



Your Extended Family.

Welcome to Molina Healthcare!

Molina Healthcare is your health care plan effective <Date>. A health care plan is also called a managed care organization (MCO). Molina Healthcare provides health care services to eligible Kentucky residents, like you.

What Should You Do First?

1. **Find your member ID card.** It is included with this letter. Take it with you everywhere. You need to show this card to get covered health care services and prescription drugs.
2. **Get to know your primary care provider (PCP).** Your PCP is a doctor who knows you well and takes care of all your medical needs. You can reach your PCP at:

<PCP Name>

<PCP Phone>

<PCP Site Address>

It is important to have a good relationship with your PCP. By visiting your PCP every year, you will get preventive care. Your PCP will be able to find any health issues early and begin treating them before they get worse.

If you need special care that your PCP cannot give, he or she will refer you to a specialist. Getting a referral from your PCP is not required, but it ensures all your providers know your health care goals and plans.

3. **Sign up for 24/7 access to your health plan.** With MyMolina.com and our mobile app you can:
 - Choose or change your PCP
 - Ask for a new ID card
 - Get a temporary ID card
 - View and search our online provider directory
 - View your benefits information
 - Update your address and other contact information
 - View your health record
4. **Understand your benefits.** Included with this letter are a list of Covered Services and a Member Handbook. They have a lot of important information about Molina, like:
 - What services are covered and how to get them
 - Which services have a co-pay and who is excluded from paying co-pays
 - How to complete your New Member Health Risk Assessment
 - How to view the list of covered prescription drugs

- Well care services for members 20 and younger
- Mental health and substance use disorder treatment services
- How to find providers in our network
- Emergency services and your right to use any hospital or medical setting for emergency services
- How to tell us you're unhappy with a decision we made
- Your membership rights and responsibilities
- How to complete Advance Directives
- Who is eligible for Medicaid health plan membership

5. **Learn about our Care Management and Population Health Services.** Molina offers programs to help you manage health care conditions, like:

- Asthma
- Behavioral health disorders
- Cancer
- Chemical dependency
- Chronic Obstructive Pulmonary Disease (COPD)
- Congestive Heart Failure (CAD)
- Developmental disabilities
- Diabetes
- High blood pressure
- Obesity
- Pain management
- Pregnancy

6. **Learn about our Healthy Rewards program.** We offer all our members rewards for going to their check-ups, dental visits and important preventive health screenings. Plus, you get check-up reminders and health education. If you need support, our Care Managers can help members manage conditions like asthma, cancer, COPD, diabetes, heart disease, substance use disorder and more. To learn more, visit MolinaHealthcare.com or call Member Services.

7. **View our Online Provider Directory.** Visit www.MolinaHealthcare.com/ProviderSearch or log on to the mobile app to view the directory or search for a doctor. It lists all the providers in our network.

8. **Let us know about services you already have scheduled.** Call us today if you have health care services that were scheduled before you joined our plan or approved by Medicaid Fee-for-Service. For a period of time, you may be able to keep getting these services or seeing providers not in our network. Tell us right away so we can make sure you're getting the care you need.

9. **Ask your doctor about your prescriptions.** Call us or ask your provider if you have questions about your prescription drugs. Prior approval may be needed for prescription drug coverage. We will let you know if you need prior approval from us for any of your current prescriptions.

Need Help? Stop by a Molina One-Stop Help Center!

Walk in to any of our regional help centers in Louisville, Covington, Bowling Green, Hazard, Lexington or Owensville. From <hours/days of operation>, we're ready to help:

- Answer questions about your benefits, covered services and prescription drugs
- Find a doctor or change your PCP
- Walk through how to use our MyMolina online portal and mobile app
- Find food, housing, utility or other community assistance
- Sign up for GED classes and testing at no cost to you
- Write your resume and fill out job applications
- Set up a private room where you can have a virtual visit with a doctor

To learn more or find our help center addresses, visit MolinaHealthcare.com or call Member Services.

Need Health Advice?

