

**Kentucky Department for Medicaid Services**  
**Anthem Kentucky Managed Care Plan, Inc.'s Termination**

Frequently Asked Questions (FAQ) Update:

11/19/2024

Anthem Kentucky Managed Care Plan, Inc. will no longer be a Kentucky Medicaid Managed Care Organization starting January 1, 2025 pursuant to a court order in *Anthem Kentucky Managed Care Plan, Inc. v Kentucky Finance and Administration Cabinet, et al*, Franklin Circuit Court, Civil Action No. 20-CI-00719. This document is to assist members, providers and other interested parties in understanding how this impacts the Kentucky Medicaid program.

1. I am a current Anthem member, what does this mean to me?

**Answer:** This does not change your Medicaid eligibility or coverage. There is no action required by you. You will be automatically assigned to another Managed Care Organization (MCO).

A notice will be mailed on November 12, 2024 telling you about your new MCO including a phone number to call if you have questions. This change will be effective January 1, 2025. Your new MCO will mail you a new ID card and welcome packet. If you want a different MCO, you may change your MCO at any time by calling 1-855-446-1245.

2. How is my new MCO chosen?

**Answer:** Anthem members will be automatically assigned in the following order of priority:

- a. If a household member has the same MCO;
- b. If a preferred provider is in the network; or
- c. If not assigned in a or b above, then randomly auto-assigned in a round-robin fashion.

You have the opportunity to change MCOs at any time.

3. I am currently receiving treatment by a provider; will I be able to continue to receive treatment by this provider?

**Answer:** If the provider is in the network of your new MCO, then you can continue treatment with that provider. Your new MCO may contract with the provider if not already in their network to maintain your treatment. Anthem and your new MCO are also required to assist members with transitioning care to the new MCO.

If you have questions, please contact your new MCO once you receive your reassignment notice. You may also move to another MCO if your provider is not in your new MCO's network. You can change your MCO by calling 1855-446-1245.

4. I am currently receiving Case Management from Anthem; how will this be transitioned?

**Answer:** Anthem will work with your new MCO to transition case management. Contact Anthem at 1-855-690-7784 if you have questions, or call your new MCO once you receive the reassignment notice.

5. Does my new MCO have the same value added benefits as Anthem?

**Answer:** Not all MCOs offer the same value added benefits. Contact your new MCO, or you can go to the [Kentucky Medicaid Anthem MCO Transition](#) website to see a chart comparing the value added benefits across the MCOs.

6. I have a pending appeal with Anthem, what will happen to it?

**Answer:** Anthem is required to maintain staff to complete all appeals and grievances for claims with dates of service prior to January 1, 2025, even after termination. Your appeal will continue in the normal process regardless of how long it may take.

7. I received a favorable decision in an appeal with Anthem after they terminated. What happens now?

**Answer:** Anthem is required to maintain staff to complete all appeals and grievances for claims with dates of service prior to January 1, 2025, even after termination. If you are a member, contact Anthem Member Services at 1-855-690-7784 if you have questions. If you are a provider who appealed a denied claim, Anthem will process a payment upon receipt of the decision. Contact Anthem Provider Services at 1-855-661-2028 if you have questions.

8. Will my drug coverage be different?

**Answer:** No. There will be no change to your drug coverage. Your prescription benefits will continue to be provided by the Kentucky Medicaid Single Pharmacy Benefit Manager, MedImpact Healthcare Systems, Inc.

9. Can I fill my prescriptions before I receive my new member ID card?

**Answer:** Yes. Your pharmacy can fill your prescriptions with the information on your old Anthem ID card. Your drug coverage will not change.

10. Can I still go to my pharmacy to fill my prescriptions?

**Answer:** Yes. You can continue to fill your prescriptions at your current pharmacy.

11. If I am taking a prescription drug that needs a prior authorization, do I need to get a new one after I change MCOs?

**Answer:** No. Your prior authorizations for prescription drugs under Anthem will still work under your new MCO as long as they are not expired.

12. What if I have questions about my prescription pharmacy benefits?

**Answer:** You may contact MedImpact's member service help desk at 1-800210-7628.

13. What if I have questions about my medical benefits (doctor's visits, outpatient services, etc.)?

**Answer:** You may contact your new MCO’s member services. The member services phone number for Kentucky Medicaid MCOs are:

Contact	Contact Information	Availability
(Member Services)		Monday to Friday
	AETNA: 855-300-5528	7AM to 7PM EST, Monday to Friday
	ANTHEM: 855-690-7784	
	HUMANA: 800-444-9137	
	PASSPORT MOLINA: 800-578-0603	
	UNITED: 866-293-1796	
	WELLCARE: 877-389-9457	

14. I’ve been automatically assigned to a new MCO, can I change that?

**Answer:** Yes. You can change your MCO by calling 1-855-446-1245.

15. My patient has changed from Anthem to another MCO and I am not in their network. What should I do?

**Answer:** You will need to contact their new MCO to discuss being added to their network.

16. I am a provider with a prior authorization (PA) for a current Anthem member. What should I do?

**Answer:** Current Anthem members will be automatically assigned to a new MCO with an effective date of January 1, 2025. If the PA is for a service prior to that date there is nothing for you to do. If the service is on or after that date, the PA will be automatically accepted by the newly assigned MCO even if you are not in the new MCO’s network.

