

Section 4. Benefits and Covered Services

This section provides an overview of the medical benefits and Covered Services for Molina Healthcare Members.

There are some Member co-pays associated with services provided through Molina's coverage programs. Some benefits may have limitations. Please call the Member Services Department for additional information or for a complete list of benefits at 1-888-483-0760.

Molina Medicaid

Service Covered by Molina Healthcare:

- Alcohol and substance abuse treatment
- Audiology services
- Contraceptive Devices
- Durable and non-durable medical equipment and supplies (DME)
- Early periodic screenings and diagnostic testing services
- Emergency Services
- Family Planning Services
- Health Education
- Home health care services
- Hospice
- Hospital inpatient and outpatient services
- Immunizations
- Laboratory and x-ray services
- Mammograms
- Maternity care services
- Physician services
- Physical and Occupational therapy
- Preventive services
- Private duty nursing
- Skilled nursing care
- Speech and language therapy
- Transplant services (non-experimental)
- Transportation

- Well child care services
- Whole blood and blood products
- X-ray services

Services Covered by Other Providers

- Dental Services
- Vision Services
- Pharmacy
- Behavioral Health Services

Services Not Covered

- Elective Cosmetic Surgery
- Custodial Care Services
- Elective Abortions
- Infertility Services

Prescription drugs

Prescription drugs are covered by Molina through Caremark. Members must use their Molina Medical card to get prescriptions filled. Members who wish to order prescriptions by mail can do so by contacting Caremark.

Injectable and Infusion Services

Injectable products and all infusion drug requests require a Drug Evaluation Review (DER) and are supplied by a specialty vendor. Specialty drugs require a DER and are not available through the retail pharmacy network.

- Family planning services related to the injection or insertion of a contraceptive drug or device are covered.
- Vaccines are covered by the Vaccines for Children program. Molina Health Plan covers vaccines for ages 21 and older.
- Gardasil is covered by the Vaccines for Children program through age 20. Molina Health Plan will cover Gardasil for ages 21 through 26 for both males and females.

Access to Behavioral Health Services

Members may access certain Behavioral Health Services through programs and services offered through the County Health department.

Behavioral health services include:

- Inpatient Services

- Outpatient hospital services
- Psychiatric doctor services

Emergency Behavioral Health Services

Members are directed to call “911” or go to the nearest emergency room if they need emergency behavioral health services. Examples of emergency behavioral health problems are:

- Danger to self or others
- Not being able to carry out daily activities
- Things that will likely cause death or serious bodily harm

Out of Area Emergencies

Members having a behavioral health emergency who cannot get to a Molina Healthcare approved provider are directed to do the following:

- Go to the nearest hospital or facility
- Call the number on ID card
- Call member’s PCP and follow-up within (24) to (48) hours

For out-of-area emergency care, plans will be made to transfer Members to an in-network facility when member is stable.

Obtaining Behavioral Health Services

Members and Providers should call Member Services or the Behavioral Health Department to find a behavioral health provider.

Emergency Transportation

When a Member’s condition is life-threatening and requires use of special equipment, life support systems, and close monitoring by trained attendants while en route to the nearest appropriate facility, emergency transportation is thus required. Emergency transportation includes, but is not limited to, ambulance, air or boat transports.

Examples of conditions considered for emergency transports include, but are not limited to, acute and severe illnesses, untreated fractures, loss of consciousness, semi-consciousness, having a seizure or receiving CPR during transport, acute or severe injuries from auto accidents, and extensive burns.

Non-emergency Medical Transportation

Molina Healthcare provides free transportation to the following:

- Scheduled doctor's appointments
- WIC office
- Pharmacy
- DME provider

If one of your patients is in need of this service please have them call PickMeUp Medical Transportation at (888) 822-1048.

If your member needs further assistance they can also call (888) 483-0760 and one of our Member Service Representatives will assist them with this request.

Non-emergency transportation services must have prior approval and all patients should call at least 48 hours before the services are needed. These services require an authorization.

