

InterCommunity Health Network
Coordinated Care Organization (IHN-CCO)

2018 MEMBER HANDBOOK

Your MENTAL HEALTH BENEFITS as a member of The Oregon
Health Plan



Alternate Format Information and Non-Discrimination

English

You can have this document in another language, large print, Braille, CD, on tape, or another format, please call Customer Service at 541-768-4550, toll-free 1-800-832-4580 or TTY 1-800-735-2900. If you want to read or print a Member Handbook, you can find it at <https://www.ihntogether.org/>. If you want us to send you a Member Handbook, please call Customer Service.

You can have a free voice or sign language interpreter at your appointments if you want one. When you call for an appointment, tell your provider's office that you need an interpreter and for which language. Information on Health Care Interpreters is at www.Oregon.gov/oha/oei.

IHN-CCO complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. IHN-CCO does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

Spanish/ Español

Si necesita este documento en otro idioma, letra grande, Braille, CD, cinta de audio u otro formato, llame al Departamento de Atención al Cliente al 1-800-832-4580 o TTY 1-800-735-2900. Si desea leer o imprimir el Manual para los Miembros, puede encontrarlo en <https://www.ihntogether.org/>. Si desea que le enviemos un Manual, llame al Departamento de Atención al Cliente.

Si desea, puede tener un intérprete presente durante sus citas. Cuando llame para solicitar una cita, informe al consultorio médico que necesita un intérprete que hable español. En www.Oregon.gov/oha/oei hallará información sobre intérpretes que se especializan en el campo médico.

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Words to know

1. **Appeal** - Asking a plan to change a decision you disagree with about a service your doctor ordered. You can write a letter or fill out a form explaining why the plan should change its decision. This is called *filing an appeal*.
2. **Copay** – An amount of money that a person must pay themselves for health services. Oregon Health Plan members do not have copays. Private health insurance and Medicare sometimes have copays.
3. **Durable medical equipment (DME)** – Things like wheelchairs, walkers and hospital beds. They are *durable* because they last a long time. They don't get used up like medical *supplies*.
4. **Emergency medical condition** – An illness or injury that needs care right away. This can be bleeding that won't stop, severe pain or broken bones. It can be something that will cause some part of your body to stop working right.
An emergency mental health condition is feeling out of control, or feeling like hurting yourself or someone else.
5. **Emergency transportation** – Using an ambulance or Life Flight to get medical care. Emergency medical technicians (EMT) give care during the ride or flight.
6. **ER and ED** – *Emergency room* and *emergency department*, the place in a hospital where you can get care for a medical or mental health emergency.
7. **Emergency services** – care that improves or stabilizes sudden serious medical or mental health conditions.
8. **Excluded services** – things that a health plan doesn't pay for. Services to improve your looks, like cosmetic surgery, and for things that get better on their own, like colds, are usually excluded.
9. **Grievance** – a complaint about a plan, provider or clinic. The law says CCOs must respond to each complaint.
10. **Rehabilitation services** – special services to improve strength, function or behavior, usually after surgery, injury, or substance abuse.
11. **Health insurance** – a program that pays for health care. After you sign up for the program, a company or government agency pays for covered health services. Some insurance programs require monthly payments, called *premiums*.
12. **Home health care** – services you get at home to help you live better after surgery, an illness or injury. Help with medications, meals and bathing are some of these services.
13. **Hospice services** – services to comfort a person who is dying and their family. Hospice is flexible and can include pain treatment, counseling and respite care.
14. **Hospital inpatient and outpatient care** – Hospital inpatient care is when the patient is admitted to a hospital and stays at least 3 nights. Outpatient care is surgery or treatment you get in a hospital and then leave afterward.
15. **Medically necessary** – services and supplies that are needed to prevent, diagnose or treat a medical condition or its symptoms. It can also mean services that are accepted by the medical profession as standard treatment.
16. **Network** – The medical, mental health, dental, pharmacy and equipment providers that a coordinated care organization (CCO) contracts with.

17. **Network provider** – Any provider in a CCO’s network. If a member sees network providers, the plan pays the charges. Some network specialists require members to get a referral from their primary care provider (PCP).
18. **Non-network (Out of Network, or OON) provider** - A provider who has not signed a contract with the CCO, and may not accept the CCO payment as payment-in-full for their services.
19. **Physician services** – Services that you get from a doctor.
20. **Plan** – a medical, dental, mental health organization or CCO that pays for its members’ health care services.
21. **Preapproval (preauthorization, or PA)** – A document that says your plan will pay for a service. Some plans and services require a PA before you get the service. Doctors usually take care of this.
22. **Prescription drugs** – Drugs that your doctor tells you to take, which you can get after you give a pharmacy a prescription (special form filled out by the doctor).
23. **Primary care provider (PCP)** – A medical professional who takes care of your health. Your PCP can be a doctor, nurse practitioner, physician’s assistant, osteopath, or sometimes a naturopath.
24. **Primary care dentist** – The dentist you usually go to who takes care of your teeth and gums.
25. **Provider** – Any person or agency that provides a health care service.
26. **Skilled nursing care** – help from a nurse with wound care, therapy, or taking your medicine. You can get skilled nursing care in a hospital, nursing home, or in your own home with home health care.
27. **Specialist** – A medical professional who has special training to care for a certain part of the body or type of illness.
28. **Urgent care** – Care that you need the same day for serious pain, to keep an injury or illness from getting much worse, or to avoid losing function in part of your body.

Welcome to InterCommunity Health Network Coordinated Care Organization (IHN-CCO), Your Community Health Care Plan

IHN-CCO is a managed care organization that works with the Oregon Health Authority (OHA) to provide health services to people enrolled in the Oregon Health Plan (OHP). IHN-CCO manages the mental health care for OHP members living in Linn, Benton, and Lincoln Counties. If you would like more information about the structure and operations of IHN-CCO as a managed care plan, please call our IHN-CCO Customer Service Department at 541-768-4550, toll-free 1-800-832-4580 or TTY 1-800-735-2900.

This member handbook tells you what services are available to you and how to get those services. It also tells you what to do in an emergency and explains your rights and responsibilities. Read this whole member handbook. Keep it as a guide for future use. The information in this handbook is updated at least once per year. If any changes are made to your benefits, we will tell you 30 days before the change takes place, or as soon as possible.

For more information, please see the IHN-CCO website at <https://www.ihntogether.org/>. The Oregon Health Plan also has a website at <http://www.oregon.gov/OHA/healthplan>.

The OHP Handbook also gives you important information about your OHP benefit package, covered and non-covered services, and dental plan information. You can ask for a copy by calling OHP Client Services at 800-273-0557, TTY 711.

