Welcome
to Washington Apple Health
If the enclosed information is not in your primary language, please call 1-800-562-3022 (TDD/TTY only: 1-800-848-5429)

ENG

Yog tas cov ntaubntawv kws tuaj nrug nuav tsi yog koj yaam lug tes thov hu rua 1-800-562-3022 (TDD/TTY xwb: 1-800-848-5429)

HMG

Afai o lenei faaliga e le o alu ati i lau gagana masani, faamolemole vala’au mai i le telefoni: 1-800-562-3022 (Mo e le lelei le faalogo pe gugu, vala’au mai i le telefoni 1-800-848-5429)

SAM

Если прилагаемая информация не на вашем родном языке, позвоните, пожалуйста, по телефону 1-800-562-3022 (телефон только для лиц с плохим слухом (TDD/TTY): 1-800-848-5429)

RUS

Якщо прикладена інформація не на вашій рідній мові, подзвоніть, будь ласка, по телефону 1-800-562-3022 (телефон тільки для осіб з поганим слухом (TDD/TTY): 1-800-848-5429)

UKR

동봉한 안내작고 귀하의 모국어로 준비되어 있지 않으면 1-800-562-3022 (청각장애자/시각장애자용: 1-800-848-5429)로 연락하십시오.

KOR

Dacă informațiile alăturate nu sunt în limba dumneavoastră natală vă rugăm să sunați la 1-800-562-3022 (numai pentru TDD/TTY: 1-800-848-5429)

ROU

Si la información adjunta no está en su idioma primario, por favor llame al 1-800-562-3022 (Para TDD/TTY solamente, llame al 1-800-848-5429).

SP

請打電話 1-800-562-3022 (TTY/TDD 專線 1-800-848-5429)

THAI

خيلافถ้าคุณต้องการติดต่อต่างประเทศที่ไม่ใช่ภาษาอังกฤษ ที่ติดต่อโทรให้ตรงไปยัง 1-800-562-3022 (TTY/TDD เท่านั้น: 1-800-848-5429).

VN

Nếu thông tin kèm theo không có ngôn ngữ của quí vị, xin gọi 1-800-562-3022 (TDD/TTY mà thôi: 1-800-848-5429)

CHINESE

如果隨附的資料不屬你的母語，請打電話 1-800-562-3022（TTY/TYY 專線 1-800-848-5429）。

AF

Kung ang nakalakip na impormasyon ay hindi sa iyong pangunahing wika, pakitawagan po ang 1-800-562-3022 (TDD/TTY lamang: 1-800-848-5429)
Using the Automated System to Hear Available Health Plans:

**How**

You can speak or press the number in brackets. You can key ahead anytime.

1-800-562-3022

Stay on the line or

“English” [1]
“Spanish” [2]

“Client Services” [6]

“Health Plan Enrollment” [2]

“DSHS Services Card” [1]
“Social Security Card” [2]

Say or Enter Number

Say or Enter the ZIP code

“Yourself” [1]
“Other Family Member” [2]

Other Private Insurance?

“Yes” [1]
“No” [2]

Information will play:
plan name, start/end dates, and toll free number.

“Hear Available Plans” [1]
“Get Details” [2]
“Repeat” [9]
“Services Menu” [8]

**Health Plan Enrollment**

1-800-562-3022
Press 6 for clients, then Press 2

**What will I hear?**

The automated system plays the current health plan information for the person calling or for another family member.

When choosing to hear available health plans, the system plays the health plan names and toll free numbers. If family members have different choices, the call is transferred to an agent.

If choosing “Get Details,” information about the current managed care program will play. If confirming an assigned plan or enrolling in a different plan, more details are given:

- Doctor or clinic name
- Pregnancy due date
- Surgery date
- Special needs or chronic condition
- General health rating

**Disclaimer about this booklet:**

This booklet will introduce you to your benefits and explain your rights and responsibilities, how to access services, and how to change health plans. Please be advised this booklet does not create any legal rights or entitlements. You should not rely on this handbook as your only source of information about Apple Health (Medicaid). You can get detailed information about Apple Health by looking at the Health Care Authority website on the Laws and Rules page, www.hca.wa.gov/pages/rules_index.aspx.
Welcome to Washington Apple Health

You are receiving this booklet because you recently enrolled in Washington Apple Health (Medicaid). The Washington State Health Care Authority (HCA) administers Apple Health and contracts with health plans to provide your coverage. Later you will receive Your Medical Benefits Book from your health plan. It will provide more detail about your covered benefits.

