

Yamhill
Community Care
Member Handbook
2020



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 26**, “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 10**, “Getting Involved as a Member,” for more information.



What is covered under this plan?

Know what services and benefits yours under YCCO and the Oregon Health Plan are. **Go to page 21**, “Covered Benefits and Services,” and **page 23**, “Preventive Health and Wellness” for more information.



Have kids?

Through our different community resources and programs, YCCO 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 11**, “Early Learning Hub” for more information.



Need some extra support?

We can connect you with a Traditional Health Worker, who can help you figure out your healthcare and meet your goals. **Go to page 8**, “Community Health Hub” for more information.



Have questions?

Go to page 50, “Frequently Asked Questions,” or Call Customer Service, Monday-Friday 8 a.m.- 5 p.m. 855-722-8205 TTY: 711



Want to see this handbook online?

You can find this in electronic form on our website at <https://yamhillcco.org/wp-content/uploads/ycc-handbook-web-with-insert-010719.pdf>. You can always call Customer Service at 855-722-8205 to request another copy as well.



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:

- Phone: (toll-free) 855-722-8205
(TTY/TDD) 711
- Fax: 503-574-8757
- Mail: Yamhill Community Care
Attn: Grievance Coordinator
P.O. Box 4158
Portland, OR 97208

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**
Email: OCRComplaint@hhs.gov Phone:
(toll-free) 800-868-1019,

(TDD) 800-537-7697

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

Yamhill Community Care

Office: 819 NE Third Street
McMinnville, Oregon 97128

Mailing address:

P.O. Box 5490
Salem, OR 97304

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

Fax: 503-566-9801

Web: yamhillcco.org

Office hours: Monday – Friday 9 a.m.
to 12 p.m., and 1:00 p.m. to 4:00
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 855-722-8205.

If you need an interpreter at your appointments, tell your provider's office that you need an interpreter and for which language.

For information on certified Health Care Interpreters call

Customer Service at 855-722-8205.

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 855-722-8205.

Si usted necesita un intérprete en sus citas, infórmele al consultorio de su proveedor que necesita uno y para qué idioma. Para obtener información sobre intérpretes de atención médica certificados, llame a Servicio al Cliente al 855-722-8205

ENGLISH

You can get this document in other languages, large print, braille or a format you prefer free of charge. Program/contact: YCCO Customer Service

Phone: 855-722-8205.

We accept all relay calls or you can dial 711.

SPANISH | ESPAÑOL

Puede obtener este documento en otros idiomas, en letra grande, en braille o en un formato que usted prefiera sin cargo.

Programa/contacto: YCCO Customer Service
Telefono: 855-722-8205

Aceptamos llamadas de retransmisión o puede llamar al 711

RUSSIAN / РУССКИ

Вы можете бесплатно получить текст этого документа на другом языке, набранный крупным шрифтом или шрифтом Брайля либо в предпочитаемом вами формате.

Название программы и контактное лицо:
YCCO Customer Service

Телефон: 855-722-8205

Мы отвечаем на любые вызовы по линии трансляционной связи; кроме того, вы можете набрать номер 711.

VIETNAMESE / TIẾNG VIỆT

Quý vị có thể có tài liệu này miễn phí bằng ngôn ngữ khác, bản in khổ lớn, chữ nổi hoặc một định dạng khác. Chương trình/liên lạc:

YCCO Customer Service

Số điện thoại: 855-722-8205

Chúng tôi chấp nhận tất cả các cuộc gọi chuyển tiếp hoặc quý vị có thể bấm số 711.

SIMPLIFIED CHINESE / 简体中文

您可以免费获得本文件的其他语言版本，或者大号字体、盲文及您所喜欢格式的文本。

计划/联系人：YCCO Customer Service

电话：855-722-8205

我们会接听所有转接电话，或者您可以拨打 711。

TRADITIONAL CHINESE / 繁體中文

您可以免費獲得本文件的其他語言版本，或者大號字體、盲人點字及您所喜歡格式的文本。

計畫/連絡人：YCCO Customer Service

電話：855-722-8205

我們會接聽所有傳譯電話，或者您可以撥打 711

اللغة العربية / ARABIC

يمكنكم الحصول على هذا المستند مجاناً في لغات أخرى، أو بخط كبير، أو بلغة البريل أو بصيغة تفضلونها

البرنامج /التصال : YCCO Customer Service

هاتف: 855-722-8205

نستقبل جميع المكالمات الهاتفية المعمولة بواسطة خدمات الاتصال المكتوب

أو يمكنكم الاتصال بالرقم 711

ROMANIAN / ROMÂNĂ

Puteți obține acest document în alte limbi, într-un font mărit, în limbajul Braille sau într-un alt format preferat, în mod gratuit.

Program/contact: YCCO Customer Service

Telefon: 855-722-8205

Acceptăm toate apelurile prin serviciu de releu sau puteți suna la 711.

SOMALI / SOOMAALI

Waxaad heli kartaa dokumentigan oo ku qoran luqaddo kale, far waaweyn, farta dadka indhaha aan qabin wax ku akhriyaan ee braille ama qaabka aaad doorbidayso oo lacag la'aan ah. Barnaamijka/halka la iskala soo xiriirayo: YCCO Customer Service
Telefoonka: 855-722-8205
Waa aqbalnaa wicitaanada gudbinta oo dhan ama waxaad wici kartaa 711.

