

Yamhill Community Care Organization

Member Handbook

JANUARY 2018



A quick guide

Need a ride?

We offer free transportation for members who need a ride to their appointments for covered services.

Go to page 21, “Free rides to appointments,” for more information.



Do you speak English?

If you don't speak English very well, that's okay. We can get an interpreter and translation services for you. **Go to page 3**, “Having an interpreter at appointments,” for more information.



Want to give us your opinion?

We need to hear from members like you to help us build a healthier community. Join our Community Advisory Council and help shape the future of your health plan! **Go to page 9**, “Getting Involved as a Member,” for more information.



What is covered under this plan?

Know what services and benefits are yours, under Yamhill CCO and the Oregon Health Plan. **Go to page 17**, “Covered Benefits and Services,” and **page 19**, “Preventive Health and Wellness” for more information.



What else can we do for you?

Through our different community resources and programs, Yamhill CCO gives extra help to members of all ages. We can help you with issues like childhood learning, proper nutrition and child care. **Go to page 10**, “Early Learning Hub” for more information.



Need help managing your chronic pain,

or do you need a visit from a Community Health Worker? **Go to page 7**, “Community Health Hub” for more information.



Have questions?

Go to page 43, “Frequently Asked Questions,” or Call Customer Service, 8 a.m.-5 p.m. Monday-Friday 855-722-8205 TTY: 711



Want to see this handbook on the web?

You can find this book in electronic format on our website at yamhillcco.org/handbook. You can always call Customer Service to request another copy as well.



Yamhill Community Care Organization must follow state and federal civil rights laws. We cannot treat people unfairly in any of our programs or activities because of a person's:

- Age
- Disability
- Gender identity
- Marital status
- National origin
- Race
- Religion
- Color
- Sex
- Sexual orientation

To report concerns or to get more information, please contact our Grievance Coordinator one of these ways:

- Email: customerservice@careoregon.org
- Phone: (toll-free) 855-722-8205 (TTY/TDD) 711
- Fax: 503-416-1313
- Mail: Yamhill Community Care Organization
Attn: Grievance Coordinator
PO Box 40328
Portland, OR 97240

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

File online at: **[hhs.gov](https://www.hhs.gov)**

Email: OCRComplaint@hhs.gov

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

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

Yamhill Community Care Organization

Office: 807 NE Third Street
McMinnville, Oregon 97128

Mailing address:
PO Box 40328
Portland, OR 97240

Call: Toll-free: 855-722-8205
In the Portland metro area:
503-488-2800
TTY/TDD: 711

Web: yamhillcco.org

Office hours:
Monday – Friday 8 a.m. to 5 p.m.
We are closed on most government holidays.
Our offices are wheelchair accessible.

All members have a right to know about and use our programs and services. We give these kinds of free help:

- Sign language
- Spoken language interpreters
- Materials in other languages
- Braille, large print, audio, and any way that works better for you

If you need help or have questions, please call Customer Service at 855-722-8206.

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

Todos los miembros tienen derecho a conocer y usar nuestros programas y servicios. Brindamos los siguientes tipos de ayuda gratuita:

- Lenguaje de señas;
- Intérpretes;
- Materiales en otros idiomas; y
- Braille, letra grande, audio y cualquier otro formato que le funcione mejor.

Si necesita ayuda o tiene preguntas, llame a Atención al Cliente al 855-722-8206.

Si usted necesita un intérprete en sus citas, infórmele al consultorio de su proveedor que necesita uno y para qué idioma. Hay información disponible sobre los Intérpretes de Atención de Salud en oregon.gov/oha/oei.



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Welcome to Yamhill Community Care Organization

We're glad to have you as a member of Yamhill Community Care Organization (or, Yamhill CCO). We are a group of all types of health care providers who work together for people on the Oregon Health Plan (OHP) in your community. This model is known as a Coordinated Care Organization, or CCO. Some partners in our CCO include the following organizations:

Medical Services

- CareOregon
- Physician's Medical Center
- Providence Newberg Medical Center
- Virginia Garcia Memorial Health Center
- Willamette Valley Medical Center
- Yamhill County Health & Human Services

Mental Health Services

- Yamhill County Health & Human Services

Dental Health Services

- Capitol Dental Care

Non-Emergent Medical Transportation

- WellRide-First Transit

Yamhill CCO coordinates your care by:

- Connecting you to a Primary Care Provider (PCP) who will make sure you have the tools and support you need to stay healthy
- Providing care and advice that is easy to understand and follow
- Ensuring you have the right resources to overcome any barriers to good health
- Providing you with information and access to prevention services that help keep you healthy
- Keeping you closely connected to your PCP, so you can avoid trips to the emergency room or hospital
- Making sure your PCP and your other providers talk to each other about your health care needs
- Working with local resources to improve your health and health care
- Working closely with you, your providers and your community to make sure you feel comfortable, safe and cared for

Our goal is to help you receive the best health care and services possible within your community, when you need them. We work closely with community and social agencies. If you face challenges like homelessness or hunger, or have several health conditions, we can connect you with the right resources.

Our Vision:

“A unified healthy community that celebrates physical, mental, emotional, spiritual, and social well-being.”

Our Mission:

“Working together to improve the quality of life and health of Yamhill Community Care Organization members by coordinating effective care.”

Getting Care When You Need It

Getting started

Now that you have OHP through Yamhill CCO, here are some things to help you get the care you need:

- Choose a doctor and a dentist, make appointments with them, and call them first whenever you need care. They are your partners for good health (Pages 12, 26)
- Keep your Oregon Health ID and Yamhill CCO cards in your wallet. Show them at each appointment (Pages 3-4)
- OHP covers rides to appointments. If you need help getting to an appointment, call our Customer Service or go to the “Free rides to appointments” section of this handbook (Page 21)
- Call ahead if you cannot make it. Your provider’s office will set up a new visit (Page 12)

Also, please take time to look over this handbook and save it so you can check it later if you have questions.

Yamhill CCO Customer Service

Call Yamhill CCO Customer Service if you have questions about:

- Choosing or changing your primary care provider (PCP)
- Plan benefits



- Using your PCP services
- Authorization (approval) for medical services and supplies
- Prescription drugs or problems obtaining prescribed medications
- Where to get medical supplies or equipment
- Prenatal (before birth) care and participating prenatal care providers
- A bill you received from your provider when you were covered by Yamhill CCO

Customer Service is available from 8 a.m. to 5 p.m. Monday – Friday.

New members who need service immediately

If you are new to Yamhill CCO and you need medical care or prescriptions immediately, please call our Customer Service Department for information and help. Make an appointment with your Yamhill CCO PCP as soon as possible to be sure you receive any ongoing care that you need.

Having an interpreter at appointments

If you do not speak English or you need sign language interpretation, it is your legal right to have an interpreter at your medical appointment at no cost to you.



If you need language interpretation, tell the clinic staff the language you speak. They will arrange to have an interpreter at your appointment at no cost to you.

If you need sign language interpretation, the clinic staff will also arrange this at no cost to you. You also can call the Oregon Relay TTY/TDD at 711 for help.

Plan information

Yamhill CCO mails information to tell you about:

- Which benefits and services are covered and not covered
- How to find a Yamhill CCO provider
- How to get care for covered services when you are outside our service area
- How we decide if new medical equipment should be a covered benefit for members
- Any state or federal law changes affecting your plan. We do this at least 30 days before the changes take place

Your Oregon Health ID card

The Oregon Health Authority (OHA) sends you one Oregon Health ID card that has your name, client number and the date the card was issued. All eligible members in your household receive their own Oregon Health ID cards.

Take your Oregon Health ID card to all health care appointments and pharmacies when you fill a prescription. Keep it in a safe place. OHA only sends a new card if you change your name or if you ask for a new card.

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If your Oregon Health ID card is not correct, or you get a new card with your name but a different Client ID, call OHP Customer Service right away at 800-699-9075 (TTY 711).

OHA Coverage Letter

The Oregon Health Authority (OHA) also sends you one coverage letter that has your:

- OHP Customer Service number, or your DHS caseworker's number, if you have one
- OHP Benefit package type
- Coordinated care plan name

This letter shows information for everyone in your household who has an Oregon Health ID card. You do not need to take the letter to your health care appointments or to pharmacies.

OHA will send you a new coverage letter if you ask for one or if your coverage changes. If you have questions or if you need information in another language or a different format, call Customer Service.

Copays

We do not charge copays.

If your provider asks you to pay a copay please do not pay it. Instead, ask the clinic staff to call our Customer Service Department.

Your Yamhill CCO ID card

We send you a Yamhill CCO ID card when you first enroll with us. If you or a family member changes PCPs, you will get a new ID card from us. If you lose your ID card, please call Customer Service and we will send you another one.

If you need care before you receive your Yamhill CCO ID card, please call us. We will help you get the services you need.

Providers use the information on the ID cards to check your eligibility. Having your ID cards with you makes checking in for appointments and getting medicine at a pharmacy quicker and easier.

