

Spring 2019 Health and Wellness Newsletter



Guide to Accessing Quality Health Care

Learn about the programs and services we offer today!

The Spring 2019 Guide to Accessing Quality Health Care is now available. You can find the **Guide** on our website. Go to www.molinahealthcare.com/MHMMarketplacePublications to view or print the **Guide**.

This **Guide** helps you learn about the programs and services we offer to our members. You can read about our:

- **Quality Improvement Program.** We use surveys and tools to review all of the services and care that you receive each year from Molina. We want to hear how we are doing. We collect information on services that include: immunizations, well-check exams, and diabetes care. We also help you take better care of yourself and your family. Some of the ways we do this include: mail or call you to make sure you and your child get

In This Issue

Guide to Accessing Quality Health Care	1
Health Care Fraud, Waste and Abuse	4
About Our Members: Protecting Your Privacy.....	5
Health Education.....	5
When to visit a PCP and Specialist.....	5
Preventive Health Guideline - Checkup Schedules	7
Appointment Wait Times	10
Stop Smoking	11

All newsletters are also available at MolinaHealthcare.com.

To get this information in your preferred language and/or accessible format, please call Member Services. The number is on the back of your Member ID card.

Este boletín informativo también está disponible en español. Por favor, comuníquese con el Departamento de Servicios para Miembros para pedir una copia en español.

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needed well exams and immunizations, tell you about special services, and help you learn about ongoing health problems. You can view our latest survey and tool results on our [MolinaHealthcare.com](https://www.molinahealthcare.com) website.

- **Population Health Management.** We have services to keep you healthy and take care of your health condition. These services include information on how you can receive extra help, tips to stay healthy, find and access eligible services, coordinate moving from one setting to another, and connect you to community resources if you have an ongoing health condition.

This **Guide** gives you details about how we:

Protect you:

- Protect your privacy
- Work with our doctors to make sure you get safe health care
- Review new studies to make sure the new services are proven to be safe
- Allow you to file a grievance (complaint) if you have problems with your medical care or Molina's service

Make choices about your health care:

- Look at new services to provide as part of the benefits we cover
- Tell you about your rights and responsibilities when you are enrolled in our health plan

Assist you:

- Guide you in the process to help you get health care after hours or during an emergency
- Help you find answers to drug benefit questions



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- Give you details about the services we offer for behavioral health
- Give you tips on how to get a second opinion about your health care from another doctor
- Show you how to get care out-of-network
- Let you appeal a denied service for a claim when it is not paid
- Tell you how to find information about our doctors on the Provider Online Directory
- Help you learn how to fill out an Advance Directive to help you make health care decisions if you cannot speak for yourself

Meet your communication needs:

- Offer TDD/TTY services if you need help with hearing or speech
- Offer language translation services if you need them
- Tell you how to access online tools, such as: Health Appraisal and Self-Management Tools and Calculators

This **Guide** gives you information you can find on the website. The information includes:

- How to order ID cards
- How to contact Member Services and the Nurse Advice Line by email
- Lists of our Molina contracted providers and hospitals, that include:
 - Provider names, addresses and phone numbers
 - A provider's board certification status
 - Office hours for all sites
 - Providers accepting new patients
 - Languages spoken by the provider or staff
 - Hospital information including name, location and accreditation status
- Details about your benefits and services that are included and excluded from coverage
- Co-payments you must pay (if they apply)
- What you do if you get a bill for a claim
- FAQs (frequently asked questions and answers)
- Pharmacy procedures, such as:
 - Drugs we do not cover
 - Drug limits or quotas
 - The process to request an exception for drugs not on the Preferred Drug List
 - The process for generic substitution, therapeutic interchange (using drugs that are different but have the same effects) and step-therapy protocols (certain drugs are tried first before we cover another drug for the same condition)
- How to contact Utilization Management (UM) staff about a UM issue or question
- UM affirmative statement about incentives describing that Molina does not reward providers who make UM decisions
- Preventive health guidelines and immunization schedules
- Your rights and responsibilities and the privacy of your information

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You can print out the **Guide** and any other information you need from our website. To get the **Guide** in your preferred language or accessible format, please call Member Services. You may also ask to have a hard copy of materials mailed to you. Call Member Services at (888) 560-4087, 8 a.m. to 5 p.m., EST. (TTY/TDD: 711).

