Health, Wellness and You

March 2025





INDIVIDUAL MEDICAID MEDICARE "Health, Wellness and You" is the member newsletter for McLaren Health Plan Inc. Medicaid, Healthy Michigan, Individual and Community members, collectively referred to as "members." It is published twice per year by McLaren Health Plan Inc., which shall be referred to as "MHP" throughout this newsletter.

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Customer Service

Monday through Friday, 8 a.m. to 6 p.m. 888-327-0671 (TTY: 711) Fax: 833-540-8648

We want to answer your questions and help you get the care you deserve. Please call Customer Service if you have questions about the content of this newsletter, need a printed copy of anything on our website or need verbal help with the provider directory. We've recently updated member handbooks and would be happy to send you a printed copy upon request. We have free interpretation and translation services available. Call 711 to access the TTY line if you are deaf, hard of hearing or have speech problems. Michigan Relay will assist you.

This service is available 24 hours a day. Call us if you have special vision needs. We also have selfmanagement tools that could help. We are interested in learning if these tools meet your needs. Call us and let us know if you have used them and if they have helped you.



Online

www.McLarenHealthPlan.org

Click on Contact Us in the Featured Links section on the homepage.

Our website contains useful member information, such as our Privacy Notice, our member handbook, provider directories, Rights and Responsibilities statement, healthy reminders, services covered by McLaren Health Plan, what to do when you need a medication, information about our quality programs, our Clinical Practice Guidelines and much more.

Call Customer Service if you want printed copies of anything on our website.

Check Out Your Member Handbook

The MHP Medicaid handbook was recently updated. It has a lot of great information in it. It's available at www.McLarenHealthPlan.org. Please call Customer Service if you've been a member for a while and would like a printed copy of the updated handbook.

Mail

McLaren Health Plan G-3245 Beecher Road Flint, MI 48532

There is a drop box located inside the main entrance for any correspondence required to be sent to McLaren Health Plan. If you need to make a payment to McLaren Health Plan or Health Advantage please use the corresponding lockbox information below. However, if you must make a payment to the office, please mail payments to the address above.

MCLAREN HEALTH ADVANTAGE

P.O. Box 771981 Detroit, MI 48277-1981

MCLAREN HEALTH PLAN

P.O. Box 771982 Detroit, MI 48277-1982

MCLAREN HEALTH PLAN COMMUNITY

P.O. Box 771983 Detroit, MI 48277-1983

Is Your Address Up to Date with MDHHS?

Please report any change in phone number, email or address to the Michigan Department of Health and Human Services (MDHHS) if you are a Medicaid beneficiary. You can do this by going to the MI Bridges website at www.michigan.gov/ mibridges.You will need to create an account by choosing Register if you don't have one. Please report changes in both the Profile section and the Report Changes area. Your local office will use the Report Changes area to update your address for your case. All other McLaren Health Plan members: Please report any changes in phone number, email or address to Customer Service by calling 888-327-0671 (TTY: 711).

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MYCOMMUNITY CONNECT

MyCommunity Connect helps members learn about services offered by McLaren Health Plan. Community ambassadors can connect you with health care, housing, food, transportation and other resources through services offered at www.gethelp.mclaren.org.

For in-person help at a location near you, go to <u>www.mclarenhealthplan.org</u> and click the Community Calendar or scan the QR code below.





MHP BECOMES THE PRESENTING SPONSOR OF THE FLINT FARMERS' MARKET

McLaren Health Plan entered into a partnership with the Flint Farmers' Market to become its presenting sponsor as of Jan. 1.

The partnership allows the plan to collaborate with the market to address food insecurity issues in the community and allow programming to serve members of Genesee County and the surrounding area. "We are thrilled to become the presenting sponsor at the Flint Farmers' Market and connect with the people who visit year around," said Jeff Romback, vice president of Strategic Business Operations at McLaren Health Plan.

"We recognize the success the Market has had with providing access to fresh food for those who need it most in our communities. It's important to us as a health plan to collaborate with organizations where we can help provide needed services and do meaningful work together. We're looking forward to an exciting 2025 at the market!"

The Flint Farmers Market has been owned by Uptown Reinvestment Corporation since 2002. It is open Tuesday, Thursdays and Saturdays from 9 a.m. to 5 p.m.



L-R: Jeff Romback, vice president of Strategic Business Operations at McLaren Health Plan; Greg Viener, president, Mid-Michigan Region, Huntington Bank; Flint Mayor Sheldon Neeley; Tim Herman, president, Flint and Genesee Group; Karianne Martus, Flint Farmers' Market Manager.

