Aligned D-SNP – FAQ and Information

Background: On January 1, 2026, we will launch an aligned Dual Special Needs Plan (D-SNP) in South Carolina. Aligned D-SNPs, also called Applicable Integrated Plans (AIPs), are Medicare Advantage plans that have a model of care and benefits designed for dual eligible individuals with both Medicaid and Medicare, ***and*** those benefits must be managed by one healthcare organization. Centene is the parent company of both Wellcare (Medicare Advantage) and the Absolute Total Care Medicaid plan.

There are many types of D-SNP plans (including fully integrated, highly integrated and coordinated plans), as well as plans that are aligned or unaligned, so we encourage you to visit the CMS Medicare Manage Care Manual to learn more about each type of plan. You may have patients who are in one of these other D-SNP plan types where integration, benefit design and coordination level varies. The information in this FAQ applies specifically to our aligned D-SNP.

What is the name of the aligned D-SNP plan in South Carolina?

- Wellcare Absolute Total Care Dual Align (HMO D-SNP) is our aligned D-SNP plan name. Aligned D-SNPs typically include "Dual Align" as part of the plan name. You will see this plan name and the new Wellcare By Absolute Total Care logo on correspondence and member ID cards

What change is occurring with Medicare-Medicaid Plans (MMPs)?

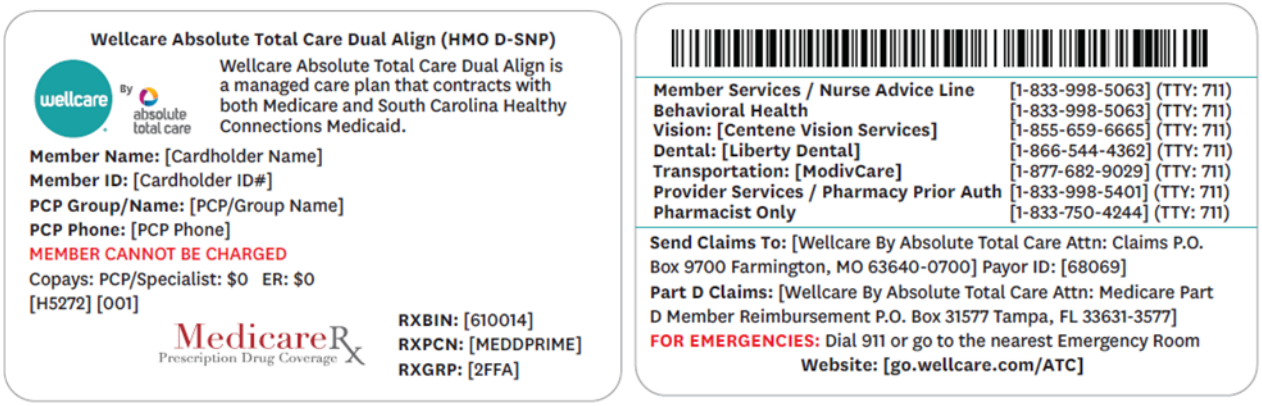
- Following direction from CMS, all Medicare-Medicaid Plans (MMPs) will sunset by December 31, 2025. Members previously enrolled in an MMP will be eligible to transition to an aligned D-SNP plan beginning January 1, 2026. Reminder: It is important that providers check eligibility prior to providing services as members can potentially change plans.

How are members notified of the changes to their plan?

- Through a letter, members currently enrolled in our MMP plan were notified they are enrolled into our aligned D-SNP plan effective January 1, 2026. Current members received communication via phone and email from the plan to notify them of this change.

How can I identify an aligned D-SNP member?

- Beginning January 1, 2026, members will present with an ID card that displays a new combined logo for Wellcare and the state Medicaid plan. Below is an example of the Wellcare Absolute Total Care Dual Align ID card:



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Will there be any changes to member benefits?

