

Your Anthem Blue Cross and Blue Shield quick start guide

All you need to know, all in one place

anthem.com/oh/medicaid 844-912-0938 (TTY 711)



Anthem Blue Cross and Blue Shield provides covered services to members through a provider agreement with the Ohio Department of Medicaid. You can contact the Ohio Department of Medicaid at **800-324-8680**.

Guide issued date

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Hi, we're Anthem Blue Cross and Blue Shield, your new Medicaid health plan.

Welcome. Thank you for letting us support your health and well-being. We've put together this quick start guide to help you get the most out of your benefits.



Key things to do now

Here are some key things to get started with your health plan.

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Find out when to visit your doctor, urgent care, or the ER.

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Let's get started

Key things to do now

Know the basics about your health plan

We're a health plan offering benefits to individuals and families in Ohio. For more than 80 years, our goal has been to improve the care of our members. How exactly do we do that? We have Care Managers and Care Guides who help you find the doctors and specialists you need. Doctors who provide services that support your whole health, not just treat your symptoms. And nurses ready to answer your questions 24/7.

Your Anthem benefits

Anthem offers many benefits to help keep you healthy. These include:

- Doctor and specialist care.
- Hospital services.
- Behavioral health.Pregnancy care.
- Lab tests and X-rays.

Your dental and vision benefits

With Anthem, members have dental and vision benefits. Dental benefits are managed by LIBERTY Dental. Vision benefits are managed by EyeMed Vision Care. Go to **anthem.com/oh/ medicaid** to learn more about these benefits.

For questions about your dental or vision benefits:

- Call LIBERTY Dental at 833-493-0592 (TTY 800-466-7566).
- Visit eyemed.com/en-us/member.







Need a ride?

If you travel 30 miles or more from your home to receive ongoing healthcare services, we'll provide transportation at no cost to you. Call the Access2Care Member Line at **800-282-9720**, 24 hours a day, seven days a week. **Please call 48 hours before your appointment.**

We also offer:

- Medical and community transportation eligible members will receive transportation services (up to 30 round trips or 60 one-way trips) to provider appointments less than 30 miles or to community resources and services.
- **Rideshare gift card** Eligible members will receive one \$25 rideshare gift card to help them with their transportation needs.

Keep your child healthy with Healthchek

Did you know Ohio's Medicaid program includes Healthchek services for children up to 21 years of age? These services are also called early and periodic screening, diagnostic, and treatment (EPSDT) benefit sometimes. Healthchek services help children stay healthy and reduce the chances of sickness by treating health problems early. All Healthchek services are free. Healthchek covers medical exams, immunizations (shots), health education, and laboratory tests for Medicaid-eligible individuals under the age of 21. These exams are important to make sure that children are healthy and are developing physically and mentally. You can find more about Healthchek services in the member handbook, or call Member Services at **844-912-0938 (TTY 711).**





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Additional behavioral health services

Members under age 21 also can access behavioral healthcare services through the OhioRISE program. This specialized program can help children and adolescents with complex behavioral health needs. Children and adolescents who may qualify:

- Have multiple needs because of behavioral health challenges.
- Have multisystem needs or at risk for deeper system involvement.
- Are at risk for out-of-home placement or are returning to their families from out-of-home placement.

For more information on OhioRISE, view your member handbook or contact Aetna Better Health of Ohio Member Services at **833-711-0773 (TTY 711)**.

Programs for moms

Pregnant members are enrolled in the New Baby, New LifeSM program. You will receive information on taking care of yourself during pregnancy and preparing for your new baby. After giving birth, you will receive information about caring for yourself and your newborn. We will also set you up with a Care Manager if you need extra help. The program also offers rewards for going to your prenatal and postpartum appointments. Visit the **Benefits** section of our website at **anthem.com/oh/ medicaid** to view your member handbook. It includes a lot of important information about your health plan, like:

- Covered and non-covered benefits and services and how to get them.
- Healthchek services for members age 20 and younger.
- Behavioral health and substance abuse services.
- How to get specialty care and hospital services.
- How to get care after hours.
- Emergency services (you have the right to use any hospital or other medical setting for emergency services).
- Services that are not covered and limits on the care you can get outside your area.
- Our Quality Improvement program.
- Access to Care Coordination. You can refer yourself, or a doctor can refer you.
- How to view the list of covered prescription drugs and how to ask for an exception if your prescription is not on our covered drug list.
- How to find providers in our network (you must receive services from network providers)
- You can find information about your doctor in a few ways:
 - Name: Who they are.
 - Address: Where you can find their office.
 - Telephone Number: How you can call them.
 - Specialty: What kind of doctor they are (like a heart doctor or an eye doctor).
 - Skills: What they are good at in medicine.
 - Board Certification: If they have passed special tests in their field.
 - Residency: Where they trained to be a doctor.

