

TRANSLATION SERVICES

Health Choice Arizona has members of different cultures and backgrounds. We offer translation services to our members who need it. Please call our Member Services Department at 480-968-6866 (in Maricopa County) or 1-800-322-8670 (outside of Maricopa County) four business days prior to your routine appointments, to arrange translation services in time for your doctor, dentist or any other medical appointments. If there is a doctor that is close to your home and speaks your language, we will assign that doctor as your primary care physician (PCP). You may always call to change your PCP if you would rather have another doctor that has an office in your area.

Our Member Services Department is open Monday - Friday, 6 am - 6 pm. You may also call us if you need any of our printed information in another language or in a different format. There is no cost for translation services.

English If you need help, please call Member Services for translation at 1-800-322-8670.

Spanish Si necesita ayuda de traducción o de intérprete, por favor llame al Departamento de Servicios de Miembros al 1-800-322-8670.

Bosnian Ako vam je potrebna pomoc za prevodjenje, molimo vas pozo vite odjeljenje za usluge na 1-800-322-8670.

Russian Если Вы нуждаетесь в помощи, пожалуйста позвоните В Услуги для членов по номеру 1-800-322-8670

Arabic 18003228670 (في الترجمة) يرجى الاتصال بخدمات الزبائن رقم إذا كنت تحتاج المساعدة

Chinese 請致電會員服務部 1-800-322-8670 以尋求翻譯的協助

Farsi لطفاً با شماره خدمات به اعضاء برای ترجمه، ۱ - ۸۰۰ - ۳۲۲ - ۸۶۷۰ تماس بگیرید. گر به کمک نیاز دارید،

Korean 한국어 : 도움이 필요하시면, 회원 서비스 전화 1-800-322-8670 로 문의 주십시오

Vietnamese Nếu quý vị cần giúp đỡ về phiên dịch, xin gọi cho ban Dịch vụ Hội viên (Member Services) điện thoại số 1-800-322-8670

Services are funded in part through a contract with AHCCCS and the State of Arizona

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QUICK REFERENCE

Health Choice Arizona:	1600 W. Broadway Rd., Ste. 260 Tempe, AZ 85282
Member Services:	(480) 968-6866 (In Maricopa County) 1-800-322-8670 (Outside of Maricopa County)
Hours:	Monday - Friday, 6 am - 6 pm
E-mail:	HCH_comments@iasishealthcare.com Please write HCA in the Subject line
Web Site:	www.healthchoiceaz.com
Emergency:	911

PERSONAL NOTES

My Member ID #

My Primary Care Physician (PCP)

PCP's Address

PCP's Phone Number

INTRODUCTION TO THE 2007-2008 HCA MEMBER HANDBOOK

Welcome to Health Choice Arizona!

We are happy to have this chance to care for you. We are proud of the doctors, nurses, hospitals and pharmacies that make up the Health Choice Arizona provider network.

This is your new Member Handbook. It replaces any other Health Choice Arizona Member Handbook that we may have sent to you. The Handbook answers your questions about Health Choice Arizona, your benefits, and the way to get medical care.

Health Choice Arizona recognizes the cultural differences of our members and offers bilingual physicians and translation services to assist members with their medical care.

PLEASE READ THIS HANDBOOK

It gives you important information that you need to know about Health Choice Arizona and how to get medical care.

Please refer to the Health Choice Arizona Provider Directory to find out if your doctor speaks a language other than English. You may also call Health Choice Arizona Member Services Department at 480-968-6866 (in Maricopa County), or 1-800-322-8670 (outside of Maricopa County) for this information. Our Member Services Department is open Monday - Friday, 6 am - 6 pm.

If you need a new Provider Directory call our Member Services Department and we will send one to you. There is no charge for additional Member Handbooks or Provider Directories. You may also see the Member Handbook or the Provider Directory on our website at www.healthchoiceaz.com.

HEALTH CHOICE ARIZONA, AN AHCCCS AND KIDSCARE HEALTH PLAN

MEMBER SERVICES DEPARTMENT

Health Choice Arizona has a Member Services Department to help members with any questions they may have about the health plan. Most of our representatives speak both English and Spanish.

If you have a question about your health Member Services can help you plan, you can call us at 480-968-6866 with many questions like these: (in Maricopa County) or 1-800-322-8670 (outside of Maricopa County). Our Member Services Department is open Monday - Friday, 6 am - 6 pm.

Member Services can help you with many questions like these:

- How do I change my doctor?
- How much is my co-payment?
- How to find a dentist?
- What dental services can I receive?
- What is a covered service?
- What pharmacies can I use?

HOW TO USE MY HEALTH PLAN

- Your Primary Care Physician (PCP) “doctor” is in charge of making sure that you get all of the medical care you need. You will be assigned a Health Choice Arizona doctor near your home or you may choose your own doctor from our directory. If you don't know who your doctor is, call Health Choice Arizona Member Services.
- After receiving your letter telling you who your primary care (PCP) is, if you want to change your doctor call Member Services.

- You can call us at 480-968-6866 (in Maricopa County) or 1-800-322 8670 (outside of Maricopa County), Monday - Friday, 6 am - 6 pm, with any questions you may have.
- If you are pregnant, call our Maternal Child Health Department at 1-800-828-7514 to choose a doctor or nurse midwife. See your OB doctor as soon as you think you are pregnant.
- AHCCCS will send you and each enrolled member of your family, a Member Identification (ID) card that shows your member ID number. Be sure to carry your AHCCCS ID card at all times. You will need to show your card each time that you go to the doctor or have an appointment.
- If you need information about Transportation, see the “Transportation” section on page 23.

WHAT DOES THIS MEAN?

Your PCP “doctor” will explain to you different things regarding your healthcare. Below are some common terms or phrases, which your doctor may use.

- Many procedures that once required a stay in the hospital can now be done on an “outpatient” basis. This means that you can go to the hospital, clinic, or surgery center for the procedure and return to the comfort of your own home the same day! Ask your doctor what type of things you will and will not be able to do right after an “outpatient” procedure. This way, you can plan ahead for any help you may need from your family, friends, and neighbors such as transportation, getting meals, taking care of children, and other household tasks.
- A “Prior Authorization” is a request your doctor/specialist sends to Health Choice Arizona with medical information explaining why you need the medical services requested. Some procedures, i.e. Surgeries, Radiology, will require a “Prior Authorization” from Health Choice Arizona. Also, specialists like Ophthalmologists, Podiatrists among others will also require a “Prior Authorization”. Please talk with your doctor or specialist to find out if the request has been approved or you can call Member Services Department.
- Some medications may require a “Prior Authorization” from Health Choice Arizona. Please talk with your doctor or specialist to find out if Health Choice Arizona has approved your medication request or you can call Member Services Department before getting the medications.
- A “Referral” is the paper your doctor gives you so that you can be seen by a specialist.
- You may find the Health Choice Arizona list of covered medications (“Formulary”) by visiting www.healthchoiceaz.com. You can also search for

doctors, specialists, participating pharmacies, and hospitals at our Web site at www.healthchoiceaz.com.

WHAT YOU CAN DO TO BE HEALTHY

- Brush your teeth regularly and teach your children this good habit.
- Get enough sleep.
- Don't smoke. If you do smoke, talk to your doctor about quitting.
- Don't drink alcohol or drink no more than one drink a day. Do not drink if you are pregnant. Never drink and drive!
- Be active and encourage your family to be active. Get active together. Start slow and work up to at least 30 minutes per day 5-7 days each week. Types of physical activities are walking, jogging, dancing, playing active games outside, biking, or any activity you enjoy. Get active...stay active!
- Drink at least eight glasses of water a day. Eat five to nine fruits and vegetables each day.
- Make sure you and your family's immunizations are up-to-date. If you are not sure, talk to your doctor.
- Read something every day! A book, newspaper, magazine...anything you like to read. Read to your children!
- Make sure everyone wears their seat belt when riding in the car. Keep young children and infants safe by making sure they are secure in their car seats.

