

Minnesota



2024 Medica AccessAbility Solution[®]

Special Needs BasicCare (SNBC)

AT A GLANCE

Coverage that works for you

Designed for adults with certified mental health, physical, and developmental disabilities.



\$0 premiums, deductibles, and copays
\$0 medical and hospital costs
\$0 to enroll



1 Medica Member Services phone number
1 Personal Care Coordinator



\$0 rides to your medical, dental, mental health, pharmacy, medical equipment, and substance use disorder appointments

EXTRA BENEFITS, NO EXTRA COST



Save up to \$2,600 a year on healthy foods



Eyeglasses



24/7 Nurse Line



eVisits through Virtuwell



Help finding health services and scheduling appointments



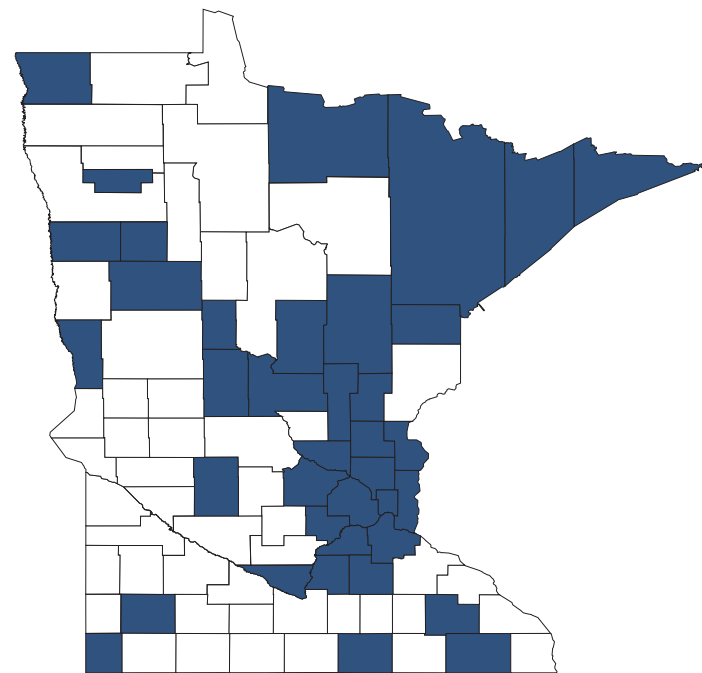
MEDICA ACCESSABILITY SOLUTION

What you need to know

Eligibility

You're eligible to enroll in Medica AccessAbility Solution if:

- You're 18-64 years old
- You have a certified disability
- You're eligible for Medicaid (Medical Assistance)



- You live in our 38-county service area:

- | | | | |
|-------------|---------------|--------------|--------------|
| • Aitkin | • Freeborn | • Mille Lacs | • Scott |
| • Anoka | • Hennepin | • Morrison | • Sherburne |
| • Becker | • Isanti | • Murray | • St. Louis |
| • Carlton | • Kanabec | • Nicollet | • Todd |
| • Carver | • Kandiyohi | • Norman | • Wadena |
| • Chisago | • Kittson | • Olmsted | • Washington |
| • Cook | • Koochiching | • Ramsey | • Wilkin |
| • Crow Wing | • Lake | • Red Lake | • Wright |
| • Dakota | • Le Sueur | • Rice | |
| • Fillmore | • Mahnommen | • Rock | |

Doctors, clinics, and hospitals

No referrals needed.

Our large network gives you your choice of high-quality health, dental, mental health, and specialty care providers.

Want to know if your doctor, clinic, or hospital is in the Medica AccessAbility Solution network or if your medications are covered? Get answers at [Medica.com/2024SNBC](https://www.medicamn.com/2024SNBC) or call us at **1 (888) 221-1825 (TTY: 711)**.

Support that makes a difference



Healthy Savings® program

- Save up to \$2,600 a year on healthy foods at participating grocery stores
- The large network includes Cub, Coborn's, Festival, Hy-Vee, and more



Pregnancy support

support throughout pregnancy with app tools that include:

- One-on-one coaching
- Menstrual cycle tracker
- Pregnancy calendar and daily baby updates
- Child development checklist
- And much more

CARE YOU CAN COUNT ON

Your personal care coordinator can:

- Visit you in your home or choice of location
- Make appointments and schedule rides
- Explain plan benefits and covered services
- Help you with health care paperwork
- Find helpful community resources
- Help you create, follow, and update your personal care plan



Plan comparison

AccessAbility Solution, gives you more at no cost to you.
Compare it to Minnesota Medical Assistance.