- Medical School Education: Where they went to medical school.
- How to get care when out of the service area.
- Your membership rights and responsibilities and our Notice of Privacy Practices.
- Utilization management (UM) and preapprovals of care.
- How we stay on top of new medical treatments and procedures and update or create health policies, as needed.
- Health education with Health A to Z.
- How to tell us you're unhappy with a decision we made, by filing a complaint, orally or in writing, appeal, or an external review.
- Appeal time frames where to send your appeal.
- Advance Directives.
- Who is eligible for Medicaid managed care plan membership.
- Other important information, such as claims, when you may have to pay for the services, or co-pay, if applicable.

If you have questions or need support:

- Log in to anthem.com/oh/medicaid or the SydneysM
 Health app, and live chat with us, or send us a secure message.
- Call Member Services at **844-912-0938 (TTY 711)** Monday through Friday from 7 a.m. to 8 p.m. Eastern time.
- Call 24/7 NurseLine at **844-430-0341 (TTY 711)** for health advice and answers from a nurse any time, day, or night.
- Call the 24/7 Behavioral Health Crisis Line at 844-912-2425 (TTY 711) if you or a family member has a mental health or substance use crisis.

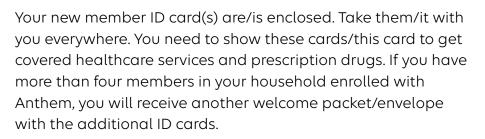
Your personal care management representative will be calling you soon. Don't worry if you miss the call. They will leave a voicemail or try again later.



They can help you with things like:

- Your Health Needs Screening.
- Finding you help with food and housing.
- Setting up rides to health appointments.
- Choosing your doctor if you don't already have one.
- Receiving preventive care like checkups and exams.

2 Review your member ID card



Your plan member ID card is where you'll find important numbers you and doctors will need. Your ID card lists the name and phone number of your primary care provider (PCP). Your PCP is the doctor who will treat you for most of your healthcare needs. You can change the PCP on your ID card once a month, if you want. If not included or any of your information is incorrect, give us a call at **844-912-0938 (TTY 711)**, Monday through Friday from 7 a.m. to 8 p.m. Eastern time.

3 Schedule your wellness visit



Having a longer, healthier life starts with a wellness visit. This yearly exam can help your PCP learn about your health history and find any concerns before they become problems. Your PCP is your main source for most of your care. Call your PCP today to set up a wellness checkup.

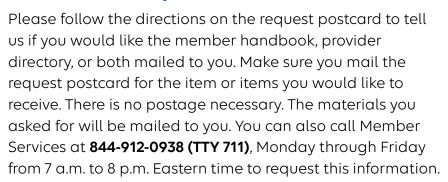
If you need help making an appointment, call our Member Services team.

If you want to change your PCP, visit the member website to find one in our plan. Visit **anthem.com/oh/ medicaid** to view our searchable online provider directory. It lists all the providers in our network. Then, log in to your online account or call Member Services

Call us today if you have healthcare services that were scheduled before you joined our plan or approved by Medicaid Fee-for-Service.

For a period of time, you may be able to keep getting these services or seeing providers not in our network. Tell us right away so we can help you get the care you need.

If you have not done so already, you can also ask to get either or both the member handbook and provider directory in paper form at no cost to you.



4 Create your online account

You can find all you need to know about your benefits, all in one place, with an online account. You get 24/7 access to **anthem.com/oh/medicaid**. Have your member ID card handy. After creating your account, log in to the member website, or the Sydney Health mobile app

Sign up to:

- Live chat with a representative or send us a private message anytime.
- View and share your member ID card.
- Find a doctor, hospital, or pharmacy close by.
- Change your PCP.
- Manage your specialty prescriptions.
- View benefit details.

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5 Complete your Health Needs Screening and earn money



The screening takes about 5 to 10 minutes and helps us make sure you get the care you need. If you do this in the first 90 days, you will earn reward dollars as part of our Healthy Rewards program. You can complete it online at **anthem.com/oh/ medicaid** when you log in to your secure account.

Tell us about any changes to your contact info

If you move or change your phone number, let us know. Log in to your secure account on our website or call Member Services at **844-912-0938 (TTY 711)**, Monday through Friday from 7 a.m. to 8 p.m. Eastern time to update your information with us so you get important plan materials. Also, make sure you tell the Ohio Department of Medicaid about any changes by calling **800-324-8680 (TTY 711)**.

