



Frequently Asked Questions

Below are frequently asked questions about the Wisconsin Medicaid Supplemental Security Income (SSI) health maintenance organization (HMO) expansion. If your question is not answered below, please contact the HMO enrollment specialist at **1-800-291-2002**. A customer service representative will be able to answer any other questions.

What is the Medicaid SSI HMO Program?

The Medicaid SSI HMO program is a group of health plans that administers and provides health care services for those who get Medicaid SSI or SSI-related Medicaid because of a disability determined by the Disability Determination Bureau.

What is changing for SSI members not enrolled in a Medicaid SSI HMO?

Starting in January 2018, in order to provide high-quality care for Wisconsin Medicaid adult members, certain SSI members must enroll in an HMO of the member's choice to continue getting health care through the SSI Medicaid program. An HMO is a network of doctors, hospitals, and clinics that can work together to help you manage your health care.

Why is the HMO enrollment policy changing for SSI members?

This change aims to improve the quality of care for SSI members. You will still have access to the same health care services that you get today. There are many benefits to being in an HMO that are not available in fee-for-service Medicaid (you may also know this as Title 19, medical assistance, or card services). The benefits of being in an HMO are explained in the following sections.

When is the change happening?

If this change applies to you, you will get a letter sometime between December 2017 and May 2018 based on the region you live in. After your letter, you will also get an enrollment packet that includes an HMO program guide and HMO choice booklet.

The change will begin based on the list below for the region you live in.

- February 2018: Region 1 (North)
- March 2018: Region 3 (West Central)
- April 2018: Region 5 (Southeast)
- May 2018: Region 6 (Milwaukee)
- June 2018: Region 2 (Northeast)
- June 2018: Region 4 (South Central)

Who must enroll in the Medicaid SSI HMO Program?

To enroll in an SSI HMO, you must meet all of the following program rules:

- Live in one of the SSI HMO service areas (refer to your enrollment packet)
- Be 19 years of age or older
- Receive Medicaid SSI or SSI-related Medicaid because of a disability determined by the Disability Determination Bureau

Who may enroll in the Medicaid SSI HMO Program?

You can choose not to enroll in a Medicaid SSI HMO if you:

- Live in one of the SSI HMO service areas.
- Are 19 years of age or older.
- Receive Medicaid SSI or SSI-related Medicaid because of a disability determined by the Disability Determination Bureau.
- Get both Medicaid and Medicare.
- Are in the Medicaid Purchase Plan (MAPP).
- Have only one SSI HMO available in the area where you live.
- Are Native American and a member of a federally recognized tribe.

Who cannot enroll in the Medicaid SSI HMO Program?

- Children 18 years and younger
- Medicaid SSI members that live in a medical facility or nursing home
- Medicaid SSI members taking part in a home and community-based waivers program, for example, Community Integration Program (CIP) or Community Options Program (COP), Family Care, Family Care Partnership, IRIS (Include, Respect, I Self-Direct), or Program of All-Inclusive Care for the Elderly (PACE).

What services are covered by Medicaid SSI HMOs?

SSI HMOs cover medically necessary Medicaid SSI services. Services SSI HMOs cover include, but are not limited to, the following:

- Doctor visits and hospital care
- Eye care, including eyeglasses
- Outpatient and emergency care
- Prenatal care
- Medical equipment and supplies
- Mental health services
- Hearing services, including hearing aids
- Family planning services
- Home health care
- Personal care services
- Physical and occupational therapy
- Substance abuse (alcohol and other drug abuse) services
- Dental care in certain counties

Note: Some Medicaid SSI HMOs cover dental care. If so, you must see a dentist in your SSI HMO's network. For SSI HMOs that do not cover dental care, dental care is provided by Medicaid fee-for-service

What services are not covered by the SSI HMO for which members will continue to receive Medicaid fee-for-service?

