

STAR MEMBER HANDBOOK

STAR MANUAL PARA MIEMBROS



Parkland
HEALTHfirst

**WE'LL KEEP YOU COVERED.
PARKLAND LO SEGUIRÁ CUBRIENDO.**

For more information, please call **1-888-672-2277**.

Para más información, por favor, llame al **1-888-672-2277**.

TEXAS ★ **STAR**
PROGRAM
Your Health Plan ■ Your Choice

Parkland HEALTHfirst is part of the State of Texas Access Reform (STAR) program covering Medicaid patients in Dallas, Collin, Ellis, Hunt, Kaufman, Navarro, and Rockwall counties.

Parkland HEALTHfirst es parte del programa de Reforma del Acceso a Servicios en Texas (STAR) que cubre a clientes de Medicaid en los condados de Dallas, Collin, Ellis, Hunt, Kaufman, Navarro y Rockwall.

*Dallas Service Area — March 2013
Área de servicio de Dallas — Marzo de 2013*

Important Phone Numbers and Addresses

Call us:	Parkland HEALTHfirst Member Services Toll-free 1-888-672-2277 <ul style="list-style-type: none">• English/Spanish/Language Line Interpreter Services available• Member Services hours: 8 AM. – 5 PM, excluding state holidays• Phones answered by Nurse Line or leave voicemail after hours
Write us:	Parkland Community Health Plan Attention: Parkland HEALTHfirst Member Services P.O. Box 569005 Dallas TX 75356-9005
Visit our Website:	www.ParklandHMO.com
TTY:	For persons that are deaf or hard of hearing, please call through the Relay of Texas TTY line at 1-800-735-2989 and ask them to call the Parkland Member Services Line at 1-888-672-2277 .
Behavioral Health Services	<i>(includes mental health & substance abuse, English/Spanish/interpreter services available 24 hours/day, 7 days/week)</i> 1-888-800-6799 (toll-free)
Dental Programs	DentaQuest: 1-800-516-0165 MCNA Dental: 1-855-691-6262
Eye Care (Block Vision)	1-800-879-6901
Medicaid Managed Care Helpline	1-866-566-8989
Medicaid Managed Care Helpline TTY	1-866-222-4306
Medical Transportation Services <i>(services now provided by Logisticare)</i>	1-855-687-3255
Parkland 24-hour Nurse Line <i>(Bilingual and Language Line offered)</i>	1-888-667-7890 or 214-266-8773
Prescription Information	1-888-672-2277
STAR Program Help Line	1-800-964-2777

Parkland HEALTHfirst uses the services of Aetna Life Insurance Company (Aetna). Aetna is not the insurer or sponsor of Parkland HEALTHfirst.

What to do in an Emergency: Call **911** or go to the nearest hospital/emergency room if you think you need emergency care. If you go the emergency room, call us at **1-888-672-2277** to let us know. You should also call your doctor to schedule a follow up visit as soon as possible.

What to do in a Behavioral Health Emergency: Call **911** if you/your child is having a life-threatening behavioral health emergency. You can also go to the nearest emergency room or call **1-888-800-6799**.



WELCOME PARKLAND HEALTH*first* STAR Members

Parkland HEALTH*first* is a plan that makes it easier for you to get good medical care. With Parkland HEALTH*first*, you will get all the Medicaid benefits– and more. You will also be able to pick a doctor or health care provider from a list of doctors and health care providers close to where you live. The doctor or health care provider you pick will be your Parkland HEALTH*first* Primary Care Provider and will help you take care of all your healthcare needs.

If you or your child have or has a behavioral health emergency, go to the nearest Emergency Room or call toll-free at 1-888-800-6799 and someone will help you get care right away. You or someone on your behalf will need to call the behavioral health provider line at 1-888-800-6799 and let them know you had an emergency.

Here are a few important things you will need to do to help us give you the best care:

- Your primary care provider's name will appear on your Parkland HEALTH*first* ID Card. Check your ID card to make sure the information is correct.
- Make an appointment with your primary care provider soon to get to know your doctor.
- When you call your primary care provider for appointments, tell them you are a Parkland HEALTH*first* member.
- Call your primary care provider when you need care.
- Follow your primary care provider's advice.
- Always carry your Parkland HEALTH*first* ID card and Your Texas Benefits Medicaid card
- Use the hospital Emergency Room (ER) **only** for emergencies.

As a member of Parkland HEALTH*first* Health Plan you can ask for and receive the following information each year:

- Names, locations, telephone numbers, languages spoken (other than English) by network providers, and identification of providers who are not accepting new patients. The information provided will be, at a minimum, information on primary care physicians, specialists, and hospitals in the Dallas Service Area (Collin, Dallas, Ellis, Hunt, Kaufman, Navarro, and Rockwall counties).
- Any restrictions on the member's freedom of choice among network providers
- Member rights and protections
- Information on complaint, appeal and fair hearing procedures
- The amount, duration, and scope of benefits available under the contract in sufficient detail to ensure that members understand the benefits to which they are entitled
- How to get benefits including authorization requirements
- How members may get benefits, including family planning services, from out-of-network providers, and/or limits to those benefits
- How after hours and emergency coverage are provided and/or limits to those benefits, including:
 - What makes up emergency medical conditions, emergency services and post-stabilization services
 - The fact that prior authorization is not required for emergency care services

- How to obtain emergency services, including use of the 911 telephone system or its local equivalent
- The locations of any emergency settings and other locations at which providers and hospitals furnish emergency services covered under the contract
- The member has a right to use any hospital or other settings for emergency care and
- Post-stabilization rules.
- Policy on referrals for specialty care and for other benefits not furnished by the member's primary care provider
- HMO's practice guidelines

We wrote this Member Handbook to answer most of your questions about Parkland HEALTH*first*. We hope you read it right away and keep it in a handy place. Please feel free to call or write us if you have any questions or would like to make suggestions.

At Parkland HEALTH*first*, we have nurses and other people who can speak English and Spanish and are ready to help you at any time day or night. We have special services for people who have trouble reading, hearing, seeing, or speak a language other than English or Spanish. You can ask for the Member Handbook in audio, other languages, Braille or larger print. If you need an audiocassette or CD, we will mail it to you. To get help, just call or write Parkland HEALTH*first* Member Services at **1-888-672-2277**, or mail to Parkland Community Health, Attention: Plan Member Services, P. O. Box 569005, Dallas, TX 75356-9005. You may also visit our website at www.ParklandHMO.com.



Table of Contents

DO YOU HAVE QUESTIONS? WE HAVE ANSWERS!..... On PAGE

What if I need help understanding or reading the Member Handbook?	1
Information about the Parkland HEALTH <i>first</i> Identification Card (ID Card)	1
How to read your Parkland HEALTH <i>first</i> ID Card	1
How to use your Parkland HEALTH <i>first</i> ID Card	2
What do I do if I lose my Parkland HEALTH <i>first</i> ID Card?	2
Temporary Medicaid ID Card (Form 1027-A)	2
Information about Your Texas Benefits Medicaid Card	2
What do I need to bring with me to my doctor's appointment?	3
What is a primary care provider? How do I choose a primary care provider? Can a clinic be my primary care provider?	3
How can I change my primary care provider?	4
How many times can I change my primary care provider?	4
When will my primary care provider change become effective?	4
What if your primary care provider leaves Parkland HEALTH <i>first</i> ?	5
Can my primary care provider move me to another primary care provider for non-compliance?	5
What if I choose to go to another doctor who is not my primary care provider?	5
What is the Medicaid Limited Program?	6
Physician Incentive Plans	6
What if I want to change health plans?	6
Can Parkland HEALTH <i>first</i> ask that I get dropped from their Plan?	6
What Medicaid services do I get with Parkland HEALTH <i>first</i> ?	7
How do I get these services? How do I get a second opinion?	8
What services are not covered?	8
What about other Medicaid services or programs?	8
What extra benefits do I get with Parkland HEALTH <i>first</i> ?	9
Free Health Education Classes	9
What does Medically Necessary mean?	10
How do I get routine care?	11
What if I need urgent care?	11
What is emergency medical care?	12
Are emergency dental services covered?	13

What do I do if my child needs Emergency Dental Care?	13
What is post-stabilization?	13
How do I get medical care after my primary care provider's office is closed?	13
What if I get sick when I am out of town or traveling?	14
What if I need to see a special doctor (specialist)?	14
What services do not need a referral?	14
How can I ask for a second opinion?	15
How to get help if I have mental health, alcohol or drug problems?	15
What are my prescription drug benefits?	15
Eye care	16
How do I get Family planning services?	16
How do I get Texas Health Steps for my children?	17
What if I am a Migrant Farmworker?	18
How do I get dental services for my child?	19
Can someone interpret for me when I talk with my doctor?	19
How can I get a ride to medical services?	20
Attention: Female Members – OB/BYN Care	20
What if I am pregnant?	20
How are newborn babies signed up? Can I pick a primary care provider for my baby before my baby is born?	21
Can I switch my baby's health plan?	21
What is Case Management for Children and Pregnant Women (CPW)?	21
What type of services would my child or I receive?	22
Who do I call if I have special health care needs and need someone to help me?	22
What if I am not able to make decisions about my medical care?	22
What do I do if I have to move?	22
What happens if I lose my Medicaid coverage?	22
What if I get a bill from my doctor?	23
What if I have other health insurance in addition to Medicaid?	23
Member Rights and Responsibilities	23
What if I have a problem or I am not happy with Parkland HEALTHfirst or my healthcare?	26
What if my doctor asks for a service or medicine for me that's covered but Parkland HEALTHfirst denies or limits it?	27
What is an expedited appeal?	27
What if I am not happy with the solution of my problem? (Can I file ask for a State Fair	28

Hearing?)	
What is an expedited Fair Hearing?	29
How do I report someone who is misusing the Medicaid Program?	29
Annual Information	31
Parkland HEALTH <i>first</i> Privacy Notice	32

What if I need help understanding or reading the Member Handbook?