MHP PARTNERS WITH MEIJER TO BRING YOU SAVINGS

McLaren Health Plan Medicaid members can enjoy benefits offered by Meijer, including access to fruits, vegetables and additional perks that help stretch the value of your MI Bridges card (EBT-SNAP). To learn more about the food resources available to you as a McLaren Health Plan Medicaid member, call Customer Service at 888-327-0671 (TTY: 711) and ask for a care manager. Some of the EBT-SNAP benefits include:

- Free home delivery with your EBT-SNAP card (valid on www.Meijer.com or in the Meijer app)
- 10% off fresh fruits and vegetables with your EBT-SNAP card
- 40% off fat-free and 1% milk with your EBT-SNAP card

CHECK OUT THE MHP MEMBER REWARDS PROGRAM

Taking care of your health has its rewards! McLaren Health Plan Medicaid and McLaren Medicare members* can earn gift cards for taking care of your health! Services must be completed by Dec. 31, 2025.



Learn more about member rewards by visiting <u>https://www.</u> mclarenhealthplan.org/mclarenhealth-plan/member-rewards-mhp or by scanning the QR code.

*Not all McLaren Health Plan members are eligible to participate in the member rewards program.





NEW MEMBER SURVEY



If you are new to McLaren Health Plan, are near your annual anniversary, or if you've had changes in your health or other circumstances, please complete our new member survey. You can complete it by going to <u>https://www.</u> mclarenhealthplan.org/mclaren-healthplan/new-member-survey-mhp, or call Customer Service at 888-327-0671 (TTY: 711). Completing this survey helps us find out how we can better help you.

'STAY IN TOUCH' BY TAKING OUR SURVEY

We can better coordinate your care if our team at McLaren Health Plan (MHP) knows a little bit about your health and well-being before you start getting services. That's why we'd like you to complete our Staying in Touch survey. We will help you find the right health care services if you tell us about any health conditions or special needs you may have. Making sure you get the best care possible when you need it is important to MHP. This could mean continuing treatment with doctors you are already seeing. We also ask about family members and other factors in your life (stress, ER visits, lifestyle behaviors) that could affect your health. A nurse will contact you, if requested, to help coordinate the best care for your situation after you complete and return the survey. We're here to help.

The survey is on our website at www.McLarenHealthPlan.org. Click on *Health and Wellness* then click on *Staying in Touch* program.

We can send you a paper copy to fill out and mail back to us. Call Customer Service at 888-327-0671 (TTY:711) and we will mail it to you.



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IMPORTANT HEALTH AND WELLNESS VISITS FOR WOMEN

Put these needed appointments on your calendar

Women: Do you make doctor appointments for your kids, spouse, parents or siblings but forget to make them for yourself? Take the time to schedule the following visits with your doctor. Call Customer Service at 888-327-0671 (TTY: 711) if you need help scheduling any appointment. And don't forget — MHP members can see an in-network OB-GYN or certified nurse midwife for routine and preventive health care services without a referral. Women's routine and preventive health care services include prenatal and postpartum care, breast exams, mammograms and Pap tests.

Annual checkup

Make this appointment every year around your birthday. This way you won't forget to do it. Ask your PCP questions. Your PCP will ask you questions about your family history and previous illnesses. Your vital signs will be taken, and your eyes, ears, heart and skin will be checked. Discuss specific health concerns you have. Schedule a mammogram, Pap screening or any blood tests you might need.

Pap screening for cervical cancer

Cervical cancer can affect any woman who is or has been sexually active. It occurs in women who have had the human papilloma virus, or HPV. Many people who are infected have no symptoms. HPV is passed during sex and is most common in women ages 20-24. You can reduce your chances of getting cervical cancer by getting routine Pap screenings and the HPV vaccine. This is a series of two shots given during a six-to-12-month period. If you or your daughter(s) is between the ages of 9 and 26 it is important to consider getting this series of shots. Ask your doctor if the HPV vaccine is right for you.

Get tested for chlamydia

All sexually active women should get tested every year for chlamydia. Why? It's a common sexually transmitted disease that can make women unable to get pregnant. It can harm newborn babies of infected mothers. It can cause serious problems. It's a disease both women and men can get. It's even more important for women under age 25 and males ages 16-18 to be tested. It is easy to get but the good news is it's easy to detect and treat. Most people with chlamydia have no symptoms. Your doctor can give you a simple urine test for chlamydia. The treatment for chlamydia is antibiotics. Your partner also should get tested and treated if necessary. Use a condom every time you have sex to help prevent chlamydia.

Breast health

Do a monthly self-exam of your breasts. Tell your doctor immediately if you notice any changes. For general breast health, maintain a healthy weight, limit alcohol and exercise regularly. All women can get breast cancer, even those with no family history of the disease. You have a higher chance of surviving when the cancer is diagnosed early. Get a mammogram every year beginning at age 50.

Mammogram Incentive - Female members ages 50 and older who get a mammogram can receive a \$20 gift card. MHP sends eligible participants an entry form by mail to return to us once you've received your mammogram. You can also notify Customer Service at 888-327-0671 (TTY: 711) that you've received your mammogram. Program may not be eligible to all members, contact Customer Service to verify your eligibility. Once we receive a claim for your services, your gift card will be mailed to you.

