

# MEMBER HANDBOOK

## MANUAL PARA MIEMBROS



**Parkland**  
*HEALTHfirst*

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

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

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

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

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

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

*Dallas Service Area—September 2009  
Área de servicio de Dallas—Septiembre 2009*

**This book belongs to:** \_\_\_\_\_

**My Primary Care Provider (PCP) is:** \_\_\_\_\_

**My PCP's address is:** \_\_\_\_\_

**My PCP's telephone number is:** \_\_\_\_\_

**Call us:**           **Parkland HEALTHfirst Member Services**  
Toll-free **1-888-672-2277**  
English/Spanish Interpreter Services available  
Member Services Hours: 8 a.m. – 5 p.m.  
(Phones answered by Nurse Line or leave voicemail after hours)

**Write us:**           **Parkland Community Health Plan**  
Attention: Parkland HEALTHfirst Member Services  
P.O. Box 569005  
Dallas TX 75356-9005

**Visit our Website:**           **[www.ParklandHMO.com](http://www.ParklandHMO.com)**

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

**Behavioral Health Services** (*includes mental health & substance abuse, English/Spanish interpreter available 24 hours/day, 7 days/week; for emergencies, go to nearest ER or call this number*)           1-888-800-6799 (toll-free)

**Parkland 24-hour Nurse Line** (*Bilingual*): 1-888-667-7890 or 214-266-8773

**Transportation for Medical Services:**   1-877-633-8747

**Prescription Information**                   1-800-252-8263

**Block Vision**                               1-800-879-6901 (*does not apply to SSI members*)

**STAR Program Help Line**                   1-800-964-2777

**Medicaid Managed Care Helpline**       1-866-566-8989

**Medicaid Managed Care Helpline TDD**   1-866-222-4306

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



## A WELCOME TO OUR PARKLAND HEALTHfirst STAR Members!!

### Dear Parkland HEALTHfirst Member:

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

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

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

- Your PCP's name will appear on your Parkland HEALTHfirst ID Card. Check your ID card to make sure the information is correct.
- Make an appointment with your PCP soon to get to know your doctor.
- When you call your PCP for appointments, tell them you are a Parkland HEALTHfirst member.
- Call your PCP when you need care.
- Follow your PCP's advice.
- Always carry your Parkland HEALTHfirst ID card and Medicaid Form 3087
- Use the hospital Emergency Room (ER) **only** for emergencies.

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

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

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

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

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

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

## **Parkland HEALTHfirst PRIVACY NOTICE**

Effective April 14, 2003

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

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

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

### **HOW WE USE OR SHARE INFORMATION**

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

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

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

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

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

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

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

- We may report information to state and federal agencies that regulate us such as the U.S. Department of Health and Human Services, and the Texas Health and Human Services Commission.
- We may share information for public health or disaster relief activities. For example, we may report information to the Food and Drug Administration for investigating or tracking of prescription drug and medical device problems.
- We may report information to public health agencies if we believe there is a serious health or safety threat.
- We may share information with a health oversight agency for certain oversight activities (for example, audits, inspections, licensure and disciplinary actions).
- We may provide information to a court or administrative agency (for example, pursuant to a court order, search warrant or subpoena).

- We may report information for law enforcement purposes. For example, we may give information to a law enforcement official for purposes of identifying or locating a suspect, fugitive, material witness or missing person.
- We may report information to a government authority regarding child abuse, neglect or domestic violence.
- We may share information with a coroner or medical examiner to identify a deceased person, determine a cause of death, or as authorized by law. We may also share information with funeral directors as necessary to carry out their duties.
- We may use or share information for procurement, banking or transplantation of organs, eyes, or tissue.
- We may share information relative to specialized government functions, such as military and veteran activities, national security and intelligence activities, and the protective services for the President and others.
- We may report information on job-related injuries because of requirements of your state worker compensation laws.

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

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

### WHAT ARE YOUR RIGHTS

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

- ❖ ***You have the right to ask us to restrict*** how we use or disclose your information for treatment, payment, or health care operations. You also have the right to ask us to restrict information that we have been asked to give to family members or to others who are involved in your health care or payment for your health care. *Please note that while we will try to honor your request, we are not required to agree to these restrictions.*
- ❖ ***You have the right to ask to receive confidential communications*** of information. For example, if you believe that you would be harmed if we send your information to your current mailing address (for example, in situations involving domestic disputes or violence), you can ask us to send the information by alternative means (for example, by fax) or to an alternative address. We will accommodate your reasonable requests as explained above.
- ❖ ***You have the right to inspect and obtain a copy*** of information that we maintain about you in your designated record set. A “designated record set” is the set of information that includes your health information and that either (i) is enrollment, payment, claims adjudication, and case or medical management record systems maintained by or for us or (ii) is used, in whole or in part, by or for us to make decisions about you.

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

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

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

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

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

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

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

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

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

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

### **EXERCISING YOUR RIGHTS**

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

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

Office of Civil Rights – Region VI  
U.S. Department of Health and Human Services  
1301 Young Street  
Suite 1169  
Dallas, Texas 75202  
Phone: 214-767-4056; TDD: 214-767-8940  
Fax: 214-767-0432

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



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

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

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

You will get a Parkland HEALTHfirst Identification (ID) card from us when you enroll in Parkland HEALTHfirst. A copy of the Parkland HEALTHfirst ID card is shown below.