We have special services for people who have trouble reading, hearing, seeing, or speak a language other than English or Spanish. You can ask for the Member Handbook in audiocassette or other languages. You can also ask for the Member handbook in Braille or larger print. If you need the audiocassette, we will mail it to you. To get help, just call or write Parkland HEALTHfirst Member Services at **1-888-672-2277**, or mail to Parkland Community Health Plan, Attention: Member Services, P. O. Box 569005, Dallas, TX 75356-9005.

Information about the Parkland HEALTHfirst Identification Card (HEALTHfirst ID Card)

 Parkland HEALTHfirst Parkland Community Health Plan Dallas Service Area	 TEXAS STAR PROGRAM Your Health Plan ■ Your Choice	Member Services / Servicios para Miembros: 1-888-672-2277 Behavioral Health (NewSTAR) / Salud Mental: 1-823-600-6799 24 hours / 7 days per week / 24 horas del día siete días de la semana 214-268-6779 Parkland Nurse Line / Línea de Enfermeras de Parkland: 1-888-667-7389 only 214-268-6779 Block Vision of Texas, Inc. Services line / Línea de Servicios para Miembros de Block Vision of Texas, Inc.: 1-800-879-6001 Relay Texas TTY TDD: 1-800-735-3699	Pharmacy Coverage RUBIN 610631 RUPON ADV RUGRP RXPCH Pharmacist Use Only (877) 948-6023
Attention Doctor/Hospital—You Must Call 1-888-672-2277 For Precertification or Case Management			
MEMBER NAME: MEDICAID ID: EFF. DATE: PCP: PCP EFFECTIVE DATE: PCP TEL: Carry this card with you and present it at time of service.	MEMBER NOMBRE: MEDICAID NÚM: EFFECTIVO: PCP: FECHA DE EFECTIVIDAD EL PCP: TELÉFONO DEL PCP: Lleve esta tarjeta con usted y preséntela antes de recibir servicios.		
Directions for What to Do In An Emergency In case of emergency call 911 or go to the closest emergency room. After treatment, call your Primary Care Provider (PCP) within 24 hours or as soon as possible. For additional information regarding emergency services, please refer to your Member Handbook. Mail claims to this address: Claims Processing Center P.O. Box 61088 Phoenix, AZ 85082 Payor ID: 66917	In case of an emergency, please call 911	Instrucciones en caso de emergencia. En caso de emergencia, llame al 911 o vaya a la sala de emergencia más cercana. Después de recibir tratamiento, llame al proveedor principal (PCP) de su hijo dentro de 24 horas o tan pronto como sea posible. Para más información sobre servicios de emergencia, favor de referirse al Manual para Miembros. Envíe reclamaciones a este dirección: Claims Processing Center P.O. Box 61088 Phoenix, AZ 85082 Payor ID: 66917	En caso de una emergencia, por favor llame al 911

You or your child will get a Parkland HEALTHfirst ID card from us when you join Parkland HEALTHfirst. A copy of the Parkland HEALTHfirst ID card is shown here.

Each of your children who are on Medicaid will have a different card. You will not get a new Parkland HEALTHfirst ID card every month. If you lose your ID card, call Parkland HEALTHfirst Member

Services toll-free at **1-888-672-2277**. We will send you a new ID card. We will also send you a new ID card if you change your primary care provider or if you move.

How to read your Parkland HEALTHfirst ID Card

The front of the Parkland HEALTHfirst ID card shows important information about you and the name and phone number of your primary care provider. The back of the card has important phone numbers for you to call if you need help.

How to use your Parkland HEALTHfirst ID Card

You **must** take your Parkland HEALTHfirst ID Card with you when you get any health care services. You will need to show your Parkland HEALTHfirst ID Card each time you need services.

What do I do if I lose my Parkland HEALTHfirst ID Card?

If you lose your Parkland HEALTHfirst ID Card, call us right away at **1-888-672-2277** to get a new one. If you move or change phone numbers, please call us so we can update your information in our system.

Temporary Medicaid ID Card (Form 1027-A)

Medicaid also has a temporary ID card. It is also called Form 1027-A. You should take this card and your Parkland HEALTHfirst ID card with you when you get any health services. You will need to show these every time you need services. You can use this temporary ID card until you get Your Texas Benefits Medicaid card.

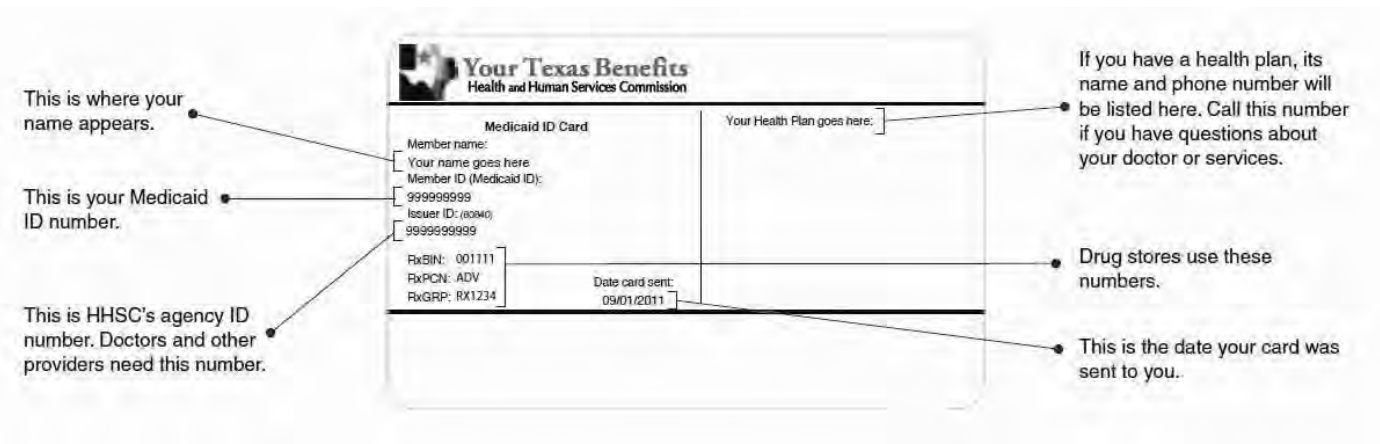
Your Texas Benefits Medicaid Card

When you are approved for Medicaid, you will get a Your Texas Benefits Medicaid Card. This plastic card will be your everyday Medicaid ID card. You should carry and protect it just like your driver's license or a credit card. The card has a magnetic stripe that holds your Medicaid ID number. Your doctor can use the card to find out if you have Medicaid benefits when you go for a visit.

You will get a new Your Texas Benefits Medicaid card every time you change your health plan.

If you are not sure if you are covered by Medicaid, you can find out by calling toll-free at 1-800-252-8263. You can also call 2-1-1. First pick a language and then pick option 2.

Your health history is a list of medical services and drugs that you have gotten through Medicaid. We share it with Medicaid doctors to help them decide what health care you need. If you don't want your doctors to see your health history through the secure online network, call toll-free at 1-800-252-8263.

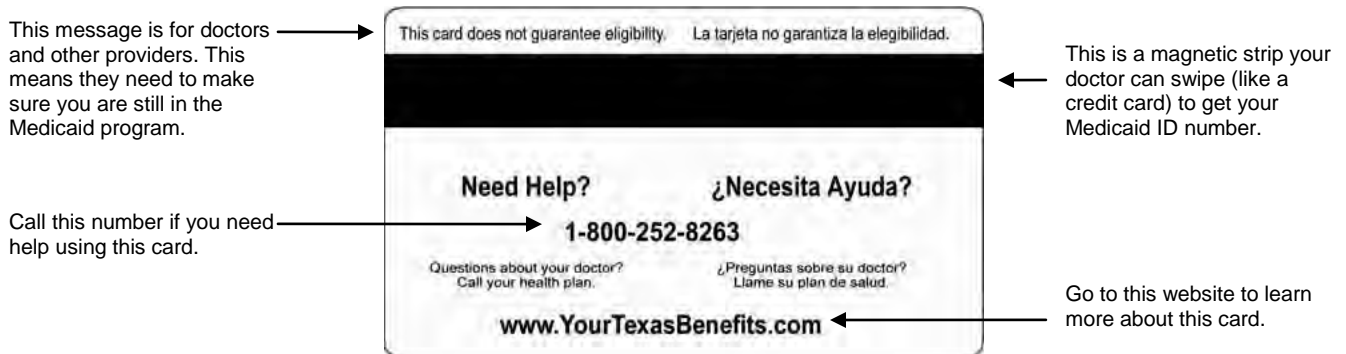


The Your Texas Benefits Medicaid card has these facts printed on the front:

- Your name and Medicaid ID number.
- The name of the Medicaid program you're in if you get your Medicaid services through a health plan. This would be STAR, STAR Health, or STAR+PLUS.
- The date HHSC made the card for you.

- Facts your drug store will need to bill Medicaid.
- The name of the health plan you're in and the plan's phone number.
- The name of your doctor and drug store if you're in the Medicaid Limited program.

The back of the Your Texas Benefits Medicaid card has a website you can visit (www.YourTexasBenefits.com) and a phone number you can call (**1-800-252-8263**) if you have questions about the new card.



If you forget your card, your doctor, dentist, or drug store can use the phone or the Internet to make sure you get Medicaid benefits.

If you lose the Your Texas Benefits Medicaid card, you can get a new one by calling toll-free at **1-855-827-3748**.

What do I need to bring with me to my doctor's appointment?

When you go to your doctor's appointment, you should take these with you:

- Your Texas Benefits Medicaid Card or Temporary Form 1027-A,
- Parkland HEALTHfirst ID card
- Immunization (shot) records
- Pen and paper to take notes (Sometimes you might get a lot of information, and it helps to write things down.)



