Guide to getting quality health care

Spring 2022

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Your guide to getting quality health care

The spring 2022 version of Passport Health Plan by Molina Healthcare's (Passport) Guide to Getting Quality Health Care (the Guide) helps you learn about the programs and services offered to you. Read about our Quality Improvement Program and the services that can help keep you healthy and treat health conditions you may have.

The Guide gives you details about how we:

- Protect you
- Make choices about your health care
- Help you with health care actions
- Meet your communication needs.

You can print the Guide and any other information you need from our website. To get the Guide in your preferred language or accessible format, call Member Services. You may also ask us to mail you a copy of the materials.

Department/ Program	Services	Phone Number
Member Services, including behavioral health	 Passport Member Services can: Answer questions about your health plan and services. Help you choose or change a primary care provider (PCP). Tell you where to get care. Offer interpreter services if you don't speak English. Provide information in other languages and formats. 	Member Services Passport Medicare Choice Care (HMO) Toll-Free: (844) 859-6152 TTY: 711 7 days a week, 8. a.m. to 8 p.m. Passport Advantage (HMO D-SNP) Toll-Free: (844) 859-6152 TTY: 711 7 days a week, 8. a.m. to 8 p.m
24-hour Nurse Advice Line	Talk to a registered nurse anytime you have questions about your health. Available 24/7.	24-hour Nurse Advice Line Passport Medicare Choice Care English and Spanish Toll-free: (800) 606-9880 TTY: 711 Passport Advantage English and Spanish Toll-free: (800) 606-9880 TTY: 711
24/7 Teladoc virtual care	Visit a board-certified doctor by phone or video through Teladoc, without leaving home.	Teladoc 800 TELADOC Toll-Free: (800) 835-2362 TTY: 711 member.teladoc.com/ Molina

Your health care contacts

Department/ Program	Services	Phone Number
Health management*	Do you live with a chronic health condition? We offer programs to help you manage: Asthma Depression Diabetes Chronic obstructive pulmonary disease (COPD) Heart failure High blood pressure Weight (nutritional counseling) Quitting smoking (smoking cessation) Substance use disorder For details on how to join and use these programs, call Health Management.	Health Management Toll-Free: (866) 891-2320 TTY: 711 Monday - Friday 6 a.m 6 p.m. PT
Health education*	Learn more about living well and staying healthy. Get details about programs to help you stop smoking and manage your weight. We'll help you learn how to use these programs.	Health Education Toll-Free: (866) 472-9483 TTY: 711 Monday - Friday 6 a.m. – 6 p.m. PT
Care management*	Care Managers assess your health problems and review benefits and resources. This program can help you live healthier. Member Services will help you learn how to use these programs.	Member Services Passport Medicare Choice Care Toll-Free: (844) 859-6152 TTY: 711 Passport Advantage Toll-Free: (844) 859-6152 TTY: 711
		Member Services
Complex care management*	If you live with chronic conditions, we offer supports to help you to simplify the services you need. Call Member Services	Passport Medicare Choice Care Toll-Free: (844) 859-6152

management*

services you need. Call Member Services to learn how to use these programs.

TTY: 711 Passport Advantage Toll-Free: (844) 859-6152 TTY: 711

Department/ Program	Services	Phone Number
Transition of care program*	When you're discharged from a hospital or nursing home, coaches help you transition. They help you get the care you need at home. Call Member Services to learn more.	Member Services Passport Medicare Choice Care Toll-Free: (844) 859-6152 TTY: 711 Passport Advantage Toll-Free: (844) 859-6152 TTY: 711
U.S. Department of Health and Human Services (HHS) Office for Civil Rights (OCR)	The OCR protects you from discrimination in health care and social services. It also protects the privacy of your personal health information.	Office for Civil Rights (OCR) Toll-Free: (800) 368-1019 TDD Toll-free: Toll-Free: (800) 537-7697 hhs.gov/ocr/index.html
Medicare	Health insurance offered by the federal government to most people 65 and older. Medicare helps pay for care but does not cover all medical expenses.	Medicare (800) MEDICARE Toll-Free: (800) 633-4227 TTY: (877) 486-2048 Medicare.gov

*You can opt out of these programs at any time. For more details about these programs, call Member Services.

Visit our website

Visit PassportHealthPlan.com. You'll find:

- Benefits and services
- Copays and other charges (if they apply)
- What to do if you get a bill for a claim
- Frequently Asked Questions (FAQs) and answers
- Pharmacy details like:
- The quality of the care you receive
- The way we communicate with you
 - Drugs we don't cover
 - Drug limits or quotas
 - How to request an exception for drugs not on the formulary
 - Generic substitutes

- Therapeutic interchange (different drugs that have the same effects)
- Step-therapy (covering one drug before we cover another)
- Preventive health guidelines and vaccine schedules
- How to get specialty care and hospital services
- Available providers

To get printed copies of anything on **PassportHealthPlan.com**, call Member Services. You can also view your Member Handbook on the website.