Health Care Fraud, Waste and Abuse

Molina Healthcare of Michigan is focused on ensuring that fraud, waste and abuse does not occur. If you believe fraud, waste and abuse has taken place, you can report it without giving your name.

You can contact Molina anonymously by:

Online: www.MolinaHealthcare.alertline.com

Email: MHMCompliance@MolinaHealthCare.com

Phone: (866) 606-3889

Fax: (248) 925-1797

Regular Mail:

Molina Healthcare of Michigan

Attention: Compliance Director

880 West Long Lake Road, Suite 600

Troy, MI 48098-4504



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Or you can contact:

Online: www.michigan.gov/fraud

Phone: 1-855-MI-FRAUD (1-855-643-7283)

Regular Mail:

Michigan Department of Health and Human Services (MDHHS)

Office of Inspector General

P.O. Box 30062

Lansing, MI 48909

For more information, please visit:

<https://www.molinahealthcare.com/members/mi/en-US/mem/marketplace/quality/Pages/fraud.aspx>.

About Our Members: Protecting Your Privacy

Your privacy is important to us. We respect and protect your privacy. Molina wants you to know how we use or share your protected health information (PHI). Please visit the following link for a summary of how Molina protects your privacy: <https://tinyurl.com/MHMQualityGuideMP>.

Our Notice of Privacy Practices gives more information about how we use and share our members' PHI. You may find our full Notice of Privacy Practices on our website at MolinaHealthcare.com. You also may ask for a copy of our Notice of Privacy Practices by calling Member Services. The number is on the back of your Member ID card.

Health Education

As a Molina Member, you have access to health education on our website. Visit <http://tinyurl.com/MolinaHealthEd>. If you have Diabetes, talk to your provider about a dilated eye exam

When to visit a PCP and Specialist

It is important to visit your PCP at least 2 times per year to discuss any current illnesses and chronic conditions. Your PCP provides most of your care. Your PCP may also send you to specialists, other health care providers and hospitals.

Molina Healthcare and your PCP care about your health. Your PCP can help you avoid problems by:

- Finding medical, dental and other issues early
- Treating problems before they become serious and
- Educating you about your health

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If you have a chronic health condition like diabetes or renal disease, you may be able to have a specialist take care of you as your PCP. Please call us at (888) 560-4087, Monday – Friday, 8 a.m. to 5 p.m., EST. (TTY/TDD: 711) and we will help you.

Your doctor should make you feel comfortable. You may change your PCP or choose a new PCP at any time. Your requests will take effect immediately. To change your PCP, visit [MyMolina.com](https://www.MyMolina.com) or please call Member Services at (888) 560-4087, Monday – Friday, 8 a.m. to 5 p.m., EST. (TTY/TDD: 711) and we will help. If your health or safety is in danger, you will be given another PCP right away.

You will find a list of PCPs at [MolinaHealthcare.com](https://www.MolinaHealthcare.com) or [MyMolina.com](https://www.MyMolina.com). To request a paper copy of our list of PCPs at no cost to you, please call Member Services at (888) 560-4087, Monday – Friday, 8 a.m. to 5 p.m., EST. (TTY/TDD: 711).

If needed, a specialist can be your PCP. You can get specialty care from a participating provider including routine and preventive health care services from an OB/GYN, women’s health specialists and pediatric providers. There is no cost to get these services.

You can check [MolinaHealthcare.com](https://www.MolinaHealthcare.com) for a list of Molina specialists and other providers. You may request a paper copy of our list of specialists and other providers at no cost to you by calling Member Services at (888) 560-4087, Monday – Friday, 8 a.m. to 5 p.m., EST. (TTY/TDD: 711).

