

Guide to Accessing Quality Health Care

Spring 2020



[MolinaHealthcare.com](https://www.MolinaHealthcare.com)



Your Extended Family.



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Your Health Care Contact Guide

Department/ Program	Type of Help Needed	Phone Number
Molina Member Services	If you have a problem with any of Molina Healthcare’s services, we want to help fix it. You can call Molina Member Services for help or to file a grievance or appeal Monday through Friday from 8 a.m. to 5 p.m. local time	Molina Member Services Toll-Free: 1-888-999-2404 TTY/TDD: 711
Molina Health Management	To request information on how to join programs for asthma and depression, contact Molina Health Management. Molina Health Management will help you understand how to use these programs and how you can opt out of the program.	Health Management 1-866-891-2320 between 8 a.m. and 8 p.m., Monday through Friday TTY/TDD: 711
Health Education	To request information on how to join smoking cessation and weight management programs, contact Molina Health Education. Health Education will help you understand how to use these programs and how you can opt out of the program.	Health Education 1-866-472-9483 between 8 a.m. and 8 p.m. Monday through Friday TTY/TDD: 711
Maternity Screening and High Risk OB Support	To request information on how to join our pregnancy and maternity screening programs, contact Molina Member Services. Member Services will help you understand how to use this program and how you can opt out of the program.	Molina Member Services 1-888-999-2404 TTY/TDD: 711

<p>Care Management</p>	<p>To request information on how to join our Care Management programs, contact Molina Member Services. Health topics include diabetes, high blood pressure, Cardiovascular Disease (CVD), or Chronic Obstructive Pulmonary Disease (COPD). Member Services will help you understand how to use these programs and how you can opt out of the program.</p>	<p>Molina Member Services 1-888-999-2404 TTY/TDD: 711</p>
<p>Complex Care Management</p>	<p>To request information on how you can join our Complex Care Management program if you need extra help with your health care problems, please contact Molina Member Services. Member Services will help you understand how to use this program and how you can opt out of the program.</p>	<p>Molina Member Services 1-888-999-2404 TTY/TDD: 711</p>
<p>Transition of Care</p>	<p>To request information on how you can join our Transition of Care, a program after you have been in the hospital, contact Molina Member Services. Member Services will help you understand how to use this program and how you can opt out of the program.</p>	<p>Molina Member Services 1-888-999-2404 TTY/TDD: 711</p>
<p>24-Hour Nurse Advice Line, 7 days a week</p>	<p>For health questions or concerns you have for yourself or a family member. The 24-Hour Nurse Advice Line is staffed by registered nurses. These nurses can advise you on where to go if same-day care is needed.</p>	<p>1-888-275-8750 For Español: 1-866-648-3537 TTY/TDD: 1-866-735-2929</p>

<p>Secretary of the U.S. Department of Health and Human Services Office for Civil Rights</p>	<p>If you believe Molina has not protected your privacy and wish to complain, you may call to file a complaint (or grievance).</p>	<p>1-800-368-1019 TDD :1-800-537-7697 FAX: 1-202-619-3818</p>
<p>Medicare</p>	<p>Medicare is health insurance offered by the federal government to most people who are 65 and older. Medicare helps pay for health care but does not cover all medical expenses.</p>	<p>1-800-MEDICARE 1-800-633-4227 TTY: 1-877-486-2048 www.Medicare.gov</p>
<p>BadgerCare Plus and Medicaid SSI Managed Care Ombuds</p>	<p>If you have a complaint (or grievance) against your health plan, you should first call Molina toll-free at 1-888-999-2404, and use Molina’s grievance process before contacting this department.</p>	<p>1-800-760-0001 PO Box 6470 Madison, WI 53716-0470</p>
<p>Wisconsin Department of Health Services/ ForwardHealth</p>	<p>ForwardHealth brings together many Department of Health Services care and nutritional assistance benefit programs with the goal of improving health outcomes for members.</p>	<p>1-800-362-3002 dhs.wisconsin.gov/forwardhealth</p>
<p>Wisconsin Office of the Commissioner of Insurance</p>	<p>The Wisconsin Office of the Commissioner of Insurance is responsible for regulating health care services plans.</p>	<p>Within Wisconsin: 1-608-266-3585 Outside of Wisconsin: 1-800-236-8517 https://oci.wi.gov/Pages/Homepage.aspx</p>

If you need help in your language, a bilingual staff member or interpreter is available at no cost to you. We also offer TDD/TTY services for members who have hearing or speech disabilities. Molina Member Services staff can answer your call Monday through Friday (except holidays) between 8 a.m. and 5 p.m. If you call after 5 p.m. or over the weekend, leave a message and your phone number. The Member Services staff will return your call within one business day.

