



2021 Medicaid SSI Member Handbook



Updated: October 5, 2020

SSIMH_10-05-20
DHS Approved 10/08/2020

INTERPRETER SERVICES

English

ATTENTION: If you speak English, language assistance services are available to you free of charge. Call 1-800-963-0035 (TTY: Wisconsin Relay System at 711).

Spanish

ATENCIÓN: Si habla español, los servicios de asistencia de idiomas están disponibles sin cargo, llame al 1-800-963-0035 (TTY: Wisconsin Relay System at 711).

Hmong

CEEB TOOM: Yog koj hais lus Hmoob, kev pab rau lwm yam lus muaj rau koj dawb xwb. Hu
1-800-963-0035 (TTY: Wisconsin Relay System at 711).

Chinese Mandarin

注意: 如果您说中文, 您可获得免费的语言协助服务。请致电1-800-963-0035 (TTY 文字电话: Wisconsin Relay System at 711).

Somali

DIGTOONI: Haddii aad ku hadasho afka Soomaaliha, adeegyada caawimada luqadda waxaa lagu heli karaa iyadoo bilaash ah. Wac 1-800-963-0035 (TTY: Wisconsin Relay 711).

Laotian

ໝາຍເຫດ: ຖ້າທ່ານເວົ້າພາສາລາວ, ທ່ານສາມາດໃຊ້ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາໄດ້ໂດຍບໍ່ເສຍຄ່າ. ໂທ 1-800-963-0035 (TTY: Wisconsin Relay System at 711).

Russian

ВНИМАНИЕ: Если Вы говорите по-русски, Вам будут бесплатно предоставлены услуги переводчика. Позвоните по номеру: 1-800-963-0035 (TTY: Wisconsin Relay System at 711).

My Choice Wisconsin:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
 - Auxiliary aids and services for hearing-impaired and vision-impaired members
- Provides free language access services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact the Member Care Line at 1-800-963-0035.

TABLE OF CONTENTS

Contents

INTERPRETER SERVICES..... 1

MEMBER SUPPORT..... 6

IMPORTANT MY CHOICE WISCONSIN TELEPHONE NUMBERS 6

WELCOME..... 7

USING YOUR FORWARDHEALTH ID CARD 7

BENEFITS TO BEING A MY CHOICE WISCONSIN MEMBER 8

 CHOOSING A PRIMARY CARE PHYSICIAN..... 8

ACCESSING THE CARE YOU NEED..... 9

 Emergency Care..... 9

 Urgent Care..... 10

 Care When You Are Away From Home..... 10

 Care During Pregnancy and Delivery 10

WHEN YOU MAY BE BILLED FOR SERVICES 11

 Covered and Noncovered Services 11

 Copayments..... 11

 Medical Services Received Outside Wisconsin..... 11

OTHER INSURANCE 12

SERVICES COVERED BY MY CHOICE WISCONSIN..... 12

MORE INFORMATION ABOUT COVERED AND NON-COVERED SERVICES..... 15

 Chiropractic Services 15

 Dental Services 15

 Family Planning Services 16

 HealthCheck Services 17

 Mental Health and Substance Abuse Services..... 17

 Pharmacy Benefits 17

 Transportation Services 18

 Emergency Ambulance Transportation Services..... 18

 Vision Services 18

CARE EVALUATION/HEALTH NEEDS 18

IF YOU MOVE 18

GETTING A SECOND MEDICAL OPINION..... 19

HMO EXEMPTIONS..... 19

GETTING HELP WHEN YOU HAVE QUESTIONS OR PROBLEMS..... 20

 My Choice Wisconsin’s Member Advocate..... 20

 Enrollment Specialist..... 20

 External Advocate..... 20

 State of Wisconsin HMO Ombuds Program..... 20

FILING A COMPLAINT, GRIEVANCE, OR APPEAL..... 20

 Grievances..... 20

 Appeals 21

YOUR RIGHTS..... 22

 Knowing About Physician Incentive Plan 22

 Knowing Provider Credentials..... 22

 Completing an Advance Directive, Living Will, Or Power Of Attorney For Health Care 22

 Transition of Care 22

 Right to Medical Records 23

 HMO Moral or Religious Objection..... 23

 Your Member Rights 23

 Your Civil Rights..... 24

 Fraud and Abuse 24

YOUR RIGHT TO PRIVACY: MY CHOICE WISCONSIN HEALTH PLAN NOTICE OF
PRIVACY PRACTICES 25

APPENDIX I: KNOW HOW TO GET THE RIGHT CARE FOR YOUR NEEDS 30

MEMBER SUPPORT

If you have a question help is just a call away. Use the numbers below to find answers to your questions about benefits, services, transportation services and more.

