinic
(414) 527-7565
9252 N Green Bay Rd
Brown Deer, WI 53209
Mon - Fri 8am - 8pm; Closed Sat, Sun and all Holidays

Wheaton Franciscan Healthcare - Franklin Urgent Care
(414) 325-8460
10101 S 27th St, (Located in ER)
Franklin, WI 53132
Mon - Fri 7am - 3am; Sat, Sun and all Holidays 7am - 3pm

Wheaton Franciscan Healthcare - Franklin Walk-In Clinic
(414) 325-8460
10101 S 27th St, 4th Floor
Franklin, WI 53132
Mon - Fri 9am - 8pm; Sat and Sun 8am - 4pm; Closed all Holidays

Wheaton Franciscan Healthcare - St Francis Walk-in Clinic
(414) 647-5165
3237 S 16th St
Milwaukee, WI 53215
Mon - Sun 7am - 3am; all Holidays 7am - 3am

Wheaton Franciscan Healthcare - St Joseph Campus Urgent Care
(414) 447-2171
5000 W Chambers
Milwaukee, WI 53210
Mon - Fri 9am - 2am; Sat, Sun and all Holidays 9am - 2am

Wheaton Franciscan Healthcare - Wauwatosa Urgent Care
(414) 259-7361
201 N Mayfair Rd
Wauwatosa, WI 53226
24 Hours 7 Days a week including all Holidays

Wisconsin Urgent Care
(414) 431-5004
8500 W Capitol Dr, Ste 100
Milwaukee, WI 53222
Mon - Fri 9am - 7pm; Sat 10am - 3pm; Closed Sun and all Holidays

OCONTO COUNTY

Oconto Hosp & Med Center Urgent Care
(920) 835-1100
820 Arbutus Ave
Oconto, WI 54153
Mon - Fri 6pm - 10pm; Sat, Sun and all Holidays 9am - 10pm

OUTAGAMIE COUNTY

ThedaCare FastCare Darboy
(866) 455-8111
W3208 Van Roy Rd
Appleton, WI 54915
Mon - Fri 8:30am - 8:30pm; Sat 8:30am - 5pm; Sun 10am - 5pm; All Holidays 10am - 2pm

ThedaCare FastCare Northland
(866) 455-8111
1000 W Northland Ave
Appleton, WI 54914
Mon - Fri 8:30am - 8:30pm; Sat 8:30am - 5pm; Sun 10am - 5pm; All Holidays 10am - 2pm

OZAUKEE COUNTY

Aurora Advanced Healthcare - Cedar Creek Urgent Care
(262) 375-3707
215 W Washington St
Grafton, WI 53024
Mon - Fri 8am - 7pm; Sat and Sun and all Holidays 9am - 5pm; Closed Christmas Day

Columbia St Marys Grafton Medical Center Express Care
(262) 243-4920
2061 Cheyenne Court
Grafton, WI 53026
Mon - Fri 8am - 8pm; Sat and Sun 10am - 2pm; Call for Holiday hours

PORTAGE COUNTY

St Michaels Hospital Urgent Care
(715) 343-3100
900 Illinois Ave
Stevens Point, WI 54481
Open 7 days a week 7:30am - 10pm including all Holidays

RACINE COUNTY

Aurora Burlington Walk-In Clinic
(262) 767-8000
248 McHenry St
Burlington, WI 53105
Mon - Thur 8am - 8pm; Fri 8am - 6pm; Sat 8am - 4pm; Closed Sun; Open all Holidays 9am - 1pm

Aurora Health Center Walk In
(262) 884-4088
8348 Washington Ave
Racine, WI 53406
Mon - Fri 7am - 10pm; Sat and Sun 8am - 4pm; Call for Holiday Hours

Aurora Healthcare Waterford Walk-In Clinic
(262) 514-3700
818 Forest Ln
Waterford, WI 53185
Mon - Fri 8am - 8pm; Sat and Sun 8am - 4pm; All Holidays 8am - 3pm

Wheaton Franciscan Healthcare - All Saints Walk-In Clinic
(262) 687-8150
3807 Spring St
Racine, WI 53405
Mon - Fri 8am - 8pm; Sat 8am - 4pm; Sun 10am - 4pm; Call for Holiday Hours

SHAWANO COUNTY

Shawano Medical Center Fast Care
(715) 526-2111
309 N Bartlette St
Shawano, WI 54166
Mon - Fri 8:30am - 8:30pm; Sat and Sun 8:30am - 5pm; All Holidays 10am - 2pm

SHEBOYGAN COUNTY

Aurora Health Center Walk-In Clinic
(920) 449-7000
2600 Kiley Way
Plymouth, WI 53073
Mon - Fri 8am - 8pm; Sat and Sun 8am - 5pm; Closed Easter, Thanksgiving, Christmas and New Years day

Aurora Sheboygan Clinic Walk-In Clinic
(920) 457-4461
2414 Kohler Memorial Dr
Sheboygan, WI 53081
Mon - Fri 7:30am - 7:30pm; Sat and Sun 8am - 12pm; Closed all Holidays

WALWORTH COUNTY

Aurora Health Center
(262) 249-5000
146 E Geneva Square
Lake Geneva, WI 53147
Mon - Thur 8am - 8pm; Fri 9am - 5pm; Sat 9am - 1pm; Closed Sunday; Call for Holiday Hours

WASHINGTON COUNTY

Aurora Advanced Healthcare, Inc
(262) 670-4000
1640 E Sumner St
Hartford, WI 53027
Mon - Thur 7:30am - 7:30pm; Fri 7:30am - 5pm; Sat 8am - 12pm; Sun 10am - 1pm; Call for Holiday hours

Aurora Health Center Walk-In Clinic
(262) 338-1123
205 Valley Ave
West Bend, WI 53095
Mon - Fri 2pm - 10pm; Sat and Sun 8am - 8pm; All Holidays 9am-1pm

Columbia St Marys Germantown Clinic Express Care
(262) 250-7800
N112 W15415 Mequon Road
Germantown, WI 53022
Mon - Fri 8am - 8pm; Sat 8:30am - 12:00pm; Sun Noon - 4pm; Closed all Holidays

Urgent Care Centers

WAUKESHA COUNTY

Aurora Advanced Healthcare - High Pointe Walk-in Clinic
(262) 782-7770
12901 W National Ave
New Berlin, WI 53151
Mon - Fri 8am - 7pm; Sat and Sun 9am - 1pm; Call for Holiday hours

Aurora Advanced Healthcare Walk-In Clinic
(262) 251-7500
N84W16889 Menomonee Ave
Menomonee Falls, WI 53051
Mon - Fri 8am - 8pm; Sat and Sun 9am - 5pm; All Holidays 9am-1pm

Aurora Health Center Walk-In Clinic
(262) 860-7800
2801 S Moorland Rd
New Berlin, WI 53151
Mon -Thur 8am -5pm; Fri 8am - 5pm; Call for Holiday hours

Aurora Medical Group Walk-in Clinic
(262) 896-6000
W231N1440 Corporate Ct
Waukesha, WI 53186
Mon - Fri 8:30am - 8:30pm; Sat and Sun 8am - 4pm; All Holidays 9am - 1pm

Aurora St Lukes New Berlin Urgent Care
(262) 827-2955
14555 W National Ave
Waukesha, WI 53151
Mon - Fri 7am - 8pm; Sat and Sun 8am - 4pm; Holidays 10am - 3pm; Closed Thanksgiving and Christmas

Aurora Wilkinson Medical Clinic - Urgent Care
(262) 569-3080
1284 Summit Ave
Oconomowoc, WI 53066
Mon - Fri 8:30am - 8:30pm; Sat and Sun 8am - 4pm; All Holidays 9am - 1pm

Children's Urgent Care New Berlin
(262) 432-7599
4855 S Moorland Rd, 3rd Fl
New Berlin, WI 53151
Mon - Fri 5pm - 10pm; Sat and Sun 11am - 5pm; Closed all Holidays

Lakeshore Medical Clinic
(414) 422-4000
S68 W15500 Janesville Rd
Muskego, WI 53150
Mon - Fri Noon - 8pm; Sat and Sun 10am - 4pm; Closed Christmas Day and New Years Day

ProHealth Care Medical Associates
(262) 928-7100
2085 N Calhoun Rd
Brookfield, WI 53005
Mon - Fri 7:30am - 8pm; Sat 9am - 5pm; Sun 10am - 3pm; Call for Holiday hours

ProHealth Care Medical Associates
(262) 928-4900
2750 Golf Rd
Delafield, WI 53018
Mon - Fri 8am - 8pm; Sat 9am - 5pm; Sun 10am - 3pm; Closed all Holidays

ProHealth Care Medical Associates
(262) 928-1900
240 Maple Ave
Mukwonago, WI 53149
Mon - Fri 7am - 9pm; Sat and Sun 8am - 5pm; Call for Holiday Hours

ProHealth Care Medical Associates
(262) 928-8400
1185 Corporate Center Dr
Oconomowoc, WI 53066
Mon - Fri 8am - 8pm; Sat 9am - 5pm; Sun 10am - 3pm; Call for Holiday Hours

ProHealth Care Medical Associates
(262) 513-7555
2130 Big Bend Rd
Waukesha, WI 53189
Mon - Fri 8am - 8pm; Sat 9am - 5pm; Sun 10am - 3pm; Call for Holiday hours

WAUPACA COUNTY

Riverside Medical Center
(715) 258-1000
800 Riverside Dr
Waupaca, WI 54981
Mon - Fri 6pm - 10pm; Sat, Sun and all Holidays Noon - 9pm

WAUSHARA COUNTY

Washara Family Physicians Urgent Care
(920) 622-5560
701 Grove Ave
Wild Rose, WI 54984
Mon - Sat 8am - 8pm; Closed Sun and all Holidays

WINNEBAGO COUNTY

Aurora Health Center Walk-In Clinic
(920) 303-8700
855 N Westhaven Dr
Oshkosh, WI 54904
Mon - Fri 8am - 8pm; Sat 8am - 2pm; Sun 8am - 12pm; Closed Thanksgiving, Christmas and New Years Day

Aurora Health Center-Neenah Walk-In Clinic
(920) 720-8200
1136 Westowne Dr
Neenah, WI 54956
Mon - Fri 8am - 8pm; Sat 8am - 2pm; Sun Closed; Call for Holiday Hours

This handbook contains the information you need to know about Molina Healthcare of Wisconsin and your health care benefits. The following icons will help you read the handbook. They will help you get the important information you need to get the most out of being a Molina Healthcare member.



