



August 4, 2021

Updates to Member Handbook

Refer to this flyer for updated information to the member handbook. You can always find the most up-to-date version of the member handbook at mibluecrosscomplete.com.

Pg. 5 – If you're currently receiving services from a provider before enrolling with Blue Cross Complete, we can help you with a smooth **transition of care**. You may be able to continue getting these services at the time of enrollment for up to 90 days. This may also include certain prescriptions. You must have a relationship with a specialist, primary care provider or other covered provider before enrolling with Blue Cross Complete to establish continuity of care. When requesting continuity of care, we'll need to know the name of your provider, a contact person, their phone number and the service type and appointment date. Find out more about transition of care at mibluecrosscomplete.com/benefits.

Pg. 10 – You may get a **second opinion** about a treatment your doctor thinks you should get. Sometimes that means using an out-of-network or out-of-state provider we've approved before you go. A second opinion with an in-network provider often doesn't require preauthorization. If you'd like to seek a second opinion on a medical treatment, call Customer Service for assistance.

Pg. 12 – Blue Cross Complete covers **telehealth** appointments, including primary and specialty care doctor visits, mental health and prenatal visits. These are video-call appointments that allow you to receive care without leaving your home. Contact your doctor's office to see if a telehealth visit is available. They'll provide instructions for access to your appointment. Not all appointments can be conducted by telehealth. In an emergency, seek in-person medical attention right away.

Pg. 21 – The name of our **transportation** provider has changed from ModivCare from LogistiCare. The name change doesn't affect the phone number or the services you receive.

Pg. 25 – While it's still important to get a **lead test** if you've been affected by the Flint water system, Blue Cross Complete no longer offers gift cards for completing this test.

Pg. 34 – The **Preferred Drug List**, also known as the drug formulary, is a list of medicines covered by your pharmacy benefit, including prescription and non-prescription medicines. It includes both generic and brand names, and can help your doctor select medicines for you. This list is the same for all Medicaid and Healthy Michigan Plan providers across Michigan. For the most up-to-date version of the PDL, visit mibluecrosscomplete.com/pharmacy, then scroll down to the Preferred Drug List tab.

Pg. 34 – The **Maintenance Drug List** is a list of medicines covered by your pharmacy benefit for up to a 102-day supply. The list includes prescription and non-prescription medicines. The Maintenance Drug List is also available online at mibluecrosscomplete.com/pharmacy.



Pg. 36 – Our online **Health Library** can help you learn about a variety of health topics, such as eating right and stress management, using educational quizzes and tools. It's located on mibluecrosscomplete.com under *Resources*.

Pg. 42 – Adults ages 18 and older should be screened for **hepatitis C** at least once in their lifetime, or during each pregnancy. This is part of our *Guidelines to Good Health*. You can find these guidelines for adults and for children and teens at mibluecrosscomplete.com/vaccinations.

Pg. 52 – When you get your **MI Health Account** statement, you can pay one month at a time or you can pay for all three months at once. There are two ways to pay:

- Online with your debit or credit card (MasterCard, Visa and Discover are accepted) or your bank account information. Visit healthymichiganplan.org and click *Make MI Health Account Payment*
- By mail with a check or money order, using the information included in your MI Health Account statement

Pg. 56 – **Changes in your family** may affect your benefits. This may include if you get other health care coverage in addition to your Medicaid coverage. If you have this change, or any others listed on p. 56 of your handbook, tell Customer Service and your DHS case worker when the change happens.

Pg. 62 – **Grievances**

- If you send a written grievance, we will let you know that we received it within two business days.
- We will let you know within 30 calendar days that your grievance has been addressed.
- We may extend the time frames for grievances up to 14 calendar days if you request an extension.
- If we extend the time frame, we will give you a prompt verbal notice of the delay and follow up with a letter within two calendar days of your decision to extend the time frame.

Pg. 63 – **Appeals: Standard review** (30 days)

- You can ask for a standard 30 day review by writing or calling us.
- We'll respond to your request within 30 calendar days.
- We may need an extra 14 business days if we're waiting for records from your provider.

