

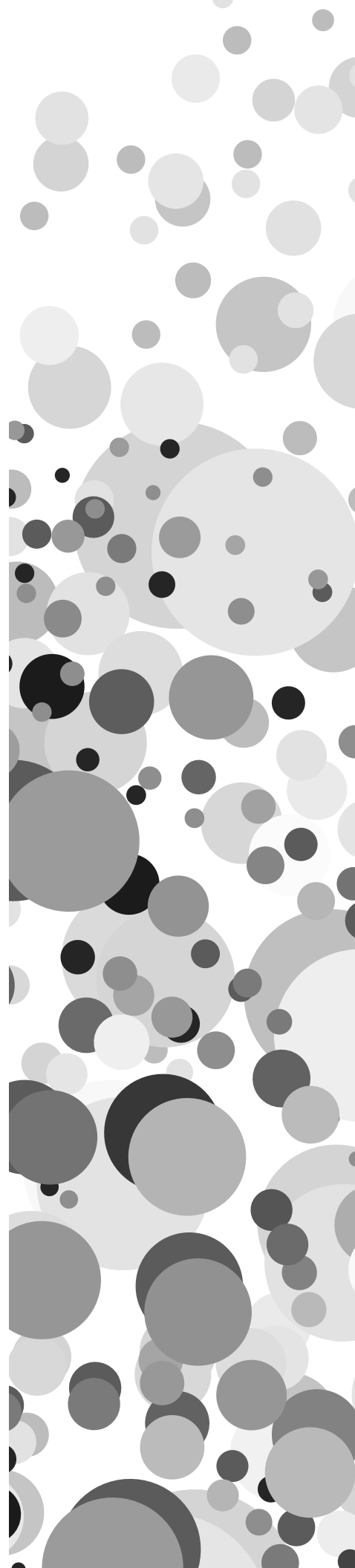


2019 Summary of Benefits AbilityCare (HMO SNP)

H5703_4087_M

Effective January 1, 2019 — December 31, 2019

For members in the counties of: Brown, Dodge, Freeborn,
Goodhue, Kanabec, Morrison, Sibley, Steele, Todd, Wabasha,
Wadena and Waseca.



SCHA Member Services 1-866-567-7242, TTY 1-800-627-3529 or 711

Attention. If you need free help interpreting this document, call the above number.

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ملاحظة: إذا أردت مساعدة مجانية لترجمة هذه الوثيقة، اتصل على الرقم أعلاه.

သတိ။ ဤစာရွက်စာတမ်းအားအခမဲ့ဘာသာပြန်ပေးခြင်း အကူအညီလိုအပ်ပါက၊ အထက်ပါဖုန်းနံပါတ်ကိုခေါ်ဆိုပါ။

កំណត់សំគាល់ ។ បើអ្នកត្រូវការជំនួយក្នុងការបកប្រែឯកសារនេះដោយឥតគិតថ្លៃ សូមហៅទូរស័ព្ទតាមលេខខាងលើ ។

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Thov ua twb zoo nyeem. Yog hais tias koj xav tau kev pab txhais lus rau tsab ntaub ntauv no pub dawb, ces hu rau tus najnpawb xov tooj saum toj no.

ဟ်သုဉ်ဟ်သးဘဉ်တက့ၢ်. ဖဲနမ့ၢ်လိဉ်ဘဉ်တၢ်မၤစၢၤကလိလၢတၢ်ကကျိးထံဝဲဒၣ်လံာ် တီလံာ်မိတခါအံၤန့ၣ်, ကိးဘဉ်လိတဲစိနီၢ်ဂံၢ်လၢထးအံၤန့ၣ်တက့ၢ်.

알려드립니다. 이 문서에 대한 이해를 돕기 위해 무료로 제공되는 도움을 받으시려면 위의 전화번호로 연락하십시오.

ໂປຣດຊາບ ຖ້າຫາກ ທ່ານຕ້ອງການການຊ່ວຍເຫຼືອໃນການແປເອກະສານນີ້ຟຣີ, ຈົ່ງໂທໄປທີ່ໝາຍເລກຂ້າງເທິງນີ້.

Hubachiisa. Dokumentiin kun tola akka siif hiikamu gargaarsa hoo feete, lakkoobsa gubbatti kenname bilbili.