IMPORTANT MY CHOICE WISCONSIN TELEPHONE NUMBERS

Member Care Line	1-800-963-0035	Office Hours: Monday – Friday 8 a.m. – 4:30 p.m.
Emergency Number	1-800-963-0035	Call 24 hours a day, seven days a week.
TDD/TTY	Wisconsin Relay 711	

WELCOME

Welcome to My Choice Wisconsin. Since 1976, My Choice Wisconsin has been filling gaps in community services and providing solutions for health. As a member of My Choice Wisconsin, you should get all your health care from doctors and hospitals in the My Choice Wisconsin network. See the My Choice Wisconsin Provider Directory for a list of these providers. You may also call our Member Care Line at 1-800-963-0035. Providers accepting new patients are marked in the Provider Directory.

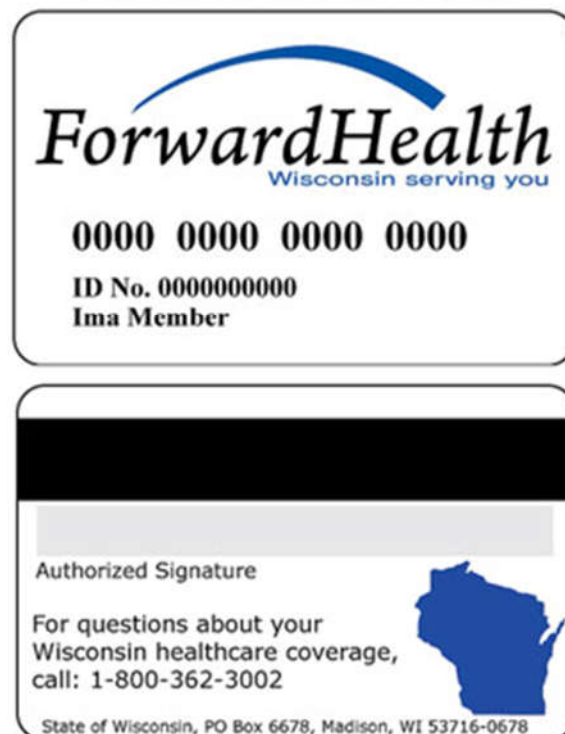
In this book you'll find your benefits, rights and responsibilities as a member. You can also find this Member Handbook, the Provider Directory and more at www.mychoicewi.org/medicaid-ssi

USING YOUR FORWARDHEALTH ID CARD

Your ForwardHealth ID card is the card you will use to get your Medicaid SSI benefits. Your ForwardHealth ID card is different from your HMO card. Always carry your ForwardHealth ID card with you, and show it every time you go to the doctor or hospital and every time you get a prescription filled. You may have problems getting health care or prescriptions if you do not have your card with you. Also bring any other health insurance cards you may have. This could include any ID card from your HMO or other service providers.

Sample ID Card:

Sample ForwardHealth Identification Card



BENEFITS TO BEING A MY CHOICE WISCONSIN MEMBER

- Right to use our provider network and services that are often hard to obtain (for example, mental health services)
- Health Management services through our Nurse Care Managers.
- Coordination of medical, community and social services needs through our care coordinators.
- Prevention and wellness education to help you stay healthy.

CHOOSING A PRIMARY CARE PHYSICIAN

When you need care, it is important to call your primary care physician first. It is important to choose a primary care physician to manage all your health care. You can choose a primary care physician from the list of doctors accepting new patients, as marked in the My Choice Wisconsin Provider Directory. HMO doctors are sensitive to the needs of many cultures. To choose a primary care physician or to change primary care physicians, call our Member Care Line at 1-800-963-0035. Your primary care physician will help you decide if you need to see another doctor or specialist and, if appropriate, give you a referral. Remember, you must get approval from your primary care physician before you see another doctor.

You must choose a primary care physician within 30 days of joining this health plan. If you do not choose a primary care physician, we will select one for you.

Women may see a women's health specialist, such as an Obstetrician and Gynecologist (OB/GYN), nurse midwife, or license midwife, without a referral in addition to choosing from their primary care physician.

ACCESSING THE CARE YOU NEED

Emergency Care

Emergency care is care that is needed right away. Some examples are:

- Choking
- Convulsions
- Prolonged or repeated seizures
- Serious broken bones
- Severe burns
- Severe pain
- Severe or unusual bleeding
- Suspected heart attack
- Suspected poisoning
- Suspected stroke
- Trouble breathing
- Unconsciousness

If you need emergency care, try to go to a My Choice Wisconsin provider for help. If your condition cannot wait, go to the nearest provider (hospital, doctor, or clinic). Call 911 or your local police or fire department emergency services if the emergency is very severe and you are unable to get to the nearest provider.

If you must go to a non-My Choice Wisconsin hospital or provider, call My Choice Wisconsin at 1-800-963-0035 as soon as you can to tell us what happened.

Remember, hospital emergency rooms are for true emergencies only. Unless you have a true emergency, call your doctor or our 24-hour emergency number at 1-800-963-0035 before you go to the emergency room. If you do not know if your illness or injury is an emergency, call the My Choice Wisconsin Member Care Line at 1-800-963-0035. Assistance is available 24 hours a day. We will tell you where you can get care.

A prior authorization is not required for emergency services.