Member onboarding videos

We have member videos that help you understand Medicare and what to do as a new member. You can find them on Passport's YouTube channel, or go directly to these websites:

 PassportMedicareTerms.com explains basic Medicare and insurance terms

- **PassportMedicareParts.com** explains Parts A, B, C and D in more detail
- PassportMedicareStart.com tells you what
 happens once you enroll
- **PassportMedicareGo.com** tells Medicare Advantage members how to start using your benefits
- PassportDualGo.com tells DSNP members with MAPD and Medicaid how to start using your benefits

Member portal

MyPassportHealthPlan is your secure member portal. It lets you manage your health from your computer or phone. The member portal is easy to use. Here are some of the things you can do:

- Fill out your Health Appraisal if you haven't had one this year
- Search for a local pharmacy
- Find health education materials on our website that help you with:
 - Disease management
 - Staying healthy
 - Stopping tobacco use
- Request or print your member ID card
- Choose or change doctors
- See your health records
- Get health advice from our 24-hour Nurse Advice line, open 7 days a week via secure email
- Send email to Member Services

To learn more or to get help signing up for our member portal, call Member Services. You can also create an account:

Step 1: Go to MyPassportHealthPlan.com

- Step 2: Enter your Member ID number, date of birth and zip code
- Step 3: Enter your email address
- Step 4: Create a password

To create an account from your phone:

- Step 1: Find the MyMolina app in your App Store or Google Play store
- Step 2: Download the MyMolina app to your phone
- Step 3: Open the app and choose your health plan
- Step 4: Enter your email address

Step 5: Create a password

We suggest setting up your account on your computer first.

Online Provider Directory

To search for a provider online, go to **PassportHealthPlan.com** and click on **Find a Doctor or Pharmacy.** The provider directory includes:

- Names, addresses and phone numbers of network providers
- Providers' board certification status.
 - You can also visit **abms.org** to see if a provider is board-certified
- Office hours for all offices
- Providers accepting new patients
- Languages spoken by the provider or staff
- Hospital name, location and accreditation status

If you cannot access the internet or need more information (like your provider's medical school or residency), we can send you a printed copy. Call Member Services for help.

Passport Health Plan by Molina Healthcare's Quality Improvement Plan and Program

We are committed to making sure you get the best care possible. That's why each year, we put a plan in place to keep improving:

- Our services
- The quality of the care you receive
- The way we communicate with you

Our goals are to:

- Give you services that benefit your health
- Work with providers to get you the care you need
- Address your language and cultural needs
- Reduce any barriers to getting care, like issues with transportation and/or language

We also want to hear how we are doing. We review the past year of service to check our progress. We may send you a member survey to get your feedback.

We may also send surveys to see how many members get needed services. These surveys tell us what care is needed. One of these surveys is the CAHPS® (Consumer Assessment of Healthcare Providers and Systems).

This survey asks questions about how you rate:

- Your health care
- Your primary care provider (PCP)
- Your health plan
- Specialist(s) you have seen
- Well-check exams
- How easy it is for you to get care
- How easy it is for you to get care quickly

HEDIS[®] (Healthcare Effectiveness Data and Information Set)

We also measure how many of our members get key tests and exams. We look at:

- Annual exams
- Diabetes care
- Blood pressure control
- Mammograms (x-rays of the breast)
- Medicine management
- Pap tests
- Shots (flu)

We care about your health. We want to help you take better care of yourself. To do this, we:

- Remind you to get well-check exams and shots
- Teach you about managing chronic health problems
- Remind you to get Pap tests and mammograms, if needed
- Address any complaints you have
- Help you find and use information on our website
- Tell you about special services we offer

To learn more, call Member Services. You can ask for a printed copy of our Quality Improvement plan and results.

Guidelines to keep you healthy

We give you information about preventive services and when to get them. This information does not replace your doctor's advice.

To make the most of these guidelines:

- Take time to read them
- Write down questions and bring them to your next checkup
- Tell your provider about any health problems you are having
- Go to your appointments
- If you miss an appointment, reschedule right away

We tell you about key tests and exams for issues like diabetes, COPD and depression. See **PassportHealthPlan.com** for details. To learn more, call Member Services.