Внимание: если вам нужна бесплатная помощь в устном переводе данного документа, позвоните по указанному выше телефону.

Digniin. Haddii aad u baahantahay caawimaad lacag-la'aan ah ee tarjumaadda qoraalkan, lambarka kore wac.

Atención. Si desea recibir asistencia gratuita para interpretar este documento, llame al número indicado arriba.

Chú ý. Nếu quý vị cần được giúp đỡ dịch tài liệu này miễn phí, xin gọi số bên trên.

Civil Rights Notice

Discrimination is against the law. South Country Health Alliance (SCHA) does not discriminate on the basis of any of the following:

- race
- color
- national origin
- creed
- religion
- sexual orientation
- public assistance status
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)
- marital status
- political beliefs
- medical condition
- health status
- receipt of health care services
- claims experience
- medical history
- genetic information

Auxiliary Aids and Services: SCHA provides auxiliary aids and services, like qualified interpreters or information in accessible formats, free of charge and in a timely manner to ensure an equal opportunity to participate in our health care programs.

Contact SCHA Member Services at members@mnscha.org or call 1-866-567-7242 (toll free), TTY 1-800-627-3529 or 711.

Language Assistance Services: SCHA provides translated documents and spoken language interpreting, free of charge and in a timely manner, when language assistance services are necessary to ensure limited English speakers have meaningful access to our information and services. **Contact** SCHA Member Services at members@mnscha.org or call 1-866-567-7242 (toll free), TTY 1-800-627-3529 or 711.

Civil Rights Complaints

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by SCHA. You may contact any of the following four agencies directly to file a discrimination complaint.

U.S. Department of Health and Human Services' Office for Civil Rights (OCR)

You have the right to file a complaint with the OCR, a federal agency, if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- age
- disability
- sex

Contact the **OCR** directly to file a complaint:

Director

U.S. Department of Health and Human Services' Office for Civil Rights

200 Independence Avenue SW

Room 509F

HHH Building

Washington, DC 20201

800-368-1019 (voice)

800-537-7697 (TDD)

Complaint Portal: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>

Minnesota Department of Human Rights (MDHR)

In Minnesota, you have the right to file a complaint with the MDHR if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- religion
- creed
- sex
- sexual orientation
- marital status
- public assistance status
- disability

Contact the **MDHR** directly to file a complaint:

Minnesota Department of Human Rights
Freeman Building, 625 North Robert Street
St. Paul, MN 55155
651-539-1100 (voice)
800-657-3704 (toll free)
711 or 800-627-3529 (MN Relay)
651-296-9042 (fax)
Info.MDHR@state.mn.us (email)

Minnesota Department of Human Services (DHS)

You have the right to file a complaint with DHS if you believe you have been discriminated against in our health care programs because of any of the following:

- race
- color
- national origin
- creed
- religion
- sexual orientation
- public assistance status
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)
- marital status
- political beliefs
- medical condition
- health status
- receipt of health care services
- claims experience
- medical history
- genetic information

Complaints must be in writing and filed within 180 days of the date you discovered the alleged discrimination. The complaint must contain your name and address and describe the discrimination you are complaining about. After we get your complaint, we will review it and notify you in writing about whether we have authority to investigate. If we do, we will investigate the complaint.

DHS will notify you in writing of the investigation's outcome. You have the right to appeal the outcome if you disagree with the decision. To appeal, you must send a written request to have DHS review the investigation outcome. Be brief and state why you disagree with the decision. Include additional information you think is important.

If you file a complaint in this way, the people who work for the agency named in the complaint cannot retaliate against you. This means they cannot punish you in any way for filing a complaint. Filing a complaint in this way does not stop you from seeking out other legal or administrative actions.

