

2022

Summary of Benefits

New Jersey

WellCare Dual Liberty (HMO D-SNP)
Atlantic, Bergen, Burlington, Camden, Cape May, Cumberland,
Essex, Gloucester, Hudson, Mercer, Middlesex, Monmouth, Morris,
Ocean, Passaic, Salem, Somerset, Sussex, Union, Warren

H0913 | Plan 013



Introduction

This document is a brief summary of the benefits and services covered by WellCare Dual Liberty (HMO D-SNP). 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 WellCare Dual Liberty (HMO D-SNP). Key terms and their definitions appear in alphabetical order in the last chapter of the *Evidence of Coverage*.

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If you have questions, please call WellCare Dual Liberty (HMO D-SNP) at **1-844-917-0175 (TTY 711)**, Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. The call is free. For more information, visit www.wellcare.com/medicare.

WellCare Dual Liberty (HMO D-SNP) Summary of Benefits 2022

A. Disclaimers



This is a summary of health services covered by Wellcare Dual Liberty (HMO D-SNP) for 2022. This is only a summary. Read the Evidence of Coverage for the full list of benefits.

- You can get this document for free in other formats, such as large print, braille, or audio. Call **1-844-917-0175 (TTY 711)**, Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m.. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. The call is free.
- You can get this document for free in other formats, such as large print, braille, or audio.
- This document is available in languages other than English. For additional information, call us at **1-844-917-0175 (TTY 711)**.
- You can read the *Medicare & You* handbook. Every year in the fall, this booklet is mailed to people with Medicare. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare. If you don't have a copy of this booklet, you can access it online at the Medicare website (www.medicare.gov) or request a copy by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call **1-877-486-2048**.
- Please contact WellCare Dual Liberty (HMO D-SNP) for details.

WellCare Dual Liberty (HMO D-SNP) Summary of Benefits 2022

ATTENTION: If you speak a language other than English, language assistance services, free of charge, are available to you. Call **1-877-374-4056** (TTY: 711).

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-877-374-4056** (TTY: 711).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 **1-877-374-4056** (TTY: 711)。

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số **1-877-374-4056** (TTY: 711).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. **1-877-374-4056** (TTY: 711)번으로 전화해 주십시오.

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa **1-877-374-4056** (TTY: 711).



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WellCare Dual Liberty (HMO D-SNP) Summary of Benefits 2022

B. Frequently Asked Questions

The following chart lists frequently asked questions.

Frequently Asked Questions (FAQ)	Answers
What is a Fully Integrated Dual Eligible Special Needs Plan (FIDE SNP)?	<p>A NJ Fully Integrated Dual Eligible Special Needs Plan (FIDE SNP) is a managed health care option for NJ FamilyCare members with Medicare. A NJ FIDE SNP covers all of your Medicare, NJ FamilyCare (Medicaid) and prescription drug benefits, including Medicare Part D, and extra benefits, in one health plan, with one Member Identification (ID) Card, and no copays for medical services or prescription drugs. A FIDE SNP coordinates all of your care.</p> <p>If you join a FIDE SNP, you do not lose any of your NJ FamilyCare, Managed Long Term Services and Supports (MLTSS), or Medicare benefits. Every service you have with NJ FamilyCare and Medicare is still available, along with access to some additional services.</p> <p>To be eligible to enroll in a FIDE SNP in New Jersey, you must be entitled to Medicare Parts A and B and eligible for full NJ FamilyCare benefits. You must also live in the plan's "service area" (the counties where that plan is offered). The counties that make up the service area for WellCare Dual Liberty (HMO D-SNP) are listed on page 5 of this document.</p>
Will I get the same Medicare and NJ FamilyCare benefits in WellCare Dual Liberty (HMO D-SNP) that I get now?	<p>If you are coming to WellCare Dual Liberty (HMO D-SNP) from Original Medicare or another Medicare plan, you may get benefits or services differently. You will get almost all of your covered Medicare and NJ FamilyCare benefits directly from WellCare Dual Liberty (HMO D-SNP).</p> <p>When you enroll in WellCare Dual Liberty (HMO D-SNP) you and your Care Team will work together to develop an individualized Plan of Care to address your health and support needs, reflecting your personal preferences and goals. If you are taking any Medicare Part D prescription drugs that WellCare Dual Liberty (HMO D-SNP) does not normally cover, you can get a temporary supply, and we will help you to transition to another drug or get an exception for WellCare Dual Liberty (HMO D-SNP) to cover your drug if medically necessary.</p>
Can I use the same health care providers I use now? (This section is continued on the next page)	<p>That is often the case. If your providers (including doctors, therapists, pharmacies, and other health care providers) work with WellCare Dual Liberty (HMO D-SNP) and have a contract with us, you can keep using them.</p>