What Is a Primary Care Provider? How do I choose a Primary Care Provider? Can a clinic be my Primary Care Provider?

You must pick your primary care provider from our list of Parkland HEALTHfirst providers. Your primary care provider is considered your "medical home". You may choose one primary care provider for yourself and a different one for your children or you may pick the same primary care provider for your entire family, which some families find easier. Primary care providers can be:

- Family Doctors
- Pediatricians (for children)
- Obstetricians/Gynecologists (OB/GYNs) (a woman's doctor)
- General Doctors

- Advanced Nurse Practitioners (ANPs)
- Certified Nurse Midwives (CNMs)
- Federally Qualified Health Clinics (FQHCs)
- Rural Health Clinics (RHCs)

Please look in your Parkland HEALTHfirst Provider Directory for the names, addresses and telephone numbers of Parkland HEALTHfirst primary care providers.

If you like the doctor or clinic that you see now and they are on our list, you can keep them. If you have trouble picking a primary care provider, please call us; we will be glad to help. There may be times when Parkland HEALTHfirst may allow a special doctor (Specialist) to be your primary care provider. Call Parkland HEALTHfirst Member Services at **1-888-672-2277** for more information.

How can I change my Primary Care Provider?

You can change primary care providers by calling us toll-free at **1-888-672-2277** or writing to us: Parkland HEALTHfirst, P. O. Box 569005, Dallas, TX 75356-9005.

If you change your primary care provider, you will get a new ID card that shows the date your new primary care provider will be effective. The new card will also show the new primary care provider's name, address and phone number on it. Changing your primary care provider will not stop you from getting care. If you need care before your new primary care provider is effective, call the primary care provider on your current ID card.

Here are some reasons why you may want to change your primary care provider:

- You are not happy with your primary care provider's care
- You need a different kind of doctor to take care of you
- Your primary care provider is no longer near you because you have moved
- Your primary care provider is no longer a part of Parkland HEALTHfirst

Here are some reasons why you may not be able to have the primary care provider you choose:

- The primary care provider you picked cannot see new patients
- The primary care provider you picked is no longer a part of Parkland HEALTHfirst

How Many Times Can I Change My Primary Care Provider?

There is **no limit** on how many times you can change your or your child's primary care provider. You can change primary care providers by calling us toll-free at **1-888-672-2277** or writing to us: Parkland HEALTHfirst, P. O. Box 569005, Dallas, TX 75356-9005.

When will my Primary Care Provider change become effective?

If you change your primary care provider, the change will become effective the same day that you call Member Services to ask for the change.

What if my Primary Care Provider leaves Parkland HEALTHfirst?

If your primary care provider leaves Parkland HEALTHfirst, we will send you a letter. The letter will tell you the new primary care provider we chose for you. You can choose a different primary care provider if you want. Call Member Services toll-free at 1-888-672-2277 and tell them which primary care provider you want. If you are receiving treatments, you will be able to stay with that primary care provider until we find another primary care provider who can give you the same type of care.

Can my Primary Care Provider move me to another Primary Care Provider for non-compliance?

Here are some reasons why your primary care provider may ask that you pick a new primary care provider:

- You often miss appointments without calling to let your primary care provider know
- You are not following your primary care provider's advice
- You do not get along with your Primary Care Provider
- Your primary care provider is no longer a part of Parkland HEALTHfirst

If you are asked to pick a new primary care provider, you will get a letter in the mail. You will need to pick a new primary care provider right away. If you do not pick a new primary care provider, we will pick one for you near your home and send you a new ID card with the new primary care provider's name, address and telephone number on it.

To give you the best care possible, your primary care provider needs to know your medical history. Your medical records are private and confidential. Only you, your primary care provider, and other approved providers have a right to see them. If you change doctors, be sure to give your new primary care provider any information needed about your medical history.

What if I choose to go to another doctor who is not my Primary Care Provider?

Most of the time, you need to go to your primary care provider first. If you choose to go to another doctor, you may have to pay. There are some Parkland HEALTHfirst benefits that do not require that you go to your primary care provider first. They include:

- emergency care
- Texas Health Steps
- OB/GYN care
- eye care (for members under 21 years old)
- family planning

- behavioral health (mental health and substance abuse)
- dental services (for members under 21 years old)

Call Parkland HEALTHfirst Member Services at **1-888-672-2277** for more information.

What is the Medicaid Limited Program?

You may be put in the Limited Program if you do not follow Medicaid rules. It checks how you use Medicaid pharmacy services. Your Medicaid benefits remain the same.

If you are put in the Medicaid Limited Program:

- Pick one drug store at one location to use all the time.
- Be sure your main doctor, main dentist, or the specialists they refer you to are the only doctors that give you prescriptions.
- Do not get the same type of medicine from different doctors.

To learn more call **1-800-436-6184** Option 4.

Physician Incentive Plans

A physician incentive plan rewards doctors for treatments that reduce or limit services for people covered by Medicaid. Right now, Parkland HEALTHfirst does not have a physician incentive plan.

What if I want to change health plans?

You can change your health plan by calling the Texas STAR Program Helpline at **1-800-964-2777**. You can change plans as often as you want, but not more than once a month.

If you are in the hospital, a residential Substance Use Disorder (SUD) treatment facility or residential detoxification facility for SUD, you will not be able to change health plans until you have been discharged.

If you call to change your health plan on or before the 15th of the month, the change will take place on the first day of the next month. If you call after the 15th of the month, the change will take place the first day of the second month after that. For example:

- If you call on or before April 15, your change will take place on May 1.
- If you call after April 15, your change will take place on June 1.

Can Parkland HEALTHfirst ask that I get dropped from their plan (for non-compliance, etc.)?

Parkland HEALTHfirst may ask that you be dropped from our plan for “good cause.” Some examples of “good cause” are:

- You frequently do not follow your doctor's advice.
- You keep going to the Emergency Room (ER) when you do not have an emergency.
- You keep going to another doctor or clinic without first getting approval from your primary care provider.
- You or your children show a pattern of disruptive or abusive behavior not related to a medical condition.
- You miss many appointments without letting your doctor know in advance.
- You let someone else use your ID card.
- Fraud or abuse

Parkland HEALTHfirst will not ask you to leave the health plan before talking with you first. We want to work with you to get the best health care possible. Call Member Services at **1-888-672-2277** if you have questions.

What Medicaid services do I get with Parkland HEALTHfirst? What are my health care benefits?

Here is a list of some of the services you can get. Please follow your primary care provider's advice. Your primary care provider is responsible for coordinating all of your care. Some of these services are limited by your age.

- Needed medical care for adults and children
- Shots to prevent illness (immunizations)
- Care from specialists, when needed
- Pharmacy for prescriptions (*Limit: You must stay in the Parkland HEALTHfirst network*)
- Chiropractic services
- Podiatrist (foot doctor) services
- Laboratory and x-ray services
- Surgery as an outpatient (no hospital stay)
- Hospital care and outpatient care
- Prenatal care, maternity care and newborn care
- 24-hour nurse help line
- 24-hour emergency care from an emergency room
- Eye doctor services (*Limit: vision exams, eye glasses and contact lenses if medically necessary*)
- Hearing services and hearing aids
- Home health agency services
- Ambulances (*Limit: for emergencies only*)
- Dialysis for kidney problems
- Major organ transplants
- Texas Health Steps services (*Limit: for members under age 21*) – Oral evaluation and fluoride varnish in the medical home in conjunction with Texas Health Steps medical checkup for children 6 months through 35 months of age (under age 3)
- Annual physical exam for adults
- Physical, occupational and speech therapy
- Family planning services and supplies

- Behavioral Health services – (such as counseling and treatment)
- Substance abuse assistance (such as alcohol or drug abuse)
- Diabetic supplies
- Durable medical equipment and supplies
- Health education classes
- Some dental services for adult members – tooth pulling (*Limit: requires a referral from the primary care provider to a Parkland HEALTHfirst network dental provider*).
- Transportation to medical, dental and behavioral health appointments through the Medical Transportation Program

Covered services for members under 21 years of age may be different from those for members over 21 years of age.

How do I get these services? How can I get a second opinion?

You should see your primary care provider to ask about medical services. You can get a second opinion regarding the use of any health care service. You can get a second opinion from a network provider or out-of-network provider if a network provider is not available. There is no cost to you for getting a second opinion. For more information about these or other services, please call the Parkland HEALTHfirst Member Services toll-free line at **1-888-672-2277**.

What services are not covered?

- Faith healing
- Acupuncture
- Cosmetic surgery
- Any service that is not medically necessary
- Any service that is not a covered benefit
- Any service that your primary care provider does not approve, except for the Texas Health Steps, family planning services, eye care services, OB/GYN, and behavioral health services

You have a right to know the cost of any service before you receive that service. If you agree to get services that we do not cover or authorize, you may have to pay for them.

What about other Medicaid services or programs?



You can still get the following Medicaid services:

- Texas Health Steps dental, including braces (These services are available only to members under 21 years of age and when medically necessary.)
- Early Childhood Intervention (ECI) program (These services are available only to members under 21 years of age.)
- Department of State Health Services (DSHS) targeted case management

- DSHS Mental Health Rehabilitation
- DSHS Case Management for Children and Pregnant Women
- Texas Health Steps Medical Case Management (These services are available only to members under 21 years of age.)
- Texas School Health and Related Services (SHARS) (These services are available only to members under 21 years of age.)
- Department of Assistive and Rehabilitative Services (DARS) Case Management for the Blind
- Tuberculosis (TB) Services provided by DSHS-approved providers
- Department of Aging and Disability Services (DADS) Hospice Services
- Medical Transportation
- Women's Health Program
- Women, Infants, and Children (WIC)

You do not have to go to your primary care provider to get these services. If you have questions or need help with these services, call Parkland HEALTHfirst toll-free at **1-888-672-2277**.

What extra benefits do I get with Parkland HEALTHfirst?