Important Information

This icon points out important information you will need to use your benefits.



Medical Home

One of the most important things you can do to take care of your health is to pick a primary care provider and visit your provider for your health care needs. This is called establishing a medical home. When you see this icon, there is information about how to establish a medical home.



Nurse Advice Line

This icon is used to remind you that the 24-Hour Nurse Advice Line is always available to help you if you have medical questions.

| | |
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Welcome To Molina Healthcare Health Plan

Thank you for choosing Molina Healthcare Health Plan as your Health Maintenance Organization (HMO). Molina Healthcare looks forward to serving you and keeping you healthy. This is your handbook, and should serve as your guide to understanding your Molina Healthcare benefits. Please read it carefully. The handbook will help you understand your coverage with Molina Healthcare Health Plan, and how to use our services. Your handbook has information that you and your family need to know. This handbook is for all members of Molina Healthcare Health Plan. As a member of Molina Healthcare Health Plan, you will receive all your health care from Molina Healthcare Health Plan doctors and hospitals.

Molina Healthcare Health Plan has Member Services staff that speaks English, Spanish, and Hmong. Interpreters are available for other languages. Please feel free to call Member Services at 1-888-999-2404 if you have questions or if you need an interpreter. Molina Healthcare has a TTY (hearing impaired) line 1-800-947-3529.

The first things you should do are:

1. Read your handbook carefully.
2. Put your handbook in a place where you can refer to it quickly.
3. You will also need to select the Primary Care Provider (PCP) that you and your children would like to have.



If you have any problems in reading or understanding this, or any other Molina Healthcare information, please contact our Member Services at 1-888-999-2404 (TTY for the hearing impaired: 1-800-947-3529) for help at no cost to you. We can help to explain the information or provide the information orally, in English or in your primary language. We may have the information printed in certain other languages or in other ways. If you are visually or hearing impaired, we will provide special help.



Important Telephone Numbers

Member Services

Our regular Member Services hours are 8:00 am to 5:00 pm Monday through Friday

1-888-999-2404 or 414-847-1776

TTY (for hearing impaired): 1-800-947-3529

24-Hour Nurse Advice Line

Molina Healthcare's Nurse Advice Line is available 24 hours a day, 7 days a week to answer questions that you have about your health.

Molina Healthcare's 24-Hour Nurse Advice Line:

English: 1-888-275-8750

Español: 1-866-648-3537

TTY English: 866-735-2929

TTY Espanol: 866-833-4703

Mental Health, Substance Abuse Services

1-888-999-2404 or for the hearing impaired, please call TTY/1-800-947-3529

Dental Services - BadgerCare Plus and Medicaid SSI Members

Only in the following counties: Milwaukee, Waukesha, Racine, Kenosha, Washington, and Ozaukee

1-888-307-6563 DentaQuest

Outside of the above counties please call 1-800-362-3002.

Vision Care

414-760-7400 Milwaukee County

1-800-822-7228 All other counties

Transportation Assistance for Non-Emergency Health Care

Call LogistiCare at 1-866-907-1493 (or TTY 1-866-288-3133). LogistiCare is open between 7:00 a.m. and 6:00 p.m., Monday through Friday.

Remember to plan ahead. Rides need to be scheduled 48 hours in advance.

Member Advocate

1-888-999-2404

TTY (Hearing Impaired)

After Business Hours, before 8:00am or after 5:00pm Monday to Friday, and Weekends –Please use Wisconsin Relay Service 711 and ask for 1-800-947-3529

Enrollment Specialist

1-800-291-2002

BadgerCare Plus or Medicaid SSI Pharmacy Member Services

1-800-362-3002

Molina Healthcare's Member Services Department is here to answer any questions you have about your membership with Molina Healthcare. Among other things, the representatives can help you:

- Understand your benefits
- Update your contact information
- Pick a primary care provider (PCP)

You can contact Member Services at 1-888-999-2404 (TTY for the hearing impaired: 1-800-947-3529) from 8:00 a.m. to 5:00 p.m., Monday through Friday. You can also find information about your Molina Healthcare benefits online at www.MolinaHealthcare.com. After business hours, please leave a message, and your call will be returned as soon as possible. Calls for a request for the authorization of medical services will be returned the next business day.

Molina Healthcare members have access to many services through the Molina Healthcare website www.MolinaHealthcare.com. Member Self Service is available 24 hours a day, seven days a week.

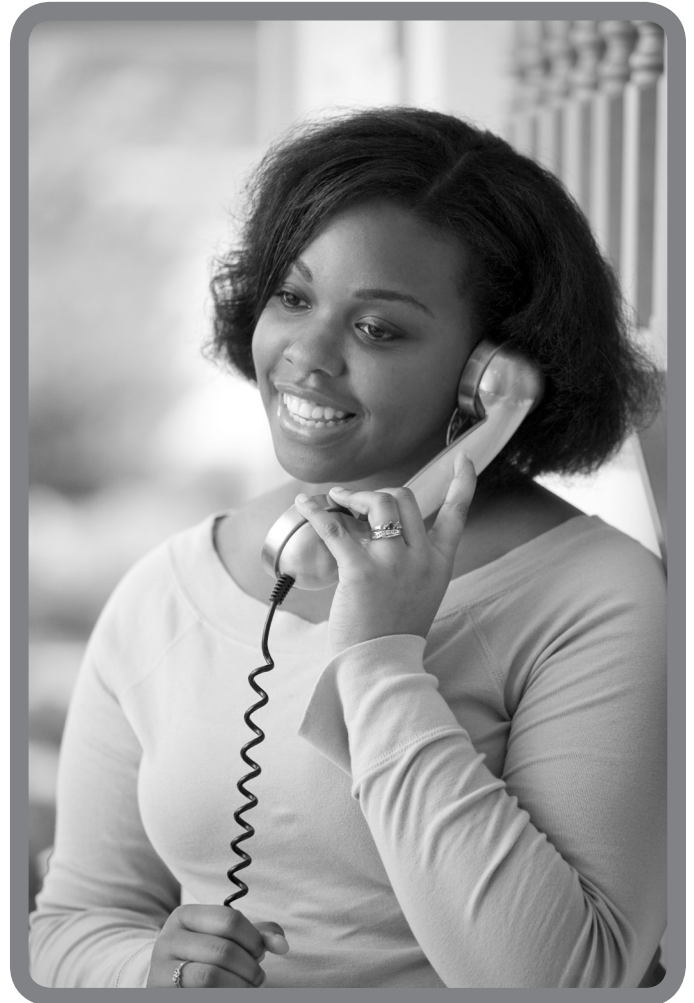
You can use Member Self Service to:

- Change your address or phone number.
- Find a Molina Healthcare contracted health care provider.
- Change your Primary Care Provider (PCP).
- File a complaint.

The Molina Healthcare office is closed on the following days:

- New Year's Day
- Martin Luther King Jr. Holiday
- Memorial Day Holiday
- Independence Day
- Labor Day
- Thanksgiving Day
- Day after Thanksgiving
- Christmas Eve Day – Open 8:00 a.m. until Noon
- Christmas Day
- New Year's Eve Day – Open 8:00 a.m. until Noon

A holiday that falls on a Saturday is observed on the Friday before. A holiday that falls on a Sunday is observed the Monday after. Molina Healthcare makes every effort to give you and your family the best care. Molina Healthcare does many studies throughout the year to find areas for improvement and takes steps to bring you higher quality care and better service. This process is called "quality improvement." Molina Healthcare welcomes suggestions on how to serve you better. If you have suggestions, please call Member Services at 1-888-999-2404 (TTY for the hearing impaired: 1-800-947-3529).



Your Medical Home

One of the most important steps in taking care of your health is establishing a medical home. When you choose a primary care provider (PCP), you are choosing a medical home. Your PCP is the provider who will help you with most of your medical needs. Your PCP will give you care, offer advice, and refer you to a specialist when necessary. When you pick a PCP who meets your needs and whom you are comfortable with, you can develop a lasting relationship that will help to ensure a health care partnership for years to come.



Choosing a Primary Care Provider (PCP)

Each member of Molina Healthcare must choose a primary care provider (PCP) from Molina Healthcare's provider directory. Your PCP is your personal provider. Your PCP is an individual physician, physician group practice, advanced practice nurse or advanced practice nurse group practice trained in family medicine (general practice), internal medicine, or pediatrics. In certain cases, a specialist can be assigned as your PCP.

Your PCP will work with you to direct your health care. Your PCP will do your checkups and shots and treat you for most of your routine health care needs. If needed, your PCP will send you to other doctors (specialists) or admit you to the hospital. Your primary care provider will be sure you receive the specialist and hospital care you need.

The How to Pick a PCP Checklist attached to the back cover of this handbook will help you select a PCP. The PCPs contracted with Molina Healthcare are listed in the provider directory. You can access the provider directory online at www.MolinaHealthcare.com. If you need a printed copy of the provider directory, or if you would like assistance with choosing a PCP, please contact Member Services at 1-888-999-2404 (TTY for the hearing impaired: 1-800-947-3529).

After you have selected a doctor that you and your children would like to have as your Primary Care Provider, fill out the PRIMARY CARE PROVIDER (PCP) SELECTION FORM that is included in this mailing. Mail it in the envelope provided. You will not need a stamp.

If you need help choosing a doctor please call our Member Services Department at **1-888-999-2404** (TTY for the hearing impaired: 1-800-947-3529).

If you do not choose a PCP, Molina Healthcare will choose one for you. When we make this choice for you, we will take your home address, the language you speak and the providers your family members see into consideration. However, it is preferable that you pick your own PCP. You are the person who can best make the decision. To change to a different PCP, visit our website at www.molinahealthcare.com or call our Member Services Department at 1-888-999-2404.

Once you have a PCP, you should schedule a checkup soon, even if you are not sick. During the appointment, you will have a chance to get to know your PCP and to ask a number of questions that will help you develop a good relationship. The First Visit Checklist attached to the back cover of this handbook will help you prepare for your appointment.

You can reach your PCP by calling the PCP's office. If you would like to know more about your PCP or other Molina Healthcare providers, call Member Services. You can get information about your provider's professional qualifications, such as medical school attended, residency completed, and board certification status. You can also get information on the languages your provider speaks.