Apple Health services from all plans

Regardless of which health plan you use, these services are available:

- Appointments with a doctor or health care professional for necessary care including preventive and wellness services and chronic disease management
- Medical care in an emergency
- Maternity and newborn care
- Pediatric services, including oral and vision care
- Laboratory services
- Prescription drugs
- Hospitalization
- Ambulatory patient services
- Rehabilitative and habilitative* services and devices
- Mental health services

*Contact your health plan to see if you are eligible..

Note: This list is for general information only and does not guarantee Apple Health will cover the service.

Check the medical benefits book from your health plan for additional covered benefits and services. If a service you need is not listed, check with your health care provider or your health plan.

Your health plan

This booklet includes a letter, or you will receive one separately, telling you the name of your health plan. You have the right to request to change your health plan at any time. If you wish to select a different health plan, you may go online or use the sign-up form enclosed with your letter.

HCA has contracts with the following health plans. They MAY be available where you live. If you have questions, check with the plans:

- Amerigroup Washington Inc. (AMG) 1-800-600-4441
- Columbia United Providers (CUP) 1-800-315-7862
- Community Health Plan of Washington (CHPW) 1-800-440-1561
- Coordinated Care Corporation (CCC) 1-877-644-4613
- Molina Healthcare of Washington (MHC) 1-800-869-7165
- United Health Care Community Plan (UHC) 1-877-542-8997

For some situations you can receive health care without enrolling in a health plan. Call us right away at 1-800-562-3022 if one or more of the following situations apply to you.

- You have health insurance other than Apple Health or become eligible for Medicare.
- You are homeless, live in a shelter, or have a temporary address.
- You are American Indian or Alaska Native. You can choose a health plan, a Primary Care Case Management (PCCM) clinic, or Apple Health fee-for-service.
- You are enrolled or choose to enroll in Washington’s Program of All-Inclusive Care for the Elderly (PACE).
- On a case-by-case basis, if you have a verifiable medical condition, and changing doctors or health plans would interrupt your treatment and place your health at risk.

Contact your health plan’s member services number when you:

- Have a problem with your health plan.
- Want to change your primary care provider (PCP).
- Lose your health plan ID card and want another one.
- Have a special health care need (or your child does).
Most people will receive two cards in the mail, one from Washington Apple Health (the Services Card) and one from the health plan that will manage your care.

About two weeks after you enrolled in Washington Apple Health through www.wahealthplanfinder.org, you will receive a blue Services Card (also called a ProviderOne card) like the one pictured here. Keep this card. Your Services Card shows you are enrolled in Apple Health.

You do not have to activate your new Services Card. HCA will activate your card before we mail it to you.

ProviderOne

You’ll see “ProviderOne” on your Services Card. ProviderOne is the information system that coordinates the health plans for us and helps us send you information at various times. The number on the card is your ProviderOne client number. You can look online to check that your enrollment has started or switch your health plan through the ProviderOne Client Portal at https://www.waporterone.org/client. Health care providers can also use ProviderOne to see whether their patients are enrolled in Apple Health.

Each member of your household who is eligible for Apple Health will receive his or her own Services Card. Each person has a different ProviderOne client number that stays with him or her for life.

If you had previous Apple Health coverage (or had Medicaid before it was known as Apple Health), you won’t be mailed a new card. Your old card is still valid, even if there is a gap in coverage. Your ProviderOne client number remains the same.

If you don’t receive the card or lose your card

If you don’t receive your Services Card by the end of two weeks after successfully completing your Apple Health enrollment on www.wahealthplanfinder.org, or if you lose your card, please call Apple Health Customer Service at 1-800-562-3022.

Your health plan card

A few weeks after you enroll in Apple Health, you will receive a health plan ID card as well as more information about how to choose a doctor or primary care provider (PCP). Your health plan ID card will look like one of those shown below. Keep this card, too! Take both your Services Card and your health plan card with you when you go to a doctor, pharmacy, or other health care provider. You may also need a photo ID.
Why a primary care provider is important

Your primary care provider (PCP) is the main health care professional you see. If you need special care that your PCP can’t give, he or she will help you find a specialist.

Your PCP will become familiar with your health history and current health issues. Knowing all this makes it easier to help you take care of your health.