When you join Parkland HEALTHfirst, you get extra benefits that Medicaid does not provide. You can get:



- **Free Membership to Boys and Girls Club of Greater Dallas** – A program for young people between the ages of 6 and 18, who will be able to become a part of various health education programs and other activities. When your child joins these activities, he or she will help to develop the qualities needed to become responsible citizens and leaders. These programs include: Sports Activities, Fitness Activities, Recreation Activities, Character and Leadership Development, Education and Career Development, Health and Life Skills, and Educational Programs for The Arts.
- **Parkland Nurse Line 24 Hours a Day, 7 Days a Week** – a 24 hour Nurse Help Line to help you with health questions or to help you decide what to do about your child's health needs.
- **Free Sports Physicals** –members can access free sports physicals at one of Parkland's Community Oriented Primary Care Clinic (COPC) or school based Youth and Family Clinics. One sports physical is available per year. (confirm the physicals are free)
- **Free baby gifts to pregnant members** – pregnant members can get a car safety seat and a gift bag of baby items when you take and finish prenatal classes.
- **Free HEALTHfirst Newsletter** – A newsletter to give you information on specific health topics.
- **Continued Access to Care** through a network of health care providers participating with Parkland HEALTHplus if Medicaid eligibility is lost.
- **Free Health Education Classes** – Parkland HEALTHfirst works with our community partners to make available free and low-cost classes for parents and children. Some health topics include:
 - Car Seat Safety
 - Drug and Alcohol Awareness
 - Poison Safety
 - Prenatal Care

- Immunizations
- Infant Mortality
- Nutrition
- Oral Health
- Physical Fitness
- Sexually Transmitted Diseases
- Stopping Smoking
- Teen Pregnancy Prevention
- Vision Awareness
- Weight Management

(Note: some limitations apply.)

Please call Member Services at **1-888-672-2277** for more information. Please check with your primary care provider before you begin any new health or wellness program.

What does Medically Necessary mean?

Medically Necessary means:

(1) For Members birth through age 20, the following Texas Health Steps services:

- (a) screening, vision, and hearing services; and
- (b) other Health Care Services, including Behavioral Health Services, that are necessary to correct or ameliorate a defect or physical or mental illness or condition. A determination of whether a service is necessary to correct or ameliorate a defect or physical or mental illness or condition:
 - (i) must comply with the requirements of the *Alberto N., et al. v. Suehs, et al.* partial settlement agreements; and
 - (ii) may include consideration of other relevant factors, such as the criteria described in parts (2)(b-g) and (3)(b-g) of this definition.

(2) Acute care services, other than behavioral health services, (that for Members birth through age 20 are not available through Texas Health Steps) that are:

- (a) reasonable and necessary to prevent illnesses or medical conditions, or provide early screening, interventions, and/or treatments for conditions that cause suffering or pain, cause physical deformity or limitations in function, threaten to cause or worsen a handicap, cause illness or infirmity of a member, or endanger life;
- (b) provided at appropriate facilities and at the appropriate levels of care for the treatment of a member's health conditions;
- (c) consistent with health care practice guidelines and standards that are endorsed by professionally recognized health care organizations or governmental agencies;
- (d) consistent with the diagnoses of the conditions;
- (e) no more intrusive or restrictive than necessary to provide a proper balance of safety, effectiveness, and efficiency;
- (f) are not experimental or investigative; and
- (g) are not primarily for the convenience of the member or provider; and

(3) Behavioral health services (that for Members birth through age 20 are not available through Texas Health Steps) that are:

- (a) are reasonable and necessary for the diagnosis or treatment of a mental health or chemical dependency disorder, or to improve, maintain, or prevent deterioration of functioning resulting from such a disorder;

- (b) are in accordance with professionally accepted clinical guidelines and standards of practice in behavioral health care;
- (c) are furnished in the most appropriate and least restrictive setting in which services can be safely provided;
- (d) are the most appropriate level or supply of service that can safely be provided;
- (e) could not be omitted without adversely affecting the member's mental and/or physical health or the quality of care rendered;
- (f) are not experimental or investigative; and
- (g) are not primarily for the convenience of the member or provider.

What is routine care?

The primary care provider you choose is considered your "medical home" and will help you with all your medical care. Your primary care provider will get to know you and your children, do regular check-ups, and treat you when you are sick. Your primary care provider will give you prescriptions for medicines and medical supplies and send you to a specialist if you need one. A specialist may be your primary care provider at special times. It is important that you follow your primary care provider's advice and take part in decisions about your healthcare. If you are unable to take part in decisions about your healthcare, you may choose someone to do it for you.

If you have been getting healthcare services at a health clinic and would like to keep going there, please choose a doctor as your primary care provider from this clinic. Please be sure that the primary care provider is in the Parkland HEALTHfirst Provider Directory. Call us to get more information. You can call us toll free at **1-888-672-2277**.

When you need care, call your primary care provider's number on the front of your ID card. Someone in the doctor's office or clinic will make an appointment for you. It is very important that you keep your appointments. Call early to make appointments. If you cannot keep your appointment, call back to let your doctor know.

How soon can I expect to be seen?

Your primary care provider should be able to see you within two (2) weeks after you ask for the routine care appointment. If you are seeing the doctor for a physical or wellness check up, you should be seen within 8 to 10 weeks after you ask for the appointment.

What is urgent care?

Urgent care is when you have a medical problem that is not an emergency. You must first call your primary care provider at the number shown on the front of your ID card. If you would like to speak to a nurse you can call the Parkland Nurse Line at 1-888-667-7890 or locally in the Dallas area at 214-266-8773. When you call, the nurse can help assist in deciding whether you need to go to the emergency room. Many illnesses do not need to be treated in the ER.

- A cold, cough, rash, small cuts, minor burns or bruises are **not** good reasons to go to the ER.

How soon can I expect to be seen?

If you need urgent care, you should be seen by your primary care provider within 24 hours after you ask for care.



What is emergency medical care?

If you have an emergency, go to the closest Emergency Room (ER) right away or call 911.

Emergency care is a covered Medicaid service.

Emergency Medical Care

Emergency medical care is provided for Emergency Medical Conditions and Emergency Behavioral Health Conditions.

Emergency Medical Condition means:

A medical condition manifesting itself by acute symptoms of recent onset and sufficient severity (including severe pain), such that a prudent layperson, who possesses an average knowledge of health and medicine, could reasonably expect the absence of immediate medical care could result in:

- (1) placing the patient's health in serious jeopardy;
- (2) serious impairment to bodily functions;
- (3) serious dysfunction of any bodily organ or part;
- (4) serious disfigurement; or
- (5) in the case of a pregnant women, serious jeopardy to the health of a woman or her unborn child.

Emergency Behavioral Health Condition means:

Any condition, without regard to the nature or cause of the condition, which in the opinion of a prudent layperson, possessing average knowledge of medicine and health:

1. requires immediate intervention and/or medical attention without which the Member would present an immediate danger to themselves or others; or
2. which renders the Member incapable of controlling, knowing or understanding the consequences of their actions.

Emergency Services and Emergency Care means:

Covered inpatient and outpatient services furnished by a provider that is qualified to furnish such services and that are needed to evaluate or stabilize an Emergency Medical Condition and/or Emergency Behavioral Health Condition, including post-stabilization care services.

How soon should I expect to be seen?

You should be seen the same day if you need emergency care.

Some good reasons to go to the ER are:

- Very bad chest pains
- Poisoning or overdose of medicine
- Choking or problems breathing
- Possible broken bones
- Uncontrolled diarrhea or vomiting

- Heavy bleeding
- Serious injuries or burns
- Fainting
- Suddenly not being able to move
- Victim of violent attack (such as a mugging)
- Thoughts of causing harm to yourself or others
- Severe confusion or disorientation

If you go to the ER, be sure to tell them that you are a Parkland HEALTHfirst member and remember to call your primary care provider within 24 hours.

Are Emergency Dental Services covered?

Medicaid covers limited emergency dental services for the following:

- Dislocated jaw.
- Traumatic damage to teeth and supporting structures.
- Removal of cysts.
- Treatment of oral abscess of tooth or gum origin.
- Treatment and devices for craniofacial anomalies.
- Drugs for any of the above conditions.



Medicaid also covers dental services your child gets in a hospital. This includes services from the doctor provides and other services your child might need, like anesthesia.

What do I do if my child needs Emergency Dental Care?

During normal business hours, call your child's Main Dentist to find out how to get emergency services. If your child needs emergency dental services after the Main Dentist's office has closed, call us toll-free at **1-888-672-2277**.

What is post-stabilization?

Post-stabilization care services are services covered by Medicaid that keep your condition stable following emergency medical care.



How do I get medical care after my Primary Care Provider's office is closed?

Call your primary care provider during office hours when you can. If possible, do not wait until evening to call and take care of a medical problem. Most illnesses tend to get worse as the day goes on. Call early.

If you get sick at night or on a weekend and cannot wait to get medical care, call your primary care provider for advice. Your primary care provider or another doctor is available by phone 24 hours a day, 7 days a week. Your primary care provider can give you advice.

You can also call the **Parkland Nurse Line** toll-free at **1-888-667-7890** or **214-266-8773**, 7 days a week, 24 hours a day. The nurse can help you decide what to do. The Parkland Nurse Line has nurses who speak Spanish and have the Language Line to interpret other languages.

What if I get sick when I am out of town or traveling?



What if I am/my child is out of the state?

If you/your child needs medical care when traveling, call us toll-free at **1-888-672-2277** and we will help you find a doctor. We can help if you are traveling within the state or out of the state.

If you need **emergency services** while travelling, go to a nearby hospital, then call us toll-free at **1-888-972-2277**.

What if I am/my child is out of the country?

Medical services performed out of the country are not covered by Medicaid.

What if I need to see a special doctor (specialist)?

