



allcare cco

Member Handbook

Your guide to benefits and services
October 2018/2019

OHP-ALL-18-184



Si no habla Inglés

Si no habla Inglés, o no oye bien, o tiene algún impedimento al hablar, usted puede conseguir servicios gratis de interpretación. Favor de contactar (541) 471-4106, (888) 460-0185, TTY 711.

Getting The Handbook in Another Format

Everyone has a right to know about AllCare CCO's programs and services. All members have a right to know about and use our programs and services. We give these kinds of free help:

- Sign language interpreters
- Spoken language interpreters for other languages
- Written materials in other languages
- Braille
- Large print
- Audio and other formats

If you need help or have questions, please call (888) 460-0185.

If you need an interpreter at your appointments, tell your provider's office that you need an interpreter and for which language. Information on certified Health Care Interpreters is at www.Oregon.gov/oha/oei.

Other Ways to Get The Handbook

You can find and download the member handbook on our website at:

www.AllCareHealth.com/medicaid/services/member-services/member-handbook

You can also ask for a handbook to be mailed to you by calling Member Services at: (541) 471-4106, toll free at (888) 460-0185, or hearing impaired (TTY) 711.

Changes to Benefits

If your benefits change, you will be notified 30 days before the change takes place, or as soon as possible. For questions about benefit changes, contact Member Services at: (541) 471-4106, toll free at (888) 460-0185, or hearing impaired (TTY) 711.

Contact Us

All of our offices are open Monday through Friday, 8:00 a.m. to 5:00 p.m.

Our offices are located at:

Grants Pass: 1701 NE 7th Street, Grants Pass, OR 97526

Medford: 3629 Aviation Way, Medford, OR 97504

Brookings: 16271 Hwy 101 S. #25, Harbor, OR 97415

You can reach us by phone at: (541) 471-4106, toll free at (888) 460-0185, or hearing impaired (TTY) 711, or by Fax at (541) 471-3784.

Our mailing address is:

AllCare Health, 1701 NE 7th Street, Grants Pass, OR 97526.

You can find us on the web at: www.AllCareHealth.com.

Medicare Counseling

The Senior Health Insurance Benefits Assistance (SHIBA) program can help you with your Medicare. It is free and confidential. SHIBA counselors can help you select a Medicare Prescription Drug Coverage plan. They can help you compare Medicare Advantage plans and Medicare Supplement (Medigap) policies. They can help you apply for a Medicare Savings Program. SHIBA can also look over your Medicare bills, file appeals, and report complaints.

If you would like help from SHIBA, call:

Oregon Senior Health Insurance Benefits Assistance (SHIBA)

Toll free: (800) 722-4134

Visit SHIBA online at:

www.oregonshiba.org

www.medicarestartsat65.org

Unfair Treatment

If you think AllCare CCO or a provider gave you unfair treatment, please tell us.

We must follow state and federal civil rights laws.

We cannot treat people unfairly because of:

- Age
- Color
- Disability
- Gender Identity
- Marital Status
- National Origin
- Race
- Religion
- Sex
- Sexual orientation

To report your concern or to get more information, please contact:

AllCare CCO
Attn. Member Services
1701 NE 7th St.
Grants Pass, OR 97526

You also have a right to file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights:

File online at: <http://www.hhs.gov/>

Email to: OCRComplaint@hhs.gov

Phone: (800) 868-1019, (800) 537-7697 (TDD)

Mail to: U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Room 509F HHH Bldg.
Washington, D.C. 20201

Important Things To Do:

If you get sick: Call your Primary Care Provider (PCP).

If you get sick after normal office hours: Call your Primary Care Provider. The answering service will give you the phone number of the doctor on call that day.

OR call the FREE Nurse Help Line at (844) 747-5656.

If you believe you have an emergency medical condition: Go to the nearest hospital emergency room.

OR Call 9-1-1.

If you have questions about AllCare CCO benefit coverage: Please call Member Services between 8:00 a.m. and 5:00 p.m., Monday through Friday at (541) 471-4106 or toll free at (888) 460-0185. If you are hearing impaired, dial the TTY number 711.

You may also visit the AllCare CCO website at www.AllCareHealth.com/Medicaid.

You can add here: If you want a copy of our Member Handbook, please go to www.AllCareHealth.com/Medicaid/Member-Handbook or call Member Services between 8:00 a.m. and 5:00 p.m., Monday through Friday at (541) 471-4106 or toll free at (888) 460-0185.

Important Records:

Family members on AllCare CCO:

Name

ID number

Your family's Primary Care Providers (doctor or nurse practitioner):

Name

Phone number

October 1, 2018

Dear Member,

Welcome to AllCare CCO. We are here to help you get quality healthcare as fast and easy as possible.

Please read this handbook. It gives you information about our services. It will also tell you how to get services.

The handbook is current. We update our handbook yearly. It was last updated on October 1, 2018. Sometimes changes are made to state and federal laws that effect your benefits. If this happens, we will update the handbook within 90 days.

AllCare CCO is a “Coordinated Care Organization.” It is also known as a CCO. A CCO is set up so that your doctors, counselors, nurses, and dentists can focus on keeping you healthy. We don’t just help you when you are sick. We work with you to keep you healthy. We can also help you better manage your existing health conditions.

AllCare CCO has a contract with the State of Oregon. Our contract is to serve Oregon Health Plan members who live in Jackson, Josephine, and Curry counties. We also serve a part of Douglas County.

Thank you for choosing AllCare CCO. If you would like to learn more about us, please call AllCare Health’s Member Services. Our phone number is (541) 471-4106. You can call us toll free at (888) 460-0185. If you have trouble hearing (TTY), call us at 711. You can also visit us online at www.AllCareHealth.com/Medicaid.

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Your Rights and Responsibilities

As an OHP member, you can...

- Be treated with respect and dignity, the same as other patients
- Choose your provider
- Get services and supports that fit your culture and language needs
- Tell your provider about all your health concerns
- Have a friend or helper come to your appointments, and an interpreter if you want one
- Ask for services as close to home as possible, and in a non-traditional setting that is easier for you to use
- Actively help develop your treatment plan
- Get information about all of your OHP-covered and non-covered treatment options
- Help make decisions about your healthcare, including refusing treatment, except for court-ordered services
- Be free from any form of restraint or seclusion (isolation) that is not medically needed. Staff can not restrain or seclude you because it is easier for them or use it as a way to intimidate or punish you. You have the right to report abuse to AllCare CCO and/or the Oregon Health Plan.
- Complain about different treatment and discrimination
- Get a referral to a specialist if you need it
- Get care when you need it, any time of day or night, including weekends and holidays
- Get mental health and family planning services without a referral
- Get help with addiction to cigarettes, alcohol and drugs without a referral
- Get handbooks and letters that you can understand
- See and get a copy of your health records, unless your doctor thinks it would be bad for you
- Ask that your health records be fixed if they are wrong or need changes
- Limit who can see your health records
- Get a Notice of Action letter if you are denied a service or there is a change in the level of service
- Get information and help to appeal denials and ask for a hearing
- Make complaints and get a response without a bad reaction from your health plan or provider
- Ask the Oregon Health Authority Ombudsperson for help with problems at (503) 947-2346, toll free (877) 642-0450, or TTY 711

As an OHP member, you agree to...

- Find a doctor or other provider you can work with and tell them all about your health
- Treat providers and their staff with the same respect you want
- Bring your medical ID cards to appointments, tell the receptionist that you have OHP and any other health insurance, and tell them if you were hurt in an accident
- Be on time for appointments
- Call your provider at least one day before if you can't make it to an appointment
- Have yearly check-ups, wellness visits, and other services to prevent illness and keep you healthy
- Follow your providers' and pharmacists' directions, or ask for another choice
- Be honest with your providers to get the best service possible
- Call OHP Client Services at (800) 699-9075 when you move, are pregnant, or are no longer pregnant



AllCare Health is right here in Southern Oregon, serving your friends, neighbors, and coworkers.

What is the Oregon Health Plan (OHP)?

The Oregon Health Plan (OHP) is a program that pays healthcare costs for low-income Oregonians'. The State of Oregon and the US Government's Medicaid program pay for it. OHP covers doctor visits, prescriptions, hospital stays, dental care, mental health services, help with addiction to cigarettes, alcohol and drugs, and free rides to covered healthcare services. If you qualify, OHP can provide hearing aids, medical equipment and home health care.

OHP Supplemental is for children through age 20 and pregnant women. It covers glasses and additional dental care.

CAWEM (Citizen Alien Waived Emergency Medical) covers emergency services for non-US citizens who are not on OHP. CAWEM Plus also covers childbirth. OHP Customer Service can tell you which benefits you qualify for.

OHP does not cover everything. A list of the sicknesses and conditions that are covered, called the Prioritized List of Health Services, is online at www.oregon.gov/oha/herc/Pages/PrioritizedList.aspx. Other sicknesses and conditions not on that list are not usually covered by OHP. Those conditions could be covered if treating them will help a patient's covered condition.

CCOs (Coordinated Care Organizations) are a type of managed care. The Oregon Health Authority (OHA) wants people on OHP to have their healthcare managed by private companies set up to do just that. OHA pays managed care companies a set amount each month to give their members the healthcare services they need.

Health services for OHP members who are not in managed care, are paid directly by OHA. This is called fee-for-service (FFS) because OHA pays providers a fee for the services they provide. It is also called an open card.

Native Americans, Alaska natives, and people on both Medicare and OHP can be in a CCO, but can ask to change to FFS anytime. Any CCO member who has a medical reason to have FFS can ask to leave managed care. OHP Client Services at (800) 273-0557 can help you understand and choose the best way to receive your healthcare.

