Your Quick Start Guide

Phone: (855) 882-3901 Physical address: 115 Fairchild Street, Suite 340 Daniel Island, SC 29423-0309

Mailing address: PO Box 40309 N. Charleston, SC 29423-0309

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Welcome to Molina Healthcare!

As a new member, it's time to start getting the most from your health plan coverage! Be sure to take these simple steps right away:

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Look for your member ID card inside this packet

- Make sure your information on the card is correct.
- Always keep your ID card with you. Show it every time you get medical care or visit the pharmacy.

Download the My Molina® mobile app

- Our My Molina mobile app lets you view, print and send your member ID card. You can search for doctors, change your PCP and much more. Anytime, anywhere!
- Download the My Molina app today from the Apple App Store® or Google Play®.
- To learn how-to-use the My Molina mobile app and member portal, go to:
 - MyMolina.com/GettingStartedVideos English
 - MiMolina.com/VideosDeAyuda Spanish

Thank you for choosing Molina as your trusted health plan. We're happy to have you as a member of our health care family.



Schedule a visit with your primary care provider (PCP)

- Visit your PCP, even if you're not sick, to get set up as a new patient. Your PCP needs to get to know you and your health history. The more your PCP knows, the better they can help you.
- Your PCP's name, phone number and location are listed on your member ID card.
- If you don't want to see the PCP listed on your ID card, you can change providers by using the My Molina mobile app, visiting <u>MyMolina.com</u> or calling Member Services at (855) 882-3901 (TTY: 711).

Learn more about your health plan

Want to see a full list of your covered benefits and more details about your plan?

 Go to <u>MolinaHandbook.com/SC</u> to read your Member Handbook.

Want to find a doctor near you?

- Go to <u>MolinaProviderDirectory.com/SC</u> to search our Provider Online Directory.
- All of our doctors are board-certified and reviewed for quality before they can join our network.

Want to see if your medicine is covered?

- Go to MolinaHealthcare.com/SC to see which drugs are preferred and covered for you.
- For more details, please go to <u>MolinaHealthcare.com</u> or call (855) 882-3901 (TTY: 711).





Your PCP

Your PCP is the main doctor who gives you most of your care. Make sure to see your PCP right away to get set up as a new patient. Your PCP should get to know you and your medical history. Think of your PCP as your medical home and the doctor who knows you the best! Once you're set up as a new member, you'll want to see your PCP for regular checkups. Your member ID card shows the name and contact details of your PCP. If you need to change your doctor, you can do so on the My Molina mobile app or MyMolina.com.

Don't lose your health plan coverage!

If it's time for you to renew your benefits, the South Carolina Department of Health and Human Services may send you a Healthy Connections Annual Review Form. If you get this, it's important to complete and return this form as soon as possible.



If you need help, please call the Molina Benefits Renewal Team at (844) 489-2544 or visit <u>HealthPlanRenewals@MolinaHealthcare.com</u>.

Information to keep handy

Member Services	(855) 882-3901 (TTY: 711)	Call Member Services when you have questions about your health plan, benefits or how to get services.
Member portal	<u>MyMolina.com</u>	Use our member portal to view, print and send your member ID card. Search for doctors, change your PCP and much more!
My Molina mobile app	Download on your phone. Go to Apple App store or Google Play.	Use our mobile app to manage your health care on your phone or tablet, anytime or anywhere!
Virtual urgent care	Schedule your visit with an in-network board-certified doctor by phone, video or through the My Molina mobile app.	Get urgent care from the comfort of your home with a virtual visit.
Annual Notice	<u>MolinaHealthcare.com/</u> <u>AnnualReminders</u>	Learn more about your rights, benefits and services as a Molina member.

