

MHIL Provider Memo

Molina Healthcare of Illinois | UPDATED February 1, 2024

Copays Commencing for HBIA and HBIS Programs

Molina Healthcare of Illinois (Molina) is reminding providers that Molina will be applying copays for certain services for HBIA and HBIS members beginning **February 1, 2024**. Members in the Health Benefits for Immigrant Adults (HBIA, ages 42–64) and Health Benefits for Immigrant Seniors (HBIS, ages 65+) programs are covered under Molina's Medicaid Family Health Plan (FHP) umbrella.

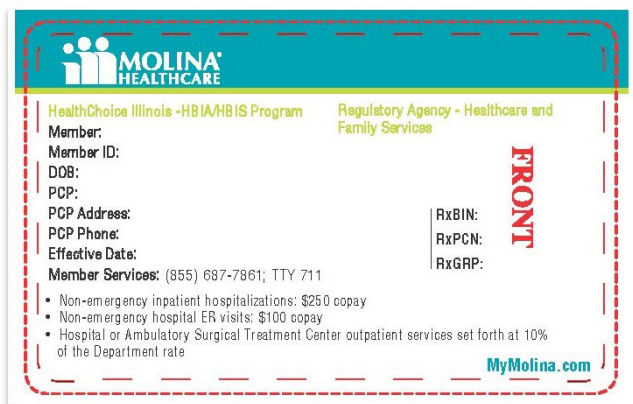
Cost Sharing/Copay

These members have a copay for certain services. **Important:** Providers should tell the member if they will charge cost sharing and what the amount will be **prior to** providing the service. Providers should note that payments will be reduced by the copay amount. At this time, cost share will be limited to:

- Nonemergency inpatient hospitalizations—Up to a \$250 copay.
- Nonemergency hospital or Ambulatory Surgical Treatment Center (ASTC) outpatient services—Up to 10% of the Medicaid payment. The amount charged will vary depending on the service.
- **Note:** Dental, transportation, and vision—No copays.
- **Change: Nonemergency hospital emergency room visits—No copays.**

Notes

- Enrollment is currently paused for both HBIA and HBIS. This action was taken through emergency rulemaking, under the authority granted to HFS by the Illinois General Assembly in SB 1298, to ensure the program does not exceed the funds available and appropriated in the budget for fiscal 2024. HFS has not indicated when enrollment will resume.
- Members have a Medicaid ID card. (Revised ID cards will be issued after removal of the ER visit copay reference.)



- MEDI will include a statement after “Case Type” identifying a person enrolled in HBIA or HBIS:

Coverage Detail
Expand
Hide

For the date(s) of service entered, the client is eligible for limited medical benefits. Additional information available below.

Case Type: IMMIGRANT ADULTS, FULL COVERAGE

- Covered stays (90 days or less) at a short-term nursing/rehabilitation facility only apply to HBIA/HBIS members assigned to MCOs (versus the HFS Fee-for-Service model that previously covered this group).
- HFS has created rate cells for the HBIA and HBIS populations, including age groups that are currently **not** part of the HBIA program.

Proc Cd	Description
W7088	HBIA 21–44 female*
W7089	HBIA 21–44 male*
W7090	HBIA 45–64
W7091	HBIS 65+

***Note:** The population **actually** enrolled in W7088 and W7089 is **42 to 44 years old**. HFS developed the rate cell in anticipation of potentially expanding to younger ages, since that has been proposed in recent legislation and could be passed in the future.

- Molina has developed a live webinar for providers, which will be conducted monthly during the first quarter. The webinar shares additional details and provides the opportunity to ask questions. All providers serving Medicaid members are **strongly encouraged** to attend one of the following sessions:
 - January 10, 2024, at 1 p.m. (completed)
 - [February 15, 2024, at 1 p.m.](#)
 - [March 13, 2024, at 1 p.m.](#)

Covered services

Most services covered by the HBIA and HBIS programs will be free to members outside of the hospital setting and billed by the provider, including:

- Doctor care (PCPs and specialists).
- Vaccinations at PCP or pharmacy.
- Hospital care.
- Lab tests.
- Rehabilitative services such as physical and occupational therapy.
- Home health, mental health, and Substance Use Disorder services.

- Kidney and stem cell transplant services.
- Dental, transportation, and vision services.
- Prescription drugs.
- Post-inpatient nursing rehab (up to 90 days); Molina is not responsible for reimbursement beyond 90 days.

Services not covered

- Long-Term Care (nursing home, etc.).
- Transplant services (exception: kidney and stem cell transplant services are Covered Services).
- Home and Community-Based Services (waiver services).

Emergency medical need

No copayment or cost sharing can be charged for an emergency service needed to evaluate or stabilize an Emergency Medical Condition. An Emergency Medical Condition is a condition with symptoms that are severe and painful enough that a reasonable person would think they are life-threatening and need immediate medical care.

Individuals enrolled in HBIA with emergency medical needs may qualify for the Emergency Medical Coverage for Noncitizens program. If they do not, HBIA/HBIS covers Emergency Room visits with no copays.

Providers can find more detailed information in [this provider notice on the HFS](#) website.

Questions?

We're here to help. Contact your dedicated Provider Relations Manager or email the Provider Network Management team at MHILProviderNetworkManagement@MolinaHealthcare.com. For help identifying your dedicated Provider Relations Manager, visit [Molina's Service Area page](#) at MolinaHealthcare.com.

Provider portal alert

Providers no longer have direct access to the Molina Legacy Provider Portal. Ensure that you and your staff have access to streamlined claims management, authorizations, eligibility/benefit verification, and more. Get started with [Availity Essentials Provider Portal](#) today!

Get critical updates

Receive news and updates about Molina services and plan requirements delivered straight to your inbox! [Click here](#) to receive updates curated for Molina's Illinois providers.

Note: Molina's website and documents are best viewed in Google Chrome or Microsoft Edge.