


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


Overview

Medica offers AccessAbility Solution® Enhanced for Minnesota Health Care Programs (MHCP) enrollees in the Special Needs BasicCare (SNBC) program. This product is for members with disabilities ages 18 through 64 who are enrolled in both Medicare and Medical Assistance. Medica assigns each member to a care system that is based on 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, typically a registered nurse or independently licensed social worker, who conducts a person-centered assessment upon enrollment and again at least annually, arranges for services, and assists the member in navigating the healthcare system.

ID Card Example (2020)

<p>MEDICA®</p> <p>Payer ID: 94265 Card Issuer: 80840 ID: 999999901 Group 08979 MHCP</p> <p>Name: JOHN Q 00057/01672/08979 PCP: PCP CLINIC ON THE LAKE DOWNTOWN PCP Phone: (123) 456-7890</p> <p>Care Type: AccessAbility Enh SNBC SVC Type: Medical, Dental/Part D</p> <p>In case of EMERGENCY go to the nearest Emergency Room or call 911.</p> <div style="text-align: right;">  <table border="1" style="border-collapse: collapse;"> <tr><td>Rx BIN: 610014</td></tr> <tr><td>Rx PCN: MNDE</td></tr> <tr><td>Rx Group: 4MEDICA</td></tr> </table> </div> <p style="text-align: right;">CMS: Hxxxx-xxx</p>	Rx BIN: 610014	Rx PCN: MNDE	Rx Group: 4MEDICA	<p>medica.com/ase Card Issued: 10/28/19</p> <p>Member Services (TTY 711): 1-888-347-3630 NurseLine™ by HealthAdvocate™: 1-866-715-0915 Medica Behavioral Health: 1-800-848-8327 Delta Dental Questions: 1-800-459-8574 Pharmacies call ESI: 1-800-922-1557 Providers call: 1-800-459-5512</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, Attn: Medicare Part D, PO Box 14718, Lexington, KY 40512-4718</p> <p>Appeals and Grievances: Medica: 1-888-347-3630 or Fax: 952-992-3016 (TTY 711) State of MN - DHS Appeals Unit, PO Box 64941, St Paul, MN 55164-0941 Managed Care Ombudsman - 1-651-431-2660 or 1-800-657-3729 (TTY: 711)</p>
Rx BIN: 610014				
Rx PCN: MNDE				
Rx Group: 4MEDICA				

ID Card Example (2021)

<p>MEDICA®</p> <p>Payer ID: 94265 MHCP ID: 999999901 Group 08977</p> <p>Name: JOHN Q 00057/01672/08977</p> <p>Care Type: Medica AccessAbility Solution Enhanced SVC Type: Medical/Dental/Part D</p> <p>In case of EMERGENCY go to the nearest Emergency Room or call 911.</p> <div style="text-align: right;">  <table border="1" style="border-collapse: collapse;"> <tr><td>Rx BIN: 610014</td></tr> <tr><td>Rx PCN: MNDE</td></tr> <tr><td>Rx Group: 4MEDICA</td></tr> </table> </div> <p style="text-align: right;">CMS: Hxxxx-xxx</p>	Rx BIN: 610014	Rx PCN: MNDE	Rx Group: 4MEDICA	<p>medica.com/ase Card Issued: 08/10/20</p> <p>Member Services (TTY 711): 1-888-347-3630 NurseLine™ by HealthAdvocate™: 1-866-715-0915 Mental Health Crisis: 1-800-848-8327 Pharmacies call ESI: 1-800-922-1557 Providers call: 1-800-459-5512</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: 1-888-347-3630 or Fax: 952-992-3016 (TTY 711) State of MN - DHS Appeals Unit, PO Box 64941, St Paul, MN 55164-0941 Managed Care Ombudsman - 1-651-431-2660 or 1-800-657-3729 (TTY: 711)</p>
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Rx PCN: MNDE				
Rx Group: 4MEDICA				

Group Numbers

- 08XXX

Provider Networks

- Medica AccessAbility Solution Enhanced utilizes the Medica Choice® network for specialty care
- OptumHealthSM Care Solutions, Physical Health (Chiropractic care)
- Express Scripts® is the Pharmacy Benefits Manager (PBM)
- Minnesota's Select Dental™ network, administered by Delta Dental® of Minnesota
- Medica Behavioral Health (Behavioral Health and Substance Use Disorder Treatment network)

- Access to inpatient services and certain outpatient services is restricted to facilities that participate with these products. 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 would not require prior notification if the primary insurance deemed the service as covered

Program Features

- Members elect their preferred primary care clinic; Medica groups all network providers into care systems designed to improve care delivery across the product
- Integrates both Original Medicare (Parts A&B) and Medicare Part D benefits with services covered under Medical Assistance for Minnesota Health Care Program (MHCP) Enrollees
- Voluntary enrollment allows members to elect their preferred primary care clinic; Medica groups all network providers into one of three care systems designed to improve care delivery across the product
- Every member is assigned a Care Coordinator who is either a Medica employee or delegate and is 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 covered by Medica but may be covered by another source (e.g. waiver programs)

Care Systems

A Care System consists of a system of providers that span the continuum of care including doctors, nurses, clinics, hospitals, nursing homes and social workers. For a current list of care systems, see the [Medica Care Coordinated Products Group Numbers](#) document on medica.com.

County Partners

- Medica has contracted to partner with several of the participating SNBC counties. These counties are part of the Medica Care System. Care Coordinators act on behalf of Medica for Medica's SNBC members. For a current list, see the "[County, Care System, and Agency Contact Information](#)" document on medica.com

Membership Criteria

- Qualify for Medicaid
- Have Medicare Parts A and B benefits
- Be 18-64 years of age
- Live in current Medica AccessAbility Solution Enhanced service area
- Voluntarily complete a Medica AccessAbility Solution Enhanced enrollment form

Medica AccessAbility Solution Enhanced Benefits

- Medicaid and Medicare
- Over-the-counter drugs
- Dental benefits
- Care coordination by care systems
- Preventive services
- Durable medical equipment (DME)
- Hearing services
- Vision services
- Physical exams

- Members may have access to additional services not covered by their medical benefits through a waiver managed by their county. DD, TBI, and CADI county waivers are some of the examples. Providers should contact DHS for more information.

Claim Submission

Claims should be submitted to:

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