Extra help for chronic health problems

Taking care of health problems can be a lot to deal with. To make sure you get the right care, our Care Management program will help you:

- Get services
- Arrange tests and provider visits
- Get transportation to medical appointments
- Close gaps in care or service
- Get support for those with special needs and/or their caregivers
- Move from one setting to another, like leaving the hospital
- Get long-term care services
- Connect with community support
- Find community services like "Meals on Wheels" or physical therapy

You can be referred to Care Management through:

- A provider
- Member Services, the Health Education line or our 24-hour Nurse Advice Line
- A family member or caregiver
- Yourself

These programs are offered at no cost to you. You can choose to stop any program at any time. Call Member Services for more details.

Population health (Health Education, Disease Management, Care Management and Complex Care Management)

We offer many programs to help you lead a healthier life.

Health management

We offer the following programs to help you manage:

- Asthma
- Cardiovascular disease (CVD)
- Chronic obstructive pulmonary disease (COPD)

- Depression
- Diabetes
- Heart failure
- Nutritional counseling
- Smoking cessation
- Substance use disorder

To learn more, join or disenroll from any of these programs, call the Health Management team at (866) 891-2320 (TTY: 711) Monday through Friday, 6 a.m.–6 p.m. (Pacific Standard Time).

Care Connections

Our Care Connections team offers you preventive health services. One of our nurse practitioners will visit you in person or talk to you on a video call.

During your visit, you will get:

- A complete health and wellness assessment
- A full review of your current medicines and medical history
- Suggestions for care, screenings and resources based on your needs
- Help finding a primary care provider (PCP), scheduling your first visit and getting transportation
- Someone who can help connect you to the resources available to you
- An in-home visit if you have diabetes. This includes an A1c test, retinal eye exam and nephrology test

Member education

We post member education information at **PassportHealthPlan.com.** The information is easy-to-read and offers tips on healthy living.

Health education

We can teach you about things like:

- Eating healthy
- Preventing illness

- Stress care
- Staying active
- Cholesterol
- Asthma
- Diabetes

To get these materials on these topics, you can ask your doctor. You can also visit **MolinaHealthcare.com/StayingHealthy.**

Health risk assessment and self-management tools

For help making healthy changes, use the Health Appraisal on the **MyPassportHealthPlan** member portal. Just answer questions about your health, behaviors and suggested tests. You'll get a report about your Health Appraisal once you complete this tool. You only have to complete this once every 12 months unless asked. You can use the member portal or talk with us in person or over the phone.

You'll also find self-management tools that offer advice for:

- Weight management
- Depression
- Financial wellness
- Other topics that affect your health

These tools help you check progress, find barriers and measure progress toward goals. To learn more, go to **MyPassportHealthPlan**.

We are here to help! For questions about your Health Appraisal or for help with the survey, please call Passport's Care Management at (866) 472-4582 (TTY: 711).

Patient Safety Program

Our Patient Safety Program helps keep you safe when you get services.

We protect you by:

- Telling providers and hospitals about safety issues and where to get help
- Keeping track of members' complaints about safety issues in provider offices and hospitals

- Reviewing reports from groups that check hospital safety
- Helping you move from one place to another, such as from hospital to home
- Teaching you about questions to ask during provider visits

Groups that check safety include:

- Leapfrog Group Quality Index Ratings
- The Joint Commission National Patient Safety Goal Ratings

You can look at these websites to:

- See what hospitals are doing to be safer
- Know what to look for when you pick a provider or a hospital
- Get information about programs and services for conditions like diabetes and asthma

To learn more, call Member Services or visit **PassportHealthPlan.com.**

How we work with providers to make decisions about your care

Some services must be preapproved before we will cover them. We work with your provider to find out what services you need. We make choices about your care based on medical needs and benefits.

- We do not reward providers or others for denying services.
- We do not pay extra to providers or Passport staff to make choices that give you less care.

If you have a question about our process or rulings, call Member Services. We can accept collect calls. If you need help in your language, bilingual staff or interpreters are available at no cost. We also offer TTY services if you have hearing or speech problems. Please leave a message with your phone number if you call after hours or on the weekend. We'll return your call within one business day. If Member Services calls, we'll use our name, title and Passport Health Plan's name.

Looking at what's new

We look for ways to offer new types of care and services and new ways to provide them. We review new services for safety and added benefits. Every year, we look at updates in:

- Equipment
- Medical services
- Behavioral health services
- Medicines

Language services

We will provide written or verbal information in your language, at no cost. We offer interpreters to help you speak with your provider or us. We do this for most languages. This includes sign language. For an interpreter or written materials in a language other than English, call Member Services.