Call OHP if you:

- Change your address, phone number or name
- Become pregnant or have a baby
- Have other health insurance coverage

- Want to change your CCO
- Move outside of AllCare CCO's service area

You can call OHP Customer Service Monday through Friday, 8 a.m. to 5 p.m. at (503) 378-2666 or (800) 699-9075. Call wait times vary. When call volume is high, you may experience longer wait times.

About AllCare Health

AllCare CCO is a privately-owned Oregon Benefit Company, certified by the B Lab as a Certified B Corporation. AllCare CCO is owned by local, southern Oregon healthcare providers and is part of the AllCare Health family of companies. You can find out more about AllCare Health, its commitment to local communities, and its status as a Certified B Corp by visiting: www.AllCareHealth.com/BCorp, or by calling Member Services at (541) 471-4106, toll free at (888) 460-0185, or hearing impaired (TTY) at 711.

What is a Coordinated Care Organization (CCO)?

AllCare CCO is a Coordinated Care Organization (CCO). We are a group of all types of healthcare providers who work together for people on the Oregon Health Plan (OHP) in Jackson, Josephine, Curry, and parts of Douglas Counties. Some groups in our CCO are:

For mental health needs:

- Options for Southern Oregon
- Curry Community Health

For alcohol and drug treatment:

- Allied Health Services Medford
- Curry Community Health
- Addictions Recovery Center

For your dental needs:

- Advantage Dental
- ODS Community Health
- Capitol Dental Care
- Willamette Dental Group
- La Clinica Dental

We also work with many local partners to offer other healthcare services, such as: Living Well with Chronic Conditions classes, Tobacco Cessation Support, and YMCA Fitness Program memberships. These are only a few examples of wellness programs we can provide. For a full list of the organizations that help AllCare CCO bring these programs to you, call Member Services at: (541) 471-4106, toll free at (888) 460-0185, or hearing impaired (TTY) at 711.

How We Coordinate Your Care

AllCare CCO coordinates the care you receive by bringing together many types of care into one group. We are also set up to make sure that anyone who gives you care — such as doctors, counselors, dentists, and nurses, — can focus on prevention and improving overall care.

This means your providers won't only treat you when you get sick. They will also help you find ways to stay healthy and manage your existing health conditions.

AllCare CCO will:

- Give you the tools and support you need to stay healthy
- Give care and advice that is easy to understand and follow
- Work with local resources to improve your health and the healthcare you get
- Focus on prevention and avoid trips to the hospital or emergency room that are not needed
- Make sure that all members are treated fairly

To help us serve you better, please let us know if you were enrolled in a different CCO before you became an AllCare CCO member.

Culturally-sensitive Health Education

We respect the dignity and diversity of our members and the communities where they live. We want to serve the needs of people of all cultures, languages, races, ethnic backgrounds, abilities, religions, genders, sexual orientation, gender identification, and other special needs. We want everyone to feel welcome and well-served in our plan.

We have several healthy living programs and activities for you to use. Our health education programs include self-care, prevention, and disease self-management. They are listed on page 38. For more information about these services, please call Member Services at: (541) 471-4106, toll free at (888) 460-0185, or hearing impaired (TTY) 711.

Native Rights

If you are a Native American or Alaska native, you can get your healthcare from a tribal clinic. If your provider is not in our network, they must follow the same rules as network providers. Only covered benefits will be paid for. If a service requires AllCare CCO's pre-approval, the provider must request it before providing the service.

AllCare CCO Will Help You

Our Member Services representatives are happy to help you with your questions about AllCare CCO. Please call us if you have questions about:

- Services that are covered by AllCare CCO
- How to use preventive healthcare services
- How to select a Primary Care Provider (PCP)
- How to see a specialist
- How to make an appointment with a PCP
- Complaints, concerns, or suggestions.

When you call us

When calling Member Services, please have the following items in front of you:

- AllCare CCO Member ID card
- Oregon Health Plan Member ID card
- Any other information that might help us answer your questions

When you have this information ready, we can look up your file and answer your questions faster.

Telephone: (541) 471-4106, toll free (888) 460-0185

Hearing impaired (TTY): 711

Office hours: Monday through Friday, 8:00 a.m. to 5:00 p.m.

Our offices are wheelchair accessible.

Location/mailing address:

AllCare Health
Attn: AllCare CCO
1701 NE 7th Street
Grants Pass, OR 97526

AllCare Health
Attn: AllCare CCO
3625 Aviation Way
Medford, OR 97504

AllCare Health
Attn: AllCare CCO
16271 Hwy. 101 South, #25
Brookings, OR 97415

If you can't get in to see your PCP during your first month

If you need prescriptions, medical supplies, or medical services right away, please call Member Services at (541) 471-4106, toll free at (888) 460-0185, or TTY 711.

Involvement in CCO Activities

AllCare CCO has a Community Advisory Council in each of the three (3) counties we serve. We invite you to apply to serve on the Council. Most of the Council members

are Oregon Health Plan members. Other members are from government agencies and groups that provide OHP services. If you are interested in being a member of one of our Community Advisory Councils, please call Member Services for an application. You can also find the application on our website at:

www.AllCareHealth.com/medicaid/resources/CCO-Community-Advisory-Council.

What Your Member ID Card Does for You

To get medical and mental health services, or dental care and prescriptions, you must show your OHP and AllCare CCO Member ID cards. You must show them every time you visit your provider or pharmacy. It is best to keep these cards with you at all times.

An AllCare CCO Member ID card is mailed to you, after you get your OHP coverage

 APLUS allcare cco Name: <FN> <MI> <LN> ID: <MEMBERID> Dental Plan: <DCO> Dental Plan Phone: <(XXX) XXX-XXXX> PCP: <PCP NAME> PCP Phone: <(XXX) XXX-XXXX> Member Services (541) 471-4106 TTY (800) 735-2900 Toll free (888) 460-0185	Non-Emergency Medical Transport: ReadyRide Call to schedule between 8 a.m.-6 p.m., Monday through Friday at (541) 479-7920 or (800) 479-7920. Rides available 24 hours a day, 7 days a week. Pharmacy: Must be a MedImpact Provider PCN # 38060 BIN # 003585 AllCareHealth.com/Medicaid
Any time you are not sure if your condition is an emergency, call your doctor first. If you reach an answering service, you will be given a phone number to reach your doctor or the on-call center. Either of these doctors will determine if they need to see you in their office or send you to Urgent Care or possibly the Emergency Room. For 24-hour medical advice, call the 24-hour Nurse Help Line at (844) 747-5656	Providers AllCare CCO is a Coordinated Care Organization Medical Care must be provided/referred by the member's PCP, except for life-threatening emergencies. Scheduled Hospital Admissions require prior approval by an AllCare CCO provider. Emergency Hospital Admissions require that you call us by the first working day after admission. Contact AllCare Health Member Services. This card is not proof of eligibility or complete coverage of the plan. For 24-hour provider services, visit Providers.AllCareHealth.com

letter. The card is important because it:

- Shows you are a member of AllCare CCO
- Lists your PCP and his or her telephone number
- Tells you what to do in an emergency
- Has important pharmacy information

If you lose your AllCare CCO Member ID card, call Member Services right away. Member Services will send you a new card, so you can keep visiting your PCP and get your prescriptions filled.

Change of Address

If you change your address and/or phone number, you need to call:

- OHP Customer Service at (800) 699-9075, or TTY at (800) 735-2900;
- AllCare Health Member Services at (541) 471-4106, toll free at (888) 460-0185, or TTY 711
- your PCP's office.

Call OHP Customer Service immediately if you move out of the AllCare CCO service area (Josephine, Jackson, and Curry counties and parts of Douglas County). OHP will help you change to another plan so you can keep getting health coverage.

Other ways to change your address

If you have a ONE (OHA) case, you can create an online account by going to: www.one.oregon.gov. In your online account you can update any of your case information.

Members can email direct to oregonhealthplan.changes@state.or.us. Put the change you are requesting in the subject line of the email, like address change, name correction, gender correction, etc.

Make sure to include your full name and health ID (prime) number, and a telephone number where you can be reached. The eligibility team will call to validate the change.

If you do not have access to email changes to the OHP, you can also work with a Community Partner (CP). A Community Partner can help you in submitting an address change or correction. CP's have a dedicated email access for submitting member changes to the OHP.

You can also phone OHP 1-800-699-9075 to report, although there will likely be long hold times.

How to Change CCOs

If you want to change to a different CCO, call OHP Customer Service at (503) 378-2666 or (800) 699-9075. There are several chances for you to change your CCO as long as another CCO is open for enrollment:

- If you do not want the CCO you've been assigned to, you can change during the first 90 days after you enroll.

- If you move to a place that your CCO doesn't serve, you can change CCOs as soon as you tell OHP Customer Service about the move. The number is (800) 699-9075.
- You can change CCOs one time each year.
- If you are a Native American, an Alaska native, or are also on Medicare, you can ask to change or leave your CCO at anytime.

When you have a problem getting the right care, please let us try to help you before changing CCOs. Just call our Member Services at (541) 471-4106, toll free (888) 460-0185, or hearing impaired (TTY) at 711, and ask for a Care Coordinator. If you still want to leave or change your CCO, call OHP Customer Service. Their numbers are (503) 378-2666 or toll free at (800) 699-9075.

Disenrollment

We may ask the Oregon Health Authority (OHA) to remove you from AllCare CCO if you:

- Have other health insurance.
- Move out of the AllCare CCO service area (Josephine, Jackson, and Curry counties and Glendale and Azelea in Douglas County).
- Commit fraud, like letting someone else use your healthcare benefits.
- Become physically and/or verbally abusive to the staff or property of your provider or AllCare Health.

