

This is important information on how your coverage has changed, effective July 1, 2023, from that described in your earlier version of the AmeriHealth Caritas New Hampshire Member Handbook. You are not required to take any action in response to this document, but we recommend you keep this information for future reference.

We previously sent you a Member Handbook that includes information about your coverage. This notice is to let you know there are changes in your Member Handbook. Below you will find information describing these changes. Please keep this information for your reference.

If you have any questions, call Member Services at **1-833-704-1177 (TTY 1-855-534-6730) 24 hours a day, seven days a week.**

Changes to your Member Handbook:

Where you can find the change in your Member Handbook	On page 17, under Section 2.8 (<i>How to contact NH DHHS Customer Service Center Services</i>)
Original information	<p>The New Hampshire Department of Health and Human Services (NH DHHS) Customer Service Center provides help when you have questions about:</p> <ul style="list-style-type: none"> • New Hampshire Medicaid eligibility. • Granite Advantage eligibility. • Plan enrollment. • Information or instructions to the NH DHHS website and benefits managed plan enrollment. • The other benefits managed directly by NH DHHS as described in Section 4.4 (<i>New Hampshire Medicaid benefits covered outside the plan</i>), and • When you need a new or replacement New Hampshire Medicaid card.
New or corrected information	<p>The New Hampshire Department of Health and Human Services (NH DHHS) Customer Service Center provides help when you have questions about:</p> <ul style="list-style-type: none"> • New Hampshire Medicaid eligibility. • Granite Advantage eligibility. • Plan enrollment. • Information or instructions to the NH DHHS website and benefits managed plan enrollment. • The other benefits managed directly by NH DHHS as described in Section 4.4 (<i>New Hampshire Medicaid benefits covered outside the plan</i>), and • When you need a new or replacement New Hampshire Medicaid card. <p>While the plan can help you with your appeal or grievance, the NH DHHS Customer Service Center can also provide guidance.</p>
What does this mean for you?	Added back in “While the plan can help you with your appeal or grievance, the NH DHHS Customer Service Center can also provide guidance.” which dropped from prior publication.

Where you can find the change in your Member Handbook	On page 38, under Section 4.2 (<i>Benefits Chart</i>)
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<p>Original information</p>	<p>Adult dental</p> <p><u>Benefit</u> Adult members age 21 and older are covered for a range of dental services including: Two annual preventive services (cleanings).</p> <p>Diagnostic services (exams and X-rays).</p> <p>Restorative services (fillings).</p> <p>Some periodontal services (root planing and scaling).</p> <p>New Hampshire DHHS will continue to cover extractions, and that is a separate program.</p> <p><i>Benefits are covered only within the network. Prior authorization is not required for any of the above services.</i></p> <p><u>Dental provider network</u> To find a dentist in our provider network, go to www.amerihhealthcaritasnh.com and click on “Find A Provider”.</p>
<p>New or corrected information</p>	<p>Dental and oral health services</p> <p>The plan does not cover dental and oral health services. However, certain dental services are coordinated through New Hampshire Medicaid or its dental managed care plan, as follows:</p> <ul style="list-style-type: none"> • For members younger than 21 years of age, comprehensive dental services are coordinated through New Hampshire Medicaid, as long as the provider is enrolled with New Hampshire Medicaid. • For more information about dental benefits for members younger than 21 years of age, please contact the New Hampshire Medicaid Customer Service Center. Refer to Section 2.8 (<i>How to contact the NH DHHS Customer Service Center</i>). • Flouride varnish services are covered by the plan for some members. Refer to <i>Fluoride varnish</i> in the Benefits Chart. • For members age 21 years and older, covered dental and oral health services and related transportation are coordinated through the state’s dental managed care plan, Delta Dental of New Hampshire in partnership with DentaQuest. <p>For more information about the adult dental benefit, please call DentaQuest Member Services toll-free at 1-844-583-6151 (TDD Relay Access: 1-800-466-7566), Monday through Wednesday, 8 a.m. to 8 p.m., and Thursday and Friday, 8 a.m. to 5 p.m. ET.</p>
<p>What does this mean for you?</p>	<p>Certain dental and oral health benefits and related transportation services that were previously covered by AmeriHealth Caritas New Hampshire are now covered either by New Hampshire Medicaid or its dental managed care plan. Dental managed care services are effective April 1, 2023.</p>
<p>Where you can find the change in your Member Handbook</p>	<p>On page 64, under Section 4.4 (<i>New Hampshire Medicaid benefits covered outside the plan</i>)</p>