How to Contact Us

If you have questions, or need assistance you can:

Call us:

541-768-4550
Toll-Free 1-800-832-4580
TTY 1-800-735-2900
Our phone hours are:
Monday-Friday 8:00am to 8:00pm

Fax us:

541-768-6701

Come see us:

2300 NW Walnut Blvd.
Corvallis, Oregon 97330
Our office hours are:
Monday-Friday: 8:30am to 5:00pm

Visit us online:

<https://www.ihntogether.org/>

What is a Coordinated Care Organization (CCO)?

InterCommunity Health Network is a Coordinated Care Organization (CCO). We are a group of all types of health care providers who work together for people on OHP in our community. Some groups in our CCO are:

Benton County

Benton County Health Department

Children and adults can come into these community centers for physical and mental health care, addiction and pharmacy services:

- Benton Health Center, Corvallis; 541-766-6835
- Lincoln Health Center, Corvallis; 541-766-3546
- Monroe Health Center, Monroe; 541-847-5143
- Linn County Health Department, Albany; Telephone: 541-967-3888 Toll free: 1-800-304-7468, TTY/TTD: 1-800-735-2900

The Corvallis Clinic

Provides care for children and adults; they have 100 providers in 27 different specialties.

Lincoln County

Lincoln County Health Department

Lincoln Community Health Centers are clinics operated by Lincoln County Health and Human Services. The clinics provide mental health and addiction services in Lincoln County. They include clinics in Lincoln City, Newport, South Beach and each of the four public high schools.

Mental Health and Addictions Sites

- Newport, 36 SW Nye Street; 541-265-4179
- Lincoln City, 4422 NE Devils Lake Blvd.; 541-557-2700
- South Beach, 4909 South Coast Highway, Suite 1; 541-574-5960

School-Based Health Center Sites

- Newport High School, 322 NE Eads Street; 541-265-9281
- Taft High School, 3780 SE Spyglass Ridge; 541-996-2115
- Toledo High School, 1800 NE Sturdevant Road; 541-336-5104
- Waldport High School, 320 Lower Crestline Drive; 541-563-7666

Linn County

Linn County Health Department

Children and adults can come into these community centers for mental health care, addiction and pharmacy services.

- Office hours: 8:30am - 12:00pm and 1:00pm – 5:00pm
- Phone number: 541-967-3888

Mental health and Addiction Sites

- Albany, 445 SE 3rd Avenue SW; 541-967-3866
- Lebanon, 1600 S. Main; 541-451-5932

Mid-Valley Behavioral Care Network

- Mid-Valley Behavioral Care offers a range of mental health and chemical dependency services in Linn County.

Local Health Care Providers

See the IHN-CCO Provider Directory for a complete listing of providers. You can find it at

<https://www.ihntogether.org/>, or call our Customer Service at 541-768-4550, toll-free 1-800-832-4580 or TTY 1-800-

735-2900 for a copy.

Samaritan Health Plans

Samaritan Health plans manages the health insurance functions of IHN-CCO

Samaritan Mental Health

Samaritan Mental Health provides inpatient mental health care along with outpatient mental health care services.

What is the Oregon Health Plan (OHP)?

The Oregon Health Plan (OHP) is a program that pays for low-income Oregonians' health care. The State of Oregon and the US Government's Medicaid program pay for it. OHP covers doctor visits, prescriptions, hospital stays, dental care, mental health services, help with addiction to cigarettes, alcohol and drugs, and transportation to health care appointments. OHP can provide hearing aids, medical equipment and home health care if you qualify.

OHP Supplemental is for children through age 20, and pregnant women. It covers glasses and additional dental care. CAWEM (Citizen Alien Waived Emergency Medical) covers emergency services for non-US citizens. CAWEM plus also covers childbirth. Customer Service can tell you which benefits you qualify for.

OHP does not cover everything. A list of the diseases and conditions that are covered, called the Prioritized List of Health Services, is online at <http://www.oregon.gov/OHA/HPA/CSI-HERC/Pages/Prioritized-List.aspx>. Other diseases and conditions usually are not covered by OHP. Those conditions could be covered if treating them will help a patient's covered condition.

CCOs (Coordinated Care Organizations) are a type of managed care. The Oregon Health Authority (OHA) wants people on OHP to have their health care managed by private companies set up to do just that. OHA pays managed care companies a set amount each month to provide their members the health care services they need.

Health services for OHP members not in managed care are paid directly to OHA. This is called fee-for-service (FFS) because OHA pays providers a fee for services they provide. It is also called an open card. Native Americans and Alaska natives on OHP can choose to receive managed care or FFS. People on both Medicare and OHP can change from a CCO to FFS anytime. Any CCO member who has a good reason to have FFS can ask to leave managed care. CCOs sometimes provide services that FFS OHP doesn't. OHP Client Services at 800-273-0557 can help you understand and choose the best way to receive your health care.

How We Coordinate Your Care

IHN-CCO coordinates the care you receive by bringing together mental and other health services. By working closely with you and our providers we are able to limit barriers and give you better care.

We want you to get the best care possible. We sometimes provide services that FFS OHP does not cover. These are non-medical services that IHN-CCO may pay for in special situations (formerly called flexible services)

Another way we coordinate your care is ask our providers to be recognized by the Oregon Health Authority (OHA) as a Patient-Centered Primary Care Home (PCPCH). That means they can receive extra funds to follow their patients closely, and make sure all their medical, dental and mental health needs are met. You can ask your clinic

or provider's office if it is a PCPCH.

IHN covers most of your mental health needs. There are certain situations in which we are unable to cover some services but it is common that OHP will cover these services on a fee-for-service basis. Some, but not all, of these services include;

- Mental health prescription drugs
- Behavioral rehabilitative services
- Death with Dignity
- Hospice services for members in Skilled Nursing Facilities (SNF)
- School based services that are reimbursed with the educational services program
- Services provided to CAWEM recipients

Coverage of the above benefits are not guaranteed and OHP customer services will be able to help you. If you need any of the above services please contact OHP member services at 1-800-273-0557.

Care Helpers

There may be times when you need help getting the right care. Your primary care team may have people specially trained to do this. These people are called Care Coordinators, Community Health Workers, Peer Wellness Specialists, and Personal Health Navigators. Please call our Customer Service at 541-768-4550, toll-free 1-800-832-4580 or TTY 1-800-735-2900 for more information.

Culturally-Sensitive Health Education

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

Several healthy living programs and activities are available for you to use. The health education programs include self-care, prevention, and disease self-management. For information about these services, please see our webpage at <https://www.ihntogether.org/> or call Customer Service at 541-768-4550, toll-free 1-800-832-4580 or TTY 1-800-2900.

Native Rights

American Indians and Alaska natives can receive their care from an Indian Health Service (IHS) clinic or tribal wellness center. This is true whether you are in a CCO or have FFS (fee-for-service) OHP. The clinic must bill us the same as our network providers.