WellCare Dual Liberty (HMO D-SNP) Summary of Benefits 2022

Frequently Asked Questions (FAQ)	Answers
(continued from previous page)	<ul style="list-style-type: none"> • Providers with an agreement with us are “in-network.” You must use the providers in the WellCare Dual Liberty (HMO D-SNP) network. • If you need urgent or emergency care or out-of-area dialysis services, you can use providers outside of WellCare Dual Liberty (HMO D-SNP)'s network. <p>To find out if your providers are in the plan’s network, call Member Services or read WellCare Dual Liberty (HMO D-SNP)'s Provider and Pharmacy Directory. You can also visit our website at www.wellcare.com/medicare for the most current listing.</p> <p>If WellCare Dual Liberty (HMO D-SNP) is new for you, we will work with you to develop an individualized Plan of Care to address your needs. You can keep using the providers you use now for 90 days or until your individualized Plan of Care is completed.</p>
What is a Care Manager?	A Care Manager is your main contact person at our plan. This person helps to manage all of your providers and services and make sure you get what you need.
What are Managed Long Term Services and Supports (MLTSS)?	Managed Long Term Services and Supports (MLTSS) are help for people who need assistance to do everyday tasks like taking a bath, getting dressed, making food, and taking medicine. Often these services are provided at your home or in your community, but they could also be provided in a nursing home or hospital when necessary. MLTSS is available to members who meet certain clinical and financial requirements.
What happens if I need a service but no one in WellCare Dual Liberty (HMO D-SNP)'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, WellCare Dual Liberty (HMO D-SNP) will cover services provided by an out-of-network provider.
Where is WellCare Dual Liberty (HMO D-SNP) available?	The service area for this plan includes: Atlantic, Bergen, Burlington, Camden, Cape May, Cumberland, Essex, Gloucester, Hudson, Mercer, Middlesex, Monmouth, Morris, Ocean, Passaic, Salem, Somerset, Sussex, Union, Warren Counties, New Jersey. You must live in this area to join the plan.
(This section is continued on the next page)	Prior authorization means that you must get approval from WellCare Dual Liberty (HMO D-SNP) before the plan will cover a specific service, item, or drug or out-of-network provider. WellCare Dual Liberty (HMO D-SNP) may not cover the service, item or drug if you don’t get prior approval. If you need urgent or emergency care or out-of-area dialysis services, you don't need to get approval first. WellCare Dual Liberty (HMO D-SNP) can provide you with a list of services or procedures that require you to get prior authorization from WellCare Dual Liberty (HMO D-SNP) before the service is provided.



If you have questions, please call WellCare Dual Liberty (HMO D-SNP) at **1-844-917-0175 (TTY 711)**, Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. The call is free. For more information, visit www.wellcare.com/medicare.

WellCare Dual Liberty (HMO D-SNP) Summary of Benefits 2022

Frequently Asked Questions (FAQ)	Answers
(continued from previous page)	Refer to Chapter 3, of the <i>Evidence of Coverage</i> to learn more about prior authorization. Refer to the Benefits Chart in Chapter 4 of the <i>Evidence of Coverage</i> to learn which services require a prior authorization.
What is a referral?	<p>A referral means that your primary care provider (PCP) must give you approval before you can use specialist or other providers in the plan's network. If you don't get approval, WellCare Dual Liberty (HMO D-SNP) may not cover the services. You don't need a referral for certain specialists, such as women's health specialists.</p> <p>WellCare Dual Liberty (HMO D-SNP) can provide you with a list of services that require you to get a referral from your PCP before the service is provided. For more information on when a referral is needed, call Member Services or refer to Chapter 3, of the <i>Evidence of Coverage</i>.</p>
Do I pay a monthly amount (also called a premium) under WellCare Dual Liberty (HMO D-SNP)?	<p>No. You will not pay any monthly premiums to WellCare Dual Liberty (HMO D-SNP) for your health coverage.</p> <p>Additionally, Medicaid will pay your Medicare Part B premium for you.</p>
Do I pay a deductible as a member of WellCare Dual Liberty (HMO D-SNP)?	No. You do not pay deductibles in WellCare Dual Liberty (HMO D-SNP).
What is the maximum out-of-pocket amount that I will pay for medical services as a member of WellCare Dual Liberty (HMO D-SNP)?	There is no cost sharing for medical services in WellCare Dual Liberty (HMO D-SNP), so your annual out-of-pocket costs will be \$0 .

