



Meridian Medicare-Medicaid Plan (MMP)

2023 summary of benefits

Meridian Medicare-Medicaid Plan (MMP): Summary of Benefits 2023

Introduction

This document is a brief summary of the benefits and services covered by Meridian Medicare-Medicaid Plan (MMP). It includes answers to frequently asked questions, important contact information, an overview of benefits and services offered, and information about your rights as a member of Meridian Medicare-Medicaid Plan (MMP). 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 Medicare-Medicaid Plan (MMP) at 1-855-580-1689 (TTY: 711). Hours are Monday-Friday, 8 a.m. to 8 p.m. to assist you. 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 a summary of health services covered by Meridian for 2023. This is only a summary. Please read the *Member Handbook* for the full list of benefits. You can get a copy of the *Member Handbook* by calling Meridian at 1-855-580-1689 (TTY: 711) Monday-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. Or you can access the *Member Handbook* on our website mmp.ILmeridian.com.

- ❖ 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.
- ❖ Out-of-network/non-contracted providers are under no obligation to treat Meridian members, except in emergency situations. Please call our Member Services number or see your *Member Handbook* for more information, including the cost-sharing that applies to out-of-network services.
- ❖ Under Meridian you can get your Medicare and Medicaid services in one health plan. A Meridian care coordinator will help manage your health care needs.
- ❖ 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 Meridian *Member Handbook*.
- ❖ 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.
- ❖ This document is available for free in other languages and formats like large print, braille, or audio. Call **1-855-580-1689** (TTY users should call **711**). Representatives are available Monday-Friday, 8 a.m. to 8 p.m. to assist you. 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 always get this document and other material in another language or format, now and in the future, please call Member Services. This is called a "standing request." We will document your choice. If you later want to change the language and/or format choice, please call Meridian at **1-855-580-1689** (TTY: **711**). Hours are Monday-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.

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B. Frequently Asked Questions

The following chart lists frequently asked questions.

Frequently Asked Questions (FAQ)	Answers
What is a Medicare-Medicaid Plan?	A Medicare-Medicaid Plan is a health plan that contracts with both Medicare and Illinois Medicaid to provide benefits of both programs to enrollees. It is for people with both Medicare and Medicaid. A Medicare-Medicaid Plan is an organization made up of doctors, hospitals, pharmacies, providers of long-term services, and other providers. It also has care coordinators to help you manage all your providers and services. They all work together to provide the care you need.
What is a Meridian Care Coordinator?	A Meridian Care Coordinator is one main person for you to contact. This person helps manage all your providers and services and makes sure you get what you need.
What are long-term services and supports?	Long-term services and supports are services provided through a Long-Term Care Facility or through a Home and Community-Based Waiver. Enrollees have the option to get long-term services and supports (LTSS) in the least restrictive setting when appropriate, with a preference for the home and the community, and in accordance with the Enrollee's wishes and Care Plan.

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Will I get the same Medicare and Medicaid benefits in Meridian that I get now?	<p>You will get your covered Medicare and Medicaid benefits directly from Meridian. You will work with a team of providers who will help determine what services will best meet your needs. This means that some of the services you get now may change. You will get almost all of your covered Medicare and Medicaid benefits directly from Meridian, but you may get some benefits the same way you do now, outside of the plan.</p> <p>When you enroll in Meridian, you and your care team will work together to develop an Individualized Care Plan to address your health and support needs. During this time, if this is your first time in a Medicare-Medicaid Plan, you will be able to continue using the doctors you go to now for 180 days. If you changed to Meridian from a different Medicare-Medicaid Plan, you will be able to continue using the doctors you go to now for 90 days. When you join our plan, if you are taking any Medicare Part D prescription drugs that Meridian does not normally cover, you can get a temporary supply. We will help you get another drug or get an exception for Meridian to cover your drug, if medically necessary.</p>
Can I use the same doctors I use now?	<p>Often that is the case. If your providers (including doctors, therapists, and pharmacies) work with Meridian and have a contract with us, you can keep using them.</p> <ul style="list-style-type: none">• Providers with an agreement with us are “in-network.” You must use the providers in Meridian’s network.• If you need urgent or emergency care or out-of-area dialysis services, you can use providers outside of Meridian's plan. <p>To find out if your doctors are in the plan’s network, call Member Services or read Meridian’s <i>Provider and Pharmacy Directory</i> on the plan’s website at mmp.ILmeridian.com.</p> <p>If Meridian is new for you, you can continue using the doctors you use now for 90 or 180 days depending on your continuity of care period.</p>