HMONG/LUS HMOOB

Koj txais tau daim ntawv no ua lwm yam lus, ua ntawv loj, ua lus braille rau neeg dig muag los sis
uas lwm yam uas koj nyiam lawv ua pub dawb. Kev pab/tus neeg uas tiv tauj: YCCO Customer Service
Xov tooj: 855-722-8205
Peb txais cov kev hu xov tooj rau neeg lag ntseg los sis koj mam li hu 711 los tau.

KOREAN/한국어

본 문서는 다른 언어로도 제공되며, 큰 활자, 점자 등 귀하가 선호하시는 형식의 문서를 무료로 받아보실 수 있습니다.
프로그램/연락처: YCCO Customer Service
전화번호: 855-722-8205
장애인을 위한 통신중계 서비스 (relay calls)를 지원하고 있습니다. 또는 711 번으로 전화 주시기를 바랍니다.

LAO / ລາວ

ທ່ານສາມາດໄດ້ຮັບເອກະສານນີ້ເປັນພາສາອື່ນ, ຕົວລິຂະໜາດໃຫຍ່, ໜັງສືໂພງສຳລັບຄົນຕາບອດຫຼືໃນຮູບແບບທີ່ທ່ານຕ້ອງການໄດ້ໂດຍບໍ່ເສັຽຄ່າ.
ໂຄງການ/ຕິດຕໍ່: YCCO Customer Service
ໂທລະສັບ: 855-722-8205
ພວກເຮົາຍອມຮັບການໂທສຳລັບຄົນພິການຫຼືທ່ານສາມາດໂທຫາ 711 ໄດ້.

NEPALI/ नेपाली

तपाईं यो फारम पैसा नततरकन अनय भाषाहरु, ठुलो अक्षर, ब्ेल वा तपाईंले चाहेको अनय तररकाले पतन पाउन सक्नु हुनेछ । काय्यक्रम/समपक्य : YCCO Customer Service
फोन नं : 855-722-8205
हामी सबै स्ानानतरण गररएको फोन सवीकारछौं वा तपाईं 711 मा फोन गन्य सक्नु हुनेछ ।

MIEN/MIENH

Naaiv zeiv sou meih haih lorz duqv fiev dieh nyungc nzaangc
nyei, nzaangc-hlo, hluo nyei nzaangc fai dieh nyungc ei meih
qiemx zuqc nyei maiv zuqc cuotv nyaanh.
Program/jiu tong: YCCO Customer Service
Douc waac hoc: 855-722-8205
Yie mbuo zipv nzengc relay call fai meih heuc 711

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Welcome to Yamhill Community Care

We're glad to have you as a member of Yamhill Community Care (or YCCO). 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, but not all, partners in our CCO include the following agencies and services:

Medical Services

- Physicians Medical Center
- Providence Health & Services
- Virginia Garcia Memorial Health Centers
- Willamette Valley Medical Center
- Yamhill County Health & Human Services

Mental Health & Substance Abuse Services

- Yamhill County Health & Human Services

Dental Health Services

- Capitol Dental Care

Non-Emergent Medical Transportation

- WellRide -- First Transit

YCCO serves members in all or part of the following areas:

- Yamhill County
- Polk County
- Washington County

YCCO 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 preventative services to help you stay 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 service agencies. If you face challenges like homelessness or hunger, or have several health conditions, we can connect you with help.



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 members by coordinating effective care.”

Getting Care

When You Need It

Getting started

Now that you have OHP through YCCO, 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 15, 27)
- Keep your Oregon Health ID and YCCO cards in your wallet. Show them at each appointment (Pages 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 23)
- Call ahead if you cannot make it to your appointment. Your provider’s office will set up a new visit (Page 14)

Also, please take time to look over this handbook and save it so you can check it later if you have questions. The YCCO member handbook is based on the Oregon Health Authority's model handbook. You may see the Oregon

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Health Plan handbook at
https://aixxweb1p.state.or.us/es_xweb/DHSforms/Served/he9035.pdf.

YCCO Customer Service

Call YCCO Customer Service if you have questions about:

- Choosing or changing your doctor, or primary care provider (PCP)
- Plan benefit
- Using your medical and PCP services
- 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 YCCO

**Customer Service is available
8 a.m. to 5 p.m. Monday – Friday
855-722-8205 or TTY/TDD 711**

New members who need service immediately

If you are new to YCCO or Medicare and YCCO, you may need prescriptions, supplies or other needed items and

services immediately. If you don't have an appointment set with your primary care provider, dentist or other providers during your first month with us please call Care Management at 503-574-7247 for help.

If you need more help about being a YCCO member because you are new to us or have Medicare and YCCO please call our Customer Service at 855-722-8205. They can help you learn more about your benefits and the providers that we work with.

Even after we help you with your urgent need please make an appointment with your YCCO PCP that is listed on your YCCO member ID card as soon as possible. You may need more care.

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 visit 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 visit 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

YCCO mails information to tell you about:

- Which benefits and services are covered and not covered
- How to find a YCCO 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 or changes in access to benefits, 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 will receive their own Oregon Health ID cards. You will also receive a Member ID card from YCCO.

Take your Oregon Health ID card and YCCO card to all health care visits 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.

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 visits 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.

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Your YCCO ID card

We send you a YCCO 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 YCCO 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 YCCO ID card and your Oregon Health ID card to all your health care and dental care visits, 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 visits. 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 any time 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.