WellCare Dual Liberty (HMO D-SNP) Summary of Benefits 2022

C. Overview of Services

The following chart is a quick overview of what services you may need 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 need hospital care	Inpatient hospital care	\$0	Except in an emergency, your health care provider must tell the plan of your hospital admission. Services may require prior authorization. Services may require a referral from your doctor.
	Outpatient hospital services (including outpatient treatment by a doctor or a surgeon)	\$0	Services may require prior authorization. Services may require a referral from your doctor.
	Ambulatory Surgery Center (ASC)	\$0	Services may require prior authorization. Services may require a referral from your doctor.
You want a health care provider	Doctor visits (including visits to Primary Care Providers, telemedicine services and specialists)	\$0	Services may require prior authorization. Services may require a referral from your doctor.
	Visits to treat an injury or illness	\$0	Services may require prior authorization. Services may require a referral from your doctor.
	Preventive care (care to keep you from getting sick, such as flu shots and other immunizations)	\$0	
	Wellness visits, such as a physical	\$0	
	“Welcome to Medicare” preventive visit (one time only)	\$0	



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WellCare Dual Liberty (HMO D-SNP) Summary of Benefits 2022

Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need emergency care	Emergency room services	\$0	You may go to any emergency room if you reasonably believe you need emergency care. You do not need prior authorization and you do not have to be in-network. Emergency room services are covered outside of the U.S. and its territories under limited circumstances. Contact the plan for details.
	Urgently needed services	\$0	Urgently needed services are not emergency care. You do not need prior authorization and you do not have to be in-network. Urgently needed services are covered outside of the U.S. and its territories under limited circumstances. Contact the plan for details.
	Worldwide Emergency Coverage	\$0	Worldwide emergency and urgent care services outside the United States are covered. You are covered for up to \$50,000 every year for emergency or urgent care services outside the United States. Contact the plan for details.
You need medical tests	Lab tests, such as blood work	\$0	Services may require prior authorization. Services may require a referral from your doctor.
	X-rays or other pictures, such as CAT scans	\$0	Services may require prior authorization. Services may require a referral from your doctor.
	Screenings, such as tests to check for cancer	\$0	Services may require prior authorization. Services may require a referral from your doctor.
You need hearing/auditory services	Hearing screenings (including routine hearing exams)	\$0	Services may require prior authorization. Services may require a referral from your doctor.
	Hearing aids (as well as fittings, and associated accessories and supplies)	\$0	Services may require prior authorization. Services may require a referral from your doctor.

WellCare Dual Liberty (HMO D-SNP) Summary of Benefits 2022

Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need dental care	Dental services (including, but not limited to, routine exams and cleanings, X-rays, fillings, crowns, extractions, dentures, and endodontic and periodontal care)	\$0	Services may require prior authorization. Services may require a referral from your doctor.
You need eye care	Vision services (including annual eye exams)	\$0	Services may require prior authorization. Services may require a referral from your doctor.
	Glasses or contact lenses	\$0	Services may require prior authorization. Services may require a referral from your doctor.
	Other vision care (including diagnosis and treatment for diseases and conditions of the eye)	\$0	Services may require prior authorization. Services may require a referral from your doctor.
You have a mental health condition	Inpatient mental health care (long-term mental health services, including inpatient services in a psychiatric hospital, general hospital, psychiatric unit of an acute care hospital, Short Term Care Facility (STCF), or critical access hospital)	\$0	All members are covered by the plan for acute inpatient hospitalization in a general hospital, regardless of the admitting diagnosis or treatment. Services may require prior authorization. Services may require a referral from your doctor.
	Outpatient mental health care (including, but not limited to, adult mental health rehabilitation in supervised group homes and apartments, clinic and hospital services, partial care and medication management) (Note: This is not a complete list of the plan's expanded outpatient mental health services. Call Member Services or read the <i>Evidence of Coverage</i> for more information.)	\$0	Services may be provided by a state-licensed psychiatrist or doctor, clinical psychologist, clinical social worker, clinical nurse specialist, nurse practitioner, physician assistant, Independent Practitioner Network (IPN) Psychiatrist, Psychologist or Advanced Practice Nurse (APN), or other qualified mental health care professional as allowed under applicable state laws. Services may require prior authorization. Services may require a referral from your doctor.