Urgent Care

Urgent care is care you need sooner than a routine doctor's visit, but it is **not** emergency care. Some examples are:

- Bruises
- Minor burns
- Minor cuts
- Most broken bones
- Most drug reactions
- Bleeding that is not severe
- Sprains

You must get urgent care from My Choice Wisconsin doctors unless you first get our approval to see a non-My Choice Wisconsin doctor. Do not go to a hospital emergency room for urgent care unless you get approval from My Choice Wisconsin first.

Care When You Are Away From Home

Follow these rules if you need medical care but are too far away from home to go to your regular primary care physician or clinic:

- For true emergencies, go to the nearest hospital, clinic, or doctor. Call My Choice Wisconsin at 1-800-963-0035 as soon as you can to tell us what happened.
- For urgent or routine care away from home, you must first get approval from us to go to a different doctor, clinic, or hospital. This includes children who are spending time away from home with a parent or relative. Call us at 1-800-963-0035 for approval to go to a different doctor, clinic, or hospital.

Care During Pregnancy and Delivery

If you become pregnant, please let My Choice Wisconsin and your income maintenance (IM) agency know right away, so you can get the extra care you need. You do not have copayments when you are pregnant.

You must go to a My Choice Wisconsin hospital to have your baby. Talk to your My Choice Wisconsin doctor to make sure you know which hospital you are to go to when it is time to have your baby. Do not go out of area to have your baby unless you have My Choice Wisconsin approval. Your My Choice Wisconsin doctor knows your history and is the best doctor to help you.

Also, talk to your doctor if you plan to travel in your last month of pregnancy. We want you to have a healthy birth and a good birthing experience, so it may not be a good time for you to be traveling.

WHEN YOU MAY BE BILLED FOR SERVICES

Covered and Noncovered Services

Under Medicaid SSI, you do not have to pay for covered services other than required copayments. The amount of your copay cannot be greater than it would have been in fee-for-service. To help ensure that you are not billed for services, you must see a provider in My Choice Wisconsin's network. The only exception is for emergencies. If you are willing to accept financial responsibility and make a written payment plan with your provider, you may ask for noncovered services. Providers may bill you up to their usual and customary charges for noncovered services.

If you get a bill for a service you did not agree to, please call 1-800-963-0035.

Copayments

Under Medicaid SSI, My Choice Wisconsin and its providers and subcontractors may bill you small service fees, called copayments. The following members do not have to pay copayments:

- Nursing home residents
- Pregnant women
- Members younger than 19 years old who are members of a federally recognized tribe
- Members younger than 19 years old with incomes at or below 100 percent of the federal poverty level

Medical Services Received Outside Wisconsin

If you travel outside Wisconsin and need emergency care, health care providers in the area where you travel can treat you and send the bill to My Choice Wisconsin. You may have copayments for emergency services provided outside Wisconsin.

My Choice Wisconsin does not cover any services, including emergency services, provided outside the United States, Canada, and Mexico. If you need emergency services while in Canada or Mexico, My Choice Wisconsin will cover the service only if the doctor's or hospital's bank is in the United States. Other services may be covered with HMO/PIHP approval if the provider has a U.S. bank. Please call My Choice Wisconsin if you get any emergency services outside the United States.

If you get a bill for services, call our Member Care Line at 1-800-963-0035 right away.

OTHER INSURANCE

If you have other insurance in addition to My Choice Wisconsin, you must tell your doctor or other health care provider. Your doctor or other health care provider must bill your other insurance before billing My Choice Wisconsin. If your My Choice Wisconsin doctor or other health care provider does not accept your other insurance, call the HMO Enrollment Specialist at 1-800-291-2002. The HMO Enrollment Specialist can tell you how to use both insurance plans.

SERVICES COVERED BY MY CHOICE WISCONSIN

My Choice Wisconsin is responsible for providing all medically necessary covered services under Medicaid SSI.

Service	Medicaid SSI Coverage Information
Ambulance	Full coverage of ER ambulance ride. Member contacts MTM for non-ER ambulance.
Cardiac Rehabilitation	Full coverage with no copayment
Chiropractic Services	This is not a covered benefit through My Choice Wisconsin Medicaid SSI. Your chiropractic services are provided by the State, not My Choice Wisconsin.
Dental Non-Emergency	This is a covered benefit through My Choice Wisconsin Medicaid SSI for Waukesha county only. For My Choice Wisconsin Medicaid SSI Members in all other counties your Dental Care is covered by the state with your ForwardHealth card.
Dental: Oral Surgery/ TMJ Surgery	My Choice Wisconsin does not cover the dentist portion of the claim or any portion of the claim where oral surgery/TMJ surgery is performed in an office setting. Those are covered benefits through the Forward Health card. My Choice Wisconsin is responsible for all ancillary services to the dentist when procedure does not take place in an office setting.

