

South Carolina Solutions Medical Homes Network Member Handbook



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Medical Homes Network Member Handbook

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Important Contact Information

This handbook is a guide to help you understand your South Carolina Solutions Medical Homes Network health plan. If you cannot find answers to your questions in this handbook, please visit our website at www.sc-solutions.org or call our toll-free phone number listed below.

Your Primary Care Physician Name, Address, and Phone number

In case of Emergency, Call 911

Visit our website at: www.sc-solutions.org

South Carolina Solutions (SCS) toll free phone number is **1-888-366-6243**. For the hearing impaired, **TTY users call 1-800-735-2905**. This number will provide you with options to connect with:

Member Services Department – We are available by phone Monday through Friday from 8 a.m. to 8 p.m. You may contact us to:

- Ask questions about your benefits and coverage.
- Change your address or phone number.
- Change your Primary Care Doctor

Care Management Department – Registered nurses and clinical support staff are available to answer health questions, coordinate appointments, provide disease education or help you find resources or services in your community.

Grievances and Appeals – If you have any concerns regarding care you received or are dissatisfied you may contact this department to file a grievance.

24 Hour Nurse Line – Nurses are available 24 hours a day, 7 days a week to answer your health care questions.

Tips for Members:

1. Keep this handbook for future use.
2. Keep your Healthy Connections (Medicaid) ID card with you at all times.
3. Keep your Primary Care Doctor's phone number and address near the phone.
4. If you have not already seen your Primary Care Doctor, schedule an appointment.
5. Use the hospital Emergency Room (ER) ONLY for emergencies.

Welcome to the South Carolina Solutions Medical Homes Network program.

South Carolina Solutions (SCS) is one of South Carolina Medicaid's managed care programs that connects you with a Primary Care Doctor for well care visits and non-emergency health care. It is always best to visit your Primary Care Doctor before you become ill, so your Primary Care Doctor will know your medical history.

SCS Medical Homes Network provides the same services available in Fee-For-Service Medicaid. Your doctor is paid to provide care for you 24 hours a day, seven days a week. Your primary care doctor will refer you to any specialists that you may need to see as well.

SCS Medical Homes Network requires you to see your primary care doctor for your health care needs. If your primary care doctor feels you need some extra help, he/she will refer you to someone else.

The Basics:

- You pick a primary care doctor for you and your family from our list of providers.
- Go to your primary care doctor for routine and preventive care.
- Your primary care doctor will refer you to a specialist or coordinate prior authorization for your care when needed.
- You have coverage in an emergency.
- Our Care Management staff is available to help you coordinate the care you need. They will help you become successful at managing your disease, if you have one and remind you about preventive care services that may be right for you. They will provide you with education relating to your health.
- Unlimited Primary Care Doctor visits with a co-pay for adults.
- Four prescriptions per month with a copay for adults.

What are the Advantages of South Carolina Solutions Medical Homes Network?

- A personal doctor to see you when you or your child gets sick or needs a check-up. Unlike Fee-For-Service Medicaid, SCS provides you with access to a nurse for medical advice 24 hours a day, seven days a week. You will never be directed to an answering machine.
- A "Medical Home." You no longer need to go to the emergency room for common illnesses. Simply call your primary care doctor for help.
- Nurse Case Managers are available to:
 - Provide Education and Disease Management for chronic diseases such as:
 - Diabetes (high blood sugar)
 - Coronary Artery Disease
 - Congestive Heart Failure

- Sick Cell
- Asthma
- COPD
- High Blood Pressure
- Maternity programs for high risk pregnancy, first time pregnancy, adolescent pregnancy or education during normal pregnancy.
- Explain our growth and development programs for toddler years.
- Help you manage any chronic or complex disease condition that you may need assistance with.
- Help you find resources within your community, such as exercise programs, immunizations for children, counseling services etc.
- Remind you about preventive health treatment such as when to receive a mammogram, vaccine or cancer screening.
- Your primary care doctor can refer you to any specialist who accepts Medicaid.

Your Healthy Connections (Medicaid) Card

- You have received your plastic Healthy Connections (Medicaid) Card. This is your insurance card. Everyone in your family received a separate card. Take especially good care of this card.
- Take your card to every visit and show it to the receptionist or office staff.

Role of the Primary Care Doctor

A doctor who oversees all of your primary health care needs. Your doctor will give or arrange for all of the medical care you need. Your doctor can take care of your routine medical care and preventive care needs. Sometimes you may have a problem that needs to be handled by a specialist; your doctor can arrange this for you. Your doctor will authorize treatment by a specialist by providing you with a referral and telling you how to make an appointment. If you need to be admitted to a hospital, your doctor can coordinate that for you.

