



MISSOURI

MEMBER HANDBOOK



Proudly serving *MO HealthNet Managed Care* members.

State Approved 03012017
MOC17039

MO7CADMHB80563E_0117



Welcome to MO HealthNet Managed Care

You have been approved for MO HealthNet benefits and you are enrolled in a MO HealthNet Managed Care health plan where you will get most of your benefits. Each MO HealthNet Managed Care health plan member must have a Primary Care Provider (PCP). A PCP manages a member's health care. There are a few services that members in a MO HealthNet Managed Care health plan will receive from MO HealthNet Fee-for-Service.

MO HealthNet Fee-for-Service members must go to a MO HealthNet approved provider. You can do an on-line search to find a MO HealthNet approved provider at <https://dssapp.dss.mo.gov/ProviderList/sprovider.asp> or you can call 1-800-392-2161 for a list of MO HealthNet approved providers.

Visually and Hearing Impaired Members

We have this handbook in an easy to read form for people with poor eyesight. Please call us at **1-800-322-6027** for help. We have a special phone number for people with poor hearing. Members who use a Telecommunications Device for the Deaf (TDD) and American Sign Language can call **1-800-735-2966**. These services are available to you at no cost.

Keeping Your Insurance

It is very important you call the Family Support Division (FSD) Information Center at **1-855-373-4636** or visit our website at www.dss.mo.gov to access the FSD Program Enrollment System online to let them know when your address changes. Important letters and information will be mailed to the address you have provided. You or your children could lose your MO HealthNet coverage if you do not respond to State requests for information. Please make sure that you answer all mail from the State.

Interpreter Services

If you do not speak or understand English call **1-800-322-6027** to ask for help. We can help if you do not speak or understand English.

- We will get you a translator, including American Sign Language services when needed at no cost to you.
- We may have this book in your language.
- We will get a copy of the grievance and appeal rules in your language.

Discrimination Is Against the Law

Missouri Care complies with all applicable federal civil rights laws. We do not exclude or treat people in a different way based on race, color, national origin, age, disability or sex.

We have aids and services at no cost to you, to help people with disabilities communicate with us. That includes help such as American sign language interpreters. We can also give you info in other formats. Those formats include large print, audio, accessible electronic formats and Braille.

If English is not your first language, we can translate for you. We can also provide written info in other languages.

If you need these services, call us at **1-800-322-6027**. TTY users can call **1-800-735-2966**. We're here for you Monday–Friday from 8 a.m. to 6 p.m.

Do you feel that we did not give you these services? Or do you feel we discriminated in some way? If so, you can file a grievance in person, by mail or fax. You can reach us at Missouri Care Grievance Department, 4205 Philips Farm Rd., Suite 100 Columbia, MO 65201. You can reach us by phone at **1-800-322-6027**; TTY **1-800-735-2966**. Our fax is **1-877-851-2043**. If you need help filing a grievance, a Missouri Care Representative can help you.

You can also file a civil rights complaint online with the U.S. Dept. of Health and Human Services, Office for Civil Rights. Go to the Complaint Portal at <http://ocrportal.hhs.gov/ocr/portal/lobby.jsf>. File by mail to: U.S. Dept. of Health and Human Services, 200 Independence Ave. SW., Room 509F, HHH Building, Washington, DC 20201. You can call them at **1-800-368-1019**, **1-800-537-7697** (TTY).

You can get complaint forms at <http://www.hhs.gov/ocr/office/file/index.html>.

If English is not your first language, we can translate for you. We can also give you info in other formats. That includes Braille, audio, large print and provide American Sign Language interpreter services. Just give us a call toll-free. You can reach us at **1-800-322-6027**. For TTY, call **1-800-735-2966**.

Si el español es su lengua materna, podemos brindarle servicios de traducción. También podemos proporcionarle esta información en otros formatos, como braille, audio, letra de imprenta grande y servicios de interpretación de lenguaje de señas americano. Simplemente llámenos sin cargo al **1-800-322-6027**. Los usuarios de TTY deben llamar al **1-800-735-2966**.

如果中文是您的母語，我們可以為您翻譯。我們也可以用其他格式為您提供資訊，如布萊葉文、音頻及大字體，並提供美國手語翻譯服務。僅需撥打免費電話 **1-800-322-6027** 聯繫我們。TTY 使用者請撥打 **1-800-735-2966**。

Nếu Tiếng Việt là ngôn ngữ chính của quý vị, chúng tôi có thể thông dịch cho quý vị. Chúng tôi cũng có thể cung cấp cho quý vị thông tin ở các định dạng khác như chữ nổi Braille, âm thanh, bản in cỡ lớn và cung cấp dịch vụ thông dịch Ngôn Ngữ Ký Hiệu Mỹ. Chỉ cần gọi chúng tôi theo số miễn phí. Quý vị có thể liên lạc với chúng tôi theo số **1-800-322-6027**. Đối với TTY, hãy gọi **1-800-735-2966**.

Ako su srpski ili hrvatski vaš materinski jezik, možemo vam ponuditi usluge prijave. Prijavu možemo isporučiti i u drugim formatima kao što su brajica (Brailleovo pismo), zvučni zapisi ili uvećani tisak. Pružamo, osim toga, i usluge tumača američkog znakovnog jezika. Jednostavno nas nazovite na besplatni broj telefona **1-800-322-6027**. Za TTY nazovite **1-800-735-2966**.

Wenn Deutsch Ihre Muttersprache ist, können wir für Sie übersetzen. Wir können Ihnen auch Infos in anderen Formaten geben. Dazu gehört Braille, Audio, Großdruck sowie die Bereitstellung von Dolmetscherleistungen in amerikanischer Gebärdensprache. Rufen Sie uns gebührenfrei an. Sie erreichen uns unter **1-800-322-6027**. Für TTY wählen Sie **1-800-735-2966**.

إذا كانت لغتك الأصلية هي اللغة العربية، فنحن باستطاعتنا الترجمة لك. ويمكننا أيضاً إعطائك المعلومات في أشكال أخرى مثل طريقة البرايل للمكفوفين والصوتيات والمطبوعات ذات الحجم الكبير وتوفير خدمات ترجمة للغة الإشارة الأمريكية. هذه الخدمات تقدم مجاناً وبدون مقابل. فقط قم بالاتصال على رقم التلفون المجاني: **1-800-322-6027** أو الاتصال على الهاتف ل TTY **(1-800-735-2966)**.

귀하의 모국어가 한국어인 경우, 통역서비스를 제공해 드립니다. 다른 형식으로 된 정보도 제공해 드릴 수 있습니다. 여기에는 점자, 오디오, 큰 활자 및 수화 통역서비스도 포함됩니다. 저희에게 무료 전화로 연락 주십시오. **1-800-322-6027** 번으로 전화하시면 담당자와 통화하실 수 있습니다. TTY 사용자는 **1-800-735-2966** 번으로 전화하십시오.

Если русский Ваш первый язык, мы можем перевести для Вас. Мы также можем предоставить информацию в различных форматах: на шрифте Брайля, на аудионосителях, распечатанную крупным шрифтом, а также услуги по американскому сурдопереводу. Просто позвоните нам по бесплатному номеру **1-800-322-6027** Пользователям TTY следует звонить по номеру **1-800-735-2966**.

Si votre langue maternelle est le français, nous pouvons faire la traduction. Nous pouvons également vous fournir l'information dans des formats comme le braille, en version audio et imprimé en gros caractères ainsi que fournir les services d'un interprète gestuel en ASL (American Sign Language). Il suffit de nous appeler au numéro sans frais **1-800-322-6027** (TTY **1-800-735-2966**).

Kung ang Tagalog ay iyong unang wika, maaari naming isalin ito para sa iyo. Maaari din naming magbigay sa iyo ng impormasyon sa iba pang pormat. Kasama dito ang Braille, audio, malalaking letra at maglaan ng American senyas na wika na serbisyong tagapagsalin. Bigyan lang kami ng isang tawag na libreng-toll. Maaari mo kaming maabot sa **1-800-322-6027**. Para TTY, tumawag sa **1-800-735-2966**.

Als Pennsylvania-Duits uw moedertaal is, kunnen we voor u vertalen. Ook kunnen we u informatie verstrekken in andere formaten, zoals braille, audio en groteletterdruk, en u van dienst zijn met tolkdiensten in Amerikaanse Gebarentaal. Aarzel niet om ons gratis nummer te bellen op **1-800-322-6027**. Voor TTY belt u **1-800-735-2966**.

اگر فارسی زبان مادری تان باشد می توانیم برای شما ترجمه کنیم. همانطور می توانیم اطلاعات تان را به فرمت های دیگری تقدیم نماییم. این فرمت ها شامل الفبای نابینایان، فایل های صوتی، چاپهای بزرگ، و خدمات ترجمه فوری به زبان اشاره آمریکایی. فقط ما را رایگان زنگ بزنید. می توانید با شماره **1-800-322-6027** تماس بگیرید. برای خدمات تماس TTY لطفاً شماره **1-800-735-2966** را زنگ بزنید.

Oromoon Afaan kee kan jalqabaa yoo ta'e, siif hiikuu ni dandeenya. Haala gara biraatiinis odeeffannoo siif kennu ni daneenya. Kunis karaa sirrina barreefama qaro-dhabeeyyii, sagalee, maxxansa qubee gurgudaafi tajaajilawwan turjumaana Afaan Mallattoo Ameerikaanootaa dhiyeessuutiin ta'u danda'a. Kallatiin karaa bilbila kanfaltii maleetiin nuuf bilbilaa. Karaa **1-800-322-6027** tiin nu argu ni dandeessu. TTY dhaaf ammoo, **1-800-735-2966** irratti bilbilaa.

Se o Português for a sua língua materna, nós podemos traduzir para si. Também lhe podemos fornecer informações noutros formatos. Isso inclui Braille, áudio, impressão grande e prestação de serviços de intérprete de língua gestual americana. Entre em contacto connosco através do número gratuito. Pode contactar-nos através do número **1-800-322-6027**. Para TTY, digite **1-800-735-2966**.

አማርኛ የመጀመሪያ ቋንቋዎ ከሆነ፣ ልናስተረጉምልዎ እንችላለን። በተጨማሪም መረጃዎቹን በሌሎች የአቀራረብ መንገዶች ለምሳሌ፣ በብሬል፣ በድምጽ ቅጂ እና በትልልቅ ህትመቶች መልክ እንዲሁም በአሜሪካ የምልክት ቋንቋ ትርጉም አገልግሎቶች ልንሰጥዎ እንችላለን። በነጻ የስልክ መስመር ብቻ ይደውሉልን። በእነዚህ ስልክ ቁጥሮች ያገኙናል **1-800-322-6027** ላይ (ወይም መስማት ለተሳናቸው **1-800-735-2966**)።



Welcome to Missouri Care – Your Plan for Healthy Living

Congratulations, You Have Joined Missouri Care!

We're happy to have you as a member and we'll work hard to earn your trust. Missouri Care has many primary care providers (PCPs), hospitals and clinics you can choose from. We want to put you in charge of your own health care. The first step is to take good care of yourself and your family. Let your PCP know if you have any health problems. The next step is to read this handbook carefully. It will help you understand Missouri Care and your benefits. If you have any questions, day or night, we're always available to help you. Call us at 1-800-322-6027.



Table of Contents

Welcome to MO HealthNet Managed Care	i
Visually and Hearing Impaired Members	i
Keeping Your Insurance	i
Interpreter Services	i
Welcome to Missouri Care – Your Plan for Healthy Living	vi
Congratulations, You Have Joined Missouri Care!	vi
Glossary	xi
Important Missouri Care Phone Numbers	xviii
Important MO HealthNet Phone Numbers	xix
Getting Started With Us	1
Make Sure You Have These Items	2
Call Nurse Advice Line First!	2
Need help making health-related decisions?	2
In an emergency	2
Ten Questions Often Asked About Missouri Care	3
Website Information	4
Website Features	5
Missouri Care ID Card	6
Care You Get Using the MO HealthNet ID Card	7
Member Services	8
Your Health Plan	11
Types of Care	12
Preventive Services	12
Health Care Appointments	12
Dental Appointments	13

Urgent Care	13
Emergency Medical Services.....	13
ER Services	14
Post-Stabilization Care.....	23
Post-Stabilization Care Services.....	23
Your Primary Care Provider	24
What is a Primary Care Provider (PCP)?.....	24
Choosing and Changing Your Primary Care Provider (PCP).....	24
Check the PCP on Your ID Card	25
Getting Medical Care	25
Travel Distance.....	26
Access to Care	26
Medical Necessity	26
Prior Authorization.....	26
How Do I Cancel or Change an Appointment?	27
What If I Need to See a Specialist?	27
Access to Women’s Health Services.....	27
Special Health Care Needs	28
Telehealth Service	28
Services	29
Your Health Benefits in MO HealthNet Managed Care.....	29
Benefits and Coverage Chart.....	30
Network Covered Services.....	33
Medical Disability/MO HealthNet Fee-For-Service.....	33
What is Not Covered?	33
Change in Benefits and Services.....	34
What If I’m Pregnant?.....	34
Family Planning	35
Immunization (Shot) Schedule for Children.....	35

More Benefits for Children and Women in a MO HealthNet Category of Assistance for Pregnant Women.....	37
Independent Foster Care Adolescents Ages 21 Through 25.....	40
Lead Screening for Children and Pregnant Women.....	41
Newborn Coverage	42
Nurse Visits for You and Your Baby.....	42
First Steps.....	43
Behavioral Health Care	44
Care Management Services.....	44
Disease Management	45
CommUnity Assistance Line (CAL)	46
Pharmacy Dispensing Fees.....	46
Second Opinion and Third Opinion	47
Out-of-Network Second Opinion.....	47
Health Care Away From Home	47
What If I Don't Have Transportation?.....	47
Emergency Transportation.....	47
Non-Emergency Medical Transportation (NEMT)	48
Advocates for Family Health.....	50
Consumer Advisory Committee (CAC).....	52
Community Meetings	53
Grievances and Appeals.....	54
When Will We Make a Decision?.....	57
Important Information about Missouri Care	59
Fraud and Abuse.....	60
Changes You Need to Report	61
Changing to Another MO HealthNet Managed Care Health Plan.....	61
Disenrollment	62
Transition of Care.....	62

Insurance.....	63
After an Accident, You May Get a Questionnaire	64
Explanation of Benefits	64
Utilization Review	64
Plan Structure and Operations and How Our Providers Are Paid.....	65
New Technology (Medical Procedures).....	65
Missouri Care’s Quality Improvement Program	65
Release for Ethical Reasons.....	66
If You Are Billed	67
Decisions About Your Health Care.....	68
Advance Health Care Directive	68
Member Confidentiality and Privacy.....	68
Member Rights and Responsibilities.....	69
Your Rights as a MO HealthNet Managed Care Health Plan Member	69
Missouri Care Members Have Additional Rights To:.....	69
You Have a Responsibility To:.....	70
Important Information for Members of a Federally-Recognized American Indian or Native Alaskan Tribe.....	71



Glossary

Words/Phrases

Adoption Subsidy - subsidy services supporting a family adopting a child. Financial, medical, and support services for the child until age 18 or in some cases until age 21. These children may choose to get their health care as a MO HealthNet Managed Care health plan member or may choose to get health care through MO HealthNet Fee-for-Service using MO HealthNet approved providers.

