Getting Started Guide
Make the most of your health plan.

Healthy Michigan Plan

Look inside for:
• Getting Help
• Benefits
• Extras
• Getting Care
Simple for you. That’s our promise.

Thank you for joining UnitedHealthcare Community Plan. We want to be sure you have all the information you need to make this the best health care experience possible. This guide will walk you through the important steps for getting started.

Important: Do you have your member ID cards?

You will need these two cards when you get health care services:

This is your UnitedHealthcare Community Plan member ID card. If you have not received this card, please call us at 1-800-903-5253, TTY 711.

This is your State of Michigan mihealth card. If you did not receive this card, contact the State of Michigan at 1-888-367-6557.
Getting Help

Member advocate.
If you have any questions or need help with your health plan, our member advocates are here for you. Call for help with any of the following:

Get connected.
Sign up for 24/7 access to your health plan at myuhc.com/CommunityPlan. It’s fast, easy and secure.

Need more help? Call 1-800-903-5253, TTY 711, 8 a.m. – 5 p.m., Monday – Friday.
A member advocate can answer questions about your coverage, help find a doctor or help with an appointment.

Find more information.
We make it easy to get the information you want and need.

• **Register at myuhc.com/CommunityPlan.** This is your secure member website. See your covered benefits, search for providers, view your member handbook and much more.

• **Download the UnitedHealthcare Health4Me® mobile app.** It’s designed for people on the go, and includes many of the same features as the member website. Find it at the App Store or Google Play. You can also sign up to receive text message reminders to help you stay healthy.

• **Follow us on Facebook at facebook.com/UnitedHealthcareCommunityPlan.** Find fun, interesting and useful information for you and your family.
## Medical Benefits

### Doctor Visits
- Annual Wellness Visits
- Primary Care Provider (PCP) Visits
- Specialists Visits

### Common Services
- Emergency and Urgent Care
- Hospital Services
- Immunizations
- Laboratory and X-ray Services
- Pregnancy Care

### Other Covered Services
- Behavioral Health and Substance Use Treatment
- Care Management
- Dental Care
- Family Planning
- Hearing and Speech Services
- Hospice Care
- Prescription Drugs
- Transportation Services
- Vision Services

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### Earn rewards for Health Risk Assessment.

Earn rewards for completing your Healthy Michigan Plan Health Risk Assessment.

When you agree to address or maintain healthy behaviors with your Primary Care Provider (PCP), you could earn lower cost-sharing and/or copays. You are eligible for this reward every year that you have the Healthy Michigan Plan through UnitedHealthcare. Remember to schedule your yearly appointment with your PCP. Take a copy of the Healthy Michigan Plan Health Risk Assessment form with you and give it to your doctor during that annual visit. You can download a copy of this form at [www.uhccommunityplan.com/mi/HRA](http://www.uhccommunityplan.com/mi/HRA).

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### Network providers.

You’re covered for services provided by more than 20,000 doctors and specialists and 90 hospitals and facilities throughout Michigan. Find a list of these network doctors, dentists, clinics, pharmacies and specialists at [myuhc.com/CommunityPlan](http://myuhc.com/CommunityPlan). Or call a member advocate at 1-800-903-5253, TTY 711.
Behavioral health and substance use treatment.

As our member, you are covered for mental health and substance use treatment. This includes services for evaluations, individual and group therapy sessions, as well as substance use screenings and treatments. Talk with your PCP if you think you might need these services. He or she can help you decide the right options for you.

Your member handbook outlines all your mental health and substance use benefits. You can also call a member advocate at 1-800-903-5253, TTY 711.

Prescriptions.

In Michigan, all individuals with Medicaid have the same basic list of covered drugs. This means that your covered prescriptions will be matched to this list to ensure that you have the most effective drugs you need at no cost to you.

UnitedHealthcare members can find additional drugs that include over-the-counter medicines for allergies and pain on our Preferred Drug List (PDL). Visit myUHC.com to find this information.

Dental.

The Healthy Michigan Plan covers:

- Dental checkups.
- Teeth cleaning.
- X-rays.
- Fillings.
- Tooth extractions.
- Dentures and partial dentures.