Front  
of card

 <b>Parkland</b> HEALTHfirst		<b>TEXAS STAR</b> PROGRAM Your Health Plan ■ Your Choice		Member Services / Servicios para Miembros: <b>1-888-672-2277</b> 24 hours / 7 days per week / 24 horas del día/siete días de la semana Parkland Nurse Line / Línea de Enfermeras de Parkland: <b>1-888-667-7890</b> Block Vision of Texas, Inc. Services line / Línea de Servicios para Miembros de Block Vision of Texas, Inc.: <b>1-800-879-6901</b> Behavioral Health (NorthSTAR) / Salud Mental: <b>1-888-800-6799</b> 24 hours / 7 days per week / 24 horas del día/siete días de la semana Relay Texas TTT/DD: <b>1-800-735-2989</b>	
<b>Parkland Community Health Plan</b>					
Attention Doctor/Hospital—You Must Call <b>1-888-672-2277 For Precertification Or Case Management</b>					
MEMBER NAME:			MEMBER NOMBRE:		
MEDICAID ID:			MEDICAID NÚM.:		
EFF. DATE			EFECTIVO:		
PCP:		PCP TEL:		TELÉFONO DEL PCP:	
PCP EFFECTIVE DATE:			FECHA DE EFECTIVIDAD EL PCP:		
Carry this card with you and present it at time of service.			Lleve esta tarjeta con usted y preséntela antes de recibir servicios.		

Back of  
card

<b>In a Medical Emergency</b> 1. Go to the nearest hospital or emergency room immediately. 2. Emergency room personnel: Please notify the patient's Primary Care provider within 24 hours or as soon as possible.		<b>En caso de una emergencia médica</b> 1. Vaya inmediatamente a la sala de emergencias o al hospital más cercano. 2. Personal de la sala de emergencias: favor de avisarle al Proveedor de Cuidado Primario del Paciente dentro de las 24 horas o lo más pronto posible.	
For additional information regarding emergency services, please refer to your Healthfirst Plan member handbook.		Para más información sobre servicios de emergencia, favor de referirse al Manual para Miembros del Plan de Salud de Parkland HealthFirst.	
<b>Mail claims to this address:</b> Claims Processing Center P.O. Box 61088 Phoenix, AZ 85026		<b>Envíe reclamaciones a este dirección.</b> Claims Processing Center P.O. Box 61088 Phoenix, AZ 85026	
In case of an emergency, please call 911		En caso de una emergencia, por favor llama al 911	

Front of  
SSI ID  
card

 <b>Parkland</b> HEALTHfirst		 <b>TEXAS STAR</b> PROGRAM Your Health Plan ■ Your Choice		Member Services / Servicios para Miembros: <b>1-888-672-2277</b> 24 hours / 7 days per week / 24 horas del día/siete días de la semana	
<b>Parkland Community Health Plan</b>		<b>Attention Doctor/Hospital—You Must Call</b> <b>1-888-672-2277 For Precertification Or Case Management</b>		Parkland Nurse Line / Línea de Enfermeras de Parkland: <b>1-888-667-7890</b>	
MEMBER NAME:		MEMBER NUMBER:		Behavioral Health (NorthSTAR) / Salud Mental: <b>1-888-800-6799</b> 24 hours / 7 days per week / 24 horas del día/siete días de la semana	
MEDICAID ID:		MEDICAID NUMBER:		Relay Texas TDD: <b>1-800-735-2989</b>	
EFF. DATE:		EFFECTIVO:			
PCP:		PCP:			
PCP EFFECTIVE DATE:		PCP TEL:		FECHA DE EFECTIVIDAD EL PCP:	
				TELÉFONO DEL PCP:	
<b>Carry this card with you and present it at time of service. SSI Member</b>				<b>Lleve esta tarjeta con usted y preséntela antes de recibir servicios.</b>	

Back of  
SSI ID  
card

<b>In a Medical Emergency</b> 1. Go to the nearest hospital or emergency room immediately. 2. Emergency room personnel: Please notify the patient's Primary Care provider within 24 hours or as soon as possible.		<b>En caso de una emergencia médica</b> 1. Vaya inmediatamente a la sala de emergencias o al hospital más cercano. 2. Personal de la sala de emergencias: favor de avisarle al Proveedor de Cuidado Primario del Paciente dentro de las 24 horas o lo más pronto posible.	
For additional information regarding emergency services, please refer to your Healthfirst Plan member handbook.		Para más información sobre servicios de emergencia, favor de referirse al Manual para Miembros del Plan de Salud de Parkland Healthfirst.	
<b>Mail claims to this address:</b> TMHP Attn: Claims Administrator 12365-A Riata Trace Parkway Austin, TX 78727		<b>Envíe reclamaciones a este dirección.</b> TMHP Attn: Claims Administrator 12365-A Riata Trace Parkway Austin, TX 78727	
<div style="background-color: black; color: white; padding: 5px; text-align: center;"> <i>In case of an emergency, please call 911</i> </div>		<div style="background-color: black; color: white; padding: 5px; text-align: center;"> <i>En caso de una emergencia, por favor llama al 911</i> </div>	

Each of person on Medicaid will have a different ID card. You will not get a new Parkland HEALTHfirst ID card every month. If you lose your ID card, call Parkland HEALTHfirst Member Services toll-free at 1-888-672-2277. We will send you a new ID card. We will also send you a new ID card if you change your PCP (Primary Care Provider).

### How to read your Parkland HEALTHfirst ID Card

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

### How to use your Parkland HEALTHfirst ID Card

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

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

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

## **Temporary Medicaid ID Card (Form 1027-A)**

Medicaid also has a temporary ID card. It is also called Form 1027-A. You should take this card and your Parkland HEALTH*first* ID card with you when you get any health services. You will need to show these every time you need services. You can use this temporary ID card until you get your Medicaid Form 3087.

## Information about the Medicaid Identification Form (Form 3087)

You will get a Medicaid form in the mail each month as long as you are eligible for Medicaid. The Medicaid form tells providers about you and the services that you can get each month. Because you are now on the STAR program, the form will look different than your regular Medicaid form. You will see the STAR program logo (Texas STAR) on the top right hand side of your form. This will tell providers that you are a part of the STAR Program.