Advance Directive - An advance directive allows you to leave written directions about your medical treatment decisions and/or ask someone to decide your care for you.

Appeal - is a way for you to ask for a review when your MO HealthNet Managed Care health plan takes action to deny or give a limited approval of a requested service; deny, reduce, suspend, or end a service already approved; or deny payment for a service; or fails to act within required time frames for getting a service; make a grievance decision within thirty (30) days of receipt of request; make an expedited decision within three (3) days of receipt of request; or make an appeal decision within forty-five (45) days of receipt of request.

Co-payment - your share for cost of services provided. A set amount of money that you will have to pay for the medical service you received. MO HealthNet Managed Care members do not pay a co-pay.

DCN - Departmental Client Number - also known as your MO HealthNet number. This is your identification number for MO HealthNet.

Durable medical equipment - Necessary medical equipment that your provider has ordered for you, to assist you in and out of your home because of your medical condition.

Eligibility Group - members who receive benefits based on age, family size, and income.

Words/Phrases

Emergency medical condition - a condition that requires medical attention right away. Call **911** or go to the nearest emergency room even if it is not in your health plan network.

Emergency medical transportation - call **911** or the closest ambulance.

Emergency room care - Medical care that needs to be given right away to help care for things like - pain, chest pain, stroke, difficulty breathing, bad burns, head wounds or trauma, deep cuts/heavy bleeding; or gunshot wound.

Emergency services - in an emergency, go to the nearest emergency room even if it is not in your health plan network or call **911**. When you go the emergency room a health care provider will check to see if you need emergency care. You can call the number listed on the back of your MO HealthNet Managed Care health plan card anytime day or night if you have questions about going to the emergency room. Call your PCP after an emergency room visit.

EPSDT - Early Periodic Screening, Diagnosis, and Treatment, also known as HCY.

Excluded services - are medical services that your MO HealthNet Managed Care health plan does not pay for.

Grievance - a way to show dissatisfaction about things like: the quality of care or services you received, the way you were treated by a provider, a disagreement you may have with a MO HealthNet Managed Care health plan policy, or you do not agree to extend the time for a decision of a grievance or an appeal.

Habilitation services and devices - are health care services that helps you keep, improve, acquire, either partially or fully skills related to communication and activities of daily living, such as: talking, walking, and hearing. These services include: physical therapy, occupational therapy, speech-language pathology, and audiology. Medical devices, which include assistive devices and durable medical equipment, are used with habilitation services to improve your physical function and mobility.

Words/Phrases

HCY Program - Healthy Children and Youth, also known as EPSDT.

Health insurance - MO HealthNet Managed Care Health Plan, is insurance that covers your medical services. You may also have other health insurance from a job or another source in addition to MO HealthNet, which helps you with paying for medical services. If you have other health insurance besides MO HealthNet Managed Care, this is called your primary insurance. This insurance company must pay for most of your health services before your MO HealthNet Managed Care health plan pays.

Home health care - services provided in the member's home who has an acute illness or long term illness which can be managed at home. Services include skilled nurse visits, home health aide visits, and medical supplies.

Hospice services - are services that can be given to an adult or child who is in the last six months of their life. The goal of hospices is to provide pain relief and support to the patient and family.

Hospitalization - when your doctor requires you to stay in the hospital for certain medical services to be done or certain medical conditions where you have to be monitored so your condition can be treated or does not get worse.

Hospital outpatient care - when you receive medical services that do not require staying in the hospital. After you have a procedure you can go home.


Medically necessary - is the standard used to decide if a form of treatment is appropriate for a physical or behavioral illness or injury; is going to improve the function of an injured body part; or will be able to slow the effects of a disability.

Words/Phrases

MO HealthNet Approved Provider - a doctor, nurse, clinic, pharmacy, hospital, or other providers enrolled with the MO HealthNet Division as a MO HealthNet approved provider. MO HealthNet approved providers provide services in MO HealthNet Fee-for-Service. You will show them your MO HealthNet ID Card. MO HealthNet approved providers are sometimes also called MO HealthNet providers. You can do an on-line search to find a MO HealthNet approved provider at: <https://dssapp.dss.mo.gov/ProviderList/sprovider.asp> or you can call 1-800-392-2161 for a list of MO HealthNet approved providers.

MO HealthNet Fee-for-Service - a way to get some health care services that are not covered by Missouri Care. These services may be covered by MO HealthNet Fee-for-Service. You can go to any approved provider that takes MO HealthNet Fee-for-Service. Use only your MO HealthNet ID Card. You may call 1-800-392-2161 to check on how to get these services.

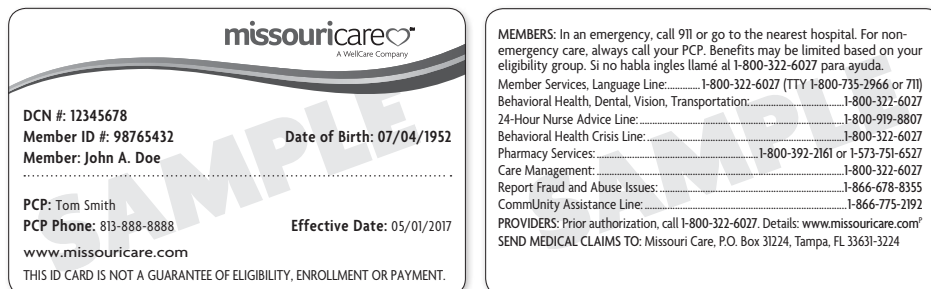
MO HealthNet ID Card— the card sent to you when you are eligible for MO HealthNet.

MO HealthNet Department of Social Services			<ul style="list-style-type: none">• You must present this card each time you get medical services.• You must tell the provider of services if you have other insurance.• Some services may not be covered by MO HealthNet and you may have to pay for services that are not covered.
Name of Participant			Participant Inquiries 1-800-392-2161 OR 1-573-751-6527 Fraud and Abuse 1-573-751-3285 OR ASK.MHD@DSS.MO.GOV
Date of Birth XX-XX-XXXX	MO HealthNet ID Number 9999999999		Possession of the card does not certify eligibility or guarantee benefit. <ul style="list-style-type: none">• Restrictions may apply to some participants or for certain services.• Services are covered as specified in the Rules and Regulations of the Family Support Division or the MO HealthNet Division.• The holder of this card has made an assignment of rights to the Department of Social Services for payment of medical care from a third-party.
USE BY ANYONE WHOSE NAME IS NOT PRINTED ON THIS CARD IS FRAUDULENT AND SUBJECT TO PROSECUTION UNDER THE LAW			

MO HealthNet Managed Care - a way to get your MO HealthNet coverage from a MO HealthNet Managed Care health plan. You must choose a MO HealthNet Managed Care health plan or one will be chosen for you. You must also choose a Primary Care Provider. Use your MO HealthNet Managed Care Card and your MO HealthNet ID Card to get services. While you are waiting to get in a MO HealthNet Managed Care health plan for health care, you get services from MO HealthNet Fee-for-Service. There are a few services that members in a MO HealthNet Managed Care health plan will receive from MO HealthNet Fee-for-Service. You may call 1-800-392-2161 to check on how to get services.

Words/Phrases

MO HealthNet Managed Care Card - the card sent to you by your MO HealthNet Managed Care health plan.



Network - a group of health care providers set up by your MO HealthNet Managed Care health plan that can see you for your medical care, treatment, and supplies.

Non-participating provider - is a health care provider that is not signed up as a network provider for your MO HealthNet Managed Care health plan.

Out of Home Care/Alternative Care Services (Foster Care) - Alternative Care is the care of children living in a home other than their birth parents. The juvenile court removes the child from their home. The Children's Division then sets a plan of services.

PCP - a Primary Care Provider is a health care provider who manages a member's health care.

Participating provider - is a health care provider that you can see because they are signed up with your MO HealthNet Managed Care health plan.

Physician services - medical services provided to you by a provider who is licensed to practice under state law.

Plan - a Health Plan that provides, covers, and arranges medical services that are needed by its members for a fixed rate.

Words/Phrases
Preauthorization or prior authorization - your MO HealthNet Managed Care health plan's method of pre-approving certain services.
Premium - an amount of money that is paid for someone to receive health care insurance.
Prescription drug coverage - a way for you to get coverage for your medications. MO HealthNet Managed Care members prescription drug coverage is provided by Fee-For-Service.
Prescription drugs - medications that require prescriptions or a doctor's order.
Primary care physician - a health care provider who manages a member's health care.
Primary care provider - a health care provider who manages a member's health care.
Provider - a health care provider who manages a member's health care.
Referrals - a process used by a PCP to let you get health care from another health care provider usually for specialty treatment. Missouri Care does not require a referral to see a specialist that is in the Missouri Care network.
Rehabilitation services and devices - are health care services that help you keep, improve and restore skills and functions for daily living that have been lost or impaired because of an injury, illness or disability. These services include physical therapy, occupational therapy, speech-language pathology, and psychiatric services that can occur in an outpatient or inpatient setting. Medical devices, which include assistive devices and durable medical equipment, are used with rehabilitation services to improve your physical function and mobility.

Words/Phrases

Skilled nursing care - is care given to you in a nursing home for a short period of time because of an injury or illness. The staff taking care of you can be a nurse, speech therapist, physical therapist, occupational therapist. The staff can help you with bathing, dressing, and personal care, eating, and walking, these are rehabilitation services. Other services that may be provided to you are social and educational activities, transportation if needed, laboratory, radiology, and pharmacy services, hospice care-end of life and respite care.

Specialist - is a medical professional who has a lot of knowledge about your chronic illness. If you have a chronic illness and are seeing a specialist for your medical care, you may ask your MO HealthNet Managed Care health plan for a specialist to be your primary care provider.

Urgent care - urgent care appointments for physical or behavioral illness injuries which require care immediately but are not emergencies such as high temperature, persistent vomiting or diarrhea, symptoms which are of sudden or severe onset but which do not require emergency room services, you must be seen within twenty-four (24) hours.



Important Missouri Care Phone Numbers

Service	Phone Number	When to Call:
Missouri Care Member Services	1-800-322-6027	<ul style="list-style-type: none">• General questions about Missouri Care• Change of address• Change of phone number
24-Hour Nurse Advice Line (health advice line)	1-800-919-8807	<ul style="list-style-type: none">• For medical advice• To decide if you need to go to the emergency room• Available 24/7
24-Hour Nurse Advice Line for Children's Mercy Pediatric Care Network	1-855-670-2642	<ul style="list-style-type: none">• For medical advice• To decide if you need to go to the emergency room• Available 24/7• Available in Western Region only
Transportation	1-800-322-6027	<ul style="list-style-type: none">• To arrange a ride to routine health care appointments• Call at least 3 days before the appointment• Call if you have to change or cancel your ride• Not all members have this benefit
Dental Care	1-800-322-6027	<ul style="list-style-type: none">• To make a dental appointment• Available to all members

Service	Phone Number	When to Call:
Vision Care	1-800-322-6027	<ul style="list-style-type: none"> • To make a vision appointment • Available to all members
Behavioral Health Care	1-800-322-6027	<ul style="list-style-type: none"> • 24/7 crisis line • For help in scheduling an appointment • For any other behavioral health needs

Important MO HealthNet Phone Numbers

Service	Phone Number	When to Call:
MO HealthNet Enrollment Helpline	1-800-348-6627	<ul style="list-style-type: none"> • For help with questions about changing health plans
Pharmacy	1-800-392-2161 or locally at 1-573-751-6527	<ul style="list-style-type: none"> • For questions about your pharmacy benefit • This benefit is from MO HealthNet Fee-for-Service
Family Support Division Information Center	1-855-373-4636	<ul style="list-style-type: none"> • If you have a change in family size, income, availability of insurance through employer, address or phone number • You should also report these changes online at www.dss.mo.gov • For help with MO HealthNet renewal



Getting Started With Us



Make Sure You Have These Items

We're looking forward to providing your health care needs. By now, you should have received your Missouri Care new member packet as well as your ID card. Make sure to check your ID card to see that the PCP listed is correct. If so, you're ready to start using your Missouri Care benefits. If your PCP is not correct, or if you have any other questions at all, please call Member Services at **1-800-322-6027**.

Call Nurse Advice Line First!

Need help making health-related decisions?

Call the Nurse Advice Line, our 24-hour health advice line, **1-800-919-8807**. If you are a Children's Mercy Pediatric Care Network member, call **1-855-670-2642**. Nurses are available 24 hours a day, 7 days a week to answer your health care questions.

When you call, a nurse will ask some questions about your problem. Give as many details as you can. For example, where it hurts. Or what it looks and feels like. The nurse can then help you decide if you:

- Can care for yourself at home
- Need to see a doctor or go to the hospital

Remember, a nurse is always there to help. Consider calling our Nurse Advice Line before calling your doctor or going to the hospital. But if you think it is a real medical emergency, call **911** first or go to the nearest emergency room.

In an emergency...

Call **911** or go to the nearest emergency room. We'll talk more about emergencies later in this handbook.

If you're not sure if it's an emergency, you should call your primary care provider (PCP) or the Nurse Advice Line before going to the emergency room (ER).

Our Nurse Advice Line does not take the place of your PCP. But if it's late at night or you can't reach your PCP, the nurses can help you decide what to do. The nurses can also give you helpful hints on how to feel better and stay healthy. When an earache is keeping your child awake or you can't sleep because of a headache, you can call one of our nurses for help.

Call the Nurse Advice Line at **1-800-919-8807**. If you are a Children's Mercy Pediatric Care Network member, call **1-855-670-2642**.

