

Meridian Medicare-Medicaid Plan (MMP) offered by Meridian Health Plan of Illinois, Inc

Annual Notice of Changes for 2023

Introduction

You are currently enrolled as a member of Meridian Medicare-Medicaid Plan (MMP). Next year, there will be changes to the plan's benefits, coverage, rules and costs. This *Annual Notice of Changes* tells you about the changes and where to find more information about them. To get more information about costs, benefits, or rules please review the *Member Handbook*, which is located on our website at mmp.ILmeridian.com. Key terms and their definitions appear in alphabetical order in the last chapter of the *Member Handbook*.

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If you have questions, please call Meridian Member Services at 1-855-580-1689 (TTY users should call 711). Hours are from Monday through Friday, 8 a.m. to 8 p.m. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.ILmeridian.com.



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A. Disclaimers

- ❖ This is not a complete list. The benefit information is a brief summary, not a complete description of benefits. For more information contact the plan or read the Member Handbook.
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B. Reviewing your Medicare and Medicaid coverage for next year

It is important to review your coverage now to make sure it will still meet your needs next year. If it does not meet your needs, you may be able to leave the plan. Refer to section F2 for more information.

If you leave our plan, you will still be in the Medicare and Medicaid programs as long as you are eligible.

- You will have a choice about how to get your Medicare benefits (refer to page 14).
- You will get your Medicaid benefits through fee-for-service or a Health*Choice* Illinois Medicaid Managed Long-Term Services and Supports (MLTSS) health plan (refer to page 16 for more information).

If you have questions, please call Meridian Member Services at 1-855-580-1689 (TTY users should call 711). Hours are from Monday through Friday, 8 a.m. to 8 p.m. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.ILmeridian.com.



B1. Additional resources

- **ATTENTION:** If you speak Spanish, language assistance services, free of charge, are available to you. Call Meridian Medicare-Medicaid Plan (MMP) at 1-855-580-1689 (TTY users should call 711). Hours are from Monday through Friday, 8 a.m. to 8 p.m. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free.
- **ATENCIÓN:** Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-855-580-1689 (los usuarios de TTY deben llamar al 711). Los representantes están disponibles para ayudarle de <lunes a viernes de 8 a. m. a 8 p. m. Los fines de semana y los días feriados estatales o federales, es posible que se le solicite que deje un mensaje. Su llamada será devuelta dentro del siguiente día hábil>. La llamada es gratis.
- You can get this information for free in other formats, such as large print, braille, or audio. Call 1-855-580-1689 (TTY users should call 711), Monday through Friday, 8 a.m. to 8 p.m. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free.
- To make a standing request, change a standing request or make a one-time request for materials in a language other than English or in an alternate format, please call Meridian Medicare-Medicaid Plan (MMP) at 1-855-580-1689 (TTY users should call 711). We will document your choice. Hours are from Monday through Friday, 8 a.m. to 8 p.m. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free.

B2. Information about Meridian Medicare-Medicaid Plan (MMP)

- Meridian Medicare-Medicaid Plan (MMP) is a health plan that contracts with both Medicare and Illinois Medicaid to provide benefits of both programs to enrollees.
- Coverage under Meridian Medicare-Medicaid Plan (MMP) is qualifying health coverage called “minimum essential coverage.” It satisfies the Patient Protection and Affordable Care Act’s (ACA) individual shared responsibility requirement. Visit the Internal Revenue Service (IRS) website at

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www.irs.gov/Affordable-Care-Act/Individuals-and-Families for more information on the individual shared responsibility requirement.

- Meridian Medicare-Medicaid Plan (MMP) is offered by Meridian Health Plan of Illinois, Inc. When this *Annual Notice of Changes* says “we,” “us,” or “our,” it means Meridian Health Plan of Illinois, Inc. When it says “the plan” or “our plan,” it means Meridian Medicare-Medicaid Plan (MMP).



If you have questions, please call Meridian Member Services at 1-855-580-1689 (TTY users should call 711). Hours are from Monday through Friday, 8 a.m. to 8 p.m. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.ILmeridian.com.