If you need a doctor or prescription before your cards arrive

It will take about a month after your completed Apple Health enrollment to get you all set up with your health plan. If you need to go to a doctor or fill a prescription before your cards arrive, you can go to any doctor, health clinic, or pharmacy in your plan’s network (contracted with your health plan).

You can also call your health plan for help, even if you have not received your Services Card or health plan card.

Choosing a primary care provider

To choose a primary care provider (PCP), follow the directions sent to you by your health plan, or call your health plan’s member services phone number. You can also choose a PCP through your health plan’s website.

If you are already seeing a PCP you like, or have heard about a provider you want to try, you can ask for that provider. But your PCP has to be part of your health plan’s network (contracted with your health plan).

If the provider you want is not in your health plan’s network, ask the provider which health plan he or she works with. You have the right to change health plans.

You can ask for a male or female PCP. You can also ask for a provider who speaks your language, specializes in your disability, or understands your culture.

Your PCP should be someone you feel comfortable with. If you aren’t happy with your PCP for any reason, call your plan’s member services phone line at any time to change to another provider.

If you don’t choose a PCP, your health plan will choose one for you.

How to make an appointment

Once you have selected a PCP, call to make an appointment. You must have an appointment to see a provider. If you have immediate health concerns or needs, you should be able to see your PCP within a few days. Even if you don’t have immediate health concerns, make an appointment for a general check-up (also called a wellness check). It will usually take longer to get an appointment for a general check-up, so don’t put it off.
If you need care

<table>
<thead>
<tr>
<th>Routine care</th>
<th>Make an appointment with your primary care provider (PCP). You should be able to make an office visit with your PCP or other provider within 10 days.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preventive care</td>
<td>Make an appointment with your PCP or other provider. You should be able to get an appointment within 30 days.</td>
</tr>
<tr>
<td>For after-hours care</td>
<td>Call your health plan’s nurse advice line.</td>
</tr>
<tr>
<td>For urgent care</td>
<td>Go to an urgent care center that contracts with your health plan, or call your PCP or the nurse advice line. You should be able to visit with your PCP or other provider within 24 hours.</td>
</tr>
<tr>
<td>For emergency care</td>
<td>Call 911 or go to the nearest place where emergency providers can help. As soon as possible, you or someone you know must call your PCP or your health plan to report your emergency. This is available 24 hours a day, 7 days per week.</td>
</tr>
<tr>
<td>For care away from home</td>
<td>If it is not an emergency, call your PCP or the nurse advice line.</td>
</tr>
</tbody>
</table>

Special population evaluation — help from someone with special training with your needs and goals if you are a child, older adult, or minority

Therapeutic psycho-education — education about your illness, care choices, medicine, and recovery

Day support — help with living skills

Group treatment services — help in a group setting

Intake evaluation — first meeting, to see what help you need

Medication monitoring — help taking your medicines on time

Peer support — help from someone who has a mental illness but is doing well and is trained to help you

Rehabilitation case management — someone who helps you with your inpatient care, outpatient care, and physical care

Stabilization services — help in your home or home-like setting after you have been in the hospital or to prevent a hospital stay

Detoxification — including both sub-acute and acute (hospital-based) options

Case management — someone who helps you get care

Outpatient treatment — both individual and group counseling sessions

Services Covered by Apple Health Fee-for-Service

The Apple Health fee-for-service program covers certain benefits and services even if you are enrolled in a health plan. Some of these benefits include:

- Alcohol and substance use disorder, inpatient, outpatient, and detoxification
- Long-term care services and services for people with developmental disabilities
- Dental services
- Eyeglasses and fitting services for children (under age 21)
- Hearing aid devices
- In-patient psychiatric care and crisis services
- Maternity support services, prenatal genetic counseling, and pregnancy terminations

If you have a question about a benefit or service not listed here, call Apple Health Customer Service at 1-800-562-3022.

Behavioral Health Services

Your primary care provider and your health plan can help coordinate your care if you need behavioral health services. Behavioral health includes services for mental health or substance abuse disorder. They may include:

Brief intervention treatment — short term help

Evaluation and treatment/community hospitalization — care in a hospital

Individual treatment services — help to meet your goals

Medication management — medicines and information about side effects

Residential services — services in your home

Psychological assessment — help in diagnosing your illness and planning your treatment
Services you may need to access health care

You might need an interpreter
If you don’t speak English well, professional interpreters are available in many languages, including sign language, at no cost to you. When you make a health care appointment, let the receptionist know if you need an interpreter. The interpreter can go to the provider’s office or be on the phone during your appointment.

