



# Molina Dual Options

## Medicare-Medicaid Plan

### 2021 | Annual Notice Of Changes

#### **Illinois H8046-001**

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**Molina Dual Options Medicare-Medicaid Plan offered by Molina Healthcare**

***Annual Notice of Changes for 2021***

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***Introduction***

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You are currently enrolled as a member of Molina Dual Options. Next year, there will be some changes to the plan's benefits, coverage, rules, and costs. 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 at (877) 901-8181, TTY: 711, Monday - Friday, 8 a.m. to 8 p.m., local time. The call is free. For more information, visit [www.MolinaHealthcare.com/Duals](http://www.MolinaHealthcare.com/Duals).

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## A. Disclaimers

- ❖ Molina Dual Options Medicare-Medicaid Plan is a health plan that contracts with both Medicare and Illinois Medicaid to provide benefits of both programs to enrollees.
  - ❖ Molina Healthcare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, ethnicity, national origin, religion, gender, sex, age, mental or physical disability, health status, receipt of healthcare, claims experience, medical history, genetic information, evidence of insurability, geographic location.
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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 7 to see your choices).
- You will get your Medicaid benefits through fee-for-service or a HealthChoice Illinois Medicaid Managed Long-Term Services and Supports (MLTSS) health plan (go to page 9 for more information).

### B1. Additional Resources

- **ATTENTION:** If you speak English, language assistance services, free of charge, are available to you. Call (877) 901-8181, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., local time. The call is free.
- **ATENCIÓN:** Si usted habla español, los servicios de asistencia del idioma, sin costo, están disponibles para usted. Llame al (877) 901-8181, 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 information for free in other formats, such as large print, braille, or audio. Call (877) 901-8181, 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 (877) 901-8181, 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 Coordinator for help with standing requests. To permanently change your preferred language, contact the State at (800) 843-6154, TTY: 711, Monday – Friday, 8:30 a.m. to 5 p.m., local time to update your record with the preferred language.

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If you have questions, please call Molina Dual Options at (877) 901-8181, TTY: 711, Monday - Friday, 8 a.m. to 8 p.m., local time. The call is free. For more information, visit [www.MolinaHealthcare.com/Duals](http://www.MolinaHealthcare.com/Duals).



## B2. Information about Molina Dual Options

- Molina Dual Options Medicare-Medicaid Plan is a health plan that contracts with both Medicare and Illinois Medicaid to provide benefits of both programs to enrollees.
- Coverage under Molina Dual Options 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](http://www.irs.gov/Affordable-Care-Act/Individuals-and-Families) for more information on the individual shared responsibility requirement.
- Molina Dual Options is offered by Molina Healthcare. When this *Annual Notice of Changes* says "we," "us," or "our," it means Molina Healthcare. When it says "the plan" or "our plan," it means Molina Dual Options.

## 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 D 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 D 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.**

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If you have questions, please call Molina Dual Options at (877) 901-8181, TTY: 711, Monday - Friday, 8 a.m. to 8 p.m., local time. The call is free. For more information, visit [www.MolinaHealthcare.com/Duals](http://www.MolinaHealthcare.com/Duals).



**If you decide to stay with Molina Dual Options:**

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 13 to learn more about your choices.

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**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](http://www.MolinaHealthcare.com/Duals). You may also call Member Services at (877) 901-8181, 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*.

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**D. Changes to benefits for next year**

**D1. Changes to benefits for medical services**

We are changing our coverage for certain medical services and what you pay for these covered medical services next year. The following table describes these changes.

	2020 (this year)	2021 (next year)
<b>Cardiac and Pulmonary Rehabilitation Services</b>	Prior Authorization for Cardiac and Pulmonary Rehabilitation Services is <b>not</b> required.	Prior Authorization for Cardiac and Pulmonary Rehabilitation Services is required.
<b>Institution for Mental Disease Services for Individuals 65 or Older</b>	You pay a minimum patient pay amount of \$0 and up to a maximum patient pay amount of \$7727.99.	You pay a minimum patient pay amount of \$0 and up to a maximum patient pay amount of \$8167.88.

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If you have questions, please call Molina Dual Options at (877) 901-8181, TTY: 711, Monday - Friday, 8 a.m. to 8 p.m., local time. The call is free. For more information, visit [www.MolinaHealthcare.com/Duals](http://www.MolinaHealthcare.com/Duals).



	2020 (this year)	2021 (next year)
<b>Nursing Home Services</b>	You pay a minimum patient pay amount of \$0 and up to a maximum patient pay amount of \$7727.99.	You pay a minimum patient pay amount of \$0 and up to a maximum patient pay amount of \$8167.88.
<b>Over-the-counter (OTC)</b>	Debit Card / Retail for Over-the-counter (OTC) is <b>not</b> covered.	Debit Card / Retail for Over-the-counter (OTC) is covered.