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WellCare Dual Liberty (HMO D-SNP) Summary of Benefits 2022

Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You have a substance use disorder	<p>Inpatient and outpatient substance use disorder treatment services (including, but not limited to, detoxification and withdrawal management, short-term residential services, residential treatment center services, and methadone Medication Assisted Treatment)</p> <p>(Note: This is not a complete list of the plan's expanded substance use disorder services. Call Member Services or read the <i>Evidence of Coverage</i> for more information.)</p>	\$0	Services may require prior authorization. Services may require a referral from your doctor.
You need a place to live with people available to help you	Skilled nursing care	\$0	Services may require prior authorization. Services may require a referral from your doctor.
	Nursing home care	\$0	
	Custodial care (long-term care in a Nursing Facility)	\$0	Services are covered for those who meet Nursing Facility level of care and whose rehabilitation goals have been met or discontinued with no plan to discharge to the community within 180 days of admission.
You need therapy after a stroke or accident	Occupational, physical, or speech therapy	\$0	Services may require prior authorization. Services may require a referral from your doctor.
You need help getting to health services	Ambulance services	\$0	Services may require prior authorization from your doctor.
	Emergency transportation	\$0	Services may require prior authorization from your doctor.

WellCare Dual Liberty (HMO D-SNP) Summary of Benefits 2022

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	Medicare Part B prescription drugs (including those given by your provider in their office, some oral anti-cancer drugs, and some drugs used with certain medical equipment)	\$0	Read the <i>Evidence of Coverage</i> for more information on these drugs. Services may require prior authorization from your doctor.
	Medicare Part D prescription drugs Generic and brand name drugs	\$0	<p>There may be limitations on the types of drugs covered. Refer to WellCare Dual Liberty (HMO D-SNP)'s List of Covered Drugs at www.wellcare.com/medicare for more information.</p> <p>WellCare Dual Liberty (HMO D-SNP) may require you to first try one drug to treat your condition before it will cover another drug for that condition.</p> <p>Some drugs have quantity limits.</p> <p>Your provider must get prior authorization from WellCare Dual Liberty (HMO D-SNP) for certain drugs.</p> <p>You must use certain pharmacies for a very limited number of drugs, due to special handling, provider coordination, or patient education requirements that cannot be met by most pharmacies in your network. These drugs are listed on the plan's website, WellCare Dual Liberty (HMO D-SNP)'s List of Covered Drugs, and printed materials, as well as on the Medicare Prescription Drug Plan Finder on www.medicare.gov/plan-compare.</p> <p>In some cases an extended day supply is available up to 90 days.</p>
	Over-the-counter (OTC) drugs	\$0	There may be limitations on the types of drugs covered.
	Diabetes medications	\$0	



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WellCare Dual Liberty (HMO D-SNP) Summary of Benefits 2022

Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need foot care	Podiatry services (including routine exams)	\$0	Services may require prior authorization. Services may require a referral from your doctor.
	Orthotic services	\$0	Services may require prior authorization.
You need durable medical equipment (DME) or supplies	Wheelchairs, nebulizers, crutches, rollabout knee walkers, walkers, and oxygen equipment and supplies, for example (Note: This is not a complete list of covered DME or supplies. Call Member Services or read the <i>Evidence of Coverage</i> for more information.)	\$0	Services may require prior authorization.
You need interpreter services	Spoken language interpreter	\$0	
	Sign language interpreter	\$0	
Other covered services (This section is continued on the next page)	Acupuncture	\$0	Services may require a referral from your doctor.
	Care coordination	\$0	
	Chiropractic services	\$0	Services may require prior authorization. Services may require a referral from your doctor.
	Diabetic supplies	\$0	Services may require prior authorization.
	Early and Periodic Screening Diagnosis and Treatment (EPSDT) (including preventive screenings, medical examinations, vision and hearing screenings and services, immunizations, lead screening, and private duty nursing services)	\$0	EPSDT is for members under 21 years of age.
	Family planning	\$0	Family planning services furnished by out-of-network providers are covered directly by Medicaid fee-for-service.
	Hospice care	\$0	

