

Welcome to the Issuer Office Hour Session

Please review the Zoom tips below while you wait for the session to begin.

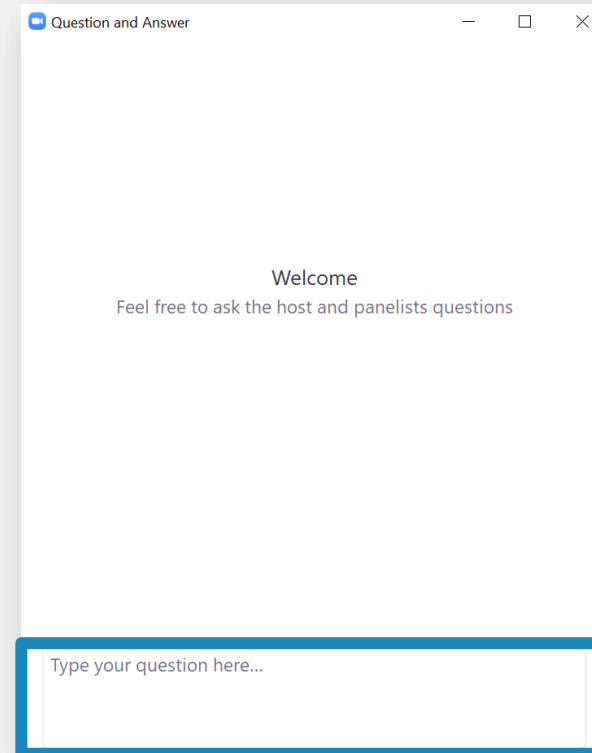
How to Ask Questions

During Office Hours, all Agents and kynectors are muted. If you would like to ask a question related to the covered topics:

- Select the **Q&A Icon** (not the Chat Icon).
- Type your question and select **Enter** on your keyboard.



**Refrain from selecting the Raise hand Icon.
Agents and kynectors are muted and should
ask questions using the Q&A Icon.**



Chat



React



Raise hand



Q&A



Show captions



Polls/quizzes

Issuer Office Hour

October 2025

QHP

Medicaid

kynect

QHP

Medicaid

kynect

QHP

Medicaid

kynect

QHP

Medicaid

kynect

Agenda

Below are the topics and schedule for today's session.

1 Plan Year 2026 Landscape

2 Pre-Screening Tool

3 Issuer Presentations

4 Closing Survey

The goal of today's session is to highlight available plans for Open Enrollment Plan Year 2026.

The following topics will be presented by today's Issuers:

- Plans Available
- Network
- Covered Services
- Value-Add Benefits*
- Tools and Resources
- Points of Contact



**PLEASE
NOTE**

Value-Add Benefits were only included for MCO Issuers.



Plan Year 2026 Landscape

Outlined below are the three (3) primary drivers of federal changes impacting kynect, Kentucky's State-Based Marketplace (SBM).



H.R.1: One Big Beautiful Bill Act

Signed into law on **July 4, 2025**, H.R. 1 introduces heightened Special Enrollment Period (SEP) standards, revised eligibility criteria, and other provisions to be **implemented over the next three (3) years**.

These provisions impact Marketplace coverage, Medicaid, Supplemental Nutrition Assistance Program (SNAP), and other programs that Agents and kynectors help Residents enroll in.



CMS Integrity and Affordability Final Rule

Published on **June 20, 2025**, Centers for Medicare & Medicaid Services (CMS) issued the [2025 Integrity and Affordability Final Rule](#) which includes provisions affecting Health Insurance Marketplaces, like kynect.

However, **due to a federal court ruling on August 22, 2025**, certain sections of the CMS Integrity and Affordability Final Rule have been [temporarily halted](#).



Enhanced Premium Tax Credit Expiration

H.R. 1 [does not extend Enhanced Premium Tax Credits](#), which are set to expire on **December 31, 2025**, if no Congressional action is taken.

Currently, approximately **85,000 Kentucky Residents** receive Enhanced Premium Tax Credits.

Depending on household size and income, some Residents may **lose financial assistance** but can still purchase and enroll in full-priced plans.



PLEASE NOTE

For information regarding the federal government shut down, reference the [Federal Government Shutdown Fact Sheet](#).

Issuers Available

Outlined below are the Issuers available for Plan Year 2026.



QHPs

Ambetter (WellCare)

Anthem

Passport by Molina



MCOs

Aetna

Humana

Passport by Molina

United Healthcare

WellCare



VISION

Anthem

Vision Service Plan (VSP)



SADPs

Anthem

BestLife

HRI Dental

Issuers Available

Outlined below are the Issuers available for Plan Year 2026.



EXPANDING

Ambetter is expanding into one (1) county.

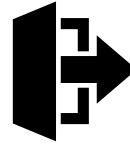
Molina is expanding into one (1) county.

AMBETTER

Christian

MOLINA

Bourbon



EXITING

CareSource is exiting the Commonwealth.

Members will receive notifications from CareSource, KHBE, and a phone call.



CONTRACTING

Molina is contracting from 25 counties.

MOLINA

Anderson	Franklin	Henderson	Meade	Rockcastle
Boyd	Gallatin	Henry	Mercer	Shelby
Boyle	Garrard	Jefferson	Nelson	Spencer
Bullitt	Grayson	Larue	Oldham	Trimble
Carroll	Greenup	Lincoln	Owen	Washington



PLEASE NOTE

11 counties will have Anthem as their only Issuer.



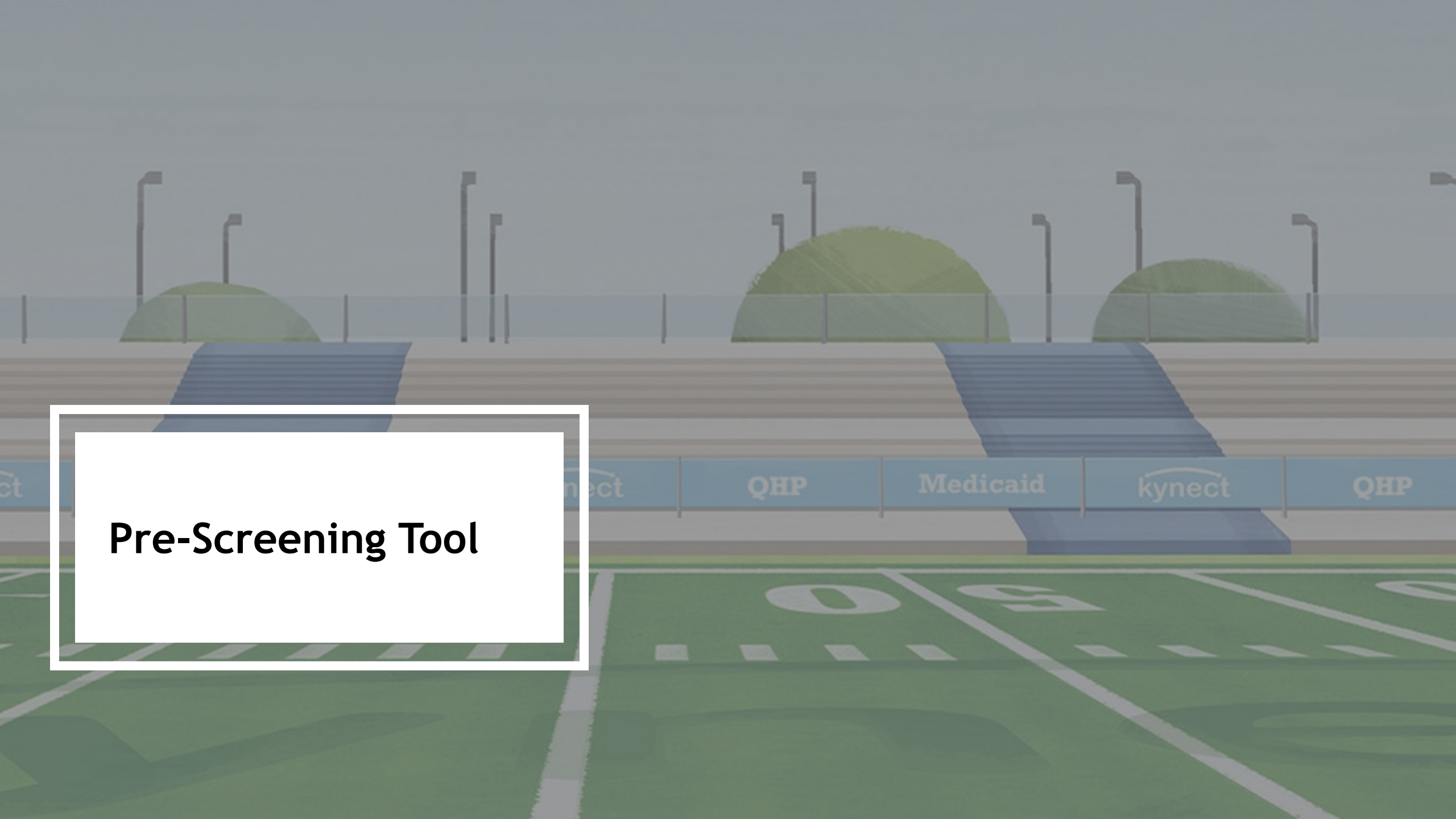
3



9



10



Pre-Screening Tool

Prescreening Tool Overview

Agents and kynectors can now view coverage plans through either of the two (2) available Prescreening Tools outlined below.



Prescreening Tool Overview



The Prescreening Tool is a feature **available through kynect** that allows Residents to **quickly and anonymously view available plans** based on their household information and income.



kynect benefits Prescreening Tool



The [kynect benefits Prescreening Tool](#) evaluates potential eligibility across **multiple benefit programs** including **health, food, and childcare assistance.**



kynect health coverage Prescreening Tool

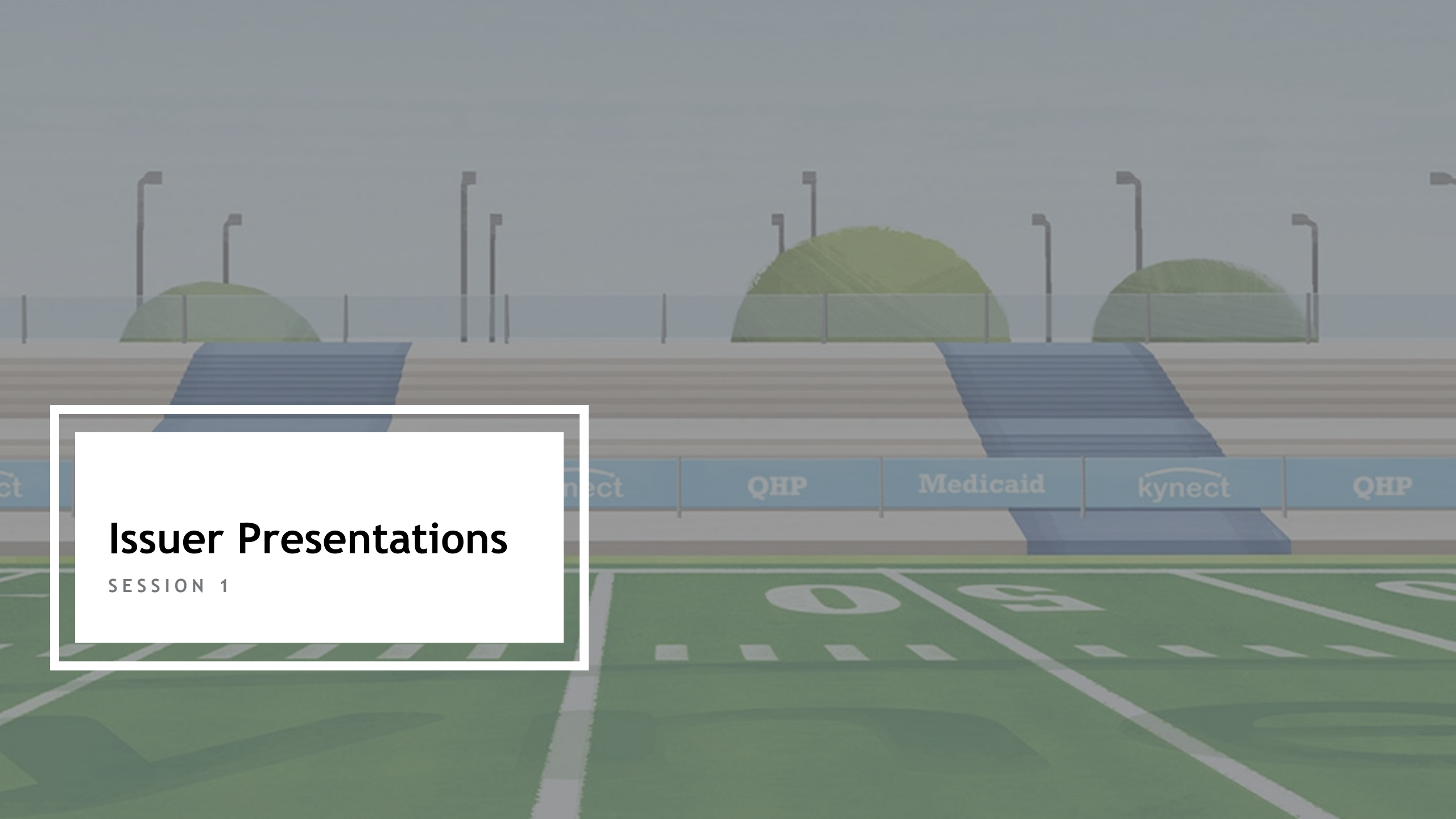


The [kynect health coverage Prescreening Tool](#) evaluates potential eligibility for QHPs, APTC, and CSRs which may **reduce monthly premiums and out-of-pocket costs.**



PLEASE NOTE

The Prescreening Tool is not an application. The results do not guarantee eligibility for benefits. A full benefits application must be completed in order to determine eligibility for any program.



Issuer Presentations

SESSION 1



Ambetter

QHP ISSUER PRESENTATIONS



FROM



Ambetter Health 2026 Overview

Kentucky

For agent use only. Not for distribution to prospects or members.





FROM



The Reach of Ambetter Health

Ambetter Health plans are certified as Qualified Health Plans (QHP) on the Health Insurance Marketplace or the state-based Exchanges (SBE).

Statistical claims and the #1 Marketplace Insurance statement are in reference to national on-exchange marketplace membership and based on national Ambetter Health data in conjunction with findings from Issuer Level Enrollment Data from CMS, State-Level Public Use File from CMS, Covered California Active Member Profile data, state insurance regulatory filings, and public financial filings.

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#1

America's #1
Marketplace Health
Insurance

1 IN 7

ACA Shoppers Choose
Ambetter Health

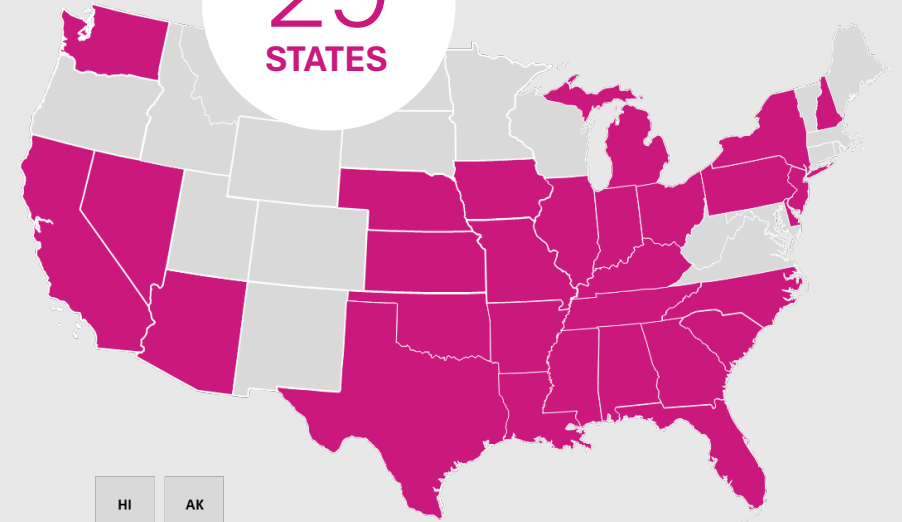
5.6
MILLION

5.6 Million
Members (one
person at a time)

EST.
2013

Ambetter Health plans
have been offered since
the Marketplace opened.

29
STATES



HI

AK

Plans are designed to deliver **high-quality,
locally based healthcare** to members

Ambetter From WellCare of Kentucky Updates



- **New Asthma/COPD** Care Silver with \$0 Drug Option available for PY 2026.
- Expanding into Christian County in 2026!
- Find a Provider has been redesigned for an enhanced user experience.
- Members should download the **Ambetter Health app**.
- Members can earn **My Health Pays rewards**, for completing various activities, like completing an annual wellness exam, and redeem them for health-related expenses.
- With **Ambetter Perks** members are eligible for perks on travel, technology, food and dining, and exclusive discounts on things like movie tickets, attractions and tours, and more.
- With **Virtual 24/7 Care** members can get medical advice, a diagnosis or a prescription for non-emergency health issues when needed.



FROM |



Low Income Special Enrollment Period

As of August 25, 2025, members at or below 150% FPL are no longer able to change plans and/or issuers monthly, across all Exchanges.

- Members will need to enroll during the annual OEP.
- Members may still make plan changes in 2026 if they experience a different qualifying life event, which would make them eligible for a SEP.
- This provision does not apply to federally recognized tribal members.



FROM



Enhanced Advance Premium Tax Credits

Enhanced Advance Premium Tax Credits (eAPTC) are expiring on Dec. 31, 2025 and will not be available on 2026 plans.

eAPTC made tax credits available to households with incomes above 400% FPL.

- Members who lose eAPTC's will see an increase in their monthly premiums.
- Traditional APTC's (100-400% FPL) will remain in place for 2026 plans.



Make sure
your clients
understand
how their
premium is
impacted
and be ready
to help!



FROM



Important OE Dates

PY2026 enrollment and effective dates for the Federally Facilitated Marketplace (FFM).*

NOVEMBER 1

First day of Open Enrollment.

DECEMBER 15

Last day to enroll for coverage with a **January 1** effective date.

JANUARY 15

Open Enrollment ends.

FEBRUARY 1

Coverage effective date if enrolled *after* December 15.



Remind new and renewing clients to enroll by **December 15** to avoid any lapse in coverage!

**Confirm dates if selling on a State-based Exchange*

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FROM



Member Communication

Renewal Letters



To: Members with active policies (subscribers/heads of household).



Timing: September for discontinued plans, October for continuing plans.



Broker Access: Brokers will have access to member renewal letters in the broker portal during OE.

Key Information:

- Notice of changes or discontinuance to plan.
- Notification if current plan will no longer be available and the best similar plan they will be enrolled in for renewal.
- Opportunity to remain on existing plan or change plans.
- Request for renewal by 12/15 for an effective date of 1/1 to ensure continuity of coverage.
- Instructions for member to act.

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Sample

IMPORTANT INFORMATION:
Renew Your Health Coverage for 2026

Open Enrollment Kicks Off November 1.

Protect Your Health and Your Future.

To learn more about keeping your 2026 coverage:

- Scan the QR code
- Call 1-855-680-3271 (TTY 711)
- Contact your broker directly

AmbetterHealth.com/RenewToday-AL

<Date>

Dear <MemberFirstName>,

Thank you for being a member of Ambetter of Alabama. We want to make sure you have all of the necessary information you need to renew your coverage. We hope you will continue accessing important benefits including a trusted network, Virtual 24/7 Care*, Nurse Advice Line, and exclusive programs like My Health Pays*** Rewards and Ambetter Perks Discounts.

☒ **Your Renewal Checklist** **ACT NOW**

- ☐ Review this packet to check for any changes and make sure your plan and network meet your needs and budget.
- ☐ Log in or set up your Online Member Account at Member.AmbetterHealth.com to:
 - ☐ Update your information to make sure you maximize any financial help available to you.
 - ☐ View your Summary of Benefits and Evidence of Coverage.
 - ☐ Keep your payments up to date so your coverage remains active.
- ☐ Watch for your 2026 Member Welcome Packet and new ID Card by mail.





Information in renewal letters will vary based on the state and the Ambetter Health plan.

Binder Payment Reminders



To: Prospective members who have applied but have not paid their initial binder for OE (or SEP).



Timing: Continuous communication plan until payments have been made or until the deadline for **Feb. 1** effectuation.

Key Information:

- Ongoing reminders with increased urgency as deadline approaches.
- Links to act to make a payment.

Information will vary based on the state and the Ambetter Health plan.

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ambetter. FROM **WellCare** of Kentucky

Make your first monthly premium payment to activate your coverage.

[Make your payment](#)

Hi,

Make your first payment to activate your insurance. The coverage you want is one step away.

As soon as you do, you'll have access to great benefits like Virtual 24/7 Care, mental health coverage, a network of trusted doctors, and our [My Health Pays](#) rewards program.

Easy payments: another great benefit.

PAY ONLINE

1. Visit [AmbetterQuickPay](#).
2. Set up your online account at [Member.AmbetterHealth.com](#).
3. Enroll in auto pay so you never miss a payment.

PAY BY PHONE

Call [1-844-PAY-BETTER \(1-844-729-2388\)](#). Available 24/7.

If you've already made your payment, you're one step ahead. Please disregard this email.

Ambetter Health:
We are here to help
you activate your
coverage & pay
your premium! Go
to
<https://bit.ly/3QoCtc>
or call 844-729-
2388. STOP to
cancel.

Member Information Packet



To: New and renewing members whose binder or premium has been paid.



Timing: Within approximately seven days of receipt of payment.

Key Information:

- Welcome letter with ID cards.
- Call to actions, account set up, bill pay and choosing a PCP.
- In-network providers, prescriptions information.
- Applicable rewards and discounts.
- Dependents
- Referrals

For agent use only. Not for distribution to prospects or members.



 Sample ID card graphic showing a member ID card with fields for name, address, and city/state/zip code.

 View your digital card online or in the mobile app.

[Member First Name] [Member Last Name]
[Address 1]
[Address 2]
[City], [State] [Zip Code]

[Welcome] [Welcome Back], [Name]!
We are happy to have you as an Ambetter [HP Name] member. This packet includes your member ID card(s). Use your ID card to get medical care and fill prescriptions. Be sure to always carry it with you.

Start Your [2026] Journey to Whole Health!
Use this checklist to unlock the full value of your plan.

- ☐ **Create your Online Member Account at AmbetterHealth.com/Connect.**
Get convenient access to your health information on the web or in the mobile app. Members 18 years or older can create their own account.
- ☐ **Review your Evidence of Coverage (EOC).**
Learn about included benefits and covered services. Find it at [\[EOC URL\]](#) or in your Online Member Account in the plan documents section. Set your preferences to receive [this or other] documents electronically.
- ☐ **Schedule your annual wellness exam.**
Your Primary Care Provider (PCP) is your first option for care. If you do not have a PCP, search for one in our Find a Provider tool at Findaprovider.AmbetterHealth.com and schedule your first appointment.
- ☐ **Explore your [Premier] Network.**
Find doctors, pharmacies, and health services in your area that meet your needs.
- ☐ **Sign up for Auto Pay in your Online Member Account.**
Choose this simple way to make your monthly premium payment on time, every time.
- ☐ **Set up a Health Savings Account (HSA), with an eligible plan.***
If you have a high-deductible plan, save money tax free throughout the year and use it to pay for qualifying healthcare costs like copays, prescriptions, over-the-counter medications, or other out-of-pocket expenses.
- ☐ **Earn rewards and find discounts.**
Log in to your Online Member Account to activate My Health Pays** rewards and find exclusive discounts.

*Ambetter Health does not provide tax advice. Please consult your tax advisor for additional information. Health Savings Accounts (HSAs) are individual brokerage accounts and the taxpayer is responsible for use of the account.
**Healthcare-related costs will vary by member and the plan in which you are enrolled. Funds expire immediately upon termination of insurance coverage. My Health Pays* rewards cannot be used for pharmacy copays.

Information will vary based on the state and the Ambetter Health plan.



FROM



2026 Portfolio

2026 Provider Network Highlights



FROM



- Jennie Stuart – NEW!
- Norton
- St. Elizabeth Healthcare
- Common Spirit Health
- UofL Health Hospital
- University of Kentucky Albert B Chandler Hospital
- Appalachian Regional Healthcare



**This is only a partial provider list, refer to the Ambetter Guide for a list of contracted providers.*



FROM



Virtual 24/7 Care

- All Ambetter Health members have access to virtual services through Teladoc Health.
- 24/7 help for non-emergency medical issues through Virtual 24/7 Care.
- Members get access to medical professionals via phone or video for non-emergency health issues.
- Easy way to get fast care when in outlying or rural areas.
- Avoid long wait times at in-person urgent care clinics or physician offices.





FROM |

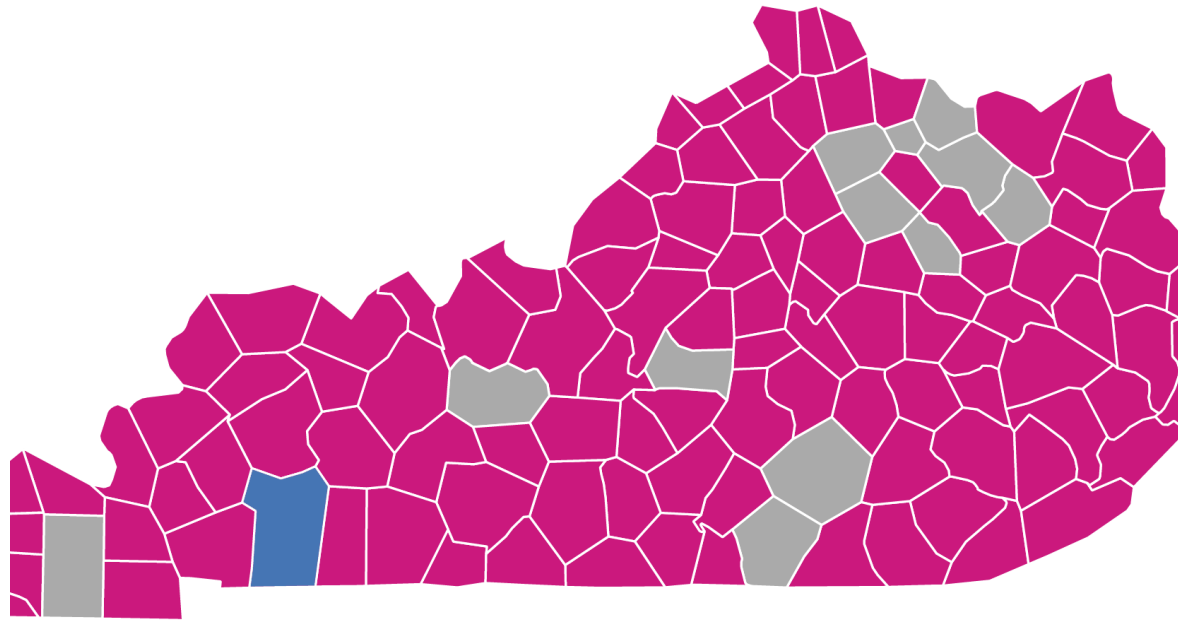


Premier Portfolio Highlights

Ambetter Health's broadest provider network.

- Available in all Ambetter Health counties.
- Members can visit any in-network provider; no referrals needed.
- When searching Ambetter Guide, choose Premier to locate in-network providers.
- Adult vision and adult dental buy-ups are available on all plans.
- Ambetter Premier networks have reciprocity with other Premier networks, but not with any other Ambetter networks. CA and NY do not have reciprocity to one another or to any other Premier networks.

2026 County Coverage



***Expansion for PY2026**

Adair	Cumberland	Knott	Nelson
Allen	Daviess	Knox	Nicholas
Anderson	Edmonson	Larue	Ohio
Ballard	Elliott	Laurel	Oldham
Barren	Estill	Lawrence	Owen
Bath	Fayette	Lee	Owsley
Bell	Floyd	Leslie	Pendleton
Boone	Franklin	Letcher	Perry
Boyd	Fulton	Lewis	Pike
Boyle	Gallatin	Lincoln	Powell
Bracken	Garrard	Livingston	Rockcastle
Breathitt	Grant	Logan	Russell
Breckinridge	Green	Lyon	Scott
Bullitt	Greenup	Madison	Shelby
Butler	Hancock	Magoffin	Simpson
Caldwell	Hardin	Marshall	Spencer
Calloway	Harlan	Martin	Taylor
Campbell	Hart	McCracken	Todd
Carlisle	Henderson	McCreary	Trigg
Carroll	Henry	McLean	Trimble
Carter	Hickman	Meade	Union
Casey	Hopkins	Menifee	Warren
Christian*	Jackson	Mercer	Washington
Clark	Jefferson	Metcalfe	Webster
Clay	Jessamine	Monroe	Whitley
Clinton	Johnson	Morgan	Wolfe
Crittenden	Kenton	Muhlenberg	Woodford

2026 Premier Portfolio

- Optional vision and dental add on available on all plans.

Kentucky HMO Portfolio (Premier)

BRONZE	SILVER	GOLD
Choice Bronze HSA	Clear Silver	Complete Gold
Everyday Bronze	Complete Silver	Everyday Gold
	Focused Silver	
	Enhanced Asthma/COPD Care Silver with \$0 Drug Options	

Everyday Bronze

- Copays for PCP, Specialist, Lab Generic Rx and Urgent Care.

PLAN HIGHLIGHTS	PRICE
Deductible	\$8,450
Max out-of-pocket	\$10,150
Coinsurance	50%
Virtual 24/7 Care*	0%
PCP Visit	\$40 Copay
Specialist Visit	\$90 Copay
Lab	\$50
Preferred Generic/ Generic Rx	\$3/\$30 Copay
Preferred Rx	45% AD
Urgent Care	\$50 Copay

Focused Silver

\$0 deductible at the 87% and 94% AV levels.

	Base	73%AV	87% AV	94% AV
Deductible	\$6,300	\$5,150	\$0	\$0
Max out-of-pocket	\$8,400	\$7,200	\$3,350	\$1,500
Coinsurance	50%	50%	50%	30%
Virtual 24/7 Care*	\$0	\$0	\$0	\$0
PCP Visits	\$40	\$35	\$20	\$0
Specialist Visits	\$85	\$85	\$50	\$15
Lab	\$50	\$40	\$25	\$0
Preferred Generic/Generic Rx	\$3/\$15	\$3/\$15	\$3/\$12	\$0/\$0
Preferred Rx	\$75	\$70	\$40	\$25
Urgent Care	\$60	\$50	\$25	\$10

INT = Integrated Medical and Rx Deductible | AD = After Deductible | NCAD = No Charge After Deductible *Virtual care may vary by market.

Adult Vision Add On

- No waiting period.
- Available as an add-on for designated plans.
- Members 21 years of age and older.
- Glasses or contacts are covered, not both, per member
- Coverage applies to in-network providers only.
- No coverage with out-of-network providers.



SERVICE	IN-NETWORK PROVIDERS ONLY
Exams and Eyewear	
Routine eye exam: 1 visit per year.	\$0 copay
Eyeglass frames	Covered up to \$130
Eyeglass lenses	
Single	Covered 100%
Bifocal	Covered 100%
Trifocal	Covered 100%
Lenticular	Covered 100%
Contact Lenses	
Contact lenses in lieu of glasses	Covered up to \$130
Contact lens fitting	Covered 100%
Specialty lens fitting	Covered up to \$50

Adult Dental Add On

- **No waiting period**
- Available as an add-on for designated plans.
- Members 21 years of age and older.
- **Maximum benefit:** \$1000/calendar year.
- Dental out-of-pocket maximum does not apply toward any other maximums.
- Coverage applies to in-network providers only.
- No coverage with out-of-network providers.



SERVICE	IN-NETWORK PROVIDERS
Routine Dental: preventative and diagnostic (Class 1)	
Routine oral exam	\$0 copay
Routine cleaning	\$0 copay
X-rays: bite-wings, full-mouth or panoramic	\$0 copay
Basic dental: minor restorative (Class 2)	
Minor restorative, metal and resin-based fillings.	50% coinsurance
Endodontic therapy	50% coinsurance
Periodontics, scaling and root planning, periodontal maintenance.	50% coinsurance
Simple extractions	50% coinsurance
Prosthodontics: relines, rebase, adjustments and repairs	50% coinsurance
Major dental: major restorative (Class 3)	
Crowns and bridges	50% coinsurance
Dentures	50% coinsurance
More complex extractions and surgical services	50% coinsurance



FROM



Wellness and Rewards

MHP[®] Reward Activities

Each member can earn up to \$500 by completing certain clinical and online activities.*

Ambetter Standard 2025 Rewards

- Wellbeing Survey
- Annual Well Visit

Comprehensive Diabetic Screenings

- Diabetes eye exam
- Diabetes kidney screening
- Diabetes HbA1c test

Quality Measures (6 rewards)

- Childhood immunizations - Child 0-1 years of age
- Vision screening - Child 2-20 years of age
- Cervical cancer screening - Women 21 – 49 years of age
- Breast cancer screening – Women 50+ years of age
- Cholesterol screening - Men 21 – 49 years of age
- Colorectal cancer screening - Men 50+ years of age
- High blood pressure screening - All

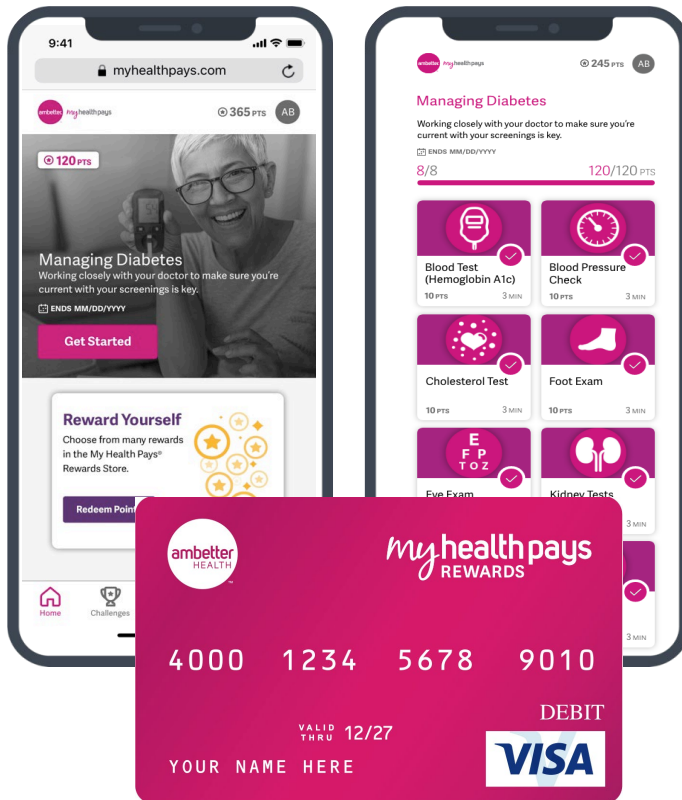
Online Activities

- Fun and easy activities that members can complete each month.
- Online activities take about ten minutes to complete.



MHP® Points Usage

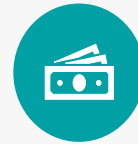
Use points to shop the **Online Rewards** store or convert the points to dollars to pay premiums and other healthcare-related costs and monthly bills.



This card is issued by The Bancorp Bank, N.A., Member FDIC, pursuant to a license from Visa U.S.A. Inc. Card cannot be used everywhere Visa debit cards are accepted. See Cardholder Agreement for complete usage restrictions.

For agent use only. Not for distribution to prospects or members.

Healthcare Related Costs



Monthly Premium Payments



Doctor Copays



Deductibles



Coinsurance

Monthly Bills



Utilities (gas, water and electric)



Cell Phone



Transportation



Childcare



Education



Rent

My Health Pays® rewards cannot be used for pharmacy copays.

My Health Pays® rewards cannot be used to pay premiums in AZ, NV, and CA

MHP® Points Usage



Use points to shop the **Online Rewards** store or convert the points to dollars to pay premiums and other healthcare-related costs and monthly bills.



My Health Pays Reward Card

- MHP cards CANNOT be requested until activities are completed.
- Once activities are completed cards can be requested online and send to the member's mailing address.
- Funds on the card can be used to pay for qualifying bills.

MHP Reward cards are NOT automatically sent!



Education



Rent

This card is issued by The Bancorp Bank, N.A., Member FDIC, pursuant to a license from Visa U.S.A. Inc. Card cannot be used everywhere Visa debit cards are accepted. See Cardholder Agreement for complete usage restrictions.

My Health Pays® rewards cannot be used for pharmacy copays.
My Health Pays® rewards cannot be used to pay premiums in AZ, NV, and CA

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MHP Rewards Year-to-Date

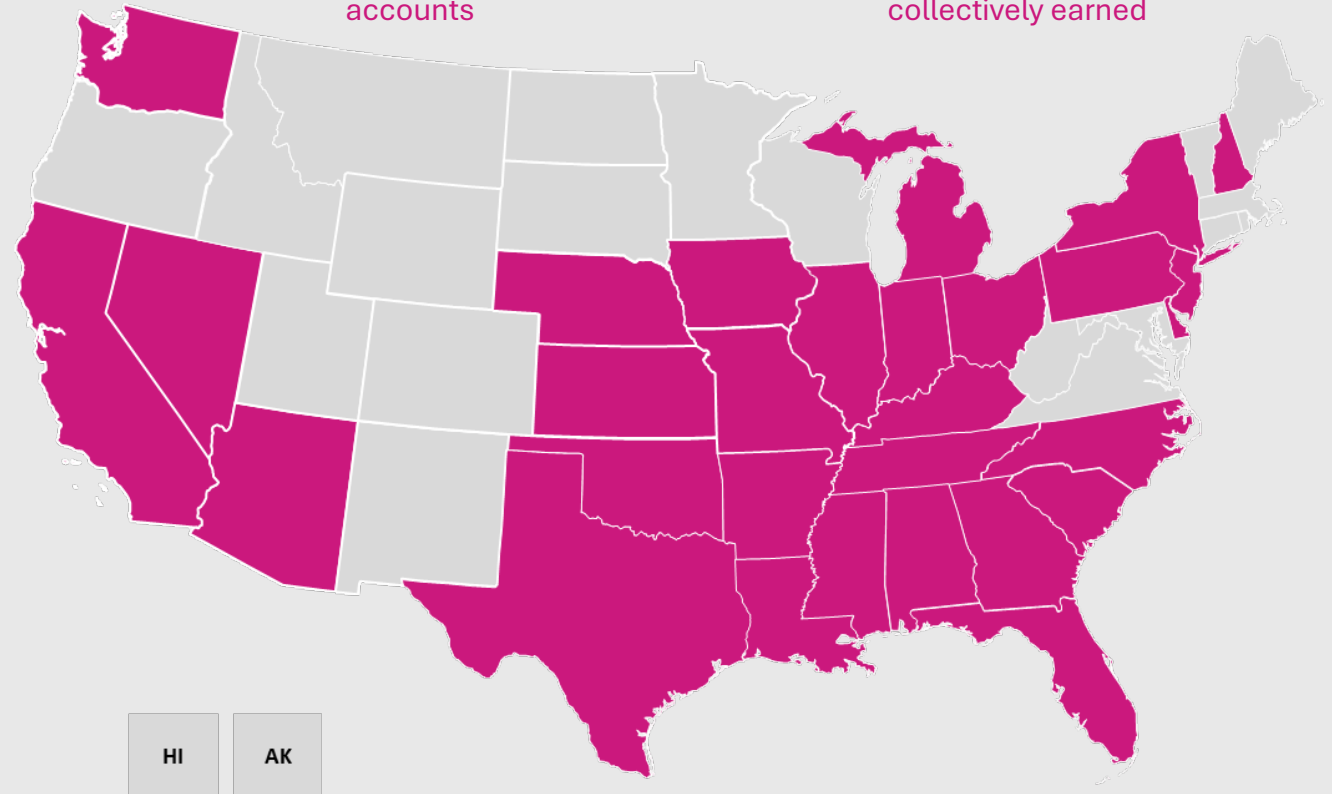
Member who activate My Health Pays®
are more likely to renew their coverage
with Ambetter Health.

850k

Activated member accounts

**\$80
MILLION**

Members have collectively earned



 FROM

More

ambetter.

Member Access

Doctors

Pharmacies

Payments

Rewards

Activity & Usage

Coverage



JC

Joseph

ambetter.

ambetter.

Perks

REWARDS PROGRAM

MEMBER DISCOUNTS

A woman with dark hair tied in a small ponytail, wearing a blue denim shirt, sits at a desk. She is smiling and looking at a laptop. A fluffy, light-colored dog sits next to her, resting its head on her shoulder. A coffee cup is on the desk. The background is a bright, out-of-focus indoor space.

Ambetter Health is excited to offer our members exclusive discounts and special rates on a wide range of health-focused products and services! With these fantastic deals and easy mobile access, you'll always have a reason to Celebrate Your Savings! Ambetter Health is dedicated to enhancing the health and wellbeing of our members.