Ten Questions Often Asked About Missouri Care

Health care decisions can be confusing. We want to help you understand how our MO HealthNet Managed Care health plan works for you. Here are answers to common questions.

1. What is a PCP?

A PCP is a primary care provider. In Missouri Care, your PCP is the doctor, nurse or clinic that you choose from our network to be your main health care provider. It is very important to see your PCP at least once per year. You should also be sure the correct PCP is on your Missouri Care ID Card.

2. What if I need to see a specialist?

Your PCP can help you select a specialist in our network. In some cases, your specialist can even be your PCP.

3. I don't have a car. How do I get to my health care appointments?

Call for transportation at **1-800-322-6027**. We will help arrange a ride at no cost to you. Some member benefits do not cover transportation. To check if you have this benefit, call Member Services at **1-800-322-6027**.

4. What if someone in my family gets sick in the middle of the night?

Always call your PCP first unless it is an emergency. He or she will let you know what to do. You may also call the Nurse Advice Line, our 24-hour health advice line at **1-800-919-8807** (toll-free). If you are a Children's Mercy Pediatric Care Network member, call **1-855-670-2642**. Someone will be there to answer your questions – 24 hours a day, every day.

5. If my PCP can't see me right away, should I go to the emergency room?

You have options such as urgent care or quick care clinics. These are often found in many grocery and drug stores. They can help with routine illnesses after hours and can provide prescriptions to get you well.

When should I go to the emergency room or call **911**? If you feel your life or a member of your family's life is in danger or at risk of permanent harm.

6. What should I do if I get sick and I'm out of town?

Unless it is an emergency, call your Missouri Care PCP. He or she will help you decide what to do. You may also call the Nurse Advice Line for help. You can talk to a nurse 24 hours a day, 7 days a week. Call **1-800-919-8807**. If you are a Children's Mercy Pediatric Care Network member, call **1-855-670-2642**. If you think it is an emergency, call **911** or go to the nearest emergency room.

7. Will I have to pay for my prescriptions?

You will get your pharmacy benefits from MO HealthNet Fee-for-Service by using your MO HealthNet ID Card. If you have questions about prescriptions, call MO HealthNet Participant Services at **1-800-392-2161** or **1-573-751-6527**. You can also read the *Pharmacy Dispensing Fee* section on page 49 to learn more, including if you will have to pay for your prescriptions.

8. Will I get an insurance card?

You will actually have two cards. One is your MO HealthNet ID Card and one is from Missouri Care. You should have received a Missouri Care ID Card by now. Please see the *Missouri Care ID Card* section on page 6 for more details. If you haven't received your Missouri Care ID Card, just call Member Services at **1-800-322-6027**.

9. What if I lose my card?

If you lose your Missouri Care card, just call Member Services at **1-800-322-6027**. We will send you another one right away. If you lose your MO HealthNet ID Card, contact MO HealthNet Participant Services at **1-800-392-2161** or **1-573-751-6527**.

10. Do I need an authorization to go to the emergency room?

A prior authorization is not required for emergency services. The emergency room is a busy place meant for people with serious or life-threatening injuries or illnesses. If you use the emergency room for non-emergency care, you may have to wait a long time to be seen. Plus you may have to pay a fee if it's not an emergency.

Website Information

You can get up-to-date information about your MO HealthNet Managed Care health plan on our website at: **www.missouricare.com**. You can visit our website to get information about the services we provide, our provider network, frequently asked

questions, contact phone numbers and e-mail addresses.

We can also send you a printed copy of the information on our website at no cost to you within 5 business days of your request.

You may also get information about the MO HealthNet Program at www.dss.mo.gov/mhd.

Website Features

You may be able to find answers to your questions on our website.

Go to www.missouricare.com for information about:

- Our Member Handbook, Provider Directory or *Find a Provider* search tool
- How we protect your privacy
- Your member rights and responsibilities
- Member newsletters
- Information on member benefits and special programs
- Women's health and pregnancy care

When you register for a secure online account, you can also:

- Update your address and phone number
- Request a change to your primary care provider (PCP)
- Order member materials like your ID Card, Member Handbook and Provider Directory

Missouri Care ID Card

You will receive a Missouri Care ID Card. Your ID card will show your health insurance ID number, your name, your PCP's name, and other information about your care. If anything on the card is wrong, please call Missouri Care at **1-800-322-6027**. Carry your Missouri Care ID Card and your MO HealthNet ID Card with you at all times.

If you don't have your Missouri Care ID Card, you can still get services. You need to bring the documents you got from the State showing you are eligible for a MO HealthNet Managed Care plan.

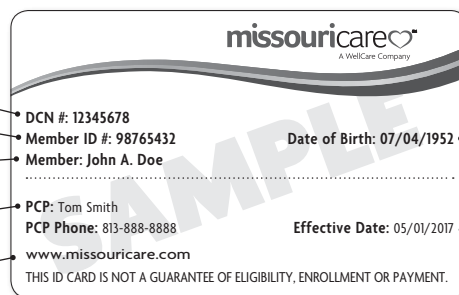
Your DCN number

Your Member ID number

Your name

Your PCP's contact information

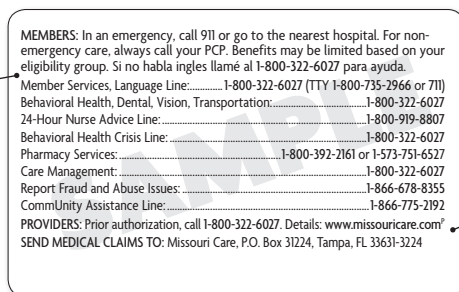
Our Website



Your Date of birth

Effective Date

How to contact us



Information your PCP and other providers need to correctly bill for your care/services

You are the only person who can use your Missouri Care ID Card. Your Missouri Care ID Card will help you get the health care services you need. You are responsible for protecting all your insurance cards. Keep your ID card in a safe place just like you do a driver's license or any other form of personal ID. Do not misuse your card. **Warning:** If you give away or loan your Missouri Care ID Card or MO HealthNet ID Card or information printed on it, you could lose your MO HealthNet eligibility.

Care You Get Using the MO HealthNet ID Card

You can get some health care that is not covered by Missouri Care. These services are covered by MO HealthNet Fee-for-Service using MO HealthNet approved providers. Missouri Care can help you find a MO HealthNet approved provider for that care. Please let your Primary Care Provider (PCP) know about the care you get. This helps your PCP take care of you. This care may include the following:

- Pharmacy.
- School-based services including physical therapy (PT), occupational therapy (OT), speech therapy (ST), hearing aid, personal care, private duty nursing, or behavioral health services included in an Individualized Family Service Plan (IFSP) or Individualized Educational Program (IEP).
- Visits by a health worker to see if lead is in your home.
- Bone marrow and organ transplants.
- SAFE/CARE exams for abused children.
- Children who are in Alternative Care or get Adoption Subsidy get behavioral health/substance abuse care through MO HealthNet Fee-for-Service using MO HealthNet approved providers. These children get their physical health care from Missouri Care.
- Community Psychiatric Rehabilitation is a special program run by the Missouri Department of Mental Health for the seriously mentally ill or seriously emotionally disturbed.
- Drug and alcohol treatment from a Comprehensive Substance Treatment and Rehabilitation (CSTAR) provider. Call Missouri Care Member Services at **1-800-322-6027** for a list of CSTAR providers.
- Targeted case management for behavioral health services.
- Abortion - (termination of a pregnancy resulting from rape, incest, or when needed to save the mother's life).
- Tobacco cessation.
- Applied Behavior Analysis (AB) services for children with Autism Spectrum Disorder.
- State public health lab services.



Member Services

Missouri Care's normal business hours are Monday through Friday, 8 a.m. to 6 p.m. Call **1-800-322-6027** for questions about being a Missouri Care member or to get help with the care you need. You can call this number from anywhere at no cost to you, even if you're out of town.

You can call if you have questions about being a Missouri Care member. You can also call if you have a question about what kind of care you need or how to get care. Call the Nurse Advice Line at **1-800-919-8807** to speak to our nurses. If you are a Children's Mercy Pediatric Care Network member, call **1-855-670-2642**. They can help you get care you need.

Missouri Care's Member Services Department can:

- Help you choose or change a primary care provider (PCP) to be your personal provider
- Educate you and your family about managed care, including the way you can get services from managed care and the role of the primary care provider
- Explain your rights and responsibilities as a Missouri Care member
- Help you get services, answer your questions or solve a problem you may have with your care
- Tell you about your benefits and services (what is covered and not covered)
- Explain how you can get specialty care, behavioral health and hospital services
- Help you make appointments
- Set up medically necessary transportation for Missouri Care members
- Handle, record and track your requests promptly and timely
- Tell you about your PCP's medical and educational background, qualifications, office locations and office hours
- Let you know what help may be offered to you and your family in the area you live
- Tell you about fraud and abuse policies and procedures, and help you report fraud and abuse
- Give the following information to you when asking the names of providers
 - Whether the provider currently participates in Missouri Care

- Whether the provider is currently accepting new patients
- Any restrictions on services, including any referral or prior authorization requirements you must meet to get services from the provider

Member Services needs your help too. Missouri Care values your ideas and suggestions to change and improve our service to you. Do you have an idea on how we can work better for you? Please call Member Services at **1-800-322-6027**. Or write to:



Missouri Care
Attention: Member Services
4205 Philips Farm Rd., Suite 100
Columbia, MO 65201

Missouri Care has a newsletter just for our members. This newsletter is full of information about different ways to stay healthy. Ideas for the newsletter often come from members like you. If there is something you would like more information about, let us know. If you have any questions, concerns or ideas, please call Member Services at **1-800-322-6027**.



Your Health Plan



Types of Care

Preventive Services

Missouri Care must provide coverage for preventive services rated 'A' or 'B' by the U.S. Preventive Services Force <http://www.uspreventiveservicestaskforce.org>. If you have health insurance other than MO HealthNet Managed Care, your other health insurance may be responsible for the payment of these preventive services.

Preventive Services Coverage

Missouri Care pays for you to have checkups and shots. It is very important that you see your PCP at least once a year.

Health Care Appointments

Your health care providers must see you within 30 days when you call for a regular health care and dental appointment. Call **1-800-322-6027** if you need help.

Pregnant women can see a health care provider sooner. In the first six months of pregnancy, you must be seen within seven days of asking. In the last three months of your pregnancy, you must be seen within three days of asking.

You should not have to wait longer than one hour from the time of your appointment. For example, if your appointment time is 2:00 P.M., you should be seen by 3:00 P.M. Sometimes you may have to wait longer because of an emergency. Please call Missouri Care at **1-800-322-6027** if you have problems or need help with an appointment. It is always important that you take all your health insurance cards to your appointments.

For urgent care appointments for physical or behavioral illness injuries which require care right away but are not emergencies such as high temperature, persistent vomiting or diarrhea, symptoms which are of sudden or severe onset but which do not require emergency room services, you must be seen within twenty-four (24) hours.

Routine care with physical or behavioral symptoms such as persistent rash, recurring high grade temperature, nonspecific pain, or fever, you must be seen within one (1) week or five (5) business days whichever is earlier.

Routine care without physical or behavioral symptoms such as well child exams, and routine physical exams, you must be seen within thirty (30) calendar days.

After care appointment within seven (7) calendar days after hospital discharge.

Your health care provider will care for you if he or she can. Your health care provider will send you to someone else if he or she is not able to see you that soon. It is always important that you take all your health insurance cards to your appointments.

Dental Appointments

Appointments for dental services are the same as for regular and urgent health care appointments.

Urgent Care

Sometimes you need medical care soon, but it is not an emergency. Call Missouri Care at **1-800-322-6027** for information about urgent care centers.

It's best to call or go to your PCP's office for things that are not emergencies, like:

- High temperature
- Persistent vomiting or diarrhea
- Symptoms which are of sudden or severe onset but which do not require emergency room services

You should call your PCP to be treated for these things. If you go to the emergency room and it is not an emergency, you may have to pay for the care you get.

Emergency Medical Services

In an emergency, go to the nearest emergency room even if it is not in Missouri Care network or call **911**. When you go to the emergency room a health care provider will check to see if you need emergency care. You can call **1-800-322-6027** anytime day or night if you have questions about going to the emergency room. Call your PCP after an emergency room visit.

An emergency is when you call **911** or go to the nearest emergency room for things like

- Chest pain;
- Stroke;
- Difficulty breathing;
- Bad burns;
- Deep cuts/heavy bleeding; or
- Gunshot wound.

Emergency medical services are those health care items and services furnished that are required to evaluate or stabilize a sudden and unforeseen situation or occurrence or a sudden onset of a medical, behavioral health or substance use condition manifesting

itself by acute symptoms of sufficient severity (including severe pain) that the failure to provide immediate medical attention could reasonably be expected by a prudent lay person, possessing average knowledge of health and medicine, to result in:

- Placing the patient’s physical or behavioral health (or with respect to a pregnant woman, the health of the woman or her unborn child) in serious jeopardy; or
- Serious impairment of bodily functions; or
- Serious dysfunction of any bodily organ or part; or
- Serious harm to self or others due to an alcohol or drug abuse emergency; or
- Injury to self or bodily harm to others; or
- With respect to a pregnant woman who is having contractions:
 - there is inadequate time to effect a safe transfer to another hospital before delivery; or
 - transfer may pose a threat to the health or safety of the woman or the unborn.

If you aren’t sure about the medical condition, get help right away or call your PCP’s office for advice. Ask for a number you can call when the office is closed. You can also call Missouri Care’s Nurse Advice Helpline at **1-800-919-8807**.

Get up-to-date ER Service Providers on our Website

To find the most current list of our in-network ER Service providers, visit **www.missouricare.com**. Our *Find a Provider* tool has an up-to-date list.

ER Services

Below you will find a list of our ER in-network locations. They are listed first by region, then in alphabetical order by city.

When should you go to the emergency room or call **911**? If you feel your life or a member of your family’s life is in danger or in risk of permanent harm. Otherwise, urgent care or quick care clinics may be better options.