WellCare Dual Liberty (HMO D-SNP) Summary of Benefits 2022

Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
(continued from previous page)	Mammograms	\$0	Services may require prior authorization.
	Managed Long Term Services and Supports (MLTSS) (including, but not limited to, assisted living services; cognitive, speech, occupational, and physical therapy; chore services; home-delivered meals; residential modifications (such as the installation of ramps or grab bars); vehicle modifications; social adult day care; and non-medical transportation)	\$0	MLTSS provides services for members that need the level of care typically provided in a Nursing Facility, and allows them to get necessary care in a residential or community setting. MLTSS is available to members who meet certain clinical requirements.
	Medical day care (including preventive, diagnostic, therapeutic, and rehabilitative services under medical and nursing supervision in an ambulatory care setting)	\$0	Medical day care is provided to meet the needs of individuals with physical and/or cognitive impairments in order to support their community living.
	Personal Care Assistance (PCA) (including health-related tasks performed by a qualified individual in a member's home, under the supervision of a registered professional nurse, as certified by a physician in accordance with a beneficiary's written plan of care)	\$0	
	Prosthetic services	\$0	Services may require prior authorization.
	Services to help manage your disease	\$0	

The above summary of benefits is provided for informational purposes only. For more information about your benefits, you can read WellCare Dual Liberty's (HMO D-SNP) Evidence of Coverage. If you have questions, you can also call WellCare Dual Liberty (HMO D-SNP) Member Services.



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WellCare Dual Liberty (HMO D-SNP) Summary of Benefits 2022

D. Additional services WellCare Dual Liberty (HMO D-SNP) covers

This is not a complete list. Call Member Services or read the *Evidence of Coverage* to find out about other covered services.

Additional services WellCare Dual Liberty (HMO D-SNP) covers	Your costs
<p>Fitness</p> <p>This benefit covers an annual membership at a participating health club or fitness center. For members who do not live near a participating fitness center and/or prefer to exercise at home, members can choose from available exercise programs to be shipped to them at no cost. A Fitbit fitness tracker is included in the home kit.</p>	\$0
<p>Nursing Hotline</p>	\$0
<p>Personal Emergency Response System (PERS)</p> <p>Members who meet a certain criteria can receive a medical alert system. Members can choose a traditional "hard-wired" PERS system that is connected via a landline, or select a cellular (wireless) system.</p>	\$0
<p>Meals Benefit - Chronic Meals - Post Discharge Meals</p> <p>Our plan also offers home-delivered meals as part of a supervised program designed to transition members with chronic conditions to lifestyle modifications. There is a maximum of 3 meals per day for up to 28 days, for a maximum of 84 meals per month. The benefit may be received for up to 3 months.</p>	\$0
<p>Over-the-counter (OTC) Items</p> <p>Our plan will pay up to \$410 every quarter to spend on eligible over-the-counter medicines and products used for medical purposes. Members can use either the OTC catalog or OTC card for covered items. You can use the catalog and order over the phone to have items delivered to your door or use the card to purchase items from participating stores.</p>	\$0
<p>Acupuncture</p> <p>Our plan provides members 24 visits every year. Acupuncture is the procedure of inserting and manipulating needles into various points on the body to relieve pain or for therapeutic purposes.</p>	\$0

WellCare Dual Liberty (HMO D-SNP) Summary of Benefits 2022

E. Benefits covered outside of WellCare Dual Liberty (HMO D-SNP)

This is not a complete list. Call Member Services to find out about other services not covered by WellCare Dual Liberty (HMO D-SNP) but available through Medicaid fee-for-service.