**An example of the Form is on the next page.**

The form has a “Good Through” date in the top right hand box. This means the Medicaid form is good through the last day of the month printed in this box. It will also list your name and the names of any other family members who are part of your Medicaid case. As a member of the STAR Program, your Medicaid form will show your Health Plan below each name listed on the form. If you are under 21, you will also see a reminder under your name if you have a Texas Health Steps (EPSDT) check-up due. You will need to call your PCP or Health Plan to arrange for a checkup.

The Medicaid form also shows that adults can get more than three prescriptions each month. Be sure to take your Medicaid form to the pharmacy when you need to get a prescription filled.

In addition, the state form 3087 has the following information:

**Date Run** – This is the date the form was printed

**BIN** – This information is used for pharmacy services

**BP** – This is a code that tells where you live

**TP** – This is the type program for your case

**Cat** – This is your case category

**Case No.** – This is your case number

**ID No.** – This is your Medicaid number

**Name** – This is your full name as listed with Medicaid

**Date of Birth** – This is your birth date listed with Medicaid by month, day and year

**Sex** – this shows if you are female (F) or male (M)

**Eligibility Date** – This is the beginning date of your eligibility

**TPR** – This shows if you have other insurance. A “P” means you have private insurance and an “M” means you are eligible for Medicare

**Medicare No.** – This is your Medicare number, if you have one.

Be sure to read the back of the Medicaid Form. It also gives you more information about the form. There is also a box that has specific information for providers. **You must take your Medicaid form and Parkland HEALTHfirst ID card with you when you get any health care services.** You will need to show your Medicaid form and Parkland HEALTHfirst ID card each time you need services.

If you lose your Medicaid form, contact your local HHSC Eligibility Office for another one.

P.O. BOX 149030 952-X  
 AUSTIN, TEXAS 78714-9030  
 RETURN SERVICE REQUESTED  
 DO NOT SEND CLAIMS TO THE ABOVE ADDRESS

1 ATFF 01-00001  
 Texas Health and Human Services Commission  
**MEDICAID IDENTIFICATION**  
**IDENTIFICACIÓN DE MEDICAID**

Date Run 07/15/2006	BIN 610098	BP 13	TP 13	Cat. 04	Case No. 123456789	GOOD THROUGH: VALIDA HASTA: <input type="checkbox"/>	JULY 31, 2006
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952-X 123456789 13 13 04 030731  
 JANE DOE  
 743 GOLF IRONS  
 LUCAS TX 75002

**ANYONE LISTED BELOW  
 CAN GET MEDICAID SERVICES**

You are enrolled in the STAR Program. Your health plan's name and telephone number are listed under your name. You have a Primary Care Provider (PCP). Call your health plan for your PCP's name.

If you see a reminder under your name, please call your PCP or dentist to schedule a checkup. If you do not see a reminder and are 21 or older, you can get a medical checkup from your PCP once a year. You can also use the STAR Program to get the health care that you need.

Questions about the STAR Program?  
 Please call 1-800-964-2777 for help. **READ BACK OF THIS FORM!**

**CADA PERSONA NOMBRADA ABAJO  
 PUEDE RECIBIR SERVICIOS DE MEDICAID**

Usted está inscrito en el Programa STAR. El nombre y el teléfono de su plan de salud aparecen debajo de su nombre. Usted tiene un Proveedor de Cuidado Primario (PCP). Llame al plan de salud para averiguar el nombre de su PCP.

Si bajo su nombre hay una notificación, llame a su PCP o dentista para hacer una cita para un chequeo. Si no hay una notificación y usted tiene 21 años o más, puede hacerse un chequeo médico con su PCP una vez por año. También puede usar el Programa STAR para recibir los servicios médicos que necesita.

¿Tiene preguntas sobre el Programa STAR?  
 Por favor, llame al 1-800-964-2777 para conseguir ayuda. **¡LEA EL DORSO DE LA FORMA!**

ID NO.	NAME	DATE OF BIRTH	SEX	ELIGIBILITY DATE	TPR	MEDICARE NO.	EYE EXAM	EYE GLASSES	HEARINGAID	HEARDENTAL	PRESCRIPTIONS	MEDICAL SERVICES
765432198	JANE DOE	04-02-1963	F	11-01-2004			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	/	/	WELBY	MARCUS	L MD							

If you have Medicare, effective January 1, 2006, you are eligible for Medicare Rx and your Medicaid prescription drug coverage will be limited.  
 Si tiene Medicare, a partir del 1° de enero de 2006, usted llenará los requisitos de Medicare Rx y se limitará su cobertura de medicamentos recetados de Medicaid.

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

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

- Medicaid ID form (Form 3087) or Temporary Form 1027-A,
- Parkland HEALTHfirst ID card
- Immunization (shot) records
- Pen and paper to take notes (Sometimes you might get a lot of information, and it helps to write things down.)



## How do I choose a Primary Care Provider (PCP)?

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

- Family Doctors
- Pediatricians (for children)
- Obstetricians/Gynecologists (OB/GYNs) (a woman’s doctor)
- General Doctors
- Advanced Nurse Practitioners (ANPs)
- Certified Nurse Midwives (CNMs)
- Federally Qualified Health Clinics (FQHCs)
- Rural Health Clinics (RHCs)

Please look in your Parkland HEALTHfirst Provider Directory for the names, addresses and telephone numbers of Parkland HEALTHfirst Primary Care Providers.

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

## Can I change my PCP?

You can change your PCP as often as four times a year by calling Parkland HEALTHfirst toll-free at **1-888-672-2277**. A complete list of doctors and clinics is found in the Parkland HEALTHfirst Provider Directory. Call Member Services if you need a Provider Directory or you can get a copy at [www.ParklandHMO.com](http://www.ParklandHMO.com)

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

Here are some reasons why you may want to change your PCP:

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

Here are some reasons why you may not be able to have the PCP you chose:

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

### **When will my PCP change become effective?**

**SSI Members:** You can change your PCP up to 4 times per year. The PCP change will become effective on the first day of the month after you call Member Services to ask for the PCP change.