Contact **DHS** directly to file a discrimination complaint:

Civil Rights Coordinator
Minnesota Department of Human Services
Equal Opportunity and Access Division
P.O. Box 64997
St. Paul, MN 55164-0997
651-431-3040 (voice) or use your preferred relay service

SCHA Complaint Notice

You have the right to file a complaint with SCHA if you believe you have been discriminated against because of any of the following:

- medical condition
- health status
- receipt of health care services
- claims experience
- medical history
- genetic information
- disability (including mental or physical impairment)
- marital status
- age
- sex (including sex stereotypes and gender identity)
- sexual orientation
- national origin
- race
- color
- religion
- creed
- public assistance status
- political beliefs

You can file a complaint and ask for help in filing a complaint in person or by mail, phone, fax, or email at:

Attn: Civil Rights Coordinator
South Country Health Alliance
2300 Park Drive, Suite 100
Owatonna, MN 55060
Toll Free: 866-567-7242
TTY: 800-627-3529 or 711
Fax: 507-444-7774
Email: grievances-appeals@mnscha.org

American Indians can continue or begin to use tribal and Indian Health Services (IHS) clinics. We will not require prior approval or impose any conditions for you to get services at these clinics. For elders age 65 years and older this includes Elderly Waiver (EW) services accessed through the tribe. If a doctor or other provider in a tribal or IHS clinic refers you to a provider in our network, we will not require you to see your primary care provider prior to the referral.

AbilityCare (HMO SNP): Summary of Benefits



If you have questions, please call AbilityCare Member Services at 1-866-567-7242, TTY users call 1-800-627-3529 or 711. Hours of Operation: October – March, 7 days a week, 8 a.m. - 8 p.m.; April – September, Monday – Friday, 8 a.m. - 8 p.m. The call is free. **For more information**, visit www.mnscha.org.

Introduction

This document is a brief summary of the benefits and services covered by AbilityCare. It includes answers to frequently asked questions, important contact information, an overview of benefits and services offered, and information about your rights as a member of AbilityCare. Key terms and their definitions appear in alphabetical order in the last chapter of the *Evidence of Coverage*.

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AbilityCare (HMO SNP): Summary of Benefits

A. Disclaimers

This is a summary of health services covered by AbilityCare for 2019. Please read the *Evidence of Coverage* for the full list of benefits. If you don't have a *Evidence of Coverage*, call AbilityCare Member Services at the number at the bottom of this page to get one.

- AbilityCare (HMO SNP) is a health plan that contracts with both Medicare and the Minnesota Medical Assistance (Medicaid) program to provide the benefits of both programs to enrollees. Enrollment in AbilityCare depends on contract renewal.
- AbilityCare is for people who:
 - Are at least 18 years of age and under 65
 - Have a certified disability through Social Security Administration or the State Medical Review Team
 - Live in the service area
 - Have Medicare Parts A and B and Medical Assistance (Medicaid)
- Under AbilityCare you can get your Medicare and Medical Assistance (Medicaid) services in one health plan. A AbilityCare care coordinator will help manage your health care needs.
- For more information about **Medicare**, you can read the *Medicare & You Handbook*. It has a summary of Medicare benefits, rights, and protections and answers to the most frequently asked questions about Medicare. You can get it at the Medicare website (<https://www.medicare.gov>) or by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048. For more information about **Medical Assistance (Medicaid)**, call the Minnesota Department of Human Services at 1-651-431-2670 or toll-free at 1-800-657-3739. TTY users should call 1-800-627-3529.
- You can get this document for free in other formats, such as large print, braille, or audio. Call Member Services at the number at the bottom of this page.
- To make a standing request to get materials, now and in the future, in a language other than English or in an alternate format, call Member Services at the number at the bottom of this page.
- This is not a complete list. The benefit information is a brief summary, not a complete description of benefits. For more information call Member Services or read the Evidence of Coverage.



If you have questions, please call AbilityCare Member Services at 1-866-567-7242, TTY users call 1-800-627-3529 or 711. Hours of Operation: October – March, 7 days a week, 8 a.m. - 8 p.m.; April – September, Monday – Friday, 8 a.m. - 8 p.m. The call is free. **For more information**, visit www.mnscha.org.

AbilityCare (HMO SNP): Summary of Benefits

B. Frequently Asked Questions

The following chart lists frequently asked questions.

