



Important News About Your Healthcare Coverage

Our records show that you are currently enrolled with Molina Healthcare of Illinois (Molina) in the Medicaid Managed Care Integrated Care Program (ICP) and live in one of the following counties:

Christian, Logan, Macon, Menard, Piatt, or Sangamon

As of May 1, 2017, Molina will no longer be a Medicaid Manage Care health plan option for ICP members in your county. Beginning May 1, 2017 you will get your healthcare services in Medicaid fee-for-service (standard Medicaid). This change will not affect your Medicaid eligibility.

As a member of the Medicaid fee-for-service program:

- You will use your HFS medical card to get healthcare services.
- You can see any doctor that accepts the HFS medical card.
- You may have co-pays for doctor's visits, emergency room visits and prescription drugs.

If you need help finding a doctor or specialist in Medicaid fee-for-service, call Illinois Health Connect at 1-877-912-1999 (TTY: 1-866-565-8577). The call is free.

To find out if you will have co-pays or to ask other questions about your benefits, call the HFS Health Benefits Hotline at 1-866-468-7543 (TTY: 1-877-204-1012). The call is free. The questions and answers document included with this letter gives you more information about Medicaid fee-for-service.

Molina has been happy to serve you. Molina will continue to help you reach your health goals and use your benefits to the fullest through April 30, 2017. If you need healthcare services after April 30, 2017 remember to take you HFS Medical card to the pharmacy and doctor visits. If you have questions about this notice, call Molina's member services at 1 (855) 766-5462 (TTY: Illinois Relay at 7-1-1 or 1-800-526-0844). The call is free.

Molina Healthcare is committed to providing equal access to our services and benefits to all individuals, regardless of race, ethnicity, national origin, gender, sexual orientation, age, disability, or any other characteristic. We do not discriminate in the administration of our programs and services. We do not intend to discriminate in the provision of our services.

Molina Healthcare provides free aid and services to individuals with disabilities to ensure equal access to our services.

- Qualified in an appropriate interpreter
- Written in Braille or in large print or audio or electronic format or other format
- Provide free appropriate services to individuals with disabilities
 - Qualified interpreter
 - Information written in Braille

Individuals need services to meet the individual needs of the individual. We are committed to providing the services that Molina has agreed to provide to the individuals who are disabled in any way on the basis of race, ethnicity, national origin, gender, sexual orientation, age, disability, or any other characteristic.

Individuals who are disabled
 can receive services
 from Molina Healthcare
 to meet their individual needs.

Individuals can receive services in person or by telephone. We are committed to providing the services that Molina has agreed to provide to the individuals who are disabled in any way on the basis of race, ethnicity, national origin, gender, sexual orientation, age, disability, or any other characteristic.

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Your Extended Family.

Non-Discrimination Policy Section 1557
Molina Healthcare of Illinois, Inc.
ICP

English: We are committed to providing language assistance services to our members who do not speak English as their primary language.

Spanish: Estamos comprometidos a proporcionar servicios de asistencia lingüística a nuestros miembros que no hablan inglés como su idioma principal.

Polish: UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-800-368-7777.

Chinese: 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-368-7777 (中文：888)。

Korean: 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-368-7777번으로 전화해 주십시오.

Hindi: हमें प्रतिबद्धता है कि हमारे सभी सदस्यों को अपनी मातृभाषा में सहायता सेवाएं उपलब्ध हैं। यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-800-368-7777 पर कॉल करें।

Arabic: ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم هاتف الصم والبكم (888).

Russian: ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-368-7777 (телетайп: 888).

Gujarati: સુચના: જો તમે ગુજરાતી બોલતા હો તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-800-368-7777

Urdu: خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں۔ کال کریں 1-800-368-7777

Vietnamese: CHÚ Ý: Nếu bạn nói tiếng Việt, bạn có thể nhận được dịch vụ hỗ trợ ngôn ngữ miễn phí. Gọi số 1-800-368-7777.

Italian: Nota: Se parli italiano, sono disponibili servizi di assistenza linguistica gratuita. Chiama il numero 1-800-368-7777.

Hindi: ध्यान दें यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-800-368-7777 पर कॉल करें।

French: Attention: Si vous parlez français, des services d'assistance linguistique gratuits sont disponibles. Appelez le 1-800-368-7777.

Greek: ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 1-800-368-7777.

German: Hinweis: Wenn Sie Deutsch sprechen, sind Sprachdienstleistungen kostenlos verfügbar. Rufen Sie 1-800-368-7777 an.