Prior Approval or Prior Authorization (PA) is a request for service from your doctor. You do not need it for most medical services. But some services do require it. Molina Healthcare’s medical staff and your doctor review the need for this care before services are given. They make sure it is right for your health condition. Please view the Covered Services section in your Member Handbook for more information. You can also call Member Services at (888) 560-4087, Monday – Friday, 8 a.m. to 5 p.m., EST. (TTY/TDD: 711).



[MolinaMarketplace.com](https://www.MolinaMarketplace.com)

Preventive Health Guideline - Checkup Schedules

These are general clinical recommendations for you (and your family's) health. Please check your benefit plan to see what services are covered for you. Always check with your health care provider about tests and exams you need.

A well checkup schedule helps you stay on track.

Life gets busy. Making provider's appointments and getting to them on time is not always easy to do. Use these schedules to help you stay on track.

	Infants, Children & Teens (0 to 18 years)	Adult Women (19 years and over)	Adult Men (19 years and over)
Well Visits	<ul style="list-style-type: none"> Newborns: 1 visit 3-5 days after discharge Infants (0-12 months): Visits at 2, 4, 6, 9 & 12 months Early Childhood (15 months - 4 years): Visits at 15, 18, 24 & 30 months & at 3 & 4 years Late childhood & adolescents (5-20 years): Visits once a year STI Screening¹ <p>Dental checkups and cleanings are needed every 6 months.*</p>	Every year	Every year

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	Infants, Children & Teens (0 to 18 years)	Adult Women (19 years and over)	Adult Men (19 years and over)
Immunizations	<p>Infants and young children</p> <ul style="list-style-type: none"> • Hepatitis B: Dose 1 before leaving the hospital, dose 2 between 1-2 months, dose 3 between 6-18 months • Rotavirus: 1 dose at 2, 4 and 6 months old. • Diphtheria, Tetanus, Pertussis (whooping cough) (DTaP): 1 dose at 2, 4, 6 and 18 months; Tdap between 11 and 12 years; Td booster every 10 years • Haemophilus influenza type b (Hib): 1 dose at 2, 4, and 6 months, then one dose between 12 - 18 months. • Pneumococcal (PCV): 1 dose at 2, 4, and 6 months, then at 12 -15 months. • Polio: 1 dose at 2 and 4 months, between 16 - 18 months, then fourth dose between 4-6 years • Influenza (Flu Shot): Yearly, 6 months & older • Measles, Mumps, Rubella (MMR): 1 dose at 12-15 months, second dose at 4 - 6 years • Chickenpox (Varicella): 1 dose between 12 - 15 months, second dose between 4-6 years • Hepatitis A (HepA): 2 doses between 12 - 23, at least 6 months apart <p>Adolescents</p> <ul style="list-style-type: none"> • Meningococcal (MCV4): 1 dose between age 11-12 years and the next at age 16 years • HPV: 2 doses over a 24 week period starting at age 11 for boys and girls 	<ul style="list-style-type: none"> • Influenza (flu shot): Yearly • Tetanus-diphtheria (TD): Every 10 years • Meningococcal: 1 dose, for high risk** • Pneumococcal: 1 dose, 65 years & older • Measles, Mumps, Rubella (MMR): 1 dose, if no proof of shots or immunity • Hepatitis A (HepA): 2 doses, for high risk** • Hepatitis B (HepB): 3 doses, for high risk** • HPV: 3 doses, age 26 years or younger • Herpes Zoster (Shingles): 50 years & older (2 doses, at least 8 weeks apart) • Varicella (Chickenpox): 2 doses if no proof of shots or immunity 	<ul style="list-style-type: none"> • Influenza (flu shot): Yearly • Tetanus-diphtheria (TD): Every 10 years • Meningococcal: 1 dose, for high risk • Pneumococcal: 1 dose, 65 years & older • Measles, Mumps, Rubella (MMR): 1 dose, if no proof of shots or immunity • Hepatitis A (HepA): 2 doses, for high risk** • Hepatitis B (HepB): 3 doses, for high risk** • Herpes Zoster (Shingles): 60 years & older • Varicella (Chickenpox): 2 doses if no proof of shots or immunity

