

UCare’s Minnesota Senior Health Options (MSHO) (HMO SNP)

2019 SUMMARY OF BENEFITS

Introduction

This document is a brief summary of the benefits and services covered by UCare’s MSHO. 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 UCare’s MSHO. Key terms and their definitions appear in alphabetical order in the last chapter of the Member Handbook.

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A. Disclaimers

 **This is a summary of health services covered by UCare's MSHO for 2019. Please read the *Member Handbook* for the full list of benefits. If you don't have a *Member Handbook*, call our plan's Customer Services at the number at the bottom of this page to get one.**

- UCare's MSHO (HMO SNP) is a health plan that contracts with both Medicare and the Minnesota Medical Assistance (Medicaid) program to provide benefits of both programs to enrollees. Enrollment in UCare's MSHO depends on contract renewal.
 - This is not a complete list. The benefit information is a brief summary, not a complete description of benefits. For more information call Customer Services or read the Member Handbook.
 - UCare's MSHO is for people 65 or over who live in the service area and have both Medicare Part A and Part B and have Medical Assistance (Medicaid).
 - Under UCare's MSHO you can get your Medicare and Medical Assistance (Medicaid) services in one health plan. A UCare's MSHO 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 Customer Services at the number at the bottom of this page.
- To make a standing request to always get your UCare materials in a language other than English or in an alternate format such as large print, please contact Customer Services at the number listed below.

Toll Free 1-800-203-7225, TTY 1-800-688-2534

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။ ဤစာရွက်စာတမ်း

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အကူအညီလိုအပ်ပါက၊

အထက်ပါဖုန်းနံပါတ်ကိုခေါ်ဆိုပါ။

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請注意，如果您需要免費協助傳譯這份文件，請撥打上面的電話號碼。

Attention. Si vous avez besoin d'une aide gratuite pour interpréter le présent document, veuillez appeler au numéro ci-dessus.

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

ဟ်သုဉ်ဟ်သးဘဉ်တက့ၢ်. ဝဲန့ၢ်လိဉ်ဘဉ်တၢ်မၤစၢၤကလိလၢ တၢ်ကကျိးထံဝဲဒၣ်လံာ် တီလံာ်မိတခါအံၤန့ၣ်, ကိးဘဉ်လိဝဲဝဲနီၢ်ဂံၢ်လၢထးအံၤန့ၣ်တက့ၢ်.

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

ໂປຣດຊາບ. ຖ້າທາກ ທ່ານຕ້ອງການ ການຊ່ວຍເຫຼືອໃນການ ແປເອກະສານນີ້ພຣີ, 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. UCare 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. UCare 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** UCare at 612-676-3200 (voice) or 1-800-203-7225 (voice), 612-676-6810 (TTY), or 1-800-688-2534 (TTY).

Language Assistance Services. UCare 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** UCare at 612-676-3200 (voice) or 1-800-203-7225 (voice), 612-676-6810 (TTY), or 1-800-688-2534 (TTY).

Civil Rights Complaints

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by UCare. 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
- sex (including sex stereotypes and gender identity)
- marital status
- political beliefs
- medical condition

- public assistance status
- age
- disability (including physical or mental impairment)
- 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.

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 enrollees 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.

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

UCare Complaint Notice

You have the right to file a complaint with UCare if you believe you have been discriminated against in our health care programs 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:

UCare

Attn: Appeals and Grievances
PO Box 52
Minneapolis, MN 55440-0052
Toll free: 1-800-203-7225
TTY: 1-800-688-2534
Fax: 612-884-2021
Email: cag@ucare.org

B. Frequently asked questions

The following chart lists frequently asked questions.

Frequently Asked Questions (FAQ)	Answers
<p>What is a Minnesota Senior Health Options (MSHO) plan?</p>	<p>Our plan is part of the Minnesota Senior Health Options (MSHO) program. This program was designed by the Minnesota Department of Human Services (DHS) to provide special care for seniors. 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 MSHO program is called UCare's MSHO.</p>
<p>Will you get the same Medicare and Medical Assistance (Medicaid) benefits in UCare's MSHO that you get now?</p>	<p>If you are coming to UCare's MSHO 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 UCare's MSHO. You will work with a team of providers who will help determine what services will best meet your needs. When you enroll in UCare's MSHO, 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 UCare's MSHO does not normally cover, you can get a temporary supply. We will help you get another drug or get an exception for UCare's MSHO to cover your drug, if medically necessary. For more information, call Customer Services.</p>



