



Mental Health and Substance Use Disorder Treatment Services (pages 69 to 70)

Beginning January 1, 2018, additional behavioral health services may be available to you. New Services include:

- Assertive Community Treatment (ACT) for members 18 and older
- Intensive Home Based Treatment (IHBT). This service is for individuals 18 and under however in some circumstances may be available to members aged 18-21.
- Comprehensive addiction treatment, including residential and partial hospitalization services.

Services such as office visits, vaccinations (shots), blood tests and more may be provided by your behavioral health treatment provider. If you would like more information about these services, talk to your provider or call Member Services at (855) 665-4623, TTY/TDD: 711, Monday - Friday, 8 a.m. to 8 p.m., local time.

Grievance and Appeals

Effective January 1, 2018, there will be changes to the way you appeal a decision Molina Dual Options MyCare Ohio Medicare-Medicaid Plan made and the way you ask for a state hearing. There are also changes in the amount of time you can report a complaint, also known as a grievance, to the plan. The changes are below.

	Before January 1, 2018	January 1, 2018 and after
How long do you have to appeal a decision we made?	90 calendar days.	60 calendar days.
When will you receive a state hearing form?	You receive a hearing form at the time Molina Dual Options MyCare Ohio makes a decision on your request for a service.	You will only receive a state hearing form if Molina Dual Options MyCare Ohio do not change their decision as part of your appeal.
When can you request a state hearing?	Hearings must be requested within 90 days of the date on the state hearing form sent by Molina Dual Options MyCare Ohio.	You must first follow Molina Dual Options MyCare Ohio's appeal process before you can request a state hearing. If you have an unfavorable appeal, you will also receive a state hearing form. You have 120 days from the mailing date of the form to request a hearing.
When can I report a complaint (also known as a grievance) to Molina Dual Options MyCare Ohio?	You have 90 days from the date you identify the issue causing the dissatisfaction to report the grievance to the Molina Dual Options MyCare Ohio.	You can file a grievance at any time.

Molina Dual Options MyCare Ohio Medicare-Medicaid Plan is a health plan that contracts with both Medicare and Ohio Medicaid to provide benefits of both programs to enrollees. You can get this document for free in other formats, such as large print, braille, or audio. Call (855) 665-4623, TTY/TDD: 711, Monday - Friday, 8 a.m. to 8 p.m., local time. The call is free. Limitations, copays, and restrictions may apply. For more information, call Molina Dual Options MyCare Ohio Member Services or read the Molina Dual Options MyCare Ohio Member Handbook. Benefits, and/or copays may change on January 1 of each year.

H5280_NSR_18_MMP_1077_OHHEDHandbltr 1/9/2018

MHO-2980
95788400H0118