To Email:

Use the DHS/OHA secure email site at <https://secureemail.dhsoha.state.or.us/en/crypt> to send your email to OregonHealthPlan.Changes@dhsoha.state.or.us.

Include your full name, date of birth, Oregon Health ID number, address, and phone number.

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.

Information on the structure or operation of YCCO is available by request, contact Customer Service.

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,

What is the difference between YCCO and OHP?

The Oregon Health Plan (OHP) is Oregon's Medicaid program. YCCO 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 YCCO.

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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)?

A Patient-Centered Primary Care Home (PCPCH) is a health clinic that is recognized for their commitment to high-quality, patient-centered care. Just as it sounds, patient-centered care is all about you and your health!

Your primary care home will:

- Better coordinate your care to help get you the services you need, when you need them.

- Listen to your concerns and answer your questions.
- Offer after-hours help and alternatives to the emergency room.
- Help you or your caregiver play an active role in your health.

Your primary care provider will work with you to improve care coordination that results in higher quality care. You are a partner in your care management.

If you have a special health concern or condition, you will be connected with other health professionals to help you get the care you need. For example, your primary care provider can connect you with a pharmacist, mental health specialist — whatever your health needs call for.

You can ask at your clinic or provider's office if it is a PCPCH or go to this link and search for your clinic <http://www.primarycarehome.oregon.gov/>. You can also ask YCCO Customer Service for more information about what it means to be a PCPCH.

Intensive Care Coordination Services (ICCS)

Intensive Care Coordination Services (ICCS) are available if you have a disability or have multiple chronic conditions or high/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 YCCO 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 at 855-722-8205 and they will put you in touch with a YCCO staff member who is specially trained to meet your particular needs.

Care Management Teams

YCCO has a Care Management Team of nurses, behavioral health specialists, health care coordinators and resource specialists 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, please call Customer Service.

Community Health Hub

The Community Health Hub is made up of a group of individuals focused on finding YCCO members the 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. Some of 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!

Some of the programs include:

- Wellness-to-Learn - Connects elementary-aged children in the McMinnville school district and their families to resources
- Diabetes Prevention – a year-long program with the goal of preventing and/or delaying the onset of Type II diabetes through education. Participants meet once a week for one hour the first six months of the program then bi-weekly for the next three months, and then monthly for the last three months

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 visit our website at yamhillcco.org.

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 include 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.

Traditional Health Workers

If you have any barriers that prevents you from keeping good health, Traditional Health Workers (THWs) who can work with you one-on-one. They also connect you with people and services in the community that might help you. There are a few different kinds of Traditional Health Workers:

- **Community health workers (CHW):** A CHW can assist you in receiving the healthcare you need.
- **Peer support specialists (PSS):** PSSs can provide support, encouragement and help to addictions and mental health consumers.
- **Peer wellness specialists (PWS):** PWSs provide support, encouragement and help to address physical and mental health needs.

- **Personal health navigators (NAV):** NAVs offer care coordination for members from within the health system.
- **Birth doulas:** Doulas give companionship and personal, nonmedical support to women and families throughout the pregnancy, childbirth and post-partum experience.

You can get more information on our local THWs by calling our THW Liaison, at 503-376-7426. If you aren't sure if a THW is right for you talk to your PCP they can help you decide. You do not need a referral to work with a THW.

YCCO Persistent Pain Program

A program that helps you learn how to live with and manage your chronic pain.



This program is an eight-week class led by a licensed therapist. During each session, you will have one hour to learn about your pain and how to manage it, 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.



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 on our plan.

Our health education programs include self-care, illness prevention, pain management and disease self-management. More information on these programs are on our website yamhillcco.org under the “Classes and Programs” or “Events Calendar” sections. Or you can call Customer Service 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 the people who live in the community are especially important.

Most CAC members (more than half) are YCCO members. Being on the council 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 YCCO programs, as well as suggests for 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 YCCO members and the community on health care issues
- Leading a Community Health Needs Assessment and Community Health Improvement Plan for everyone living in the Yamhill County area-even people not on OHP

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 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 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 YCCO 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
- School readiness activities
- Parenting classes

Service Integration Teams (SITs)

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

To learn more about the Early Learning Hub or the Service Integration Teams, call YCCO 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 YCCO Member on OHP

As an OHP client, you the right to:

- Not feel like you are being treated differently or discriminated against.
- Be free to report complaints to YCCO, the Oregon Health Authority, the Bureau of Labor and Industries, or the Office of Civil Rights.
- Get a written notice of the YCCO nondiscrimination policy and the process to report a complaint. This complaint could be about discrimination on race, color, national origin, religion, sex, sexual orientation, marital status, age, or disability.
- Equal access for any gender people under age 18 to services and treatment covered by YCCO.
- OHA certified or qualified health care interpreters free of charge for all non-English languages and sign language.
- Written info in the language you prefer. Materials will be easy to read and you can get them in other formats.
- Services and supports that meet your cultural needs, in your language, that are easy to understand.
- Services and supports in locations where you live or as close as possible.
- Choice of providers in the YCCO network that are, if available, offered in non-traditional settings.

This includes community-based care and care coordination.

