

Welcome to Molina Healthcare.



Florida

Marketplace Member Handbook 2021



Your Extended Family.

Translation Services: We can provide information in your preferred language and in different formats. If you need an interpreter or written materials in a language other than English, please contact Molina Customer Support at 1 (888) 560-5716. TTY/TDD: 711. There is no cost to you for these services.



Thank you for choosing Molina Healthcare!

Everyone deserves quality care. Since 1980, our members have been able to lean on Molina. Today, as always, we put your needs first.

This guide is for reference only. For full policy details, see your Evidence of Coverage.

The most current version of the Member Handbook is available at [MolinaHealthcare.com](https://www.molinahealthcare.com)

In this Member Handbook you will find helpful information about:

Quick Reference (pg 08)

- Health Care is a Journey

Your Membership (pg 12)

- Member ID card

Making Payments (pg 14)

- Ways to Pay
- Retaining Coverage

Your Doctor and Your Care (pg 16)

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- Newsletter
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NOTE: If you have any problem reading or understanding this or any Molina Healthcare information, please call Molina Customer Support at 1 (888) 560-5716, Monday – Friday 8:00 am – 6:00 pm, local time. We can explain in English or in your primary language. We may have it printed in other languages at no cost to you. You may ask for it in braille, large print, or audio at no cost to you. If you are hearing or sight impaired, special help can be provided at no cost to you.

Quick Reference

Need	Where to Go?		
Emergency Services An illness, injury, symptom (including severe pain), or condition severe enough that it requires immediate medical attention	Call 911	Getting Care - Urgent Care - Minor Illnesses - Minor Injuries - Virtual Care - Physicals and check-ups - Preventive care - Immunizations (shots)	Online Access - Find or change your doctor - Update your contact information - Request an ID card - Get health care reminders - Track office visits
		Call Your Doctor: _____ Urgent Care Centers Find a provider or urgent care center MolinaHealthcare.com/ProviderSearch 24-Hour Nurse Advice Line 1 (888) 275-8750 (English) 1 (866) 648-3537 (Spanish)	Go to MyMolina.com and sign up Download the Molina Mobile App Visit MolinaMarketplace.com Visit MolinaHealthcare.com/ProviderSearch

Your Plan Details

- Answers about your plan, programs and services
- Answers about prescription drugs
- ID card questions
- Help with your visits
- Prenatal care
- Well-infant visits
- Payment Questions

Molina Customer Support Center
Toll-Free:

1 (888) 560-5716 TTY/TDD: 711

State Insurance

Healthcare is a journey and you are on the right path.



1. Register for MyMolina and download the Molina Mobile app

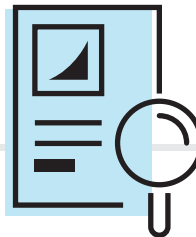
Signing up is easy. You can change your doctor, view service history and request a new ID card. Visit [MyMolina.com](https://www.mymolina.com) or download the Molina Mobile App on Google Play or the Apple App Store.



Apple



Android



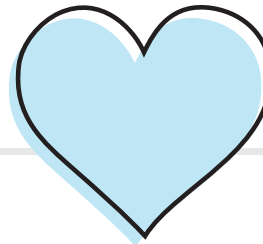
2. Review your Molina Member materials

You should review your Member materials, including your Policy, Schedule of Benefits, and this Member Handbook. Make sure your information is correct on your Member specific materials, such as your Member ID card. You can review your Member materials early. Please contact Molina Customer Support if you have any questions.



3. Get to know the Molina Participating Provider Network

Except in an emergency, you must receive all health care services from Molina providers, facilities, and pharmacies for them to be covered, unless pre approved by Molina. For information about which providers are in the Molina network, visit MolinaMarketplace.com or contact Molina Customer Support.



4. Get to know your benefits

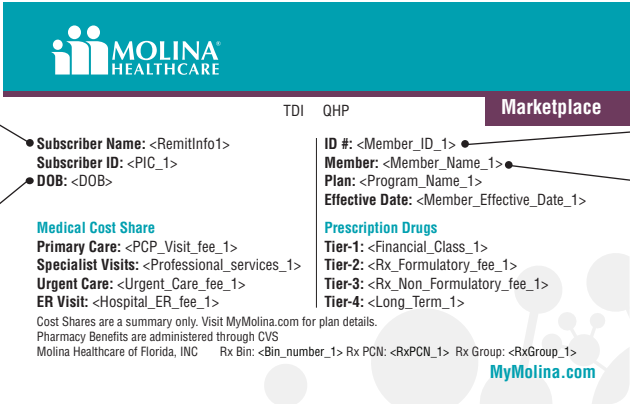
With Molina, you have health coverage and extras. We also offer free care management, health education and Telehealth. Please review your Policy Documents or contact Molina Customer Support for more information.