You can use the Internet to view the provider directory online. Did you know the Internet is free at most public libraries? There are companies that allow you to set up free email accounts. If you need help learning to use the Internet, ask your librarian. If you would like printed copies of any of the information you see on Molina Healthcare's website, please call Member Services. The information is available in English but can be provided in your primary language on request.

Changing Your PCP

If for any reason you want to change your PCP, you can do so at anytime online through our website at www.molinahealthcare.com, or you can call the Member Services Department to ask for the change. For the names of the PCPs in Molina Healthcare, you may look in your provider directory if you requested a printed copy, on our website at www.molinahealthcare.com, or you can call the Molina Healthcare Member Services Department at 1-888-999-2404 (TTY for the hearing impaired: 1-800-947-3529) for help.

Getting Medical Services

Getting Care from Your Primary Care Provider (PCP)

It is important to call your PCP first when you need care. Your PCP will manage all your health care. If you think you need to see another doctor or a specialist, ask your PCP. Your PCP will help you decide if you need to see another doctor, and give you a referral. Remember, you must get approval from your PCP before you see another doctor.



You can choose your PCP from those available. NOTE: For women, you may also see a women's health specialist (for example an OB/GYN doctor or a nurse midwife) without a referral, in addition to choosing your PCP. There are Molina doctors who are sensitive to the needs of many cultures.

There may be copays when you see your doctor if you are covered under the BadgerCare Plus Plan or Core Plan.

Making an Appointment with your PCP

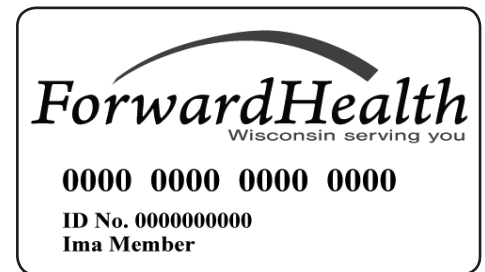
Once you are a member of Molina Healthcare Health Plan, you can start seeing your doctor right away. If you have not picked a doctor or clinic yet or need help making an appointment, call Member Services at 1-888-999-2404.

Missed Appointments

It is important that you and your family keep all your health care appointments. If you are not able to keep the appointment, call your doctor's office and let them know as soon as possible. Otherwise, the provider may refuse to schedule future appointments.

ForwardHealth ID Card

Always carry your ForwardHealth card with you and show it every time you get care. You may have problems getting care or prescriptions if you do not have your ForwardHealth card with you. Also, bring any other health insurance cards you may have. Remember to always give health care providers your ForwardHealth card.



24 Hour Nurse Advice Line

Molina Healthcare Health Plan's Nurse Advice Line is available 24 hours a day, 7 days a week to answer questions that you have about your health. For example, you can call:

- If you have a medical question after your primary care provider's normal business hours.
- When your child is sick and you are not sure what to do.
- If you have a follow-up question after a medical appointment.
- If you are not sure where to go for care.

The phone lines are staffed by registered nurses. Many of the nurses are fluent in both English and other languages.

You can call Molina Healthcare's 24- Hour Nurse Line at 1-888-275-8750. For the hearing impaired, please call TTY English 1-866-735-2929 or TTY Espanol 1-866-833-4703

Where can you get services?

It is important to remember that you must get services covered by Molina Healthcare from clinics and/or providers in Molina Healthcare's provider network. See pages 11-19 for information on services covered by Molina Healthcare. The only time you can use providers that are not in Molina Healthcare's provider network is for:

- Emergency services
- An out-of-network provider that Molina Healthcare has approved you to see

If you are outside of the Molina Healthcare service area and you need non-emergency medical care, the provider must first contact Molina Healthcare to get approval before providing any services. If you are away from Molina Healthcare's service area and need emergency care, go to the nearest emergency department. You have the right to go to any facility that provides emergency services.

Emergency Services

Emergency services are services for a medical problem that you think is so serious that it must be treated right away by a doctor. We cover care for emergencies both in and out of the county where you live. Emergency care is available 24 hours a day, 7 days a week.

You do not have to contact Molina Healthcare for an okay before you get emergency services. If you have an emergency, call 911 or go to the NEAREST emergency room (ER) or other appropriate setting.



If you are not sure whether you need to go to the emergency room, call your primary care provider or Molina Healthcare's 24-Hour Nurse Advice Line at 1-888-275-8750 or 1-866-648-3537 (Español), (TTY for the hearing impaired: 1-866-735-2929). Your PCP or the Molina Healthcare Nurse Advice Line can talk to you about your medical problem and give you advice on what you should do.

Remember, if you need emergency services:

- Go to the nearest hospital emergency room or other appropriate setting. Be sure to tell them that you are a member of Molina Healthcare, and show them your ForwardHealth card.
- If the provider who is treating you for an emergency takes care of your emergency but thinks you need other medical care to treat the problem that caused your emergency, the provider must call Molina Healthcare.
- After an emergency room visit, contact your PCP to make an appointment for follow-up care. Do not go to the emergency room for follow-up care.
- If the hospital has you stay, please make sure that Molina Healthcare is called within 24 hours. If you are away from Molina Healthcare's service area and need emergency care, go to the nearest emergency room. You have the right to go to any facility that provides emergency services.

Post-stabilization services are Medicaid-covered services that you receive after emergency medical care. Post-stabilization care services are provided and covered 24 hours a day, 7 days a week.

Getting Medical Services

If you have called 911 or accessed emergency care, you must notify Molina Healthcare WITHIN 24 HOURS, or as soon as reasonably possible, so your care can be coordinated. You can also have a friend or family member call on your behalf.

Below is a quick reference chart to help you learn where to go for medical services

| Type Of Care Needed | Where To Go And Whom To Call |
|---|--|
| <p>Emergencies may involve, but are not limited to:</p> <ul style="list-style-type: none"> • Miscarriage/pregnancy with vaginal bleeding • Seizures or convulsions • Unusual or excessive bleeding • Unconsciousness • Overdose / Poisoning • Severe burns • Chest pain • Difficulty breathing | <p>Call 911 if it is available in your area or go to the nearest emergency department. 911 is the local emergency telephone system available 24-hours a day, 7 days a week.</p> <p style="text-align: center;">Poison Control Center 1-800-222-1222</p> |
| <p>Non-emergency treatment for an illness or injury. Call your PCP to request an appointment.</p> | <p>Call your PCP to request an appointment.</p> |
| <p>Routine care such as a physical exam, wellness visit or immunizations.</p> | <p>Call your PCP to request an appointment.</p> |
| <p>Family Planning and Women's Health Services</p> | <p>You do not need a referral to receive Women's Health or Family Planning Services. You can go directly to your PCP, an OB/GYN listed in the provider directory, Certified Nurse Midwife, or Qualified Family Planning Provider to receive these services.</p> |
| <p>Specialist appointments</p> | <p>Call your PCP first. Your provider will give you a referral if needed.</p> |
| <p>Mental Health and Substance Abuse Services</p> | <p>Call your local county Department of Human Services Agency or contact Molina Healthcare for authorization to see a Molina Healthcare provider.</p> |

Emergency Care from a Non-Molina Healthcare Health Care Provider

If you need emergency care, go to a Molina Healthcare provider for help if you can. BUT, if the emergency is severe, go to the nearest provider (Hospital, Doctor, or Clinic). You may want to call 911 or your local police or fire department emergency services if the emergency is severe.

If you must go to a hospital or provider that is not listed in your provider directory, call Molina Healthcare at 1-888-999-2404 (TTY for the hearing impaired: 1-800-947-3529) as soon as you can and tell us what happened. This is important so we can help you get follow up care.



Remember, hospital emergency rooms are for true emergencies only. Call your doctor or our 24-hour Nurse Line at 1-888-275-8750 before you go to the emergency room, unless your emergency is severe.

Urgent Care

Urgent care is care you need sooner than a routine doctor's visit. Urgent care is not emergency care. Do not go to a hospital emergency room for urgent care unless your doctor tells you to go there.

Some examples of urgent care are:

- Most broken bones
- Bruises or sprains
- Minor cuts
- Minor burns
- Non-severe bleeding
- Most drug reactions

If you need urgent care, call Member Services at 1-888-999-2404 or (TTY for the hearing impaired: 1-800-947-3529). We will tell you where you can get care.

Please see the list of Urgent Care centers at the back of this book for a location near you.

You must get urgent care from Molina Healthcare Health Plan doctors unless you get our approval to see a non-Molina Healthcare Health Plan doctor.

As a Molina Healthcare member, you can call our **Nurse Advice Line** and talk with a nurse 24 hours a day, 7 days a week. Our nurses can answer questions that you have about your health. For example, you can call if you have a health care question after your provider's normal business hours or when your child is sick and you aren't sure what to do. You can call if you have a follow up question after a medical appointment or if you are not sure where to go for care. The phone lines are staffed by registered nurses. **Call 1-888-275-8750.** For the hearing impaired, please call **TTY/866-735-2922.**

Remember:

Do not go to a hospital emergency room for urgent care unless you get approval from Molina Healthcare Health Plan first.

After-Hours or Non-Emergency Care

If your provider's office is closed or your provider cannot see you right away, there are some steps you can take to stop your injury or illness from getting worse.

Call your PCP for advice. Even if your provider's office is closed, the office has someone available 24 hours a day, 7 days a week who will let you know what to do.

Getting Medical Services



If you cannot reach your provider's office, call Molina Healthcare's 24-Hour Nurse Advice Line at 1-888-275-8750 or 1-866-648-3537 (Español), (TTY for the hearing impaired: 1-866-648-3537). Nurses are always available to answer your questions.

Go to a participating urgent care center listed in the front of this handbook. You do not need permission from a provider to go to an urgent care center. If you visit an urgent care center, always call your PCP after your visit to schedule follow-up care.

How to Get Medical Care When You Are Away From Home

Follow these rules if you need medical care but are too far away from home to go to your assigned PCP or clinic.

- For severe emergencies, go to the nearest hospital, clinic, or doctor.
- For urgent or routine care away from home, you must get approval from us to go to a different doctor, clinic or hospital. This includes children who are spending time away from home with a parent or relative. Call us at 1-888-999-2404 for approval to go to a different doctor, clinic, or hospital.

Mental Health and Substance Abuse Services

If you need mental health and/or substance abuse services, call Member Services for information at 1-888-999-2404 (TTY for the hearing impaired: 1-800-947-3529). Please see your provider directory or call our Member Services Department for the names and telephone numbers of the facilities near you. You can also look at the provider directory online at www.MolinaHealthcare.com.