IMPORTANT: Take your Yamhill CCO ID card and your Oregon Health ID card to all your health care and dental care appointments and to the pharmacy when you fill a prescription.



What is the Oregon Health Plan (OHP)?

OHP is a program that pays for the health care of low-income Oregonians. The state of Oregon and the U.S. government's Medicaid program pay for it. It covers services such as doctor visits, prescription drugs, hospital stays, dental care, mental health services, help with addiction to cigarettes, alcohol and drugs and transportation to health care appointments. OHP also can provide glasses, hearing aids, medical equipment and home health care.

The OHP website has more details about what is covered. For more information, go to: oregon.gov/oha/healthplan.

You may also review the Oregon Health Plan Handbook. It has general information on the Oregon Health Plan that may not be in this handbook. You can read it online at ohp.oregon.gov, or you can call OHP Customer Service (see next section) to request a paper copy.

OHP Customer Service

Call OHP Customer Service anytime if you have questions, or if you:

- Need to change your address, telephone number, name or family status
- Have other health insurance coverage
- Have given birth or adopted a child
- Need to replace a lost or stolen OHP ID Card
- Move outside Yamhill CCO's service area (Yamhill County and parts of Clackamas, Marion, Polk and Washington counties)
- Need an OHP Handbook sent to you

A phone call is the best way to reach OHP Customer Service. The toll-free phone number is 800-699-9075. TTY/TDD users can dial 711.

You also can reach OHP Customer Service by email at: oregonhealthplan.changes@dhssoha.state.or.us.

Use the DHS/OHA secure email site at <https://secureemail.dhssoha.state.or.us/encrypt> to send your email to OHP. Include your full name, date of birth, Oregon Health ID number and phone number.

What is a Coordinated Care Organization (CCO)?

CCOs (or, Coordinated Care Organizations) are companies that contract with the state of Oregon to manage your health care. They are set up so that all your providers — doctors, nurses, counselors, dentists — work together to prevent disease and improve your health and the health of everyone on OHP in your community. Instead of just treating you when you get sick, CCOs work with you to keep you healthy and help you manage your health conditions.

For example, there may be added services for members with chronic conditions like diabetes, asthma and heart disease, or for those with other health needs.

For most people, CCOs pay for medical, dental and behavioral health services. Some people have CCOs only for dental or mental health. The Oregon Health Authority (OHA) pays the CCO a fee every month to take care of many of your health care needs. For services to be covered, you must use providers who are in the CCO's provider network.

What is the difference between Yamhill CCO and OHP?

The OHP is Oregon's Medicaid program. Yamhill CCO is one of several CCOs that the state contracts with to provide health care services to people on the OHP. When you apply for OHP, the OHA handles your application and sets the benefits that you receive after you are accepted. OHP uses several different CCOs to serve its members, including Yamhill CCO.

What are Managed Care and Fee-For-Service?

OHA pays managed care companies a set amount each month to provide their members the health care services they need. Most OHP members must receive managed medical, mental health and dental care.

Health benefits for OHP members not in managed care are called "open card" or "fee-for-service (FFS) OHP," and are paid for by OHA. Native Americans and Alaska natives on OHP can choose to receive managed care or have an open card. If you are on Medicare in addition to OHP, you can also have an open card. Any OHP member who has a good reason to have an open card can ask to leave managed care. OHP Client Services at 800-273-0557 can help you understand and choose the best way to receive your health care. If you have a DHS caseworker, please contact them first before calling OHP.



What is a Patient-Centered Primary Care Home (PCPCH)?

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

Intensive Care Coordination Services (ICCS)

Intensive Care Coordination Services (ICCS) are available if you are disabled or have multiple chronic conditions, high health care needs or special health care needs. These services are provided by trained staff that work with you to improve your quality of life and keep you healthy. They can help you:

- Understand how Yamhill CCO works
- Find a provider who can help you with your special health care needs
- Get a timely appointment with your PCP, specialist or other health care provider
- Obtain needed equipment, supplies or services
- Coordinate care among your doctors, other providers, community support agencies and social service organizations

If you think you might need ICCS, call Customer Service and they will put you in touch with a Yamhill CCO staff member who is specially trained to meet your particular needs.

Care Management Teams

Yamhill CCO has a Care Management Team of nurses, behavioral health specialists and health care coordinators who are ready to help you. If you are having challenges with a chronic health condition such as diabetes, heart failure, asthma, depression or substance use, or have been in the hospital, our staff can provide support. We can help you make the most of your provider visits and connect you with helpful community resources. We also can help you understand your PCP's treatment plan.

To talk with a Care Management Team member, call Customer Service.

Community Health Hub

The Community Health Hub is a group of people focused on finding Yamhill CCO members the community resources they need to live a healthy life. This includes helping you with your medical health, but also anything preventing you from achieving well-being. These are things like lack of housing, transportation issues or access to food. The Hub works with you to find solutions and get you on the right track to wellness!

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We list a few of the Hub services in the following sections. For a more up-to-date list of all the services the Hub provides, call Customer Service or go to our website at yamhillcco.org/communityhealthhub.

Multi-Disciplinary Teams

If you have special health needs, a group called a Multi-Disciplinary Team will bring together members of your care team. This includes care coordinators, your doctors, caregivers, counselors and others. They all work together to understand your condition and coordinate your treatments and services.

If you want a Multi-Disciplinary Team, talk to your PCP about a referral. You also can contact Customer Service for more information.

Community Health Workers

If you have severe health issues, we have Community Health Workers who can work one-on-one with you. The purpose of a Community Health Worker (CHW) is to help with any barriers that stop you from getting the right health care. They also connect you with people and services in the community that might help you. These workers can help you find a doctor. They can even go with you to your appointments. They also can help you with questions about your medications, or talk with your support groups.

Talk to your PCP about whether or not a CHW is right for you. If so, your PCP can refer you to our program. For more information on CHWs, you can visit our website at yamhillcco.org or call Customer Service.

Yamhill CCO Persistent Pain Program



A pain program teaches you how to take control of your chronic pain.

By using your whole body and mind, as well as your health history, our pain experts help you design your very own pain-relief plan. It will fit your level and type of pain. This will help you have a better quality of life.

The program is an eight-week class. During each session, you will have one hour for understanding and managing your pain, and another for gentle yoga. The pain program does not prescribe medications. It partners with your regular doctor or PCP to make sure you're getting the best care.

Talk to your PCP if you think the Pain Program would be right for you. You also can find more information about the Pain Program on our website at yamhillcco.org/pain.



Culturally-sensitive health education

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

Our health education programs include self-care, prevention, pain management and disease self-management. More information on these programs is on our website yamhillcco.org under the “Classes and Programs” or “Events Calendar” sections. Or you can call Customer Service toll-free at 855-722-8205 for more information. TTY/TDD users can call 711.

Getting Involved as a Member



Community Advisory Council (CAC)

Because each CCO is special to its community with its own local leaders, the voices of people who live in the community are very important.

Most CAC members (more than half) are Yamhill CCO members. This gives you the chance to take an active role in improving your own health and that of your family and others in your community.

Some of the CAC’s duties include:

- Making suggestions about preventive care and long-range planning
- Finding ways to improve existing Yamhill CCO programs, as well as suggesting future programs
- Advising the board of directors on how to help us respond to members’ needs and plan for community health
- Organizing activities and projects for Yamhill CCO members and the community on health care issues
- Helping with a Community Health Needs Assessment and Community Health Improvement Plan for everyone living in the Yamhill County area--even people not on OHP

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For more information about the CAC or to apply, see the “CAC” section of our website at yamhillcco.org, or call Customer Service at 855-722-8205. TTY/TDD users can call 711.

Early Learning Hub



Our Vision:

“All young children and their families engage in quality coordinated resources that support their growth, development and a healthy life trajectory.”

Our Mission:

“The Yamhill Early Learning Council will work collaboratively to support coordinated systems that are child-centered, family friendly, culturally and linguistically appropriate, and community-based to meet the needs of the Yamhill County population and communities.”

Yamhill CCO’s Early Learning Hub works together with the community to coordinate and align services to improve the well-being of children and their families.

The Early Learning Hub’s goal is to make sure all young children and families have access to organized resources that support their growth, development, and lifetime wellness. This includes things like transportation, good quality childcare and early literacy. It also works with childcare and education providers to improve and coordinate their services.

The Early Learning Hub serves Yamhill CCO members, as well as non-members who live in Yamhill County.

Resources include:

- Family CORE - A home visiting service for children age 0-5, which connects children and families with services and resources to help them be successful
- Wellness to Learn - Connects elementary-aged children and their families with our Community Health Hub
- School readiness activities
- Parenting classes

Service Integration Teams (SITs)

The Service Integration Teams (SITs) are also part of the Early Learning Hub. SITs are located in each school district, and bring a team of community partners together to identify local needs and brainstorm how to meet those needs.