B3. Important things to do:

- **Check if there are any changes to our benefits and costs that may affect you.**
 - Are there any changes that affect the services you use?
 - It is important to review benefit and cost changes to make sure they will work for you next year.
 - Look in sections E1 and E2 for information about benefit and cost changes for our plan.
- **Check if there are any changes to our prescription drug coverage that may affect you.**
 - Will your drugs be covered? Are they in a different tier? Can you continue to use the same pharmacies?
 - It is important to review the changes to make sure our drug coverage will work for you next year.
 - Look in section E2 for information about changes to our drug coverage.
- **Check if your providers and pharmacies will be in our network next year.**
 - Are your doctors, including your specialists, in our network? What about your pharmacy? What about the hospitals or other providers you use?
 - Look in section D for information about our *Provider and Pharmacy Directory*.
- **Think about your overall costs in the plan.**
 - How much will you spend out-of-pocket for the services and prescription drugs you use regularly?
 - How do the total costs compare to other coverage options?
- **Think about whether you are happy with our plan.**

If you have questions, please call Meridian Member Services at 1-855-580-1689 (TTY users should call 711). Hours are from Monday through Friday, 8 a.m. to 8 p.m. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.ILmeridian.com.



If you decide to stay with Meridian Medicare-Medicaid Plan (MMP):

If you want to stay with us next year, it's easy – you don't need to do anything. If you don't make a change, you will automatically stay enrolled in our plan.

If you decide to change plans:

If you decide other coverage will better meet your needs, you may be able to switch plans (refer to section F2 for more information). If you enroll in a new plan, your new coverage will begin on the first day of the following month. Look in section F2, page 14 to learn more about your choices.

C. Changes to the plan's name

On January 1, 2022, our plan name changed from MeridianComplete (Medicare-Medicaid Plan) to Meridian Medicare-Medicaid Plan (MMP).

Meridian will send you a new Member ID Card by mail. You may also receive more mailings with the new plan name.

D. Changes to the network providers and pharmacies

Our provider and pharmacy networks have changed for 2023.

Please review the 2023 *Provider and Pharmacy Directory* to find out if your providers or pharmacy are in our network. An updated *Provider and Pharmacy Directory* is located on our website at mmp.ILmeridian.com. You may also call Member Services at 1-855-580-1689 (TTY:711) for updated provider information or to ask us to mail you a *Provider and Pharmacy Directory*. Hours are from Monday through Friday, 8 a.m. to 8 p.m. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day.

It is important that you know that we may also make changes to our network during the year. If your provider does leave the plan, you have certain rights and protections. For more information, refer to Chapter 3 of your *Member Handbook*.

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E. Changes to benefits and costs for next year

E1. Changes to benefits and costs for medical services

We are changing our coverage for certain medical services and what you pay for these covered medical services next year. The following table describes these changes.

	2022 (this year)	2023 (next year)
Diabetes supplies and services	<p>You pay a \$0 copay</p> <p>Covered diabetic glucometer and supplies are not limited to one brand.</p>	<p>You pay a \$0 copay</p> <p>Diabetic glucometer and supplies are limited to OneTouch when obtained at a Pharmacy. Other brands and continuous glucose monitoring systems are not covered unless pre-authorized.</p> <p>Quantity limits may apply.</p>
<p>Meal Benefit</p> <p>(This section is continued on the next page)</p>	<p>Meal Benefit is not covered.</p>	<p>You pay a \$0 copay</p> <p>The Plan offers home-delivered meals immediately following an inpatient hospital stay to aid in a member's recovery. The total post-acute benefit offers 3 meals per day with a duration of 14 days, having a maximum of 42 meals per occurrence for an unlimited number of occurrences per year.</p> <p>The Plan also offers home-delivered meals as part of a supervised program designed to</p>