Your Benefits as a Molina Member

New Member Information

If you were on Medicaid fee-for-service the month before you became a Molina Healthcare member and have health care services already approved and/or scheduled, be sure to tell your provider that you are now a member of Molina Healthcare.

Services Covered by Molina Healthcare

Molina Healthcare covers all medically necessary Medicaid-covered services, except for the pharmacy services that are covered by Wisconsin Medicaid listed on pages 16 and 17. Most services are available to you without any prior authorization (PA); however, some services do require PA. For a PA, a provider must call Molina Healthcare about the care they would like you to receive. Molina Healthcare will review the request and let your provider know if the request is authorized before they can give you the service. This is done to ensure that you get appropriate care.

Here are a few of the services that Molina requires prior authorization for:

- Pain Management Services
- Durable Medical Equipment over \$500
- Physical Therapy after the first 6 visits
- Home Health Care after the first 3 visits
- Personal Care Services
- MRIs, CT scans, and other specialty testing
- Mental Health services after the first 20 visits
- Sleep Studies
- Any services out of the Molina provider network
- Most outpatient surgeries

Your provider has a full list, and will know what services Molina requires prior authorization for. If you have questions about a prior authorization request, you can contact Member Services. Prior Authorization staff is available to assist you between 8:00 a.m. and 5:00 p.m., Monday through Friday. After business hours, you can leave a message and your call will be answered the next business day.

There are other times when your PCP may give you a referral. A referral is a request from a PCP for his or her patient to see a specialist. A specialist is a provider who focuses on a particular kind of health care. Molina Healthcare encourages you to see your PCP for referrals so that your care can be coordinated. Because your PCP is the person who will submit PAs on your behalf and will refer you to specialists when necessary, it is important that you develop a good relationship with him or her. A good relationship will help to ensure that your PCP can give you the best care for your needs.

Costs to you

Molina Healthcare is responsible for providing all medically necessary covered services under BadgerCare Plus-Standard Plan, BadgerCare Plus-Benchmark Plan, BadgerCare Plus-Core Plan, and Medicaid SSI. Most of these services are at no cost to you.

For BadgerCare Plus Standard Plan, BadgerCare Plus Benchmark Plan, and BadgerCare Plus Core Plan members: you may be asked to pay a small amount for certain services. Please see the charts on the following pages for more information.

The following Benchmark Plan members will not have to pay for services:

- Pregnant women.
- Members 19 years of age and under who are members of a federally recognized tribe.

Please review the chart on the following pages to learn more about potential costs to you. If you have questions about your coverage please call 1-888-999-2404 or TTY 1-800-947-3529.

Your Benefits as a Molina Member

| Molina Healthcare Copay Sheet | BadgerCare Plus Standard Plan | BadgerCare Plus Benchmark Plan | Medicaid SSI | BadgerCare Plus Core Plan |
|---|--|--|--|---|
| OFFICE VISITS | Per visit means one charge per office call regardless of what is done. | Per visit means one charge per office call regardless of what is done. | | |
| Podiatry Services | \$1 copay | \$15 copay per visit | no copay | no copay |
| Office Visit - PCP | \$1 copay | \$15 copay per visit | no copay | no copay |
| Office Visit - Specialist | \$1 copay | \$15 copay per visit | no copay | no copay |
| Office Surgery | \$1 copay | \$15 copay per visit | no copay | no copay |
| Urgent Care Services | no copay | \$15 copay per visit | no copay | no copay |
| Nurse Midwife Services | no copay | no copay | no copay | N/A |
| Nurse Practitioner Services | \$1 copay | \$15 copay per visit | no copay | no copay |
| Diagnostic XRay & Lab office location | \$1 copay | no copay | no copay | no copay |
| Immunizations | no copay | no copay | no copay | no copay |
| HealthChecks | no copay | no copay | no copay | no copay |
| Family Planning | no copay | no copay | no copay | not covered |
| HOSPITAL SERVICES | | | | |
| Emergency Room Services - Facility bill | no copay | \$60 per visit only if not admitted | no copay | no copay |
| Emergency Room Services - Professional bill | no copay | no copay | no copay | no copay |
| Outpatient Hospital Services - Facility bill | no copay | \$15 copay per visit | no copay | \$3 copay per visit (\$300 combined limit per enrollment year) |
| Outpatient Hospital Services - Professional bill | \$1 copay | no copay | no copay | no copay |
| Inpatient Hospital Services - Facility bill | no copay | \$100 copay per stay | no copay | \$3 copay per day, \$75 cap per stay (\$300 combined limit per enrollment year) (NO INPATIENT BEHAVIORAL HEALTH IS COVERED) |
| Inpatient Hospital Services - Professional bill | no copay | \$15 copay per visit | no copay | no copay (NO INPATIENT BEHAVIORAL HEALTH IS COVERED) |
| TRANSPORTATION | | | | |
| Ambulance | no copay | \$50 copay per trip | no copay | no copay |
| Cab | no copay | as of 7/1/2010 no copay | no copay | Not covered but Molina Healthcare will pay for rides to and from their comprehensive physical exam. Once we have evidence that they received that exam we will pay for transportation for all other covered Medicaid services for that member in Milwaukee County only. |
| SMV | no copay | as of 7/1/2010 no copay | no copay | not covered |
| MISC SERVICES | | | | |
| Ambulatory Surgery Services - facility bill | \$2 copay | \$15 copay per visit | no copay | no copay |
| Ambulatory Surgery Services - professional bill | no copay | no copay | no copay | no copay |
| Anesthesia | no copay | no copay | no copay | no copay |
| Cardiac Rehab (not included in 20 visit PT/OT/ST maximum) | no copay | \$15 copay per visit, 36 visits maximum per enrollment | no copay | no copay |
| Chemo or Radiation Therapy | no copay | \$15 copay per visit | no copay | no copay |
| Hearing Services & Supplies | no copay | as of 8/1/2010 for members 17 years and younger, \$15 | no copay | not covered |
| Diagnostic XRay & Lab independent lab or professional | \$1 copay | no copay | no copay | no copay |
| Dialysis Facility | no copay | no copay | no copay | no copay |
| Disposable Medical Supplies | No copay for supplies covered by HMO. Some DMS items not covered by HMOs so copays may apply for certain people and/or for certain services if paid under FFS. | No copay for supplies covered by HMO. Some DMS items not covered by HMOs so copays may apply for certain people and/or for certain services if paid under FFS. | No copay for supplies covered by HMO. Some DMS items not covered by HMOs so copays may apply for certain people and/or for certain services if paid under FFS. | No copay for supplies covered by HMO. Some DMS items not covered by HMOs so copays may apply for certain people and/or for certain services if paid under FFS. |

Your Benefits as a Molina Member

| Molina Healthcare Copay Sheet | BadgerCare Plus Standard Plan | BadgerCare Plus Benchmark Plan | Medicaid SSI | BadgerCare Plus Core Plan |
|--|--|--|--|--|
| Home Health Services | no copay | \$15 copay per visit, 60 visits per enrollment year. | no copay | no copay, covered for 30 contiguous days (limited to 100 visits) following an inpatient stay, w/auth |
| Personal Care Worker (PCW) services | no copay | not covered | no copay | not covered separately, see Home Health Services |
| Hospice Services | no copay | no copay, 360 visits lifetime max | no copay | no copay, w/auth |
| Home IV Therapy | no copay | see Home Health Services | no copay | not covered separately, see Home Health Services |
| Pharmacy Prescription Drugs | Not covered by HMOs, so copays may apply for certain people and/or for certain services when paid under FFS. | Not covered by HMOs, so copays may apply for certain people and/or for certain services when paid under FFS. | Not covered by HMOs, so copays may apply for certain people and/or for certain services when paid under FFS. | Not covered by HMOs, so copays may apply for certain people and/or for certain services when paid under FFS. |
| Prenatal Services including PNCC | no copay | no copay | no copay | Prenatal services are not covered under the Core Plan. |
| Private Duty Nursing | no copay | not covered | no copay | not covered separately, see Home Health Services |
| PT, OT, ST therapy services - facility bill from home health agency | \$1 copay Copayment obligation limited to the first 30 hours or \$1,500, whichever occurs first, during one calendar year. Copayments limits are calculated separately for each therapy discipline. | \$15 copay per visit, 20 visit (each type limit) per enrollment year | no copay | not covered separately, see Home Health Services |
| PT, OT, ST therapy services - facility bill from outpatient hospital | \$1 copay Copayment obligation limited to the first 30 hours or \$1,500, whichever occurs first, during one calendar year. Copayments limits are calculated separately for each therapy discipline. | \$15 copay per visit, 20 visits (each type) per enrollment year | no copay | \$3 copay per visit (\$300 combined limit per enrollment year) |
| PT, OT, ST therapy services - professional bill | \$1 copay Copayment obligation limited | \$15 copay per visit, 20 visits (each type) per enrollment | no copay | no copay, 20 visits (each type) per enrollment year |
| Rehabilitation Inpatient or Outpatient | \$1 copay Outpatient only | see Inpatient and Outpatient hospital copays | no copay | see Inpatient and Outpatient hospital copays |
| Respiratory Therapy | no copay | \$15 copay per visit | no copay | no copay |
| Skilled Nursing Facility (SNF) | no copay | no copay, 30 days maximum | no copay | not covered *see below |
| Urgent Care Services | no copay | \$15 copay per visit | no copay | no copay |
| Dental Services | no copay Dental is only covered through Molina Healthcare in Milwaukee, Waukesha, Racine, Ozaukee, Washington and Kenosha Counties. | Only pregnant women and children under 19 have dental coverage. There are no copays. Children under 18 must meet \$200 deductible per enrollment year and have coverage of 50% of the maximum allowable for each service after that. Preventive and diagnostic services are not subject to the deductible but do have the 50% benefit. | no copay Dental is only covered through Molina Healthcare in Milwaukee, Waukesha, Racine, Ozaukee, Washington and Kenosha Counties. | ADA (American Dental Association) codes are not covered by HMOs under the Core Plan. Some dental services are covered but are under FFS. |
| Mental Health AODA Services | no copay | Copayment amounts: \$10 per day for day treatment, \$50 per stay for inpatient, \$15 per visit for narcotic treatment, \$15 per visit for outpatient mental health services, \$15 per visit for mental health services | no copay | Molina Healthcare is waiving copay in the office, outpatient hospital copays apply as listed above (same \$300 combined limit per enrollment year). Outpatient services (mental health or substance abuse) only covered by a psychiatrist. There IS NO INPATIENT coverage in any facility for behavioral health. |
| Vision Routine & Hardware | no copay | \$15 copay per visit, one eye exam every 2 years, eyeglasses and contact lenses not covered | no copay | not covered |

Your Benefits as a Molina Member

Mental Health and Substance Abuse Services

Molina Healthcare Health Plan provides mental health and substance abuse (drug and alcohol) services to all members. If you need these services, call us at 1-888-999-2404. BadgerCare Plus Core Plan members only have coverage for services provided by a psychiatrist or Advanced Practice Nurse Practitioner.