- Freedom to choose your YCCO providers and locations and make changes to those choices, including your primary care provider.
- Access to providers who will provide services that meet certain standards of practice and are appropriate to diagnose you.
- Care that provides choice, independence and dignity.
- A good relationship with the team that manages your care.
- Info on your condition, including what treatments that meet your needs are covered and not covered. This info will be in a language you understand so you can make a decision about the treatment.
- Be actively involved in making your treatment plan.
- Agree to be treated or refuse services and to be told how that will affect you, except for court ordered services.
- Agree to and sign your statement of wishes. This statement includes the rights to accept or refuse medical, surgical, mental health, or addiction treatment. It also includes the right to sign directives and powers of attorney for health care.
- Request your own health record, unless there are limits under Oregon or Federal laws, and change or correct your record. A health record has conditions, services you received, and referrals made for you. You may

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transfer your record to another provider as needed.

- Right to disenroll from YCCO.
- Information if you request it about provider incentive plans.
- A copy of the member handbook when you become a YCCO member and at least once a year.
- Help accessing covered services and info on traditional health workers.
- Covered preventative services.
- Access to emergency services 24 hours a day, 7 days a week without approval.
- Freedom from any form of restraint or seclusion as a means of force, discipline, convenience, or revenge.
- Treated with respect, dignity and privacy the same as all other patients seen by the provider who get the services equal to covered services.
- Freedom to exercise your member rights without any adverse actions or discrimination for exercising them from YCCO, YCCO staff, YCCO partners, participating providers or the Oregon Health Authority.
- Use of electronic ways to communicate with and provide you info, upon request and as available. YCCO may use electronic communication only if you request and approve it. It must also meet these requirements:
 - the same info is available in written hard copy format upon request;
 - the info is not a direct notice to an adverse benefit determination or any part of

the grievance, appeal, contested case hearing or other member right or member protection process;

- we can provide language and alternative format accommodations;
- and all personal health information protection requirement laws are met.
- A health plan with staff trained on YCCO policies. These include the following:
 - member enrollment;
 - member disenrollment;
 - fraud, waste and abuse;
 - grievances and appeals;
 - advance directives
 - health care interpreter services and provider offices that have bilingual capacity.
- Freedom to refer yourself directly to mental health, substance use, or family planning services. You don't need a referral from your PCP or other provider.
- Have a friend, family member, or advocate present during appointments or other times as needed.
- Written materials describing your rights, responsibilities, benefits available, how to access services and what to do in an emergency. You will be able to get these materials in your language or alternative formats (video or audio).
- Written materials about coordinated care used in our community and how to use the health care system.



- Access to a second opinion from a health care provider in the YCCO network. YCCO can arrange for you to get a second opinion from someone who is not in our network at no cost to you.
- Written notice before a denial of or a change in a benefit or service level is made unless it is not required for federal or state law.
- Freedom to make a complaint or appeal and receive a response. Right to request a contested case hearing.

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 cannot 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

A copy of your records

- You can get a copy of the following records:
- Medical records from your provider
- Dental records from your dentist
- Records from your CCO

Your providers and CCO may charge a reasonable fee for copies. Contact your provider to ask how to get a copy of your records.

Some behavioral health records cannot be given when asked for. When the provider determines in their professional judgement that giving the records could cause a clear and immediate danger to the member, others or to society. This process is allowed.

Working with your Primary Care Provider (PCP)

Your PCP assignment

All YCCO members have a Primary Care Provider (PCP). This may be a doctor, nurse practitioner, a physician's assistant or other health professional. When you become a YCCO 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 at 855-722-8205. 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 medical visit:

- 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 visit, call your PCP's office or clinic during office hours and:

- Tell the office or clinic that you are a YCCO member
- Give them your name and YCCO Member ID number



- Tell them which kind of appointment you need

Call in advance for routine, non-emergency visits. If you are sick and need a same-day appointment tell the clinic's staff person when you call. If you are not sure if it is an emergency, call your clinic first.

Getting in to see your PCP

Usually, you can get a routine or follow-up visit 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 help at 855-722-8205.

Missing PCP appointments

If you need to miss an appointment, call your PCP and cancel it as soon as possible. The clinic will set up another visit for you and make the time available for another patient.

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

Changing your PCP

After your first 30 days as a YCCO 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.

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 YCCO 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 or plan benefits, please call Customer Service.

Referrals to other providers and direct access to specialists

YCCO allows direct access to specialty care. Specialty care is provided by a specialist, like a cardiologist for heart problems or an orthopedist for bone problems. You can make an appointment with a specialist that is in the YCCO provider network. Your PCP or Customer Service can help you find one. They are also in the YCCO Provider Directory.

Some specialist want a referral from your PCP and your health record. When this happens work with your PCP to get a

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referral and to send your health record. If your specialist wants you to do other services like an x-ray or blood test you may need a prior approval. Your specialist will work with your PCP to do this.

Members with special health care needs or those getting long term service or supports (LTSS) can also have direct access to specialist even past the first visit. Your PCP will do a standing referral or an approved number of visits depending on your health needs. This type of care is determined with an assessment to need a course of treatment or regular care management. YCCO helps these members with direct access to medically appropriate care from physical or behavioral health specialist or both, through treatment of the condition and the identified needs through intensive care coordination if appropriate.

Other services that will not require a referral and you can self-refer to include:

- Behavioral health assessments and evaluations from a YCCO network provider;
- Traditional Health Worker services, more information about traditional health workers is on pg 8; and
- Family planning services from any Oregon Health Authority provider.