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	2022 (this year)	2023 (next year)
Meal Benefit		<p>transition members with chronic conditions to lifestyle modifications. The member must have chronic heart failure, COPD, AIDS, Asthma, CAD, Diabetes, and/or Hypertension to qualify for the benefit.</p> <p>The total chronic meals benefit is 3 meals per day for up to 28 days for a maximum of 84 meals per month. The chronic meals benefit can be received for up to 3 months.</p> <p>A referral is required.</p>
Nursing Home Services	<p>You pay a \$0 copay</p> <p>The maximum amounts of "patient pay" will vary facility-to-facility and month-to-month depending on the specific facility rate and the number of days in each month.</p> <p>The Maximum Patient Pay Amount for NHS and IMDS is \$11,470.</p>	<p>You pay a \$0 copay</p> <p>The maximum amounts of "patient pay" will vary facility-to-facility and month-to-month depending on the specific facility rate and the number of days in each month.</p> <p>The Maximum Patient Pay Amount for NHS and IMDS is \$12,373.</p>
Over-the-Counter (OTC) Items (This section is continued on the next page)	<p>You pay a \$0 copay</p> <p>As an extra benefit, our plan covers up to \$25 per calendar</p>	<p>You pay a \$0 copay</p> <p>As an extra benefit, our plan covers up to \$50 per calendar month for eligible over-the-counter</p>

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	2022 (this year)	2023 (next year)
Over-the-Counter (OTC) Items	<p>month for eligible over-the-counter</p> <p>(OTC) items available via mail and in select CVS pharmacy retail stores.</p> <p>You can order up to three of the same items per calendar month unless otherwise noted in the catalog. There is no limit on the number of total items in your order.</p> <p>Any unused amount cannot be carried over to the next benefit period.</p> <p>Multiples of single items may be limited, per order.</p> <p>Please contact the plan at the number at the bottom of the page for more information.</p>	<p>(OTC) items available via mail and in select CVS pharmacy retail stores.</p> <p>OTC benefits do not include any Medicaid-OTCs. Members may purchase eligible items from participating locations or through the plan's catalog for delivery to their home.</p> <p>Any unused amount cannot be carried over to the next benefit period.</p> <p>Please contact the plan at the number at the bottom of the page for more information.</p>

E2. Changes to prescription drug coverage

Changes to our Drug List

An updated *List of Covered Drugs* is located on our website at mmp.ILmeridian.com. You may also call Member Services at 1-855-580-1689 (TTY: 711) for updated drug information or to ask



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us to mail you a *List of Covered Drugs*. Hours are from Monday through Friday, 8 a.m. to 8 p.m. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day.

The *List of Covered Drugs* is also called the “Drug List.”

We made changes to our Drug List, including changes to the drugs we cover and changes to the restrictions that apply to our coverage for certain drugs.

Review the Drug List to **make sure your drugs will be covered next year** and to find out if there will be any restrictions.

If you are affected by a change in drug coverage, we encourage you to:

- Work with your doctor (or other prescriber) to find a different drug that we cover.
 - You can call Member Services at 1-855-580-1689 (TTY: 711) to ask for a list of covered drugs that treat the same condition. Hours are from Monday through Friday, 8 a.m. to 8 p.m. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day.
 - This list can help your provider find a covered drug that might work for you.
- Work with your doctor (or other prescriber) and ask the plan to make an exception to cover the drug.
 - You can ask for an exception before next year and we will give you an answer within 72 hours after we get your request (or your prescriber’s supporting statement).
 - To learn what you must do to ask for an exception, refer to Chapter 9 of the *2023 Member Handbook* or call Member Services at 1-855-580-1689 (TTY: 711). Hours are from Monday through Friday, 8 a.m. to 8 p.m. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day.
 - If you need help asking for an exception, you can contact Member Services or your care coordinator. Refer to Chapter 2 and 3 Chapter of the *Member Handbook* to learn more about how to contact your care coordinator.
- Ask the plan to cover a temporary supply of the drug.

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- In some situations, we will cover a **temporary** supply of the drug during the first 90 days of the calendar year.
- This temporary supply will be for up to 30 days of medication at a retail pharmacy and at a long-term care pharmacy, up to 31 days. (To learn more about when you can get a temporary supply and how to ask for one, refer to Chapter 5 of the *Member Handbook*.)
- When you get a temporary supply of a drug, you should talk with your doctor to decide what to do when your temporary supply runs out. You can either switch to a different drug covered by the plan or ask the plan to make an exception for you and cover your current drug.
- If we approved your formulary exception in 2022, your authorization may still be valid. Please refer to your approval letter which contains the end date of your formulary exception. If you cannot find your approval letter or have any questions related to the timeframe of approvals, please reference the phone numbers provided in this document and contact our Member Services department.