## 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](http://www.MolinaHealthcare.com/Duals). You may also call Member Services at (877) 901-8181, 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 (877) 901-8181, TTY: 711, Monday - Friday, 8 a.m. to 8 p.m., local time or contact your care coordinator 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 (877) 901-8181, 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 coordinator. See Chapter 2 and Chapter 3 of the *Member Handbook* to learn more about how to contact your care coordinator.

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If you have questions, please call Molina Dual Options at (877) 901-8181, TTY: 711, Monday - Friday, 8 a.m. to 8 p.m., local time. The call is free. For more information, visit [www.MolinaHealthcare.com/Duals](http://www.MolinaHealthcare.com/Duals).



- 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.

	2020 (this year)	2021 (next year)
<b>Drugs in Tier 1</b> (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 <b>\$0 per prescription.</b>	Your copay for a one-month (31-day) supply is <b>\$0 per prescription.</b>
<b>Drugs in Tier 2</b> (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 <b>\$0 per prescription.</b>	Your copay for a one-month (31-day) supply is <b>\$0 per prescription.</b>
<b>Drugs in Tier 3</b> (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 <b>\$0 per prescription.</b>	Your copay for a one-month (31-day) supply is <b>\$0 per prescription.</b>

## E. How to choose a plan

### E1. How to stay in our plan

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 Medicare-Medicaid Plan, change to a Medicare Advantage Plan, or change to Original Medicare, you will automatically stay enrolled as a member of our plan for 2021.



If you have questions, please call Molina Dual Options at (877) 901-8181, TTY: 711, Monday - Friday, 8 a.m. to 8 p.m., local time. The call is free. For more information, visit [www.MolinaHealthcare.com/Duals](http://www.MolinaHealthcare.com/Duals).



**E2. How to change plans**

If you want to keep getting your Medicare and Medicaid benefits together from a single plan, you can join a different Medicare-Medicaid Plan. You can enroll in the new Medicare-Medicaid Plan by calling Illinois Client Enrollment Services Monday through Friday from 8 a.m. to 6 p.m. at 1-877-912-8880. TTY users should call 1-866-565-8576. The call and help are free.

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

**E3. What if you don't want to join a different Medicare-Medicaid Plan**

If you do not want to enroll in a different Medicare-Medicaid Plan after you leave Molina Dual Options, you will go back to getting your Medicare and Medicaid services separately.

**E4. How you will get Medicare services**

You will have three options for getting your Medicare services. By choosing one of these options, you will automatically end your membership in our Medicare-Medicaid Plan:

Change	What to do
<p><b>1. You can change to:</b></p> <p><b>A Medicare health plan, such as a Medicare Advantage Plan or Program of All-inclusive Care for the Elderly (PACE)</b></p>	<p><b>Here is what to do:</b></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"> <li>• Call the Senior Health Insurance Program (SHIP) at 1-800-252-8966. Monday through Friday from 8:30 a.m. to 5 p.m. TTY users should call 1-888-206-1327. The call and help are free.</li> </ul> <p>You will automatically be disenrolled from Molina Dual Options when your new plan’s coverage begins.</p>
<p><b>2. You can change to:</b></p> <p><b>Original Medicare with a separate Medicare prescription drug plan</b></p>	<p><b>Here is what to do:</b></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>

If you have questions, please call Molina Dual Options at (877) 901-8181, TTY: 711, Monday - Friday, 8 a.m. to 8 p.m., local time. The call is free. For more information, visit [www.MolinaHealthcare.com/Duals](http://www.MolinaHealthcare.com/Duals).



Change	What to do
	<ul style="list-style-type: none"> <li>• Call the Senior Health Insurance Program (SHIP) at 1-800-252-8966. Monday through Friday from 8:30 a.m. to 5 p.m. TTY users should call 1-888-206-1327. The call and help are free.</li> </ul> <p>You will automatically be disenrolled from Molina Dual Options when your Original Medicare coverage begins.</p>
<p><b>3. You can change to:</b></p> <p><b>Original Medicare without a separate Medicare prescription drug plan</b></p> <p><b>NOTE:</b> 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 Senior Health Insurance Program (SHIP) at 1-800-252-8966. TTY users should call 1-888-206-1327.</p>	<p><b>Here is what to do:</b></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"> <li>• Call the Senior Health Insurance Program (SHIP) at 1-800-252-8966. Monday through Friday from 8:30 a.m. to 5 p.m. TTY users should call 1-888-206-1327. The call and help are free.</li> </ul> <p>You will automatically be disenrolled from Molina Dual Options when your Original Medicare coverage begins.</p>

## F. How you will get Medicaid services

If you leave the Medicare-Medicaid Plan, you will either get your Medicaid services through fee-for-service or be required to enroll in the HealthChoice Illinois Managed Long-Term Services and Supports (MLTSS) program to get your Medicaid services.