ELIGIBILITY FOR NEW MEMBERS

- Apply for eligibility at the Department of Economic Security (DES), AHCCCS or Social Security Administration (SSA).
- After eligibility has been decided, call AHCCCS at 1-800-654-8713, or in Maricopa County call 602-417-4000 to enroll in Health Choice Arizona.
- If you have any further questions regarding eligibility, please call Health Choice Arizona Member Services Department at 480-968-6866 (in Maricopa County) or 1-800-322-8670 (outside of Maricopa County).

AHCCCS/KIDSCARE IDENTIFICATION CARD

- You and each enrolled member of your family will get a member identification (ID) card which shows your member identification number. You will need to show your card to get medical care and to get your medicine from the pharmacy.
- Keep your card with you at all times, do not throw the card away.

- **Never** let someone else use your card. Misuse of your card by selling, loaning, or giving your card to someone else to use could result in the loss of your AHCCCS eligibility and/or legal action.
- You must report all changes such as address, phone numbers and name changes to your eligibility case worker at the AHCCCS or DES office where you applied, or by calling DES at 1(800)352-8401.
- Call AHCCCS at 1-800-654-8713, or in Maricopa County call 602-4174000, to get a member ID card.

WHAT TO DO IN CASE OF AN EMERGENCY

In a true life-threatening emergency, which if not treated right away could put your life in danger, lead to death, disability, or can cause harm to you if not treated fast, it is important to get care right away. When you have a true emergency call 911 or go to the nearest emergency. You have the right to go to any hospital, emergency room or other setting for emergency services when your doctor's office is closed.

Emergencies can include:

- Poisoning/Overdose
- Broken bones or a deep cut
- Severe burns
- Severe chest pain
- Pregnant with bleeding and/or pain
- Bleeding that you cannot stop
- Loss of consciousness (knocked out)
- Suddenly not being able to move or speak
- Behavioral health emergency
- Any health issue which, if not treated right away, could lead to death or disability

Tips about Emergencies

- Go to the Emergency Room only when you have real emergencies
- If you are sick, but it is not a real emergency, call your doctor
- You may be charged a co-payment if you use the Emergency Room and it is not an emergency

What is Not an emergency:

- Common cold or flu symptoms or a sore throat.
- Ear ache or tooth ache.
- Back strain. Migraine Headaches. Prescription refills or requests.
- Health problems you have had for a long time.

If you are not sure if your problem is a true emergency call your doctor for advice.

AFTER HOURS AND URGENT CARE

Except in a true emergency, if you have a sudden health problem, call your doctor!

Even if your doctor's office is closed for the day or on a weekend or holiday, call the office anyway. An answering service will make sure your doctor gets your message. Listen very carefully to the instructions that they give to you. You might have to leave a message on an answering machine. It might take a little while for your doctor to get back to you, but your doctor will call you back and tell you what you should do.

The doctor's office may direct you to an Urgent Care Center in the Health Choice Arizona Provider Network. Look in your Health Choice Arizona Provider Directory for the Urgent Care Centers that are near your home.

HOW TO CHOOSE YOUR PRIMARY CARE PHYSICIAN "DOCTOR"

- Your doctor is in charge of making sure that you get all of the medical care that you need.
- If you do not call us to choose your doctor, you will be assigned to the Health Choice Arizona doctor who is closest to your home.
- If you speak a language other than English, we will try to assign you to a doctor that is close to your home and speaks your language.
- You will receive a letter telling you who your doctor is. Please call us within 10 days after you get your letter if you choose to change your doctor. Any changes after that time will go into effect the first day of the next month.
- If you do change your doctor, it is important for you to have your medical records sent to your new doctor so that he or she can give you the best care possible. You can request a copy of your medical records (your request must be in writing) **at no cost to you**. Please call our Member Services Department if you need help.
- Your doctor must approve all of your medical care, including non-life threatening emergency room visits. Also, your doctor must approve visits to specialists such as surgeons.
- Please see your Provider Directory, or call Member Services to see what doctors speak other languages. If you have not received a list of Doctors, please call Member Services at 480-968-6866 (in Maricopa County) or 1-800-322-8670 (outside of Maricopa County) and we will send one to you. You may also see the Provider Directory on our website www.healthchoiceaz.com.

Call your doctor if your children are running a high temperature; your

medicine will run out before your next appointment and can't be refilled; you feel that you have a serious medical problem and/or it is time for your annual check-up.

It is important to stay with one PCP so they can get to know you and your health care needs. But if you do want to change your PCP, call Health Choice Arizona Member Services at 480-968-6866 (in Maricopa County) or 1-800-3228670 (outside of Maricopa County) and we will help you. Our Member Services Department is open Monday - Friday, 6 am - 6 pm, except Holidays.

MAKING AN APPOINTMENT

Your doctor wants to give you the time you need, so please make all appointments before you go to see the doctor. Even if you feel you need to be seen right away, call your doctor first. Let your doctor know you are a Health Choice member, and what problems you are having. All appointments must be set up during your doctor's business hours.

Appointments

There are three types of appointments you may need to make with your doctor:

Same Day – You or a family member need to be seen today for a problem like an earache or high fever.

Urgent – You or a family member need to be seen in the next one to two days for a problem like a cough, mild upset stomach or rash.

Routine – Your or a family member need to be seen within 3 weeks for a check up, well woman check up, immunizations, annual exam, and well-child check up.

Canceling/Missed Appointments

Please let your dentist or doctor know as soon as possible if you cannot keep your appointment for any reason. It is best to let them know at least one day before your appointment. If Health Choice Arizona has set up transportation (a ride) for you, please call our Member Services Department at 480-968-6866 (in Maricopa County) or 1-800-322-8670 (outside of Maricopa County), Monday - Friday, 6 am - 6 pm except Holidays, to let us know that you need to cancel or change your ride.

Tips about appointments:

- If you have not seen the doctor before, get there 15 minutes early.
- Take your AHCCCS ID card with you to every appointment.
- If you have to wait more than 45 minutes for a scheduled appointment, call Member Services.
- You **must** call your doctor's office at least one day before your appointment if you are going to cancel.
- If Health Choice Arizona has set up transportation (a ride) for you, please call us so that we can cancel the ride.

CO-PAYMENTS

A co-payment is a small amount of money a member pays the doctor, hospital, or pharmacy at the time of services.

Members in the following groups and/or services do not have a co-payment for any service. We call these members **Exempt**.

- Members under the age of 19.
- Women that are pregnant.
- Services for members in the Family Planning Services Only Program.
- Members who are receiving services from Children's Rehabilitative Services.
- Members with a Serious Mental Illness (SMI) who are getting services from a Regional Behavioral Health Authority (RBHA). **See page 22 for a list of RBHAs.**
- No member may be asked to make a co-payment for Family Planning services or supplies.

Standard Co-payments

All members except eligible parents of KidsCare and SOBRA children (HIFA Parents) have the Standard Co-payments:

Service	Co-Payment
Prescriptions (Medicine that you get at the Pharmacy)	\$0
Non Emergency use of ER	\$1
Physician Office Visits	\$1

Other Co-payments

Co-payments for Members in the AHCCCS Health Insurance for Parents (Parents of KidsCare and SOBRA Children). The co-payments for members in this group are:

Service	Co-Payment
Prescriptions (Medicine that you get at the Pharmacy)	\$0
Non Emergency Use of ER	\$1
Physician Office Visits	\$0

Your doctor may not deny services if you cannot pay the co-payment and your doctor may not bill you for covered services. If you get a bill, please contact the Health Choice Arizona Member Services Department.