Let's talk about your pharmacy benefits

Your pharmacy benefits are covered under the state Medicaid program and managed by Gainwell Technologies. If you have questions about your pharmacy benefits, call Gainwell Member Services at **833-491-0344 (TTY 833-655-2437)** 24 hours per day, 7 days a week or visit spbm.medicaid.ohio.gov to view the pharmacy member handbook, the list of preferred medications, and locate a pharmacy



And now for your extra benefits

With us, you get all your standard Medicaid benefits, plus some extra ones — all at no cost to eligible members.

These extras include:

- Baby essentials
- Mail-order diapers
- Organic baby food
- Childcare assistance for educational and employment pursuits
- Post discharge meals
- Tutoring services for youth ages 6 to 18 years old
- Laptop computer

- Industry
 certification assistance
- Substance use disorder (SUD) recovery support
- Over-the-counter (OTC) supplies
- Transportation essentials
- Online well-being program
- Enhanced adult dental
- Enhanced vision care

Limits and restrictions may apply. Benefits may change.

You can redeem some benefits online through your secure account. View the extra benefits you are eligible for on the Benefit Reward Hub by logging in at anthem.com/oh/medicaid, or call Member Services at 844-912-0938 (TTY 711).

Where to go for care

If you need care right away, the emergency room (ER) is not always your best option. You have other choices for getting care quicker when your life is not in danger:

Call your PCP first and ask to be seen at once. Sometimes an opening in their schedule happens or their office has a different doctor who can see you. If it's after hours or on weekends, leave a voicemail so someone can call you back soon.

Visit an urgent care center. Not only do they have skilled providers on hand, but you also don't need an appointment. And many are open late and on weekends. Find one near you by using the Find a Doctor tool on the member website,

anthem.com/oh/medicaid.

Video chat with a doctor through LiveHealth Online from the comfort of your home by visiting **livehealthonline.com**.

Talk to a nurse 24/7 if you're not sure where to go or have health questions. Call 24/7 NurseLine at 844-430-0341 (TTY 711).

If you feel your health concern is lifethreatening, then go to the ER or call 911.

Medically necessary health care services must be obtained through the providers in the Anthem provider network with any exceptions that apply, such as emergency services.

The Provider Directory lists all our in-network providers you can use to receive services. You can ask for a printed Provider Directory by calling Member Services or by returning the postcard you received with your new member materials which includes your member identification (ID) card. You can also visit our website at anthem.com/oh/medicaid to view up-to-date provider network information or call Member Services at **844-912-0938 (TTY 711)**, Monday through Friday from 7 a.m. to 8 p.m. Eastern time for help.

Your choices for care





Your PCP	Urgent care
 Treats non-fatal concerns Main source for most of your care Open during business hours on weekdays Requires an appointment Average wait time: 	 Treats non-fatal concerns Providers usually have access to on-site X-rays and labs Often open late on weekends and holidays Average wait time: 30 minutes
 18 minutes Visit for a wellness checkup, physical, and when you don't feel well (see list of symptoms under Urgent care) 	 Visit urgent care for: Vomiting that won't stop Diarrhea Fever Back or stomach pain Rashes or allergies Sprains and strains Minor burns and cuts Flu, cold, and cough Sore throat

Emergency services do not require prior authorization.





Emergency room	LiveHealth [®] Online
 Treats medical emergencies Providers are equipped to handle major trauma and surgery Open 24/7 Average wait time for nonemergencies: 2–3 hours Call 911 or go to the nearest ER for: Chest pain Trouble breathing Severe bleeding Bad burns Loss of consciousness Head injury Slurred speech Seizure Broken bones Serious back pain 	 Treats non-fatal concerns Available 24/7 Requires an appointment Easy to access through your PC, phone, or tablet Average wait time: 18 minutes Book a virtual visit or voice call for: Cough Sore throat Sinus issues Headache Insect bites Pink eye



Renew on time



To keep your healthcare benefits, you have to renew them every year on the anniversary date of when you joined Anthem. The state of Ohio and Anthem will send you reminders. Go to **anthem.com/oh/medicaid** and choose **Renew** for step-by-step details.

If you are permanently institutionalized or age 55 or older when you receive Medicaid benefits, the Estate Recovery Program may recover payments for the cost of your care paid by Medicaid from your estate. The cost of your care may include the capitation payment that Medicaid pays to your managed care plan, even if the capitation payment is greater than the cost of the services you actually received. **Estate Recovery only happens after the death of the Medicaid recipient.**

Who is NOT required to select Managed Care Organization (MCO) membership?



Excluded from MCO membership:

The following individuals are not permitted to join Anthem:

- Dually-eligible under both the Medicaid and Medicare programs.
- Institutionalized (in a nursing home and are not eligible under the Adult Extension category, long-term care facility, ICF-IID, or some other kind of institution).
- Receiving Medicaid Waiver services and are not eligible under the Adult Extension category.

