



Neighborhood **INTEGRITY** (Medicare-Medicaid Plan)
2020 Summary of Benefits

Neighborhood INTEGRITY, Medicare-Medicaid Plan: **Summary of Benefits 2020**

H9576_SummaryBenefits2020v2 Approved 8/22/19

Introduction

This document is a brief summary of the benefits and services covered by Neighborhood INTEGRITY. 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 Neighborhood INTEGRITY. Key terms and their definitions appear in alphabetical order in the last chapter of the *Member Handbook*.

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A. Disclaimers



This is a summary of health services covered by Neighborhood INTEGRITY for date. This is only a summary. Please read the *Member Handbook* for the full list of benefits.

- ❖ Neighborhood INTEGRITY (Medicare-Medicaid Plan) is a health plan that contracts with both Medicare and Rhode Island Medicaid to provide benefits of both programs to enrollees. It is for people with both Medicare and Medicaid.
- ❖ Under Neighborhood INTEGRITY you can get your Medicare and Rhode Island Medicaid services in one health plan. A Neighborhood INTEGRITY care manager will help manage your health care needs.
- ❖ This is not a complete list. The benefit information is a brief summary, not a complete description of benefits. For more information contact the plan or read the *Member Handbook*.
- ❖ ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call Member Services at 1-844-812-6896, 8 am to 8 pm, Monday – Friday; 8 am to 12 pm on Saturday. On Saturday afternoons, Sundays, and holidays you may be asked to leave a message. Your call will be returned within the next business day. TTY users should call 711. The call is free.
- ❖ ATENCIÓN: Si usted habla español, servicios de asistencia con el idioma, de forma gratuita, están disponibles para usted. Llame a Servicios a los Miembros al 1-844-812-6896 (TTY 711), de 8 am a 8 pm, de lunes a viernes, de 8 am a 12 pm los Sábados. En las tardes de los Sábados, domingos y feriados, se le pedirá que deje un mensaje. Su llamada será devuelta dentro del siguiente día hábil. La llamada es gratuita.
- ❖ ATENÇÃO: Se você fala português, o idioma, os serviços de assistência gratuita, estão disponíveis para você. Os serviços de chamada em 1-844-812-6896 TTY (711), 8 am a 8 pm, de segunda a sexta-feira; 8:12 pm no sábado. Nas tardes de sábado, domingos e feriados, você pode ser convidado a deixar uma mensagem. A sua chamada será devolvido no próximo dia útil. A ligação é gratuita.
- ❖ You can get this document for free in other formats, such as large print, braille, or audio. Call Member Services at 1-844-812-6896, 8 am to 8 pm, Monday – Friday; 8 am to 12 pm on Saturday. TTY users should call 711. The call is free.
- ❖ You can ask to get this document and future materials in your preferred language and/or alternate format by calling Member Services. This is called a “standing request”. Member Services will document your standing request in your member record so that you can receive



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materials now and in the future in your preferred language and/or format. You can change or delete your standing request at any time by calling Member Services.

- ❖ Out-of-network/non-contracted providers are under no obligation to treat Neighborhood INTEGRITY members, except in emergency situations. Please call our customer service number or see your Member Handbook for more information, including the cost-sharing that applies to out-of-network services.

B. Frequently Asked Questions

The following chart lists frequently asked questions.

Frequently Asked Questions (FAQ)	Answers
What is a Medicare-Medicaid Plan?	A Medicare-Medicaid Plan is a health plan that contracts with both Medicare and Rhode Island Medicaid to provide benefits of both programs to enrollees. It is for people with both Medicare and Medicaid. A Medicare-Medicaid Plan is an organization made up of doctors, hospitals, pharmacies, providers of long-term services, and other providers. It also has care managers to help you manage all your providers and services. They all work together to provide the care you need.
What is a Neighborhood INTEGRITY care manager?	A Neighborhood INTEGRITY care manager is one main person for you to contact. This person helps manage all your providers and services and makes sure you get what you need.