How to Select your Primary Care Doctor

- To help you choose a doctor, you may access our provider directory by visiting our website at www.sc-solutions.org. You can also call Member Services for assistance and request a provider directory to be mailed to you.
- You may choose any provider listed in the directory as your DOCTOR.
- If you did not select a DOCTOR during enrollment, one may be assigned to you.
- We encourage you to make an appointment with your DOCTOR within 60 days or as soon as possible

Getting Medical Care with Your Primary Care Doctor

- Your DOCTOR is responsible for providing you with medical care and referring you to specialists if you need them.
- It is important that your DOCTOR knows your medical history, allergies, diseases or other problems you might have.
- You can call your DOCTOR at any time day or night if you are sick and worried about what you need to do. Your DOCTOR will have someone available to talk with you at all times if you are sick or need care. You can also contact the **SCS 24-hour Nurse Line at 1888-366-6243**.
- Your DOCTOR can provide you with routine care like physicals; prescriptions for medicines when you are sick; and can arrange for you to see a specialist if necessary.

Appointment Availability Guidelines

Your DOCTOR must follow the recommended scheduling guidelines for appointment availability:

- Emergency Care---immediately upon presentation or notification
- Urgent care---within 48 hours of presentation or notification
- Routine sick care---within 3 days of presentation or notification
- Routine well care—within 45 days of presentation or notification (15 days if pregnant)

Office Wait Time

Your DOCTOR must use the following guidelines for your visit:

- Walk-ins—within 2 hours or schedule an appointment within the guidelines of appointment availability listed above
- Scheduled appointment—within 45 minutes
- Life threatening emergency---must be managed immediately

How Do I Change My Primary Care Doctor?

Contact the Member Services department at 1-888-366-6243, Option 1. A member services representative can help you choose another DOCTOR in your area.

Are There Things I Do Not Need To Get Approved By My Doctor?

- There are some services that SCS does not require your doctor to approve before you can use them:
 - Ambulance

- Dentistry, Periodontics, Oral Surgery (Dental only)
 - Emergency Room Services or Urgent Care services provided by a hospital
 - Dialysis/End Stage Renal Disease Services
 - Family Planning Services
 - Home and Community Based Waivers
 - Independent Lab and X-ray
 - Medical Transportation
 - Nursing Home
 - Obstetrics and Gynecology
 - Optician
 - Optometry
 - Pharmacy
 - Medical Services provided by a state agency, including: Department of Mental Health, Continuum of Care, Department of Alcohol and Other Drug Abuse Services, Department of Disabilities and Special Needs, Department of Juvenile Justice, Department of Social Services.
 - Speech and Hearing Clinic services
 - Developmental Evaluation Center services
 - BabyNet services
 - Children's Rehabilitative services
 - Sickle Cell Anemia services
 - Early Intervention services
- However, some things still need to be approved by Medicaid first. Ask your doctor first if you have questions about Medicaid approval.
 - Some services may be sponsored by a state agency and will require a referral from that agency's case manager:
 - Audiology
 - High/Moderate Management Group Home Services
 - Occupational, Physical, and Speech Therapies
 - Psychology
 - Therapeutic Foster Care
 - Ask your doctor or **call the Medicaid Resource Center at 1-888-549-0820** if you have questions about referrals.

Special Services for Children

- To keep children healthy, they need to see a doctor from time to time even if they are not sick. This is called a "Well Child Visit."
- "Well Child Visits" include physicals, shots, laboratory tests, tests for lead poisoning, referrals to specialists when needed, vision and hearing tests, treatment for special conditions and health education for children under 21 years of age.
- You do not have to pay a co-pay for these services.

- Vaccinations prevent dangerous diseases that can cause brain and liver damage, heart problems, deafness, blindness, and death. Protect your child's health, start vaccinations at birth and stay on the recommended vaccination schedule

When Do Children and Teens Need Vaccinations?

Vaccine ▼	Age ►	Birth	1 month	2 months	4 months	6 months	12 months	15 months	18 months	19-23 months	2-3 years	4-6 years
Hepatitis B ¹		HepB	HepB			HepB						
Rotavirus ²			RV	RV	RV ²							
Diphtheria, Tetanus, Pertussis ³			DTaP	DTaP	DTaP	<i>see footnote²</i>	DTaP					DTaP
<i>Haemophilus influenzae</i> type b ⁴			Hib	Hib	Hib ⁴	Hib						
Pneumococcal ⁵			PCV	PCV	PCV	PCV					PPSV	
Inactivated Poliovirus ⁶			IPV	IPV		IPV						IPV
Influenza ⁷						Influenza (Yearly)						
Measles, Mumps, Rubella ⁸						MMR				<i>see footnote³</i>		MMR
Varicella ⁹						Varicella				<i>see footnote⁹</i>		Varicella
Hepatitis A ¹⁰							HepA (2 doses)				HepA Series	
Meningococcal ¹¹												MCV4