Eastern Region

Includes: Franklin, Jefferson, Lincoln, Madison, Perry, Pike, St. Charles, St. Francois, Ste. Genevieve, St. Louis, Warren and Washington counties, as well as St. Louis City

Alton Memorial Hospital
2 Memorial Dr
Alton, IL 62002
1-618-463-7246

Parkland Health Center Bonne Terre
7245 Raider Rd
Bonne Terre, MO 63628
1-573-358-1400

St. Luke's Hospital 232 S. Woods Mill Road Chesterfield, MO 63017 1-314-434-1500	Parkland Health Center Farmington 1101 W. Liberty St Farmington, MO 63640 1-573-756-6451
Mercy Hospital Jefferson 1400 Hwy 61 S. Festus, MO 63028 1-636-933-1000	Northwest Health Care 1225 Graham Rd Florissant, MO 63031 1-314-953-6000
Madison Medical Center 611 West Main St Fredericktown, MO 63645 1-573-783-1070	Pike County Memorial Hospital 2305 W. Georgia St Louisiana, MO 63353 1-573-754-5531
Progress West Healthcare Center 2 Progress Point Pkwy O'Fallon, MO 63368 1-636-344-1000	Washington County Memorial Hospital 300 Health Way Potosi, MO 63664 1-573-438-5451
Ste. Genevieve County Memorial Hospital 800 Ste. Genevieve Dr Ste. Genevieve, MO 63670 1-573-883-2751	CenterPointe Hospital 4801 Weldon Spring Pkwy St. Charles, MO 63304 1-636-441-7300
Barnes-Jewish Hospital 1 Barnes Jewish Hospital Plaza St. Louis, MO 63110 1-314-747-3000	Barnes-Jewish West County Hospital 12634 Olive Blvd St. Louis, MO 63141 1-314-996-8000

Christian Hospital Northeast 11133 Dunn Rd St. Louis, MO 63136 1-314-653-5000	Des Peres Hospital 2345 Dougherty Ferry Road St. Louis, MO 63122 1-314-966-9666
Mercy Hospital St. Louis 615 S. New Ballas Rd St. Louis, MO 63141 1-314-251-6000	Missouri Baptist Medical Center 3015 N. Ballas Rd St. Louis, MO 63131 1-314-996-5000
St. Alexius Hospital 3933 S. Broadway St. Louis, MO 63118 1-314-865-7000	St. Anthony's Medical Center 10010 Kennerly Rd St. Louis, MO 63128 1-314-525-1000
St. Louis Children's Hospital One Childrens Place St. Louis, MO 63110 1-314-454-6000	Barnes-Jewish St. Peters Hospital 10 Hospital Dr St. Peters, MO 63376 1-636-916-9000
Missouri Baptist Hospital of Sullivan 751 Sappington Bridge Rd Sullivan, MO 63080 1-573-468-4186	Mercy Hospital Lincoln 1000 E. Cherry St Troy, MO 63379 1-636-528-8551
Mercy Hospital Washington 901 E. 5th St Washington, MO 63090 1-636-239-8000	

Central Region

Includes: Adair, Andrew, Atchison, Audrain, Benton, Bollinger, Boone, Buchanan, Butler, Caldwell, Callaway, Camden, Cape Girardeau, Carroll, Carter, Chariton, Clark, Clinton, Cole, Cooper, Crawford, Daviess, DeKalb, Dent, Dunklin, Gasconade, Gentry, Grundy, Harrison, Holt, Howard, Iron, Knox, Laclede, Lewis, Linn, Livingston, Macon, Maries, Marion, Mercer, Miller, Mississippi, Moniteau, Monroe, Montgomery, Morgan, New Madrid, Nodaway, Osage, Pemiscot, Pettis, Phelps, Pulaski, Putnam, Ralls, Randolph, Reynolds, Ripley, Saline, Schuyler, Scotland, Scott, Shelby, Stoddard, Sullivan, Wayne and Worth counties

Northwest Medical Center 705 N. College St Albany, MO 64402 1-660-726-3941	Cooper County Memorial Hospital 17651 B Hwy. Boonville, MO 65233 1-660-882-7461
General John J. Pershing Memorial Hospital 130 E. Lockling Ave Brookfield, MO 64628 1-660-258-2222	Cameron Regional Medical Center 1600 E. Evergreen St Cameron, MO 64429 1-816-632-2101
Carroll County Memorial Hospital 1502 N. Jefferson St Carrollton, MO 64633 1-660-542-1695	Hedrick Medical Center 2799 N. Washington St Chillicothe, MO 64601 1-660-646-1480
Boone Hospital Center 1600 E. Broadway Columbia, MO 65201 1-573-815-8000	University Hospital One Hospital Dr Columbia, MO 65212 1-573-882-4141
Women's and Children's Hospital 404 Keene St Columbia, MO 65212 1-573-875-9000	Community Hospital Association 26136 US Highway 59 Fairfax, MO 64446 1-660-686-2211

Fulton Medical Center 10 S. Hospital Dr Fulton, MO 65251 1-573-642-3376	Hannibal Regional Hospital 6000 Hospital Dr Hannibal, MO 63401 1-573-248-1300
Pemiscot County Memorial Hospital 946 E. Reed St Hayti, MO 63851 1-573-359-1372	Hermann Area District Hospital 509 W. 18th St Hermann, MO 65041 1-573-486-2191
Capital Region Medical Center 1125 Madison Street Jefferson City, MO 65101 1-573-632-5436	Twin Rivers Regional Medical Center 1301 First St Kennett, MO 63857 1-573-888-8421
Northeast Regional Medical Center 315 S. Osteopathy Kirksville, MO 63501 1-660-785-1100	Mercy Hospital Lebanon 100 Hospital Dr Lebanon, MO 65536 1-417-533-6100
Samaritan Hospital 1205 N. Missouri St Macon, MO 63552 1-660-385-8700	John Fitzgibbon Memorial Hospital 2305 S. 65 Hwy Marshall, MO 65340 1-660-886-7431
Audrain Medical Center 620 E. Monroe St Mexico, MO 65265 1-573-582-5000	Sullivan County Memorial Hospital 630 W. 3rd St Milan, MO 63556 1-660-265-4212

Moberly Regional Medical Center 1515 Union Ave Moberly, MO 65270 1-660-263-8400	Lake Regional Health System 54 Hospital Dr Osage Beach, MO 65065 1-573-348-8000
Piggott Community Hospital 1206 Gordon Duckworth Dr Piggott, AR 72454 1-870-598-3881	Iron County Hospital 301 N. Highway 21 Pilot Knob, MO 63663 1-573-546-1260
Poplar Bluff Regional Medical Center 3100 Oak Grove Rd Poplar Bluff, MO 63901 1-573-785-7721	Blessing Hospital 1005 Broadway St Quincy, IL 62301 1-217-223-8400
Bothwell Regional Health Center 601 E. 14th St Sedalia, MO 65301 1-660-826-8833	Mosaic Life Care 5325 Faraon St St. Joseph, MO 64506 1-816-271-6000
I-70 Community Hospital 105 Hospital Dr Sweet Springs, MO 65351 1-660-335-7463	Wright Memorial Hospital 191 Iowa Blvd Trenton, MO 64683 1-660-358-5700
Putnam County Memorial Hospital 1926 Oak St Unionville, MO 63565 1-660-947-2411	

Western Region

Includes: Bates, Cass, Cedar, Clay, Henry, Jackson, Johnson, Lafayette, Platte, Polk, Ray, St. Clair and Vernon counties

Ellett Memorial Hospital 610 N. Ohio St Appleton City, MO 64724 1-660-476-2111	Belton Regional Medical Center 17065 S. 71 Hwy Belton, MO 64012 1-816-348-1200
St. Mary's Medical Center 201 N.W. R.D. Mize Rd Blue Springs, MO 64014 1-816-228-5900	Citizen's Memorial Hospital 1500 N. Oakland Ave Bolivar, MO 65613 1-417-326-6000
Bates County Memorial Hospital 615 W. Nursery St Butler, MO 64730 1-660-200-7000	Golden Valley Memorial Hospital 1600 N. 2nd St Clinton, MO 64735 1-660-885-5511
Cedar County Memorial Hospital 1401 S. Park St El Dorado Springs, MO 64744 1-417-876-2511	Excelsior Springs City Hospital 1700 Rainbow Blvd Excelsior Springs, MO 64024 1-816-630-6081
Cass Regional Medical Center 2800 E. Rock Haven Rd Harrisonville, MO 64701 1-816-380-3474	Centerpoint Medical Center of Independence 19600 E. 39th St Independence, MO 64057 1-816-698-7000
Allen County Hospital 3066 N. Kentucky St Iola, KS 66749 1-620-365-1000	North Kansas City Hospital 2800 Clay Edwards Dr Kansas City, MO 64116 1-816-691-2000

Research Medical Center 2316 E. Meyer Blvd Kansas City, MO 64132 1-816-276-4000	Research Medical Center – Brookside 6601 Rockhill Rd Kansas City, MO 64131 1-816-276-7000
St. Luke’s Hospital Northland 5830 N.W. Barry Rd Kansas City, MO 64154 1-816-891-6000	St. Luke’s Hospital of Kansas City 4401 Wornall Rd Kansas City, MO 64111 1-816-932-2000
St. Joseph Medical Center 1000 Carondelet Dr Kansas City, MO 64114 1-816-942-4400	The Children’s Mercy Hospital 2401 Gillham Rd Kansas City, MO 64108 1-816-234-3000
Truman Medical Center Hospital Hill 2301 Holmes St Kansas City, MO 64108 1-816-404-1000	Truman Medical Center Lakewood 7900 Lee’s Summit Rd Kansas City, MO 64139 1-816-404-7000
Lee’s Summit Medical Center 2100 S.E. Blue Pkwy Lee’s Summit, MO 64063 1-816-282-5000	St. Luke’s East Hospital 100 N.E. St. Luke’s Blvd Lee’s Summit, MO 64086 1-816-347-5000
Lafayette Regional Health Center 1500 State St Lexington, MO 64067 1-660-259-2203	Nevada Regional Medical Center 800 S. Ash St Nevada, MO 64772 1-417-667-3355
Children’s Mercy Hospital Kansas 5808 W. 110th St Overland Park, KS 66211 1-913-696-8000	Menorah Medical Center 5721 W. 119th St Overland Park, KS 66209 1-913-498-6000

Blue Valley Hospital 12850 Metcalf Ave Overland Park, KS 66213 1-913-220-2866	Overland Park Regional Medical Center 10500 Quivira Rd Overland Park, KS 66215 1-913-541-5000
Ray County Memorial Hospital 904 Wollard Blvd Richmond, MO 64085 1-816-470-5432	Western Missouri Medical Center 403 Burkarth Rd Warrensburg, MO 64093 1-660-747-2500

Southwestern Region

Includes: Barry, Barton, Christian, Dade, Dallas, Douglas, Greene, Hickory, Howell, Jasper, Lawrence, McDonald, Newton, Oregon, Ozark, Shannon, Stone, Taney, Texas, Webster and Wright counties

Ozarks Community Hospital 1101 Jackson St S.W. Gravette, AR 72736 1-479-787-5221	Freeman Hospital East 932 E. 34th St Joplin, MO 64804 1-417-347-1111
Freeman Hospital West 1102 W. 32nd St Joplin, MO 64804 1-417-347-1111	Barton County Memorial Hospital 29 N.W. 1st Lane Lamar, MO 64759 1-417-681-5100
Freeman Neosho Hospital 113 W. Hickory St Neosho, MO 64850 1-417-451-1234	Mercy Hospital Springfield 1235 E. Cherokee St Springfield, MO 65804 1-417-820-2000

Post-Stabilization Care

Post-stabilization care services means covered services, related to an emergency medical condition that are provided after a member is stabilized in order to maintain the stabilized conditions or to improve or resolve the member's condition.

Post-Stabilization Care Services

Post-stabilization care is care given after a medical emergency. The goal of this care is to maintain, improve or resolve a member's condition after the emergency.

Missouri Care will pay for post-stabilization care that is:

- Received in or out of our network and is pre-approved by a Missouri Care provider or representative
- Received in or out of our network that was not pre-approved by a Missouri Care provider or representative but given to maintain, improve or resolve the member's condition if:
 - Missouri Care doesn't respond to a request for pre-approval within 30 minutes
 - Missouri Care can't be reached
 - The Missouri Care representative and the treating provider cannot reach an agreement about the member's care and a Missouri Care provider cannot be reached to discuss the member's care

Missouri Care does not pay for out-of-network post-stabilization care that was not pre-approved when:

- A Missouri Care provider can treat the member at the hospital and takes over the member's care
- A Missouri Care provider takes over the member's care through transfer
- A Missouri Care representative and the treating provider reach an agreement concerning the member's care
- The member is discharged



Your Primary Care Provider

What is a Primary Care Provider (PCP)?

You and each member of your family who is eligible for MO HealthNet Managed Care can choose your own PCP from the Missouri Care Provider Directory. To get a Provider Directory, call Member Services at **1-800-322-6027**. We will send one to you within 48 hours of your request.

Your PCP is your primary health care provider. You, your PCP and Missouri Care will work together as a team. We want to make sure you get the best health care possible. Your PCP will arrange for the covered services you need.

Our PCPs are trained in different specialties. They include:

- Family and internal medicine
- General practice
- Geriatrics
- Pediatrics
- Obstetrics/Gynecology (OB/GYN)
- Advanced Practice Registered Nurse services

There are also times when a specialist can be your PCP, if:

- You have a chronic condition and have a historical relationship with the specialist; and
- The specialist agrees in writing to assume the responsibilities of the PCP

It's important to have a good relationship with your PCP. Make sure you talk to your PCP about any health problems or concerns you have. This way your PCP gets to know you and can help you get the health care you need. Always follow your PCP's instructions about your health care. You should always see your PCP at least once a year for a checkup, even if you feel well.

The PCP you have selected may not be taking new patients. If you have questions, call Member Services at **1-800-322-6027**.

Choosing and Changing Your Primary Care Provider (PCP)

You must choose a PCP. If you do not, we will choose one for you. Your PCP will manage your health care. The PCP knows Missouri Care's network and can guide you to specialists

if you need one. You may ask for a specialist as your PCP if you have a chronic illness or disabling condition. We will work out a plan to make sure you get the care you need.

You have a right to change PCPs in our MO HealthNet Managed Care health plan. There are no limits on how often you may change your PCP. The PCP change will take effect the same day you call Missouri Care. Children in state custody may change PCPs as often as needed. To do this, call us at **1-800-322-6027**.



Check the PCP on Your ID Card!

It is very important the PCP on your ID card is correct. If you do not choose a PCP, we will choose one for you. If the PCP on your ID card is not the one you are going to, please call Member Services to update your information.

Getting Medical Care

Call your Primary Care Provider (PCP) when you need health care. Your PCP's phone number is on your Missouri Care ID Card. Your PCP will help you get the care you need or refer you to a specialist.

