



Molina Dual Options MyCareOhio

Medicare-Medicaid Plan

2021 | Annual Notice Of Changes

Ohio H5280-001

Serving Butler, Clark, Clermont, Clinton, Delaware, Franklin, Greene, Hamilton, Madison, Montgomery, Pickaway, Union, and Warren Counties



Molina Dual Options MyCare Ohio (Medicare-Medicaid Plan) offered by Molina Healthcare of Ohio

Annual Notice of Changes for 2021

Introduction

You are currently enrolled as a member of Molina Dual Options MyCare Ohio. Next year, there will be some changes to the plan's benefits, coverage, and rules. This Annual Notice of Changes tells you about the changes and where to find more information about them. Key terms and their definitions appear in alphabetical order in the last chapter of the *Member Handbook*.


 **If you have questions**, please call Molina Dual Options MyCare Ohio at (855) 665-4623, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., local time. If you need to speak to your Care Manager, please call (855) 665-4623, TTY: 711, 24 hours a day, 7 days a week. These calls are free. **For more information**, visit www.MolinaHealthcare.com/Duals.

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A. Disclaimers

- ❖ 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.
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B. Reviewing Your Medicare and Medicaid Coverage for Next Year

It is important to review your coverage now to make sure it will still meet your needs next year. If it does not meet your needs, you may be able to leave the plan. See section E2 for more information.

If you leave our plan, you will still be in the Medicare and Medicaid programs as long as you are eligible.

- You will have a choice about how to get your Medicare benefits (go to page 8 to see your choices).
- You must get your Medicaid benefits from one of the MyCare Ohio managed care plans available in your region (go to page 10 for additional information).

B1. Additional Resources

- **ATTENTION:** If you speak English, language assistance services, free of charge, are available to you. Call (855) 665-4623, TTY: 711, Monday - Friday, 8 a.m. to 8 p.m., local time. The call is free.
- **ATENCIÓN:** si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al (855) 665-4623, servicio TTY al 711, de lunes a viernes, de 8:00 a. m. a 8:00 p. m., hora local. La llamada es gratuita.
- You can get this *Annual Notice of Changes* for free in other formats, such as large print, braille, or audio. Call (855) 665-4623, TTY: 711, Monday - Friday, 8 a.m. to 8 p.m., local time. The call is free.
- You can ask that we always send you information in the language or format you need. This is called a standing request. We will keep track of your standing request so you do not need to make separate requests each time we send you information. To get this document in a language other than English or in an alternate format, call Member Services at (855) 665-4623, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., local time. A representative can help you make or change a standing request. You can also contact your Care Manager for help with standing requests. To permanently change your preferred language or format with your county caseworker, call the Medicaid Hotline at (800) 324-8680, TTY: 711, Monday – Friday, 7 a.m. to 8 p.m. and Saturday, 8 a.m. to 5 p.m., local time) to update your record with the preferred language.

If you have questions, please call Molina Dual Options MyCare Ohio at (855) 665-4623, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., local time. If you need to speak to your Care Manager, please call (855) 665-4623, TTY: 711, 24 hours a day, 7 days a week. These calls are free. **For more information**, visit www.MolinaHealthcare.com/Duals.



B2. About Molina Dual Options MyCare Ohio

- Molina Healthcare of Ohio is a health plan that contracts with both Medicare and Ohio Medicaid to provide benefits of both programs to enrollees. It is for people with both Medicare and Medicaid.
- Coverage under Molina Dual Options MyCare Ohio is qualifying health coverage called "minimum essential coverage." It satisfies the Patient Protection and Affordable Care Act's (ACA) individual shared responsibility requirement. Visit the Internal Revenue Service (IRS) website at www.irs.gov/Affordable-Care-Act/Individuals-and-Families for more information on the individual shared responsibility requirement.
- Molina Dual Options MyCare Ohio is offered by Molina Healthcare of Ohio. When this *Annual Notice of Changes* says "we," "us," or "our," it means Molina Healthcare of Ohio. When it says "the plan" or "our plan," it means Molina Dual Options MyCare Ohio.

B3. Important things to do

- **Check if there are any changes to our benefits that may affect you.**
 - Are there any changes that affect the services you use?
 - It is important to review benefit changes to make sure they will work for you next year.
 - Look in section D1 for information about benefit changes for our plan.
- **Check if there are any changes to our prescription drug coverage that may affect you.**
 - Will your drugs be covered? Are they in a different tier? Can you continue to use the same pharmacies?
 - It is important to review the changes to make sure our drug coverage will work for you next year.
 - Look in section D2 for information about changes to our drug coverage.
- **Check to see if your providers and pharmacies will be in our network next year.**
 - Are your doctors, including specialists you see regularly, in our network? What about your pharmacy? What about the hospitals or other providers you use?
 - Look in section C for information about our *Provider and Pharmacy Directory*.
- **Think about your overall costs in the plan.**
 - How do the total costs compare to other coverage options?