Understanding your costs.

The Healthy Michigan Plan has copays. Before enrolling in a health plan, you must pay your copays to the provider when you get care. When you are enrolled with UnitedHealthcare Community Plan, most copays will be made to us through a special health care account called the MI Health Account. You will get a statement that shows how these amounts were figured and how much to pay each month. To find current copay amounts, visit www.michigan.gov/HealthyMIPlan.

The Healthy Michigan Plan requires those with annual incomes between 100 percent and 133 percent of the federal poverty level to contribute 2 percent of income annually for cost-sharing purposes. You will get more information about your MI Health Account and contributions for cost sharing from us. You can reduce your annual contribution and copays by participating with us in healthy behavior activities which may include completing an annual health assessment and changing unhealthy activities. Cost sharing cannot exceed 5 percent of your income.

A special note to members with Children’s Special Health Care Services.

Healthy Michigan Plan members with Children’s Special Health Care Services (CSHCS) do not have to pay copays and contributions for covered health care services. Copays and/or contributions on your statements will show $0 owed.
Getting Care

Your Primary Care Provider.
We call the main doctor you see a Primary Care Provider, or PCP. When you see the same PCP over time, it’s easier to develop a relationship with him or her. Each family member can have his or her own PCP, or you may all choose to see the same person. You will see your PCP for:
• Routine care, including yearly checkups.
• Coordinating your care with a specialist.
• Treatment for colds and flu.
• Other health concerns.

Schedule a wellness exam soon.
A yearly wellness exam with your PCP is important for good health. Make sure you take your HMP HRA and complete it with your doctor during this visit! These visits are fully covered. Schedule your visit within the first 30 days of joining your health plan.

Change your PCP at any time.
It’s important to have a PCP you like and trust. You can change your PCP at any time simply by calling us. If you’d like, we can recommend someone for you.

You have options.
You can choose between many types of network providers for your PCP. Some types of PCPs include:
• Family doctor (also called a general practitioner) — cares for children and adults.
• Internal medicine doctor (also called an internist) — cares for adults.
• Nurse Practitioner (NP) — cares for children and adults.
• Obstetrician (OB) — cares for pregnant women.
• Pediatrician — cares for children.
• Physician Assistant (PA) — cares for children and adults.

Need help finding a PCP? Call us at 1-800-903-5253, TTY 711.
Be sure to make use of all the extras you get as a UnitedHealthcare member.

**Get health support with mobile phone service at NO COST to you.**

As a UnitedHealthcare member or guardian of a UnitedHealthcare member, you may be eligible for mobile phone service through select Lifeline service providers under the federal Lifeline Assistance Program. Visit UHCmyHealthline.com to apply.

**Care Management program.**

If you have a chronic health condition, like asthma or diabetes, you may benefit from our Care Management program. We can help with a number of things, like scheduling doctor appointments and keeping all your providers informed about the care you get. To learn more, call 1-800-903-5253, TTY 711.

**Quit For Life® program.**

Coaching and online support to help you quit tobacco. Get assistance deciding which type of nicotine substitute or medication is right for you. All at no cost. If you are ready to quit, call 1-800-480-QUIT (7848) for help.

**Rewards for moms.**

With Baby Blocks, you earn great rewards for completing checkups on time during and after your pregnancy. Join at UHCBabyBlocks.com.

**Health coaching.**

Get personalized, confidential health coaching built around your schedule. You’ll have regular 10- to 20-minute phone calls with your coach to help you reach your health goals. These may include: weight loss, quitting tobacco, nutrition, fitness, blood pressure reduction, lowering your cholesterol, management of stress and chronic health conditions. To enroll, call 1-800-563-8063.

**Transportation services or gas reimbursement.**

If you do not have a ride to get medical care and services, we may provide transportation or gas reimbursement for you. Call 1-877-892-3995 or visit member.logisticare.com to request a ride.

Download the LogistiCare Trip Manager app to request trips and notify LogistiCare when you are ready for your ride home. The app is available on iTunes and the Google Play store.