Please note: Your Member Handbook provides you with an overview of your plan. For additional information, refer to your policy documents on MolinaMarketplace.com or contact Molina Customer Support.

Your Membership

Your Member ID Card

When you become a member, you get a Member Identification (ID) Card in the mail from Molina Healthcare. The Subscriber is the person who is subscribing to the plan. Please check your Member ID Card to make sure the information is correct. It has:



Person subscribing to the plan

- Subscriber Name: <RemitInfo1>
- Subscriber ID: <PIC_1>
- DOB: <DOB>

Your date of birth (DOB)

Medical Cost Share

- Primary Care: <PCP_Visit_fee_1>
- Specialist Visits: <Professional_services_1>
- Urgent Care: <Urgent_Care_fee_1>
- ER Visit: <Hospital_ER_fee_1>

Cost Shares are a summary only. Visit MyMolina.com for plan details.
Pharmacy Benefits are administered through CVS
Molina Healthcare of Florida, INC Rx Bin: <Bin_number_1> Rx PCN: <RxPCN_1> Rx Group: <RxGroup_1>

TDI QHP Marketplace

Your Member ID

Member's Name

- ID #: <Member_ID_1>
- Member: <Member_Name_1>
- Plan: <Program_Name_1>
- Effective Date: <Member_Effective_Date_1>

Prescription Drugs

- Tier-1: <Financial_Class_1>
- Tier-2: <Rx_Formulary_fee_1>
- Tier-3: <Rx_Non_Formulary_fee_1>
- Tier-4: <Long_Term_1>

MyMolina.com

Be sure to carry your Member ID Card with you at all times. It is used by health care providers, such as your physician, pharmacist and hospital to tell if you are eligible for services through Molina Healthcare. You must show it every time you get health care.

Do not let anyone else use your ID Card.

If you lose your Member ID Card, here's how you can get a new one:

- Go to MyMolina and print a temporary Member ID Card
- Go to MyMolina and ask to have a new card sent to you
- Go to the Molina Mobile App
- Call Molina Customer Support



Paying Your Premium



Coverage Termination Warning:

You must pay your monthly premiums to keep your Molina Healthcare coverage. Regardless of how you pay, remember:

- Your payment is due by the 25th of every month
- If your payment is not received on time, your enrollment may be terminated.
- You are financially responsible for services rendered after your termination date
- There is a grace period before your coverage is terminated for non-payment



For Member Who Have Premium Payments

Molina is proud to be your Marketplace health plan. If you receive a bill from us, we want to make sure you stay covered by paying on time. If you are a Molina member who does not receive a bill, premiums are paid for you. For those with premium payments, we offer lots of ways to pay monthly. To review your options, register at MyMolina.com.

Multiple ways to pay:

Method	AutoPay	Online Bill Payment	By Phone	By Mail	MoneyGram
How to	It's fast, easy and convenient! Sign up for AutoPay through your MyMolina.com account and never miss a payment. It's stress-free!	Go to MolinaMarketplace.com Please allow 3 business days for the payment to post to your account.	We accept Visa, MasterCard, Discover or electronic check. Call Molina Customer Support at 1 (888) 560-5716 Monday – Friday 8:00 am – 6:00 pm, local time. Please allow 3 business days for the payment to post to your account.	Include the payment coupon provided on the invoice notice. Allow 10-15 days for mailing and processing. Send payment to: Molina Healthcare of Florida, Inc. PO Box 650740 Dallas, TX 75265-0740	MoneyGram accepts cash payments. Allow 3 business days for the payment to post to your account. To find a location, call (800) 666-3947, or visit MoneyGram.com.

Please Note: Payments are not accepted at our Molina locations.

Your Doctor and Your Care

Your Primary Care Provider (PCP) is your personal doctor.

You don't have to be sick to see your PCP. Your PCP will:

- Help you stay healthy
- Give you necessary check-ups, tests and shots
- Prescribe medications

Find Your Doctor

If you want to know more about your PCP or other Molina doctors, call Molina Customer Support.

NOTE: In general, only services from participating providers are covered. However, you may get services from a non-participating provider for emergency services or pre approval.