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Frequently Asked Questions (FAQ)	Answers
What are long-term services and supports (LTSS)?	Long-term services and supports (LTSS) are help for people who need assistance to do everyday tasks like taking a bath, getting dressed, making food, and taking medicine. Most of these services are provided at your home or in your community but could be provided in a nursing home or hospital.
Will you get the same Medicare and Rhode Island Medicaid benefits in Neighborhood INTEGRITY that you get now?	<p>You will get your covered Medicare and Rhode Island Medicaid benefits directly from Neighborhood INTEGRITY. You will work with a team of providers who will help determine what services will best meet your needs. This means that some of the services you get now may change. You will get almost all of your covered Medicare and Rhode Island Medicaid benefits directly from Neighborhood INTEGRITY, but you may get some benefits the same way you do now, outside of the plan.</p> <p>When you enroll in Neighborhood INTEGRITY, you and your care team will work together to develop an Individualized Care Plan to address your health and support needs. During this time, you can keep seeing your doctors and getting your current services for 180 days after you first enroll, or until your care plan is complete. When you join our plan, if you are taking any Medicare Part D prescription drugs or Rhode Island Medicaid covered drugs that Neighborhood INTEGRITY does not normally cover, you can get a temporary supply. We will help you get another drug or get an exception for Neighborhood INTEGRITY to cover your drug, if medically necessary.</p>



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Frequently Asked Questions (FAQ)	Answers
Can you go to the same doctors you see now?	<p>Often that is the case. If your providers (including doctors, therapists, and pharmacies) work with Neighborhood INTEGRITY and have a contract with us, you can keep going to them.</p> <ul style="list-style-type: none">• Providers with an agreement with us are “in-network.” You must use the providers in Neighborhood INTEGRITY’s network.• If you need urgent or emergency care or out-of-area dialysis services, you can use providers outside of Neighborhood INTEGRITY’s plan. <p>To find out if your doctors are in the plan’s network, call Member Services or read Neighborhood INTEGRITY’s <i>Provider and Pharmacy Directory</i>.</p> <p>If Neighborhood INTEGRITY is new for you, you can continue seeing the doctors you go to now for 180 days after your first enroll or until your care plan is completed, whichever is longer. This includes seeing providers out of network.</p>
What happens if you need a service but no one in Neighborhood INTEGRITY’s network can provide it?	<p>Our network providers will provide most services. If you need a service that cannot be provided within our network, Neighborhood INTEGRITY will pay for the cost of an out-of-network provider.</p>
Where is Neighborhood INTEGRITY available?	<p>The service area for this plan is The State of Rhode Island. You must live in Rhode Island to join the plan.</p>
Do you pay a monthly amount (also called a premium) under Neighborhood INTEGRITY?	<p>You will not pay any monthly premiums to Neighborhood INTEGRITY for your health coverage.</p>



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Frequently Asked Questions (FAQ)	Answers
What is prior authorization?	<p>Prior authorization means that you must get approval from Neighborhood INTEGRITY before you can get a specific service or drug or see an out-of-network provider. Neighborhood INTEGRITY may not cover the service or drug if you don't get approval. If you need urgent or emergency care or out-of-area dialysis services, you don't need to get approval first.</p> <p>See Chapter 3, [plan may insert reference, as applicable] of the <i>Member Handbook</i> to learn more about prior authorization. See the Benefits Chart in Chapter 4 [plan may insert reference, as applicable] of the <i>Member Handbook</i> to learn which services require a prior authorization.</p>
Who should you contact if you have questions or need help? (continued on the next page)	<p>If you have general questions or questions about our plan, services, service area, billing, or Member ID Cards, please call Neighborhood INTEGRITY Member Services:</p> <p>CALL 1-844-812-6896</p> <p>Calls to this number are free. 8 am to 8 pm, Monday – Friday; 8 am to 12 pm on Saturday. On Saturday afternoons, Sundays, and holidays you may be asked to a leave a message. Your call will be returned within the next business day.</p> <p>Member Services also has free language interpreter services available for people who do not speak English.</p> <p>TTY 711</p> <p>This number is for people who have hearing or speaking problems. You must have special telephone equipment to call it.</p> <p>Calls to this number are free. 8 am to 8 pm, Monday – Friday; 8 am to 12 pm on Saturday. On Saturday afternoons, Sundays, and holidays you may be asked to a leave a message. Your call will be returned within the next business day.</p>



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Who should you contact if you have questions or need help?