Preventive Care

Immunizations

Adult members may receive immunizations as recommended by the Centers for Disease Control and Prevention (CDC) and prescribed by the member's PCP. Child members may receive immunizations in accordance with the recommendations of the American Academy of Pediatrics and prescribed by the child's PCP.

Immunization schedule recommendations from the American Academy of Pediatrics CDC are attached in Appendix B.

Molina Healthcare covers immunizations not covered through Vaccines for Children (VFC)

The following is a list of immunizations required for children and adolescents.

Immunization	Ages
Hepatitis B (Hep B)	Birth, 1-2 months, and 6-18 months
Rotavirus (RV)	2 months, 4 months and 6 months
Diphtheria, Tetanus, Pertussis (DTaP)	2, 4, 6, 15 – 18 months and one between the ages of 4 and 6 years
Haemophilus influenza type b (HIB)	2, 4, 6 and 12 – 15 months
Pneumococcal (PCV)	2, 4, 6 and 12 – 15 months
Inactivated Poliovirus (IPV)	2, 4, 6 -18 months and one between the ages 4 – 6 years
Influenza	6 months – 18 years, yearly (consult your PCP)
Measles, Mumps, Rubella (MMR)	12 – 15 months and one between the ages of 4 and 6 years

Varicella	12 -15 months and one between the ages of 4 – 6 year
Hepatitis A (Hep A)	Two (2) doses between 12 and 24 months
Tetanus, Diphtheria, Pertussis (Tdap)	11 – 12 years
Human Papilloma Virus (HPV)	Three (3) doses between 11 – 12 years
Meningococcal (MCV)	11 – 12 years

Prenatal Care

Stage of Pregnancy	How often to see the doctor
1 month – 6 months	One (1) visit a month
7 months – 8 months	Two (2) visits a month
9 months	One (1) visit a week

Well Child Visits

The federal guidelines outlined below specify the minimum requirements included in each Well Child Care (WCC) exam for each of the following age groups; (0-18) months, (2-6) years, and (7-20) years. During Well Child visits, providers are required to deliver the following:

EPDST	Infants (0-18) months	Children (2-6) years	Adolescents (7-20) years
Physical Exam and Health History	<ul style="list-style-type: none"> • History • Height • Weight • Physical exam (all of these) 	<ul style="list-style-type: none"> • History • Height • Weight • Physical exam (all of these) 	<ul style="list-style-type: none"> • History • Height • Weight • Physical exam (all of these)
Development and Behavior Assessment	<ul style="list-style-type: none"> • Gross motor • Fine motor • Social/emotional • Nutritional (any one of these) 	<ul style="list-style-type: none"> • Gross motor • Fine motor • Communication • Self-help skills • Cognitive skills • Social/emotional • Regular physical activity • Nutritional (any one of these) 	<ul style="list-style-type: none"> • Social/emotional • Regular physical activity • Nutritional (any one of these)
Mental Health Assessment	Mental health (must be addressed)	Mental health (must be addressed)	<ul style="list-style-type: none"> • Mental health • Substance abuse (either one of these)
Health Education/Anticipatory Guidance	<ul style="list-style-type: none"> • Injury prevention • Passive smoking (either one of these) 	<ul style="list-style-type: none"> • Injury prevention • Passive smoking (either one of these) 	<ul style="list-style-type: none"> • Injury prevention • STD prevention • Smoking/tobacco (any one of these)

We need your help conducting these regular exams in order to meet the HEDIS targeted state standard. If you have questions or suggestions related to well child care, please call our Health Education line at (888) 483-0760.

Emergency Care Services

Emergent care services are covered by Molina Healthcare without an authorization. This also includes non-contracted providers outside of Molina Healthcare's service area.

(24) Hour Nurse Advice Line

Members may call the Nurse Advise Line anytime they are experiencing symptoms or need health care information. Registered nurses are available (24) hours a day, seven (7) days a week, to assess symptoms and help make good health care decisions.