If you have any questions about co-payments, please call Member Services at 480-968-6866 (in Maricopa County) or 1-800-322-8670 (outside of Maricopa County). Our hours are Monday - Friday, 6 am - 6 pm, except holidays.

SPECIALISTS

- Your doctor is in charge of all your healthcare needs, and at times, may need to send you to a specialist.
- Your doctor's office will call the specialist and make an appointment for you, or they will refer you to the specialist so that you can make the appointment yourself.
- Women do not need a referral to see an OB/GYN for routine services (Well Woman check-up) services.
- Some services may need prior approval by Health Choice Arizona in order to be covered. Ask your doctor about this if you have any questions.
- Take your AHCCCS ID card and referral form with you to your specialist appointment.

As a member, you have the right to get a "second opinion" from a doctor in our network or from an out-of-network doctor-if an in-network one is not available-at no cost you.

COVERED SERVICES

Health Choice Arizona is here to help you get the care you need to stay well. Health Choice Arizona provides all AHCCCS covered services. Any service that is provided for you through Health Choice must be medically necessary. Your PCP will provide or arrange **all** of the medically necessary covered services that you need.

Listed below are most of the medically necessary services provided by Health Choice. **Please remember that members enrolled in the SOBRA Family Planning program are only eligible for family planning services.**

- Audiology Services
- Behavioral Health Services - Please see page 21 for more information on behavioral health services.
- Birth Control or Contraceptives.
- Care for the feet (podiatry).
- Care to stabilize you after an emergency.
- Chemotherapy.
- Chiropractic services for members up to the age of 21.

- Circumcisions that are **medically necessary**.
- Diabetes Testing and Testing Supplies.
- Dialysis.
- Doctor Office Visits – To your PCP and specialists.
- Emergency Dental services for members over the age of 21.
- Emergency Services for **life-threatening** medical problems.
- Eyeglasses for adults after cataract surgery.
- Family Planning services (birth control and family planning counseling).
- Health checks and screenings for members up to the age of 21 (EPSDT).
- Home Health services – Visits to your home by a nurse.
- Home and community based services used in the place of Nursing Home services.
- Hospital services.
- Hospice for members 21 or under.
- Immunizations (Shots).
- Incontinence Briefs (used for some bladder problems).
- Laboratory services (things like blood and urine tests).
- Medical equipment and supplies.
- Maternity Care – Care for women when they are pregnant that includes visits to the OB doctor while pregnant, labor and delivery services and maternity care for the women after the baby is born.
- Medical Foods.
- Nursing Home services - Up to 90 days.
- Medical or Nutrition food and therapy if determined medically necessary.
- Dental screenings for children ages 0 through 20 years.
- Organ and tissue transplants that are approved by AHCCCS.
- Outpatient Physical Therapy; Speech/Language Therapy; and Occupational Therapy for members up to the age of 21.
- Outpatient Surgery.
- Personal care – For members up to the age of 21 when unable to perform certain activities for medical reasons.
- Prescription medicines when your doctor orders them and they are on Health Choice's list of approved medicines (formulary).

- Preventive, routine and emergency dental care for children ages 0 through 20 years.
- Respiratory Services.
- Routine physical exams.
- Surgery – When set up by your doctor and approved by Health Choice Arizona.
- Transportation – Medically necessary.
- Urgent Care Services.
- Vision Care – Eye exams and glasses for children up to age 21.
- Well Woman exams without a referral from your PCP.
- X-rays.

There may be other covered services that are not on this list. If you have any questions about the health care that you need, please call our Member Services Department.

Health Choice Arizona will review the services that are requested. If our Medical Director does not approve a service, we will send you a letter telling you why we are not and how to appeal the decision and/or request a State Fair Hearing. Please see page 34 for more information about filing an appeal.

SERVICES THAT ARE NOT COVERED

The following services are **not** covered by Health Choice Arizona:

- Abortions or pregnancy terminations (unless the doctor tells us that the mother's life is in danger or the pregnancy is due to rape or incest) and Abortion counseling.
- Admission to a hospital that is not approved by Health Choice Arizona.
- Any non-emergency service that has not been approved by your doctor and Health Choice Arizona before the service is given.
- Chiropractic services for members over the age of 21 (except for QMB members).
- Cosmetic items or surgery (example; breast enlargement).
- Dentures must be medically necessary and approved by Health Choice Arizona.
- Experimental procedures, treatments or services for research purposes as decided by the medical director.
- Hysterectomies (surgery to remove a woman's uterus) that is not medically

necessary.

- Infertility services (services to help someone have children).
- Outpatient Speech and Occupational Therapy for members over the age of 21.
- Physical exams for the purpose of getting a job or for sports activities.
- Prescriptions (medicine) not on our list of covered medications (“formulary”), unless approved by Health Choice Arizona.
- Reversal of any permanent birth control method such as sterilization.
- Routine circumcisions.
- Routine hearing, vision and dental services for members over the age of 21 (including screenings and exams for prescriptive lenses, glasses and hearing aids).
- Services from a provider that is not in the Health Choice Arizona Network of Providers, unless approved by Health Choice Arizona.
- Services or items for the purpose of making you look better.
- Services provided in an institution for the treatment of tuberculosis (TB).
- Services provided to a person who is an inmate.
- Services that need prior authorization that was not prior authorized, including certain medicines.
- Sex change operations.
- Special duty nurses unless medically necessary and ok'd by Health Choice Arizona.
- TMJ disorders and occlusal guards except with recent trauma. TMJ is jaw joint pain and the guards or producted placed into the mouth to treat the pain.
- Transportation services that are not medically necessary.
- Treatment to straighten teeth (Orthodontic dental care), unless medically necessary and approved by Health Choice Arizona.

If you go to a doctor to get any of the medical care listed above, it is very important that you know that you may be billed for these services. Health Choice Arizona will not pay for the services listed above. If you have any questions about these non-covered services, please call our Member Services Department.

SPECIAL NEEDS FOR YOUR HEALTHCARE

Please tell us if you or a family member has any kind of special needs or special healthcare needs such as:

- You speak a language other than English.
- You have trouble understanding what is being told to you.
- You have trouble seeing or hearing.
- You live in an area that is not close to your family or neighbors.
- You are homeless.

Also, please tell us if you or a family member has any of the following health concerns:

- An illness that has lasted or might last longer than one year (such as allergies, arthritis, asthma, high blood pressure, diabetes, heart problems).
- An illness that requires that you go to a specialist for your care (such as cancer, lupus, kidney failure, severe heart problems).
- Children who receive healthcare through Children's Rehabilitation Services.
- You or a family member receives behavioral health services through the Regional Behavior Health Authorities (RBHA).
- You or a family member has been diagnosed with HIV/AIDS.
- You or a family member has had an organ transplant or are waiting to get an organ transplant.
- You or a family member are physically disabled.
- You are older and in poor health.

Please let us know if your benefits with Health Choice Arizona are hard to understand. For example:

- You have both Medicare and AHCCCS benefits. What does this cover for you?
- You have uninsured family members who might be eligible for services through AHCCCS.

What to do?

Health Choice Arizona wants to make sure that you get the services that are best for you or your family as soon as possible. Please call the Member Services Department right away to tell us about your healthcare needs.

EPSDT/WELL-CARE SERVICES FOR CHILDREN

Health Choice Arizona has a special program for babies, children and youth up to the age of 21. Your children may get check-ups and covered healthcare and dental services at no cost to you.