- **Think about whether you are happy with our plan.**

If you decide to stay with Molina Dual Options MyCare Ohio:

If you want to stay with us next year, it's easy – you don't need to do anything. If you don't make a change, you will automatically stay enrolled in our plan.

If you decide to change plans:

If you decide other coverage will better meet your needs, you may be able to switch plans (see section E2 for more information). If you enroll in a new plan, your new coverage will begin on the first day of the following month. Look in section E, page 8 to learn more about your choices.

C. Changes to the network providers and pharmacies

Our provider and pharmacy networks have changed for 2021.

We strongly encourage you to review our current Provider and Pharmacy Directory to see if your providers or pharmacy are still in our network. An updated Provider and Pharmacy Directory is located on our website at www.MolinaHealthcare.com/Duals. You may also call Member Services at (855) 665-4623, TTY: 711, Monday - Friday, 8 a.m. to 8 p.m., local time for updated provider information or to ask us to mail you a *Provider and Pharmacy Directory*.

It is important that you know that we may also make changes to our network during the year. If your provider does leave the plan, you have certain rights and protections. For more information, see Chapter 3 of your *Member Handbook*.

D. Changes to benefits for next year

D1. Changes to benefits for medical services

We are changing our coverage for certain medical services next year. The table below describes these changes.

	2020 (this year)	2021 (next year)
Cardiac and Pulmonary Rehabilitation Services	Services do not require prior authorization.	Some services may require prior authorization.
Fitness Benefit (This section is continued on the next page)	A fitness activity tracker is not covered.	A fitness activity tracker is covered.

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	2020 (this year)	2021 (next year)
Fitness Benefit (continued)	Supplemental fitness benefits are provided by the FitnessCoach® program.	Supplemental fitness benefits are provided by the Silver&Fit® program. Available options are the Fitness Center Membership, Silver&Fit home kits options and more. To enroll in the program visit, SilverandFit.com or reach out to Customer Service for help. To learn more about the Silver&Fit fitness benefit, see Chapter 4 of your Member Handbook.
Hospice Services	Hospice care provided in a nursing facility does not require prior authorization.	Hospice care provided in a nursing facility requires prior authorization.
Outpatient Substance Abuse Services	Services do not require prior authorization.	Some services may require prior authorization.
Over-the-Counter (OTC)	Debit Card / Retail for Over-the-Counter (OTC) is not covered.	Debit Card / Retail for Over-the-Counter (OTC) is covered.
Specialized Recovery Services	Specialized Recovery Services are not covered by the plan.	Specialized Recovery Services are covered by the plan.
Telehealth Services (Teladoc)	Additional Telehealth is not covered by the plan.	Additional Telehealth is covered by the plan. You can get medical care online or over the phone with Teladoc. To set up your account, visit member.teladoc.com/molina/OHMMP, download the Teladoc mobile app, or call 1-800-Teladoc (1-800-835-2362).

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D2. Changes to prescription drug coverage

Changes to our Drug List

An updated List of Covered Drugs is located on our website at www.MolinaHealthcare.com/Duals. You may also call Member Services at (855) 665-4623, TTY: 711, Monday - Friday, 8 a.m. to 8 p.m., local time for updated drug information or to ask us to mail you a List of Covered Drugs.

The *List of Covered Drugs* is also called the “Drug List.”

We made changes to our Drug List, including changes to the drugs we cover and changes to the restrictions that apply to our coverage for certain drugs.

Review the Drug List to **make sure your drugs will be covered next year** and to see if there will be any restrictions.


If you are affected by a change in drug coverage, we encourage you to:

- Work with your doctor (or other prescriber) to find a different drug that we cover.
 - You can call Member Services at (855) 665-4623, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., local time or contact your Care Manager to ask for a list of covered drugs that treat the same condition.
 - This list can help your provider find a covered drug that might work for you.
- Work with your doctor (or other prescriber) and ask the plan to make an exception to cover the drug.
 - You can ask for an exception before next year and we will give you an answer within 72 hours after we get your request (or your prescriber’s supporting statement).
 - To learn what you must do to ask for an exception, see Chapter 9 of the *2021 Member Handbook* or call Member Services at (855) 665-4623, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., local time.
 - If you need help asking for an exception, you can contact Member Services or your Care Manager. See Chapter 2 and Chapter 3 of the *Member Handbook* to learn more about how to contact your Care Manager.
 - Ask the plan to cover a temporary supply of the drug.
 - If your formulary exception is approved, you will be notified how long the approval will last. In most cases, approvals are given for one year. You will need to request a new formulary exception once your approval expires.