If you need more information about these services or help finding a provider you can call Customer Service.

Contact your PCP or Customer Service if you need any of the following services:

- 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

Out-of-network providers

In most cases, you must see a YCCO 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 to figure out how soon you need to be seen and who you should see to meet your 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, this does not need prior approval. You can pick a YCCO provider and make an appointment. If you need help finding a provider ask your PCP or Customer Service for help.

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 or 800-562-8964

West Valley Hospital
525 SE Washington St. Dallas, OR
97338
503-623-8301

Salem Health Hospital
890 Oak St. SE Salem, OR 97301
503-370-5200 or 800-876-1718

Legacy Meridian Park Hospital
19300 SW 65th Ave. Tualatin, OR 97602
503-692-1212

Providence Willamette Falls Medical
Center
1500 Division St. Oregon City, OR 97045
503-656-1631

Call Customer Service toll-free to be connected with these hospitals: 800-699-9075. Or visit our Provider Directory on our website yamhillcco.org to find more.

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 right away 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 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. These are examples of urgent problems:

- severe infections
- sprains
- strong pain.

If you don't know how urgent the problem is, call your PCP.

When you have an urgent problem, do the following:

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



You can visit the nearest urgent care center:

Tuality Medical Group Urgent Care
7545 SE TV Highway
Hillsboro, OR 97123
503-681-4223

Salem Health Urgent Care
1002 Bellevue St. SE
Salem, OR 97301
503-564-4824

Legacy GoHealth Urgent Care
21430 SW Langer Farms Pkway Ste 158
Sherwood, OR 97140
971-808-0655

Call Customer Service toll-free 800-699-9075 or visit our Provider Directory on our website yamhillcco.org to find more.

Covered Benefits and Services



This is a brief list of services that are covered under your OHP benefits with YCCO. 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: 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

I 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
- Transgender health

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



Additional information about benefits:

YCCO makes sure all services you get are provided in the amount, duration, and scope that is no less than the amount, duration and scope for the same services that our providers furnish to their other patients that are not YCCO members.

Benefits that Oregon Health Plan covers but YCCO does not

Some services are covered by OHP Fee-for-Service but are not covered by YCCO. For more information on these and other services call OHP Customer Service at 800-699-9075.

Services not covered by YCCO, include but are not limited to:

- Midwife home delivery
- Mental health medications
- Death with Dignity, physician assisted suicide
- Therapeutic Abortions
- Hospice services for member who live in a skilled nursing facility
- Long term care services
- School based services that are covered services provided under Individuals with Disabilities Act
- Administrative exams request or authorized by another government

agency or approved by the Health Systems Division

- Services provided to Citizen Alien Waived Emergency Medical (CAWEM) recipients or CAWEM Plus-CHIP Prenatal Coverage for emergency medical services only

If a service, including counseling and referral, is not covered by YCCO because of a lawful moral or religious objection, and such objection is not unlawful, members can contact OHP Customer Service at 800-699-9075 to learn how to obtain that service.

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.

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



YCCO 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.

YCCO 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) or visit myquitforlife.com/ycco.

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 YCCO 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



YCCO member and at least yearly, depending on their age.

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

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.

Hearing services

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

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 YCCO:

- 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:

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

Transgender health

YCCO respects the health care needs of all members. This includes trans women, trans men, gender nonconforming, two-spirit and non-binary members.

YCCO covers gender transition services, such as hormone therapy, counseling, and some surgeries. To learn more, call Customer Service.

Vision care

For basic vision care, call Customer Service at 855-722-8205.

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 visits, please call YCCO WellRide at any of the following numbers:



YCCO WellRide
Toll-free: 844-256-5720
TTY/Oregon Relay Service: 711
Hours of operation: 7:30 a.m.-6 p.m.,
Monday-Friday
WellRide has afterhours Customer Service, call our toll-free telephone number if you need help after hours.

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

More info about rides can be found at <https://yamhillcco.org/for-members/member-handbooks/>

Complaints and Grievances

You can file complaints or grievances, appeals or hearings on any of your YCCO Oregon Health Plan benefits this includes your non-emergent medical transportation services.

Examples of reasons you may file a complaint are:

- Problems making appointments or getting a ride
- Not feeling respected or understood by providers, provider staff, drivers or YCCO
- Treatment you weren't sure about, but got anyway
- Bills for services you did not agree to pay
- Disputes on YCCO extension proposals to make authorization decisions
- Driver or vehicle safety
- Quality of the service you received
- Reasons you may file an appeal:
- Your request to be paid for mileage for a non-emergency medical visit was denied
- We denied, stopped or limited a medical, dental or behavioral health service.
- You were denied a request for a ride to a non-emergency medical service. You were denied a request for mileage
- You do not agree with the result of your complaint or grievance

Reason you file a hearing:

- Your appeal request was not approved and the denial overturned.

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You can call Customer Service for help in filing a complaint or appeal. More information about complaints, appeals and hearings is located in the grievance system section of this handbook.

Emergency medical transportation

YCCO pays for ambulance rides 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 https://yamhillcco.org/wp-content/uploads/PnT-formulary-changes-template-for-member-site_August-2019.pdf.

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.

Call Prescription Customer Service at 877-216-3644, 8 a.m.- 6 p.m. Monday-Friday.