Crisis services	Call 911 or go to the nearest emergency room.	Call if you're thinking about suicide or have a behavioral health emergency and don't know what to do.
Substance use disorder	Department of Alcohol and Other Drug Abuse Services (DAODAS) (803) 896-5555 (TTY: 711)	Call if you want help with drug or alcohol use.
Member Handbook	MolinaHandbook.com/SC	Get the details of how your plan works in your Member Handbook. If you need a hard copy of your handbook mailed to you, please call Member Services at (855) 882-3901.
Health & wellness information	<u>MolinaHealthcare.com/</u> <u>StayingHealthy</u>	Get information about health and wellness topics.
Provider Online Directory	<u>MolinaProviderDirectory.</u> <u>com/SC</u>	See a list of our network providers online. If you need a list of providers in our network mailed to you, call Member Services at (855) 882-3901.
Rides to and from medical visits	(866) 910-7688 (866) 445-6860 (866) 445-9954	Call for rides to non-emergency medical visits.

Earn rewards with Molina

Molina Healthcare of South Carolina wants to help you get the most of your membership. Take a look at some of the great benefits and rewards you have as a member. We cover them at no cost to you!



Earn rewards for regular doctor visits and learn how to have a healthy pregnancy and baby.



Get support for long-term health issues like asthma, depression and heart failure.



Join programs to help you eat right, manage your weight and guit smoking.



Expert care from home with virtual health visits, and Molina's 24-hour Nurse Advice Line.



Molina's Community Connectors help find resources for transportation, housing, job training, education and more.

To learn more and find out how to earn these rewards, please call (855) 822-3901 (TTY: 711) or check out <u>MolinaHealthcare.com/SC-Rewards</u>.



Annual eye exams for adults 21+ plus lenses and frames every two years



Finish your 8-, 9-, or 10-year old well checkup with your doctor and get \$150 gift card for a bike and helmet



Free car seat for members with six prenatal in-network visits



What to do when you're sick

Are you feeling sick and not sure what to do? Don't worry, we're here to help you!



What are my options?



PCP

Call your PCP day or night. After hours, on-call staff will return your call.

When you have a minor issue that requires medical care:

- Colds or cough
- Flu
- Regular checkups
- Earache
- Sore throat
- Medicine or refills
- Diarrhea



Virtual health visits or an urgent care center

Virtual care and urgent care centers are great options if you need care after hours.

When it's not an emergency but you need care right away:

- Severe cold or flu symptoms
- Ear pain
- Sore throat
- Stomach flu or virus
- Sprain, strain or deep bruise



Emergency room (ER) Call 911 or go to the nearest ER.

When you think your life or health is in danger:

- Very bad bleeding
- Very bad stomach pain
- Chest pain or pressure
- Head injury or trauma
- Sudden dizziness or trouble seeing

Non-Discrimination Notification Molina Healthcare of South Carolina Medicaid

Molina Healthcare of South Carolina (Molina) complies with all Federal civil rights laws that relate to healthcare services. Molina offers healthcare services to all members without regard to race, color, national origin, age, disability, or sex. Molina does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. This includes gender identity, pregnancy and sex stereotyping.

To help you talk with us, Molina provides services free of charge:

- Aids and services to people with disabilities
 - Skilled sign language interpreters
 - Written material in other formats (large print, audio, accessible electronic formats, Braille)
- Language services to people who speak another language or have limited English skills
 - Skilled interpreters
 - Written material translated in your language
 - Material that is simply written in plain language

If you need these services, contact Molina Member Services at (855) 882-3901 (TTY/TDD: 711)

If you think that Molina failed to provide these services or treated you differently based on your race, color, national origin, age, disability, or sex, you can file a complaint. You can file a complaint in person, by mail, fax, or email. If you need help writing your complaint, we will help you. Call our Civil Rights Coordinator at (866) 606-3889, or TTY, 711. Mail your complaint to:

Civil Rights Coordinator 200 Oceangate Long Beach, CA 90802

You can also email your complaint to civil.rights@molinahealthcare.com. Or, fax your complaint to (877) 823-5961.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights. Complaint forms are available at <u>hhs.gov/civil-rights/filing-a-complaint/complaint-process/index.html</u>. You can mail it to:

U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201

You can also send it to a website through the Office for Civil Rights Complaint Portal, available at <u>ocrportal.hhs.gov/ocr/portal/lobby.jsf</u>.