**All Other Members:** You can change your PCP up to 4 times per year. If you change your PCP, the change will become effective the same day that you call Member Services to change the PCP.

### **What if my PCP leaves Parkland HEALTHfirst?**

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

### **Can my PCP request that I be changed to another PCP for non-compliance?**

Here are some reasons why your PCP may ask that you pick a new PCP:

- You frequently miss appointments without calling to let the PCP know
- You are not following your PCP's advice
- Your PCP is no longer a part of Parkland HEALTHfirst

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

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

### **What if I choose to go to another doctor who is not my PCP?**

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

- emergency care
- THSteps
- OB/GYN care
- eye care (for members under 21 years old)
- family planning
- behavioral health (mental health and substance abuse)
- dental services (for members under 21 years old)

Contact Parkland HEALTH*first* Member Services at **1-888-672-2277** for more information.

## **Physician Incentive Plans**

At the present time, Parkland HEALTH*first* does **not** offer a Physician Incentive Plan to any of our providers.

## **What if I want to change health plans?**

**If you are not in the hospital**, you can change your health plan by calling the Texas STAR Program Helpline at 1-800-964-2777. You can change plans as many times as you want, but not more than once a month. **If you are in the hospital, you will not be able to change health plans until you have been discharged.**

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

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

## **Can Parkland HEALTH*first* request that I get disenrolled from their plan?**

Parkland HEALTH*first* may request from the State that you be disenrolled from our plan if:

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

## **What Medicaid services do I get with Parkland HEALTHfirst?**

Here is a list of some of the services you can get. Please follow your PCP's advice. Your PCP is responsible for coordinating all of your care.

- Needed medical care for adults and children
- Shots to prevent illness (immunizations)
- Care from specialists, when needed
- Chiropractic services
- Podiatrist (foot doctor) services
- Laboratory and x-ray services
- Surgery as an outpatient (no hospital stay)
- Hospital care and outpatient care
- Prenatal care, maternity care and newborn care
- 24-hour nurse help line
- 24-hour emergency care from an emergency room
- Eye doctor services (vision exams, eye glasses and contact lenses if medically necessary)
- Hearing services and hearing aids
- Home health agency services
- Ambulances (for emergencies only)
- Dialysis for kidney problems
- Major organ transplants
- Texas Health Steps services (for members under age 21) – Oral evaluation and fluoride varnish in the medical home in conjunction with THSteps medical checkup for children 6 months through 35 months of age (under age 3)
- Annual physical exam for adults
- Physical, occupational and speech therapy
- Family planning services and supplies
- Behavioral Health services – (such as counseling and treatment)
- Substance abuse assistance (such as alcohol or drug abuse)
- Diabetic supplies
- Durable medical equipment and supplies
- Health education classes
- Some dental services for adult members – tooth pulling (requires a referral from the PCP to a Parkland HEALTHfirst network dental provider).
- Transportation to medical, dental and behavioral health appointments through the Medical Transportation Program

*Services covered for members under 21 years of age may be different than those covered for members over 21 years of age.*

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

You should see your Primary Care Provider (PCP) to ask about medical services. You can get a second opinion regarding the use of any health care service. You can get a second opinion from a network provider or out-of-network provider if a network provider is not available. There is no cost to you for getting a second opinion. For

more information about these or other services, please call the Parkland HEALTH*first* Member Services toll-free line at **1-888-672-2277**.

### **What services are not covered?**

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

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

### **What about other Medicaid services or programs?**

You can still get the following Medicaid services:

- THSteps dental, including braces (These services are available only to members under 21 years of age and when medically necessary.)
- Early Childhood Intervention (ECI) program (These services are available only to members under 21 years of age.)
- Department of State Health Services (DSHS) targeted case management
- DSHS Mental Health Rehabilitation
- DSHS Case Management for Children and Pregnant Women
- Texas Health Steps Medical Case Management (These services are available only to members under 21 years of age.)
- Texas School Health and Related Services (SHARS) (These services are available only to members under 21 years of age.)
- Department of Assistive and Rehabilitative Services (DARS) Case Management for the Blind
- Tuberculosis (TB) Services provided by DSHS-approved providers
- Department of Aging and Disability Services (DADS) Hospice Services
- Medical Transportation
- Women, Infants, and Children (WIC)

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

## What extra benefits do I get with Parkland HEALTHfirst?

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

- **Free infant/child car seats** - participation in our healthy pregnancy program with baby gift packs upon completion of approved prenatal classes.
- **Free Membership to Boys and Girls Club of Greater Dallas** – A program for young people between the ages of 6 and 18, who will be able to become a part of various health education programs and other activities. When your child joins these activities, he or she will help to develop the qualities needed to become responsible citizens and leaders. These programs include: Sports Activities, Fitness Activities, Recreation Activities, Character and Leadership Development, Education and Career Development, Health and Life Skills, and Educational Programs for The Arts.
- **Parkland Nurse Line 24 Hours a Day, 7 Days a Week** – a 24 hour Nurse Help Line to help you with health questions or to help you decide what to do about your child’s health needs.
- **Free Sports Physicals** –members can access free sports physicals at one of Parkland’s Community Oriented Primary Care Clinic (COPC) or school based Youth and Family Clinics. One sports physical is available per year. (confirm the physicals are free)
- **Free HEALTHfirst Newsletter** – A newsletter to give you information on specific health topics.
- **Free Health Education Classes** – Parkland HEALTHfirst works with our community partners to make available free and low-cost classes for parents and children. Some health topics include:
  - Car Seat Safety
  - Drug & Alcohol Awareness
  - Immunizations
  - Infant Mortality
  - Nutrition
  - Oral Health
  - Physical Fitness
  - Poison Safety
  - Prenatal Care
  - Sexually Transmitted DiseasesI
  - Stop Smoking classes
  - Teen Pregnancy Prevention
  - Vision Awareness
  - Weight Management

(Note: some limitations apply.)