Prenatal and Post-Partum Care

Are you pregnant? You should see your doctor as soon as possible during the first trimester to start pregnancy care. Contact your doctor to make an appointment and find out about pregnancy care scheduling practices. You'll need to know how often to see your doctor and when to contact them if you have questions or concerns. You will have appointments throughout your pregnancy. If you have recently delivered a baby, you need to see your doctor to make sure you are healthy and address any concerns you may have. The post-partum visit should occur within 84 days of birth. Please contact McLaren Health Plan for assistance at 888-327-0671 (TTY: 711).

Maven - Free 24/7 virtual support for pregnancy & postpartum

We're excited to share a new way to help you as you become a parent. Maven provides women and families with 24/7 support while they're pregnant. They can also help once the baby is here. The best part? Maven is included at no cost as part of your McLaren Health Plan. That means no copays and no surprise bills (yes, seriously!) You and your partner have free access to unlimited online appointments and messages with doctors, a dedicated Care Advocate to help you find the right provider for your needs and trusted resources including articles and parenting classes. Join for free!



HIV PREVENTION AND YOU

Pre-exposure prophylaxis (PrEP) is a medicine that can be taken to reduce a person's chances of getting HIV from sex or sharing drug injection equipment. PrEP is for people who do not have HIV but have the chance of getting it. When someone taking PrEP is exposed to HIV through sex or sharing drug injection equipment, the medicines can keep the virus from establishing a permanent infection. Taking PrEP as prescribed by a health care provider can reduce the chances of getting HIV by up to 99% from sex and by at least 74% from sharing drug injection equipment.

Medication also can be taken following a possible exposure to HIV to help prevent transmission of the virus. In such cases, the medications are referred to as post-exposure prophylaxis (PEP) Both PrEP and PEP can be prescribed by a doctor, physician assistant or nurse practitioner.

Learn more: https://www.michigan.gov/mdhhs/ keep-mi-healthy/chronicdiseases/hivsti/ prep?utm_campaign=&utm_medium=email&utm_ source=govdelivery#miprep-michoice



SHOULD YOU BE SCREENED FOR HEPATITIS C?

Hepatitis C is a liver infection caused by the hepatitis C virus (HCV). It's contagious and symptoms may include jaundice, fatigue, nausea, fever and muscle aches. The good news is HCV is curable. McLaren Health Plan covers the drugs used to treat hepatitis C.



ADVOCATE FOR YOUR HEALTH AND SHARE YOUR VOICE

Learn how you can be an advocate in your health care. Learn how your health plan works and about the services you receive. Join us and share your experience on how to improve MHP materials and services:

- Member programs
- Member materials
- Self-service and portal options
- Rides for members

Committee meetings are open to any active member, caregiver and local community partners. To register, call 888-327-0671 (TTY: 711) or <u>www.</u> <u>mclarenhealthplan.org</u> under the Community Calendar.

Quarter 1: Transportation

March 17 – McLaren Northern Demmer Wellness Center (Petoskey), 1-3 pm

March 25 - McLaren Greater Lansing Event Center (Lansing), 1-3 pm

March 28 - McLaren Health Plan (Flint), 2-4 pm

Quarter 2: Food Resources

June - Wayne County, Kalamazoo, Clare

Quarter 3: Housing Resources September – Washtenaw, Kent, Arenac

Quarter 4: Utility and Holiday Resources December – Ingham, Genesee, Oakland

TAKE A LOOK: FREE PROGRAMS FROM MHP

Call 888-327-0671 (TTY: 711) for information about any of these programs or if you do not want to be in any of these programs. Go to <u>McLarenHealthPlan.org</u> and click on Health and Wellness to learn more about these programs.

Food Services

Effective April 1, 2025, Michigan Medicaid and McLaren Health Plan are offering food services to improve your health. You may qualify for one of the services at no cost to you. The food services include:

- Medically-tailored home delivered meals
- Healthy home delivered meals
- Healthy food packs
- Produce prescriptions

Call Customer Service at 888-327-0671 (TTY:711) and ask to speak with your care manager for more information.

Stop Smoking Quit Line

MHP offers support for members who use tobacco or who smoke. Members can call 800-784-8669 for free counseling. Your primary care provider also offers stop-smoking counseling services. Several prescription medications are available to help you. Talk to your doctor about what is best for you.

Here are some useful tips when you're trying to quit smoking.

List key triggers:

- Where and when do you smoke?
- Whom do you smoke with?

Seek help:

- The more help you get, the better your chances of success.
- Be motivated.

Set a stop date:

- Make it a day with low stress.
- Tell your family and friends you are quitting.