These services do not need a PCP referral:

- Birth control or family planning - you may go to our providers or a MO HealthNet approved provider. We will pay for this care, even if the provider is not in Missouri Care.
- Behavioral health care - you may go to any of our behavioral health providers. Just call this toll free number **1-800-322-6027**.
- Local public health agencies (LPHA) - Children may go to local public health agencies for shots. Members may go to LPHAs for tests and treatment of sexually transmitted diseases and tuberculosis; HIV/AIDS tests; or for lead poisoning screening, testing and treatment.
- Women's health service - You may go to any of our OB/GYN providers.
- Dental health care – you may go to any of our dental health providers. Just call this toll free number **1-800-322-6027**.
- Vision care – you may go to any of our vision care providers. Just call this toll free number **1-800-322-6027**.

You may have to pay for services you get if:

- You choose to get medical services that are not covered by MO HealthNet Managed Care;
- You go to a provider that is not a Missouri Care provider without prior approval;
- You do not have prior approval for services that need it.

Travel Distance

Missouri Care wants to make sure that you can see a PCP when you are sick. Your PCP will arrange for the covered services you need. We have PCPs that are within 30 miles of your home. If you need to see a specialist, your PCP can guide you to one. If you have questions, call Member Services at **1-800-322-6027**.

Access to Care

Missouri Care must provide urgent care for physical or behavioral health illness within 24 hours, routine care with symptoms within five business days, or routine care without symptoms within 30 calendar days. For maternity care there are special requirements. Missouri Care must make providers available within 30 miles from where you live. If there is not a licensed physical or behavioral health provider within your area, you will have access to physical and behavioral health providers within 60 miles from where you live. Call **1-800-322-6027** if you need help.

Medical Necessity

Missouri Care makes decisions based on medical necessity when a PCP orders some services. That means our Medical Director may decide if the service meets medical standards for the health condition.

Medical necessity is used to decide if a form of treatment is:

- Appropriate for a physical or behavioral illness or injury
- Going to improve the function of an injured body part
- Able to slow the effects of a disability

We make sure our decisions are based only on the appropriateness of care and your benefit coverage. They are not based on financial rewards to those who make these decisions.

Prior Authorization

Sometimes your PCP is asked to call Missouri Care to get our approval to do some services. That process is called prior authorization. You do not need prior authorization

for emergency medical/behavioral health services.

If the request is approved:

- The PCP or specialist can treat as requested

If the request is denied:

- Missouri Care's Medical Director will notify the provider why the request was denied

You will receive a letter from Missouri Care if a service is denied. The letter will explain why the service was denied. It will also tell you how to request an appeal of the denial. (Please see the *Grievance and Appeals* section for more details about how to request an appeal.) Your PCP or specialist cannot bill you for denied services. If you get a bill for denied services, please call us at 1-800-322-6027. You may also call us if you have any questions about this process.

How Do I Cancel or Change an Appointment?

There may be times you need to cancel or change your appointment with your Missouri Care provider. When this happens, please call his or her office at least 24 hours before your appointment. This will give the provider more time to see other patients. If you cancel an appointment, you should always try to make an appointment for another time to ensure you receive the care you need.

What If I Need to See a Specialist?

Your PCP is in charge of arranging your health care needs. Your PCP can arrange for care from other providers if needed. Be sure to follow your PCP's guidance when you get care from another provider. As long as your PCP has made arrangements, Missouri Care will pay for medically necessary covered services. Prior authorization rules may apply.

Missouri Care does not require referrals for in-network providers. This includes specialists.

If Missouri Care does not have a health care provider in our network with appropriate training or experience, we may refer you to an out-of-network provider.

If you have any questions about referrals, please call Member Services at 1-800-322-6027.

Access to Women's Health Services

You are allowed to see women's health specialists (OB/GYNs) in Missouri Care's network for certain services. You may do this for covered routine and preventive health care services. For these services, you do not need approval from your PCP or Missouri Care. Services may include, but are not limited to prenatal care, breast exams, mammograms and Pap tests.

Special Health Care Needs

If you have a special health care need, call Missouri Care at **1-800-322-6027**. Missouri Care will work with you to make sure you get the care you need. If you have a chronic illness and are seeing a specialist for your medical care, you may ask Missouri Care for a specialist to be your PCP.

Telehealth Service

This service lets you visit with a provider by video so you can get care closer to home. You don't need to drive far to see a provider.

Telehealth works a lot like a normal office visit.

- Telehealth providers are licensed in the state where they practice.
- A consulting provider may ask a telepresenter to help with your visit.
- Your information will be kept private.

Q: Why should I use telehealth?

A: Most people use the service when they need to see a specialist who doesn't have an office nearby.

Q: Where do I go to see a telehealth provider?

A: In Missouri, you can only use this service at an originating site. This is often a doctor's office.

Q: Can I use my smartphone for a telehealth service?

A: No, services by videophone or webcam aren't covered.

Q: How do I find a telehealth provider?

A: Telehealth providers can be found on the online Find a Provider tool. You can also call Member Services at **1-800-322-6027** (TTY **1-800-735-2966**) for help finding a telehealth provider. You may also request a printed copy of our Provider Directory. If you request a directory, it will be mailed within 48 hours of your request.

Q: How can I learn more about telehealth services?

A: Talk to your doctor to learn more about telehealth. You can also call Member Services at **1-800-322-6027** (TTY **1-800-735-2966**).



Services

Your Health Benefits in MO HealthNet Managed Care

Some benefits are limited based on your eligibility group or age. The benefits that may be limited have an “*” next to them. Some services need prior approval before getting them. Call Missouri Care at **1-800-322-6027** for information about your health benefits.

- Ambulance
- Ambulatory surgical center, birthing center
- Asthma education
- Behavioral health and substance use
- Cancer screenings
- Dental services related to trauma to the mouth, jaw, teeth or other contiguous sites as a result of injury; treatment of a disease/medical condition without which the health of the individual would be adversely affected; preventive services; restorative services; periodontal treatment; oral surgery; extractions; radiographs; pain evaluation and relief; infection control; and general anesthesia.
- Durable medical equipment (DME)*
- Emergency medical, behavioral health, and substance abuse services and post-stabilization services
- Family planning
- Home health services*
- Hospice, if you are in the last six months of your life. Children may receive hospice services and treatment for their illness at the same time. The hospice will provide all services for pain relief and support
- Hospital, when an overnight stay is required
- Laboratory tests and x-rays
- Maternity benefits, including certified nurse midwife
- Optical, services include one comprehensive or one limited eye examination every two years for refractive error, services related to trauma or treatment of disease/medical condition (including eye prosthetics), and one pair eyeglasses every two years (during any 24 month period of time). Replacements within the 24 month period may be available under certain conditions

- Outpatient hospital, when an overnight stay is not required
- Personal care
- Podiatry, limited medical services for your feet*
- Primary Care Provider (PCP) services
- Specialty care
- Transplant related services
- Transportation to medical appointments*

You may get these services from your MO HealthNet Managed Care health plan or a local public health agency.

- Screening, testing, and treatment for sexually transmitted diseases
- Screening and testing for HIV
- Screening, testing, and treatment for tuberculosis
- Immunizations (shots) for children
- Screening, testing, and treatment for lead poisoning

Benefits and Coverage Chart

The chart below lists some common benefits and services. Managed Care members have no co-payments. Call Missouri Care at **1-800-322-6027** if you have any questions. Call Member Services for benefit limitations and/or authorizations. The benefits that may be limited have an “*” next to them. To learn more, see the *Your Health Benefits in MO HealthNet Managed Care* section.

Benefit/Services	Pregnant Female	Children	Adults
Allergy Services	\$0	\$0	\$0
Ambulance – Emergency	\$0; medically necessary	\$0; medically necessary	\$0; medically necessary
Ambulatory Surgical Centers	\$0	\$0	\$0
Behavioral Health Services/ Substance Use	\$0	\$0	\$0

Benefit/Services	Pregnant Female	Children	Adults
Birth Center	\$0	Not applicable	Not applicable
Cancer Screenings	\$0	\$0	\$0
Dental Services	\$0	\$0	\$0
Doctor Office Services	\$0	\$0	\$0
Durable Medical Equipment*	\$0	\$0	\$0
Emergency Room Services	\$0	\$0	\$0
EPSDT – Early and Periodic Screening, Diagnosis and Treatment	Not applicable	\$0	Not applicable
Family Planning* (sterilizations not covered for members under age 21)	\$0	\$0	\$0
Hearing Aids	\$0	\$0	Not applicable
Hearing Services	\$0	\$0	Not applicable
Home Health Services*	\$0	\$0	\$0

Benefit/Services	Pregnant Female	Children	Adults
Hospice – Non-Institutional	\$0	\$0	\$0
Hospital Services – Inpatient	\$0	\$0	\$0
Hospital Services – Outpatient	\$0	\$0	\$0
Kidney Dialysis and Transplants	Covered by MO HealthNet Fee-for-Service	Covered by MO HealthNet Fee-for-Service	Covered by MO HealthNet Fee-for-Service
Laboratory Diagnostic and Radiology Services	\$0	\$0	\$0
Mammogram	\$0	Not applicable	\$0
Maternity Care	\$0	Not applicable	\$0
Personal Care Services	\$0	\$0	\$0
Podiatry Services*	\$0	\$0	\$0
Preventive Services	\$0	\$0	\$0
Prosthetic Devices	\$0	\$0	\$0

Benefit/Services	Pregnant Female	Children	Adults
Therapy – Physical, Speech, Occupational	\$0	\$0	Not covered
Transportation – Non-Emergent*	\$0	\$0	\$0
Urgent Care Services	\$0	\$0	\$0
Vision	\$0	\$0	\$0

Network Covered Services

There could be a time when Missouri Care can't provide a covered service in our network. If that happens, you may be referred to a health care provider that is not in our network. We will pay for services until a health care provider in our network is available or you can begin to see an in-network provider. To ask for an out-of-network health care provider, call Member Services at **1-800-322-6027**. We will review and process your request within two business days.

Medical Disability/MO HealthNet Fee-For-Service

If you get Supplemental Security Income (SSI), meet the SSI medical disability definition, or get adoption subsidy benefits you may stay in MO HealthNet Managed Care or you may choose to get MO HealthNet Fee-for-Service using MO HealthNet approved providers. Call the MO HealthNet Managed Care Enrollment Helpline at **1-800-348-6627** for information and to make your choice.

What is Not Covered?

The services listed below are examples of services Missouri Care does not cover:

- Some services that have not been approved in advance by your PCP
- Sex-change operations and operations to reverse voluntary sterilization
- Services or items needed only for cosmetic reasons
- Services that Missouri Care's Medical Director determines to be experimental or provided primarily for research purposes

- Personal care items, like toothbrushes, diapers, soap, ordering movies
- Missouri Care will not pay for any services not covered by MO HealthNet and not approved by your PCP or Missouri Care
- Early elective childbirth before 39 weeks that is not medically necessary

Change in Benefits and Services

Missouri Care will send you a letter any time there is a change in your benefits. We will send the letter so you get it at least 30 days before the change takes effect. The letter will tell you if benefits have changed or stopped.

We also send you letters about your PCP. You will get a letter if your PCP has moved his/her clinic. We will also send you a letter if your PCP no longer accepts Missouri Care members.

Call Member Services at **1-800-322-6027** if you have questions about changes in benefits or services.

What If I'm Pregnant?

Missouri Care takes special care of our pregnant members. If you think you are pregnant, call us right away. You should also call the Family Support Division Information Center. You can reach them toll-free at **1-855-373-4636**. You can also visit their website. Go to **www.dss.mo.gov** to access the FSD Program Enrollment System online.

When you call us, Member Services will help you:

- Choose a PCP or OB for your pregnancy care (also called prenatal care)
- Get into special programs for pregnant members
- Choose a PCP for your baby and a PCP for you after your six-week checkup following the birth of your baby

Early and regular prenatal care is very important for your health and your baby's health.

Your PCP/OB will give you:

- Regular prenatal care and services
- Information about special classes for moms-to-be
- Information about family planning services (including birth control pills, condoms, tubal ligation)
- Information about what to expect during your pregnancy, good nutrition, exercise
- Other helpful advice for moms-to-be

As soon as your baby is born, Missouri Care will help take care of all of the medical care you and your baby may need.

Family Planning

All MO HealthNet Managed Care health plan members can get family planning services no matter what age. These services will be kept private. You may go to a Missouri Care provider or a MO HealthNet Fee-for-Service approved provider to get family planning services. You do not need to ask Missouri Care first. Missouri Care will pay for your family planning services.

Immunization (Shot) Schedule for Children

Immunizations (shots) help prevent serious illness. This record will help keep track when your child is immunized. If your child did not get their shots at the age shown, they still need to get that shot. Talk to your PCP about your child's immunizations (shots). Children must have their immunizations (shots) to enter school.

Immunization Record		
Age	Shot (Immunization)	Date Received
Birth	HepB*	
2 months	DTaP, Hib, IPV, PCV, RV, HepB	
4 months	DTaP, Hib, IPV, PCV, RV, HepB*	
6 months	DTaP, Hib, IPV, PCV, RV, HepB	
12–15 months	Hib, PCV, MMR, Varicella, HepA	

Immunization Record		
Age	Shot (Immunization)	Date Received
15–18 months	DTaP**	
19–23 months	HepA	
4–6 years	DTaP, IPV, MMR, Varicella	
7–10 years Catch-up	Tdap, HepB, IPV, MMR, Varicella, HepA	
11–12 years	Tdap, MenACWY (1 dose), HPV (3 doses)	
11–12 years Catch-up	HepB, IPV, MMR, Varicella, HepA	
13–18 years Catch-up	Tdap, MenACWY (1 dose, Booster at 16), HPV, HepB, IPV, MMR, Varicella, HepA	
19–20 years	HPV –(3 doses) MMR***, Tdap***, Varicella***	
Every year	Influenza (after 6 months)	

*If the birth dose of HepB is given, the 4-month dose may be omitted.

**Can be given as early as 12 months, if there are 6 months since third dose.

***Recommended unless your health care provider tells you that you cannot safely receive it or that you do not need it.

More Benefits for Children and Women in a MO HealthNet Category of Assistance for Pregnant Women

A child is anyone less than twenty-one (21) years of age. Some services need prior approval before getting them. Call **1-800-322-6027** to check. Women must be in a MO HealthNet category of assistance for pregnant women to get these extra benefits.