Call our 24-hour Nurse Advice Line or 24-hour Behavioral Health Crisis Line. Registered nurses can answer your questions or help find an urgent care center or emergency department near you. The numbers are on the back of your ID card.

Have Questions?

If you need help or have questions, call Member Services at (XXX) XXX-XXXX (TTY 711) from 7 a.m. to 7 p.m., Eastern Time, Monday to Friday. We're also ready to help you:

- Get a new ID card
- Change the PCP on your ID card
- Make appointments with your doctors
- Answer questions about covered services and co-pays
- Answer any other questions about your health plan

If you have a problem reading or understanding this information, please contact Member Services at (XXX) XXX-XXXX (TTY 711) for help at no cost to you. We can explain this information in English or in your primary language. We may have this information printed in some other languages. If you are visually or hearing-impaired, special help can be provided.

Services Covered by Molina Healthcare

As a Molina Healthcare member, you get all medically-necessary Medicaid-covered services. Medically necessary means you need the services to prevent, diagnose, or treat a medical condition. The following list of covered services tells you which services need prior approval (PA) and which do not. Not all services that need prior approval are included in this list. For more information, or if you have questions, call Member Services.

Covered Services	
Services covered by our plan	Limitations and exceptions
Ambulance transportation	PA is not required for emergency transportation.
Certified nurse midwife services	PA is not required.
Certified nurse practitioner services	PA is not required.
Chiropractic (back) services <ul style="list-style-type: none"> Diagnostic x-rays Adjustments of the spine to correct alignment 	PA is not required.
Dental services <ul style="list-style-type: none"> Routine cleaning and exam once every 6 months Routine x-rays Removal of impacted wisdom teeth and emergency tooth re-implantation for adults Dentures, partial plates and braces 	Routine services and oral surgery services and evaluations by orthodontists and prosthodontists do not require PA. Other dental services require PA.
Diagnostic services (x-ray, lab)	<p>Selected diagnostic services (including CT Scans, MRIs, MRAs, PET Scans and SPECT) require PA.</p> <p>PA is not required for ultrasounds.</p>
<p>Durable medical equipment (DME)</p> <p>The equipment you need for certain medical conditions is covered, such as:</p> <ul style="list-style-type: none"> Wheelchairs Oxygen equipment Canes, crutches and walkers 	Some DME items require PA.
<p>Emergency services</p> <p>An emergency is a medical problem you think is so serious that it must be treated right away by a doctor. Emergency services are always covered. To learn more, see page X.</p>	PA is not required.

<p>Family planning services and supplies</p> <ul style="list-style-type: none"> • Exam and medical treatment • Lab and diagnostic tests • Family planning methods (birth control pills, patch, ring, IUD, injections, implants) • Supplies (condom, foam, film, diaphragm, cap) • Treatment for sexually transmitted infections (STIs) 	<p>PA is not required.</p>
<p>Federally Qualified Health Center or Rural Health Clinic services</p> <ul style="list-style-type: none"> • Office visits for primary care and specialists services • Physical therapy services • Speech pathology and audiology services • Dental services • Podiatry services • Vision services • Chiropractic services • Transportation services • Mental health services 	<p>PA is not required.</p>
<p>Free-standing birth center services at a free-standing birth center</p> <p>You can call Member Services to see if there are any qualified centers in your area.</p>	<p>PA is not required.</p>
<p>Home health services</p> <ul style="list-style-type: none"> • Home health aide and/or nursing services • Physical therapy, occupational therapy, and speech therapy • Private duty nursing • Home infusion therapy • Medical and social services • Medical equipment and supplies 	<p>PA is required after the initial evaluation plus the first 6 visits.</p>