Copyright 2022, Centene



FROM



Find a Provider



FROM

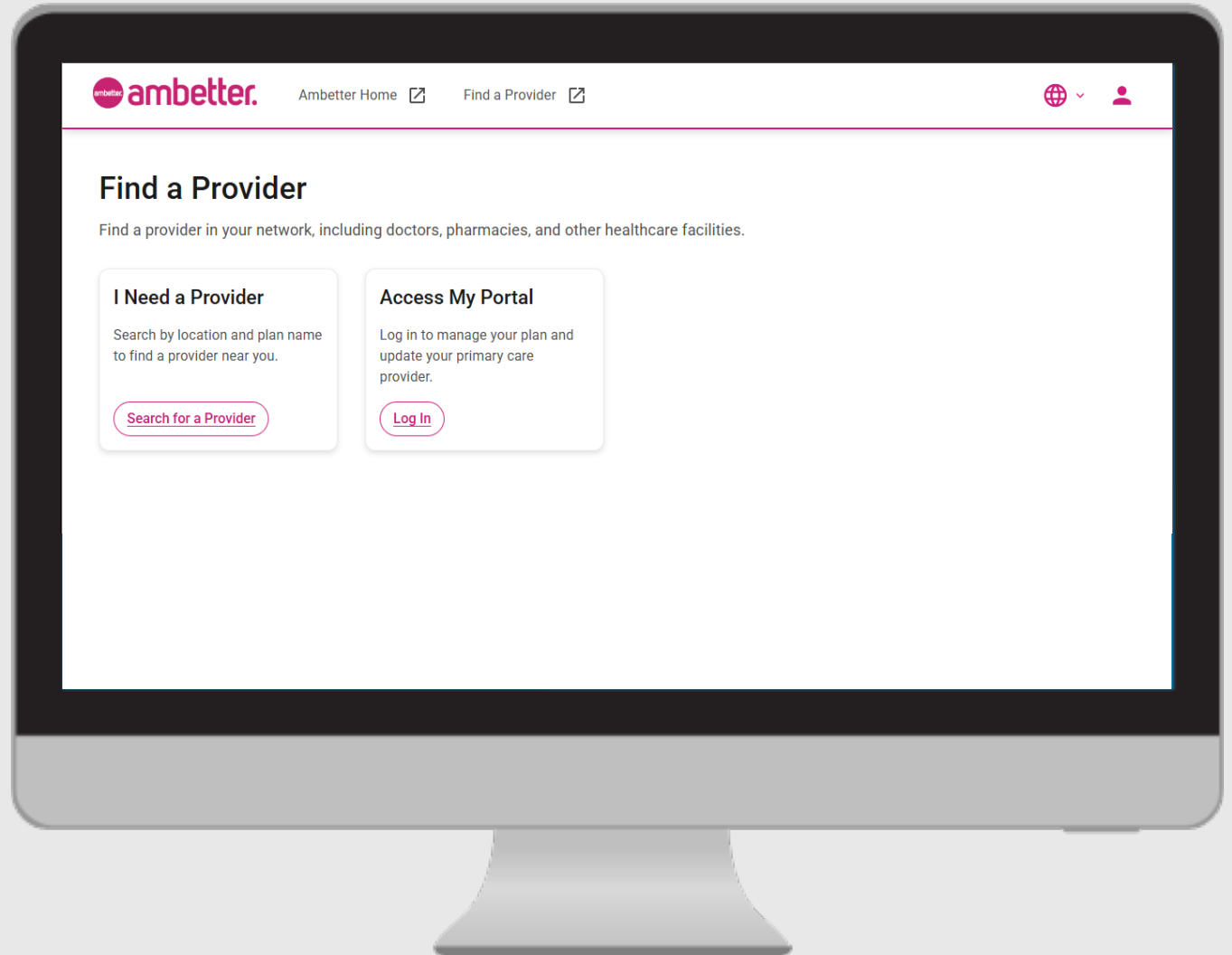


Find a Provider Tool (FAP)

Allows members to search for in-network providers.

Available in the Members Portal or directly at:

findaprovider.ambetterhealth.com



 FROM

43

Search Options



ambetter
HEALTH

[Home](#) [Ambetter Website](#) [Help](#)

Find a Provider

Start your search for a provider. You can filter your search by distance, location, facility, and more.

Plan Solutions – Flemming Island, FL (2026) [Change Plan](#)

Enter a provider name, specialty, facility, condition, or NPI.

[Search](#)

Search Location Manhattan, NY 10029

[Change Search Location](#)

Search by Category

- [Medical Professionals](#)
- [Medical Facilities](#)
- [Behavioral Health](#)
- [Pharmacy and Medical Supplies](#)
- [Vision](#)
- [Dental](#)

Popular Searches

- [Primary Care](#)
- [Clinic or Urgent Care](#)
- [Routine Dental](#)

I Am a Member

Use your member information to save time searching.

[Log In](#)

Log into your Secure Member Portal to manage your account and find in-network providers.

[Enter Member ID and Birthdate](#)

Use your member ID and birthdate to find in-network providers.

[Share](#) [Print](#)

Contextual Results



Find a Provider

Print

Start your search for a provider. You can filter your search by distance, location, facility, and more.

Plan Solutions – Flemming Island, FL (2026)

Change Plan

Enter a provider name, specialty, facility, condition, or NPI.

Q Gas

Press Enter ← or select an option below.

Search all for **"Gas"**

Popular Search Urgent Care

Specialty **Gastroenterologist**

Group Mercy Gut Health Group

Practitioner **Alton Gasdio MD**

Facility **Gastroenterologists Specialty Clinic**

Dental

I Am a Member

Use your member information to save time searching.

[Log In](#)

Log into your Secure Member Portal to manage your account and find in-network providers.

Additional Filters

Filter

Distance

20 miles

Provider Type

☒ Both ☐ Practitioner ☐ Facility

Provider Features

☐ Primary care provider

☐ In-network

☐ Accepting new patients

☐ Open now

More

Practitioner

Add Filter

Facility

Add Filter

Practitioner Filters

Additional Practitioner Language

Not Selected

Practitioner Gender

☒ All ☐ Female ☐ Male ☐ Other

Practitioner Type

Not Selected

Group Affiliation

Not Selected

See which medical group or organization the provider is part of.

Hospital Affiliation

Not Selected

☐ Board Certified

Shows if the practitioner is Board Certified

Care and Services

Modalities and Disorders Treated

Not Selected

Allows filtering by both disorder and treatment type.

Practitioner Service Types

Not Selected

Filter by the services the practitioner offers (e.g., urgent care, specialty care).

Apply Filter

Facility Filters

Facility Features

☐ Open after 5:00 PM

☐ Open Weekends

☐ Wheelchair Accessible

☐ Patient Centered Medical Home (PCMH)
Shows if the provider participates in PCMH programs, which focus on coordinated, patient-centered care.

Additional Facility Languages

Not Selected

Pharmacy Type

Not Selected

Hospital Services

Not Selected

Cost and Insurance

Accessibility Features

Parking Access Filters

☐ Select all parking filters

☐ The right number of accessible parking spaces are given.

☐ Curbs between off street parking and site have curb ramps.

☐ Curbs between off street drop off locations and site have curb ramps.

☐ Has van accessible parking.

Exterior Building Access Filters

Interior Building Access Filters

Programmatic Building Access Filters

Apply Filter

Provider Details



FROM



ambetterHEALTH

Home

Ambetter Website

Help

← Back to Search Results

Felicity Stephenson, MD

Practitioner

Print

Practitioner Overview

✓ Accepting patients in some cases

✓ In-network

✓ Open now

✗ Not a primary care provider

✗ Does not offer virtual visits

Alternative Medical Group

Street Address, City, State (# miles away)

(555) 555-5555

3 more locations

Change Location

Specialties

• General Gastroenterology, Board Certified

• Advanced Endoscopy (Intervention)

• Inflammatory Bowel Disease (IBD)

• Motility and Neurogastroenterology, Board Certified

• Hepatology, Board Certified

More

Other Languages

Spanish, French

Facility Overview

Address

190 Capitol Street, Brooklyn, NY 00001

Telephone Number

1 (333) 551-9485

National Provider Identifier (NPI)

1234567890

Hospital Affiliations

• Good Samaritan Hospital

Office Hours

Holiday hours could vary

Office hours are displayed in the local time zone of the provider.

Monday	8:00 AM - 5:00 PM
Tuesday	8:00 AM - 5:00 PM
Wednesday	8:00 AM - 5:00 PM
Thursday	8:00 AM - 5:00 PM
Friday	8:00 AM - 5:00 PM
Saturday	8:00 AM - 2:30 PM
Sunday	Closed

Office Languages

English

47



FROM



Formulary and Pharmacy



Have enrollment questions? Our licensed agents can help.

Call 844-990-0863 (TTY: 711)



Find doctors, specialists
and hospitals near you.

[Find a Doctor](#) 

49



FROM



Prescription Delivery

Ordering medications through Express Scripts® Pharmacy Home delivery is a smart way for members to save time and money. Eligible members may save when ordering a 90-day* supply of medicine. Members will get maintenance medications delivered safely, on their schedule, to their door.

Two easy ways to get started:

- Members can call their provider and ask them to send a new 90-day prescription to Express Scripts® Pharmacy.
- Or members can request prescription delivery in their Online Member Account.

*Members may save when they fill eligible medications, 90 days at a time, through Express Scripts® Pharmacy.

For agent use only. Not for distribution to prospects or members.



FROM

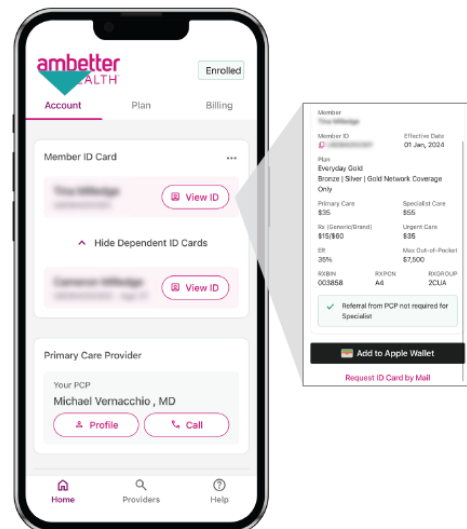


Member Portal and Mobile App

Ambetter Health Mobile App

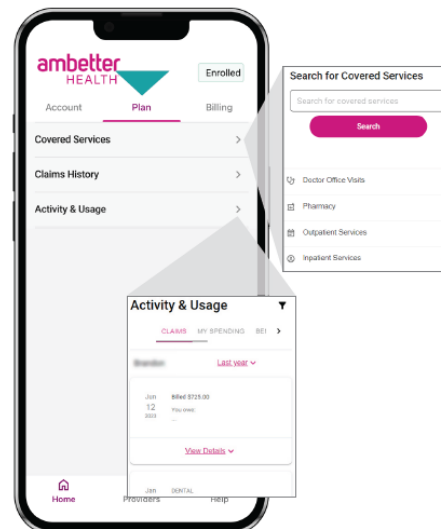
The Ambetter Health mobile app is an easy and secure way for members to access their health plan information.

View account details
including their Member ID Card and Primary Care Provider (PCP).

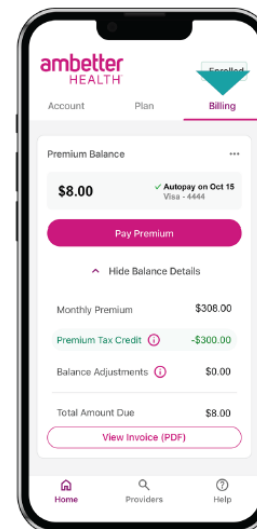


Save ID Card to Apple Wallet

See their plan information
including covered services, claims history and Activity & Usage.

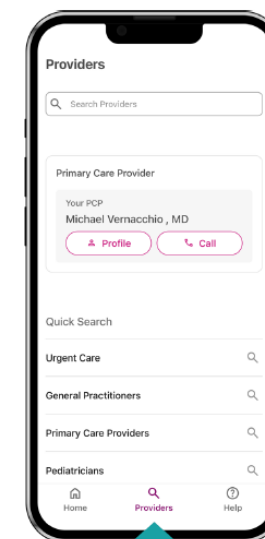


View billing information
including their Premium Balance and Premium Tax Credit.



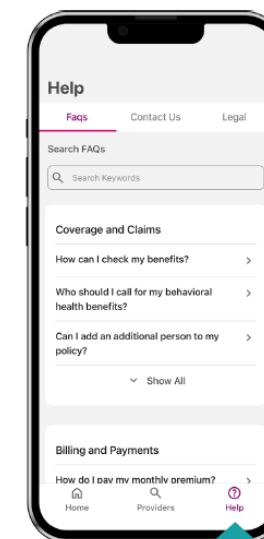
Enroll in Auto Pay

View their current PCP and search for a specialist from the Quick Search options.



Select a New PCP

Get help from frequently asked questions and information on how to contact Ambetter Health.





Make a plan! This will not be a “normal” OE.



Your clients are going to have questions! Connect with them as early as possible!



Have your clients download the Ambetter Health App, login and enable push notifications.



Communicate with us! Questions? Comments? Concerns? Feedback? jegillespie@centene.com

Important Links

- [Member Portal](#)
- [Marketplace Guide to Income Verification](#)
- [Learn how to report a life change](#)
- [Full list of immigration statuses eligible for Marketplace coverage](#)
- [Ambetter Health Broker Portal](#)
- [Quick Pay](#)
- [Formulary and Prescription Info](#)
- [Find a Provider](#)
- Member Service 1-833-705-2175



FROM



Thank You!



Anthem

QHP ISSUER PRESENTATIONS



Executive Summary

Executive Summary: Anthem Blue Cross and Blue Shield of Kentucky

Overview

Anthem Blue Cross and Blue Shield (Anthem BCBS) has been a trusted leader in the Kentucky healthcare market for 87 years. Over nearly nine decades, Anthem has evolved into one of the most recognized and reliable health insurance providers in the Commonwealth, serving individuals, families, and employers with comprehensive coverage and innovative health solutions.

Market Presence

Anthem Blue Cross and Blue Shield of Kentucky serves approximately 45,000 individual health insurance members across the state. The company maintains a strong presence both in urban and rural areas. Anthem's long-standing partnerships with Kentucky's healthcare providers ensure broad network access and continuity of care for members.

Commitment to Kentucky Communities

Anthem BCBS is deeply invested in improving the health and well-being of Kentuckians. Through community outreach programs, local health initiatives, and partnerships with providers and nonprofits, Anthem supports preventive care, chronic disease management, and access to behavioral health services. The company's community focus extends beyond insurance, emphasizing holistic approaches to health and wellness.

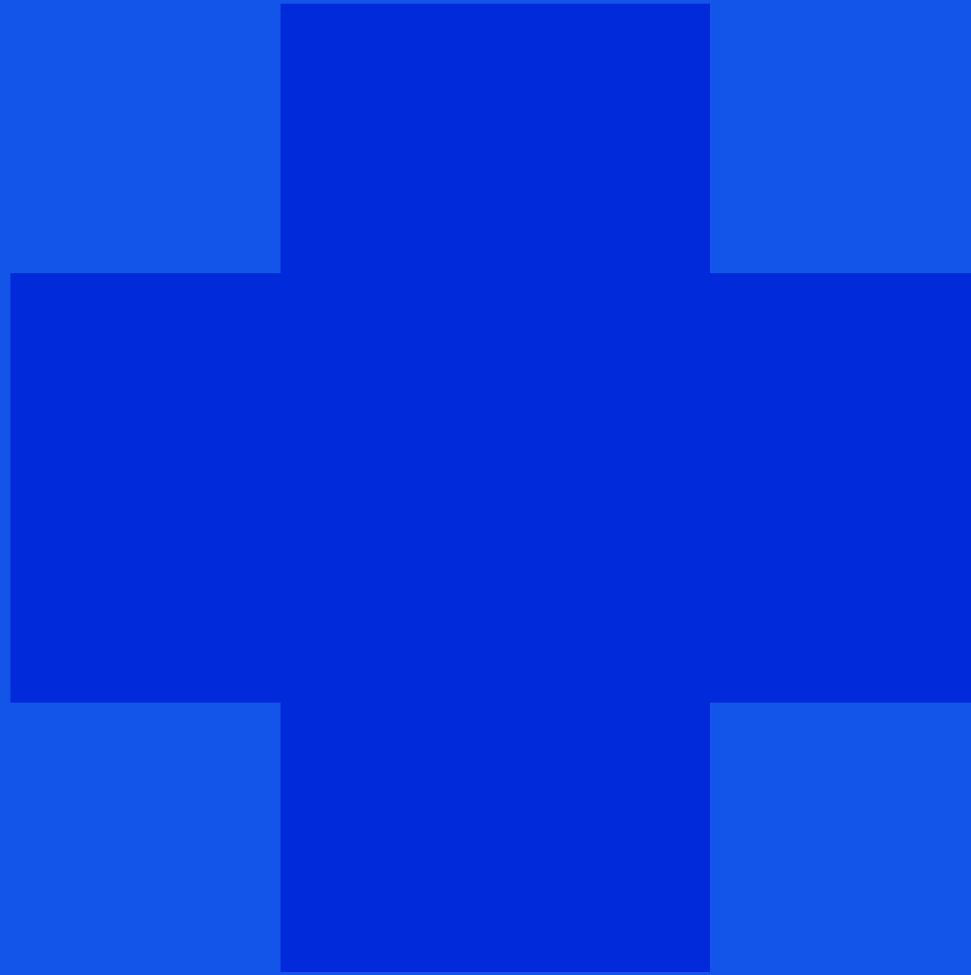
Innovation and Member Experience

With a commitment to innovation, Anthem leverages advanced data analytics, digital tools, and personalized care models to enhance the member experience. Mobile health management, telehealth options, and integrated care coordination systems reflect Anthem's focus on accessibility, affordability, and member engagement.

Conclusion

For 87 years, Anthem Blue Cross and Blue Shield of Kentucky has demonstrated enduring leadership and dedication to the state's healthcare landscape. With 45,000 individual members and a deep commitment to community health, Anthem continues to shape a healthier future for Kentucky — delivering on its mission to improve lives and communities, one member at a time.

Plans Available



2026 Individual ACA Portfolio Design



Network



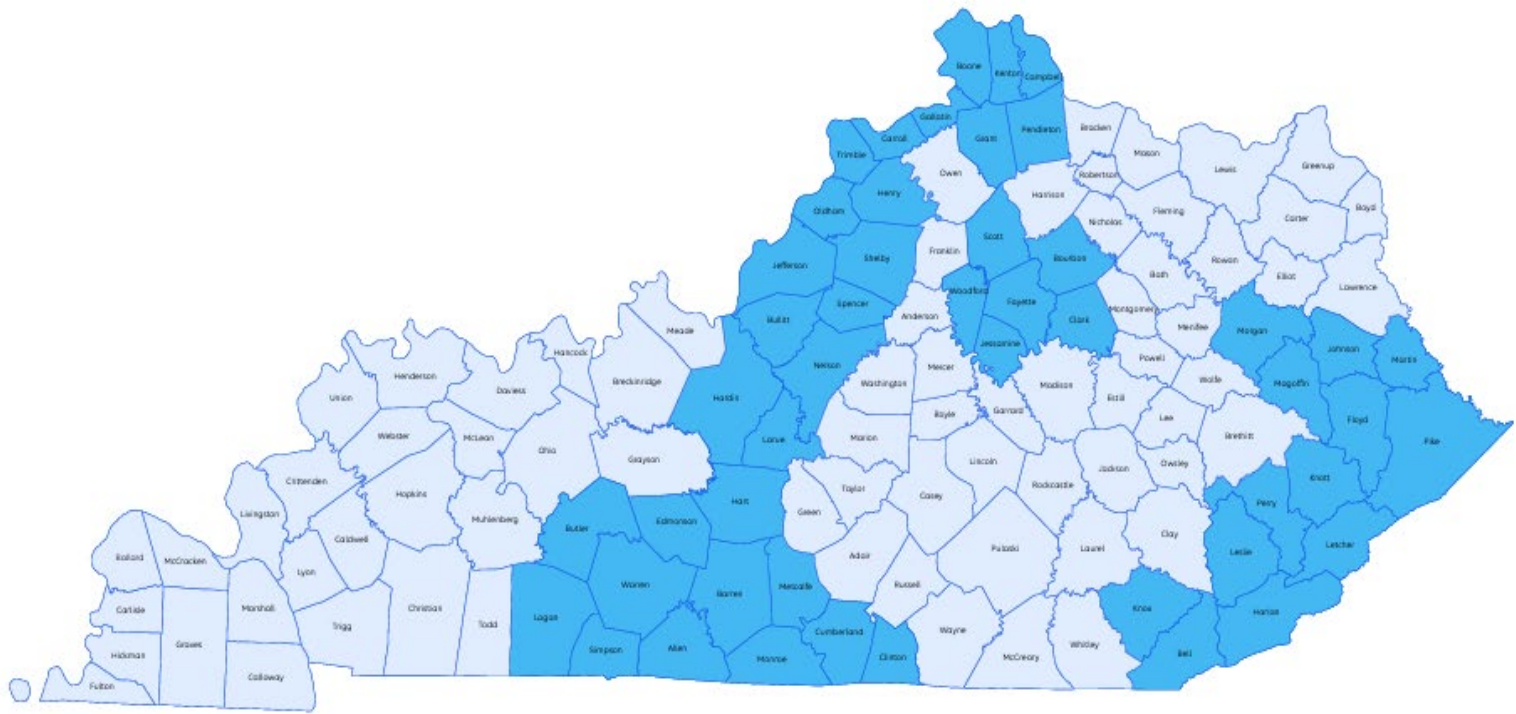
Individual ACA Network

Service Area

- Pathway – 120 counties
- Pathway Transition – 48 counties
- Pathway only – 72 counties
- Pathway and Pathway Transition – 48 counties
- Pathway Transition only – 0 counties



2026 Individual Network Service Area



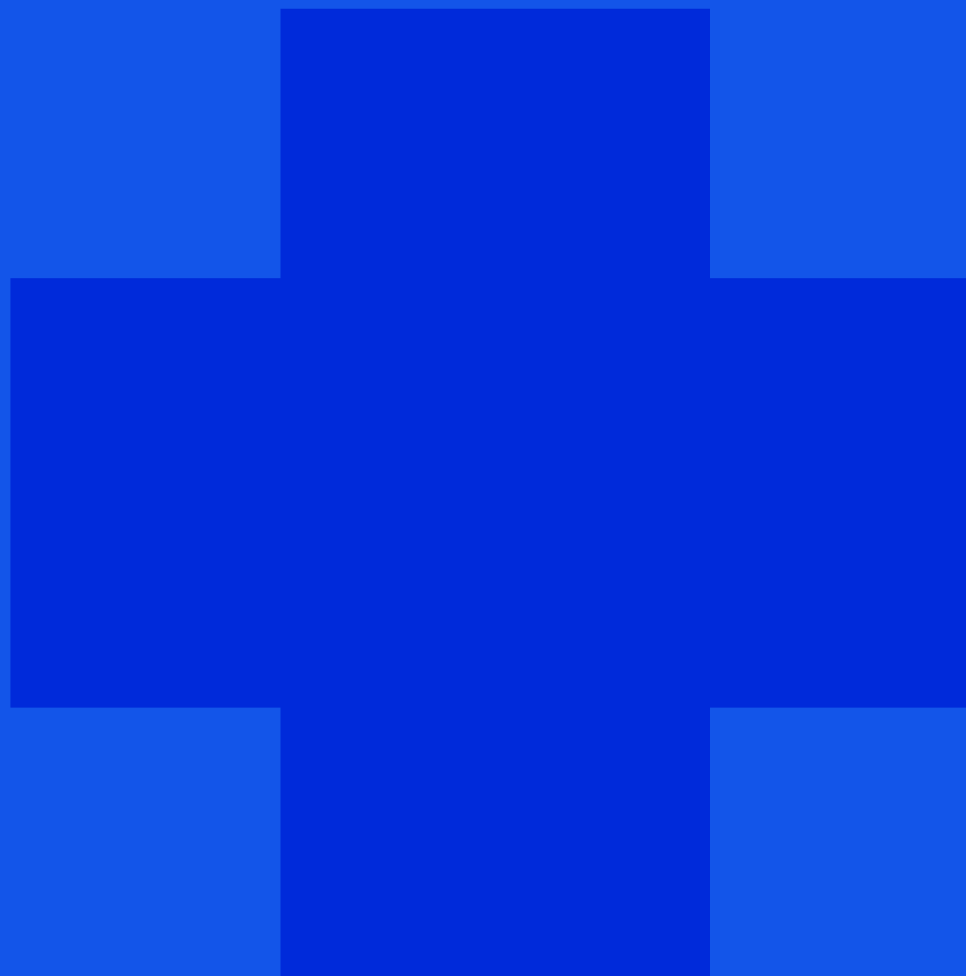
- Pathway HMO only
- Pathway HMO and Pathway Transition HMO

Tri-Health Ohio providers and hospitals are part of the Transition network.



While we make efforts to ensure that our lists of doctors, hospitals, and other providers are up-to-date and accurate, providers do leave our networks from time to time, and the listings included on Find Care at [anthem.com](https://www.anthem.com) do change.

Covered Services



Health coverage created with your clients in mind

Virtual care and preventive care at no extra cost

Prescription coverage, including \$0 for some commonly used medications with convenient home delivery

SydneySM Health app for 24/7 access to health plan information, our Find Care tool to search for doctors and hospitals, symptom checker, and virtual visits.

Dental and vision coverage options for integrated, whole-health care.

Mental health services available in-person, or virtually using our Sydney Health app.

SpecialOffers: an exclusive discount program on health-related products and services, such as contact lenses and gym memberships.



Connecting customers with plans designed to support their whole health with comprehensive, personalized benefits.

2026 Individual ACA Plans

No Individual Plans will be discontinued for 2026

No New Individual Plans will be introduced for 2026

[illegible]

Individual Medical Plan Updates



Plan / Product	Impact	2025	2026
Anthem Bronze Pathway (X) 6700 (\$0 Virtual PCP + \$0 Select Drugs + Incentives)	OOP	\$9,200	\$10,600
Anthem Bronze Pathway (X) (Transition)7000 Adult Dental/Vision (\$0 Virtual PCP + \$0 Select Rx)	OOP Urgent Care	\$9,200 2 Visits CIF, then \$75	\$10,600 \$75
Anthem Bronze Pathway (X) Transition 7300 (\$0 Virtual PCP + \$0 Select Drugs + Incentives)	OOP	\$9,200	\$10,600
Anthem Bronze Pathway (X) (Transition) 7700 (\$0 Virtual PCP + \$0 Select Drugs + Incentives)	OOP	\$9,200	\$10,600
Anthem Bronze Pathway (X) (Transition) 10600 (\$0 Virtual PCP + \$0 Select Drugs + Incentives)	Deductible OOP	\$9,200 \$9,200	\$10,600 \$10,600

Individual Medical Plan Updates



Plan / Product	Impact	2025	2026
Anthem Bronze Pathway (X) (Transition) 8500 for HSA + Incentives)	Deductible OOP	\$8,250 \$8,250	\$8,500 \$8,500
Anthem Bronze Pathway (X) (Transition) 6000 for HSA (+ Incentives)	OOP	\$8,250	\$8,500
Anthem Bronze Pathway (X) Transition 7000 for HSA (+ Incentives)	Deductible OOP	\$6,800 \$7,450	\$7,000 \$8,500
Anthem Bronze Pathway (X) 7000 for HSA (+ Incentives)	Deductible OOP Advanced Imaging Emergency Room	\$6,700 \$8,250 Ded/\$150 Ded/\$150	\$7,000 \$8,500 Ded/\$200 Ded/\$200

Individual Medical Plan Updates



Plan / Product	Impact	2025	2026
Anthem Silver Pathway 500 (\$0 Virtual PCP + \$0 Select Drugs + Incentives)	OOP	\$8,700	\$9,800
Anthem Silver Pathway (X) 3500 for HSA (+ Incentives)	OOP	\$7,200	\$8,500
Anthem Silver Pathway (X) 3500 (\$0 Virtual PCP + \$0 Select Drugs + Incentives)	OOP PCP Specialist Rx T2	\$8,700 \$25 \$50 \$40	\$9,800 \$30 \$60 \$55
Anthem Silver Pathway (X) (Transition) 4000 Adult Dental/Vision (\$0 Virtual PCP + \$0 Select Rx)	OOP Specialist Urgent Care	\$8,200 \$75 3 Visits CIF, then \$50	\$9,900 \$80 \$50
Anthem Silver Pathway (X) Transition 4200 for HSA (+ Incentives)	OOP Rx T2	\$5,950 Deductible/\$40	\$7,000 Deductible/\$55



Individual Medical Plan Updates



Plan / Product	Impact	2025	2026
Anthem Silver Pathway (X) 6000 (\$0 Virtual PCP + \$0 Select Drugs + Incentives)	OOP Specialist	\$8,900 \$70	\$9,900 \$75
Anthem Silver Pathway (X) Transition 6000 (\$0 Virtual PCP + \$0 Select Drugs + Incentives)	Deductible OOP PCP Specialist Rx T1	\$6,500 \$8,500 \$30 \$50 \$25	\$6,000 \$9,900 \$35 \$75 \$10
Anthem Gold Pathway ((X)/ Transition)) 2300 (\$0 Virtual PCP + \$0 Select Drugs + Incentives)	Rx T2	\$35	\$50
Anthem Catastrophic Pathway ((X)/ Transition (X)) (+ Incentives)	Deductible OOP	\$9,200 \$9,200	\$10,600 \$10,600

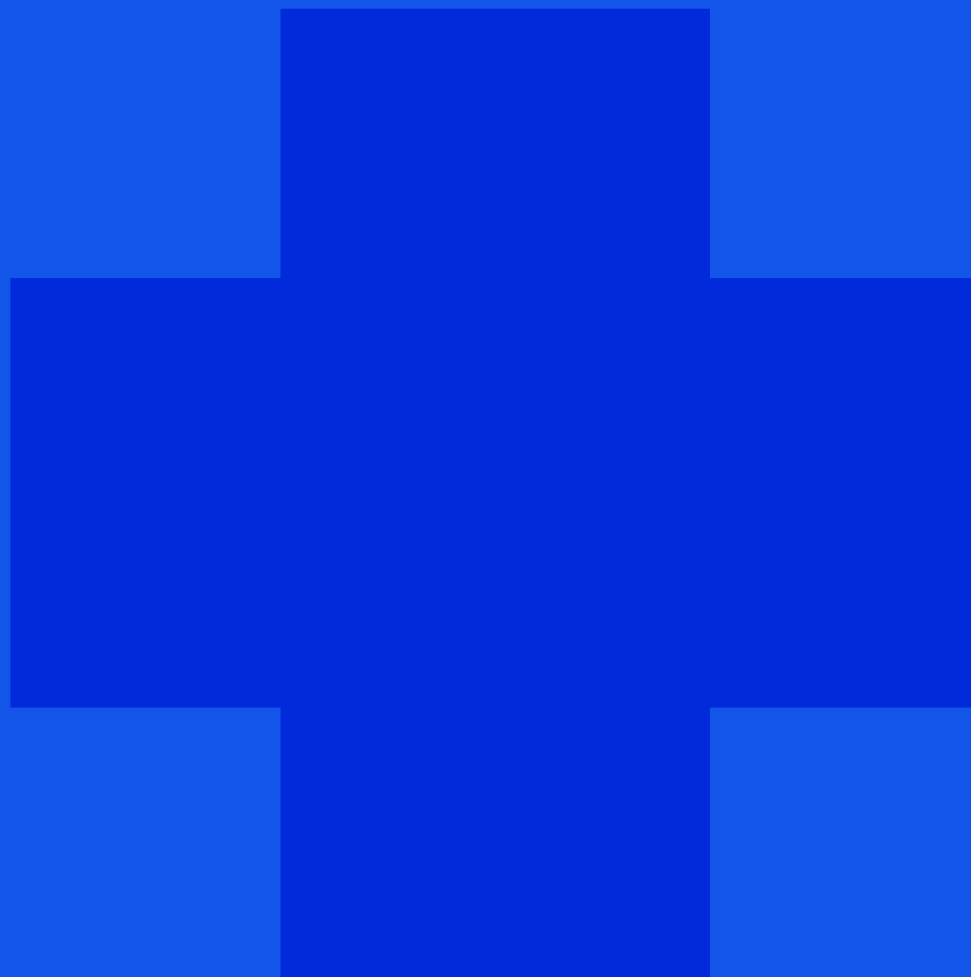
Individual Medical Plan Updates

Other Medical Product Changes



Plan / Product	Impact	2025	2026
Wellness Incentives	Wellness Exam	90 days	120 days
Plan Name Changes	Catastrophic Plans	Deductible amount	Removed Deductible amount from plan name
	All Plans	HMO	Removed HMO from plan names
All Plans	Pediatric Dental	Embedded	Removed
	Pediatric Vision	Embedded	No Change
KHealth	Effective 1/1/26, KHealth will no longer be a participating provider within the Anthem BCBS network.	KHealth will be available through the end of 2025	Members will still have full access to virtual primary care services through LiveHealth Online, but they will no longer see KHealth medical text/chat as an option in Sydney or on Anthem.com beginning 1/1/26.

Wellbeing Solutions



Wellbeing Solutions



Individual Wellbeing Solutions Embedded FI Packages	
Individual	
All ACA Plans: IND FI Foundational Engagement Package 100	



2026 Individual Foundational Package

Product/Service	Individual Foundation
Case Management – Med (including ESRD, NICU, Transplant)	✓ (excluding separate NICU program but NICU still covered under CM)
Utilization Management – Medical	✓
Sydney Health	✓
MyHealth Check-In	✓
Quick Care Options	
Diabetes Prevention Outreach (DPO)	
ConditionCare: CORE (Asthma, CAD, Diabetes, Heart Failure, COPD)	
Building Healthy Families	
24/7 Nurseline	✓
MyHealth Advantage Gold V2	✓
Healthy Life Campaign (previously Commercial Outbound Calling) – in CM (FI only)	✓
Case Management – Behavioral Health (COMB)	✓
Case Management – BH Case Management with Emotional Wellbeing Resources	
Autism Spectrum Disorder (ASD) with Applied Behavioral Analysis	✓
Utilization Management – BH	✓
Anthem Health Guide Enhanced Service Model	
Clinical Review – Cancer Care Quality Program	✓
Cancer Care Navigator (previously available through Medical CM)	✓
Clinical Review – Radiation Therapy	✓
Clinical Review – Genetic Testing	✓
Clinical Review – Musculoskeletal (CR MSK)	
Clinical Review – Musculoskeletal and Site of Care (Includes CR MSK)	✓
Clinical Review – Monitored Anesthesia Care (MAC)	✓
Clinical Review – Rehabilitative Services (CR RS)	
Clinical Review – Rehabilitative Services Site of Care (Includes CR RS)	✓
Clinical Review – Radiology Benefit Management (CR RBM)	
Clinical Review – Radiology and Imaging w Site of Care (Includes CR RBM)	✓
Clinical Review – Cardiology	✓
Clinical Review – Sleep	✓
Clinical Review – Surgical GI	
Clinical Review – Surgical Clinical Site of Care (Includes CR Surgical GI)	✓

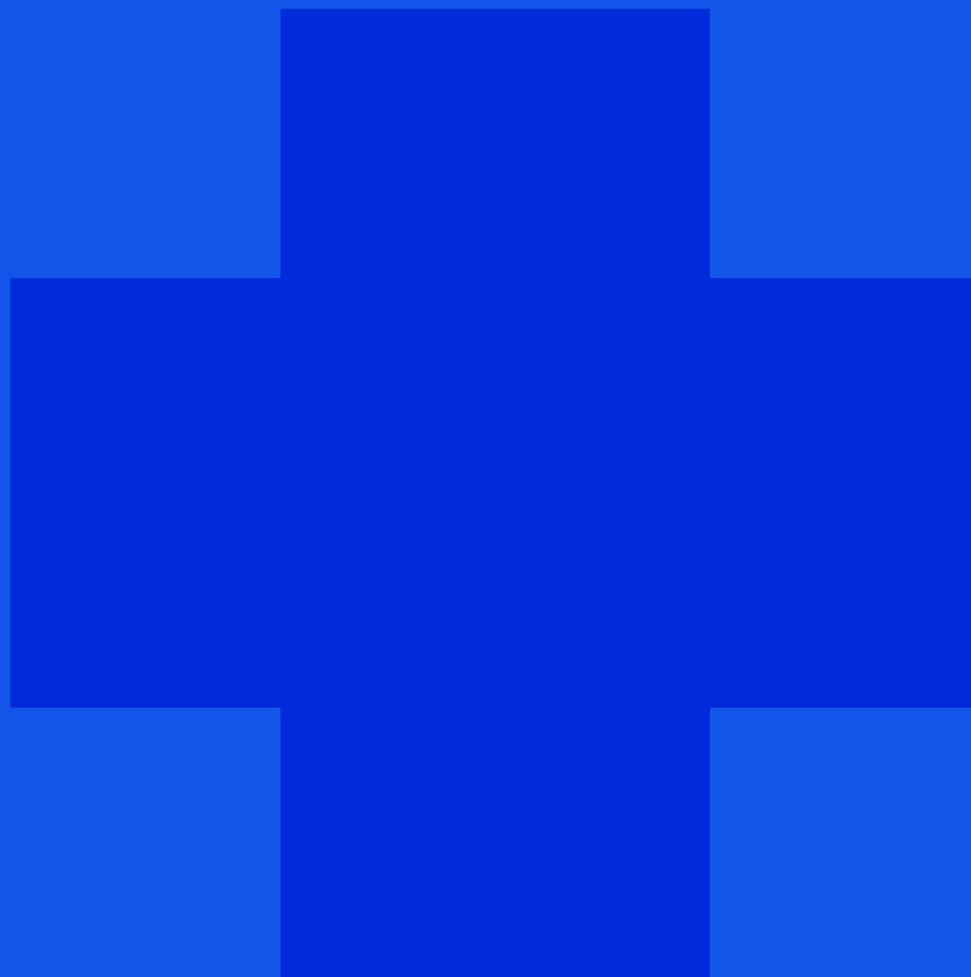
Please note:
Back & Joint Pain Program is sunsetting
12/31/25 and will no longer be available.

2026 Individual Engagement Package

	Incented Activities	IND Engagement Package 100	IND Engagement Package 100	
		2025	2026	
Preventive Care	Adult Wellness Exam (including Well Woman Exam) within first 90 days of member's plan year			
	Adult Wellness Exam (including Well Woman Exam) within first 120 days of member's plan year	\$50	\$50	
	Cholesterol Screening			
	Colorectal Cancer Screening			
	Eye Exam			
	Dental Exam (KY ONLY)			
	Flu Shot			
	Mammogram			
	A1c lab test (shifted to preventive for '26)			
Condition Management	Condition Care			
	Diabetic foot exam			
	Diabetic lab test – LDL or Lipid			
	Diabetic lab tests – Microalbumin and eGFR			
	Building Healthy Families			
Wellness	Well-being Coach Telephonic – Weight			
	Well-being Coach Telephonic – Tobacco			
	Select a PCP in Sydney – NEW for 2026			
	Log Daily Nutrition (for 45 days/quarter) – NEW for 2026			
	Action Plans			
	Anthem Login			
	Connecting a Device			
	Emotional Wellbeing Resources program participation			
	EAP program outreach			
	Health Assessment	\$50	\$50	
Embedded Product(s)	Steps Tracking (\$2 for every 50,000 steps)			
	Update Contact Info			
	Well-being Coach Digital (\$4/milestone)			
	Well-being Coach Digital			
	Well-being Coach Lifestyle Management (LM)			

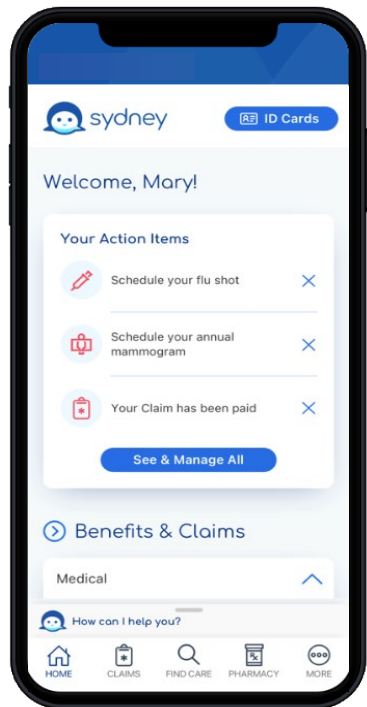
- Notes:**
- IND KY EP100, includes **extended 120-day** rule on Annual Wellness/Well Woman Exam for 2026
- Redemption Reminders:**
- Digital MasterCard, Amazon, Target, Uber, TJ Maxx, The Home Depot, Gap Options, Apple
 - ONLY Digital Mastercard can be converted to physical USPS sent card. (\$3 conversion fee per card)
 - Rewards earned should be redeemed before the end of the current plan year. Unused rewards are forfeited **six months** after the end of a member's plan year.

Tools and Resources



SydneySM Health

An award-winning, all-in-one member app that makes healthcare simple and personalized.



2022 Hermes
Creative Award



2022 Stevie
Award



2022 AVA Gold
Digital Award



2022 Webby
Honoree



The 2021 American
Business Awards®



2021 AVA Digital
Awards



2020 Corporate
Insights Award



2020 Mobile
Star Awards

The Big 3

1

The front door to care; a single point of access to benefits, virtual tools, and health and wellness resources.