- Asthma program
- Comprehensive day rehabilitation, services to help you recover from a serious head injury.
- Dental services.
- Diabetes education and self management training.
- Hearing aids and related services.
- Podiatry, medical services for your feet.
- Vision – Children get all their vision care from the health plan. Some pregnant women will get their vision care from the health plan which includes one (1) comprehensive or one (1) limited eye exam per year for refractive error, one (1) pair of eyeglasses every two years, replacement lens(es) when there is a .50 or greater change, and for children under age 21, replacements frames and/or lenses when lost, broken or medically necessary, and HCY/EPSTD optical screen and services.
- MO HealthNet has a special program to provide medically necessary services to children. The program is called Early Periodic Screening, Diagnosis and Treatment (EPSTD) or Healthy Children and Youth (HCY). Your Primary Care Provider (PCP) can give your child these EPSTD/HCY services. Some examples of EPSTD/HCY services include:
 - Child's medical history.
 - An unclothed physical exam.
 - Blood and/or urine tests.
 - Immunizations (shots).
 - Screening and testing lead levels in blood.
 - Checking the growth and progress of the child.
 - Vision, hearing, and dental screens.
 - Dental care and braces for teeth when needed for health reasons.
 - Private duty nurses in the home.
 - Special therapies such as physical, occupational, and speech.
 - Aids to help disabled children talk.
 - Personal care to help take care of a sick or disabled child.

- Health care management.
- Psychology/counseling.
- Health education.

An EPSDT/HCY Health Screen helps children stay healthy or find problems that may need medical treatment. Your child needs to get regular checkups. Children between 6 months and 6 years old need to get checked for lead poisoning. You may use the chart below to record when your child gets a health screen or lead poison screen.

Health Screen & Lead Poison Assessment Record		
Age	Date of Health Screen	Date of Lead Poison Screen
Newborn		
By one month		
2–3 months		
4–5 months		
6–8 months		
9–11 months		
12–14 months		Your child needs a Blood Lead Level at 12 and 24 months
15–17 months		
18–23 months		
24 months		

Health Screen & Lead Poison Assessment Record		
Age	Date of Health Screen	Date of Lead Poison Screen
3 years		Your child needs a Blood Lead Level each year until age 6 if in a high-risk area.
4 years		
5 years		
6–7 years		
8–9 years		
10–11 years		
12–13 years		A Blood Lead Level is recommended for women of child-bearing age.
14–15 years		
16–17 years		
18–19 years		
20 years		

Important tests your child needs are shown on the chart below. Please note these are not all the tests your child may need. Talk with your child's PCP.

Age	Test
Birth	PKU Test
1–2 Weeks	PKU and Thyroid Tests
12 months	TB Test, Blood Count, Blood Lead Level
2 years	Blood Lead Level Test
3 years	Blood lead test if there are any possible lead exposures such as an older home or by parent job or hobbies related to lead. Blood lead level test required if lives in or visits a high-risk area. Ask your doctor if you are unsure if your child is at risk.
4 years	Blood lead test if there are any possible lead exposures such as an older home or by parent job or hobbies related to lead. Blood lead level test required if lives in or visits a high-risk area. Ask your doctor if you are unsure if your child is at risk.
5 years	Blood lead test if there are any possible lead exposures such as an older home or by parent job or hobbies related to lead. Blood lead level test required if lives in or visits a high-risk area. Ask your doctor if you are unsure if your child is at risk.
6 years	Blood lead test if there are any possible lead exposures such as an older home or by parent job or hobbies related to lead. Blood lead level test required if lives in or visits a high-risk area. Ask your doctor if you are unsure if your child is at risk.

Independent Foster Care Adolescents Ages 21 Through 25

Independent foster care adolescents with a Medical Eligibility code of 38 and who are ages 21 through 25 will receive a comprehensive benefit package for children in State care and custody. EPSDT screenings will not be covered.

Lead Screening for Children and Pregnant Women

There are many other ways your child can be lead poisoned. Call **1-800-322-6027** if you have questions about lead poisoning.

Some of the ways your child may be at risk for lead poisoning include:

- You live in or visit a house built before 1978 or
- Someone in your house works as a
 - plumber,
 - auto mechanic,
 - printer,
 - steel worker,
 - battery manufacturer,
 - gas station attendant, or
 - other jobs that contain lead.

High levels of lead can cause brain damage and even death. Lead in children is a common health concern that can impact their ability to learn, behavior and health through their adult life.

- All children through six years of age must be tested annually if they live in or visit a **high-risk** area (Missouri state law requirement).
- Children not living in or visiting a known high risk area may still need lead testing if questions the Primary Care Provider (PCP) ask parents about lead, show there is a possible lead source the child is in contact with.
- All children must be tested at one year and two years of age even if the child lives in a **non-high risk** area.
- All children between one and six years of age must be tested if they have never been previously tested.

A lead screen has two parts. First, the Primary Care Provider (PCP) will ask questions to see if your child may have been exposed to lead. Then the PCP may take some blood from your child to check for lead. This is called a blood lead level test. All children at one year old and again at two years old must have a blood lead level test. Children with high lead levels in their blood must have follow up services for lead poisoning.

High lead levels in a pregnant woman can harm her unborn child. If you are pregnant or thinking about becoming pregnant, talk with your PCP or obstetrician to see if you may have been exposed to lead and need to have a blood lead test. Lead can be passed to the baby during pregnancy and breast feeding.

Newborn Coverage

If you have a baby you must:

- Call the Family Support Division (FSD) Information Center at **1-855-373-4636** or visit our website at **www.dss.mo.gov** to access the FSD Program Enrollment System online as soon as possible to report the birth of your child. The State will give your baby an identification number, known as a DCN or MO HealthNet number;
- Call Missouri Care at **1-800-322-6027**; and
- Pick a PCP for your baby in Missouri Care's network.

Your baby will be enrolled in Missouri Care. Call the MO HealthNet Managed Care Enrollment Helpline at **1-800-348-6627** if you want a different MO HealthNet Managed Care health plan for your baby. This is the only phone number you can use to change your baby's MO HealthNet Managed Care health plan. You cannot change MO HealthNet Managed Care health plans for your baby until after your baby is born and has a MO HealthNet number. The Family Support Division staff cannot change your baby's MO HealthNet Managed Care health plan.

To be sure your baby gets all the services he or she needs, continue to use your current MO HealthNet Managed Care health plan and PCP until the new MO HealthNet Managed Care health plan is effective. If you want to change your baby's MO HealthNet Managed Care health plan it will be, at most, 15 days before the new MO HealthNet Managed Care health plan is effective.

Nurse Visits for You and Your Baby

You and your Primary Care Provider (PCP) may agree for you to go home early after having a baby. If you do, you may get two nurse visits in your home. You may get the home health nurse visits if you leave the hospital less than 48 hours after having your baby, or less than 96 hours after a C-Section. The first nurse visit will be within two days of leaving the hospital. The second nurse visit is within two weeks of leaving the hospital. You may be able to get more nurse visits if you need them.

At a home visit, the nurse will:

- Check your health and your baby;
- Talk to you about how things are going;
- Answer your questions;
- Teach you how to do things such as breastfeeding; and
- Do lab tests if your PCP orders them.

First Steps

Missouri Care can help your family get services from the First Steps Program. First Steps is Missouri's early intervention system for infants and toddlers, birth to age 3, who have delayed development or diagnosed conditions that are associated with developmental disabilities.

Children are eligible for First Steps if they have a significant delay (50% or greater delay in development) in one or more of the following areas:

- Cognition (learning);
- Communication (speech);
- Adaptive (self-help);
- Physical (walking); or
- Social-emotional (behaviors).

Children are referred to First Steps through:

- Physicians;
- Hospitals, including prenatal and postnatal care facilities;
- Parents;
- Child-care programs;
- Local educational agencies, including school districts and Parents as Teachers;
- Public health facilities;
- Other social service agencies;
- Other health care providers;
- Public agencies and staff in the child welfare system, including foster care;
- Homeless family shelters; or
- Domestic violence shelters.

An assessment is done to establish eligibility and determine the needs of the child. The assessment is provided at no charge to the family and is arranged by the regional System Point of Entry (SPOE) office in which the child and family lives.

Once a child is determined eligible, the services are determined by an Individualized Family Service Plan (IFSP) team. Missouri Care can refer you to First Steps, or you may call First Steps at **1-866-583-2392** if you have any questions.

Behavioral Health Care

Missouri Care will cover your behavioral health needs. A PCP referral is not needed for behavioral health care. You may go to any behavioral health provider on Missouri Care's list of providers. Be sure to go to a behavioral health provider in our network. Behavioral health care includes care for people who abuse drugs or alcohol or need other behavioral health services. Call **1-800-322-6027** to get behavioral health services and for help finding a provider within our network.

Children who are in Alternative Care or get Adoption Subsidy get behavioral health care through MO HealthNet Fee-for-Service using MO HealthNet approved providers. These children get their physical health care from Missouri Care.

Care Management Services

You may ask for an assessment for care management services at any time by calling Missouri Care at **1-800-322-6027**.

Missouri Care will offer care management services for members who are:

- Pregnant,
- All children with elevated blood lead levels, and
- Children in foster care.

Within thirty (30) days of enrollment, Missouri Care will offer a care management assessment for new members with the following conditions:

- Cancer;
- Chronic pain;
- Hepatitis C;
- HIV/AIDS;
- Individuals with special health care needs including autism spectrum disorder;
- Sickle cell anemia;
- Diabetes;
- Asthma;
- COPD;
- Congestive heart failure;
- Organ failure; and
- Serious mental illness (schizophrenia, schizoaffective disorder, bipolar disorder, PTSD, recurrent major depression, and substance use disorder).

Members experiencing the following events will also receive a care management assessment and be offered care management services:

- Three (3) or more emergency department visits in any given quarter;
- An admission to a psychiatric hospital or residential substance use treatment program;
- A readmission or a hospital stay of more than two (2) weeks.

How Care Management can help you

Care Management helps members with special needs. It pairs a member with a care manager. The care manager is a registered nurse (RN) or licensed behavioral health worker who can help you with issues such as:

- Complex medical and behavioral health needs, including but not limited to cancer, chronic pain, HIV/AIDS, anxiety disorders
- Solid organ and tissue transplants
- Chronic illnesses such as asthma, diabetes, hypertension and heart disease
- Children with special health care needs
- Lead poisoning
- Pregnancy needs

We're here to help you! For more information about Care Management, please call us at **1-800-322-6027**. This no-cost program gives you access to a registered nurse or licensed behavioral health worker Monday–Friday from 8 a.m. to 6 p.m.

You may ask for an assessment for care management services at any time. Call Missouri Care at **1-800-322-6027**.

Disease Management

Have you been diagnosed with major depression, asthma, diabetes, COPD or CHF? Would you like to understand your disease better? Missouri Care has a Disease Management Program to help you. Call us at **1-877-393-3090** to help you manage your disease.

Do you or your child have asthma or diabetes or suffer from major depression? Missouri Care can help you and/or your child learn to manage these chronic conditions and lead a healthier life.

You can learn about these programs by visiting our website at **www.missouricare.com**.

How do I become eligible to participate?

There are two ways Missouri Care members may be enrolled in a disease management program. One way is if you are diagnosed with any of these chronic conditions. The other way is if you are at risk for any of these conditions. You can also ask your provider to ask for a referral. Would you like to know more about our Disease Management Programs? Please call us at 1-877-393-3090.

What if I don't want to take part?

You have the right to make decisions about your health care. If we contact you to take part in one of our programs, you may refuse.

If you are already taking part in one of our programs, you may choose to stop at any time by contacting us at 1-877-393-3090.

CommUnity Assistance Line (CAL)

Missouri Care offers a CommUnity Assistance Line (CAL). It is available at no cost to anyone, including people who are deaf and hard of hearing. Call the CAL to learn about social services in your area. These may include things like help paying for utilities and rent, access to healthy food, reduced-cost or no-cost child care and more. The CAL number is 1-866-775-2192. Hours of operation are from 8 a.m. to 5 p.m. Central Time.

The line is staffed by a team of CommUnity Liaisons. Some staff are deaf or hard of hearing themselves. They use video relay chat to help those who are also deaf and hard of hearing. The video relay number is 1-855-628-7552.

Please note that if you do get assistance, you may have to report it to the Family Support Division.

Pharmacy Dispensing Fees

Pharmacy Dispensing Fees - Children under age 19 do not have to pay a pharmacy dispensing fee. Members age 19 and older pay a pharmacy dispensing fee for each drug they get. This fee is \$0.50 up to \$2.00 for each drug. The amount of this fee is based on the cost of the drug. You should never pay a fee of more than \$2.00 for each drug. Remember, if you get more than one drug at the same time, you will pay these fees for each drug you get.

You will not pay a dispensing fee when the medicine is for an emergency, family planning, a foster child, EPSDT/HCY services, or a pregnancy related reason.

You will be able to get your prescription even if you cannot pay. You will still owe the fee and must pay it like your other bills.

Second Opinion and Third Opinion

You may want an opinion from a different health care provider. In such cases, you must ask your PCP or Missouri Care to get a second opinion. Missouri Care will pay for it.

You may get an opinion from a third provider if your PCP and second opinion provider do not agree. Missouri Care will pay for a third opinion. It is always important that you take all your health insurance cards to your appointments.

Out-of-Network Second Opinion

You have the right to a second opinion from a different health care provider. Missouri Care will pay for a second opinion from a provider in our network. We can also help you get a second opinion from a provider who is not in our network. This would be done at no cost to you.

Health Care Away From Home

- If you need urgent health care when you are away from home, call your PCP or Missouri Care at **1-800-322-6027** for help.
- In an emergency, you do not need to call your PCP first. Go to the nearest emergency room or call **911**.
- Call your PCP after an emergency room visit.
- Get your follow up care from your PCP.
- Routine health care services must be received from your PCP when you get back home.
- All services outside the United States and its Territories are not covered.

What If I Don't Have Transportation?



Emergency Transportation
Call **911** or the closest ambulance.

Non-Emergency Medical Transportation (NEMT)

NEMT stands for Non-Emergency Medical Transportation. NEMT can be used when you do not have a way to get to your health care appointment without charge. We may use public transportation or bus tokens, vans, taxi, or even an ambulance, if necessary to get you to your health care appointment. Missouri Care will give you a ride that meets your needs. You do not get to choose what kind of car or van or the company that will give you the ride. You may be able to get help with gas costs if you have a friend or a neighbor who can take you. This must be approved before your appointment.