Traditional and Certified Traditional Health Workers

A Traditional Health Worker means a community health worker, peer wellness specialist, personal health navigator, peer support specialist or birth doula. A Certified Traditional Health Worker is one of these types of people who has completed a training program and is certified by the Oregon Health Authority. For information on

how to get services from these providers contact our Customer Service at 541-768-4550, toll-free 1-800-832-4580 or TTY 1-800-735-2900.

Intensive Care Management (Care Coordination) Services

IHN-CCO calls this Care Coordination Services. IHN-CCO has nurses who work with you, your family, and your providers to coordinate your care. These nurses and other care coordinators help members who are older, disabled, or have other special needs. However, any IHN-CCO member may ask for care coordination services.

Care coordination services include:

- Helping members understand their benefits and the process for getting services or supplies.
- Coordinating health care with doctors, other providers and community agencies.
- Working with members who are having problems getting care.
- Finding other resources for members

If you have questions, need more help, or want to get in touch with a Care Coordinator, please call our Customer Service Department at 541-768-4550, toll free 1-800-832-4580, or TTY 1-800-2900.

Case Management Services

In addition to Intensive Care Management (Care Coordination) Services, IHN-CCO has case management services to help members who have chronic medical conditions (such as diabetes, asthma, or heart disease). Nurses and other care management staff can work with members, health care providers, or state caseworkers to help find ways to meet the health care needs of these members.

If you have questions or want to know more about case management services, please call our Customer Service Department at 541-768-4550, toll-free 1-800-832-4580 or TTY 1-800-735-2900.

Involvement in CCO Activities

IHN-CCO has a Community Advisory Council. We invite you to apply to serve on the Council. Most of the Council members are Oregon Health Plan members. Other members are from government agencies and groups that provide OHP services. If you are interested in being a member of the Community Advisory Council, please call Customer Service for an application.

Getting Started

Coverage letter

The coverage letter is for your information only. You do not need to take it to your health care appointments. The coverage letter shows your branch office name, phone number, your worker's code, and the benefit package, copayment and plan information for everyone in your household. You will get a letter when:

- You are new to the Oregon Health Plan
- You have a new coordinated care plan or other health insurance
- You get a new ID Card

- Your benefits, address, or household members have changed

Benefit Packages

The health care services you may receive are based on the benefit packet you have been assigned. As an IHN-CCO member, you have all the benefits covered under the Oregon Health Plan. Your Oregon Health ID and coverage letter will tell you what benefit package you have. IHN-CCO provides mental health services for you as part of your OHP benefit package.

Your Member ID Cards

Oregon Health Identification (ID)

Your Oregon Health ID used to be called your DHS Medical Care ID. If you still have your DHS Medical Care ID, you can still use it. Your Oregon Health ID is a card the size of a business card that lists your name, your OHP ID number and the date it was issued. Every person in your household who is eligible receives their own Oregon Health ID. Take your Oregon Health ID to all health care appointments. Providers use the information on the card to check your eligibility.

IHN-CCO Identification

Your IHN-CCO identification card will be mailed to you after signing up for our plan. Each family member signed up for IHN-CCO will get their own card. Bring this card to your appointments and show it to the front desk. If you do not get your card, or you need a new one, contact our Customer Service at 541-768-4550, toll-free 1-800-832-4580 or TTY 1-800-2900.

Becoming an IHN-CCO Member

When you become a member of IHN-CCO you receive a New Member Packet. Please keep these materials for future use. The following materials are in your packet.

- Member Handbook, including your member rights and responsibilities and our Notice of Privacy Practices
- Welcome letter

As an IHN-CCO member you have the right to choose your Mental Health provider. If you wish to change your Mental Health provider please call our Customer Service Department at 541-768-4550, toll-free 1-800-832-4580 or TTY 1-800-735-2900. A Provider Directory is available on our website at <https://www.ihntogether.org/find-care>. We will send you a copy on request.

Let us know if you are not able to see your Mental Health Provider during the first month of enrollment and you need services such as prescriptions, supplies, or other items.

Members with Medicare or Other Insurance

If you have both Medicare and the Oregon Health Plan (Medicaid), you are a “dual eligible” member. IHN-CCO will coordinate your Medicaid benefits with your Medicare benefits if you have both. If you have other insurance coverage and are on IHN-CCO, call your caseworker or our Customer Service Department and let us know about your other insurance.

Getting Healthcare

Making the Most of Your Health Care Visit

It is important to meet with a health care provider to prevent illnesses, as well as when you are sick. It's best to prepare for meeting with doctors, dentists, counselors, nurse practitioners, dentists or pharmacists. When you are prepared for your appointment, you get better care. This way, both you and your health care provider can make the most of your time together! Ask your provider's office about their ADA accessibility, like ramps and elevators, and non-English languages spoken if you have special needs for your appointment.

How to Make an Appointment

Call your mental health provider. If you do not have a Mental Health provider and need one, please call our Customer Service Department at 541-768-4550, toll-free 1-800-832-4580 or TTY 1-800-735-2900 for help choosing a Mental Health Provider. You can also request a Provider Directory to be sent to you with our in-network providers so you can choose your own provider.

Here are some helpful tips when making an appointment with your Mental Health provider:

- Tell the provider's office you are an IHN-CCO member;
- Give them your name, ID number, and a phone number where you can be reached, so your provider can contact you when needed.
- Make sure to say how soon you need to go in. If you think your needs are urgent, tell the office and explain why.
- If you need an interpreter for your visit, make sure you tell the receptionist what language you speak at least 3 days before the appointment.
- You can also ask your provider's office about their ADA accessibility if you use a wheelchair or walker.
- Make separate appointments for each of your family members.

Before Your Appointment

What to take with you:

- Always bring your IHN-CCO ID card and Oregon Health ID card
- A friend or family member: another person who can help listen for important details during your appointment
- A list with:
 - Questions you have about your health or treatment.
 - Medicines you are taking at this time.

If you are not able to be at your appointment for any reason, call your provider's office as soon as you can to cancel or change the appointment.

At Your Appointment

- Be on time.
- Relax: do not be nervous, take slow, deep breaths.
- Ask your provider the following questions:
 - What is my main problem?
 - What do I need to do?

- Why is it important for me to do this?
- Get all of the answers you need. If you do not understand something, ask to have it repeated or explained.

Write down information that will help you remember details of the visit. You can ask for a copy of the doctor's instructions.

Before You Leave Your Appointment

Be clear on what you need to do next:

- Know where to go for any follow up visits. Special treatment? Tests? Fill a prescription?
- Understand why it is important to follow your provider's instructions.
- Ask when you should visit a doctor or another health care provider again.