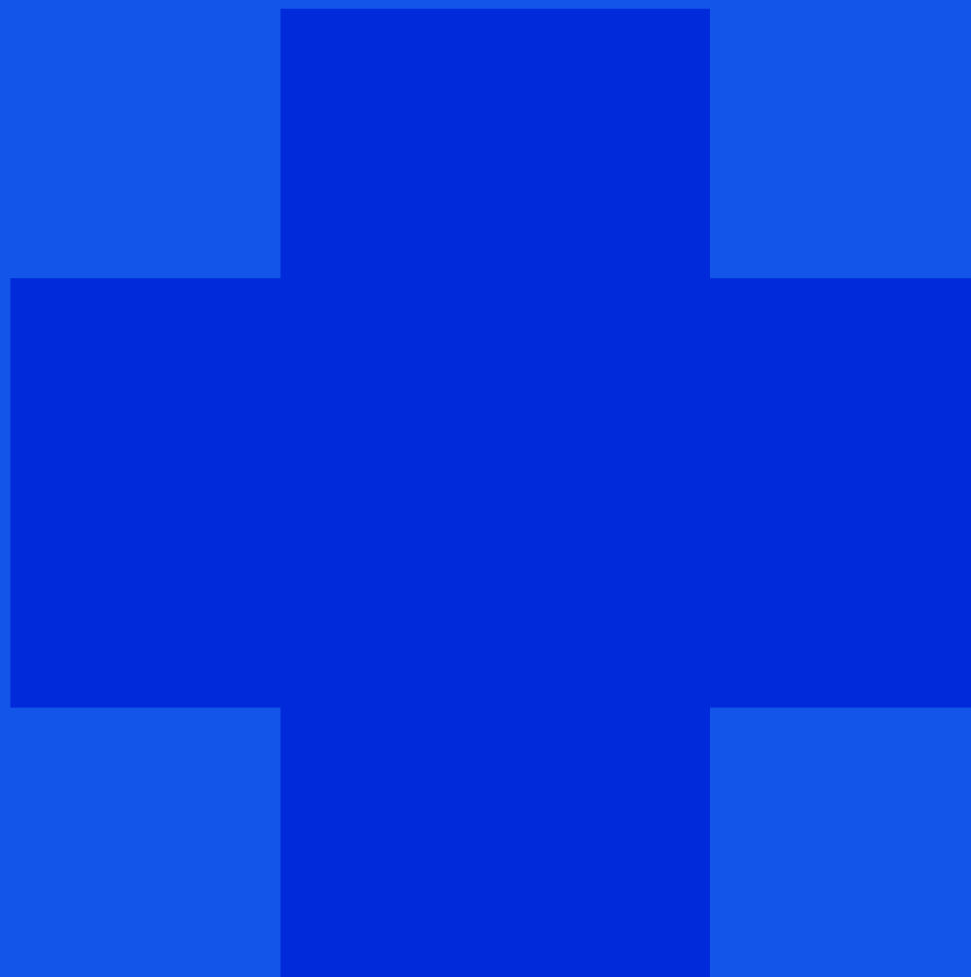
2

Provides a gateway to virtual and in-person care. Find and access the right care at the right time.

3

Uses AI-guided recommendations, one of the industry's largest data sets, and everyday well-being tools.

Points of Contact



Your Anthem Team



Kira Little
Manager Customer Care

Kira.little@anthem.com



Aaron Deglow
Business Development
Consultant

Aaron.deglow@anthem.com



Amanda Smith
Sales and Retention Executive

Amanda.smith1@anthem.com



Michelle Grant
Sales Account Executive

Michelle.grant@anthem.com



Cathy Huntsman
Sales Account Executive

Cathy.huntsman@anthem.com



Amy Wertz
Sales and Retention Executive

Amy.wertz@anthem.com

Thank You for Your
Partnership!





Passport by Molina

QHP ISSUER PRESENTATIONS

2026 Open Enrollment

Agents and kynectors Presentation



2026 Open Enrollment Period



November 1, 2025 – January
15, 2026

Magellan
COMPLETE CARE



Molina: Because everyone deserves health care that helps them feel their best



Molina Healthcare, Inc. is a **FORTUNE 500** company, currently ranked **125**. The organization provides managed health care services under the Medicaid and Medicare programs and state insurance marketplaces.

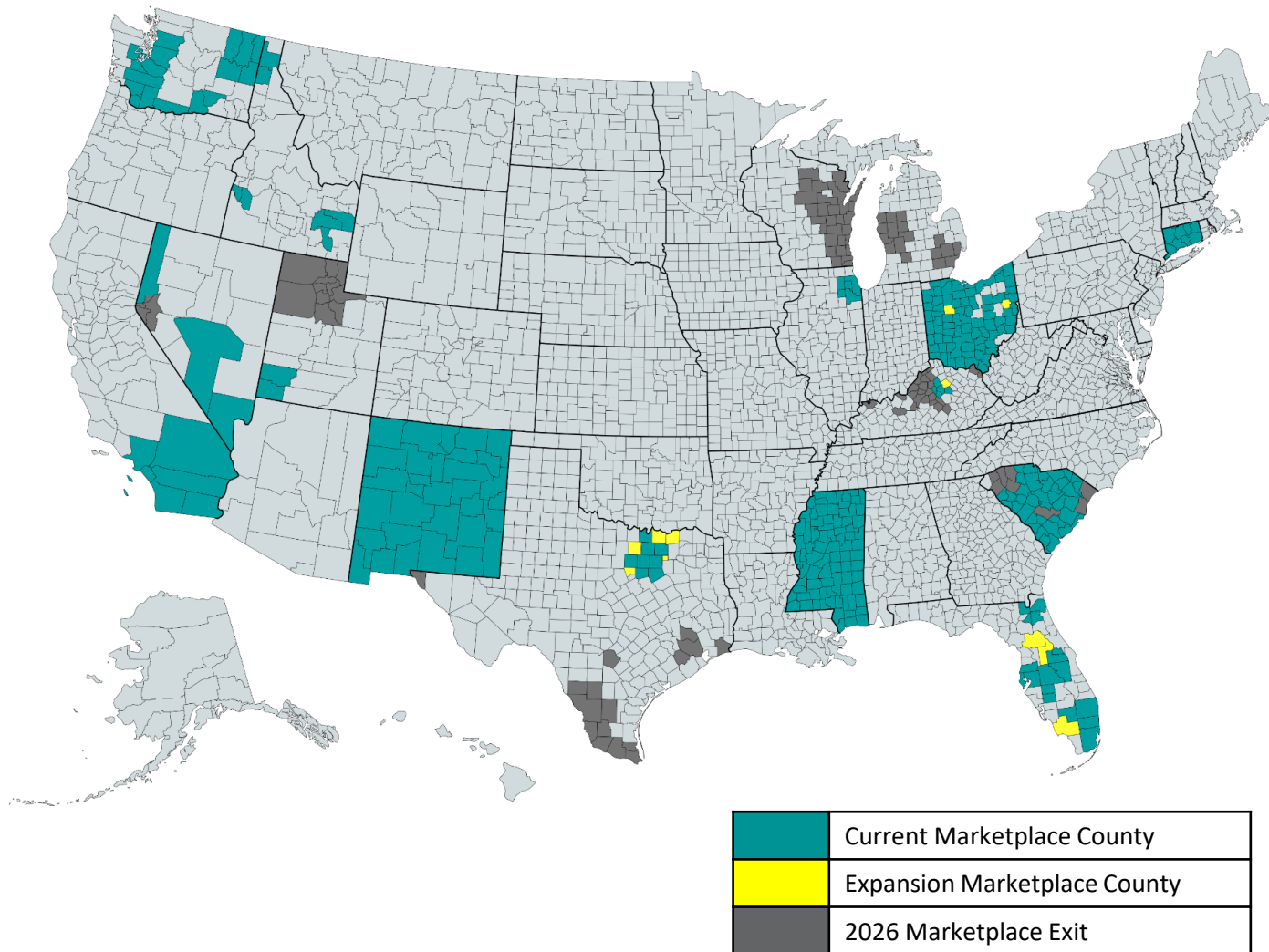


Vision: We envision a world where effective medical care is available to every person, no matter the impact of social determinants of health on their lives. We will distinguish ourselves as the low cost, most effective and reliable health plan delivering government-sponsored care.



Mission: To erase inequities in the way different populations are treated and served. To improve the health and lives of our members by delivering high-quality health care and to protect their health now and as they age, with a portfolio of solutions for every stage of their lives.

2026 Marketplace Service Area

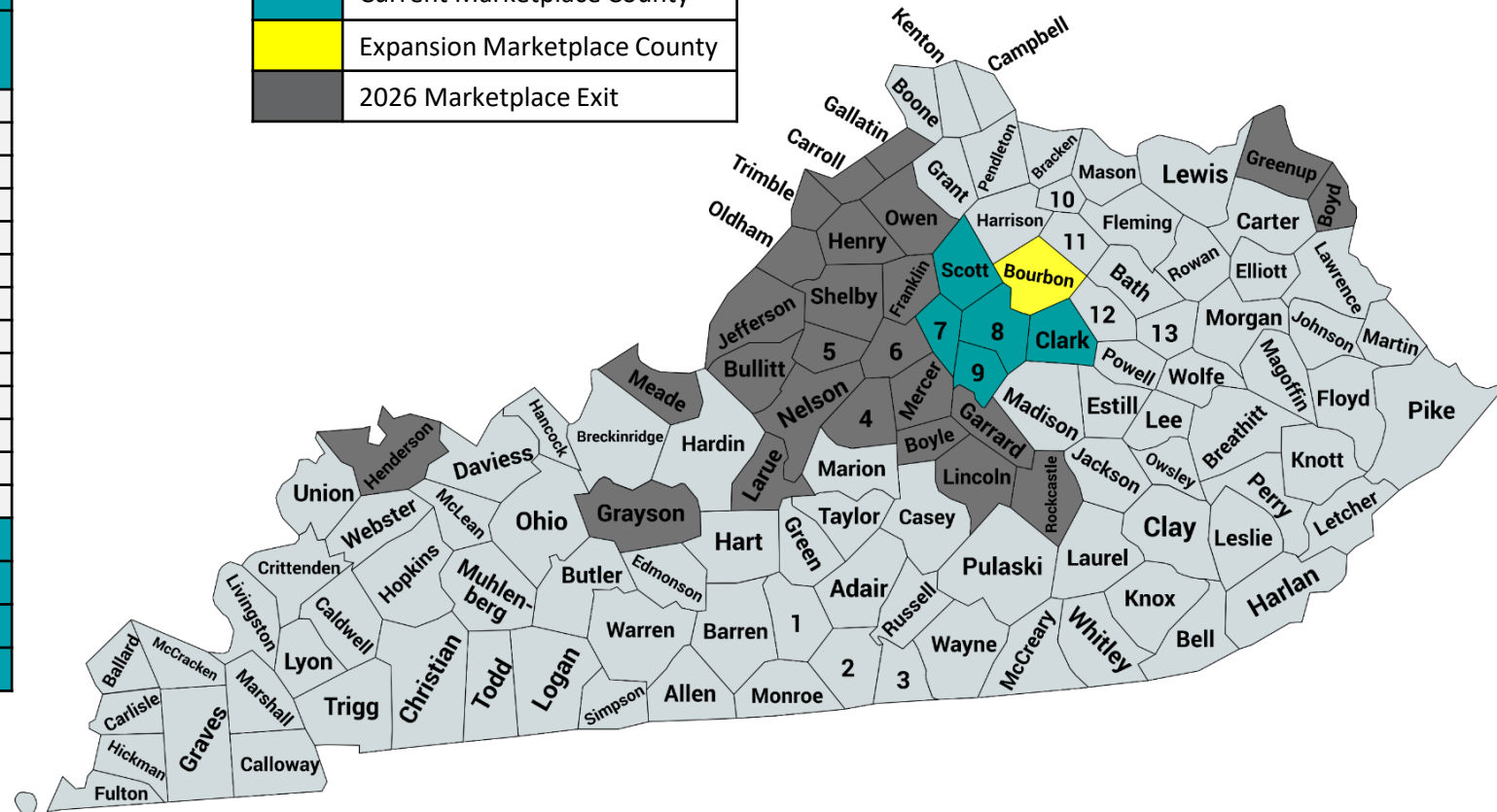


State	Total 2025 Counties	Projected 2026 Expansion	Projected 2026 Exits	Total 2026 Projected Counties
CA	6	N/A	N/A	6
CT	8	N/A	N/A	8
FL	17	3	N/A	20
ID	7	N/A	N/A	7
IL	5	N/A	N/A	5
KY	30	1	25	6
MI	17	N/A	17	0
MS	82	N/A	N/A	82
NM	33	N/A	N/A	33
NV	7	N/A	4	3
OH	78	2	N/A	80
SC	45	N/A	8	37
TX	24	5	16	13
UT	13	N/A	11	2
WA	18	N/A	N/A	18
WI	29	N/A	29	0
Total	419	11	110	320

Kentucky – 2026 Service Area

2026 Counties			
Current Footprint	2026 Expansion	2026 Exit	
Clark	Bourbon	Anderson	Larue
Fayette		Boyd	Lincoln
Jessamine		Boyle	Meade
Scott		Bullitt	Mercer
Woodford		Carroll	Nelson
		Franklin	Oldham
		Gallatin	Owen
		Garrard	Rockcastle
		Grayson	Shelby
		Greenup	Spencer
		Henderson	Trimble
		Henry	Washington
	Jefferson		
Current Total: 30			
2026 Expansion: 1			
2026 County Exits: 25			
Total: 6			

	Current Marketplace County
	Expansion Marketplace County
	2026 Marketplace Exit



- 1 Metcalfe
- 2 Cumberland
- 3 Clinton
- 4 Washington
- 5 Spencer
- 6 Anderson
- 7 Woodford
- 8 Fayette
- 9 Jessamine
- 10 Robertson
- 11 Nicholas
- 12 Montgomery
- 13 Meniffee

The image features a solid teal background. In the center, there are several overlapping rounded rectangular shapes in different shades of teal and light blue. The text "Benefits Information" is written in a bold, white, sans-serif font, centered within the overlapping shapes.

Benefits Information

Passport Marketplace Benefits At A Glance - Kentucky

Connect with a local agent or learn more at ChoosePassport.com.

[Agent_Name] [(XXX) XXX-XXXX]



Included in your plan at NO additional cost!



Teladoc Virtual Care
Visits 24/7/365



Annual Wellness
Visit - Adults



Routine Preventive
Screenings -
Children & Adults



Routine Vision Exams
and Eyewear -
Children (Ages 0-18)



Preventive Prescription
Drugs



24-Hour Nurse
Advice Line

Adult Vision & Dental Services
available with select plan options!

	Passport Silver Core 94	Passport Silver Core 87	Passport Silver Core 73	Passport Silver Core 70	Passport Silver Saver 94 with Four Free PCP Visits	Passport Silver Saver 87 with Four Free PCP Visits	Passport Silver Saver 73 with Four Free PCP Visits	Passport Silver Saver 70 with Four Free PCP Visits
BENEFITS AND COST SHARE HIGHLIGHTS								
Deductible (Ind/Fam)	\$0 / \$0	\$850 / \$1,700	\$3,500 / \$7,000	\$6,000 / \$12,000	\$190 / \$380	\$1,425 / \$2,850	\$6,500 / \$13,000	\$7,000 / \$14,000
Drug Deductible (Ind/Fam)	\$0 / \$0	Comb. w/Med	Comb. w/Med	Comb. w/Med	Comb. w/Med	Comb. w/Med	Comb. w/Med	Comb. w/Med
Out of Pocket Max (Ind/Fam)	\$2,000 / \$4,000	\$3,195 / \$6,390	\$7,685 / \$15,370	\$8,990 / \$17,980	\$2,000 / \$4,000	\$3,350 / \$6,700	\$8,100 / \$16,200	\$10,150 / \$20,300
Emergency Room Facility	25%	30% after ded	40% after ded	40% after ded	15% after ded	20% after ded	20% after ded	20% after ded
Urgent Care Services	\$5	\$25	\$55	\$60	\$6	\$13	\$55	\$60

** Denotes no charge for the first 4 non-preventive office visits for any combination of the indicated visit types. \$ Mail-order is available for non-specialty drugs marked "MAIL" on the formulary. For mail-order Rx, a 90-day supply is provided at three times (3x) the 30-day retail cost-sharing amount.

**SERVICES WITHOUT
ANY DEDUCTIBLE**

Passport Marketplace Benefits At A Glance - Kentucky



	Passport Silver Core 94	Passport Silver Core 87	Passport Silver Core 73	Passport Silver Core 70	Passport Silver Saver 94 with Four Free PCP Visits	Passport Silver Saver 87 with Four Free PCP Visits	Passport Silver Saver 73 with Four Free PCP Visits	Passport Silver Saver 70 with Four Free PCP Visits
INPATIENT SERVICES								
Inpatient Facility Fee <i>*Professional Fees May Apply</i>	25%	30% after ded	40% after ded	40% after ded	15% after ded	20% after ded	20% after ded	20% after ded
OUTPATIENT PROFESSIONAL OFFICE VISITS SERVICES								
Primary Care	\$0	\$8	\$30	\$35	\$3**	\$10**	\$35**	\$40**
Specialty Care	\$10	\$30	\$60	\$60	\$6	\$30	\$60	\$62.50
Rehabilitative and Habilitative Services	\$0	\$8	\$30	\$35	\$3	\$10	\$35	\$40
Mental / Behavioral Health Services / Substance Use Disorder Services	\$0	\$8	\$30	\$35	\$3**	\$10**	\$35**	\$40**
OUTPATIENT HOSPITAL FACILITY SERVICES								
Outpatient Facility Fee	25%	30% after ded	40% after ded	40% after ded	15% after ded	20% after ded	20% after ded	20% after ded
Outpatient Professional Fee	25%	30% after ded	40% after ded	40% after ded	15% after ded	20% after ded	20% after ded	20% after ded
Advanced Imaging and Specialized Scanning Services	25%	30% after ded	40% after ded	40% after ded	15% after ded	20% after ded	20% after ded	20% after ded
Routine X- Ray and Diagnostic Services	\$30	\$75	\$95	\$95	15% after ded	20% after ded	20% after ded	20% after ded
Laboratory Tests	\$10	\$35	\$60	\$85	15% after ded	20% after ded	20% after ded	20% after ded

** Denotes no charge for the first 4 non-preventive office visits for any combination of the indicated visit types. § Mail-order is available for non-specialty drugs marked "MAIL" on the formulary. For mail-order Rx, a 90-day supply is provided at three times (3x) the 30-day retail cost-sharing amount.

SERVICES WITHOUT ANY DEDUCTIBLE

Passport Marketplace Benefits At A Glance - Kentucky



	Passport Silver Core 94	Passport Silver Core 87	Passport Silver Core 73	Passport Silver Core 70	Passport Silver Saver 94 with Four Free PCP Visits	Passport Silver Saver 87 with Four Free PCP Visits	Passport Silver Saver 73 with Four Free PCP Visits	Passport Silver Saver 70 with Four Free PCP Visits
PRESCRIPTION DRUGS[§]								
Preventive Drugs	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge
Preferred Generic Drugs	\$0	\$5	\$15	\$15	\$3	\$5	\$5	\$5
Preferred Brand Drugs	\$30	\$65	\$75 after ded	\$75 after ded	\$20	\$50	\$100	\$100
Non-Preferred Drugs	30%	30% after ded	40% after ded	50% after ded	15% after ded	20% after ded	20% after ded	20% after ded
Specialty Drugs	30%	30% after ded	40% after ded	50% after ded	20% after ded	20% after ded	20% after ded	20% after ded

** Denotes no charge for the first 4 non-preventive office visits for any combination of the indicated visit types. § Mail-order is available for non-specialty drugs marked "MAIL" on the formulary. For mail-order Rx, a 90-day supply is provided at three times (3x) the 30-day retail cost-sharing amount.

**SERVICES WITHOUT
ANY DEDUCTIBLE**

Passport Marketplace Benefits At A Glance - Kentucky



Passport Gold Core 1640	
BENEFITS AND COST SHARE HIGHLIGHTS	
Deductible (Ind/Fam)	\$1,640 / \$3,280
Drug Deductible (Ind/Fam)	Comb. w/Med
Out of Pocket Max (Ind/Fam)	\$8,100 / \$16,200
Emergency Room Facility	25% after ded
Urgent Care Services	\$40
INPATIENT SERVICES	
Inpatient Facility Fee <i>*Professional Fees May Apply</i>	25% after ded
OUTPATIENT PROFESSIONAL OFFICE VISITS SERVICES	
Primary Care	\$25
Specialty Care	\$55
Rehabilitative and Habilitative Services	\$25
Mental / Behavioral Health Services / Substance Use Disorder Services	\$25

** Denotes no charge for the first 4 non-preventive office visits for any combination of the indicated visit types. § Mail-order is available for non-specialty drugs marked "MAIL" on the formulary. For mail-order Rx, a 90-day supply is provided at three times (3x) the 30-day retail cost-sharing amount.

**SERVICES WITHOUT
ANY DEDUCTIBLE**

Passport Marketplace Benefits At A Glance - Kentucky



Passport Gold Core 1640	
OUTPATIENT HOSPITAL FACILITY SERVICES	
Outpatient Facility Fee	25% after ded
Outpatient Professional Fee	25% after ded
Advanced Imaging and Specialized Scanning Services	25% after ded
Routine X- Ray and Diagnostic Services	25% after ded
Laboratory Tests	\$25
PRESCRIPTION DRUGS[§]	
Preventive Drugs	No Charge
Preferred Generic Drugs	\$15
Preferred Brand Drugs	\$50 after ded
Non-Preferred Drugs	30% after ded
Specialty Drugs	40% after ded

** Denotes no charge for the first 4 non-preventive office visits for any combination of the indicated visit types. § Mail-order is available for non-specialty drugs marked "MAIL" on the formulary. For mail-order Rx, a 90-day supply is provided at three times (3x) the 30-day retail cost-sharing amount.

**SERVICES WITHOUT
ANY DEDUCTIBLE**

New Embedded Adult Dental Benefits – Now Available in Kentucky

Available on Molina Silver Core and Molina Gold Core 1640 plans



- **New for 2025:** Members can now select medical plans with **embedded routine adult dental services**—no separate dental plan required!
- **Administered by Delta Dental**, providing access to a **strong national network** of dental providers.
- Covered services include:
 - **Preventive care** (e.g., cleanings, exams)
 - **Diagnostic services** (e.g., X-rays)
 - **Major services** (e.g., root canals)
- **Annual benefit maximum: \$1,000 per policy year**
- **Note:** Pediatric dental services are not included.
- **A seamless way to enhance member experience and deliver more comprehensive care—driving satisfaction and retention.**

Adult Dental Services (for Members age 19 and older)		At Participating Providers, Members Pay
All dental services are subjected to an annual maximum of \$1,000		
Diagnostic & Preventive (Limited to 1 every 6 months)		No Charge
Basic Dental Services		50% Coinsurance
Major Dental Services (Available after 6 consecutive months of enrollment)		50% Coinsurance
Orthodontics Medically necessary orthodontics and accidental dental are covered under Medical benefits.		Not Covered

Adult Vision Plan

Available for adults on Molina Silver Core and Molina Gold Core 1640 plans



Adult Routine Vision Services (for Members aged 19 and older)

Comprehensive Vision Exam

(Limited to 1 each calendar year)

Routine Retinal Screening

Prescription Glasses

Frames



Lenses

Limited to 1 pair every calendar year (up to \$150 allowance).

Glass or plastic single vision, lined bifocal, lined trifocal or lenticular lenses

Prescription Contact Lenses

In lieu of prescription glasses, materials and services are limited to 1 pair of contact lenses up to \$150 every calendar year.

Medically necessary contact lenses for specified medical conditions require Prior Authorization.

Vision benefits included for children through age 18, and available for adults who purchase plans with adult vision benefits.

Go to <https://www.vsp.com/advantage/advantage> to find a list of eye doctors or call Vision Service Plan (VSP) at (844) 292-4903.

To find an In-Network Provider go to www.vsp.com/advantage/advantage



Member Resources

Member Resources - Important Member Service Numbers

State	Toll Free Number	State	Toll Free Number
California	(888) 585-2150	Nevada	(833) 671-0051
Connecticut	(800) 251-7722	New Mexico	(888) 295-7651
Florida	(888) 560-5716	Ohio	(888) 296-7677
Idaho	(833) 657-1981	South Carolina	(855) 885-3176
Illinois	(833) 644-1623	Texas	(888) 560-2025
Kentucky	(833) 644-1621	Utah	(888) 858-3973
Michigan	(888) 560-4087	Washington	(888) 858-3492
Mississippi	(866) 472-9484	Wisconsin	(888) 560-2043

Member Rewards Program

Molina Healthy Rewards



Molina Healthy Rewards:

- Recognizes and rewards members who are taking steps towards better health.
- Contains interactive programming to help manage your health and wellness.
- Offers a \$200 wellness incentive program. (Except CT and WA \$100. CA up to \$150)
- Provides a suite of health tools and programs on topics like:

Molina is proud to offer our wellness program called Molina Healthy Rewards.



Smoking cessation



Diabetes management



Managing depression



High blood pressure



Asthma management

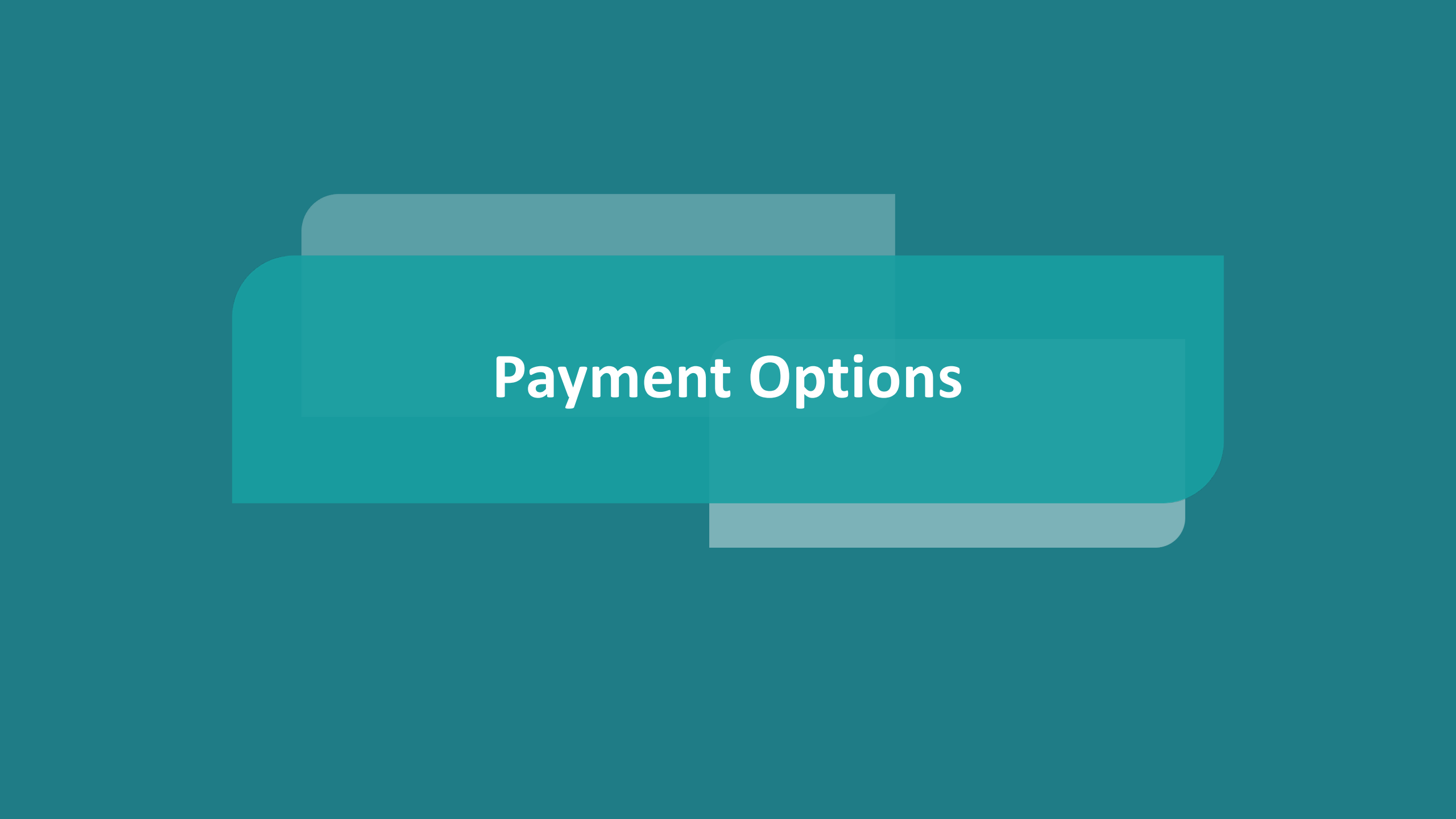


**Healthy living video library -
exercise, diet and nutrition**

Members can earn a \$200 gift card! Molina Healthy Rewards offers a \$200 gift card to all eligible members (18+) on their health plan who complete the steps below (exception: \$100 for CT and WA members. Up to \$150 for CA members).

- Log in to their My Molina portal
- Complete the Molina Healthy Rewards Molina Wellness Assessment
- Complete their annual physical - Visit your primary care provider (PCP) for their annual Wellness Examination at no cost to or request a covered In-Home Assessment from Care Connections.

*Rewards and program benefits are available for redemption only while the Subscriber or eligible Dependent is currently enrolled with a Molina Marketplace Health Plan. Molina Healthy Rewards is a voluntary program. It is available to all Subscribers and dependents 18 years or older at no cost.

The image features a solid teal background. In the center, there are several overlapping rounded rectangular shapes in different shades of teal. The most prominent shape is a medium teal rectangle with rounded corners. Overlapping its top edge is a lighter teal rectangle. Overlapping its bottom edge is a darker teal rectangle. The text "Payment Options" is centered within the medium teal rectangle in a white, bold, sans-serif font.

Payment Options

Premium Payment Methods



Method	Auto Pay	Online Bill Payment	By Phone	By Mail	Money Gram	Check Free Pay
How to	It's fast, easy and convenient! Sign up for AutoPay through your Mymolina.com account and never miss a payment. it's stress - free!	Log into your bank's website and pay Molina Healthcare through the "Bill Pay" option. Use your subscriber ID as the account number	We accept Visa, MasterCard, Discover or Electronic Check. Kentucky 888-466-4477 . Please allow 3 business day for the payment to post to your account	Include the payment coupon provided on the invoice notice. Allow 10-15 days for mailing and processing. Send Payment to: Molina Healthcare PO Box 75159 Chicago, Illinois 60675-5156	MoneyGram accepts cash payments. Allow 3 business days for the payment to post to your account. To find a location, Call (800) 666-3947 or visit MoneyGram.com	CheckFreePay accepts in-person cash payment option that offers members a secure and convenient way to pay their premiums at any authorized payment location. To find a location, Call (866) 866-4513 or visit checkfreepay.com

One-Time Payment Option- Bill Matrix

- One time payment option that offers members a secure and convenient way to pay their premiums online.
- [Webpayments.billmatrix.com/MHCInitialPayGuest](#)



Enrollment and Premium Billing Numbers

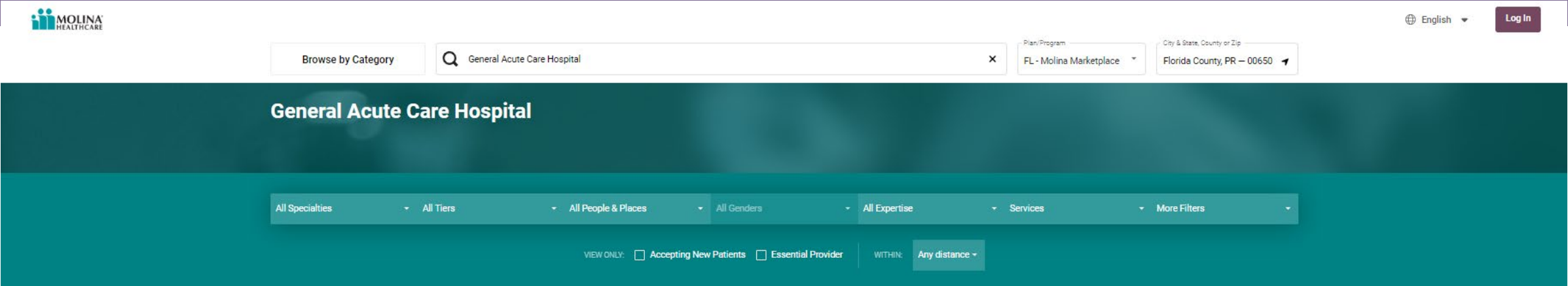
State	Toll Free Number	State	Toll Free Number
California	800-772-5327	Nevada	877-669-2545
Connecticut	800-723-2986	New Mexico	800-253-0217
Florida	800-375-7421	Ohio	800-339-8459
Idaho	877-672-1646	South Carolina	800-400-7957
Illinois	877-473-6017	Texas	844-359-0201
Kentucky	888-466-4477	Utah	800-573-6844
Michigan	800-503-6593	Washington	800-525-4554
Mississippi	800-295-3859	Wisconsin	844-278-1130

The background is a solid teal color. Overlaid on this are several rounded rectangular shapes in different shades of teal and light blue, creating a layered effect. The main title is centered within one of these shapes.

How to Find an In-Network Provider

Provider Online Directory

Seamless, user-friendly digital experience for members and brokers available via MolinaMarketplace.com
Select 'Find a Doctor' from the Member drop-down list



Members can now search, view, and complete their own PCP Self-Selection via the My Molina Member Portal or New Provider Online Directory for primary subscribers

Molina Provider Network



Marketplace In-Network Hospitals

Rockcastle Regional Hospital And Respiratory Care Ctr

University Of Louisville

Kings Daughters Medical Center – Ohio

Physicians Medical Center LLC

Big South Fork Medical Center

Methodist Hospital

Perry County Memorial Hospital

TJ Samson Hospital

Emphraim Mcdowell / Fort Logan

Casey County Hospital

Wayne County Hospital

Russell County Hospital

Pineville Community Health Center

Crittenden Community Hospital

Select Specialty Hospital

Cornerstone Hospital

Continuecare Hospital

The image features a solid teal background. In the center, there is a large, rounded rectangular shape in a slightly darker shade of teal. Overlapping this central shape are several other rounded rectangular shapes in lighter shades of teal, creating a layered effect. The word "Resources" is written in a bold, white, sans-serif font, centered within the main teal shape.

Resources

Broker Services Unit



Main Number: 1-855-885-3179



Hours: 6:00 AM – 6:00 PM MT, Monday – Friday (MST)



Broker Portal: Account.EvolveNXT.com



Broker Services: MPBrokerSupport@MolinaHealthcare.com

- Member access to care issues, billing discrepancies, terminations in error

Broker Portal (Evolve)



Molina Marketing Store (YGS)





Kahassai Tafese

Broker Channel Manager

Phone: 614-623-8267

Email: kahassai.tafese@molinahealthcare.com

Thank you!

Molina Provider Network



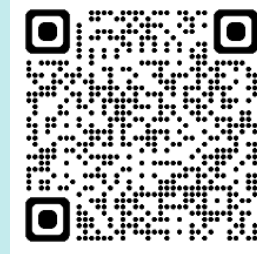
Broker Portal (Evolve)



Molina Marketplace



My Molina Mobile App



**Molina Marketing Store
(YGS)**



**Molina's ePortal
Member Self Services**





Anthem

VISION ISSUER PRESENTATIONS



Individual Vision Off Exchange



Individual Vision Plan Options



All Blue View Vision Plans include:

Coverage for yearly eye exams.

Add-ons, including factory scratch coating on eyeglass lenses, at no extra cost.

Discounts for other add-ons, including Transitions® lenses, premium progressive lenses, and premium antireflective coatings.

Value-added savings, including 15% to 40% off most extra pairs of glasses, contact lenses, lens treatments, specialized lenses, and various accessories — even after you've used all of your covered benefits.

Discounts through SpecialOffers@AnthemSM for LASIK and other products and services that promote health and well-being.

Members can choose from four plans:

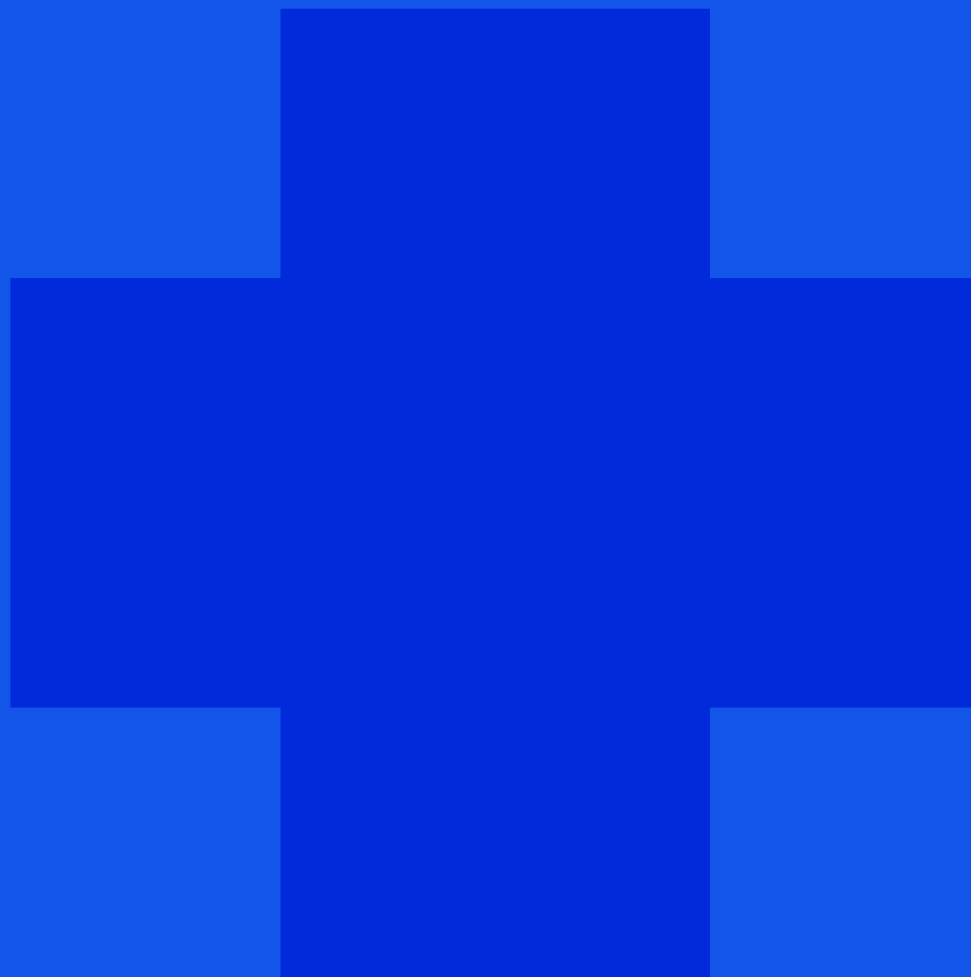
Blue View Vision Enhanced

Blue View Vision Plus

Blue View Vision Value

Blue View Vision Progressive Preferred

Points of Contact



Your Anthem Team



Kira Little
Manager Customer Care

Kira.little@anthem.com



Aaron Deglow
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Consultant

Aaron.deglow@anthem.com



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Sales and Retention Executive

Amanda.smith1@anthem.com



Michelle Grant
Sales Account Executive

Michelle.grant@anthem.com



Cathy Huntsman
Sales Account Executive

Cathy.huntsman@anthem.com

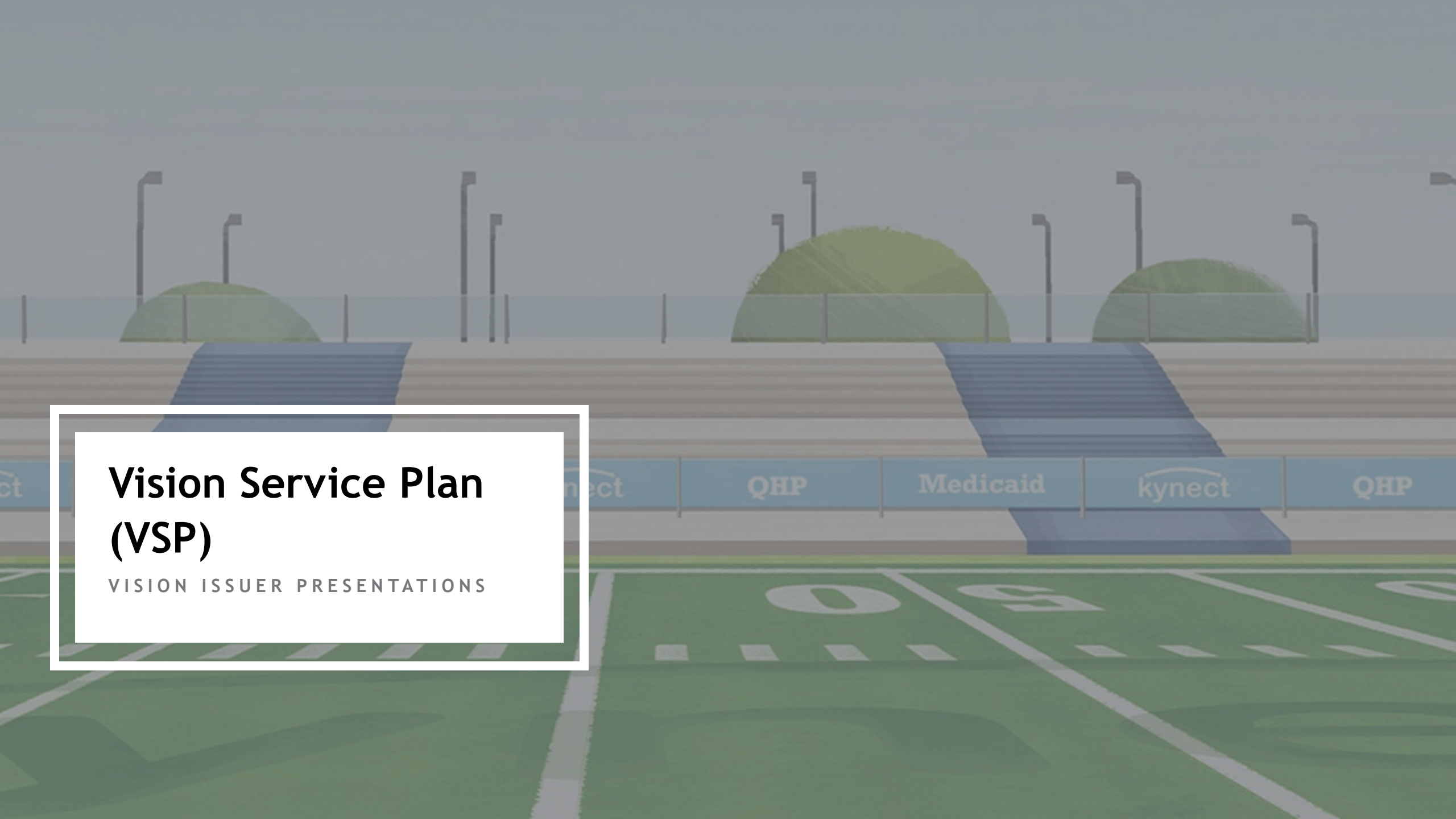


Amy Wertz
Sales and Retention Executive

Amy.wertz@anthem.com

Thank You for Your
Partnership!