Changes to prescription drug costs

There are no changes to the amount you pay for prescription drugs in 2023. Read below for more information about your prescription drug coverage.

We moved some of the drugs on the Drug List to a lower or higher drug tier. To find out if your drugs will be in a different tier, look them up in the Drug List.

The following table shows your costs for drugs in each of our 3 drug tiers.



If you have questions, please call Meridian Member Services at 1-855-580-1689 (TTY users should call 711). Hours are from Monday through Friday, 8 a.m. to 8 p.m. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.ILmeridian.com.

	2022 (this year)	2023 (next year)
<p>Drugs in Tier 1 (Generic Drugs)</p> <p>Cost for a one-month supply of a drug in Tier 1 that is filled at a network pharmacy</p>	<p>Your copay for a one-month (30-day) supply is \$0 per prescription.</p>	<p>Your copay for a one-month (30-day) supply is \$0 per prescription.</p>
<p>Drugs in Tier 2 (Brand Drugs)</p> <p>Cost for a one-month supply of a drug in Tier 2 that is filled at a network pharmacy</p>	<p>Your copay for a one-month (30-day) supply is \$0 per prescription.</p>	<p>Your copay for a one-month (30-day) supply is \$0 per prescription.</p>
<p>Drugs in Tier 3 (Non-Medicare Prescription and Over-the-Counter Drugs)</p> <p>Cost for a one-month supply of a drug in Tier 3 that is filled at a network pharmacy</p>	<p>Your copay for a one-month (30-day) supply is \$0 per prescription.</p>	<p>Your copay for a one-month (30-day) supply is \$0 per prescription.</p>

Important Message About What You Pay for Vaccines – Our plan covers most Part D vaccines at no cost to you. Call Member Services for more information.



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F. How to choose a plan

F1. How to stay in our plan

We hope to keep you as a member next year.

You do not have to do anything to stay in your health plan. If you do not sign up for a different Medicare-Medicaid Plan, change to a Medicare Advantage Plan, or change to Original Medicare, you will automatically stay enrolled as a member of our plan for 2023.

F2. How to change plans

If you want to keep getting your Medicare and Medicaid benefits together in a single plan, you can join a different Medicare-Medicaid Plan. You can enroll in the new Medicare-Medicaid Plan by calling Illinois Client Enrollment Services Monday through Friday from 8 a.m. to 6 p.m. at 1-877-912-8880. TTY users should call 1-866-565-8576. The call and help are free.

You can end your membership at any time during the year by enrolling in another Medicare Advantage Plan, enrolling in another Medicare-Medicaid Plan, or moving to Original Medicare.

F3. What if you don't want to join a different Medicare-Medicaid Plan

If you do not want to enroll in a different Medicare-Medicaid Plan after you leave Meridian Medicare-Medicaid Plan (MMP), you will return to getting your Medicare and Medicaid services separately.

F4. How you will get Medicare services

You will have three options for getting your Medicare services. By choosing one of these options, you will automatically end your membership in our Medicare-Medicaid Plan:

If you have questions, please call Meridian Member Services at 1-855-580-1689 (TTY users should call 711). Hours are from Monday through Friday, 8 a.m. to 8 p.m. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.ILmeridian.com.



<p>1. You can change to:</p> <p>A Medicare health plan, such as a Medicare Advantage Plan or a Program of All-inclusive Care for the Elderly (PACE)</p>	<p>Here is what to do:</p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> • Call the Senior Health Insurance Program (SHIP) at 1-800-252-8966 Monday through Friday from 8:30 a.m. to 5 p.m. TTY users should call 1-888-206-1327. The call and help are free. <p>You will automatically be disenrolled from Meridian Medicare-Medicaid Plan (MMP) when your new plan's coverage begins.</p>
<p>2. You can change to:</p> <p>Original Medicare with a separate Medicare prescription drug plan</p>	<p>Here is what to do:</p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> • Call the Senior Health Insurance Program (SHIP) at 1-800-252-8966 Monday through Friday from 8:30 a.m. to 5 p.m. TTY users should call 1-888-206-1327. The call and help are free. <p>You will automatically be disenrolled from Meridian Medicare-Medicaid Plan (MMP) when your Original Medicare coverage begins.</p>

If you have questions, please call Meridian Member Services at 1-855-580-1689 (TTY users should call 711). Hours are from Monday through Friday, 8 a.m. to 8 p.m. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.ILmeridian.com.