Cancelling Appointments

If you are not able to be at your appointment for any reason, call your doctor's office as soon as you can to cancel or change the appointment. Your provider's office will schedule another appointment for you and make the time available for another patient. Each office has its own policies about appointments. They will tell you about their policy at your first visit. The policy says what to do if you will be late for an appointment or if you need to cancel an appointment. The policy also says what can happen if a person misses or comes late to too many appointments. Be sure to ask questions if you do not understand the office's policy.

Missed Appointments

It is important to show up for your scheduled appointments. Your provider schedules time to see you. To make sure that you have the best care, please tell your provider if you cannot make your appointment. If you miss appointments without telling your provider, they could decide to no longer see you as a patient.

Getting a Ride

If you need help getting to your appointments, please call Cascade West Ride Line. We, Cascade West Ride Line, can pay for rides to OHP-covered services. Cascade West Ride Line may give you a bus ticket or taxi fare. Or they may pay you, a family member or friend for gas to drive you. We can help if you don't have a way to get to your doctor, dentist, or counselor, and in some emergencies, to a pharmacy.

If you need to schedule a ride, please call Cascade West Ride Line Monday through Friday, 8:00am-12:00pm and 1:00pm-5:00pm at 541-924-8738, Toll-Free 1-866-724-2975, TTY 711.

- Call at least two days in advance
- Call to cancel if plans change

Interpreter Services

You can have a language or sign language interpreter at your appointments if you want one. When you call for an appointment, tell your provider's office that you need an interpreter and in which language. Information on Health Care Interpreters is at www.Oregon.gov/oha/oei.

To make sure that an interpreter will be at your appointment, please have this information ready when you call:

- The name of the person or persons the appointment is for
- The member's ID number
- A home phone number
- The date and the time of the appointment
- The name of the health care provider
- The full address of the appointment
- The phone number of the provider's office
- The reason for the appointment

To arrange an interpreter, either spoken or sign language, please call your provider's office. Call at least 3 days before your appointment and have the information above ready. If you cannot keep the appointment, call your provider's office right away.

Second Opinion

If you want a second opinion about your treatment options, ask your PCP who could give you another opinion. If you want to see a provider outside our network, you or your provider will need to get approval from IHN-CCO first.

Prioritized List of Health Services

Oregon Health Plan members' benefits and treatments are based on a list of health services ranked by the Health Evidence Review Commission (HERC), called the Prioritized List of Health Services.

OHP members' covered benefits are based on where their conditions and treatments are on the list. Not all services are covered. OHP covers services for finding out what's wrong and those services that are the most effective. This includes diagnosing a condition that is not on the covered list.

Quitting Tobacco

If you want to quit using tobacco products, but can't do it alone, IHN-CCO covers services to help you. Some of the services we cover are:

- Treatment sessions (up to 10 sessions every three months)
- Prescription and Over-the-Counter products (such as gum, patches and oral medications)
- Individual and group counseling

IHN-CCO also offers other ways to help you stop using tobacco, including telephone-based programs. You can call the Oregon Tobacco Quit Line at:

- 1-800-Quit-Now (1-800-784-8669) for English speaking members
- 1-855-Dejelo-Ya (1-855-335-3569) for Spanish speaking members
- 1-877-777-6534 for TTY users

For more information about class options, call our Customer Service Department at 541-768-4550, toll-free 1-800-832-4580, or TTY 1-800-735-2900.

Addiction (drug and alcohol) Treatment

If you think you need to see someone for an alcohol or drug problem, talk to your PCP or call a drug and alcohol provider directly. Drug and alcohol providers have extra training and experience to help people who also get

mental health services. You do not need a referral from your PCP for these services. For a list of contracted providers, see IHN-CCO's full provider directory on our website at www.samhealthplans.org/ihn-cco. You can also call our Customer Service Department at 541-768-4550, toll-free 1-800-832-4580, or TTY 1-800-735-2900 with questions.

Getting Mental Health Care

Mental Health Services

Mental Health services are available to all OHP members. You can get help for depression, anxiety, family problems and difficult behaviors, to name a few. We cover mental health assessment to find out what kind of help you need, case management, therapy, and care in a psychiatric hospital if you need it.

As a member, you can have an assessment of your mental health needs. Call your county mental health agency and tell them you want to make an appointment with a counselor. See pages 23-25 of this handbook for agency information. You do not have to be sure you have a mental health problem to make an appointment. If you think you might, that is enough. A counselor will be happy to talk with you. At your first appointment with them you will decide if you should get mental health treatment. You will also decide if other services might help you.

Important: *You do not need a referral to get mental health services from an In-network provider.* Please see our Provider Directory for a list of network providers.

The services and programs we offer are below.

Routine Mental Health Services

Our mental health treatment agencies are listed in the next section of this handbook. They are arranged by county and then by city. You can call any of these agencies to make an appointment for routine services. You do not need a referral from a doctor or anyone else to do this.

If you need help choosing an agency or want a list of providers at each agency: you can call our Customer Service Department at 541-768-4550, toll-free 1-800-832-4580, or TTY 1-800-735-2900.

Please have your IHN-CCO Member ID card with you when you call. The treatment agency will use the information on your ID card to check your eligibility. You will also be asked for the name of the city or county where you live. This is so we can find an office close to you. We may also ask for basic information about your needs and concerns. We may ask your age or whether you have any special needs.

We may ask if you have been to any of our agencies in the past. This information will help us decide which agency may best meet your needs.

Important: Always bring your IHN-CCO Member ID card with you to each appointment.

Adult Mental Health Services

We have a program to help adults in residential settings get better mental health care. It also helps adults with mental illness get more and better services in the community. This could be outpatient or residential

treatment, adult foster care, or living in a supported apartment. The goal is to keep people healthy outside of the State Hospital.

Children’s Mental Health Services

Children with behavioral challenges are served through Wraparound or intensive care coordination. Intensive care coordination services are individualized to meet the child’s and family’s needs. System of Care and Wraparound planning involve everyone in the child’s life – schools, community organizations, doctors, criminal justice and others – in forming a team around the child and family to plan supportive services. Another program for children with mental illness is known as Integrated Service Array (ISA).

If you think your family could gain from these services, please call your county mental health program. They will decide if your child is eligible.

Mental Health Prescriptions

IHN-CCO does not cover all prescriptions. Most medications that people take for mental illness are paid directly by the Oregon Health Authority (OHA). Please show your pharmacy your Oregon Health ID and your IHN-CCO ID cards. The pharmacy will know where to send the bill.

Covered Mental Health Benefits

This table shows some of your covered mental health benefits as a member of IHN-CCO/OHP. These services are covered when given by an In-Network Provider. If you think you need a service that is not on this table, you or your provider should contact our Customer Service Department at 541-768-4550, Toll-Free 1-800-832-4580 or TTY 1-800-735-2900, before the service is given.