Vision Service Plan (VSP)

VISION ISSUER PRESENTATIONS



VSP® Individual Vision Plans

<https://www.vspdirect.com/kentuckyexch/welcome>



Why VSP Individual Vision Plans?

12M

People in the U.S,
aged 40+ have a
visual impairment.*

93M

Americans are at high-risk for
serious vision loss, but only half
visited an eye doctor in the last year.*

Millions without employer-sponsored vision coverage

Adults on ACA don't have vision coverage



4M

young adults age out of their parent's plan every year.¹



29M

employees work part-time jobs in the U.S.²



4M

Americans will turn 65 this year and every year through 2027³

Are you asking if your clients wear glasses or contacts?

An eye exam is the **only non-invasive** way to view blood vessels in the body, helping eye doctors detect signs of **over 270 health conditions.***

Some detectable health condition signs include: early signs of diabetes, some types of cancer, kidney disease, and hypertension – even without other symptoms.

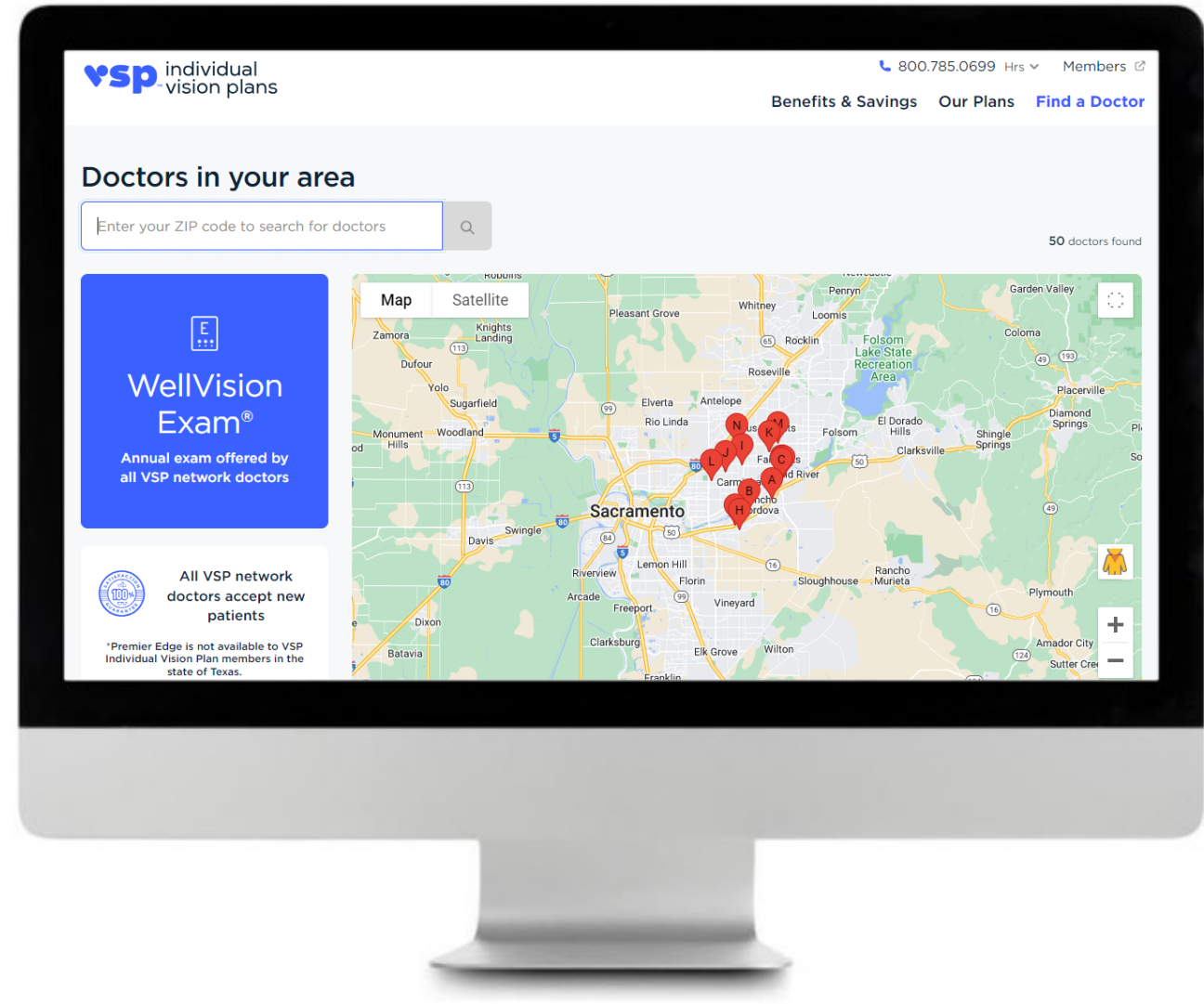
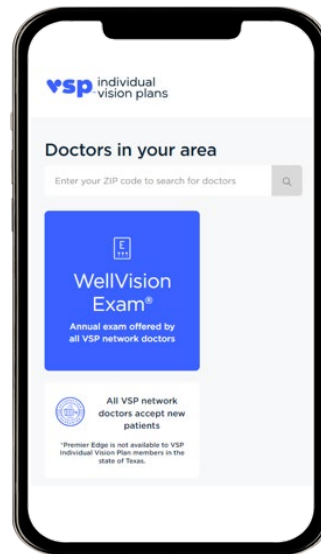
Powerful Preventative Care

Member Value - Finding an Eye Doctor Easily and Quickly

With our “Find a VSP Doctor” locator, easily find network doctors by ZIP code.

How to Find a Doctor:

- Search by ZIP code
- See full list of in-network doctors including information about hours, languages, and more



A Network That Continues to Grow

With more than 85 million members nationwide, VSP offers a robust network of VSP network doctors, access points, and retail options.



*Follow Your Heart –
Helping Members Use
their Benefits Wisely*

private
practice
doctors

96,000 independent
doctor access points
throughout the U.S.

Visionworks

- 750+ retail locations nationwide
- Easy scheduling
- Organized shopping experience
- Pricing made simple

NEW

**EYEMART
EXPRESS**

- 250 retail locations across 42 states
- Retail expansion in rural markets

eyeconic[®]
a vsp vision company

Online retailer that seamlessly integrates their VSP benefits and includes prescription, sunglasses and contact lenses

Solutions for Those Without Coverage



Savings on out-of-pocket costs when it matters most.



Affordable coverage consumers can buy on their own.



Flexibility to use their benefits at any point over their plan year.



Freedom to choose payment options that work with their budget.



No waiting period.

How to find VSP Vision

Small Business Health Options Program (SHOP)

The Small Business Health Options Program (SHOP) is for small employers who want to provide health and/or dental insurance to their employees -- affordably, flexibly, and conveniently.

[Learn More](#)

Vision Care

kynect offers access to vision coverage to Kentuckians through a partnership with insurance companies that offer vision benefits.

[Learn More](#)



VSP vision can be found on the kynect main website next to SHOP plans

Click Learn More box

VSP found under **Vision Care**

Click [VSP website](#) hotlink or go to the URL below to get to landing page for VSP vision

Vision Care

Adult Vision Coverage:

kynect offers access to vision coverage to Kentuckians through a partnership with insurance companies that offer vision benefits. Adults can enroll directly through an insurance company or through a vision plan. We recommend you review the plan benefits to find the best coverage for you and your family.

Vision plan enrollments are not directly through kynect health coverage, please see below to browse options and enroll in vision coverage. Individuals can enroll in vision plans at

Your Coverage Options

Vision Service Plan (VSP)

As a vision care member, you'll receive access to great eye doctors, quality eye wear, and affordability you deserve, all at low out-of-pocket costs. To browse and enroll in vision care, visit [VSP website](#)



<https://www.vspdirect.com/kentuckyexch/welcome>



Landing page

vsp individual
vision plans

kynect
health coverage
Together for a better Kentucky

844-641-6718 Hours ▾

Benefits & Savings FAQ Find A Doctor

Flexible coverage. Built especially for you.

- ✓ Multiple Plan Options.
- ✓ Flexible Payments.
- ✓ Large Doctors Network.
- ✓ No Waiting Periods.

GET STARTED:

ZIP

See Plans

Information you submit will be used in accordance
with our [terms of service](#).



<https://www.vspdirect.com/kentuckyexch/welcome>

Options and Rates

Kentucky Plan Information

Showing rates for:

1 Person

2 Person

Family

 [Compare VSP with our competition](#)

All plans include:

- ✓ Additional 20% savings on amount over your frame allowance.
- ✓ 20% savings on additional glasses or sunglasses.
- ✓ Up to 30% savings on lens enhancements not listed.
- ✓ Access to the largest doctor network.
- ✓ Laser vision correction discounts, [see details](#).

Standard

\$11.64/mo

Our most popular plan is for those who want to save on an eye exam and glasses. Members enjoy:

Low copays

Frame allowances

Discounts

Convenience- Use your plan at the eye doctor's office, retail locations, or online.

ENROLL

[View Plan Details](#) 

Premium

\$18.69/mo

+ \$1.50 [HVA membership - what's this?](#)

For those who want a higher frame or contact lens allowance, lower copays on lens enhancements and at the doctor's office:

\$200 frame or contact lens allowance

Exam only \$10

Basic Lenses only \$20

\$55 Progressive lens allowance (no-line multifocal)

ENROLL

[View Plan Details](#) 

Plan Details



12/12/12 Plans

VSP Individual Vision Plans provide coverage for:



VSP WellVision Exam®
Every 12 Months



New lenses
Every 12 Months



New frame
Every 12 Months

These plans keep our members seeing clearly all year long.

Standard Plan – All States*

Coverage with a VSP Network Doctor

Benefit	Description	Copay	Frequency
WellVision Exam®	Focuses on your eyes and overall wellness	\$15	Every 12 months
Prescription Glasses		\$25	(See frame and lenses)
Frame	\$170 featured frame brands allowance \$150 frame allowance 20% savings on the amount over your allowance	Included in Prescription Glasses	Every 12 months
Lenses	- Single vision, lined bifocal, and lined trifocal lenses - Impact-resistant lenses for dependent children	Included in Prescription Glasses	Every 12 months
Lens Enhancements	• Progressive lenses (standard, premium, or custom)	\$0-\$175	Every 12 months
	• Anti-glare	\$41-\$85	
	• Light-reactive lenses	\$75	
	• Impact-resistance lenses	\$35	
	• Scratch-resistant coating	\$17-\$33	
	• Tinted lenses	\$15-\$17	
	• UV protection	\$16	
Contacts (Instead of Glasses)	• Average savings of 30% on other lens enhancements		
	\$150 allowance for contacts and contact lens exam (fitting and evaluation) 15% savings on contact lens exam (fitting and evaluation)	\$0	Every 12 months

Premium Plan*

Coverage with a VSP Network Doctor			
Benefit	Description	Copay	Frequency
WellVision Exam®	Focuses on your eyes and overall wellness	\$10	Every 12 months
Prescription Glasses		\$20	(See frame and lenses)
Frame	\$220 featured frame brands allowance \$200 frame allowance 20% savings on the amount over your allowance	Included in Prescription Glasses	Every 12 months
Lenses	- Single vision, lined bifocal, and lined trifocal lenses - Impact-resistant lenses for dependent children	Included in Prescription Glasses	Every 12 months
Lens Enhancements	\$55 allowance for progressive lenses (standard to custom)	\$0-\$120	Every 12 months
	Anti-glare	\$41-\$85	
	Light-reactive lenses	\$75	
	Impact-resistant lenses	\$35	
	Scratch-resistant coating	\$17-\$33	
	Tinted lenses	\$15-\$17	
	UV protection	\$16	
Contacts (Instead of Glasses)	Average savings of 30% on other lens enhancements		
	\$200 allowance for contacts and contact lens exam (fitting and evaluation) 15% savings on contact lens exam (fitting and evaluation)	\$0	Every 12 months

Choosing Right-Fit Plans for a Variety of Needs



BASIC PLAN

Standard Plan

- Most popular, low-cost, no HVA fees
- Great for those looking to save as much as possible
- \$15 copay for WellVision Exam®
- \$25 copay for prescription glasses
- \$150 frame allowance, or \$150 contact lens allowance



HIGH PLAN

Premium Plan*

- Great for those who prefer a higher frame or contacts lens allowance
- \$10 copay for WellVision Exam®
- \$20 copay for prescription glasses
- \$200 frame allowance or \$200 contact lens allowance
- \$55 allowance for progressive lenses



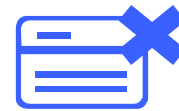
***Follow Your Heart –
Helping Members Use
their Benefits Wisely***



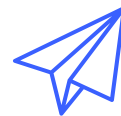


We Take Care of the Rest

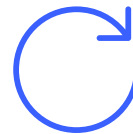
Once enrolled, we make it easy for members to access the eye care and eyewear they need.



No membership ID card needed to access care

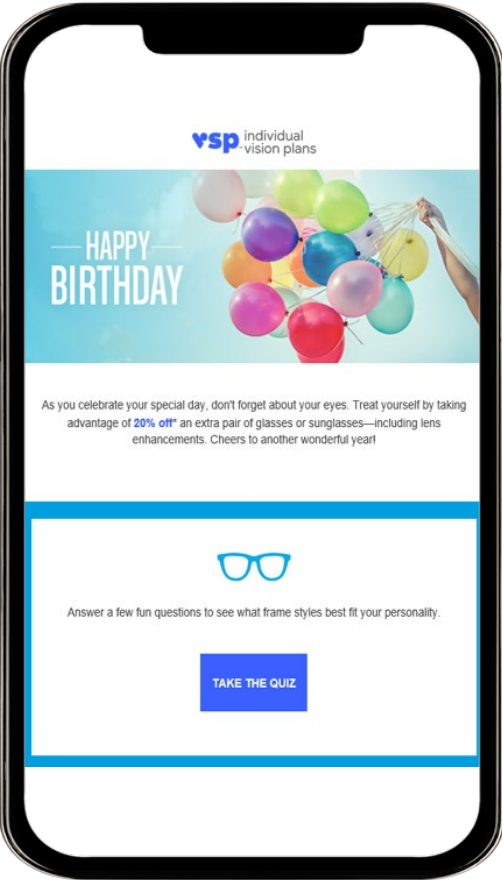


We take care of all onboarding and lifecycle communications



We handle all renewals

Member Communications



vsp individual vision plans

FIND A DOCTOR | OFFERS



4 Easy ways to maximize your vision benefits

Don't miss your chance to save more on eyewear that fits your lifestyle. As a VSP® member you have access to great eye doctors, eyewear, and extra savings when you go in-network.



Get an Extra \$20

More value with an Extra \$20* to spend on Featured Frames



Special Offers

Lens enhancements and contact rebates available at all VSP network doctor locations



Get more at a Premier Program location, including private practice doctors and Visionworks!

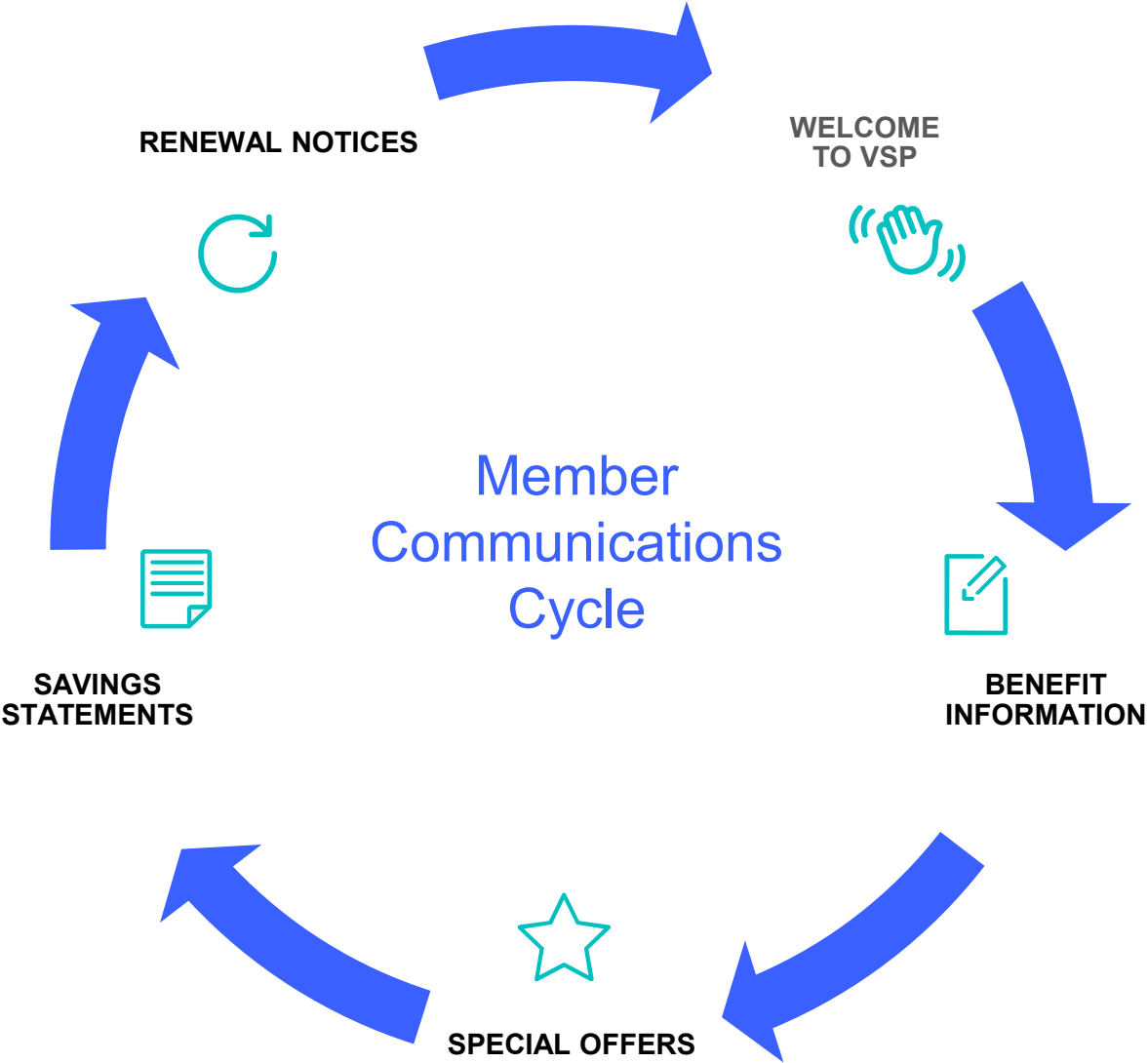


Get an Extra \$40

Maximize your benefits with an Extra \$40** to spend on Featured Frames

Pro Tip

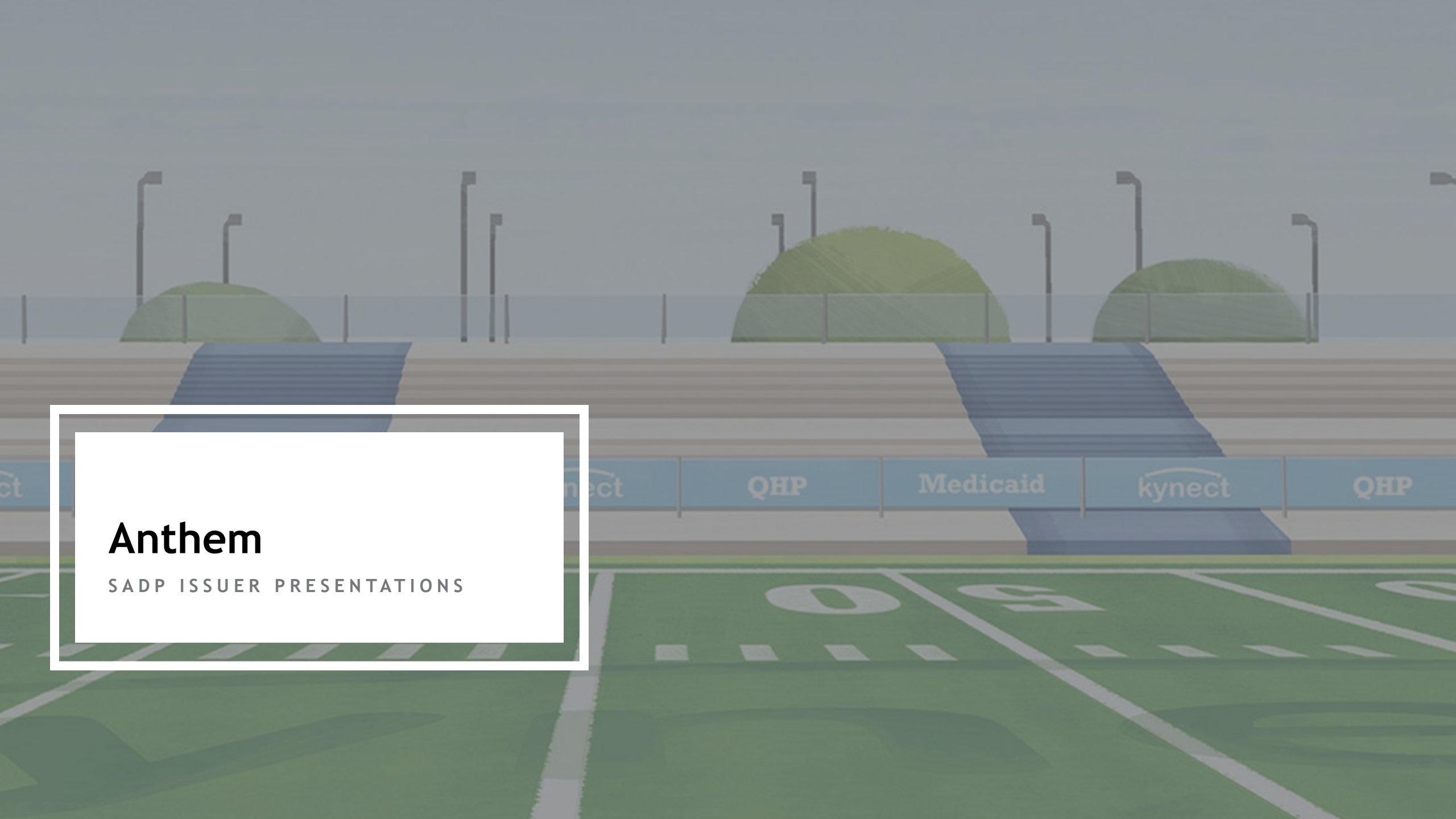
Save this email on your mobile device to take advantage of all the great offers available to you at your appointment.





Thank You

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VSP, VSP Choice Plan, WellVision Exam, Eyeconic, and eyeconic.com are registered trademarks; VSP Individual Vision Plans, VSP Premier Edge, and Otis & Piper are trademarks; and VSP Diabetic Eyecare Plus Program is a service mark of Vision Service Plan.
Flexon, Dragon, Pure, and Lenton & Rusby are registered trademarks, and Marchon NYC is a trademark of Marchon Eyewear, Inc. Altair is a registered trademark, and Sunlites and Genesis are trademarks of Altair Eyewear, Inc. Skaga is a registered trademark of Scandinavian Eyewear AB. All other brands or marks are the property of their respective owners. 126622-24-VC

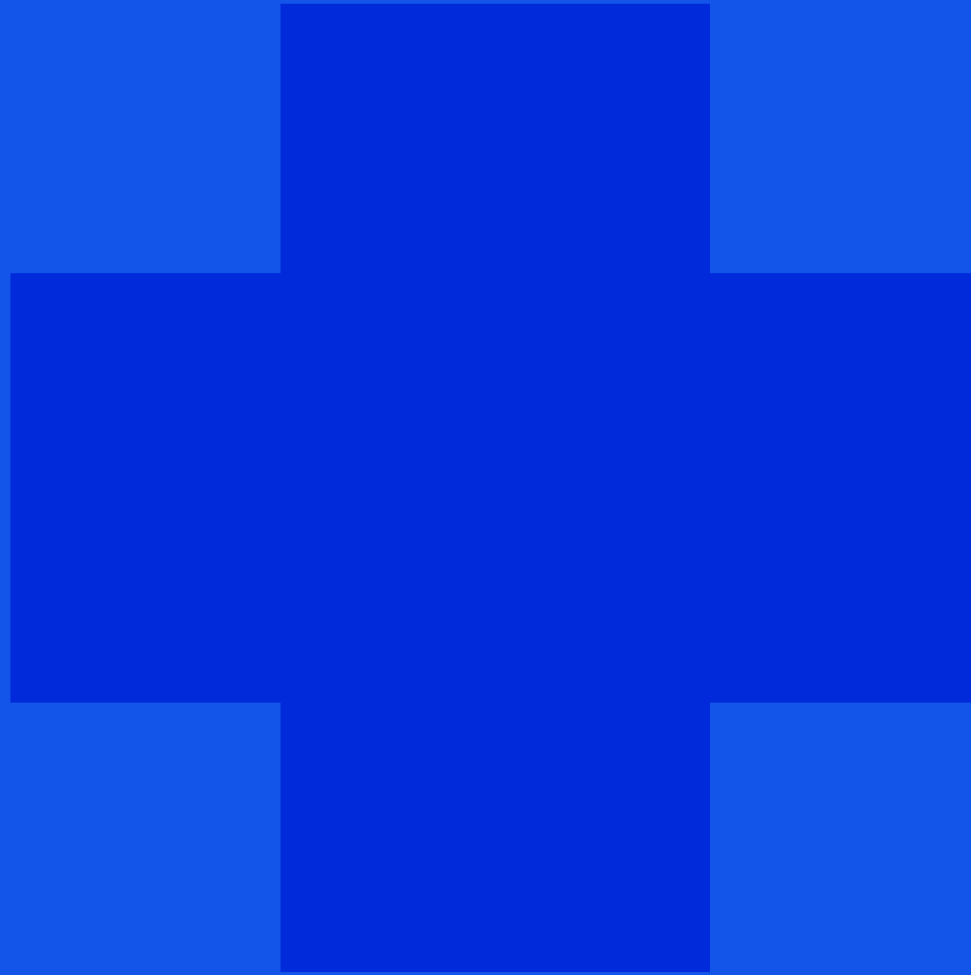


Anthem

SADP ISSUER PRESENTATIONS



Individual Dental



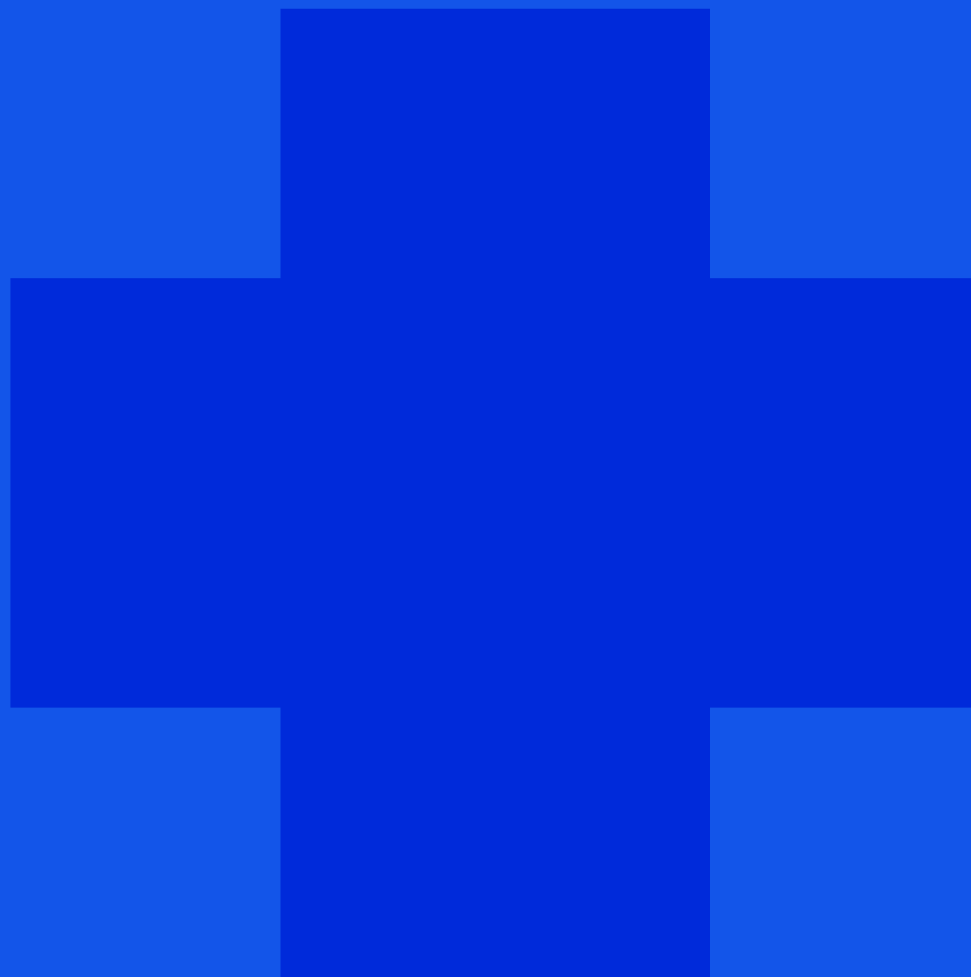
Individual Dental Plan Updates



Plan / Product	Benefit	2025	2026
Anthem Dental Family Value	Pediatric Maximum-out-of-Pocket:	\$375 Child / \$750 Family	\$450 Child / \$900 Family
	Pediatric Basic Services (INN):	40% coinsurance	50% coinsurance
Anthem Dental Family	Pediatric Maximum-out-of-Pocket:	\$375 Child / \$750 Family	\$450 Child / \$900 Family
	Pediatric Basic Services (INN):	40% coinsurance	50% coinsurance
Anthem Dental Family Enhanced	Pediatric Maximum-out-of-Pocket:	\$375 Child / \$750 Family	\$450 Child / \$900 Family
	Pediatric Deductible:	\$25 per person	\$50 per person
	Pediatric Endodontic/Periodontic/Oral Surgery (INN):	20% coinsurance	50% coinsurance
Anthem Dental Family Preventive	Pediatric Maximum-out-of-Pocket:	\$375 Child / \$750 Family	\$450 Child / \$900 Family
	Pediatric Basic Services (INN):	40% coinsurance	50% coinsurance

Pediatric Dental is being removed from all ACA plans.

Points of Contact



Your Anthem Team



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Business Development
Consultant

Aaron.deglow@anthem.com



Amanda Smith
Sales and Retention Executive

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Michelle Grant
Sales Account Executive

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Cathy Huntsman
Sales Account Executive

Cathy.huntsman@anthem.com

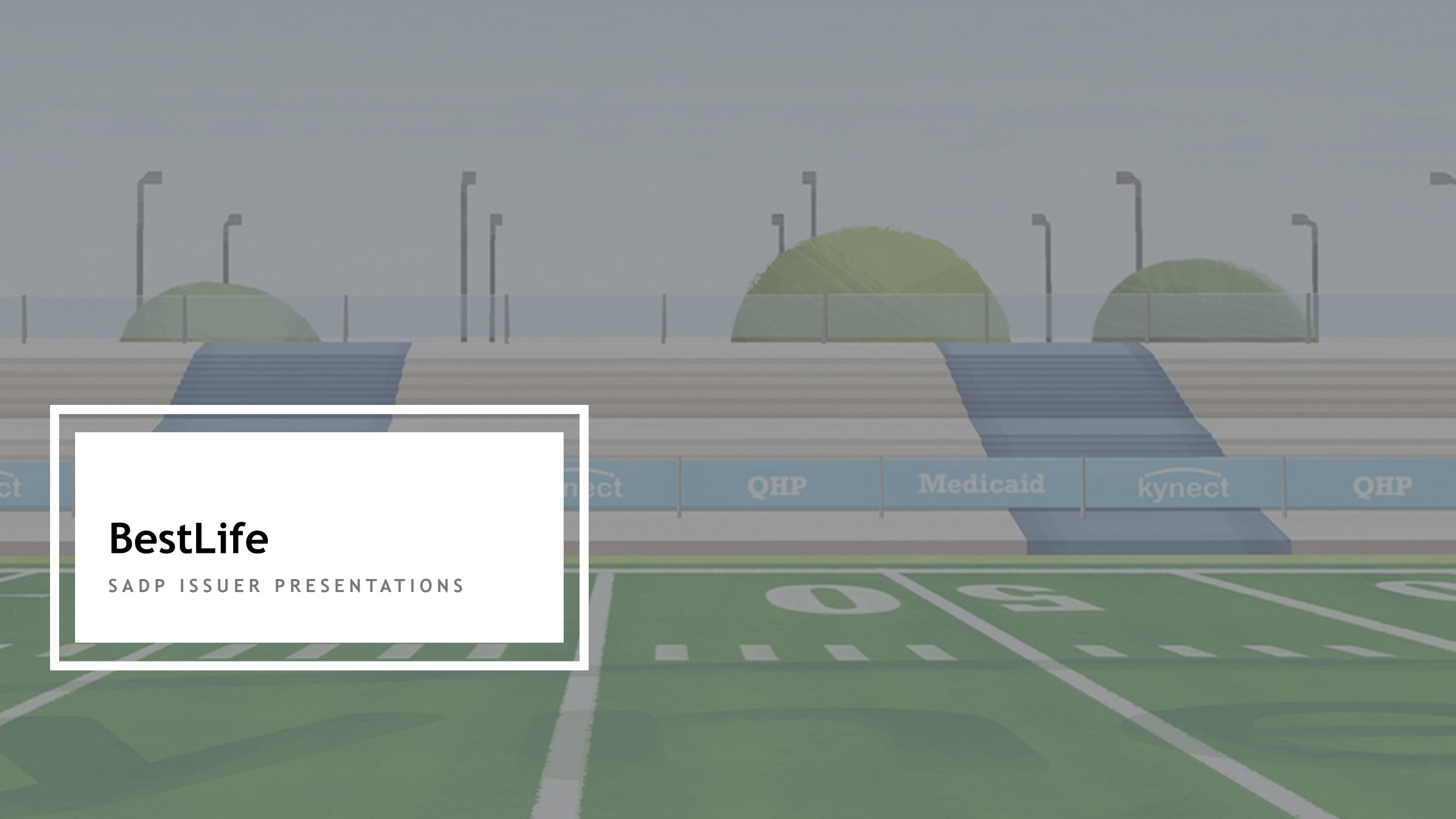


Amy Wertz
Sales and Retention Executive

Amy.wertz@anthem.com

Thank You for Your
Partnership!





BestLife

SADP ISSUER PRESENTATIONS



Products and Services Presentation
October 22, 2025

Jay Smith – Director, Claims and Customer Service

Agenda

- Overview of BEST Life and Health
- 2025 Changes
- Product Review
- PPO Network Review
- BEST Life Customer Service
- Claims Processing
- Q & A

Overview of BEST Life

- In business over 50 years
- Offering dental, life, vision and short-term disability products to employer groups
- Offering dental products to the Exchange Marketplaces
- In 32 states and District of Columbia
- Headquartered in Corona del Mar, California
- Customer Service and Claims departments located in Boise, Idaho area

2025 Changes/Continuation:

- 2025 - Accident benefit added to Supplemental plans
 - Superior Plan \$500
 - Preferred Plan \$300
 - Value Plan \$200
 - Basic Plan \$100
- 2025 - Vision discount offering
- 2026 - Essential Value Adult plan has increased annual maximum of \$1250 (from \$1000 in 2025)
- 2026 - Pediatric plan maximum out-of-pockets increased from 2025 – see Product Review slide.

Product Review

Adult	BEST Life Superior		BEST Life Preferred		BEST Life Essential Value		BEST Life Essential Basic	
Benefit	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network
Annual Maximum	\$1,500		Year 1: \$1,500 Year 2: \$1,600 Year 3: \$1,700		\$1,250		\$1,000	
Annual Deductible	\$50 Individual / \$150 Family		\$50 Individual / \$150 Family		\$50 Individual / \$150 Family		\$50/\$150	\$75/\$225
Basic Services	0%	20%	0%	20%	0%	30%	0%	30%
Intermediate Services	10%	30%	30%	50% (WP)	50% (WP)	70% (WP)	50% (WP)	70% (WP)
Major Services	50% (WP)	70% (WP)	60% (WP)	80% (WP)	70% (WP)	80% (WP)	Not Covered	Not Covered

Pediatric	BEST Life Superior		BEST Life Preferred		BEST Life Essential Value		BEST Life Essential Basic	
Benefit	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network
Out of Pocket Maximum	\$450/\$900	\$900/\$1800	\$450/\$900	\$900/\$1800	\$450/\$900	\$900/\$1800	\$450/\$900	\$900/\$1800
Annual Deductible	\$75		\$75		\$75	\$100	\$75	\$100
Basic Services	0% Ded Wvd	20%	0% Ded Wvd	20%	0%	20%	0%	20%
Intermediate Services	30%	40%	30%	40%	40%	70%	40%	60%
Major Services	50%	70%	50%	70%	50%	70%	50%	70%
Orthodontic Services	50%		50%		50%	70%	50%	70%

PPO Network Review

- Two national PPO networks available to members
 - Dentemax: 263,000 dental locations nationwide
 - Connection Dental/PPO USA: 268,000 dental locations nationwide
- A member can go to any dentist they choose
- Selecting a network provider lowers out of pocket costs

Customer Service

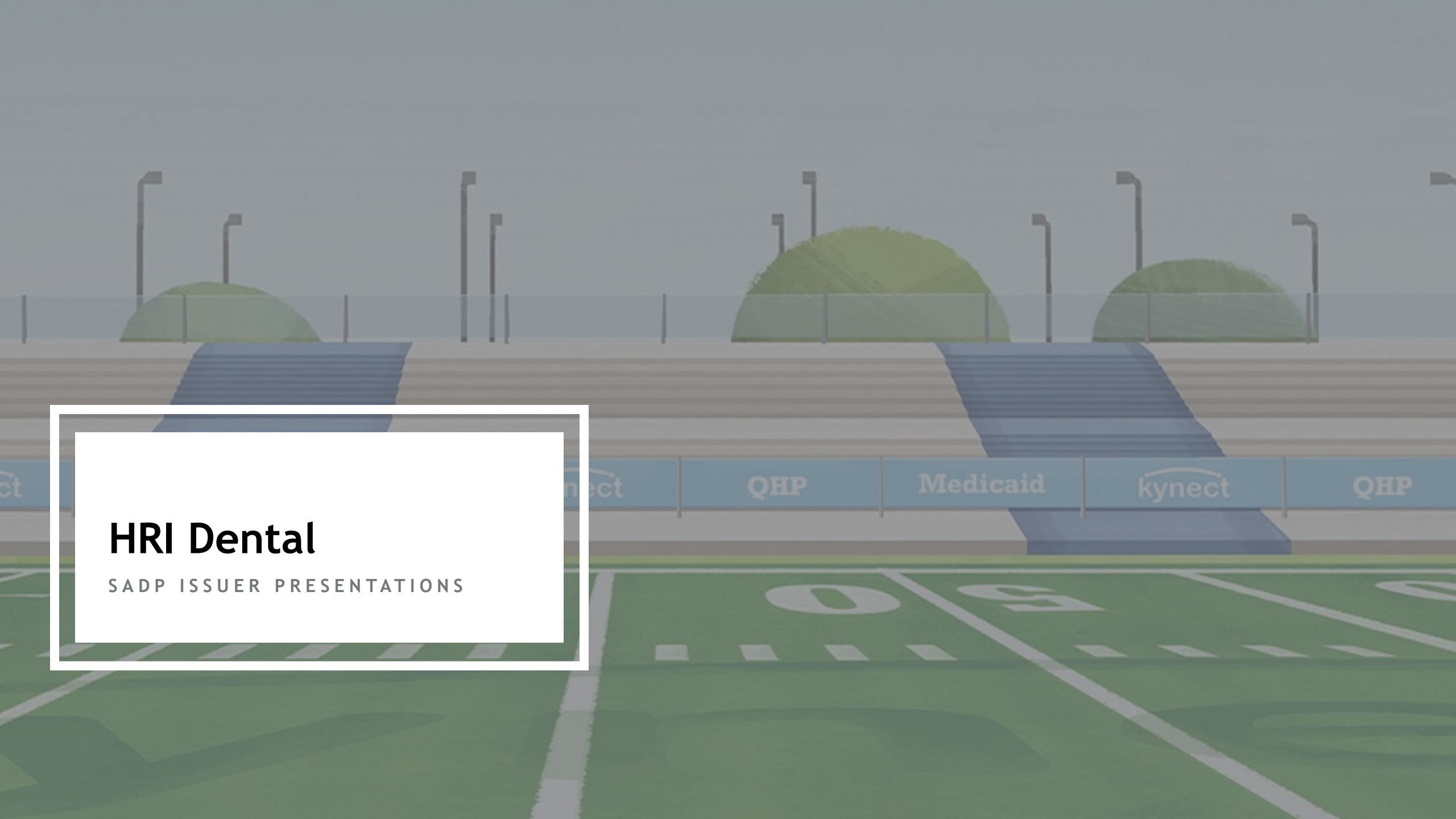
- Available from 8:00 a.m. to 8:00 p.m. Eastern Time
- Exchange member Customer Service:
 - Phone: 877.205.8767
 - Email: CS@BESTLife.com
- Services (online and by phone/chat)
 - Make payments
 - Account status
 - Plan benefit information
 - Claim status

www.BESTLife.com/exchange

Claims Processing

- BEST accepts electronic or paper claims
- Claims are processed within 5 business days
- Explanation of Benefit forms are mailed to provider and member

Question and Answer



HRI Dental

SADP ISSUER PRESENTATIONS

Executive Summary

Please see below for an overview of HRI Dental & Vision.