Other Important Information

Pharmacy Benefits and Supplies

Pharmacy benefits and disposable medical supplies (supplied by pharmacies) provided to Medicaid members are not provided by the HMO. These services are handled by the State through FFS.

Your prescriptions and certain over the counter items are provided by the State, not Molina Healthcare Health Plan.

You may receive a prescription from a Molina Healthcare doctor, specialist, or dentist. You can fill your prescription at any pharmacy that is a provider for BadgerCare Plus and Medicaid SSI.

Please show your ForwardHealth ID card to the pharmacy when you get your prescriptions filled. You may have co-pays or have limits on covered medications.

If you have questions regarding prescriptions you can call the Wisconsin Medicaid Customer Service at 1-800-362-3002.

Other Insurance Coverage

If you have other insurance in addition to Molina Healthcare Health Plan, you must tell your doctor or other provider. Your health care provider must bill your other insurance before billing Molina Healthcare Health Plan. If your Molina Healthcare Health Plan doctor does not accept your other insurance, call the HMO Enrollment Specialist at 1-800-291-2002. The Enrollment Specialist can tell you how to match your HMO enrollment with your other insurance so you can use both insurance plans.

When You May Be Billed For Services

It is very important to follow the rules when you get medical care so you are not billed for services. You must receive your care from Molina Healthcare Health Plan providers and hospitals, unless you have our approval to go somewhere else. The only exception is for severe emergencies.

If you travel outside of Wisconsin and need emergency services, health care providers can treat you and send claims to Molina Healthcare Health Plan. You may have copayments for emergency services provided outside Wisconsin, but the charges for Medicaid covered services will be no more than charges for services in the network.

Molina Healthcare Health Plan does not cover any service, including emergency services, provided outside the United States, Canada and Mexico. If you need emergency services while in Canada or Mexico, Molina Healthcare will cover the service only if the doctor or hospital's bank is in the United States. Other services may be covered with HMO approval, if the provider has a United States bank. Please call Molina Healthcare if you receive any emergency services outside the United States.

Your Benefits as a Molina Member

If You Are Billed

Under **BadgerCare Plus-Standard Plan** and **Medicaid SSI**, if you receive a bill for services, call our Member Services Department at 1-888-999-2404 or TTY for the hearing impaired: 1-800-947-3529.

You do not have to pay for covered services that are provided by a BadgerCare Plus or Medicaid SSI certified provider that Molina Healthcare Health Plan is required to provide for you unless prior authorization is denied and you are told there will be a charge for the service before it is provided.

Generally, charging a member for a non-covered service is allowed, except for certain non-covered services or activities related to covered services, like missed appointments, telephone calls and translation services.

Under **BadgerCare Plus-Benchmark Plan and Core Plan**, Molina Healthcare Health Plan and its providers and subcontractors may bill you for the deductibles or copays for covered services that are provided by a BadgerCare Plus certified provider.

You may request non-covered services from providers, and providers may collect payment for non-covered services from you if you accept responsibility for payment and make payment arrangements with the provider. Providers may bill you up to their usual and customary charges for non-covered services.

Looking at What's New

Molina Healthcare wants to ensure that you are receiving the best care possible. We look at new types of services. We also look at new ways to provide those services. Molina Healthcare reviews new studies to see if new services are proven to be safe and should be added to your benefit package. We review the type of services below at least once a year:

- Medical services
- Mental health services
- Medicines
- Equipment

For more information on this process, please call Member Services at 1-888-999-2404 (TTY for the hearing impaired: 1-800-947-3529).

HealthCheck

HealthCheck is a preventive health checkup program for members under the age of 21 (not covered for BadgerCare Plus Core Plan members). The HealthCheck program covers complete health checkups. These checkups are very important for those under 21. Someone may look and feel well, yet may have a health problem. Your doctor wants to see those under 21 for regular checkups, not just when they are sick.

The HealthCheck program has three purposes:

1. To find and treat health problems early for those under 21.
2. To let you know about the special health services for those under 21.

Your Benefits as a Molina Member

3. To make those under 21 eligible for certain services not otherwise covered.

The HealthCheck program covers the medical care for any health problems found during the checkup including medical care, eye care and dental care.

The HealthCheck checkup includes:

- Immunizations (shots) appropriate for age
- Unclothed physical exam
- Health and developmental history (including anticipatory guidance)
- Vision screening and hearing screening
- Blood and urine lab tests (including blood lead level testing when appropriate for age)
- Dental screening and a referral to a dentist beginning at age one
- Height and weight and growth charting

Children age one and older will be referred to a dentist. You will receive help in choosing and getting to a dentist.

Ask your child's primary care doctor (PCP) when your child should have his/her next HealthCheck exam. Call our Member Services Department at 1-888-999-2404 or 1-800-947-3529.

We can help you:

- Access care
- Learn what services are covered
- Find a provider
- Understand which services require prior authorization
- Make an appointment

Dental & Other Services

Molina Healthcare Health provides covered dental services only in certain counties (Milwaukee, Kenosha, Racine, Waukesha, Washington and Ozaukee).

If you live outside these areas your dental services are provided by the State, not Molina Healthcare. If Molina Healthcare does not cover dental services in your county, you may get dental services from any dentist who will accept your ForwardHealth card. Your dental services are provided by the State, not Molina Healthcare Health Plan, call 1-800-362-3002.

As a member of Molina Healthcare, you have a right to a routine dental appointment within 90 days after your formal request.

Standard Plan and SSI Members Preventive Dental Care

Molina Healthcare Health Plan would like to remind you that oral health is vital to your total health. Molina Healthcare has a group of dentists for you and your children to see. Please call DentaQuest if you need help finding a dentist at **1-888-307-6563**.

BadgerCare Plus Core Plan has dental coverage limited to emergency services only. The Benchmark Plan has limited dental benefits for certain populations. If dental is covered in your county, you must go to a Molina Healthcare Health Plan dentist. See the Provider Directory or call the DentaQuest at 1-888-307-6563 for the names of our dentists. Please see the benefits chart on pages 12 and 13 to learn about what is covered under your Molina Healthcare plan.

Call your dentist today for a dental exam. Routine exam appointments need to be made in advance. Don't delay, put a stop to decay, and make an appointment today!

Covered dental benefits include:

- Dental cleanings and exams
- Sealants and fluoride treatments
- Dental X-Rays
- Fillings and Crowns
- Extractions
- Dentures
- Root Canals

It is important that you are on time for your dental appointments. If you need to change your time, try to let your dentist know at least 24 hours before your appointment. That way the dentist can schedule another patient in your time slot.

Remember your teeth are meant to last a lifetime, so take good care of them!

Dental Emergency

A dental emergency is an immediate dental service needed to treat dental pain, swelling, fever, infection, or injury to the teeth. Molina Healthcare Health Plan covers emergency dental services.

Dental & Other Services

What To Do If You Or Your Child Has A Dental Emergency

If you already have a dentist who is with Molina Healthcare Health Plan:

- Call the dentist's office.
- Identify yourself or your child as having a dental emergency.
- Tell the dentist's office what the exact dental problem is, it may be something like a toothache or swollen face. Make sure the office understands that you or your child is having a "dental emergency".
- Call LogistiCare at 1-866-907-1493 if you need help with transportation to your dental appointment.

If you do not currently have a dentist who is with Molina Healthcare Health Plan:

- Call DentaQuest, Molina's dental provider, at 1-888-307-6563 to tell them that you/your child is having a dental emergency. They can help you get dental services.
- If you need a ride to the dentist's office, call LogistiCare at 1-866-907-1493.

You have a right to obtain treatment for your dental emergency within 24 hours after receipt of your request.

Chiropractic Services

You may get chiropractic services from any chiropractor who will accept your ForwardHealth ID Card if you are a BadgerCare Plus Standard, Benchmark or Medicaid SSI member. Your chiropractic services are provided by the State and not Molina Healthcare Health Plan.

| | BadgerCare Plus and Medicaid SSI | | | |
|-----------------------|-------------------------------------|-----|----------------|--------------------------------------|
| Service & Copays | Standard Plan | SSI | Benchmark Plan | BadgerCare Plus Core Plan |
| Chiropractic Services | \$0.50 to \$3 copayment per service | \$0 | \$15.00 | \$0.50 to \$3 copayment per service. |

Transportation

Standard Plan, Benchmark Plan, and Medicaid SSI – Non emergency medical transportation by bus, taxi, special medical vehicle (SMV) or other common carrier transportation is arranged by LogistiCare Solutions, LLC. Please call LogistiCare's toll-free telephone number (1-866-907-1493) to schedule all your non-emergency medical rides.

LogistiCare Solutions, LLC covers transportation by special medical vehicle (SMV) for those in wheelchairs. We may also cover this service for others if your doctor asks for it. Please call LogistiCare's toll-free telephone number (1-866-907-1493) if you need this service.

You will need to call at **least two days** before a routine appointment to schedule a ride. If you do not call two days before an appointment, you may have to reschedule your appointment.

If you have an urgent appointment and cannot wait two days to go to an appointment, a ride may be scheduled within three hours.

If you have regularly scheduled appointments three or more times a week, talk with your doctor. Your doctor can work with LogistiCare to schedule your regularly reoccurring rides.

Ambulance

Molina Healthcare Health Plan will cover ambulance service for emergency care. We may also cover this service at other times, but you must have approval for all non-emergency ambulance trips. Call our Member Services Department at 1-888-999-2404 or TTY toll free 1-800-947-3529 between 8:00 AM and 5:00 PM, Monday through Friday for approval. After hours, please call our 24-hour Nurse Advice Line at 1-888-275-8750. **Always call 911 in the case of a severe emergency!**

Comprehensive Physical Exam (Core Plan members only)

As a member of the Core Plan, it is your responsibility to schedule and receive a physical exam with your doctor within the first year of being enrolled in the Core Plan. **This is very important because if you do not get a physical exam, you will lose your healthcare benefits.** You will receive notification from Molina Healthcare about scheduling this exam. If you need help to schedule your physical exam, please call 1-888-999-2404 or TTY: 1-800-947-3529.