Behavioral health services

We can help you get the behavioral health care you need. You must use a network provider unless it's an emergency. We cover inpatient and outpatient services and provider visits. You don't need a referral to see a provider. You can choose or change your provider at any time. They can help you get the services you need. They can also provide a list of covered services.

We can help you if you're having:

- Sadness that isn't getting better
- Feeling hopeless or helpless
- Feeling guilt
- Feeling worthless
- Trouble sleeping
- Poor appetite or weight loss
- Loss of interest

If you need mental health or substance use services, you can:

- Call Member Services
- Call our 24-hour Nurse Advice Line
- Go to a mental health or substance use provider or facility

- Look at our Provider Directory at PassportHealthPlan.com
- Visit the member portal at MyPassportHealthPlan
- Ask Member Services for the names and telephone numbers of the facilities near you

Emergency behavioral health services

A behavioral health emergency is a mental health condition that can cause extreme harm to the body or death. Some examples are when you have:

- Thoughts of or attempted suicide
- Caused danger to yourself or others
- Been hurt and cannot carry out actions of daily life
- Been hurt and it will likely cause death or serious harm to your body

If you have an emergency, go to the closest emergency room. You can go to any other emergency place right away. You can also CALL 911.

If you go to the emergency room, tell your provider right away. If you have an emergency and can't get to a network provider:

- Go to the closest hospital or facility
- Call the number on your ID card
- Call your provider and follow-up within 24 to 48 hours

If you have an emergency out of area, we'll transfer you to a network provider. We'll do this when you get well.

What to do when you need after hours or emergency care

You may need care when your PCP's office is closed. After hours, call the 24-hour Nurse Advice Line at Passport Medicare Choice Care or Passport Advantage, English and Spanish, Toll-free (800) 606-9880 (TTY: 711).

Highly trained nurses are here 24/7 to:

- Answer your medical questions
- Help you decide if you need care right away
- Make an appointment for you

Emergency care

What is an emergency?

A sudden or severe problem that needs care right away or puts your life or health in danger.

We cover emergency care.

Emergency care is not covered outside the United States (except those needing hospitalization in Canada or Mexico).

If you need emergency care, call 911 or go to the nearest hospital. You don't need prior approval. For urgent care, call the 24-hour Nurse Advice Line at Passport Medicare Choice Care or Passport Advantage, English and Spanish, Toll-free (800) 606-9880 (TTY: 711).

About drug benefits

To learn about the drugs you need, talk to your provider. For details about your drug benefits, visit **PassportHealthPlan.com.** On our website, you can find:

- Our formulary: A list of generic and brand name drugs we cover
- Limits on covered drugs, like the numbers of refills or doses you may get
- How your provider can request approval on certain drugs or the amount you need
- Information needed from your provider to get approval for some of your drugs
- Your provider's process for generic substitutes, therapeutic interchange and step-therapy
- Updates to our formulary
- Any copays for drugs not on the formulary
- How your provider can ask us to cover a drug not on the formulary

To learn more, call Member Services.

Protecting your privacy

You have rights when it comes to protecting your health information. We will not share

health information that is not allowed by law. We respect and protect your privacy. We may use and share data to provide you with benefits. Your privacy is important to us.

Your protected health information (PHI)

PHI stands for protected health information. This includes your:

- Name
- Member ID number
- Race
- Ethnicity
- Language needs
- Other things that identify you

We may use your PHI to:

- Work with clinicians to provide your treatment
- Pay for your health care
- Review the quality of the care you get
- Tell you about your choices for care
- Run our health plan
- Use or share PHI for other purposes, as allowed by law

We must get your written approval to use or share your PHI for any purpose not listed above.

Your privacy rights

You have the right to:

- Look at your PHI
- Get a copy of your PHI
- Make changes to your PHI
- Ask us not to use or share your PHI in certain ways
- Get a list of the people or places we have given your PHI

How does Passport protect your PHI? Your PHI can be written, spoken or digital. We protect your PHI by:

- Having policies and procedures that protect you
- Limiting our staff who can see PHI

- Training our staff on how to protect and secure PHI (written and verbal communications)
- Requiring written agreement to follow the policies and procedures
- Securing PHI digitally with firewalls and passwords

By law, we must:

- Keep your PHI private
- Tell you if there is any breach of your unsecured PHI
- Not use or disclose your genetic information for underwriting purposes
- Not use your race, ethnicity, or language data for underwriting or denial of coverage
- Follow our Notice of Privacy Practices (NPP)

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

- Call or write Passport and file a complaint
- File a complaint with the U.S. Department of Health and Human Services

The information above is only a summary. To learn more about how we use and share your PHI, see our Notice of Privacy Practices at **PassportHealthPlan.com**. You also call Member Services to ask for a copy.

