

CONTACT US

If you can't find an answer to your question in this Handbook or need help understanding the materials and need them in an alternate format, please do any of the following.

For general information and customer service:

(866) 291-8691 (toll free 24-hour line). Telephone interpreter services available.

Hearing impaired services are available by calling Michigan Relay Center at 1-800-649-3777.

For enrollment information: **(734) 544-3030**

WEBSITE:

http://whp.ewashtenaw.org

MAIL ADDRESS:

Washtenaw Health Plan HPMS PO Box 30125 Lansing, MI 48909

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WELCOME!

We are pleased that you are a Washtenaw Health Plan (WHP) member. WHP is a health services program that works with doctors, clinics, hospitals, and other health care providers. Together, we help you get the health care you need.

This is your Member Handbook. **PLEASE READ THIS HANDBOOK** to find out how to get the services you need at the right time. Keep this Handbook handy. Read it every time you have questions about WHP. Following WHP rules will save you time and help us serve you better.

As a member of WHP, you will receive a WHP ID card. If you have questions about Washtenaw Health Plan, please call us. We look forward to helping to keep you healthy.

The local Department of Human Services determines if you are eligible for the Adult Benefits Waiver (ABW) program. If you have been denied coverage under the ABW program, you may appeal to your local Department of Human Services office. When you become eligible for the ABW program, you will receive a mihealth card. Your Washtenaw Health Plan (WHP) medical coverage will start on the first day of the next available month after you were determined eligible by the Department of Human Services.

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1. ELIGIBILITY, ENROLLMENT, AND RENEWAL

Washtenaw Health Plan (WHP) members are enrolled in either Plan A or Plan B. "WHP Plan A" is also called the *Adult Benefits Waiver (ABW)* Program or Adult Medical Program (AMP).

Do You Qualify? (Eligibility)

People who may qualify for WHP Plan A are very low-income, childless adults. You must apply at the State of Michigan Department of Human Services (DHS; formerly Family Independence Agency, FIA). DHS will review applications for the Adult Medical Program (AMP). If you qualify for AMP, you will be enrolled in Washtenaw Health Plan "Plan A" without another application. If you do not qualify for Plan A, and you are a Washtenaw County resident, you can apply for Washtenaw Health Plan "Plan B."

Washtenaw Health Plan (WHP) is a health services program, not health insurance.

Enrollment in Plan A

If DHS finds that you qualify for the Adult Medical Program (AMP), you will be enrolled in Washtenaw Health Plan "Plan A" (without another application).

You will get in the mail from WHP:

- ✓ A letter to confirm your enrollment in WHP;
- ✓ A WHP card; and
- ✓ A WHP Member Handbook.

You will get in the mail from the State (MDCH):

✓ A mihealth card.

Your WHP "Plan A" enrollment will continue if you continue to meet DHS requirements.

Renewal

The State of Michigan Department of Human Services will continue to check if you qualify. You should read all letters you get from DHS and follow DHS's instructions.

Denial of Your Application

The State of Michigan Department of Human Services (DHS) reviews applications for the Adult Medical Program (AMP). If DHS does not approve your application, you may ask DHS to review your application again at your local DHS office.

You may also apply for WHP Plan B.

Keep Us Informed

You must tell your DHS worker as soon as possible if:

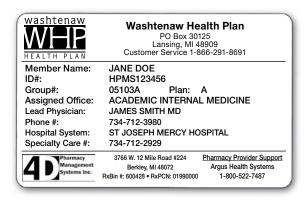
- Your income changes (increase or decrease) or
- You change your name, address, or phone number or
- You become pregnant or
- Your family (household) members change or
- You get private or public health insurance.

Please also tell the WHP about any changes listed above. Call WHP toll-free at (866) 291-8691.

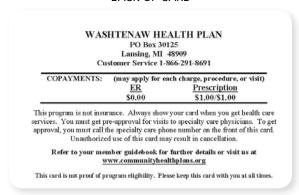
2. YOUR IDENTIFICATION CARDS

Once you are enrolled in Washtenaw Health Plan, you will get an identification card that will look something like this:

FRONT OF CARD



BACK OF CARD



Always show your WHP Card when you get health care services from your Primary Care Provider, pharmacy, hospital, and all other health care providers.