Other Types of Care

After Hours Care: There may be times when you need care when your Primary Care Provider's (PCP) office is closed. If it's after hours and your PCP's office is closed, you can call Molina Healthcare's Nurse Advice Line at 1 (888) 275-8750 (English) or 1 (866) 648-3537 (Spanish) . Highly trained nurses are available to help you 24 hours a day, 7 days a week.

Emergency Services: Emergency care is for sudden or severe problems that endanger your health or life. Emergency care is a covered service. Emergency care is a covered service, including if you are outside of the Service Area. If you need emergency care, call 911 or go to the nearest hospital. You do not need prior approval.

Urgent Care: You should use an urgent care center if your PCP isn't able to see you right away. Urgent care centers provide fast, hands-on care for illnesses or injuries that aren't life threatening but still need to be treated promptly. Common urgent care issues include: high fevers, sprains, flu symptoms, and ear infections.

Teladoc: Molina Healthcare is pleased to offer Teladoc virtual care to our members. Just use your phone, video or mobile app for:

- Convenient online or phone visits, without leaving home
- No appointment needed. Get the right care, right now
- Unlimited visits at no cost
- If needed, Teladoc doctors can send a prescription to your local pharmacy

Set up your account today! Go to Teladoc.com/MolinaMarketplace or visit Teladoc.com/Mobile to download the app. You may also call Teladoc at (800) Teladoc (800 835-2362) for help registering over the phone.

Prior Authorization

Some health care services, treatment plans, prescription drugs and medical equipment must be approved as Medically Necessary before they are covered. This is known as Prior Authorization.

Prior authorization does not guarantee claim payment. Molina's Medical Director works with your doctor to determine the Medical Necessity of covered services. If you have a question about our process or decisions, call Molina Customer Support.

You do not need Prior Authorization for:

Emergency Services

Family Planning Services

Urgent Care Services

Pregnancy and Delivery

Certain Office Based Procedures

You DO need Prior Authorization for:

Specialized Scanning Services (X-Rays, CT Scans, and PET Scans)

Surgical Services

Inpatient Stays

Certain Prescription Drugs

This list is not complete. For a complete list, please, visit MolinaMarketplace.com or contact Molina Customer Support.

Your Benefits

Covered Benefits



Ambulatory patient services
(outpatient care you get without being admitted to a hospital)



Emergency services



Hospitalization
(like surgery and overnight stays)



Pregnancy, maternity, and newborn care (both before and after birth)



Preventive and wellness services



Prescription drugs



Laboratory services



Most pediatric services



Diabetes management



Mental health and substance use disorder services, including behavioral health treatment (this includes counseling and psychotherapy)



Rehabilitative and habilitative services and devices (services and devices to help people with injuries, disabilities, or chronic conditions gain or recover mental and physical skills)

Your Benefits

Covered Drugs

Molina has a list of drugs we cover called the Drug Formulary. For details, see your Evidence of Coverage, visit MyMolina or MolinaMarketplace.com or call Molina Customer Support. If your prescription is not on the formulary, you may request a prior authorization review from your doctor.

Molina puts prescription drugs on levels called tiers based on how well they improve health and their value compared to similar treatments. For Tiers 1 - 4, the lower the Tier, the lower your share of the cost. Please see your Schedule of Benefits for more information. Here are basic details:

Drug Tier	Description
Tier 1	Preferred Generic drugs; Lowest Cost Sharing
Tier 2	Non-Preferred Generic drugs and Preferred Brand-Name drugs; Higher Cost Sharing than Tier 1
Tier 3	Non-Preferred, Brand-Name and Generic drugs; Higher Cost Sharing than lower tier drugs used to treat the same conditions
Tier 4	All Specialty Drugs; Brand-Name and Generic; Higher Cost Sharing than lower tier drugs used to treat the same conditions if available. Depending on state rules, Molina may require members to use the network specialty pharmacy
Tier 5	Nationally recognized preventative service drugs and dosage forms, and family planning drugs and devices (i.e., contraception) with \$0 Cost Sharing
DME	Durable Medical Equipment (“DME”)- Cost Sharing applies; some non-drug products on the Formulary have Cost Sharing determined by the DME benefit in your plan

Mail Order Availability:

Molina offers mail order on most formulary long term use drugs. Formulary drugs can be mailed within 10 days from order request and approval. Cost Sharing for up to a 90-day supply is two times your appropriate Copayment or Percentage Cost Sharing based on your drug tier for one month. You can request mail order service in the following ways:

- Complete a Mail Service Order Form
- Call the FastStart® toll-free number at (800) 875-0867. Provide your Molina Marketplace Member number (on your ID card), your prescription name(s), your doctor's name and phone number, and your mailing address
- You can give your doctor's office the FastStart® physician number and ask them to call, fax, or electronically prescribe your prescription. To speed up the process, your doctor will need your Molina Marketplace Member number, your date of birth, and your mailing address

Prior Authorization:

Prior Authorization may be required to have certain drugs covered. Details on Prior Authorization requirements for specific drugs are in the most up to date available Formulary. Your Provider may request Prior Authorization, and Molina will notify your Provider if the request is approved or denied based upon Medical Necessity review.