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 others

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

YCCO 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

YCCO 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 YCCO 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.

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 members who were taking the drug before they became a member or after their discharge from a hospital or nursing facility.

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 YCCO network pharmacy. Show your YCCO ID card and your Oregon Health ID card when you fill a prescription.

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You can find a list of network pharmacies in our online provider directory on our website at: <https://yamhillcco.org/members/find-a-provider/>.

Most prescriptions are limited to a supply of 30 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 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 76 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. YCCO does not refund money to members if they choose to pay for a prescription.*

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.

Mail Order Pharmacy

You can use the mail order pharmacies they are:

Postal Prescription Services 7

3500 SE 26th Ave
Portland, OR 97202
(800) 552-6694



COSTCO PHARMACY 581
802 134TH ST SW STE 140
EVERETT, WA 98204
800-607-6861

COSTCO PHARMACY 562
215 DEININGER CIR
CORONA, CA 92880
800-607-6861

COSTCO PHARMACY 1348
260 LOGISTICS AVE SUITE B
JEFFERSONVILLE, IN 47111
800-607-6861.

**Call Prescription Customer Service at
877-216-3644, 8 a.m.- 6 p.m. Monday-
Friday**

Dental Health Care

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

You will find their information on your YCCO 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 YCCO Member ID card or your Oregon Health ID Card each time you go to the dentist.

If you lose your YCCO 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

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

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 visit with a PCD.

Capitol Dental Care

Provider Directory

**[http://capitoldentalcare.com/members/
find-a-dentist/](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 approval from Capitol Dental, but emergency or urgent dental services do not require a prior approval.

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 set up a visit 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 YCCO 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: Extreme pain or infection Bleeding or swelling Injuries to the teeth/gums	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



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 YCCO member and why you want to see a dentist.

Remember to take your YCCO member ID card and your Oregon Health ID Card with you.

If you need sign language or an interpreter, be sure to tell the clinic staff when you set up the visit.

If you need help with transport, please refer to the "Free rides to appointments" section, on page 23.

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.

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 37 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 YCCO, members receive mental health services through our partner, Yamhill County Health & Human Services. You can get help with things like depression, anxiety, family problems and difficult behaviors. We cover a mental health assessment to find out the 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

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- 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 or other Traditional Health Workers 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 YCCO ID cards. The pharmacy will know where to send the bill.

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. Or. call Customer Service toll-free at 800-699-9075.

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 help.

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
- Respite 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, see 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 mental health 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

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

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

For Children & Youth

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

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

You can call the 24-hour crisis line at 844-842-8200. 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
- Giving away prized possessions
- Preoccupation with death
- Increasing the use of alcohol and/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 YCCO, 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 set up a visit for prenatal care.** If you prefer, you can pick your own obstetrician/prenatal care provider

A list of YCCO 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 working at the facility 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). You can also dial 211.

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.

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 at 855-722-8205 and ask for a 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 YCCO, 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 YCCO 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

YCCO 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 set up your first visit with a provider, tell the scheduler that you are with YCCO or any other private medical insurance you may have. This will help the provider know who to bill. Take your ID card with you to all medical visits.

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 healthcare 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

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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 cannot bill you. You may receive a notice from us saying that we will not pay for the service. That notice does not mean you have to pay. The provider will write off the charges.

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

When you may have to pay for services

Generally, with YCCO, 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 you got from your provider and you did not use these checks to pay the provider.

- ☐ If you go to a non-participating provider without prior approval for non-emergent care.

- Choose to have services that the provider tells you are not covered by YCCO. In this case, the provider must tell you the cost of each service, and that you will be 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
- In some cases, people who are dual-eligible (people who have Medicare and Oregon Health Plan) may have costs related to copays, deductibles, or coinsurance. To learn more, call Customer Service at 855-722-8205.

You may ask YCCO 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 access an Indian Health Services (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). If you are a Native person and are a part of YCCO's plan, you may choose an Indian Health Care Provider (IHCP) within YCCO's network, as long as you are eligible to get services from that provider and that clinic or provider has enough space to see you.

These providers can be found in our online provider directory at <https://yamhillcco.org/for-members/find-a-provider/>

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 you choose to see a Native American provider who is not in YCCO's network, you need permission in advance to get these services.

Permission to get these services may not be allowed solely based on the criteria that:

- The provider is an IHCP or out of network
- Indians may be referred by out-of-network IHCPs to a network provider with no prior permission or referral from a network provider.

If a service requires prior approval, they must request it before providing the service. Your health care provider may need to submit a "prior authorization request," which gives permission for a

provider to perform a provider so that YCCO can cover that as a benefit. Your doctor will submit a request. Your provider may ask for a quicker request process if they think you would be in danger if the request is not processed quickly. If you need to see a specialist, your primary care provider needs to send a referral.

To see what services must be preapproved, you can check <https://yamhillcco.org/wp-content/uploads/YCCO-PA-Procedures-List-Effective-10152019.Update.pdf> or Call YCCO Customer Service.

If you have questions about your benefits under the American Recovery and Restoration Act, or if you need help understanding our prior approval rules, please feel free to contact OHP Customer Service at 800-699-9075, or YCCO Customer Service for help at 855-722-8205.