Service	Medicaid SSI Coverage Information
Dental Emergency	A dental emergency is defined as an immediate dental service needed to treat dental pain, swelling, fever, infection or injury to the teeth. This is a covered benefit through My Choice Wisconsin with no copayment.
Disposable Medical Supplies (DMS)	Full coverage with no copayment.
Drugs	This is not a covered benefit through My Choice Wisconsin Medicaid SSI. Your prescription and certain over the counter items are provided by the State, with your ForwardHealth card.
Durable Medical Equipment (DME)	Full coverage with no copayment. Rental items are not subject to copayment.
Emergency Professional Fee	Full coverage with no copayment
Emergency Room (ER)	Full coverage with no copayment
End Stage Renal Disease (ESRD)	Full coverage with no copayment
Facility Admissions	Full coverage with no copayment.
Family Planning Services	Full coverage excluding infertility treatments, surrogate parenting, and the reversal of voluntary sterilization. No copayment. Birth control pills are covered through your Forward Health ID card. Please show this card to the pharmacy.
Flu Shot	Full coverage with no copayment.
Health Check – Ages 19-21	Full coverage of Health Check screenings and other services for individuals under age 21.
Hearing Services	Full coverage with no copayment.
Home Health	Full coverage of private duty nursing, skilled nursing home health care, PT, OT, Speech Therapy, and personal care offered through HH. No copayment.

Service	Medicaid SSI Coverage Information
Hospice	Full coverage with no copayment.
Immunizations	Full coverage with no copayment.
Inpatient Hospital Admissions	Full coverage with no copayment.
Mammogram	Full coverage with no copayment.
Mental Health and Substance Abuse: <i>Outpatient Psychological testing</i>	Full coverage with no copayment.
Mental Health and Substance Abuse: <i>Inpatient</i>	Full coverage with no copayment.
Mental Health and Substance Abuse: <i>Outpatient Office Visits</i>	Full coverage with no copayment.
Mental Health and Substance Abuse: <i>Home Visit</i>	Full coverage with no copayment.
Mental Health and Substance Abuse: Programs including Day Treatment, Partial Hospitalization, and Intensive Outpatient Programs.	Full coverage with no copayment.
Non-Emergent surgeries and procedures	Full coverage with no copayment.
Nutritional Therapy (Enteral)	Full coverage with no copayment.
Occupational Therapy (OT)	Full coverage with no copayment.
Out of Network Referral Requests	Full coverage with no copayment.
Outpatient Laboratory Services	Full coverage with no copayment.
Personal Care Services	Full coverage with no copayment.
Physical Therapy (PT)	Full coverage with no copayment.
Podiatric Services	Full coverage with no copayment.
Prenatal Care/Maternity	Full coverage with no copayment. Includes Prenatal Care Coordination (PNCC) and preventive mental health and substance abuse screening and counseling for women at risk of mental health or substance abuse problems.
Preventive Service	Full coverage with no copayment.

Service	Medicaid SSI Coverage Information
Radiology Services (diagnostic or medically necessary)	Full coverage with no copayment.
Speech Language Pathology	Full coverage with no copayment
Transportation (Non-emergent)	This is not a covered benefit through My Choice Wisconsin Medicaid SSI. Non-emergent transportation is provided by the State, not My Choice Wisconsin, with your ForwardHealth card.
Vision (Optical)	Surgical, diagnostic, supply dispensing. Benefit includes one contracted pair of eyeglasses and one replacement eyeglass per member per 12 months.

MORE INFORMATION ABOUT COVERED AND NON-COVERED SERVICES

Chiropractic Services

Chiropractic services are a covered benefit under Medicaid SSI. You may get covered chiropractic services from a Medicaid-enrolled provider who will accept your ForwardHealth ID card. To find a Medicaid-enrolled provider:

1. Go to www.forwardhealth.wi.gov
2. Click on the Members link or icon in the middle section of the page.
3. Scroll down and click on the Resources tab.
4. Click on the Find a Provider link.
5. Under Program, select BadgerCare Plus.

Or, you can call ForwardHealth Member Services at 1-800-362-3002.

Dental Services

IF YOU LIVE IN WAUKESHA COUNTY:

My Choice Wisconsin provides all covered dental services in Waukesha County only. You must go to a My Choice Wisconsin dentist. See the Provider Directory or call our member Care Line at 1-800-963-0035 for the names of our dentists.

As a member of My Choice Wisconsin, you have the right to a routine dental appointment within 90 days of your request either in writing or over the phone to the Member Care Line.

IF YOU LIVE IN ANY COUNTY EXCEPT WAUKESHA COUNTY:

Dental services are a covered benefit for you. You may get covered dental services from a Medicaid-enrolled provider who will accept your ForwardHealth ID card. To find a Medicaid-enrolled provider:

1. Go to www.forwardhealth.wi.gov
2. Click on the Members link or icon in the middle section of the page.
3. Scroll down and click on the Resources tab.
4. Click on the Find a Provider link.
5. Under Program, select BadgerCare Plus.

Or, you can call ForwardHealth Member Services at 1-800-362-3002.

