

Guide to Accessing Quality Health Care

Spring 2019



MolinaHealthcare.com



Your Extended Family.

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MyMolina

MyMolina is a secure web portal that lets you manage your own health from your computer. [MyMolina.com](https://www.mymolina.com) is easy to use. Here are some of the things that you can do in MyMolina:

- Do a health appraisal. A health appraisal is a tool that can help you and your provider (doctor) identify ways to improve your health.
- Get self-help in the following areas:
 - Healthy weight (BMI)
 - Stop tobacco use
 - Promote physical activity
 - Healthy eating
 - Manage stress
 - Avoid drinking alcohol
 - Identify signs of depression
 - Identify signs of lack of motivation
 - Testing for cancer
 - Vaccinations
 - Safety



- Get pharmacy information such as:
 - Search for a pharmacy
 - Start the exception process
 - Learn about medicine interactions, side effects, or risks
 - Learn about generic medicine substitutes
 - Get e-refill reminders and learn about e-prescribing
 - Order a refill for current mail order prescriptions
- Other things you can do in the MyMolina member portal:
 - Request a Member ID card
 - Find out when and how to get referrals
 - Select or change a provider
 - Get online health records
 - Use secure e-mail to get health advice from the Nurse Advice Line
 - Send e-mail questions to Molina Member Services

To learn more or to sign up for MyMolina:

1. Call Molina Member Services department at (800) 869-7165 (TTY/TDD: 711)
2. Create an account by following these easy steps:

Step 1: Go to [MyMolina.com](https://www.mymolina.com) ([MiMolina.com](https://www.mimolina.com) en Español)

Step 2: Enter your Member ID number, date of birth and zip code

Step 3: Enter your email address

Step 4: Create a password

Molina Healthcare's Quality Improvement Plan and Program

Your health care is important to us. We want to hear how we are doing. That's why you may receive a survey about Molina Healthcare and your health care services. One of these surveys is called CAHPS®. CAHPS® stands for the Consumer Assessment of Healthcare Providers and Systems. This survey asks questions about your health care. It asks about the care you receive from Molina Healthcare. We may send you a few questions about how we are doing. We want to know what is important to you. Please take the time to complete the survey if you receive it.

We use another tool called HEDIS® to improve care. HEDIS® stands for Healthcare Effectiveness Data and Information Set. We collect information on services that you may have received. These services include:

- Immunizations (vaccinations or shots)
- Well-check exams
- Pap tests
- Mammogram screenings
- Diabetes care
- Prenatal care
- Postpartum care

This process helps us learn how many of our members actually got needed services. Molina makes this information available to you. You may use it to compare one health plan to another health plan.

We strive to improve our services each year. We set goals to improve services. Our Quality Improvement (QI) plan includes these goals. We want to help you take better care of yourself and your family.



We want to make sure you get the best service possible. Some of the ways we do this include:

- Mailing or calling you to make sure you and your child get needed well-exams and shots
- Helping you learn about ongoing health problems, if you have them
- Making sure you get prenatal care and after-delivery exams, if you are pregnant
- Reminding you to get Pap tests and mammogram screenings, if you need them
- Looking at member grievances (complaints) when you send them in
- Helping you find and use the information on the Molina Healthcare website
- Telling you about the special services we offer to all of our members

We review all of the services and care that you receive each year to see how well we are doing. Please visit our website at MolinaHealthcare.com/WAQIProgram. You can read the latest results of our progress on our website.

To learn more, call your Molina Healthcare Member Services Team at (800) 869-7165 (TTY/TDD: 711). You can ask for a printed copy of our QI plan and results.

Protecting Your Privacy

Your privacy is important to us. We respect and protect your privacy. Molina Healthcare uses and shares data to provide you with health benefits.

Protected Health Information (PHI)

PHI stands for “protected health information.” PHI includes your name, member number, race, ethnicity, language needs, or other things that identify you. Molina Healthcare wants you to know how we use or share your PHI.

Why does Molina Healthcare use or share your PHI?

- To provide for your treatment
- To pay for your health care
- To review the quality of the care you get
- To tell you about your choices for care
- To run our health plan
- To use or share PHI for other purposes, as required or permitted by law

When does Molina Healthcare need your written authorization (approval) to use or share your PHI?