The services listed in the table are subject to the Prioritized List of Health Services and IHN-CCO/OHP rules. Benefits are subject to change.

Service	Your Cost*	Approval/Referral	Limits to Care
Mental Health			
Exceptional Needs Services	\$0	Not required	No limit
Inpatient Services	\$0	Approval required	No limit
Outpatient Counseling/Therapy	\$0	Not required	No limit with Contracted Provider.
Residential Services	\$0	Approval required	No limit
Alcohol and Drug Services			
Counseling/Therapy	\$0	Approval required	No limit with Contracted Provider.
Detox	\$0	Approval required	No limit with Contracted Provider.

Residential Treatment	\$0	Approval required	Approval based on OHP guidelines.
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* This cost only applies when services are given by an In-Network Provider. Any services with an Out-of-Network Provider must have prior authorization or approval, unless it is an emergency. If you do not get approval, you may have to pay. See pages 29-30 for more information.

Urgent Care

Always call your Mental Health Providers office first about any health problem. Someone will be able to help you day and night, even on weekends and holidays. If you can't reach your PCP's office about an urgent problem or they can't see you soon enough, you can go to the following urgent care or walk-in clinics without an appointment. If you don't know how urgent the problem is, call your PCP.

Urgent Care Providers

Albany

Geary Street Urgent Care
1700 Geary Street SE
 541-812-5500, TTY 1-800-735-2900
 Monday-Friday: 8:00am-8:00pm
 Saturday: 9:00am-6:00pm
 Sunday: 10:00am-6:00pm

Samaritan North Albany Urgent Care
400 NW Hickory Avenue, Suite 303
 541-812-5275, TTY 1-800-735-2900
 Monday-Friday: 9:00am-8:00pm
 Saturday: 9:00am-6:00pm
 Sunday: 10:00am-6:00pm

Halsey

SamCare Mobile Medical
33184 Highway 228
 541-451-7873, TTY 1-800-735-2900
 Monday-Friday: 9:00am-8:00pm
 Saturday: 9:00am-6:00pm
 Sunday: 10:00am-6:00pm

Lebanon

Samaritan Urgent Care Clinic
35 Mullins Drive, Suite 2
 541-451-7915, TTY 1-800-735-2900
 Monday-Friday: 8:00am-8:00pm
 Saturday: 9:00am-6pm
 Sunday: 10:00am-6:00pm

Lincoln City

Corvallis

Samaritan Urgent Care
5234 SW Philomath Blvd
 541-768-4970, TTY 1-800-735-2900
 Monday-Friday: 8:00am-8:00pm
 Saturday: 9:00am-6:00pm
 Sunday: 10:00am-6:00pm

The Corvallis Clinic Immediate Care
3680 NW Samaritan Drive
 541-754-1282, TTY 1-800-735-2900
 Monday-Friday: 8:00am-8:00pm
 Saturday-Sunday: 10:00am-5:00pm

Sweet Home

Sweet Home Family Medicine Walk-In Clinic
679 Main Street
 541-451-6250, TTY 1-800-735-2900
 Monday-Friday: 8:00am-5:00pm

Newport

Samaritan Pacific Walk-In Clinic
930 SW Abbey Street, Suite F
 541-574-4860, TTY 1-800-735-2900
 Monday-Friday: 9:00am-6:30pm
 Saturday: 10:00am-4:00pm
 Sunday: 10:00pm-4:00pm

Depoe Bay

Samaritan Coastal Walk-In Clinic
825 NW Highway 101, Suite A
541-996-7480, TTY 1-800-735-2900
Monday-Friday: 8:00am-8:00pm
Saturday-Sunday: 9:00am-6:00pm

Samaritan Depoe Bay Walk-In Clinic
531 N Highway 101, Suite A
541-765-3265, TTY 1-800-735-2900
Monday-Friday: 8:00am-5:00pm

Mental Health Treatment Agencies

Linn County

ALBANY

Linn County Mental Health Services – Adult Outpatient Program

Office location: 445 3rd Ave SW
Albany, OR 97321

Send mail to: P.O. Box 100
Albany, OR 97321

Services are for adults 18 years and older

Services are available in English and Spanish; services in other languages are available – we will provide a free interpreter.

Office hours: 8:30am-5:00pm on Monday, Wednesday, Thursday and Friday
8:30am-7:00pm on Tuesday

Website: www.co.linn.or.us/Health/mental_health/mh.htm

Phone: 541-967-3866
Toll-Free: 1-800-304-7468
TTY/TTD: 1-800-735-2900

Linn County Mental Health Services – Children’s Outpatient Program

Office location: 445 3rd Ave SW
Albany, OR 97321

Send mail to: P.O. Box 100
Albany, OR 97321

Services are for children and youth up to 18 years old

Services are available in English and Spanish; services in other languages are available – we will provide a free interpreter.

Office hours: 8:30am-5:00pm on Monday, Wednesday, Thursday and Friday
8:30am-7:00pm on Tuesday

Website: www.co.linn.or.us/Health/mental_health/mh.htm

Phone: 541-967-3866
Toll-Free: 1-800-304-7468
TTY/TTD: 1-800-735-2900

Linn County Mental Health Services – Community Support Services & Crisis Team

Office location: 445 3rd Ave SW
Albany, OR 97321

Phone: 541-967-3866
Toll-Free: 1-800-304-7468
TTY/TTD: 1-800-735-2900

Community Support Services are available for adults 18 years and older with serious mental illness.

Crisis Team walk-in services are for children, youth and adults.

Services are available in English and Spanish; services in other languages are available – we will provide a free interpreter.

Office hours: 8:30am-5:00pm on Monday, Wednesday, Thursday and Friday

8:30am-7:00pm on Tuesday

Website: www.co.linn.or.us/Health/mental_health.ml.htm

LEBANON

Linn County Mental Health Services

Office location: 1600 S. Main
Lebanon, OR 97355

Phone: 541-451-5932
Toll-Free: 1-888-451-2631
Oregon Relay TTY or Voice: 711

Services are available for children, youth and adults

Services are available in English and Spanish; services in other languages are available – we will provide a free interpreter.

Office hours: 8:30am-5:00pm on Monday-Friday

Closed from Noon-1:00pm

Website: www.co.linn.or.us/Health/mental_health.ml.htm

SWEET HOME

Linn County Mental Health Services

Office location: 799 E. Long St.
Sweet Home, OR 97386

Phone: 541-367-3888
Toll-Free: 1-800-920-7571
Oregon Relay TTY or Voice: 711

Services are for children, youth and adults

Services are available in English and Spanish; services in other languages are available – we will provide a free interpreter.