To learn more about the Early Learning Hub or the Service Integration Teams, call Yamhill CCO Administrative Offices at 503-376-7420. You also can find out more by visiting our website, at yamhillcco.org, under the “About Us” tab.



Your Rights as a Yamhill CCO Member on OHP

As an OHP client, you will be:

- Treated with respect and dignity, the same as other patients
- Free to choose your provider
- Urged to tell your provider about all your health concerns
- Able to have a friend or helper come to your appointments, and an interpreter if you want one
- Active in helping to develop your treatment plan
- Told about all of your OHP-covered and non-covered treatment options
- Allowed to help make decisions about your health care, including refusing treatment, except for court-ordered services
- Free from any form of restraint or seclusion (isolation) that is not medically necessary or is used by staff to bully or punish you
- Free to complain about different treatment and discrimination
- Given a referral or second opinion, if you need it
- Given care when you need it, 24 hours a day and 7 days a week, including weekends and holidays
- Free to get mental health and family planning services without a referral

- Free to get help with addiction to cigarettes, alcohol and drugs without a referral
- Given handbooks and letters that you can understand
- Able to see and get a copy of your health records, unless your doctor thinks it would be bad for you
- Able to limit who can see your health records
- Sent a Notice of Action letter if you are denied a service or there is a change in service level
- Given information and help to appeal denials and ask for a hearing
- Allowed to make complaints and get a response without a bad reaction from your plan or provider
- Free to ask the Oregon Health Authority Ombudsperson for help with problems at 503-947-2346 or toll-free 877-642-0450. TTY/TDD users can call 711

As an OHP client you agree to:

- Find a doctor or other provider you can work with and tell them all about your health
- Treat providers and their staff with the same respect you want
- Bring your medical ID cards to appointments, tell the receptionist that you have OHP and any other health insurance, and let them know if you were hurt in an accident

- Be on time for appointments
- Call your provider at least one day before if you can't make it to an appointment
- Have yearly check-ups, wellness visits and other services to prevent illness and keep you healthy
- Follow your providers' and pharmacists' directions, or ask for another choice
- Be honest with your providers to get the best service possible
- Call OHP when you move, are pregnant or no longer pregnant. That number is 800-699-9075

Working with your Primary Care Provider (PCP)

Your PCP assignment

All Yamhill CCO members have a PCP. When you become a Yamhill CCO member, we will assign you a PCP, or you can choose your own. This could be a doctor, a nurse practitioner or a physician's assistant. Start with your PCP for all of your health care needs.

To find a provider of your own, visit our online provider directory at yamhillcco.org/providerdirectory.

If you would like provider information in a print version, you can print it from our website or call Customer Service. We can mail you provider lists in the ZIP code and/or specialty service of your choice.

Please note: some providers do not accept new patients. If you need help finding a provider in your area, or if you have other questions about a provider that our online directory does not answer, including qualifications, specialty and board certification, please contact Customer Service and they can assist you.

IMPORTANT: *If you are pregnant or have a baby less than one year old, see your PCP as soon as possible.*



Get to know your PCP

Your PCP works with you to help you stay as healthy as possible. Your PCP keeps track of all your basic and specialty care. If you are seeing a PCP for the first time, make an appointment as soon as possible. This way, your PCP can learn about you and your medical history before you have a medical problem. This will help you avoid any delays the first time you need to use your benefits.

Before your appointment, write down any questions you may have so you remember to ask them. Also, write down any history of family health problems. Make a list of any prescriptions, over-the-counter medications and vitamins you take as well.

Make appointments to see your PCP

If you need a medical appointment, call your PCP's office or clinic during office hours and:

- Tell the office or clinic that you are a Yamhill CCO member
- Give them your name and Medical ID number
- Tell them which kind of appointment you need

Call in advance for routine, non-emergency appointments. If you are sick and need a same-day appointment, tell the clinic's staff person when you call.

Getting in to see your PCP

Usually, you can get a routine or follow-up appointment within four weeks of the request, or within two days for urgent issues. If you have questions or concerns about getting an appointment, call Customer Service for assistance.

Missing PCP appointments

Call your PCP and cancel the appointment as soon as possible. The clinic will schedule another appointment for you and make the time available for another patient.

PLEASE NOTE: *Each clinic has its own policies about missed appointments. Yamhill CCO does not cover charges you may be asked to pay for missing an appointment with your PCP or a clinic. Ask your clinic about its policy so you can avoid having to pay any penalties or cancellations.*

Changing your PCP

After your first 30 days as a Yamhill CCO member, you may change your PCP no more than twice in a six-month period. You may change your PCP more often if you move or if your PCP clinic does not want to see you anymore.

We can help you find a new PCP whose office is convenient for you and who accepts new patients. You also may look in the Primary Care Clinics section of our provider directory, available online at yamhillcco.org/providerdirectory.

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To change your PCP, call Customer Service at 855-722-8205. TTY/TDD is 711. After you choose a PCP, we will mail you a new Yamhill CCO ID card that shows the name of the PCP you chose.

When you choose a new PCP, the change is effective right away. However, it might take a few days for your new PCP to get information about you. If you or your PCP have questions about your PCP assignment or plan benefits, please call Customer Service.

Referrals to other providers and direct access to specialists

Specialty care is care provided by a specialist provider, such as a cardiologist for heart problems, orthopedist for bone problems or endocrinologist for hormone problems. If you need to see a specialist or other provider, your PCP will refer you.

However, you can see specialists for some kinds of care without seeing your PCP first. This is called “direct access to a specialist.”

You can make your own appointment or access the following services from a specialist who is a Yamhill CCO provider:

- Routine women’s health care and preventative women’s health care services, which includes, but is not limited to, prenatal care, breast exams, mammograms and Pap tests
- Emergency services, whether you get these services from plan providers or non-plan providers
- Urgently needed care that you get from non-plan providers when you are temporarily outside the plan’s service area
- Renal (kidney) dialysis services you get when you are temporarily outside the plan’s service area
- Family planning
- Immunizations (shots)

Out-of-network providers

In most cases, you must see a Yamhill CCO specialist or other provider. If one is not available within our network, your PCP will ask us if you can see an out-of-network provider. We will work with your PCP in determining how soon you need to be seen and the provider specialty needed to address your medical needs.



If you have already seen a specialist and you have questions or concerns, make an appointment with your PCP to discuss any issues. If you or your PCP want a second opinion from another specialist, your PCP will refer you.

After-hours care (evenings, weekends and holidays)

Your PCP looks after your care any time of the day or night. Even if the PCP's office is closed, call the clinic's phone number. You will speak with someone who will contact your PCP, or give you advice on what to do.

When your PCP is out of town or on vacation, they will arrange for another provider to be available to give you care and advice.

Second opinions

We cover second opinions. If you want a second opinion about your treatment options, ask your PCP to refer you for another opinion. If you want to see a provider outside our network, you or your provider will need to get our approval first.

Emergencies, Urgent Care and Crises

If you have an emergency

If you think that you have a real emergency, call 911 or go to the nearest hospital.

Willamette Valley Medical Center
2700 SE Stratus Ave
McMinnville, OR 97128
503-472-6131

Providence Newberg Medical Center
1001 Providence Dr
Newberg, OR 97132
503-537-1555

You don't need permission to get care in an emergency.

Emergencies are serious medical problems that need immediate care in an emergency room.

In an emergency, you need medical attention immediately to prevent loss of life or more injury to yourself, your child or your unborn child.

Examples of emergencies are:

- Possible heart attacks
- Loss of consciousness
- Seizures
- Broken bones
- Severe burns
- Bleeding that does not stop

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IMPORTANT: Do not go to a hospital emergency room for routine care that can be provided by your PCP. Sometimes ERs have a long, uncomfortable wait and take hours to see a doctor, so you should only go there when you have to.

For example, the following conditions are **not** emergencies:

- Common cold
- Constipation
- Diaper rash
- Back pain
- Toothache

Follow-up care after an emergency

Emergency rooms will care for you until you are stable. If you need more care, you may be admitted to the hospital or emergency staff will tell you where to go for follow-up care. If you do not receive this information, contact your PCP on the next business day after your emergency treatment. Follow-up care once you are stable is covered, but not considered an emergency.

Post-stabilization care means covered services provided after an emergency and after your condition is stabilized to maintain or improve your condition. Yamhill Community Care Organization will pay for post-stabilization care provided by a hospital (whether or not the hospital is a plan provider).

After you receive emergency treatment, call your PCP as soon as possible. You can arrange for more care if you need it.

Out-of-town emergencies

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

OHP covers emergency and urgent care anywhere in the United States, but not in Mexico, Canada, or anywhere else outside the United States.

Urgent care

Always call your PCP's office first about any health problem. Someone will be able to help you day and night, even on weekends and holidays. Urgent problems are things like severe infections, sprains, and strong pain. If you don't know how urgent the problem is, call your PCP.