Your WHP Card shows your primary care provider, your copay information, and your full name.

mihealth Card

The State of Michigan will send you a "mihealth" Card. Your mihealth Card will look something like this:



Your mihealth ID Card Shows:

Line 1: Beneficiary ID Number.

This number is given to you by the local DHS.

Note: Your numbers will be different from the ones in the picture above.

Line 2: Your Full Name.

Always show your mihealth Card when you get:

- ✓ Psychotropic prescription drugs (for mental health and substance abuse problems)
- ✓ Mental health services; and
- ✓ Substance abuse services.



- ✓ <u>Always</u> carry both cards with you.
- ✓ <u>Always</u> show your card when you go to your WHP Primary Care Provider, hospital, pharmacy, and other health care providers.
- ✓ <u>Do not</u> throw away your WHP card or your mihealth card.
- ✓ If your WHP card gets lost, stolen, or damaged, get another card mailed to you. Call the WHP at toll-free (866) 291-8691.
- ✓ To replace your mihealth Card: Call Michigan Medicaid Beneficiary Helpline toll-free at (800) 642-3195.
- Only the person named on the cards may use the cards. When you get health care services, you may need to show another form of identification such as a Driver's License. This helps to prevent others from using your cards.

3. DISENROLLMENT

You may be disenrolled from WHP by your choice (voluntary) or against your choice (involuntary).

Disenrollment For Cause

You may be able to disenroll from WHP Plan A and still get covered services from AMP. You must prove that you cannot get adequate health care from WHP.

To find out about "disenrollment for cause," call the Medicaid Beneficiary Helpline at (800) 642-3195.

Other Reasons for Disenrollment

You may be involuntarily disenrolled by the State from WHP if you no longer qualify. You can also be disenrolled by the State from WHP Plan A if you:

- Incorrectly use non-WHP providers;
- Use WHP services incorrectly;
- Do not fill out forms honestly or do not give true information (fraud);
- Are violent or physically or verbally threatening to WHP providers, staff, or the public at WHP locations.

If You Are Disenrolled

If you are disenrolled from WHP for any reason, DHS will tell you in writing about your disenrollment. The letter will tell you your last enrolled date. You may have to pay for any services you get after you are disenrolled.

4. YOUR PRIMARY CARE PROVIDER: Your First Contact for Health Care

Washtenaw Health Plan (WHP) has a list of available Primary Care Providers (clinics, doctors, nurse practitioners and physician assistants). You must have a Primary Care Provider while enrolled in WHP.

Your Primary Care Provider should:

- ✓ Generally be your first contact for health care;
- ✓ Be someone you see regularly when you are well and when you are sick.
- ✓ Take care of your basic health needs such as physicals and routine office visits.
- ✓ Treat you for colds, flu, and other minor illnesses.
- ✓ Decide whether you need to see a specialist, get special tests, or be hospitalized.

You must get pre-approval for most specialty care. You will have to pay for any specialty care you get that is <u>not</u> properly pre-approved. (Read Section 5, "Covered Services," in this Handbook.)

If you have never been to your Primary Care Provider, you should make an appointment as soon as possible to see him or her even if you are not feeling sick.

This first appointment:

- ✓ Gives your Primary Care Provider a chance to get to know you and your health history; and
- ✓ Gives you a chance to ask important questions about your health.
- ✓ Remember, get to know your Primary Care Provider <u>before</u> you get sick.

Changing Your Primary Care Provider

WHP assigns you to a Primary Care Provider when your WHP Plan A enrollment begins. WHP tries to assign you to the primary care provider of your choice. Sometimes this may not be possible.

You may ask to change to another Primary Care Provider at any time. To ask to change your Primary Care Provider, call us toll-free at (866) 291-8691.

If you change to a new Primary Care Provider, you should ask your new Primary Care Provider to get your records from your previous Primary Care Provider. Getting your records to your new Primary Care Provider will help him or her to know your health history and give better care to you.

With good reason, your provider's office may ask that you be reassigned to another doctor's office or clinic. Requests will need approval by the WHP.

Using a Specialist as Your Primary Care Provider

In rare cases, WHP may let you use a Specialist Physician as a Primary Care Provider. Call the WHP Nurse Coordinator at (734) 544-3034 if you wish to use a Specialist Physician as a Primary Care Provider.

5. COVERED SERVICES

This section tells you about the WHP's covered services and how to get them.