Check-ups are the best way to keep your child healthy. Follow up treatment for any problems found during the check-up is also covered. Health Choice Arizona will send you a letter when your child needs a check-up. Your doctor will refer your child to a specialist if needed.

All children should have health check-ups.

Tips for appointments Check-ups may help find problems before your child gets sick. Make appointments with your child's doctor at the following ages to help keep your child healthy:

- 2-4 days old then again at 1 month old.
- 2, 4, 6, 9,12,15,18 and 24 months old.
- 3, 4, 5, 6 and 8 years old and each year from age 10 up to age 21.

Check-ups may include:

- Complete, unclothed physical exam which includes the child's developmental history.
- Health and nutritional education and guidance about your child's healthcare and development.
- Immunizations (shots). Lab and X-ray services when needed. Lead and TB (Tuberculosis) Screenings.
- Rehabilitation services which includes occupational, speech and physical therapy. This also includes referrals to Children's Rehabilitative Services (CRS).
- Routine dental exams and treatment that is needed. Your child's physician, physician assistant, or nurse practitioner will examine your child's mouth and teeth at each health check up visit, and make a referral to a dentist.
- Screening for behavioral health and substance abuse problems. Speech, hearing and eye exams.

Tips for appointments

- Take your child's AHCCCS ID card to all your appointments.
- Keep your child's appointments to help keep them healthy.
- Make sure your child gets all of his or her shots and keep a record of all of the shots given.
- Send in a copy of your child's shot record for the "Immune by 2" Program.
- Call you child's doctor if your child needs a referral.

Your child should have their first dental visit within 6 months of the first baby tooth appearing and no later than the first birthday. This gives the dentist a chance to look for early tooth problems and to talk to you about how to care for your baby's teeth. Call to schedule an appointment with the dentist.

With regular check-ups, your child's doctor will be able to find and treat any health problems before they become serious. The doctor will refer your child to a specialist when needed. Call Health Choice Arizona Member Services at 480-968-6866 (in Maricopa County) or 1-800-322-8670 (outside of Maricopa County) for any additional EPSDT/Well Care covered services.

IMPORTANT INFORMATION FOR CHILDREN

WIC - This stands for women's, infants and children's program. It is a nutrition program that provides services to give you (if you are pregnant, just delivered a baby or are breast feeding) and your children (up to age five years) a health diet.

Head Start - A program that provides extra educational, health, nutrition, and parent support services to preschool children and their families.

AzEIP - The Arizona Early Intervention Program, also known as AzEIP (pronounced Ay-zip), evaluates and provides services for children, birth to age three, who have or are at risk for developmental delays or certain disabilities.

FAMILY PLANNING

Family planning services include, but are not limited to:

- Birth control counseling, education and supplies
- Natural Family Planning
- Birth Control Pills
- Condoms
- Foams
- Creams
- Suppositories
- Diaphragms
- Cervical Caps
- Intrauterine Devices (IUD)
- Hormone Shots (Depo Provera)
- Female Condoms
- Permanent Sterilization for males and females 21 years of age and older

- Pregnancy Testing
- Pap Smears, Testicular Exams
- Counseling and Testing for sexually transmitted diseases (STDs)
- Postcoital emergency oral contraception (within 72 hours after unprotected sexual intercourse).

If you become pregnant, notify your DES caseworker. To make an appointment for Family Planning, call your Primary Care Physician. There are no co-payments for Family Planning Services.

IMPORTANT NOTICE

If you have lost your AHCCCS Family Planning Benefits and need help finding low-cost or no-cost Family Planning Services, you may call the number for your the area clinic closest to your home, listed below. They can also help you get counseling and testing for STDs.

Also, if you are eligible for family planning services only, and are in need of primary care services, please contact our Member Services Department (in Maricopa County) 480-968-6866 or (outside Maricopa County) 1-800-322-8670. TTY users call: 1-800-842-4681.

Arizona Department of Health Services.....	1-800-833-4642
Apache County Health Department.....	928-333-2415
Coconino County Health Department.....	928-522-7800
Gila County (Planned Parenthood of Central and Northern AZ)	928-425-3223
Mohave County Health Department.....	928-753-0748
.....	or 1-888-735-3711
Maricopa County (Planned Parenthood of Central Arizona).....	602-277-7526
Navajo County Public Health Services District	928-524-4750
Pima County (Planned Parenthood of Southern Arizona)	520-628-4850
Pinal County Department of Public Health	1-800-231-8499
Planned Parenthood	1-800-230-7526
.....	or www.PPCNA.org

PREGNANCY & MATERNITY SERVICES

If you are pregnant, it is very important for you to keep your eligibility up to date. See your PCP as soon as you think you are pregnant. Also, notify your local DES office as soon as you find out that you are pregnant.

Maternity services include:

- Freedom to choose your OB provider within your county and our network of doctors.
- Counseling before you become pregnant.
- Pregnancy testing.
- All prenatal visits and all medically necessary services a woman needs for her pregnancy.
- Childbirth classes.
- Care after the baby is born, including contraception counseling.
- Labor and delivery services.
- HIV testing and counseling.

Be sure to report the birth to your eligibility worker to make sure that your AHCCCS health coverage continues for you and your child. Call a Health Choice Arizona Member Services Representative at 480-968-6866 (in Maricopa County) or 1-800-322-8670 (outside of Maricopa County), Monday - Friday, 6 am - 6 pm except Holidays, to arrange for a PCP for you and your baby. Be sure to follow up with your OB doctor for your check-up after your baby is born.

Making Appointments when you are Pregnant

Pregnant less than 3 months

First Trimester

- You should be seen within 14 days of calling for your appointment.

Pregnant 3-6 months Second

Trimester

- You should be seen within 7 days of calling for your appointment.

Pregnant 6-10 months

Third Trimester

- You should be seen within 3 days of calling for your appointment.

Members who have come to Health Choice Arizona in the last three months of pregnancy should call the Maternal Child Health Department at 1-800-828-7514. One of our staff will talk to you about your prenatal care. Our staff can help you

pick a doctor. Health Choice Arizona has a lot of doctors to choose from. If you were seeing a doctor that is not with Health Choice Arizona you may be able to still see him. Our staff will help you decide who is the best for you and your baby.

IMPORTANT DEFINITIONS FOR PREGNANT MEMBERS

High Risk Pregnancy - If you have any health problems like asthma, high blood pressure, diabetes, depression, HIV or you had problems with a previous pregnancy, you will need to see your OB doctor as soon as you find out that you are pregnant.

Licensed Midwife - This is a person who may provide OB care, support and education to healthy women, with no health risks, during pregnancy, labor, childbirth and after the baby is born.

Maternal Care Coordinator - This is a nurse coordinator who assists pregnant members with their health needs before, during and after pregnancy. This would also include referrals to community agencies such as WIC, behavioral health and “Healthy Families.”

- Make a doctor’s appointment as soon as you know you are pregnant.
- Keep all of your appointments.
- Don’t drink, smoke, or take drugs while you are pregnant.
- Call the Health Choice Arizona Maternal Child Health Department at 1-800-828-7514 for information about childbirth classes assistance during your pregnancy.
- Tell your doctor that you want to be tested for HIV/AIDS to make sure that you and your baby are healthy.
- Call 1-800-252-5942 to find the nearest WIC office. WIC can help with nutrition education, breastfeeding support, and food and formula assistance.

HOSPITALIZATION

If you need to be in the hospital, your Doctor will set it up for you.

BEHAVIORAL HEALTH SERVICES

Behavioral Health Services are services for the treatment of general mental health issues, depression, anxiety, drug and alcohol problems, or other life-long mental health needs.

