



Anthem HealthKeepers Plus
Offered by HealthKeepers, Inc.

A Member Handbook Addition Medicaid Expansion Addendum

We want to let you know about an addition to your member handbook. Please keep this with your handbook so you have the most up-to-date information.

The Commonwealth of Virginia's Medicaid Expansion program, which starts on January 1, 2019, offers Medicaid benefits to more Virginians.

If you're a Medicaid Expansion member, you don't need to do anything differently. You'll be enrolled in the Medallion Medicaid and get the same benefits other members in the program get, with some extra covered benefits too.

What makes you eligible to be a Medicaid Expansion Member?

You're eligible for Medicaid Expansion if you're 19 years of age to 64 years of age and you meet all of the following categories:

- You're not already eligible for Medicare coverage
- You're not already eligible for Medicaid coverage through a mandatory coverage group (you are pregnant or disabled, for example)
- Your income does not exceed 138% of the Federal Poverty Level (FPL)

Medicaid eligibility is determined by your local Department of Social Services (DSS) or the Cover Virginia Central Processing Unit. Contact your local DSS eligibility worker or call Cover Virginia at 1-855-242-8282 or TDD: 1-888-221-1590 with any Medicaid eligibility questions. The call is free. For more information, you can visit Cover Virginia's website at **www.coverva.org**.

Enrollment for a Medicaid Expansion Member

You can change your health plan during the first 90 days of your Medallion program enrollment for any reason. You can also change your health plan during your annual open enrollment period for any reason.

You may contact the Managed Care Helpline at 1-800-643-2273 (TTY 1-800-817-6608) or visit **www.virginiamanagedcare.com** to find out the open enrollment period for your region. You will get a letter from DMAS during the open enrollment period with more information.

Medicaid Expansion benefits and services

As a Medicaid Expansion member, you have a variety of health care benefits and services available to you. You will receive most of your services through the Anthem HealthKeepers Plus plan.

If you're an eligible Medicaid Expansion member, in addition to the standard Medicaid services available to all Medicaid members, you'll also receive the following four health benefits:

- Annual adult wellness exams
- Individual and group smoking cessation counseling
- Nutritional counseling if you are diagnosed with obesity or chronic medical diseases, and
- Recommended adult vaccines or immunizations

We'll also encourage you to take an active role in your health. This may mean taking part in disease management programs, getting a flu shot, quitting smoking or using tobacco/nicotine products, or accessing services that are not typically covered by traditional medical practices like gym memberships or vision services.

If you frequently visit the emergency room, we'll reach out to you to help you address your needs. There may be opportunities to address your needs outside of the emergency room, like in doctor's offices and clinics.

We may also discuss several opportunities with you to help you take advantage of job training, education and job placement assistance to help you find the work situation that is right for you.

What is a Health Screening?

Within four months after you enroll with the Anthem HealthKeepers Plus plan, we'll contact you or your authorized representative via telephone or in person to ask some questions about your health needs and social circumstances. These questions will make up what is called the "Health Screening." The representative will ask about any medical conditions you currently have or have had in the past, your ability to do everyday things, and your living conditions.

Your answers will help us understand your needs and identify whether or not you have medically complex needs.

If you meet the medically complex criteria, you'll transfer from the Medicaid Managed Care Medallion 4.0 program to the CCC Plus program. If it's determined you don't have medically complex needs, you'll remain in the Medallion 4.0

program. Also, if we're unable to contact you, or you refuse to participate in the entire health screening, you'll remain enrolled in the Medallion program. You'll stay with us no matter which program you're in. If you prefer to change health plans, you can change within the first 90 days of enrolling into the Medallion 4.0 program.

If you don't meet medically complex criteria and don't agree, you have a right to submit a complaint or grievance to the Anthem HealthKeepers Plus plan. See the Your Right to File a Complaint (Grievance) section of your member handbook for details.

Please contact us if you need accommodations to participate in the health screening.

Have questions? We're a call away.

If you have any questions about your benefits, Medicaid Expansion or your health screening, call our Member Services team at 1-800-901-0020 (TTY 711) Monday through Friday from 8 a.m. to 8 p.m. Eastern time.

Thanks for being an Anthem HealthKeepers Plus member.

www.anthem.com/vamedicaid

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