Who can get NEMT services?

- You must be in Missouri Care on the day of your appointment.
- Some people do not get NEMT as part of their benefits. To check, call member services at **1-800-322-6027**.
- Children who are under age 17 must have an adult ride with them.
- We will only pay for one child and one parent/guardian and/or an attendant if your child is under age 21 and needs to be away from home overnight or needs someone to be with him/her. We will not pay for other children or adults.
- Your medical appointment requires an overnight stay.
- Volunteer, community, or other ancillary services are not available at no cost to you.

What health care services can I get NEMT to take me to?

- The appointment is to a health care provider that is in Missouri Care or takes MO HealthNet Fee-for-Service.
- The appointment is to a service covered by Missouri Care or MO HealthNet Fee-for-Service.
- The appointment is to a health care provider near where you live. If the provider is far away, you may need to say why and get a note from your PCP. There are rules about how far you can travel to a health care appointment and get a ride.
- Some services already include NEMT. We will not give you a ride to these services. Examples are: Some Comprehensive Substance Treatment Abuse and Rehabilitation (CSTAR) services; hospice services; Developmental Disability (DD) Waiver services; some Community Psychiatric Rehabilitation (CPR) services; adult day care waiver services; and services provided in your home. School districts must supply a ride to a child's Individual Education Plan (IEP) services.
- The NEMT program can take you to a durable medical equipment (DME) provider only if the DME provider cannot mail or deliver your equipment to you.

How do I use the NEMT program?

Call **1-800-322-6027**. You must call at least three days before the day of the appointment or you may not get NEMT. You may be able to get a ride sooner if your health care provider gives you an urgent care appointment. You can call this number **1-800-322-6027**. If you have an emergency, dial **911**, or the local emergency phone number.



Advocates for Family Health

Advocates for Family Health is an ombudsman service. An ombudsman is a problem solver who can advise you and help you. Advocates for Family Health can help you if:

- You need help understanding your rights and benefits under MO HealthNet Managed Care.
- You feel your rights to health care are being denied.
- You are not able to solve the problem by talking to a PCP, a nurse, or your MO HealthNet Managed Care health plan.
- You need to talk to someone outside of your MO HealthNet Managed Care health plan.
- You want help when filing a grievance.
- You need help when appealing a decision by your MO HealthNet Managed Care health plan.
- You need help getting a State Fair Hearing.

You can get legal help at no cost to you by contacting the legal aid office for your county below:

Legal Aid of Western Missouri

Serves the following counties: Andrew, Atchison, Barton, Bates, Benton, Buchanan, Caldwell, Camden, Carroll, Cass, Clay, Clinton, Daviess, DeKalb, Gentry, Grundy, Harrison, Henry, Hickory, Holt, Jackson, Jasper, Johnson, Lafayette, Linn, Livingston, McDonald, Mercer, Morgan, Newton, Nodaway, Pettis, Platte, Putnam, Ray, Saline, St. Clair, Sullivan, Vernon and Worth.

Advocates for Family Health Legal Aid of Western Missouri

4001 Blue Parkway, Suite 300

Kansas City, MO 64130

816-474-6750

Toll free 1-866-897-0947

Fax: 816-474-9751

Mid-Missouri Legal Services

Serves the following counties: Audrain, Boone, Callaway, Chariton, Cole, Cooper, Howard, Miller, Moniteau, Osage, and Randolph.

Advocate for Family Health Mid-Missouri Legal Services

1201 W. Broadway

Columbia, MO 65203

573-442-0116

Toll free 1-800-568-4931

Fax: 573-875-0173

Legal Services of Eastern Missouri

Serves the St. Louis City and the following counties: Adair, Clark, Franklin, Jefferson, Knox, Lewis, Lincoln, Macon, Marion, Monroe, Montgomery, Pike, Ralls, Schuyler, Scotland, Shelby, St. Charles, St. Louis, Warren and Washington.

Advocates for Family Health Legal Services of Eastern Missouri

4232 Forest Park Avenue

St. Louis, MO 63108

314-534-1263

Toll free 1-800-444-0514 ext. 1251 (outside St. Louis City/County)

Fax: 314-534-1028

Legal Services of Southern Missouri

Serves the following counties: Barry, Bollinger, Butler, Cape Girardeau, Carter, Cedar, Christian, Crawford, Dade, Dallas, Dent, Douglas, Dunklin, Gasconade, Greene, Howell, Iron, Laclede, Lawrence, Madison, Maries, Mississippi, New Madrid, Oregon, Ozark, Pemiscot, Perry, Phelps, Polk, Pulaski, Reynolds, Ripley, St. Francois, Ste. Genevieve, Scott, Shannon, Stoddard, Stone, Taney, Texas, Wayne, Webster and Wright.

Advocates for Family Health Legal Services of Southern Missouri

809 North Campbell

Springfield, MO 65802

417-881-1397

Toll free 1-800-444-4863

Fax: 417-881-2159

Consumer Advisory Committee (CAC)

Your opinion matters! Join MO HealthNet Managed Care for a Consumer Advisory Committee (CAC) meeting. Share your thoughts and feedback on MO HealthNet Managed Care services and providers.

The mission of the Consumer Advisory Committee (CAC) for MO HealthNet Managed Care is to empower consumers to be actively involved in their healthcare.



Email us at:

- MHD.ManagedCareCAC@dss.mo.gov or call



- 1-800-392-2161 or 573-526-4274.



Community Meetings

We are meeting in your community!

At Missouri Care, our members are our reason for being. That's why we want to hear from you.

Member feedback gives us the opportunity to learn from you. How do you feel about your health plan and the health care you're getting? We can talk about

- Your benefits
- Your doctors
- Member Services
- How to change your PCP
- Reasons for making and keeping appointments
- Your Missouri Care handbook
- Member rights
- Events in your area

Anything else? We can talk about that too. Our goal is to offer a comfortable setting where you can share your thoughts. Join us and other Missouri Care members in your community. We'll provide healthy refreshments for the event. You tell us what's on your mind.

Join a Missouri Care Community Advisory meeting by calling **1-800-322-6027**.

We hope we hear from you – and see you – soon!



Grievances and Appeals

You may not always be happy with Missouri Care. We want to hear from you. Missouri Care has people who can help you. Missouri Care **cannot take your benefits away because you make a grievance, appeal, or ask for a State Fair Hearing.**

There are two ways to tell Missouri Care about a problem:

Grievance or Appeal

A Grievance is a way for you to show dissatisfaction about things like:

- The quality of care or services you received;
- The way you were treated by a provider;
- A disagreement you may have with a MO HealthNet Managed Care health plan policy; or
- You do not agree to extend the time for a decision of a grievance or an appeal.

An Appeal is a way for you to ask for a review when your MO HealthNet Managed Care health plan:

Takes action to:

- Deny or give a limited approval of a requested service;
- Deny, reduce, suspend, or end a service already approved; or
- Deny payment for a service;

Or fails to:

- Act within required time frames for getting a service;
- Make a grievance decision within thirty (30) days of receipt of request;
- Make an expedited decision within three (3) days of receipt of request;
- Make an appeal decision within forty-five (45) days of receipt of request.

Missouri Care must give you a written Notice of Action if any of these actions happen. The Notice of Action will tell you what we did and why and give you your rights to appeal or ask for a State Fair Hearing.

You have some special rights when making a grievance or appeal

1. A qualified clinical professional will look at medical grievances or appeals.

2. If you do not speak or understand English, call **1-800-322-6027** to get help from someone who speaks your language.
3. You may ask anyone such as a family member, your minister, a friend, or an attorney to help you make a grievance or an appeal.
4. If your physical or behavioral health is in danger, a review will be done within 3 working days or sooner. This is called an expedited review. Call Missouri Care and tell Missouri Care if you think you need an expedited review.
5. Missouri Care may take up to 14 days longer to decide if you request the change of time or if we think it is in your best interest. If Missouri Care changes the time we must tell you in writing the reason for the delay.
6. If you have been getting medical care and your MO HealthNet Managed Care health plan reduces, suspends, or ends the service, you can appeal. In order for medical care not to stop while you appeal the decision you must appeal within 10 days from the date the notice of action was mailed and tell us not to stop the service while you appeal. If you do not win your appeal you may have to pay for the medical care you got during this time.
7. You may request enrollment in another MO HealthNet Managed Care health plan if the issue cannot be resolved.

How to Make a Grievance or Appeal or Ask For a State Fair Hearing

1. **Grievance** - You may file a grievance on the telephone, in person, or in writing. Call Missouri Care at **1-800-322-6027** to file a grievance.
 - Missouri Care will write you within 10 days and let you know we got your grievance.
 - Missouri Care must give written notice of a decision within 30 days.
2. **Appeal** - You may file an appeal orally or in writing to Missouri Care. Unless you need an expedited review, you must complete a written request even if you filed orally.
 - You must appeal within 90 days from the date of our Notice of Action.
 - For help on how to make an appeal, call Missouri Care at **1-800-322-6027**.
 - Send your written appeal to:

Missouri Care
4205 Philips Farm Rd., Suite 100
Columbia, MO 65201

- Missouri Care must write you within 10 days and let you know we got your appeal.
 - Missouri Care must give written notice of a decision within 45 days unless it is an expedited review.
3. **State Fair Hearing** – You have the right to ask for a State Fair Hearing when your MO HealthNet Managed Care health plan takes an action or when your appeal is not decided in your favor. You may ask for a State Fair Hearing orally or in writing. Unless you need an expedited review you must complete a written request even if you asked orally.
- You must ask for a State Fair Hearing within 90 days from the date of the MO HealthNet Managed Care health plan's written Notice of Action or Appeal Decision Letter.
 - For help on how to ask for a State Fair Hearing, call the MO HealthNet Division at **1-800-392-2161**.
 - If you do not speak or understand English, or need American Sign Language, call **1-800-392-2161** to get help from someone who speaks your language at no cost to you. Members who use a Telecommunications Device for the Deaf (TDD) can call **1-800-735-2966**. These services are available to you at no cost.
 - You can send your written request to Participant Services Unit, MO HealthNet Division, P.O. Box 6500, Jefferson City, MO 65102-6500, or fax to 573-526-2471.
 - You will be sent a form to complete. Once you send the form back, a date will be set for your hearing.
 - You may ask anyone such as a family member, your minister, a friend, or an attorney to help you with a State Fair Hearing.
 - A decision will be made within 90 days from the date you asked for a hearing.
 - If your physical or behavioral health is in danger, a decision will be made within 3 working days. This is called an expedited hearing. Call **1-800-392-2161** if you think you need an expedited hearing.
 - If you have been getting medical care and your MO HealthNet Managed Care health plan reduces, suspends, or ends the service, you can ask for a State Fair Hearing. In order for medical care not to stop you must ask for a State Fair Hearing within 10 days of the date the written notice of action was mailed and tell us not to stop the service while you appeal. If you do not win, you may have to pay for the medical care you got during this time.

When Will We Make a Decision?

MO HealthNet Managed Care allows 45 days for Missouri Care to decide on an appeal.

Missouri Care will decide within 30 days after we receive the request.

MO HealthNet Managed Care requires that you appeal within 90 days of the Notice of Action.

Missouri Care will allow you to appeal within 180 days from the date of the Notice of Action.

Fax your Grievance/Appeal to Missouri Care. If you would like to fax your Grievance/Appeal to Missouri Care, you may fax it to **1-877-851-2043**.



Important Information about Missouri Care



Fraud and Abuse

Committing fraud or abuse is against the law.

Fraud is a dishonest act done on purpose.

Examples of member fraud are:

- Letting someone else use your MO HealthNet Managed Care health plan card(s) or MO HealthNet ID Card.
- Getting prescriptions with the intent of abusing or selling drugs.

An example of provider fraud is:

- Billing for services not provided.

Abuse is an act that does not follow good practices.

An example of member abuse is:

- Going to the emergency room for a condition that is not an emergency.

An example of provider abuse is:

- Prescribing a more expensive item than is necessary.

You should report instances of fraud and abuse to:

Missouri Care
1-866-678-8355

or

MO HealthNet Division
Participant Services
1 (800) 392-2161

For Participant Fraud or Abuse contact:

Department of Social Services
Division of Legal Services, Investigation Unit
1 (573) 751-3285
Send email to MMAC.reportfraud@dss.mo.gov

For Provider Fraud or Abuse contact:

Missouri Medicaid Audit & Compliance Investigations
1 (573) 751-3285 or 1 (573) 751-3399
Send email to MMAC.reportfraud@dss.mo.gov

Changes You Need to Report

If you move, it is important that you **report your new address** by calling the Family Support Division (FSD) Information Center at **1-855-373-4636** or visit our website at www.dss.mo.gov to access the FSD Program Enrollment System online, and the MO HealthNet Managed Care Enrollment Helpline at **1-800-348-6627**. Then call Missouri Care at **1-800-322-6027**. Your MO HealthNet Managed Care coverage may be affected. If we do not know where you live, you will miss important information about your coverage. Changes you need to report to the FSD Information Center at **1-855-373-4636** include:

- Family size (including the birth of any babies);
- Income;
- Address;
- Phone number; and
- Availability of insurance.

Changing to Another MO HealthNet Managed Care Health Plan

You may change MO HealthNet Managed Care health plans for any reason during the first 90 days after you become a MO HealthNet Managed Care health plan member. You will also be able to change during your annual open enrollment time. Call the MO HealthNet Managed Care Enrollment Helpline at **1-800-348-6627** for help in changing MO HealthNet Managed Care health plans.

You may be able to change MO HealthNet Managed Care health plans after 90 days. Some reasons for changing include but are not limited to the following:

- Your PCP or specialist is no longer with Missouri Care and is in another MO HealthNet Managed Care health plan. This applies to PCPs or specialists you have seen at least once in the last year or you have seen most recently except in the case of an emergency.
- To help you keep all of your family members in the same health plan.
- The health plan does not have a provider that handles your health care needs.
- Negative actions from a health plan or provider that impact your ability to get care.

Missouri Care cannot make you leave our MO HealthNet Managed Care health plan because of a health problem.