Frequently Asked Questions (FAQ)	Answers
What is a Special Needs BasicCare (SNBC) plan?	<p>Our plan is part of the Special Needs BasicCare (SNBC) program. This program was designed by the Minnesota Department of Human Services (DHS) to provide special care for people with disabilities. Our plan combines your Medicare and Medical Assistance (Medicaid) services. It combines your doctors, hospital, pharmacies, home care, nursing home care, and other health care providers into one coordinated care system. It also has care coordinators to help you manage all your providers and services. They all work together to provide the care you need.</p> <p>Our SNBC program is called AbilityCare.</p>
Will you get the same Medicare and Medical Assistance (Medicaid) benefits in AbilityCare that you get now?	<p>If you are coming to AbilityCare from Original Medicare or another Medicare plan, you may get benefits or services differently. You will get almost all of your covered Medicare and Medical Assistance (Medicaid) benefits directly from AbilityCare. You will work with a team of providers who will help determine what services will best meet your needs. When you enroll in AbilityCare, you and your care team will work together to develop an Individualized Care Plan to address your health and support needs.</p> <p>When you join our plan, if you are taking any Medicare Part D prescription drugs that AbilityCare does not normally cover, you can get a temporary supply. We will help you get another drug or get an exception for AbilityCare to cover your drug, if medically necessary. For more information call Member Services.</p>
Can you go to the same health care providers you see now?	<p>That is often the case. If your providers (including doctors and pharmacies) work with AbilityCare and have a contract with us, you can keep going to them.</p> <ul style="list-style-type: none">• Providers with an agreement with us are “in-network.” In most cases, you must use the providers in AbilityCare’s network.• If you need urgent or emergency care or out-of-area dialysis services, you can use providers outside of AbilityCare’s network. You may also use out-of-network providers for open access services and in cases when AbilityCare authorizes the use of out-of-network providers. <p>To find out if your providers are in the plan’s network, call Member Services or read AbilityCare’s <i>Provider and Pharmacy Directory</i>. You can also visit our website at www.mnscha.org for the most current listing.</p> <p>If AbilityCare is new for you, you can continue seeing the providers you go to now for up to 120 days in certain situations. For more information call Member Services.</p>

If you have questions, please call AbilityCare Member Services at 1-866-567-7242, TTY users call 1-800-627-3529 or 711. Hours of Operation: October – March, 7 days a week, 8 a.m. - 8 p.m.; April – September, Monday – Friday, 8 a.m. - 8 p.m. The call is free. **For more information**, visit www.mnscha.org.



AbilityCare (HMO SNP): Summary of Benefits

Frequently Asked Questions (FAQ)	Answers
What happens if you need a service but no one in AbilityCare’s network can provide it?	Most services will be provided by our network providers. If you need a covered service that cannot be provided within our network, AbilityCare will pay for the cost of an out-of-network provider.
What is a care coordinator?	A care coordinator is your main contact person. This person helps manage all your providers and services and makes sure you get what you need.
Where is AbilityCare available?	The service area for this plan includes the following counties in Minnesota: Brown, Dodge, Freeborn, Goodhue, Kanabec, Morrison, Sibley, Steele, Todd, Wabasha, Wadena and Waseca. You must live in one of these counties to join the plan. Call Member Services for more information about whether the plan is available where you live.
What is prior authorization?	Prior authorization means that you must get approval from AbilityCare before you can get a specific service or drug or see an out-of-network provider. AbilityCare may not cover the service or drug if you don’t get approval. If you need urgent or emergency care or out-of-area dialysis services, you don’t need to get approval first. See Chapter 3 of the <i>Evidence of Coverage</i> to learn more about prior authorization. See the Benefits Chart in Chapter 4 of the <i>Evidence of Coverage</i> to learn which services require a prior authorization.
What is a referral?	A referral means getting approval from your primary care provider before you see a specialist. Our plan is a direct access plan. This means you do not need to get a referral or plan approval to see network providers, including specialists.
What is Extra Help?	Extra Help is a Medicare program that helps people with limited incomes and resources reduce their Medicare Part D prescription drug program costs such as premiums, deductibles, and copays. Extra Help is also called the “Low-Income Subsidy” or “LIS.” Your prescription drug copays under SeniorCare Complete already include the amount of Extra Help you qualify for. For more information about Extra Help, contact your local Social Security Office, or call Social Security at 1-800-772-1213. TTY users should call 1-800-325-0778. These calls are free.
Do you pay a monthly amount (also called a premium) as a member of AbilityCare?	No. Because you have Medical Assistance (Medicaid), you will not pay any monthly premiums for your health coverage. You must continue to pay your Medicare Part B premium unless your Part B premium is paid for you by Medical Assistance (Medicaid) or another third party.