When you have an urgent problem, do the following:

1. Call your clinic or provider's office. Most clinics will have an after-hours advice line. Ask to speak to your PCP
2. If your PCP isn't available, ask to speak to the clinic nurse or on-call provider
3. A health care professional will tell you what to do. You may be scheduled for an appointment. arrange for more care if you need it



Covered Benefits and Services



This is a brief list of services that are covered under your OHP benefits with Yamhill CCO. To learn more about what is covered, please refer to the sections on the following pages that discuss the benefits in more detail.

If you have any questions about what is covered, you can ask your PCP or call Customer Service. You also can reference the OHP Handbook, which is available on the web at ohp.oregon.gov. You can also call OHP Client Services and request that one be sent to you. That phone number is 800-273-0557 (TTY is 711).

Alcohol and drug treatment

Childbirth

Dental care

- Basic services including cleaning, fluoride varnish, fillings and extractions
- Urgent or immediate treatment
- Crowns for children, pregnant women and adults age 18–20
- Sealants, root canals on back teeth for children under age 21

Hearing aids and hearing aid exams

Home health and private duty nursing

Hospice care

Hospital care

- Emergency treatment
- Inpatient and outpatient care

Immunizations

Laboratory and X-rays

Medical care from a physician, nurse practitioner or physician's assistant

Medical equipment and supplies

Medical transportation

Mental health care

Physical, occupational and speech therapy

Prescription drugs

- OHP with Limited Drug only includes drugs that Medicare Part D does not cover
- Note: If you are eligible for Medicare Part D but you choose not to enroll, you will have to pay out of your own pocket for drugs that Medicare Part D would cover if you had it

Vision and eye care

- Medical services
- Services to correct vision for children, pregnant women and adults age 18–20
- Glasses for children, pregnant women and adults who have a qualifying medical condition such as aphakia or keratoconus, or after cataract surgery

Prioritized List of Health Services

OHP does not cover everything. The Oregon legislature does not have enough money to provide services for every type of illness. So they use the money that is available to pay for the most effective services for selected sicknesses and diseases.

A list of these sicknesses and diseases is what makes up the *Prioritized List of Health Services*. This list was developed by a committee called the Oregon Health Evidence Review Commission (HERC). The HERC is a group of doctors, nurses and others concerned about health care issues in Oregon.

This Prioritized List of Health Services is available online at oregon.gov/oha/HSD/OHP/Pages/Prioritized-List.aspx.

To create the first prioritized list of health services, the HERC held public meetings around Oregon to find out which health issues were important to Oregonians. The HERC used that information to rank all health care procedures in order of effectiveness. HERC members are appointed by the governor and meet regularly to update the list.

How does the Prioritized List work?

The list contains hundreds of diseases and conditions, but only some of them are covered by OHP due to funding. The cut-off line between what is covered and what isn't covered is called the Funding Line. All conditions "above the line" are covered. The conditions "below the line" usually are not covered by OHP, but there may be exceptions. For example, something below the line could be covered if you have an above the line condition that could improve if the below the line condition is treated.

OHP covers reasonable services for finding out what's wrong. That includes diagnosing a condition that is not currently funded. If a health care provider decides on a diagnosis or treatment that's not funded, OHP will not pay for any more services for that condition.

The OHP website has more details about what is covered. Go to oregon.gov/oha/healthplan.



Preventive Health and Wellness



Yamhill CCO is committed to providing services to you and your family to help you stay well and live a healthy life. You can help prevent many serious illnesses and health conditions by making small healthy lifestyle changes, using preventive health and wellness services, and working with your PCP

Our health and wellness services include:

- Health checkups
- Help to quit using tobacco products
- Immunizations (shots)
- Prenatal care for pregnant women
- Mammograms (for women)
- Pap tests (women) and prostate exams (men)

Quitting tobacco

The single most important thing you can do to improve your health and your family's health is to stop using tobacco products.

Yamhill CCO pays for medications and telephone counseling with a trained coach to help you stop using tobacco products. If you use tobacco products, call Quit for Life, toll-free at 866-784-8454 (866-QUIT-4-LIFE).

Drug and alcohol treatment

If you think you need treatment for a drug or alcohol problem, talk to your PCP or contact a drug and alcohol dependency provider directly.

You do not need to call Yamhill CCO for a referral for drug and alcohol treatment services.

We pay for counseling office visits, acupuncture, medication treatment and detoxification services.

We also cover treatment at a residential facility. Contact Customer Service for additional information.

Baby, child and teen health

Your children's health is important to us. To keep your children healthy, be sure they have immunizations and regular checkups even when they are not sick. Your child should have a health check-up within three months of becoming a Yamhill CCO member.

It is important for your children to get all recommended shots (immunizations). If your child has missed any shots, make an appointment to get them as soon as possible. It's important for your child to be immunized before their second birthday.

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Adult health

Getting regular health exams and the right screening tests and immunizations (shots) is important to staying healthy. Chronic illness or other conditions may put some people at “high risk.” Your PCP may want you to have certain shots more often depending on your risk. Talk to your PCP about which shots you should have and when you should have them.

Primary care

Primary care is general medical care and treatment provided by your PCP. It includes:

- Preventive health care services that catch a health problem early or prevent it from happening, e.g., mammograms (breast X-rays), Pap tests, immunizations (shots)
- Care for on-going, chronic conditions, like diabetes or asthma
- Prescriptions
- Referrals for specialty care
- Admission to the hospital, if needed

Lab tests, X-rays and other procedures

We will pay for these services if your provider orders them.

Hospital care

If you need care at a hospital, your PCP or specialist will arrange for your care.

Family planning

A number of family planning services are covered by Yamhill CCO:

- Physical exams and birth control education
- Birth control supplies such as condoms, birth control pills and intrauterine devices (IUDs)
- Emergency birth control (the “morning after” pill)
- Sterilization (tubal ligations and vasectomies)
- Abortions

Related services that are also covered include:

- Pap tests
- Pregnancy tests
- Screening and counseling for sexually transmitted diseases (STDs), including AIDS and HIV

Hearing services

If you need hearing services, your PCP will make a referral. We pay for hearing tests, hearing aids and batteries.

Vision care

For basic vision care, call VSP at 800-877-7195. You do not need a PCP referral.

If you have an eye injury or infection, call your PCP. Your PCP may refer you to a specialist.



Eye exams for the purpose of checking on your medical condition (for example, people with diabetes) are covered. In this case, your PCP will tell you how often you should have a medical eye exam.

Benefits for members who are age 20 or younger:

- Eye exams and new glasses are covered with no limit only if they are medically necessary (for example, if you experience a change in your vision that requires new glasses). Medical necessity is decided by your PCP or other health care provider
- Oregon Health Plan covers contact lenses only for a few conditions

Benefits for members who are over 20 and pregnant:

- Eye exams and new glasses are covered every 24 months. Glasses are also covered within 120 days after cataract surgery or up to one year after corneal transplant
- Oregon Health Plan covers contact lenses only for a few conditions

Benefits for members who are age 21 or older and are not pregnant:

- Eye exams for prescribing glasses or contact lenses are ONLY covered when needed to treat medical conditions, such as an absent natural eye lens, synthetic eye lens replacement, thinning or “coning” of the eye lens, cataracts, and congenital cataracts

- Glasses are covered within 120 days after cataract surgery or up to one year after corneal transplant

To receive full dental and vision coverage, call OHP Customer Service if you become pregnant or are now pregnant but haven't notified them yet. You can contact OHP Customer Service at 800-699-9075. TTY/TDD is 711.

If you have a caseworker, please call them first before calling OHP Customer Service.

Skilled nursing facility care

We will pay for care in a skilled nursing facility or nursing home for up to 20 days after you have been in the hospital. Additional skilled care may be covered by the OHP.

Free rides to appointments



If you need help getting to your medical, dental or mental health appointments, please call Yamhill CCO WellRide at any of the following numbers:

Yamhill CCO WellRide

Toll-free: 844-256-5720

TTY/Oregon Relay Service: 711

Hours of operation: 7:30 a.m.-6 p.m.,
Monday-Friday

WellRide's call center is closed on New Year's Day, Memorial Day, Fourth of July, Labor Day, Thanksgiving Day and Christmas Day.

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Yamhill CCO can pay for rides to OHP-covered services. We may give you a bus ticket or taxi fare. Or we may pay you, a family member or friend for gas to drive you. We can help if you don't have a way to get to your doctor, dentist, or counselor, and in some emergencies, to a pharmacy. Call at least a day or two before your appointment and say that you have OHP.

Emergency medical transportation

Yamhill CCO pays for ambulance transportation in emergencies for OHP members.

If you are not sure whether you need an ambulance, call your PCP, even after office hours – the on-call doctor can help you.

Pharmacy and Prescription Drug Benefits

We have a list of plan-approved drugs for our members. This list is called a formulary. Pharmacists and doctors decide which drugs should be in the formulary. You can find a copy of it on our website at yamhillcco.org/druglist.