Services for Behavioral Health and Substance Use Disorder

To relieve issues like stress, depression and anxiety, Molina Healthcare offers behavioral health services. We also provide help with substance use disorder. Your PCP can give you a brief screening and help guide you to the right services for you. Or if you prefer, you can look for services by calling Molina Customer Support at 1 (888) 560-5716.

Molina offers many types of services to assist with a wide range of issues. Whatever kind of support you need, we are here to help you get it.

Your Extras

Health Education and Care Management

Molina Healthcare offers programs to help you and your family manage diagnosed health conditions, including:

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

We have a team of nurses and social workers ready to serve you called Care Managers. To learn more, enroll or disenroll, call Molina Health Management at (866) 472-9483, TTY/TDD: 711, 8:00 a.m. to 8:00 p.m. Central Time, Monday through Friday.

Health Education Materials

For the tools you need to stay healthy, lean on Molina. We offer information on nutrition, preventive services guidelines, stress management, exercise, cholesterol management, asthma, diabetes and more. For details, ask your doctor or visit MolinaMarketplace.com.

Newsletters

Newsletters are posted on MolinaHealthcare.com. The articles answer questions asked by members like you and can help you and your family stay healthy.



Your Policy

Cost Sharing

Your Molina Healthcare coverage is unique to the plan you purchased. Your coverage plan includes the benefits payable by Molina, but also requires out-of-pocket “cost sharing” to be paid by you (or any dependents) under your plan. Cost sharing includes any plan deductibles or copayments to be paid by you as your out-of-pocket expenses until you (or any dependents) reach the “Annual Out of Pocket Maximum” under Your plan.

To understand cost sharing under your plan, register or login to MyMolina.com to review your [Summary of Benefits](#), or call the customer service phone number on your ID Card. Lean on Molina, we’re here to help!

What are the types of cost sharing under my Molina plan?

- **Deductible** - The amount members must pay for covered services before Molina begins to pay.
- **Copayments** - A fixed amount the member will pay for a covered service.
- **Coinsurance** - A percentage of the charges for covered services the member must pay when they receive certain covered services. The coinsurance amount is calculated as a percentage of the rates that Molina has negotiated with the participating provider.
- **Annual Out-of-Pocket Maximum** - The maximum dollar amount of out-of-pocket cost sharing (for deductibles, copayments and coinsurance) you pay for covered services during a plan year (the family maximum is two times the Individual maximum)

Claims Payment & Explanation of Benefits

In most cases, Molina Healthcare issues claim payment directly to the member's provider. After Molina has processed the claim, the member will receive an Explanation of Benefits (EOB) that shows the services that were provided, the amount charged for the service(s), the amount Molina paid and the amount, if any, that the member owes.

Here are some definitions of the terms used in the EOB:

- **Procedure code** - code number of the service that was performed.
- **Billed amount** - the amount of billed charges received from your provider for services rendered.
- **Allowed amount** - the maximum amount the health plan allows for services rendered.
- **Co-pay amount** - the amount of your co-pay for certain benefits (such as office visit, etc.). This is a fixed dollar amount.
- **Coinsurance amount** - the amount you owe after your deductible is applied. This is based on a percentage dictated by your benefit coverage.
- **Deductible amount** - the amount applied toward your annual deductible, based on benefit coverage and claim.
- **Plan payment** - the amount the health plan paid to the provider.
- **Remark code** - additional messages that may explain how your claim was processed under "explanations of claims handling".
- **Total patient responsibility for this claim** - the amount you owe the provider.
- **Description of remark code** - explanation of the claim payment or denial.
- **Family out-of-pocket & deductible totals** - a summation of your family's total yearly deductible amount and out of pocket amount based on your benefits, the year to date total that has been applied, and the remaining balances.