Molina Healthcare needs your written approval to use or share your PHI for reasons not listed above.

What are your privacy rights?

- To look at your PHI
- To get a copy of your PHI



- To make changes to your PHI
- To ask us not to use or share your PHI in certain ways
- To get a list of certain people or places we have given your PHI

How does Molina Healthcare protect your PHI?

Your PHI can be in written word, spoken word, or on a computer. Molina Healthcare uses many ways to protect PHI across our health plan. Below are some ways Molina Healthcare protects your PHI:

- Molina Healthcare uses policies and rules to protect PHI.
- Only Molina Healthcare staff with a need to know PHI may use PHI.
- Molina Healthcare trains staff to protect and secure PHI, including written and verbal communications.
- Molina Healthcare staff must agree in writing to follow the rules and policies that protect and secure PHI.
- Molina Healthcare secures PHI on our computers. PHI on our computers is kept private by using firewalls and passwords.

What are the duties of Molina Healthcare?

Molina Healthcare is required to:

- Keep your PHI private
- Provide you with a notice in the event of 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 and benefits
- Follow the terms of this Notice

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

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

The above is only a summary. 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 our Member Services Department.

Patient Safety Program

Molina Healthcare wants you and your family to be safe and healthy. We have a Patient Safety Program to help us meet this goal. This program gives you safety facts so you can make better health care choices. Here are a few of the things we do to improve your safety:

- Keep track of our members' complaints about safety problems in their provider's office or hospital
- Give you information to learn more about how to make safe decisions about your care. These include:
 - Questions to ask your surgeon prior to surgery
 - Questions to ask about drug interactions
- Make programs available to help you manage your care and receive care in a timely manner
- Look at reports from groups that check hospital safety. Reports tell us about things like staffing levels in the Intensive Care Unit (ICU), use of computer drug orders, and so forth.

Groups that check safety:

- Leap Frog Quality Index Ratings (www.leapfroggroup.org)
- The Joint Commission National Patient Safety Goal Ratings (www.qualitycheck.org/consumer/searchQCR.aspx)

You can look at these websites to:

- See what hospitals are doing to be safer
- Help you know what to look for when you pick a provider or a hospital
- Get information about programs and services for patients with conditions like diabetes and asthma
- Call our Member Services Department (800) 869-7165 (TTY/TDD: 711) to get more information about our Patient Safety Program.
- You can also visit us online at MolinaHealthcare.com

How We Work with our Providers to Make Choices about Your Health Care

Molina Healthcare wants you to get the care you need. Sometimes your provider may need to ask us to approve the service before you receive the service (prior authorization), while you are receiving services (concurrent) or after you have got the service (post-service). We will work with your provider to decide if you need the services. We call this process Utilization Management (UM). We make choices about your care based on medical need and your benefits. We do not reward providers or others to deny coverage for services you need. We do not pay extra money to providers or our UM staff to make choices that result in giving less care.

If you have a question about our UM process or decisions, you can call us. Please call our Member Services Department toll-free at (800) 869-7165 (TTY/TDD: 711). Staff can also accept collect calls. If you need help in your language, a bilingual staff member or interpreter is available. We also offer TTY/TDD services for members who have



hearing or speech disabilities. Our Member Services staff can answer your call Monday through Friday (except holidays) between 7:30 a.m. and 6:30 p.m. PST. If you call after 6:30 p.m. or over the weekend, please leave a message and your phone number. The Member Services staff will return your call within one business day.

Looking at What's New

We look at new types of services, and we look at new ways to provide those services. We review new studies to see if new services are proven to be safe for possible added benefits. Molina Healthcare reviews the type of services listed below at least once a year:

- Medical services
- Mental health services
- Medicines
- Equipment

What to Do When You Need Care After Hours or in an Emergency

After Hours Care

There may be times when you may need care when your Primary Care Provider's (PCP) office is closed. If it is after hours and your PCP's office is closed, you can call Molina Healthcare's Nurse Advice Line at (888) 275-8750 (TTY/TDD: 711). Nurses are available to help you 24 hours a day, 7 days a week.

Highly trained nurses answer our Nurse Advice Line. They can help you decide if you should see a provider right away. The nurses can also help you make an appointment if you need to see a provider quickly. Sometimes, you may have questions but do not think you need to see your PCP. You can call the Nurse Advice Line and talk to a nurse.