1



HRI Dental & Vision is a dental and vision insurer located in Evansville, Indiana.

2



Currently listed as Paramount Dental in kynect (work in progress).

3



Small & large group commercial in Kentucky, Indiana and Ohio.

4



Individual plans offered on the FFE in Ohio and Indiana, and TPA for an insurer in Michigan.

5



Started offering plans on kynect in 2025.

Plans Available

Please see an overview of the available plans.

OVERVIEW

Three plans are offered on Kentucky SBE

- 1. Preventive
- 2. Essential Plus
- 3. Total Care

All EHB-compliant for pediatric coverages for ages under 21.

PLAN DETAILS

	PREVENTIVE	ESSENTIAL PLUS	TOTAL CARE
Diagnostic & Preventive	100%	100%	100%
Basic	0%	50%	70%
Major	0%	50%	50%
Plan Annual Max	\$0	\$750	\$1,500

Network

Please see below for HRI Dental & Vision network details.

OVERVIEW

- Network consists of proprietary and leased dentists and specialists.
- National leased network through Connection Dental and DentaMax.

COVERAGE

1 General Dentist: Meets 100% of NA requirements.

2 Oral Surgeons: Meets 93.4% of NA requirements.

3 Orthodontist: Meets 95.8% of NA requirements.

4 Specialists: Limited in rural areas because of the lack of availability of those specialists in those areas.

Covered Services

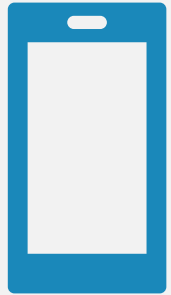
Please see below for HRI Dental & Vision covered services.

Diagnostic & Preventive		Preventive		Essential Plus		Total Care	
		Adult In Network*	Pediatric In Network*	Adult In Network*	Pediatric In Network*	Adult In Network*	Pediatric In Network*
Evaluation: periodic, limited, comprehensive		100%	100%	100%	100%	100%	100%
Teeth Cleaning (prophylaxis)		100%	100%	100%	100%	100%	100%
Fluoride - topical application or varnish.		100%	100%	100%	100%	100%	100%
X-Rays - bitewings, periapical, panoramic, full mouth		100%	100%	100%	100%	100%	100%
X-Rays - vertical bitewings		0%	100%	0%	100%	0%	100%
Sealants		0%	100%	0%	100%	0%	100%
Space Maintainer: fixed & removable		0%	100%	0%	100%	0%	100%
Basic (6 month waiting period for members 21 and older)							
Minor Restorative	Fillings – silver/amalgam or white/composite (anterior and posterior teeth)	0%	50%	50%	50%	70%	50%
Endodontic	Root canal therapy – includes periapical x-rays, cultures, follow-up care, treatments and pulpotomy	0%	50%	50%	50%	70%	50%
Periodontic	Scaling & root planning	0%	50%	50%	50%	70%	50%
Prosthodontic	Relining, rebasing, repairs, replacement of teeth and adjustments.	0%	50%	0%	50%	0%	50%
Oral Surgery	Extractions	0%	50%	50%	50%	70%	50%
Adjunctive	Emergency palliative treatment	0%	100%	50%	100%	70%	100%
	Anesthesia – general and IV sedation, nitrous	0%	50%	0%	50%	0%	50%
	Teledentistry (2 visits per year)	100%	100%	100%	100%	100%	100%
Major (9 month waiting period for members 21 and older)							
Major Restorative	Crowns, Inlays, Onlays, Core Buildup	0%	50%	0%	50%	50%	50%
	Inlays, Onlays, Post, Recementation and Repairs	0%	50%	0%	50%	0%	50%
Endodontic	Apexification, Apicoectomy	0%	50%	0%	50%	0%	50%
Periodontics	Gingivectomy, gingivoplasty, gingival flap, osseous and clinical crown lengthening.	0%	50%	0%	50%	0%	50%
Prosthodontic	Bridges, partial and complete dentures	0%	50%	0%	50%	0%	50%
Oral Surgery	Surgical Extractions including impactions, eruption	0%	50%	50%	50%	70%	50%
	Alveoloplasty, and other surgical procedures	0%	50%	0%	50%	0%	50%
Medically Necessary Pediatric Orthodontic – see definition on page 2							
Implant Services including placement and abutments and other related services		0%	50%	0%	50%	0%	50%
Orthodontic Services (braces) – Child (under 21)		0%	50%	0%	50%	0%	50%

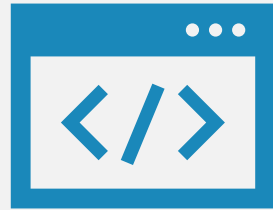
Tools and Resources

Please see below for resources available to enrolled members.

JET Platform



Dental Portal for Benefits



Marketplace Webpage for Transparency



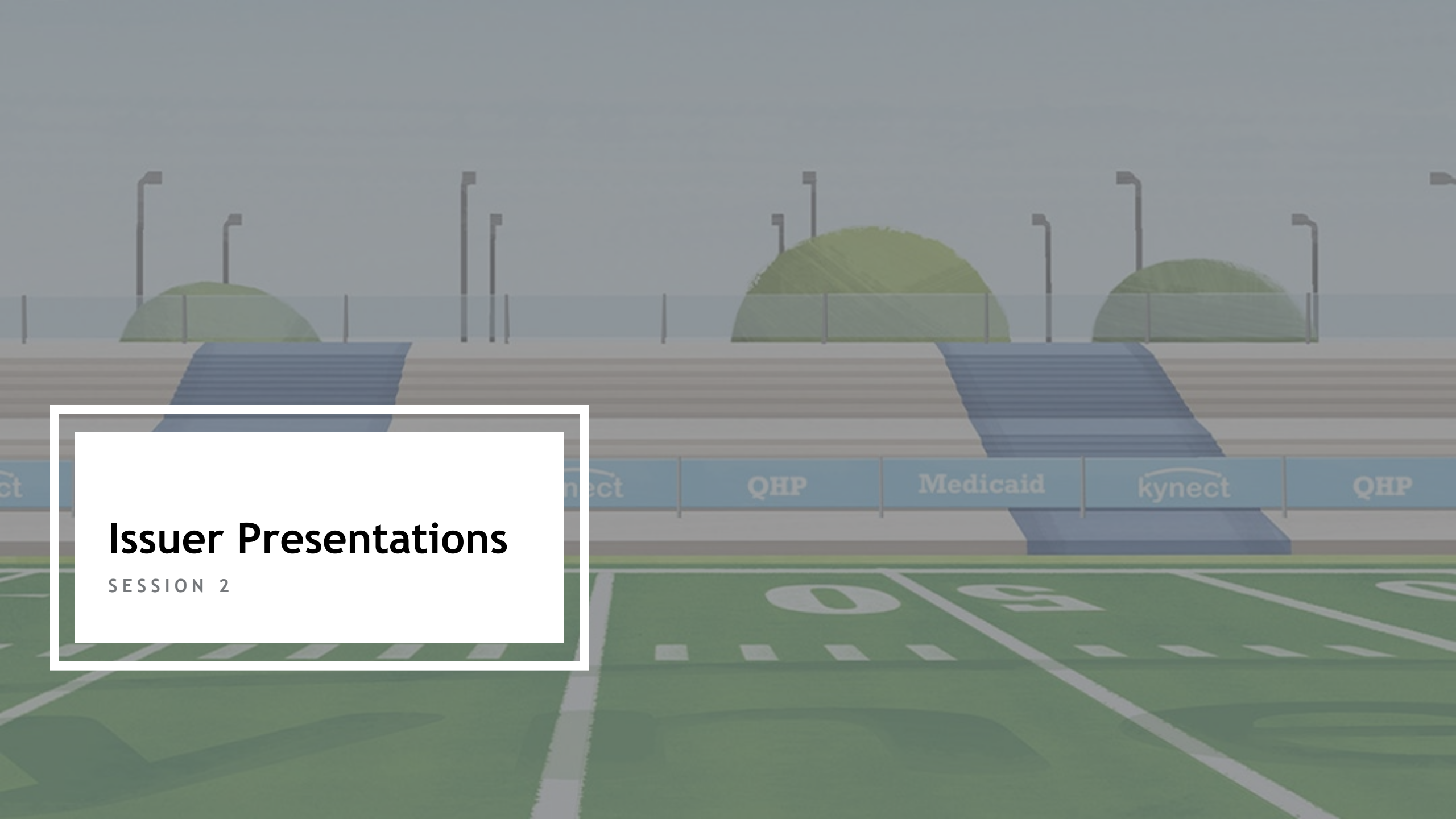
Call Center



Points of Contact

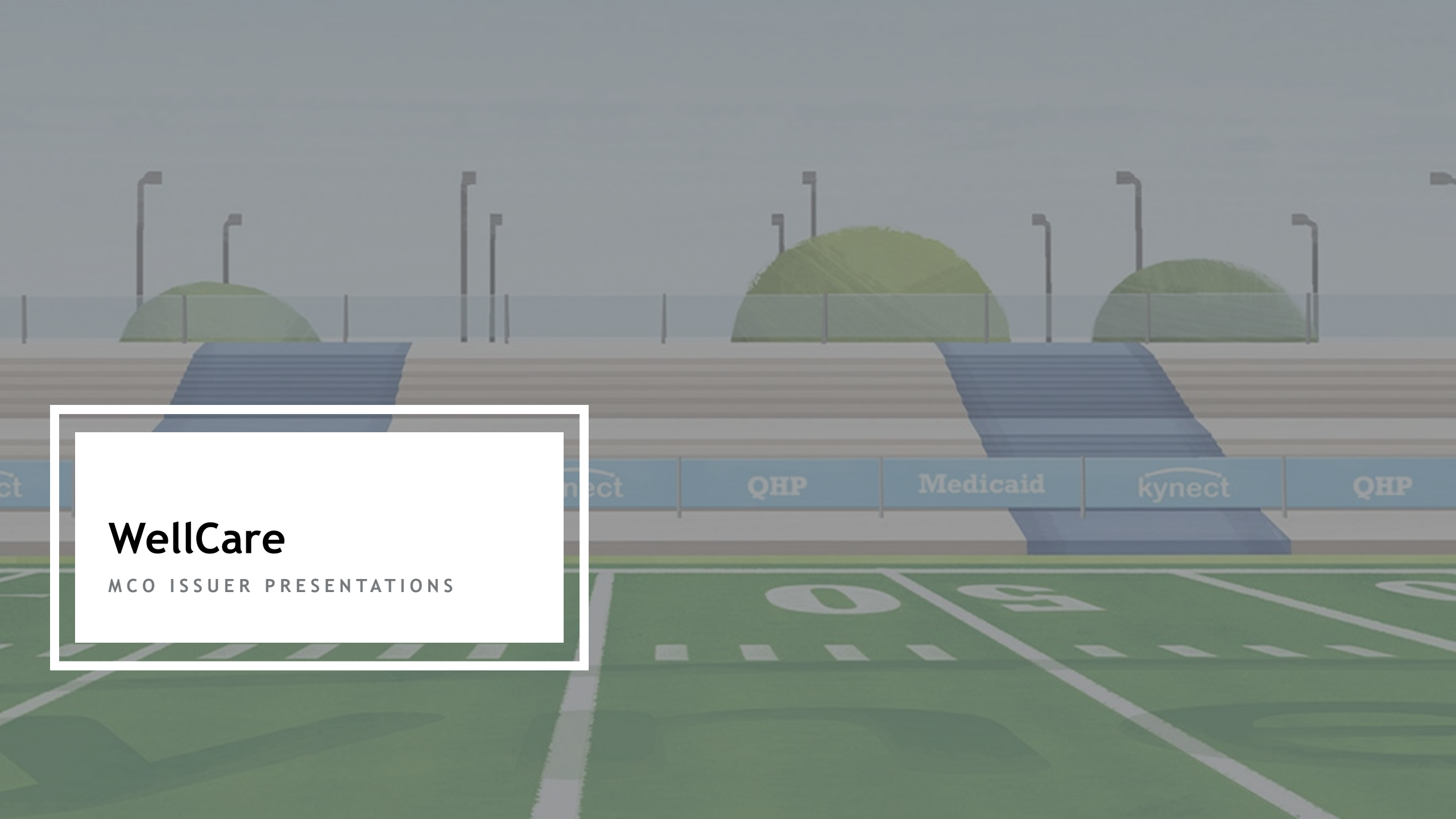
Please see below for points of contact for HRI Dental & Vision.

Name	Title	Email
Ashton Macaulay	Product Specialist	Ashton.macaulay@promedica.org
Laura Garrett	Operations Manager	lgarrett@insuringsmiles.com
Cindy Watson	Director of Finance	cwatson@insuringsmiles.com
Josh Nace	CEO/President	Josh.nace@promedica.org



Issuer Presentations

SESSION 2



WellCare

MCO ISSUER PRESENTATIONS



2026 WellCare Medicaid Overview



We Listened to What You had to Say About Benefits



In conversations with providers, community partners, and members we asked,

“How could your health plan help?”

They answered:

- Better rewards for healthy behaviors
- Activities to enrich the lives of children and families
- Tools to reach educational milestones
- Weight loss programs and health coaching

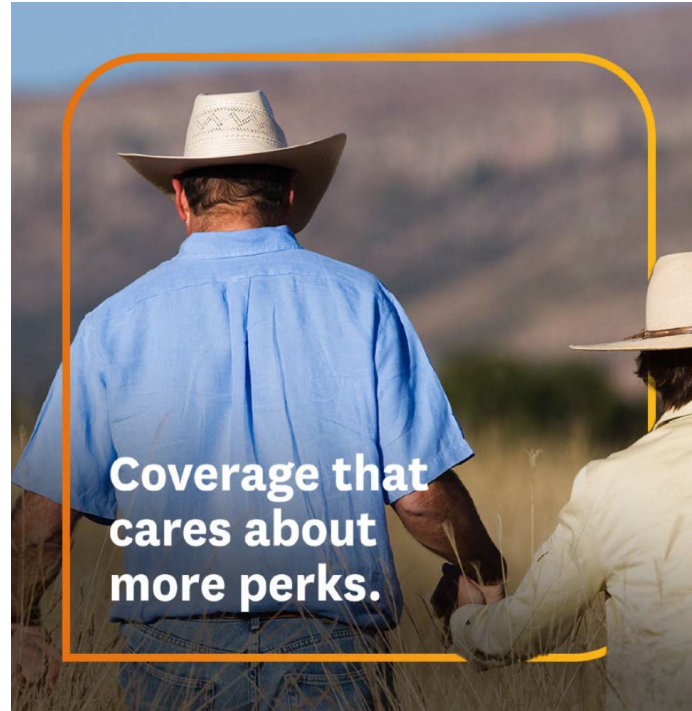




WellCare covers:

- Adult vision benefit gives members:
 - **Free** new glasses or contacts every 12 months
 - **Free** eye exam every year
- Members under 21 get glasses every year, too:
 - **Free** replacements if glasses are broken
 - **Free** eye exam every year
- Hearing – **Free** adult hearing aids
- Dental – **Free** adult second dental cleaning, dentures, implants, root canals, extractions, restoration and periodontics

myhealthpays[®] rewards you for taking steps toward a healthier life!



Coverage that
cares about
more perks.

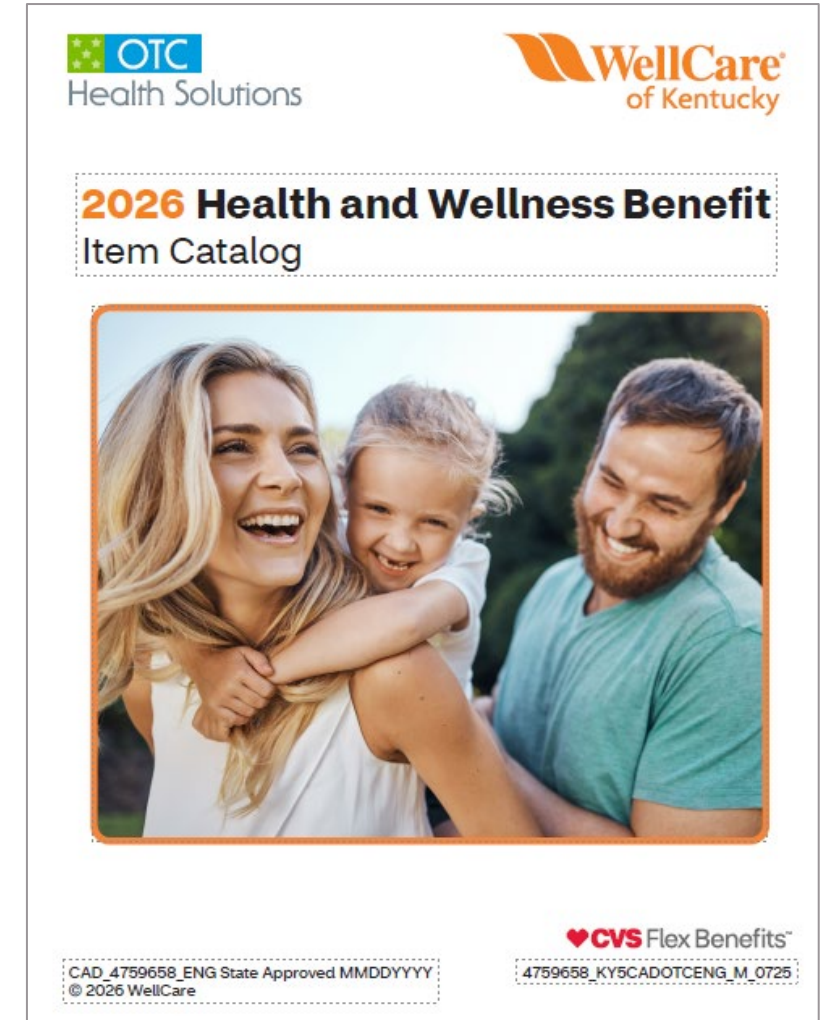
Over \$4,500 in Value Added Benefits

Including \$600 in healthy rewards for a wide variety of merchandise
by completing well visits and health screenings

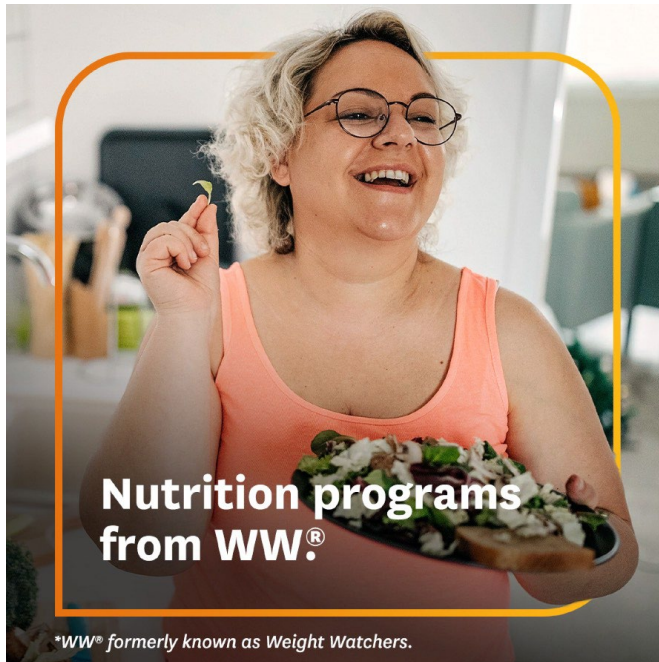
Three Ways to Bringing Care to Your Home

Health and Wellness Items

- \$15 per member per month in health and wellness items per year without a prescription
- Diapers, dental care, first aid, laundry detergent, sunscreen, reading glasses, and much more
- Three easy ways to shop
 1. In store
 2. Online
 3. By phone



Begin your path toward a better and healthier life



- WW[®] (Weight Watchers reimagined) memberships
 - Free six-month WW membership
 - Adults ages 18+ with a BMI equal to or greater than 25
- Health Coaching
 - Free coaching that can help you lose weight, manage diabetes, strengthen your immune system, or just feel better
 - Coaches are available days, nights and weekends via text, email and phone

- **Cell phones**
 - **Free** cell phone (\$250 value) with data, talk, and unlimited text messages so qualified pregnant members can stay in touch with their care teams
- **Extras for pregnant members**
 - Choice of a **free** stroller, portable playpen, car seat, or six packs of diapers
- **Text4Baby®**
 - Get **free** mobile health tips on pregnancy and baby's first year
- **24-hour Nurse Advice Line**
 - Call 1-800-919-8807 any time day or night to talk to a nurse when you or a family member are sick, hurt, or need medical advice



Tools to Reach Educational Milestones

■ Tutoring

- 12 free one-hour tutoring sessions for enrollees ages 8-18
- Sessions available in-person or online

■ Internet

- Get free 12-month internet service and a hotspot for enrollees ages 8-18
- Available in limited rural areas

■ GED® program

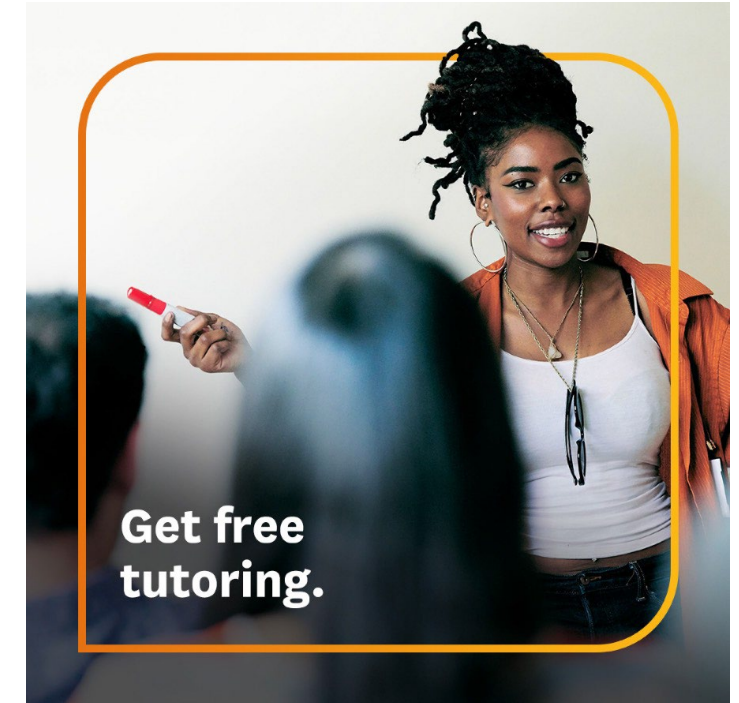
- Free GED testing for members ages 16+
 - Members can request one voucher to take all four tests, or request one at a time

■ Scholarships

- \$1,000 scholarships awarded to 50 members
- Ages 18+ and attending a trade school, college, or university

■ Reading program

- For members in Pre-K to 5th grade who want to improve their reading skills





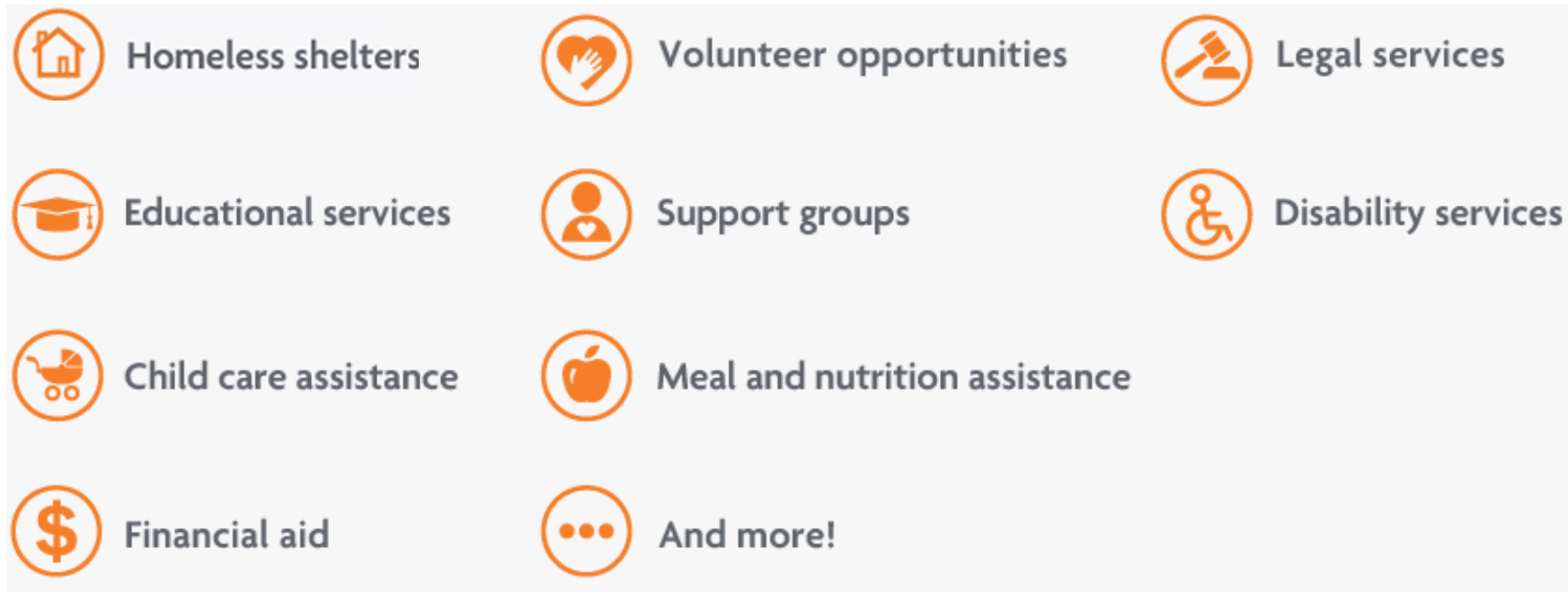
- Girl Scouts® and Boy Scouts of America®
 - Free annual membership for members in grades K-12
 - Free membership for parents and guardians
 - \$25 towards the cost of a uniform
- Sports physicals
 - Free yearly physical provided by a PCP for members ages 6-18

Meet Your Life and Career Goals

- State Issued ID cards
 - Free state issued ID cards
 - New or replacement
 - Different than driver's licenses or Real IDs
- Steps2Success training
 - Free job training and financial education classes
- WellCare Works
 - Free resources and tools to help members learn, train and prepare for steady employment and/or volunteering
- Criminal record expungements
 - Make a fresh start by erasing a criminal record
 - WellCare will help with application fees as allowed by law. Certification only.
- Cell phone
 - Free cell phone with unlimited text, unlimited talk, and 10 GB data each month



For WellCare members, non-members, and caregivers!



Call the Community Connections Help Line at 1-866-775-2192

Customer Service

1-877-389-9457 (TTY 711)

Our friendly staff can help with ID cards, changing your PCP, getting a member handbook, and much more.

24-hour Crisis Line

1-855-661-6973

Available anytime for help with drug and alcohol abuse or behavioral health emergencies.

Community Connections Help Line

1-866-775-2192

Connect with support for things like housing, utility assistance, food security, childcare, transportation, and more

Meal Program

Free for members who have recently been discharged from an inpatient hospital, behavioral health facility, rehabilitation center, or skilled nursing home.



- Dentures, implants, root canals, and more!
- Hearing aids
- Better vision
- Health and wellness items
- My Health Pays
- WW® and health coaching
- Healthy baby program
- Activities for children and families
- Life and career goals

Medicaid enrollees may change their MCO anytime, for any reason

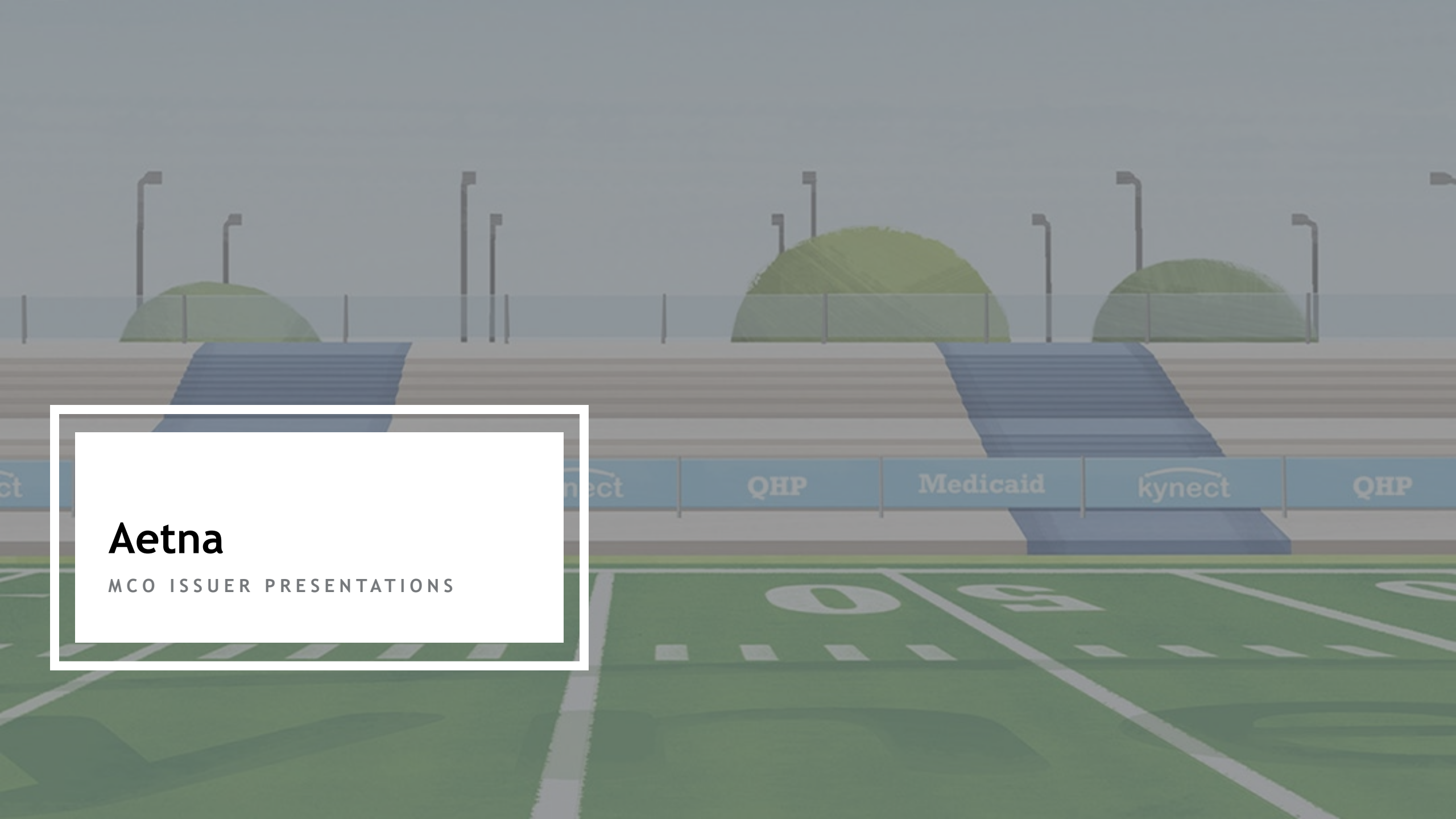
Darren Levitz

Sr. Director, Member Experience

darren.levitz@wellcare.com



Beyond Healthcare. A Better You.



Aetna

MCO ISSUER PRESENTATIONS

Aetna Better Health of Kentucky 2025

Candace Gurley, MPH

Sr. Manager of Community Development
and Outreach

gurleyc@aetna.com



A Path to Better Health

- In the market since managed care inception
- Aetna Better Health of Kentucky's team of nearly 300 employees are closely connected to the communities we serve.
- Our holistic approach to healthcare, including a suite of innovative value-added benefits, prioritizes total health.
- We are intent on elevating the quality of life for each of our members.



*"I really appreciate everything Aetna has done and is doing for me. **If it wasn't for my insurance, I'm not sure I could go on in my life.** I'm very grateful to you. Thank you so much, you are the best, for me, I don't believe you need improving. Thank you again."*

-Member Survey Response



NCQA Health Plan Rating



Member Focused

In 2022, more Medicaid-eligible Kentuckians stayed with or switched to Aetna Better Health of Kentucky. We are intent on elevating the quality of life for each of our members.

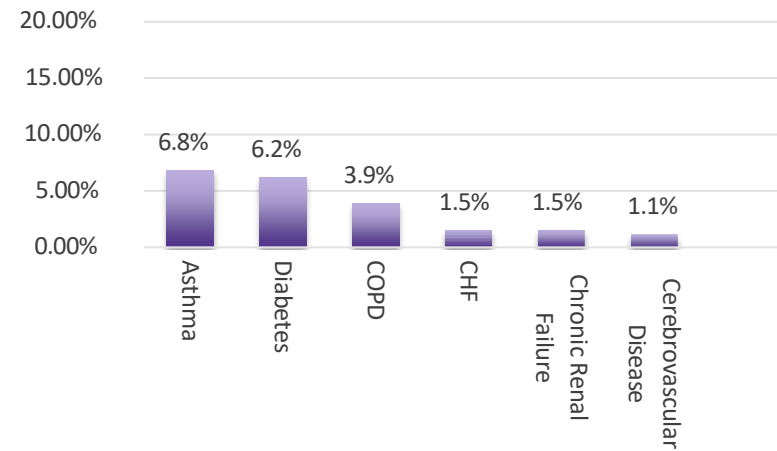
Quality Assured

Aetna achieves excellence in health care quality by empowering members across the care continuum to engage in their physical and psychosocial well-being and improve their health outcomes with enhanced quality of care and the reduction or elimination of health disparities. In 2023, Aetna Better Health of Kentucky became the state's sole Medicaid plan to receive a rating of 4 out of 5 in NCQA's Health Plan Ratings 2023: Medicaid.

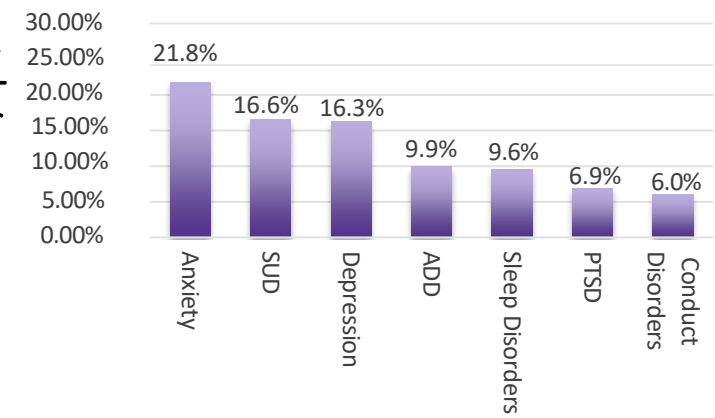
ABHKY Population Snapshot 2024



Chronic
Condition
Prevalence



Behavioral
Health
Condition
Prevalence

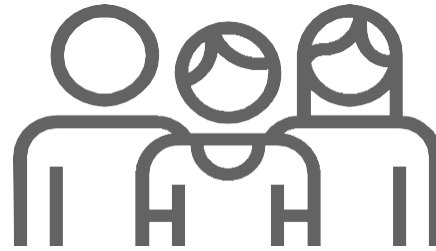


238,590

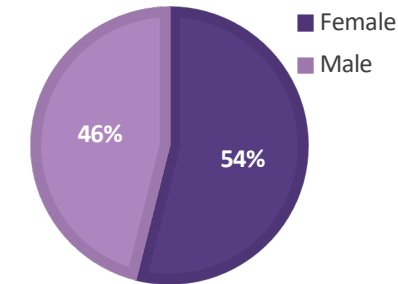
2023
Total Enrollment

Musculoskeletal
Disorders

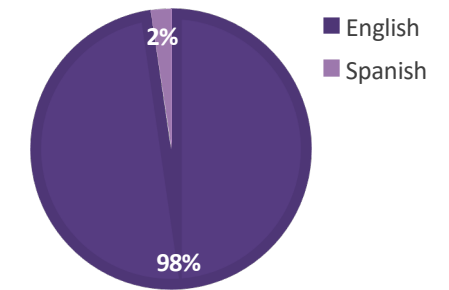
#1 ED Encounter
Diagnosis
Category



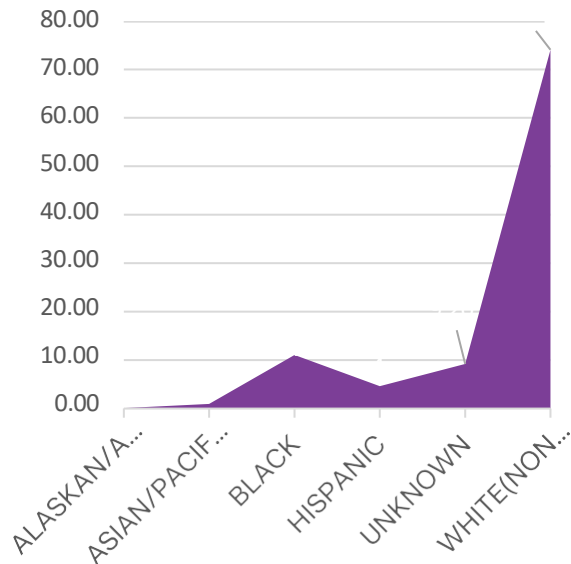
% OF ENROLLEES - GENDER



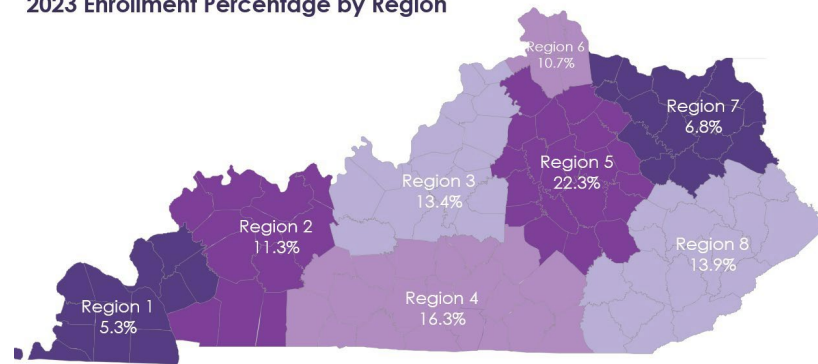
% OF ENROLLEES - LANGUAGE



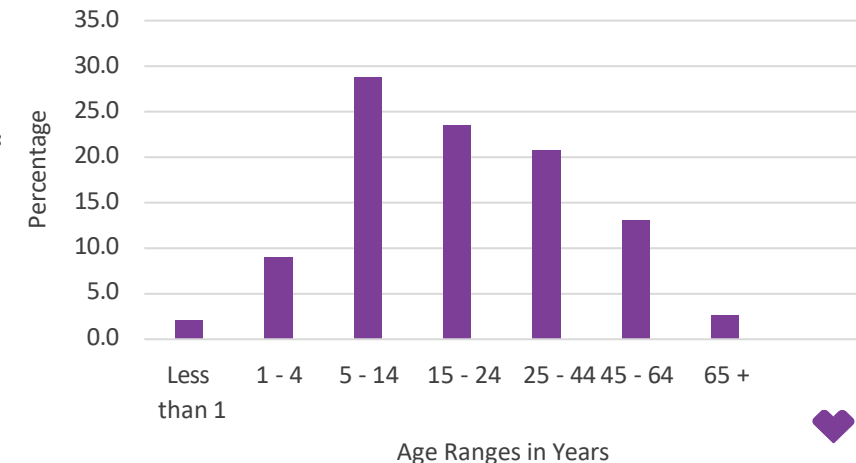
Percentage of Enrollees – Ethnicity



2023 Enrollment Percentage by Region



Enrollment Breakdown by Age



What is SKY?