WHP's "covered services" are services that:

- ✓ Are considered by WHP to be medically necessary, and
- ✓ Are on WHP's list of covered services (some services may need preapproval), and
- ✓ You get in Washtenaw County only from WHP participating providers.
- ✓ You get out of county, if they are pre-authorized. Emergency services do not require pre-authorization.

Visits to Your Primary Care Provider

Washtenaw Health Plan (WHP) covers visits to your Primary Care Provider. These primary care services do not need pre-approval or co-payments.

Your Assigned Hospital System

Every WHP member is assigned to a hospital system in Washtenaw County. This may be:

- University of Michigan Health System in Ann Arbor; or
- · Saint Joseph Mercy Health System in Ann Arbor; or
- WHP members who have some primary care providers may be able to use either system.

You must get services <u>only</u> from your assigned Health System (listed on your WHP Card) <u>unless</u> you:

- Have a "true emergency" and you are closer to another hospital or
- Get pre-approval from your Primary Care Provider or the WHP Specialty Care Person. Please call WHP at 1-(866)-291-8691 for contact information.

Specialty Care: Visits to a Specialty Care Provider

Your Primary Care Provider will decide whether you need to see a specialty care physician or get other types of specialty care. A specialty care provider is a provider who specializes in certain types of medicine. Some examples of specialty care are orthopedists, cardiologists, and neurologists.

REMEMBER - you must get pre-approval for visits to specialty care physicians. You will have to pay for any specialty care physician visits you get without pre-approval.

To get pre-approval for visits to specialty care physicians, you must call the "Specialty Care Phone Number" listed on your WHP Card. This contact person will work with you and your Primary Care Provider to help you get the services you need. If you need help figuring out who to call, you can call WHP Customer Service at (866) 291-8691.

Prescription Drugs

WHP covers a limited number of prescription drugs. The WHP Drug List has mostly generic (non-brand name) drugs. Your provider will have to get special approval for any drugs not on the list.

Most diabetic supplies are covered with your WHP card. Examples of diabetic supplies that are covered are syringes and glucose test strips. You can get a free Ascencia Breeze or Contour glucomenter by calling Bayer at 1-(877)-229-3777.

Section 5 -

You or your doctor can call us at 1-(734)-544-3034 for any questions about prescription drugs, or you can go to the WHP website at http://whp.ewashtenaw.org.

You will have to pay for the cost of any prescription drugs you get that are not listed in the WHP Drug List if you do not get special approval or you did not get pre-approval if needed.

You must pay a \$1 co-payment to the WHP participating pharmacy for each prescription drug or refill. Show the pharmacy both your WHP Card and your mihealth Card for all prescription drugs.

Hospitalizations (Non-Psychiatric) in Washtenaw County

You can get inpatient hospital services (hospitalizations—non-psychiatric) in Washtenaw County at the University of Michigan Health System (UMHS) and St. Joseph Mercy Hospital (SJMH) without any preapproval <u>if</u> you are admitted by your Primary Care Provider <u>or</u> from the Emergency Room.

Note: These services are covered by the Washtenaw Health Plan at your assigned health system in Washtenaw County. They are not covered in other counties in the Adult Medical Program.

You must get pre-approval for inpatient hospital services at UMHS or SJMH which your Specialty Care Physician recommends.

You must call the "Specialty Care \ Phone Number" listed on your WHP Card. This contact person will work with you and your Primary Care Provider to help you get the services you need.

REMEMBER - You will have to pay for any hospitalizations you get outside of these two hospitals. If you get hospitalized outside of Washtenaw County, call WHP at toll-free (866) 291-8691. We will help to tell the hospital about your income and health insurance status.

Specialty Care: Diagnostic Tests

Your Primary Care Provider or Specialty Care Physician will decide whether you need diagnostic tests such as:

- Radiology procedures such as x-rays, ultrasound, MRIs, and CAT Scans:
- Laboratory services such as blood tests; and
- Other diagnostic tests.

You do not need to get pre-approval for diagnostic tests if your Primary Care Provider or Specialty Care Physician helps you get the tests.

Specialty Care: Other Outpatient Hospital Services

Your Primary Care Provider or Specialty Care Physician will decide whether you need other specialty care outpatient services such as surgery or other procedures.

REMEMBER - you must get pre-approval for specialty care outpatient services. You will have to pay for any visits to specialty care outpatient services you get without proper pre-approval.