<p>Original information</p>	<p>The following services are not covered by our plan. However, these services are available through New Hampshire Medicaid as long as the provider is enrolled with New Hampshire Medicaid:</p> <p>Some prescription drugs are covered by New Hampshire Medicaid when billed through a pharmacy. They include but are not limited to, certain prescription drugs used to treat hemophilia, and the drugs Carbaglu® and Ravicti®. The pharmacy will bill New Hampshire Medicaid for these medications.</p> <p>Zolgensma®, a prescription gene therapy billed by providers through the plan, is covered by New Hampshire Medicaid for eligible members.</p> <p>Comprehensive dental services, including orthodontia.</p>
<p>New or corrected information</p>	<ul style="list-style-type: none"> • Certain cell and gene therapies, including Zolgensma®, billed by providers through the plan, are covered by New Hampshire Medicaid for eligible members. • Dental and oral health services are not covered by our plan. However, some dental and oral health services are available, as follows: <ul style="list-style-type: none"> – For members younger than 21 years of age, comprehensive dental services are coordinated through New Hampshire Medicaid, as long as the provider is enrolled with New Hampshire Medicaid. – For more information about the dental benefit for members younger than 21 years of age, please contact the New Hampshire Medicaid Customer Service Center. Refer to Section 2.8 (<i>How to contact the NH DHHS Customer Service Center</i>). – For members age 21 years and older, covered dental and oral health services and related transportation are coordinated through the state’s dental managed care plan, Delta Dental of New Hampshire in partnership with DentaQuest. <p>For more information about the adult dental benefit, please call DentaQuest Member Services toll-free at 1-844-583-6151 (TDD Relay Access: 1-800-466-7566), Monday through Wednesday, 8 a.m. to 8 p.m., and Thursday and Friday 8 a.m. to 5 p.m. ET.</p>
<p>What does this mean for you?</p>	<p>The change clarifies that certain cell and gene therapies, including Zolgensma®, are covered by New Hampshire Medicaid rather than the plan.</p> <p>In addition, for members ages 21 years and older, certain dental and oral health benefits, and related transportation services are covered through New Hampshire Medicaid’s dental managed care plan, Delta Dental of New Hampshire in partnership with DentaQuest, effective April 1, 2023.</p>

<p>Where you can find the change in your Member Handbook</p>	<p>On page 107, under Section 13.2 (<i>Definitions of important words</i>)</p>
<p>Original information</p>	<p>Annual enrollment period – The time each year when you can change your health plan.</p>
<p>New or corrected information</p>	<p>Annual enrollment period – The time each year when you can change your health plan (dates may vary). Each year you will receive advance notice from New Hampshire Medicaid about your options to change health plans.</p>
<p>What does this mean for you?</p>	<p>The change clarifies that advance notice will be sent each year about the annual enrollment period and your options.</p>

Discrimination is against the law

AmeriHealth Caritas New Hampshire complies with applicable federal civil rights laws and does not discriminate, exclude people, or treat them differently on the basis of age, race, ethnicity, national origin or ancestry, mental or physical disability, sexual or affection orientation or preference, gender identity, marital status, genetic information, source of payment, sex, creed, religion, health or mental health status or history, need for health care services, amount payable to AmeriHealth Caritas New Hampshire on the basis of an eligible person's or member's actuarial class or pre-existing medical/health conditions, whether or not the member has executed an advance directive, or any other status protected by federal or state law.

AmeriHealth Caritas New Hampshire provides free aids and services to people with disabilities. Examples of these aids and services include qualified sign language interpreters and written information in other formats (large print, Braille, audio, accessible electronic formats, other formats). We provide free language services, such as qualified interpreters and information written in other languages, to people with limited English proficiency or whose primary language is not English.

If you need these services, contact AmeriHealth Caritas New Hampshire 24 hours a day, seven days a week, at **1-833-704-1177 (TTY 1-855-534-6730)**.

If you believe that AmeriHealth Caritas New Hampshire has failed to provide these services or has discriminated against you in another way, you or your authorized representative (if we have your written authorization on file) can file a grievance with:

- AmeriHealth Caritas New Hampshire Grievances
P.O. Box 7389
London, KY 40742-7389
1-833-704-1177 (TTY 1-855-534-6730)

- You can also file a grievance by phone at **1-833-704-1177 (TTY 1-855-534-6730)**.
If you need help filing a grievance, AmeriHealth Caritas New Hampshire Member Services is available to help you. You can contact Member Services 24 hours a day, seven days a week, at **1-833-704-1177 (TTY 1-855-534-6730)**.

You may also file a discrimination complaint through the Department of Health and Human Services (DHHS) Office of the Ombudsman who has been designated to coordinate the efforts of NH DHHS's civil rights compliance for the Department:

State of New Hampshire, Department of Health and Human Services, Office of the Ombudsman
129 Pleasant Street
Concord, NH 03301-3857
1-603-271-6941 or 1-800-852-3345 ext. 6941
Fax: **1-603-271-4632, (TTY 1-800-735-2964)**
E-mail: **ombudsman@dhhs.nh.gov**

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at **<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>**, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, DC 20201
1-800-368-1019 (TTY 1-800-537-7697)

Complaint forms are available at
<http://www.hhs.gov/ocr/office/file/index.html>.

Attention: If you do not speak English, language assistance services, free of charge, are available to you. Call **1-833-704-1177 (TTY 1-855-534-6730)**.

Atención: se habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-833-704-1177 (TTY 1-855-534-6730)**.