Your primary care provider will tell you if you need to see a specialist. Your primary care provider will make sure that you get the special care you need. In general, you cannot go to another doctor or get a special service if your primary care provider does not agree to make a referral.

What is a referral?

A referral is when your primary care provider sends you to another doctor or service for care. If you choose to go to the specialist without your doctor's referral, you may have to pay.

How soon can I expect to be seen by a specialist?

You should be able to see your specialist within two (2) weeks for a routine appointment. You should be seen within 24 hours if you have an urgent care appointment with the specialist. You should be seen the same day if you need emergency care from the specialist.

What services do not need a referral?

Some services do not require a referral. Those services include:

- emergency care
- Texas Health Steps (well child care)
- OB/GYN care
- eye care
- family planning
- behavioral health (mental health and substance abuse)

- dental services for under age 21

How can I ask for a second opinion?

You can ask for a second opinion if you are not satisfied with the treatment plan that the specialist offered you. The second opinion will need to come from a different Parkland HEALTH*first* specialist. Your primary care provider can give you a referral for a second opinion. If your primary care provider wants you to see a specialist who is not in the Parkland HEALTH*first* plan, Parkland HEALTH*first* will need to approve the visit before you go. Call Member Services at **1-888-672-2277** if you have questions.

How do I get help if I have mental health, alcohol or drug problems?

If you live in the Dallas Service Area, you will receive treatment for mental health, alcohol, and drug use through NorthSTAR. NorthSTAR provides these types of behavioral health services to members who live in the following counties: Collin, Dallas, Ellis, Hunt, Kaufman, Navarro, and Rockwall. If you have behavioral health issues, call the NorthSTAR program toll-free at **1-888-800-6799** to receive services in your area. **You do not need a referral from your primary care physician**, but you may want to talk to your primary care physician about the issue.



What are my prescription drug benefits?

Medicaid pays for most medicines your doctor says you need. Your doctor will write a prescription so you can take it to the drug store, or may be able to send the prescription for you.

What if I can't get my prescription approved?

If your doctor cannot be reached to approve a prescription, you may be able to get a three-day emergency supply of your medication. Call Parkland HEALTH*first* toll-free at **1-888-672-2277** for help with your medications and refills.

How do I find a network drug store?

Go to Parkland Community Health Plan's website, www.ParklandHMO.com, to see a list of pharmacies. You can also call Member Services at **1-888-672-2277**.

What if I go to a drug store not in the network?

You may have to pay if you go to a drug store that is not in the network. The pharmacy can call the Parkland Pharmacist Help Desk's toll-free number on the back of your/your child's Parkland HEALTH*first* ID card.

What do I bring with me to the drug store?

Remember to take your prescription from the doctor, Your Texas Benefits Medicaid ID card, and your Parkland HEALTH*first* ID card. Your Parkland HEALTH*first* ID card has your/your child's Medicaid ID number on it.

What if need my medications delivered to me?

Please visit the online pharmacy listing OR call Member Services at **1-888-672-2277** for pharmacies that offer delivery.

Who do I call if have problems getting my medications?

Call Parkland HEALTHfirst Member Services at **1-888-672-2277** if you have problems getting prescriptions filled.

What if I lost my medication(s)?

Lost or stolen medications are not a covered benefit. You may contact your pharmacy for an early refill and pay the cost of the medication.

What if I also have Medicare?

Let the pharmacy know that you have Medicare and Parkland HEALTHfirst Medicaid when your order your medication. Be sure to take both your Medicare ID card and your Parkland HEALTHfirst ID card to the pharmacy when you pick up your prescription.

If you have questions, please call Member Services at **1-888-672-2277**.

What if I need durable medical equipment (DME) or other products normally found in a pharmacy?

Some durable medical equipment (DME) and products normally found in a pharmacy are covered by Medicare. For all members, Parkland HEALTHfirst pays for nebulizers, ostomy supplies, and other covered supplies and equipment if they are medically necessary. For children (birth through age 20), Parkland HEALTHfirst also pays for medically necessary prescribed over-the-counter drugs, diapers, formula, and some vitamins and minerals.

Call Member Services **1-888-672-2277** for more information about these benefits.

Eye Care

Eye care services are different for adults and children.

If you are under age 21, you can get an eye exam and prescription eyeglasses only once during the 12 months from September to August, unless there is a change in your eyesight or if requested in writing by the child's primary care provider, teacher or school nurse.

If you are age 21 or over, you can get an eye exam once every 24 months.

You do not need a referral from your primary care provider to see the eye doctor for routine eye care. Some eye doctors can also treat eye diseases that do not need surgery. To find an eye doctor, call Block Vision toll-free at 1-800-879-6901. You can also call Parkland HEALTHfirst Member Services at **1-888-672-2277** for help.



How do I get Family Planning Services?

Family planning services help you plan or control pregnancy. Family planning services are very private. You **do not need a referral** to get these Family Planning services or supplies. If you are under age 21, you do not have to get permission from your parent to get these Family Planning services or supplies. **You can get family planning services from your primary care provider, or you can go to any family planning provider who is in the Parkland HEALTHfirst Provider Directory.**

The services you get include:

- A yearly check-up
- An office or clinic visit for a problem, counseling, or advice
- Laboratory tests
- Prescriptions and contraceptive devices such as birth control pills, diaphragms, and condoms
- Pregnancy testing
- Sterilization services (Only if you are 21 years of age or older; Federal Sterilization Consent Form required)
- Check up and treatment of sexually transmitted diseases such as herpes and syphilis

Where do I find a family planning services provider?

You can go to <http://www.dshs.state.tx.us/famplan/locator.shtm> to find family planning providers in your area.



How do I get Texas Health Steps for my children?

What is Texas Health Steps?

There is a special program for members under the age of 21. It is called Texas Health Steps. Texas Health Steps gives medical and dental check-ups to members under the age of 21. These check-ups are important. Even though your child may feel well, he or she could still have a health problem. Texas Health Steps also does things like:

- Finds and treats problems early – talk to your primary care provider if you know your child has a medical problem.
- Lets you get all the necessary shots and immunizations for your children.
- Lets you get special child health services at no cost to you.

Does my doctor have to be part of the Parkland HEALTHfirst network?

You may go to any Texas Health Steps Provider. This may include your primary care provider. If you go to a Texas Health Steps provider who is not your primary care provider, **you do not need a referral from your primary care provider.**

Dental Check Ups

If you or your child is under age 21, you may go to any dentist who takes Medicaid. Dental services include:

- teeth cleaning
- crowns
- fillings
- extractions (getting teeth pulled)
- root canals
- emergency dental services
- wisdom teeth extraction (getting wisdom teeth pulled)

Did you know that your child can get dental check ups beginning at 6 months? Your child should get dental checkups every six (6) months. **You do not need a referral from your primary care provider.** Call Texas Health Steps at **1-877-847-8377** if you need help finding a dentist.

Medical Check Ups

You can call Member Services at **1-888-672-2277** for more information on when check ups are due.

Your child should get the Texas Health Steps check ups **every year** within 60 days after his or her birthday. Babies need check ups more often:

- Babies and toddlers: 1-2 weeks, 2 months, 4 months, 6 months, 9 months, 12 months, 15 months, 18 months, 2 years, and 30 months.
- After 30 months, your child should get the Texas Health Steps checkup every year up to age 21.

New Parkland HEALTHfirst Members

New Parkland HEALTHfirst members should get Texas Health Steps checkups within 60 days after becoming members. Your child's primary care provider will need to know your child's health history. Your child's primary care provider will make sure that your child's screening tests and shots are up to date.

Texas Health Steps check ups will help:

- Find health problems when they are small, even if your child feels well.
- Prevent health problems that might make it hard for your child to grow and learn.
- Give your child a healthy smile!

What if I need to cancel an appointment?

Please call your doctor or dentist as soon as possible if you have to cancel or change an appointment. If you called for a Medical Transportation appointment to take you to the doctor or dentist visit, please call 1-877-633-8747 to cancel.

What if I am out of town and my child is due for a Texas Health Steps check up?

If you are out of town when the Texas Health Steps check up is due, make an appointment with a Texas Health Steps Provider as soon as you get home. If you have moved, please call Parkland HEALTHfirst Member Services at **1-888-672-2277** to get the name of a Texas Health Steps provider in your area.

Are you a Migrant Farm worker?

A migrant farm worker is a person who works on farms or fields or as a food packer during certain times of the year. Migrant farm workers move to different places to follow the crops. Call the Parkland HEALTHfirst Migrant Hotline at **1-800-327-0016** if you have questions.

What if I am a Migrant Farm worker?

You can get your checkup sooner if you are leaving the area. We have special Medicaid services for children of migrant farm workers. Call **1-800-327-0016** for more information.

If you call us and tell us you are a migrant farm worker:

- We will help you find the doctors and clinics, and help you set up appointments for your children.
- We will let doctors know your children need to be seen quickly because you may have to leave the area to go to the next farm job.

Why does my health plan need to know if I am a Migrant Farmworker?

We want to make sure you get the care you need in a timely manner. If you travel doing seasonal work, we want to help you plan for getting check-ups and other services that might be due while you are away.

How can your health plan help?

If you are migrant farmworker you can call us at **1-800-327-0016**. We can help you find out if you would be due for a check-up during the time you will be living outside the area. We will help you make a plan for getting services before you leave.

How do I get dental services for my child?

Your child's Medicaid dental plan provides dental services including services that help prevent tooth decay and services that fix dental problems. Call your child's Medicaid dental plan to learn more about the dental services they offer.

Parkland HEALTHfirst covers emergency dental services your child gets in a hospital. This includes services the doctor provides and other services your child might need like anesthesia.

Can someone interpret for me when I talk with my doctor?

Anytime during your health care experience, if you need help with special language services including interpreters, please call Member Services at **1-888-672-2277** for more information. **Please remember that if you need an interpreter, you must call 72 hours before your appointment.**

Se Habla Español - Parkland HEALTHfirst has people to help you who speak both Spanish and English. We also have member flyers or brochures in Spanish.