To get pre-approval for specialty care outpatient services, you must call the "Specialty Care Phone Number" listed on your WHP Card, and below. This contact person will work with you and your Primary Care Provider or Specialty Care Physician to help you get the services you need.

WHP Specialty Care Saint Joseph Mercy Health System

(734) 712-2929, Monday - Friday, 8:30am-5:00pm OR

WHP Specialty Care
University of Michigan Health System

(734) 647-5216, Monday - Friday, 8:30am-5:00pm

Out of County and Out of State Covered Services

The only services that are covered outside of Washtenaw County are:

- ✓ Emergency Room services for "true" emergencies
- ✓ Ground ambulance services for "true" emergencies
- ✓ Family Planning services
- ✓ Other services if an exception is granted.

There is no coverage for out of county outpatient services unless an exception is granted. You are responsible for paying any bills for out of county or out of network services, unless they have been pre-authorized.

What Is An Emergency?

An emergency is an illness, injury or health problem that could cause death or permanent injury if not treated right away.

Some examples of a medical emergency are:

- Severe or unusual bleeding that does not stop after 15 minutes of direct pressure
- Trouble breathing
- Swallowing poison
- Severe chest pain with sweating, shortness of breath, spreading pain, nausea and vomiting, dizziness, or a fast or irregular heartbeat
- Fainting
- Severe burns
- Severe pain

Emergency Room Services

Emergency Rooms are for "life or death" and other serious health problems ONLY. Never go to the Emergency Room for routine (non-emergency) care. WHP Plan A covers Emergency Room services within and outside of Washtenaw County for:

- ✓ True emergencies, and
- ✓ Screening and stabilization services to find out whether your condition is an emergency or not. You may need to get more services from somewhere other than the Emergency Room.

If You Need Emergency Care

If you think you have a true emergency:

If you are in Washtenaw County, call 911 or go to the Emergency Room of your assigned Hospital System listed on your WHP Card. You do not need pre-approval from your Primary Care Provider if you have a true emergency.

If your Primary Care Provider thinks you need to go to the Emergency Room, go to the Emergency Room of your assigned Hospital System listed on your WHP Card.

If you are outside of Washtenaw County, call 911 or go to the Emergency Room of the nearest hospital.

When Is It Not An Emergency?

If your health problem does not need attention right away, it is not an emergency. **Never go to the Emergency Room for routine (non-emergency) care.**

Some examples that are not emergencies are:

- Colds, cough and, sore throat
- Earache
- Pink eye
- Fatigue (feeling tired)
- Minor cut with bleeding under control

After Your Emergency Room Visit

After you go to the Emergency Room, call (or have someone call) your Primary Care Provider or the Specialty Care Phone Number listed on your WHP Card.

- Call as soon as possible after your Emergency Room visit;
- Tell the person about your Emergency Room visit, so he or she can decide whether you need other services.

For a Problem That Is Not an Emergency

Call your Primary Care Provider to get medical advice and/or to make an appointment to visit him or her. This can save you a trip to the Emergency Room and hours waiting while other people with true emergencies are helped.

Emergency Ambulance

WHP Plan A covers emergency ground ambulance within Washtenaw County and outside of Washtenaw County if it is:

- To the hospital Emergency Room; and
- For "true emergencies."

You will have to pay for any ambulance services you get that are:

- · NOT ground ambulance; and/or
- . NOT for "true emergencies."

If you think that you have a medical emergency and need ground ambulance to take you to the hospital Emergency Room, call 911 (or have someone call) and ask for emergency ground ambulance.

Mental Health Services

To request mental health services, call Washtenaw Community Mental Health Access at 1-(800)-440-7548 or (734)-544-3050.

Substance Abuse Services

The Washtenaw County Coordinating Agency provides substance abuse services through two core providers:

Dawn Farm (734)-669-8265 Home of New Vision (734)-975-1602

Additional Medical Equipment and Supplies

All WHP members have a limited benefit for certain types of medical equipment and supplies. Your doctor will decide whether you need medical equipment or supplies and should give you a prescription to take to a Medical Supply Store. To get help using this medical benefit, call the WHP Nurse Coordinator at (734)544-3034.

Services Covered by MDCH

Some services are covered by MDCH through your mihealth card. These include:

- ✓ Mental health services
- ✓ Substance abuse services
- ✓ Family planning services (see page 27 for details)
- ✓ Breast and Cervical Cancer services (see page 25 for details)
- ✓ Psychotropic medications, including specific psychotropic injectables under certain conditions.
- ✓ HIV/AIDS treatment, including antiretroviral therapy
- Protease inhibitor medications.