Did you know that AFTER you quit smoking:

- Your blood pressure and pulse become normal within 20 minutes.
- Your sense of smell and taste come back.
- The smell of your breath gets better and stained teeth get whiter.
- Your circulation will improve in two or three weeks.
- Smoker's cough and shortness of breath decrease.
- You'll live longer and have a lower risk of heart disease, stroke, lung disease and cancer.

Down With Hypertension

You can be a part of this program if your doctor says you have high blood pressure. All identified members will be mailed information about the program. MHP's pharmacists and nurses offer support to you by phone.

Care Management/Complex Care Management

Every MHP member has a nurse who will help you get the care and services you need to stay healthy and improve your health. Your nurse will help you with difficult health problems and connect you with community support services.

Call your nurse if you think you need a second opinion. You can get a second opinion for an in-network provider. Your nurse can help if you want a second opinion from an out-of-network provider.

An approval is needed for a second opinion from an out -of-network provider. MHP will pay for the services as if they were provided in-network if the second opinion has been approved to the out-of-network provider.

MHP will help you get needed services from an outof-network provider in a timely manner if they are not available from an in-network provider. The services must be covered and medically necessary.

If the services are available from an in-network provider but cannot be delivered timely, MHP will help you get the needed services from an out-of- network provider. The services must be covered and medically necessary.

We will help you take good care of yourself. Call Customer Service at 888-327-0671 (TTY:711) and ask for your nurse.

Diabetes and Asthma Management Programs

MHP has nurses who understand diabetes and asthma. They will work with you to help you understand your diabetes or asthma and provide you with support. Your nurse will keep your doctor informed of your condition and the services we are giving you. It is important you see your doctor regularly to discuss your care.

You will get

- Support from your nurse so you know the best ways to manage your condition & assess your health status
- Newsletters with the most up-to-date information about diabetes or asthma
- Materials that will help you understand and manage your medicine and plan visits to your doctor

You are enrolled in these programs as a free benefit of MHP. Membership in these programs is your choice. You do not have to join. Call us anytime if you don't want to be in the program.

TAKE A LOOK: FREE PROGRAMS FROM MHP

See your doctor regularly if you have diabetes. Ask your doctor to do the following every year:

- An A1c blood test at least twice a year to check how well your blood sugar is being controlled
- Dilated eye exam (this is a covered benefit for members with diabetes)
- Urine test to check for kidney changes
- Foot exam
- Body Mass Index (BMI)
- Blood pressure check
- Cholesterol blood check

These tests are all covered by MHP.

You should have a personal action plan to control your asthma. Go to www.webmd.com/asthma/what-isasthma for tips on how to handle your asthma challenges, asthma triggers, and signs that an asthma attack is about to happen. Visit the American Lung Association at https://www.lung.org/lung-health-diseases/lungdisease-lookup/asthma/managing-asthma/createan-asthma-action-plan to learn more about an asthma action plan (Note: Information from webmd or the American Lung Association does not replace medical advice from your doctor.)

McLaren Miracles

If you are pregnant, call MHP to enroll in our McLaren Miracles program and get a \$10 gift card. You'll talk to a nurse about your pregnancy and your baby's growth and development. You'll learn how to take care of yourself and your baby. Here are some other important things you should know if you're pregnant:

- Take folic acid as directed by your physician before and while you are pregnant to help prevent birth defects.
- A flu shot is the best protection from illness for mother and baby.
- Quit smoking and do not drink alcohol.
- Check with your doctor to make sure you can take your current medications while pregnant.
- Schedule your prenatal visit as soon as you find out you are pregnant. It is important to be seen during your first trimester.
- Go to all your prenatal visits; these are very important to track the health of you and your baby.
- See your doctor within six weeks after having a baby. This is a postpartum visit.

Your postpartum exam is important. You can receive a \$50 gift card if you get a postpartum exam within 7-84 days after delivery. Call Customer Service at

888-327-0671 (TTY: 711) after your postpartum exam is complete and let us know you've had your visit.

Once we receive your provider's claim, the gift card will be mailed to you. If you are a McLaren Health Plan Medicaid member, you have dental coverage. Call us at 888-327-0671 (TTY:711) for more information.

Taking It Off

Our MHP nurses are here to help you if you want to lose weight. Our "Taking it Off" program is for adults and children. Your nurse will provide you with:

- Educational materials mailed to your home at your request
- Phone calls to offer support
- Coordination with your PCP

Do you know your BMI? BMI stands for Body Mass Index. It measures a person's weight and height. It helps to estimate a healthy weight based on how tall a person is. BMI is the most ideal tool used to identify obesity problems. Ask to have your BMI checked next time to visit your doctor.

Membership in these programs is your choice. They're free benefits to you as a member of MHP. You do not have to join. Call us anytime if you don't want to be in any of these programs.

Sickle Cell

Your nurse can assist you with your needs related to Sickle Cell Disease by providing support, education, and resources to help manage your disease and improve your health. For questions or to opt out of this program, contact Customer Service toll free at 1-888-327-0671 (TTY: 711).