- Prescription drugs
- Nursing home stays (after 90 days)
- County-matched services
 - Community support programs (CSPs)
 - Comprehensive community services (CCS)
 - Crisis intervention
 - Targeted case management (TCM)
- Dental services—covered by HMOs in Milwaukee, Waukesha, Racine, and Kenosha
- Non-emergency medical transportation (covered by MTM)
- Chiropractic services (may be fee-for-service)
- Home and community-based waivers services

How do you choose your Medicaid SSI HMO?

It is important to choose the Medicaid SSI HMO that best meets your health care needs. You can ask your health care providers which Medicaid SSI HMOs they belong to, or you can call the HMO enrollment specialist at 1-800-291-2002 to see which HMOs include your health care providers and clinics. If you do not make a selection, an HMO will be chosen for you, which may not include your health care providers.

Your health care providers may include a:

- Primary care doctor.
- Mental health provider.
- Specialty doctor.
- Personal care provider.
- Home health care provider.
- Clinic.
- Hospital.

Your health care providers may not all belong to one Medicaid SSI HMO. You then need to decide which provider is most important to you when choosing your SSI HMO.

Other things to consider:

- What are the office hours for the doctors, clinics, and other providers in that Medicaid SSI HMO?
- Do you have other health insurance? You will be expected to see health care providers who accept your other insurance as well as your Medicaid SSI health plan.

What if I am currently receiving care or treatment from a health care provider that is not in a Medicaid SSI HMO network?

SSI HMOs must continue a new member's current care. This means after enrolling in your SSI HMO, you may continue to see your current provider who is not in your SSI HMO network for up to 90 days. You may ask your SSI HMO to invite your provider to join the SSI HMO network.

How to Get Help

Call the **HMO enrollment specialist at 1-800-291-2002**. They will:

- Tell you if you must choose an HMO now.
- Find out which Medicaid SSI HMO(s) your doctor, hospital, or clinic belongs to.
- Help you select a Medicaid SSI HMO over the telephone or help you fill out an enrollment choice form that you can mail.
- Answer your questions about how the Medicaid SSI HMO works.

How do I enroll in a Medicaid SSI HMO?

- You can fill out, sign, and mail the enrollment choice form found in this packet.
- You can call the **HMO enrollment specialist at 1-800-291-2002** to give your choice of Medicaid SSI HMO over the telephone.
- You can meet the HMO enrollment specialist face-to-face. Call **1-800-291-2002** for details.

What happens after I am enrolled in the Medicaid SSI HMO?

You will get a membership packet from the Medicaid SSI HMO that will tell you more. The membership packet lists the doctors, hospitals, and clinics that belong to the health plan. It will also explain the services the Medicaid SSI HMO provides.

Once you are enrolled in a Medicaid SSI HMO, call the HMO to:

- Find out the services the SSI HMO provides.
- Find out the doctors and clinics you can use.
- Pick or change your primary care provider.
- Set up a date for your health assessment.

If you are not happy with the services, doctors, hospitals, or clinics provided by the Medicaid SSI HMO, call an **HMO enrollment specialist at 1-800-291-2002**. The HMO enrollment specialist can help you take the next step, including changing your Medicaid SSI HMO.

After enrolling in an SSI HMO, you have 90 days to change your mind and enroll in a different SSI HMO. After the first 90 days of SSI HMO enrollment, you will be unable to change your SSI HMO for nine additional months. Each year, members get a letter with the option to switch to a different SSI HMO.

What if I forget to choose a Medicaid SSI HMO?

You will be assigned to a Medicaid SSI HMO if you do not make a choice. It is important for you to call the **HMO enrollment specialist at 1-800-291-2002** to find out what choices you have. The letter and the enrollment choice form included in the packet you received also explain what choices you have.

It is important to choose your own SSI HMO so that you can be sure your doctors and clinics are in the SSI HMO's network. If an SSI HMO is chosen for you, your doctors or clinics may not be in the SSI HMO's network.