<p>Hospice care (care for terminally ill, e.g., cancer patients)</p> <p>While you are receiving hospice care, Molina Healthcare will also cover:</p> <ul style="list-style-type: none"> • Drugs to treat symptoms and pain • Short-term respite care • Home care • Nursing facility care 	<p>PA is not required.</p>
<p>Inpatient hospital services</p> <ul style="list-style-type: none"> • Semi-private room, or private room if medically necessary • Meals, including special diets • General and special nursing care • Costs of special care units, such as intensive care • Drugs and medications prescribed in accord with our Preferred Drug List • Lab tests • X-rays • Needed surgical and medical supplies, including anesthesia • Physical, occupational and speech therapy • Operating and recovery room services • Inpatient substance abuse services 	<p>Inpatient hospital services (except for emergency admissions) and elective admissions, including pregnancy delivery services, and all inpatient surgeries, require PA. Notification to Molina Healthcare is required within 24 hours of admission or by the next business day for emergency admissions.</p>
<p>Medical supplies</p>	<p>Some medical supplies require PA.</p>
<p>Mental health and substance use disorder treatment services</p> <ul style="list-style-type: none"> • Assessment • Crisis intervention • Counseling and psychotherapy • Psychiatric medication management • Medication assisted treatment for addiction • Methadone administration 	<p>PA is not required to begin getting services at a Community Behavioral Health Center or other network providers.</p> <p>PA is only required for intensive services such as partial hospitalization or to receive services beyond the annual Medicaid limits for psychology or community behavioral health services. Contact your provider or Molina Healthcare for more information.</p>
<p>Non-emergency ambulance stretcher services</p> <ul style="list-style-type: none"> • Transportation to and from needed medical visits is covered if your provider says you must be moved by stretcher and you cannot ride in a car. 	<p>PA is required.</p>

<p>Nursing facility services</p> <ul style="list-style-type: none"> • A semi-private room, or a private room if medically-necessary • Meals, including special diets • Nursing services • Physical, occupation and speech therapy • Drugs you get as part of your plan of care • Medical and surgical supplies • Lab tests • X-rays • Equipment, such as wheelchairs <p>Nursing facility stays are covered unless DCBS determines that you will return to fee-for-service. If you are in need of nursing services, call Member Services for information on available providers.</p>	<p>Nursing facility services require PA.</p>
<p>Obstetrical (maternity care - prenatal and postpartum including at-risk pregnancy services) and gynecological services</p> <ul style="list-style-type: none"> • Prenatal care • Postpartum care • At-risk pregnancy care management • Pelvic exam and pap test 	<p>PA is not required.</p>
<p>Outpatient hospital services</p> <ul style="list-style-type: none"> • Services in an emergency department or outpatient clinic • Outpatient surgery • Chemotherapy • Lab and diagnostic tests • Mental health care • X-rays • Medical supplies, such as splints and casts 	<p>Some outpatient services require PA.</p>
<p>Physical and occupational therapy</p>	<p>In an outpatient setting, you can have 30 visits in each 12-month period for any physical and occupational therapy services without PA. PA is required to get services after 30 visits in a 12-month period.</p>

<p>Podiatry (foot) services</p> <ul style="list-style-type: none"> • Diagnosis of injuries and diseases of the foot • Surgical treatment • Routine foot care 	Some podiatry services require PA.
<p>Prescription drugs, including certain prescribed over-the-counter drugs</p> <p>Your provider will write a prescription for any drugs you need. You must fill the prescription at a network pharmacy. See the Prescription Drugs section on page XX of your Member Handbook to learn more.</p>	Selected drugs, including injectables and some over-the-counter drugs, require PA.
Preventive mammogram (breast) and cervical cancer (pap smear) exams	PA is not required.
<p>Primary care provider services</p> <p>Your PCP will provide all routine care services, such as:</p> <ul style="list-style-type: none"> • Yearly well exams • EPSDT • Preventive screenings • Immunizations • Colds/flu • Sore throat • Earache • Rash • Joint pain • Pregnancy tests 	PA is not required.
<p>Renal dialysis (kidney disease)</p> <ul style="list-style-type: none"> • Inpatient and outpatient dialysis treatments • Home dialysis supplies 	PA is not required.
Screening and counseling for obesity	PA is not required. Screening and counseling for obesity requires a referral by a provider.
<p>Shots (immunizations)</p> <ul style="list-style-type: none"> • Vaccines for children under age 21 • Flu shots • Hepatitis B vaccine 	PA is not required.