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What happens if I need a service but no one in Meridian's network can provide it?	Most services will be provided by our network providers. If you need a service that cannot be provided within our network, Meridian will pay for the cost of an out-of-network provider.
Where is Meridian available?	The service area for this plan includes: Adams, Alexander, Bond, Boone, Brown, Bureau, Calhoun, Carroll, Cass, Champaign, Christian, Clark, Clay, Clinton, Coles, Cook, Crawford, Cumberland, De Witt, DeKalb, Douglas, DuPage, Edgar, Edwards, Effingham, Fayette, Ford, Franklin, Fulton, Gallatin, Greene, Grundy, Hamilton, Hancock, Hardin, Henderson, Henry, Iroquois, Jackson, Jasper, Jefferson, Jersey, Jo Daviess, Johnson, Kane, Kankakee, Kendall, Knox, La Salle, Lake, Lawrence, Lee, Livingston, Logan, Macon, Macoupin, Madison, Marion, Marshall, Mason, Massac, McDonough, McHenry, McLean, Menard, Mercer, Monroe, Montgomery, Morgan, Moultrie, Ogle, Peoria, Perry, Piatt, Pike, Pope, Pulaski, Putnam, Randolph, Richland, Rock Island, Saline, Sangamon, Schuyler, Scott, Shelby, St. Clair, Stark, Stephenson, Tazewell, Union, Vermilion, Wabash, Warren, Washington, Wayne, White, Whiteside, Will, Williamson, Winnebago, and Woodford Counties, Illinois. You must live in one of these areas to join the plan.
Do I pay a monthly amount (also called a premium) under Meridian?	You will not pay any monthly premiums to Meridian for your health coverage.

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What is prior authorization (PA)?	<p>PA means that you must get approval from Meridian before you can get a specific service or drug or use an out-of-network provider. Meridian may not cover the service or drug if you don't get approval. If you need urgent or emergency care or out-of-area dialysis services, you don't need to get approval first.</p> <p>Refer to Chapter 3, Section D2 of the <i>Member Handbook</i> to learn more about PA. Refer to the Benefits Chart in Section D of Chapter 4 of the <i>Member Handbook</i> to learn which services require a PA.</p>
What is a referral?	<p>A referral means that your primary care provider (PCP) must give you approval before you can use someone that is not your PCP or use other providers in the plan's network. If you don't get approval, Meridian may not cover the services. You don't need a referral to use certain specialists, such as women health specialists.</p> <p>Refer to Chapter 3, Section B of the <i>Member Handbook</i> to learn more about when you will need a referral from your PCP.</p>

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Frequently Asked Questions (FAQ)	Answers
Who should I contact if I have questions or need help? (continued on the next page)	<p>If you have general questions or questions about our plan, services, service area, billing, or Member ID Cards, please call Meridian Member Services:</p> <p>CALL 1-855-580-1689</p> <p>Calls to this number are free.</p> <p>Monday–Friday, 8 a.m. to 8 p.m.</p> <p>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.</p> <p>Member Services also has free language interpreter services available for people who do not speak English.</p> <p>TTY 711</p> <p>This number is for people who have hearing or speaking problems. You must have special telephone equipment to call it.</p> <p>Calls to this number are free.</p> <p>Monday–Friday, 8 a.m. to 8 p.m.</p> <p>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.</p>

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Frequently Asked Questions (FAQ)	Answers
Who should I contact if I have questions or need help? (continued from previous page) (continued on the next page)	<p>If you have questions about your health, please call the Nurse Advice Call line:</p> <p>CALL 1-855-580-1689</p> <p>Calls to this number are free. 24 hours a day, 7 days a week, 365 days a year.</p> <p>We have free interpreter services for people who do not speak English.</p> <p>TTY 711</p> <p>This number is for people who have hearing or speaking problems. You must have special telephone equipment to call it.</p> <p>Calls to this number are free. 24 hours a day, 7 days a week, 365 days a year.</p> <p>If you need immediate behavioral health care or are experiencing a mental health crisis, please contact the CARES Hotline:</p> <p>CALL 1-800-345-9049</p> <p>Calls to this number are free. 24 hours a day, 7 days a week, 365 days a year.</p> <p>We have free interpreter services for people who do not speak English.</p> <p>TTY 1-866-794-0374</p> <p>This number is for people who have hearing or speaking problems. You must have special telephone equipment to call it.</p> <p>Calls to this number are free. 24 hours a day, 7 days a week, 365 days a year.</p>