Molina Healthcare's Quality Improvement Plan and Program

Your health care is important to Molina. Molina wants 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. Molina wants to know what is important to you. Please take the time to complete the survey if you receive it.



Molina uses another tool called HEDIS® to help us improve care. HEDIS® stands for Healthcare Effectiveness Data and Information Set. Molina collects information on services that you may have received.

These services include:

- Shots
- Well-check exams
- Pap tests
- Mammogram screenings
- Diabetes care
- Prenatal care
- Postpartum care

This process helps Molina 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.

Molina sets goals to improve our services each year. Our Quality Improvement plan includes these goals:

- To provide you with services that are easy for you to use.
- To work with providers so you get the care you need.
- To address your language or cultural needs.
- To help you reduce barriers and support you to reach your best health.

Molina wants 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 Molina does this includes:

- Mail or call you to make sure you and your child get needed well-exams and shots.
- Help you learn about chronic health problems, if you have them.
- Make sure you get prenatal care and after-delivery exams, if you are pregnant.
- Remind you to get Pap tests and mammogram screenings, if you need them.
- Looking at member grievances (complaints) when you send them in.
- Help you find and use the information on the Molina Healthcare website.
- Tell you about the special services we offer to all Molina members.

Molina reviews all the services and care that you receive each year to see how well we are doing. Please visit our website at [MolinaHealthcare.com](https://www.MolinaHealthcare.com). You can read the latest results of our progress on our website.

To learn more, call your Molina Healthcare Member Services Team at 1-888-999-2404, TTY/TDD: 711. You can ask for a printed copy of the Molina Quality Improvement plan and results.

Guidelines to Keep You Healthy

Molina Healthcare provides information about preventive health checkups and services that you and your family may need and when you should get them. These are guidelines that suggest checkups for all children and adults, unless advised differently by their provider. They should not replace any provider advice.

- Take a few moments to read the Guidelines to Keep You Healthy, which can be found on the Molina website. Keep in mind that these guidelines are suggested checkups to keep you healthy. Molina Healthcare covers preventive care services.
- Write down any questions you may have. Take these questions to your next checkup.
- Tell your provider about any health problems you or your children are having.
- Make sure you do not miss your appointments.
- If you miss your appointment, call your provider to reschedule right away.

Molina Healthcare also provides information on key tests and exams you or your family may need for long-term health conditions. These conditions include: diabetes, COPD, depression, and others. Please review this information on the Molina Healthcare website. Molina also can send you these guidelines by request. Please contact Molina Member Services at 1-888-999-2404, TTY/TDD: 711.

The guidelines are posted at [MolinaHealthcare.com](https://www.MolinaHealthcare.com).

Getting you Extra Help when you have Chronic Health Problems

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

Molina Healthcare Care Management staff – usually a team or dedicated person — can help you:

- Find and access eligible services.
- Arrange doctor visits and tests.
- Arrange transportation.
- See any gaps in care or health care needs.
- Access support to help people with special health care needs and/or their caregivers deal with day-to-day stress.



- Help with moving from one setting to another using a dedicated team or person. 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 support.
- Find services that might not be covered benefits. This can include physical therapy with schools or in community settings or “Meals on Wheels.”
- Arrange services with a primary care provider (PCP), family members, caregivers, representatives and any other identified provider.

Members can be referred to Care Management through:

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

Care Management also offers targeted programs like the Transition of Care program. This program helps to meet your needs after you are an inpatient in a hospital.

These programs are voluntary and provided through telephone or in-person contact. Molina Healthcare offers them at no cost to you. Once you join this program, you will have a person or team assigned to you to help coordinate your health care. You will then receive the phone number for the team assigned to you. You can choose to be removed from any program at any time.