	Infants, Children & Teens (0 to 18 years)	Adult Women (19 years and over)	Adult Men (19 years and over)
Exams & Screenings	<ul style="list-style-type: none"> Physical examination (height, weight, blood pressure, body mass index (BMI), anemia, metabolic exams) Developmental assessment Behavioral assessment Lead testing (at 12 and 24 months) Hearing & vision screenings TB test Pap test, Chlamydia, HIV, sexually transmitted infection (STI) test for sexually active teens First dental screening at 1 year and then every 6 months 	<ul style="list-style-type: none"> Physical Exam – Every year Height, weight & BMI Blood Pressure: Every visit Cholesterol screening: Every 5 years Chlamydia & STI for sexually active women 25 years of age and younger & other asymptomatic women at increased risk for infection Mammogram: Every 2 years until age 74 Pap test every 3 years at age 21-61 years or a Pap test with an HPV test every 5 years for ages 30 - 65 Bone density for osteoporosis: 65 years & older & women 60 and older at increased risk for osteoporotic fractures Colorectal cancer screening: Every 5-10 years based on provider recommendations Glaucoma screening: Every 2 years by an ophthalmologist or optometrist Tobacco use screening and counseling 	<ul style="list-style-type: none"> Physical Exam – Every year Height, weight & BMI Blood Pressure: Every visit Cholesterol screening: Every 5 years Colorectal cancer screening: Every 1, 5 or 10 years based on prior screening and provider recommendations Tobacco use screening and counseling Abdominal Aortic Aneurysm (AAA) screening: once for men 65 to 75 years with a history of smoking

* Not a guarantee of benefit coverage

**Talk with your medical provider about your risk factors

¹ Chlamydia, HIV and other sexually transmitted infections (STI) test for sexually active teens

Yearly Health Exam

The basic purpose of a yearly health exam is prevention. It is also to identify risk factors for common illnesses and to detect illnesses that have no visible symptoms. Your yearly exam should include a check of your blood pressure, cholesterol and blood sugar levels (diabetes). Your doctor will also provide education on living healthy. This may include nutrition and exercise advice and recommending health screenings.

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Appointment Wait Times

You can expect the wait times listed below when you call to make an appointment. How soon you get the appointment depends on why you need to see the provider. Try to take the earliest appointment given to you. If not, you may have to wait longer than the standard wait time for the next available appointment.

Medical Appointment Types	Length of Time
After Hours Care (Emergency Services)	<ul style="list-style-type: none"> Immediately 24 hours/day, 7 days per week
Urgent Care	<ul style="list-style-type: none"> Within 48 hours
Routine Primary Care	<ul style="list-style-type: none"> Within 30 business days of the request
Preventive Care Appointment	<ul style="list-style-type: none"> Within 30 business days of the request
Non-Urgent Symptomatic Care	<ul style="list-style-type: none"> Within 7 business days of the request
Specialty Care	<ul style="list-style-type: none"> Within 6 weeks of the request
Acute Specialty Care	<ul style="list-style-type: none"> Within 5 business days of request
Behavioral Health*	<ul style="list-style-type: none"> Immediately for life threatening emergency
	<ul style="list-style-type: none"> Routine care within 10 business days of request
	<ul style="list-style-type: none"> Non-life threatening emergency within 6 hours of request
	<ul style="list-style-type: none"> Urgent Care within 48 hours of request

*Behavioral Health is limited to Covered Services

Dental Appointment Types	Length of Time
Emergency Dental Services	<ul style="list-style-type: none"> Immediately 24 hours/day, 7 days per week
Urgent Care	<ul style="list-style-type: none"> Within 48 hours
Routine Care	<ul style="list-style-type: none"> Within 21 business days of the request
Preventive Care	<ul style="list-style-type: none"> Within 6 weeks of the request
Initial Appointment	<ul style="list-style-type: none"> Within 8 weeks of the request

Before your visit:

1. If you need an interpreter, let the provider's office know at least 3 days before the appointment.
2. Write down your main concerns and bring them with you.
3. Bring a list of your medications (prescribed, over-the-counter, vitamins).
4. Be sure to keep your appointment. If you cannot, please call your provider's office to let them know and reschedule.