In some limited situations, members may need to pay for a service or submit a receipt or claim to Molina for reimbursement. Such instances may include, but are not limited to, claims incurred for emergency services provided outside the United States and/or the purchase of covered over-the-counter medications or supplies. In these situations, the member is responsible for submitting receipts/claims to Molina for reimbursement. Please refer to the Evidence of Coverage for complete details.

Quality Improvement Plan

Your health is important to us. We want to know how we are doing. That's why you may receive a survey about Molina and your health care services. One of these surveys is called CAHPS®. CAHPS® stands for the Consumer Assessment of Healthcare Providers and Systems. If you receive the survey, please take the time to complete it.

To improve care, we also use a tool called HEDIS®, which stands for Healthcare Effectiveness Data and Information Set. We collect information on services you may have received, including:

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

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

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

Complaints and Appeals

At Molina, we want our members to be completely satisfied with our services. If you have a complaint about Molina or our providers, or don't agree with a decision Molina made on a claim or coverage request, you may file an appeal to have your case reviewed. Please contact Molina Customer Support for assistance. A full description of members' complaint and appeal rights can be found on MyMolina.com or in your Evidence of Coverage (EOC).

Fraud, Waste, and Abuse

What is Health Care Fraud, Waste and Abuse?

Doing something wrong related to Marketplace could be fraud, waste or abuse. We want to make sure your health care dollars are used the right way. Fraud, waste and abuse can make health care more expensive for everyone. Let us know if you think a health care provider or a person getting coverage is doing something wrong. Some examples of Fraud, Waste and Abuse are:

By a member—

- Lending an ID card to someone to receive services
- Changing the amount or number of refills on a Prescription
- Lying to receive medical or pharmacy services

By a provider—

- Billing for services or supplies that have not been provided
- Overcharging a member for covered services
- Not reporting a patient's misuse of a Member ID Card

How can I report Fraud, Waste and Abuse?

If you suspect fraud, waste or abuse, you may contact the Molina Healthcare Compliance Alertline:

- Phone Toll-Free: (866) 606-3889
- Online: MolinaHealthcare.AlertLine.com

Member Rights and Responsibilities

As a member of Molina Healthcare, you have certain rights and responsibilities. We provide this information to help ensure that you and your family get the services and care you need.

You have the right to:

- Receive the facts about Molina Healthcare, our services, our practitioners, and providers who contract with us to provide services, and to know member rights and responsibilities.
- Have privacy and be treated with respect and dignity.
- Help make decisions about your health care. You may refuse treatment.
- Request and receive a copy of your medical records.
- Request a change or correction to your medical records.
- Discuss your treatment options with your doctor or other health care provider in a way you understand them.
- Voice any complaints or send in appeals about Molina Healthcare or the care you were given.
- Use your member rights without fear of retaliation.
- Suggest changes to Molina Healthcare's member rights and responsibilities policy.

You also have the responsibility to:

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

Please visit our website at www.MolinaMarketplace.com for a complete list of member rights and responsibilities.

Notice of Privacy Rights and Practices

Molina Healthcare uses and shares data to provide you with health benefits. Protecting your privacy is important to us. Protected Health Information (PHI) includes your name, member number, race, ethnicity, language needs, and any other specific data that identifies you. Molina wants you to know how we use or share your PHI.

Why does Molina Healthcare use or share your PHI?

To provide for your treatment

To pay for your health care

To review the quality of care you get

To tell you about your choices for care

To run our health plan

To use or share PHI for other purposes, as required or permitted by law.

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

Molina needs your written approval to use or share your PHI for any reason that's not listed above.

What are your privacy rights?

To look at your PHI

To get a copy of your PHI

To amend your PHI • To ask us not to use or share your PHI in certain ways

To get a list of certain people or places to whom we have given your PHI.

How does Molina Healthcare protect your PHI?

Your PHI can be in written word, spoken word, or on a computer. Molina uses many ways to protect PHI across our health plan.

Below are some ways Molina protects your PHI:

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

What are the duties of Molina? Molina is required to:

Keep your PHI private	Provide you with a notice in the event of any breach of your unsecured PHI
Not use or disclose your genetic information for underwriting purposes	Not use your race, ethnicity or language data for underwriting or denial of coverage and benefits
Follow the terms of this notice.	

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

Call or write Molina and file a complaint	File a complaint with the U.S. Department of Health and Human Services.
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The above is only a summary. Our Notice of Privacy Practices has more information about how we use and share our members’ PHI. You may find our full Notice of Privacy Practices at MolinaHealthcare.com. You also may ask for a copy of our Notice of Privacy Practices by calling Molina Customer Support.