If you have questions, please call AbilityCare Member Services at 1-866-567-7242, TTY users call 1-800-627-3529 or 711. Hours of Operation: October – March, 7 days a week, 8 a.m. - 8 p.m.; April – September, Monday – Friday, 8 a.m. - 8 p.m. The call is free. **For more information**, visit www.mnscha.org.

AbilityCare (HMO SNP): Summary of Benefits

Frequently Asked Questions (FAQ)	Answers
Do you pay a deductible as a member of AbilityCare?	No. You do not pay deductibles in AbilityCare.
What is the maximum out-of-pocket amount that you will pay for medical services as member of AbilityCare?	There is no cost-sharing for medical services in AbilityCare, so your annual out-of-pocket costs will be \$0.

C. List of Covered Services

The following chart is a quick overview of what services you may need, your costs, and rules about the benefits.

Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions & benefit information (rules about benefits)
You need hospital care	Hospital stay	\$0	Except in an emergency, your health care provider must tell the plan of your hospital admission.
	Doctor or surgeon care	\$0	
You want to see a health care provider	Visits to treat an injury or illness	\$0	
	Specialist Care	\$0	Authorization rules may apply.
	Wellness visits, such as a physical	\$0	
	Care to keep you from getting sick, such as flu shots	\$0	
	“Welcome to Medicare” preventive visit (one time only)	\$0	
You need emergency care (continued on the next page)	Emergency room services	\$0	You may go to any emergency room if you reasonably believe you need emergency care. You do not need prior authorization and you do not have to be in-network. Emergency room services are NOT covered outside of the U.S. and its territories except under limited circumstances. Contact the plan for details.

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AbilityCare (HMO SNP): Summary of Benefits

Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions & benefit information (rules about benefits)
You need emergency care (continued)	Urgently needed care	\$0	Urgently needed care is NOT emergency care. You do not need prior authorization and you do not have to be in-network. Urgently needed care services are NOT covered outside the U.S. and its territories except under limited circumstances. Contact the plan for details.
You need medical tests	Lab tests, such as blood work	\$0	
	X-rays or other pictures, such as CAT scans	\$0	
	Screening tests, such as tests to check for cancer	\$0	
You need hearing/auditory services	Hearing screenings	\$0	
	Hearing aids	\$0	Authorization rules may apply.
You need dental care	Dental services, including preventative care	\$0	
You need eye care	Eye exams	\$0	
	Glasses or contact lenses	\$0	Eyeglasses limited to one pair every 24 months unless medically necessary. Limited to a pair of eyeglasses or contact lenses after each cataract surgery, or contact lenses for certain conditions when eyeglasses will not work.
	Other vision care including diagnosis and treatment for diseases and conditions of the eye	\$0	



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AbilityCare (HMO SNP): Summary of Benefits

Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions & benefit information (rules about benefits)
You have a mental health condition	Mental or behavioral health services	\$0	State eligibility requirements may apply.
	Inpatient care for people who need long-term mental health services	\$0	State eligibility requirements may apply.
You have a substance use disorder	Substance use disorder services	\$0	
You need a place to live with people available to help you	Skilled Nursing Care	\$0	Authorization rules may apply.
	Nursing home care	\$0	
You need therapy after a stroke or accident	Occupational, physical, or speech therapy	\$0	There may be limits on physical therapy, occupational therapy, and speech therapy services. If so, there may be exceptions to these limits.
You need help getting to health services	Ambulance services	\$0	Ambulance services must be medically necessary. You do not need prior authorization for ambulance services and you do not have to be in-network.
	Emergency transportation	\$0	
	Transportation to a health care provider for medical appointments	\$0	Authorization rules may apply. AbilityCare is not required to provide transportation to your primary care clinic if it is over 30 miles from your home. AbilityCare is not required to provide transportation to your specialty care clinic if it is over 60 miles from your home.
	Transportation to other health services	\$0	Authorization rules may apply.

If you have questions, please call AbilityCare Member Services at 1-866-567-7242, TTY users call 1-800-627-3529 or 711. Hours of Operation: October – March, 7 days a week, 8 a.m. - 8 p.m.; April – September, Monday – Friday, 8 a.m. - 8 p.m. The call is free. **For more information**, visit www.mnscha.org.