Language Line – We provide a language line if your primary language is not English or Spanish. We will find someone who speaks your language. Call Parkland HEALTHfirst at **1-888-672-2277**.

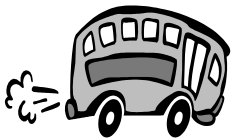
Sign Language – We can provide sign language interpretation for doctor visits. Please let us know you need these services 72 hours before your appointment, or as soon as possible. Call Parkland HEALTHfirst at **1-888-672-2277**.

TTY Phone Line – For persons that are deaf or hard of hearing, please call through the Relay of Texas /TTY line at 1-800-735-2989 and ask them to call the Parkland HEALTHfirst Member Services Line at **1-888-672-2277**.

CDs or Audiocassette Tapes – We have member information such as the member handbook on compact disc (CD) or audiocassette tape. If you need information on an audiocassette tape or CD, call Parkland HEALTHfirst Member Services at **1-888-672-2277**.

Face-to-Face Interpreter – We can help you if you need an interpreter to go with you to the provider's office. You must call at least 72 hours before your appointment. Call us at **1-888-672-2277**.

Braille or Large Print – We can provide the member handbook in Braille or large print. Please call Member Services at **1-888-672-2277** for help.



How can I get a ride to medical services?

If you need transportation for medical services at your doctor's office, the State's Medical Transportation Program (MTP) may help. You should call MTP as soon as you know your doctor's appointment date. If you know someone who can give you a ride to your appointment, call the MTP. MTP may be able to pay for the mileage. You must call at least 48 hours before your appointment. Members under 18 years of age may be required to travel with an adult. MTP is open Monday through Friday, from 8:00 a.m. until 5:00 p.m. For information about MTP, call Logisticare toll-free at **1-855-687-3255**.

If you have a complaint about MTP, you can call Parkland HEALTHfirst Member Services at **1-888-672-2277** or you can call the MTP line at **1-877-633-8747**.



Attention: Female Members – OB/GYN Care

Parkland HEALTHfirst allows you to pick an OB/GYN but this doctor must be in the same network as your primary care provider.

You have the **right to pick an OB/GYN without a referral** from your primary care provider. An OB/GYN can give you:

- one (1) well-woman check-up per year
- care related to pregnancy
- care for any female medical condition

- referral to special doctor within the network

Can I stay with my OB/GYN if they are not with Parkland HEALTHfirst?

If your OB-GYN is not in the Parkland HEALTHfirst network, you might be able to keep getting care from that OB-GYN if:

- you have less than 16 weeks before your expected delivery date **and**
- you are receiving treatment from the OB-GYN.

You may choose any OB/GYN in your Parkland HEALTHfirst Provider Directory. If you do not choose an OB/GYN from this list, you may have to pay.

When can I expect to be seen after contacting my OB/GYN for an appointment?

You should be able to get an appointment within two (2) weeks of your request for an appointment.

What if I am pregnant?

Who do I need to call?

First, call your primary care provider. Your primary care provider can help you get the care you need for your pregnancy. You should also call your Medicaid caseworker to let them know that you are pregnant. Don't forget to call Parkland HEALTHfirst to let us know that you will be having a baby.

Parkland HEALTHfirst has a special program to keep you and your baby healthy while you are pregnant. If you do not have an OB/GYN, we will help you find a doctor within two (2) weeks after you ask us to help you. If already have an OB/GYN, and your OB/GYN is not on the Parkland HEALTHfirst Provider List, you might be able to keep seeing your doctor. To be able to do this, you must:

- have been seeing your OB/GYN before you joined Parkland HEALTHfirst
- be within 16 weeks of delivery.

You should keep all of your prenatal appointments. This will help keep your baby healthy. Remember to get all your check-ups after you have your baby. You should be seen by an OB-GYN within 2 weeks after you ask for the appointment. If you would like to take prenatal classes, you can call Parkland HEALTHfirst Member Services at 1-888-672-2277 to find classes near you. Parkland HEALTHfirst offers free gifts to members who take and complete prenatal classes. You will need to provide proof that you completed the prenatal class.

Call the Parkland HEALTHfirst Member Services at **1-888-672-2277** for more information.



How are newborn babies signed up? Can I pick a primary care provider for my baby before my baby is born?

It is important that you call Parkland HEALTHfirst as soon as possible after your baby is born so we can provide health services for your baby. You should call us before your baby is born to choose a pediatrician (baby doctor). You will be able to choose your baby's pediatrician from our Parkland HEALTHfirst list of doctors. Remember that your baby needs a pediatrician when it is born. A list of pediatricians can be found in the Parkland HEALTHfirst Provider Directory. You can change your

baby's primary care provider as many times as you need. To choose your baby's pediatrician or to let us know your baby was born, call Parkland HEALTH*first* toll-free at **1-888-672-2277**.

You will need to contact your Medicaid caseworker as soon as your baby is born to enroll your baby in Medicaid. You can also call the Texas STAR Program Helpline at **1-800-964-2777**.

Can I switch my baby's health plan?

For at least 90 days after the date of birth, your baby will be covered by the same health plan that you are enrolled in. You can ask for a health plan change before the 90 days is up if both your current health plan and new health plan agree with transfer.

You cannot change health plans while your baby is in the hospital.

What is Case Management for Children and Pregnant Women (CPW)?

CPW is a program offered by the State. It provides services to children with a health condition or risk, birth through 20 years of age and high-risk pregnant women of all ages.

What type of services would my child or I receive?

Case management is a Medicaid service. They can help you or your child with:

- Getting medical services,
- Family problems,
- School issues,
- Money concerns,
- Finding help near where you live, and
- Equipment and supplies.

For more information about this program, go to <http://www.dshs.state.tx.us/caseman/default.shtm>

Who do I call if I have special health care needs and need someone to help me?

You can have your health care from a specialist if you have special health care needs. If you have special health care needs and need someone to help you, please call Parkland HEALTH*first*. Call **1-888-672-2277** and ask for a case manager.

What if I am too sick to make a decision about my medical care?

Advance Directives are instructions you give your doctor and your family about your medical care before you get too sick to make decisions. There is a form that you can get from your doctor or hospital

that you can fill out. It is a good idea to have an Advanced Directive before you get sick. Call **1-888-672-2277** and ask for a case manager to help you get the form.

What do I do if I have to move?



As soon as you have your new address, give it to the local HHSC benefits office and Parkland HEALTHfirst Member Services at **1-888-672-2277**. **Before** you get Medicaid services in your new area, you must call Parkland HEALTHfirst unless you need emergency services. You will continue to get care through Parkland HEALTHfirst until HHSC changes your address.

What happens if I lose my Medicaid coverage?

If you lose Medicaid coverage, but get it back within six (6) months, you will get Medicaid services from the same health plan you had before losing your Medicaid coverage. You will also have same primary care provider you had before.

What if I get a bill from my doctor?

If the bill is for a covered Parkland HEALTHfirst or Medicaid service, you will not have to pay. Call Parkland HEALTHfirst Member Services at **1-888-672-2277** and someone will call the provider's office for you to explain your benefits and arrange for your bill to be paid. When you call, please have your member ID number, Your Texas Benefits Medicaid Card, and the doctor's bill available. The Member Services representative will need information from each of these documents in order to help you quickly.

What if I have other health insurance in addition to Medicaid?

Medicaid and Private Insurance

You are required to tell Medicaid staff about any private health insurance you have. You should call the Medicaid Third Party Resources hotline and update your Medicaid case file if:

- Your private health insurance is canceled
- You get new insurance coverage
- You have general questions about third party insurance

You can call the hotline toll-free at 1-800-846-7307.

If you have other insurance you may still qualify for Medicaid. When you tell Medicaid staff about your other health insurance, you help make sure Medicaid only pays for what your other health insurance does not cover.

IMPORTANT: Medicaid providers cannot turn you down for services because you have private health insurance as well as Medicaid. If providers accept you as a Medicaid patient, they must also file with your private health insurance company.



What are my Rights and Responsibilities?

MEMBER RIGHTS:

1. You have the right to respect, dignity, privacy, confidentiality and nondiscrimination. That includes the right to:
 - a. be treated fairly and with respect; and
 - b. know that your medical records and discussions with your providers will be kept private and confidential.

2. You have the right to a reasonable opportunity to choose a health care plan and primary care provider. This is the doctor or health care provider you will see most of the time and who will coordinate your care. You have the right to change to another plan or provider in a reasonably easy manner. That includes the right to:
 - a. be told how to choose and change health plans and primary care provider;
 - b. choose any health plan that is available in your area and choose a primary care provider from that plan;
 - c. change your primary care provider;
 - d. change your health plans without penalty;
 - e. be told how to change your health plan or your primary care provider.

3. You have the right to ask questions and get answers about anything you do not understand. That includes the right to:
 - a. have your provider explain your health care needs to you and talk to you about the different ways your health care problems can be treated; and
 - b. be told why care or services were denied and not given.

4. You have the right to agree to or refuse treatment and actively participate in treatment decisions. That includes the right to:
 - a. work as part of a team with your provider in deciding what health care is best for you and
 - b. say yes or no to the care recommended by your provider.