Call Molina Member Services at 1-888-999-2404, TTY/TDD: 711 to:

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

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

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

Health Education/Disease Management

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

- Asthma
- Depression
- Diabetes
- High blood pressure
- Cardiovascular Disease (CVD)
- Chronic Obstructive Pulmonary Disease (COPD)

You can learn more or enroll in or dis-enroll from any of the programs above by calling the Molina Health Management Department at 1-866-891-2320, TTY/TDD: 711, 8 a.m. to 8 p.m., Monday through Friday.



Newsletters

Newsletters are posted at [MolinaHealthcare.com](https://www.molinahealthcare.com). The articles are on topics frequently asked by Molina members. The tips can help you and your family stay healthy.

Health Education Materials

Molina offers educational material on topics such as eating healthy, preventing illness, stress care, staying active, cholesterol, asthma, diabetes and other topics. These materials are based on current clinical guidelines. To get these materials, ask your doctor or visit [molinahealthcare.com/members/common/en-US/healthy/Pages/home.aspx](https://www.molinahealthcare.com/members/common/en-US/healthy/Pages/home.aspx).

Behavioral Health

Behavioral health problems can be treated. 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. You can access many types of services. Your PCP can offer a brief screening and help guide you to services. You can also look for services on your own by using the Molina Provider Online Directory. Molina Healthcare will assist you in finding support or services you need by calling Molina Member Services at 1-888-999-2404, TTY/TDD: 711.

Protecting Your Privacy

Your privacy is important to Molina. 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 amend your PHI.
- To ask Molina not to use or share your PHI in certain ways.
- To get a list of certain people or places Molina has 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.
- Molina Healthcare staff use PHI on only a need-to-know basis.
- 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 Molina's full Notice of Privacy Practices at [MolinaHealthcare.com](https://www.molinahealthcare.com). You also may ask for a copy of Molina's Notice of Privacy Practices by calling Molina Member Services at 1-888-999-2404, TTY/TDD: 711.

Patient Safety Program

Molina Healthcare wants you and your family to be safe and healthy. Molina has 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 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 Molina 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 (leapfroggroup.org)
- The Joint Commission National Patient Safety Goal Ratings (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 problems like diabetes and asthma.

Call Molina Member Services at 1-888-999-2404, to get more information about our Patient Safety Program. You can also visit us online at MolinaHealthcare.com.

How Molina Works with 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 get care (prior authorization), while you are getting care (concurrent) or after you have had care (post-service). Molina will work with your provider to decide if you need the services. We call this process Utilization Management (UM).

Molina reviews prior authorizations for urgent services 24 hours a day, 7 days a week. We make choices about your care based on medical need and your benefits. Molina does not reward providers or others to deny coverage for services you need. Molina does 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 Molina's UM process or rulings, you can call Molina Member Services toll-free at 1-888-999-2404, TTY/TDD: 711. Molina staff can also accept collect calls. If you need help in your language, a bilingual staff member or interpreter is available at no cost to you. We also offer TDD/TTY services for members who have hearing or speech disabilities. Our Member Services staff can answer your call Monday through Friday (except holidays) between 8 a.m. and 5 p.m. If you call after 5 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. The Member Services staff may also call you to talk about Utilization Management issues. If Member Services calls you, they will use their name, title, and say “I am calling from Molina Healthcare.”

Looking at What’s New

Molina looks at new types of services, and we look at new ways to provide those services. Molina reviews new studies to see if new services are proven to be safe and would add benefit for Molina members. Molina Healthcare reviews the type of services listed below at least once a year:

- Medical services
- Mental health services
- Medicines
- Equipment

Interpretation and Translation Services

Molina provides information in the language you prefer. We can have an interpreter help you speak with us or your provider in almost any language (this includes sign language). Molina also provides written materials in different languages and formats. If you need an interpreter or written materials in a language other than English, contact Molina Member Services at 1-888-999-2404, TTY/TDD: 711. There is no cost to you for these services.

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 24-Hour Nurse Advice Line at 1-888-275-8750 for English and 1-866-648-3537 for Español, TTY/TDD 1-866-735-2929. Nurses are available to help you 24 hours a day, 7 days a week.

Highly trained nurses answer Molina’s 24-Hour 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 24-Hour Nurse Advice Line and talk to a nurse.