If you need help, call (800) 368-1019 (TTY: 800-537-7697).

Non-Discrimination Tag Line- Section 1557 Molina Healthcare of South Carolina Medicaid

- EnglishATTENTION: If you speak English, language assistance services,
free of charge, are available to you. Call 1-855-882-3901 (TTY: 711).SpanishATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame
al 1-855-882-3901 (TTY: 711).Arabicملحوظة: إذا كانت تت حدث الذكار الليغة، فان خدمات المهراعة الليغوية تتواضر لك بالمجان. التصل برقم
(TTY/TTD 711) 1-855-882-3901
- Portuguese ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-855-882-3901 (TTY: 711).
- Russian ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-855-882-3901 (телетайп: 711).
- Vietnamese CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-855-882-3901 (TTY: 711).
- Brazilian ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-855-882-3901 (TTY: 711).
- Mandarin 注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電 1-855-882-3901 (TTY:711)。
- Falam RALRINNAK: Falam (Laizo) `ong na thiam asile, man lo tein `onglettu bawmh le hna`uan seknak nangmah hrangah aum. ah ko aw 1-855-882-3901 (TTY:711).
- Hindi ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-855-882-3901 (TTY: 711) पर कॉल करें।

Korean Korean	주의: 한국어를 사용하시는 경우 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-855-882-3901(TTY: 711)로 전화하세요.
Chin Chin	THEIHBING: Lai holp na thiam asi an cun, holphettu adakkim kaari in haarojakka ai.1-855-882- 39855-3882-3991 an invak niatae in cun, holp let tu a lak in kan in hian piak lai. 1-855-882- 3991 (1197: 711) ah invak niatae in rak hiat te.
Erendt h French	ATTENTION : Si wouspad de franceis ideales recesidade de interlistiquis tique sont proposés oposés ATTENTION : Si vous parlez franças des services d'aide linguistique vous sont proposés gratuitement. Appendez le 855-88239690(110) 771/11). gratuitement. Appendez le 1-855-882-3901 (TTY : 711).
Karen Karen	ဖြစ်သီး–နမန်ကတိုးကညီကိုခ်,ကိုခ်အတာဆီခံထွဲမ်းစားအတာဖိုးတန်မ်းတဖွဉ်,တန်းနန်ဟုခ်ကလီတဖခ်နန်ဝဲဒခ်လ၊ ဟိုသီး–နမ့်၊ကတီးကညီကိုြာ,ကိုြာအတာဆီခံထွဲမ်းစားအတာဖိုးတန်မ်းတဖွဉ်,တန်းနန်ဟုခ်ကလီတဖဉ်နန်ဝဲဒခ်လ၊ နစိုန်. ကိုးယီ၊ (၁–၈၅၅–၈၈၂–၃၉၀၁) (TTY:၇၁၁). နဂို၊. ကီးယီ၊ (၁–၈၅၅–၈၈၂–၃၉၀၁) (TTY:၇၁၁).
Amhaniic Amharic	ማስታወዥ፤ የሚናንፉት ቋንቋ አማርጅ ከሆነ የትርጉም እርዳታ ጅርጅቶቹ፤ በነጻ ሊያግዝዎት ተዘጋጀተዋል፤ ወይ ሚከተለው ቆዋር ይይውሉ 1-855-882-3981 (መስማት ለተሳናቸው፤ 711):
Burmese Burmese	သတိမြုရန် - အကယ်ရှိ သင့်သည် မြန်မာစကား ကို မြောပါက၊ ဘာသာစကား အကူအညီ၊ အခမဲ့၊ သင့်အတွက် သတိမြုရန် - အကယ်၍ သင်သည် မြန်မာစကား ကို မြောပါက၊ ဘာသာစကား အကူအညီ၊ အခမဲ့၊ သင့်အတွက် စီစဉ်ဆောင်ရွက်ပေးပါမည်။ ဖုန်းနံပါတဲ့ 1-855-882-3901 (TTY: 711) သို့ ခေါ်ဆိုပါ။ စီစဉ်ဆောင်ရွက်ပေးပါမည်။ ဖုန်းနံပါတဲ့ 1-855-882-3901 (TTY: 711) သို့ ခေါ်ဆိုပါ။