Other WHP Plan A Covered Services

Here is a list of covered services for WHP Plan A.

Covered Services

- ✓ Visits to your assigned doctor's office or clinic
- ✓ Visits to a specialist if authorized by your assigned doctor's office or clinic
- ✓ Outpatient diagnostic and laboratory tests
- Outpatient radiology (X-ray) tests (including EKG, cobalt, isotope, radiation, CAT, MRI, MRA, and PET scans)
- Prescription medications on the WHP formulary (or with special approval)
- ✓ Outpatient hospital services
- ✓ Emergency ground ambulance transportation to the emergency room for true emergencies
- ✓ Emergency room services
- Medical supplies (limited)
- ✓ Medical equipment (limited)
- ✓ Visits to an urgent care center/clinic—doctor services only
- ✓ Family planning services and contraceptive devices
- ✓ Breast and cervical cancer screening services
- ✓ Immunizations
- ✓ Outpatient surgery
- ✓ Dialysis
- ✓ Chemotherapy
- ✓ Chelation Therapy
- ✓ Sterilization
- ✓ Infertility screening
- ✓ Allergy testing and extract injection
- ✓ Dermatology
- ✓ Certain oral surgeon services
- ✓ Diabetes education

Coordinated Services

- ✓ Mental health services
- ✓ Substance abuse services

6. NON-COVERED SERVICES

PLEASE READ THIS SECTION!

This section tells you about health care services that WHP does <u>not</u> cover. You will have to pay for all non-covered services you get. **WHP does not** cover services received before your first day of coverage or after coverage has been cancelled.

WHP Plan A Does Not Cover:

- Case Management
- Chiropractor
- Dental Services—except for some oral surgery services
- Hearing Aids
- Home Health; Home Help—Personal Care
- Hospice
- Immunizations needed only for travel
- Infertility Treatment
- Nursing Home Care
- Podiatry
- · Private Duty Nurses
- Prescription Drugs not in WHP's or the mihealth Drug Formulary (unless you get special approval)
- Prosthetics and Orthotics (unless you get special approval)
- Smoking Cessation Programs
- Speech, Physical, and Occupational therapies
- Transportation (non-ambulance) except under special circumstances
- Vision Care and Eyeglasses
- · Weight reduction services

WHP Plan A also does not cover:

- Non-Ground Ambulance (Emergency or Non-Emergency)
- Non-Emergency Ground Ambulance except for hospital-billed transfers

In addition, WHP does not cover:

- Any drug entirely consumed at the time and place it is prescribed, e.g., at your doctor's office
- · The administration or injection of any drug;
- Any refill of a drug if it is more than the number of refills specified by the prescription;
- Any prescription drug refill you get more than 180 days after the latest prescription for that drug;

Dental Services

WHP Plan A does <u>not</u> cover dental services except for certain oral surgery services provided by a licensed oral surgeon with pre-approval. **To find out about** oral surgery services, call the "Specialty Care Phone Number" listed on your WHP Card.

7. OTHER HEALTH CARE RESOURCES

There are many FREE or low-cost health care services available to WHP members. These services can help you meet your health care needs. Some of these FREE or low-cost health care services are described below.

Breast and Cervical Cancer Screening Services

A special note for females ages 40 to 64. The ("Title XV") Breast and Cervical Cancer Control Program (BCCCP) provides FREE breast and cervical cancer screening services to WHP women ages 40 to 64.

These FREE services are:

- ✓ Breast Exam
- ✓ Screening mammogram
- ✓ Diagnostic mammogram
- ✓ Pelvic Exam
- ✓ Pap Test
- ✓ Most treatment services, if you qualify

How To Get BCCCP Services

To get FREE breast and cervical cancer screening services you MUST: Make an appointment to get BCCCP services at an approved Title XV BCCCP provider. The provider must be within your assigned Hospital System. Your Primary Care Provider may or may not be an approved Title XV BCCCP provider. Tell the person you want Title XV BCCCP Program services.

Ask the BCCCP site to send your records to your Primary Care Provider.

Remember:

- ✓ If you have not had breast and cervical cancer screening in the past year, you should get these important services as soon as possible.
- ✓ You should not get a bill for BCCCP services.