You may change CCOs at certain times if another CCO is available to you. OHP may also approve a change if you have a very good medical reason. Please call OHP Client Services at (800) 273-0557.

What OHP Covers

AllCare CCO will coordinate services for members who need the health services listed below:

Service	Who's Covered?
Preventive care, such as annual physical exams, well-child care, and immunizations (shots)	All members
Medical exams in your PCP's office and treatment, if needed	All members

Medical and surgical treatments for conditions that are expected to get better with treatment	All members
Nursing home care for covered conditions, up to 20 days	All members
Routine vision services for children 0 through 20 years old, and pregnant women	Children 20 years and younger and pregnant women
Family planning services	Female members
Prescription drugs	All members
Hospital and emergency care	All members
Doctor visits while you are in the hospital	All members
X-ray, laboratory, and other testing services	All members
Home health care	All members
Hospice care	All members
Physical, occupational, and speech therapy	All members
Medical transportation	All members
Outpatient alcohol and drug treatment	All members
Dental care	All members
Mental health	All members
Behavioral health rehab services	All members
Class 7 & 11 prescription drugs (behavioral health drugs)	All members
Therapeutic foster care reimbursement	Members under 21 years of age
Therapeutic group home reimbursement	Members under 21 years of age

Investigation of members for civil commitment	All members
Long Term Psychiatric Care (LTPC)	Members 18 years and older
Preadmission Screening and Resident Review (PASRR)	All members seeking admission to a LTPC facility
Juvenile Long Term Psychiatric Care (LTPC) including: • Secure Children's Inpatient Program (SCIP) • Secure Adolescent Inpatient Program (SAIP) • Stabilization and Transition Services (STS)	Members 17 years and younger
Personal care in adult foster homes	Members 18 years and older
Residential mental health services provided in licensed community treatment programs	Members 18 years and older
Abuse investigation and protective services	All members
Personal care services	All members
ICM (Intensive Care Manager)	Members who are blind, disabled, or aged 65 years and older. Members with special health care needs, complex medical needs, high health care needs, multiple chronic conditions or behavioral health issues. Members with severe and persistent mental illness.
Rides to get OHP-covered services	All members

Note: AllCare CCO may need to approve some drugs, treatments, visits with providers or specialists, and medical equipment before you can get them.

Examples of medical problems you might receive treatment for include, but are not limited to:

Appendicitis	Cancer	Eye diseases	Kidney stones
Asthma	Diabetes	Head injuries	Pneumonia
Broken bones	Ear infections	Heart disease	Rheumatic fever
Burns	Epilepsy	Infections	Stomach or leg ulcers
Treatment until your condition is stable			

What OHP Does Not Cover

- Colds, diaper rash, sunburns, and other things that will get better without going to a doctor
- Diseases or conditions for which there is no useful treatment
- Cosmetic treatment
- Services to help you get pregnant

Call your PCP or when you think you need medical treatment. Your PCP will give you advice on what to do. If you have questions about covered or non-covered services, or why a provider may be charging you a copay, please call Member Services at (541) 471-4106, toll free at (888) 460-0185, or TTY at 711.

What AllCare CCO Does Not Cover

The services listed below are covered by OHP Fee-for-Service, but are not covered by AllCare CCO. For more information on these services, call OHP Customer Service. Their numbers are (503) 378-2666 and (800) 699-9075.

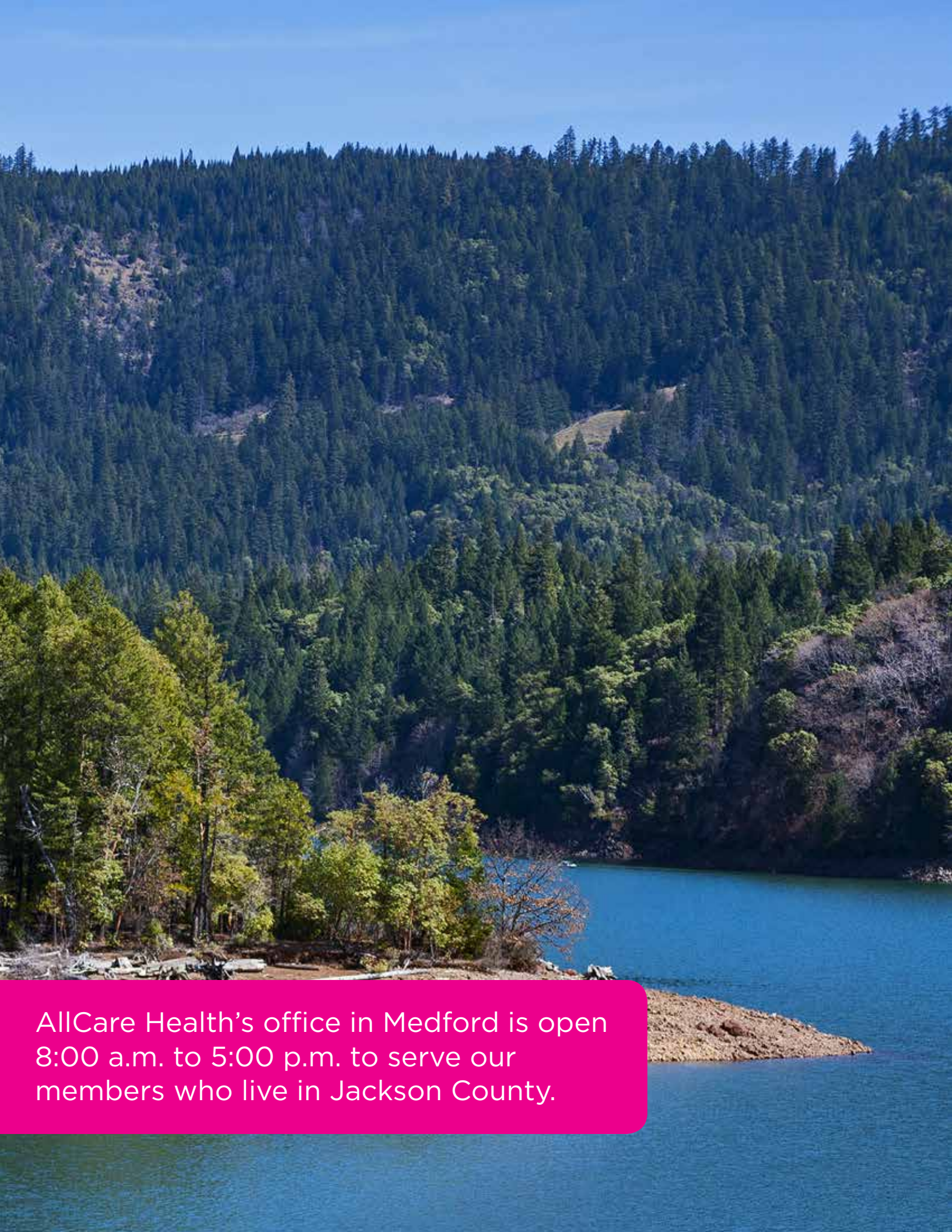
Services not covered by AllCare CCO:

- Midwife home delivery
- Mental health medications (7 & 11 drugs)
- Death with Dignity
- Abortion
- Hospice services for members who live in a skilled nursing facility
- Long term care services

- School-based services that are covered services provided under Individuals with Disabilities Education Act (IDEA)
- Administrative examinations requested or authorized by another government agency, CAF, SPD, AMH, OYA, SCF branch office or approved by the Health Systems Division
- Services provided to Citizen Alien Waived Emergency Medical (CAWEM) recipients or CAWEM Plus-CHIP Prenatal Coverage for emergency medical services only

Copay or Bills

As an AllCare CCO member you do not have to pay for medicine, to see a provider, or any other covered services. If you are asked to pay for a service, please call Member Services at (541) 471-4106, toll free at (888) 460-0185, or TTY at 711.



AllCare Health's office in Medford is open 8:00 a.m. to 5:00 p.m. to serve our members who live in Jackson County.

Choosing Your Primary Care Provider

To get medical services, you must choose an in-network doctor or nurse practitioner as your Primary Care Provider (PCP). Please choose a doctor from the **Find A Doctor** search tool on the AllCare Health website at www.AllCareHealth.com/Medicaid/Lookup-Tools/Find-A-Doctor. To request a hard copy of the AllCare CCO Provider Directory, please call Member Services, and one will be mailed to you.

Using the Online “Find A Doctor” Search

You can search the “Find A Doctor” tool for all available PCPs in your area. Enter your zip code (for example: 97501) and select how far you are willing to travel (for example: 10 miles). Click on the “Accepting New Patients” and “Primary Care Provider” check boxes and press the Submit button. All the doctors who are currently available in that area will show on the page to the right of the search box.

- Family Medicine – gives care to children and adults
- Internal Medicine – gives care to adults only
- Pediatrician – gives care to children only

Your PCP (doctor or nurse practitioner) will:

- Get to know you and your medical history
- Provide all of your medical care
- Keep your medical records up-to-date and in one place

If needed, your PCP will

- Send you to a specialist
- Admit you to a hospital

If you already have a doctor or nurse practitioner, make sure they are listed in the AllCare CCO Provider Directory. If your PCP is not listed, you must choose a PCP who is listed in this directory. It is a good idea to choose a PCP close to where you live.

Once you choose a PCP:

- Fill out the Primary Care Provider Selection Form given to you in the New Member Packet.
- Fold and mail the pre-stamped form.
- A new AllCare CCO Member ID card will be sent to you. It will have your new doctor or nurse practitioner’s name and phone number on it.