Some drugs on the formulary have additional requirements or limits on coverage. These coverage limits and requirements can be found on our website, on the same page as the formulary.

Also, we may add or remove drugs or change coverage requirements on drugs. If we remove a drug from the formulary or add restrictions to a drug that you are taking, we will tell you in advance.

If you have questions about the formulary or want us to mail a copy to you, call our Customer Service Department toll-free at 855-722-8205, 8 a.m. to 5 p.m., Monday - Friday. TTY/TDD users may call 711.

Prescription coverage limitations

These drugs are not covered:

- Drugs not listed in the formulary or drugs removed from the formulary



- Drugs used to treat conditions that are not covered by the Oregon Health Plan (examples are fibromyalgia, allergic rhinitis and acne)
- Drugs used for cosmetic purposes
- Drugs that are not approved by the U.S. Food and Drug Administration (FDA) and/or drugs that have little or poor scientific evidence to support their use
- Drugs that are being studied and are not approved for your disease or condition. A drug may be approved by the FDA for use with one or more diseases or conditions, but not approved for other diseases or conditions

How to team with your pharmacist

Some drugs in the formulary have additional requirements or coverage limits that may include:

- The use of generic drugs when available
- Prior authorization (pre-approval)
- Step therapy (trying other drugs first)
- Age restrictions
- Quantity limits

Yamhill CCO covers some over-the-counter (OTC) drugs such as aspirin. They are listed in the formulary. You must get a prescription from your provider and give it to a pharmacist before we can pay for an OTC drug.

Drugs used to treat mental health conditions such as depression, anxiety and psychosis are covered directly by the Oregon Health Authority (OHA). They are not listed in our formulary. Your pharmacist sends your prescription claim directly to OHA. You may have a copay for these drugs.

Questions to ask your provider about prescriptions

Yamhill CCO providers are asked to prescribe medications that are on our formulary. Drugs that are not on our drug list are called “non-formulary drugs” and are not covered, unless we make an exception.

IMPORTANT: *Each time you receive a new prescription, ask your provider if it is covered by Yamhill CCO and if it requires pre-approval or has limits.*

If we do not cover the specific drug, ask your provider if another drug in our formulary would work for you.

If your provider decides that our formulary does not have an acceptable choice or if the other drug requires pre-approval, ask your provider to contact us and fax a Formulary Exception or Prior Authorization Request form.

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Generally, we only approve exception requests if one or both of these statements are true:

1. Other drugs or a limited supply of the drug would not work as well in treating your condition
2. The other drug or limited supply would cause bad medical effects for you

Our decisions for pre-approval and formulary exception requests are based only on appropriate care and coverage limitations.

We may approve a two-month transition supply of a non-formulary or limited drug for a serious medical condition for members who were taking the drug before they became a member or after their discharge from a hospital or nursing facility.

You or your provider may call Customer Service to ask for a transition supply. Talk to your provider as soon as possible about drugs that we cover, or to ask us for an exception.

How to fill your prescriptions

Fill your prescriptions at any Yamhill CCO network pharmacy. Show your Yamhill CCO ID card and your Oregon Health ID card when you fill a prescription.

You can find a list of network pharmacies in our online provider directory on our website at yamhillcco.org/providerdirectory.

Most prescriptions are limited to a supply of 31 days or less. The earliest date you can get a refill is 23 days after you last filled your prescription.

We may approve an additional refill in the following situations:

- Your medication was lost or stolen
- You need extra medication because you are traveling
- You need extra medication because your dosage was changed
- You need an extra supply to keep at work or school

EXCEPTIONS: You may get up to a 90-day supply of the following drugs:

- Generic oral contraceptives (birth control pills)
- Children's multivitamins with fluoride, prenatal vitamins, folic acid and sodium fluoride
- Digoxin, furosemide, hydrochlorothiazide, atenolol, metoprolol, captopril, enalapril, lisinopril
- Levothyroxine
- Albuterol HFA inhalers and nebulizer solutions

If you get a 90-day supply, you must wait 68 days until your next refill.

If your PCP's clinic is closed and you believe you need a prescription filled right away, call your clinic's after-hours number. If you cannot



contact your PCP or prescriber, call Customer Service toll-free at 855-722-8205, or at 503-488-2800 in the Portland area. TTY/TDD users can call 711.

IMPORTANT: *The drugs listed in the formulary do not have copayments. If a pharmacy asks you to pay for a prescription, call our Customer Service Department before you pay.*

If you have an urgent need for a drug that is not on the formulary or that has limits, we may approve up to a five-day emergency supply. You, your provider or your pharmacist can call our Customer Service Department to request an emergency supply.

Pharmacy network

Our pharmacy network includes most chain pharmacies. If you need a prescription outside Oregon, call Customer Service to find out if there is a contracted pharmacy near you.

If you ever use your own money to pay for a prescription, we may be able to refund your money. A refund is based on your benefit coverage and the limitations and exclusions of your plan. To request a refund, you must fill out a Reimbursement Request Form and send it back to us. You can find this form in the “Member Forms” section on our website at yamhillcco.org, or you may call Customer Service for help.

Dental Health Care

Yamhill CCO partners with Capitol Dental Care to provide your dental health benefits.

You will find their information on your Yamhill CCO Member ID card, which you will receive in the mail. You can also find this information on the Coverage Letter that the state sends you. Please make sure to show your Yamhill CCO Member ID card or your Oregon Health ID Card each time you go to the dentist.

If you lose your Yamhill CCO Member ID Card, please call our Customer Service and request a replacement card.

Getting started

Once you become a member of our plan, you will need to choose a clinic or dental office as your Primary Care Dentist (PCD). Your PCD will work with you to take care of your dental needs. Call your PCD before getting any dental care.

To coordinate your dental care, your dentist will:

- Keep your dental records in one place to give you better service
- Give you the dental care you need, any time of day or night
- Be your first contact when you need dental care, except in an emergency
- Arrange for specialty dental care, if you need it

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How to choose a Primary Care Dentist

You may choose a Primary Care Dentist (PCD) from Capitol Dental Care's provider directory, found on their website. Or you can call their customer service number and they will help arrange your first appointment with a PCD.

Capitol Dental Care

Provider Directory

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

Customer Service

Toll-free: 800-525-6800

TTY: 711

Changing your Primary Care Dentist

You may change your dentist two times every year. To choose a new dentist, pick a new one from Capitol Dental Care's provider directory. Or, you can call Capitol Dental and they can assist you in finding a new PCD.

Emergency & urgent dental care services

Important: *Always contact your dentist prior to going to an urgent care center or an emergency room. Your dentist will be able to help you make the right choice for your dental problem. Urgent care centers and emergency rooms are only for very serious problems.*

Emergency dental care is available any time of the day or night. An emergency is a serious problem that needs immediate care. It could be an injury or sudden severe condition.

Some examples of emergency situations are:

- Bad infection
- Bad abscesses (an abscess is a blister on your gum tissue)
- Severe tooth pain (pain that does not stop when you take over-the-counter pain killers)
- A tooth that is knocked out

Urgent dental care is dental care that needs prompt, but not immediate treatment. Some examples of urgent situations are:

- A toothache
- Swollen gums
- A lost filling

Some dental services require prior authorization (pre-approval) from Capitol Dental, but emergency or urgent dental services do not require a prior authorization.

Local care for emergency and urgent dental care

If you have a dentist who is your PCD, call them. If it is after hours, the answering service will forward your call to an on-call dentist, who will call you back. They will decide if you need to go to an emergency room, to an urgent care center or if you should make an appointment with your PCD for the next day.

If you do not have a dentist yet, simply call the closest office in Capitol Dental Care's provider directory and they will assist you.



Out-of-area emergency and urgent dental care

If you are traveling outside of our service area and have an emergency, first try to call your dentist (same instructions as above). If you need emergency dental care out of the area, ask the dentist to send Capitol Dental Care a detailed bill and the chart notes describing the dental emergency.

IMPORTANT: *After you see a dentist for a dental emergency, please call your PCD to arrange for further care if it is needed.*

Dental benefits and services

There are two levels of dental benefits for Yamhill CCO members:

- For pregnant women and members under 21
- For all other adults

IMPORTANT: *Benefits may require prior approval and may have limits. See the chart below.*

Dental Benefits	For pregnant women and members under 21	For all other members
Emergency Services Emergency Stabilization (in or out of your service area) Examples: <ul style="list-style-type: none"> • Extreme pain or infection • Bleeding or swelling • Injuries to the teeth or gum 	Covered	Covered
Preventive Services Exams Cleaning Fluoride treatment X-rays Sealants	Covered Covered Covered Covered Limited/15 yrs & under only	Covered Covered Covered Covered Not covered
Restorative Services Fillings (amalgam, composite) Partial dentures Complete dentures Crowns	Covered Covered Limited Limited	Covered Limited Limited Limited/stainless steel
Oral Surgery and Endodontics Extractions Root Canal Therapy	Covered Covered	Covered Limited

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If you are pregnant

It is very important to see a dentist before you have your baby. Dental visits are safe during pregnancy. Having a healthy mouth before your baby is born may help your baby avoid cavities as they grow up. Please see the section below on how to make an appointment.