Urgent Care

Urgent care is when you have a health problem that needs care right away, but your life is not in danger. This could be a child with an earache who wakes up in the middle of the night, a sprained ankle, or a bad

splinter you cannot remove. Urgent care is covered anywhere in the United States. If you think you need to be seen quickly, go to an urgent care center that contracts with Molina.

Virtual Urgent Care

When you are not feeling well and cannot see your PCP, help is available 24/7 with Molina’s Virtual Urgent Care. A virtual care doctor or nurse practitioner can diagnose and treat minor conditions like colds, sinus infections, or pink eye via phone or video chat on your tablet or computer.

Sign up now so that you are ready to get care when you need it. Go to wvirtualcare.molinahealthcare.com or call (844) 870-6821 (TTY/TDD: 711) For emergencies, call 911.

Virtual Urgent Care is FREE for Molina Apple Health (Medicaid) members in Washington. Molina offers virtual care through contracted providers. Rates for cell phone or internet use will apply as designated by your personal cell phone or internet service carrier.

Emergency Care

Emergency care is for sudden or severe problems that need care right away. It can also be needed care if your life or health is in danger.



Emergency care is a covered benefit. However, no services are covered outside the United States, except for emergency services requiring hospitalization in Canada or Mexico. If you need emergency care, call 911 or go to the nearest hospital. You do not need prior approval. If you have an urgent matter that does not threaten your life, you can also call our Nurse Advice Line. Call (888) 275-8750 (TTY/TDD: 711), 24 hours a day, 7 days a week.

Crisis Services

Get qualified help at: Washington Recovery Help Line (866) 789-1511 (TTY/TDD: 711).

Please call if you or someone you know is struggling with issues related to mental health, substance use or gambling. Help is available 24 hours a day, 7 days a week. Language interpretation is available.

Where to Find Answers to Drug Benefits

Molina Healthcare wants you to speak to your provider about drugs you need. You can visit our website at [MolinaHealthcare.com](https://www.MolinaHealthcare.com) if you want to know more about your drug benefits. Our website also explains our pharmacy process. On the website, you can find:

- A list of generic and brand name drugs that we cover and do not cover (drug formulary)
- Limits on covered drugs
- Limits include items such as the numbers of refills you may receive or drug doses you may get
- How your provider can ask us to approve certain drugs
- How your provider can ask for the amount of a drug you may need
- Information needed from your provider to get approval for some of your drugs
- Details about the process that your provider will use for generic substitution, therapeutic interchange and step-therapy protocols
- Updates made to the drug list at any time during the year

If you need more information on your pharmacy benefits, you can also call Member Services.

Getting Extra Help when you have Ongoing Health Problems

Taking care of your own health problems can be hard. Molina Healthcare has a program that can help. We offer a Case Management Program to help members deal with difficult health problems. We offer this help to anyone receiving health services for an ongoing health problem. Our staff will work with you to make sure you receive the right care.

Molina Healthcare staff can help you:

- Find and access eligible services.
- Arrange doctor visits and tests.
- Help you understand and manage chronic health conditions such as diabetes, high blood pressure, asthma, and depression.
- Assist with arranging transportation.
- Identify any gaps in care or health care needs.
- Access resources to help individuals with special health care needs and/or their caregivers deal with day-to-day stress.



- Coordinate moving from one setting to another. This can include working with you and your caregiver(s) when a hospital discharges you.
- Assess eligibility for long-term care services.
- Connect with community resources such as housing, food, transportation and other social services like Meals on Wheels .
- Find services that might not be covered benefits. This can include physical therapy with schools or in community settings.
- Arrange services with a primary care provider (PCP), family members, caregivers, representatives and any other identified provider.

Members can be referred to Case Management through:

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

These programs are voluntary. Molina Healthcare offers them at no cost to you. You can choose to be removed from any program at any time.

Please call Molina Healthcare’s Member Services Department to:

- Be removed from a program
- Learn more about a program
- Ask for a referral

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

The tools and services described here are educational support for our members. We may change them at any time as necessary to meet the needs of our members.