OHP requires you to choose a PCP within 30 days. To do this, you need to return the PCP Selection Form to us within two weeks. If you have not returned your selection form in time, we will choose a PCP for you.

Changing Your Primary Care Provider

If you want a new PCP or dental plan, please call Member Services. A representative will help you make the change. Be sure to contact Member Services as soon as you decide to change, as you cannot see your new PCP or dentist until the change happens. Our Member Services representative will tell you when the change will happen and send you a new ID card with your new PCP's name and phone number.

You may change your PCP or dental plan two (2) times in 12 months. If you want to change more than two (2) times in 12 months, our Member Services Manager must approve the change.

When you change to a new PCP, you will need to request a copy of your medical records from your current provider. You should then provide your records to your new PCP.

Patient-Centered Primary Care Home

We want you to get the best care possible. One way we try to do that is ask our providers to be recognized by the Oregon Health Authority as a Patient-Centered Primary Care Home (PCPCH). That means they can receive extra funds to follow their patients closely and make sure all their medical and mental health needs are met. You can ask at your clinic or provider's office if they are recognized as a PCPCH.

Meeting Your Primary Care Provider

After you get your AllCare CCO Member ID card, please have a physical exam with your new PCP (doctor or nurse practitioner) within 90 days. This first visit helps your PCP get to know you and your medical needs before you get sick.

If the PCP you already see is an AllCare CCO provider, a first visit is not necessary unless you have not seen your PCP within the last 12 months. If you have not seen your PCP in the last year, please schedule a physical exam within 90 days (three months) of enrollment.

If You Need An Interpreter

When you call to set a date and time for your first visit with your PCP, tell the receptionist that you need an interpreter. If your PCP does not already have an interpreter, Member Services can help your PCP get a qualified interpreter for your PCP visit by phone or in person at no cost to you.

If You Cannot Keep an Appointment

If your PCP has agreed to an office visit with you at a certain date and time, please get there on time. If you cannot make that date and time, call your PCP's office at least one (1) day before the visit. The receptionist will help you make the visit for a new date and time. If you miss a visit without letting your PCP's office know, your PCP may not want to see you again.

Getting a Ride

If you cannot get to a healthcare appointment on your own, you may call ReadyRide for a free ride. This includes any medical, dental, pharmacy, or mental health visit that is covered by AllCare CCO.

Call the ReadyRide Call Center at (800) 479-7920 to get a ride. For hearing impaired, please call 711 (Oregon Relay Service). Please call at least two business days before you need a ride, Monday through Friday 8:00 a.m. – 6:00 p.m. You may schedule a ride as early as 60 days before you need the ride.

If you have any complaints or issues with ReadyRide, please call AllCare Health Member Services at (541) 471-4106, toll free (888) 460-0185, or TTY at 711.

Seeing A Specialist

A specialist is a doctor with extra training in treating a part of the body, a disease, or a type of injury. Specialists give care that your PCP cannot provide. Most specialty services need a referral from your PCP, so you will need to see your PCP first. Your PCP may need to ask AllCare CCO to approve the service. AllCare CCO sends the approval directly to the specialist. The specialist's office will call you to set up a visit.

Examples of services that require a referral:

- Visits with a specialist (such as a podiatrist, a foot doctor; a neurologist, a nerve specialist; endocrinologist, a hormone specialist; or an orthopedist, a bone and joint specialist.)

- Physical therapy
- Speech therapy
- Occupational therapy
- Home health services
- Hospice

Examples of services that do not require a referral:

- Routine vision exams for pregnant women and children 0 through 20 years old
- Prenatal care with a PCP or OB (pregnancy specialist)
- Mental health treatment
- Drug and/or alcohol addiction treatment
- Women's annual exam
- Family planning
- Dental

Out-of-Network Providers

In most cases, you must see providers that are in the AllCare CCO network. If a network or provider is not available, your PCP will ask us if you can see an out-of-network provider. At no cost to you, we will work with your PCP to determine how soon you need to be seen and which specialist you need to see for your medical needs. If you have already seen a specialist and have questions or concerns, make an appointment with your PCP to discuss any issues. You will need to get AllCare CCO's approval if you want to see someone outside of the plan's network.

Second Opinion

We cover second opinions at no cost to you. If you want a second opinion about your treatment options, ask your PCP to refer you. You can also let AllCare CCO know that you want to see another provider. If you want to see a provider outside of our network, you or your provider will need to get AllCare CCO's approval first.

Physician Incentives

We pay a bonus or reward our providers for keeping you healthy. We do not pay or reward our providers for limiting services and referrals.

Practice Guidelines

If you would like a copy of the Practice Guidelines please contact Member Services at (541) 471-4106, toll free (888) 460-0185, TTY 711, Fax (541) 471-4128, or on our provider portal at <https://providers.allcarehealth.com>.

Practice Guidelines are used to create our healthcare policies for treatment and care.

Billing Information

OHP members don't pay bills for covered services. Your medical or dental provider can send you a bill only if all of the following are true:

- The medical service is something that your OHP plan does not cover
- Before you received the service, you signed a valid Agreement to Pay, OHP form number 3165 (also called a waiver)
- The form showed the estimated cost of the service
- The form said that OHP does not cover the service
- The form said you agree to pay the bill yourself

These protections usually only apply if the medical provider knew or should have known you had OHP. Always show your AllCare CCO Member ID card. These protections only apply if the provider participates in the OHP program (but most providers do).

Sometimes, your provider doesn't do the paperwork correctly and won't get paid for that reason. That doesn't mean you have to pay. If you already received the service, and we refuse to pay your medical provider, your provider still cannot bill you. You may receive a notice from us saying that we will not pay for the service. That notice does not mean you have to pay. The provider will write-off the charges.

If we or your provider tell you that the service isn't covered by OHP, you still have the right to challenge that decision by asking for an appeal and a hearing.

What should I do if I get a bill?

Even if you don't have to pay, please do not ignore medical bills — call us right away. Many providers send unpaid bills to collection agencies and even sue in court to get paid. It is much more difficult to fix the problem once that happens. As soon as you get a bill for a service that you received while you were on OHP, you should:

1. Call the provider, tell them that you were on OHP, and ask them to bill your CCO.

2. Call our Customer Service at (541) 471-4106, toll free at (888) 460-0185, or hearing impaired (TTY) at 711 right away and say that a provider is billing you for an OHP service. We will help you get the bill cleared up. Do not wait until you get more bills.
3. You can appeal by sending your provider and us a letter saying that you disagree with the bill because you were on OHP at the time of the service. Keep a copy of the letter for your records.
4. Follow up to make sure we paid the bill.
5. If you receive court papers, call us right away. You may also call an attorney or the Public Benefits Hotline at (800) 520-5292 for legal advice and help. There are consumer laws that can help you when you are wrongly billed while on OHP.

I was in the hospital and my plan paid for that, but now I am getting bills from other providers. What can I do?

When you go to the hospital or the emergency room, you may be treated by a provider who doesn't work for the hospital. For example, the emergency room doctors may have their own practice and provide services in the emergency room. They may send you a separate bill. If you have surgery in a hospital, there will be a separate bill for the hospital, the surgeon, and maybe even the lab, the radiologist, and the anesthesiologist. Just because we paid the hospital bill, it doesn't mean that we paid the other providers. Do not ignore bills from people who treated you in the hospital. If you get other bills, call each provider and ask them to bill your CCO. You should follow steps 1 through 5 above, for each bill you get.

When will I have to pay for medical services on OHP?

- You may have to pay for services that are covered by OHP if you see a provider that does not take OHP or is not part of our provider network. Before you get medical care or go to a pharmacy, make sure that they are in our provider network.
- You will have to pay for services if you weren't eligible for OHP when you received the service.
- You will have to pay for services not covered by OHP if you sign a detailed Agreement to Pay for that specific service before you receive it.

Provider Payment

You have the right to ask if AllCare CCO has special financial arrangements with its doctors that can affect the number of referrals and other services they use. To get this information, call AllCare Health and ask for information about physician payment arrangements.

If You Have Medicare or Other Insurance

If you also have Medicare, AllCare CCO will coordinate your Medicaid benefits with your Medicare benefits. If you have other insurance coverage and are on AllCare CCO, call OHP Customer Service or AllCare Health Member Services.

When You Are Sick

Please call your Primary Care Provider (PCP) when you become sick. Tell the receptionist or nurse what is wrong. They will tell you whether you need to see your PCP that day, or need to do something else. Take your AllCare CCO Member ID card and your Oregon Health Plan Member ID card with you.

If you become sick at night, on weekends or holidays, call your PCP. Your PCP provides medical care all day and night, every day. If your PCP is not working that day, the answering service will have another doctor on call help you.

Nurse Help Line – (844) 747-5656

If you have a non-emergency question about your health or the medicines you are taking, you may call this phone number any time of day or night, every day. Specially-trained nurses will ask you how you are feeling and give you advice. All calls are private. The toll free phone number is (844) 747-5656 or TTY at 711.