How to make an appointment

Call your dentist during office hours. You can find the phone number in Capitol Dental Care's provider directory or by calling their Customer Service.

Tell the office you are a Yamhill CCO member and why you want to see a dentist.

Remember to take your Yamhill CCO member ID card and your Oregon Health ID Card with you to the appointment.

If you need sign language or an interpreter at your appointment, be sure to tell the clinic staff when you make the appointment.

If you need assistance getting to your appointment, please refer to the "Free rides to appointments" section, page 20.

Referrals to other dental providers dental specialists

If you need to see a specialist or other provider, your dentist will refer you. Referrals are made on a case-by-case basis when your dentist feels it is necessary. Capitol Dental Care must approve the referral before you go to your appointment.

IMPORTANT: *Going to a specialist without a referral from your dentist could result in you having to pay the bill. Always check with your dentist before getting dental services.*

See "When you may have to pay for services," on page 32 for more information.



Mental Health Services

IMPORTANT: *You do not need a referral to get mental health services from a network provider.*

Mental health services are available to all OHP members. With Yamhill CCO, members receive mental health services through our partner, Yamhill County Health & Human Services. You can get help with depression, anxiety, family problems and difficult behaviors, to name a few. We cover a mental health assessment to find out what kind of help you need, case management, therapy and care in a psychiatric hospital if you need it.

Mental health concerns may include:

- Depression
- Anxiety
- Schizophrenia
- Problems that result from physical or sexual abuse
- Bipolar disorder
- Attention Deficit Hyperactivity Disorder (ADHD)
- Problems resulting from drug or alcohol use
- Feelings of hopelessness
- Thoughts of hurting yourself or others

We offer:

- Outpatient therapy
- Case management
- Care coordination
- Medication management
- Children's services
- Intensive outpatient adult service
- Inpatient care when required

Mental Health treatment services may include:

- Assessment or evaluation to help decide what services you need
- Counseling or programs that help manage mental health conditions
- Programs to help with daily and community living
- Hospital care for mental illness
- Peer wellness specialists who can provide support
- Emergency services
- Medications needed to help manage mental health conditions
- Programs that teach life and social skills
- Skills training for parents and children

Mental Health Prescriptions

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

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Make appointments to see a mental health provider

IMPORTANT: *You do not need a referral from your PCP to get mental health services.*

If you need help finding a provider, call: Yamhill County Health & Human Services 503-474-6884, 8:30 a.m. – 5 p.m., Monday through Friday

If you are having a crisis, you can call one of the numbers in the “How to get help for a mental health crisis” section on the next page, or call Customer Service for assistance.

You can also call 911 if you are in crisis.

Specialty mental health services

You and your PCP may decide you need specialty mental health services. These services may require pre-approval from us and may include:

- Talking with a mental health specialist
- Special testing or evaluation
- A referral to a special treatment program or community-based service
- Intensive community-based services for children
- Case management services for adults
- Residential care
- Intensive live-in care for children

- Care and help for families who need a break
- Services to help at-risk and homeless youth
- Psychiatry

If you think you need to see a specialist or other provider, make an appointment with your PCP first. Your PCP will decide which services and tests you may need.

Mental health crisis

You do not need to get approval from us to call the crisis line or get emergency services. You can use those services at any time you feel you are having an emergency.

A **mental health crisis** means a person needs help quickly so the situation does not become an emergency.

A **mental health emergency** is a situation where your health or safety, or the safety of others, would be in serious danger if you did not get help immediately.

If you already have a provider, your provider’s office will tell you how to reach them during a mental health crisis. If you are having a crisis, follow the plan made with your mental health professional. If you feel you need services immediately, call your provider’s office and ask for an urgent appointment, contact Yamhill County Health & Human Services at the numbers below or call 911.



How to Get Help for a Mental Health Crisis:

Call Yamhill County Health & Human Services at:

For Adults

During business hours: 8:30 a.m. – 5 p.m.,
Monday through Friday
503-434-7523

Outside of business hours: 503-434-7465
Or call toll-free: 800-560-5535

For Children & Youth

During business hours: 8:30 a.m. – 5 p.m.,
Monday through Friday
503-434-7462

Outside of business hours: 503-434-7465
Or call toll-free: 800-560-5535

You can also call 911 if you are in crisis.

Things to look for if you, or someone you know, are having a mental health crisis:

- You, or a member of your family, are considering suicide
- You, or a member of your family, are hearing voices to hurt yourself or another person
- You, or a member of your family, hurts other people, animals or property

- You, or a member of your family, has dangerous or highly disruptive behaviors in school, work, with friends or with family, and the behaviors are new or not being addressed by a mental health provider
- You or a member of your family feels out of control

Suicide prevention

One concern that may come with untreated mental illness is a risk of suicide. With appropriate treatment, your life can improve dramatically.

What are the most common warning signs?

As many as 80 percent of those thinking about suicide want others to be aware of their emotional pain and stop them from dying. A warning sign does not automatically mean a person is going to attempt suicide, but it should be taken seriously.

Suicide warning signs include:

- Talking about wanting to die or to kill oneself
- Planning a way to kill oneself, such as buying a gun
- Talking about feeling hopeless or having no reason to live
- Talking about feeling trapped or in unbearable pain
- Talking about being a burden to others

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- Giving away prized possessions
- Preoccupation with death
- Increasing the use of alcohol or drugs
- Acting anxious or agitated; behaving recklessly
- Withdrawing or feeling isolated
- Displaying extreme mood swings

Never keep talk of suicide a secret!

If you want to talk with someone outside Yamhill CCO, call one of the numbers below:

- 800-SUICIDE (784-2433)
- Suicide Prevention Lifeline
800-273-TALK (8255)
suicidepreventionlifeline.org
- The David Romprey Memorial Warmline
800-698-2392

For youth suicide prevention:

For more information, the Oregon Youth Suicide Prevention website is:
<http://www.oregon.gov/oha/PH/PREVENTIONWELLNESS/SAFELIVING/SUICIDEPREVENTION/Pages/index.aspx>.

For teen suicide prevention:

For information on teen suicide prevention, the Oregon Suicide Prevention Resource Center website is: sprc.org/states/oregon.

If You Are Pregnant



It is very important for your health and your baby's health to get maternity care while you are pregnant.

We cover:

- Prenatal care (care for you before your baby is born)
- Childbirth
- Postpartum care (care for you after your baby is born)
- Care for your newborn baby
- Nursing support and breast pumps

There may be other programs to help you when you are pregnant. To find out more, please call Customer Service.

As soon as you know you are pregnant:

1. **Call OHP Customer Service** at 800-699-9075. They will make sure you don't lose your OHP benefits while you are pregnant. OHP can also help you get additional services that you may need
2. **Call your PCP and make an appointment for prenatal care.** If you prefer, you can pick your own obstetrician/prenatal care provider

A list of Yamhill CCO providers who can deliver your baby is included in our online provider directory on our website at yamhillcco.org/providerdirectory.



As soon as possible after your baby is born:

- Call OHP Customer Service at 800-699-9075 to enroll your baby in the OHP. This is not done automatically
- If you received all your medical care from an obstetrician or prenatal care provider during your pregnancy, you will need to choose a primary care provider (PCP) now. Call Customer Service to help you find a PCP near you

Information for birth parents

Oregon's **A Safe Place for Newborns** law allows a birth parent (mother or father) to leave a newborn infant at an authorized facility, such as a hospital, doctor's office during business hours, birthing clinic, police or fire station or sheriff's office.

There are no legal penalties for making this choice if the baby is 30 days old or younger, is given to a staff person and shows no signs of abuse.

If you need support, want to talk to someone about this decision or need information on adoption, counseling or other social services, call 800-SAFENET (800-723-3638).

If you decide to take your baby to "a safe place for newborns" facility, you will not have to answer questions. You will be offered information and phone numbers for county child welfare offices. You will be asked to fill out a voluntary health questionnaire about the infant. You may leave at any time.

Babies receive medical attention if they need it. The staff person who accepts the baby contacts Community Human Services Child Welfare, and the baby is placed in a temporary home.

If you change your mind, you can seek custody of the baby. A court hearing will be held on the first business day after the day the baby is left. There will be several court hearings after that date. Your ability to seek custody of the baby will depend on how quickly the court moves to end the parents' rights.

Online resources

Parent resources <https://public.health.oregon.gov/HealthyPeopleFamilies/Babies/SafeSurrender/Pages/index.aspx>

Changing CCOs

When you have a problem getting the right care, please let us try to help you before changing CCOs. Just call Customer Service and ask for our Care Coordinator. If you still want to leave or change your CCO, call OHP Customer service.