- **Continued Access to Care** through a network of health care providers participating with Parkland HEALTHplus if Medicaid eligibility is lost.

Please call Member Services for more information. Please check with your provider before you begin any new health or wellness program.

## What is Medically Necessary?

**Medically Necessary** means:

- 1) Health Care Services that are:

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

2) Behavioral Health Services that are:

- a) are reasonable and necessary for the diagnosis or treatment of a mental health or chemical dependency disorder, or to improve, maintain, or prevent deterioration of functioning resulting from such a disorder;
- b) are in accordance with professionally accepted clinical guidelines and standards of practice in behavioral health care;
- c) are furnished in the most appropriate and least restrictive setting in which services can be safely provided;
- d) are the most appropriate level or supply of service that can safely be provided;
- e) could not be omitted without adversely affecting the Member's mental and/or physical health or the quality of care rendered;
- f) are not experimental or investigative; and
- g) are not primarily for the convenience of the Member or Provider.

### **How do I get routine care?**

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

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

When you need care, call your PCP's number on the front of your ID card. Someone in the doctor's office or clinic will make an appointment for you. It is very important that you keep your appointments. Call early to make appointments. If you cannot keep your appointment, call back to let your doctor know. Your PCP should be able to see you within two (2) weeks after you ask for the routine care appointment. If you are seeing the doctor for a physical or wellness check up, you should be seen within 8 to 10 weeks after you ask for the appointment.

## What if I need urgent care?

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

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

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



## What if I have an emergency?

**If you have an emergency, go to the closest Emergency Room (ER) right away or call 9-1-1.**

Emergency care is a covered Medicaid service. **Emergency Medical Condition** means a medical condition manifesting itself by acute symptoms of recent onset and sufficient severity (including severe pain), such that a prudent layperson, who possesses an average knowledge of health and medicine, could reasonably expect the absence of immediate medical care could result in:

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

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

Some good reasons to go to the ER are:

- Very bad chest pains
- Poisoning or overdose of medicine
- Choking or problems breathing
- Possible broken bones
- Uncontrolled diarrhea or vomiting
- Heavy bleeding
- Serious injuries or burns
- Fainting
- Suddenly not being able to move
- Victim of violent attack (such as a mugging)
- Thoughts of causing harm to yourself or others
- Severe confusion or disorientation

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

## **What if I need an Emergency Prescription?**

A 72-hour emergency supply of a prescribed drug must be provided when a medication is needed without delay and prior authorization (PA) is not available. This applies to non-preferred drugs on the Preferred Drug List and any drug that is affected by a clinical or PA edit and would need prior approval from your doctor.

## **What is post-stabilization?**

Post-stabilization care services are Medicaid covered services that you receive following emergency medical care in order to keep your condition stable.

## **What if I need care at night or on a weekend? (How do I get medical care after my PCP's office is closed?)**

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

If you get sick at night or on a weekend and cannot wait to get medical care, call your PCP for advice. Your PCP or another doctor is available by phone 24 hours a day, 7 days a week. To talk to a nurse, you may also call the Parkland Nurse Line toll-free at 1-888-667-7890 or 214-266-8773. The nurse can help you decide what to do. If your child has a fever or a sore throat and you are not sure what to do, call your PCP's office or call the Parkland Nurse Line toll-free at 1-888-667-7890 or 214-266-8773.

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

If you get sick while you are out of town or out of state, call your PCP at the phone number listed on the front of your Parkland HEALTHfirst ID card. You may also call us at 1-888-667-7890 and a nurse will help you decide what to do. However, if you have an emergency, go to the nearest Emergency Room. Remember to keep your Medicaid form and Parkland HEALTHfirst card with you at all times. Also remember that **the Medicaid Program does not cover services outside of the U.S.A.**

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

Your PCP will tell you if you need to see a specialist. Your PCP will make sure that you get the special care you need. In general, you cannot go to another doctor or get a special service if your PCP does not agree to make a referral. A referral is when your PCP sends you to another doctor or service for care. If you choose to go to the specialist anyway, you may have to pay.

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

## **What services do not need a referral?**

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

- emergency care
- THSteps (well child care)
- OB/GYN Care
- eye care
- family planning
- behavioral health (mental health and substance abuse)
- dental services for under age 21

## **How to get Behavioral Health (Mental Health and Substance Abuse Services)**

Parkland HEALTHfirst provides behavioral health (mental health and drug and alcohol abuse) services through NorthSTAR.

If you, or your child, are having a mental health /alcohol or drug abuse problem, you can call for an appointment with your primary care provider (PCP) or call the NorthSTAR program directly, toll-free at 1-888-800-6799. **You do not need a referral from your PCP** to get services from NorthSTAR.

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



## **How do I get my medicines?**

You get all the medicines your PCP thinks you need, including birth control pills. You can take your prescription to any pharmacy that takes Medicaid. Try to use one pharmacy for all of your prescriptions. **You will need to show your Medicaid Identification Form (Form 3087) and HEALTHfirst ID card.** If you have a problem getting your prescriptions, call our Member Services line at **1-888-672-2277** or the Medicaid Client Hotline at **1-800-252-8263**. The Medicaid Client Hotline can connect you with a Vendor Drug Representative.

## What if I can't get my prescription approved?

If your doctor cannot be reached, the pharmacy must give you a three-day emergency supply

### Eye Care

Eye care services are different for adults and children.

