Frequently Asked Questions – Consumer Focused

1. I got a letter that said I need to choose a new PH plan because the PH plan I have will not be available in the Medical Assistance(MA) Program after September 1st. What do I need to do?

You will not lose your health coverage. You must select a different PH plan by **August 16, 2022** by contacting PA Enrollment Services. If you do not select a new PH plan by **August 16, 2022**, a PH plan will be chosen for you. You can contact PA Enrollment Services by:

- Going to PA Enrollment Services (enrollnow.net), or
- Using their mobile app called PA Enrollment Services, or
- Calling them at 1-800-440-3989 (TTY: 1-800-618-4225) and select Option 6 to speak with a representative. You can call Monday through Friday, 8 a.m. to 6 p.m.
- 2. I got a letter that said my PH plan will continue to be one of the PH plans available in the MA program. What do I need to do?

This letter lets you know there are new PH plan options available to you. If you want to stay in your current PH plan, you do not need to do anything. If you want to change to a different PH plan, you can contact PA Enrollment Services by:

- Going to PA Enrollment Services (enrollnow.net), or
- Using their mobile app called PA Enrollment Services, or
- Calling them at 1-800-440-3989 (TTY: 1-800-618-4225) and select Option 6 to speak with a representative. You can call Monday through Friday, 8 a.m. to 6 p.m.
- 3. What should I consider if I need to choose another PH plan?

It is important for you to know if your current doctor(s), preferred hospital, or other providers are included in another PH plan's network to help you make a choice. PA Enrollment Services can help you to find this information. PA Enrollment Services offers charts with information that can help you compare plans to make the best choice for you. You can contact PA Enrollment Services by:

- Going to PA Enrollment Services (enrollnow.net), or
- Using their mobile app called PA Enrollment Services, or
- Calling them at 1-800-440-3989 (TTY: 1-800-618-4225) and select Option 6 to speak with a representative. You can call Monday through Friday, 8 a.m. to 6 p.m.

4. Who do I contact to change my PH plan?

You must contact **PA Enrollment Services**. You can do this in one of three ways:

- Go to PA Enrollment Services (enrollnow.net), or
- Use their mobile app called PA Enrollment Services, or
- Call them at 1-800-440-3989 (TTY: 1-800-618-4225) and select Option 6 to speak with a representative. You can call Monday through Friday, 8 a.m. to 6 p.m.

5. If I must change my PH plan, when do I need to make the change?

You must choose a different PH plan between June 22, 2022 and August 16, 2022. It's important for you to pick a new PH plan. If you were told that you must choose a new PH plan and you don't pick one, you will be automatically assigned to a PH plan.

6. If I want to change my PH plan because new options are available, when do I need to make a change?

You can choose a different PH plan between June 22, 2022 and August 16, 2022. You must make a change no later than August 16, 2022.

7. When will my new PH plan start?

Your new PH plan will start on September 1, 2022.

8. How can I get more information about the available PH plans?

For more information about the available PH plans, you can refer to the notice and comparison chart you received in the mail, and you can contact PA Enrollment Services:

- Visit www.enrollnow.net.
- Download the mobile app, PA Enrollment Services.
- Call PA Enrollment Services at 1-800-440-3989 (TTY: 1-800-618-4225) You can call Monday through Friday, 8 a.m. to 6 p.m.

9. Does this affect my behavioral health plan?

No. Your Behavioral Health Managed Care Plan will not change because of this. Call your Behavioral Health Managed Care Plan if you have questions about behavioral health coverage. To find your Behavioral Health plan, visit the DHS Behavioral Health Choices website.

10. Is it true that Aetna Better Health will no longer be a PH plan choice?

Yes, it is true that Aetna Better Health will no longer be an available PH plan in any zone in Pennsylvania. However, Aetna Better Health is committed to providing access to quality services for you through August 31, 2022. PA Enrollment Services will notify you via U.S. mail when it is time for you to select a new PH plan. You will not lose your health coverage; you will just need to choose a new PH plan by August 16, 2022 that will go into effect September 1,2022. You must make this choice by August 16, 2022 or a new PH plan will be chosen for you. The Department of Human Services is committed to helping you find a PH plan that will allow you to keep your current health care providers.

11. Does this change affect my children who have Aetna Better Health Kids (CHIP) coverage through the Children's Health Insurance Program (CHIP)?

No, this will not change your children's Aetna Better Health Kids (CHIP) coverage.

12. Is it true that United Healthcare will no longer be a PH plan choice anymore?

United Healthcare will still be an option in some parts of the state, but after September 1, it will operate in fewer counties.

United Healthcare will continue to be an available PH plan if you live in Southeastern Pennsylvania. If you live in these five counties and have United, you will not need to choose a new PH plan unless you want to choose a different PH plan.

Southeast Zone

- Bucks
- Chester
- Delaware
- Montgomery
- Philadelphia

If you live in the Lehigh/Capital zone or the Southwestern zone United Healthcare will no longer be available as a PH plan for you. United Healthcare is committed to providing access to quality services for you through August 31, 2022. You will need to choose a different PH plan if you live in these counties.