MHP Medicaid members earn rewards for managing your sickle cell anemia. MHP members with Sickle Cell disease who have the following services completed by December 31, 2025 can earn:

- 1 PCP visit: \$10 annually
- 1 Transcranial Doppler (TCD) screening: \$50 annually
- 1 Hematologist visit: \$10 annually
- Antibiotic prophylaxis (300 days used) Members age 3 months to 5 years: \$50 annually
- Hydroxyurea (300 days used) Members age 1-18: \$50 annually

Please contact MHP Customer Service at 1-888-327-0671 today to learn more.

*Rewards are in the form of McLaren Visa gift cards. You must report services completed within 90 days of completing the service. You do not have to complete all activities to claim your rewards.

FREE PROGRAMS FROM MHP (cont.)

LGBTQIA+

MHP promotes a culture of inclusivity and diversity of lived experience. Your nurse can assist you with resources and information to help you get the care you need. Contact Customer Service toll free at 1-888-327-0671 (TTY: 711) and ask for your nurse.

Depression: Eyes Wide Open

Eyes Wide Open is a McLaren Health Plan program for members with depression. The program goal is to improve the care of our members with depression by:

- Educating members and providers about the impact of depression
- Increasing screening for depression
- Promoting optimal treatment
- Increasing member compliance with treatment

Members with a diagnosis of depression are automatically enrolled in the Depression Management program. Members can become ineligible if they are incorrectly identified as having a depression diagnosis, are no longer an MHP member (termed/expired) or if the member chooses to opt out of the program. For questions or to opt out of this program, contact Customer Service toll free at 1-888-327-0671 (TTY: 711)

Chronic Kidney Disease

Chronic Kidney Disease (CKD) is permanent kidney damage or decreased level of kidney function for three months or more; 33% of adults in the United States are at risk for kidney disease. That's one in every three people.

Of the estimated thirty-six million American adults with kidney disease, about 90% don't know they have it. Over 80% are unaware of the condition that increases their risk for cardiovascular events and progression to kidney failure and death. (National Kidney Foundation).

Diabetes and hypertension are the leading cause of kidney failure in the United States. Other risk factors of kidney disease include obesity, family history of CKD, history of acute kidney injury, and being a member of a minority race or ethnicity.

- Because CKD is often asymptomatic, many patients are unaware they have the disease until it has progressed to later stages.
- Early identification of CKD creates the opportunity to slow or prevent the progression of this disease and can result in decreased hospitalizations and costs.

Learn more about CKD, the "Are you the 33%?" campaign, and your risks: <u>https://nkfm.org/morris-hood-iii-ckd-and-covid-complications-prevention-initiative/kidney-risk-quiz-campaign-toolkit-2/.</u>

APRIL IS NATIONAL MINORITY HEALTH MONTH



Celebrated every year in April, National Minority Health Month is a time to raise awareness about how important it is to improve the health of racial and ethnic minority communities.

National Negro Health Week was established in 1915 by Booker T. Washington. This was the beginning of what became National Minority Health Month established by U.S. Congress in 2002. The resolution encouraged "all health organizations and Americans to conduct appropriate programs and activities to promote healthfulness in minority and other communities experiencing health disparities."

At McLaren Health Plan, we work to eliminate health disparities in the way we write to you, talk to you and help you get care. Our plan doctors are trained to do the same. It's important to us so we make sure our staff receive training on implicit bias, health equity and culturally linguistically appropriate services.

With engagement, continuous improvement and accountability, we can make sure all people have access to quality health care as we build inclusion, reduce inequities and increase compassion.

PATIENT ADVOCATE AND ADVANCE DIRECTIVE

McLaren Health Plan supports your right to file an Advance Directive according to Michigan law. This document is a written statement of your wishes for medical care. It explains, in advance, what treatments you want or don't want if you have a serious medical condition that prevents you from telling your provider how you want to be treated. Your health care representative also may make medical decisions on your behalf to carry out your wishes if you become incapacitated. Our plan cannot refuse care or otherwise discriminate against a member based on their decision to have or not have an Advance Directive.

The State of Michigan only recognizes an advance directive called a durable power of attorney for health care. To create one, you will need to choose a patient advocate.

This person carries out your wishes and makes decisions for you when you cannot. It is important to choose a person who you know and trust to be your advocate. Make sure you talk with the person to let them know what you want.

Talk to your family and primary care physician about your choices. File a copy of your advance directive with your other important papers. Give a copy to the person you designate as your patient advocate. Ask to have a copy placed in your medical record.