Changes to prescription drug costs

There are no changes to the amount you pay for prescription drugs in 2021. Read below for more information about your prescription drug coverage.

The following table shows your costs for drugs in each of our three (3) drug tiers.

 **If you have questions**, please call Molina Dual Options MyCare Ohio at (855) 665-4623, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., local time. If you need to speak to your Care Manager, please call (855) 665-4623, TTY: 711, 24 hours a day, 7 days a week. These calls are free. **For more information**, visit www.MolinaHealthcare.com/Duals.

	2020 (this year)	2021 (next year)
Drugs in Tier 1 (Generic drugs) Cost for a one-month supply of a drug in Tier 1 that is filled at a network pharmacy	Your copay for a one-month (31-day) supply is \$0 per prescription.	Your copay for a one-month (31-day) supply is \$0 per prescription.
Drugs in Tier 2 (Brand name drugs) Cost for a one-month supply of a drug in Tier 2 that is filled at a network pharmacy	Your copay for a one-month (31-day) supply is \$0 per prescription.	Your copay for a one-month (31-day) supply is \$0 per prescription.
Drugs in Tier 3 (Non-Medicare Rx/OTC drugs) Cost for a one-month supply of a drug in Tier 3 that is filled at a network pharmacy	Your copay for a one-month (31-day) supply is \$0 per prescription.	Your copay for a one-month (31-day) supply is \$0 per prescription.

E. How to choose a plan

E1. How to stay in Molina Dual Options MyCare Ohio


We hope to keep you as a member next year.

You do not have to do anything to stay in your health plan. If you do not sign up for a different MyCare Ohio Plan, change to a Medicare Advantage Plan, or change to Original Medicare, your enrollment in Molina Dual Options MyCare Ohio will automatically stay the same for 2021.

E2. How to change to a different MyCare Ohio plan

To enroll in a different MyCare Ohio plan, call the Ohio Medicaid Hotline at 1-800-324-8680, Monday through Friday from 7:00 am to 8:00 pm and Saturday from 8:00 am to 5:00 pm. TTY users should call the Ohio Relay Service at 7-1-1. The Hotline will let you know what other plans are available to you.

You can end your membership at any time during the year by enrolling in another MyCare Ohio Plan, changing to a Medicare Advantage Plan, or moving to Original Medicare.

 **If you have questions**, please call Molina Dual Options MyCare Ohio at (855) 665-4623, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., local time. If you need to speak to your Care Manager, please call (855) 665-4623, TTY: 711, 24 hours a day, 7 days a week. These calls are free. **For more information**, visit www.MolinaHealthcare.com/Duals.

E3. If you want to change your membership in Molina Dual Options MyCare Ohio

You can change your membership in our plan by choosing to get your Medicare services separately (you will stay in our plan for your Medicaid services).

How you will get Medicare services

You have three options for getting your Medicare services. By choosing one of these options, you will automatically stop getting Medicare services from our plan.

Change	What to do
<p>1. You can change to:</p> <p>A Medicare health plan, such as a Medicare Advantage plan, which would include Medicare prescription drug coverage</p>	<p>Here is what to do:</p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> • Call the Ohio Medicaid Hotline at 1-800-324-8680, Monday through Friday from 7:00 am to 8:00 pm and Saturday from 8:00 am to 5:00 pm. TTY users should call the Ohio Relay Service at 7-1-1. <p>You will automatically stop getting Medicare services through Molina Dual Options MyCare Ohio when your new plan’s coverage begins.</p>
<p>2. You can change to:</p> <p>Original Medicare with a separate Medicare prescription drug plan</p>	<p>Here is what to do:</p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048. You can select a Part D plan at this time.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> • Call the Ohio Medicaid Hotline at 1-800-324-8680, Monday through Friday from 7:00 am to 8:00 pm and Saturday from 8:00 am to 5:00 pm. TTY users should call the Ohio Relay Service at 7-1-1. <p>You will automatically stop getting Medicare Services through Molina Dual Options MyCare Ohio when your Original Medicare and prescription drug plan coverage begins.</p>



If you have questions, please call Molina Dual Options MyCare Ohio at (855) 665-4623, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., local time. If you need to speak to your Care Manager, please call (855) 665-4623, TTY: 711, 24 hours a day, 7 days a week. These calls are free. **For more information**, visit www.MolinaHealthcare.com/Duals.

