



Welcome

to Washington Apple Health

Managed Care



interpreters and translation of printed materials, are available free of charge. Call 1-800-562-3022 (TRS: 711).

[Amharic] የቋንቋ እገዛ አገልግሎት፣ አስተርጓሚ እና የሰነዶችን ትርጉም ጨምሮ በነጻ ይገኛል። 1-800-562-3022 (TRS: 711) ይደውሉ።

[Arabic] خدمات المساعدة في اللغات، بما في ذلك المترجمين الفوريين وترجمة المواد المطبوعة، متوفرة مجاناً، اتصل على رقم (TRS: 711) 1-800-562-3022.

[Burmese] ဘာသာပြန်ဆိုသူများနှင့် ထုတ်ပြန်ထားသည့် စာရွက်စာတမ်းများဘာသာပြန်ခြင်းအပါအဝင် ဘာသာစကားအထောက်အကူဝန်ဆောင်မှုများကို အခမဲ့ရရှိနိုင်ပါသည်။ 1-800-562-3022 (TRS: 711) ကိုဖုန်းခေါ်ဆိုပါ။

[Cambodian] សេវាជំនួយភាសា រួមមានទាំងអ្នកបកប្រែផ្ទាល់មាត់ និង ការបកប្រែឯកសារបោះពុម្ព គឺអាចរកបានដោយឥតគិតថ្លៃ។ ហៅទូរស័ព្ទទៅលេខ 1-800-562-3022 (TRS: 711)។

[Chinese] 免费提供语言协助服务，包括口译员和印制资料翻译。请致电 1-800-562-3022 (TRS: 711)。

[Korean] 통역 서비스와 인쇄 자료 번역을 포함한 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-562-3022 (TRS: 711)번으로 전화하십시오.

[Laotian] ການບໍລິການດ້ານພາສາ, ລວມທັງນາຍແປພາສາ ແລະ ການແປເອກສານຕີພິມ, ມີໄວ້ໃຫ້ພິນີໂດຍບໍ່ຄິດຄ່າ. ໂທຫາເລກ 1-800-562-3022 (TRS: 711).

[Oromo] Tajajilli gargaarsa afaanii, nama afaan hiikuu fi ragaalee maxxanfaman hiikuun, kaffaltii malee ni argattu. 1-800-562-3022 (TRS: 711) irratti bilbilaa.

[Persian] خدمات کمک زبانی، از جمله مترجم شفاهی و ترجمه اسناد و مدارک (مطالب) چاپی، بصورت رایگان ارائه خواهد شد. یا شماره 1-800-562-3022 تماس بگیرید. (TRS: 711)

ਸਮੱਗਰੀ ਦੇ ਅੰਨ੍ਹਵਾਦ ਸਮੇਤ—ਮੁਫਤ ਉਪਲੱਬਧ ਹਨ। 1-800-562-3022 (TRS: 711) 'ਤੇ ਕਾਲ ਕਰੋ।

[Romanian] Serviciile de asistență lingvistică, inclusiv cele de interpretariat și de traducere a materialelor imprimate, sunt disponibile gratuit. Apelați 1-800-562-3022 (TRS: 711).

[Russian] Языковая поддержка, в том числе услуги переводчиков и перевод печатных материалов, доступна бесплатно. Позвоните по номеру 1-800-562-3022 (TRS: 711).

[Somali] Adeego caawimaad luuqada ah, ay ku jirto turjubaano afka ah iyo turjumid lagu sameeyo waraaqaha la daabaco, ayaa lagu helayaa lacag la'aan. Wac 1-800-562-3022 (TRS: 711).

[Spanish] Hay servicios de asistencia con idiomas, incluyendo intérpretes y traducción de materiales impresos, disponibles sin costo. Llame al 1-800-562-3022 (TRS: 711).

[Swahili] Huduma za msaada wa lugha, ikiwa ni pamoja na wakalimani na tafsiri ya nyaraka zilizochapishwa, zinapatikana bure bila ya malipo. Piga 1-800-562-3022 (TRS: 711).