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

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

**If you are on SSI Medicaid**, you can see *any* eye doctor who accepts Medicaid.



### Family Planning Services

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

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

Please turn to the back of this handbook (p. 28) to find the Parkland HEALTHfirst Family Planning Provider List including the names and addresses of our family planning providers.





## How do I get Texas Health Steps for my children?

### What is Texas Health Steps (THSteps)?

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

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

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

### Dental Check Ups

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

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

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

### Medical Check Ups

The Medicaid ID Form (Form 3087) you get each month will say if you need your Texas Health Steps (THSteps) Medical or Dental check up. You can also call Member Services at **1-888-672-2277** for more information on when check ups are due.

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

- Babies and toddlers: 1-2 weeks, 2 months, 4 months, 6 months, 9 months, 12 months, 15 months, 18 months.

### New Parkland HEALTHfirst Members

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

Texas Health Steps check ups will help:

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

- Give your child a healthy smile!

### **What if I am out of town and my child is due for a THSteps check up?**

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

### **Are you a Migrant Farm worker?**

A migrant farm worker is a person who works on farms or fields or as a food packer during certain times of the year. Migrant farm workers move to different places to follow the crops.

### **What if I am a Migrant Farm worker?**

We have special Medicaid services for children of migrant farm workers.

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

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

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

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

### **How can your health plan help?**

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

**Call at least 48 hours in advance if you need to cancel an appointment.**

### **How do I get special language services?**

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

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

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

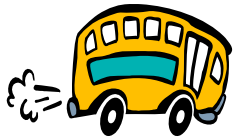
**Sign Language** – We can provide sign language interpretation for doctor visits. Please let us know you need these services 72 hours before your appointment, or as soon as possible. Call Parkland HEALTHfirst at **1-888-672-2277**.

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

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

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

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



### **How can I get a ride to medical services?**

If you need transportation for medical services at your doctor's office, the State's Medical Transportation Program (MTP) may help. You should call MTP as soon as you know your doctor's appointment date. If you know someone who can give you a ride to your appointment, call the MTP. MTP may be able to pay for the mileage. You must call at least 48 hours before your appointment. Members under 18 years of age may be required to travel with an adult. MTP is open Monday through Friday, from 8:00 a.m. until 5:00 p.m. For information about MTP, call MTP toll-free at **1-877-633-8747 (1-877-MED-TRIP)**.

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

### **What if I am not able to make decisions about my medical care?**

It is your right to accept or refuse medical care. Advance Directives or Living Wills are a set of instructions that you write down in case it is impossible for you to talk to another person to give instructions about your medical care. This set of instructions protects your rights and wishes. They tell people what you want your doctor or family to do if you ever have a bad injury or illness and are not able to talk or write. This set of instructions will make it easier on your family. It also helps for the doctor to know what you want.

If you already have an Advance Directive, please let your PCP know. If you want one, call us toll-free **1-888-672-2277** and we will help you.

## Attention: Female Members – OB/GYN Care

Parkland HEALTHfirst has limited your selection of an OB/GYN to the same network as your PCP.

You have the **right to select an OB/GYN without a referral** from your PCP. The access to health care services of an OB/GYN includes:

- one (1) well-woman check-up per year
- care related to pregnancy
- care for any female medical condition
- referral to special doctor within the network



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

- you have less than 12 weeks before your expected delivery date **and**
- you are receiving treatment from the OB-GYN.

You may choose any OB/GYN in your Parkland HEALTHfirst Provider Directory. If you do not choose an OB/GYN from this list, you may have to pay. You should be able to get an appointment within two (2) weeks of your request for an appointment.

### What if I am pregnant?

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

- have been seeing your OB/GYN before you joined Parkland HEALTHfirst
- be within 12 weeks of delivery.

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

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



### How are newborn babies signed up? Can I pick a PCP for my baby before my baby is born?

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

Directory. You can change your baby's PCP up to four times per year. To choose your baby's pediatrician, call us toll-free at **1-888-672-2277**.

### **Can I switch my baby's health plan?**

Your baby will be assigned to the same health plan that you are enrolled with for at least 90 days after the date of birth. You can ask to change health plans before the 90 days if both health plans agree to the change. You will need to contact HHSC to keep your baby on Medicaid before the end of the 90 days.

If your baby is in the hospital, you **will not be able to change** health plans until your baby is discharged.

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

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

### **What type of services would my child or I receive?**

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

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

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

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

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

### **What do I do if I have to move?**

Report your new address as soon as possible to the local HHSC Eligibility Office and Parkland HEALTH*first* Member Services at **1-888-672-2277**. You must call Parkland HEALTH*first* **before** getting any services in your new area unless it is an emergency. You will continue to get care through Parkland HEALTH*first* until the address is changed unless you have moved out of the service area.

## **What happens if I lose my Medicaid eligibility?**

If you lose Medicaid Eligibility, but become eligible again within six (6) months or less, you will automatically be re-enrolled in the same health plan you were enrolled in prior to losing your Medicaid eligibility. You will be re-enrolled with the same Plan and PCP you had before.

## **What if I get a bill from my doctor?**

If the bill is for a covered Parkland HEALTHfirst or Medicaid service, you will not have to pay. Call Parkland HEALTHfirst Member Services at **1-888-672-2277** and someone will call the provider's office for you to explain your benefits and arrange for your bill to be paid. When you call, please have your member ID number, your Medicaid 3087 Form, and the doctor's bill available. The Member Services representative will need information from each of these documents in order to help you quickly.

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

### **Medicaid and Private Insurance**

As a condition of Medicaid eligibility, you are required to report all insurance information to the program. If your private health insurance is canceled, if you have obtained new insurance coverage, or if you have general questions regarding third party insurance, you should call the Medicaid Third Party Resources (TPR) hotline so that you can update your records and get answers to your questions. You can call the TPR hotline toll-free at 1-800-846-7307.