Questions + coaching

Medica Care Coordinator who's a registered nurse or social worker, knows about disability services, and is committed to help you achieve your health goals

AccessAbility Solution	Minnesota Medical Assistance
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24/7 NurseLine by Health AdvocateSM to get guidance on appropriate treatment options, support for non-urgent illnesses, and simple, self-care tips for non-urgent concerns



24/7 phone access to care through a contracted service

Phone support for mental health, and substance use disorders



24/7 phone support for help answering health insurance questions, finding a doctor, scheduling appointments, and resolving health insurance issues



Tobacco cessation offering online and 1:1 coaching support and nicotine replacement therapy



Money-saving benefits

AccessAbility Solution	Minnesota Medical Assistance
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\$0 rides to medical, dental, mental health, pharmacy, medical equipment, and substance use disorder services



Healthy Savings[®] program offering instant savings on healthy foods



Health care extras

AccessAbility Solution	Minnesota Medical Assistance
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One new pair of eyeglasses when medically necessary



Statewide pharmacy network that includes more than 1,500 pharmacies

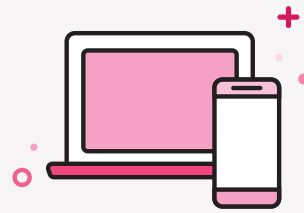


24/7 Virtuwell[®] online care for dozens of common conditions



Extra support on your pregnancy and parenting journey through an app that includes a health and menstrual cycle tracker, pregnancy calendar and daily baby updates, child development checklist, one-on-one coaching, and more





Ready to enroll?

There are three ways to enroll. Choose the one that works best for you:



Over the phone

Call **1 (888) 221-1825** (TTY: **711**) for fast and easy enrollment.



Online

Go to **Medica.com/2024SNBC**.



By mail

Fill out, sign, and mail or fax the enrollment form to the address or number listed below. If you don't have a paper application, you can find one online at **Medica.com/2024SNBC** or request one by calling **1 (888) 221-1825**.

MAIL

Medica AccessAbility Solution
Mail Route CW140
P.O. Box 9310
Minneapolis, MN 55440-9310

FAX

(952) 992-2682

What happens after you enroll?

We'll send you:

- A letter that tells you we've received your enrollment information
- Your member ID card
- A Member Plan Guide to help you make the most of your benefits
- A welcome letter and call from your Care Coordinator

Medica Member Services

1 (800) 373-8335 (toll free) TTY: 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။ ဤတွဲရက်စာတမ်းအားအခမဲ့ဘာသာပြန်ပေးခြင်း အကူအညီလိုအပ်ပါက၊ အထက်ပါဖုန်းနံပါတ်ကိုခေါ်ဆိုပါ။

កំណត់សំគាល់ ។ បើអ្នកត្រូវការជំនួយក្នុងការបកប្រែឯកសារនេះដោយឥតគិតថ្លៃ សូមហៅទូរស័ព្ទតាមលេខខាងលើ ។

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 ntauv no pub dawb, ces hu rau tus najnpawb xov tooj saum toj no.

ဟ်သုဉ်ဟ်သးဘဉ်တက့ၢ်. ဝဲန့ၢ်လိဉ်ဘဉ်တၢ်မၤစၤကလီၤလၢတၢ်ကကျိးထံဝဲဒၣ်လံာ် တီလံာ်မိတခါအံၤန့ၣ်,ကိးဘဉ် လီၤတဲခီၣ်ဂံၢ်လၢထးအံၤန့ၣ်တက့ၢ်.

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

ໂປຣດຊາບ. ຖ້າທ່ານ ທ່ານຕ້ອງການການຊ່ວຍເຫຼືອໃນການແປເອກະສານນີ້ພໍ, ຈົ່ງ ໂທໂປຣໂປຣໂຟຣມາຍເລກຂ້າງເທິງນີ້.

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 (afcelinta) 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. Medica 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

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by Medica. You can file a complaint and ask for help filing a complaint in person or by mail, phone, fax, or email at:

Medica Civil Rights Coordinator
 P.O. Box 9310, Mail Route CP250, Minneapolis, MN 55443-9310
 Toll Free: 1 (888) 347-3630
 TTY: 711
 Fax: 952-992-3422
 Email: civilrightscoordinator@medica.com

Auxiliary Aids and Services: Medica 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 Medica** at 1 (888) 347-3630 (toll free), TTY: 711 or at medica.com/contactmedicaid.

Language Assistance Services: Medica 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 Medica** at 1 (888) 347-3630 (toll free), TTY: 711 or at medica.com/contactmedicaid.

Civil Rights Complaints

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by Medica. You may also contact any of the following 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
- religion (in some cases)

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

Office for Civil Rights, U.S. Department of Health and Human Services
 Midwest Region
 233 N. Michigan Avenue, Suite 240 Chicago, IL 60601
 Customer Response Center: 800-368-1019, TTY: 800-537-7697
 Email: ocrmail@hhs.gov

Minnesota Department of Human Rights (MDHR)

In Minnesota, you have the right to file a complaint with the MDHR if 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
 540 Fairview Avenue North, Suite 201, St. Paul, MN 55104
 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
- religion (in some cases)
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)

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. 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 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

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.



You're not just covered, you're cared for.

Connect with us

Call us at **1 (888) 221-1825** (TTY: **711**) 8 a.m. - 6 p.m. CT, Monday - Friday.

Email us at **MedicaCCPSales@Medica.com**.

Visit us on the web at **Medica.com/2024SNBC**.

Follow us on social media with the handle **@Medica4Me**.



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