It’s better to use one of these professional interpreters than to bring a family member or friend to interpret for you. The interpreters are trained to understand health care terms. They will help you and your provider understand each other.

If you have a disability
If you have a speech or hearing disability or a mobility issue, you should tell the receptionist when you make your appointment. The receptionist will help you make any necessary arrangements.

You can get help with transportation
If you have no way to get to your health care appointment, you may be eligible for help with transportation. The appointment must be for services allowed by your health plan. The transportation will be the most appropriate and least costly, but is at no cost to you. The most common types of transportation available include: public bus, gas vouchers, client and volunteer mileage reimbursement, volunteer drivers, taxi, wheelchair van or accessible vehicle, and commercial bus and air.

Changing health plans
You have the right to request to change your health plan at any time. Depending on when you make your request, your new plan will usually start the first of the next month. There are several ways to switch your plan:

- Go to the ProviderOne Client Portal at https://www.waproviderone.org/client.
- Download the enrollment form at http://www.hca.wa.gov/medicaid/forms/Documents/13_862.pdf. Print it, fill it out, and mail it according to the instructions. No postage is necessary.
- Fill out the enrollment form and fax it to 1-866-668-1214.
- Call Apple Health Customer Service at 1-800-562-3022.

The tables on page 13 show health plan quality measures and scores. You can use the scores to help you decide which health plan is best for you. Higher percentages mean the health plan’s performance is high; lower percentages means the health plan’s performance is low and needs improvement. You will also find a description of the measures, and why receiving this care is important for you or your family member’s health.

Your rights and responsibilities
By law, you have rights regarding the health care services you receive, and you also have certain responsibilities to help maintain and improve your health and avoid unnecessary costs. It is possible to lose your health plan. This might happen if you don’t keep your doctor appointments, don’t cooperate with your primary care physician, and other reasons. Please contact us if you’d like more information.
You have the right to:

- Help make decisions about your health care, including refusing treatment.
- Be informed about all treatment options available, regardless of cost.
- Get a second opinion from another provider in your health plan.
- Get services without having to wait too long.
- Be treated with respect and dignity. Discrimination is not allowed. No one can be treated differently or unfairly because of their race, color, national origin, gender, sexual preference, age, religion, creed, or disability.
- Speak freely about your health care and concerns without any bad results.
- Have your privacy protected and information about your care kept confidential.
- Ask for and get copies of your medical records.
- Ask for and have corrections made to your medical records when needed.
- Ask for and get information about:
  - Your health care and covered services.
  - Your doctor and how referrals are made to specialists and other providers.
  - How the health plan pays your providers for your medical care.
  - All options for care and why you are getting certain kinds of care.
  - How to get help with filing a grievance or complaint about your care.
  - Your health plan's organizational structure including policies and procedures, practice guidelines, and how to recommend changes.
- Receive the Member's Rights and Responsibilities at least yearly. Your rights include mental health and substance use disorder services.
- Receive a list of crisis phone numbers.
- Receive help completing mental or medical health advance directive forms.

You have the responsibility to:

- Help make decisions about your health care, including refusing treatment.
- Keep appointments and be on time. Call your provider's office if you are going to be late or if you have to cancel the appointment.
- Give your providers information they need to get paid for providing services to you.
- Show your providers the same respect you want from them.
- Bring your Services Card and health plan ID card to all of your appointments.
- Learn about your health plan and what services are covered.
- Use health care services when you need them.
- Know your health problems and take part in making agreed-upon treatment goals as much as possible.
- Give your providers and health plan complete information about your health so you can get the care you need.
- Follow your provider's instructions for care that you have agreed to.
- Use health care services appropriately. If you do not, you may be enrolled in the Patient Review and Coordination Program. In this program, you are assigned to one primary care provider, one pharmacy, one prescriber for controlled substances, and one hospital for non-emergent care. You must stay in the same plan for at least 12 months.
- Inform us right away if your family size changes (such as pregnancy, births, adoptions) or your circumstances change (such as a new address, change in income, becoming eligible for Medicare or other insurance).
- Renew your coverage annually using the Healthplanfinder website at [www.wahealthplanfinder.org](http://www.wahealthplanfinder.org). You also use this website to report changes to your account.