Change	What to do
<p>3. You can change to:</p> <p>Original Medicare without a separate Medicare prescription drug plan</p> <p>NOTE: If you switch to Original Medicare and do not enroll in a separate Medicare prescription drug plan, Medicare may enroll you in a drug plan, unless you tell Medicare you don't want to join.</p> <p>You should only drop prescription drug coverage if you have drug coverage from another source, such as an employer or union. If you have questions about whether you need drug coverage, call your Ohio Senior Health Insurance Information Program (OSHIIP) at (800) 686-1578, Monday – Friday, 7:30 a.m. to 5 p.m. local time.</p>	<p>Here is what to do:</p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> • Call the Ohio Medicaid Hotline at 1-800-324-8680, Monday through Friday from 7:00 am to 8:00 pm and Saturday from 8:00 am to 5:00 pm. TTY users should call the Ohio Relay Service at 7-1-1. <p>You will automatically stop getting Medicare services through Molina Dual Options MyCare Ohio when your Original Medicare coverage begins.</p>

How you will get Medicaid services

You must get your Medicaid benefits from a MyCare Ohio plan. Therefore, even if you don't want to get your Medicare benefits through a MyCare Ohio plan, you must still get your Medicaid benefits from Molina Dual Options MyCare Ohio or another MyCare Ohio managed care plan.

If you do not enroll in a different MyCare Ohio plan, you will remain in our plan to get your Medicaid services.

Your Medicaid services include most long-term services and supports and behavioral health care.

Once you stop getting Medicare services through our plan, you will get a new member ID Card and a new *Member Handbook* for your Medicaid services.

If you want to switch to a different MyCare Ohio plan to get your Medicaid benefits, call the Ohio Medicaid Hotline at 1-800-324-8680, Monday through Friday from 7:00 am to 8:00 pm and Saturday from 8:00 am to 5:00 pm. TTY users should call the Ohio Relay Service at 7-1-1.

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F. How to get help

F1. Getting help from Molina Dual Options MyCare Ohio

Questions? We're here to help. Please call Member Services at (855) 665-4623 (TTY only, call 711). We are available for phone calls Monday - Friday, 8 a.m. to 8 p.m., local time.

Your 2021 Member Handbook

The *2021 Member Handbook* is the legal, detailed description of your plan benefits. It has details about next year's benefits. It explains your rights and the rules you need to follow to get covered services and prescription drugs.

An up-to-date copy of the *2021 Member Handbook* is always available on our website at www.MolinaHealthcare.com/Duals. You may also call Member Services at (855) 665-4623, TTY: 711, Monday - Friday, 8 a.m. to 8 p.m., local time to ask us to mail you a *2021 Member Handbook*.

Our website

You can also visit our website at www.MolinaHealthcare.com/Duals. As a reminder, our website has the most up-to-date information about our provider and pharmacy network (*Provider and Pharmacy Directory*) and our Drug List (*List of Covered Drugs*).

F2. Getting help from the Ohio Medicaid Hotline

The Ohio Medicaid hotline can help you find a Medicaid health care provider, explain Medicaid covered services, obtain Medicaid brochures and publications, and understand Medicaid benefits.

You can call the Ohio Medicaid Hotline at 1-800-324-8680, Monday through Friday from 7:00 am to 8:00 pm and Saturday from 8:00 am to 5:00 pm. TTY users should call the Ohio Relay Service at 7-1-1.

F3. Getting help from the MyCare Ohio Ombudsman

The MyCare Ohio Ombudsman is an ombudsman program that can help you if you are having a problem with Molina Dual Options MyCare Ohio. The ombudsman's services are free.

- The MyCare Ohio Ombudsman is an ombudsman program that works as an advocate on your behalf. They can answer questions if you have a problem or complaint and can help you understand what to do.
- MyCare Ohio Ombudsman makes sure you have information related to your rights and protections and how you can get your concerns resolved.
- The MyCare Ohio Ombudsman is not connected with us or with any insurance company or health plan.
- The MyCare Ohio Ombudsman helps with concerns about any aspect of care. Help is available to resolve disputes with providers, protect rights, and file complaints or appeals with our plan.

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- The MyCare Ohio Ombudsman works together with the Office of the State Long-term Care Ombudsman, which advocates for consumers getting long-term services and supports.

The phone number for the MyCare Ohio Ombudsman is 1-800-282-1206. TTY users should call 1-800-750-0750. The MyCare Ohio Ombudsman is available Monday through Friday from 8:00 am to 5:00 pm.

F4. Getting help from Medicare

To get information directly from Medicare, you can call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

Medicare's Website

You can visit the Medicare website (www.medicare.gov). If you choose to disenroll from your Medicare-Medicaid Plan and enroll in a Medicare Advantage plan, the Medicare website has information about costs, coverage, and quality ratings to help you compare Medicare Advantage plans.

You can find information about Medicare Advantage plans available in your area by using the Medicare Plan Finder on the Medicare website. (To view the information about plans, go to www.medicare.gov and click on “Find plans.”)

Medicare & You 2021

You can read Medicare & You 2021 Handbook. Every year in the fall, this booklet is mailed to people with Medicare. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare.

If you don't have a copy of this booklet, you can get it at the Medicare website (www.medicare.gov) or by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

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