<p>3. You can change to:</p> <p>Original Medicare without a separate Medicare prescription drug plan</p> <p>NOTE: If you switch to Original Medicare and do not enroll in a separate Medicare prescription drug plan, Medicare may enroll you in a drug plan, unless you tell Medicare you don't want to join.</p> <p>You should only drop prescription drug coverage if you have drug coverage from another source, such as an employer or union. If you have questions about whether you need drug coverage, call your Senior Health Insurance Program (SHIP) at 1-800-252-8966. TTY users should call 1-888-206-1327.</p>	<p>Here is what to do:</p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> • Call the Senior Health Insurance Program (SHIP) at 1-800-252-8966 Monday through Friday from 8:30 a.m. to 5 p.m. TTY users should call 1-888-206-1327. The call and help are free. <p>You will automatically be disenrolled from Meridian Medicare-Medicaid Plan (MMP) when your Original Medicare coverage begins.</p>
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G. How you will get Medicaid services

If you leave the Medicare-Medicaid Plan, you will either get your Medicaid services through fee-for-service or be required to enroll in the HealthChoice Illinois Managed Long-Term Services and Supports (MLTSS) program to get your Medicaid services.

If you are not in a nursing facility or enrolled in a Home and Community-Based Services (HCBS) Waiver, you will get your Medicaid services through fee-for-service. You can use any provider that accepts Medicaid and new patients.

If you are in a nursing facility or are enrolled in an HCBS Waiver, you will be required to enroll in the HealthChoice Illinois MLTSS program to get your Medicaid services.

To choose a HealthChoice Illinois MLTSS health plan, you can call Illinois Client Enrollment Services at 1-877-912-8880 from 8 a.m. to 6 p.m. Monday through Friday. TTY users should call 1-866-565-8576. Tell them you want to leave Meridian Medicare-Medicaid Plan (MMP) and join a HealthChoice Illinois MLTSS health plan.

If you don't pick a HealthChoice Illinois Managed Long-Term Services and Supports (MLTSS) health plan, you will be assigned to our company's HealthChoice Illinois MLTSS health plan.



If you have questions, please call Meridian Member Services at 1-855-580-1689 (TTY users should call 711). Hours are from Monday through Friday, 8 a.m. to 8 p.m. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.ILmeridian.com.

After you are enrolled in a HealthChoice Illinois MLTSS health plan, you will have 90 days to switch to another HealthChoice Illinois MLTSS health plan.

You will get a new Member ID Card, a new *Member Handbook*, and a new *Provider and Pharmacy Directory* from your HealthChoice Illinois MLTSS health plan.

H. How to get help

H1. Getting help from Meridian

Questions? We're here to help. Please call Member Services at 1-855-580-1689 (TTY only, call 711). We are available for phone calls Monday through Friday, 8 a.m. to 8 p.m. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day.

Your 2023 Member Handbook

The *2023 Member Handbook* is the legal, detailed description of your plan benefits. It has details about next year's benefits and costs. It explains your rights and the rules you need to follow to get covered services and prescription drugs.

The *2023 Member Handbook* will be available by October 15. An up-to-date copy of the *2023 Member Handbook* is available on our website at mmp.ILmeridian.com. You may also call Member Services at 1-855-580-1689 (TTY: 711) to ask us to mail you a *2023 Member Handbook*. Hours are from Monday through Friday, 8 a.m. to 8 p.m. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day.

Our website

You can also visit our website at mmp.ILmeridian.com. As a reminder, our website has the most up-to-date information about our provider and pharmacy network (*Provider and Pharmacy Directory*) and our Drug List (*List of Covered Drugs*).

H2. Getting help from Illinois Client Enrollment Services

Illinois Client Enrollment Services is able to help you with questions related to your Meridian Medicare-Medicaid Plan (MMP) membership. If you want to go back to getting your Medicare and Medicaid services separately or switch to a different Medicare-Medicaid Plan, Illinois Client Enrollment Services is available to help. You can call Illinois Client Enrollment Services at 1-877-912-8880, Monday through Friday from 8 a.m. to 6 p.m. TTY users should call 1-866-565-8576. The call and help are free.