[Tagalog] Mga serbisyong tulong sa wika, kabilang ang mga tagapagsalin at pagsasalin ng nakalimbag na mga kagamitan, ay magagamit ng walang bayad. Tumawag sa 1-800-562-3022 (TRS: 711).

[Tigrigna] ትርጉምትን ናይ ዝተፀሓፉ ማተርያላት ትርጉምን ሓዊቡ ናይ ቋንቋ ሓዝ ግልጋሎት፣ ብዘይ ምንም ክፍሊት ይርከቡ። ብ 1-800-562-3022 (TRS: 711) ደውሉ።

[Ukrainian] Мовна підтримка, у тому числі послуги перекладачів та переклад друкованих матеріалів, доступна безкоштовно. Зателефонуйте за номером 1-800-562-3022 (TRS: 711).

[Vietnamese] Các dịch vụ trợ giúp ngôn ngữ, bao gồm thông dịch viên và bản dịch tài liệu in, hiện có miễn phí. Gọi 1-800-562-3022 (TRS: 711).



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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 booklet 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, hca.wa.gov/about-hca/rulemaking.



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 managed care plans to provide your coverage. Later you will receive "Your Benefits Handbook" from your health plan. It will provide more detail about your covered benefits.



Apple Health services from your plan

Your Apple Health managed care health plan covers the following services:

- 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
- Substance use disorder treatment 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.

Contact your health plan's member services number when you (or your child):

- Have a problem or concern with your health plan.
- Need to find a primary care provider.
- 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).
- Need access to mental health services.
- Need access to substance use disorder treatment services.

Your services card

You 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 enroll in Washington Apple Health through

Washington Healthplanfinder wahealthplanfinder.org or Washington Connection washingttonconnection.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.

Your services card will include:

- ProviderOne ID number
- Date issued
- ProviderOne website
- Customer service contact information

You do not have to activate your new services card. HCA will activate your card before we mail it to you. Each person has a different ProviderOne client number that stays with them for life.

If you don't get your services card or you lose it

If you don't get your services card by the end of two weeks after successfully completing your Apple Health enrollment or if you lose your card, you can request a replacement card:

- **WAPlanfinder app:**
If you have a Washington Healthplanfinder account, you can access your digital services card in the WAPlanfinder app, available in the Apple App store or Google Play.

- **Online client portal:**
<https://www.waproviderone.org/client>

- **Call:** 1-800-562-3022 (toll free) and choose option 1 for self-service, then option 1 for services card.

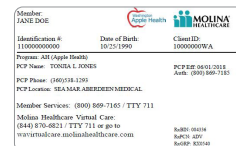
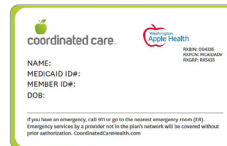
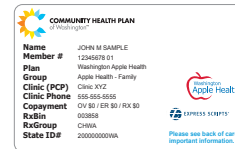
Your health plan

You will receive a letter listing the name of your health plan. You have the right to request to change your health plan at any time. For more information on how to change plans see "Changing health plans" on page 6.

If one or more of the following situations applies to you, call us right away at 1-800-562-3022 (TRS: 711):

- **You become eligible for Medicare or private insurance.**
- **You are American Indian or Alaska Native.**
You can consider an option other than coverage through a managed care plan.
- **You are enrolled or choose to enroll in Washington's Program of All-Inclusive Care for the Elderly (PACE).**
- **You have a verifiable medical condition,** and changing providers or health plans would interrupt your treatment and place your health at risk.

Your health plan card



Managed care plan contacts	Main phone	Website
Community Health Plan of Washington (CHPW)	1-800-440-1561	chpw.org
Coordinated Care of Washington (CC)	1-877-644-4613	coordinatedcarehealth.com
Molina Healthcare of Washington (MHW)	1-800-869-7165	molinahealthcare.com
UnitedHealthcare Community Plan (UHC)	1-877-542-8997	uhccommunityplan.com
Wellpoint Washington (WLP) (previously Amerigroup)	1-833-731-2167	wellpoint.com/wa/medicaid

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, (nine-digits ending in WA). You can look online to check that your enrollment has started in your health plan through the ProviderOne Client Portal at <https://www.waproviderone.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 their own services card. Each person has a different ProviderOne client number that stays with them for life.