Health Education

Health Education Materials

Our materials are on nutrition, preventive services guidelines, stress management, exercise, cholesterol management, asthma, diabetes and

other topics. To get these materials, ask your doctor or visit our website at www.MolinaHealthcare.com/MHWMedicaidPublications.

Newsletters

Newsletters are posted on the MolinaHealthcare.com website. The articles are about topics asked by members like you. The tips can help you and your family stay healthy.

Molina Healthcare offers programs to help you and your family manage a diagnosed health condition. Our programs include:

Disease Management

Molina’s Disease Management Program offers support to members in managing the following conditions:

- Prediabetes
- Diabetes
- Asthma
- Hypertension
- Congestive Heart Failure
- Coronary Artery Disease
- Overweight and Obesity



The goals of this program are to work directly with Molina members and their providers to help prevent the onset of chronic disease and/or stabilize existing disease. In practical terms, our clinical team helps members:

- Better understand their condition
- Better understand their medications and how to take them
- Make the right choices and stay on track with their health goals
- Remove barriers and get them to the services they need
- Enroll in weight management, smoking cessation services and other programs and incentives to support a healthy lifestyle.

You can learn more, enroll in or dis-enroll from any of the programs above by calling Molina Healthcare of Washington (MHW) Disease Management program at (888) 562-5442, ext. 147121, 8:00 a.m. to 5:00 p.m. PST, Monday through Friday. Our email address is: MHW Disease Management@MolinaHealthcare.com.

Care Management

Molina has a variety of Care Management Programs that are voluntary for members in order to improve health outcomes. Case managers can help members with managing their conditions and providing members with education and needed resources. To learn more, call Member Services at (800) 869-7165 (TTY/TDD: 711), from 7:30 a.m. to 6:30 p.m. PST, Monday through Friday.

Complex Case Management

The Complex Case Management team works with members with either advanced disease or multiple medical, behavioral and/or social issues.

Molina's Case Management program can help a member with:

- Accessing community resources
- Navigating health plan services
- Identifying gaps in care and barriers to meet health care needs
- Coordinating services with the member's health care team
- Supporting improved health outcomes through goal setting
- Providing education and resources to help manage chronic conditions

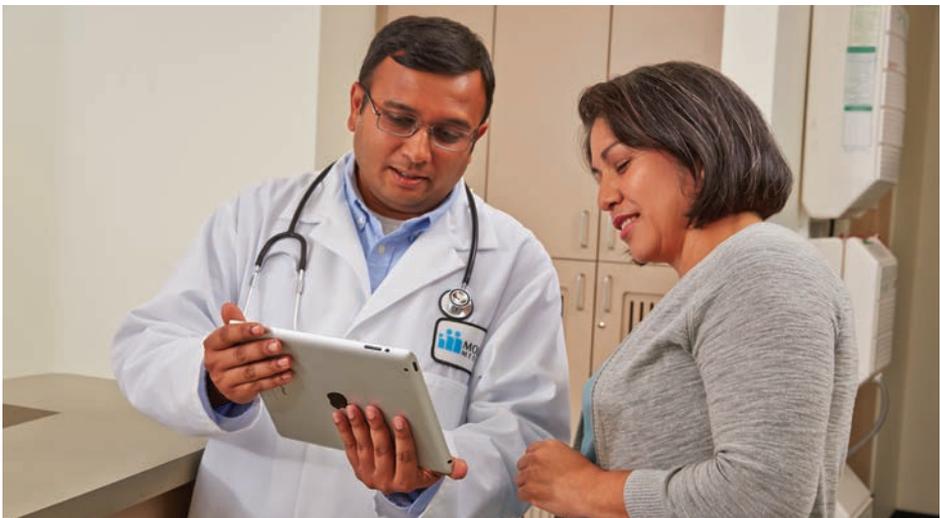
Molina's Complex Case Management program serves Medicaid, Medicare and Marketplace members.

The number to Molina’s Member Services is (800) 869-7165 (TTY/TDD: 711). Our hours of operation are 7:30 a.m. to 6:30 p.m. PST, Monday through Friday.