Other services covered directly by Medicaid fee-for-service	Your costs
Non-Emergency (Routine) Transportation (including mobile assistance vehicles (MAVs); non-emergency basic life support (BLS) ambulance (stretcher); and livery transportation services (such as bus and train fare or passes, or car service and reimbursement for mileage)	\$0
Targeted case management (chronic mental illness)	\$0
Behavioral Health Home (Care Management)	\$0
PACT (Program in Assertive Community Treatment)	\$0
CSS (Community Support Services)	\$0
Psychiatric Emergency Services (PES)/Affiliated Emergency Services (AES)	\$0



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WellCare Dual Liberty (HMO D-SNP) Summary of Benefits 2022

F. Services not covered by WellCare Dual Liberty (HMO D-SNP) (exclusions)

The following services are not covered by our plan. This is not a complete list. Call Member Services to find out about other excluded services.

Services not covered by WellCare Dual Liberty (HMO D-SNP) (exclusions)
Services not considered “reasonable and necessary” according to standards of Medicare and NJ FamilyCare
Experimental medical and surgical treatments, items, or drugs unless covered by Medicare or under a Medicare-approved clinical study
Surgical treatment for morbid obesity except when medically necessary
Elective or voluntary enhancement procedures
Cosmetic surgery or other cosmetic work unless required criteria are met
LASIK surgery

WellCare Dual Liberty (HMO D-SNP) Summary of Benefits 2022

G. Your rights and responsibilities as a member of the plan

As a member of WellCare Dual Liberty (HMO D-SNP) you have certain rights concerning your health care. You also have certain responsibilities to the health care providers who are taking care of you. Regardless of your health condition, you cannot be refused medically necessary treatment. You can 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 **Evidence of Coverage**.

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, race, color, religion, creed, sex (including sex stereotypes and gender identity), age, health status, mental, physical, or sensory disability, sexual orientation, genetic information, ability to pay, or ability to speak English. No health care provider should engage in any practice, with respect to any member that constitutes unlawful discrimination under any state or federal law or regulation.
 - Ask for and get information in other formats (for example, large print, braille, audio) free of charge
 - Be free from any form of physical restraint or seclusion
 - Not be billed by network providers
 - Have your questions and concerns answered completely and courteously
 - Apply your rights freely without any negative effect on the way WellCare Dual Liberty (HMO D-SNP) or your provider treats you
- **You have the right to get information about your health care.** This includes information on treatment and your treatment options, regardless of cost or benefit coverage. This information should be in a format and

language you can understand. These rights include getting information on:

- WellCare Dual Liberty (HMO D-SNP)
- The services we cover
- How to get services
- How much services will cost you
- Names of health care providers and Care Managers
- Your rights and responsibilities
- **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 can change your PCP at any time during the year. You can call 1-877-902-6784 if you want to change your PCP.
 - 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



If you have questions, please call WellCare Dual Liberty (HMO D-SNP) at **1-844-917-0175 (TTY 711)**, Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. The call is free. For more information, visit www.wellcare.com/medicare.

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- Refuse treatment as far as the law allows, even if your health care provider advises against it
 - Stop taking medicine, even if your health care provider advises against it
 - Ask for a second opinion about any health care that your PCP or your Care Team advises you to have. WellCare Dual Liberty (HMO D-SNP) will pay for the cost of your second opinion visit.
 - Make your health care wishes known in an advance directive
 - **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, other providers, and your health plan. Call 1-877-902-6784 if you need help with this service
 - Have your *Evidence of Coverage* and any printed materials from WellCare Dual Liberty (HMO D-SNP) translated into your primary language, and/or to have these materials read out loud to you if you have trouble seeing or reading. Oral interpretation services will be made available upon request and free of charge.
 - Be free of any form of physical restraint or seclusion that would be used as a means of coercion, force, discipline, convenience or retaliation
 - **You have the right to emergency and urgent care when you need it.** This means you have the right to:
 - Get emergency and urgent care services, 24 hours a day, seven days a week, without prior approval
 - 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 to ask for your records to be changed or corrected
 - Have your personal health information kept private. No personal health information will be released to anyone without your consent, unless required by law.
 - Have privacy during treatment
 - **You have the right to make complaints about your covered services or care.** This includes the right to:
 - Access an easy process to voice your concerns, and to expect follow-up by WellCare Dual Liberty (HMO D-SNP)
 - File a complaint or grievance against us or our providers. You also have the right to appeal certain decisions made by us or our providers
 - Ask for a State Appeal (State Fair Hearing)
 - Get a detailed reason why services were denied
- Your responsibilities include, but are not limited to, the following:**
- **You have a responsibility to treat others with respect, fairness and dignity.** You should:
-