1-800-903-5253, TTY 711  myuhc.com/CommunityPlan  Health4Me app
Urgent Care Clinics.

Network Urgent Care Clinics are a good option if you have an illness or injury that needs quick attention. This could include sprains or strains, minor cuts needing stitches, sore throat, minor burns, rash, fever or infection of any kind.

Emergency care.

This level of care is for chest pain, bleeding that won't stop, trouble breathing, severe allergic rashes or the feeling that you might hurt someone or yourself. If you have a health emergency when you are out of town or out of State, we will cover the costs. If you need non-emergency care while traveling outside the service area or when you are not in the State of Michigan, call your PCP or our Member Services department first. If it’s an emergency, call 911 or go to the nearest emergency room.

We speak your language.

If you speak a language other than English, we can provide translated printed materials. Or we can provide an interpreter who can help you understand these materials. You’ll find more information about Interpretive Services and Language Assistance in the section called Other Plan Details. Or call Member Services at 1-800-903-5253, TTY 711.

Nosotros hablamos su idioma.

Si usted habla un idioma que no sea el inglés, nosotros podemos proporcionarle materiales impresos traducidos. O podemos proporcionarle un intérprete para ayudarlo a entender los materiales. Usted encontrará más información acerca de nuestros Servicios de interpretación y de Asistencia lingüística en la sección de Otros detalles del plan de su Manual para Miembros. Para obtener ayuda, por favor llame a Servicios para Miembros al 1-800-903-5253, TTY 711.

See your member handbook.

Find details about covered benefits and special programs available to you in your member handbook. You can always view it online at myuhc.com/CommunityPlan. Or call Member Services at 1-800-903-5253, TTY 711 to request a printed copy.
## Benefits covered by UnitedHealthcare Community Plan.

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Coverage</th>
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</thead>
<tbody>
<tr>
<td>Bariatric surgery*</td>
<td>Covered.</td>
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<tr>
<td>Dental</td>
<td>Covered.</td>
</tr>
<tr>
<td>Durable Medical Equipment (DME) items like walkers, wheelchairs and</td>
<td>Covered.</td>
</tr>
<tr>
<td>customized equipment*</td>
<td></td>
</tr>
<tr>
<td>Emergency transportation and hospital billed ambulance services to and</td>
<td>Covered.</td>
</tr>
<tr>
<td>from the nursing facility or enrollees' homes</td>
<td></td>
</tr>
<tr>
<td>End Stage Renal Disease services*</td>
<td>Covered.</td>
</tr>
<tr>
<td>Habilitative services</td>
<td>Covered.</td>
</tr>
<tr>
<td>Hearing aids</td>
<td>Covered.</td>
</tr>
<tr>
<td>Home Health services*</td>
<td>Covered.</td>
</tr>
<tr>
<td>Hospice care</td>
<td>Covered.</td>
</tr>
<tr>
<td>Hospitalization in a semi-private room (when medically necessary)*</td>
<td>Covered.</td>
</tr>
<tr>
<td>Intermittent or short-term restorative or rehabilitative services in a</td>
<td>Covered.</td>
</tr>
<tr>
<td>nursing facility up to 45 days</td>
<td></td>
</tr>
<tr>
<td>Lab tests and X-rays</td>
<td>Covered.</td>
</tr>
<tr>
<td>Medical supplies*</td>
<td>Covered.</td>
</tr>
<tr>
<td>Office visits — including physical exams and preventive health</td>
<td>Covered.</td>
</tr>
<tr>
<td>screening</td>
<td></td>
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</tbody>
</table>
### Benefit Coverage