How to change CCOs

If you want to change to a different plan, call OHP Customer Service at 800-699-9075. There are several chances for you to change as long as another CCO in your service area is open for enrollment:

- If you or a family member did not choose Yamhill CCO, you can change CCOs during the first 30 days after you enroll. Everyone in your family who is on OHP must change to the same CCO
- If you are new to OHP, you can change plans during the first 90 days after you enroll
- If you move to a place that your CCO doesn't serve, you can change plans as soon as you tell OHP about the move. Please call OHP Customer Service at 800-699-9075

- You can change CCOs each time OHP Customer Service finds that you meet the requirements for OHP. This is called "recertification" and usually happens about the same time once each year
- If you are on Medicare, you can change or leave your CCO anytime

Reasons why you might choose to leave Yamhill CCO on your own include:

- When we, because of moral or religious objections, do not cover a service that you want
- You need "related" services to be performed at the same time (for example, a cesarean section and a tubal ligation), not all related services are available within the network and your PCP determines that receiving the services separately would cause you unnecessary risk

Yamhill CCO may ask OHA to remove you from our plan if you:

- Are abusive to our staff or providers
- Commit fraud, such as letting someone else use your health care benefits
- Move out of our service area
- Lose OHP eligibility



Other Things You Should Know

OHP members don't pay bills for covered services

When you schedule your first appointment with a provider, tell the scheduler that you are with Yamhill CCO or any other private medical insurance you may have. This will help the provider know who to bill.

If your health care provider sends you a bill, **don't pay it**. Please call our Customer Service right away at 855-722-8205. TTY/TDD users can call 711.

Your medical provider can send you a bill only if all of the following are true:

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

These protections usually only apply if the medical provider knew or should have known you had OHP. Also, they only apply to providers who participate in the OHP program (but most providers do).

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

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

When you may have to pay for services

Generally, with Yamhill CCO, you will not have to pay any medical bills. However, there are a few exceptions.

You have to pay the provider if you:

- Receive services outside Oregon that are not emergencies or urgent care
- If a third-party payer, like car insurance, sent checks to you for services performed by your provider
- Choose to have services that the provider tells you are not covered by Yamhill CCO. In this case, the provider must tell you the cost of each service, and that you will be

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responsible for paying for the service(s). The provider must also ask you to sign a written form stating that you were told this information and that you knowingly and voluntarily agreed to pay for non-covered services

You may ask Yamhill CCO for a written Notice of Action denying payment, and then appeal the denial or ask for a hearing. (See “Appeals” section.)

IMPORTANT TO KNOW *We strongly urge you to call Customer Service before you agree to pay a provider.*

Native rights

American Indians and Alaskan Natives can (IHS) clinic or tribal wellness center. This is true whether you are in a CCO, prepaid health plan or OHP Fee-for-Service (open card).

These providers can be found in our online provider directory at yamhillcco.org/providerdirectory.

You can also see Native American providers that are not in our network. However, Native American providers that are not part of our network must follow the same rules as network providers. Only covered benefits will be paid.

If a service requires prior authorization, they must request it before providing the service. A list of services that need prior authorization is posted on our website under the “Provider Forms and Policies” section.

If you have questions about your benefits under the American Recovery and Restoration Act, or if you need help understanding our prior authorization rules, please feel free to contact OHP Customer Service at 800-699-9075, or Yamhill CCO customer service for help.

Reporting fraud, waste and abuse

Medicaid fraud is against the law. Please tell us if you think you see fraud, waste or abuse of Medicaid benefits. Examples include a provider charging you for a service you didn’t get or someone using another person’s ID to get OHP benefits.

Call or write to the following if you think you see fraud:

To report **provider** fraud:
DHS Provider Audit Unit
P.O. Box 14152
3406 Cherry Avenue N.E.
Salem, OR 97309-9965

Phone: 888-372-8301
Fax: 503-378-2577



To report **client** fraud:
DHS Investigations Unit
PO Box 14150
Salem, OR 97309

Phone: 888-372-8301
Fax: 503-373-1525

You can also report client and provider fraud online at oregon.gov/DHS/ABUSE/Pages/fraud-faq.aspx.

Outside the United States

Yamhill CCO will not cover any health services you get outside the United States, including Canada and Mexico.

New technology

OHP decides if new technologies and new uses of current technologies are included in your benefit package. If you have questions about whether or not a service is covered, please call Customer Service.

Changing your address or phone number

If you move or change your phone number, let OHP Customer Service know. It is your responsibility to let OHP know about these changes within 30 days of the change. If you don't, you could lose your Yamhill CCO benefits. You have two options:

1. By telephone (toll-free): 800-699-9075, or TTY 711. This is the best way to reach OHP Customer Service

2. By email: oregonhealthplan.changes@dhsoha.state.or.us. Use the DHS/OHA secure email site at <https://secureemail.dhsoha.state.or.us/encrypt> to send your email to OHP. Include your full name, date of birth, Oregon Health ID number and phone number

Also, you will need to tell your PCP clinic your new information. If you need a new PCP clinic after you move, please let us know. Our Customer Service staff will help you choose a new PCP.

Members with both Medicaid and Medicare (dual eligibles)

Some people are eligible for both Medicaid (OHP) and Medicare. They are called “dual eligible” members. For more information, call our Customer Service.

End-of-life decisions and Advance Directives (living wills)

Adults 18 years and older can make decisions about their own care, including refusing treatment. It's possible that someday you could become so sick or injured that you can't tell your providers whether you want a certain treatment or not. If you have written an Advance Directive, also called a Living Will, your providers may follow your instructions.

If you don't have an Advance Directive, your providers may ask your family what to do. If your family can't or won't decide, your providers will take the usual steps in treating your conditions.

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

You can get an Advance Directive form at most hospitals and from many providers, or by calling Senior Health Insurance Benefits Assistance (SHIBA) at 800-722-4134. You also can find one online at healthcare.oregon.gov/shiba/Documents/advance_directive_form.pdf. If you write an Advance Directive, be sure to talk to your providers and your family about it and give them copies. They can only follow your instructions if they have them. Some providers and hospitals will not follow Advance Directives for religious or moral reasons. You should ask them about this.

If you change your mind, you can cancel your Advance Directive anytime. To cancel your Advance Directive, ask for the copies back and tear them up, or write CANCELED in large letters, sign and date them.

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

Send your complaint to:
Health Care Regulation
and Quality Improvement
800 NE Oregon St, #305
Portland, OR 97232

Email: Mailbox.hcls@state.or.us

Fax: 971-673-0556

Phone: 971-673-0540

TTY: 971-673-0372

For questions or more information contact Oregon Health Decisions at 800-422-4805 or 503-241-0744. TTY/TDD users can call 711.

Declaration for Mental Health Treatment

Oregon has a form called a *Declaration for Mental Health Treatment*. This form is a legal document. It allows you to make decisions now about future mental health care in case you are unable to make your own care decisions. If you do not have this form in place, and you are not able to make your own decisions, then only a court or two doctors can decide that you cannot make your own care decisions.

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



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

For more information on the *Declaration for Mental Health Treatment*, go to the state of Oregon's website at: oregon.gov/oha/hsd/amh/forms/declaration.pdf. You can talk directly with your mental health provider, if you have one.

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

Send your complaint to:
Health Care Regulation and
Quality Improvement
800 NE Oregon St, #305
Portland, OR 97232

Email: Mailbox.hcls@state.or.us
Fax: 971-673-0556
Phone: 971-673-0540
TTY: 971-673-0372

Provider incentives and reimbursement

You have the right to ask if we have special financial arrangements with our providers that can affect the use of referrals and other services.

To find out, call our Customer Service Department and ask for information about our physician payment arrangements.

IMPORTANT TO KNOW: *Our Care Management and Pharmacy units make authorization (payment) decisions about medical/surgical services, home health services, pharmacy and other benefits.*

Decisions are based only on appropriate care and coverage guidelines and rules. We do not reward staff for denying prior authorization requests and do not financially reward providers for giving you less service.

Complaints and Appeals

How to make a complaint or grievance

If you are very unhappy with Yamhill CCO, your health care services or your provider, you can complain or file a grievance. We will try to make things better. Just call Customer Service at 855-722-8205 (TTY 711), or send us a letter to the address on page 44. We must solve it and call or write you in five workdays.

If we can't solve it in five workdays, we will send you a letter to explain why. If we need more than 30 additional days to address your complaint, we will send you a letter within five workdays to explain why. We will not tell anyone about your complaint unless you ask us to. If we need even more time, we will send another letter within five days.

Appeals and hearings

If we **deny, stop** or **reduce** a medical service your provider has ordered, we will mail you a Notice of Action letter explaining why we made that decision. You have a right to ask to change it through an appeal and a state fair hearing. You must first ask for an appeal no more than 60 days from the date on the **Notice of Action** letter.