University of Michigan Health System BCCCP Providers

Chelsea Family Practice

14700 E. Old US Hwy 12 Box 0708 Chelsea, MI 48118 (734)475-1321

Community Family Health Center

1230 N. Maple Ann Arbor, MI 48103 (734)998-6117

North Campus Family Health Center

2364 Bishop (UM North Campus) Ann Arbor, MI 48105 (734)647-1636

Packard Health

3174 Packard Ann Arbor, MI 48108 (734)971-1073

University of Michigan Taubman OB/Gynecology

1500 E. Medical Center Dr, 1st Flr. Ann Arbor, MI 48109 (734)763-6295

St. Joseph Mercy Health System BCCCP Providers

Academic Obstetrics & Gynecology Clinic

St. Joseph Mercy Hospital 5333 McAuley Drive, Ste 2110 Ypsilanti, Ml. 48197 (734)712-3967

Packard Health

3174 Packard Ann Arbor, MI. 48108 (734)971-1073

Family Planning, Pregnancy Testing, Testing for HIV and Sexually Transmitted Infections

Family planning services, pregnancy testing, and testing for sexually transmitted infections and HIV are available in this county. Two locations where you can access these services are Planned Parenthood of Mid-Michigan, and the Adult Health Clinic at the Washtenaw County Health Department.

Planned Parenthood of Mid-Michigan

840 Maus Avenue, Ypsilanti, MI 48198 Phone (734) 485-0144 **or**

3100 Professional Drive, Ann Arbor, MI 48104 Phone (734) 973-0155

Adult Health Clinic

Washtenaw County Health Department 555 Towner Ypsilanti, MI (734)544-6840

Family Planning services may include:

- ✓ Physical exams;
- ✓ Pelvic exams and pap tests (cervical cancer screening);
- ✓ Pregnancy diagnosis and counseling;
- Information and counseling about contraception (family planning methods);
- ✓ Contraceptive supplies;
- ✓ STD screening and treatment;
- ✓ Health education and counseling;
- ✓ Many types of family planning methods and services.

Pregnancy and Post-Partum Services

You may be eligible for Medicaid if you become pregnant, so apply as soon as you get a positive pregnancy test! You are responsible for completing the application and getting pregnancy coverage. Apply at State of Michigan, Department of Human Services (DHS), Washtenaw County Office, 22 Center Street, Ypsilanti, MI, phone (734)481-2000. For more information, call toll-free (888)988-6300.

Plan A is only for childless adults. If you have a child, you should apply for Medicaid or WHP Plan B.

Other Gynecology Services

For gynecological exams and services not available from BCCCP or the family planning resources, call to make an appointment at the Obstetrics/Gynecology Clinic within <u>your</u> health system (see two clinics listed below).

University Of Michigan Health System Obstetrics/Gynecology Clinic

1500 East Medical Center Drive Ann Arbor, MI 48109 Phone (734)763-6295

OR

Saint Joseph Mercy Health System Academic Obstetrics/Gynecology Clinic

5333 McAuley Drive, #2110 Ypsilanti, MI 48197 Phone (734) 712-3967

You do NOT need pre-approval for routine gynecology exams and services. Remind the Obstetrics/Gynecology Clinic to send the report of your visit to your Primary Care Provider.

Immunizations and Tuberculosis (TB) Services

WHP Plan A covers immunizations that adults need. The immunizations you get will depend on your health. WHP does not cover immunizations needed for travel or immigration.

Your Primary Care Provider should:

- Give you free immunizations or
- He/she may ask you to go to the Washtenaw County Public Health
 Department to get FREE immunizations. For information or to make
 an appointment, call Washtenaw County Public Health Department at
 (734) 544-6770.

You can get FREE tuberculosis testing and treatment services at the Washtenaw County Public Health Department. You do not need pre-approval. For information or to make an appointment, call (734) 544-6770.

8. PRIVATE OR PUBLIC HEALTH COVERAGE (INSURANCE)

Public Health Care Coverage Programs

We may ask you to apply for public health care coverage programs that you may qualify for. These programs are:

Medicaid: Visit or call State of Michigan Department of Human Services, Washtenaw County Office, 22 Center Street, Ypsilanti, MI, phone (734) 481-2000.

Medicare Part A and Medicare Part B: Call toll-free (800) 633-4227 for information.

