Which Managed Care Organization (MCO) is right for me?

Not all doctors or hospitals accept all MCOs. So, before choosing one, ask yourself which of the MCOs:

- has all or most of the doctors you and your family see
- has the hospitals you and your family use
- has the specialists you or your family need
- offers extra benefits at no cost, (contact your MCO for details)

See inside panel for specific information about each MCO and for phone numbers and links to their website.

You can also scan this code with your QR scanner for more information.



If you have any questions or problems with your MCO call:

1-855-446-1245

Know Your Rights

As a Medicaid member, you have the right to:

- Respect, dignity, privacy, confidentiality and nondiscrimination;
- A reasonable opportunity to choose a Primary Care Provider and to change to another Provider in a reasonable manner;
- Consent to or refuse treatment and actively participate in treatment decisions;
- Ask questions and receive complete information relating to your medical condition and treatment options, including specialty care;
- Voice grievances and receive access to the Grievance process, receive assistance in filing an Appeal, and request a state fair hearing from the MCO and/or the Department for Medicaid Services (DMS);
- Timely access to care without barriers of communication or physical access;
- Prepare Advance Medical Directives in accordance with applicable federal and state laws;
- Assistance with Medical Records in accordance with applicable federal and state laws;
- Timely referral and access to medically indicated specialty care; and
- Be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation.

Any American Indian enrolled with an MCO eligible to receive services from a participating I/T/U provider shall continue to receive services from that provider if they are part of the MCO's network.

2019
Guide to Choosing
a Medicaid
Managed Care
Organization
(MCO)



See inside for MCO Ratings



2019 Guide to Choosing a Medicaid MCO



Rating Key – ★★★★★ Excellent

★★★★ Above Average

★★★Average

★★Below Average

★Much Below Average

	AETNA	ANTHEM	HUMANA	PASSPORT	WELLCARE
	855-300-5528	855-690-7784	855-852-7005	800-578-0603	877-389-9457
ADULT MEASURE	aetnabetterhealth.com/ kentucky	mss.anthem.com/ky	caresource.com/members/	passporthealthplan.com	wellcare.com/Kentucky
Rating of Health Plan	**	****	****	****	****
Got care as soon as needed when care was needed right away	****	****	****	****	***
Ease of getting care, tests, or treatment	****	****	****	***	****
Personal doctor explained things	****	***	***	***	***
Personal doctor listened carefully	****	****	**	**	***
Personal doctor showed respect	****	**	***	*	**
Personal doctor spent enough time	****	***	****	**	****
Got appointment with specialist as soon as needed	***	***	****	*	***
Customer service provided information or help	NA	NA	NA	***	****
Customer service treated member with courtesy and respect	NA	NA	NA	****	*
Health plan forms were easy to fill out	****	****	***	***	****
CHILD MEASURE					
Rating of Health Plan	**	*	***	****	***
Got care as soon as needed when care was needed right away	****	**	****	***	****
Got check-up routine appointment as soon as needed	****	****	****	***	****
Ease of getting care, tests, or treatment	****	**	****	**	****
Personal doctor explained things	****	***	****	*	****
Personal doctor listened carefully	****	****	****	**	****
Personal doctor showed respect	****	***	****	*	***
Personal doctor spent enough time	****	***	***	***	****
Got appointment with specialist as soon as needed	****	***	NA	**	***
Customer service provided information or help	****	*	NA	***	***
Customer service treated member with courtesy and respect	****	**	NA	*	***
Health plan forms were easy to fill out	***	****	***	***	****

NA-the health plan did not receive a rating because there were less than 100 members that answered that question.

The Star Ratings are based on a comparison of NCQA (National Committee for Quality Assurance) national averages and information submitted by the health plans.