Where to get Durable Power of Attorney for Health Care Forms:

State Bar of Michigan - A Guide to Medical and Legal Decisions: Planning and Your Peace of Mind <u>https://www.legislature.mi.gov/</u> Publications/PeaceofMind.pdf

CaringInfo: Free templates for Michigan <u>www.caringinfo.org/</u>planning/advance-directives/by-state/michigan/

Michigan Power of Attorney Forms (free and downloadable) https://powerofattorney.com/michigan/

For complaints about how your provider follows your wishes, write or call:

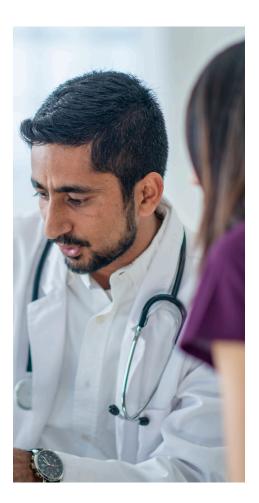
Bureau of Health Professions (BHP), Complaint & Allegation Division P.O. Box 30670 Lansing, MI 48909-8170

(517) 241-2389 or bhpinfo@michigan.gov

The BHP Complaint & Allegation website is <u>www.michigan.gov/</u><u>healthlicense</u> (click on "file a complaint").

For complaints about how your health plan follows your wishes, write or call:

Michigan Department of Insurance and Financial Services Toll free at (877) 999-6442 or <u>www.michigan.gov/difs</u>



HOW MHP MAKES MEDICAL DECISIONS ABOUT YOUR CARE

McLaren Health Plan makes decisions about the use of medical services based on whether they are appropriate and a covered benefit. No one at MHP is rewarded in any way for making decisions to deny you medical services. That means doctors or employees. They are not rewarded in any way for encouraging underuse of your benefits. We want you to get the care you need. We will always look out for your best interests. Please call Customer Service if you have any questions.

ACCESS TO COVERED SERVICES AND NETWORK ADEQUACY

McLaren Health Plan provides our Medicaid and Healthy Michigan Plan members with a provider network adequate to serve the medical needs of our members. MHP continually looks at our provider network to make sure that we meet time and distance standards. Time and distance standards are measured in several ways:

- 1. Geographically by county designation measured by miles and minutes
- 2. Availability of specific number of provider types in each county within specified miles and minutes requirements:
 - Primary Care Providers, Adult and Pediatric
 - Hospitals
 - OB/GYN Providers
 - Cardiology Providers
 - Neurology Providers
 - Oncology Providers (Medical, Surgical, Radiation)
 - Orthopedic and Orthopedic Surgery Providers
 - Occupational/Physical/Speech Therapy
 - Outpatient Clinical Mental Health Providers, Adult and Pediatric
 - Psychiatrists, Adult and Pediatric
 - Dental Providers
 - » General Dentist
 - » Endodontist
 - » Oral Surgeons
 - » Periodontist
 - » Prosthodontic Provider
 - Pharmacy

If you have any questions about the time and distance standards as they apply to the above listed provider types, please call Customer Service at 888-327-0671 (TTY:711) for additional information.

TIMELY ACCESS STANDARDS AND APPOINTMENT WAIT TIMES

McLaren Health Plan educates and carefully reviews our provider network to make sure that providers have timely access standards. McLaren Health Plan sends surveys to our providers and makes phone calls to providers to make sure they have appointment availability. The types of medical appointment timeliness standards that we follow are listed below:

Timely Access Standards for Medical Appointments

TYPE OF APPOINTMENT	LENGTH OF TIME
Emergency Services	Immediately, 24 hours per day, 7 days per week
Urgent Care	Within 48 hours
Routine Care	Within 30 business days of request
Non-Urgent Symptomatic Care	Within 7 business days of request
Specialty Care	Within 6 weeks of request
Acute Specialty Care	Within 5 business days of request
Mental Health	Routine care within 10 business days of request
	Non-life-threatening emergency within 6 hours of request
	Urgent care within 48 hours of request
Prenatal Care - Initial Prenatal Appointment Appointment should be with an OB/GYN, Primary Care Provider, Certified Nurse Midwife, or other Advanced Practice Registered Nurse with experience and training in prenatal care	If in the first or second trimester of pregnancy – within 7 business days of being identified as pregnant If the in the third trimester of pregnancy – within 3 business days of being identified as pregnant If there is any indication
	of the pregnancy being high risk (regardless of the trimester) – within 3 business days

TIMELY ACCESS STANDARDS AND APPOINTMENT WAIT TIMES (CONT.)

Delta Dental, on behalf of McLaren Health Plan, educates their providers and reviews the following dental appointment timeliness standards:

Timely Access Standards for Dental Appointments

TYPE OF APPOINTMENT	LENGTH OF TIME
Emergency Dental Services	Immediately, 24 hours per day, 7 days per week
Urgent Dental Care	Within 48 hours
Routine Dental Care	Within 21 business days of request
Preventive Dental Services	Within 6 weeks of request
Initial Dental Appointment	Within 8 weeks of request

If you have any questions about the timely access standards and appointment wait times as listed above, please call Customer Service at 888-327-0671 (TTY:711) for additional information.