If you had previous Apple Health coverage, 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.

- Call Apple Health Customer Service at 1-800-562-3022. Our automated system is available 24 hours a day, 7 days a week.

There is a plan comparison table in this booklet showing health plan quality measures and scores. You can use the scores to help you decide which health plan is best for you. You will also find a description of the measures, and why receiving this care is important for you or your family member's health.

If you need health care services before your cards arrive

You will receive a letter that tells you your health plan. If you need to go to a health care provider or fill a prescription before your cards arrive, take your eligibility decision letter with you to the health care provider or pharmacy. You can go to any doctor, health clinic, behavioral health provider, or pharmacy, as long as the provider is in your plan's network (contracted with your health plan). Contact your health plan for a list of providers.

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

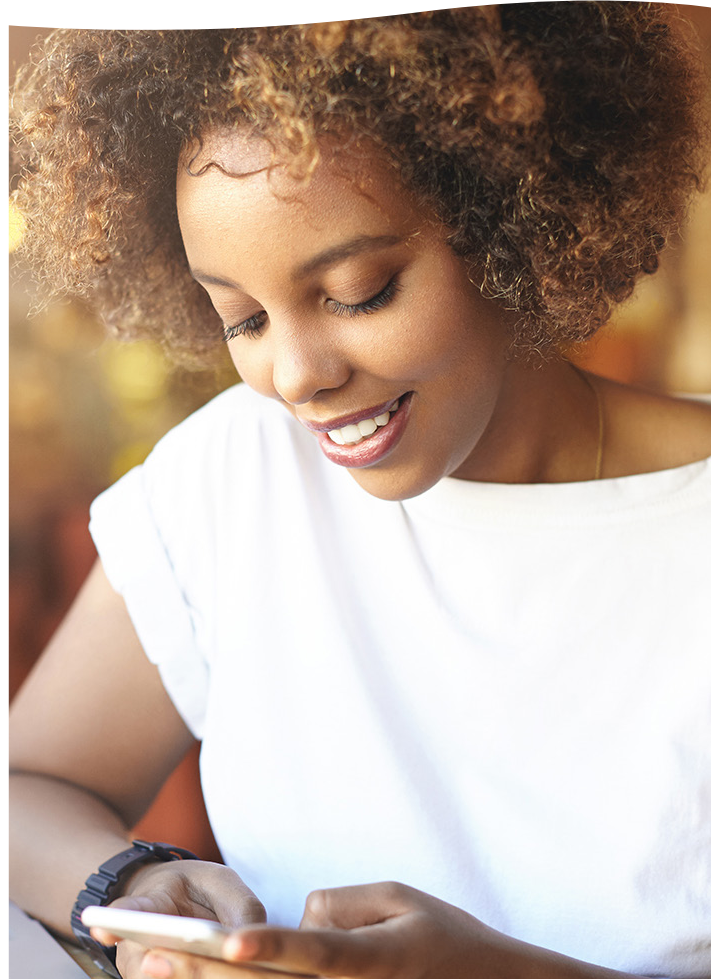
Your health plan card

A few weeks after you enroll in Apple Health, you will receive a health plan ID card, as well as more information from your plan about how to choose a doctor or primary care provider (PCP). Keep this card, too! Take both your services card and your health plan ID card with you when you go to a doctor, pharmacy, or other health care providers. You may also need a photo ID.