Members who need behavioral health services will get these services through the Regional Behavioral Health Authority (RBHA) or the Tribal Regional Behavioral Health Authority (TRBHA). You **do not** need permission from Health Choice Arizona to get these services.

If you think you may need behavioral health services, talk to your PCP or call your local RBHA or TRBHA on your own. The RBHA/TRBHA will help you find out what type of services you can get and where you can get them. You may not have to pay anything for the services or you may have to pay based upon how much money you make.

You may be able to receive medication treatment for your behavioral health problem from your PCP if you have mild depression, anxiety or Attention Deficit Hyperactivity Disorder (ADHD). Please talk to your PCP about your choices.

If you have any questions about what is covered or how to reach the RBHA/TRBHA, you may call our Member Services Department at 480-968-6866 in Maricopa County or 1-800-322-8670 outside of Maricopa County, Monday – Friday, 6 am – 6 pm, except holidays.

The RBHA/TRBHA will arrange other behavioral health services that you need like:

- Services to evaluate your problems.
- Counseling and other kinds of therapy for personal, family and drug and alcohol problems.
- Doctor services.
- Medicine and services to monitor your medicines.
- Case Management.
- Emergency/Crisis Services.
- Hospitalization.
- Respite care.
- Transportation.

The following is a list of RBHAs/TRBHA by county which provide Behavioral Health, Substance Abuse and Crisis services. Crisis services are available 24hrs/7days a week.

County	RBHA	Phone #
Maricopa	Magellan Crisis Hotline Staffed 24 hrs)	Member Services 1-800-564-5465 Crisis Line 602-222-9444
Pima	Community Partnership of Southern Arizona (CPSA) After 11pm, calls roll over to Crisis Department (Staffed 24 hrs)	1-800-771-9889

County	RBHA	Phone #
Gila & Pinal	Cenpatico Behavioral Health Crisis Line - 24 hrs/7 days a week	1-866-495-6738 1-866-495-6735
Coconino, Mohave, Navajo, Apache & Yavapai	Northern Arizona Regional Behavioral Health Authority (NARBHA) After 5:00 pm, calls rollover to an answering service Crisis calls are directed to crisis providers	1-800-640-2123 or 1-928-774-2070

The following is a list of TRBHAs	Phone #
Pascua Yaqui Behavioral Health Pascua Yaqui Crisis Hotline (Staffed 24 hrs)	520-879-6060 520-591-7206
Gila River Gila River Indian Community Crisis Line (Staffed 24 hrs)	520-562-3321 602-528-1200 1-800-259-3449
Navajo Nation Regional Behavioral Health Crisis Line Unavailable	928-871-7945 Please go to your local Indian Health Services Hospital for help, call 911 or call your PCP.

Tips for Dental Services

- Bring your AHCCCS ID card with you to your appointment
- If you are a new patient, get to the dentist office 15 minutes before your appointment
- Keep your appointment. If you cannot keep your appointment, call the dentist office to tell them.
- If you get a denial from HCA for dental treatment requested, call the dentist office for an explanation. Many times, only part of the treatment was denied.

DENTAL SERVICES FOR MEMBERS AGES 21 AND OLDER

Health Choice members ages 21 and older are covered for emergency dental care. Emergencies include, but are not limited to, severe pain and infection. Members ages 21 and older can also have medically necessary dentures and dental care when approved for immediate organ transplants.

Members ages 21 and older do not need a referral from your PCP to see a general dentist. All dental specialists require an approved referral from HCA.

DENTAL SERVICES FOR MEMBERS AGES 0-20 YEARS

Taking good care of your child's teeth is important because even "baby" teeth help your child chew food and speak clearly. Baby teeth also hold space so permanent teeth can grow in straight.

Your child should have their first dental visit within 6 months of the first baby tooth appearing and no later than the first birthday. This gives the dentist a chance to look for early tooth problems and to talk to you about how to care for your baby's child's teeth. Your child's physician, physician assistant, or nurse practitioner will examine your child's mouth and teeth at each EPSDT visit, and make a referral to a dentist if necessary.

- Members ages 0-20 years do not need a referral from your PCP to see a general dentist.
- Members ages 5 and under do not need a referral from your PCP or general dentist to see a pediatric dental specialists.

FINDING A DENTIST

To find the dentist closest to you, look in your Health Choice Provider Directory or you can call Health Choice Member Services at 480-968-6866 in Maricopa County or 1-800-322-8670 outside of Maricopa County.

MAKING DENTAL APPOINTMENTS

Emergency – You or your family member need to be seen today due to extreme pain, or a broken tooth.

Urgent – You or your family member need to be seen within 3 days due to a lost filling or a broken tooth.

Routine – You or your family member need to be seen within 45 days for a cleaning and check-up.

TRANSPORTATION

You are responsible for arranging your own transportation to and from your medical appointments. You must try to use your own car, take the bus, or have a family member or friend give you a ride. If you cannot drive yourself, get a ride or if you cannot pay for a ride, we will arrange one for you. SOBRA Family Planning members are not covered for any type of transportation services.

Transportation Tips

For faster service, have the following information ready when calling Health Choice Arizona Member Services (in Maricopa County call 480-968-6866; outside Maricopa county call 1-800-322-8670) to set up transportation:

- Your appointment time and date.
- Your pick-up address and your correct telephone number.
- Name of the facility/provider where you are being transported to.
- Address and telephone number of the facility/provider.
- Let us know if you need special accommodations such as wheelchair/stretcher, car seat or if you carry oxygen.

- Transportation is provided to medical facilities only such as: your Doctor's office, Dentist, Pharmacies.

- You must call Member Services four business days before your routine appointment.

- We allow only one other passenger to go with you to your appointment.

- Transportation must generally be within a 10-mile radius within your county.

- You need to use the specialists and doctors in your county in order to use Health Choice Arizona transportation.

- Transportation to the ER needs to be approved by the Doctor.

- Prescription pick-ups are done between 3 - 6 pm. The member does not need to travel with the taxi driver unless the member is picking up a medicine that is a narcotic.

- Prescriptions written by your doctor

are picked up between 3 - 6 p.m.

- Transportation to non-participating medical facilities requires a Prior Authorization. Call Health Choice Arizona Member Services at 1-800322-8670 (outside Maricopa County) or 480-968-6866 (inside Maricopa County) to request this authorization.
- Transportation to pick up behavioral prescriptions is not provided. If you need transportation, call your Behavioral Health care giver.

Please be ready for your pick up and keep in mind that:

- The taxi may pick you up at least one hour before your scheduled appointment time. If traveling a long distance you may be picked up more than an hour prior.
- If you cancel your appointment please call us to let us know to avoid having your transportation benefits be restricted.

WHAT TO DO IF YOU RECEIVE A DOCTOR BILL

If you receive a bill from your provider, please send the bill to Health Choice Arizona for review. We will be happy to tell your provider that as an AHCCCS member, you do not have to pay for covered services. If you paid for covered services while enrolled as a Health Choice Arizona member, your provider should refund your money – minus any copay amount – to you.

PHARMACY REIMBURSEMENTS

If you paid for your medications, you may send your cash register and pharmacy receipt to Health Choice Arizona for review.

You may be eligible for reimbursement if...

...the medicine is covered or authorized by Health Choice Arizona.

...the medications were filled at a participating pharmacy.

...you were covered on the date the medications were filled.

If you are having problems filling your prescription, ask the pharmacy to call us at 1-800-322-8670. Please **do not** pay out of pocket for your prescriptions.

PRESCRIPTIONS (MEDICINE)

Health Choice Arizona provides a “closed” drug formulary (medicine) benefit for its members. If the drug is not on the Health Choice Formulary, Health Choice must first approve the prescription drug for payment at the pharmacy or reimbursement to the member for an emergency, out-of-area prescription situation, after the Health Choice member has paid for the drug. You must have

the prescription filled by one of our participating pharmacies. Please see the Health Choice Arizona Provider Directory for pharmacies you can use.