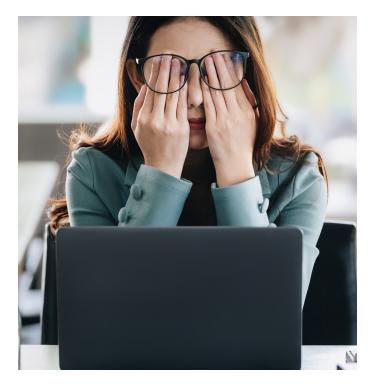
Online Tools Help Manage Your Health

There are self-management tools online that can help you manage your health. They help provide insight about risk factors you may have for certain conditions. They can help reduce that risk and maintain low risk. The tools are interactive and focus on wellness and prevention. MHP offers self-management tools at www. McLarenHealthPlan.org; click on Health and Wellness. Call 888-327-0671 (TTY: 711) and ask to speak to your nurse for additional support. Go to www.webmd.com for health tips and wellness updates. Click on Conditions for risks, symptoms and treatments related to several health conditions. There's also information about physical activity, eating healthy, how to manage stress, and depression. Please remember, the advice received online does not replace the medical advice from your doctor.



SUICIDE PREVENTION HOTLINE NUMBER AVAILABLE

When it comes to a mental health crisis, one call can save a life. Dial 988 to connect to the National Suicide Prevention Lifeline when seeking mental health assistance. Remember 988 the same way you remember 911 and teach your family and friends this number. Knowing whom to call during an emergency ensures people in crisis will get the help they need, when they need it.



DO YOU NEED HELP APPLYING FOR SOCIAL SECURITY BENEFITS?

MHP can help you apply for social security benefits. Please contact Customer Service at 888-327-0671 (TTY: 711) and ask to speak with your nurse. Your nurse will gather some information from you and make a referral to Centauri Health Solutions. Someone from Centauri Health Solutions will contact you (if you agree) to help you apply for additional benefits.

TRANSITION TO ADULTHOOD

As your teen moves into adulthood, the thought of moving care from his or her pediatrician to an adult PCP can seem challenging. MHP can assist you and your teen with choosing an adult PCP. Please call us at 888-327-0671 (TTY: 711) and allow us to help with this transition of care.

TRANSITIONS OF CARE

Are you new to McLaren Health Plan? If you are a new member, you can keep your out-of-network doctors and services for at least 90 days. This may help with your medical health, behavioral health and pharmacy drug needs.

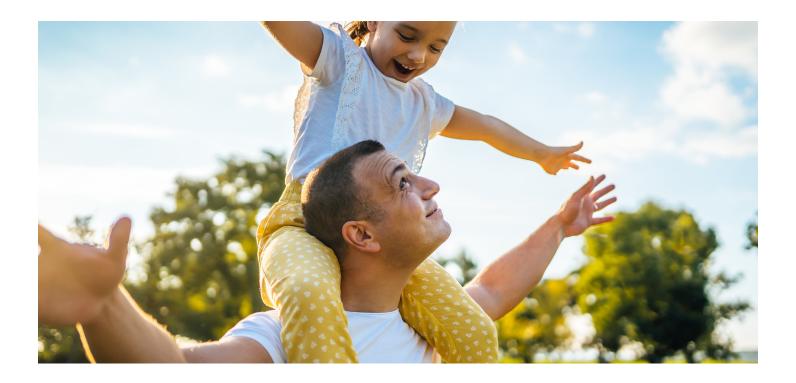
You can keep seeing your current doctor through your pregnancy and postpartum. You can keep seeing your current doctor if you are getting care for certain chronic diseases. MHP will not approve ongoing care by an out-of-network doctor if:

- Your doctor only wants to keep an eye on an illness
- The doctor has an issue that could cause you harm
- The doctor says they will not see you any more
- You started seeing the doctor after you enrolled with MHP
- The doctor does not meet MHP's standards

Our Transitions of Care Policy is posted on our website at <u>Transitions of Care Policy | McLaren</u> <u>Health Plan</u>. McLaren Health Plan can help you choose new in-network doctors. We can also help you get the services you need. You or your doctor can call McLaren Health Plan at 888-327-0671.

FIND OUT ABOUT MHP'S QUALITY PROGRAMS

McLaren Health Plan works hard to provide many free, quality programs for you. We look for ways to improve and we measure how we deliver services. One way is through scores we get based on the care you receive. Our main goal is to provide you with high quality health care that meets your needs. Go to <u>https://</u> www.mclarenhealthplan.org/mclaren-health-plan/ <u>quality-programs-mhp-members</u> to view the Medicaid Key Quality Measures Update and the Quality Improvement Update.



THE IMPORTANCE OF FOLLOW-UP CARE AFTER AN EMERGENCY

Proper care following a hospitalization or Emergency Department visit is important. If you have been hospitalized or visited an Emergency Department for a mental health diagnosis, or substance use issues please follow up with your doctor as soon as possible (within 7-30 days) of discharge or visit to the Emergency Department.