Urgent Care, Emergencies and Crisis At Home and Away

Always call your primary care provider's (PCP) office first. Someone will be able to help you day and night, even on weekends and holidays. If you can't reach your PCP's office about an urgent problem or they can't see you soon enough, you can go to Urgent Care provider without an appointment at the locations below:

Asante Urgent Care – Grants Pass 537 Union Avenue (541) 507-2170 Monday – Sunday: 8:00 am to 8:00 pm	Asante Urgent Care – Medford 555 Black Oak Drive (541) 789-2273 Monday – Sunday: 8:00 am to 8:00 pm
Asante Urgent Care – White City 841 Avenue G (541) 789-2273 Monday – Sunday: 8:00 am to 8:00 pm	Curry Medical Center – Brookings 500 5th Street (541) 412-2000 Monday – Saturday: 8:00 am to 8:00 pm Closed Sunday
Valley Immediate Care – Grants Pass 162 NE Beacon Drive, #103 (541) 479-1090 Monday – Friday: 8:00 am to 8:00 pm Saturday – Sunday: 9:00 am to 6:00 pm	Valley Immediate Care – North Medford 1600 Delta Water Road, Suite 107 (541) 858-2515 Monday – Friday: 8:00 am to 8:00 pm Saturday – Sunday: 9:00 am to 6:00 pm
Valley Immediate Care – Ashland 1401 Siskiyou Boulevard, Suite 1 (541) 488-6848 Monday – Friday: 9:00 am to 6:00 pm Saturday – Sunday: 9:00 am to 6:00 pm	Valley Immediate Care – South Medford 235 East Barnett Road, Suite 106 (541) 773-4029 Monday – Friday: 8:00 am to 8:00 pm Saturday – Sunday: 9:00 am to 6:00 pm

Urgent problems are things like bad infections, sprains, and strong pain. If you don't know how urgent the problem is, call your PCP.

If you think that you have a real emergency, call 911 or go to the Emergency Room (ER) at the nearest hospital. You don't need permission to get care in an emergency. An emergency might be chest pain, trouble breathing, bleeding that won't stop, broken bones, an injury to teeth or gums, or a mental health emergency. Please don't use the ER for things that can be treated in your doctor or dentist's office. Sometimes ERs have a long, uncomfortable wait and it can take hours to see a doctor. You should only go there when you have to.

A mental health emergency is feeling or acting out of control, or a situation that might harm you or someone else. Get help right away, do not wait until there is real danger. Call the Crisis Hotline. In Jackson County call (541) 774-8201. In Josephine County call (541) 474-5360. In Curry County call (877) 519-9322. You can also call 911, or go to the ER closest to you.

If You Need Care Out-of-town

If you get sick or hurt when you are away from home, call your PCP. If you need urgent care, find a local doctor who will see you right away. Ask that doctor to call your PCP to coordinate your care.

Out-of-town Emergencies

If you have a real emergency when you are away from home, call 911 or go to the nearest emergency room. Your care will be covered until you are stable. For follow-up care after the emergency, call your PCP.

OHP covers emergency and urgent care anywhere in the United States (US) at no cost to you. OHP does not cover emergency and urgent care outside the US. That means OHP will not pay for any care you get in Mexico or Canada.

Care After an Emergency

Emergency care is covered until you are stable. Follow-up care to maintain or improve your condition once you are stable, is covered by AllCare CCO but it is not considered an emergency. This care is called **post-stabilization care**. AllCare CCO will pay for post-stabilization care provided by a hospital, even if the hospital is not in our provider network. After you receive emergency treatment, call your PCP or mental health provider to arrange for more follow-up care if you need it.

Hospital Care

AllCare CCO covers emergency care at any time of day or night, every day, and hospital care if needed. AllCare CCO does not need to approve you going to the hospital for a true emergency. In an emergency, go to the hospital nearest to you. Hospitals in AllCare CCO's service area are:

Asante Three Rivers Community Hospital * 500 SW Ramsey Ave. Grants Pass, OR 97526 (541) 472-7000 TTY (hearing impaired): (541) 472-7001	Asante Rogue Regional Medical Center * 2825 East Barnett Road Medford, OR 97504 (541) 789-7000 Toll free: (800) 944-707 TTY (hearing impaired): (541) 789-4240 TTY toll free: (800) 944-7073, ext. 4240
Providence Medical Center * 1111 Crater Lake Highway Medford, OR 97504 (541) 732-5000 Toll free: (877) 541-0588 TTY (hearing impaired): (541) 732-6413 TTY toll free: (888) 326-2686	Sutter Coast Hospital * 800 E. Washington Blvd. Crescent City, CA 95531 (707) 464-8664
Asante Ashland Community Hospital * 280 Maple Street Ashland, OR 97520 (541) 201-4000 TDD (hearing impaired): (541) 201-4102	Curry General Hospital * 94220 Fourth Street Gold Beach, OR 97444 (541) 247-3000 Toll free: (800) 445-808

* Spanish-speaking staff and interpreter services available

After you leave the hospital

You may get any care you need to make sure your condition stays stable.

If your doctor says you need nursing care after you leave the hospital, care at a “skilled nursing facility” such as a nursing home is covered for up to 20 days.

If you have Medicare benefits, skilled care for more than 20 days may be covered by Medicaid or Medicare. Please call Member Services if you need help arranging more skilled nursing care.

Case and Disease Management Services

AllCare CCO wants you to reach your health goals and stay as healthy as possible. Our nurses and other case management staff have special training in many chronic health conditions such as diabetes, heart failure, asthma, depression, or high blood pressure. If you have been in the hospital or nursing home, our staff knows how scary it can be. There are many things you or your family may need to remember. We can help you understand your treatment plan and will work closely with your doctors to make sure you have the help you need.

Primary Care Team Specialists or Care Helpers

AllCare CCO knows there are times when you may need help in finding the care that is right for you. Your Primary Care team may have people specially trained to do this. These people are called Community Health Workers, Peer Wellness Specialists, and Personal Health Navigators. For more information, please call Member Services at (541) 471-4106, toll free at (888) 460-0185, or TTY at 711.

When You Have Special Medical Needs

Intensive Case Managers (ICM) help members who have special medical needs. For example, an ICM helps people with disabilities, who are 65 years and older, have special supply and equipment needs, or who need community support services.

If you have special needs, an ICM can help you:

- Choose doctors and other healthcare providers who know about your special needs
- Get medical equipment that has been prescribed by your PCP
- Connect with local agencies that may be able to help you
- Make sure all of your healthcare providers are working on the same plan of care for you
- Make sure that you receive quality healthcare that is right for you
- Make sure your providers keep your special needs in mind

You may request ICM services by calling Member Services at (541) 471-4106, toll free at (888) 460-0185, or TTY at 711.

Take Charge of Your Health

AllCare CCO has a team ready to help you and your family have a healthier life. Our team can help you manage your illness if you have one. However, only you can take charge of your health. You can do this by making healthy food choices, being as active as you can, and visiting your PCP regularly. Doing these things can keep small health problems from becoming big ones. Making these same good choices for your children, will also help them grow and develop as healthy as possible.

Preventive Healthcare: Keeping You Healthy

In addition to treating you when you are sick, your PCP can help you to stay healthy. Physical exams are an important part of keeping you and your family healthy. When your PCP sees you regularly, it is easier to see and care for health problems before they become bigger problems and harder to treat. Your PCP also can tell you how to stay healthy.

Be wise — immunize

Shots are an important, effective way to stay healthy. They help your body fight off certain diseases. Infants and children need many shots as they grow. Adults should get a shot for tetanus (a very serious infection) every 10 years. Shots for the flu and pneumonia are most important if you have a chronic illness. But they are also a good idea to keep everyone healthy. If you think you need other kinds of shots, please talk to your PCP.

AllCare CCO covers preventive healthcare including:

- Regular physical exams for children and adults
- Immunization shots
- Medical tests such as x-rays and blood tests
- Most other screening tests your PCP asks for

Healthy Living

We have many programs to help you live healthy. As an AllCare CCO member you can get a monthly gym membership at low cost. Fitness, nutrition, and cooking classes are available at the YMCA and other gym partners. We can also refer you to healthy eating and cooking programs offered at ACCESS, OSU Extension, and other community resources.

We support the Veggie RX program. If you finish a Veggie Rx class, you will get coupons. You can use them at the farmers market and local grocers to buy fresh fruits and veggies.

We sponsor the Healthy Mobile Pantry. If you have a chronic condition, this program will give you healthy food and education. It is offered at Federally Qualified Health Centers (FQHC).

We have classes and support groups for people who want to quit smoking. There are community walking groups and fitness activities in the park.

For more information about these programs, please call Member Services at: (541) 471-4106, toll free at (888) 460-0185, or hearing impaired (TTY) at 711.

Prescriptions

If you need to have a prescription filled, you may go to any pharmacy listed in the AllCare CCO Provider Directory. You will need to take your:

- Prescription
- Oregon Health Plan Member ID card
- AllCare CCO Member ID card

The pharmacist cannot fill your prescription without these three things. The pharmacist needs special approval to fill some medications. AllCare CCO does not cover all drugs your PCP might prescribe for you. If AllCare CCO does not cover a certain drug, ask your PCP to ask AllCare CCO about other options.

Most medications used to treat mental health conditions are paid for by Oregon Medicaid through the Fee for Service pharmacy benefit. Please contact AllCare CCO to ask how your medications are covered. Call AllCare Health's Member Services at (541) 471-4106, toll free at (888) 460-0185, or TTY at 711.



AllCare CCO wants to make sure you and your baby have the best care, from the very beginning.

Women's Healthcare and Family Planning

AllCare CCO covers many services for women's special healthcare needs, including a yearly physical exam that includes:

- Pap test
- Breast exam
- General health assessment

Mammograms (breast X-rays) are also covered when they are needed or recommended. Talk with your PCP about how often you need a mammogram.

You may go to your PCP for your annual exam, or you may go to a women's doctor, also known as a gynecologist. However, if your gynecologist wants to see you for a follow-up to your annual exam, you will need a referral from your PCP. If you want to see the gynecologist for other women's healthcare problems, you will need a referral from your PCP.

Family planning

AllCare CCO covers both family planning services and birth control supplies. You do not need a referral from your PCP for family planning services.