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- Treat your health care providers with dignity and respect
- Keep appointments, be on time, and call in advance if you're going to be late or have to cancel
- **You have the responsibility to give information about you and your health.** You should:
 - Tell your health care provider your health complaints clearly and provide as much information as possible
 - Tell your health care provider about yourself and your health history
 - Tell your health care provider that you are a WellCare Dual Liberty (HMO D-SNP) member
 - Talk to your PCP, Care Manager, or other appropriate person about seeking the services of a specialist before you go to a hospital (except in cases of emergency)
 - Tell your PCP, Care Manager, or other appropriate person within 24 hours of any emergency or out-of-network treatment
 - Notify WellCare Dual Liberty (HMO D-SNP)'s Member Services department if there are any changes in your personal information, such as your address or phone number
- **You have the responsibility to make decisions about your care, including refusing treatment.** You should:
 - Learn about your health problems and any recommended treatment, and consider the treatment before it's performed
 - Partner with your Care Team and work out treatment plans and goals together
 - Follow the instructions and plans for care that you and your health care provider have agreed to, and remember that refusing treatment recommended by your health care provider might harm your health
- **You have the responsibility to obtain your services from WellCare Dual Liberty (HMO D-SNP).** You should:
 - Get all your health care from WellCare Dual Liberty (HMO D-SNP), except in cases of emergency, urgent care, out-of-area dialysis services, or family planning services, unless WellCare Dual Liberty (HMO D-SNP) provides a prior authorization for out-of-network care
 - Not allow anyone else to use your WellCare Dual Liberty (HMO D-SNP) Member ID Card to obtain healthcare services
 - Notify WellCare Dual Liberty (HMO D-SNP) when you believe that someone has purposely misused WellCare Dual Liberty (HMO D-SNP) benefits or services

For more information about your rights, you can read the WellCare Dual Liberty (HMO D-SNP) *Evidence of Coverage*. If you have questions, you can also call WellCare Dual Liberty (HMO D-SNP) Member Services at 1-844-917-0175 (TTY 711), Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. The call is free.



If you have questions, please call WellCare Dual Liberty (HMO D-SNP) at **1-844-917-0175 (TTY 711)**, Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. The call is free. For more information, visit www.wellcare.com/medicare.

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

If you have a complaint or think WellCare Dual Liberty (HMO D-SNP) should cover something we denied, call WellCare Dual Liberty (HMO D-SNP) at 1-877-902-6784. You can file a complaint or appeal our decision.

For questions about complaints and appeals, you can read Chapter 8 of the WellCare Dual Liberty's (HMO D-SNP) *Evidence of Coverage*. You can also call WellCare Dual Liberty (HMO D-SNP) Member Services.

Call us toll-free at 1-833-444-9089 (TTY 711) Monday–Friday, 8 a.m. to 8 p.m. Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m..

I. 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, contact us.

- Call us at WellCare Dual Liberty (HMO D-SNP) Member Services. Phone numbers are on the cover of this summary.
 - Or, call Medicare at **1-800-MEDICARE (1-800-633-4227)**. TTY users may call **1-877-486-2048**. You can call these numbers for free, 24 hours a day, 7 days a week.
 - You can also contact New Jersey's Medicaid Fraud Division (of the Office of the State Comptroller) by calling **1-609-292-1272**. Calls to this number are free.
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Contact Us

If you have general questions or questions about our plan, services, service area, billing, or Member ID Cards, call WellCare Dual Liberty (HMO D-SNP) Member Services:

1-844-917-0175 (TTY/TDD 711)

Calls to this number are free. Between October 1 and March 31, representatives are available Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m.

If you have questions about your health:

Call your primary care provider (PCP). Follow your PCP's instructions for getting care when the office is closed.

If your PCP's office is closed, you can also call the 24-Hour Nurse Advice Line. A nurse will listen to your problem and tell you how to get care. (Example: convenience care, urgent care, emergency room). The numbers for the 24-Hour Nurse Advice Line are:

1-800-581-9952 (TTY/TDD) 711

Calls to this number are free. 24 hours a day, 7 days a week.

WellCare Dual Liberty (HMO D-SNP) also has free language interpreter services available for non-English speakers.

1-877-374-4056 (TTY/TDD 711)

Calls to this number are free. Monday–Sunday, 8 a.m. to 8 p.m. Between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m.