Other Coverage

WHP will not pay for health care services that are covered by other private or public programs. Examples of these programs are:

- ✓ Workers' Compensation;
- ✓ Auto insurance (may pay for health care for drivers and passengers in an auto accident).

9. OTHER WHP INFORMATION

Confidentiality of Personal Health Information

Washtenaw Health Plan believes the information we collect about you such as your name, address, income, and health is private. We believe that only people with both a need and a legal right may see your Personal Health Information. We will disclose your Personal Health Information:

- ✓ For treatment, payment, health care operations;
- ✓ When you give us direct instructions to do so; or
- ✓ When laws require it.

You should receive information about WHP's confidentiality policies with your member card.

Your Rights and Responsibilities

As a WHP member, you have the right to:

- ✓ Be treated with respect and to have your questions and concerns answered completely and courteously.
- ✓ Be included in all decisions about your health care such as:
 - Giving "informed consent" before starting any treatment; and
 - Refusing treatment if allowed by law.
- ✓ Have privacy during treatment. Expect confidentiality of all records and communications.
- ✓ Get clear communication about WHP benefits, policies, and procedures.
- ✓ Appeal a denial of your WHP application or denial of services.
- ✓ Get covered services without regard to race, color, creed, sex, religion, age, national origin, ancestry, marital status, sexual preference, physical or mental handicap. Not be refused covered services.

As a WHP member, it is your responsibility to:

- ✓ Tell your DHS caseworker if your address, phone number, income or name changes.
- ✓ Give your provider complete information about your past medical history and current medical problems.
- ✓ Be involved in making decisions about your health care.
- Understand how to properly get primary care and other covered services from your Primary Care Provider and other WHP providers.

- ✓ Ask questions when you do not understand something.
- ✓ Follow your doctor's medical advice and instructions.
- ✓ Tell your doctor about any concerns or problems you have related to your treatment.
- ✓ Follow the plans and instructions that you and your health care providers agree on.
- ✓ Keep appointments. If you cannot keep an appointment, call the provider's office or clinic in advance to cancel the appointment.
- ✓ Be thoughtful of the rights of other patients and the provider's staff and property.
- ✓ Make payment arrangements for services not covered by WHP

Grievances and Appeals Regarding Benefits

We want you to be happy about Washtenaw Health Plan and your health care. If you have a complaint about WHP, call us as soon as possible so that we can handle your complaint.

You can call us at 1-(866)-291-8691 (toll free line) to express concern about the care you have received. We will try to solve any problems over the phone.

A grievance is when you are unhappy or have a problem with anything other than a denied, reduced, or terminated service. An appeal is a request to change a decision about a denied, reduced, or terminated service. Examples include:

- Reduction, suspension or termination of a previously approved service
- Denial or limited approval of a requested covered service
- Not providing services in a timely manner, as defined by the State
- Denial of payment for a properly approved covered service

If you would like to file a grievance or appeal call us at 1-(866)-291-8691 to request a form. Let us know if you need help filling out the form. Send your completed form within 45 days of the denial letter (if you received one) to:

WHP

Attn: Appeals P.O. Box 30125 Lansing, MI 48909

You can represent yourself or you can have someone else, such as a family member or attorney, represent you. If someone else will speak on your behalf, you must put in writing that you want this person to represent you.

Your grievance or appeal will be decided within 35 days or 45 days if more information is needed. If you or your doctor think that taking the time to process a normal appeal or grievance will jeopardize your life and health, WHP will follow an "expedited" process. We will respond within 72 hours.

You will receive a letter from WHP if any covered service is going to be denied or ended. The letter will tell you why the service was denied or ended and the policy that supports it.

The letter will tell you how you can appeal the decision by contacting WHP. You may also ask for an administrative hearing through the Michigan Department of Community Health, by writing to:

Administrative Tribunal and Appeals Division

Michigan Dept. of Community Health P.O. Box 30763 Lansing, Michigan 48909

All requests for Administrative Hearings must be sent within 90 days of the date the denial letter from WHP (if you received one) was sent. Requests must be made in writing and signed by you. For more information or to request an Administrative Hearing form, please call us at 1-(866) 291-8691 (toll free line).

If you are requesting an appeal for a benefit that was previously covered but has now been reduced, denied, or suspended, you must submit your appeal to the State within 12 calendar days of the date of the denial letter if you want us to continue to provide the service during the appeal process. If your appeal is denied you may have to pay for this service.