**Having other insurance does not affect whether or not you qualify for Medicaid.** Reporting other insurance is necessary to ensure that Medicaid remains the payer of last resort.

**IMPORTANT:** Medicaid providers cannot refuse to see you because you have private health insurance as well as Medicaid. If providers accept you as a Medicaid patient, they must also file with your private health insurance company.



## **Member Rights and Responsibilities**

### **MEMBER RIGHTS:**

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

2. To a reasonable opportunity to choose a health care plan and primary care provider (the doctor or health care provider you will see most of the time and who will coordinate your care) and to change to another plan or provider in a reasonably easy manner. That includes the right to:
  - a. be informed of how to choose and change health plans and primary care provider;
  - b. choose any health plan that is available in your area and choose a primary care provider from that plan;
  - c. change your primary care provider;
  - d. change your health plans without penalty; and
  - e. be educated about how to change your health plan or your primary care provider.
3. To ask questions and get answers about anything you don't understand. That includes the right to:
  - a. have your provider explain your health care needs to them and talk to them about the different ways your health care problems can be treated; and
  - b. be told why care or services were denied and not given.
4. To consent to or refuse treatment and actively participate in treatment decisions. That includes the right to:
  - a. work as part of a team with your provider in deciding what health care is best for them; and
  - b. say yes or no to the care recommended by your provider.
5. To utilize each available complaint and appeal process through the managed care organization and through Medicaid, receive a timely response to complaints, appeals and receive fair hearings. That includes the right to:
  - a. make a complaint to your health plan or to the state Medicaid program about your health care, provider or health plan;
  - b. get a timely answer to your complaint;
  - c. access the plan's appeal process and procedures for doing so; and
  - d. request a fair hearing from the state Medicaid program and request information about the process for doing so..
6. To timely access to care that does not have any communication or physical access barriers. That includes the right to:
  - a. have telephone access to a medical professional 24 hours a day, 7 days a week in order to obtain any needed emergency or urgent care;
  - b. get medical care in a timely manner,
  - c. be able to get in and out of a health care provider's office, including barrier free access for persons with disabilities or other conditions limiting mobility, in accordance with the Americans with Disabilities Act;
  - d. have interpreters, if needed, during appointments with your providers and when talking to your health plan. Interpreters include people who can speak in your native language, assist with a disability, or help them understand the information; and
  - e. be given an explanation you can understand about your health plan rules, including the health care services you can get and how to get them.
7. To not be restrained or secluded when doing so is for someone else's convenience, or is meant to force you to do something you don't want to do or to punish you.

## MEMBER RESPONSIBILITIES:

1. To learn and understand each right you have under the Medicaid program. That includes the responsibility to:
  - (a) learn and understand your rights under the Medicaid program;
  - (b) ask questions if you don't understand your rights; and
  - (c) learn what choices of health plans are available in your area.
2. To abide by the health plan and Medicaid policies and procedures. That includes the responsibility to:
  - (a) learn and follow your health plan rules and Medicaid rules;
  - (b) choose your health plan and a primary care provider quickly;
  - (c) make any changes in your health plan and primary care provider in the ways established by Medicaid and by the health plan;
  - (d) keep your scheduled appointments;
  - (e) cancel appointments in advance when you can't keep them;
  - (f) always contact your primary care provider first for non-emergency medical needs;
  - (g) be sure you have approval from your primary care provider before going to a specialist; and
  - (h) understand when you should and shouldn't go to the emergency room.
3. To share information relating to your health status with your primary care provider and become fully informed about service and treatment options. That includes the responsibility to:
  - (a) tell your primary care provider about your health;
  - (b) talk to your providers about your health care needs and ask questions about the different ways your health care problems can be treated; and
  - (c) help your providers get your medical records.
4. To actively participate in decisions relating to service and treatment options, make personal choices, and take action to maintain your health. That includes the responsibility:
  - (a) work as a team with your provider in deciding what health care is best for them;
  - (b) understand how the things you do can affect your health;
  - (c) do the best you can to stay healthy; and
  - (d) treat providers and staff with respect.

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



#### **Filing a complaint**

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

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

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

### **Resolution of a complaint**

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

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

Once you have exhausted the Parkland HEALTHfirst complaint process, you can complain to the Texas Health and Human Services Commission (HHSC). You can do this by calling toll-free 1-800-252-8263 or by writing:

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

### **When Your Doctor's Request for Covered Services is Denied or Limited**

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

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

You have the right to request an appeal if you are not satisfied or disagree with the action. An **appeal** is the process by which you or a person authorized to act on your behalf, including your health provider, requests a review of the action. Call Member Services toll free at **1-888-672-2277** to ask for an appeal. The Member Advocate can help you file your request for an appeal. Your request for an appeal must be filed within thirty (30) days from the date of the notice of the action. To ensure continuity of currently authorized services, you must file the appeal on or before the later of: 10 days following the HMO's mailing of the notice of the action or the intended effective date of the proposed action. All oral appeals received by Parkland HEALTHfirst must be confirmed by a written, signed appeal by you or your representative, unless an expedited appeal is requested.

## **What is an expedited appeal?**

An expedited appeal is when the HMO is required to make a decision quickly based on your health status and taking the time for a standard appeal could jeopardize your life or health. You or your representative can ask for an expedited appeal by calling our Member Services Department at **1-888-672-2277** or writing to:

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

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

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

### **Resolution of an appeal**

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

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

If the Member disagrees with the health plan's decision, the Member has the right to ask for a fair hearing. The member may appoint, in writing, a representative. A provider may be a Member's representative. The member or member representative must ask for the fair hearing within 90 days of the date on the health plan's letter. If the member does not ask for the fair hearing within 90 days, the member may lose his/her right to a fair hearing. To request a fair hearing, the member or the member representative contacts the health plan in writing at:

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

Contact us telephonically by using the numbers on page 1 of this manual or by calling 214-932-4564.