Frequently Asked Questions (FAQ)	Answers
<p>Can you go to the same health care providers you see now?</p>	<p>That is often the case. If your providers (including doctors and pharmacies) work with UCare's MSHO 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 Ucare's MSHO network. • If you need urgent or emergency care or out-of-area dialysis services, you can use providers outside of Ucare's MSHO 's network. You may also use out-of-network providers for open access services and in cases when UCare's MSHO authorizes the use of out-of-network providers. <p>To find out if your providers are in the plan's network, call Customer Services or read Ucare's MSHO <i>Provider and Pharmacy Directory</i>. You can also visit our website at ucare.org for the most current listing.</p> <p>If Ucare's MSHO 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 Customer Services.</p>
<p>What happens if you need a service but no one in UCare's MSHO's network can provide it?</p>	<p>Most services will be provided by our network providers. If you need a covered service that cannot be provided within our network, Ucare's MSHO will pay for the cost of an out-of-network provider.</p>
<p>What is a care coordinator?</p>	<p>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.</p>
<p>What are long-term services and supports?</p>	<p>Long-term services and supports are services that help people who need assistance doing everyday tasks like taking a bath, getting dressed, making food, and taking medicine. Most of these services help you stay in your home so you don't need to move to a nursing home or hospital.</p>

Frequently Asked Questions (FAQ)	Answers
<p>Where is UCare’s MSHO available?</p>	<p>The service area for this plan includes the following counties in Minnesota:</p> <p>Aitkin, Anoka, Becker, Benton, Blue Earth, Carlton, Carver, Cass, Chippewa, Chisago, Clay, Cook, Cottonwood, Crow Wing, Dakota, Dodge, Faribault, Fillmore, Freeborn, Hennepin, Houston, Isanti, Jackson, Kandiyohi, Kittson, Koochiching, Lac Qui Parle, Lake, Lake of the Woods, Le Sueur, Lincoln, Lyon, Mahnommen, Marshall, Martin, Mille Lacs, Morrison, Mower, Murray, Nicollet, Nobles, Norman, Olmsted, Otter Tail, Pennington, Pine, Polk, Ramsey, Red Lake, Redwood, Rice, Rock, Roseau, Scott, Sherburne, St. Louis, Stearns, Swift, Todd, Wabasha, Wadena, Washington, Watonwan, Winona, Wright, and Yellow Medicine. You must live in one of these counties to join the plan.</p> <p>You must live in one of these counties to join the plan. Call Customer Services for more information about whether the plan is available where you live.</p>
<p>What is service authorization or prior authorization?</p>	<p>Service authorization or Prior authorization means that you must get approval from UCare’s MSHO before you can get a specific service or drug or see an out-of-network provider. UCare’s MSHO 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.</p> <p>See Chapter 3 of the <i>Member Handbook</i> to learn more about service authorization or prior authorization. See the Benefits Chart in Chapter 4 of the <i>Member Handbook</i> to learn which services require a service authorization or prior authorization.</p>
<p>What is a referral?</p>	<p>A referral means getting approval from your primary care provider (PCP) before you can see a specialist or other providers in the plan’s network. 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. If you don’t get approval, UCare’s MSHO may not cover the services. You don’t need a referral to see certain specialists, such as women’s health specialists. For more information on when a referral is necessary, call Customer Services or read the <i>Member Handbook</i>.</p>



Frequently Asked Questions (FAQ)	Answers
<p>What is Extra Help?</p>	<p>Extra Help is a Medicare program that helps people with limited incomes and resources reduce their Medicare Part D prescription drug costs such as premiums, deductibles, and copays. Extra Help is also called the “Low-Income Subsidy,” or “LIS.”</p> <p>Your prescription drug copays under UCare’s MSHO 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.</p>
<p>Do you pay a monthly amount (also called a premium) as a member of UCare’s MSHO?</p>	<p>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.</p>
<p>Do you pay a deductible as a member of UCare’s MSHO?</p>	<p>No. You do not pay deductibles in UCare’s MSHO.</p>
<p>What is the maximum out-of-pocket amount that you will pay for medical services as a member of UCare’s MSHO?</p>	<p>There is no cost-sharing for medical services in UCare’s MSHO, so your annual out-of-pocket costs will be \$0.</p>