If You Get Any Bills

Don't ignore health care bills! You should not get any bills for approved covered services. If you get a health care bill for approved covered services, DO NOT THROW IT AWAY.

As soon as possible, please call the phone number on the bill and tell them you have the Washtenaw Health Plan.

Call the Specialty Care Number listed on your WHP ID Card to tell them about the bill. The person will tell you where to send a copy of the bill and what else to do.

10. FRAUD AND ABUSE

Fraud and abuse are serious problems in healthcare. The following is Washtenaw Heath Plan's meaning of fraud and abuse:

Fraud is when you or a provider knowingly deceives someone else. It can also be when you misrepresent yourself. This then results in some benefit to you or another person that is not allowed.

Examples of fraud:

- Doctor or pharmacy billing you for services you did not get
- Allowing someone else to use your Washtenaw Health Plan card
- Changing a prescription written by a doctor

Abuse is when an action results in unnecessary cost to the Washtenaw Helth Plan.

Examples of abuse:

- Going to the emergency room for care that is not an emergency
- Threatening or abusive behavior in a doctor's office

If you know an member, provider, or pharmacy who has committed fraud and/or abuse, you must report them. Call us at 1-(866)-291-8691 or write us at:

Washtenaw Health Plan

Attn: Fraud and Abuse Officer Po Box 30125 Lansing, MI 48909

You do not need to identify yourself.

You may also report them to the State at 1-(866)-428-0005 or at:

Medicaid Integrity Program Section

Capitol Commons Center Building 400 S. Pine Street, 6th Floor Lansing, MI 48909

You do not need to identify yourself.

11. **DEFINITIONS**

The following definitions may help you better understand terms used in this Handbook.

CO-PAYMENT: A fixed amount of money you pay when you get a covered service. WHP Plan A currently requires a \$1 co-payment for each prescription drug or refill.

COVERED SERVICES: Services that:

- Are medically necessary, and
- Are on WHP's list of covered services (some services may need preapproval), and
- You get in Washtenaw County from WHP Participating Providers.
 There are some exceptions for out-of-county and out-of-state services for WHP Plan A members.

DRUG FORMULARY: WHP's list of covered prescription drugs. The WHP Drug Formulary has mostly generic, non-brand name drugs. (Read the Prescription Drugs section.)

EMERGENCY: An illness, injury or health problem that could cause death or permanent injury if not treated right away. This is also called a "true emergency." Some examples of a medical emergency are: severe or unusual bleeding that does not stop after 15 minutes of direct pressure; trouble breathing; swallowing poison; severe chest pain with sweating, shortness of breath, spreading pain, nausea and vomiting, dizziness, or a fast or irregular heartbeat; fainting; severe burns; severe pain.

NON-COVERED SERVICES: Health care services that WHP does not cover. You will have to pay for all non-covered services you get, unless they are covered directly by the state. (Read "Non-Covered Services," in this Handbook.)

PLAN A: A health coverage program administered by the Washtenaw Health Plan (WHP). WHP Plan A is also called: Adult Benefit Waiver (ABW) Program or Adult Medical Program (AMP). People who are likely to qualify for WHP Plan A are low-income, childless adult residents of Washtenaw County without private or public insurance.

PLAN B: A health coverage program offered by Washtenaw Health Plan (WHP). People who may qualify for WHP Plan B are low-income, children or adults who do not qualify for the Adult Medical Program (WHP Plan A), Medicaid, Medicare, or other public programs. WHP reviews applications for WHP Plan B.

PRE-APPROVAL: Getting WHP's approval before you get a service. For example, you must get pre-approval for visits to specialty care physicians. Pre-approval allows WHP to make sure that:

- ✓ The services are what you should get for your health problem,
- ✓ The services are covered by WHP, and
- ✓ You get the services from a WHP participating provider.

PRIMARY CARE PROVIDER: A health care professional (clinic, doctor or nurse practitioner) who you choose from WHP's list of Primary Care Providers. Your Primary Care Provider will take care of your basic health needs such as physicals, routine office visits for minor health problems such as colds, flu, back pain, and minor burns. Your Primary Care Provider may provide other screening and treatment services or may refer you to other places for these services. (Read Section 4, "Your Primary Care Provider," in this Handbook.)

WHP CARD: An ID Card you get when you enroll in WHP Plan A or WHP Plan B. Always carry your WHP Card and show it to health care providers when you get health care services.