<p>Specialist services</p> <p>Consultation, diagnosis and treatment by specialist provider</p>	<p>Office visits to see a specialist do not require PA. Some specialist services do require PA.</p>
<p>Speech and hearing services, including hearing aids</p> <ul style="list-style-type: none"> • Hearing and balance tests • Hearing aids, batteries and accessories • Speech therapy 	<p>In an outpatient and home setting, you can have 30 visits in each 12-month period for any combination of speech and audiology therapy services without PA. PA is required to get services after 30 visits in a 12-month period.</p> <p>Some hearing aids may require PA.</p>
<p>Vision (optical) services, including eyeglasses</p> <ul style="list-style-type: none"> • One eye exam every 12 months • Replacement frames and lenses every 12 months due to normal wear and tear or when medically necessary. • Expanded selection of frames to choose from at no cost to you 	<p>PA is not required, except for contact lenses.</p>
<p>Well-child (EPSDT) exams for children under the age of 21</p> <p>Checkups, immunizations and other services for children under age 21. See page XX to learn more.</p>	<p>PA is not required.</p>
<p>Yearly well-adult exams</p>	<p>PA is not required.</p>

Nondiscrimination Notice

Molina Healthcare of Kentucky (Molina) complies with all Federal civil rights laws that relate to health-care 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

If you need these services, contact Molina Member Services at (XXX) XXX-XXXX TTY 711.

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 grievance. You can file a grievance in person, by mail, fax, email, or through MyMolina.com, our secure member portal. If you need help writing your complaint, we will help you. Call our Civil Rights Coordinator at (XXX) XXX-XXXX, or TTY, 711. Mail your grievance to:

Civil Rights Coordinator
200 Oceangate
Long Beach, CA 90802

You can also email your grievance to civil.rights@molinahealthcare.com. Or, fax your complaint to (XXX) XXX-XXXX.

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-XXX-XXX-XXXX; TTY XXX-XXX-XXXX.

ATTENTION: If English is not your first language, you can get language assistance services, free of charge. Call X-XXX-XXX-XXXX. If you are deaf or hard of hearing, call 711 for TTY.

Spanish – ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al X-XXX-XXX-XXXX (TTY: 711).

Chinese – 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 X-XXX-XXX-XXXX (TTY: 711)。

German – ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: X-XXX-XXX-XXXX (TTY: 711).

Vietnamese – CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số X-XXX-XXX-XXXX (TTY: 711).

Arabic – ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم X-XXX-XXX-XXXX (711: رقم هاتف الصم والبكم).

Serbo-Croatian – OBAVJEŠTENJE: Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite X-XXX-XXX-XXXX (TTY- Telefon za osobe sa oštećenim govorom ili sluhom: 711).

Japanese – 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。X-XXX-XXX-XXXX (TTY: 711) まで、お電話にてご連絡ください。

French – ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le X-XXX-XXX-XXXX (TTY : 711).

Korean – 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. X-XXX-XXX-XXXX (TTY: 711) 번으로 전화해 주십시오.

Pennsylvanian Dutch – Wann du Deutsch Pennsylvania German schwetzsch, kannscht du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schprooch. Ruf selli Nummer uff: Call X-XXX-XXX-XXXX (TTY: 711).

Nepali – ध्यान दिनुहोस्: तपाईंले नेपाली बोल्नुहुन्छ भने तपाईंको निम्ति भाषा सहायता सेवाहरू निःशुल्क रूपमा उपलब्ध छ । फोन गर्नुहोस् X-XXX-XXX-XXXX (टिटिवाइ: 711) ।

Cushite – XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa X-XXX-XXX-XXXX (TTY: 711).

Russian – ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните X-XXX-XXX-XXXX (телетайп: 711).

Tagalog – PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa X-XXX-XXX-XXXX (TTY: 711).

Bantu – ICITONDERWA: Nimba uvuga Ikirundi, uzohabwa serivisi zo gufasha mu ndimi, ku buntu. Woterefona X-XXX-XXX-XXXX (TTY: 711).