

Appendix VI STAR+PLUS Inquiries Chart

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This document is published to provide managed care organization (MCO) members and the general public an integrated resource of contact information for various governmental entities or their contractors. Internal or interagency inquiries are addressed in accordance with established procedures.

Q: Who can I contact to learn why services are not being provided?

A: Contact your MCO.

Q: When will my Supplemental Security Income (SSI) or SSI-related Medicaid begin, be reinstated, or why was it denied?

A: Contact the Social Security Administration (SSA) at 1-800-772-1213 (or the local SSA office).

Q: When will my Medical Assistance Only (MAO) Medicaid begin, be reinstated, or why was it denied?

A: For **members** to find out information regarding your benefits, you will need to log into your case record by clicking on [View my case](#). You need to log in at the bottom right on the screen. On the next screen, you will enter your user name and password and click the login button or create an account by clicking on the “Set up account” button. For **non-members**, contact the Texas Medicaid & Healthcare Partnership (TMHP) Statewide Medicaid Helpline at 1-800-335-8957 or call 2-1-1.

Q: I was placed on an interest list for the Home and Community-based Services STAR+PLUS Waiver (HCBS-SPW) program. Who can I contact for the status?

A: You can find the Texas Department of Aging and Disability Services (DADS) contact person by clicking [here](#) and entering your location or city and then click the start button to find the DADS Regional Intake office closest to your location.

Q: I need long term services and supports available through STAR+PLUS. How long will it take to begin receiving services?

A: For **members** who have an MCO, contact the MCO. If you are waiting to be enrolled in an MCO, call the Enrollment Broker at 1-800-964-2777 or 877-782-6440.

Q: What if I need long term services and supports and I do not have Medicaid?

A. You can find the DADS contact person by clicking [here](#) and entering your location or city and then click the start button to find the DADS Regional Intake office closest to your location.

Q: I am in a nursing facility and need information about the Money Follows the Person (MFP) process to assist me with transitioning to the community. Who can answer my questions?

A: For **members**, contact your MCO. For **non-members**, contact the DADS Regional Intake office at: <http://www.dads.state.tx.us/contact/search.cfm>. Enter your location or city and then click the start button to find the DADS Regional Intake office closest to your location.

Q: I will be moving or recently moved to a new area of the state. Who can I contact for continued services?

A: If receiving STAR+PLUS managed care services, contact your MCO for continuity of care and contact SSA or 2-1-1 to report an address change. If receiving services through the HCBS-SPW program, contact both the MCO and local Program Support Unit (PSU) office. Contact SSA or 2-1-1 to report an address change.

Q: Who can I contact to learn more about the HCBS-SPW program?

A: For **members**, contact the MCO. For **non-members** with general questions, contact the DADS Regional Intake office at: <http://www.dads.state.tx.us/contact/search.cfm>. Enter your location or city and then click the start button to find the DADS Regional Intake office closest to your location.

Q: I have a complaint about my MCO. Who can I contact?

A: Contact the Health and Human Services (HHS) Ombudsman Managed Care Assistance Team at 1-866-566-8989.

Q: I am not happy with my MCO and want to change to another one. Who can help me?

A: To discuss your concern, call the HHS Ombudsman Managed Care Assistance Team at 1-866-566-8989. If you are ready to change MCOs, contact the Enrollment Broker at 1-800-964-2777 or 877-782-6440.

Q: I have questions about my Medicare coverage. Who can I call?

A: For **Dual Demonstration members**, contact the Medicare and Medicaid Plan (MMP). For **Medicare Advantage Plan (MAP)** members, contact the MAP. For **Medicare fee-for-service** individuals, call 1-800-Medicare (1-800-633-4227).

Q: I am enrolled in an MCO but have questions about keeping my services. Will there be gaps in services if I move or go into a facility?

A: Contact your MCO for continuity of care questions.

Q: How will I receive my support services when I reach age 21?

A: For **members**, contact your MCO. For **non-members**, contact the assigned Comprehensive Care Program case manager.

Q: I have questions related to room and board or copay amounts for Assisted Living Facility (ALF) or Adult Foster Care (AFC). Who can help me?

A: For **members**, contact the MCO, 2-1-1 or the local Medicaid for the Elderly and People with Disabilities (MEPD) office. For **non-members**, contact 2-1-1 or the TMHP Statewide Medicaid Helpline at 1-800-335-8957.

Q: Who can help me with questions about receiving hospice services?

A: For **members**, contact your primary care provider. For **non-members**, contact your doctor to see if you qualify for hospice services.

Q: I received a denial for HCBS-SPW services. Who can help me?

A: Contact your MCO.

Q: Who can answer my questions about benefit coverage through my MCO?

A: Contact your MCO.

Q: Does my MCO provide dental services?

A: Contact your MCO.

Q: Who can answer my questions about private room availability at the ALF or AFC?

A: Contact your MCO.

The following information can be used by MCO members and service providers to obtain information from the MCO. The member services line can be used to provide general information about benefits. The service coordination line can be used to obtain information about a member's benefits or to obtain the name of a member's service coordinator.

Each MCO requires a caller to have the following information to release the name of a member's service coordinator: member's full name, member's date of birth, and/or member identification number (located on the member's card).

MCO Name	Member Services Hotline	STAR+PLUS Service Coordination Hotline	Medicare and Medicaid Plan (Dual Demo) Hotline
Amerigroup STAR+PLUS	1-800-600-4441	1-800-315-5385 Ext. 35765	1-855-878-1784
Amerigroup STAR+PLUS IDD	1-800-600-4441	1-866-696-0710 Ext. 36171	1-855-878-1784
Cigna-HealthSpring	1-877-653-0327	1-877-725-2688	1-877-725-2688
Molina Healthcare of Texas	1-866-449-6849	1-866-409-0039	1-866-856-8699

MCO Name	Member Services Hotline	STAR+PLUS Service Coordination Hotline	Medicare and Medicaid Plan (Dual Demo) Hotline
Superior HealthPlan	1-866-516-4501	1-877-277-9772	1-866-896-1844
UnitedHealthcare Community Plan	1-888-887-9003	1-800-349-0550	1-800-256-6533

The following acronyms/terms are referenced in this appendix:

Acronym/Term	Narrative
HCBS-SPW	Home and Community-based Services STAR+PLUS Waiver is a program that allows the delivery of long term services and supports that assist members to live in the community in lieu of a nursing facility. This is also known as SPW.
HHSC	Health and Human Services Commission
IDD	Intellectual and developmental disability
MAO	Medical Assistance Only is an individual who does not meet the financial criteria for Medicaid, but is Medicaid eligible because of functional criteria.
MAP	Medicare Advantage Plan is a Medicare health plan offered by a private company which contracts with the federal government to provide Medicare benefits (also referred to as Medicare Part C).
MCO	Managed Care Organization is a Medicaid health plan offered by a private company which contracts with HHSC to provide Medicaid benefits.
Medicare fee-for-service	Medicare individuals not enrolled in a MAP but rather receive "Original Medicare" managed by the federal government.
Member	Medicaid individuals enrolled in the STAR+PLUS program.
MMP	Medicare and Medicaid Plan is a health plan offered by a private company which contracts with the federal government and HHSC to provide benefits to individuals eligible for Medicaid and Medicare (available in Bexar, Dallas, El Paso, Harris, Hidalgo, and Tarrant service areas).
Non-members	Individuals not enrolled in the STAR+PLUS program.