If you are unable to schedule, and receive a physical exam through Molina Healthcare, please call Wisconsin Medicaid Enrollment Services at 1-800-291-2002.

Services Not Covered by Molina Healthcare or BadgerCare Plus

Molina Healthcare will not pay for services or supplies received without following the directions in this handbook. Molina Healthcare will not pay for the following services that are not covered by Medicaid:

- Abortions except in the case of a reported rape, incest or when medically necessary to save the life of the mother.
- Acupuncture and biofeedback services.
- All services or supplies that are not medically necessary.
- Comfort items in the hospital (e.g., TV or phone).
- Experimental services and procedures, including drugs and equipment, not covered by Medicaid.
- Infertility services for males or females, including reversal of voluntary sterilizations.
- Inpatient hospital custodial care.
- Inpatient treatment to stop using drugs and/or alcohol (inpatient detoxification services in a general hospital are covered).
- Paternity testing.
- Plastic or cosmetic surgery that is not medically necessary.
- Services for the treatment of obesity, unless determined medically necessary.
- Services to find cause of death (autopsy).
- Voluntary sterilization if under 21 years of age or legally incapable of consenting to the procedure.

This is not a complete list of the services that are not covered by BadgerCare Plus or Molina Healthcare. If you have a question about whether a service is covered, please call the Member Services Department.

Care Management

Molina Healthcare has a care management program to assist you with managing your health care. The professionals who work in the care management program are called Case Managers. All Case Managers are medical professionals, nurses or social workers. Molina Healthcare offers care management services that are available to children and adults with special health care needs. Care management is especially helpful if you have a medical condition that requires extra attention, such as:

- Asthma
- Behavioral health disorders
- Chemical dependency
- Chronic Obstructive Pulmonary Disease (COPD)
- Congestive Heart Failure (CHF)
- Coronary Artery Disease
- Diabetes
- High blood pressure
- High-risk pregnancy

Care management can also help you if you have multiple conditions that make your health care complicated. You can be enrolled in care management in a number of ways:

- You can call Member Services if you think that the program would benefit you.
- If your provider thinks that care management would be beneficial to you, he or she may call Molina Healthcare and request that a Case Manager call you.
- If a Case Manager thinks that these services might be helpful to you, they will give you a call.

In order to help you, Molina Healthcare will need to learn more about you. A Case Manager will call to ask you questions about your health and lifestyle to determine if care management is right for you.

Once you are enrolled in care management, a Case Manager will work with you one-on-one to educate you about your condition and to teach you about how to care for yourself. Your Case Manager will work directly with your PCP and other providers to help coordinate your care and will give you information on local resources that may be able to provide you with additional assistance.

For more information, please call Member Services at 1-888-999-2404 or TTY: 1-800-947-3529. A representative will be able to connect you with a Case Manager.

Care Evaluation (SSI members only)

As a member of Molina Healthcare, you will be asked to speak with a trained staff member about your health care needs. Your care coordinator will contact you within the first 60 days of being enrolled with Molina Healthcare to schedule a time to talk about your medical history and the care you need. It is very important that you talk with your care coordinator. If you have questions or you would like to contact Molina Healthcare directly to schedule a care evaluation session, please call 1-888-999-2404.

Family Planning Services

We provide confidential family planning services to all members. This includes minors. If you do not want to talk to your Primary Care Provider (PCP) about family planning, call our Member Services Department at 1-888-999-2404 or 1-800-947-3529.

We encourage you to receive your family planning services from a Molina Healthcare Health Plan doctor. That way we can better coordinate your health care. Federal law allows members to choose their provider, including physicians and family planning clinics, for reproductive care and supplies. Therefore, you can also go to any family planning clinic that will accept your ForwardHealth card even if the clinic is not part of Molina Healthcare Health Plan.

Pregnant Women and Deliveries

If you become pregnant, please let Molina Healthcare and your county human services department know right away. This is to make sure you get the extra care you need. You may also not have co-pays when you are pregnant.

You must go to a Molina Healthcare Health Plan hospital to have your baby. Talk to your Molina Healthcare Health Plan doctor to make sure you understand which hospital you are to go to when it's time to have your baby.

Also, talk to your doctor if you plan to travel in your last month of pregnancy. We want you to have a healthy birth and a good birthing experience; it may not be a good time for you and your unborn child to be traveling. We want you to have a healthy birth and your Molina Healthcare Health Plan doctor knows your history and is the best doctor to help you have a healthy birth.

Do not go out of area to have your baby unless you have approval from Molina Healthcare Health Plan.

You may also wish to pick a doctor for your child before you give birth. We will be able to help you pick a doctor for your unborn child.



Important Message For Core Plan Members: You do not have any benefits for pregnancy. If you are pregnant or become pregnant call us right away at 1-888-999-2404! We will help you change to another program that will cover your pregnancy.

Motherhood Matters

Pregnancy can be a time when you have a lot of questions about the health of you and your baby. Molina Healthcare wants to make sure that you are getting the best prenatal care for you and your baby, as well as preventive care for your baby. The Motherhood Matters program supports you throughout your pregnancy, and provides education and services to help ensure a healthy pregnancy and healthy babies. Pregnant members who contact Member Services may be enrolled and will receive a Motherhood Matters packet.

Notify Molina Healthcare and your county caseworker if you learn that you are pregnant so that you get all of the information and support that you will need for a healthy pregnancy.

Healthy Baby and Me

This program provides you with special services you need to have a strong and healthy baby. Healthy Baby and Me is a program for high risk pregnant mothers who meet specific criteria. These women must live in Milwaukee or its surrounding counties. As a program member you will be required to see a specific medical home for your care. You may also be eligible for special rewards as a member of the Healthy Baby and Me program.

Quality Improvement Program

Improving Services for Molina Healthcare Members

We care about you and your family, and the quality of care you receive is important to us.

Molina Healthcare wants you and your family to receive the best care. We have a **Quality Improvement (QI) Program** to ensure you get quality care. Each year Molina Healthcare sets goals to improve our services. One goal is to help you take better care of yourself and your family. We measure how well we are providing care by sending you surveys to fill out. We look at what you say to find ways to improve.

The QI Program:

- Evaluates providers to be sure you have access to a qualified health care team
- Investigates and takes action when you have an issue with the quality of care you have been provided
- Promotes safety in health care through education for you and our providers
- Publishes Preventive Health Guidelines to help you know what services you need and when
- Evaluates the quality of your healthcare through HEDIS (Healthcare Effectiveness Data and Information Set). These scores tell us when you have received the type of care you need. The scores look at how often you receive services such as flu shots, immunizations, eye tests, cholesterol tests, and pre-natal care if you are pregnant
- Surveys members' satisfaction with care. One type of survey is called CAHPS (Consumer Assessment of Healthcare Providers and Systems). This tells us if you are happy with your care and your provider. It also tells us what we can make better for you. Some things are getting your appointment faster and having more providers to take care of you

Molina Healthcare's QI Program has programs and information to help you stay healthy. Some examples are:

- Fully immunized children by the age of two.
- Lead screening for one and two year olds.
- Preventive care services including cancer screening for adult members.
- Preventive care services appropriate for their age for children.
- Preventive care and appropriate services specific to members with diabetes, asthma and other chronic conditions.
- Tobacco cessation counseling and/or pharmacological intervention for members who use tobacco products.
- Appropriate levels of prenatal care for pregnant members.
- Service levels that beat industry standards for Member Services, Claims Processing and other administrative services for members and providers.
- Member and Provider satisfaction levels that exceed industry standards.
- Patient Safety Program - Molina Healthcare wants you and your family to be safe and healthy.

To learn more or to request a copy of our QI Program, call your **Molina Healthcare Member Services Team at 1-888-999-2404**. Do not forget to call our Nurse Advice Line at **1-888-275-8750** if you or your family feel sick after your doctor's office has closed. They can help you.

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA). *Printed copies of information posted on our website are available upon request.

Member Rights and Responsibilities

If You Move

If you are planning to move, contact your county Department of Social or Human Services. If you move to a different county, you must also contact the Department of Social or Human Services in your new county to update your eligibility.

If you move out of Molina Healthcare Health Plan's service area, call the HMO Enrollment Specialist at 1-800-291-2002.

Molina Healthcare Health Plan will only provide emergency care if you move out of our service area. The Enrollment Specialist will help you choose an HMO that serves your area.

HMO Exemptions

An HMO exemption means you are not required to join an HMO to receive your health care benefits. Most exemptions are granted for only a short period of time so you can complete a course of treatment before you are enrolled in an HMO.

If you think you need an exemption from HMO enrollment, call the HMO Enrollment Specialist at 1-800-291-2002 for more information.

Living Will or Power of Attorney for Health Care

You have the right to make decisions about your medical care. You have the right to accept or refuse medical or surgical treatment. You also have the right to plan and direct the types of health care you may receive in the future if you become unable to express your wishes. You can let your doctor know about your wants or wishes by completing a living will or power of attorney for health care form.

Contact your doctor for more information on living wills or power of attorney for health care.

You have a right to file a grievance with the Department of Health Services, Division of Quality Assurance if your advance directive, living will or power of attorney wishes are not followed. You may request help in filing a grievance.

Advance Directives

What is the difference between a Durable Power of Attorney for medical care and a Living Will?

Your Living Will explains, in writing, the type of medical care you would want if you could not make your wishes known.

Your Durable Power of Attorney lets you choose someone to carry out your wishes for medical care when you cannot act for yourself.

If I have a Durable Power Of Attorney for medical care, do I need a Living Will too?

You may want both. Each addresses different parts of your medical care.

A Living Will makes your wishes known directly to your providers, but states only your wishes about the use of life-support methods.

Member Rights and Responsibilities

A Durable Power of Attorney for medical care allows a person you choose to carry out your wishes for all of your medical care when you cannot act for yourself. A Durable Power of Attorney for medical care does not supersede a Living Will.

Can I change my advance directive?

Yes, you can change your advance directive whenever you want.

It is a good idea to look over your advance directives from time to time. Make sure they still say what you want and that they cover all areas.

Right To Medical Records

You have the right to ask for copies of your medical records from your provider(s). Please call 1-888-999-2404 or TTY for the hearing impaired: 1-800-947-3529 for help.