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H3. Getting help from the Illinois Long-Term Care Ombudsman Program

The Illinois Long-Term Care Ombudsman Program is an ombudsman program that can help you if you are having a problem with Meridian Medicare-Medicaid Plan (MMP). The ombudsman's services are free. The Illinois Long-Term Care Ombudsman Program:

- is an ombudsman program that works as an advocate on your behalf. They can answer questions if you have a problem or complaint and can help you understand what to do.
- makes sure you have information related to your rights and protections and how you can get your concerns resolved.
- is not connected with us or with any insurance company or health plan.

You can call the Illinois Long-Term Care Ombudsman Program at 1-800-252-8966 Monday through Friday from 8:30 a.m. to 5 p.m. TTY users should call 1-888-206-1327. The call and help are free.

H4. Getting help from the Senior Health Insurance Assistance Program (SHIP)

You can also call the Senior Health Insurance Program (SHIP). The SHIP counselors can help you understand your Medicare-Medicaid Plan choices and answer questions about switching plans. The SHIP is not connected with us or with any insurance company or health plan. You can call the SHIP at 1-800-252-8966 Monday through Friday from 8:30 a.m. to 5 p.m. TTY users should call 1-888-206-1327. The call and help are free.

H5. Getting help from Medicare

To get information directly from Medicare you can call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

Medicare Website

You can visit the Medicare website (www.medicare.gov). If you choose to disenroll from your Medicare-Medicaid Plan and enroll in a Medicare Advantage plan, the Medicare website has information about costs, coverage, and quality ratings to help you compare Medicare Advantage plans.

You can find information about Medicare Advantage plans available in your area by using the Medicare Plan Finder on the Medicare website. (To view the information about plans, refer to www.medicare.gov and click on "Find plans.")

If you have questions, please call Meridian Member Services at 1-855-580-1689 (TTY users should call 711). Hours are from Monday through Friday, 8 a.m. to 8 p.m. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.ILmeridian.com.



Medicare & You 2023

You can read *Medicare & You 2023* handbook. Every year in the fall, this booklet is mailed to people with Medicare. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare.

If you don't have a copy of this booklet, you can get it at the Medicare website (www.medicare.gov/Pubs/pdf/10050-medicare-and-you.pdf) or by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

H6. Getting help from Medicaid

If you have questions about your Medicaid eligibility, you can:

- Contact the Illinois Department of Human Services (DHS) Customer Help Line. Call 1-800-843-6154 Monday through Friday from 8 a.m. to 5 p.m. TTY users should call 1-866-324-5553.
- Visit www.dhs.state.il.us.

H7. How to contact the Quality Improvement Organization

Our state has an organization called Livanta BFCC-QIO Program. This is a group of providers and other healthcare professionals who help improve the quality of care for people with Medicare. Livanta BFCC-QIO Program is not connected with our plan.

Contact Livanta BFCC-QIO Program if you have questions about your healthcare. You can also make a complaint about the care you got if:

- You have a problem with the quality of care,
- You think your hospital stay is ending too soon, or
- You think your home healthcare, skilled nursing facility care, or comprehensive outpatient rehabilitation facility (CORF) services are ending too soon.

Contact Livanta BFCC-QIO Program at 1-888-524-9900 (TTY users should call 1-888-985-8775) Monday through Friday 9 a.m. to 6 p.m. (EST) or visit their website at livantaqio.com/en.

If you have questions, please call Meridian Member Services at 1-855-580-1689 (TTY users should call 711). Hours are from Monday through Friday, 8 a.m. to 8 p.m. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.ILmeridian.com.



Multi-Language Insert

Multi-Language Interpreter Services

ATENCIÓN: Si habla Español, disponemos de servicios de asistencia lingüística sin costo alguno para usted. Llame al **1-855-580-1689** (TTY: **711**), de lunes a viernes, de 8 a.m. a 8 p.m. Durante los fines de semana y en feriados estatales o federales, es posible que se le solicite dejar un mensaje. Se le devolverá la llamada al siguiente día hábil. La llamada es gratuita.