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 in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>You need hospital care</p>	<p>Hospital stay</p>	<p>\$0</p>	<p>Except in an emergency, your health care provider must tell the plan of your hospital admission.</p>
	<p>Doctor or surgeon care</p>	<p>\$0</p>	

Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>You want to see a health care provider</p>	<p>Visits to treat an injury or illness</p>	<p>\$0</p>	
	<p>Specialist care</p>	<p>\$0</p>	
	<p>Wellness visits, such as a physical</p>	<p>\$0</p>	
	<p>Care to keep you from getting sick, such as flu shots</p>	<p>\$0</p>	
	<p>“Welcome to Medicare” preventive visit (one time only)</p>	<p>\$0</p>	
<p>You need emergency care</p>	<p>Emergency room services</p>	<p>\$0</p>	<p>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.</p>
	<p>Urgently needed care</p>	<p>\$0</p>	<p>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.</p>
<p>You need medical tests</p>	<p>Lab tests, such as blood work</p>	<p>\$0</p>	
	<p>X-rays or other pictures, such as CAT scans</p>	<p>\$0</p>	
	<p>Screening tests, such as tests to check for cancer</p>	<p>\$0</p>	



Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need hearing/auditory services	Hearing screenings	\$0	
	Hearing aids	\$0	
You need dental care	Dental services, including preventive 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	
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	

Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>You need a place to live with people available to help you</p>	Customized Living (services provided in an assisted living setting)	\$0	State eligibility requirements may apply.
	Skilled nursing care	\$0	
	Nursing home care	\$0	
	Adult Foster Care	\$0	State eligibility requirements may apply.
<p>You need therapy after stroke or accident</p>	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.
<p>You need help getting to health services</p>	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	<p>UCare's MSHO is not required to provide transportation to your primary care clinic if it is over 30 miles from your home.</p> <p>UCare's MSHO is not required to provide transportation to your specialty care clinic if it is over 60 miles from your home.</p>
	Transportation to other health services	\$0	
<p>You need drugs to treat your illness or condition</p>	Medicare Part B prescription drugs	\$0	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>Member Handbook</i> for more information on these drugs.

If you have questions, please call UCare's Minnesota Senior Health Options (HMO) (SNP) Customer Services at 612-676-6868 or 1-866-280-7202, TTY 612-676-6810 or 1-800-688-2534, 8 am – 8 pm, 7 days a week. The call is free. **For more information,** visit ucare.org.



Health need or problem	Services you may need	Your costs for in-network 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 a 30-day supply.</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 UCare's MSHO <i>List of Covered Drugs</i> (Drug List) at ucare.org for more information.</p> <p>UCare's MSHO 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 UCare's MSHO 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>For some drugs, you can get a long-term supply (also called an "extended supply") when you fill your prescription. A long-term supply is up to a 90-day supply. It costs you the same as a one-month supply and are available at retail pharmacy locations or through mail order.</p>
	<p>Over-the-counter (OTC) drugs</p>	<p>\$0</p>	<p>There may be limitations on the types of drugs covered.</p>



Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
	Diabetes medications	\$0	
You need help getting better or have special health needs	Rehabilitation services	\$0	
	Medical equipment for home care	\$0	
You need foot care	Podiatry services	\$0	
	Orthotic services	\$0	
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 Customer Services or read the <i>Member Handbook</i> for more information.)	\$0	
You need help living at home	Home care services	\$0	
	Personal care assistant	\$0	
	Changes to your home, such as ramps and wheelchair access	\$0	State eligibility requirements may apply.
	Home services, such as cleaning or housekeeping	\$0	State eligibility requirements may apply.
	Meals brought to your home	\$0	State eligibility requirements may apply.
	Adult day services or other support services	\$0	State eligibility requirements may apply.
	Services to help you live on your own	\$0	State eligibility requirements may apply.



If you have questions, please call UCare's Minnesota Senior Health Options (HMO) (SNP) Customer Services at 612-676-6868 or 1-866-280-7202, TTY 612-676-6810 or 1-800-688-2534, 8 am – 8 pm, 7 days a week. The call is free. **For more information**, visit ucare.org.

Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
Your caregiver needs some time off	Respite care		State eligibility requirements may apply.
You need interpreter services	Spoken language interpreter	\$0	
	Sign language interpreter	\$0	



Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
Additional services (continued)	Dental Care for U: <ul style="list-style-type: none"> • UCare Dental Connection 651-768-1415 (local) or 1-855-648-1415 TTY/hearing impaired: 711 Monday – Friday, 7 am – 7 pm You can also call Customer Services at the number at the bottom of this page. • Mobile Dental Clinic Appointments 1-866-451-1555 TTY: 1-800-627-3529 Monday – Friday, 8 am – 4:30 pm 	\$0	

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

D. Services covered outside of UCare's MSHO

This is not a complete list. Call Customer Services to find out about other services not covered by UCare's MSHO but available through Medicare.

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

E. Services not covered by UCare's MSHO, Medicare, or Medical Assistance (Medicaid)

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



Services not covered by UCare's MSHO, Medicare, or Medical Assistance (Medicaid)

- Services not considered “reasonable and necessary” according to 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 UCare's MSHO, 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 *Member Handbook*. 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 the 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



If you have questions, please call UCare's Minnesota Senior Health Options (HMO) (SNP) Customer Services at 612-676-6868 or 1-866-280-7202, TTY 612-676-6810 or 1-800-688-2534, 8 am – 8 pm, 7 days a week. The call is free. **For more information**, visit ucare.org.

- **You have the right to make decisions about your care, including refusing treatment.** This includes the right to:
 - Choose a primary care provider (PCP). You can change your PCP at any time during the year
 - 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. UCare's MSHO 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 urgently needed 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 Appeal (State Fair Hearing)
 - Get a detailed reason for why services were denied

For more information about your rights, you can read the UCare's MSHO *Member Handbook*. If you have questions, you can also call UCare's MSHO Customer Services.



G. What to do if you want to file a complaint or appeal a denied service or drug

If you have a complaint or think UCare's MSHO 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 UCare's MSHO *Member Handbook*. You can also call UCare's MSHO Customer Services.

If you have a complaint or think we should cover something we denied

If you have a complaint or think UCare's MSHO 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 UCare's MSHO *Member Handbook*. You can also call UCare's MSHO Customer Services.

- **For oral grievances and complaints, call UCare's MSHO Customer Services:**

612-676-6868 or 1-866-280-7202, TTY 612-676-6810 or 1-800-688-2534, 8 am – 8 pm, 7 days a week.

- **For oral appeals, call UCare Appeals and Grievances:**

612-676-6841 or 1-877-523-1517 TTY, 612-676-6810 or 1-800-688-2534, 8 am – 4:30 pm, Monday – Friday.

- **For written appeals, grievances and complaints, mail UCare at:**

UCare
Attn: Appeals and Grievances
P.O. Box 52
Minneapolis, MN 55440-0052

- **You can also fax your written appeal, grievance or complaint to UCare at:** 612-884-2021 or 1-866-283-8015

- **Or email us at:** cag@ucare.org

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 UCare's MSHO Customer 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.

Before making an enrollment decision, it is important that you fully understand our benefits and rules. If you have any questions, you can call and speak to a customer service representative at 612-676-6868 or 1-866-280-7202, TTY 612-676-6810 or 1-800-688-2534, 8 am – 8 pm, 7 days a week.

If you have general questions or questions about our plan, services, service area, billing, or member ID cards, please call UCare's MSHO Customer Services:

Call 612-676-6868 or 1-866-280-7202, calls to this number are free.
8 am – 8 pm, 7 days a week.
Customer Services also has free language interpreter services available for non-English speakers.

TTY 612-676-6810 or 1-800-688-2534, calls to this number are free.
8 am – 8 pm, 7 days a week.
These numbers are for people who have hearing or speaking problems. You must have special telephone equipment to call them.

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 UCare 24/7 nurse line. A nurse will listen to your problem and tell you how to get care. (Example: urgent care, emergency room). The numbers for the UCare 24/7 nurse line are:

Call 1-800-942-7858, TTY 1-855-307-6976, calls to these numbers are free.
24 hours a day, 7 days a week, including weekends and holidays.
UCare's MSHO also has free language interpreter services available for non-English speakers.





P.O. Box 52
Minneapolis, MN 55440-0052

612-676-6868 | 1-855-260-9707
TTY 612-676-6810 | 1-800-688-2534
8 am – 8 pm, 7 days a week

[ucare.org](https://www.ucare.org)