Disenrollment

You may be disenrolled from Missouri Care if:

- You lose your eligibility for MO HealthNet Managed Care
- You move out of Missouri Care's service area
- You do not follow your PCP's orders for your health care or continually miss your PCP's appointments, without calling or telling the PCP
- You ignore your Missouri Care and MO HealthNet Managed Care responsibilities
- You let someone else use your Missouri Care benefits and services
- You are abusive or threaten Missouri Care staff or providers
- You decide to change MO HealthNet Managed Care health plans
- You request a home birth service

If you're having problems with your health care, please call Member Services. We'll write to you and try to contact you at least three times within 90 days. You may change health plans if you're not happy with the care you're getting. If you'd like to know how to change your MO HealthNet Managed Care health plan, call the Enrollment Help Line at **1-800-348-6627**.

Missouri Care wants to work with you to help resolve any problems you may have. If you cannot work with Missouri Care, the State may change your MO HealthNet Managed Care health plan.

Transition of Care

Getting the care you need is very important to us. That is why we will work with you to make sure you get your care when:

- You're leaving another health plan and just starting with us
- One of your providers leaves our network
- You leave our health plan to go to another one
- You're transitioning to adulthood and need help choosing an adult primary care practitioner

We want to be sure you can still see your doctors and get your medications. If you move from another health plan to ours, you will not need prior authorizations for

medical or behavioral care for a period of time. This is true whether you see an in-network or out-of-network provider. That time frame is 60 days after your start date with us or until you are able to safely transfer to an in-network provider. This will help you to move to our plan smoothly with no interruption in your care.

Please call or have your provider call us if any of the following apply to you. We can be reached at **1-800-322-6027**.

If you:

- See a specialist
- Get therapy (for example, occupational or physical therapy)
- Use durable medical equipment, like oxygen or a wheelchair
 - Receive in-home services (for example, wound care or in-home infusion)
 - Are pregnant and in your third trimester

Insurance

You have MO HealthNet Managed Care health care coverage through Missouri Care. You may have other health insurance, too. This may be from a job, an absent parent, union, or other source. If you have other health insurance besides MO HealthNet Managed Care, that insurance company must pay for most of your health services before Missouri Care pays. If your other health insurance covers a service not covered by MO HealthNet Managed Care, you will owe your provider what your insurance does not pay. It is important that you show all your insurance ID cards to your health care provider.

All adults must show their MO HealthNet ID Card and their MO HealthNet Managed Care health plan card to receive non-emergency care.

Missouri Care and your other health insurance policy have rules about getting health care. You must follow the rules for each policy. There are rules about going out-of-network. Some services need prior approval. You may have to pay for the service if you don't follow the rules. For help, call Missouri Care at **1-800-322-6027**.

If you have health insurance other than MO HealthNet Managed Care or your insurance changes, details about your insurance are needed. Have your insurance card with you when you call the following numbers. You must call:

- Missouri Care at **1-800-322-6027**; and
- the MO HealthNet Managed Care Enrollment Helpline at **1-800-348-6627**; or
- the Family Support Division (FSD) Information Center at **1-855-373-4636**, or you may visit our website at **www.dss.mo.gov** to access the FSD Program Enrollment System online.

You must report insurance you get through your job or you could lose your MO HealthNet benefits. MO HealthNet has a program that can pay the cost of other health insurance. The name of the program is Health Insurance Premium Payment (HIPP).

- Call the Family Support Division (FSD) Information Center at **1-855-373-4636**, or you may visit our website at **www.dss.mo.gov** to access the FSD Program Enrollment System online if your job has health insurance.
- Call Third Party Liability (TPL) at **573-751-2005** to ask about the HIPP program.

You must call Missouri Care at **1-800-322-6027** or the Family Support Division (FSD) Information Center at **1-855-373-4636**, or you may visit our website at **www.dss.mo.gov** to access the FSD Program Enrollment System online within 30 days if:

- You get hurt in a car wreck;
- You get hurt at work;
- You get hurt and have a lawyer; or
- You get money because of an accident.

After an Accident, You May Get a Questionnaire

By law, we must sometimes ask you for more information after you get treatment after an accident or injury. You may get a questionnaire if this happens.

It is important that you fill out this questionnaire. We will send them until you respond. Your answers are important even if you were not in an accident. You may also call with your answers. To do this call **1-800-877-6876**.

Explanation of Benefits

You may request an explanation of benefits (EOB) from Missouri Care. An EOB will consist of a list of services that were billed to Missouri Care. This list will contain paid and unpaid claims. For any unpaid claims, the list will give the reason the claim was not paid. You can also find this information in the member portal of our website at **www.missouricare.com**.

Please call Member Services at **1-800-322-6027** if you see a service on your EOB that you did not receive.

Utilization Review

Missouri Care makes sure that you get the right care. To do this, we may review the

requests we receive for some of your medical services. These reviews may take place:

- Before you receive services
- While you receive services
- After you have received services

We may also review the services you were supposed to receive but did not. Getting the right care at the right time will help you be healthy.

You may have questions or want to talk about how we made a decision. If so, you can contact Missouri Care at **1-800-322-6027**. Ask to speak with someone in Utilization Review.

Plan Structure and Operations and How Our Providers Are Paid

You may have other questions about how our plan works. Questions like:

- What's the make-up of our company?
- How do we run our business?
- How do we pay the providers who are in our network?
- Does how we pay our providers affect the way they authorize a service for you?
- Do we offer rewards to the providers in our network?

If you do have questions, call us and we'll answer them for you. Call Member Services at **1-800-322-6027**.

New Technology (Medical Procedures)

Missouri Care is always looking at new medical procedures and services. We do this to make sure you get safe, up-to-date and high-quality medical care. A team of health care providers looks at new health care methods. Then the team decides if these should become covered services. Investigational services and treatments that are being researched and studied are not covered services.

To decide if new technology will be a covered service, Missouri Care will:

- Study the purpose of each technology
- Review medical literature
- Determine the impact of a new technology
- Develop guidelines for how and when to use the technology

Missouri Care's Quality Improvement Program

We want to make sure you have access to high-quality health care services that are safe

and make you healthier! Missouri Care's Quality Improvement Program reviews your care. We check the quality of care you receive. Our Quality Improvement Program wants to make sure you have:

- Easy access to quality medical and behavioral care
- A checkup every year
- Health management programs that meet your needs
- Help with any chronic conditions or illnesses you have
- Support when you need it most, like after hospital admissions or when you are sick
- High satisfaction with your health care providers and with the health plan

One of the ways we measure quality of care is through HEDIS®. HEDIS stands for Healthcare Effectiveness Data and Information Set. It was developed by the National Committee for Quality Assurance. The data help us track important health information. We look at things like how often our members see their PCP, take their asthma-control medications or have important health screenings.

Missouri Care also wants to make sure you are happy with the services you get from your health care provider and from us. To do this, we look at CAHPS® data. CAHPS stands for the Consumer Assessment of Healthcare Providers and Systems. This survey asks questions to see how happy you are with the care you receive. Please know that the survey is anonymous. No one can see who the answers came from. Also, your benefits will not change whether you take the survey or not.

Missouri Care looks at the results of HEDIS and CAHPS. We share these results with you and our providers through means such as newsletter articles. We work with our providers to make sure the services they give you and the services we give you add to your health care in a good way.

You can learn more about Missouri Care's Quality Improvement Program, including what we do to improve your care. You may also ask for hard copies of information about our Quality Improvement Program. Please call us at **1-800-322-6027**. We'll be happy to help you.

HEDIS is a registered trademark of the National Committee for Quality Assurance (NCQA).

Release for Ethical Reasons

Missouri Care may not, for moral and religious reasons, provide or pay for a service for which it is required to provide or pay for.

If so, Missouri Care will let you know how and where else to get the service.

If You Are Billed

Missouri Care will pay for all covered MO HealthNet Managed Care services. You should not be getting a bill if the medical service you got is a covered MO HealthNet Managed Care benefit. If you choose to pay for a service, you must agree in writing that you will be responsible for the payment before getting the service. The written agreement must show the date and service. It must be signed and dated by you and the provider. The agreement must be made before you receive the service. A copy of the agreement must be kept in your medical record.

You will not have to pay for covered health care services even if:

- The State does not pay your MO HealthNet Managed Care health plan;
- Your MO HealthNet Managed Care health plan does not pay your provider;
- Your provider's bill is more than your MO HealthNet Managed Care health plan will pay;
- Your MO HealthNet Managed Care health plan cannot pay its bills.

You may have to pay for services you get if:

- You choose to get medical services that are not covered by MO HealthNet Managed Care; or
- You go to a provider that is not a Missouri Care provider without prior approval.

If you get a bill, do not wait! Call our Member Services office at **1-800-322-6027**. Missouri Care will look into this for you.



Decisions About Your Health Care

Advance Health Care Directive

You have the right to accept or refuse any medical care. A time may come when you are too sick to talk to your PCP, family, or friends. You may not be able to tell anyone what health care you want. The law allows adults to do two things when this happens.

- An advance directive allows you to leave written directions about your medical treatment decisions.
- An advance directive also allows you to ask someone to decide your care for you.

If you do not have an advance health care directive, your PCP may not know what health care you want. Talk to your PCP or call Missouri Care at **1-800-322-6027** for information on an advance health care directive. Your PCP must keep a written and signed copy of what care you want. An advance directive becomes part of your medical record.

If there is a problem with things not being done the way they should with an advance directive, and the concerns are related to abuse, neglect or exploitation of a Missouri resident age 60 plus or 18-59 with a disability, you may file a complaint with the Missouri Department of Health and Senior Services at **1-800-392-0210** or write them at P.O. Box 570, Jefferson City, Missouri 65102. You may email at: info@health.mo.gov.

Advance Health Care Directives are available from the Missouri Bar, PO Box 119, 326 Monroe, Jefferson City, Missouri 65102 or you may call them at **(573) 635-4128** or download forms from their website at: www.mobar.org.

Member Confidentiality and Privacy

We want to remind you that Missouri Care may use your information for health plan activities. Also, you can look at your records, get a copy of them or change them. Your health care information will be kept private and confidential. It will be given out only if the law allows or if you tell Missouri Care to give it out.

As a Missouri Care member, you have the right to ask for limits on the use or release of your health information. You may also deny the release of your health records, other than when they are used for treatment, payment or health care operations. You may ask that we change your health information. Also, you may ask Missouri Care to give you a list of when we have disclosed your health information.

If you have questions about this, call Member Services at **1-800-322-6027**.



Member Rights and Responsibilities

Missouri Care believes that our members are important. Below is a list of member rights and responsibilities. If we both agree to follow them, it will help us work together.

Your Rights as a MO HealthNet Managed Care Health Plan Member

You have the right to:

- Be treated with respect and dignity.
- Receive needed medical services.
- Privacy and confidentiality (including minors) subject to state and federal laws.
- Select your own PCP.
- Refuse treatment.
- Receive information about your health care and treatment options.
- Participate in decision-making with practitioners about your health care.
- Have access to your medical records and to request changes, if necessary.
- Have someone act on your behalf if you are unable to do so.
- Get information on our Physician Incentive Plan, if any, by calling 1-800-322-6027.
- Be free of restraint or seclusion from a provider who wants to:
 - make you do something you should not do;
 - punish you;
 - get back at you; or
 - make things easier for him or her.
- Be free to exercise these rights without retaliation.
- Receive one copy of your medical records once a year at no cost to you.

Missouri Care Members Have Additional Rights To:

- Voice grievances or appeals about Missouri Care or the care it provides
- Make recommendations regarding Missouri Care's member rights and responsibilities policy

- Receive information about Missouri Care, its services, its providers and their rights and responsibilities
- An open discussion of appropriate or medically necessary treatment options for their conditions regardless of cost or benefit coverage

You Have a Responsibility To:

- Read and follow this handbook
- Show your Missouri Care ID Card and your MO HealthNet ID Card to each health care provider before you get medical services
- Know the name of your PCP and be sure the correct one is on your ID card
- Keep your address and phone number current with Missouri Care and MO HealthNet.
- Get approval from your PCP before you get services from any other provider unless it is an emergency. There are exceptions, like family planning. Call Member Services at **1-800-322-6027** if you have questions.
- Make appointments ahead of time for all PCP visits or transportation
- Be on time for appointments or cancel the day before your appointment
- Give your PCP your past health information that he or she may need to give you care. Your PCP needs to see shot (immunization) records for members up to age 21.
- Tell your PCP if you do not understand your medical care so you can help decide upon your treatment goals
- Follow your PCP's instructions and guidelines
- Tell Missouri Care and the Family Support Division Information Center if you have changes or your family has changes that will change your eligibility
- Pay for services you get without approval from Missouri Care or your PCP
- Tell Missouri Care and the Family Support Division Information Center if you have an accident at work, car accident, or are involved in a personal injury, tort, product liability or malpractice lawsuit
- Give a copy of your living will or advance directives to your PCP to include with your medical records



Important Information for Members of a Federally-Recognized American Indian or Native Alaskan Tribe

Is your child a member of a federally-recognized American Indian or Native Alaskan tribe? If so, you will not have to pay a premium for your child's health care coverage.

To stop owing a premium, send a copy of the proof of your child's tribal membership to the Participant Services Unit by mail, fax, or email. Be sure to include your child's MO HealthNet identification card number. You may call the Participant Services Unit at **1-800-392-2161** if you have questions about your premium.

Mail: MO HealthNet Division
Participant Services Unit
P.O. Box 6500
Jefferson City, MO 65102-6500

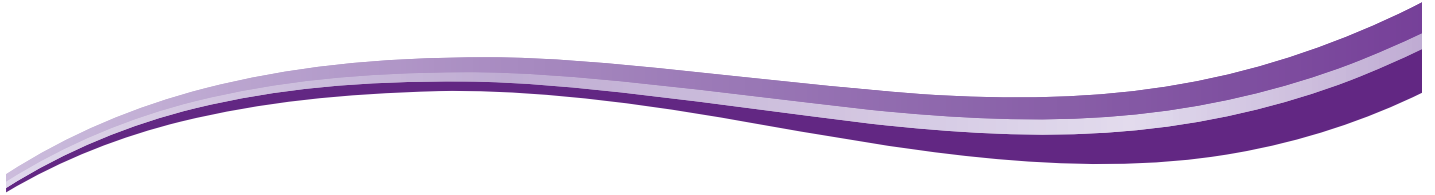
Phone: 1 (800) 392-2161

Fax: (573) 526-2471

Email: Scan your records and email to Ask.MHD@dss.mo.gov.
Type the words *Participant Services Unit* in the subject line of your email.

Proof of membership can be a copy of a tribal membership card or letter issued by a tribe that is recognized by the United States Department of the Interior, Bureau of Indian Affairs.





Member Services: 1-800-322-6027
(TTY 1-800-735-2966)

www.missouricare.com