You may have to pay a fee to copy your medical records. You may also correct questionable information in your medical records if your doctor agrees to the correction.

Second Medical Opinions

A second medical opinion on recommended treatments may be appropriate in some cases. Contact your doctor, or our Member Service Department at 1-888-999-2404 or TTY for the hearing impaired: 1-800-947-3529 for information.

If you do not agree with your provider's plan of care you have the right to a second opinion from another Molina Healthcare provider or from an out-of-network provider. This service is at no cost to you.

Molina Healthcare Health Plan's Member Advocate

Molina Healthcare Health Plan has a Member Advocate to help you get the care you need. The Advocate can answer your questions about getting health care from Molina Healthcare Health Plan. The Advocate can also help you solve any problems you may have getting health care from Molina Healthcare Health Plan.

You can reach Molina Healthcare's Member Advocate at 1-888-999-2404 or TTY for the hearing impaired: 1-800-947-3529.

External Advocate

If you have problems getting services while you are enrolled with Molina Healthcare Health Plan for Medicaid SSI services, call the SSI HMO Advocate at 1-800-708-3034.

State of Wisconsin Managed Care Ombuds Program

The State has Managed Care Ombuds who can help you with any questions or problems you have as a HMO member. The Managed Care Ombuds can tell you how to get the care you need from your HMO. The Managed Care Ombuds can also help you solve problems or complaints you may have about the HMO Program or your HMO. Call 1-800-760-0001 and ask to speak to a Managed Care Ombuds.

Physician Incentive Plan

You are entitled to ask if we have special financial arrangements with our physicians that can affect the use of

Member Rights and Responsibilities

referrals and other services you might need. 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.

For more information, please call Member Services at 1-888-999-2404 or TTY for hearing impaired 1-800-947-3529 and request information about our physician payment arrangements.

Provider Credentials

You have the right to information about our providers that includes the provider's education, board certification and recertification. To get this information, call our Member Services Department at 1-888-999-2404 or TTY for hearing impaired 1-800-947-3529.

Member Rights and Responsibilities

Your Rights When You Join Molina Healthcare

Did you know that when you join 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 the facts about Molina Healthcare, our services and providers who contract with us to provide services.
- Have privacy and be treated with respect and dignity.
- Help make decisions about your health care. You may refuse treatment.
- Request and receive a copy of your medical records or request an amendment or correction.
- Openly discuss your treatment options in a way you understand them. It does not matter what the cost or benefit coverage.
- Voice any complaints or appeals about Molina Healthcare or the care you were given.
- Use your member rights without fear of negative results.
- Receive the members' rights and responsibilities at least yearly.
- Suggest changes to this policy.
- You have the right to ask for an interpreter and have one provided to you during any BadgerCare Plus and/or Medicaid SSI covered service.
- All covered services must be available and accessible to you. When medically appropriate, services must be available 24 hours a day, seven (7) days a week.
- You have the right to be free from any form of restraint or seclusion used as a means of force, control, ease or reprisal.
- You have the right to receive information about your treatment options including the right to receive a second opinion.
- You have the right to an independent review of any final decisions regarding your health care made by the plan.
- You have the right to receive information in the member handbook in another language or another format.
- You have the right to receive health care services as provided for in Federal and State law.
- You have the right to make decisions about your health care.

You also have the responsibility to:

- Give, if possible, all facts that Molina Healthcare and the providers need to care for you.
- Know your health problems and take part in making agreed upon treatment goals as much as possible.
- Follow the care plan instructions for care you agree to with your provider.
- Keep appointments and be on time. If you are going to be late or cannot keep an appointment, call your provider.

Complaints, Grievances and Appeals

Grievance and Appeals Process

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 or charge you any fees because you make a grievance, appeal, or ask for a State Fair Hearing. We would like to know if you have a complaint about your care at Molina Healthcare Health Plan.

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 Health plan policy.

An Appeal is a way for you to ask for a review when your health plan:

- Denies or give a limited approval of a requested service,
- Denies, reduces, suspends, or ends a service already approved; or
- Denies payment for a service;

Or fails to:

- Act within required time frames for getting a service;
- Respond to a grievance or appeal issue within the required response times identified below.

Molina must provide 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.

Molina Healthcare will send you something in writing if we make a decision to:

- Deny a request to cover a service for you;
- Reduce, suspend or stop services before you receive all of the services that were approved; or
- Deny payment for a service you received that is not covered by Molina Healthcare.

We will also send you something in writing if, by the date we should have, we did not:

- Make a decision on whether to okay a request to cover a service for you, or
- Give you an answer to something you told us you were unhappy about.

Molina must write you within 10 days and let you know we received your appeal. Molina must provide written notice of a decision within 30 days unless it is an expedited review. The maximum time Molina can take to resolve a grievance or appeal is 45 days.

You have some Special Rights when Making a Grievance or Appeal:

- A qualified clinical professional will look at medical grievances or appeals.
- If you do not speak or understand English, call 1-888-999-2404 to get help from someone who speaks your language.
- You may ask anyone such as a member advocate, family member, your minister, a friend, or an attorney to help you make a grievance or an appeal.

Complaints, Grievances and Appeals

- 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.

Please call Molina Healthcare Health Plan's Member Advocates at 1-888-999-2404 or 1-800-947-3529 if you have a complaint or you can write to us at:

Molina Healthcare Health Plan
Attn: Grievance/Complaint Department
2400 S. 102nd St.
West Allis, WI 53227

If you want to talk to someone outside of Molina Healthcare Health Plan about the problem, call the HMO Enrollment Specialist at 1-800-291-2002. The Enrollment Specialist may be able to help you solve the problem, or can help you write a formal grievance to Molina Healthcare Health Plan or to the BadgerCare Plus and Medicaid SSI programs.

You may also file a complaint with the Wisconsin BadgerCare Plus and Medicaid SSI Program. Please call Molina Healthcare's Member Advocate if you need help to write a formal grievance to Molina Healthcare Health Plan or to the BadgerCare Plus and Medicaid SSI programs.

The address to complain to the Wisconsin BadgerCare Plus and Medicaid SSI Programs is:

BadgerCare Plus and Medicaid SSI
Managed Care Ombuds
P.O. Box 6470
Madison, WI 53716-0470
1-800-760-0001

If your complaint or grievance needs action right away because a delay in treatment would greatly increase the risk to your health, please call Molina Healthcare as soon as possible at 1-888-999-2404 or 1-800-947-3529.

We cannot treat you differently than other members because you file a complaint. Your health care benefits will not be affected.

Fair Hearings

You have the right to appeal to the State of Wisconsin Division of Hearings and Appeals (DHA) for a Fair Hearing if you believe your benefits are wrongly denied, limited, reduced, delayed or stopped by Molina Healthcare Health Plan. An appeal must be made no later than 45 days after the date of the action being appealed. If you appeal this action to DHA before the effective date, the service may continue. You may need to pay for the cost of services if the hearing decision is not in your favor.

Molina Healthcare will notify you of your right to request a state hearing when:

- A decision is made to deny services.
- A decision is made to reduce, suspend, or stop services before all of the approved services are received.
- A provider is billing you because Molina Healthcare has denied payment of the service.

Complaints, Grievances and Appeals

If you want a Fair Hearing, send a written request to:

Department of Administration
Division of Hearings and Appeals
P.O. Box 7875
Madison, WI 53707-7875

The hearing will be held in the county where you live. You have the right to bring a friend or be represented at the hearing. If you need a special arrangement for a disability, or for English language translation, please call 608-266-3096 (voice) or 608-264-9853 (hearing impaired).

We cannot treat you differently than other members because you request a Fair Hearing. Your health care benefits will not be affected.

If you need help writing a request for a Fair Hearing, please call either the BadgerCare Plus and Medicaid SSI Ombuds at 1-800-760-0001 or HMO Enrollment Specialist at 1-800-291-2002.

How Can I Help Stop Healthcare Fraud?

Molina Healthcare seeks to uphold the highest ethical standards for the provision of health care benefits and services to its members and supports the efforts of federal and state authorities to prevent fraud, waste and abuse.

Molina Healthcare takes the prevention, detection, and investigation of fraud, waste and abuse seriously, and complies with state and federal laws. Molina Healthcare investigates all suspected cases of fraud, waste and abuse and promptly reports all confirmed incidences to the appropriate government agencies.

Healthcare fraud takes money from healthcare programs and leaves less money for real medical care.

Here are some ways you can help stop fraud:

- Do not give your Molina Healthcare ID card, Medical ID Card, or ID number to anyone other than a health care provider, a clinic, or hospital, and only when receiving care.
- Never let anyone borrow your Molina Healthcare ID card.
- Never sign a blank insurance form.
- Be careful about giving out your social security number.
- Check your mail for medical bills for services that you did not receive.

If you think fraud has taken place, please report it right away. You do not have to fear revenge; your report will be kept private.

To report fraud, waste and abuse, gather as much information as possible.

How Can I Report Fraud Waste and Abuse?

When reporting a provider (e.g. doctor, dentist, counselor, etc.) provide the following:

- Name, address, and phone number of provider;
- Name and address of the facility (hospital, nursing home and home health agency, etc.)
- Medicaid number of the provider and facility is helpful;

Complaints, Grievances and Appeals

- Type of provider (physician, physical therapist, and pharmacist, etc.);
- Names and number of other witnesses who can aid in the investigation;
- Dates of event; and
- Summary of what happened

When reporting a client (a person who receives benefits), provide the following:

- The person's name;
- The person's date of birth, social security number, or case number if available;
- The city where the person resides; and
- Specific details about the fraud waste and abuse.

You can report fraud, without giving us your name, by sending a letter, calling, faxing or emailing:

Molina Healthcare of Wisconsin

Attn: Compliance Director

P.O. Box 270208

West Allis, WI 53227-9962

To report suspected Medicaid fraud, contact Molina Healthcare AlertLine at: 866-606-3889

Toll-free Confidential Fax: 1-877-479-1833

Complete a report form online at: <https://molinahealthcare.alertline.com/gcs/welcome>

Department of Health Services

Public Assistance Fraud Unit

Attention: Fraud Prevention Investigation

P.O. Box 309

Madison, WI 53701-309

Phone: 1-877-865-3432

Fax: 1-608-261-7792, Attn: DHS Fraud Prevention Program

Your Civil Rights

Molina Healthcare Health Plan provides covered services to all eligible members regardless of:

- Age
- Race
- Religion
- Color
- Disability
- Sex
- Physical Condition
- Sexual Orientation
- National Origin
- Marital Status
- Arrest or conviction record
- Military Participation

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.