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Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Molina Healthcare South Carolina ("**Molina**", "**we**" or "**our**") uses and shares protected health information about you to provide your health benefits. We use and share your information to carry out treatment, payment and health care operations. We also use and share your information for other reasons as allowed and required by law. We have the duty to keep your health information private and to follow the terms of this Notice. The effective date of this Notice is December 11, 2023.

PHI stands for these words, protected health information. PHI means health information that includesyour name, Member number or other identifiers, and is used or shared by Molina.

Why does Molina use or share your PHI?

We use or share your PHI to provide you with health care benefits. Your PHI is used or shared for treatment, payment, and health care operations.

For Treatment

Molina may use or share your PHI to give you, or arrange for, your medical care. This treatment also includes referrals between your doctors or other health care providers. For example, we may share information about your health condition with a specialist. This helps the specialist talk about your treatment with your doctor.

For Payment

Molina may use or share PHI to make decisions on payment. This may include claims, approvals for treatment, and decisions about medical need. Your name, your condition, your treatment, and supplies given may be written on the bill. For example, we may let a doctor know that you have our benefits. We would also tell the doctor the amount of the bill that we would pay.

For Health Care Operations

Molina may use or share PHI about you to run our health plan. For example, we may use information from your claim to let you know about a health program that could help you. We may also use or share your PHI to solve Member concerns. Your PHI may also be used to see that claims are paid right.

Health care operations involve many daily business needs. It includes but is not limited to, the following:

- Improving quality;
- Actions in health programs to help Members with certain conditions (such as asthma);
- Conducting or arranging for medical review;
- Legal services, including fraud and abuse detection and prosecution programs;
- Actions to help us obey laws;
- Address Member needs, including solving complaints and grievances.

We will share your PHI with other companies ("**business associates**") that perform different kinds of activities for our health plan. We may also use your PHI to give you reminders about your

appointments. We may use your PHI to give you information about other treatment, or other health-related benefits and services.

When can Molina use or share your PHI without getting written authorization (approval) from you?

The law allows or requires Molina to use and share your PHI for several other purposes including the following:

Required by law - We will use or share information about you as required by law. We will share your PHI when required by the Secretary of the Department of Health and Human Services (HHS). This may be for a court case, other legal review, or when required for law enforcement purposes.

Public Health - Your PHI may be used or shared for public health activities. This may include helping public health agencies to prevent or control disease.

Health Care Oversight - Your PHI may be used or shared with government agencies. They may need your PHI for audits.

Research - Your PHI may be used or shared for research in certain cases.

Legal or Administrative Proceedings - Your PHI may be used or shared for legal proceedings, such as in response to a court order.

Law Enforcement - Your PHI may be used or shared with police to help find a suspect, witness or missing person.

Health and Safety - Your PHI may be shared to prevent a serious threat to public health or safety. **Government Functions** - Your PHI may be shared with the government for special functions.

An example would be to protect the President.

Victims of Abuse, Neglect or Domestic Violence - Your PHI may be shared with legal authorities if we believe that a person is a victim of abuse or neglect.

Workers Compensation - Your PHI may be used or shared to obey Workers Compensation laws.

Other Disclosures - Your PHI may be shared with funeral directors or coroners to help them do their jobs.

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

Molina needs your written approval to use or share your PHI for a purpose other than those listed in this Notice. Molina needs your authorization before we disclose your PHI for the following: (1) most uses and disclosures of psychotherapy notes; (2) uses and disclosures for marketing purposes; and (3) uses and disclosures that involve the sale of PHI. You may cancel a written approval that you have given us. Your cancellation will not apply to actions already taken by us because of the approval you already gave to us.