At your appointment:

1. Arrive at your provider's office about 15 minutes early. You may need to fill out forms.
2. Make sure to give them your Molina ID card and any other insurance card and update them of any changes to your address or phone number.

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3. Please be patient if your provider is running late.
4. Tell your provider your concerns and symptoms as best as you can.
5. Ask the provider what you can do about your concerns.
6. Ask your provider about your treatment options.
7. Make sure the provider answers all your questions before you leave.
8. Your provider may refer you to a specialist or other health care provider. Ask if you will need to make the appointment. Ask for their phone number.

Stop Smoking

Why should you quit smoking?

- Smoking causes cancer of the lungs, mouth and throat
- Smoking causes heart disease
- Smoking causes emphysema or Chronic Obstructive Pulmonary Disease (COPD)
- Smoking causes the risk of stroke
- Smoking causes poor circulation
- Smoking causes diabetes complications

How can you stop smoking?

- Set a date to quit and stick to it
- Throw away ashtrays, cigarettes and lighters
- Clean your house and car to remove the smoke smell
- Stay in non-smoking areas
- Tell your family and friends so they can support you.
- Find ways to reduce stress
- Ask your provider about medicine to help you quit smoking

Are you ready to quit smoking?

We are ready to help! Molina Healthcare has a Stop Smoking Program. This program is at no cost to members.

The program includes:

- One-on-one counseling
- Health education materials
- Nicotine replacement therapy, if you are eligible and your provider decides it is right for you

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How can you enroll in our Stop Smoking Program?

Please call the Michigan QuitLine at 800-QUIT-NOW (800-784-8669) to get more information.

What are other resources to help you quit smoking?

- Smokefree.gov – www.smokefree.gov
- American Cancer Society – www.cancer.org
- National Cancer Institute Quitline – (877) 448-7848

When you quit smoking, you greatly reduce your risk of suffering from smoking related diseases.

If you are pregnant, smoking can harm you and your baby. Call our Health Education Department today to learn about our Stop Smoking Program.



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Your Extended Family

Non-Discrimination Notification
Molina Healthcare of Michigan, Inc.
Molina Marketplace

Molina Healthcare of Michigan, Inc. (Molina) complies with all Federal civil rights laws that relate to healthcare services. Molina offers healthcare services to all members without regard to race, color, national origin, age, disability, or sex. Molina does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. This includes gender identity, pregnancy and sex stereotyping.

To help you talk with us, Molina provides services free of charge:

- Aids and services to people with disabilities
 - Skilled sign language interpreters
 - Written material in other formats (large print, audio, accessible electronic formats, Braille)
- Language services to people who speak another language or have limited English skills
 - Skilled interpreters
 - Written material translated in your language
 - Material that is simply written in plain language

If you need these services, contact Molina Member Services at (888) 560-4087.

If you think that Molina failed to provide these services or treated you differently based on your race, color, national origin, age, disability, or sex, you can file a complaint. You can file a complaint in person, by mail, fax, or email. If you need help writing your complaint, we will help you. Call our Civil Rights Coordinator at (866) 606-3889, or TTY, 711. Mail your complaint to:

Civil Rights Coordinator
200 Oceangate
Long Beach, CA 90802

You can also email your complaint to civil.rights@molinahealthcare.com. Or, fax your complaint to (248) 925-1799.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights. Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>. You can mail it to:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201

You can also send it to a website through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>.

If you need help, call 1-800-368-1019; TTY 800-537-7697.



300 11th Ave E
Sartell, MN 56377



Questions about Your Health?

Call Our 24-Hour Nurse
Advice Line!

English and other languages:

(888) 275-8750

Spanish: **(866) 648-3537**

Your health is our priority!

TTY/TDD users should dial **711**.

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