If you’re unhappy with your health plan

You have the right to file a grievance (complaint) or appeal a decision if you are not happy with the way you have been treated or have been denied a covered service. Your health plan will help you file a grievance or an appeal. It must let you know by phone or letter that it received your grievance or complaint within five working days, and must address your concerns as quickly as possible, not taking more than 45 days.

Is it urgent? If you are appealing a decision and have an urgent medical condition, you or your doctor can ask for an expedited (quick) review or hearing. If your medical condition requires it, a decision will be made about your care within 72 hours. Refer to your medical benefits book for more detailed information on these steps.
Plan Comparison 2013*

This table includes four measures important to parents of children and two measures important to those with diabetes.

<table>
<thead>
<tr>
<th>Category</th>
<th>Amerigroup</th>
<th>Coordinated Care</th>
<th>Community Health Plan</th>
<th>Molina Healthcare</th>
<th>United Health Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Vaccinations</td>
<td>54%</td>
<td>64%</td>
<td>77%</td>
<td>68%</td>
<td>60%</td>
</tr>
<tr>
<td>Teen Vaccinations</td>
<td>55%</td>
<td>69%</td>
<td>71%</td>
<td>65%</td>
<td>61%</td>
</tr>
<tr>
<td>Nutrition Counseling for Children and Teens</td>
<td>45%</td>
<td>46%</td>
<td>53%</td>
<td>45%</td>
<td>40%</td>
</tr>
<tr>
<td>Exercise Counseling for Children and Teens</td>
<td>38%</td>
<td>45%</td>
<td>52%</td>
<td>38%</td>
<td>35%</td>
</tr>
<tr>
<td>Diabetes HemoglobinA1c Blood Test</td>
<td>82%</td>
<td>86%</td>
<td>92%</td>
<td>88%</td>
<td>83%</td>
</tr>
<tr>
<td>Diabetes Eye Exam</td>
<td>39%</td>
<td>47%</td>
<td>52%</td>
<td>53%</td>
<td>38%</td>
</tr>
</tbody>
</table>

*Data for Columbia United Providers (CUP) were not available for 2013.

Category definition

**Child Vaccinations**
The percent of children 2 years of age who had all the recommended vaccines by their second birthday. Vaccines protect children from disease. If vaccines were not given, the bacteria and viruses that cause these diseases could begin to infect more and more children again.

**Teen Vaccinations**
The percent of adolescents who had all the recommended vaccines by their 13th birthday. Vaccines help teens stay healthy.

**Nutrition Counseling for Children and Teens**
The percent of children ages 3 to 17 whose doctor or nurse practitioner provided help on proper nutrition or referral for nutritional education. Children should eat a variety of fruits and vegetables, low fat foods, and foods high in protein, such as milk daily.

**Exercise Counseling for Children and Teens**
The percent of children ages 3 to 17 whose doctor or nurse practitioner encouraged physical activity or referral for physical activity. Children should have 60 or more minutes of physical activity daily.

**Diabetes HemoglobinA1c Blood Test**
The percentage of people ages 18 to 75 with diabetes who had their Hemoglobin A1c tested. The HemoglobinA1c is a blood test that shows the average level of blood sugar (glucose) in the last 3 months. It shows how well you are managing your diabetes. Blood levels of 7 or lower is best.

**Diabetes Eye Exam**
The percent of people ages 18 to 75 with diabetes who had a dilated retinal eye exam. A dilated eye exam can detect diabetic eye disease that often has no symptoms until the disease reaches a serious stage.
A note about privacy

Your Services Card does not contain any personal information except your name, your ProviderOne number, and the issue date. This maintains your privacy if the card is lost or stolen. Neither the Health Care Authority (HCA), administrator of Apple Health, nor your health plan will ever contact you directly asking for your personal information to obtain or replace a Services Card. Never give your personal information, such as Social Security number, to someone who calls or emails you to ask for it.

All health plans are required by law to protect your health information. Health plans and HCA use and share protected health information about you to provide your health benefits; to carry out treatment, payment, and health care operations; and for other reasons allowed and required by law. Health plans and HCA have the duty to keep your health information private.

To read HCA’s privacy policy go to www.hca.wa.gov/medicaid/forms/Documents/18-002.pdf. If you want to read your health plan’s privacy policy, call your health plan’s member services or visit the plan’s website.