Office hours: 8:30am-5:00pm on Monday-Thursday

Closed on Friday's; Call Lebanon office above

Closed from Noon-1:00pm on Monday through Thursday

Website: www.co.linn.or.us/Health/mental_health/mh.htm

Benton County

CORVALLIS

<p><i>Benton County Mental Health</i> Office location: 530 NW 27th Street Corvallis, OR 97339</p> <p>Services are for children, youth and adults Services are available in English and Spanish; services in other languages are available – we will provide a free interpreter upon request. Sometimes evening may be available for non-routine family meetings. Office hours: 8:00am-5:00pm on Monday through Friday Website: https://www.co.benton.or.us/health/page/behavioral-health</p>	<p>Phone: 541-766-6835 Fax: 541-766-6164</p>
<p><i>Samaritan Mental Health Family Center</i> Office location: 3517 NW Samaritan Drive Suite 101 Corvallis, OR 97330</p> <p>Services are for children, adolescents and families Services are available in English and Spanish; services in other languages are available – we will provide a free interpreter upon request. Office hours: 8:00am-5:00pm on Monday through Friday After hours by appointment Website: https://www.samhealth.org/find-a-location/s/samaritan-mental-health-family-center</p>	<p>Phone: 541-768-4620 Fax: 541-768-4621</p>

Lincoln County

NEWPORT

<p><i>Lincoln County Mental Health</i> Office location: 36 SW Nye Street Newport, OR 97365</p> <p>Services are for children, youth and adults Services are available in English and Spanish; services in other languages are available – we will provide a free interpreter upon request. Sometimes evening may be available for non-routine family meetings. Office hours: 8:00am-5:00pm on Monday through Friday Website: http://www.co.lincoln.or.us/hhs/page/mental-health-0</p>	<p>Phone: 541-265-4179</p>
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LINCOLN CITY

<p><i>Lincoln County Mental Health</i> Office location: 4422 NE Devils Lake Blvd Suite 2 Lincoln City, OR 97367</p> <p>Services are for children, youth and adults Services are available in English and Spanish; services in other languages are available – we will provide a free interpreter upon request. Sometimes evening may be available for non-routine family meetings. Office hours: 8:00am-5:00pm on Monday through Friday Website: http://www.co.lincoln.or.us/hhs/page/mental-health-0</p>	<p>Phone: 541-994-1882</p>
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If You Need Care Out-of-Town

If you get sick when you are away from home, call your Mental Health Provider. If you need urgent care, find a local doctor who will see you right away. Ask that doctor to call your PCP to coordinate care.

Medical Emergencies

If you think that you have a real emergency, call 911 or go to the Emergency Room (ER) at the nearest hospital. You don't need permission to get care in an emergency. An emergency might be chest pain, trouble breathing, bleeding that won't stop, or broken bones. Please don't use the ER for things that can be treated in your doctor's office. Sometimes ERs have a long, uncomfortable wait and take hours to see a doctor, so you should only go there when you have to.

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 and no approval or authorization is needed. For follow-up care after the emergency, call your Mental Health Provider.

OHP covers emergency and urgent care anywhere in the United States, but not outside the US. That means OHP will not pay for any care you get in Mexico or Canada.

Care after an Emergency

Emergency care is covered until you are stable. Call your Mental Health Provider or mental health provider for follow-up care. Follow-up care once you are stable is covered but not considered an emergency.

Hospitals Near You

Hospital care and emergency care is provided at the local locations listed below. All of the hospitals listed have language interpreter services available.

ALBANY Samaritan Albany General Hospital (SAGH)

1046 6th Ave SW, Albany, OR 97321
541-812-4000 or TTY 1-800-735-2900

CORVALLIS Good Samaritan Regional Medical Center (GSRMC)

3600 NW Samaritan Drive, Corvallis, OR 97330
541-768-5111 or TTY 1-800-735-2900

LEBANON Samaritan Lebanon Community Hospital (SLCH)

525 North Santiam Highway, Lebanon, OR 97355
541-258-2101 or TTY 1-800-735-2900

LINCOLN CITY Samaritan North Lincoln Hospital (SNLH)

3043 NE 28th Street, Lincoln City, OR 97367
541-994-3661 or TTY 1-800-735-2900

NEWPORT Samaritan Pacific Communities Hospital (SPCH)

930 SW Abbey Street, Newport, OR 97365

541-265-2244 or TTY 1-800-735-2900

Crisis and Urgent Mental Health Services

Crisis services are available 24 hours per day, 7 days per week. A mental health crisis is when a person needs help quickly so their mental health problem or concern does not become an emergency. A mental health crisis can be such things as feeling out of control, feeling like you may harm yourself or others, or anything that you believe needs immediate attention.

Mental Health Emergencies and Crises

A mental health emergency is feeling or acting out of control, or a situation that might harm you or someone else. Get help right away; do not wait until there is real danger. Call the Crisis Hotline in the table below, call 911, or go to the ER.

If you already have a provider, they will tell you how to reach them during a mental health crisis. If you are having a crisis, follow the plan you made with your provider.

If you do not have a provider, or cannot reach your provider, call the number below for your county, or call our Customer Service Department at 541-768-4550, toll-free 1-800-832-4580, or TTY 1-800-735-2900. Tell the person who answers that you are having a mental health crisis. You will be connected to a local crisis service worker as soon as possible. The crisis worker will talk with you to help decide the best way to handle the crisis. Tell them about your OHP insurance as soon as you can.

LINN COUNTY During business hours: 8:00am-5:00pm, Monday through Friday 24 hours a day, 7 days a week:	Phone: 541-967-3866 Phone: 1-800-304-7468
BENTON COUNTY During Business hours: 8:00am,-5:00pm, Monday through Friday 24 hours a day, 7 days a week	Phone: 541-766-6835 Phone: 1-888-232-7192
LINCOLN COUNTY During business hours: 8:00am – 4:30pm Monday through Friday 24 hours a day, 7 days a week	Phone: 541-265-4947 Phone: 1-866-266-0288

Statewide peer-run warm line

This Warm Line is a telephone support service designed and provided by people who have had challenges in mental health. They are able to support their peers who are struggling with a variety of mental health issues, who are having huge and painful feelings. Sometimes people just need a friendly person to listen and care about what they are going through. Peer counselors are available free to all Oregon residents. Call **1-800-698-2392** to talk to a peer counselor.

For more information about the Warm Line and when you can call them, visit their website at

www.communitycounselingsolutions.org/warmline/ or call our Customer Service at 541-768-4550, toll-free 1-800-832-4580, or TTY 1-800-735-2900.