Reporting fraud, waste and abuse

Medicaid fraud is against the law. You have the right to report Fraud, Waste, and Abuse anonymously under the protection of the Whistleblower laws. 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. YCCO is committed to preventing fraud, waste, and abuse. YCCO will comply with all related laws,

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including the State's False Claims Act and the federal False Claims Act.

Call or write to the following contact information:

DHS/OHA Fraud Investigation

P.O. Box 14150
Salem, OR 97309
Hotline: 1-888-FRAUD1 (888-372-8301)
Fax: 503-373-1525 Attn: Hotline

Medicaid Fraud Control Unit (MFCU)

Oregon Department of Justice
100 SW Market Street
Portland, OR 97201
Phone: 971-673-1880
Fax: 971-673-1890

OHA Program Integrity Audit Unit (PIAU)

3406 Cherry Avenue NE
Salem, OR 97303-4924
Phone: 503-3788113
Fax: 503-378-2577
Hotline: 1-888-FRAUD1 (888-372-8301)

To report client fraud:

You can also report client and provider fraud online at https://aix-xweb1p.state.or.us/es_xweb/OPR_Fraud_Ref/index.cfm?act=evt.subm_web

Outside the United States

YCCO 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 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 YCCO benefits. You have two options:

1. By telephone: 800-699-9075, or TTY 711. This is the best way to reach OHP Customer Service
2. By email: oregonhealthplan.changes@dhsوها.state.or.us. Use the DHS/OHA secure email site at **<https://secureemail.dhsوها.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 eligible)

Some people are eligible for both OHP and Medicare you are not responsible for copays, deductibles or co-insurance charges for Medicare services OHP covers these. There are times you may be required to pay deductibles and co-insurance or copays if you choose to see a provider outside of YCCO's network. For more information on which benefits are paid for by Medicare and which by Medicaid or to help finding a provider and how to get services call Customer Service.

YCCO providers will bill your Medicare and YCCO. YCCO works with Medicare and has an agreement that all claims will automatically send over to YCCO so we can pay them after Medicare.

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

Adults 18 years and older can make decisions about their own care, including the right to accept or refuse medical or surgical 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.

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. You also can find one online at <https://www.oregon.gov/oha/PH/ABOUT/DOCUMENTS/Advance-Directive.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, moral or as a matter of conscience 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 you think your provider did not follow your wishes in your Advance Directive, you can complain. A form for this is at <https://apps.state.or.us/Forms/Served/he3001.pdf>.

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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 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 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:** https://aix-xweb1p.state.or.us/es_xweb/DHSforms/Served/le9550.pdf. You can talk directly with your mental health provider.

If your provider does not follow your wishes in your Declaration for Mental Health Treatment, you can complain. A form for this is at <https://apps.state.or.us/Forms/Served/he3001.pdf>

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 approval (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 approval requests and do not financially reward providers for giving you less service.

Grievance System (Complaints, Appeals & Hearings)

You, your authorized representative or your provider with your written consent can file complaints or grievances, appeals or hearings on any of your YCCO Oregon Health Plan benefits this includes your medical, behavioral (including mental health and substance abuse), dental or non-emergent medical transportation.

Examples of reasons you may file a complaint are:

- Problems making appointments or getting a ride
- Problems finding a provider near a member's area

- Not feeling respected or understood by providers, provider staff, drivers or YCCO
- Treatment you weren't sure about, but got anyway
- Bills for services you did not agree to pay
- Disputes on YCCO extension proposals to make approval decisions
- Driver or vehicle safety
- Quality of the service you received
- Reasons you may file an appeal:
- Your request to be paid for mileage for non-emergent medical appointments was denied
- We denied, stopped or limited a medical, dental or behavioral health service.
- You were denied a request for a non-emergent medical transportation service
- You do not agree with the result of your complaint or grievance

Reason you file a hearing:

- Your appeal request was not approved and the denial overturned.

How to make a complaint or grievance

If you are very unhappy with YCCO, 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 your complaint in five workdays. If we can't solve your complaint in five workdays, we will send you a letter to explain why. If we need

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more than 30 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 tell us it is okay to do so.

If you need help to file a complaint you can call Customer Service or get help from a certified community health worker, peer wellness specialist, or personal health navigator.

You can also complain to the Oregon Health Authority. Call Client Services at 800-273-0557 (TTY 711), or sent your complaint to:

Oregon Health Plan Client Services
PO Box 14520
Salem, Oregon 97309

You may also find a complaint form at <https://apps.state.or.us/Forms/Served/he3001.pdf>

Appeals and hearings

If we **deny**, **stop** or **reduce** a medical service your provider request, we will mail you a Notice of Action/Adverse Benefit Determination letter explaining why we made that decision. You, your provider with your written consent or your authorized representative 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/Adverse Benefit Determination** letter. If your appeal decision does not change the denial you can then request a state fair hearing. You must ask for a hearing within 120 days from the date on the Notice of Appeal Resolution letter.

How to appeal a decision

In an appeal, a different health care professional at YCCO 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

Mail or Fax your letter of form to:
Yamhill Community Care
Attn: Appeals and Grievances
P.O. Box 4158
Portland, OR 97208

Fax: YCCO Appeals Coordinator at
503-574-8757

If you want help with your appeal, call Customer Service and we can fill out an appeal form for you to sign. You can ask your authorized representative, a certified community health worker, peer wellness specialist, or personal health navigator 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** (NOAR) 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.