注意：如果您说中文普通话，则可以获得免费的语言协助服务。请在周一至周五上午 8 点至晚上 8 点致电 **1-855-580-1689** (TTY: **711**)。周末以及州/联邦假日期间，会要求您留言。工作人员会在下一个工作日给您回电。此号码为免费电话。

注意：如果您說粵語，您可以免費獲得語言協助服務。請致電 **1-855-580-1689** (TTY: **711**)，週一至週五，早上 8 點至晚上 8 點。非服務時間和州聯邦假日會由留言系統接聽。我們將在下一個工作日內回電給您。此為免付費專線。

PAALALA: Kung nagsasalita ka ng Tagalog, may mga available na libreng tulong sa wika para sa iyo. Tumawag sa **1-855-580-1689** (TTY: **711**), Lunes hanggang Biyernes, 8 a.m. hanggang 8 p.m. Tuwing Sabado at Linggo at mga pang-estado at pederal na holiday, posibleng hilingin sa iyo na mag-iwan ng mensahe. Tatawagan ka sa susunod na araw ng negosyo. Libre ang tawag.

ATTENTION : si vous parlez français, des services d'assistance linguistique gratuits sont à votre disposition. Appelez le **1-855-580-1689** (TTY : **711**) du lundi au vendredi, de 8 h à 20 h, pour en bénéficier. Durant le week-end et les jours fériés fédéraux, il vous sera peut-être demandé de laisser un message. Vous serez rappelé le jour ouvrable suivant. L'appel est gratuit.

CHÚ Ý: Nếu quý vị nói tiếng Việt, dịch vụ hỗ trợ ngôn ngữ miễn phí có sẵn dành cho quý vị. Gọi đến số **1-855-580-1689** (TTY: **711**), thứ Hai đến thứ Sáu, 8 a.m. đến 8 p.m. Vào ngày cuối tuần và ngày nghỉ lễ theo liên bang, quý vị có thể cần để lại tin nhắn. Chúng tôi sẽ gọi lại cho quý vị trong ngày làm việc kế tiếp. Cuộc gọi này miễn phí.

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachunterstützungsleistungen zur Verfügung. Rufen Sie **1-855-580-1689** (TTY: **711**) an, Montag bis Freitag, 8:00 bis 20:00 Uhr. An Wochenenden und bundesweiten Feiertagen werden Sie möglicherweise gebeten, eine Nachricht zu hinterlassen. Sie werden am nächsten Werktag zurückgerufen. Der Anruf ist kostenlos.

주의: 한국어를 구사할 경우, 언어 보조 서비스를 무료로 이용 가능합니다. 월요일~금요일에는 오전 8시~오후 8시에 **1-855-580-1689**(TTY: **711**)번으로 연락해 주십시오. 주말 및 주, 연방 공휴일에는 메시지를 남기셔야 할 수 있습니다. 그러면 다음 영업일에 전화드리겠습니다. 통화는 무료입니다.

ВНИМАНИЕ: если вы говорите на русском языке, вы можете бесплатно получить помощь переводчика. Позвоните по номеру **1-855-580-1689** (TTY: **711**) с 8 а.м. до 8 р.м. с понедельника по пятницу. В выходные и праздничные дни вас могут попросить оставить сообщение. Вам перезвонят на следующий рабочий день. Звонок бесплатный.

انتباه: إذا كنت تتحدث اللغة العربية، فنحن نوفر لك خدمات مساعدة لغوية مجانية. اتصل على الرقم **1-855-580-1689** (TTY: **711**)، من الاثنين إلى الجمعة، من الساعة 8 صباحًا لغاية الساعة 8 مساءً. وفي عطلات نهاية الأسبوع والإجازات الفيدرالية في الولاية، قد يُطلب منك ترك رسالة وسنعاود الاتصال بك خلال يوم العمل التالي. وهذا الاتصال مجاني.