When you go to the pharmacy, you must tell the pharmacy that you are a Health Choice Arizona Member. If you do not, Health Choice Arizona may not pay for your medicine. Remember, prescriptions must be given to you by your doctor. Over the counter medicine may be prescribed if it is a lower cost than a prescribed medicine. Do not let your medication run out before calling for a refill.

For help please call Health Choice Arizona Member Services at 480-968-6866 (in Maricopa County) or 1-800-322-8670 (outside of Maricopa County), Monday - Friday, 6 am - 6 pm.

OUT OF AREA COVERAGE

Care for Health Choice Arizona members traveling outside of their service area is for emergency care services only. Your service area is the county in which you live. If you travel outside your service area and you need medical care, Health Choice Arizona will pay for emergency services only.

Emergency services are those health services that are needed for relief of severe pain or to treat a sudden medical condition that if not treated right away would lead to disability or death. Other care must wait until you return to your service area.

WHAT TO DO IF YOU MOVE OUT OF THE AREA

If you move to an area that is not covered by Health Choice Arizona, you must report this change to the Department of Economic Security Office (DES) 1-800352-8401, or the agency that made you eligible for AHCCCS.

You must also call the AHCCCS enrollment unit to report your move to an area that is not covered by Health Choice Arizona. It is **very important** that you do this so that you will have healthcare coverage when you move. You can only change or request to change (if you are not in your enrollment period) your health plan by calling AHCCCS at 1-800-654-8713 or in Maricopa County call 602-417-4000.

WHAT TO DO IF YOUR PERSONAL INFORMATION CHANGES

Please contact AHCCCS and Health Choice Member Services right away if you or your family change in these ways:

- Adopt
- Address change of any kind
- Birth
- Death

- Divorce
- Guardianship changes
- Marriage
- Move out of county
- Move out of state
- Phone number changes

It is important to update your changes, because both AHCCCS and Health Choice may send information to you, and to make sure you get it, we need your correct address.

MEMBER RIGHTS AND RESPONSIBILITIES

As a Health Choice Arizona Member, you have the following rights:

- You have the right to be treated with respect and dignity.
- You have the right to privacy and confidentiality concerning your healthcare and your medical records. All information about your health plan is private except when the release is allowed by law.
- You have the right to not be discriminated against in the delivery of healthcare services based on race, ethnicity, national origin, religion, sex, age, mental or physical disability, sexual orientation, genetic information, or source of payment.
- You have the right to ask for information about the Health Plan's Physician Incentive Program and the ways that the health plan pays our providers. You may also ask if stop-loss insurance is required, and you may ask for a summary of the member survey results for the health plan.
- You have the right to have services provided in a culturally competent manner with consideration for your ability to read and understand English, your cultural or ethnic background, or if you have visual or hearing limitations. Options include access to a language interpreter, a person who can perform sign language if you have a hearing impairment, and written materials available in Braille for visual impairments, or in different formats, as appropriate.
- You have the right to choose a Primary Care Provider (PCP), within the limits of the Health Choice Arizona provider network, and choose other providers as needed from among those affiliated with the network. This also includes the right to refuse care from specified providers.
- You have the right to take part in decision-making about your healthcare and/ or have someone, chosen by you, to make choices for you if you are too sick to make healthcare decisions. This includes the right to refuse care.

- You have the right to be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation.
- You have the right to information so that you can put together Advance Directives; this is a plan that tells your healthcare providers what kind of treatment you do or do not want if you become too sick to make your own healthcare decisions.
- You have the right to receive information in a language and format that you understand, the amount, duration, and scope of all services and benefits, service providers, services included and excluded as a condition of enrollment, and other information including:
 - Provisions for after-hours and emergency healthcare services and information about available treatment options (including the option of no treatment) or alternative courses of care.
 - How to obtain services, including authorization requirements and any special procedures for obtaining mental health and substance abuse services, or referrals for specialty services not furnished by your PCP.
 - Procedures for obtaining services outside the geographic service area of Health Choice Arizona and how to obtain AHCCCS covered services that are not offered or available through Health Choice Arizona.
 - The right to obtain family planning services from an appropriate AHCCCS registered provider; and, how the organization evaluates new technology for inclusion as a covered benefit.
- You have the right to be provided with information regarding grievances, appeals, and requests for hearing.
- You have the right to review your medical records in accordance with applicable Federal and State laws; and, the right to request and receive a copy of your medical records as allowed by law (in Title 45 of the Code of Federal Regulations (CFR) 164.524).
- You have the right to amend or correct your medical records as allowed by law in 45 CFR 164.526.
- Your right to access medical records may be denied if the information is psychotherapy notes, compiled for, or in reasonable anticipation of a civil, criminal or administrative action, protected health information subject to the Federal Clinical Laboratory Improvement Amendments of 1988 or exempt pursuant to 42 CFR 493. What this means is that we may use, share or deny sharing health information with you or a legal agency if told to by law which may be in the form of a subpoena, warrant or court order. This may be as a result of a legal matter such as civil, criminal or administrative action.

As a Health Choice Arizona member, you have the following responsibilities:

- To know the name of you assigned doctor known as your Primary Care Provider (PCP)
- To provide, to the extent possible, information needed by the professional staff who is taking care of you (tell you doctor about your health history and/or any medical problems that you have so that you get the best possible care).
- To follow the advice given by health care provider (doctor), take your medicine as prescribed, talk with your doctor about your medical care, and get the proper PCP approval, as needed
- To make appointments during office hours whenever possible instead of using urgent care facilities and/or emergency rooms.
- To get to your appointment on time or to call your doctor ahead of time if you cannot make your appointment.
- To bring shot records to every appointment for your children who are 18 years of age or younger.

ADVANCE DIRECTIVES

There may be a time when you are so sick that you cannot make a decision about your own healthcare.

An Advance Directive is a paper that protects your right to refuse healthcare you do not want. It may also tell people about care that you do want.

There are four types of Advance Directives: your right to make decisions about Will and/or Medical Power your healthcare and thinks that it of Attorney to your doctor, is important for you to have one or hospital and any other more of these papers.

1. Living Will
2. Medical Power of Attorney
3. Mental Healthcare Power of Attorney
4. Pre-Hospital Medical Directive

Health Choice Arizona respects your right to make decisions about your healthcare and thinks that it is important for you to have one or more of these papers.

A **Living Will** is a piece of paper that tells doctors what types of services you do or do not want if you become sick and may die. For example, in your Living Will

you might tell doctors if you want to be kept alive with machines or fed through tubes if you cannot eat or drink on your own.

A **Medical Power of Attorney** is a paper that lets you choose a person to make decisions about your healthcare when you cannot do it yourself.

A **Mental Healthcare Power of Attorney** names a person to make decisions about your mental healthcare if it is found that you cannot.

A **Pre-Hospital Medical Care Directive** tells providers if you do not want certain lifesaving emergency care that you would get outside a hospital or in a hospital emergency room. You must complete a special orange form.

You should get help writing your Living Will and Medical Power of Attorney. Ask your doctor for help if you are not sure whom to call.

Tips about Advanced Directives

- It is very important for you to decide what treatment you do or do not want.
- Give copies of your Living Will and/or Medical Power of Attorney to your doctor, hospital and any other people involved with your healthcare.
- You should get help writing your Living Will and/or Medical Power of Attorney. Ask your doctor for help if you are not sure whom to call.
- If you change any part of your Living Will or Medical Power of Attorney, you should make sure you give a copy of the new one to all the people who already had a copy of the old one.