Note: If you are not in the new MCO network, your claim may be paid at the non-PAR rate, subject to negotiation with the new MCO. A notice will be

mailed to the member on November 12, 2024 will information about their newly assigned MCO. The member may also change their MCO at any time.

17. As a provider, how do I get my Anthem claims paid after they are terminated?

**Answer:** Anthem will be required to process claims up to 365 days post termination, as well as receive and respond to any appeals or grievances related to services prior to January 1, 2025. If you have questions, call Anthem Provider Services at 1-855-661-2028.

18. I am having issues with Anthem or my new MCO. What should I do?

**Answer:** Members and providers should follow the normal MCO appeal and grievance process. You may also contact the Department for Medicaid Services, Division of Health Plan Oversight, Contract Monitoring Branch at [ProviderMCOInquiry@ky.gov](mailto:ProviderMCOInquiry@ky.gov). This email box is monitored and response is required same day. Members may also contact kynect for questions. If it cannot be resolved, kynect will escalate the issue to DMS.

19. I am a kynector and was contacted to change a current Anthem member's MCO, is it okay to make that change?

**Answer:** Yes, members may change their MCO at any time.

20. I am enrolled with another MCO, can I change to Anthem?

**Answer:** Starting November 9, 2024, current Medicaid members will not be able to change their MCO enrollment to Anthem.

21. Can a new member select Anthem?

**Answer:** Starting November 9, 2024, a new Medicaid member cannot select Anthem as an MCO.

22. What if there is a newborn to a current Anthem member before the reassignment effective date of January 1, 2025?

**Answer:** Newborns will continue to be assigned to mothers with Anthem coverage until December 31, 2024. The newborn and mother will be reassigned to the same new MCO effective January 1, 2025.

23. I had Anthem but was terminated from Medicaid because I didn't respond to a renewal notice. If I am determined eligible, will I be reinstated to Anthem?

**Answer:** Members may be reinstated to Anthem through December 31, 2024. Members will then be auto-assigned to a new MCO effective January 1, 2025, or may change their MCOs by calling 1-855-446-1245.

24. What written notices are being sent to Anthem members about the changes?

**Answer:** On November 12, 2024, each Anthem member will be mailed a **written reassignment notice** that includes their disenrollment from Anthem and assignment to another MCO.

25. What communications are being sent out to make people aware of the changes?

**Answer:** The following communications will be shared:

- Written reassignment notice mailed to Anthem members on November 12, 2024.
- Announcement displayed in an Anthem member's self-service portal (SSP) starting November 1, 2024 through February 28, 2025
- Email sent to all providers through the Medicaid Partner Portal Application (MPPA).
- Written provider letter mailed to all Medicaid providers on November 12, 2024.
- Banners posted on KYHealthNet, kynect, and self-service and worker portals.
- Launch of a website, [Kentucky Medicaid Anthem MCO Transition](#)
- Social media postings
- Announcement sent directly to workers, kynectors and insurance agents.
- Contact center IVR messaging updated and scripts sent to staff on the changes.
- FAQ document posted on the DMS website [Kentucky Medicaid Anthem MCO Transition](#), and sent to the Gov delivery email distribution list,

emailed to providers through the Medicaid Partner Portal Application (MPPA), and to members of the Medicaid Advisory Council and Technical Advisory Committees as well as provider associations and advocacy organizations. To subscribe to receive email notices regarding Kentucky Medicaid, go to the link below: <https://public.govdelivery.com/accounts/KYCHFS/subscriber/new>

*Added on 11/19/2024:*

26. I just reenrolled in Medicaid, why am I being assigned to Anthem if they will no longer be an MCO effective January 1, 2025?

**Answer:** A member who reenrolls within 120 days of disenrollment is automatically assigned to their former MCO. If you had Anthem Medicaid within the last 120 days, then you were assigned to Anthem. Once your initial approval is completed, you may either wait for an automatic reassignment to another MCO (either Humana or United) or you may change your MCO. To change your MCO, please call kynect at 855-459-6328.

*Added on 2/5/25*

27. What happens if I am dual eligible for Medicare and Medicaid, and have Anthem Medicare Advantage Dual Eligible Special Needs Plan (D-SNP)?

**Answer:** If you have Anthem as your Medicare Advantage D-SNP plan, Anthem will be sending you a notice on or around February 1, 2025 that you will need to choose another D-SNP plan. A copy of the letter is on the [Kentucky Medicaid Anthem MCO Transition](#).

You have until February 28, 2025 to choose another plan. If you need help, call the statewide SHIP Hotline at (877) 293-7447 or call DAIL at (502) 564-6930 and ask for a SHIP counselor. Or you may also get help from an insurance agent. To find an insurance agent, go to [kynect find an agent](#) or call kynect at 1-855-459-6328 and someone can help you find one.

If you do not take action before February 28, 2025, you will be automatically covered by Original Medicare and enrolled in Wellcare's Medicare

prescription plan (PDP) starting March 1, 2025. Even if you are automatically enrolled, there is a special opportunity to join a new plan any time until March 31, 2025. Call a SHIP counselor at (877)293-7447 if you need help.

This does not change your current Medicaid MCO.