HEALTHLINE (24-Hour Nurse Advice Line)	
English Phone:	(888) 275-8750
Spanish Phone:	(866) 648-3537
TTY:	(866) 735-2929 (English) (866) 833-4703 (Spanish)

Molina Healthcare is committed to helping our members:

- Prudently use the services of your office
- Understand how to handle routine health problems at home
- Avoid making non-emergent visits to the emergency room (ER)

These registered nurses do not diagnose. They assess symptoms and guide the patient to the most appropriate level of care following specially designed algorithms unique to the Nurse Advice Line. The Nurse Advice Line may refer back to the PCP, a specialist, 911 or the ER. By educating patients, it reduces costs and over utilization on the health care system.

Health Management Programs

Molina Healthcare of Utah wants you to be aware of health management programs offered to assist with care management. We have programs that can help you manage your patient's condition. These include programs, such as:

- Asthma
- Diabetes
- Cardiovascular Disease
- Congestive Heart Failure
- COPD

A Care Manager/Nurse is on hand to teach your Patients about their disease. He/she will manage the care with the member's assigned PCP and provide other resources. There are many ways a member is identified to enroll in these programs. One way is through medical or pharmacy claims. Another way is through Nurse Advice Line or doctor referral. Members can also ask Molina to enroll them. It is the member's choice to be in these programs. A member can choose to get out of the program at any time.

For more info about our programs, please call:

- Member Services Department at (888) 483-0760
- (English) TTY at 1-800-346-4128
- (Spanish speaking representatives are also available.)
- Visit www.molinahealthcare.com

Pregnancy Health Management Program

We care about the health of our pregnant members and their babies. Molina's pregnancy program will make sure member and baby get the needed care during the pregnancy. You can speak with trained Nurses and Care Managers. They can give your office/member the support needed and answer questions you may have. You will be mailed a workbook and other resources which are also available to the member. The member will also learn ways to stay healthy after child birth. Special care is given to those who have a high-risk pregnancy. It is the member's choice to be in the program. They can choose to be removed from the program at any time. Molina Healthcare is requesting your office to complete the Pregnancy Notification form (refer to appendix B for form) and return it to us as soon as pregnancy is confirmed.

Although pregnancy itself is not considered a disease state, a significant percentage of pregnant females on Medicaid are found to be at moderate to high-risk for a disease condition for the mother, the baby or both. The Motherhood MattersSM pregnancy management program strives to reduce hospitalizations and improve birth outcome through early identification, trimester specific assessment and interventions appropriate to the potential risks and needs identified. The Motherhood MattersSM program does not replace or interfere with the member's physician assessment and care. The program supports and assists physicians in the delivery of care to members.

Motherhood MattersSM Program Activities

Motherhood MattersSM Pregnancy Health management Program encompasses clinical case management, member outreach and member and provider communication and education. The Prenatal Case Management staff works closely with the provider community in identification, assessment, and implementation of appropriate intervention(s) for every member participating in the program. The program activities include early identification of pregnant members, early screening for potential risk factors, provision of telephonic and written trimester appropriate education to all pregnant members and families, referral of high-risk members to prenatal case

management, and provision of assessment information to physicians.

- Prenatal Case Management – Members assessed to be high risk are contacted via telephone for further intervention and education. A care plan is developed and shared with the physician to ensure that all educational and care needs are met. Prenatal case management registered nurses, in conjunction with the treating physician, coordinate health care services, including facilitation of specialty care referrals, coordination of home health care and DME service and referral to support groups or community social services. The case management data base generates reminders for call backs for specific assessments, prenatal visits, postpartum visits and well-baby checkups.
- Smoking Cessation – For information about the Molina Smoking Cessation Program or to enroll members, please contact our Health Management Unit.
- Member Outreach – Motherhood MattersSM Program is promoted to members through various means including, program brochures in new member Welcome Packets, other member mailings, member newsletters, provider newsletters, posters and brochures placed in practitioner's offices and marketing materials and collaboration with national and local community-based entities.

Health Management Programs

Molina Healthcare of Utah Health Management programs provide patient education information to Members and facilitate provider access to these chronic disease programs and services.

Program Eligibility Criteria and Referral Source

Health Management Programs are designed for Molina members with a confirmed diagnosis. Members participate in programs for the duration of their eligibility with the plan's coverage or until the member opts out. Each identified member will receive specific educational materials and other resources in accordance with their assigned stratification level. Additionally, all identified members will receive regular educational newsletters. The program model provides an "opt-out" option for members who contact Molina Member Services and request to be removed from the program.