If you have a dental emergency, you have the right to obtain treatment within 24 hours of your request. A dental emergency is a need for immediate dental services to treat severe dental pain, swelling, fever, infection, or injury to the teeth. If you are experiencing a dental emergency:

If you already have a dentist who is with My Choice Wisconsin:

- Call the dentist's office.
- Tell the dentist's office that you are having a dental emergency.
- Tell the dentist's office what the exact dental problem is. This may be something like a severe toothache or swollen face.
- Call us if you need help with getting a ride to or from your dental appointment.

If you do **not** currently have a dentist who is with My Choice Wisconsin:

- Call My Choice Wisconsin Member Care Line at 1-800-963-0035. Tell us that you are having a dental emergency. We can help you get dental services.
- Tell us if you need help with getting a ride to or from the dentist's office.

Call My Choice Wisconsin if you need help with getting a ride to or from the dentist's office. We can help with getting a ride.

For help with a dental emergency, call 1-800-963-0035.

Family Planning Services

We provide private family planning services to all members, including minors. If you do not want to talk to your primary care physician about family planning, call our Member Care Line at 1-800-963-0035. We will help you choose a My Choice Wisconsin family planning doctor who is different from your primary care physician.

We encourage you to get family planning services from a My Choice Wisconsin doctor so that we can better coordinate all your health care. However, you can also go to any family planning

clinic that will accept your ForwardHealth ID card, even if the clinic is not part of My Choice Wisconsin.

HealthCheck Services

HealthCheck is a program that covers complete health checkups, including treatment for health problems found during the checkup, for members younger than 21 years old. These checkups are very important. Doctors need to see those younger than 21 years old for regular checkups, not just when they are sick.

The HealthCheck program has three purposes:

1. To find and treat health problems for those younger than 21 years old.
2. To increase awareness of the special health services for those younger than 21 years old.
3. To make those younger than 21 years old eligible for some health care not otherwise covered.

The HealthCheck checkup includes:

- Age appropriate immunizations (shots)
- Blood and urine lab tests (including blood lead level testing when age appropriate)
- Dental screening and a referral to a dentist beginning at 1 year old
- Health and developmental history
- Hearing screening
- Physical examination
- Vision screening

To schedule a HealthCheck exam or for more information, call our Member Care Line at 1-800-963-0035

If you need a ride to or from a HealthCheck appointment, please call the Department of Health Services (DHS) non-emergency medical transportation (NEMT) manager at 1-866-907-1493 (TTY: 1-800-855-2880) to schedule a ride.

Mental Health and Substance Abuse Services

My Choice Wisconsin provides mental health and substance abuse (drug and alcohol) services to all members. If you need these services, call 1-800-963-0035. If you need immediate help, you can call our 24-hour Nurse Line at 1-800-963-0035, which is open seven days a week.

All services provided by My Choice Wisconsin are private.

Pharmacy Benefits

You may get a prescription from a My Choice Wisconsin doctor, specialist, or dentist. You can get covered prescriptions and certain over-the-counter items at any pharmacy that will accept your ForwardHealth ID card.

You may have copayments or limits on covered medications. If you cannot afford your copayments, you can still get your prescriptions.

Transportation Services

Non-emergency medical transportation (NEMT) is available through the DHS NEMT manager. The NEMT manager arranges and pays for rides to covered services for members who have no other way to receive a ride. Non-emergency medical transportation can include rides using:

- Public transportation, such as a city bus
- Non-emergency ambulances
- Specialized medical vehicles
- Other types of vehicles, depending on a member's medical and transportation needs

Additionally, if you use your own private vehicle for rides to and from your covered health care appointments, you may be eligible for mileage reimbursement.

You must schedule routine rides at least two business days before your appointment. You can schedule a routine ride by calling the NEMT manager at 1-866-907-1493 (TTY: WI Relay 711), Monday through Friday, from 7:00 a.m. until 6:00 p.m. You may also schedule rides for urgent appointments. A ride to an urgent appointment will be provided in three hours or less.

Emergency Ambulance Transportation Services

My Choice Wisconsin provides full coverage of emergency ambulance transportation services.

Vision Services

My Choice Wisconsin provides covered vision services, including eyeglasses; however, some limitations apply. For more information, call our Member Care Line at 1-800-963-0035.

CARE EVALUATION/HEALTH NEEDS

As a member of My Choice Wisconsin, you may be asked to talk with a trained staff member about your health care needs. Your HMO will contact you within the first 60 days of your being enrolled with My Choice Wisconsin to schedule a time to talk about your medical history and the care you need. It is very important that you talk with your HMO so that you can get the care and services you need. If you have questions or would like to contact My Choice Wisconsin directly to schedule a time to talk about your health care needs, please call 1-800-963-0035.

IF YOU MOVE

If you are planning to move, contact your current Income Maintenance (IM) agency. If you move to a different county, you must also contact the IM agency in your new county to update your eligibility for Medicaid SSI.

If you move out of My Choice Wisconsin's service area, call the HMO Enrollment Specialist at 1-800-291-2002. The HMO Enrollment Specialist will help you choose a new HMO that serves your new area.