Please remember breastfeeding is not a form of birth control. You can still become pregnant while breastfeeding your baby.

You may visit any AllCare CCO provider, pharmacy, or your County Health Department. You may also go to any family planning clinic, doctor, or nurse practitioner who will take your Oregon Health Plan Member ID card.

Covered services and supplies include:

- Sterilization (vasectomies or getting tubes tied. A consent form must be filled out by you, 30 days before this procedure)
- Depo-Provera
- Norplant implants
- Birth control pills
- Condoms

Talk with your PCP to see if other supplies are covered. These services and supplies are available through any provider who will accept your Oregon Health Plan Member ID card.

Abortions are a fee-for-service benefit covered by the Oregon Health Authority, not AllCare CCO.

Pregnancy and Prenatal Care

If you are pregnant, or think you might be, call your PCP right away so that you can start getting prenatal care. Prenatal care keeps you and your baby healthy throughout your pregnancy. It is very important that you begin prenatal care early so that you get regular checkups the whole time you are pregnant.

AllCare CCO pregnancy benefits include:

- Prenatal visits
- Labor and delivery (child birth) services
- Postpartum (after the delivery) care

AllCare CCO does not cover home births.

You may see your PCP or an obstetrician (OB – a doctor who specializes in pregnancy care) for your prenatal care. However, your OB doctor does not provide treatment of everyday illnesses and injuries. You should call your PCP for these illnesses and injuries.

During your pregnancy, our Member Services representatives can help you find:

- An OB doctor
- Nutritional counseling to help you eat healthy foods
- Birthing classes (we pay for classes taken from contracted instructors)
- Parenting classes

You must choose your OB from our provider network. For more information about starting pregnancy care, please call your PCP or Member Services at (541) 471-4106, toll free at (888) 460-0185, or TTY at 711.

You also need to contact OHP Customer Service as soon as you know you are pregnant. You should notify OHP Customer Service and AllCare CCO when your pregnancy ends.

Delivery of babies when you are traveling

Try to stay within AllCare CCO's service area during the last 30 days of your pregnancy. AllCare CCO will cover only emergency care for you and your baby if you leave AllCare CCO's service area. This includes your baby's delivery and newborn check-up at the hospital. AllCare CCO will not cover your prenatal care when traveling outside the AllCare CCO services area.

After the baby is born

Call OHP Customer Service at (800) 699-9075, or TTY at 711, as soon as possible after your baby is born and tell them about your new baby. You can also fill out the Newborn Notification Form from the OHA website at: <https://www.oregon.gov/oha/Pages/index.aspx>. The sooner you do this, the sooner we will be able to send you an AllCare CCO Member Identification card for your baby. This will make it easier for you to get healthcare for your baby.

Newborn Care

AllCare CCO benefits for newborns include well-baby care, which is a series of regular checkups during a child's first five years of life. These check-ups help your doctor see and treat problems early before they get worse. We also cover immunizations (shots).

Circumcision

AllCare CCO covers circumcision for infants between one week and four weeks of age **if the mother was an AllCare CCO member with physical health coverage at the time of the infant's birth**. This procedure must be done in an office setting, unless AllCare CCO approved getting the circumcision in a different setting.

Immunizations (shots)

Immunizations (shots) protect our bodies against diseases, such as chickenpox, whooping cough, and measles. These shots work and are very important for children. Your child will need many shots during his or her first 15 months of life. Your child will need some shots when entering kindergarten and middle school. If you do not know if your child has had all of his or her shots, or if you have a question about shots, talk to your child's PCP.

Health Services for Older Children and Teens

Children between the ages of five years and 18 years can get a well-child check-up once every two years.

You may take your child to his or her PCP if you have concerns about your child's physical, mental, or emotional progress, such as bed wetting, inability to pay attention in school, behavior problems, and mood changes.



AllCare CCO is right here to help you understand your benefits. Stop in or call us between 8:00 a.m. and 5:00 p.m. and let us know how we can help.

Oral Health Providers

AllCare CCO works with Advantage Dental, Capitol Dental Care, La Clinica Dental, ODS Community Health, and Willamette Dental Group for your dental needs. Please see the handbook for your dental plan, that is mailed with your new member packet, for information about your dental plan.

Selecting a Primary Care Dentist (PCD)

AllCare CCO partners with Dental Care Organizations (DCO) to manage your dental care. Each member of your family needs to have a Primary Care Dentist (PCD) at one of AllCare CCO's dental plans. Your PCD will take care of most of your dental care needs.

Please contact your assigned dental plan to find a dentist accepting new patients and what choices are available to you. Only go to a different PCD in case of emergency or by a referral from your dental plan.

If you do not know your dental plan, call AllCare Health Member Services at (888) 460-0185.

Advantage Dental: (866) 268-9631 or TTY 711

8:00 a.m. to 6:00 p.m., Monday - Friday

<http://www.advantagedental.com/advantagedentalservices.html>

Capitol Dental Care: (800) 525-6800 or TTY 711

7:00 a.m. to 7:00 p.m., Monday - Friday

<http://capitoldentalcare.com/members/find-a-dentist/>

La Clinica: (541) 512-3900

8:00 a.m. to 5:00 p.m., Monday - Friday

http://laclinicahealth.org/providers/?fwp_area_of_focus=dentist

Willamette Dental: (855) 433-6825 or TTY 711

7:00 a.m. to 6:00 p.m., Monday - Friday

7:00 a.m. to 4:00 p.m., Saturdays

<https://locations.willamettedental.com/>

ODS: (800) 342-0526 or TTY 711

7:00 a.m. to 7:00 p.m., Monday - Friday

<https://www.modahealth.com/ProviderSearch/faces/webpages/home.xhtml>

What are my Oral Health (dental benefits)?

Prevention

- Exams (once per year for adults, twice a year for children 18 and under)
- Cleanings (once a year for adults, twice a year for children 18 and under)
- Fluoride treatments
- X-rays
- Sealants (for children 16 years and under)

Restorative

These services are covered if your primary care dentist says they are dentally appropriate. Some of these services may need pre-approval from your dental plan.

- Fillings
- Partial dentures every 5 years
- Complete dentures every 10 years
- Stainless steel crowns for premolars/molars (back teeth)
- Oral Surgery and Endodontics
- Tooth removal
- Root canals for front teeth (Incisors and Canines) and Premolars
- 1st Molar Root Canal Therapy (Under 21 years old and/or currently pregnant)
- 2nd Molar Root Canal Therapy (Under 21 years old)

Dental Emergency

A dental emergency is when you need same-day dental care.

Emergencies include a severe toothache or gum swelling, an infection in your gums or teeth, or a tooth that has been knocked out.

For a dental emergency, please call your Primary Care Dentist (PCD). If you cannot reach your PCD or you do not have one, call your dental plan. They will help you find emergency dental care.

If you need a ride to your dental visit

If you cannot get to an appointment on your own, you may call ReadyRide for a free ride.

Call the ReadyRide Call Center at (800) 479-7920 to get a ride. For hearing impaired, please call 7-1-1 (Oregon Relay Service). Please call at least two business days before you need a ride, Monday through Friday 8 a.m. – 6 p.m. You may schedule a ride as early as 60 days before you need the ride.

Urgent Dental Care

Urgent dental care is when you need dental care soon, but not immediate treatment. Examples of urgent dental care are a toothache, swollen gums, or a lost filling.

For urgent dental care call your primary care dentist (PCD). If you cannot reach your PCD or you do not have one, call your dental plan. They will help you find urgent dental care, depending on your condition.

Specialty Care

Your PCD may refer you to a specialist if you need one. If you go to a specialist without a referral, you may have to pay the bill. But never pay a medical or dental bill without calling AllCare CCO.

If you have any questions about your dental coverage, please call AllCare Health Member Services at (541) 471-4106, toll free at (888) 460-0185, or TTY at 711.

Medical Equipment

If you think you need medical equipment, such as diabetic supplies, walkers, or incontinence supplies, talk to your PCP. Your doctor is best able to decide what you need. If you have any problems getting the supplies you need call AllCare CCO for help at (541) 471-4106, toll free at (888) 460-0185, or TTY at 711.

Vision Care

AllCare CCO provides limited vision services, as listed below:

- Children may receive an eye exam and glasses one time every year.
- Women who are pregnant may also receive a routine eye exam and glasses.
- Diabetics may receive a diabetic eye exam one time every year.

AllCare CCO has eye doctors (optometrists and ophthalmologists) available for vision care. Please call Member Services if you need help finding an eye doctor.

Eye problems

If your vision suddenly worsens, or if your eyes become infected or injured, see your Primary Care Provider. Your PCP will refer you to a specialist if needed.

Hearing Care

If you think you need a hearing exam, call your PCP for a referral to a specialist. If you were receiving hearing services before enrolling in our plan, please call Member Services about continuing those services.

AllCare CCO will pay for some hearing aids and batteries. Please call Member Services about hearing aid benefits.

Quitting Tobacco

If you need help quitting smoking or chewing tobacco, call our Tobacco Cessation Coordinator at (541) 471-4106, toll free at (888) 460-0185, or TTY at 711. Or, call your PCP. No referral is needed. Your doctor will prescribe a treatment plan for you. AllCare CCO coverage includes nicotine gum, patches, Zyban, and Chantix. We also provide support and counseling to help you quit and stay quit.

Mental Health Services

Mental health services are available to all OHP members. You can get help for depression, anxiety, family problems, and difficult behaviors, to name a few. We cover mental health assessment to find out what kind of help you need. If you need it, we cover case management, therapy, and care in a psychiatric hospital.

Important: **You do not need a referral to get mental health services from a network provider.** Please see our Mental Health Provider Directory for a list of network providers.