What are your health information rights?

You have the right to:

- **Request Restrictions on PHI Uses or Disclosures (Sharing of Your PHI)** You may ask us not to share your PHI to carry out treatment, payment or health care operations. You may also ask us not to share your PHI with family, friends or other persons you name who are involved in your health care. However, we are not required to agree to your request. You will need to make your request in writing. You may use Molina's form to make your request.
- **Request Confidential Communications of PHI** You may ask Molina to give you your PHI in a certain way or at a certain place to help keep your PHI private. We will follow reasonable

requests, if you tell us how sharing all or a part of that PHI could put your life at risk. You will need to make your request in writing. You may use Molina's form to make your request.

- **Review and Copy Your PHI** You have a right to review and get a copy of your PHI held by us. This may include records used in making coverage, claims and other decisions as a Molina Member. You will need to make your request in writing. You may use Molina's form to make your request. We may charge you a reasonable fee for copying and mailing the records. In certain cases, we may deny the request. *Important Note: We do not have complete copies of your medical records. If you want to look at, get a copy of, or change your medical records, please contact your doctor or clinic.*
- **Amend Your PHI** You may ask that we amend (change) your PHI. This involves only those records kept by us about you as a Member. You will need to make your request in writing. You may use Molina's form to make your request. You may file a letter disagreeing with us if we deny the request.
- Receive an Accounting of PHI Disclosures (Sharing of Your PHI) You may ask that we give you a list of certain parties that we shared your PHI with during the six years prior to the date of your request. The list will not include PHI shared as follows:
 - for treatment, payment or health care operations;
 - to persons about their own PHI;
 - sharing done with your authorization;
 - incident to a use or disclosure otherwise permitted or required under applicable law;
 - PHI released in the interest of national security or for intelligence purposes; or
 - as part of a limited data set in accordance with applicable law.

• **Receive an Accounting of PHI Disclosures (Sharing of Your PHI)** - We will charge a reasonable fee for each list if you ask for this list more than once in a 12- month period.

• Get a Separate Copy of this Notice

We will charge a reasonable fee for each list if you ask for this list more than once in a 12month period. You will need to make your request in writing. You may use Molina's form to make your request. You may make any of the requests listed above or may get a paper copy of this Notice. Please call our Member Services at the toll-free number on your card.

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

You may complain to Molina and to the Department of Health and Human Services if you believe your privacy rights have been violated. We will not do anything against you for filing a complaint. Your care and benefits will not change in any way.

You may file a complaint with us at:

Molina Healthcare of South Carolina, Inc. Manager of Member Services 115 Fairchild Street, Suite 340, Daniel Island, SC 29492 (855) 882-3901

You may file a complaint with the Secretary of the U.S. Department of Health and Human Services at:

Office of the Civil Rights U.S. Department of Health and Human Services Sam Nunn Atlanta Federal Center, Suite 16T70 61 Forsyth Street, S.W. Atlanta, GA 30303-8909 Voice Phone (800) 368-1019; TDD (800) 537-7697 FAX (404) 562-7881

What are the duties of Molina?

Molina is required to:

- Keep your PHI private;
- Give you written information such as this on our duties and privacy practices about your PHI;
- Provide you with a notice in the event of any breach of your unsecured PHI;
- Not use or disclose your genetic information for underwriting purposes;
- Follow the terms of this Notice.

This Notice is Subject to Change

Molina reserves the right to change its information practices and terms of this Notice at any time. If we do, the new terms and practices will then apply to all PHI we keep. If we make any material changes, Molina will post the revised Notice on our website and send the revised Notice, or information about the material change and how to obtain the revised Notice, in our next annual mailing to our members then covered by Molina.

Contact Information

If you have any questions, please contact the following office:

Molina Healthcare of South Carolina, Inc. Attention: Manager of Member Services 115 Fairchild Street, Suite 340 Daniel Island, SC 29492 (855) 882-3901



Get started as a new member!

We make it *simple*!

MolinaHealthcare.com/Welcome