	Lehigh/Capital Zone		Southwest Zone
•	Adams	•	Allegheny
•	Berks	•	Armstrong
•	Cumberland	•	Beaver
•	Dauphin	•	Bedford
•	Franklin	•	Blair
•	Fulton	•	Butler
•	Huntingdon	•	Cambria
•	Lancaster	•	Fayette
•	Lebanon	•	Greene
•	Lehigh	•	Indiana
•	Northampton	•	Lawrence
•	Perry	•	Somerset
•	York	•	Washington
		•	Westmoreland

PA Enrollment Services will notify you via U.S. mail when it is time for you to select a new PH plan. You will not lose your health coverage. You will just need to choose a new PH plan that will go into effect on September 1, 2022. You must make this choice by August 16, 2022. The Department of Human Services is committed to helping you find a PH plan that will allow you to keep your current health care providers.

13. Does this change affect my children who have United Healthcare Community Plan for Kids (CHIP) coverage through the Children's Health Insurance Program (CHIP)?

No, this will not change your children's United Healthcare Community Plan for Kids (CHIP) coverage.

14. Is it true that Highmark Wholecare (formerly Gateway Health) will no longer be a PH plan choice anymore?

Highmark Wholecare (formerly Gateway Health) will still be an option in some parts of the state, but after September 1, it will operate in fewer counties.

Highmark Wholecare (formerly Gateway Health) will continue to be an available PH plan if you live in the Lehigh/Capital or Southwestern zones in Pennsylvania. If you live in these counties, you will not need to choose a new PH plan unless you want to choose a different PH plan.

Lehigh/Capital Zone

- Adams
- Berks
- Cumberland
- Dauphin
- Franklin
- Fulton
- Huntingdon
- Lancaster
- Lebanon
- Lehigh
- Northampton
- Perry
- York

Southwest Zone

- Allegheny
- Armstrong
- Beaver
- Bedford
- Blair
- Butler
- Cambria
- Fayette
- Greene
- Indiana
- Lawrence
- Somerset
- Washington
- Westmoreland

If you live in the Northwestern zone, Highmark Wholecare (formerly Gateway Health) will no longer be available to you as a PH plan. Highmark Wholecare (formerly Gateway Health) is committed to providing access to quality services for you through August 31, 2022. You will need to choose a different PH plan if you live in these counties.

Northwest Zone

- Cameron
- Clarion
- Clearfield
- Crawford
- Elk

- Erie
- Forest
- Jefferson
- Mercer
- McKean

- Potter
- Venango
- Warren

PA Enrollment Services will notify you via U.S. mail when it is time for you to select a new PH plan. You will not lose your health coverage. You will just need to choose a new PH plan that will go into effect on September 1,2022. The Department of Human Services is committed to helping you find a PH plan that will allow you to keep your current health care providers.

15. What is the last day I can choose one of the PH plans that is leaving the program or zone(s) – Aetna, Highmark Wholecare (formerly Gateway Health) and United Healthcare?

The last day for this choice is June 30th. Starting on July 1st consumers will not be able to request enrollment for the following PH plans or for some of the zones the PH plan now operates in:

- a. Aetna No longer available statewide
- b. Highmark Wholecare (formerly Gateway Health)
 - i. No longer available in the Northwest zone
 - ii. Still available in the Lehigh/Capital and Southeast zones
- c. United Healthcare
 - i. No longer available in the Lehigh/Capital or Southwest zones
 - ii. Still available in the Southeast zone

16. Does this change affect members of my household who have Aetna, UnitedHealthcare, or Highmark Wholecare (formerly Gateway Health) Dual Special Needs Plan (DSNP) coverage?

No. This does not change your DSNP coverage.

17. Can I keep my current doctor or other health providers if I need to choose a different PH plan?

The Department of Human Services is committed to making sure you can continue seeing your doctors and other providers. If you are now getting treatment, your new PH plan will make sure you keep getting the care you need. You can keep your current doctor for as long as 60 days. If your doctor or provider is not in your PH plan's provider network, they must agree to keep seeing you.

When it's time for you to choose a new PH plan, you will be able to look at all PH plan options and their provider networks and choose the one that is best for you.

18. What will happen to my services that require prior authorization, such as shift nursing?

If you have a prior authorization for shift nursing or other services requiring prior authorization, there are continuity of care rules that will help prevent a loss or break in services. If the services are for a child under age 21, the new plan will continue to honor the existing prior authorization for the rest of the time remaining on the prior authorization period given by your previous plan. If the services are for an adult age 21 or older, the prior authorized services will continue at the same level as with the previous plan for up to 60 days. When the authorization time period passes, your doctors will work with your new plan to renew the prior authorization for any services you continue to need.

19. Will my providers be paid for services I had before August 31st by PH plans leaving the program or zone(s) on September 1st?

Yes. PH plans leaving the program or zone(s) will continue to pay providers' claims after September 1st for eligible services they provided up to August 31st.

20. Will I get a new member ID card?

If you choose a new health PH plan, you will get a new member ID card in the mail.