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Frequently Asked Questions (FAQ)	Answers
Who should I contact if I have questions or need help? (continued from previous page)	<p>If you have thoughts of suicide, ongoing anxiety or depression, concerns about the use of alcohol or drugs, or thoughts of hurting yourself or others, dial or text 988, the National Suicide Prevention Lifeline network, available 24/7 across the United States, to speak to a counselor:</p> <p>CALL 988</p> <p>Calls to this number are free.</p> <p>Counselors are available 24 hours a day, 7 days a week, 365 days a year.</p> <p>TTY Dial 711 then 988 or use your preferred relay service</p> <p>This number is for people who have hearing or speaking problems. You must have special telephone equipment to call it.</p> <p>Calls to this number are free.</p> <p>Counselors are available 24 hours a day, 7 days a week, 365 days a year</p> <p>TEXT 988</p> <p>Texts to this number are free.</p> <p>Counselors are available 24 hours a day, 7 days a week, 365 days a year.</p> <p>CHAT suicidepreventionlifeline.org/chat</p> <p>Counselors are available 24 hours a day, 7 days a week, 365 days a year.</p>



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C. Overview of Services

The following chart is a quick overview of what services you may need, your costs, and rules about the benefits.

Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You want a doctor	Visits to treat an injury or illness	\$0	Referral rules may apply.
	Wellness visits, such as a physical	\$0	
	Transportation to a doctor's office	\$0	Prior Authorization rules may apply.
	Specialist care	\$0	Referral rules may apply.
	Care to keep you from getting sick, such as flu shots	\$0	
	"Welcome to Medicare" preventive visit (one time only)	\$0	
You need medical tests	Lab tests, such as blood work	\$0	Prior Authorization rules may apply.
	X-rays or other pictures, such as CAT scans	\$0	Prior Authorization rules may apply.
	Screening tests, such as tests to check for cancer	\$0	No prior authorization or referral necessary for Medicare-approved preventive screenings.



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Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>You need drugs to treat your illness or condition (This service is continued on the next page)</p>	<p>Generic drugs (no brand name)</p>	<p>\$0 copay for up to a 90-day supply.</p>	<p>There may be limitations on the types of drugs covered. Please refer to Meridian’s <i>List of Covered Drugs</i> (Drug List) for more information.</p> <p>Some prescription drugs may require prior authorization or may require that you try a different drug first. Quantity limits may apply.</p> <p>An extended-day supply of some drugs is available through mail order and certain retail pharmacies. Please refer to our Drug List to view those drugs available for an extended-day supply.</p>
	<p>Brand name drugs</p>	<p>\$0 copay for up to a 90-day supply.</p>	<p>There may be limitations on the types of drugs covered. Please refer to Meridian’s <i>List of Covered Drugs</i> (Drug List) for more information.</p> <p>Some prescription drugs may require prior authorization or may require that you try a different drug first. Quantity limits may apply.</p> <p>An extended-day supply of some drugs is available through mail order and certain retail pharmacies. Please refer to our Drug List to view those drugs available for an extended-day supply.</p>



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Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need drugs to treat your illness or condition (continued)	Over-the-counter drugs	\$0 copay for up to a 90-day supply	There may be limitations on the types of drugs covered. Please refer to Meridian's <i>List of Covered Drugs</i> (Drug List) for more information.
	Medicare Part B prescription drugs	\$0 copay for up to a 90-day supply	Part B drugs include drugs given by your doctor in their office, some oral cancer drugs, and some drugs used with certain medical equipment. Read the <i>Member Handbook</i> for more information on these drugs. Prior authorization rules may apply.
You need therapy after a stroke or accident	Occupational, physical, or speech therapy	\$0	Prior authorization and referral rules may apply.
You need emergency care (This service is continued on the next page)	Emergency room services	\$0	Meridian covers out-of-network emergency care. You may get covered emergency care whenever you need it, anywhere in the United States or its territories. Emergency room care is for a medical issue that is a threat to your life, or that could cause serious harm if not treated right away. No prior authorization or referral necessary for emergency room services.