ध्यान दें: अगर आप हिंदी बोलते हैं, तो भाषा सहायता सेवाएं आपके लिए निःशुल्क उपलब्ध हैं. सोमवार से शुक्रवार, सुबह 8 बजे से रात 8 बजे तक, **1-855-580-1689** (TTY: **711**) पर कॉल करें. वीकेंड और स्टेट फ़ेडरल हॉलिडे पर, आपको एक मैसेज छोड़ने के लिए कहा जा सकता है. अगले कार्य दिवस पर आपको वापस कॉल किया जाएगा. कॉल निःशुल्क है.

ATTENZIONE: se parla italiano, sono disponibili gratuitamente servizi di assistenza linguistica. Chiami il numero **1-855-580-1689** (TTY: **711**), dal lunedì al venerdì, dalle 8:00 alle 20:00. Nei fine settimana e durante le festività federali è possibile che le venga chiesto di lasciare un messaggio. La sua chiamata sarà gestita entro il giorno lavorativo successivo. La chiamata è gratuita.

ATENÇÃO: se falar português, estão disponíveis serviços de assistência gratuitos no seu idioma. Ligue para o número **1-855-580-1689** (TTY: **711**) de segunda-feira a sexta-feira, das 8:00 às 20:00. Se ligar num fim de semana ou num feriado federal, poderá ter de deixar mensagem. A sua chamada será devolvida no próximo dia útil. A chamada é gratuita.

ATANSYON: Si ou pale Franse-Kreyòl, sèvis asistans lang disponib gratis pou ou. Rele **1-855-580-1689** (TTY: **711**), soti lendi pou rive vandredi, 8è a.m. pou rive 8è p.m. Nan wikenn ak jou konje federal eta a, yo ka mande w pou kite yon mesaj. Y ap retounen w apèl la nan pwochen jou ouvrab la. Apèl la gratis.

UWAGA: Jeśli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer **1-855-580-1689** (TTY: **711**), od poniedziałku do piątku, od 8 do 20. W weekendy i święta państwowe może być konieczne zostawienie wiadomości. Nasz agent oddzwoni w kolejnym dniu roboczym. Połączenie jest bezpłatne.

注目：日本語を話す場合、言語支援サービスを無料でご利用いただけます。月曜日から金曜日の午前 8 時から午後 8 時の間に **1-855-580-1689** (TTY: **711**) までお電話ください。週末や祝日に電話をかけると、メッセージを残すか尋ねられる場合があります。次の営業日に折り返しお電話いたします。通話は無料です。

ΠΡΟΣΟΧΗ: Για ελληνικά, διατίθενται δωρεάν υπηρεσίες γλωσσικής υποστήριξης. Καλέστε **1-855-580-1689** (TTY: **711**), Δευτέρα έως Παρασκευή, 8 π.μ. έως 8 μ.μ. Σαββατοκύριακα και αργίες θα σας ζητηθεί να αφήσετε μήνυμα. Θα σας καλέσουμε εντός της επόμενης εργάσιμης ημέρας. Η κλήση είναι χωρίς χρέωση.

ध्यान आपो: જો તમે ગુજરાતી બોલતા હો, તો તમારા માટે ભાષા સંબંધી સહાયતાની સેવાઓ વગર કોઈ શુલ્કે ઉપલબ્ધ છે. સોમવારથી શુક્રવાર દરમિયાન સવારે 8 વાગ્યાથી રાત્રે 8 વાગ્યા સુધી **1-855-580-1689** (TTY: **711**) પર કોલ કરો. શનિ-રવિએ અને સ્ટેટ ફેડરલની રજાઓમાં, તમને મેસેજ છોડી દેવા માટે કહેવામાં આવી શકે છે. તમારા કોલ માટે કામકાજના આગલા દિવસની અંદર વળતો કોલ કરવામાં આવશે. એ કોલ મફત હોય છે.

توجه: اگر آپ اردو بولتے ہیں تو زبان معاون سروسز، مفت، آپ کے لیے دستیاب ہیں۔ **1-855-580-1689** (TTY: **711**) پر کال کریں، سوموار تا جمعہ صبح 8 بجے سے شام 8 بجے تک۔ ویکنڈز اور ریاستی وفاقی ایام تعطیل میں آپ سے ایک پیغام بھیجنے کے لیے کہا جا سکتا ہے۔ آپ کی کال اگلے کاروباری دن میں واپس کی جائے گی۔ کال مفت ہے۔