Making Your Advance Directives Legal

For both a Living Will and a Medical Power of Attorney, you must choose someone who will make decisions about your healthcare if you cannot. This person can be a family member or a close friend and is called your **agent**.

To make an Advance Directive legal, you must:

1. Sign and date it in front of another person, who also signs it.

This person **cannot**:

- Be related to you by blood, marriage or adoption;
- Have a right to receive any of your personal and private property;
- Be appointed as your agent; or
- Be involved with the paying of your healthcare.

OR

2. Sign and date it in front of a Notary Public. The Notary Public cannot be your agent or any person involved with the paying of your healthcare.

If you are too sick to sign your Medical Power of Attorney, you may have another person sign for you.

After you Complete your Advance Directives

- Keep your original signed papers in a safe place.
- Give copies of the signed papers to your doctor(s), hospital, and anyone else who might become involved in your healthcare. Talk to these people about your wishes concerning healthcare.
- If you want to change your papers after you have signed them, you must complete new papers. You should make sure you give a copy of the new paper to all the people who already had a copy of the old one.
- Be aware that your directives may not be effective in a medical emergency.

Source of Additional Information and Forms

The following organization provides healthcare directive forms and information:

Aging and Adult Administration

State of Arizona

1789 W. Jefferson, Site Code 950A

Phoenix, AZ 85007

Phone: 602-542-4446

Your local Area Agency on Aging and Senior Center may also have forms and information.

If you have complaints about your right to make healthcare decisions you may contact the Health Choice Arizona Member Services Department at 480-968-6866 (in Maricopa County) or 1-800-322-8670 (outside of Maricopa County). You may also contact AHCCCS at 1-800-654-8713 or in Maricopa County call 602-417-4000.

YOUR PRIVACY

The privacy of your medical information is very important to us. When you – or any person involved with your care – call Health Choice Arizona, we try to verify that we can talk to the person calling about your care. If we are unsure about your wishes, we will not share any information with a caller.

To avoid problems, please notify Health Choice Arizona Member Services department at 480-968-6866 (in Maricopa County) or 1-800-322-8670 (outside of Maricopa County) with:

- The names of people involved with your care that you do not want us to share your information with (like family members that we may otherwise think it is OK to share information with).

AND

- The names of people that we can share your information with (like friends and neighbors that help you).

If you are a legal guardian or have medical power of attorney for a Health Choice Arizona Member, please send us that information so that we know it is ok to speak to you about that member.

WHAT TO DO IF YOU AND YOUR DOCTOR THINK YOU NEED AN IMMEDIATE HEALTHCARE SERVICE

If you and your doctor believe you need a healthcare service immediately, you can ask for an “expedited” (within 72 hours or 3 days) decision.

You and/or your doctor must fill out the appropriate forms and provide any documentation to support your request. You can get a form and find out what you need to do by calling Health Choice Arizona’s Member Services Department at 800-322-8670 (outside Maricopa County) or by calling 480-968-6886 (inside Maricopa County).

If your request for an immediate healthcare service does not meet the three day (72 hour) review according to Arizona Health Care Cost Containment System (AHCCCS) rules, your request will still be reviewed as soon as possible. This can take up to a 14 day “standard” timeframe. You and your doctor will also be notified of the change. Please note: Health Choice Arizona has **not** denied this request.

You can tell us if you disagree with this change. This is called a “grievance”. Your doctor or someone else you choose can help you file a grievance if you write telling us you have given them consent to do this. You may file your grievance by calling or writing to:

Health Choice Arizona

1600 W. Broadway Rd., Ste. 260

Tempe, AZ 85282

Phone outside Maricopa County: 1-800-322-8670

Phone inside Maricopa County: 480-968-6866

Also see the Complaints and Appeals section below for more information.

GRIEVANCES (COMPLAINTS) AND APPEALS

If you have a concern with any part of your healthcare, please call Health Choice Arizona at 480-968-6866 (in Maricopa County) or 1 800-322-8670 (outside of Maricopa County), Monday - Friday, 6 am - 6 pm.

The problem or concern you are calling about will come under one of two areas Grievances (Complaints) or Appeals which are explained on the following page.

Grievances (Complaints)

A grievance (complaint) is about anything that does not involve any kind of action taken by Health Choice Arizona. Grievances (complaints) can be about quality of care, staff attitude, rudeness, or any other kind of problem you may have had with your healthcare service. A Health Choice Arizona Member Services Representative will help you file the grievance (complaint) and ask you some questions about the concern. Please provide Health Choice Arizona with the date the problem happened and any other facts that you feel we need to know about. Health Choice Arizona will look into your (grievance) complaint. We are here to help you. You will get a letter from us when we are done with the investigation.

STATE FAIR HEARING AND APPEALS PROCESS

Member Right To Request An Appeal On An Adverse Action

Health Choice Arizona may deny services that your doctor asks for or we may limit or stop care we had said you could have. If this happens, you will get a letter from Health Choice Arizona called a Notice of Action.

The Notice of Action will tell you why Health Choice Arizona made the decision. We will tell you the law, rule or policy that was used to make the decision and the date that we made the decision. The Notice of Action will tell you how to ask Health Choice Arizona to review the decision. This review is called an Appeal. The Notice of Action will tell you how you can keep getting care during the appeal process. The Notice of Appeal will also explain that if you lose the Appeal, you will have to pay for the care you got during the appeals process. Before filing an Appeal, check with your PCP because he or she may have an alternative plan of care.

USING A REPRESENTATIVE

If you choose to Appeal our Notice of Action you have the right to get help. You can file the Appeal yourself, or you can have someone file it for you. If you want someone (like your family member, friend, clergy or even your doctor) to help you with your Appeal you need to tell us you're allowing them to, by calling 480-968-6866 or writing to us at:

Health Choice Arizona

Attention: Member Appeals
1600 W. Broadway Rd., Ste. 260
Tempe AZ 85282

Phone outside Maricopa County: 1-800-322-8670

Phone inside Maricopa County: 480-968-6866

When Health Choice Arizona sends a Notice of Action, we also send a list of agencies that may be able to help you with your Appeal. If you need another list, please call our Member Services department.

REQUESTING AN APPEAL

You may ask for an Appeal if you get a Notice of Action. You can ask for the Appeal by calling Health Choice Arizona at 480-968-6866 (in Maricopa County) or 1-800-322-8670 (outside of Maricopa County) or writing Health Choice Arizona a letter.

Your doctor can ask for an Appeal for you. If you want your doctor to ask for your Appeal you must give your doctor written permission to ask for the Appeal. You or your doctor have 60 days from the date on the Notice of Action to ask Health Choice Arizona for the Appeal. If you want to keep getting care during the appeal process, you must follow the rules listed in the section called “Receiving Continued Benefits” on page 36. Send your letter or call:

Health Choice Arizona

Attention: Member Appeals/Compliance
1600 W. Broadway Rd., Ste. 260
Tempe, AZ 85282

Phone number in Maricopa County: 480-968-6866

Phone number outside Maricopa County: 1-800-322-8670

Before you ask us for an Appeal and during the Appeal process, you can look at all the paperwork that Health Choice Arizona used to make our decision. Before Health Choice Arizona makes a decision about your Appeal, you can send us more information about your care.

After Health Choice Arizona has looked at the file, we will send you a letter telling you our decision. This letter is called a Notice of Appeal Resolution. The Notice of Appeal Resolution will be sent to you in 30 days. You can ask Health Choice Arizona to make a decision faster if waiting 30 days would seriously harm your health, life or ability to reach, get back or keep maximum functioning. Health Choice Arizona will let you know if we agree that a fast decision must be made. If Health Choice Arizona makes a fast decision, Health Choice Arizona will try to call you on the telephone. We will call you in three working days and tell you our

Appeal decision. Health Choice Arizona will also send you a letter telling you the decision. This letter is called a Notice of Expedited Appeal Resolution.