GETTING A SECOND MEDICAL OPINION

If you disagree with your doctor's treatment recommendations, you may be able to get a second medical opinion. Contact your doctor or our Member Care Line at 1-800-963-0035 for information.

HMO EXEMPTIONS

Generally, you must enroll in an HMO to get health care benefits through Medicaid SSI. An HMO exemption means you are not required to join an HMO to get your health care benefits. Most exemptions are granted for only a short period of time, primarily to allow you to complete a course of treatment before you are enrolled in an HMO. If you think you need an exemption from HMO enrollment, call the HMO Enrollment Specialist at 1-800-291-2002 for more information.

GETTING HELP WHEN YOU HAVE QUESTIONS OR PROBLEMS

My Choice Wisconsin's Member Advocate

My Choice Wisconsin has a Member Advocate to help you get the care you need. You should contact your Member Advocate for help with any questions about getting health care and solving any problems you may have getting health care from My Choice Wisconsin. You can reach the Member Advocate at 1-800-963-0035.

Enrollment Specialist

To get information about what managed care is and other managed care choice counseling, you can call the HMO Enrollment Specialist at 1-800-291-2002 for assistance.

External Advocate

If you have problems getting health care services while you are enrolled with My Choice Wisconsin for Medicaid SSI, call the SSI External Advocate at 1-800-928-8778.

State of Wisconsin HMO Ombuds Program

The state has designated Ombuds (individuals who provide neutral, confidential and informal assistance) who can help you with any questions or problems you have as an HMO member. The Ombuds can tell you how to get the care you need from your HMO. The Ombuds can also help you solve problems or complaints you may have about the HMO program or your HMO. Call 1-800-760-0001 and ask to talk to an Ombuds.

FILING A COMPLAINT, GRIEVANCE, OR APPEAL

Grievances

A grievance is any complaint about your HMO or health care provider that is not related a denial, limitation, reduction, or delay in your benefits. Grievance topics include things like the quality of services you were provided, rudeness from a provider or an employee, and not respecting your rights as a member.

We would like to know if you ever have a complaint about your care at My Choice Wisconsin. Please call My Choice Wisconsin's Member Advocate at 1-800-963-0035, or write to us at the following address if you have a complaint:

My Choice Wisconsin Health Plan
Attn: SSI Member Advocate
10201 West Innovation Drive, Suite 100
Wauwatosa, WI 53226

If you want to talk to someone outside My Choice Wisconsin about the problem, call the HMO Enrollment Specialist at 1-800-291-2002. The HMO Enrollment Specialist may be able to help you solve the problem or write a formal grievance to My Choice Wisconsin or to the Medicaid SSI programs. If you are enrolled in a Medicaid SSI program, you can also call the SSI External Advocate at 1-800-928-8778 for help with grievances.

The address to file a complaint with the Medicaid SSI program is:

Medicaid SSI
Managed Care Ombuds
P.O. Box 6470
Madison, WI 53716-0470
1-800-760-0001

You may file a grievance at any time. You will not be treated differently from other members because you file a complaint or grievance. Your health care benefits will not be affected.

Appeals

You have the right to appeal if you believe your benefits are wrongly denied, limited, reduced, delayed, or stopped by My Choice Wisconsin. Your authorized representative or your provider may request an appeal for you if you have given them consent to do so. When requesting an appeal, you must appeal to your HMO first. The request for an appeal must be made no more than 60 days after you receive notice of services being denied, limited, reduced, delayed, or stopped.

If you need help writing a request for an appeal, please call your SSI Member Advocate at 1-800-963-0035, the Medicaid SSI Ombuds at 1-800-760-0001, or the HMO Enrollment Specialist at 1-800-291-2002. If you are enrolled in a Medicaid SSI Program, you can also call the SSI External Advocate at 1-800-928-8778 for help with your appeal.

If you disagree with your HMO's decision about your appeal, you may request a fair hearing with the Wisconsin Division of Hearings and Appeals. The request for a fair hearing must be made no more than 90 days after your HMO makes a decision about your appeal.

If you want a fair hearing, send a written request to:

Department of Administration
Division of Hearings and Appeals
P.O. Box 7875
Madison, WI 53707-7875

The hearing will be held with an administrative law judge in the county where you live. You have the right to be represented at the hearing, or you can bring a friend for support. If you need a special arrangement for a disability or for language translation, please call 1-608-266-3096 (voice) or 1-608-264-9853 (hearing impaired).

If you need help writing a request for a fair hearing, please call either the Medicaid SSI Ombuds at 1-800-760-0001 or the HMO Enrollment Specialist at 1-800-291-2002. If you are enrolled in a Medicaid SSI Program, you can also call the SSI External Advocate at 1-800-928-8778 for help.

You will not be treated differently from other members because you request a fair hearing. Your health care benefits will not be affected.

You may request to have the disputed services continued while the HMO appeal and State fair hearing process are occurring. The request to continue services must happen within 10 days of receiving the notice that services were denied or changed, or before the effective date of the denial or change in benefits. You may need to pay for the cost of services if the hearing decision is not in your favor.