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You need emergency care (continued)	Ambulance services	\$0	Ambulance services for emergencies do not require a referral or prior authorization. Prior authorization is required for ambulance services in non-emergency situations.
	Urgent care	\$0	Meridian covers out-of-network urgent care in the United States. Urgent care is for medical issues that require prompt medical attention but are not life threatening. No prior authorization or referral necessary for urgent care.
You need hospital care	Hospital stay	\$0	Prior authorization rules may apply.
	Doctor or surgeon care	\$0	Prior authorization and referral rules may apply.
You need help getting better or have special health need	Rehabilitation services	\$0	Prior authorization and referral rules may apply.
	Medical equipment for home care	\$0	Prior authorization rules may apply.
	Skilled nursing care	\$0	Prior authorization rules may apply.
You need eye care	Eye exams	\$0	Plan covers exam to diagnose and treat diseases and conditions of the eye (including yearly glaucoma screening). Routine eye exam: 1 every year.
	Glasses or contact lenses	\$0	Eyeglasses (frames and lenses): 1 every two years. Contact lenses: 1 every year. Eyeglasses or contact lenses after cataract surgery.

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You need dental care	Dental check-ups	\$0	<p>Meridian covers dental services in accordance with the state Medicaid program. Prior authorization rules may apply.</p> <p>The plan also covers preventive dental services. Preventive services include:</p> <ul style="list-style-type: none"> • 2 oral exams every year • 2 cleanings every year, and • 1 set of dental x-rays every 12 to 36 months. <p>Prior authorization rules may apply.</p>
	Hearing screenings	\$0	<p>Plan covers exam to diagnose and treat hearing and balance issues.</p> <p>Routine hearing exam: 1 every year.</p>
You need hearing/auditory services	Hearing aids	\$0	<p>Hearing aid fitting/evaluation: 1 every 3 years.</p> <p>Prior authorization rules may apply.</p>
	Services to help manage your disease	\$0	<p>Prior authorization rules may apply.</p>
You have a chronic condition, such as diabetes or heart disease	Diabetes supplies and services	\$0	<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>

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You have a mental health condition	Mental or behavioral health services	\$0	Prior authorization and referral rules may apply.
You have a substance abuse problem	Substance abuse services	\$0	Prior authorization and referral rules may apply.
You need long-term mental health services	Inpatient care for people who need mental health care	\$0	Prior authorization rules may apply.
You need durable medical equipment (DME)	Wheelchairs	\$0	Prior authorization rules may apply.
	Nebulizers	\$0	Prior authorization rules may apply.
	Crutches	\$0	Prior authorization rules may apply.
	Walkers	\$0	Prior authorization rules may apply.
	Oxygen equipment and supplies	\$0	Prior authorization rules may apply.

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Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>You need help living at home (This service is continued on the next page)</p>	<p>Meals brought to your home</p>	<p>\$0</p>	<p>Enrollment in state waiver program required. Eligibility for waiver services is determined by the State of Illinois. Authorization and eligibility rules apply.</p> <p>The Plan offers home-delivered meals immediately following an inpatient hospital stay. The benefit covers 3 meals a day for up to 14 days, with a maximum of 42 meals per occurrence.</p> <p>The Plan also offers home-delivered meals as part of a supervised program for members with a chronic condition. To qualify, the member must have chronic heart failure, COPD, AIDS, asthma, CAD, diabetes and/or hypertension. The benefit covers 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>Referral rules may apply.</p>

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You need help living at home (continued)	Home services, such as cleaning or housekeeping	\$0	Enrollment in state waiver program required. Eligibility for waiver services is determined by the State of Illinois. Authorization and eligibility rules apply.
	Changes to your home, such as ramps and wheelchair access	\$0	Enrollment in state waiver program required. Eligibility for waiver services is determined by the State of Illinois. Authorization and eligibility rules apply.
	Personal care assistant (You may be able to employ your own assistant. Call Member Services for more information.)	\$0	Enrollment in state waiver program required. Eligibility for waiver services is determined by the State of Illinois. Authorization and eligibility rules apply.
	Home health care services	\$0	Prior authorization rules may apply.
	Services to help you live on your own	\$0	Enrollment in state waiver program required. Eligibility for waiver services is determined by the State of Illinois. Authorization and eligibility rules apply.
	Adult day services or other support services	\$0	Enrollment in state waiver program required. Eligibility for waiver services is determined by the State of Illinois. Authorization and eligibility rules apply.