Multiple sources are used to identify the total eligible population. These may include the following:

- Pharmacy claims data for all classifications of medications;
- Encounter data or paid claim with a relevant CPT-4 or ICD-9 code;
- Member Services welcome calls made by staff to new member households and incoming member calls have the potential to identify eligible program participants. Eligible members are referred to the program registry;
- Practitioner/provider referral;
- Nurse Advice referral;
- Medical Case Management or Utilization Management; and
- Member self-referral due to general plan promotion of program through member newsletter, the Nurse Advice Line or other member communication.

Practitioner/Provider Participation

Contracted practitioners/providers are automatically notified whenever their patients are enrolled in a health management program. Practitioner/provider resources and services may include:

- Annual practitioner/provider feedback letters containing a list of patients identified with the relevant disease;
- Clinical resources such as patient assessment forms and diagnostic tools;
- Patient education resources;
- Provider Newsletters promoting the health management programs, including how to enroll patients and outcomes of the programs;
- Clinical Practice Guidelines; and
- Preventive Health Guidelines;

Additional information on health management programs is available from your local Molina QI Department **toll free at (888) 483-0760**.

Breathe with ease

Molina Healthcare of Utah provides an asthma health management program called Breathe with ease, designed to assist members in understanding their disease. Molina Healthcare has a special interest in asthma, as it is the number one chronic diagnosis for our members. This program was developed with the help of several community providers with large asthma populations. The program educates the member and family about asthma symptom identification and control. Our goal is to partner with you to strengthen asthma care in the community.

Breathe with ease Program Activities

The first component of our program provides general asthma education to all identified asthma members, including an asthma newsletter. Our goal is to provide members with a basic understanding of asthma and related concepts, such as common triggers. We also encourage members to see their PCP regularly for asthma status checks, and important preventive and well-child care.

The second component of our program offers members identified as having high needs an opportunity to enroll in our more intensive asthma program. We identify these members through claims and pharmacy data, with a specific focus on ER utilization and inpatient admissions for asthma.

Additional Asthma Program Benefits

- Clinical Practice Guidelines – Molina Healthcare adopted the NHLBI Asthma Guidelines.
- Asthma Registry – Molina Healthcare established an asthma registry. The registry uses

available claims and pharmacy information to identify and track asthma members in the program.

- Asthma Newsletters – Molina Healthcare distributes asthma newsletters to identified members.
- Care Reminders and Age-Appropriate Tools – Molina Healthcare provides individualized reminders and educational tools to members with asthma.
- Asthma Education – Asthma education is covered for all Molina Healthcare members. We encourage providers to refer patients to these services, especially for newly diagnosed asthmatics or those having difficulty managing their disease.
- Smoking Cessation – For information about the Molina Smoking Cessation Program or to enroll members, please contact our Health Management Unit.
- Asthma Profiles – A report or profile of patients with asthma is sent to the PCPs; this shows specific patient utilization information of medication use, emergency department visits, and hospitalizations. We also request the PCP provide us with the names of Molina Healthcare asthma patients not included in the profile.

Healthy Living with Diabetes

Molina's *Healthy Living with Diabetes* health management program is a collaborative team approach comprised of patient education, clinical case management and provider education. The team works closely with contracted practitioners in the identification, assessment and implementation of appropriate interventions for non-pregnant adults diagnosed with diabetes.

The Healthy Living with Diabetes program includes:

- Clinical Practice Guidelines – Molina Healthcare adopted the American Diabetes Association (ADA) guidelines for diabetic care.
- Diabetes Registry – Molina Healthcare established a diabetes registry. The registry uses available claims and pharmacy information to identify and track diabetic members in the program.
- Diabetes Newsletters – Molina Healthcare distributes newsletters to diabetic members.
- Care Reminders and Age-Appropriate Tools – Molina Healthcare provides individualized reminders and educational tools to members with diabetes.
- Diabetes Education – Diabetes education is covered for all Molina Healthcare members. We encourage providers to refer patients to these services, especially for newly diagnosed diabetics or those having difficulty managing their disease.
- Smoking Cessation – For information about the Molina Smoking Cessation Program or to enroll members, please contact our Health Management Unit.