- Any benefit changes are reflected in the Annual Notice of Change (ANOC) document sent to members in September, whether they are new to a D-SNP plan or transitioning from another plan type.

I am currently a contracted provider with MMP, will I have to sign a new contract to continue seeing my patients enrolled in the D-SNP plan(s)?

- Providers contracted with MMP do not need to do anything additional to provide services patients enrolled in the Wellcare By Absolute Total Care D-SNP plan on or after January 1, 2026. Providers are encouraged to visit go.wellcare.com/ATC, select the For Providers webpage for manuals, forms, and resources related to claims submission, eligibility, prior authorization, and more. If you have additional questions about participation status, contact your Provider Engagement Account Manager or Provider Services at 1-833-998-5401.

Will there be a change to payment schedules or rates?

- There will not be a change in payment schedules or rates for providers contracted with MMP. If you have additional questions about rate or payment schedules, contact your Provider Engagement Account Manager or Provider Services at 1-833-998-5401.

Where do I submit claims?

- Providers can login to Availity Essentials or the Secure Provider Portal to manage claims and other tasks quickly and easily, including:
    - Submitting claims
    - Checking claims status
    - Submitting authorizations
    - Checking eligibility and benefits

- If your organization is new to Availity, start by registering with Availity today. Providers can also visit go.wellcare.com/ATC, click For Providers and Log In/Register to access the Secure Provider portal. Additional options are outlined in your Provider Manual available on the provider website at go.wellcare.com/ATC.

What will happen if I submit MMP claims after January 1, 2026?

- For dates of service prior to January 1, 2026, following Medicare requirements, providers will have 12 months following that date of service to submit the claim. Refer to the Provider Manual for more information on timely filing requirements.
- For dates of service after January 1, 2026, claims for eligible members will be re-routed to the correct team internally for processing under the new aligned D-SNP plan. Claims that do not meet member eligibility requirements are rejected upfront.
- Reminder: It is important that providers check eligibility prior to providing services as members can potentially change plans.

What will happen to unresolved claims prior to the membership transfer?

- Providers will continue to work directly with Absolute Total Care to address any claims for dates of service prior to the membership transfer of January 1, 2026. MMP claims will be processed according to timely filing provisions in the provider's MMP Participating Provider Agreement.

When can providers begin requesting prior authorization from Wellcare By Absolute Total Care members for dates of service on or after January 1, 2026?

- Providers can begin requesting prior authorization for dates of service on or after January 1, 2026, on **January 1, 2026**. We encourage you to check the Pre-Auth Check Tool to ensure that you are accessing the most current authorization requirements for dates of service on or after January 1, 2026. If an authorization is needed, you can log in to the Secure Provider Portal or Availity Essentials to submit and confirm authorizations.
- Providers can begin requesting prior authorization for Pharmacy Services for dates of service on or after January 1, 2026, on **January 1, 2026**.

How are MMP member authorizations being handled after January 1, 2026?

- Prior authorizations issued by MMP for dates of service on or after January 1, 2026will transfer with the member's eligibility to Wellcare By Absolute Total Care. Wellcare By Absolute Total Care will honor those authorizations. Because those authorizations will automatically transfer to Wellcare By Absolute Total Care, it is not necessary to request the authorization again when the member becomes eligible with Wellcare By Absolute Total Care.

How do I join the Wellcare By Absolute Total Care provider network?

- Providers interested in joining the Wellcare By Absolute Total Care provider network should submit a request to the Network Development and Contracting Department via email at atc_contracting@centene.com.

Will Absolute Total Care and Wellcare continue to offer current products or Medicare only?

- Yes, Wellcare Medicare only plans will continue to operate under current brands, product names and provider contracts, until further notice. Absolute Total Care will continue to offer Marketplace products under the Ambetter brand.

Who do I contact with a question regarding the new aligned D-SNP?

- Connect with your local Provider Engagement Account Manager if you have questions about our aligned D-SNP.