What if I am not happy with my Medicaid SSI HMO?

After enrolling in an SSI HMO, you have 90 days to change your mind and enroll in a different SSI HMO. Depending on where you live, there may be different choices. You may be able to choose a different Medicaid SSI HMO. To find out what you can do, call the **HMO enrollment specialist at 1-800-291-2002**.

Do I have rights?

As a member of a Medicaid SSI HMO in Wisconsin, you have the following rights:

- You have the right to continue care with your current provider for the first 90 days of enrollment.
- You have the right to have prior authorizations honored at the same level of care for at least 90 days after enrollment.
- You have the right to information about your Medicaid SSI HMO and how it works.
- You have the right to ask questions and to file complaints and appeals.
- You have the right to fair treatment.

All people applying for or getting benefits are protected against discrimination based on race, color, national origin, sex, age, or disability. State and federal laws require all Medicaid benefits to be provided on a nondiscriminatory basis. If you believe you have been discriminated against in any way that relates to applying for Medicaid or getting Medicaid services, contact:

Affirmative Action/Civil Rights Compliance Officer
P.O. Box 7850
Madison, WI 53707-7850
1-608-266-9372 or 1-888-701-1251 (TTY)

Or you may also register complaints at the federal level with:

U.S. Dept. of Health and Human Services
Director/Office for Civil Rights—Region V
233 N. Michigan Ave., Ste. 240
Chicago, IL 60601
1-312-886-2359 or 1-312-353-5693 (TTY)

Do SSI HMOs have to provide assistance for people with disabilities?

People with disabilities have the right to get assistance. The health care providers in your SSI HMO must assist people with disabilities. The Americans with Disabilities Act (ADA) guarantees this right. This means the doctor's office or hospital must be easy to enter and exit. Your SSI HMO's care manager can make sure the doctor's office or hospital meets your needs.

- The health care providers in your Medicaid SSI HMO must provide interpreter services for people who are deaf or hard of hearing.
- The health care providers in your Medicaid SSI HMO must provide interpreter services for people who speak different languages.
- If you are blind or visually impaired, you can get a copy of a Medicaid SSI HMO member handbook and other information in Braille or on audiotape.

Do I have any responsibilities?

To get the best health care, you have to be responsible for:

- Telling the doctors and nurses how you feel.
- Getting medical care when you need it.
- Taking your prescriptions and following the doctor's advice.
- Following the Medicaid SSI HMO's rules for getting health services.
- Keeping the appointments you make.

- Asking your doctor, Medicaid SSI HMO, or care coordinator questions.
- Telling your Medicaid SSI HMO what you think.

Who should I contact if I have problems or questions?

If you have questions or problems about your doctor, health care, or your Medicaid SSI HMO, there are resources available to you.

There are people who will help you get the health care you need. There are also many ways to solve problems and answer questions.

Examples of problems and questions:

- Being refused care
- Being unable to get an appointment
- Being unable to see the doctor of your choice or a specialty doctor
- Being unable to find someone who speaks your language
- Being unhappy with the health care provider's attitude
- Not getting help when you call the SSI HMO's 800 number
- Being denied medically necessary equipment or services
- Getting a bill your Medicaid SSI HMO should pay

If these questions or problems happen to you, you can contact the following:

- Your HMO to speak with the HMO member advocate.
- The Medicaid SSI ombudsman at 1-800-760-0001.
- An HMO enrollment specialist at 1-800-291-2002.
- The SSI managed care external consumer advocate at 1-800-708-3034 or 414-773-4646.

Nondiscrimination Statement

The Department of Health Services is an equal opportunity employer and service provider. If you have a disability and need to access this information in an alternate format, or need it translated to another language, please contact the HMO enrollment specialist at 1-800-291-2002. All translation services are free of charge. For civil rights questions call 608-266-9372 or 888-701-1251 TTY.