Declaration for Mental Health Treatment

Oregon has a form for writing down your wishes for mental health care if you have a mental health crisis, or if for some reason you can't make decisions about your mental health treatment. The form is called the Declaration for Mental Health Treatment. You should complete it while you can still understand and make decisions about your care. The Declaration for Mental Health treatment states what kind of care you want if you ever need that kind of care but are unable to make your wishes known. Only a court and two doctors can decide if you are not able to make decisions about your health care.

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

A declaration form is only good for three (3) years. If you become unable to decide during those three (3) 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: <http://cms.oregon.gov/oha/amh/forms/declaration.pdf>. If your provider does not follow your wishes as stated in your Declaration for Mental Health Treatment, you can complain. A form for this is at: <https://public.health.oregon.gov/ProviderPartnerResources/HealthcareProvidersFacilities/HealthcareHealthCareRegulationQualityImprovement/Documents/ALLFACILITIESComplaintIntakeForm.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

Billing Information

OHP members don't pay bills for covered services. Your Mental Health provider can send you a bill only if all of the following are true:

- The service is something that your OHP plan does not cover
- Before you received the service, you signed a valid Agreement to Pay, OHP form number 3165 (also called a waiver)
- The form showed the estimated cost of the service
- The form said that OHP does not cover the service
- The form said you agree to pay the bill yourself

These protections usually only apply if the provider knew or should have known you had OHP. Always show your IHN-CCO ID card. These protections apply if the provider participates in the OHP program (but most providers

do).

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

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

Copay

As an IHN-CCO member, you do not owe a copay to your providers for health care visits or services. Call OHP at 1-800-699-9075 if you have questions about your benefits

What Should I do if I Get a Bill?

Even if you don't have to pay, please do not ignore medical bills – call us right away. Many providers send unpaid bills to collection agencies and even sue in court to get paid. It is much more difficult to fix the problem once that happens. As soon as you get a bill for a service that you received while you were on OHP, you should:

1. Call the provider, tell them that you were on OHP, and ask them to bill IHN-CCO
2. Call our Customer service at 541-768-4550, Toll-Free 1-800-835-4580, or TTY 1-800-735-2900 right away and say that a provider is billing you for an OHP service. We will help you get the bill cleared up. Do not wait until you get more bills.
3. You can appeal by sending your provider and us a letter saying that you disagree with the bill because you were on OHP at the time of the service. Keep a copy of the letter for your records.
4. Follow up to make sure we paid the bill.
5. If you receive court papers, call us right away. You may also call an attorney or the Public Benefits Hotline at 1-800-520-5292 for legal advice and help. There are consumer laws that can help you when you are wrongfully billed while on OHP.

I Was in the Hospital and my Plan Paid for That, But Now I am Getting Bills From Other Providers. What Can I Do?

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 we paid the hospital bill, it doesn't mean that we paid the other providers. 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 IHN-CCO. You should follow steps 1-5 above for each bill you get.

When Will I Have to Pay on OHP?

- You may have to pay for services that are covered by OHP if you see a provider that does not take OHP or is not part of our provider network. Before you get care or go to a pharmacy, make sure that they are in our provider network.
- You will have to pay for services if you weren't eligible for OHP when you received the service.
- You will have to pay for services not covered by OHP if you sign a detailed Agreement to Pay for that specific service before you receive it.

Payment for Non-Covered Services and Other Insurance

You can choose to get non-covered mental health treatment and services. The provider's office should tell you up-front if a service or treatment is not covered. They will tell you how much it costs. You must sign an Agreement to Pay form to say you will pay the bill for the non-covered service or treatment.

Tell the provider's office and your caseworker right away if you have other insurance, such as Medicare or private insurance.

Bring the ID card for your other insurance to each appointment with your provider. Your provider must bill any other insurance before they can bill us for your services. We will only pay the provider after the other insurance has paid, except in some special cases. We will only pay for mental health services covered by OHP.

Physician Incentives

We pay a bonus or reward to our providers for keeping you healthy. We do not pay or reward our providers for limiting services and referrals.

Member Rights and Responsibilities

Your "rights" are the things you can count on getting from IHN-CCO. Your "responsibilities" are the things we need from you. As a person with OHP coverage, you have many rights and responsibilities.

As an OHP Client, You Can

- Be treated with respect and dignity, the same as other patients
- Choose your provider
- Tell your provider about all your health concerns
- Have a friend or helper come to your appointments, and an interpreter if you want one
- Ask for services as close to home as possible, and in a non-traditional setting that is easier for you to use
- Actively help develop your treatment plan
- Get information about all of your OHP-covered and non-covered treatment options
- Help make decisions about your health care, including refusing treatment, except for court-ordered services
- Be free from any form of restraint or seclusion
- Complain about different treatment and discrimination
- Get a referral to a specialist if you need it, and for a second opinion if you want one
- Complain about different treatment and discrimination
- Get care when you need it, any time of day or night, including weekends and holidays

- Get mental health, and family planning services without a referral
- Get help with addiction to cigarettes, alcohol and drugs without a referral
- Get handbooks and letters that you can understand
- See and get a copy of your health records, unless your doctor thinks it would be bad for you
- Limit who can see your health records
- Get a *Notice of Action* letter if you are denied a service or there is a change in service level
- Get information and help to appeal denials and ask for a hearing
- Make complaints and get a response without a bad reaction from your plan or provider
- Make suggestions about the member rights and responsibilities policy
- Ask the Oregon Health Authority Ombudsperson for help with problems at 503-947-2346 or toll free at 1-877-642-0450, TTY 711.

As an OHP Client, You Agree to

- Find a doctor or other provider you can work with and tell them all about your health
- Treat providers and their staff with the same respect you want
- Bring your medical ID cards to appointments; tell them that you have OHP and any other health insurance.
- Let your provider know if you were hurt in an accident
- Be honest with your providers and give them all needed information to get the best service possible
- Be aware of your health problems and work with your provider to make agreed-upon treatment goals
- 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
- Call OHP Client Services at 1-800-699-9075 when you move, are pregnant or no longer pregnant
- Report other health insurance at www.ReportTPL.org.

Unfair Treatment

If you think IHN-CCO or a provider gave unfair treatment, please tell us.

We must follow state and federal civil rights laws. We cannot treat people unfairly in any program or activity because of a person's:

- | | |
|-------------------|----------------------|
| • Age | • National Origin |
| • Color | • Race |
| • Disability | • Religion |
| • Gender Identity | • Sex |
| • Marital Status | • Sexual orientation |

Everyone has a right to enter, exit and use buildings and services. They also have the right to get information in a way they understand. We will make reasonable changes to policies, practices and procedures by talking with you about your needs.