YOUR RIGHTS

Knowing About Physician Incentive Plan

You have the right to ask if we have special financial arrangements with our physicians that can affect the use of referrals and other services you might need. To get this information, call our Member Care Line at 1-800-963-0035 and request information about our physician payment arrangements.

Knowing Provider Credentials

You have the right to information about our providers including the provider's education, board certification, and recertification. To get this information, call our Member Care Line at 1-800-963-0035.

Completing an Advance Directive, Living Will, Or Power Of Attorney For Health Care

You have the right to make decisions about your medical care. You have the right to accept or refuse medical or surgical treatment. You have the right to plan and direct the types of health care you may get in the future if you become unable to express your wishes. You can let your doctor know about your wishes by completing an advance directive, living will, or power of attorney for health care. Contact your doctor for more information.

You have the right to file a grievance with the DHS Division of Quality Assurance if your advance directive, living will, or power of attorney wishes are not followed. You may request help in filing a grievance.

Transition of Care

If you have moved from ForwardHealth or a BadgerCare Plus/SSI Health Plan to a new BadgerCare Plus/SSI Health Plan, then you have the right to:

- Continue to see your current providers and access your current services for up to 90 days. Please call your HMO upon enrollment to let them know who your provider is. If this provider is still not in the HMO network after 90 days, you will be given a choice of participating providers to make a new choice.
- Receive services that would pose a serious health risk or hospitalization if you did not receive them.

Right to Medical Records

You have the right to ask for copies of your medical records from your provider(s). We can help you get copies of these records. Please call 1-800-963-0035 for help. Please note that you may have to pay to copy your medical records. You may correct inaccurate information in your medical records if your doctor agrees to the correction.

HMO Moral or Religious Objection

The HMO will inform members of any covered Medicaid benefits which are not available through the HMO because of an objection on moral or religious grounds. My Choice Wisconsin will inform members about how to access those services through the State.

Your Member Rights

- You have the right to have an interpreter with you during any Medicaid SSI covered service.
- You have the right to get the information provided in this member handbook in another language or format.
- You have the right to get health care services as provided for in federal and state law. All covered services must be available and accessible to you. When medically appropriate, services must be available 24 hours a day, seven days a week.
- You have the right to get information about treatment options including the right to request a second opinion.
- You have the right to make decisions about your health care.
- You have the right to be treated with dignity and respect.
- You have the right to be free from any form of restraint or seclusion used as a means of force, control, ease, or reprisal.
- You have the right to be free to exercise your rights without adverse treatment by the HMO and its network providers.
- You may switch HMOs without cause during the first 90 days of My Choice Wisconsin enrollment.
- You have the right to switch HMOs, without cause, if the State imposes sanctions or temporary management on My Choice Wisconsin.

- You have the right to receive information from My Choice Wisconsin regarding any significant changes with My Choice Wisconsin at least 30 days before the effective date of the change.
- You have the right to disenroll from the HMO if:
 - You move out of the HMO's service area
 - Your HMO does not, for moral or religious reasons, cover a service you want
 - You need a related service performed at the same time, not all related services are available within the provider network, and your PCP or another provider determines that receiving the services separately could put you at unnecessary risk
 - Other reasons, including poor quality of care, lack of access to services covered under the contract, or lack of access to providers experienced in dealing with your care needs.

Your Civil Rights

My Choice Wisconsin provides covered services to all eligible members regardless of the following:

- Age
- Color
- Disability
- National origin
- Race
- Sex

All medically necessary covered services are available and will be provided in the same manner to all members. All persons or organizations connected with My Choice Wisconsin that refer or recommend members for services shall do so in the same manner for all members.

Fraud and Abuse

If you suspect fraud or abuse of the Medicaid program, you may report it. Please go to www.reportfraud.wisconsin.gov.

YOUR RIGHT TO PRIVACY: MY CHOICE WISCONSIN HEALTH PLAN NOTICE OF PRIVACY PRACTICES

Contact the via email at dlfamcprivacyofficer@mychoicefamilycare.org, or send mail to:

My Choice Wisconsin Health Plan
Privacy Officer
10201 West Innovation Drive Suite 100
Wauwatosa, WI 53226
Or call toll-free: 1-833-253-3465

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

Your Privacy Rights

You have the right to:

- Get a copy of your health and claims records
 - You can ask to see or get a copy of your health and claims records and other health information we have about you. Ask us how to do this.
 - We will provide a copy or summary of your health and claims records, usually within 30 days of your request. We may charge a reasonable, cost-based fee.
- Correct your health and claims records
 - You can ask us to correct your health and claims records if you think they are incorrect or incomplete. Ask us how to do this.
 - We may say “no” to your request, but we’ll tell you why in writing within 60 days.
- Request confidential communication
 - You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address.
 - We will consider all reasonable requests, and must say “yes” if you tell us you would be in danger if we do not.
- Ask us to limit the information we share
 - You can ask us **not** to use or share certain health information for treatment, payment, or our operations.
 - We are not required to agree to your request, and we may say “no” if it would affect your care.
- Get a list of those with whom we’ve shared your information

- You can ask us for a list (accounting) of the times we've shared your health information for six years prior to the date you ask, whom we shared it with, and why.
- We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We'll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.
- Get a copy of this privacy notice
 - You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.
- Choose someone to act for you
 - If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choice about your health information.
 - We will make sure the person has this authority and can act for you before we take any action.
- File a complaint if you believe your privacy rights have been violated
 - You can complain if you feel we have violated your rights by contacting us using the information on page 25.
 - You can file a complaint with the U.S. Department of Health and Human Services by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints.
 - We will not retaliate against you for filing a complaint.