(continued from previous page)

If you have questions about your health, please call the Nurse Advice Call line:

CALL 1-844-617-0563

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

TTY 711

This number is for people who have hearing or speaking problems. You must have special telephone equipment to call it.

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

If you need immediate behavioral health services, please call the Behavioral Health Crisis Line:

CALL 1-401-443-5995

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

TTY 711

This number is for people who have hearing or speaking problems. You must have special telephone equipment to call it.

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



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C. Overview of Services

The following chart is a quick overview of what services you may need, your costs, 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 want to see a doctor	Visits to treat an injury or illness	\$0	
	Wellness visits, such as a physical	\$0	
	Specialist care	\$0	
	Care to keep you from getting sick, such as flu shots	\$0	
You need medical tests	Lab tests, such as blood work	\$0	Read the <i>Member Handbook</i> or call Member Services for more information.
	X-rays or other pictures, such as CAT scans	\$0	Prior authorization is required.
	Screening tests, such as tests to check for cancer	\$0	Prior authorization may be required.



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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 (continued on the next page)	Generic drugs (no brand name)	\$0 for a 30-day supply.	<p>There may be limitations on the types of drugs covered. Please see Neighborhood INTEGRITY's <i>List of Covered Drugs</i> (Drug List) for more information.</p> <p>The plan does offer extended day supplies through a mail-order pharmacy and at some retail pharmacies. There is no co-pay for extended day supplies. Read the <i>Member Handbook</i> or call Member Services for more information.</p> <p>Prior authorization may be required.</p>
	Brand drugs	\$0 for a 30-day supply.	<p>There may be limitations on the types of drugs covered. Please see Neighborhood INTEGRITY's <i>List of Covered Drugs</i> (Drug List) for more information.</p> <p>The plan does offer extended day supplies through a mail-order pharmacy and at some retail pharmacies. There is no co-pay for extended day supplies. Read the <i>Member Handbook</i> or call Member Services for more information.</p> <p>Prior authorization may be required.</p>



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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 (continued from previous page)	Non-Medicare Prescription and Over-the-Counter (OTC) drugs	\$0 for a 30-day supply.	There may be limitations on the types of drugs covered. Please see Neighborhood INTEGRITY's <i>List of Covered Drugs</i> (Drug List) for more information. The plan does offer extended day supplies through a mail-order pharmacy and at some retail pharmacies. There is no co-pay for extended day supplies. Read the <i>Member Handbook</i> or call Member Services for more information.
	Medicare Part B prescription drugs	\$0	Part B drugs include drugs given by your doctor in his or her office, some oral cancer drugs, and some drugs used with certain medical equipment. Read the <i>Member Handbook</i> for more information on these drugs. Prior authorization and step therapy may be required.
You need therapy after a stroke or accident	Occupational, physical, or speech therapy	\$0	Prior authorization is required for occupational and physical therapy after the initial evaluation and 8 visits.



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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	Emergency room services are covered if you need to use an emergency room that is not in our network. Coverage is limited to the U.S. and its territories only. Read the <i>Member Handbook</i> or call Member Services for more information.
	Ambulance services	\$0	Prior authorization may be required for non-emergency Medicare services.
	Urgent care	\$0	Urgent care services are covered if you need to use an urgent care that is not in our network. Coverage is limited to the U.S. and its territories only. Read the <i>Member Handbook</i> or call Member Services for more information.
You need hospital care	Hospital stay	\$0	Prior authorization is required.
	Doctor or surgeon care	\$0	



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Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need help getting better or have special health needs	Rehabilitation services	\$0	Prior authorization is required.
	Medical equipment for home care	\$0	Prior authorization may be required.
	Skilled nursing care	\$0	Prior authorization may be required.
You need eye care	Eye exams	\$0	Limited to one (1) routine eye exam every two (2) years and covered annually for members with diabetes.
	Glasses or contact lenses	\$0	Limited to one (1) pair of eyeglasses every two (2) years. Limited to one (1) pair of eyeglass frames every two (2) years. Eyeglass lenses are covered more frequently when medically necessary. Limited to one (1) pair of contact lenses every two (2) years when medically necessary. Prior authorization may be required.
	Hearing screenings	\$0	