Your Health Care Quick Reference Guide

Department/ Program	Type of Help Needed	Number to Call/Contact Information
Molina Member Services Department	If you have a problem with any of Molina’s services, we want to help fix it. You can call our Member Services Department for help or to file a grievance or complaint Monday through Friday from 7:30 a.m. to 6:30 p.m. PST.	Member Services Toll-Free: (800) 869-7165 (TTY/TDD: 711) TTY for the hearing-impaired: (800) 833-6388 or dial 711 for the Telecommunications Relay Service
Disease Management	To request information on programs for conditions such as: <ul style="list-style-type: none"> • Prediabetes • Diabetes • Asthma • Hypertension • Congestive Heart Failure • Coronary Artery Disease • Overweight and Obesity 	(888) 562-5442, ext. 147121 between 8:00 a.m. and 5:00 p.m. PST, Monday through Friday Our email address is: MHWDiseaseManagement@MolinaHealthcare.com
Maternity Screening and High Risk OB support	For information on our pregnancy and maternity screening programs please contact our Member Services department.	Member Services (800) 869-7165 (TTY/TDD: 711)

<p>Nurse Advice Line 24-Hours, 7 days a week</p>	<p>If you have questions or concerns about your or your family's health. The Nurse Advice Line is staffed by registered nurses.</p>	<p>(888) 275-8750 English and other languages (866) 648-3537 Spanish TTY/TDD: (800) 833-6388</p>
<p>Health Care Authority (HCA) Apple Health Customer Service</p>	<p>Questions regarding covered services not included through your plan or your ProviderOne Services card.</p>	<p>ProviderOne Client Portal, available at: https://www.waproviderone.org/client or https://fortress.wa.gov/hca/p1contactus/ If you still have questions or need further help, call toll-free (800) 562-3022.</p>
<p>Washington Health Benefit Exchange (HBE)</p>	<p>If you want to make changes to your account such as:</p> <ul style="list-style-type: none"> • Address changes • Income changes • Marital status • Pregnancy, and births or adoptions 	<p>Washington Health Benefit Exchange at 855-WAFINDER (855-923-4633) or go online to https://www.wahealthplanfinder.org</p>



Behavioral Health

Molina Healthcare offers behavioral health services to help with problems such as stress, depression or confusion. There are services to help with substance abuse as well. Your PCP can offer a brief screening and help guide you to services. You can also look for services on your own by calling Member Services at (800) 869-7165 (TTY/TDD: 711). You can access many types of services. These types of problems can be treated. Molina Healthcare will assist you in finding the support or service you need. A Molina Healthcare Care Manager can assist in connecting with behavioral health or substance use resources.

Your Rights as a Molina Healthcare Member

Did you know that as a member of Molina Healthcare, you have certain rights and responsibilities? Knowing your rights and responsibilities will help you, your family, your provider and Molina Healthcare ensure that you get the covered services and care that you need. You have the right to:

- Receive the facts about Molina Healthcare, our services, our practitioners, and providers who contract with us to provide services, and member rights and responsibilities.
- Have privacy and be treated with respect and dignity.
- Help make decisions about your health care. You may refuse treatment.
- Request and receive a copy of your medical records.
- Request a change or correction to your medical records.
- Discuss your treatment options with your doctor or other health care provider in a way you understand them. Cost or benefit coverage does not matter.
- Voice any complaints or send in appeals about Molina Healthcare or the care you were given.
- Use your member rights without fear of negative results.
- Receive the members' rights and responsibilities each year.
- Suggest changes to Molina Healthcare's member rights and responsibilities policy.

You also have the responsibility to:

- Give, if possible, all facts that Molina Healthcare and our practitioners and providers need to care for you.
- Know your health problems and take part in making mutually agreed upon treatment goals as much as possible.
- Follow the treatment plan instructions for the care you agree to with your practitioner.
- Keep doctor visits and be on time. If you're going to be late or cannot keep a doctor visit, call your provider.

Please visit our website at [MolinaHealthcare.com](https://www.molinahealthcare.com) or view your Member Handbook for a complete list of member rights and responsibilities.

Second Opinions

If you do not agree with your provider's plan of care for you, you have the right to a second opinion. Talk to another provider. This service is at no cost to you. Call Member Services at (800) 869-7165 (TTY/TDD: 711) to learn how to get a second opinion.



Out-of-Network Services

If a Molina Healthcare provider is unable to provide you with necessary and covered services, Molina Healthcare must cover the needed services through an out-of-network provider. The cost to you should be no greater than it would be if the provider were in Molina Healthcare's network. This must be done in a timely manner for as long as Molina's provider network is unable to provide the service.