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outpatient surgery*</td>
<td>Covered.</td>
</tr>
<tr>
<td>Physical, speech, language and occupational therapy</td>
<td>Covered.</td>
</tr>
<tr>
<td>Podiatry services</td>
<td>Covered.</td>
</tr>
<tr>
<td>Prescription drugs</td>
<td>Covered.</td>
</tr>
<tr>
<td>Prosthetics and orthotics*</td>
<td>Covered.</td>
</tr>
<tr>
<td>Restorative or rehabilitative services not in a nursing facility</td>
<td>Covered.</td>
</tr>
<tr>
<td>Services by a chiropractor</td>
<td>Covered.</td>
</tr>
<tr>
<td>Services by a hearing aid dealer</td>
<td>Covered.</td>
</tr>
<tr>
<td>Surgery, anesthesia and related services*</td>
<td>Covered.</td>
</tr>
<tr>
<td>Telehealth/Telemedicine</td>
<td>Covered.</td>
</tr>
<tr>
<td>Transplants*</td>
<td>Covered.</td>
</tr>
<tr>
<td><strong>Visits to specialists</strong> (when your PCP sends you)</td>
<td>Covered.</td>
</tr>
<tr>
<td>Weight reduction care*</td>
<td>Covered.</td>
</tr>
<tr>
<td>Well-baby and well-child visits — including immunizations or shots</td>
<td>Covered.</td>
</tr>
</tbody>
</table>

* Your provider may need to work with UnitedHealthcare Community Plan to get approval in advance to receiving the item or service.
You are covered for these “self-referral” services without being sent by your PCP.

<table>
<thead>
<tr>
<th>Benefit</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Certified nurse-midwife services</td>
<td>Covered.</td>
</tr>
<tr>
<td>Certified pediatric and family nurse practitioner services</td>
<td>Covered.</td>
</tr>
<tr>
<td>Dental services (diagnostic, restorative, prosthetic)</td>
<td>Covered.</td>
</tr>
<tr>
<td>Eye exams, certain frames and lenses (every 24 months)</td>
<td>Covered.</td>
</tr>
<tr>
<td>Family planning services at any family planning clinic</td>
<td>Covered.</td>
</tr>
<tr>
<td>Immunizations or treatment of a communicable disease at any health department</td>
<td>Covered.</td>
</tr>
<tr>
<td>Maternal Infant Health Program (MIHP) services at any health department, or MIHP Provider</td>
<td>Covered.</td>
</tr>
<tr>
<td>Obstetrical care with any UnitedHealthcare Community Plan OB/GYN (prenatal and postnatal care) or certified nurse midwife</td>
<td>Covered.</td>
</tr>
<tr>
<td>Replacement frames and lenses (every 12 months)</td>
<td>Covered.</td>
</tr>
<tr>
<td>Outpatient mental health services</td>
<td>Covered.</td>
</tr>
<tr>
<td>Transportation services</td>
<td>Covered.</td>
</tr>
<tr>
<td>Well-woman care from any UnitedHealthcare Community Plan OB/GYN</td>
<td>Covered.</td>
</tr>
</tbody>
</table>
These services are not covered through UnitedHealthcare Community Plan because Healthy Michigan Plan does not cover them.

- Elective abortions (as defined by Healthy Michigan Plan).
- Experimental procedures, treatment plans or medications.
- Elective or cosmetic surgery, unless medically necessary.
- Services for treatment of infertility.

Services that may be covered by Michigan Medicaid.

These services may be covered through Michigan Medicaid:

- Services available through the intermediate school district.
- Inpatient hospital psychiatric services.
- Intermittent or short-term restorative or rehabilitative services (in a nursing facility) after 45 days.
- Custodial care in a nursing facility.
- Outpatient partial hospitalization psychiatric services.
- Long-term outpatient mental health services.
- Substance-abuse services including:
  - Screening and assessment.
  - Detoxification.
  - Intense outpatient counseling and other outpatient services.
  - Methadone treatment.
- Services including therapies provided to persons with developmental disabilities which are billed through Community Mental Health Service Program (CMHSP) providers or Intermediate School Districts.
- Home and community-based waiver program services.
- Personal care or home help services.
- Traumatic Brain Injury Program services.
- Transportation for services not covered by UnitedHealthcare Community Plan.
  - If you live in Wayne, Oakland or Macomb County and need a ride for dental, substance abuse and some mental health services, call 1-866-569-1902, 8 a.m. – 5 p.m., Monday – Friday.
  - If you live in any other county, call your local DHS office to get a ride for dental, substance abuse and some mental health services.