Urgent Care

Hospital emergency rooms are only for real emergencies. Do not go to a hospital emergency room if your condition is not an emergency. If your doctor's office is closed, go to an Urgent Care, Convenient Care, or Walk-In Clinic that is in the Molina Provider Network (POD). Visit the POD on the Molina website or call 1-888-999-2404, TTY/TDD: 711.

Only emergency services are covered outside the Molina service area or by a non-participating provider. If you are outside the Molina service area, and need urgent care, go to the nearest emergency room. Remember, you may receive and be responsible for some of the bill.

If you have an urgent matter that does not threaten your life, you can call our 24-Hour Nurse Advice Line. Call 888-275-8750, TTY/TDD: 711, Español: 866-648-3537, TTY/TDD: 711, 24 hours a day, 7 days a week.

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 for services in Wisconsin. You do not need prior approval. However, if you receive emergency services outside the state of Wisconsin, you may be balanced billed. This means Molina will pay for some of your hospital bill. The hospital may then require you to pay the remaining part of the bill.

Molina Healthcare of Wisconsin does not cover any services, including emergency services, provided outside the United States, Canada and Mexico. If you need emergency services while in Canada or Mexico, Molina Healthcare of Wisconsin will cover the service only if the doctor's or hospital's bank is in the United States.

Please call Molina Healthcare of Wisconsin if you get any emergency services outside of the United States. If you get a bill for services, call Molina Member Services at 1-888-999-2404, TTY/TDD: 711.

If you have an urgent matter that does not threaten your life, you can also call Molina's 24-Hour Nurse Advice Line. Call 1-888-275-8750, TTY/TDD: 711. Español: 1-866-648-3537, TTY/TDD: 711, 24 hours a day, 7 days a week.

Where to Find Answers to Drug Benefits

Your prescriptions and certain over-the-counter items are provided by the state, not Molina Healthcare Health. You may get a prescription from a Molina Healthcare doctor, specialist, or dentist.

You may have co-payments or limits on covered medications. If you cannot afford your co-payments, you can still get your prescriptions. You can fill your prescription at any pharmacy that is a provider for BadgerCare Plus and Medicaid SSI. Please show your ForwardHealth ID card to the pharmacy when you get your prescriptions filled.

If you have questions regarding prescriptions, you can call the Wisconsin Medicaid Member Services at 1-800-362-3002.



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 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.
- Make decisions with your practitioner 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 are going to be late or cannot keep a doctor visit, call your provider.

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

Women's Health Providers

You can go see women's health specialists for your routine and preventive health care. Women's health specialists include: obstetricians, gynecologists, and certified nurse midwives. Routine and preventive care includes: care before birth, breast exams, mammograms and Pap tests.



Getting Care for Special Health Care Needs

You can go see specialists useful for your special health care needs. You do not need a referral from your primary care provider. You may see different providers if needed.

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 within the Molina Healthcare network, or Molina may arrange for you to talk to a provider outside of the network. This service is at no cost to you. Call Molina Member Services at 1-888-999-2404, TTY/TDD: 711, to learn how to get a second opinion.

Out-of-Network Services

If a Molina Healthcare provider is not able to provide you with needed 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 was in Molina Healthcare's

network. We will coordinate payment with the out-of-network provider. This must be done in a timely manner for as long as Molina’s provider network is unable to provide the service.

Hours of Operation for Services

We offer needed medical services to members in our contract 24 hours a day, 7 days a week.

Filing a Grievance or Appeal

Grievances

A grievance is any complaint about Molina or a health care provider that is not related to a denial, limitation, reduction, or delay in your benefits. Grievance topics include things like the quality of services you were provided, rudeness from a provider or an employee, and not respecting your rights as a member.

Molina would like to know if you ever have a grievance about your care at Molina Healthcare of Wisconsin. Please call Molina’s Member Advocate at 1-800-999-2404, TTY: 711, and ask for your Member Advocate, or write to us at the following address if you have a grievance:

Molina Healthcare of Wisconsin
PO Box 242480
Milwaukee, WI 53224-9931

If you want to talk to someone outside Molina Healthcare of Wisconsin about the problem, call the HMO Enrollment Specialist at 1-800-291-2002. The HMO Enrollment Specialist may be able to help you solve the problem or write a formal grievance to Molina Healthcare of Wisconsin or to the BadgerCare Plus and/or Medicaid SSI programs. If you are enrolled in a Medicaid SSI Program, you can also call the SSI External Advocate at 1-800-928-8778 for help with grievances.