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You need a place to live with people available to help you	Assisted living or other housing services	\$0	Enrollment in state waiver program required. Eligibility for waiver services is determined by the State of Illinois. Authorization and eligibility rules apply.
	Nursing home care	\$0	Prior authorization rules may apply.
Your caregiver needs some time off	Respite care	\$0	Enrollment in state waiver program required. Eligibility for waiver services is determined by the State of Illinois. Authorization and eligibility rules apply.
Additional covered services (This service is continued on the next page)	Family Planning Services	\$0	
	Tobacco Cessation Counseling	\$0	Up to 12 sessions every year of tobacco cessation counseling is provided for pregnant women. Referral rules may apply.



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Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
Additional covered services (continued)	Over-the-Counter (OTC)	\$0	<p>The plan covers up to \$50 per calendar month. OTC items are available by mail or at select CVS pharmacy retail stores.</p> <p>The OTC benefit is limited to one order per benefit period. Unused balance at the end of each calendar month will be forfeited.</p> <p>You can order up to 3 of the same item per calendar month unless noted in the catalog. There is no limit on the number of total items in your order.</p>
	Telehealth Services	\$0	Prior Authorization rules may apply.
	Fitness Benefit	\$0	<p>Membership in Health Club/Fitness Classes: Orientation and access to facilities that offer a variety of physical activity for members to develop a personal fitness plan. The general goal of this program is for members to achieve their personal fitness goals based on their individual needs.</p>

If you have questions, please call Meridian Medicare-Medicaid Plan (MMP) at 1-855-580-1689 (TTY: 711). Hours are Monday-Friday, 8 a.m. to 8 p.m. to assist you. 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.



Meridian Medicare-Medicaid Plan (MMP): Summary of Benefits 2023

D. Benefits covered outside of Meridian

This is not a complete list. Call Member Services to find out about other services not covered by Meridian but available through Medicare or Medicaid.

Other services covered by Medicare or Medicaid	Your costs
Some hospice care services	\$0

E. Services that Meridian, Medicare, and Medicaid do not cover

This is not a complete list. Call Member Services to find out about other excluded services.

Services not covered by Meridian, Medicare, or Medicaid	
Cosmetic surgery or other cosmetic work, unless it is needed because of an accidental injury or to improve a part of the body that is not shaped right. However, the plan will cover reconstruction of a breast after a mastectomy and for treating the other breast to match it.	Services considered not “reasonable and necessary,” according to the standards of Medicare and Medicaid, unless these services are listed by our plan as covered services.
A private room in a hospital, except when it is medically necessary.	Private duty nurses.
Chiropractic care, other than manual manipulation of the spine consistent with Medicare coverage guidelines.	Surgical treatment for morbid obesity, except when it is medically necessary and Medicare pays for it.
Radial keratotomy and LASIK surgery.	Acupuncture

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Meridian Medicare-Medicaid Plan (MMP): Summary of Benefits 2023

F. Your rights as a member of the plan

As a member of Meridian, you have certain rights. You can exercise these rights without being punished. You can also use these rights without losing your health care services. We will tell you about your rights at least once a year. For more information on your rights, please read the *Member Handbook*. Your rights include, but are not limited to, the following:

- **You have a right to respect, fairness, and dignity.** This includes the right to:
 - Get covered services without concern about race, ethnicity, national origin, religion, gender, age, mental or physical disability, sexual orientation, genetic information, ability to pay, or ability to speak English.
 - Get information in other formats (e.g., large print, braille, audio).
 - Be free from any form of physical restraint or seclusion.
 - Not be billed by providers.
- **You have the right to get information about your health care.** This includes information on treatment and your treatment options. This information should be in a format you can understand. These rights include getting information on:
 - Description of the services we cover
 - How to get services
 - How much services will cost you
 - Names of health care providers and care managers
- **You have the right to make decisions about your care, including refusing treatment.** This includes the right to:
 - Choose a Primary Care Provider (PCP) and change your PCP at any time during the year.
 - Use a women's health care provider without a referral.
 - Get your covered services and drugs quickly.
 - Know about all treatment options, no matter what they cost or whether they are covered.
 - Refuse treatment, even if your doctor advises against it
 - Stop taking medicine.
 - Ask for a second opinion. Meridian will pay for the cost of your second opinion visit.