Diabetes Profiles – Molina Healthcare will send the PCP a report or profile of patients with diabetes. This shows specific patient utilization information of medication use, emergency department visits, and hospitalizations. We also request the PCP provide us with the names of Molina Healthcare diabetic patients not included in the profile.

To find out more information about the health management programs, please call Member Services Department at 1-(888) 483-0760.

Heart Healthy Living – Cardiovascular Disease (CVD) Management Program

Molina's *Heart Healthy Living* health management program is a collaborative team approach comprised of patient education, clinical case management and provider education. The team works closely with contracted practitioners in the identification, assessment and implementation of appropriate interventions for members with CVD.

While CVD can encompass many different conditions that often co-exist, Molina Healthcare has chosen to target three subprograms: heart failure, coronary artery disease (CAD) and hypertension. The literature supports the selection of these three conditions as being responsive to interventions aimed at the development of adequate self-management skills in optimizing clinical outcomes and improving quality of life.

The Heart Healthy Living program includes:

- Clinical Practice Guidelines – Molina Healthcare adopted the National Heart, Lung and Blood Institute (NHLBI) and the American Heart Association guidelines for cardiovascular care.
- Cardiovascular Disease Registry – Molina Healthcare established a CVD registry. The registry uses available claims and pharmacy information to identify and track cardiovascular members in the program.
- Cardiovascular Disease Newsletters – Molina Healthcare distributes newsletters to CVD members.
- Care Reminders and Tools – Molina Healthcare provides individualized reminders and educational tools to members with CVD.
- Cardiovascular Disease Education – CVD education is covered for all Molina Healthcare members. We encourage providers to refer patients to these services, especially for newly diagnosed heart disease or those having difficulty managing their disease.
- Smoking Cessation – For information about the Molina Smoking Cessation Program or to enroll members, please contact our Health Management Unit.

Cardiovascular Disease Profiles – Molina Healthcare will send the PCP a report or profile of patients with heart disease. This shows specific patient utilization information of medication use, emergency department visits, and hospitalizations. We also request the PCP provide us with the names of Molina Healthcare CVD patients not included in the profile.

To find out more information about the health management programs, please call Member Services Department at 1-(888) 483-0760.

Healthy Living with COPD

Given the diversity of Molina Healthcare's membership a health management system created around COPD should improve the quality of life among our members and clinical outcomes in the future. Molina's *Healthy Living with COPD* disease management program strives to improve outcomes through continual, rather than episodic, care. The program provides the most intense follow-up with members at the greatest risk for poor outcomes. Providing a continuum of coordinated, comprehensive care reduces the incidence of acute episodes requiring emergency treatment and promotes improved quality of care for our members.

The Healthy Living with COPD program includes:

- Clinical Practice Guidelines – Molina Healthcare adopted the Global Initiative for Chronic Obstructive Lung Disease (GOLD) guidelines for COPD care.
- COPD Registry – Molina Healthcare established a COPD registry. The registry uses available claims and pharmacy information to identify and track COPD members in the program.
- COPD Newsletters – Molina Healthcare distributes newsletters to COPD members.
- Care Reminders and Appropriate Tools – Molina Healthcare provides individualized reminders and educational tools to members with COPD.
- COPD Education – COPD education is covered for all Molina Healthcare members. We encourage providers to refer patients to these services, especially for newly diagnosed members or those having difficulty managing their disease.
- Smoking Cessation – For information about the Molina Smoking Cessation Program or to enroll members, please contact our Health Management Unit.

COPD Profiles – Molina Healthcare will send the PCP a report or profile of patients with COPD. This shows specific patient utilization information of medication use, emergency department visits, and hospitalizations. Molina Healthcare also requests the PCP provide us with the names of Molina Healthcare COPD patients not included in the profile.

To find out more information about the health management programs, please call Member Services Department at 1(888) 483-0760.