Aetna Better Health of Kentucky (Aetna) was selected to manage the state's new Supporting Kentucky Youth program, also known as SKY.

This means that children and youth enrolled in SKY receive their Medicaid coverage through Aetna.

In addition to covering Medicaid benefits, SKY provides a high-touch approach to care management. This helps families navigate the system and make it easier to get resources they need.

Our Purpose

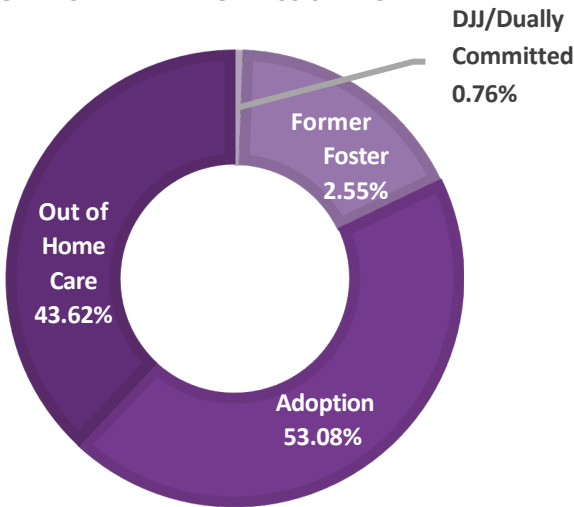
- Incorporate youth voice and choice
- Improve long-term health outcomes
- Achieve safety and permanency for children
- Reduce Psychotropic Polypharmacy among System Involved Youth



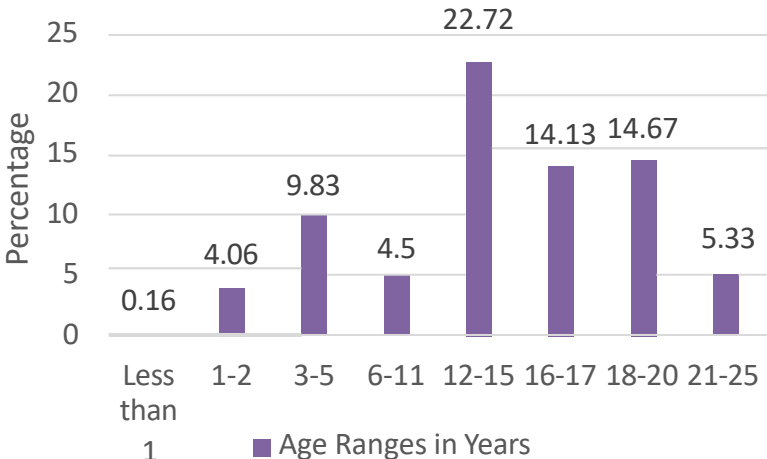
SKY Population Snapshot

22,753 Members

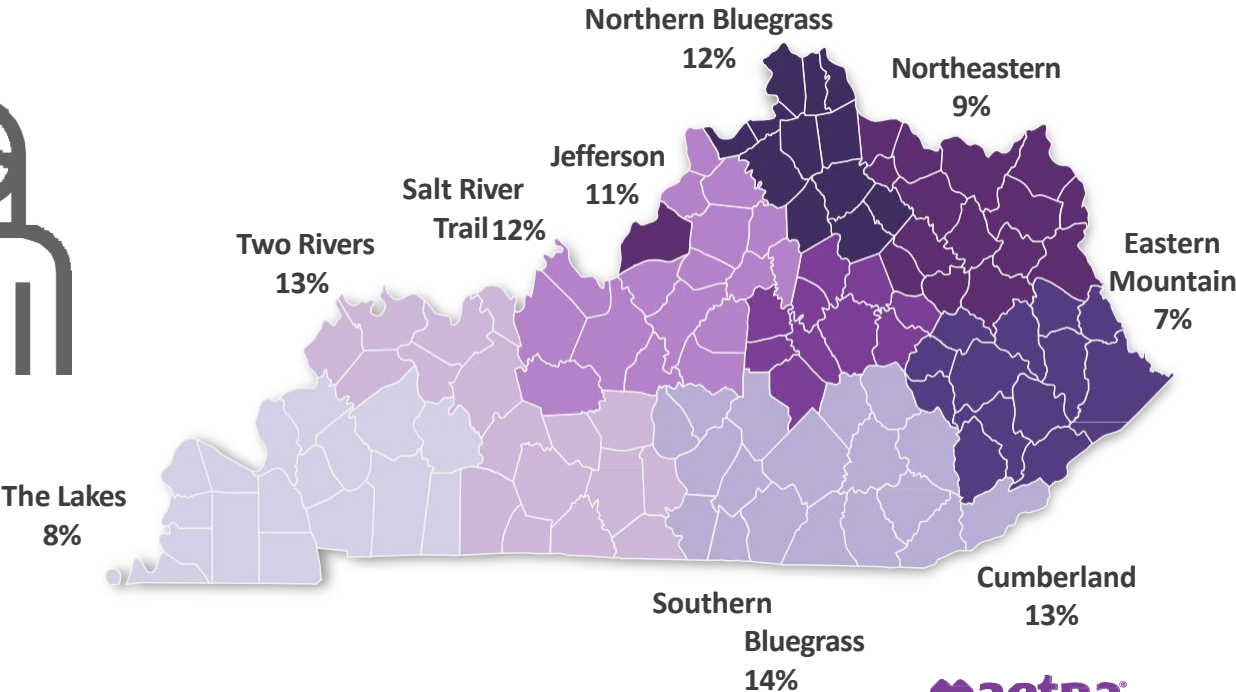
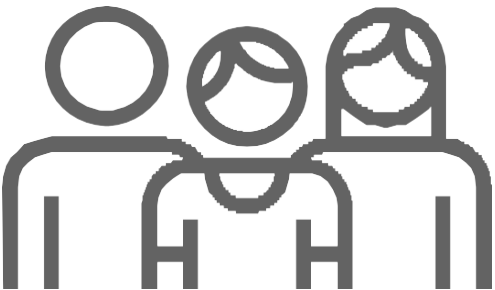
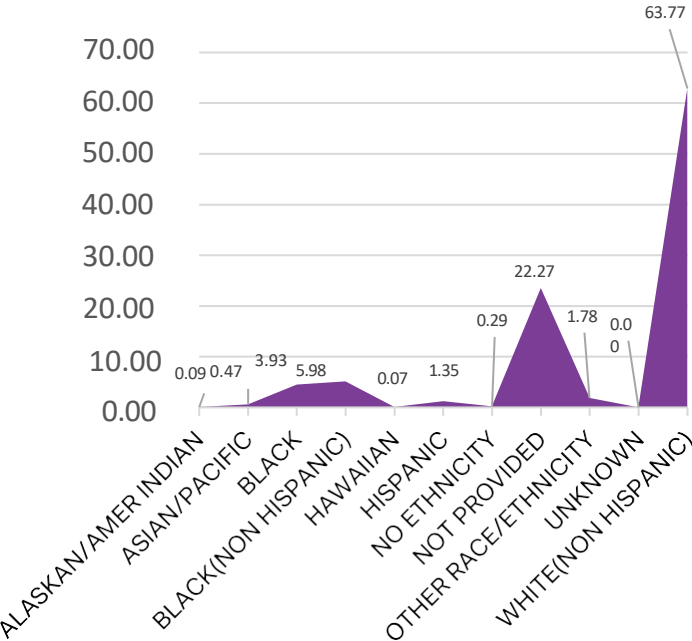
ENROLLEES BY TYPE OF ASSISTANCE



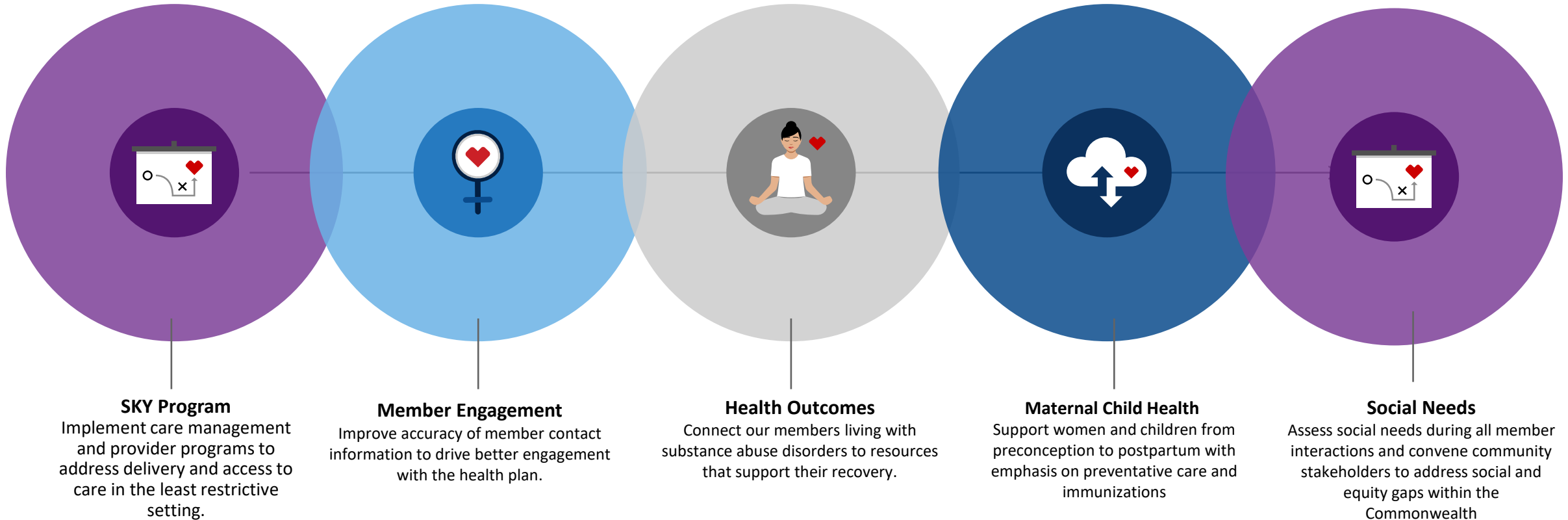
Percentage of Enrollees Per Age Range



Percentage of Enrollees – Ethnicity



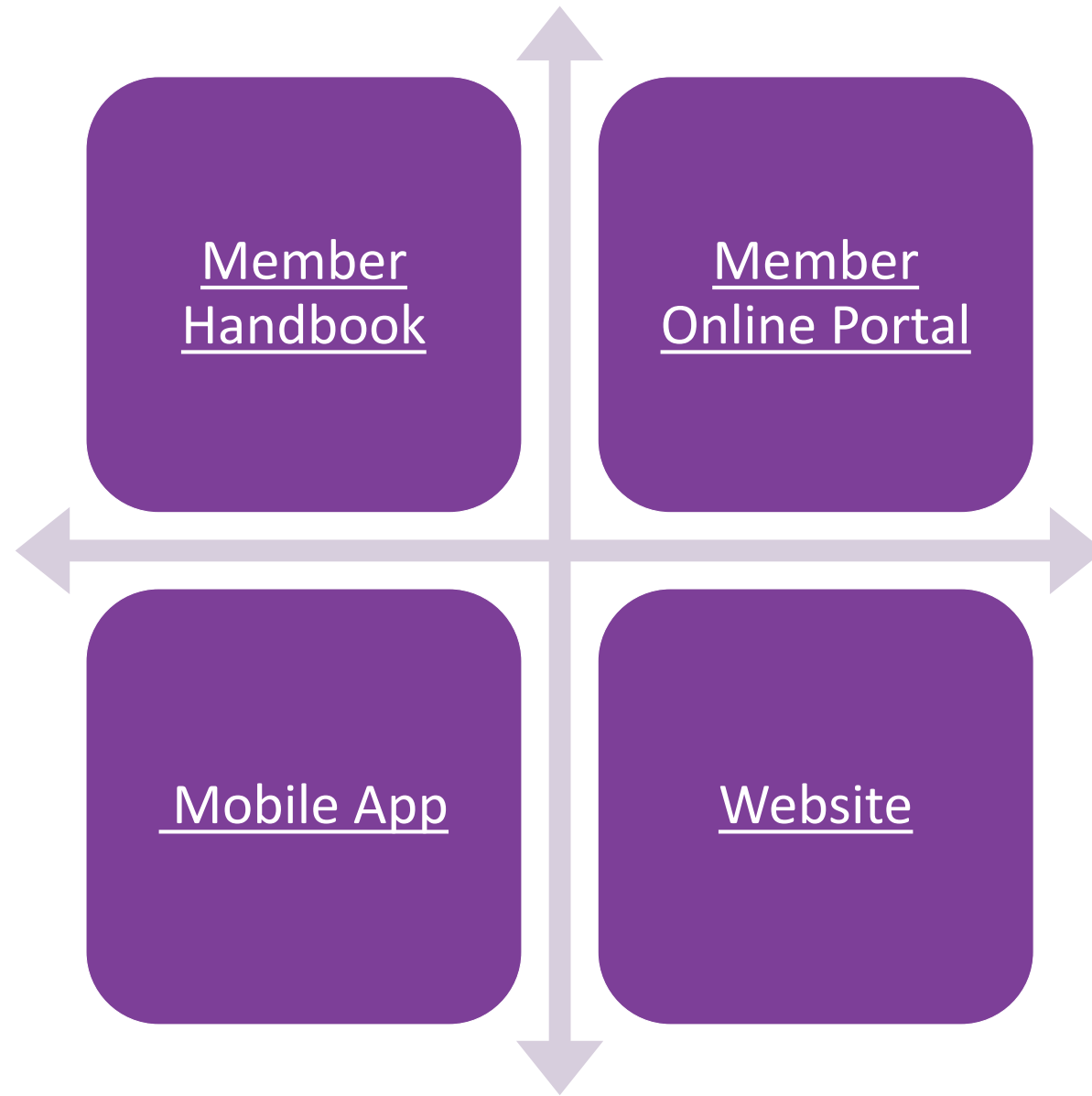
Aetna Better Health of Kentucky Priority Areas



Aetna Can Help! Quick Reference Contact Info:

Member Services	1-855-300-5528 (TTY: 711), Monday to Friday, 7 AM to 7 PM ET.
Care Management	If you have a question or would like to speak to the care management team, you can call Member Services at 1-855-300-5528 (TTY: 711).
Grievances and Appeals	File your grievance or appeal online here
SKY Ombudsman	SKY Inquiry Coordinator Jesse Cain CainJ1@aetna.com
Nurse Help Line	1-855-620-3924 (TTY: 711) 24 hours a day, 7 days a week
Behavioral Health Line	1-888-604-6106 (TTY: 711)
Assistance with VAB's	If you have a question about Value Added Benefits, you can call Member Services at 1-855-300-5528 (TTY: 711).
Update Contact Information	To update your address, phone number or email, call the Department for Community Based Services at 1-855-306-8959.
Sign up for Member Portal	You can sign up online or call us at 1-855-300-5528 (TTY:711). Be sure to have your member ID and email address handy.
Find a Provider	https://www.aetnabetterhealth.com/kentucky/find-provider
Pharmacy Benefits	https://www.aetnabetterhealth.com/kentucky/pharmacy-prescription-drug-benefits.html
Community Health Workers	PHM_ABHKY@aetna.com

Quick Reference Links for Member Benefit Information and Education



Help Members Maintain Medicaid Coverage

Encourage your patients to stay in touch!

We don't want you to risk losing your benefits.

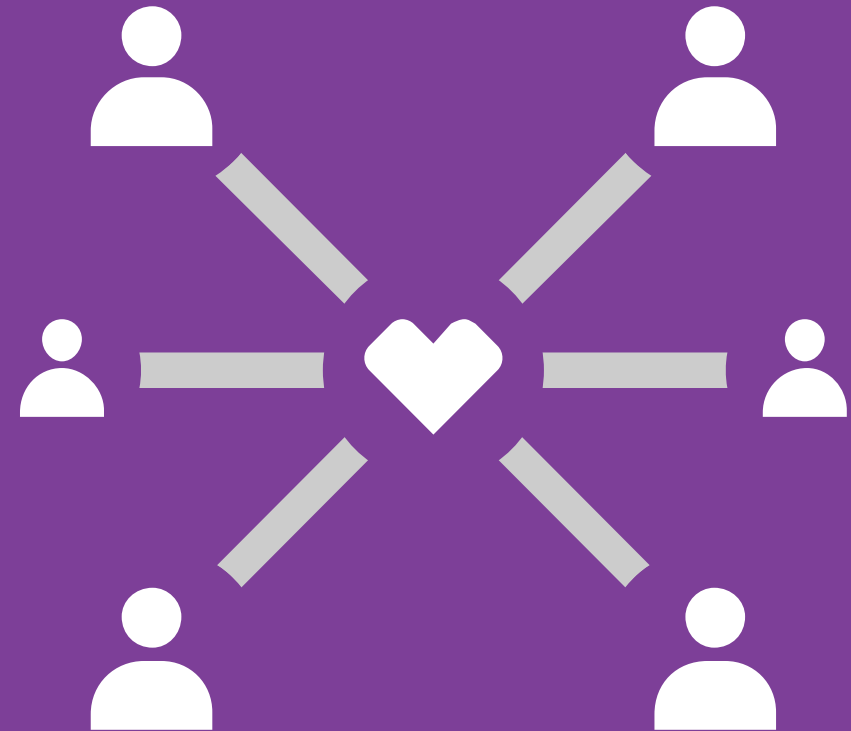
If your contact info isn't current, Kentucky Medicaid won't be able to notify you when it's time to renew your Medicaid coverage.

To update your address, phone number or email, call the Department for Community Based Services at 1-855-306-8959.

Have questions? Member Services is here to help. Contact us anytime, day or night.

Contact us [or log in to your online account](#).

Learn how to renew



**In case of an emergency, you may see
any Medicaid provider.**

What's Covered?

- Medical care
- Pharmacy
- Mental and Behavioral Health
- Vision Care
- Dental care
- Family planning services and supplies
- Phone plan
- Care management and disease management
- Pregnancy and newborn care
- Help stopping nicotine use
- Radiology services
- Population health
- Member Handbook
- SKY Member Handbook

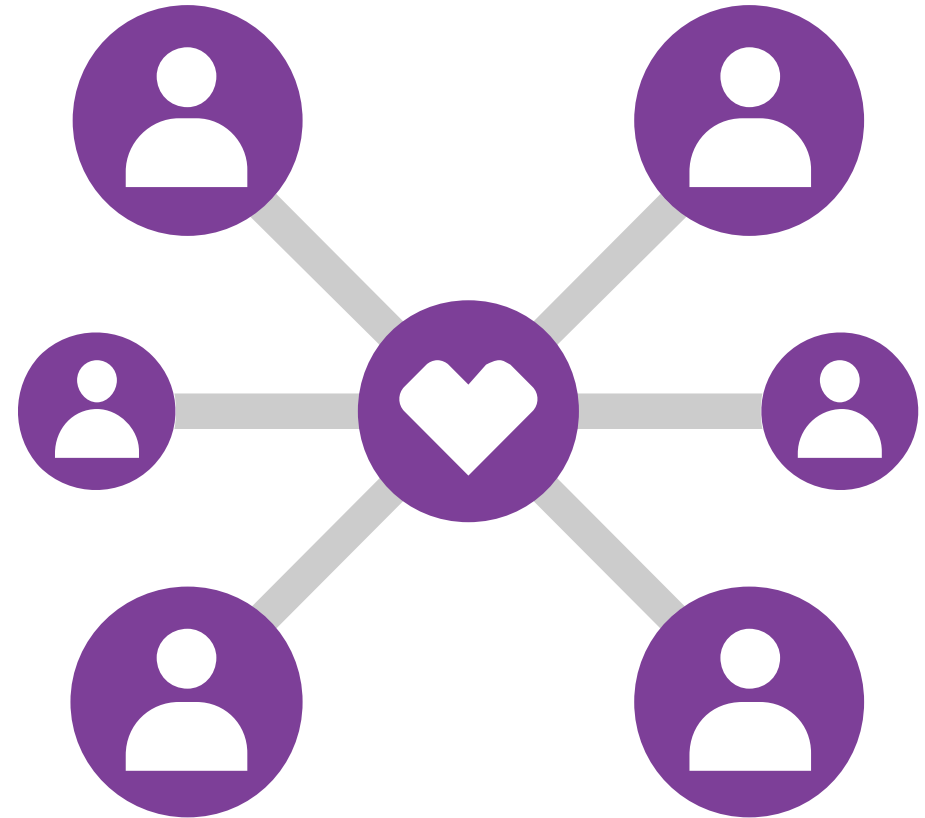
Case Management Support

Our Case Managers support our members with one-on-one outreach to assist them in their healthcare journey.

All members complete an annual Healthcare Assessment, which includes questions about SDOH needs and identifies members that would benefit from CM support.

Variety of Programs to Support Members

- Integrated Care Management
- ER Initiative
- Start Strong Re-entry Program – assists formerly incarcerated members integrate back into society
- Homeless Outreach
- High Risk Obstetrics
- Neonatal Abstinence Syndrome (NAS)
- Neonatal Intensive Care (NICU)
- Transplant
- Lock-In
- Guardian Angel – reaches out to members that were treated for an overdose
- CPESN – connects members with their pharmacist, who performs medication reconciliation



Aetna Better Care Rewards



Aetna Better Care REWARDS

Aetna Better Health of Kentucky members can get exclusive rewards for healthy behaviors like completing a mammogram or dental exam. Don't miss out on these rewards!

Aetna Better Care Program™ Incentives require NO action on behalf of the member to receive these benefits. Aetna will automatically send the gift cards following your doctor's appointments.

Aetna Better Cares REWARDS

\$10 for Completion of Diabetic Dilated Retinal Eye Exam

Members can receive a \$10 gift card for completion of a dilated retinopathy eye exam.

Eligibility Criteria: Members ages 18-75 with diabetes

Limits & Restrictions: One gift card per year

\$20 for Follow-up visit with Mental Health Practitioner

Members 6 years and older will receive a \$20 gift card for a follow-up visit with a mental health provider after discharging from the hospital after a behavioral health related inpatient stay.

Eligibility Criteria: Members ages 6 and older

Limits & Restrictions: Members are eligible after EACH visit with no annual limit. Visit must occur within 7 days post discharge

\$25 for completion of annual well child visit

Members can receive a \$25 gift card for completion of an annual well child visit.

Eligibility Criteria: Children ages 2-21 years.

Limits & Restrictions: One gift card per year

\$25 for completion of Metabolic Screening

Members ages 1-17 can receive a \$25 gift card for completing metabolic screening if prescribed antipsychotic medications.

Eligibility Criteria: Members ages 1-17.

Limits & Restrictions: One gift card per year. Incentive is restricted to those with two or more antipsychotic prescriptions.

Aetna Better Care REWARDS (cont.)

\$25 for completion of HPV vaccine series before 13th birthday

Members can receive a \$25 gift card for completing the HPV vaccine series by their 13th birthday

Eligibility Criteria: Members 13 years old with HPV vaccine by their 13th birthday.

\$25 for completion of two infant flu shots

Members can receive a \$25 gift card for completing two Flu Vaccines by their second birthday.

Eligibility Criteria: Members 2 years old with 2 flu vaccines by their second birthday.

Limits & Restrictions: The Nasal mist flu vaccine is not indicated for use in children under age two years. Incentive restricted to standard flu vaccine only.

\$25 HRA Incentive

Members who are newly enrolled and/or pregnant will receive a \$25 gift card for completing the Health Risk Assessment (HRA).

SKY members are eligible to receive an HRA incentive every year upon completion of the assessment.

Eligibility Criteria: Members who are newly enrolled and/or pregnant. SKY members

Newly enrolled first 30 days, others annually

\$50for completion of six well child visits before age 15 months

Members can receive a \$50 gift card for completing six (6) well child visits in their first 15 months.

Eligibility Criteria: Children ages 0- 15 Months

Limits & Restrictions: Must complete all six well child visit within 15 months of birth date

Aetna Better Care REWARDS (cont.)

\$50 for completion of HBA1c test

Members can receive a \$50 gift card for completing a HBA1c test.

Eligibility Criteria: Members ages 18 and older with diabetes

Limits & Restrictions: One gift card per year

\$50 for completion of mammogram

Members can receive a \$50 gift card for completing a mammogram.

Eligibility Criteria: Females ages 50-74

Limits & Restrictions: One gift card per year

\$50 for completion of Pap test

Members can receive a \$50 gift card for completing a Pap test.

Eligibility Criteria: Females ages 21-64

Limits & Restrictions: One gift card per year

Aetna Better Care REWARDS (SKY Members Only)

\$25 for completion of dental exam

SKY members can receive a \$25 gift card for completing a dental exam within two weeks of enrollment

Eligibility Criteria: SKY members during first 2 weeks of enrollment period

Limits & Restrictions: One gift card per year

\$25for completion of vision exam

SKY members can receive a \$25 gift card for completing a vision exam within two weeks of enrollment

Eligibility Criteria: SKY members during first 2 weeks of enrollment period

Limits & Restrictions: One gift card per year

No-Cost Bonus Benefits and Services



Aetna Better Health of Kentucky No-Cost Bonus Benefits and Services

To receive these benefits please call Member Services at

1-855-300-5528 (TTY: 711)

Monday- Friday

7:00am – 7:00pm (ET)

No- Cost Bonus Benefit and Services

Over- the- Counter (OTC) Benefit

ABH-KY members will be eligible for a \$15 monthly stipend covering over-the-counter needs such as pain relievers, bandages, thermometers, and more

Eligibility Criteria: All members are eligible for the \$15 monthly stipend.

Limits & Restrictions: The OTC benefit is \$15 per month and limited to 1 stipend per household. The amount will not roll over.

Period Promise Over- the- Counter (OTC) Benefit

Female members in Regions 2, 3, 4 and 5, ages 15- 55, will receive a \$20 monthly stipend to spend on period products.

Eligibility Criteria: Female members ages 15-55 in Regions 2,3,4 and 5 are eligible for the \$20 monthly stipend

Limits & Restrictions: The Period Promise benefit is \$20 per month, per member. The amount will not roll over. SKY members are excluded from this benefit.

Pacify

Pacify's tech-enabled platform provides 24/7 perinatal and infant feeding support to new and expecting parents via their smartphones. The Pacify app connects families to a nationwide network of doulas, lactation consultants, and registered nurses within minutes.

Eligibility Criteria: High-Risk pregnant members or new moms.

Limits & Restrictions: High-Risk pregnant members or new moms.

No- Cost Bonus Benefit and Services (cont.)

Remote Patient Monitoring Program (Vheda Health)

Telemonitoring program that provides our members living with certain chronic conditions education and self- management tools that can help .This is a 9–12-month program that is one time offering per member.

Eligibility Criteria:18 years of age or older living with diabetes, COPD, CHF, asthma and/or hypertension AND recent ED utilization or Inpatient hospitalization. Care management assessment may be required.

Limits & Restrictions: Member will receive an iPhone and other equipment based on condition state, such as, glucometer, blood pressure cuff, weight scale, or pulse oximeter. For this program, lancets or strips will not be provided with the glucometer.

Home Delivery Meals

Delivers nutritious, medically appropriate meals to members with certain chronic conditions post-discharge from an inpatient hospital stay. 4-12 weeks of nutrition education.

Eligibility Criteria: Care Management referral for members with at least one of the following conditions: Diabetes, congestive heart failure, kidney disease, COPD, or Malnutrition

Limits & Restrictions: Available up to 90 days post discharge from an inpatient hospital stay. Up to 2 delivery cycles per year per member

Enhances Transportation

10 round trips (up to 60 miles total per round trip) per year to activities, such as job interviews, job training, shopping for professional attire, grocery store or food bank, and accessing community health services not otherwise covered.

Eligibility Criteria: Members 18 and older and SKY members ages 18-26 with employment, food, or transportation needs

Limits & Restrictions: 10 round trips up to 60 miles per round trip per year. Please note that members must provide 3-day advance notice to arrange transportation services.

No- Cost Bonus Benefit and Services (cont.)

Pyx

Adult and youth members who experience loneliness can access the Pyx Health platform. The customized app offers 24/7 engagement for the member, as well as connections to health plan resources, community services, crisis, and other national support lines.

Eligibility Criteria: notes

Limits & Restrictions: Limited to members ages 13 and older

Blood Pressure Cuffs

All members with diabetes or high blood pressure can receive a blood pressure cuff to monitor their blood pressure at home.

Eligibility Criteria: Members with a diabetes or high blood pressure diagnosis

Limits & Restrictions: One time offering of one blood pressure

No- Cost Bonus Benefit and Services (cont.)

Back to School Assistance

Aetna's Community Outreach through school-based family resource coordinators offer backpacks filled with school supplies.

Eligibility Criteria: Children ages 5 - 18

Limits & Restrictions: Once per calendar year Assistance Program

\$50 Gift card for participation in after school activities

Members can receive a \$50 gift card to pay for 4-H, Boys & Girls Clubs of America, Boy Scouts of America, Girl Scouts of the United States of America, Big Brother Big Sisters and other established community organizations, afterschool programs or organized team sport programs.

Eligibility Criteria: Members ages 6-18 who have completed a well child visit within the last 12 months

Limits & Restrictions: Limit to one per child per year. Must have record of well child visit. SKY Members are excluded.

No- Cost Bonus Benefit and Services (cont.)

Keep Kids Safe” Opioid Lockbox Program

This program is a part of Aetna’s national campaign to fight the opiate crisis. This harm reduction intervention is used to support safety by providing members with a lockbox to secure their opioid medications.

Eligibility Criteria: Members prescribed an opioid medication and have children in their home

Limits & Restrictions: One lockbox per household program

\$40 gift card to assist with certification fees tied to criminal record expungement

Members can receive a \$40 gift card to assist with certification fees tied to criminal record expungement (as allowed by statute).

Eligibility Criteria: Members eligible for felony record expungement

Limits & Restrictions: Assistance as allowed by state statutes; KRS 431.079, KRS 431.078, KRS 431.076, KRS 431.073

Maternity Matters Program



Aetna Better Health of Kentucky Maternity Matters Program

To receive these benefits please call Member
Services at

1-855-300-5528 (TTY: 711)

Monday- Friday

7:00am – 7:00pm (ET)

Maternity Matters Program

\$25 for completion of Initial Prenatal Visit

Pregnant members can receive a \$25 gift card for completing their initial prenatal visit.

Eligibility Criteria: Pregnant members

Limits & Restrictions: One per pregnancy

\$10 for completion of subsequent Prenatal Visits

Pregnant members can receive an additional \$10 gift card for each visit.

Eligibility Criteria: Pregnant members

Limits & Restrictions: \$100 max per pregnancy/10 visits max

\$25 for completion of Post- partum Visit

New mothers can receive a \$25 gift card for attending a post-partum visit within 7-84 days after the baby is born.

Eligibility Criteria: New Moms

Limits & Restrictions: One gift card per pregnancy

Cribs or Car Seat for Moms

Pregnant members can earn a gift card up to \$90 to purchase a portable crib OR car seat at 37 weeks or more of pregnancy for seeing their doctor regularly (at least 7 visits) during their pregnancy.

Eligibility Criteria: Pregnant members

Limits & Restrictions: One gift card per pregnancy; exceptions are made for multiple births (twins)

Aetna Better Care SKY Only Rewards



Aetna Better Health of Kentucky SKY REWARDS- ONLY

To receive these benefits please call Member
Services at

1-855-300-5528 (TTY: 711) Or

Call Case Manager

Monday- Friday

7:00am – 7:00pm (ET)

Aetna Better Care SKY ONLY REWARDS

Tattoo Removal

Members can receive a \$150 gift card toward tattoo removal service.

Eligibility Criteria: SKY members ages 17-21; Requests must be made to a Care Manager

Limits & Restrictions: One gift card per year

Driver’s License Fees

Members can receive a \$150 gift card toward payment for Drivers Education School and Driver’s License fee.

Eligibility Criteria: SKY members ages 16-21; Requests must be made to a Care Manager

Limits & Restrictions: One gift card per year

Moving Expense

Members can receive a \$500 gift card to assist with Moving Expenses.

Eligibility Criteria: SKY members ages 17-21; Requests must be made to a Care Manager

Limits & Restrictions: One gift card per year

Birthday in a Box

Each child receives a “birthday in a box” The Birthday in a Box is coordinated by the SKY care manager.

Eligibility Criteria: SKY members; Requests must be made to a Care Manager

Limits & Restrictions: Once per year

Aetna Better Care SKY ONLY REWARDS

Calming Comforts

Members with high adverse childhood experiences (ACEs) score or an anxiety diagnosis can receive supplies to help calm the impact of trauma. Items include a sound machine, weighted sensory plush, aroma therapy and light therapy products.

Eligibility Criteria: SKY members with an adverse childhood experiences (ACEs) score of 5 or higher or an anxiety diagnosis within the last 24 months

Limits & Restrictions: \$50 worth of calming supplies per calendar year to use on the above listed available items

Foster Care Duffle Bag Program

Aetna will provide personalized duffle bags filled with personal hygiene items, supplies, and a blanket to SKY care members whose placements have changed from one home to another. Some items include shampoo, conditioner, journal, and coloring book.

Eligibility Criteria : SKY members population who are transitioning from one home to another

Limits & Restrictions: Once per calendar year

Aetna Better Care SKY ONLY REWARDS

LACES

SKY members who have been identified as deaf or hard of hearing will be screened for unidentified language access needs and assessed to provide recommendations, resources, and supports to help improve member's language acquisition and communication.

Eligibility Criteria: SKY members identified as being deaf or hard of hearing.

Limits & Restrictions: The number of members receiving Communication Skills Assessments and Guide by Your Side services is limited, and referrals will be routed through the SKY Behavioral Health Specialist.

GYM Membership

SKY members can receive a \$200 gift card to pay for gym memberships to promote better health and well-being.

Eligibility Criteria: SKY members; Members must contact care manager to receive this benefit.

Limits & Restrictions: One gift card per year

Aetna Better Care SKY ONLY REWARDS- Connections for Life

Smartphone & Wireless Plan (ages 13-17)

Eligibility Criteria: SKY members ages 13-17 years, who are not in stable placement (placement with family or in a pre-adoptive or adoptive home) or subsidized permanent custody (SPC).

Limits & Restrictions: One phone and data plan per member

Laptops (ages 18-26)

Eligibility Criteria: SKY members ages 18-26 years who are not in stable placement (placement with family or in a pre-adoptive or adoptive home) or subsidized permanent custody (SPC).

Limits & Restrictions: One laptop per member



Aetna Better Health Local Events and Trainings

Aetna Better Health of Kentucky Local Events and Trainings

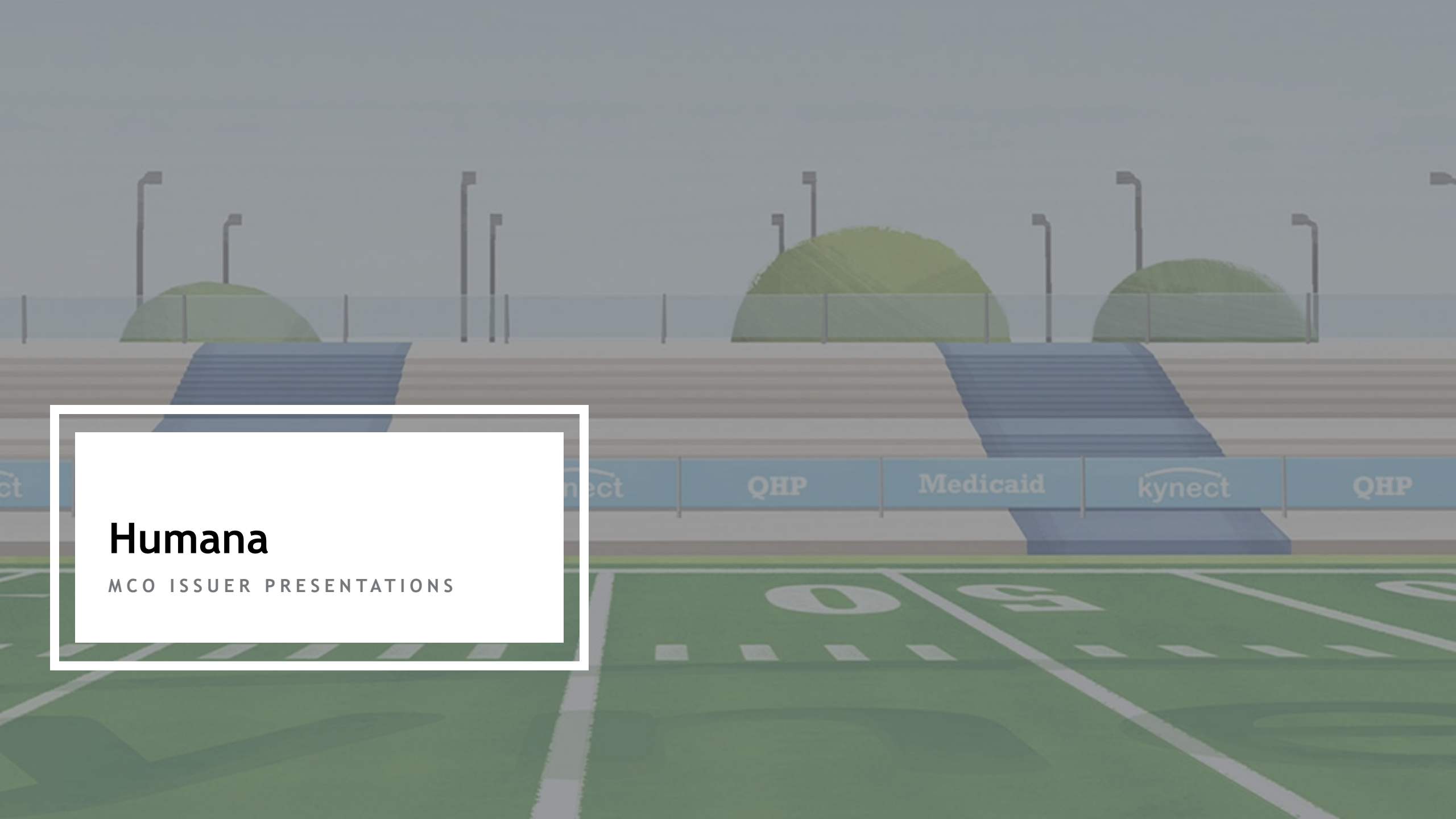
<https://www.aetnabetterhealth.com/kentucky/news-events.html>

Member Handbook
Member Guide
Aetna Better Health of KY

Questions?

Aetna policy statement

All Aetna presentation materials are confidential and proprietary and may not be copied, distributed, captured, printed or transmitted (in any form) without the written consent/authorization of [Aetna, Inc.].

The background is a stylized illustration of a sports stadium. In the foreground, a green football field with white yard lines is visible. Behind the field are blue bleachers. A blue banner runs across the front of the bleachers, featuring the logos 'QHP', 'Medicaid', 'kynect', and 'QHP' from left to right. In the background, there are green hills and several tall stadium light towers under a grey, overcast sky.

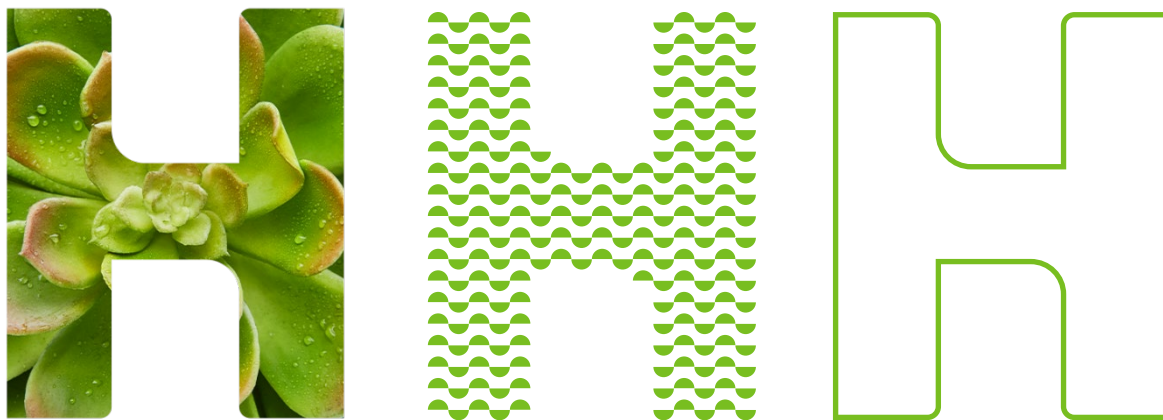
Humana

MCO ISSUER PRESENTATIONS

Humana
Healthy Horizons®
in Kentucky

Issuer Presentation

October 2025

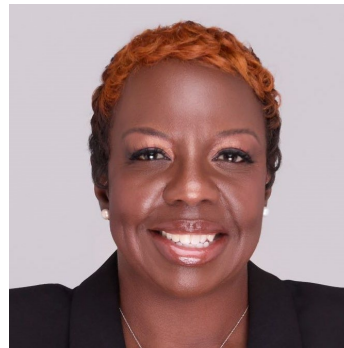


Humana Healthy Horizons in Kentucky is a Medicaid product of Humana Health Plan, Inc.