If you have questions, please call Meridian Medicare-Medicaid Plan (MMP) at 1-855-580-1689 (TTY: 711). Hours are Monday-Friday, 8 a.m. to 8 p.m. to assist you. 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.



Meridian Medicare-Medicaid Plan (MMP): Summary of Benefits 2023

- **You have the right to timely access to care that does not have any communication or physical access barriers.** This includes the right to:
 - Get timely medical care.
 - Get in and out of a health care provider's office. This means barrier-free access for people with disabilities, in accordance with the Americans with Disabilities Act.
 - Have interpreters to help with communication with your doctors and your health plan.
- **You have the right to emergency and urgent care when you need it.** This means you have the right to:
 - Get emergency services without PA in an emergency.
 - Use an out-of-network, urgent or emergency care provider, when necessary.
- **You have a right to confidentiality and privacy.** This includes the right to:
 - Ask for and get a copy of your medical records in a way that you can understand and ask for your records to be changed or corrected.
 - Have your personal health information kept private.
- **You have the right to make complaints about your covered services or care.** This includes the right to:
 - File a complaint or grievance against us or our providers.
 - Ask for a state fair hearing.
 - Get a detailed reason for why services were denied.

For more information about your rights, you can read the *Meridian Member Handbook*. If you have questions, you can also call Meridian Member Services at **1-855-580-1689** (TTY users should call **711**), **Monday–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.



If you have questions, please call Meridian Medicare-Medicaid Plan (MMP) at 1-855-580-1689 (TTY: 711). Hours are Monday-Friday, 8 a.m. to 8 p.m. to assist you. 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.

Meridian Medicare-Medicaid Plan (MMP): Summary of Benefits 2023

G. How to file a complaint or appeal a denied service

If you have a complaint or think Meridian should cover something we denied, call Meridian at **1-855-580-1689** (TTY users should call **711**), **Monday–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. You may be able to appeal our decision.

For questions about complaints and appeals, you can read Chapter 9 of the Meridian *Member Handbook*. You can also call Meridian Member Services.

Complaints, grievances and appeals can be submitted in writing to the addresses below. Additionally, you can call us or fax your appeal to one of the numbers listed below.

Appeals for Part D (Drugs)

Meridian Medicare-Medicaid Plan (MMP)
Attn: Medicare Part D Appeals
P.O. Box 31383
Tampa, FL 33631-3383

Phone: 1-855-580-1689 (TTY: 711)

Fax: 1-866-388-1766

Appeals for Part C (Medical and Part B Drugs) and Grievances for Part C (Medical and Part B Drugs) and Part D (Drugs)

Meridian Medicare-Medicaid Plan (MMP)
Appeals & Grievances
Medicare Operations
7700 Forsyth Blvd
St. Louis, MO 63105

Phone: 1-855-580-1689 (TTY: 711)

Fax: 1-844-273-2671

H. What to do if you suspect fraud

Most health care professionals and organizations that provide services are honest. Unfortunately, there may be some who are dishonest.

If you think a doctor, hospital or other pharmacy is doing something wrong, please contact us.

- Call us at Meridian Member Services at **1-855-580-1689** (TTY: **711**), **Monday-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.
- Or, call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. You can call these numbers for free, 24 hours a day, 7 days a week.
- You may also call our plan's toll-free Fraud Hotline at 1-866-364-1350 (TTY: 711). The Fraud Hotline operates 24 hours a day, seven days a week. All calls are strictly confidential.

If you have questions, please call Meridian Medicare-Medicaid Plan (MMP) at 1-855-580-1689 (TTY: 711). Hours are Monday-Friday, 8 a.m. to 8 p.m. to assist you. 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

ATTENTION: If you speak a language other than English, language assistance services, free of charge, are available to you. Call **1-855-580-1689** (TTY: **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.

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 a.m. до 8 p.m. 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 नि:शुल्क 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 नि:शुल्क है.

ATTENZIONE: se parla italiano, sono disponibili gratuitamente servizi di assistenza linguistica. Chiama 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۔