CULTURALLY AND LINGUISTICALLY APPROPRIATE SERVICES

In addition to the programs for 2025, MHP is committed to providing you with inclusive and equitable health care. As part of this commitment, MHP will continue asking you about your race, ethnicity, preferred language, gender, sexual orientation, and pronouns. Having this information will help us make sure you have access to the highest quality of care based on your unique needs.

We want to be clear that providing this information is entirely voluntary, and you have the option to decline to answer any or all questions. We respect and honor the privacy and confidentiality of our members, and we will never share this information with anyone outside of our healthcare team without your explicit consent.

Thank you for your understanding and support as we work to provide the best possible care for you and your loved ones.

HELP PREVENT FRAUD, WASTE AND ABUSE

McLaren Health Plan works hard to prevent fraud, waste and abuse. We follow state and federal laws about fraud, waste and abuse. Examples of fraud, waste and abuse by a member include:

- Changing a prescription form
- Changing medical records
- Changing referral forms
- Letting someone else use their MHP ID card to get health care benefits
- Resale of prescriptions

Examples of fraud, waste and abuse by a doctor include:

- Falsifying his or her credentials
- Billing for care not given
- Billing more than once for the same service
- Performing services that are not needed
- Not ordering services that are medically necessary
- Prescribing medicine that is not needed

Call MHP's Fraud and Abuse line at 866-866-2135 if you think a doctor, other health care provider or member might be committing fraud, waste or abuse. You can email MHP's Compliance department at MHPcompliance@McLaren.org.

You also can write to MHP at:

McLaren Health Plan Inc. Attn: Compliance P.O. Box 1511 Flint, MI 48501-1511



Contact the State of Michigan if you think a member has committed fraud, waste or abuse. Here's how:

- Fill out a fraud referral form at <u>mdhhs.</u> <u>michigan.gov/Fraud/</u> OR
- Call the MDHHS office in the county where you think the fraud, waste or abuse took place OR
- Call the MDHHS office in the county where the member lives

Contact the Michigan Department of Health and Human Services Office of Inspector General if you think a doctor or other health care provider has committed fraud, waste or abuse. Here's how:

- Call them at 855-MI-FRAUD (855-643-7283) OR
- Write to them at Office of Inspector General, P.O. Box 30062, Lansing, MI 48909

Help Protect Yourself From Fraud

You might be the target of a fraud scheme if you receive medical supplies that you or your doctor did not order.

Identity theft can lead to higher health care costs and personal financial loss. Don't let anybody steal your identity.

Current fraud schemes to be on the lookout for include:

- Refuse medical supplies you did not order.
- Return unordered medical supplies that are shipped to your home.
- Report companies that send you these items.
- You are one of the first lines of defense against fraud. Do your part and report services or items that you have been billed for but did not receive.
- Review your plan explanations of benefits (EOBs) and bills from physicians.
- Make sure you received the services or items billed.
- Check the number of services billed.
- Ensure the same service has not been billed more than once.

YOUR PRIVATE DATA AND HOW WE PROTECT IT

MHP has policies that cover who can see and use private data about you. This includes your race or ethnicity and what language you speak.

This is how MHP protects your data:

- We keep your paper documents in locked file cabinets.
- We keep electronic data on physically secure media.
- We keep electronic data in files with passwords.
- Only MHP staff who need to know this information will have it.

This is how MHP uses your data:

- To help with health care disparities
- To create programs to improve your health.
- To create outreach materials.
- To tell your provider about your language, cultural, or other needs that have to do with your care.
- To tell your provider to help improve health outcomes.

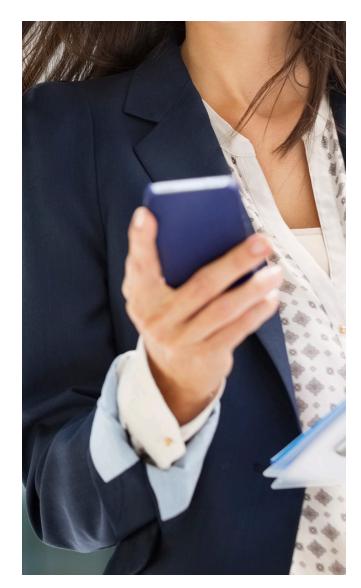
MHP will not use your data:

- For underwriting, setting rates or benefit decisions
- To give to those who shouldn't have it.

Do Your Part!

- Never give out your Social Security number, health plan numbers or banking information to someone you do not know
- Carefully review your MHP Explanation of Benefits (EOBs) to ensure the information is correct
- Know that free services DO NOT require you to give your MHP ID number to anyone

Share this information with your friends. Please call Customer Service at 888-327-0671 (TTY: 711) to discuss benefit, coverage or claims payment concerns.





G-3245 Beecher Road Flint, MI 48532