The Member has the right to continue any service he/she is now receiving until the final hearing decision if the Member requests the fair hearing within 10 days from receipt of the hearing notice from the HEALTHfirst. If a fair hearing is not requested within in 10 days from receipt of the hearing notice, the services being appealed will be discontinued.

The Member does not have the right to a fair hearing if Medicaid does not cover the service requested.

If the Member asks for a fair hearing, the Member will get a packet of information letting the Member know the date, time and location of the hearing. Most fair hearings are held by telephone and the Member or the Member’s representative may tell why he/she asked for the service.

HHSC will give the member a final decision within 90 days from the date he/she asked for the hearing.

### **What is an Expedited Fair Hearing?**

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

### **How do I report someone who is misusing the Medicaid Program?**

#### **FRAUD AND ABUSE**

If you suspect a client (a person who receives benefits) or a provider (e.g., doctor, dentist, counselor, etc.) has committed waste, abuse or fraud, you have a responsibility and a right to report it.

- **Reporting Provider/Client Waste, Abuse and Fraud**

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

- You can report providers / clients directly to:

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

Or if you have access to the Internet go to HHSC OIG website at <http://www.hhs.state.tx.us> and select “Reporting Waste, Abuse and Fraud”. The site provides information on the types of waste, abuse and fraud to report. If you do not have Internet access and prefer to talk to a person, call the Office of Inspector General (OIG) Fraud Hotline at 1-800-436-6184, or you may send a written statement to the following OIG addresses:

To report providers, use this address: Office of Inspector General Medicaid Provider Integrity/Mail Code 1361 P.O. Box 85200 Austin, TX 78708-5200	To report clients, use this address: Office of Inspector General General Investigations/Mail Code 1362 P.O. Box 85200 Austin, TX 78708-5200
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- When reporting a provider (e.g., doctor, dentist, counselor, etc.) provide the following:

- Name, address, and phone number of provider;
- Name and address of the facility (hospital, nursing home, home health agency, etc.);
- Medicaid number of the provider and facility is helpful;
- Type of provider (physician, physical therapist, pharmacist, etc.);
- Names and the number of other witnesses who can aide in the investigation;
- Dates of events; and
- Summary of what happened.

When reporting a client (a person who receives benefits) provide the following:

- The person's name;
- The person's date of birth, social security number, or case number if available;
- The city where the person resides; and
- Specific details about the waste, abuse or fraud.

**Family Planning Providers – Proveedores de Planificación familiar**

<p><b>Collin County</b></p> <p><i>Planned Parenthood of North Texas, Inc.</i></p> <p><b>Plano Health Services</b> 1400 Summit, Suite CA Plano, TX 75074 (972) 424-7574</p>	<p><b>Garland Health Center</b> 802 Hopkins, 2<sup>nd</sup> Floor Garland, TX 75040-7361 (214) 266-0850</p> <p><b>Grand Prairie Clinic</b> 1411 Densman Grand Prairie, TX 75050-2328 (972) 642-8911</p>	<p><b>Kaufman County</b></p> <p><i>Planned Parenthood of North Texas, Inc.</i></p> <p><b>Terrell Health Services</b> 804-A Moore Avenue Terrell, TX 75160 (972) 563-7571</p>
<p><b>Dallas County</b></p> <p><i>Dallas County Hospital District</i></p> <p><b>DeHaro-Saldivar Health Center</b> 1400 N. Westmoreland Dallas, TX 75211 (214-266-0554</p> <p><i>Planned Parenthood of North Texas, Inc.</i></p> <p><b>Mesquite Health Services</b> 3220 Gus Thomasson #231 Mesquite, TX 75150 (972) 286-0271</p> <p><b>Planned Parenthood of N. Texas Surgical Ctr.</b> 7424 Greenville, Suite 211 Dallas, TX 75231 (214) 368-1485</p>	<p><b>Lake June Women's Clinic</b> 6925 Lake June Road Dallas, TX 75217 (214) 391-9725</p> <p><b>Maple Women's Health Center</b> 6303 Harry Hines, Suite 101 Dallas, TX 75235 (214) 648-1790</p> <p><b>Oak West Health Center</b> 4444 S. Hampton Road Dallas, TX 75232 (214) 330-1066</p> <p><b>Parkland Family Planning Clinic</b> 5201 Harry Hines Blvd. Dallas, TX 75235 (214) 590-8490</p>	<p><b>Navarro County</b></p> <p><i>Planned Parenthood of North Texas, Inc.</i></p> <p><b>Corsicana Health Services</b> 322 W. 6<sup>th</sup> Avenue Corsicana, TX 75110 (903) 872-5625</p>
<p><i>UT Southwestern Medical Center at Dallas</i></p> <p><b>DeHaro-Saldivar Health Center</b> 1400 N. Westmoreland Dallas, TX 75211 (214) 266-0050</p> <p><b>East Dallas Health Center</b> 3320 Live Oak, 5<sup>th</sup> Floor Dallas, TX 75201 (214) 823-6199</p>	<p><b>Ellis County</b></p> <p><i>No clinics listed for this county.</i></p> <p><b>Hunt County</b></p> <p><i>Community Health Service Agency, Inc.</i></p> <p><b>Greenville Community Health Center</b> 4311 Wesley Street Greenville, TX 75401 (903) 455-5958</p>	<p><b>Rockwall County</b></p> <p><i>Rockwall Area Health Care, Inc.</i></p> <p><b>Robert D. Reeves Social Service Center</b> 102 South First, Suite B Rockwall, TX 75087 (972) 772-8194</p>