The services and programs we offer are: **Adult Mental Health Services** We want to make certain that mental health care needs are met, at what ever level of care you may need. The Choices Model is a program to help adults in residential settings get better mental health care. It also helps adults with mental illness get more and better services in the community. The Choices Model is provided for those stepping down from a state hospitalization and coming back into our service area (transition) and is provided by the County. AllCare CCO, BHCC, and Options, aid in that process.

Children's Mental Health Services

Children with behavioral challenges will be cared for at the level that would be most appropriate for their care, including our wraparound or intensive care coordination programs. Intensive care coordination services are individualized

to meet the child's and family's needs. System of Care and wraparound planning involve everyone in the child's life — schools, community organizations, doctors, criminal justice, and others — in forming a team around the child and family to plan supportive services.

OHP mental health providers in the AllCare CCO service area are:

Jackson County Options for Southern Oregon 1700 E. Barnett, Medford, OR 97504 3501 Excel, Ste 225, Medford, OR 97504 (541) 476-2373 Toll free (877) 457-1320 TTY (800) 735-2900 Jackson County Mental Health For crisis services only Crisis Line (541) 774-8201	Josephine County Options for Southern Oregon 1545 Harbeck Road Grants Pass, OR 97526 (541) 476-2373 Toll free (877) 457-1320 TTY (800) 735-2900 Crisis Line (541) 474-5360
Douglas County Douglas County Community Health Alliance 2700 Stewart Parkway, Annex B Roseburg, OR 97471 (541) 440-3532 Toll free (800) 866-9780 TTY (800) 735-2900 Crisis Line (800) 466-9780	Curry County Curry Community Health 29821 Colvin Street Gold Beach, OR 97444 (541) 373-8001 Toll free (877) 739-4245 TTY (800) 735-2900 Crisis Line (877) 519-9322

Mental Health Prescriptions

Most medications that people take for mental illness are paid directly by the Oregon Health Authority (OHA). Please show your pharmacist your Oregon Health Member ID and your AllCare CCO Member ID cards. The pharmacy will know where to send the bill.

Declaration for Mental Health Treatment

Oregon has a form for writing down your wishes for mental health care if you have a mental health crisis, or if for some reason you can't make decisions about your mental health treatment. The form is called the Declaration for Mental Health Treatment. You can complete it while you can understand and make decisions about your care. The Declaration for Mental Health treatment tells what kind of care you want if you ever need that kind of care but are unable to make your wishes known. Only a court and two doctors can decide if you are not able to make decisions about your mental health treatment.

This form allows you to make choices about the kinds of care you want and do not want. It can be used to name an adult to make decisions about your care. The person you name must agree to speak for you and follow your wishes. If your wishes are not in writing, this person will decide what you would want.

A declaration form is only good for three (3) years. If you become unable to decide during those three (3) years, your declaration will remain good until you can make decisions again. You may change or cancel your declaration when you can understand and make choices about your care. You must give your form to your Primary Care Provider and the person you name to make decisions for you.

For more information on the **Declaration for Mental Health Treatment** go to the State of Oregon's website at: <http://cms.oregon.gov/oha/amh/forms/declaration.pdf>.

If your provider does not follow your wishes in your Declaration for Mental Health Treatment, you can complain. A form for this is at www.healthoregon.org/hcrqi. Send your complaint to:

Health Care Regulation and Quality Improvement
800 NE Oregon St, #305
Portland, OR 97232
Email: Mailbox.hcls@state.or.us
Fax: (971) 673-0556
Phone: (971) 673-0540; TTY: (971) 673-0372

Alcohol and Drug Treatment

AllCare CCO covers treatment to help you stop using alcohol and drugs. You do not need a referral—you may visit a substance use disorders treatment provider on your own. Substance use disorders treatment services include:

- Outpatient treatment
- Residential treatment
- Acupuncture
- Medication assisted treatment, including Methadone maintenance
- Individual and group counseling for you and your family members
- Intensive outpatient treatment
- Detoxification
- Case Management

Confidentiality: Federal and state laws protect the privacy of all OHP members. No one may release information to anyone outside AllCare CCO about a member's substance use disorder without the member's written permission. AllCare CCO and its providers may not release or disclose any information about an OHP member for any purpose except as directed by the OHP member. AllCare CCO and its providers may not give information, except for purposes directly related to the administration of the Oregon Health Plan.

When you call a substance use disorders treatment provider, a counselor will schedule a date and time to talk with you about your condition and make a treatment plan.

AllCare CCO alcohol and drug dependency providers are:

Josephine County	
Adapt 418 NW 6th Street Grants Pass, OR (541) 9474-1033	Josephine County Community Corrections Treatment Services 510 NW 4th Street Grants Pass, OR (541) 474-5171
OnTrack 720 NW 6th Street Grants Pass, OR (541) 955-9227	Choices 109 NW Manzanita Avenue, Grants Pass, OR (541) 474-8847
Grants Pass Treatment Center 1881 NE 7th Street Grants Pass, OR (541) 955-3210	

Jackson County	
Addictions Recovery Center, Inc. 1003 W Main Street, Ste. 104 Medford, OR 97501 (541) 779-1282	OnTrack 221 W Main Street Medford, OR 97501 (541) 772-1777
Allied Health Services 777 Murphy Road Medford, OR 97504 (541) 772-2763	Phoenix Counseling Center 149 S Main Street Phoenix, OR 97535 (541) 535-4133
Curry County	
Curry Community Health 29821 Colvin Street Gold Beach, OR (541) 373-8001	OnTrack 3397 Delta Waters Road Medford, OR 97504 (541) 772-4648
OnTrack 1658 Ashland Street Ashland, OR 87520 (541) 482-2041	OnTrack 3131 Avenue C White City, OR 97503 (541) 864-8701

Fraud, Waste, or Abuse

Reporting Medicaid or OHP Fraud, Waste, or Abuse is very private. Your personal information will not be used. You may report these cases to:

U.S. Department of Health and Human Services

Office of Inspector General

ATTN: OIG HOTLINE OPERATIONS

P.O. Box 23489

Washington, DC 20026

Phone: (800) HHS-TIPS (800-447-8477)

TTY: (800) 377-4950

Fax: (971) 673-1890

Or

DHS Provider Audit Unit

3406 Cherry Ave NE, 2nd Floor

Salem, OR 97303

Phone: (888) FRAUD01 (888-372-8301), Monday-Friday, 8:00 a.m. - 5:00 p.m.

Fax: **ATTN: HOTLINE** at (503) 373-1525

If you think someone is using your personal information for OHP benefits, contact:

DHS Provider Audit Unit

3406 Cherry Ave NE, 2nd Floor

Salem, OR 97303

Phone: (888) FRAUD01 (888-372-8301), Monday-Friday, 8:00 a.m. - 5:00 p.m.

Fax to: **ATTN: HOTLINE** at (503) 373-1525

End-of-life Decisions and Advance Directives (Living Wills)

Some providers may not follow Advance Directives. Ask your providers if they will follow yours.

Adults 18 years and older can make decisions about their own care, including refusing treatment. It's possible that someday you could become so sick or injured that you can't tell your providers whether you want a certain treatment or not. If you have written an Advance Directive, also called a Living Will, your providers can follow your instructions. If you don't have an Advance Directive, your providers may ask your family what to do. If your family can't or won't decide, your providers will give you the standard medical treatment for your condition.

If you don't want certain kinds of treatment like a breathing machine or feeding tube, you can write that down in an Advance Directive. It lets you decide your care before you need that kind of care—in case you are unable to direct it yourself, for example if you are in a coma. If you are awake and alert your providers will always listen to what you want.

You can get an Advance Directive form at most hospitals and from many providers. You also can find one online at <https://healthcare.oregon.gov/shiba/topics/Pages/advance-directives.aspx>. If you write an Advance Directive, be sure to talk to your providers and your family about it and give them copies. They can only follow your instructions if they have them.

If you change your mind, you can cancel your Advance Directive anytime. To cancel your Advance Directive, ask for the copies back and tear them up, or write CANCELED in large letters, sign and date them. For questions or more information contact Oregon Health Decisions at (800) 422-4805 or (503) 692-0894, TTY 711.

If your provider does not follow your wishes in your Advance Directive, you can complain. A form for this is at www.healthoregon.org/hcrqi. Send your complaint to:

Health Care Regulation and Quality Improvement
800 NE Oregon St, #305
Portland, OR 97232
Email: Mailbox.hcls@state.or.us
Fax: (971) 673-0556
Phone: (971) 673-0540; TTY: (971) 673-0372

Grievance System Information and Appeal Rights

How to make a complaint or grievance

If you are very unhappy with AllCare CCO, your healthcare services, or your provider, you can complain or file a grievance. We will try to make things better. Just call Member Services at (541) 471-4106, toll free (888) 460-0185, or hearing impaired (TTY) at 711, or send us a letter to the address on page 18. We will call or write back in a week to let you know that we are working on it.

We will send you a letter in 30 days explaining how we will address your complaint. We will not tell anyone about your complaint unless you ask us to.

Appeals and Hearings

If we **deny**, **stop**, or **reduce** a medical service your provider has ordered, we will mail you a **Notice of Action** letter explaining why we made that decision. You can ask us for a copy of what was reviewed to make this decision. This includes your chart notes and any guidelines used to make the decision. The letter will explain how to appeal (ask us to change our decision). You have a right to ask to change it through an appeal, a state fair hearing, or both. You must ask no more than 60 days from the date on the **Notice of Action** letter.