Range of recommended ages for all children

Range of recommended ages for certain high-risk groups

Vaccine ▼	Age ►	7-10 years	11-12 years	13-18 years
Tetanus, Diphtheria, Pertussis ¹			Tdap	Tdap
Human Papillomavirus ²	<i>see footnote²</i>		HPV (3 doses)(females)	HPV Series
Meningococcal ³		MCV4	MCV4	MCV4
Influenza ⁴		Influenza (Yearly)		
Pneumococcal ⁵		Pneumococcal		
Hepatitis A ⁶		HepA Series		
Hepatitis B ⁷		Hep B Series		
Inactivated Poliovirus ⁸		IPV Series		
Measles, Mumps, Rubella ⁹		MMR Series		
Varicella ¹⁰		Varicella Series		

Range of recommended ages for all children

Range of recommended ages for catch-up immunization

Range of recommended ages for certain high-risk groups

If your child is behind on their vaccinations, talk with their Doctor about catching them up.

Women, Infants, and Children – WIC

You may apply for WIC through your local health department. That information is available at www.scdhec.gov or you may contact our Member Services department at **1-888-366-6243** for additional information.

Some WIC information:

- Eligibility is based on income. That information is listed on the website.
- Services include:
 - Nutrition counseling.
 - Food packages based on individual needs.
 - Breastfeeding information.
- To apply for WIC:
 - Family member(s) who are applying, or their parent or legal guardian, should attend the appointment.
 - Bring one form of identification for yourself and one for your infant or child.
 - Bring proof of residency that shows your street address (no P.O. Box numbers) such as car registration, current bank statement, recent bill, or paystubs.
 - Proof of income for everyone living in your household. These items must be current (within last 60 days).

How Do I Disenroll from the SCS Program?

- During the first 90 days after you first enroll, you can change your mind and leave the SCS program for any reason at all.
- At the beginning of each year (the anniversary date of your enrollment), you will receive a letter asking you if you want to change your health plan. For the next 90 days, you can change your mind and leave the SCS program for any reason at all.
 - After the 90 day period is over, you will be in the SCS program for the remainder of the 12-month period unless there is a good reason for you to leave the program.
- To disenroll:
 - You can call us first at 1-888-366-6243 to see if we can help you solve your problem. If you still wish to disenroll, you must call Healthy Connections Choices and speak with an enrollment counselor at 1-877-552-4642.

How to Handle a Medical Problem

Be Prepared

Before a medical problem happens, know how to contact your doctor and emergency medical services. Always keep the patient and doctor's information near the phone or in your wallet.

Stay Calm

Describe the problem to the doctor. The doctor can tell you the best thing to do. You may be asked to come to the office or go to the emergency room.

Follow Directions Carefully

If you are asked to go to the emergency room at the hospital, go quickly and tell the receptionist you have already called the doctor.

Medical Warning Signs

Something may be seriously wrong if you or your child has:

- Trouble breathing,
- Been hit in the head and does not act normal or is unconscious,
- Chest pain or pressure,
- Severe stomach pain,
- Bleeding that will not stop,
- Stomach pain, vaginal bleeding or leaking fluid while pregnant,
- Persistent vomiting and/or diarrhea,
- Broken bones, or
- Strong feelings that you want to hurt yourself or someone else

Your baby may be seriously ill if:

- He or she is weak, limp, pale or,
- He or she is less than two months of age and has a fever over 100.4° rectal

You may need to go to the emergency room if any of these things are happening to you or your children. You can always call your doctor or 24-hour Nurse Line for advice if you are uncertain if you are having a medical emergency.

Remember, if you feel you have a serious medical problem or that your health is in danger --- Call 911.

Medical Homes Network Respects Your Right To:

- Expect privacy and confidentiality about your medical care.
- Be told about your medical condition, treatment and recovery.
- Take part in decisions about your health care.
- Call or visit your doctor when you feel sick.
- Change your DOCTOR.
- File complaints and/or grievances and suggest changes.
- Be treated with respect and dignity at all times.
- You can find the Members' Bill of Rights in this handbook.

It Is Your Responsibility To:

- Get to know your DOCTOR so he/she can provide you the best possible health care.
- Call your DOCTOR before going to any other doctor.
- Use the Emergency Room when you feel your life or health is in immediate danger. Go to the nearest hospital emergency room or call 911 if you feel you need immediate attention.
- Go to your DOCTOR for common illnesses and preventive care, such as Well Child Visits, checkups and vaccinations.

Grievances and Appeals

We want you to be satisfied with the medical care you receive as a member of South Carolina Solutions. If you are not satisfied with your medical care, you have a grievance. If you think you had to wait long to see your doctor, can't reach your doctor's office on the phone, or have some other grievance that you need to tell us about, you can:

- Call South Carolina Solutions at 1-888-366-6243.
- Contact the Medicaid Resource Center at 1-888-549-0820.
- Fill out the Grievance Form in the back of this handbook and mail it to the address on the form.

