


Medica AccessAbility Solution® Enhanced Special Needs BasicCare (SNBC) Special Needs Plan (SNP) Fact Sheet

Overview

Medica offers AccessAbility Solution® Enhanced for Minnesota Health Care Programs (MHCP) enrollees in the Special Needs BasicCare (SNBC) managed care program. This product is for members with a certified disability ages 18 through 64 who are eligible for both Medicare and Medical Assistance. Medica assigns each member within a care system that is associated with the member’s selection of a primary care clinic during enrollment. Members are able to change their primary care clinic on a monthly basis. Each member is assigned a Care Coordinator who is a trained health care professional and conducts a person-centered assessment upon enrollment and again at least annually, arranges for covered services, and assists the member in fully using their available services and supports.

Enrollment in SNBC SNP is voluntary; enrollees can complete a Medica AccessAbility Solution® Enhanced enrollment application directly with a Medica sales representative. Medica waives member cost sharing for Medica AccessAbility Solution® Enhanced members.

ID Card Example 2022-2023

 <p>Payer ID: 94265 ID: 999999901 Group: _____ MHC 08979 Name: _____ Care Type: Medica AccessAbility Solution Enhanced</p> <div style="text-align: center;">  <small>Prescription Drug Coverage</small> </div> <div style="border: 1px solid black; padding: 2px; width: fit-content; margin: 5px auto;"> Rx BIN: 610014 Rx PCN: MNDE Rx Group: 4MEDICA </div> <p>In case of EMERGENCY go to the nearest Emergency Room or call CMS: Hxxxx-</p>	<p>medica.com/a</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 60%;">Member Services (TTY 711):</td> <td>(888) 347-3630</td> </tr> <tr> <td>NurseLine™ by HealthAdvocate™:</td> <td>(866) 715-0915</td> </tr> <tr> <td>Mental Health Crisis:</td> <td>(800) 848-8327</td> </tr> <tr> <td>Pharmacies call ESI:</td> <td>(800) 922-1557</td> </tr> <tr> <td>Providers call:</td> <td>(800) 458-5512</td> </tr> </table> <p>Card Issued:</p> <p>Medical claims to: Medica, PO Box 30990, Salt Lake City, UT 84130-0990 Dental Claims: Delta Dental®, PO Box 9120, Farmington Hills, MI 48333-9120 RX Claims: Express Scripts, PO Box 14718, Lexington, KY 40512-4718</p> <p>Appeals and Grievances: Medica: (888) 347-3630 or Fax: (952) 992-3016 (TTY 711) State of MN - DHS Appeals Unit, PO Box 64941, St Paul, MN 55164-0941 Managed Care Ombudsman – (651) 431-2660 or (800) 657-3729 (TTY 711)</p>	Member Services (TTY 711):	(888) 347-3630	NurseLine™ by HealthAdvocate™:	(866) 715-0915	Mental Health Crisis:	(800) 848-8327	Pharmacies call ESI:	(800) 922-1557	Providers call:	(800) 458-5512
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Group Numbers

- 08XXX

Provider Networks

- Medica Choice® direct contracted medical provider network
- OptumHealthSM Care Solutions, Physical Health – chiropractic services provider network
- Express Scripts® (ESI) – Pharmacy Benefit Manager (PBM)
- Minnesota Select Dental™ (MSD) network, administered by Delta Dental® of Minnesota (DDMN)
- Medica Behavioral Health (MBH) administered by Optum Behavioral Health – mental health and substance use disorder treatment (SUD) provider network

Access to inpatient services and certain outpatient services is restricted to facilities that participate with this product. Covered services (unless emergency/urgent care) outside the network require prior notification, except if the member has primary insurance coverage through a commercial plan or Medicare. Medica does not require prior notification if the primary insurance deemed the service as covered.

Program Features

- Members select their preferred primary care clinic (PCC); Medica groups all network PCCs into care systems designed to improve care delivery across the product
- Integrates Original Medicare (Parts A&B) and Part D benefits with services covered under Medical Assistance for eligible Minnesota Health Care Program (MHCP) Enrollees
- Every member is assigned a Care Coordinator, who is either a Medica employee or trained delegate, as the member's primary point of contact for all health and wellness coordination
- The member's Medica Care Coordinator also coordinates with the member's county agency for services that are not paid by Medica but may be paid by another source (e.g. waiver programs)

Care Systems

- A Care System consists of a provider entity that spans the continuum of care including physicians, nurses, clinics, hospitals, nursing homes and social workers. For a current list of care system partners, see [Medica Care Coordinated Products Group Numbers](#)

County Partners

- Medica is contracted with several county agencies. These county staffs perform care coordination as a delegate of Medica for Medica AccessAbility Solution members. For a current list, see [County, Care System, and Agency Contact Information](#)

Membership Criteria

- Eligible for Medical Assistance
- Eligible for Medicare Parts A and B
- Be 18-64 years of age with a certified disability
- Reside in the current Medica AccessAbility Solution® Enhanced service area
- Complete a Medica AccessAbility Solution® Enhanced enrollment form

Claim Submission

Claims should be submitted to:

Medica
PO Box 30990
Salt Lake City, UT 84130
Electronic payer ID: 94265

[See details on claim submission and product guidelines.](#)