Grievances and Appeals

Are you having problems with your medical care or our services? If so, you have a right to file a grievance (complaint) or appeal.

A grievance can be 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

You may file an appeal when you do not agree with Molina Healthcare's decision to:

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

You may request an expedited review if the decision may risk your life or health. You may also ask for a Fair Hearing with the State Administrative Law Judge if your appeal is denied.

Visit our website, [MolinaHealthcare.com](https://www.molinahealthcare.com), or your Member Handbook to read about:

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

Call Member Services at (800) 869-7165 (TTY/TDD: 711) if you have any grievance questions.

Your Right to Appeal Denials

What is a denial?

A denial means that services or bills will not be paid. If we deny your service or claim, you have the right to request why your services or bills were denied. You have a right to appeal.

If we deny your service or claim, you will get a letter from Molina Healthcare telling you about this decision. This letter 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 on our website, MolinaHealthcare.com. Member Services can also help you file an appeal.

If you are not happy with the result of your appeal, you can ask for an independent review. This means providers outside Molina Healthcare review all the facts in your case and make a decision. We will accept that finding.

Would you like to ask for a review of an appeal? Call Member Services at (800) 869-7165 (TTY/TDD: 711) and ask them to help set this up for you.



Finding Information about Molina Providers Using our Website (POD)

Molina Healthcare offers a provider online directory. To access the provider online directory, visit [MolinaHealthcare.com](https://www.molinahealthcare.com). Click on “Find a Doctor”. The provider online directory includes information, such as:

- A current list with the names, addresses and phone numbers of Molina Healthcare providers.
- A provider’s board certification status. You can also visit the American Board of Medical Specialties at www.abms.org to check if a provider is board certified.
- Office hours for all sites.
- Providers accepting new patients.
- Languages spoken by the provider or staff.
- Hospital information including name, location and accreditation status.

If you cannot access the Internet, or need additional information (such as your provider’s medical school or residency information), Member Services can help. They can send you a printed copy of the provider online directory.

Your Right to an Advance Directive

All members have the right to accept or refuse treatment offered by a provider. However, what if you are not able to tell the provider what you want? To avoid decisions that may be made against your will, it is important to have an Advance Directive.

An Advance Directive is a legal form that tells medical providers what kind of care you want if you cannot speak for yourself. You can write an Advance Directive before you have an emergency. This keeps other people from making important health decisions for you if you are not well enough to make your own. There are different types of Advance Directive forms. Some examples are:

- Power of Attorney for Health Care
- Living Will

It is your choice to complete an Advance Directive. No one can deny you care based on whether or not you have an Advance Directive. Talk with someone you trust, like a family member or friend. They can help you make decisions about your health care. You can also talk with your lawyer or PCP if you have questions, or would like to complete an Advance Directive form.

You may call Molina Healthcare to get information on how to obtain Advance Directive forms that comply with applicable state laws.

If you have signed an Advance Directive and you believe the provider has not followed your instructions, you may file a complaint. Please visit the website at [MolinaHealthcare.com](https://www.molinahealthcare.com) or call Member Services for more information on how to file a complaint.

Visit the Molina Healthcare Website

Visit our website at [MolinaHealthcare.com](https://www.molinahealthcare.com). Choose your state at the top of the page. You can get information on our website about:

- Benefits and services, included and excluded from coverage and restrictions
- Co-payments and other charges for which you are responsible (if they apply)
- What to do if you get a bill for a claim
- FAQs (frequently asked questions and answers)
- Other pharmacy procedures including drugs we do not cover, drug limits or quotas, the process to request an exception for drugs not on the formulary, and 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)
- Preventive health guidelines and shot schedules
- How to obtain specialty care and hospital services

You can ask for printed copies of anything posted on the website by calling Member Services. Your Member Handbook is also a good resource. You can find it on our website.

Translation Services

We can provide information in your preferred language. We can have an interpreter to help you speak with us or your provider in almost any language (including sign language). We also provide written materials in different languages and formats. If you need an interpreter or written materials in a language other than English, please contact Member Services at (800) 869-7165. TTY/TDD users should dial 711. There is no cost to you for these services.