We will work with you and your doctor to fix the problem.

If we can't help you with the problem and if your Medicaid services have been stopped, denied, or reduced, you have the right to request a hearing with the Division of Appeals. The request for a hearing must be made in writing and mailed to:

South Carolina Department of Health and Human Services
Division of Appeals and Hearings
P. O. Box 8206
Columbia, South Carolina 29202-8206

The request for a hearing should explain your problem and why you want a hearing. If you have questions about how to request a hearing, call SCS at 1-888-366-6243.

Members' Bill of Rights

You have the right to receive information about the basic features of the SOUTH CAROLINA SOLUTIONS program before you join.

These are your rights as a member of SOUTH CAROLINA SOLUTIONS, including Care Coordination Services:

- To be treated with respect and dignity at all times
- To have your privacy protected.
- To take part in decisions about your health care, including your care plan.
- To refuse treatment or services, including care coordination services
- Restraint or seclusion will not be used as a way to force or punish you or for the convenience of any provider.
- To ask for and get a copy of your medical records.
- To ask that medical records be changed or corrected if you find a mistake.
- To receive health care services that are easy to get and do what they are supposed to do.
- To receive services that are right for you.
- To not be denied services just because of diagnosis, type of illness, or medical condition.
- To get information in a way that you can easily understand.
- To get help from both SCDHHS and your doctor in understanding your health plan.
- To get oral interpretation services free of charge if you don't speak English.
- To be told that oral interpretation is available and how to get those services.
- To get information on the program's services including, but not limited to:
 - Benefits and how to get them
 - Authorization requirements.
 - Any co-pays.
 - Service area.
 - Information on doctors that speak a language other than English.
 - Any limits on your freedom to choose a doctor.
 - Doctors not taking new patients.
 - Benefits not offered and how to get them
- To get information about Care Coordination services including:
 - How you would be selected for services
 - Case closure criteria
 - How to receive information about service changes or termination
 - Why services would be changed or terminated
 - What to do if you are not able to participate
- To get a copy of your disenrollment rights at least once a year.
- To be told about any big changes in your Benefits.
- To get information on emergency and after-hours coverage including, but not limited to:

- What emergency medical condition, emergency services, and post-stabilization services are.
- That Emergency Services do not need prior authorization.
- How to get Emergency services.
- Where to go for emergency services.
- Your right to use any hospital or other setting for emergency care.
- Post-stabilization care services rules.
- To get the SOUTH CAROLINA SOLUTIONS policy on referrals for services not provided by your doctor
- To express your wishes regarding future treatment should you become incapacitated.
- To exercise these rights without fear of being treated differently.

SCS Member and Potential Member Responsibilities

- To learn and understand each right you have under the South Carolina Solutions (SCS) Medicaid Program. That includes the responsibility to:
 - learn and understand your rights under the SCS Medicaid program;
 - ask questions if you don't understand your rights; and
 - learn what choices of health plans are available in your area.
- To abide by the SCS health plan and Medicaid policies and procedures. That includes the responsibility to:
 - learn and follow your health plan rules and Medicaid rules;
 - choose your health plan and a DOCTOR quickly;
 - make any changes in your health plan and DOCTOR in the ways established by Medicaid and by the SCS health plan;
 - always provide your Medicaid card to your DOCTOR or any vendor providing care to you in order that your providers can bill Medicaid for your health care services
 - keep your scheduled appointments;
 - cancel appointments in advance when you can't keep them;
 - always contact your DOCTOR first for your non-emergency medical needs;
 - be sure you have approval from your DOCTOR before going to a specialist; and
 - understand when you should and shouldn't go to the emergency room (if you have questions please call your 24/7 nurse triage line (1-888-366-6243)).
- To share information relating to your health status with your DOCTOR and become fully informed about service and treatment options. That includes the responsibility to:
 - tell your DOCTOR about your health;
 - talk to your Providers about your health care needs and ask questions about the different ways your health care problems can be treated; and
 - help your Providers get your medical records.
- To actively participate in decisions relating to service and treatment options, make personal choices, and take action to maintain your health. That includes the responsibility to:
 - work as a team with your Provider in deciding what health care is best for you;
 - understand how the things you do can affect your health;
 - do the best you can to stay healthy; and
 - treat Providers and Staff with respect.
- To actively participate in SCS Case Management and/or Disease Education programs in order to stabilize and improve any chronic or complex conditions that you or a covered family member might have.
- If you think you have been treated unfairly or discriminated against, call the U.S. Department of Health and Human Services (HHS) toll-free at 1-800-368-1019. You also can view information concerning the HHS Office of Civil Rights online at www.hhs.gov/ocr. You should also contact the South Carolina DHHS Managed Care Staff at 803-898-4614 if this is an issue.