AbilityCare (HMO SNP): Summary of Benefits

Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions & benefit information (rules about benefits)
<p>You need drugs to treat your illness or condition (continued on the next page)</p>	<p>Medicare Part B prescription drugs</p>	<p>\$0</p>	<p>Part B drugs include drugs given by your health care provider in his or her office, some oral anti-cancer drugs, and some drugs used with certain medical equipment. Read the <i>Evidence of Coverage</i> for more information on these drugs.</p>
	<p>Tier 1 Generic drugs (no brand name)</p>	<p>\$0/\$1.25/\$3.40 for up to a 90-day supply for some medications.</p> <p>Copays for prescription drugs may vary based on the level of Extra Help you get. Please contact the plan for more details.</p> <p>When you reach the out-of-pocket limit of \$5,100 for your Part D prescription drugs, the Catastrophic Coverage Stage begins. You will stay in the Catastrophic Coverage Stage until the end of the calendar year. During this stage, your copays for Part D drugs will be \$0.</p>	<p>There may be limitations on the types of drugs covered. Please see AbilityCare's <i>List of Covered Drugs</i> (Drug List) at www.mnscha.org (click on <i>Find A Drug</i>) for more information.</p> <p>AbilityCare may require you to first try one drug to treat your condition before it will cover another drug for that condition.</p> <p>Some drugs have quantity limits.</p> <p>Your provider must get prior authorization from AbilityCare for certain drugs.</p> <p>You must go to certain pharmacies for a very limited number of drugs, due to special handling, provider coordination, or patient education requirements that cannot be met by most pharmacies in your network. These drugs are listed on the plan's website, <i>List of Covered Drugs</i> (Drug List), and printed materials, as well as on the Medicare Prescription Drug Plan Finder on https://www.Medicare.gov.</p> <p>You may be able to get certain drugs in extended supply from the pharmacy. Cost sharing for an extended supply is the same as for a one-month supply.</p>



If you have questions, please call AbilityCare Member Services at 1-866-567-7242, TTY users call 1-800-627-3529 or 711. Hours of Operation: October – March, 7 days a week, 8 a.m. - 8 p.m.; April – September, Monday – Friday, 8 a.m. - 8 p.m. The call is free. **For more information**, visit www.mnscha.org.

AbilityCare (HMO SNP): Summary of Benefits

Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions & benefit information (rules about benefits)
<p>You need drugs to treat your illness or condition (continued)</p>	<p>Tier 1 Brand name drugs</p>	<p>\$0/\$3.80/\$8.50 for up to a 90-day supply for some medications.</p> <p>Copays for prescription drugs may vary based on the level of Extra Help you get. Please contact the plan for more details.</p> <p>When you reach the out-of-pocket limit of \$5,100 for your Part D prescription drugs, the Catastrophic Coverage Stage begins. You will stay in the Catastrophic Coverage Stage until the end of the calendar year. During this stage, your copays for Part D drugs will be \$0.</p>	<p>There may be limitations on the types of drugs covered. Please see AbilityCare's <i>List of Covered Drugs</i> (Drug List) at www.mnscha.org (click on <i>Find A Drug</i>) for more information.</p> <p>AbilityCare may require you to first try one drug to treat your condition before it will cover another drug for that condition.</p> <p>Some drugs have quantity limits.</p> <p>Your provider must get prior authorization from AbilityCare for certain drugs.</p> <p>You must go to certain pharmacies for a very limited number of drugs, due to special handling, provider coordination, or patient education requirements that cannot be met by most pharmacies in your network. These drugs are listed on the plan's website, <i>List of Covered Drugs</i> (Drug List), and printed materials, as well as on the Medicare Prescription Drug Plan Finder on http://www.Medicare.gov.</p> <p>You may be able to get certain drugs in extended supply from the pharmacy. Cost sharing for an extended supply is the same as for a one-month supply.</p>
	<p>Over-the-counter (OTC) drugs</p>	<p>\$0</p>	<p>There may be limitations on the types of drugs covered</p>
	<p>Diabetes Medications</p>	<p>\$0</p>	
<p>You need help getting better or have special health needs</p>	<p>Rehabilitation services</p>	<p>\$0</p>	<p>Authorization rules may apply.</p>
	<p>Medical equipment for home care</p>	<p>\$0</p>	<p>Authorization rules may apply.</p>

If you have questions, please call AbilityCare Member Services at 1-866-567-7242, TTY users call 1-800-627-3529 or 711. Hours of Operation: October – March, 7 days a week, 8 a.m. - 8 p.m.; April – September, Monday – Friday, 8 a.m. - 8 p.m. The call is free. **For more information**, visit www.mnscha.org.