Issuer Presenter



Yonbretta Stewart

Community Engagement
and Outreach Manager



Humana Healthy Horizons in KY

Humana Healthy Horizons® in Kentucky, formerly Humana Kentucky Medicaid is a statewide program. Our new name reflects our goal to help our enrollees achieve their best health and live their best lives. Our name changed, but our strength and commitment to our enrollees remain the same.

Humana Healthy Horizons in Kentucky is a Medicaid program that provides healthcare coverage for eligible individuals, including children, seniors, disabled adults, and pregnant women. It offers access to a large network of doctors and services through a contract with the Kentucky Cabinet for Health and Family Services.

As one of our enrollees, you get dental, hearing, medical, and vision coverage; behavioral health benefits, and extra benefits.

With Humana Healthy Horizons, you get Medicaid that provides you with the everyday benefits, rewards, and support that make your life easier so that you have time to focus on what you love.

Covered Services - Medical

Physician Care Services

- Chiropractic services
- Early and regular screenings, tests, and treatment services for enrollees under age 21
- Mental health services
- Physical, occupational, and speech therapy
- Physician services, physician assistant services, and advanced registered nurse practitioner services
- Podiatry services
- Preventive services for all enrollees
- Renal dialysis services
- Substance use disorder services
- Vision and hearing services

Family-planning and pediatric care services

- Birthing center services
- Family-planning services
- Specialized children's clinics

Emergency and other services

- Ambulatory surgical treatment center services
- Clinic services—care provided in a county health department, federally qualified health center, or a rural health clinic
- Home health agency services
- Hospice services (non-institutional only)
- Prescription drugs
- Specialized care management services for enrollees with complex chronic illnesses
- Targeted case management (TCM)
- Transplant services
- Transportation
- Urgent and emergency services

Supplies and imaging services

- Eye care services and supplies
- Hearing services and supplies for enrollees
- Laboratory services
- Medical supplies, equipment, prosthetics, and orthotics
- X-ray and imaging services

Chronic conditions

Humana Healthy Horizons offers resources as part of our chronic conditions program. A nurse can help you:

- Find resources in your community
- Get the education and support you need
- Learn how to control diseases such as asthma, cancer, diabetes, and hypertension
- Talk with your doctor

We designed our chronic conditions program to help you understand and manage your disease and follow your doctor's plan of care.

Covered Services - Dental/Hearing/Vision

Dental

Coverage for enrollees younger than 21 includes:

- **1 set of standard X-rays every 12 months for all enrollees**
- **2 cleanings every 12 months**
- Fluoride treatments
- Medically necessary diagnostic and treatment services
- Preventive care, like oral health screenings for all enrollees
- Restorative care, like fillings
- Sealants, if enrollee is at risk for tooth decay

Coverage for enrollees 21 and older includes:

- **1 cleaning every 12 months PLUS 1 additional cleaning every 12 months**
- **1 set of standard X-rays every 12 months**
- Dentures, implants, and root canals
- Preventive care, like oral health screenings
- Restorative care, like fillings and crowns

Hearing

Managed medical assistance services

If prescribed by your doctor, we cover hearing tests.

Under the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) portion of your Humana Healthy Horizons medical plan, we cover medically necessary hearing screenings and diagnostic testing if prescribed by your doctor, including:

- **1 complete hearing evaluation per year**
- **Hearing aid, not to exceed \$1,200 per ear every 36 months**
- **3 follow-up visits within 6 months of initial fitting for hearing aid(s)**
- **1 additional follow-up visit within 6 months following hearing aid fitting related to the proper fit and adjustment**

Vision

All enrollees have coverage for:

- **Annual vision exam**
- **Contact lenses if medically necessary**
- Eyeglass fitting
- Testing, care, and management of eye disease

Enrollees younger than 21 also can get:

- **1 pair of glasses per year**
 - **Additional pair covered if the first pair is lost, broken, or the prescription changes**
 - Additional glasses may be provided through Early and Periodic Screening, Diagnostic and Treatment (EPSDT) special services

You may need approval before getting any of the above screenings and diagnostic testing services. This pre-approval is called prior authorization.

Value-Added Benefits

Baby and Me Meals

- Up to 2 pre-cooked home-delivered meals per day for 10 weeks for pregnant members who are high risk. Care manager approval required.

Convertible Car Seat or Portable Crib

- Pregnant members who enroll and actively participate in our HumanaBeginnings Care Management program and complete a comprehensive assessment and at least 1 follow-up call with a HumanaBeginnings Care Manager can select 1 convertible car seat or portable crib per infant, per pregnancy.

Doula Services

- Doula assistance for pregnant members to provide emotional and physical support to the laboring mother and her family, 5 prenatal visits, 3 postpartum visits, and 1 visit for delivery assistance per pregnancy.

To enroll in the HumanaBeginnings Program: Call 888-285-1121 (TTY: 711) Monday - Friday, 8 a.m. - 6 p.m., Eastern time. Email: KYMCDHumanaBeginnings@humana.com

Value-Added Benefits

Criminal Expungement

- Members 18 and older may receive financial assistance, of up to \$340 for criminal record expungement, as allowed per KYCourts.gov, per lifetime.
 - Funds will not be paid directly to the member.

GED Testing

- GED test preparation assistance for members 18 and older, including a bilingual advisor, access to guidance and study materials, and unlimited use of practice tests. Test preparation assistance is provided virtually to allow maximum flexibility for members. Also includes test pass guarantee to provide members multiple attempts at passing the test.
 - Sign up for GEDWorks online at GED.com/Humana. Humana Healthy Horizons in Kentucky pays the course fee of \$225 with 4 total sections, so member can access the GEDWorks preparation materials, resources, practice tests, and tests.

Smartphone Services

- Humana members who qualify for the Federal Lifeline program are eligible to receive a free smartphone with monthly talk minutes, text and data.

For more information, call Member Services at 800-444-9137 (TTY: 711).

Value-Added Benefits

Disaster Preparedness Meals

- 1 box of 14 shelf-stable meals before or after a natural disaster twice per year. Member must not live in a residential or nursing facility. The Governor must declare the disaster in the member's county of residence to be eligible for the meals.

Post-Discharge Meals

- 14 refrigerated home-delivered meals following discharge from an inpatient or residential facility. Limited to 4 discharges per year. Sign up for GEDWorks online at GED.com/Humana. Humana Healthy Horizons in Kentucky pays the course fee of \$225 with 4 total sections, so member can access the GEDWorks preparation materials, resources, practice tests, and tests.
 - If you have been discharged from an inpatient or residential facility and Mom's Meals on behalf of Humana Healthy Horizons in Kentucky has not called you, call within 30 days of the discharge date to request the post-discharge meals benefit.

Smartphone Services

- Humana members who qualify for the Federal Lifeline program are eligible to receive a free smartphone with monthly talk minutes, text and data.

For more information, call Care Management Services at 888-285-1121 (TTY: 711)

Value-Added Benefits

Housing Assistance

- For members 18 and older, up to \$350 per member per year (unused allowance does not roll over to the next year) to assist with the following housing expenses:
 - Apartment rent or mortgage payment (late payment notice required)
 - Utility payment for electric, water or gas (late payment notice required)
 - Trailer park and lot rent if this is your permanent residence (late payment notice required)
 - Moving expenses via licensed moving company when transitioning from a public housing authority.

Plan approval required.

- Member must not live in a residential facility or nursing facility.
- Funds will not be paid directly to the member.
- If the bill is in the spouse's name, a marriage certificate may be submitted as proof.

Call the community resource line at 866-331-1577 (TTY: 711) or email: KYMCDPopulationhlth@humana.com.

Value-Added Benefits

Workforce Development Program

- For members 18 and older up to 12 months of assistance to support each participant in planning for the future (e.g., education, training, financial counseling) and engaging in and maintaining meaningful work (e.g., job support and retention coaching); and 3 round trip bus vouchers for transportation when enrolled in the program where available. Member reimbursement for childcare of \$40 max per quarter, up to 4 times per year, for caretakers seeking job opportunities; member must participate in the Humana Workforce program in order to be eligible for reimbursement consideration.

Call the community resource line at 866-331-1577 (TTY: 711) or email: KYMCDPopulationhlth@humana.com.

Value-Added Benefits

Haircuts for Kids

- 1 standard haircut for members in grades K-12 valued at \$20, who upload a photo of their school registration form or school ID or class schedule, redemption period March through April and July through September.
 - Members may redeem this reward through the Go365 for Humana Healthy Horizons® app by uploading a photo of their school registration form, school ID, or class schedule.

Youth Academic Support

- Empowering students to reach their full academic potential, this benefit offers personalized tutoring services for members between ages 5 - 18. With up to 20 hours of tutoring available over a 10-week period each year, students receive targeted assistance to enhance their learning experience and excel in their studies.
 - Sign up for tutoring online at [LEO I Authentication](#).

Youth Development and Recreation

- Members 4 to 18 can receive reimbursement of up to \$250 annually for participation in activities such as: YMCA, swim lessons, computer coding classes, and music lessons.
 - For more information, call Member Services at 800-444-9137 (TTY: 711).

Sports Physical

- 1 sports physical per year for members ages 6 to 18 with an in-network provider.

Resources

Member Services

800-444-9137 (TTY: 711) - Monday – Friday, 7 a.m. – 7 p.m., Eastern time

Case Management

888-285-1121 (TTY: 711) - Monday – Friday, 8 a.m. – 6 p.m., Eastern time

Kentucky Medicaid Population Health Community Resource

866-331-1577 (TTY: 711) - Monday – Friday, 8 a.m. – 5:30 p.m., Eastern time

Prior Authorization Intake Team

888-285-1114 (TTY: 711) - Monday – Friday, 8 a.m. – 8 p.m., Eastern time

HumanaFirst® Nurse Advice Line

800-648-8097 (TTY: 711) - Available 24 hours a day, 7 days a week

Behavioral Health Crisis Line

833-801-7355 (TTY: 711) - Available 24 hours a day, 7 days a week

DentaQuest – Dental (Effective August 1, 2025)

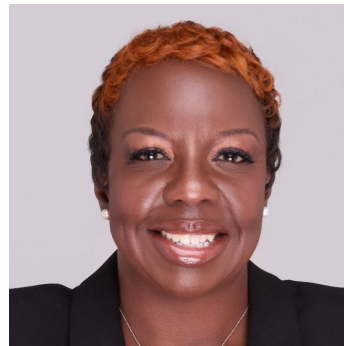
800-508-6787 - Monday – Friday, 8 a.m. – 6 p.m.

EyeQuest – Vision (Effective August 1, 2025)

844-870-3978 - Monday – Friday, 8 a.m. – 6 p.m.



Point of Contact



Yonbretta Stewart

Community Engagement
and Outreach Manager

ystewart@humana.com

(502) 762-7735

The background is a stylized illustration of a sports stadium. It features a green field with white yard lines, blue seating areas, and a blue sky with several stadium lights. A white rectangular box with a thin black border is positioned on the left side of the image, containing text. The text 'Passport by Molina' is in a large, bold, black font, and 'MCO ISSUER PRESENTATIONS' is in a smaller, all-caps, black font below it. In the background, behind the seating area, there are blue banners with the text 'QHP', 'Medicaid', and 'kynect' in white. The word 'kynect' has a curved line above it. The word 'QHP' appears twice. The word 'Medicaid' is in the center. The word 'kynect' is to the right of 'Medicaid'. The word 'QHP' is to the right of 'kynect'. The word 'QHP' is to the left of 'Medicaid'. The word 'QHP' is to the left of 'Medicaid'.

Passport by Molina

MCO ISSUER PRESENTATIONS

The background is a light teal gradient. In the center, there are three stylized human figures in a darker teal color, overlapping each other. The figures are simple, with circular heads and rectangular bodies.

2025

Benefits & Rewards

Passport by Molina Healthcare

At Passport by Molina Healthcare, our mission is to improve the health and lives of our members. We strive to meet the physical, social and emotional needs of each member and to strengthen the communities we serve.



Learn More about Your Benefits:



www.molinahealthcare.com/members

Health Risk Assessment

► Quality Service

► Health And Wellness
Resources

► Member Resources

Renewing your Benefits

Update Contact Info

Contact Us

► Medicare

Marketplace

Molina Help Finder

Your Benefits



Allergy Services	+
Ambulatory Surgical Center Services	+
Autism Spectrum Disorders	+
Cervical and Vaginal Cancer Screening (pap tests, pelvic exams)	+
Chemotherapy	
Chiropractic care (limits may apply)	+
Colorectal Screenings	+
Commission for Children with Special Health Care Needs	+
Dental Services	+
Dialysis End-Stage Renal Disease (ESRD)	+
Durable Medical Equipment	
Early & Periodic Screening, Diagnoses and Treatment (EPSDT) Services (health checks for children under age 21)	+
Emergency Room	
Emergency Ambulance and Air Transportation	+
Family Planning	+
First Steps Services	+
Hearing Services for Children under 21	+
HIV Screening	+
Hospice	
Immunizations	+
Inpatient Hospital Services	
Inpatient Mental Health Substance Use Services	
Inpatient Provider & Surgeon Services	+
Lab and Radiology Services (by provider or lab)	
Maternity Services	

Learn More about Your Benefits:

OB Ultrasounds	+
Occupational Therapy (OT)	+
Outpatient Hospital Services	+
Outpatient Mental Health & Substance Use Disorder	+
Physical Therapy	+
Podiatry Services	+
Prenatal and Postnatal Care	
Prescription Drugs	+
Preventative Care	+
Private Duty Nursing	+
Prosthetic & Orthotic Devices	
Provider Services (PCPs, specialists, provider assistants, nurse practitioners, nurse midwives)	+
Psychiatric Residential Treatment Facilities	+
Radiation Therapy	
Rural Health Clinic (RHC), Federally Qualified Health Center (FQHC), & Primary Care Center (PCC)	
Specialized Children's Services/Child Advocacy Centers	+
Speech Therapy	+
Targeted Case Management	+
Telehealth	+
Tobacco Cessation	
Transplant Services	
Urgent Care Visits	

Extra Benefits and Rewards:

Your Benefits



EXTRA Benefits and Rewards



Healthy Rewards



School & Sports Physicals



Weight Watchers



Free Phone/Data



Home Colon Cancer Screening Kit



GED



Asthma



Some exclusions apply. While supplies last. Benefits subject to change. To qualify, member must have Passport by Molina Healthcare Medicaid. If reward is offered for both Molina Medicaid and Medicare, it can only be claimed once and will be provided by member's primary insurance.

**Rewards must be claimed within 90 calendar days of receiving the qualifying service and member must be currently enrolled with Passport Medicaid at the time of claiming the reward.*

***Members assigned female at birth.*

Search for the care you need:



www.passport.sapphirethreesixtyfive.com

Good Morning!
Browse or search to find the care you need.

Plan/Program
Medicaid

City & State, County or Zip
Warren County, KY — ...

Search for Care by Specialty, Name, NPI or Keyword



Common Searches: Primary Care Behavioral/Mental Health Virtual Care Urgent Care Center Hospitals

Browse by Category

Find the provider you need. Just search
by using the care categories shown
here.

Medical Care



**Behavioral Health Including
Mental Health and Substanc...**



**Labs, Imaging and Other
Testing**



**Urgent and
Convenient Care**



**Hospitals and
Other Facilities**



**Medical Equipment and
Supplies**

**All
Categories**



Search for the care
you need:



www.passport.sapphirethreesixtyfive.com

[Pharmacy](#)

[Dental](#)

[Vision](#)

Other Types of Services

Are you looking for other types of services? Please note that these links will take you to external websites.



Pharmacy

[Click here](#)



Dental

[Click here](#)

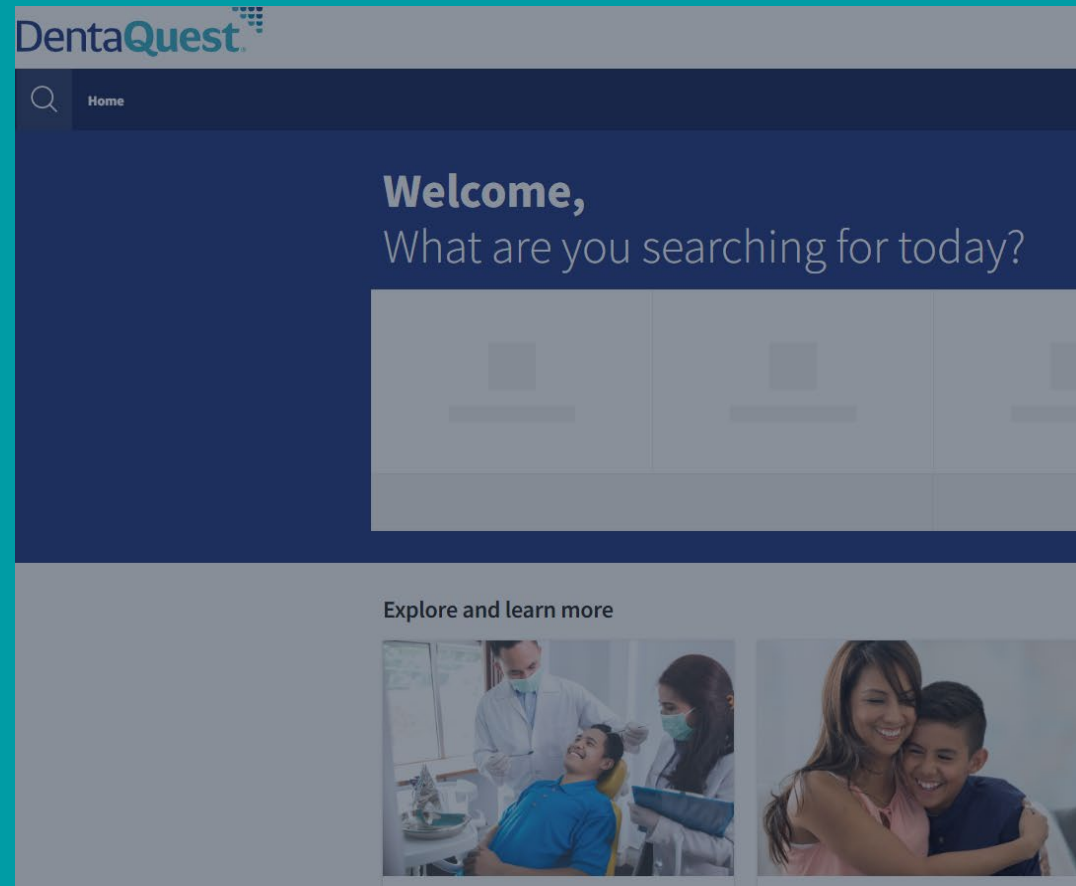


Vision

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LOCATE A PROVIDER

MARCH[®] Vision Care offers a diverse panel of ophthalmologists, optometrists and opticians that include family eye doctors, retail chains, and mall locations with extended evening and weekend hours.

MARCH[®] Vision Care makes every effort to ensure that we provide current, accurate data. Provider information may change frequently. As a result, recent changes may not be immediately reflected in Locate A Provider. If you have any questions regarding the availability of a provider, please contact [Customer Service](#).

American Disabilities Act: Members are entitled to full and equal access to covered services, including members with disabilities as required under the federal American with Disability Act of 1990 and Section 504 of the Rehabilitation Act of 1973.

MARCH[®] Vision Care complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. MARCH[®] Vision Care does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

Provider Information Changes: To report any errors in the provider information displayed on Locate A Provider, please email MARCH[®] at providerdemographics@marchvisioncare.com. You may also contact Provider Services at the applicable state phone number found on our [Contact Us](#) page. Providers only may submit any changes via the [Provider Demographics Form](#).

Provider demographics last updated on 10/9/2025 7:41:01 AM

Language services can be provided by calling the number on your identification card. For additional language assistance:
[Español](#) | [中文](#) | [Tiếng Việt](#) | [한국어](#) | [Tagalog](#) | [Русский](#) | [العربية](#) | [Kreyòl](#) | [Français](#) | [Polski](#) | [Português](#) | [Italiano](#) | [Deutsch](#) | [日本語](#) | [فارسی](#) | [Other Languages...](#)

LOCATE A PROVIDER

Carefully Select Your State and Plan

Select a State ▼

Select a County ▼

Select Your Plan ▼

NEXT



Clinical Care and Coordination
Program certified providers to
help members with diabetes.

2025 Healthy Rewards

The Details	Who's Eligible	The Value
General Wellness		
Complete your annual Health Risk Assessment (HRA)*	All members	\$25 gift card credit
Have an annual adult preventative screening visit*	All members 22 years and older	\$25 gift card credit
Have an annual young adult wellness visit*	Members 13- 21 years old	\$50 gift card credit
Have an annual well-child visit*	Members 3–12 years old	\$25 Gift Card Credit
Have up to 8 well-child visits on time*	Member birth - 30 months old	\$10 gift card credit PER VISIT (Max \$80 gift card credit)
Complete an annual dental exam*	All members	\$50 gift card credit
Get a colon cancer screening test* (Frequency dependent on specific screening test received)	Members 45 to 75 years old	\$25 gift card credit
Have a follow-up visit within 7 days of an inpatient hospital stay* (Medical & behavioral health/see guidelines)	All members	\$50 gift card credit
Behavioral health case management engagement*	Members <21 years old enrolled in the serious mental illness (SMI)/Serious Emotional Disturbance (SED) CM Care Model who remain engaged for at least 90 days	\$25 gift card credit

*Verification of services is required in the form of claims submission or provider attestation form. Attestation form can be found at www.passporthealthplan.com/benefits or members can call Passport member services at (800) 578-0603 and request a form be mailed to them.



2025 Healthy Rewards

The Details	Who's Eligible	The Value
Diabetes		
Have a yearly diabetic retinal eye exam*	Members with diabetes 18-75 years old	\$50 gift card credit
Complete a yearly HbA1c test*	Members with diabetes 18-75 years old	\$50 gift card credit
Complete Diabetes Self Management Education & Support (DSMES) classes*	All members with diabetes type 1 or 2	\$25 gift card credit
Women's Preventative Health		
Have a yearly mammogram*	Female members 40-74 years old**	\$25 gift card credit
Get a yearly pap test*	Female members 21-64 years old**	\$25 gift card credit
Get a yearly chlamydia screening*	Female members 16-24 years old**	\$25 gift card credit
Maternal Health		
Got to a prenatal visit during the first trimester or within 42 days of enrollment*	Pregnant moms 12 years & older	\$100 maternity gift card credit
Attend one postpartum visit 7-84 days after the birth of a baby*	New moms	\$50 maternity gift card credit

*Verification of services is required in the form of claims submission or provider attestation form. Attestation form can be found at www.passporthealthplan.com/benefits or members can call Passport member services at (800) 578-0603 and request a form be mailed to them.



2025 Healthy Rewards

The Details	Who's Eligible	The Value
Vaccines/immunizations		
Up to \$190 in gift card credits for members who complete the following vaccine series* <u>on or before child's 2nd birthday</u> (provider attestation required)*:		
• Rotavirus (\$10) • Hep A (\$10) • Hep B (\$10) • Tdap (\$10) • Hib (\$10)	• PCV (\$10) • MMR (\$10) • Varicella (\$10) • Polio (\$10)	Influenza (\$100) • 1st shot (\$50) • 2nd shot (\$50)
Up to \$100 in gift card credits for members who complete the HPV vaccine series:		
• 1st HPV, between ages 9 - 12 years (\$50) • 2nd HPV, between ages 9- 12 years (\$50)		
Other Rewards		
Stay connected and opt-in to email/text reminders as the head of household* (\$10 gift card credit)		

*Verification of services is required in the form of claims submission or provider attestation form. Attestation form can be found at www.passporthealthplan.com/benefits or members can call Passport member services at (800) 578-0603 and request a form be mailed to them.

2025 Value Added Benefits

What you can get	The details	Who's eligible	The value
Free phone/data	A FREE cellphone with unlimited talk, text & data	All members 18 and older	Free - no cost!
	A FREE cellphone with unlimited talk, text & data	Members 16-17 who are: • pregnant; or • have a shelter address	Free - no cost!
Weight Watchers	Get up to 13 weeks of Weight Watchers digital program free. Members must have approval from their doctor, an email address, and a computer or smart device with internet access	Members 18 years and older who are approved by their doctor and meet BMI requirements	\$40
GED	Vouchers to take the GED test free at testing centers and a gift card credit if you pass the exam	Members 18 years and older	Exam voucher (up to \$120 value) <u>and</u> \$50 gift card credit for passing
Asthma management	Members who sign up and complete the 3-month asthma disease Management Breathe with Ease® Program	All members in the asthma disease management program	Mattress Cover: \$60 value Pillow Cover: \$20 value

These benefits are subject to approval by the Kentucky Department for Medicaid Services.

Some exclusions apply. Benefits subject to change. To qualify, members must have Passport by Molina Healthcare Medicaid. If reward is offered for both Molina Medicaid and Medicare, it can only be claimed once and will be provided by member's primary insurance. *Rewards must be claimed within 90 calendar days of receiving the qualifying service and member must be currently enrolled with Passport Medicaid at the time of claiming the reward.

**Members assigned female at birth.



<https://www.molinahealthcare.com/members/ky/en-us/-/media/Molina/PublicWebsite/PDF/members/ky/en-us/Medicaid/MKY-VAB-final-flyer-EN-508.ashx>

Passport by Molina Healthcare offers EXTRA programs to help you stay healthy



To learn more and claim your reward, visit PassportHealthPlan.com/rewards or call (833) 986-0072.

Reward type: General wellness

The details	Who's eligible	The value
Complete a Health Risk Assessment (HRA)*	All members	\$25 gift card credit
Have an annual adult preventative screening visit*	All members ages 22 & older	\$25 gift card credit
Have an annual young adult wellness visit	Members ages 13 - 21	\$50 gift card credit
Have an annual well-child visit*	Members ages 3 - 12	\$25 gift card credit
Have up to 8 well-child visits on time*	Members birth - 30 months old	\$10 gift card credit PER VISIT (max \$80 gift card credit)
Complete an annual dental exam*	All members	\$50 gift card credit
Get a colon cancer screening test* (Frequency dependent on specific screening test received)	Members ages 45 - 75	\$25 gift card credit
Have a follow-up visit within seven days of an inpatient stay (no limits)*: • Medical stays go to PCP • Behavioral health stays go to behavioral health provider or PCP	All members	\$50 gift card credit
Participate in Behavioral Health Case Management Engagement*	Members <21 yrs old enrolled in the SMI/SED CM Care Model who stay engaged 90 days	\$25 gift card credit

Reward type: Diabetes

The details	Who's eligible	The value
Have a yearly diabetic retinal eye exam*	Members with diabetes ages 18 - 75	\$50 gift card credit
Complete a yearly HbA1c test*	Members with diabetes ages 18 - 75	\$50 gift card credit
Complete Diabetes Self Management Education & Support (DSMES) classes*	All members with diabetes type 1 or 2	\$25 gift card credit

Reward type: Women's health

The details	Who's eligible	The value
Have a yearly mammogram*	Female members ages 40-74**	\$25 gift card credit
Get a yearly pap test*	Female members ages 21-64**	\$25 gift card credit
Get a yearly chlamydia screening*	Female members ages 16-24**	\$25 gift card credit

Reward type: Maternal health

The details	Who's eligible	The value
Go to a prenatal visit during the first trimester or within 42 days of enrollment*	Pregnant moms ages 12 & older	\$100 maternity gift card credit
Attend one postpartum visit 7–84 days after the birth of a baby*	New moms	\$50 maternity gift card credit

Reward type: Vaccines/immunizations

Up to \$190 in gift card credits for members who complete the following vaccine series* on or before child's 2nd birthday (provider attestation required)*:

• Rotavirus (\$10) • Hep A (\$10)	• Heb B (\$10) • Dtap (\$10) • Hib (\$10)	• PCV (\$10) • MMR (\$10)	• Varicella (\$10) • Polio (\$10)	- Influenza (\$100) • 1st shot (\$50) • 2nd shot (\$50)
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Up to \$100 in gift card credits for members who complete the HPV vaccine series:

• 1st HPV, between ages 9–12 years (\$50)	• 2nd HPV, between ages 9–12 years (\$50)
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Reward type: Other rewards

Stay connected and opt-in to email/text reminders as the head of household* (\$10 gift card credit)

Value Added Benefit Reward type: Free phone/data

The details	Who's eligible	The value
A FREE cellphone with unlimited talk, text & data	All members 18 years and older	Free – no cost!
A FREE cellphone with unlimited talk, text & data	Members 16–17 who are : • Pregnant; or • Have a shelter address	Free – no cost!

Value Added Benefit Reward type: Weight Watchers

The details	Who's eligible	The value
Get up to 13 weeks of weight watchers digital program free. Members must have approval from their doctor, an email address, and a computer or smart device with internet access.	Members 18 years and older who are approved by their doctor and meet BMI requirements.	\$40 value

Value Added Benefit Reward type: GED

The details	Who's eligible	The value
Vouchers to take the GED test free at testing centers and a gift card credit if you pass the exam.	Members ages 18 & older	Exam voucher (up to \$120 value) and \$50 gift card credit for passing

Value Added Benefit Reward type: Asthma management

The details	Who's eligible	The value
Members who sign up and complete the 3-month asthma disease management Breathe With Ease® Program	All members in the asthma disease management program	Mattress cover: \$60 value Pillow cover: \$20 value

Some exclusions apply. Benefits subject to change. To qualify, members must have Passport by Molina Healthcare Medicaid. If reward is offered for both Molina Medicaid and Medicare, it can only be claimed once and will be provided by member's primary insurance.

***Rewards must be claimed within 90 calendar days of receiving the qualifying service and member must be currently enrolled with Passport Medicaid at the time of claiming the reward.**

****Members assigned female at birth.**





<https://www.molinahealthcare.com/members/ky/en-us/-/media/Molina/PublicWebsite/PDF/members/ky/en-us/Medicaid/MKY-Healthy-Rewards-Program-Info-EN-508.ashx>



Passport by Molina Healthcare

Healthy Rewards Program

Healthy rewards gift card credits can be used at more places than ever before!

- When you request your first Healthy Reward, you will be issued one Visa benefit card loaded with the credits you earned. From there, each time you submit a Healthy Reward, the new credits will be applied to the same benefit card within seven business days of verification.
- The category of gift card credits on the Healthy Rewards Attestation Form is based on the type of screening completed. Prenatal and postpartum care will be rewarded with baby items credits. All other screenings may be redeemed for any category listed below.
 - Baby Items
 - Whole Care
 - Gas at the Pump

Your rewards card works at many retailers, examples include (but not limited to):

- CVS
- Dollar General
- Food Lion
- Kroger
- Ruler
- Save-a-Lot
- Walgreens
- Walmart
- Food City
- And more!



How to use your rewards card:

1. **In-Store:** Shop in-store at approved retailers (see front of flyer). Checkout using your Visa benefit card.
2. **Online:** Shop online at approved retailers. Checkout using your Visa benefit card.
3. **At the Pump:** Pay for gas directly at the pump. Your Visa benefit card cannot be used in-store at gas stations.

You will select the category for your reward when filling out the Healthy Rewards form. You can spend your credits on lots of items, such as (but not limited to) those listed below.

Baby Items:

- Infant Diapers:
- Toddler pull-ups
- Baby wipes
- Formula
- Pack-n-play*
- Car seat

* Can only be purchased at Walmart (online or in store).

Gas at the Pump:

- Eligible ONLY when paying directly at the pump, not in-store.

Whole Care:

- Eligible groceries (same as eligible SNAP benefits)
- Over-the-counter products
- Home and personal supplies (body soap, shampoo, conditioner, dental care, paper towels, toilet paper, bathroom supplies, household cleaners, fan, air conditioners, space heaters)
- Bill pay (monthly bills such as mortgage, electric, heating, gas, sanitation, water, internet and phone)
- Pest control
- Assistive devices (grab bars, raised toilet seats, bedroom safety aids)
- Pet care
- Disaster recovery supplies

Exclusions:

- Your rewards card can be used to buy thousands of eligible items, but there are some things that do not qualify. Examples include (but are not limited to) alcohol, tobacco, firearms and cosmetics.
- The card cannot be used at an ATM for cash, and you cannot get cash back from purchases made with your rewards card.
- For a full listing of eligible items, retailers, and exclusions, visit HealthyBenefitsPlus.com/PassportHealthyRewards



<https://www.molinahealthcare.com/members/ky/en-us/-/media/Molina/PublicWebsite/PDF/members/ky/en-us/Medicaid/MKY-Member-Ed-Sessions-EN-508.ashx>

Passport by Molina Healthcare Member information sessions

Join us for a 30-minute member information session! These sessions will take place in-person and virtually, so you can choose how you would like to attend. We'll give you all the tips and tools to make 2025 your healthiest year yet!

There's no need to sign up ahead of time. Just click on the link below to join at a time that works best for you!

Member Education Sessions offered virtually

Tuesdays 12 p.m. EST/11 a.m. CST

Thursdays 3:30 p.m. EST/2:30 p.m. CST

Spanish Session Virtually – Thursdays

12 p.m. EST/ 11 a.m. CST

Member Education in-person at local One Stop Help Centers

Wednesdays 11 a.m. EST/10 a.m. CST

- Bowling Green, 636 US 31 W BY-PASS Suite A
- Covington, 1613 Madison Ave.
- Hazard, 124 Grand Vue Plaza
- Lexington, 127 W. Tiverton Way Suite 128
- Owensboro, 410 Southtown Blvd. Suite 3

Questions?

For more information or to find your community engagement specialist, call **(270) 698-9368**.

Session dates and times

Sessions run January 7 thru December 11, 2025 – except on holidays

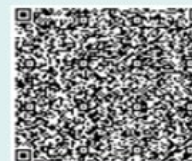


How to join a virtual session:

To join a session,
[click here](#), or scan
QR code

Meeting ID:
281 993 945 629

Passcode:
tU38sA





<https://www.molinahealthcare.com/members/ky/en-us/-/media/Molina/PublicWebsite/PDF/members/ky/en-us/Medicaid/MKY-Adult-and-Peds-Attestation-EN-508.pdf>



2025 Healthy Rewards Program Member form

Now it's easier than ever to get your Passport by Molina Healthcare healthy rewards! Simply fill out this form and send it back to our rewards team. Instructions and information on how rewards may be redeemed are at the end of the form.

All Passport members who meet the criteria and complete the screening(s) below can earn gift card credits. These important health screenings are covered by Passport at no cost to you.

*** Rewards must be claimed within 90 calendar days of receiving the qualifying service and member must be currently enrolled with Passport Medicaid at the time of claiming the reward.**

ADULT/PEDIATRIC

What visit did you have?  Check it below!

Annual preventative screening

☐ All members ages 22+ who get an annual preventative screening visit can earn a \$25 gift card credit

Date of visit: _____ Provider/Clinic name: _____

Physician signature: _____ Provider NPI: _____

Gift card credit choice: ☐ Whole care ☐ Gas at the pump ☐ Baby items

Annual young adult wellness visit

☐ Annual young adult wellness visit: Ages 13-21. Complete an annual wellness visit and earn a \$50 gift card credit.

Date of visit: _____ Provider/Clinic name: _____

Physician signature: _____ Provider NPI: _____

Gift card credit choice: ☐ Whole care ☐ Gas at the pump ☐ Baby items



https://www.molinahealthcare.com/members/ky/en-us/-/media/Molina/PublicWebsite/PDF/members/ky/en-us/Medicaid/HRA_R_Fillable.ashx



Department for Medicaid Services of Kentucky-
Health Risk Assessment

Kentucky Medicaid is committed to helping you stay healthy. Completing the Health Risk Assessment (HRA) will help us help you to reach or maintain your healthcare goals. Please take the time to answer each question as accurately as you can to complete Sections 1 and 2. Once completed submit the HRA to your MCO using the information in Section 3.

The information you share will remain private. If you have questions or need assistance with completing the HRA, contact your Managed Care Organization (MCO) member services at (800) 578-0603.

Member information

Name: Address:

Date of Birth: Age: Medicaid ID#:

Managed Care Organization:

Phone: Text messaging allowed: ☐Y ☐N

Email: Email contact allowed: ☐Y ☐N

Emergency contact name: Phone:

Date completed: Who completed the HRA:

Health Risk Assessment: Please select all answers which apply to you.

1. What is your housing situation today?
- ☐ I have housing
- ☐ I do not have housing (staying with others, in a hotel, in a shelter, living outside on the street, on a beach, in a car or in a park)
- ☐ I choose not to answer this question

How to submit your completed Health Risk Assessment

After you've finished the assessment, please return this document using the information in the chart below.

Managed Care Organization	Contact number	Email
Passport by Molina Healthcare	(833) 959-2398	KYCareManagement@MolinaHealthcare.com
Fax	Mail	Website
(800) 983-9160	5100 Commerce Crossings Drive Louisville, KY 40229	PassportHealthPlan.com

Managed Care Organization completes the section below once the HRA is returned.

Date returned by member or completed by member:

Method of completion:
☐ Phone ☐ Online ☐ Mail ☐ In person ☐ Mobile App ☐ Other

Reason for the HRA:
☐ Initial ☐ Annual ☐ Care plan ☐ Care needs ☐ Members request

Risk score: Health risks:

Chronic/complex condition(s):

Offered Care management: ☐ Yes ☐ No Date: Enrolled: ☐ Yes ☐ No

MCO services offered:

Community or resource referrals:



https://www.molinahealthcare.com/members/ky/en-us/-/media/Molina/PublicWebsite/PDF/members/ky/en-us/Medicaid/2023-Molina-KY-651_Member-ID-Card-Visual_FNL_R.ashx

What's On Your Passport ID Card?

Your Passport ID card can do a lot for you! It's the key to using all of the benefits you have as a member. You'll need to show this card at every appointment and at the pharmacy. So let's take a look at what's on the card and what you need to know.

- 1 The Name of Your Health Plan** - You are a Passport Health by Molina Healthcare member or "Passport" for short.
- 2 Your ID Information** - Your name or the name of the person covered and the Medicaid ID number given by the state.
- 3 Your PCP Info** - The name and phone number of your primary care provider or "PCP" for short. Your PCP is the main doctor who gives you most of your care and makes referrals.

FRONT



- 4 Pharmacy Info** - The information your pharmacy needs to fill your prescriptions. This includes a Rx BIN, PCN, and GRP number.

- 5 Emergency Care** - This part tells you who to call if you are not sure if you need to go to the emergency room.
- 6 Change Your PCP** - This part tells you who to call and how to change your PCP.
- 7 Phone Numbers to Keep Handy**
 - 24-Hour Nurse Advice Line – call for medical advice 24/7
 - Behavioral Health Crisis Line – call if you are having a mental health crisis
 - Member and Provider Assistance – call if you have questions about your medicines 24/7
 - Providers / Hospitals – your providers call this number if they have questions

BACK

Emergency Services: Call 911 or go to the nearest emergency room. If you are not sure whether you need to go to the emergency room, call your Primary Care Provider (PCP) or call our 24-Hour Nurse Advice Line. Follow up with your PCP after all emergency room visits.

To change your PCP, view eligibility information and more, please visit www.PassportHealthPlan.com/Questions? Please call Passport's Member Services at (800) 578-0603, TTY: 711, Monday through Friday, 7:00 am to 7:00 pm EST.

24-Hour Nurse Advice Line: (800) 606-9880, TTY: 711

Behavioral Health Crisis Line: (844) 800-5154

Pharmacy Program Phone Numbers:
Member and Provider Assistance (24/7): (800) 230-7628
Clinical / Prior Authorizations Only: (844) 336-2676

Providers:
For prior authorization, eligibility, claims or benefits call (800) 578-0775 or visit Provider Portal at www.Avality.com
Remit Claims to: Passport by Molina Healthcare,
PO Box 7114, London, KY 40742.
EDI Submission Payer ID: 61325

Questions or Need a New Card? Call us at (800) 578-0603 (TTY: 711) Monday - Friday, 7 a.m. - 7 p.m. EST.



https://www.molinahealthcare.com/members/ky/en-us/-/media/Molina/PublicWebsite/PDF/Providers/ky/medicaid/InterpreterServices_R.pdf

How to Access Interpreter Services for Passport Members

Passport by Molina Healthcare (Passport) offers free interpreter services for our Limited English Proficiency (LEP) Members. Interpreter services can help with:

- Making an appointment
- Talking with a doctor or nurse
- Getting emergency care
- Filing a complaint, grievance, or appeal
- Getting information about taking medicine
- Follow up about prior approval for a needed service
- Talking with Passport team members, such as Member Services or Care Management



Services include spoken language and American Sign Language interpretation.

What you need to know when scheduling an interpreter:

- Telephone interpreters can be requested on demand or scheduled in advance.
- Face to face interpreter requests are available virtually or in person and must be scheduled in advance.
 - Virtual: at least 24 hours in advance
 - In person: at least 3 business days in advance

To schedule interpreter services, contact Passport at the numbers below:

Members:	Providers:
(800) 578-0603	(800) 578-0775



https://www.molinahealthcare.com/members/ky/en-us/-/media/Molina/PublicWebsite/PDF/members/ky/en-us/Medicaid/Molina-KY-1474_Weight-Watchers-Form_FNL_R.pdf

Weight Watchers Referral Form

Members:

- ☐ Must be enrolled with Passport by Molina Healthcare Medicaid
- ☐ Must be 18 years or older and have a BMI of ≥ 27
- ☐ Cannot be pregnant at the time of referral
- ☐ Cannot have an active diagnosis of anorexia and/or bulimia

PCP Information

Date of Referral	Name	Phone Number
------------------	------	--------------

Clinic Name

Member Information

Name	Passport ID Number	Date of Birth
------	--------------------	---------------

Member Address

Telephone Number	*Email Address (required)
------------------	---------------------------

Date Completed	Who is Completing This Form for You?
----------------	--------------------------------------

Does the member have any of these?