If you are not in a nursing facility or enrolled in a Home and Community-Based Services (HCBS) Waiver, you will get your Medicaid services through fee-for-service. You can see any provider that accepts Medicaid and new patients.

If you are in a nursing facility or are enrolled in an HCBS Waiver, you will be required to enroll in the HealthChoice Illinois MLTSS program to get your Medicaid services.



If you have questions, please call Molina Dual Options at (877) 901-8181, TTY: 711, Monday - Friday, 8 a.m. to 8 p.m., local time. The call is free. For more information, visit [www.MolinaHealthcare.com/Duals](http://www.MolinaHealthcare.com/Duals).

To choose a HealthChoice Illinois MLTSS health plan, you can call Illinois Client Enrollment Services at 1-877-912-8880 from 8 a.m. to 6 p.m. Monday through Friday. TTY users should call 1-866-565-8576. Tell them you want to leave Molina Dual Options and join a HealthChoice Illinois MLTSS health plan.

If you don't pick a HealthChoice Illinois Managed Long-Term Services and Supports (MLTSS) health plan, you will be assigned to our company's HealthChoice Illinois MLTSS health plan.

After you are enrolled in a HealthChoice Illinois MLTSS health plan, you will have 90 days to switch to another HealthChoice Illinois MLTSS health plan.

You will get a new Member ID Card, a new *Member Handbook*, and a new *Provider and Pharmacy Directory* from your HealthChoice Illinois MLTSS health plan.

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## G. How to get help

### G1. Getting help from Molina Dual Options

Questions? We're here to help. Please call Member Services at (877) 901-8181 (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.

The 2021 Member Handbook will be available by October 15. An up-to-date copy of the *2021 Member Handbook* is always available on our website at [www.MolinaHealthcare.com/Duals](http://www.MolinaHealthcare.com/Duals). You may also call Member Services at (877) 901-8181, 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](http://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*).

### G2. Getting help from Illinois Client Enrollment Services

You can call Illinois Client Enrollment Services at 1-877-912-8880, Monday through Friday from 8 a.m. to 6 p.m. TTY users should call 1-866-565-8576. The call and help are free.

### G3. Getting help from the Illinois Long-Term Care Ombudsman Program

The Illinois Long-Term Care Ombudsman Program is an ombudsman program that can help you if you are having a problem with Molina Dual Options. The ombudsman's services are free. The Illinois Long-Term Care Ombudsman Program:

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If you have questions, please call Molina Dual Options at (877) 901-8181, TTY: 711, Monday - Friday, 8 a.m. to 8 p.m., local time. The call is free. For more information, visit [www.MolinaHealthcare.com/Duals](http://www.MolinaHealthcare.com/Duals).



- 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.
- makes sure you have information related to your rights and protections and how you can get your concerns resolved.
- is not connected with us or with any insurance company or health plan.

You can call the Illinois Long-Term Care Ombudsman Program at 1-800-252-8966 Monday through Friday from 8:30 a.m. to 5 p.m. TTY users should call 1-888-206-1327. The call and help are free.

#### **G4. Getting help from the Senior Health Insurance Assistance Program (SHIP)**

You can also call the Senior Health Insurance Program (SHIP). The SHIP counselors can help you understand your Medicare-Medicaid Plan choices and answer questions about switching plans. The SHIP is not connected with us or with any insurance company or health plan. You can call the SHIP at 1-800-252-8966 Monday through Friday from 8:30 a.m. to 5 p.m. TTY users should call 1-888-206-1327. The call and help are free.

#### **G5. 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 Website**

You can visit the Medicare website ([www.medicare.gov](http://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](http://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](http://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.

#### **G6. Getting help from Medicaid**

If you have questions about your Medicaid eligibility, you can:

- Contact the Illinois Department of Human Services (DHS) Customer Help Line. Call 1-800-843-6154 Monday through Friday from 8 a.m. to 5 p.m. TTY users should call 1-866-324-5553.



If you have questions, please call Molina Dual Options at (877) 901-8181, TTY: 711, Monday - Friday, 8 a.m. to 8 p.m., local time. The call is free. For more information, visit [www.MolinaHealthcare.com/Duals](http://www.MolinaHealthcare.com/Duals).

- Visit [www.dhs.state.il.us](http://www.dhs.state.il.us)

**Getting help from the Quality Improvement Organization (QIO)**

You can call Livanta, Medicare's Quality Improvement Organization (QIO) for Illinois, for help with quality of care problems or to report quality of care issues that you experienced while seeking care from a particular health care provider. Call Livanta at (888) 524-9900, TTY: (888) 985-8775. The call is free.

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