Your Choices

You have some choices in the way that we use and share information as we:

- Answer coverage questions from your family and friends
- Provide disaster relief
- Market our services and sell your information

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

In these cases, you have both the right and the choice to tell us to:

- Share information with your family, close friends, or others involved in payment for your care
- Share information in a disaster relief situation

If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

In these cases we *never* share your information unless you give us written permission:

- Marketing purposes
- Sale of your information

Our Uses and Disclosures

We may use and share your information. We typically use or share your health information in the following ways:

- Help manage the health care treatment you receive
 - We can use your health information and share it with professionals who are treating you.

Example: A doctor sends us information about your diagnosis and treatment plan so we can arrange additional services.

- Run our organization
 - We can use and disclose your information to run our organization and contact you when necessary.
 - We are not allowed to use genetic information to decide whether we will give you coverage and the price of that coverage. This does not apply to long term care plans.

Example: We use health information about you to develop better services for you.

- Pay for your health services
 - We can use and disclose your health information as we pay for your health services.

Example: We share information about you with your dental plan to coordinate payment for your dental work.

- Administer your health plan
 - We may disclose your health information to your health plan sponsor for plan administration.

Example: Your company contracts with us to provide a health plan, and we provide your company with certain statistics to explain the premiums we charge.

We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information, see www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html.

- Help with public health and safety issues
 - We can share health information about you for certain situations such as preventing disease, helping with product recalls, reporting adverse reactions to medications, reporting suspected abuse, neglect, or domestic violence, and preventing or reducing a serious threat to anyone’s health or safety.
- Do research
 - We can use or share your information for health research.
- Comply with the law
 - We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we’re complying with federal privacy law.
- Respond to organ and tissue donation requests and work with a medical examiner or funeral director
 - We can share health information about you with organ procurement organizations.
 - We can share health information with a coroner, medical examiner, or funeral director when an individual dies.
- Address workers’ compensation, law enforcement, and other government requests
 - We can use or share health information about you for workers’ compensation claims, for law enforcement purposes or with a law enforcement official, with health oversight agencies for activities authorized by law, and for special government functions such as military, national security, and presidential protective services.
- Respond to lawsuits and legal actions
 - We can share health information about you in response to a court or administrative order, or in response to a subpoena.

Our Responsibilities

- We are required by law to maintain the privacy and security of your protected health information.

- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

For more information, see

www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html.

Changes to the Terms of this Notice

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, on our website, and we will mail a copy to you.

Effective Date of Notice: 1/9/2014

Updated: 9/2/2020

APPENDIX I: KNOW HOW TO GET THE RIGHT CARE FOR YOUR NEEDS

KNOW HOW TO GET THE RIGHT CARE FOR YOUR NEEDS

Use this chart to help you decide where to get care based on your health care needs.

YOUR DOCTOR

Write your Doctor’s Name Here:

Write your Doctor’s Phone Number Here:

Call your doctor when you have these symptoms or when you are unsure where to get care:

- Earache
- High Fever
- A cough or other symptom that doesn’t go away
- Routine Care
- Women’s Health Services

URGENT CARE

Do you know where the nearest in-network urgent care center is?

See the list beginning on the next page or visit the Provider Directory at www.mychoicewi.org.

Write the Nearest Urgent Care Number Here:

Go to the Urgent Care when you have urgent symptoms but your doctor’s office isn’t open. These are things like:

- Simple broken bones, such as a finger
- Minor cuts
- Sprains
- Non-severe bleeding
- Most drug reactions
- Minor burns

EMERGENCY ROOM (ER)

Go to the ER when you have serious or life-threatening symptoms or injuries that cannot wait for care. These are things like:

- | | |
|--|--|
| <ul style="list-style-type: none"> • Severe or unusual bleeding • Trouble breathing • Suspected poisoning • Serious broken bones • Suspected heart attack | <ul style="list-style-type: none"> • Severe burns • Convulsions • Severe pain • Prolonged or repeated seizures |
|--|--|

ARE YOU UNSURE?

Call the My Choice Wisconsin Member Care Line : 1-800-963-0035

If you are unsure of where to get care and your physician is not available to provide guidance, call the My Choice Wisconsin Member Care Line at 1-800-963-0035. Available 24 hours a day.



My Choice Wisconsin Health Plan
10201 West Innovation Drive, Suite 100
Wauwatosa, WI 53226
www.mychoicewi.org