To report concerns or get more information, please contact our Customer Service at:

541-768-4550

1-800-832-4580

TTY 1-800-735-2900

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: <http://www.hhs.gov/>
Email to: OCRComplaint@hhs.gov

Phone: 1-800-368-1019, 800-537-7697 (TDD)

Mail to:

U.S. Department of Health and Human Services Office for Civil Rights
200 Independence Avenue, S.W.
Room 509F HHH Bldg.
Washington, D.C. 20201

A Copy of Your Records

You can have a copy of your medical records. Your Primary Care Physician and Primary Care Dentist have most of your records, so you can ask them for a copy. They may charge a reasonable fee for copies. You have the right to request changes or corrections to your medical records. You can ask us for a copy of the records we have. We will not charge you a fee for the copies.

You can have a copy of your mental health records unless your provider thinks this could cause serious problems.

Your Records are Private

We only share your records with people who need to see them for treatment and payment reasons. You can limit who sees your records. If there is someone you don't want to see your records, please tell us in writing. You can ask us for a list of everyone we have shared your records with.

A law called the Health Insurance Portability and Accountability Act (HIPAA) protects your medical records and keeps them private. This is also called confidentiality.

We have a paper called Notice of Privacy Policies that explains in detail how we use our members' personal information. We will send it to you if you ask. Just call Customer Service and ask for our Notice of Privacy Practices

When to Report Fraud, Waste and Abuse?

It is important to report to IHN-CCO if you see or experience an act of fraud, waste and abuse. Examples of when you should report this are:

- If you see provider(s) charging for a service you didn't get
- If you or your family member is being abused by your provider
- Report any medical theft because it could cause a big problem for you, damage your credit rating, and waste taxpayer dollars.

End-of-Life Decisions and Advance Directives (Living Wills)

Some providers may not follow Advance Directives. Ask your providers if they will follow yours.

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

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, like 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 http://www.oregon.gov/DCBS/shiba/Documents/advance_directive_form.pdf. If you write an Advance Directive, be sure to talk to your providers and your family about it and give them copies. They can only follow your instructions if they have them.

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. For questions or more information contact Oregon Health Decisions at 1-800-422-4805 or 503-692-0894, TTY 711.

If your provider does not follow your wishes in your Advance Directive, you can complain. A form for this is at <https://public.health.oregon.gov/ProviderPartnerResources/HealthcareProvidersFacilities/HealthcareHealthCareRegulationQualityImprovement/Documents/ALLFACILITIESComplaintIntakeForm.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

Helpful Member Information

How to Change CCOs

When you have a problem getting the right care, please let us try to help you before changing CCOs. Just call our Customer Service Department at 541-768-4550, toll-free 1-800-832-4580, or TTY 1-800-735-2900, and ask for a Care Coordinator. If you still want to leave or change your CCO, call OHP Customer Service. Their numbers are 503-378-2666 and 1-800-699-9075.

If you want to change to a different CCO, call OHP Customer Services at 503-378-2666 or 1-800-699-9075. There are several chances for you to change, as long as another CCO is open for enrollment:

- If you do not want the CCO you've been assigned to, you can change during the first 90 days after you enroll
- If you move to a place that your CCO doesn't serve, you can change CCOs as soon as you tell OHP Customer Service about the move. The number is 1-800-699-9075
- You can change CCOs once each year
- If you are a Native American or Alaskan native, or are also on Medicare, you can change or leave your CCO anytime

Disenrollment

A CCO may ask the Division of Medical Assistance Programs (DMAP) to remove you from it if you:

- are abusive to CCO staff or your providers
- commit fraud, such as letting someone else use your health care benefits

Grievance System Information and Appeal Rights

How to Make a Complaint or Grievance

If you are very unhappy with IHN-CCO, your health care services or your provider, you can complain or file a grievance. We will try to make things better.

Just call our Customer Service Department at 541-768-4550, toll-free 1-800-832-4580, or TTY 1-800-735-2900, fax us your grievance to 541-768-9765, email SHPOGrcvTeam@samhealth.org, send us a letter to the address on page 3, or file it in person. We will call or write back in a week to let you know that we are working on it.

We will send you a letter in 5 working days explaining how we will address your complaint. We will not tell anyone about your complaint unless you ask us to. You can also complain to the Oregon Health Authority. Call Client Services at 1-800-273-0557 (TTY 711), or send your complaint to:

- Oregon Health Plan Client Services
P.O. Box 14520
Salem, Oregon 97309

Appeals and Hearings

If we **deny**, **stop** or **reduce** a mental health service your provider has ordered, we will mail you a **Notice of Action** letter explaining why we made that decision. The letter will explain how to appeal (ask us to change our decision). You have a right to ask to change it through an appeal, a state fair hearing, or both. You must ask no more than 60 days from the date on the **Notice of Action** letter.

How to Appeal a Decision?

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

- Calling our Customer Service Department at 541-768-4550, toll-free 1-800-832-4580, or TTY 1-800-735-2900, or
- Write us a letter and send it to address on page 3 or fax to us at 541-768-9765

- Filling out an Appeal and Hearing Request, OHP form number 3302
- You can also file in person at 2300 NW Walnut Blvd Corvallis, Oregon

If you want help with this, call and we can fill out an appeal form for you to sign. You can ask someone like a friend or case manager to help you. You may also call the Public Benefits Hotline at 1-800-520-5292 for legal advice and help. You will get a **Notice of Appeal Resolution** from us in 16 days letting you know if the reviewer agrees or disagrees with our decision. If we need more time to do a review, we will send you a letter saying why we need up to 14 more days.

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

If you Need a Fast Appeal

If you and your provider believe that you have an urgent mental health 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 3 workdays.

Provider Appeals

Your provider has a right to appeal for you when their physician's orders are denied by a CCO. You must give your provider written consent to appeal for you.

How to Get an Administrative Hearing

You can have a state fair hearing with an Oregon Administrative Law Judge. You will have 120 days from the date on your **Notice of Action** or **Notice of Appeal Resolution** to ask the state for a hearing. Your **Notice of Action** letter will have an Appeal and Hearing Request 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 3302.

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 www.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 decision to stop it. You must ask us to continue the service within 10 days of getting the **Notice of Appeal Resolution** that confirmed our denial. If you continue the service and the judge agrees with the original decision, you may have to pay the cost of the services that you received after the date on the **Notice of Appeal Resolution**.

Fast (Expedited) Hearing

If you and your provider believe that you have an urgent mental health problem that cannot wait for a regular hearing process, say that you need a fast (expedited) hearing and fax the Hearing Request form to the OHP Hearings Unit. We suggest that you include a statement from your provider explaining why it is urgent. You should get a decision in 3 workdays. The Hearings Unit's fax number is 503-945-6035.

InterCommunity Health Plans

Serving the people of Oregon

IHN-CCO

2300 NW Walnut Blvd

Corvallis, Oregon

541-768-4550

1-800-832-4580

TTY 1-800-735-2900

www.samhealthplans.org/ihn-cco