- ☐ Asthma
- ☐ Congestive Heart Failure (CHF)
- ☐ Coronary Artery Disease (CAD)
- ☐ Diabetes
- ☐ Hypertension
- ☐ Obesity
- ☐ Prediabetes
- ☐ Other: _____
- ☐ Does not have any conditions _____



<https://www.molinahealthcare.com/members/ky/en-us/-/media/Molina/PublicWebsite/PDF/members/ky/en-us/Medicaid/MKY-Member-Handbook-EN-508.pdf>



Your Member Handbook

Kentucky

Passport by Molina Healthcare
Last updated 5/2025

PassportHealthPlan.com





https://www.molinahealthcare.com/members/ky/en-us/-/media/Molina/PublicWebsite/PDF/members/ky/en-us/Medicaid/INTAPP_HLTH04559Wheretogoforcarebrochure_30057OTHM DKYEN_nob_FNL_R.ashx

Where to Go for Care

When you're sick, you should first call your primary care provider or "PCP" to schedule an appointment. Your PCP is the main doctor or nurse practitioner who sees you when you feel sick or need your annual physical.

You can call your PCP's office anytime of the day or night— 24 hours a day, 7 days a week. If you call after hours, the provider on call will tell you if your issue can wait until you can see your PCP or if you need to get care more quickly.

- Unless you are having a true emergency, always call your PCP first.
- You can also call the **Nurse Advice Line** when you are not sure what type of care you need. Call **1-800-606-9880** and a registered nurse will answer your questions and help you decide what to do next.

What are my options?

Care Option	Hours	Description	
Your PCP's Office	Office hours vary and may include some evening and weekend hours.	Your PCP is usually where you go when you need non-emergency care like your annual physical exam or short term illnesses.	
In-Network Retail Health Clinic	Typically normal, weekday business hours plus weekend hours.	Walk-in clinics are inside stores or pharmacies and can treat minor medical problems.	
Urgent Care Center	Typically evenings, weekends and holidays	Urgent care centers are used when you need immediate care and your doctor cannot see you. Call your PCP first to see if your medical need requires urgent care.	
Emergency Room (ER)	24 hours/day, 7 days/week	For medical emergencies that will threaten your life or long-term health if you do not get care right away.	
Nurse Advice Line	24/7 advice from a registered nurse	Helps you decide where to seek care. Can answer health related questions and questions about your medical condition.	

Where should I go for care?

Condition	PCP	Retail Health Clinic	Urgent Care Center	Emergency Room
Sprains	✓		✓	A true emergency is when your problem is a threat to your life or can badly harm your health if you do not get care right away. Some Examples: • Head or eye injuries • Car accidents with an injury • Physical attack or rape • Trouble breathing • You cannot move (paralysis) • Poisoning • Seizures • Possible broken bones • Gun or knife wounds • Bleeding that won't stop • Suicidal thoughts • Chest pain • Overdose
Animal bites	✓		✓	
Stitches	✓		✓	
Annual exam	✓			
Minor Headaches	✓	✓	✓	 - If you have an emergency, call 911 or go to the nearest ER or hospital. - If you go to the ER, call your PCP the next day to set up a follow-up visit. - If you need help scheduling your follow-up, call Member Services at 1-800-578-0603 (TTY: 711), Monday through Friday 7 a.m. to 7 p.m. EST.
Back pain	✓	✓	✓	
Aches and pains	✓	✓	✓	
Minor allergic reaction	✓	✓	✓	
Minor burns	✓	✓	✓	
Bumps, cuts, scrapes	✓	✓	✓	
Rash or skin irritation	✓	✓	✓	
Eye swelling, redness or pain	✓	✓	✓	
Diarrhea or Upset Stomach	✓	✓	✓	
Discomfort when you pee	✓	✓	✓	
Sore Throat	✓	✓	✓	
Earache	✓	✓	✓	
Flu	✓	✓	✓	
Colds and Coughs	✓	✓	✓	
Vaccinations	✓	✓	✓	



<https://www.molinahealthcare.com/members/ky/en-us/-/media/Molina/PublicWebsite/PDF/members/ky/en-us/Medicaid/MKY-Transportation-flyer-EN-508.ashx>

Transportation



Emergency Transportation:

If you have a life threatening medical emergency and need emergency transportation (ambulance), call 911.



Non-Emergency Transportation:

Non-emergency transportation is available if you need a ride to a covered healthcare service, such as a doctor's appointment.

How to get non-emergency transportation:

Kentucky Medicaid will pay to take some members to get medical services covered by Kentucky Medicaid. If you need a ride, you must talk to the transportation broker in your county to schedule a trip. You must call to schedule your trip 72 hours (3 full days) before the appointment.

Each county in Kentucky has a transportation broker. You can use the transportation broker for a ride to an appointment if you or your spouse don't own a car or cannot use the car. Call your county's transportation broker to learn what steps you need to take if you or someone in your household owns a car but you cannot use it.

If you have questions or concerns or are denied a Non-Emergency Healthcare Transportation service, call 1-888-941-7433 and a Medicaid Specialist at the Kentucky Transportation Cabinet can assist you.

If you need additional help, call Passport member services at (800) 578-0603.

You can schedule a ride with a Transportation Broker Monday - Friday from 8am-4:30pm and on Saturday from 8am-1pm.

Rides are available to and from covered medical services Monday - Friday from 6am-8pm and Saturday from 8am-1pm.

All children under the age of thirteen (13) must have a parent or guardian, or a designee of the parent/guardian to accompany the child during transport.

Transportation Brokers

Note: This list is current as of January 2025. For the most current listing, visit <https://transportation.ky.gov/TransportationDelivery/Pages/Human-Services-Transportation.aspx>.

Region	Counties	Broker	Toll-Free Number	Local Phone Number
1	Ballard, Calloway, Carlisle, Fulton, Graves, Hickman, Marshall, McCracken	Audubon Area Community Service, Inc (GRITS)	(800) 816-3511	(270) 686-1651
2	Caldwell, Christian, Crittenden, Hopkins, Livingston, Lyon, Muhlenberg, Todd, Trigg	Pennyrile Allied Community Services (PACS)	(800) 467-4601	(270) 886-6641
3	Daviess, Hancock, Henderson, McLean, Ohio, Union, Webster	Audubon Area Community Service, Inc (GRITS)	(800) 816-3511	(270) 686-1651
4	Breckinridge, Grayson, Hardin, Larue, Marion, Meade, Nelson	Audubon Area Community Services, Inc. (GRITS)	(800) 816-3511	(270) 686-1651
5	Adair, Allen, Barren, Butler, Edmonson, Green, Hart, Logan, Metcalfe, Simpson, Taylor, Warren	LKLP Community Action Council (LKLP)	(800) 245-2826	(606) 487-1872
6	Bullitt, Henry, Jefferson, Oldham, Shelby, Spencer, Trimble	Federated Transportation Services of the Bluegrass (FTSB)	(888) 848-0989	(859) 233-0066
8	Anderson, Boyle, Casey, Franklin, Garrard, Jessamine, Lincoln, Mercer, Scott, Washington, Woodford	Bluegrass Community Action Partnership (BGCAP)	(800) 456-658	(502) 695-4290
9	Boone, Campbell, Carroll, Gallatin, Grant, Kenton, Pendleton and Owen	Federated Transportation Services of the Bluegrass (FTSB)	(888) 848-0989	(859) 233-0066
10	Fayette	Federated Transportation Services of the Bluegrass (FTSB)	(888) 848-0989	(859) 233-0066
11	Bourbon, Clark, Estill, Harrison, Madison, Montgomery, Nicholas, and Powell	Federated Transportation Services of the Bluegrass (FTSB)	(888) 848-0989	(859) 233-0066
12	Bell, Clinton, Cumberland, Knox, Laurel, McCreary, Monroe, Pulaski, Rockcastle, Russell, Wayne, Whitley	Rural Transit Enterprises Coordinated (RTEC)	(800) 321-7832	(606) 256-9835
13	Breathitt, Clay, Harlan, Jackson, Knott, Lee, Leslie, Letcher, Owsley, Perry, and Wolfe	LKLP Community Action Council (LKLP)	(800) 245-2826	(606) 487-1872
14	Floyd, Johnson, Magoffin, Martin, Pike	Sandy Valley Transportation Services (SVTS)	(800) 444-7433	(606) 886-7039
15	Bath, Boyd, Carter, Elliott, Greenup, Lawrence, Menifee, Morgan and Rowan	LKLP Community Action Council (LKLP)	(800) 245-2826	(606) 487-1872
16	Bracken, Robertson, Mason, Fleming, and Lewis	Licking Valley Community Action Program (LVCAP)	(800) 327-5196	(606) 845-0081



<https://www.molinahealthcare.com/members/ky/en-us/-/media/Molina/PublicWebsite/PDF/members/ky/en-us/Medicaid/MKY-Truconnect-EN-508.ashx>

The Federal Lifeline Program
provides qualified individuals with

FREE WIRELESS SERVICE



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Visit truconnect.com/molina/ky

Qualified Molina customers will receive a **free phone with unlimited talk, text, data, and international calling***, every month.

Qualifying Public Assistance Programs

- Supplemental Nutrition Assistance Program (SNAP/Food Stamps/Food Assistance)
- Medicaid
- Supplemental Security Income (SSI)**
- Federal Public Housing Assistance (FPHA)
- Veterans Pension or Survivors Pension Benefit

Annual Income Guidelines:

Household Size & Annual Income Limits

1 Member, \$21,128	5 Members, \$50,828
2 Members, \$28,553	6 Members, \$58,253
3 Members, \$35,978	7 Members, \$65,678
4 Members, \$43,403	8 Members, \$73,103

For each additional member, add \$7,425

Questions? Please Visit TruConnect.com/Molina or Call (844) 700-0795

Applicants must be at least 18 years of age or show proof of being an emancipated minor.

*Offer varies by state. Eligibility proof may not always be required, as the National Verifier often verifies eligibility through program databases. Documentation is only needed if the qualifying program isn't linked. For more details, visit www.truconnect.com/terms-and-conditions. All TruConnect plans offer free international calling to select destinations. Unlimited international calling is available to specific countries and is subject to plan restrictions. Certain countries may have minute caps or other limitations. All usage is subject to fair use policies, TruConnect's terms and conditions, and a limit of 15 unique international numbers dialed per month.

**Social Security benefits and/or Social Security Disability benefits are not program-based eligibility qualifiers. Social Security and/or Social Security Disability income may only be used to qualify for Lifeline Program participation under the income eligibility qualification method. This is a Lifeline service brought to you by TruConnect. Lifeline is a government assistance program. The service is non-transferable and only eligible consumers may enroll. Only one Lifeline benefit is allowed per household. Visit www.truconnect.com for details, restrictions, and general terms and conditions. This offer is valid for Passport Health Plan members by Molina Healthcare in Kentucky.



<https://www.molinahealthcare.com/members/ky/en-us/-/media/Molina/PublicWebsite/PDF/members/ky/en-us/Medicaid/Health-Ed/MKY-Basic-pregnancy-flyer-EN-508.ashx>

Maternity Care

Early care is important to the health of pregnant women and their babies. Here is information to help you and your little one!

Passport Health Plan by Molina Healthcare covers:

- Newborn screenings
- Pregnancy care
- Childbirth education classes
- OB/GYN and hospital services
- One medically necessary post-partum home visit for newborn care and assessment following discharge
- Care management services for high-risk pregnancies during pregnancy and for two months after delivery
- Hospital Care
- Inpatient care
- Outpatient care
- Labs, X-rays and other tests
- Prenatal, delivery, postpartum and maternity care (includes care for conditions that complicate pregnancy)
- Information on diet, exercise and other important health care services



If you think you are pregnant, please call your doctor for an appointment. It is important to start prenatal care as soon as you know you are pregnant. If you are pregnant when you enroll with Passport, please let us know so we can make sure you continue getting prenatal care.

Picking the right doctor for you

If you need help finding a doctor, please call Member Services at (800) 578-0603, Monday – Friday, 7 a.m. to 7 p.m. (TTY: 711). While Passport doesn't require referrals, check with your primary care provider to make sure there are no other referral needs for routine maternity care services.

After your baby is born

Make sure you go to your doctor right after you have your baby for follow-up care (3 – 8 weeks, 21 – 56 days after your baby is born). If you had a C-section, you should follow up within 1 – 2 weeks of surgery.

At birth, your child becomes a member of Passport. It is important that you tell your DCBS worker and Passport about your child's birth as soon as possible. You can find your local DCBS office at https://prdwebapps.chfs.ky.gov/Office_Phone/.

If you have any questions about your new baby's enrollment in Passport, please call Member Services.

We will make sure that:

- Your baby gets healthcare
- Your baby's doctor is listed on the Passport ID card

Added Prenatal/Maternity Programs

Here are some special programs to help you and your baby:

High Risk Pregnancy

We have a special team who can give you healthy pregnancy information. We can talk to you about your pregnancy to see if you have any high-risk conditions that could affect your pregnancy. If you have a high-risk condition, one of our nurse care managers will work with you one-on-one during your pregnancy. We'll make sure you have the best and healthiest outcome for you, your baby, and your family. Please call us at (866) 891-2320 (Option 4 for Kentucky), Monday – Friday 9 a.m. to 9 p.m. (EST).

Quit Smoking

Smoking during pregnancy can harm your baby. For free help to quit smoking:

- o Call (800) QUITNOW (784-8669)
- o Visit <https://women.smokefree.gov/pregnancy-motherhood>

WIC

Women, Infants and Children (WIC) Program offers pregnant women and young children free food and other services. If you are pregnant or recently delivered, talk to your PCP or maternity care provider about WIC. To find out if you are eligible for this program you can contact your local WIC agency. You will need to make an appointment to talk with them. You will need to show proof of Kentucky residency along with proof of income. For more information about WIC visit: <https://chfs.ky.gov/agencies/dph/dmch/nsb/Pages/wic.aspx>



We are here for you!

If you have any questions, please call our Member Services team at **(800) 578-0603**, Monday – Friday, 7 a.m. to 7 p.m. (TTY: 711).



https://www.molinahealthcare.com/members/ca/en-US/mem/medicaid/medical/coverd/hm/~media/Molina/PublicWebsite/PDF/providers/ca/MediCal/CORP-Standard-Tests-to-%20Expect-Brochure-EN_R.pdf

Routine Tests During Pregnancy

Staying Healthy While You Are Pregnant



Do you have questions?

Call our 24-hour Nurse Advice Line.
We are here to help you.



English:
(888) 275-8750

Español:
(866) 648-3537

TTY/TDD:
711

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All material in this brochure is for
information only. It does not replace
your provider's advice.

To get this information in other languages
and accessible formats, please call Member
Services. This number is on the back of
your Member ID card.

[MolinaHealthcare.com](https://www.molinahealthcare.com)

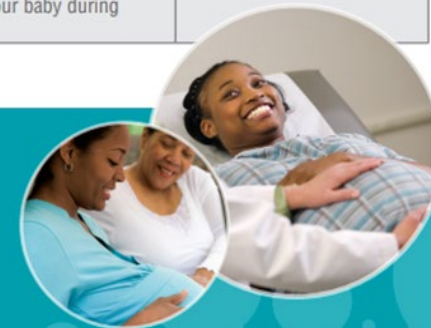


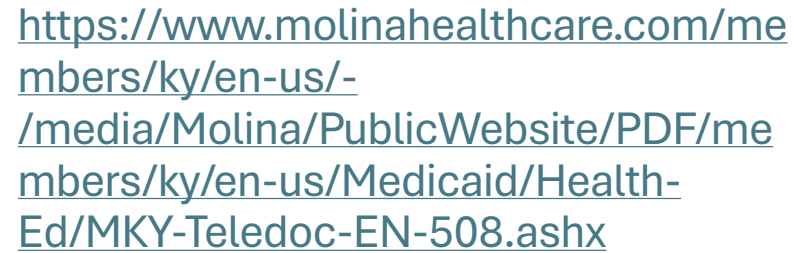
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Your provider will use tests to check **you and your baby's health** during your pregnancy.

Test	When it is done	What it is	How it is done
BLOOD TESTS	At your first prenatal visit	Blood tests show blood type, anemia, infections, STDs, hormone levels and immunities.	Blood is drawn and sent to a lab.
FIRST TRIMESTER SCREEN	At 10-14 weeks of pregnancy	This test detects higher risk of defects in your baby. The blood test looks for certain substances. The ultrasound measures the thickness at the back of your baby's neck.	Blood is drawn and sent to a lab. The ultrasound is done in your provider's office.
GLUCOSE CHALLENGE SCREENING	At 26-28 weeks of pregnancy	This test detects a risk for gestational diabetes.	Your provider gives you a sugary drink. One hour later, you have blood drawn for testing your blood sugar level.
URINE TEST	Every prenatal visit	This test can detect diabetes, infection or preeclampsia.	You collect urine in a small cup. Your provider dips test strips in the urine to detect certain substances.
GROUP B STREP	At 35 - 37 weeks of pregnancy	This test detects Group B Strep (GBS) in your vagina. This can cause infection to pass to your baby during delivery.	Your provider will swab your vagina and rectum to test for GBS.

Tests and screenings help your provider keep you and your baby healthy during your pregnancy. These tests are very safe. If you have questions about tests, be sure to ask your provider.







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Download the app  

*See KY 707 (MMBRD47876)_APP 6/20/2021

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<https://www.molinahealthcare.com/members/ky/en-us/-/media/Molina/PublicWebsite/PDF/members/ky/en-us/Medicaid/Health-Ed/MKY-Tobacco-Cessation-EN-508.ashx>

Yes, You Can Quit Smoking!

Are you thinking about taking that first step to quitting smoking, vaping or using other tobacco products?



If you are - congratulations! Thinking about quitting IS the first step!

THE BENEFITS OF QUITTING

- You'll look better, healthier, and have a new sense of control over your life.
- You'll get fewer colds.
- Your taste buds and sense of smell come back.
- You'll set a better example of healthy living for your children.
- You'll have more energy.
- Your speaking voice may improve because you are not irritating your throat.
- You'll increase the chance that children will not smoke.
- Your night vision improves so you can drive more safely.
- You'll have more spending money.



Are you ready to quit smoking?

If you're ready to quit smoking, we can help you! As a Passport member, you can receive smoking-cessation medicines. All you need is a prescription from your doctor. If you'd like to use smoking-cessation medicines, please talk with your doctor about which one is right for you. Your doctor can also give you counseling and support as you work towards quitting. When your doctor gives you a prescription, he or she will give you a type of medicine called Nicotine Replacement Therapy (NRT). See back for types of NRTs and how to use them!

Passport is always here to help you quit smoking!
If you want to quit smoking or if you're worried about a friend or family member's use:

Please call 1-800-QUIT NOW (1-800-784-8669) or 1-800-578-0603. TDD/TTY users may call 711.

- You may call from 8 am to 1 am Eastern Time, Monday through Sunday.
- You can speak with a health coach from 9 am to 5 pm.

Online resources are also available:

- Visit www.quitnowkentucky.org for more information.
- You can also find great resources tailored just for you at smokefree.gov

NRTs replace the nicotine in cigarettes that causes tobacco to be addictive. They can help with cravings and increase your chances of success. Here are some of the NRTs you can use:

Types of NRTs

How to use them:

Nicotine Transdermal Patches

You place the nicotine patch on your skin. It gives you a small and steady amount of nicotine.

Nicotine Lozenges

A nicotine lozenge looks like a piece of hard candy. You place it in your mouth and let it dissolve. As the lozenge dissolves, it releases nicotine into your body.

Nicotine Gum

You chew nicotine gum. As you chew the gum, it releases nicotine. You chew the gum until you have a tingling feeling, and then you place it between your cheek and gums.

Chantix®

Chantix® (Varenicline) is a pill you take by mouth. It helps reduce nicotine withdrawal and the urge to smoke. It also blocks the effects of nicotine from cigarettes. If you start smoking again while taking Chantix®, your sense of satisfaction will be lower, which helps your chances of quitting.



<https://www.molinahealthcare.com/members/ky/en-us/-/media/Molina/PublicWebsite/PDF/members/ky/en-us/Medicaid/MKY-Vaccine-VAB-Flyer-EN-508.ashx>

GET VACCINATED, GET REWARDED!

Earn gift card credits for getting your child's vaccinations on time!

ELIGIBILITY

\$190 in credits for members completing vaccine series on or before their 2nd birthday.*	\$10 Gift Card Credit	\$100 Gift Card Credit
Rotavirus	✓	
Hep A	✓	
Hep B	✓	
Dtap	✓	
Hib	✓	
PCV	✓	
MMR	✓	
Polio	✓	
Varicella	✓	
Influenza (\$50 for 1st shot and \$50 for 2nd shot)		✓
Up to \$100 in gift cards for members who complete the HPV vaccine series*	\$50 Gift Card Credit	
1st HPV Vaccine (between ages 9 and 12)	✓	
2nd HPV Vaccine (between ages 9 and 12)	✓	

* Rewards must be claimed within 90 calendar days.

HOW IT WORKS



Step 1

Take your child to get their age appropriate vaccinations on time.



Step 2

Complete the Healthy Rewards Attestation form and send back to us. Be sure to choose the category of credit you want. You can also send us your child's immunization certificate and then call us to choose the category of credit you want.



Step 3

Once verified, Passport will load your gift card with the credits you chose.

TO RECEIVE YOUR REWARD

- Please COMPLETE the Healthy Rewards Attestation Form. It can be found online at passporthealthplan.com/rewards, by scanning the QR code below or by calling Member Services at (800) 578-0603. Your provider may also print an attestation form by visiting passporthealthplan.com/rewards
- Print clearly and send it back to Passport in any of the following ways:
 - Email: MEInquiries@MolinaHealthcare.com
 - Fax: (833) 858-0430
 - Mail: Attn: Healthy Rewards and VAB Program
300 Oceangate, 6th Floor
Long Beach, CA 90802



*Some exclusions apply. Benefits subject to change. To qualify, members must have Passport by Molina Healthcare Medicaid. If reward is offered for both Molina Medicaid and Medicare, it can only be claimed once and will be provided by member's primary insurance.

Rewards must be claimed within 90 calendar days of receiving the qualifying service and member must be currently enrolled with Passport Medicaid at the time of claiming the reward. Provider attestation form required.



<https://www.molinahealthcare.com/members/ky/en-us/mem/medicaid/overvw/coverd/oshc.aspx>

Passport One Stop Help Centers



Training, education and access to special programs



Member walk-ins welcome



Free WiFi and computer access, meeting rooms, and telehealth capabilities



Face-to-face help with accessing healthcare and community resources



Owensboro Region 2	410 Southtown Blvd, Suite 3, Owensboro, KY 42303	270-698-9371
Bowling Green Region 4	636 US 31 W. By-Pass, Suite A, Bowling Green, KY 42101	270-698-9368
Lexington Region 5	127 W. Tiverton Way, Suite 128, Unit 4, Lexington, KY 40503	859-997-9336
Covington Region 6	1613 Madison Avenue, Covington, KY 41011	859-997-9335
Hazard Region 8	124 Grand Vue Plaza, Hazard, KY 41701	606-767-5701

GROWTH & COMMUNITY ENGAGEMENT



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2

MEET OUR *Great* TEAM!



KENTUCKY COUNTIES BY REGION

Region 1:

- Fulton
- Hickman
- Carlisle
- Ballard
- McCracken
- Graves
- Calloway
- Marshall
- Lyon
- Livingston
- Crittenden
- Caldwell

Region 2:

- Daviess
- Hancock
- Henderson
- Hopkins
- McLean
- Muhlenberg
- Ohio
- Union
- Webster
- Trigg
- Todd
- Christian

Region 3:

- Breckinridge
- Bullitt
- Carroll
- Grayson
- Hardin
- Henry
- Jefferson
- LaRue
- Marion
- Meade
- Nelson
- Oldham
- Shelby
- Spencer
- Trimble
- Washington

Region 4:

- Adair
- Allen
- Barren
- Butler
- Casey
- Clinton
- Cumberland
- Edmonson
- Green
- Hart
- Logan
- McCreary
- Metcalfe
- Monroe
- Pulaski
- Russell
- Simpson
- Taylor
- Warren
- Wayne

Region 5:

- Boyle
- Mercer
- Fayette
- Anderson
- Bourbon
- Clark
- Franklin
- Jessamine
- Woodford
- Harrison
- Owen
- Scott
- Nicholas
- Montgomery
- Powell
- Garrard
- Jackson
- Lincoln
- Rockcastle
- Madison

Region 6:

- Boone
- Campbell
- Gallatin
- Grant
- Kenton
- Pendleton

Region 7:

- Bracken
- Mason
- Robertson
- Fleming
- Bath
- Boyd
- Carter
- Elliott
- Greenup
- Lawrence
- Lewis
- Menifee
- Morgan
- Rowan

Region 8:

- Floyd
- Johnson
- Magoffin
- Martin
- Pike
- Wolfe
- Lee
- Bell
- Breathitt
- Clay
- Harlan
- Knott
- Knox
- Laurel
- Leslie
- Letcher
- Owsley
- Perry
- Whitley

ONE STOP HELP CENTERS (OSHC)

Bowling Green (Region 4)

- 636 US 31 W. By-Pass, Suite A
Bowling Green, KY 42101
270-698-9368

Covington (Region 6)

- 1613 Madison Ave.
Covington, KY 41011
859-997-9335

Hazard (Region 8)

- 124 Grand Vue Plaza
Hazard, KY 41701
606-767-5701

Lexington (Region 5)

- 127 W. Tiverton Way, Suite 128, Unit 4
Lexington, KY 40503
270-698-9368

Owensboro (Region 2)

- 410 Southtown Blvd, Suite 3
Owensboro, KY 42303
270-698-9371

Louisville (Region 3)

- Coming Soon!



LEADERSHIP TEAM



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United Healthcare

MCO ISSUER PRESENTATIONS



2026 Value-Added Benefits Overview

UnitedHealthcare Community Plan of Kentucky

United
Healthcare

About UnitedHealthcare



Consumers –
Deliver simplicity and earn trust



Community care system –
Be a catalyst for person-centered,
community-based health transformation



State partners –
Be the recognized leader in delivering
person-centered, community-based
health transformation.

Our mission

**Help people live healthier lives and
make the health system work
better for everyone**

Our vision

**Deliver the most affordable
coverage, simplest experience and
high quality, supported care**



Redeterminations

Other names/terms that may be used:

- Recertification
- Medicaid renewal

Process to determine if someone is still eligible to receive Medicaid benefits

- Income, assets, household size, etc....

Watch the mail for a letter from the Department of Community Based Services (DCBS) and UnitedHealthcare about Recertification

No longer qualify for Medicaid?

- Visit kynect.ky.gov to learn more about coverage options available

Find a Kynector in your area by searching "find a kynector authorized representative" in your web browser and click on the link marked "find a kynector". You can also provide this link to your patrons:

<https://kynect.ky.gov/benefits/s/auth-reps-assisters>



Important date ahead

Time to renew

Your health care renewal date is coming up soon. If you get a notice that says it's time to renew your health care coverage or the Department for Community Based Services needs more information, you need to respond before the due date on the notice. If you don't, you could lose coverage.

Ways to renew



Online

Go to [Kynect.ky.gov](https://kynect.ky.gov). Create or log into your account. Complete and submit forms online.



By mail

Print out needed forms and mail them to a local DCBS office.



In person

Visit a local DCBS office. Be sure to take needed documents with you.

If you've already renewed, no action is needed.

Questions? We're here to help.

Call toll-free 1-866-293-1796, TTY 711 7 a.m. – 7 p.m., Monday – Friday ET
myuhc.com/communityplan

No longer qualify?

Visit [Kynect.ky.gov](https://kynect.ky.gov) to learn more about coverage options available.

Es momento de renovar

La fecha de renovación de su atención médica se aproxima. Si recibe un aviso que dice que es hora de renovar su cobertura de atención médica o the Department for Community Based Services necesita más información, debe responder antes de la fecha de vencimiento que figura en el aviso. Si no lo hace, podría perder la cobertura.

Formas de renovar



En línea

Vaya a [Kynect.ky.gov](https://kynect.ky.gov). Cree una cuenta o inicie sesión en su cuenta. Complete y envíe los formularios en línea.



Por correo

Imprima los formularios necesarios y envíelos por correo a una oficina local del DCBS.



En persona

Visite una DCBS office local. Asegúrese de llevar los documentos necesarios.

Si ya la ha renovado, no es necesario que haga nada.

¿Tiene preguntas? Estamos aquí para ayudarle.

Llame en forma gratuita a 1-866-293-1796, TTY 711 de 7 a. m. a 7 p. m., de lunes a viernes ET
myuhc.com/communityplan

¿Ya no califica?

Visite [Kynect.ky.gov](https://kynect.ky.gov) para obtener más información sobre las opciones de cobertura disponibles.



Network

Provider Network

- To find providers in Network with the UnitedHealthcare Community Plan of Kentucky:

[Find a doctor, dentist or provider | UnitedHealthcare](#)





Covered Services

Covered Services

- Regular Healthcare
- Dental
- Behavioral Health
- Substance Use Disorder (SUD) Services
- Maternity Care
- Vision
- Family Planning
- Transportation Services
- Pharmacy
- Emergency Care
- Preventative care
- Home Health Services
- Hospice Care
- Nursing Home Services





2026 Value-Added Benefits (VAB)

Member Program and Benefits



Transportation

24 free one-way trips to community & medical services



Diapers & Wipes for Babies

Delivery of diapers & wipes after postpartum visit is completed



Car Seats, Stroller or Pack n' Plays

Moms can choose between a car seat, stroller or pack n' play after postpartum visit is completed



Healthy First Steps

Specialty care program focused on the health and well being of pregnant moms and their babies



Doulas

Pregnant women are paired with a Doula for support during and after pregnancy



Boys & Girls Clubs

UnitedHealthcare Community Plan of KY provides Boys and Girls Club memberships for after school care



Member Program and Benefits



Home Delivered Meals

14 Home Delivered Meals for members who meet eligibility requirements



OTC/Healthy Foods

\$100/year for Over-the-Counter products or healthy food



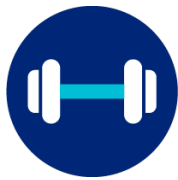
GED Works

Coaching, prep and testing for members 18 and up who want to get their diploma



Gift card for Participation

\$50 gift card for participation in quarterly Quality and Member Access Committee (QMAC) meetings



Gym Membership

Free Gym Membership for members with a Diabetes dx



Expungements

\$175 reimbursement for members who meet eligibility criteria for expungement services



Member Program and Benefits



Acupuncture

30 visits for members age 18+ with lower back pain or migraine diagnosis



On My Way Program

A free engaging and interactive program that informs Kentucky youth and helps prepare them for many real-world situations that lie ahead



WellHop

Online group conversations and fun educational tools to help women get ready for their new baby



24/7 Dr. Chat Service

At-home care through 24/7 telehealth services



*UHC Healthier Lives

Help with finding community resources



Boys & Girls Scouts

Yearly Membership and uniforms for members 5-18



Member Program and Benefits



Healthy Rewards

Members can earn gift cards for completing important preventive services



Smoking Cessation Services

Assistance to help members quit smoking, dipping and vaping



Equine & Music Therapy

12 sessions for members under 21 with ASD dx or in Adoption Assistance



Respiratory Kit

Members with asthma or COPD can get hypoallergenic pillowcases, peak flow meter, branded air purifier, and educational materials



Calm Health

App for personalized, evidence-based behavioral healthcare support.



Mindoula

Social and mental health support for members with SUD/OD, including pregnant members



Free Cell Phone Service

Eligible members can get no-cost mobile phone service through Assurance Wireless. The plan includes talk, text and data.





Maternal Health Supports & Programs

Maternal Health Programs



Get support to help your growing family thrive

Learn about extra benefits and services to help you and your baby



Healthy First Steps® – Get extra support to help you and your baby stay healthy, including the chance to earn up to \$50 in rewards

Doula services – Be paired with a doula to help and guide you during and after pregnancy

No-cost baby items – Attend your postpartum appointment to get a case of diapers and wipes – plus choose between a car seat, stroller or pack and play

Prenatal care – Help you and your baby stay healthy by going to all of your prenatal visits

UHC Doctor Chat – Talk with a doctor online 24/7 for non-emergency care

Community resources – Get help finding food, rides, housing, utilities and more

Breast pumps – Your plan covers a breast pump to help make breastfeeding more convenient

We're here to help

Want to know more about these benefits and services? Please talk to your Care Manager. You can also chat with an advocate through the **UnitedHealthcare app** or **myuhc.com/communityplan**.

WIC and SNAP – The Women, Infants and Children's program (WIC) is a nutrition program that provides pregnant women, infants and children up to 5 with food, health care referrals, breastfeeding support and counseling. The Supplemental Nutrition Assistance Program (SNAP), formerly known as food stamps, helps low-income members buy food for healthy meals

Breastfeeding resources – Your care manager can help connect you with support to make breastfeeding easier

Transportation – Get 24 one-way trips to medical and community services at no cost

Mom's Meals – Ask your Care Manager if you qualify to have postpartum meals delivered to you

Mindoula – Moms with OUD/SUD can get access to peer advocates that assist with resources within the community

Over-the-counter (OTC) benefit – Complete goals made by you and your Care Manager to earn up to \$100 for OTC products and healthy foods

Self-Care by Able To – Learn how this app can help with stress and emotional well-being by visiting [AbleTo.com/begin](https://www.ableto.com/begin)

GED Works – If you're age 18+ and want to get your diploma, you can get coaching, prep and testing at no cost

Smartphone – You may be eligible for a low-cost smartphone with talk, text and data

Safe sleep – Ask your Care Manager for info and resources to help your baby sleep safely

myuhc.com – Visit your member website to find care, get appointment reminders and more

Member incentive – Eligible members can earn \$25 for completing their postpartum care visit

Case management – Get extra support if you have a high-risk pregnancy, are pregnant and under age 21, or are a pregnant BIPOC with rising risk factors

Additional resources and benefits

NurseLine – Talk with a registered nurse 24/7 by calling 1-800-985-3856, TTY 711

Behavioral Crisis Line – Call 1-855-789-1977 24/7 for mental and emotional support





Diabetes Programs

Diabetes Programs

UHC offers education, programs, care management services, mobile apps, and coverage for diabetes supplies to support their members and their families in managing diabetes effectively



Your guide to diabetic care and services

Taking care of diabetes can be hard. We want to help make it easier. These benefits and services can help you stay as healthy as possible.



963-CSGL4228716 10/24

**United
Healthcare**
Community Plan



Testing and monitoring

\$25 Walmart gift card for A1C testing – An A1C test is an important blood test that measures your average blood sugar levels over time. Some members may be eligible for a gift card. First complete an A1C test this year. Then fill out the online form at myuhc.com/communityplan/healthwellness or call **1-855-422-8793**, TTY 711.

Livongo remote patient monitoring – Get 1-on-1 coaching, access to an advanced smart scale, guidance on healthy habits and nutrition plans, and more. Register online at start.livongo.com/UHCCPKY or call toll-free **1-800-945-4355**, 24 hours a day, 7 days a week. Use registration code: **UHCCPKY**



Healthy eating

Free diabetic-friendly meals – If you were recently discharged from the hospital and have been diagnosed with pre-diabetes or diabetes, get 2 weeks of diabetic-friendly meals shipped right to your house. Talk to your case manager for a referral.

Mom's Meals home delivery – Making healthy food choices is an important part of managing your diabetes. Members that have an A1C over 8 can enjoy 14 tasty, healthy meals each week for 8 weeks (a total of 112 meals). Plus get 2 nutritional coaching sessions to help manage your diabetes. Call **1-833-444-4038** to see if space is available to register for this pilot program.



Member tools and services

Free gym membership – Staying active is important to taking care of your diabetes. In 2025, members with an A1C over 8 are now eligible for a free gym membership. Call OnePass Member Services to see if you qualify at **1-877-504-6830**.

Use AI to help manage your diabetes – Empower Health is an AI-based tool that can text you reminders, real-time tips, self-management support and referrals.

Medication benefits from UnitedHealthcare and Kentucky Medicaid – Visit medimpact.com or call the member service team at **1-800-210-7628** to get started. Members are also covered for diabetic supplies like blood glucose meters, test strips, continuous glucose monitors, insulin syringes, and more.*



Your care team

We're here to help you make healthy choices and manage your diabetes.

Member services – Access our community resources by calling the number on the back on your member ID card to help you find food, rides, housing, utilizes and more.

Connect to care – Talk with a doctor online 24/7 for non-emergency care by visiting visituhcdoctorchat.com or by downloading the UHC app.

Our Behavioral Crisis Line is available toll-free all day, every day at **1-855-789-1977**.



myuhc – Download the myuhc app by scanning this QR code, or download it on the App Store® or Google Play®.

*<https://kyportal.medimpact.com/sites/default/files/2023-12/ken-tucky-medicaid-diabetic-supplies-list.pdf>



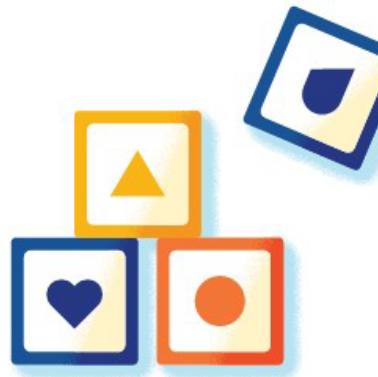


Goodwill Opportunity Accelerator Program

Goodwill Opportunity Accelerator Program



Get help building a successful career



Your overall well-being includes more than just your physical and mental health. It includes your financial health, too. That's why UnitedHealthcare and Goodwill are working together to expand the Goodwill Opportunity Accelerator® in your community.

What is the Goodwill Opportunity Accelerator®?

This initiative helps people get the training and support they need to boost their job prospects and make more money. It offers:



Career guidance and help finding a job. Get help and guidance from a career navigator to match your skills to the right work. You can also take part in other training and career-related services.



Job education and training. Learn essential job skills, like computer and digital literacy. Get certified for high-demand careers.



Extra support. Get help overcoming common barriers to job success. Goodwill can help connect you with support services and community resources to help you on your path to a rewarding career. Services vary by location.

Learn more

Ready to get started? Here's how:

Contact a Goodwill location near you.

goodwillky.org

Are you a UnitedHealthcare Community Plan member?

Call Member Services at 1-866-293-1796, TTY 711 to talk to a member advocate and get a referral.

United
Healthcare
Community Plan



Locations around the Commonwealth include:

- *BOWLING GREEN*
- *CORBIN*
- *ELIZABETHTOWN*
- *LEXINGTON*
- *METRO LOUISVILLE*
- *SOUTH LOUISVILLE*
- *WEST LOUISVILLE*
- *MOREHEAD*
- *PADUCAH*
- *PIKEVILLE*
- *SOMERSET*
- *THE SPOT: Young Adult Opportunity Center (16- to 24-year-olds) in the Louisville region*





Goodwill Industries of Kentucky
OPPORTUNITY CENTERS

Goodwill Industries of Kentucky
RETAIL STORES





Tools & Resources

Tools & Resources

Tools for UHC Members:

- UHC App
- UHC Website
- 24/7 NurseLine
- Dr. Chat

Member Resources:

- Care Management Program
- First Steps
- HANDS
- Non-Emergency Medical Transportation
- Application Assistance for members eligible for SSI/SSDI
- Substance Use Helpline





Quarterly Member Advisory Committee (QMAC)

Quality Member Access Committee (QMAC) Meeting

NEXT meeting: December 9th from Noon until 1 p.m. – Online Only

Purpose

- Allows committee members to provide feedback and insights about services and experiences

Focus

- Assess member satisfaction and work to identify solutions to improve our member's experience with UnitedHealthcare
- Maintain responsiveness to UnitedHealthcare members and communities ongoing and emerging needs to include:
 - Service delivery
 - Community engagement
 - Quality of covered services
 - Network issues, etc.

Feedback

- Will be used to modify the Quality program and enhance delivery of care and services to members
- Will also serve as a member satisfaction tracking tool to be used with other measurements to facilitate healthcare improvements

***Members can earn a \$50 Walmart gift card for attending**





Points of Contact

Craig_Catlett@uhc.com

Community Outreach Specialist

Bowling Green, Western KY, & Louisville

Lisa.Garrison-Ragsdale@uhc.com

Community Outreach Specialist

*Lexington, Louisville, Northern, Central & Eastern
KY*

Shannon_Carney@uhc.com

Director of Enrollee Services





How to Access Programs:

Call Member Services at
1-866-293-1796 TTY 711
Monday-Friday 7a-7p EST





Q&A/Feedback



Closing Survey

POLL QUESTION 1

On a scale from 1-5, how effective was this Office Hour in helping you understand each Issuer and the available plans for Plan Year 2026?

1. Extremely effective
2. Effective
3. Neutral
4. Somewhat effective
5. Not effective

Answer anonymously using the Polls box!



POLL QUESTION 2

After attending this Office Hour, on a scale from 1-5, how prepared do you feel to help Residents enroll in coverage?

1. Extremely prepared
2. Prepared
3. Neutral
4. Somewhat prepared
5. Not prepared

Answer anonymously using the Polls box!



THANK YOU FOR YOUR PARTICIPATION!

Stay connected! Email KHBE.Program@ky.gov for
any additional questions or support.