5. You have the right to use each complaint and appeal process available through the managed care organization and through Medicaid, and get a timely response to complaints, appeals and receive fair hearings. That includes the right to:
 - a. make a complaint to your health plan or to the state Medicaid program about your health care, your provider or your health plan;
 - b. get a timely answer to your complaint;

- c. use the plan's appeal process and be told how to use it.
 - d. ask for a fair hearing from the state Medicaid program and get information about how the process works.
6. You have the right to timely access to care that does not have any communication or physical access barriers. That includes the right to:
- a. have telephone access to a medical professional 24 hours a day, 7 days a week to get any emergency or urgent care you need;
 - b. get medical care in a timely manner,
 - c. be able to get in and out of a health care provider's office. This includes barrier free access for persons with disabilities or other conditions that limit mobility, in accordance with the Americans with Disabilities Act;
 - d. have interpreters, if needed, during appointments with your providers and when talking to your health plan. Interpreters include people who can speak in your native language, help someone with a disability, or help you understand the information.
 - e. be given information you can understand about your health plan rules, including the health care services you can get and how to get them.
7. You have the right to not be restrained or secluded when it is for someone else's convenience, or is meant to force you to do something you do not want to do or is to punish you.
8. You have a right to know that doctors, hospitals, and others who care for you can advise you about your health status, medical care, and treatment. Your health plan cannot prevent them from giving you this information, even if the care or treatment is not a covered service.
9. You have a right to know that you are not responsible for paying for covered services. Doctors, hospitals, and others cannot require you to pay co-payments or any other amounts for covered services.

MEMBER RESPONSIBILITIES:

1. You must learn and understand each right you have under the Medicaid program. That includes the responsibility to:
- (a) learn and understand your rights under the Medicaid program;
 - (b) ask questions if you don't understand your rights; and
 - (c) learn what choices of health plans are available in your area.
2. You must abide by the health plan and Medicaid policies and procedures. That includes the responsibility to:
- (a) learn and follow your health plan rules and Medicaid rules;
 - (b) choose your health plan and a primary care provider quickly;
 - (c) make any changes in your health plan and primary care provider in the ways established by Medicaid and by the health plan;

- (d) keep your scheduled appointments;
 - (e) cancel appointments in advance when you cannot keep them;
 - (f) always contact your primary care provider first for non-emergency medical needs;
 - (g) be sure you have approval from your primary care provider before going to a specialist; and
 - (h) understand when you should and should not go to the emergency room.
3. You must share information your health status with your primary care provider and learn about service and treatment options. That includes the responsibility to:
 - (a) tell your primary care provider about your health;
 - (b) talk to your providers about your health care needs and ask questions about the different ways your health care problems can be treated.
 - (c) help your providers get your medical records.
 4. You must be involved in decisions relating to service and treatment options, make personal choices, and take action to keep yourself healthy. That includes the responsibility to:
 - (a) work as a team with your provider in deciding what health care is best for you
 - (b) understand how the things you do can affect your health;
 - (c) do the best you can to stay healthy;
 - (d) treat providers and staff with respect; and
 - (e) talk to your provider about all of your medications.

If you think you have been treated unfairly or discriminated against, call the U.S. Department of Health and Human Services (HHS) toll-free at 1-800-368-1019. You also can view information concerning the HHS Office of Civil Rights online at www.hhs.gov/ocr

What if I have a problem or I am not happy with Parkland HEALTHfirst or my health care?



Filing a complaint

We want to help. You can always call or write to us to tell us about your problem. If you need help with a problem or have a complaint, please call our Member Services Department at **1-888-672-2277**. Most of the time, we can help you right away or at the most within a few days.

Parkland HEALTHfirst's Member Advocate can help you file a complaint. Just call **1-888-672-2277** or **214-932-4564** and the Member Advocate will write down your complaint. You can also send a written complaint to the Member Advocate. A written complaint should be mailed to:

Parkland Community Health Plan
 Attention: Parkland HEALTHfirst Member Advocate
 P. O. Box 569005
 Dallas, TX 75356-9005

Resolution of a complaint

We will write you within five (5) days to let you know that we received your complaint. We have thirty (30) days to resolve your complaint. When we have resolved your complaint, we will write you a letter letting you know the decision.

If you do not agree with the resolution of your complaint, you can file an appeal. The Parkland HEALTHfirst Complaint and Appeal Panel will meet to hear your appeal. This Panel is made up of Parkland HEALTHfirst representatives who were not part of the resolution of your original complaint. If needed, a doctor who is a specialist in the field of practice relating to your appeal may also serve on the panel. You have the right to make your appeal in person or through a family member or friend.

Once you have exhausted the Parkland HEALTHfirst complaint process, you can complain to the Texas Health and Human Services Commission (HHSC). You can do this by calling toll-free 1-866-566-8989 or by writing:

Texas Health and Human Services Commission
Health Plan Operations H-320
Resolution Services
P.O. Box 85200
Austin, TX 78708-5200

If you can get on the Internet, you can send your complaint in an email to HPM_Complaints@hhsc.state.tx.us.

What if my doctor asks for a service or medicine for me that's covered, but Parkland HEALTHfirst denies or limits it?

Parkland HEALTHfirst will notify you by letter of an action on a covered service your doctor requests. An **action** means the denial or limited authorization of a requested service. It includes:

- the denial in whole or part of payment for a service
- the denial of a type or level of service
- the reduction, suspension, or termination of a previously authorized service

You have the right to request an appeal if you are not satisfied or disagree with the action. An **appeal** is the process by which you or a person authorized to act on your behalf, including your health provider, requests a review of the action. Call Member Services toll-free at **1-888-672-2277** to ask for an appeal. The Member Advocate can help you file your request for an appeal.

Continuity of care

To ensure continuity of currently authorized services, you must file the appeal on or before the later of: 10 days following the HMO's mailing of the notice of the action or the intended effective date of the proposed action.

Appeals must be in writing

All oral appeals received by Parkland HEALTHfirst must be confirmed by a written, signed appeal by you or your representative, unless you ask for an expedited appeal. Call Member services toll-free at **1-888-672-2277** and ask for the Member Advocate. You can also call the Member Advocate directly at **214-932-4564**.

What if I need an extension?

You get an extension of up to fourteen (14) calendar days of the appeal if you ask for the extension, or if Parkland HEALTHfirst can show that we need more information. We can only do this if the extension helps you. We will send you a letter telling you why we asked for the extension.

What is an expedited appeal?

An expedited appeal is when the health plan has to make a decision quickly based on the condition of your health, and taking the time for a standard appeal could jeopardize your health. You or your representative can ask for an expedited appeal by calling our Member Services Department at **1-888-672-2277** or calling the Member Advocate directly at **214-932-4564**. You can also write to:

Parkland Community Health Plan
Attention: Parkland HEALTHfirst Member Advocate
P. O. Box 569005
Dallas, TX 75356-9005

When you ask for an expedited appeal, and the appeal is about emergency care or to continue hospitalization, Parkland HEALTHfirst will let you know the decision in one (1) business day after we receive the appeal. Parkland HEALTHfirst will let you know the final decision in writing of the expedited appeal within three (3) business days.

Expedited Appeals do not have to be given to us in writing.

What happens if the health plan denies the request for an Expedited Appeal?

If Parkland HEALTHfirst believes that your appeal does not need to be expedited, we will let you know right away. We will still work on your appeal, but the resolution may take up to 30 days.

Resolution of an appeal

Each appeal is promptly investigated. For a standard appeal, Parkland HEALTHfirst will send you a letter within five (5) business days to let you know that we received your appeal request. Parkland HEALTHfirst will answer you in writing with a decision about your appeal within thirty (30) days of when we receive your appeal request. For an expedited appeal, the Member Advocate will call you to explain the appeal process. If your appeal is denied, the resolution letter will explain the reason why it was denied and tell you how to contact the State if you want to file a complaint.

**What if I am not happy with the solution of my problem?
(Can I ask for a State Fair Hearing?)**

If you, as the Member of the health plan, disagree with the health plan's decision, you have the right to ask for a fair hearing. You may name someone to represent you by writing a letter to the health plan telling them the name of the person you want to represent you. A doctor or medical provider may be your representative. If you want to challenge a decision made by your health plan, you or your

representative must ask for the fair hearing within 90 days of the date on the health plan's letter with the decision. If you do not ask the fair hearing within 90 days, you may lose your right to a fair hearing. To ask a fair hearing, you or your representative should either send a letter to the health plan at:

Parkland Community Health Plan
Attention: Member Advocate
P.O. Box 569005
Dallas, TX 75356-9005

or call Parkland HEALTHfirst Member Services at: **1-888-672-2277** or the Member Advocate at **214-932-4564**.

You have the right to keep getting any service the health plan denied or reduced, at least until the final hearing decision is made if you ask for a fair hearing by the later of: (1) 10 days from the date you get the health plan's decision letter, or (2) the day the health plan's letter says your service will be reduced or end. If you do not request a fair hearing by this date, the service the health plan denied will be stopped.

If you ask for a fair hearing, you will get a packet of information letting you know the date, time and location of the hearing. Most fair hearings are held by telephone. At that time, you or your representative can tell why you need the service the health plan denied.

HHSC will give you a final decision within 90 days from the date you asked for the hearing.

What is an Expedited Fair Hearing?

An expedited Fair Hearing is when the HMO is required to make a decision quickly based on your health status and taking the time for a standard appeal could jeopardize your life or health.

How do I report someone who is misusing the Medicaid Program or services?

FRAUD AND ABUSE

Do you want to report Waste, Abuse or Fraud?

Let us know if you think a doctor, dentist, pharmacist at a drug store, other health care providers, or a person getting benefits is doing something wrong. Doing something wrong could be waste, abuse or fraud, which is against the law. For example, tell us if you think someone is:

- Getting paid for services that weren't given or necessary.
- Not telling the truth about a medical condition to get medical treatment.
- Letting someone else use their Medicaid ID.
- Using someone else's Medicaid ID.
- Not telling the truth about the amount of money or resources he or she has to get benefits.

To report waste, abuse, or fraud, choose one of the following:

- Call the OIG Hotline at **1-800-436-6184**;

- Visit <https://oig.hhsc.state.tx.us/> and pick “Click Here to Report Waste, Abuse, and Fraud” to complete the online form; or
- You can report directly to your health plan:

Parkland HEALTH*first*
Attention: SIU Analyst
P. O. Box 569005
Dallas, TX 75356-9005
1-888-761-5440

To report waste, abuse or fraud, gather as much information as possible.