Optional MCO membership:

- Members of a federally-recognized Indian tribe, regardless of age.
- Individuals who receive home and community-based waiver services through Ohio Department of Developmental Disabilities.

If you believe that you or your child meet any of the above criteria and should not be a member of a managed care plan, you must call the Medicaid Hotline at **800-324-8680** (TTY 800-292-3572).

Have questions?

Call us right away if you have a health condition that needs ongoing medical care. For example, if you need surgery or are pregnant.

If you need help or have questions, call Member Services at **844-912-0938 (TTY 711)** Monday through Friday from 7 a.m. to 8 p.m. Eastern time. We are also ready to help you:

- Get a printed copy of your member handbook, provider directory, or any other information on our website.
- Receive information in other formats such as Braille, audio, or large print, free of charge.
- At no cost, get help if you have trouble seeing or hearing, or you have other special needs.
- Get a new ID card.
- Change the PCP on your ID card.
- Make appointments with your providers.
- Schedule transportation.
- Answer any other questions about your health plan.

Anthem provides covered services to members through the Ohio Department of Medicaid. You can reach the Ohio Department of Medicaid at **800-324-8680 (TTY 711)**.

Important phone numbers:



Member Services: 844-912-0938, Monday through Friday, 7 a.m. to 8 p.m. Eastern time

Care Manager:

844-441-1505 (TTY 711), Monday through Friday, 8 a.m. to 5 p.m. Eastern time

24/7 NurseLine: 844-430-0341, 24 hours a day, seven days a week

Transportation services: 800-282-9720

Need to schedule a trip? Call Transportation Services Monday through Friday from 8 a.m. to 7 p.m. Eastern time.Urgent care, hospital/ER/facility discharge transportation needs are available 24 hours a day, seven days a week.

Disease Management:

888-830-4300 (TTY 711) Monday through Friday from 8:30 a.m. to 5:30 p.m. Eastern time

Ohio Tobacco Quitline: 800-QUIT-NOW (800-784-8669)



For the hearing impaired: Dial **711**

Our Notice of Privacy Practices

This notice tells you how we use and give out medical information about you. It also tells you how to get this information. The notice talks about privacy rules set by the Health Insurance Portability and Accountability Act (HIPAA) and your rights. It's in the member handbook and online at **anthem.com/oh/medicaid**. You can also call Member Services for a free copy. If English is not your first language, we can translate for you. We can also give you info in other formats at no cost to you. That includes Braille, audio, large print, and providing American Sign Language interpreter services. Just give us a call at 844-912-0938 (TTY 711).

Spanish

Si su lengua materna no es el inglés, podemos brindarle una traducción. También podemos brindarle información en otros formatos, sin costo alguno para usted. Esto incluye Braille, audio, letra grande y servicios de intérprete del lenguaje americano de señas. Simplemente llámenos al 844-912-0938 (TTY 711).

Nepali

यदि अंग्रेजी तपाईंको पहिलो भाषा होइन भने हामी तपाईंको लागि अनुवाद गर्न सक्छौं। हामी तपाईंलाई निशुल्क अन्य ढाँचाहरूमा पनि जानकारी दिन सक्छौं। यसमा ब्रेल, अडियो, ठूलो प्रिन्ट र अमेरिकी सांकेतिक भाषाका दोभाषे सेवाहरू समावेश छन्। हामीलाई 844-912-0938 (TTY 711) मा कल गर्नुहोस्।

Ukrainian

Якщо англійська не є вашою рідною мовою, ми можемо надати вам послуги перекладу. Ми також можемо безкоштовно надати вам інформацію в інших форматах. Вони включають надання інформації шрифтом Брайля, в аудіоформаті, великим шрифом та надання послуг перекладача американської жестової мови. Просто зателефонуйте нам за номером 844-912-0938 (TTY 711).

Haitian French Creole

Si l'anglais n'est pas votre langue principale, nous pouvons vous offrir un service de traduction. Nous pouvons également vous fournir des informations dans d'autres formats, sans aucun coût pour vous. Cela inclut le braille, l'audio, les gros caractères et la fourniture de services d'interprétation en langue des signes américaine. Appelez-nous simplement au 844-912-0938 (TTY 711).

Russian

Если английский не является вашим родным языком, мы можем организовать для вас услуги перевода. Кроме того, мы можем бесплатно предоставлять вам информацию в иных форматах. Это может быть шрифт Брайля, аудиоформат, крупный шрифт и услуги перевода на американский язык жестов. Просто позвоните нам по номеру 844-912-0938 (TTY 711).



Anthem Blue Cross and Blue Shield may not discriminate on the basis of age, gender, gender identity, sexual orientation, race, color, religion, national origin, military status, veteran status, ancestry, disability, genetic information, health status, or the need for health services.

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