The address to file a grievance with the BadgerCare Plus and Medicaid SSI, programs is:

BadgerCare Plus and Medicaid SSI
Managed Care Ombuds
PO Box 6470
Madison, WI 53716-0470
1-800-760-0001

You may file a grievance at any time. You will not be treated differently from other members because you file a complaint or grievance. Your health care benefits will not be affected.

Appeals

You have the right to appeal if you believe your benefits are wrongly denied, limited, reduced, delayed, or stopped by Molina Healthcare of Wisconsin. Your authorized representative or your provider may request an appeal for you if you have given them consent to do so. When requesting an appeal, you must appeal to Molina Healthcare of Wisconsin first. The request for an appeal must be made no more than 60 days after you receive notice of services being denied, limited, reduced, delayed, or stopped.

If you need help writing a request for an appeal, call the Molina Healthcare of Wisconsin Member Advocate at 1-888-999-2404, TTY/TDD: 711, and ask for your Member Advocate, the BadgerCare Plus and Medicaid SSI Ombuds at 1-800-760-0001, or the HMO Enrollment Specialist at 1-800-291-2002. If you are enrolled in a Medicaid SSI Program, you can also call the SSI External Advocate at 1-800-928-8778 for help with your appeal.

Your Next Level Appeal Rights

If you disagree with Molina Healthcare of Wisconsin's decision about your appeal, you may request a fair hearing with the Wisconsin Division of Hearing and Appeals. The request for a fair hearing must be made no more than 90 days after Molina Healthcare of Wisconsin makes a decision about your appeal.

If you want a fair hearing, send a written request to:

Department of Administration
Division of Hearings and Appeals
PO Box 7875
Madison, WI 53707-7875

The hearing will be held with an administrative law judge in the county where you live. You have the right to be represented at the hearing, and you can bring a friend for support. If you need a special arrangement for a disability or for language translation, call 1-608-266-3096 (voice) or 1-608-264-9853 (hearing impaired).

If you need help writing a request for a fair hearing, call either the BadgerCare Plus and Medicaid SSI Ombuds at 1-800-760-0001 or the HMO Enrollment Specialist at 1-800-291-2002. If you are enrolled in a Medicaid SSI Program, you can also call the SSI External Advocate at 1-800-928-8778 for help.

You will not be treated differently from other members because you request a fair hearing. Your health care benefits will not be affected.

You may request to have the disputed services continued while the Molina Healthcare of Wisconsin appeal and State fair hearing process are occurring. The request to continue services must happen within 10 days of receiving the notice that services were denied or changed, or before the effective date of the denial or change in benefits. You may need to pay for the cost of services if the hearing decision is not in your favor.

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 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. Visit or call Molina Member Services for more information on how to file a complaint.

Visit the Molina Healthcare Website

Visit Molina's website at MolinaHealthcare.com. Choose your state at the top of the page. You can get information on the Molina 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 services.
- FAQs (frequently-asked questions and answers).
- Preventive health guidelines and shot schedules.
- How to obtain specialty care and hospital services.
- Practitioner and provider availability.
- UM procedures, including preservice review, urgent concurrent review, post-service review and how to file an appeal.

You can ask for printed copies of anything posted on the website by calling Molina Member Services 1-888-999-2404, TTY/TDD: 711. Your Member Handbook is also a good resource. You can find it at MolinaHealthcare.com.

MyMolina

MyMolina is a secure web portal. It lets you manage your own health from your computer. MyMolina.com is easy to use. Here are some of the things you can do in MyMolina:

- Do a health appraisal. A health appraisal is a tool that can help you and your provider (doctor) look for ways to improve your health.
- Get self-help in these 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
- Vaccines
- Safety



- Other things you can do in the MyMolina member portal:
 - Request a Member ID card
 - Select or change a doctor
 - Get online health records
 - Send email questions to Molina Member Services

To learn more or to sign up for MyMolina:

1. Call Molina Member Services at 1-888-999-2404, TTY/TDD: 711
or

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

Finding Information about Molina Medicaid Providers Using our Website (Provider Online Directory)

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 [abms.org](https://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), Molina Member Services can help. They can send you a printed copy of the Provider Online Directory.