Continuing Benefits During Appeal or Hearing Process

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 the date on the **Notice of Action/Adverse Benefit Determination (NOABD)** 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/Adverse Benefit Determination (NOABD)** letter.

If you need a fast appeal

If you, your provider with your written consent or your authorized representative 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. If additional time is needed to resolve your appeal and it is in your best interest or you request it, we will call you or within 2 days we will send you a letter telling you why and your appeal will be resolved within 14 days.

How to get an administrative hearing

After an appeal, you, your authorized representative or your provider with your written consent 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/Adverse Benefit Determination (NOABD) to ask the state for a hearing. Your Notice of Appeal Resolution (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/Adverse Benefit Determination decision to stop it. You must ask the state to continue the service within 10 days of the date of our Notice of Appeal Resolution that confirmed our denial. If

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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 OHP Hearings Unit for an expedited (fast) appeal or hearing.

For the quickest results, you may fax your appeal form to:
YCCO Appeals Coordinator at
503-574-8757.

Or, you can mail your appeal form to:
Yamhill Community Care
Attn: Appeals and Grievances
P.O. Box 4158
Portland, OR 97208

Also, you may request an expedited (fast) hearing from OHP Hearings Unit. 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 two workdays.

IMPORTANT TO KNOW: *Appealing a decision will not affect continuation of service with YCCO. 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 YCCO and Medicare, you may have more appeal rights. Contact Customer Service at 855-722-8205 for more information.

Grievance System Information

If you want more information on our Grievance System, like our policies and procedures, member templates or other documents related to our Grievance System call Customer Service or send your request by email from our website
<https://yamhillcco.org/contact/> or by emailing info@yamhillcco.org.

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. The notice is also called a confidentiality policy.

If you want a copy of our Notice of Privacy Practices, please call Customer Service at 855-722-8205 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 YCCO 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 YCCO 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 15 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 help.

Q. Does my plan cover vision services?

A. Yes. OHP does cover some vision services. Please see "Vision care," on page 22.

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?

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

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 39.

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

A. YCCO 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 approval 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. Call the YCCO Mental Health 24-hour crisis line at 844-842-8200. You can also call 911 if you are in crisis. See “Mental health crisis/Suicide prevention” on page 32 of this handbook for the more information 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 YCCO?

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 YCCO – 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 YCCO 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 37 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 37 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 – When you ask your plan to review a decision the plan made about covering a health care service. If you do not agree with a decision the plan made, you can appeal it and ask to have the decision reviewed.

Co-payment (Copay) – Medicare and other plans may pay for services but also charge the member a small fee. This fee is called a copay. OHP does not have copays.

Durable medical equipment (DME) – Medical equipment such as wheelchairs and hospital beds. They are durable because they last. They do not get used up like medical supplies.

Emergency medical condition – An illness or injury that needs care right now. A physical health example is bleeding that won't stop or a broken bone. A mental health example is feeling out of control or feeling like hurting yourself.

Emergency transportation – Using an ambulance to get to care. Emergency medical technicians (EMT) give you care during the ride or flight. This happens when you call 911.

ER and ED – Emergency room and emergency department, the place in a hospital where you can get care right now.

Emergency room care – Care you get when you have a serious medical issue and it is not safe to wait. This care happens in an emergency room (ER).

Emergency services – Care you get during a medical crisis. These services help make you stable when you have a serious condition.

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, such as 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 – Services and devices that teach daily living skills. An example is speech therapy for a child who has not started to speak.

Health insurance – A plan or 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. For example, you may get help after surgery, an illness or injury. Some of these services help with medicine, meals and bathing.

Hospice services – Services to comfort a person during end-of-life care.

Hospital inpatient and outpatient care – Inpatient care is when you get care and stay at the hospital for at least three (3) nights. Outpatient care is when you get care at a hospital but do not need to stay overnight.

Medically necessary – Services and supplies that your doctor says you need. You need them to prevent, diagnose or treat a condition or its symptoms. It can mean services that a provider accepts as standard treatment.

Network – A group of providers that a CCO contracts with to provide services. They are the doctors, dentists, therapists, and other providers that work together to keep you healthy.

Network provider – A provider the CCO contracts with for services. If you see network providers, the CCO pays. Also called a “participating provider.”

Non-network provider – A provider that does not have a contract with the CCO. These providers may not accept the CCO payment for their services. You might have to pay if you see a non-network provider. Also called a “non-participating provider.”

Physician services – Services you get from a doctor.

Plan – A company that arranges and pays for health care services. Most plans have physical, dental and mental health care.

Hospitalization – When someone is checking into a hospital for care.

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

Premium – What a person pays for insurance.

Prescription drug coverage – Health insurance or plan that helps pay for medications.

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

Primary care dentist (PCD) – The main dentist who takes care of your teeth and gums.

Primary care provider or Primary care physician (PCP) – The medical professional who takes care of your health. This is 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 – A licensed person or group that offers a health care service. Examples are a doctor, dentist, or therapist.

Rehabilitation services – Services to help you get back to full health. These help 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.

Specialist – A provider trained to care for a certain part of the body or type of illness.

Urgent care – Care that you need the same day. It could be for serious pain, to keep you from feeling much worse, or to avoid losing function in part of your body.

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In the Portland metro area:

503-488-2800 TTY/TDD: 711

Office hours: Monday – Friday 9 a.m. to
12 p.m., and 1:00 p.m. to 4:00 p.m.

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