How to Appeal a Decision

In an appeal, a different health care professional at AllCare CCO will review your case. Ask us for an appeal by:

- Calling Member Services at **(541) 471-4106**, toll free **(888) 460-0185**, or hearing impaired (TTY) at **711**, or
- Writing us a letter
- Filling out an Appeal and Hearing Request, OHP form number 3302

If you want help with this, call and we can fill out an appeal form for you to sign. You can ask someone like a friend or case manager to help you. You may also call the Public Benefits Hotline at (800) 520-5292 for legal advice and help. You will get a **Notice of Appeal Resolution** from us in 16 days letting you know if the reviewer agrees or disagrees with our decision. If we need more time to do a good review, we will send you a letter saying why we need up to 14 more days.

You can keep on getting a service that already started before our decision to stop it. You must ask us to continue the service within 10 days of getting the **Notice of Action** letter that stopped it. If you continue the service and the reviewer agrees with

the original decision, you may have to pay the cost of the services that you received after the Effective Date on the **Notice of Action** letter.

If You Need a Fast Appeal

If you and your provider believe that you have an urgent medical problem that cannot wait for a regular appeal, tell us that you need a fast (expedited) appeal. We suggest that you include a statement from your provider or ask them to call us and explain why it is urgent. If we agree that it is urgent we will call you with a decision in 3 days.

Provider Appeals

Your provider has a right to appeal for you when their physician's orders are denied by a CCO.

How to get an Administrative Hearing

You can have a state fair hearing with an Oregon Administrative Law Judge. You will have 120 days from the date on your **Notice of Appeal Resolution** to ask the state for a hearing. Your **Notice of Action** letter will have an Appeal and Hearing Request form that you can send in. You can also ask us to send you an Appeal and Hearing Request form, or call OHP Client Services at (800) 273-0557, TTY 711, and ask for form number 3302.

At the hearing, you can tell the judge why you do not agree with our decision and why the services should be covered. You do not need a lawyer, but you can have one or someone else, like your doctor, with you. If you hire a lawyer you must pay their fees. You can ask the Public Benefits Hotline (a program of Legal Aid Services of Oregon and the Oregon Law Center) at (800) 520-5292, TTY 711, for advice and possible representation. Information on free Legal Aid can also be found at www.oregonlawhelp.org.

A hearing often takes more than 30 days to prepare. While you wait for your hearing, you can keep on getting a service that already started before our original decision to stop it. You must ask us to continue the service within 10 days of getting the **Notice of Action** that stopped it. If you continue the service and the judge agrees with the original decision, you may have to pay the cost of the services that you received after the Effective Date on the original **Notice of Action**.

Fast (expedited) Hearing

If you and your provider believe that you have an urgent medical problem that cannot wait for a regular hearing process, say that you need a fast (expedited)

hearing and fax the Appeal and Hearing Request form to the OHP Hearings Unit.

We suggest that you include a statement from your provider explaining why it is urgent. You should get a decision within two working days from the date of the Authority receiving the documentation. The Hearings Unit's fax number is (503) 945-6035.

Get a Copy of Your Records

You can have a copy of your medical records. Your PCP has most of your records, so you can ask them for a copy. They may charge a reasonable fee for copies. You can ask us for a copy of the records we have. We will charge you a reasonable fee for the copies.

You can have a copy of your mental health records unless your provider thinks this could cause serious problems. Clinical notes made by the psychotherapist during therapy sessions are not available to you.

Your Records are Private

We only share your records with people who need to see them for treatment and payment reasons. You can limit who sees your records. If there is someone you don't want to see your records, please tell us in writing. You can ask us for a list of everyone we have shared your records with.

A law called the Health Insurance Portability and Accountability Act (HIPAA) protects your medical records and keeps them private. This is also called *confidentiality*. We have a paper called *Notice of Privacy Practices* that explains in detail how we use our members' personal information. We will send it to you if you ask. Just call Customer Service and ask for our *Notice of Privacy Practices*.

Words You Should Know

Administrative Hearing - A hearing is done by an administrative law judge of the state Office of Administrative Hearings. You can ask for this after you receive a Notice of Action to deny, reduce, or stop benefits.

Advance Directive - A legal document that explains the type of medical treatment you want if you become unable to tell your healthcare providers yourself.

AllCare CCO - A Coordinated Care Organization that has contracted with the State of Oregon to provide the Oregon Health Plan in Josephine, Jackson and Curry counties, and in parts of Douglas County.

Appeal - A request asking your CCO to change a decision you disagree with about a service your doctor ordered. You can write a letter or fill out a form explaining why the plan should change its decision; this is called filing an appeal.

CCO (Coordinated Care Organization) - A health plan that brings together all kinds of care under one group.

Complaint - A telephone call or letter to us complaining about your healthcare or about one of our network providers. A complaint does not involve coverage or payment disputes (see Appeals).

Community Health Workers - A specially trained person to help you get the best health services needed.

Copay - An amount of money that a person must pay themselves for health services. Oregon Health Plan members do not have copays. Private health insurance and Medicare sometimes have copays.

Declaration for Mental Health Treatment - A legal document for appointing a mental healthcare representative and giving instructions for mental healthcare providers to follow, before you become unable to direct your own mental healthcare.

DHS - Department of Human Services.

Durable medical equipment (DME) - Things like wheelchairs, walkers and hospital beds. They are durable because they last a long time. They don't get used up like medical supplies.

Emergency - An emergency medical condition means you believe your health will be in serious danger if you don't get help right away. This includes your unborn baby, if you are pregnant. If you believe you have an emergency medical condition, call 9-1-

1 or go directly to the hospital emergency room. Examples of emergencies include, but are not limited to: an illness or injury that needs care right away, bleeding that won't stop, severe pain or broken bones. It can be something that will cause some part of your body to stop working right. An emergency mental health condition is feeling out of control, or feeling like hurting yourself or someone else.

Emergency transportation – Using an ambulance or Life Flight to get medical care. Emergency medical technicians (EMT) give care during the ride or flight.

ER and ED – Emergency room and emergency department, the place in a hospital where you can get care for a medical or mental health emergency.

Emergency services – Care that improves or stabilizes sudden serious medical or mental health conditions.

Excluded services – things that a health plan doesn't pay for. Services to improve your looks, like cosmetic surgery, and for things that get better on their own, like colds, are usually excluded.

Grievance – a complaint about a plan, provider or clinic. This type of complaint does not involve coverage or payment disputes (see Appeals). The law says CCOs must respond to each complaint.

Health insurance – a program that pays for health care. After you sign up for the program, a company or government agency pays for covered health services. Some insurance programs require monthly payments, called premiums.

Home health care – services you get at home to help you live better after surgery, an illness or injury. Help with medications, meals and bathing are some of these services.

Hospital inpatient and outpatient care – Hospital inpatient care is when the patient is admitted to a hospital and stays at least 3 nights. Outpatient care is surgery or treatment you get in a hospital and then leave afterward.

ICM or Intensive Case Manager (Formerly ENCC Exceptional Needs Care Coordinator) – An AllCare CCO employee who helps members with difficult or special medical needs receive proper healthcare and other assistance from community agencies.

Immunizations – Also called vaccines (shots). Medicines that are injected into the body to prevent a person from getting a disease that may cause serious health problems.

Medically necessary – services and supplies that are needed to prevent, diagnose or treat a medical condition or its symptoms. It can also mean services that are accepted by the medical profession as standard treatment.

Member Services - An AllCare Health department that assists you with your questions and problems with your healthcare services and AllCare CCO benefits.

Network – The medical, mental health, dental, pharmacy and equipment providers that a coordinated care organization (CCO) contracts with.

Network provider – Any provider in a CCO’s network. If a member sees network providers, the plan pays the charges. Some network specialists require members to get a referral from their primary care provider (PCP).

Non-network provider - A provider who has not signed a contract with the CCO, and may not accept the CCO payment as payment-in-full for their services.

Notice of Action - Our written response to you denying any request for service or payment for service.

OHA - Oregon Health Authority. The state agency that oversees the Oregon Health Plan.

OHP - Oregon Health Plan, also known as Medicaid.

Peer Wellness Specialists - A specially trained person to help you get the best health services needed.

Personal Health Navigators - A specially trained person to help you get the best health services needed.

Physician services – Services that you get from a doctor

Plan – a medical, dental, mental health organization or CCO that pays for its members’ health care services.

Preapproval (preauthorization, or PA) – A document that says your plan will pay for a service. Some plans and services require a PA before you get the service. Doctors usually take care of this.

Prescription drugs – Drugs that your doctor tells you to take

Primary care provider or Primary care physician – Also referred to as a “PCP,” this is a medical professional who takes care of your health. They are usually the first person

you call when you have health issues or need care. Your PCP can be a doctor, nurse practitioner, physician's assistant, osteopath, or sometimes a naturopath.

Primary care dentist – The dentist you usually go to who takes care of your teeth and gums.

Provider – Any person or agency that provides a health care service.

Post-stabilization – Care to keep you stable or improve your condition after an emergency is over and there is no chance of another emergency.

Rehabilitation services – special services to improve strength, function or behavior, usually after surgery, injury, or substance abuse.

Skilled nursing care – help from a nurse with wound care, therapy, or taking your medicine. You can get skilled nursing care in a hospital, nursing home, or in your own home with home health care

Specialist – A doctor who has extra training in treating a specific part of the body, a disease, or a type of injury.

Urgent care – Care that you need the same day for serious pain, to keep an injury or illness from getting much worse, or to avoid losing function in part of your body, but is not a medical emergency (life threatening).

Well-child care – A series of regular medical exams where a doctor or nurse practitioner looks for problems with a child's physical and mental development to ensure early – and more effective – medical treatment.

Revised November 2, 2018



An Oregon Benefit Company



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Medford

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