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Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions & benefit information (rules about benefits)
You need foot care	Podiatry services	\$0	For medically necessary foot care.
	Orthotic services	\$0	For covered services.
You need durable medical equipment (DME) or supplies	Wheelchairs, nebulizers, crutches, rollabout knee walkers, walkers, and oxygen equipment and supplies, for example (NOTE: This is not a complete list of covered DME or supplies. Call Member Services or read the <i>Evidence of Coverage</i> for more information.)	\$0	Authorization rules may apply.
You need help living at home	Home health care services	\$0	Authorization rules may apply.
	Personal care assistant	\$0	Authorization rules may apply.
	Changes to your home, such as ramps and wheelchair access	\$0	These services are available through the Elderly Waiver. State eligibility requirements may apply. Call your care coordinator for more information.
	Home services, such as cleaning or house-keeping	\$0	
	Meals brought to your home	\$0	
	Adult day services or other support services	\$0	
	Services to help you live on your own	\$0	



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AbilityCare (HMO SNP): Summary of Benefits

Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions & benefit information (rules about benefits)
You need interpreter services	Spoken language interpreter	\$0	For covered services.
	Sign language interpreter	\$0	For covered services.
Additional services	Acupuncture	\$0	For covered services. Authorization rules may apply.
	Care coordination	\$0	You will be assigned a care coordinator to help you coordinate providers, access available community resources, and make sure you get services you need.
	Chiropractic services	\$0	Covered services are visits for manual manipulation of the spine to correct subluxation (a displacement or misalignment of a joint or body part).
	Diabetic supplies	\$0	Diabetic supplies and services are limited to specific manufacturers, products and/or brands when received through a pharmacy. Contact Member Services for a list of covered supplies.
	Family planning	\$0	
	Prosthetic services	\$0	Authorization rules may apply.
	Services to help manage your disease	\$0	Diabetic supplies and services are limited to specific manufacturers, products and/or brands when received through a pharmacy. Contact Member Services for a list of covered supplies.
Wellness/Education	Smoking Cessation Assistance	\$0	Members can access telephone-based and online help and education at no charge.
	Health club membership/fitness classes	N/A	Receive \$20 credit per month on memberships at a participating health club.
	Community Education Discount	N/A	Covers up to \$15 of the registration fee for most community education classes (up to five classes per calendar year).

This summary of benefits is provided for informational purposes and is not a complete list. Call Member Services or read the *Evidence of Coverage* to find out about other covered services.

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AbilityCare (HMO SNP): Summary of Benefits

D. Services covered outside of AbilityCare

This is not a complete list. Call Member Services to find out about other services not covered by AbilityCare but available through Medicare.

Other services covered by Medicare	Your costs
Some hospice care services	\$0

E. Services not covered by AbilityCare, Medicare, or Medical Assistance (Medicaid)

This is not a complete list. Call Member Services to find out about other excluded services.

Services <u>not</u> covered by AbilityCare, Medicare, or Medicaid
Services not considered “reasonable and necessary,” according to the standards of Medicare and Medical Assistance (Medicaid).
Experimental medical and surgical treatments, items, or drugs, unless covered by Medicare or under a Medicare-approved clinical study.
Surgical treatment for morbid obesity, except when medically necessary
Elective or voluntary enhancement procedures.
Cosmetic surgery or other cosmetic work, unless criteria is met.
LASIK surgery.

F. Your rights as a member of the plan

As a member of AbilityCare, you have certain rights. You can exercise these rights without being punished. You can also use these rights without losing your health care services. We will tell you about your rights at least once a year. For more information on your rights, please read the *Evidence of Coverage*. Your rights include, but are not limited to, the following:

You have a right to respect, fairness, and dignity. This includes the right to:

- Get covered services without concern about medical condition, health status, receipt of health services, claims experience, medical history, disability (including mental impairment), marital status, age, sex (including sex stereotypes and gender identity) sexual orientation, national origin, race, color, religion, creed or public assistance
- Get information in other formats (for example, large print, braille, or audio) free of charge
- Be free from any form of physical restraint or seclusion

You have a right to get information about your health care. This includes information on treatment and your treatment options. This information should be in a format you can understand. This includes the right to get information on:

- Description of the services we cover
- How to get services
- How much services will cost you
- Names of health care providers

You have the right to make decisions about your care, including refusing treatment. This includes the right to:

- Choose a primary care clinic (PCC). You can change your PCC at any time.