- When reporting about a provider (a doctor, dentist, counselor, etc.) include:
 - Name, address, and phone number of provider;
 - Name and address of the facility (hospital, nursing home, home health agency, etc.);
 - Medicaid number of the provider and facility, if you have it;
 - Type of provider (doctor, dentist, therapist, pharmacist, etc.);
 - Names and the number of other witnesses who can help in the investigation;
 - Dates of events;
 - Summary of what happened.
- When reporting someone who gets benefits include:
 - The person’s name
 - The person’s date of birth, Social Security Number, or case number if you have it
 - The city where the person lives
 - Specific details about the waste, abuse or fraud.

Annual Information

As a member of Parkland Community Health Plan, you can ask for and receive the following information each year:

- Information about network providers - at a minimum primary care doctors, specialists, and hospitals in our service area. This information will include names, addresses, telephone numbers, and languages spoken (other than English) for each network provider plus identification of providers that are not accepting new patients.
- Any limits on your freedom of choice among network providers.
- Your rights and responsibilities.
- Information on complaint, appeal and fair hearing procedures.
- Information about benefits available under the Medicaid program, including amount, duration and scope of benefits. This is designed to make sure you understand the benefits you are entitled.
- How you get benefits including authorization requirements.
- How you get benefits, including family planning services, from out-of-network providers and/or limits to those benefits.
- How you get after hours and emergency coverage and/or limits to those kinds of benefits, including:
 - What makes up emergency medical conditions, emergency services and post-stabilization services;
 - The fact that you do not need prior authorization from your primary care provider for emergency care services;
 - How to get emergency services, including instructions on how to use the 911 telephone system or its local equivalent.
 - The addresses of any places where providers and hospitals furnish emergency services covered by Medicaid.
 - A statement saying you have a right to use any hospital or other settings for emergency care.
 - Post-stabilization rules.
- Policy on referrals for specialty care and for other benefits you cannot get through your Primary Care Provider.
- Parkland HEALTH*first* practice guidelines.

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

Parkland HEALTHfirst PRIVACY NOTICE

Effective April 14, 2003

At Parkland HEALTHfirst (a program of Parkland Community Health Plan, Inc.), we respect the confidentiality of your health information and will protect your information in a responsible and professional manner. We are required by law to maintain the privacy of your health information and to send you this notice.

This notice explains how we use information about you and when we can share that information with others. It also informs you of your rights with respect to your health information and how you can exercise those rights.

When we talk about “information” or “health information” in this notice we mean the following: Information about you that has been created or received by us and that relates to your health condition(s), or to the provision of health care to you, or to the payment for such health care.

HOW WE USE OR SHARE INFORMATION

The following are ways we may use or share information about you:

For Payment Purposes: We may use the information to help pay your medical bills that have been submitted to us by doctors and hospitals for payment.

For Treatment Purposes: We may share your information with your doctors or hospitals to help them provide medical care to you. For example, if you are in the hospital, we may give them access to any medical records sent to us by your doctor.

For Health Care Operations: We may use or share your information with others to help manage your health care. For example, we might talk to your doctor to suggest a disease management or wellness program that could help improve your health.

With Our Business Associates/Contractors: We may share your information with others who help us conduct our business operations. **We will not share your information with these outside groups unless they agree to keep it protected.**

For the Promotion of Health Maintenance and Wellness: We may use or share your information to send you a reminder if you have an appointment with your doctor. We may also use or share your information to give you information about alternative medical treatments and programs or about health related products and services that you may be interested in. For example, we might send you information about smoking cessation or weight loss programs.

There are also state and federal laws that may require us to release your health information to others. We may be required to provide information for the following reasons:

- We may report information to state and federal agencies that regulate us such as the U.S. Department of Health and Human Services, and the Texas Health and Human Services Commission.
- We may share information for public health or disaster relief activities. For example, we may report information to the Food and Drug Administration for investigating or tracking of prescription drug and medical device problems.
- We may report information to public health agencies if we believe there is a serious health or safety threat.
- We may share information with a health oversight agency for certain oversight activities (for example, audits, inspections, licensure and disciplinary actions).
- We may provide information to a court or administrative agency (for example, pursuant to a court order, search warrant or subpoena).
- We may report information for law enforcement purposes. For example, we may give information to a law enforcement official for purposes of identifying or locating a suspect, fugitive, material witness or missing person.
- We may report information to a government authority regarding child abuse, neglect or domestic violence.
- We may share information with a coroner or medical examiner to identify a deceased person, determine a cause of death, or as authorized by law. We may also share information with funeral directors as necessary to carry out their duties.
- We may use or share information for procurement, banking or transplantation of organs, eyes, or tissue.
- We may share information relative to specialized government functions, such as military and veteran activities, national security and intelligence activities, and the protective services for the President and others.
- We may report information on job-related injuries because of requirements of your state worker compensation laws.

We will comply with any state laws that are more restrictive regarding the permissible uses and disclosures of your health information, such as state laws relating to mental health and substance abuse records.

If none of the above reasons for using or disclosing your health information applies, **we must get your written permission to use or disclose your health information.** If you give us written permission and later change your mind, **you may revoke your written permission at any time.** However, your revocation will not affect the uses or disclosures that were made pursuant to your written permission.

WHAT ARE YOUR RIGHTS

The following are your rights with respect to your health information. If you would like to exercise the following rights, please contact Parkland HEALTHfirst Member Services at 1-888-672-2277.

- ❖ ***You have the right to ask us to restrict*** how we use or disclose your information for treatment, payment, or health care operations. You also have the right to ask us to restrict information that we have been asked to give to family members or to others who are involved

in your health care or payment for your health care. *Please note that while we will try to honor your request, we are not required to agree to these restrictions.*

- ❖ ***You have the right to ask to receive confidential communications*** of information. For example, if you believe that you would be harmed if we send your information to your current mailing address (for example, in situations involving domestic disputes or violence), you can ask us to send the information by alternative means (for example, by fax) or to an alternative address. We will accommodate your reasonable requests as explained above.
- ❖ ***You have the right to inspect and obtain a copy*** of information that we maintain about you in your designated record set. A “designated record set” is the set of information that includes your health information and that either (i) is enrollment, payment, claims adjudication, and case or medical management record systems maintained by or for us or (ii) is used, in whole or in part, by or for us to make decisions about you.

However, you do not have the right to access certain types of information and we may decide not to provide you with copies of the following information:

- contained in psychotherapy notes;
- compiled in reasonable anticipation of, or for use in a civil, criminal or administrative action or proceeding; and
- subject to certain federal laws governing biological products and clinical laboratories.

In certain other situations, we may deny your request to inspect or obtain a copy of your information. If we deny your request, we will notify you in writing and may provide you with a right to have the denial reviewed.

- ❖ ***You have the right to ask us to make changes*** to information we maintain about you in your designated record set. These changes are known as amendments. We may require that your request be in writing and that you provide a reason for your request. We will respond to your request no later than 60 days after we receive it. If we are unable to act within 60 days, we may extend that time by no more than an additional 30 days. If we need to extend this time, we will notify you of the delay and the date by which we will complete action on your request.

If we make the amendment, we will notify you that it was made. In addition, we will provide the amendment to any person that we know has received your health information. We will also provide the amendment to other persons identified by you.

If we deny your request to amend, we will notify you in writing of the reason for the denial. The denial will explain your right to file a written statement of disagreement. We have a right to respond to your statement. However, you have the right to request that your written request, our written denial and your statement of disagreement be included with your information for any future disclosures.

❖ ***You have the right to receive an accounting of certain disclosures*** of your information made by us during the six years prior to your request. Please note that we are not required to provide you with an accounting of the following disclosures:

- Any disclosures that were made prior to April 14, 2003;
- Information disclosed or used for treatment, payment, and health care operations purposes;
- Information disclosed to you or pursuant to your authorization;
- Information that is incident to a use or disclosure otherwise permitted;
- Information disclosed for a facility's directory or to persons involved in your care or other notification purposes;
- Information disclosed for national security or intelligence purposes;
- Information disclosed to correctional institutions, law enforcement officials or health oversight agencies; or
- Information that was disclosed or used as part of a limited data set for research, public health, or health care operations purposes.

We may require that your request be in writing. We will act on your request for an accounting within 60 days. We may need additional time to act on your request. If so, we may take up to an additional 30 days. Your first accounting will be free. We will continue to provide you with one free accounting upon request every 12 months. If you request an additional accounting within 12 months of receiving your free accounting, we may charge you a fee. We will inform you in advance of the fee and provide you with an opportunity to withdraw or modify your request.

❖ **You have a right to receive a copy of this notice upon request at any time.** You can also view a copy of the notice on our web site at www.ParklandHMO.com. Should any of our privacy practices change, we reserve the right to change the terms of this notice and to make the new notice effective for all protected health information we maintain. Once revised, we will provide the new notice to you by direct mail and post it on our website.

EXERCISING YOUR RIGHTS

If you have any questions about this notice or about how we use or share information, please contact Parkland HEALTHfirst member services at 1-888-672-2277. That office is open Monday through Friday from 8:00 a.m. to 5:00 p.m.

If you believe your privacy rights have been violated, you may file a complaint with us by calling 1-888-672-2277 or mail your written complaint to Parkland Community Health Plan, Inc. – Parkland HEALTHfirst – Attention Parkland HEALTHfirst Member Advocate – P.O. Box 569005 – Dallas , Texas 75356-9005. You may also notify the Secretary of the U.S. Department of Health and Human Services of your complaint at the following address:

Office of Civil Rights – Region VI
U.S. Department of Health and Human Services

1301 Young Street
Suite 1169
Dallas, Texas 75202
Phone: 214-767-4056; TDD: 214-767-8940
Fax: 214-767-0432

**PLEASE BE ADVISED: WE WILL NOT TAKE ANY ACTION AGAINST YOU FOR FILING
A COMPLAINT.**