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Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need hearing/auditory services	Hearing aids	\$0	Coverage includes hearing aids and evaluations for fitting hearing aids once (1) every three (3) years.
You have a chronic condition, such as diabetes or heart disease	Services to help manage your disease	\$0	
	Diabetes supplies and services	\$0	<p>There may be limitations on the brands and manufacturers for supplies when filled at a pharmacy</p> <p><u>Insulin</u> dependent or gestational diabetes members:</p> <p>Limited to one hundred (100) test strips every thirty (30) days when received from a durable medical equipment (DME) vendor.</p> <p>Limited to one hundred (100) test strips every twenty-five (25) days when received at a pharmacy.</p> <p><u>Non-insulin</u> dependent members:</p> <p>Limited to one hundred (100) test strips every ninety (90) days when received from a durable medical equipment (DME) vendor.</p> <p>Limited to one hundred (100) test strips every ninety (90) days when received at a pharmacy.</p>



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Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You have a mental health condition	Mental or behavioral health services	\$0	
You have a substance use problem	Substance use treatment services	\$0	
You need long-term mental health services	Inpatient care for people who need mental health care	\$0	Prior authorization is required.
You need durable medical equipment (DME)	Wheelchairs	\$0	Prior authorization may be required.
	Nebulizers	\$0	Prior authorization may be required.
	Crutches	\$0	
	Walkers	\$0	
	Oxygen equipment and supplies	\$0	
You need help living at home (continued on the next page)	Meals brought to your home	\$0	Coverage includes one (1) meal available per day, up to five (5) days per week. Rhode Island Medicaid eligibility requirements may apply.



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Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
	Home services, such as cleaning or housekeeping	\$0	Prior authorization is required. Rhode Island Medicaid eligibility requirements may apply.
	Changes to your home, such as ramps and wheelchair access	\$0	Prior authorization is required.
You need help living at home (continued from previous page)	Personal care assistant (You may be able to employ your own assistant. Call Member Services for more information.)	\$0	Prior authorization is required. Rhode Island Medicaid eligibility requirements may apply.
	Training to help you get paid or unpaid jobs	\$0	Rhode Island Medicaid eligibility requirements may apply.
	Home health care services	\$0	Prior authorization may be required. Rhode Island Medicaid eligibility requirements may apply.
	Services to help you live on your own	\$0	Prior authorizations may be required.
	Adult day services or other support services	\$0	Prior authorization may be required.



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Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need a place to live with people available to help you	Assisted living or other housing services	\$0	Prior authorization is required. Rhode Island Medicaid eligibility requirements may apply.
	Nursing home care	\$0	Prior authorization is required.
Your caregiver needs some time off	Respite care	\$0	Rhode Island Medicaid eligibility requirements may apply.



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D. Services covered outside of Neighborhood INTEGRITY

This is not a complete list. Call Member Services to find out about other services not covered by Neighborhood INTEGRITY but available through Medicare or Rhode Island Medicaid.

Other services covered by Medicare or Rhode Island Medicaid	Your costs
<p>Dental care</p> <p>Rhode Island Medicaid covers routine dental care. Such as:</p> <ul style="list-style-type: none">• Cleanings• Fillings• Dentures <p>Neighborhood INTEGRITY may cover dental care that is received in an inpatient or outpatient setting in order to treat illness or injury. Call Member Services if you are unsure whether Neighborhood INTEGRITY or Rhode Island Medicaid covers the dental services you need.</p>	\$0



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Other services covered by Medicare or Rhode Island Medicaid	Your costs
Residential services for members with intellectual and developmental disabilities Rhode Island Medicaid covers residential services for members with intellectual and developmental disabilities.	\$0
Some hospice care services Medicare covers hospice services that relate to your terminal prognosis.	\$0
Transportation to a doctor's office Rhode Island Medicaid covers non-emergent medical transportation.	\$0



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E. Services that Neighborhood INTEGRITY, Medicare, and Rhode Island Medicaid do not cover

This is not a complete list. Call Member Services to find out about other excluded services.