MEMBER'S RIGHT TO REQUEST A HEARING ON HEALTH CHOICE ARIZONA'S APPEAL DECISION

After Health Choice Arizona has looked at the file, we will send you a letter telling you the decision. This letter is called a Notice of Requesting a State Fair Hearing.

If you do not like the appeal decision, you can ask for a State Fair Hearing. You must ask for the State Fair Hearing in writing. You have 30 days from the date on the Notice of Appeal Resolution to ask for a State Fair Hearing. If you want to keep getting care during the hearing process, you must follow the rules listed in the section called Receiving Continued Benefits on page 36. Send your letter or call:

Health Choice Arizona

Attention: Member Appeals/Compliance

1600 W. Broadway Rd., #260

Tempe, AZ 85282

Phone number in Maricopa County: 480-968-6866

Phone number outside Maricopa County: 1-800-322-8670

After you ask for a State Fair Hearing, you will receive a Notice of Hearing from AHCCCS. The Notice of Hearing will tell you the law, rule or policy that will be used at the hearing. The Notice of Hearing will tell you where and when the hearing will be held. AHCCCS will also send you information about the hearing process and how to ask for a hearing by telephone.

You can either speak for yourself at the hearing or give the okay in writing to a lawyer, relative, friend or anyone to speak for you at the hearing. Before, and during the hearing, you and the person helping you can look at all the paperwork that will be used at the hearing. You can bring someone to the hearing that knows about your case. You can also bring information about your case to the hearing.

THE STATE FAIR HEARING

An administrative Law Judge will hold the State Fair Hearing. The Judge will listen to everything that is said at the hearing. After the hearing, the Judge will send a Recommended Decision to AHCCCS. AHCCCS will read the Recommended Decision and agree with it, change it, or reject it. AHCCCS will send you a letter telling you the decision. This letter is called a Director's Decision. The Director's Decision will tell you if you have won or lost the hearing. AHCCCS will tell you why it made the decision. AHCCCS will also tell you if you have more appeal rights.

If you lose the State Fair Hearing, the Director's Decision will also tell you that you have to pay for the care you got during the State Fair Hearing process.

AHCCCS will send the Director's Decision 90 days after you asked Health Choice Arizona for a State Fair Hearing. For fast appeals, you will get the Director's Decision three working days after AHCCCS gets all the information from Health Choice Arizona.

RECEIVING CONTINUED BENEFITS

You can keep getting care during the Appeal and State Fair Hearing process if **all** of the things listed below are true:

- Health Choice Arizona stops or limits care it had said **okay** to before.
- Your provider ordered the care.
- The length of time of the first **okay** from Health Choice Arizona for your care is not over.
- You ask to keep getting your care.
- You send Health Choice Arizona your Appeal before we stop or limit treatment or within ten (10) days of the date on the Notice of Action, whichever is later.

You will continue to get the care until any of the following happens:

- You ask to stop the Appeal or State Fair Hearing.
- You do not ask for continued care and do not ask for a hearing within 10 days from the date that Health Choice Arizona sends you the Notice of Appeal Resolution.
- You lose the State Fair Hearing.
- The length of time of the first ok from Health Choice Arizona for your care ends.

Please note: You will have to pay for any of the care that you get if you lose the appeal or State Fair Hearing.

FRAUD AND ABUSE

Members are in charge of taking care of their AHCCCS ID cards. Using the card in a way that is wrong, such as loaning, selling, or giving it to someone else could result in the loss of eligibility and/or legal action as applied by Federal or State law (42 CFR 455.2) If you witness any misuse of any ID card or any other type of fraud or abuse please contact Member Services, or you can call or write AHCCCS. AHCCCS also has a Member Fraud Hotline you can call at 1-888-ITS NOT OK (1-888-487-6686).

FRAUD is any intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to himself or some other person. It includes any act that constitutes fraud under applicable Federal or State law (42 CFR 455.2).

ABUSE (of member) means provider practices that are inconsistent with sound fiscal, business or medical practices, and result in an unnecessary cost to the AHCCCS program; or in reimbursement for services that are not medically necessary or that fail to meet professionally recognized standards for healthcare. It also includes recipient practices that result in unnecessary cost to the AHCCCS program (42 CFR 455.2).

OTHER INSURANCE AND MEDICARE

AHCCCS is the payer of last resort. That means that any other insurance will pay for your medical care **before** Health Choice Arizona pays. You must tell AHCCCS or Health Choice Arizona if you have other insurance.

AHCCCS members who are eligible for both Medicare and AHCCCS services are called “dual eligible”. They may be either Qualified Medicare Beneficiary (QMB) or non-QMB eligible.

QMB eligible persons are entitled to all covered AHCCCS (Medicaid) services and in addition, may receive the following:

- Chiropractic services.
- Inpatient & Outpatient Occupational Therapy.
- Inpatient Psychiatry.
- Behavioral Health services like partial hospitalization.
- Any services added to the Medicare program which are not covered by AHCCCS.

If you are a Health Choice Arizona Member with Medicare or other insurance, you **must** use your Health Choice Arizona doctor and other providers that are contracted with Health Choice Arizona, including pharmacies. If you or your doctor want you to visit a Out-of-Network Provider, your doctor **must** get Prior Authorization from Health Choice Arizona. Without Prior Authorization, Health Choice Arizona **will not** pay for care provided by Out-of-Network Providers.

CHANGING YOUR HEALTH PLAN

You may change your health plan if:

- AHCCCS did not send you an Annual Enrollment Choice notice.
- You are not enrolled in the same health plan as your other family members.

- You are a member of a special group (Pascua Yaqui or Homeless Shelter), and need to be enrolled in the same health plan as your group
- Medical continuity for a continuing health issue is needed.
- You lost eligibility for less than 90 days, and were not re-enrolled in the same health plan as before.

If you meet one of these five reasons above for a plan change, you may call AHCCCS at 1-800-654-8713 or in Maricopa County call 602-417-4000.

You may also change your health plan during Annual Enrollment Choice which is at your one year anniversary date of your AHCCCS eligibility.

For example, if you became eligible with AHCCCS in September, you will be able to change your health plan the next September of the following year. You can call AHCCCS at 1-800-654-8713 (outside Maricopa County) or 602-417-4000 (in Maricopa County) for more information regarding Annual Enrollment Choice.

If you have questions or concerns about your healthcare, transportation, doctor, covered services, or care you are receiving, please call your Member Services Representative at 480-968-6866 in Maricopa County or 1-800-322-8670 outside of Maricopa County, and they will help you. Our Member Services Department is open Monday - Friday, 6 am – 6 pm.

KIDSCARE

KidsCare is a no-cost or low-cost insurance program for children under the age of 19. It is available for working families who cannot afford health insurance through their employer, but earn too much money to be eligible for AHCCCS.

For more information about KidsCare eligibility and enrollment, please call KidsCare at 602-417-5437 (in Maricopa County) or 1-877-764-5437 (outside of Maricopa County).

KidsCare Covered Services

- Emergent and non-emergent transportation.
- Medical coverage.
- Dental coverage.
- Vision coverage.
- Behavioral Health services.

Please see pages 11 through 14 for more information on covered services and services not covered by Health Choice Arizona.

For more information about the KidsCare program and Health Choice Arizona, call Member Services at 480-968-6866 (in Maricopa County) or 1-800-322-8670 (outside of Maricopa County), Monday - Friday, 6 am - 6 pm.