Notice of Privacy Practices

Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Molina Healthcare of Wisconsin, Inc. (“Molina Healthcare” or “we”) uses and shares protected health information about you to provide your health benefits. We use and share your information to carry out treatment, payment, and health care operations. We also use and share your information for other reasons as allowed and required by law. We have the duty to keep your health information private. We have policies in place to obey the law. The effective date of this notice is June 15, 2011.

PHI stands for *protected health information*. PHI means health information such as medical records that include your name, member number or other identifiers, and is used or shared by Molina Healthcare.

Why does Molina Healthcare use or share your PHI?

We use or share your PHI to provide you with health care benefits. Your PHI is used or shared for treatment, payment and health care operations.

For Treatment

Molina Healthcare may use or share your PHI to give you, or arrange for, your medical care. This treatment also includes referrals between your doctors and other health care providers. For example, Molina Healthcare may share information about your health condition with a specialist. This helps the specialist talk about your treatment with your doctor.

For Payment

Molina Healthcare may use or share PHI to make decisions on payment. This may include claims, approvals for treatment and decisions about medical needs. Your name, your condition, your treatment, and supplies given may be written on the bill. For example, we may let a provider know that you have our benefits. We would also tell the provider the amount of the bill that we would pay.

For Health Care Operations

Molina Healthcare may use or share PHI about you to run our health plan. For example, we may use information from your claim to let you know about a health program that could help you. We may also use or share your PHI to solve member concerns. Your PHI may also be used to see that claims are paid right.

Health care operations involve many daily business needs. They include, but not limited, to the following:

- Improving quality
- Actions in health programs to help members with certain conditions (such as asthma)
- Conducting or arranging for medical review
- Legal services, including fraud and abuse programs
- Actions to help us obey laws
- Addressing member needs, including solving complaints and grievances.

Notice of Privacy Practices

We will share your PHI with other companies (“business associates”) that perform different kinds of activities for our health plan.

We may also use your PHI to give you reminders about your appointments. We may use your PHI to give you information about other treatment, or other health-related benefits and services.

When can Molina Healthcare use or share your PHI without getting written authorization (approval) from you?

In addition to treatment, payment and health care operations, the law allows or requires Molina to use and share your PHI for several other purposes including the following:

Disclosure of your PHI to family members, other relatives and your close personal friends is allowed if:

- The information is directly relevant to the family or friend’s involvement with your care or payment for that care; and
- You have either orally agreed to the disclosure or have been given an opportunity to object and have not objected.

Required by law

Molina Healthcare will use or share information about you as required by law. We will share your PHI when required by the Secretary of the Department of Health and Human Services (HHS).

Public Health

Your PHI may be used or shared for public health activities. This may include helping public health agencies to prevent or control disease.

Health Care Oversight

Your PHI may be used or shared with government agencies. They may need your PHI for audits.

Research

Your PHI may be used or shared for research in certain cases, when approved by a privacy or institutional review board.

Legal or Administrative Proceedings

Your PHI may be used or shared for legal proceedings, such as in response to a court order.

Law Enforcement

Your PHI may be used or shared with police to help find a suspect, witness or missing person.

Health and Safety

PHI may be shared to prevent a serious threat to public health or safety.

Notice of Privacy Practices

Government Functions

Your PHI may be shared with the government for special functions, such as national security activities.

Victims of Abuse, Neglect or Domestic Violence

Your PHI may be shared with legal authorities, if we believe that a person is a victim of abuse or neglect.

Workers Compensation

Your PHI may be used or shared to obey Workers Compensation laws.

Other Disclosures

PHI may be shared with funeral directors or coroners to help them do their jobs.

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 a purpose other than those listed in this notice. You may cancel a written approval that you have given to Molina Healthcare. Your cancellation will not apply to actions already taken by us because of the approval you already gave to us.

What are your health information rights?

You have the right to:

- Request Restrictions on PHI Uses or Disclosures (Sharing of Your PHI) - You may ask Molina Healthcare not to share your PHI to carry out treatment, payment or health care operations. You may also ask us to not share your PHI with family, friends or other persons you name who are involved in your health care. However, Molina Healthcare is not required to agree to your request. You will need to fill out a form to make your request.
- Request Confidential Communications of PHI - You may ask Molina Healthcare to give you your PHI in a certain way or at a certain place to help keep your PHI private. We will follow reasonable requests, if you tell us how sharing all or a part of that PHI could put your life at risk. You will need to fill out a form to make your request.
- Review and Copy Your PHI - You have a right to review and get a copy of your PHI held by us. This may include records used in making coverage, claims and other decisions as a Molina Healthcare member. You will need to fill out a form to make your request. We may charge you a reasonable fee for copying and mailing the records. In certain cases we may deny the request. Important Note: We do not have complete copies of your medical records. Please contact your PCP to get a copy of your medical chart.
- Amend Your PHI - You may ask that we amend (change) your PHI. This involves only those records kept by Molina Healthcare about you as a member. You will need to fill out a form to make your request. You may file a letter disagreeing with us if we deny the request.
- Receive an Accounting of PHI Disclosures (Sharing of your PHI) - You may ask that Molina Healthcare give you a list of certain parties that we shared your PHI with during the six years prior to the date of your request. The list will not include PHI shared as follows:
 - for treatment, payment or health care operations;
 - to persons about their own PHI;
 - sharing done with your authorization;
 - incident to a use or disclosure otherwise permitted or required under applicable law;
 - as part of a limited data set for research or public health activities;
 - PHI released in the interest of national security or for intelligence purposes;

Notice of Privacy Practices

- to correctional institutions having custody of an inmate; or
- shared prior to April 14, 2003

You must fill out a form to request a list of PHI disclosures. We may charge a reasonable fee if you ask for this list more than once in a 12-month period.

You may make any of the requests listed above. Please call Molina Healthcare Member Services at 1-888-999-2404.

What can you do if your rights have not been protected?

You may complain to Molina Healthcare and to the Department of Health and Human Services, if you believe your privacy rights have been violated. We will not do anything against you for filing a complaint. Your care will not change in any way.

You may complain to us at:

Molina Healthcare of Wisconsin, Inc.
Attention: Director of Member Services
2400 South 102nd Street
West Allis, WI 53227
Phone: 1-888-999-2404

You may file a complaint with the Secretary of the U.S. Department of Health and Human Services at:

Office for Civil Rights
U.S. Department of Health and Human Services
233 N. Michigan Ave., Suite 240
Chicago, IL 60601
Voice Phone (312) 886-2359; TDD (312) 353-5693

What are the duties of Molina Healthcare?

Molina Healthcare is required to:

- Keep your PHI private
- Give you written information such as this on our duties and privacy practices about your PHI
- Follow the terms of this Notice

This Notice is Subject to Change

Molina Healthcare reserves the right to change its information practices and terms of this notice at any time. If we do, the new terms and practices will then apply to all PHI we keep. If we make any material changes, a new notice will be sent to you by US Mail.

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Contact Information

If you have any questions, please contact the following office:

Molina Healthcare of Wisconsin, Inc.
Attention: Director of Member Services
2400 South 102nd Street
West Allis, WI 53227
Phone: 1-888-999-2404

We Will Not Take Any Action Against You for Filing a Complaint

All medically necessary covered services are available to all members. All services are provided in the same manner to all members. All persons or organizations connected with Molina Healthcare Health Plan who refer or recommend members for services shall do so in the same manner for all members.

Translating or interpreting services are available for those members who need them. This service is free.

Definitions

- Abuse** – Provider practices that are inconsistent with sound fiscal, business, or medical practices, and result in unnecessary cost to the Medicaid program or in reimbursement for services that are not medically necessary or that fail to meet professionally recognized standards for health care. It also includes recipient practices that result in unnecessary cost to the Medicaid program.
- Advance Directives** – Written instructions relating to the provision of health care when an adult is incapacitated, such as a Living Will, a Durable Power of Attorney for Medical Care, a Declaration for Mental Health Treatment, or a Do Not Resuscitate Order.
- Appeal** – A formal request for Molina Healthcare to review a decision or action.
- Authorization** – An approval for a service.
- Coordinated Services Program** - Program to assist certain members using controlled substances who have received medications that are not medically necessary to establish and maintain a relationship with only one provider and/or pharmacy to coordinate treatment. Members selected for Molina Healthcare’s coordinated services program will be provided additional information and notified of their state hearing rights, as applicable.
- Covered Services** – Services and supplies covered by Molina Healthcare.
- Emergency Medical Condition** – A medical problem that you think is so serious that it must be treated right away by a provider.
- Emergency Services** – Services provided by a qualified provider that are needed to evaluate, treat, or stabilize an emergency medical condition.
- Fraud** – Intentional deception or misrepresentation by a person with the knowledge that the deception could result in some unauthorized benefit to themselves or some other person.
- Grievance** – A complaint about Molina Healthcare or a health care provider.
- Medical Home** – Having one provider who will help you with most of your medical needs.
- Medically Necessary Services** – Services necessary for the diagnosis or treatment of disease, illness, or injury, without which the patient can be expected to suffer prolonged, increased or new morbidity, impairment of function, dysfunction of a body organ or part, or significant pain and discomfort.
- Member** – A person who is eligible for Medicaid and who is enrolled in the Molina Healthcare plan.
- Molina Healthcare** – A managed care plan licensed by the State of Ohio to provide prepaid medical and hospital services to Medicaid eligible consumers.
- Participating/Contracted Provider** – A provider who has entered into a contract with Molina Healthcare to provide covered services to members.
- Post-Stabilization** – Medicaid-covered services that you receive after emergency medical care.
- Preventive Health Care** – Health care focused on early detection and treatment of health problems and the prevention of disease or illness.
- Primary Care Provider (PCP)** - A Molina Healthcare contracted provider that you have chosen to be your personal provider. Your PCP helps you with most of your medical needs.
- Prior Authorization** – The process for any service that needs an authorization from Molina Healthcare before it can take place.
- Provider Directory** – A list of all of the providers contracted with Molina Healthcare.
- Referral** – A request from a PCP for his or her patient to see another provider for care.
- Service Area** – The geographic area where Molina Healthcare provides services.
- Specialist** – A provider who focuses on a particular kind of health care.
- Utilization Management** – The evaluation of the appropriateness of health care services.