Where to get answers to your questions

<table>
<thead>
<tr>
<th>If you have any questions about …</th>
<th>Contact …</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Changing health plans</td>
<td>Apple Health Customer Service at 1-800-562-3022 or send your questions to <a href="https://fortress.wa.gov/hca/p1contactus/">https://fortress.wa.gov/hca/p1contactus/</a>.</td>
</tr>
<tr>
<td>• Eligibility for health care services</td>
<td></td>
</tr>
<tr>
<td>• Services cards</td>
<td></td>
</tr>
<tr>
<td>• Choosing a provider</td>
<td>Your health plan.</td>
</tr>
<tr>
<td>• Covered services</td>
<td>Your health plan phone number is listed under “Contact Information.”</td>
</tr>
<tr>
<td>• Your medical care</td>
<td><a href="http://www.wahealthplanfinder.org">www.wahealthplanfinder.org</a> or call 1-855-923-4633 (TTY/TDD users call 1-855-627-9604)</td>
</tr>
<tr>
<td>• Referrals to specialists</td>
<td></td>
</tr>
<tr>
<td>• Changes to your account, such as:</td>
<td></td>
</tr>
<tr>
<td>income, marital status, pregnancy,</td>
<td></td>
</tr>
<tr>
<td>births, or adoptions.</td>
<td></td>
</tr>
</tbody>
</table>

Useful web pages

<table>
<thead>
<tr>
<th>Web page</th>
<th>URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>ProviderOne Client Portal</td>
<td><a href="https://www.waprovierone.org/client">https://www.waprovierone.org/client</a></td>
</tr>
<tr>
<td>Washington Healthplanfinder</td>
<td><a href="http://www.wahealthplanfinder.org">www.wahealthplanfinder.org</a></td>
</tr>
<tr>
<td>Enrollment Form</td>
<td><a href="http://www.hca.wa.gov/medicaid/forms/documents/13_862.pdf">www.hca.wa.gov/medicaid/forms/documents/13_862.pdf</a></td>
</tr>
<tr>
<td>Request Non-Emergency Medical Transportation</td>
<td><a href="http://www.hca.wa.gov/medicaid/transportation/pages/newrequest.aspx">www.hca.wa.gov/medicaid/transportation/pages/newrequest.aspx</a></td>
</tr>
</tbody>
</table>
Health care from a tribal or urban Indian clinic

If you are American Indian or Alaska Native, you may be able to sign up for the Primary Care Case Management (PCCM) program. Tribal and urban Indian clinics provide PCCM health services. The providers at the clinic know your culture, community, and health care needs. They will give you the care you need or send you to a specialist. If you have questions about the PCCM program, talk to your tribal or urban Indian clinic staff to see if this is a good choice for you.

Primary Care Case Management (PCCM) Clinics
For American Indian or Alaska Native family members

<table>
<thead>
<tr>
<th>Tribe</th>
<th>Name and location(s) of clinic</th>
<th>Phone number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any tribe</td>
<td>Seattle Indian Health Board — Seattle</td>
<td>206-324-9360</td>
</tr>
<tr>
<td>Any tribe</td>
<td>NATIVE Project — Spokane</td>
<td>509-483-7535</td>
</tr>
<tr>
<td>Colville</td>
<td>Lake Roosevelt Community Health Center — Inchelium and Keller</td>
<td>509-722-7006</td>
</tr>
<tr>
<td>Colville</td>
<td>Colville Indian Health Center* — Nespelem and Omak</td>
<td>509-634-2900</td>
</tr>
<tr>
<td>Lower Elwha</td>
<td>Lower Elwha Health Center — Port Angeles</td>
<td>360-452-6252</td>
</tr>
<tr>
<td>Lummi</td>
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<td>360-384-0464</td>
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<td>Spokane</td>
<td>David C. Wynecoop Memorial Clinic* — Wellpinit</td>
<td>509-258-4517</td>
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<td>360-651-4511</td>
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<td>Yakama</td>
<td>Yakama Indian Health Services* — Toppenish &amp; White Swan</td>
<td>509-865-2102</td>
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*Federally recognized tribal status must be verified to receive services at this site.

To obtain this document in another format (such as Braille or audio) or read in your primary language, call HCA’s Apple Health Customer Service at 1-800-562-3022. This book is also available in other languages at no cost to you. The TTY/TDD line is 711 or 1-800-848-5429 for people who have difficulties with hearing or speech.