Pg. 64 – **Appeals: Expedited (urgent) review** (72 hours)

- You or your doctor can ask for an urgent review if waiting the standard review time of 30 calendar days would hurt your health or life.
- If your appeal isn't expedited, Blue Cross Complete will complete a standard 30-calendar day review.
- We may extend the time frames for standard appeals and expedited appeals up to 14 calendar days if you request an extension.



COVID-19 benefits and services

Due to the COVID-19 pandemic, we've added or expanded certain Blue Cross Complete benefits. We want you to be safe and healthy, while continuing to receive the care you need. For up-to-date COVID-19 resources and information, visit mibluccrosscomplete.com/covid-19 or michigan.gov/coronavirus*. For information about the COVID-19 vaccine, visit michigan.gov/covidvaccine*.

Telehealth

With telehealth, also called telemedicine, you can receive health services by phone or video call. This can be a good option for certain types of care, such as behavioral health visits and completing a *Health Risk Assessment*, as it allows you to address medical concerns and maintain social distancing. Ask your doctor's office if they offer telehealth services. When you set up an appointment, your doctor will provide additional instructions. See your Member Handbook for more information about telehealth. Or visit mibluccrosscomplete.com, hover over *Member Benefits*, then click *Telehealth*.

Testing

If you develop symptoms of COVID-19, such as shortness of breath, fever or cough, or you've been exposed to someone who tested positive for COVID-19, contact your doctor. Or call our 24-hour Nurse Help Line at **1-888-288-1724** (TTY: **1-888-987-5832**), 24 hours a day, seven days a week. The doctor or nurse can help determine if you should be tested for COVID-19. Blue Cross Complete covers testing, with the exception of in-home testing kits.

Requirements about appointments and whether a prescription is needed vary at different testing sites. No matter where you go, bring a photo ID and your Blue Cross Complete member ID card. Find testing locations at michigan.gov/coronavirus*. Scroll down and click *Find a Test Site*.

COVID-19 vaccine

You can receive a COVID-19 vaccine at no cost to you. Talk with your doctor or pharmacist about getting vaccinated. You can visit the state public health website at michigan.gov/covidvaccine for the most up-to-date information, including where to get a vaccine.

Where you can get a vaccine will vary by community. Visit michigan.gov/covidvaccine* to find a vaccine site near you. Once you find one, contact that site for more information about their services. You can get interpretation services through Blue Cross Complete at no cost by calling Customer Service at **1-800-228-8554**, 24 hours a day, seven days a week. TTY users should call **1-888-987-5832**. For more information about the COVID-19 vaccine, visit mibluccrosscomplete.com/covid-19.

**Blue Cross Complete doesn't own or control this website*

Copayments

There are no copays for COVID-19 testing, treatment or vaccines. This includes office visits, prescriptions, diagnostic imaging, medical supplies and equipment, and inpatient and outpatient hospital stays for treatment related to COVID-19. Copays for these services are waived for Healthy Michigan Plan members during the COVID-19 emergency period. Traditional Medicaid members don't have copays for services covered by Blue Cross Complete.

Transportation services

Our transportation service is still providing rides during the pandemic. You can get transportation to vaccination or testing sites where you can be dropped off. Our transportation provider won't bring members through drive-thru vaccination or testing sites. If you drive yourself or are driven by a friend or family member, you may be able to receive reimbursement for gas. For more information or to schedule a ride, visit mibluccrosscomplete.com/transportation. Or call **1-888-803-4947** Monday through Friday from 8 a.m. to 5:30 p.m. TTY users call **711**.

Prescription refills

You may be able to get early refills after 50% of monthly usage for non-controlled substance prescriptions, if you have refills available. Controlled substances (opioids) and anti-anxiety drugs can't be refilled early. Some pharmacies offer no-cost delivery or curbside pickup services for medications. Ask your local pharmacist if these services are available. If you need to talk to your doctor about your prescription, a telehealth visit may be an option for you.

Durable medical equipment

You can have durable medical equipment, such as breathing and medical supplies, delivered to your home. Quantity limits and prior authorizations have been waived. This includes replacements if equipment is lost or damaged. Medical supplies you typically have delivered to your home, including diabetes supplies, incontinence supplies and enteral formula, are included. Surgical masks, hand sanitizer, gloves and patient gowns are covered. Your doctor can help you get durable medical equipment if you need it. Ask your doctor for a DME prescription if you need a non-N-95 face mask.