Services not covered by Neighborhood INTEGRITY, Medicare, or Rhode Island Medicaid
Cosmetic surgery or other cosmetic work Not covered. Unless the service involves transgender care, reconstruction of a breast after a mastectomy, and situations where a cosmetic issue effects normal function or emotional well-being.
Experimental procedures, items, and drugs Not covered. Unless the procedure, item, or drug is covered by Medicare or under a Medicare-approved clinical research study, or by the plan. In these instances, a prior authorization is required.
Gym memberships Not covered.
Personal items in your room at a hospital Not covered. This includes items such as a telephone or television.



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F. Your rights as a Member of the plan

As a Member of Neighborhood INTEGRITY, you have certain rights. You can exercise these rights without being punished. You can also 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 *Member Handbook*. 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, religion, gender, age, mental or physical disability, sexual orientation, gender identity, genetic information, ability to pay, or ability to speak English
 - Get information in other formats (e.g., large print, braille, audio)
 - Be free from any form of physical restraint or seclusion
 - Not be billed by network providers
 - Choose a Primary Care Provider (PCP) and you can change your PCP at any time during the year
 - See 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
 - Refuse treatment, even if your doctor advises against it
 - Stop taking medicine
 - Ask for a second opinion. Neighborhood INTEGRITY will pay for the cost of your second opinion visit.
- **You have the right to get information about your health care.** This includes information on treatment and your treatment options. This information should be in a format you can understand. These rights include getting information on:
 - Description of the services we cover
 - How to get services
 - How much services will cost you
 - Names of health care providers and care managers
- **You have the right to make decisions about your care, including refusing treatment.** 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 and your health plan.



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- **You have the right to seek emergency and urgent care when you need it.** This means you have the right to:
 - Get emergency services without prior approval in an emergency
 - See 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.
- **You have the right to make complaints about your covered services or care.** This includes the right to:
 - File a complaint or grievance against us or our providers

- Ask for a state fair hearing
- Get a detailed reason for why services were denied

For more information about your rights, you can read the Neighborhood INTEGRITY *Member Handbook*. If you have questions, you can also call Neighborhood INTEGRITY Member Services.



If you have questions, please call Neighborhood INTEGRITY at 1-844-812-6896 and 711, 8 am to 8 pm, Monday – Friday; 8 am to 12 pm on Saturday. The call is free. **For more information**, visit www.nhpri.org/INTEGRITY.

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

If you have a complaint or think Neighborhood INTEGRITY should cover something we denied, call Neighborhood INTEGRITY at 1-844-812-6896 (TTY 711). You may be able to appeal our decision.

For questions about complaints and appeals, you can read Chapter 9 of the Neighborhood INTEGRITY *Member Handbook*. You can also call Neighborhood INTEGRITY Member Services.

- **You can mail your written grievances to:**

Neighborhood Health Plan of Rhode Island

Attn: Grievance & Appeals

910 Douglas Pike

Smithfield, RI 02917

- **You can fax your written grievances to:** 1-401-709-7005

- **You can mail your written Medical and Behavioral Health appeals to:**

Neighborhood Health Plan of Rhode Island

Attn: Grievance & Appeals

910 Douglas Pike

Smithfield, RI 02917



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- **You can fax your written Medical and Behavioral Health appeals to:** 1-401-709-7005

- **You can mail your written Part D (prescription drug) appeals to:**

CVS Caremark Part D Appeals and Exceptions

PO BOX 52000 MC109

Phoenix, AZ 85072-2000

- **You can fax your written Part D (prescription drug) appeals to:** 1-855-633-7673
- **To request reimbursement for a Part D prescription drug that you paid out of pocket for, please mail or fax a copy of your receipt and related prescription documentation to:**

CVS Caremark Part D Appeals and Exceptions

PO BOX 52066

Phoenix, AZ 85072-2066

Fax number: 1-855-230-5549

H. 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, please contact us.

- Call us at Neighborhood INTEGRITY Member Services. Phone numbers are on the cover of this summary.
- Or, call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. You can call these numbers for free, 24 hours a day, 7 days a week.



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- Or, call Department of Rhode Island Attorney General for reports on Medicaid fraud, patient abuse or neglect, or drug diversion at 1-401-222-2556 or 1-401-274-4400 extension 2269
- Or, call Rhode Island Department of Human Services (DHS) Fraud hotline for reports on CCAP, SNAP, RI Works and GPA at 1-401-415-8300
- Or, call Neighborhood's Compliance Hotline at 1-888-579-1551.



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