Your rights and responsibilities

Knowing your rights and responsibilities is important. It helps you, your provider and Passport ensure you get the care you need.

You have the right to:

- Get the facts about Passport, our services and providers, and your rights and responsibilities
- Privacy and to be treated with respect and dignity
- Help make decisions with your provider about your health care. You may refuse treatment
- Ask for a copy of your medical record

- Ask to change or correct your medical record
- Discuss your treatment options with your doctor in a way you understand. Cost or benefit coverage does not matter.
- Voice any complaints or send in appeals about Passport or the care you received
- Use your member rights without fear of negative results
- Get your rights and responsibilities each year
- Suggest changes to our rights and responsibilities policy

You also have the responsibility to:

- Give all the facts Passport and your providers need to care for you
- Know your health problems
- Take part in treatment goals that you and your provider agree upon
- Follow the treatment plan for your care
- Keep doctor visits and be on time
- If you're going to be late or cannot make it, call the office right away

Visit **PassportHealthPlan.com** to view your Member Handbook for a full list of your rights and responsibilities.

Women's health services

We cover care, breast exams, mammograms and Pap tests. For routine and preventive services, you can see a women's health specialist, which includes a gynecologist.

Getting care for special health needs

If you need Long Term Services and Supports (LTSS), someone with LTSS experience, training and education makes decisions about services. Call Member Services to learn more.

Second opinions

If you don't agree with your provider's diagnosis or health recommendations, you have the right to a second opinion. You can talk to another network provider. You can also talk to a provider outside of our network at no cost. To learn more, call Member Services.

Out-of-network services

You must get care from a network provider. In most cases, we do not cover services from an out-of-network provider. The only exceptions are when:

- You get emergency care or urgently needed services from an out-of-network provider.
 For more details, please see your Evidence of Coverage.
- You need medical care that Medicare requires us to cover and our network providers cannot provide this care. In this case, your provider must ask for a prior authorization (PA). Please call Member Services for help. If you get routine care from out-of-network providers without a PA, you have to pay for the costs.
- You get dialysis from a Medicare-certified facility when you are out of our service area.

To learn more, please call Member Services.

Grievances and appeals

If you have problems with your medical care or services, you have the right to file a grievance (complaint) or appeal.

File a grievance for things like:

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

File an appeal when you don't agree with our decision to:

- Stop, change, suspend, reduce or deny a service
- Deny payment for services

You may ask for an expedited review if the decision puts your life or health at risk. You

may also ask for a Fair Hearing if your appeal is denied.

Visit **PassportHealthPlan.com** and select your state or see your Member Handbook to read about:

- Grievance, appeal and State Fair Hearing process, rights and timeframes
- Who can file a grievance/appeal

For questions, call Member Services.

Your right to appeal a denial

What is a denial?

A denial means we will not pay for a service or bill. If we deny your service, you have the right to find out why it was denied. You have the right to appeal.

If we deny your service, you will get a letter telling you why. It will tell you about your right to appeal. You can read about these rights in your Member Handbook. You can learn how to file an appeal at **PassportHealthPlan.com** and finding the form. Member Services can also help you file an appeal.

If you're not happy with the result of your appeal, you can ask for an independent review. Providers outside of Passport will look at all the facts and decide. Passport will follow this finding.

Your right to an Advance Directive

You have the right to accept or refuse treatment offered by a provider. If you are unable to tell the provider what you want, you need to make your wishes known. It is important to have an Advance Directive. You can have one for medical and mental health care.

An Advance Directive is a legal form that tells providers the kind of care you want if you cannot speak for yourself. Write an Advance Directive before you have an emergency. This keeps other people from making important health decisions for you if you cannot make your own. There are different types of Advance Directives. Some examples are:

- Power of Attorney for Health Care
- Living Will

It's your choice to have an Advance Directive. No one can deny you care based on whether or not you have one. For help making decisions about your care, talk with someone you trust. This might be a family member or friend. You can also talk with your lawyer or PCP.

Call Member Services for help getting an Advance Directive that follows state laws.

If you have signed an Advance Directive and think your provider has not followed your wishes, you may file a complaint. Visit **PassportHealthPlan.com** or call Member Services for details.

You can get this document for free in non-English language(s) or other formats, such as large print, braille, or audio. Call (844) 859-6152 (TTY: 711). The call is free.

Passport Health Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, ethnicity, national origin, religion, gender, sex, age, mental or physical disability, health status, receipt of healthcare, claims experience, medical history, genetic information, evidence of insurability, geographic location.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al (844) 859-6152 (TTY: 711).

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