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- See a women’s health care provider without a referral
- Get your covered services and drugs quickly
- Know about all treatment options, no matter what they cost or whether they are covered
- Refuse treatment, even if your health care provider advises against it
- Stop taking medicine, even if your health care provider advises against it
- Ask for a second opinion. AbilityCare will pay for the cost of your second opinion visit.
- Make your health care wishes known in an advance directive

You have the right to timely access to care that does not have any communication or physical access barriers. This includes the right to:

- Get timely medical care
- Get in and out of a health care provider’s office. This means barrier free access for people with disabilities, in accordance with the Americans with Disabilities Act.
- Have interpreters to help with communication with your health care providers and your health plan

You have the right to seek emergency and urgent care when you need it. This means you have the right to:

- Get emergency services without prior approval in an emergency
- See an out-of-network urgent or emergency care provider, when necessary

You have a right to confidentiality and privacy. This includes the right to:

- Ask for and get a copy of your medical records in a way that you can understand and to ask for your records to be changed or corrected
- Have your personal health information kept private

You have the right to make complaints about your covered services or care. This includes the right to:

- File a complaint or grievance against us or our providers
- Ask for a state fair hearing
- Get a detailed reason for why services were denied

For more information about your rights, you can read the AbilityCare *Evidence of Coverage*. If you have questions, you can also call AbilityCare Member Services.

G. What to do if you have a complaint or think we should cover something we denied

If you have a complaint or think AbilityCare should cover something we denied, call the number at the bottom of the page. You may be able to appeal our decision.

For questions about complaints and appeals, you can read Chapter 9 of the AbilityCare *Evidence of Coverage*. You can also call AbilityCare Member Services.

You can also write to us. Please send it to:

AbilityCare
South Country Health Alliance
Attn: Grievance and Appeals Department
2300 Park Drive, Suite 100
Owatonna, MN 55060

If you have questions, please call AbilityCare Member Services at 1-866-567-7242, TTY users call 1-800-627-3529 or 711. Hours of Operation: October – March, 7 days a week, 8 a.m. - 8 p.m.; April – September, Monday – Friday, 8 a.m. - 8 p.m. The call is free. **For more information**, visit www.mnscha.org.



AbilityCare (HMO SNP): Summary of Benefits

H. What to do if you suspect fraud

Most health care professionals and organizations that provide services are honest. Unfortunately, there may be some who are dishonest.

If you think a health care provider, hospital or pharmacy is doing something wrong, please contact us.

- Call AbilityCare Member Services. Phone numbers are at the bottom of the page.
- Call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. You can call these numbers for free, 24 hours a day, 7 days a week.
- Or, call the Minnesota Fraud Hotline at 1-800-627-9977.



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If you have general questions or questions about our plan, services, service area, billing, or Member ID Cards, please call AbilityCare Member Services:

CALL 1-866-567-7242

Calls to this number are free. Days and hours of operation:

October – March, 7 days a week, 8 a.m. - 8 p.m.;

April – September, Monday – Friday, 8 a.m. - 8 p.m.

Member Services also has free language interpreter services available for non-English speakers.

TTY/Relay Service 1-800-627-3529 or 711

Calls to this number are free. Days and hours of operation:

October – March, 7 days a week, 8 a.m. - 8 p.m.;

April – September, Monday – Friday, 8 a.m. - 8 p.m.

email: members@mnscha.org

or visit our website: www.mnscha.org

If you have questions about your health:

- Call your clinic if it's open. Follow your clinic's instructions for getting care when the clinic is closed.
- If your clinic is closed, you can also call the **24 Hour nurse advice line**. This helpful service is staffed by experienced registered nurses who answer your health questions. They can help you decide what to do when you are sick or injured, and they are available 24 hours a day, 7 days a week. Call the number on the back of your member ID card. Calls to this number are free.

The nurse advice line also has free language interpreter services available for non-English speakers.