How to appeal a decision

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

- Calling Customer Service at 855-722-8205 (TTY 711)
- Writing us a letter
- Filling out an Appeal and Hearing Request, form number OHP 3302 or MSC 443

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

You can keep on getting a service that already started before our decision to stop it. You must ask us to continue the service within 10 days of getting the **Notice of Action** letter that stopped it. If you continue the service and the reviewer agrees with the original decision, you may have to pay the cost of the services that you received after the Effective Date on the **Notice of Action** letter.



If you need a fast appeal

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

Provider appeals

Your provider has a right to appeal for you when their physician's orders are denied by a plan. You must agree to this in writing.

How to get an administrative hearing

After an appeal, you can ask for a state fair hearing with an Oregon Administrative Law Judge. You will have 120 days from the date on your Notice of Appeal Resolution (NOAR) to ask the state for a hearing. Your NOAR letter will have a form that you can send in. You can also ask us to send you an Appeal and Hearing Request form, or call OHP Client Services at 800-273-0557, TTY 711, and ask for form number OHP 3302 or MSC 443.

At the hearing, you can tell the judge why you do not agree with our decision and why the services should be covered. You do not need a lawyer, but you can have one or someone else, like your doctor, with you. If you hire a lawyer you must pay their fees. You can ask

the Public Benefits Hotline (a program of Legal Aid Services of Oregon and the Oregon Law Center) at 800-520-5292, TTY 711, for advice and possible representation. Information on free Legal Aid can also be found at oregonlawhelp.org.

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

Expedited hearings for urgent medical problems

If you believe your medical problem cannot wait for a review, ask us or MAP for an expedited (fast) appeal or hearing.

For the quickest results, you may fax your appeal form to: Yamhill CCO Appeals Coordinator at 503-416-8118.

Or, you can mail your appeal form to:
Yamhill Community Care Organization
Attn: Appeals and Grievances
PO Box 40328
Portland, OR 97240

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Also, you may request an expedited (fast) hearing from MAP. Fax your hearing request form to:

OHP Hearings Unit at 503-945-6035

Include a statement on a form (OHP 3302 or MSC 443) from your provider explaining why it is urgent. If OHP agrees that it is urgent, the Hearings Unit will call you in three workdays.

IMPORTANT TO KNOW: *Appealing a decision will not affect continuation of service with Yamhill CCO. However, you may have to pay for services delivered during the appeal process if the decision to deny or limit the service is upheld.*

Dual-eligible members and appeal rights

If you are enrolled in both Yamhill CCO and Medicare, you may have more appeal rights. Contact Customer Service for more information.

Notice of Privacy Practices

A Notice of Privacy Practices describes how we use your personal health information. It lists what we can and cannot do with your information and the laws in place that we must follow to keep your information secure.

The notice also tells you about your rights when it comes to your protected health information.

If you want a copy of our Notice of Privacy Practices, please call Customer Service and we will send you one.



Frequently Asked Questions



Q. Why was I assigned to a provider when I already have a doctor?

A. Our system matches new members with PCPs in the area they live. If you already have an established relationship with a PCP that is contracted with us, just give us a call. We're more than happy to update our records.

Q. How do I change my primary care provider (PCP), my dentist or my mental health provider?

A. To change your PCP, call Yamhill CCO Customer Service at 855-722-8205. We are happy to help you find a new PCP.

To change your dentist or mental health provider, you'll need to call their customer service phone number(s) located on the back of your Yamhill CCO ID Card.

Q. I want to see a specialist. What should I do?

A. If you and your PCP decide that you should see a specialist, your PCP will give you a referral. See the section "Referrals to other providers and direct access to specialists" on page 14 for more information.

Q. I want to see a mental health provider. What should I do?

A. You do not need a referral from your PCP. You may contact a mental health provider listed in our online provider directory at yamhillcco.org/providerdirectory or call Customer Service for assistance.

Q. Does my plan cover vision services?

A. Yes. OHP does cover some vision services. Please see "Vision care," on page 19.

Q. I am pregnant and would like to begin my prenatal care right away. How can I find an OB/GYN that will deliver my baby at the hospital of my choice?

A. Contracted providers can be found using our online provider search on our website. You can call and ask which hospitals your OB/GYN works with. If you do not have internet access, or just prefer to call us for the information, we will be glad to help you.

Q. I'm a new member. I need to refill a prescription for medication from my last insurance and also get diabetes supplies. What should I do?

A. Call Customer Service. You may be eligible for a transitional supply. Talk to your Yamhill CCO provider as soon as possible about medical supplies and/or drugs that we cover.

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Q. I just moved, I have a new baby or I changed my name. Who do I tell?

A. Please call OHP Customer Service at 800-699-9075 and let them know what has changed. If you have a DHS caseworker, please call them instead of calling OHP. You can find more information in the section “Changing your address or phone number,” on page 34.

Q. I’m a new member and would like to know if my medications are covered.

A. Yamhill CCO maintains a list of covered drugs called a formulary. Please talk with your doctor about the medications you need. Your doctor may need to submit a prior authorization or may need to make a change to a covered drug. (We do not cover Mental Health drugs. Mental Health drugs are covered by the OHP. Your pharmacy will bill these medications to the OHP.) If you are a new member and are unable to fill a medication prescription, you may qualify for a transition supply. Please call us to find out if you qualify.

Q. If I, or someone I care about, is considering suicide, who can help?

A. Talk to someone right away. See “Mental health crisis/Suicide prevention” on page 29 of this handbook for the appropriate phone numbers to call if you or someone you know are in crisis or considering suicide.

Q. How can I be sure that I’ll be able to see who I want under the OHP and Yamhill CCO?

A. We have a large network of hospitals, providers and pharmacies in our service area. We work with you to build a team – your providers, behavioral and mental health specialists, dentists, pharmacists and everyone at Yamhill CCO – and to get you high-quality care to meet your needs.

Q. Where does the money come from to pay for members’ benefits?

A. OHP is paid for by federal and state taxes with the amount decided by Oregon law makers. In turn, funding is passed on to Yamhill CCO by the OHP, so that we may provide you with the care you need to stay healthy.

Q. My doctor sent me a bill. What should I do?

A. Don’t pay the bill. See the section “OHP members don’t pay bills for covered services,” on page 32 for more information.

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

A. When you go to the hospital or the emergency room, you may be treated by a provider who doesn’t work for the hospital. For example, the emergency room doctors



may have their own practice and provide services in the emergency room. They may send you a separate bill. If you have surgery in a hospital, there will be a separate bill for the hospital, the surgeon, and maybe even the lab, the radiologist, and the anesthesiologist. Just because the hospital has been paid by OHP, it doesn't mean that the other providers were paid by OHP. Do not ignore bills from people who treated you in the hospital. If you get other bills, call each provider and ask them to bill your CCO. See the section "OHP members don't pay bills for covered services," on page 32 for more information.

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

A. You may have to pay for services:

- If you see a provider that does not take OHP or is not part of our provider network
- If you weren't eligible for OHP when you received the service
- If you sign a detailed Agreement to Pay for that specific service that OHP doesn't cover

Member Handbook Definitions

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

Copay – An amount of money that a person must pay out-of-pocket for each health service. Oregon Health Plan members do not have copays. Private health insurance and Medicare sometimes have copays.

Durable medical equipment (DME) – Medical equipment like wheelchairs, walkers and hospital beds. They are durable because they don't get used up like medical supplies.

Emergency medical condition – An illness or injury that needs care immediately, like bleeding that won't stop, severe pain and broken bones. It can be something that will cause some part of your body to stop working right. An emergency mental health condition is feeling out of control, or feeling like hurting yourself or someone else.

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

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

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

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

Grievance – A complaint about a plan, provider or clinic. The law says CCOs must respond to each complaint.

Habilitation services and devices – Ways to help keep, learn, or improve skills and functioning for daily living. Examples include therapy for a child who is not walking or talking at the expected age.

Health insurance – A program that pays for some or all of its members' health care costs. A company or government agency makes the rules for when and how much to pay.

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

Hospice services – Services to comfort a person who is dying and their family. Hospice is flexible and can include pain treatment, counseling and respite care.

Hospital inpatient and outpatient care

– Hospital inpatient care is when the patient is admitted to a hospital and stays at least three (3) nights. Outpatient care is surgery or treatment that your doctor doesn't think will need you to stay overnight in a hospital.

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

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

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

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

Physician services – Services that you get from a doctor.

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

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



Prescription drugs – Drugs that your doctor tells you to take.

Primary care dentist – A dentist who takes care of your teeth and gums.

Primary care provider or Primary care physician – Also referred to as a “PCP,” this is a medical professional who takes care of your health. They are usually the first person you call when you have health issues or need care. Your PCP can be a doctor, nurse practitioner, physician’s assistant, osteopath, or sometimes a naturopath.

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

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

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

Specialist – A medical professional who has special training to care for a certain part of the body or type of illness.

Urgent care – Care that you need the same day for serious pain, to keep an injury or illness from getting much worse, or to avoid losing function in part of your body.

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