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:

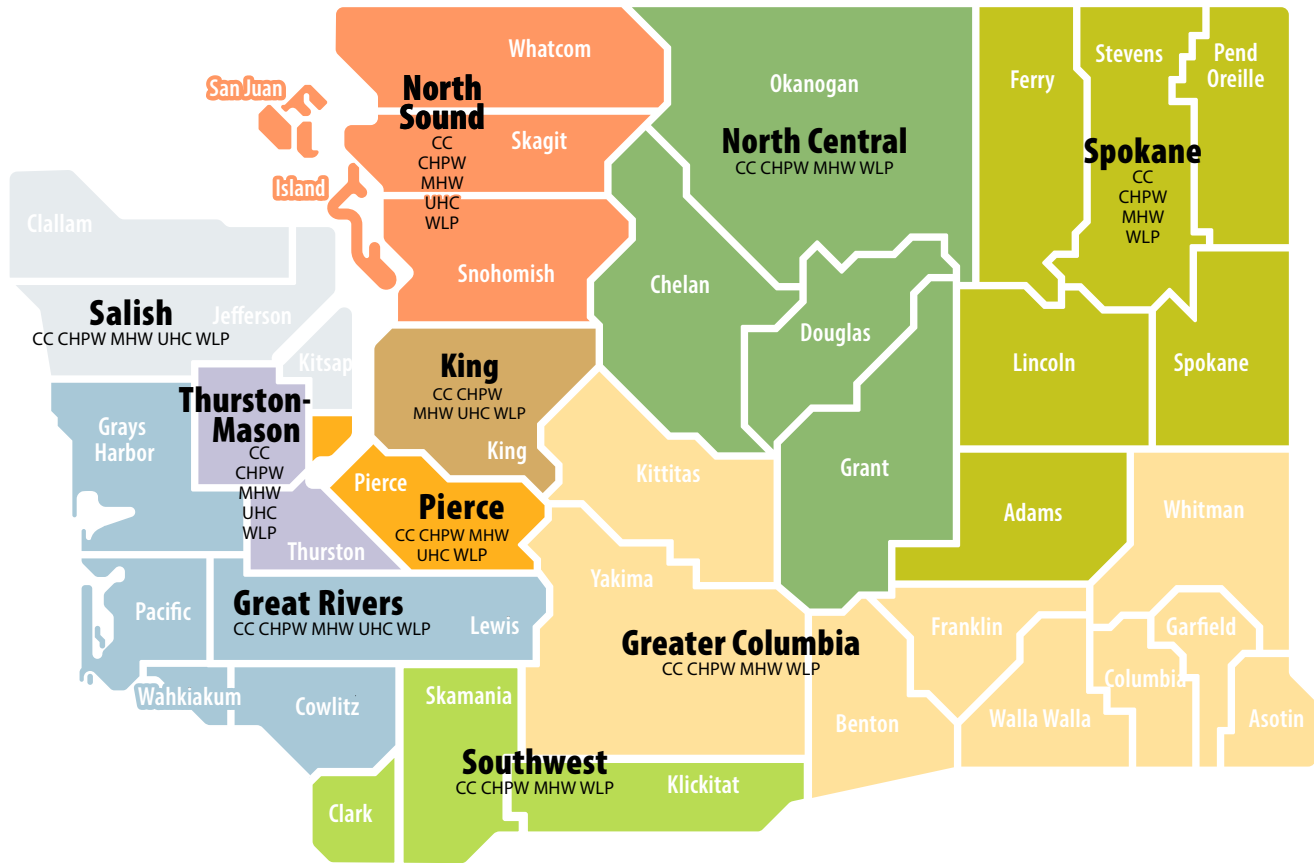
- Apple Health clients with a Washington Healthplanfinder account can change plans anytime online at wahealthplanfinder.org.
- For all Apple Health clients, visit the ProviderOne Client Portal website <https://www.waproviderone.org/client>.
- Request a change online at <https://fortress.wa.gov/hca/p1contactus/>. Choose "Client" and select the topic "Enroll/Change Health Plans"



What is managed care?

Apple Health offers managed care plans in all regions statewide. Your plan coordinates physical health, mental health, and substance use disorder treatment services to provide whole-person care under one health plan.

Apple Health managed care service area map



Integrated managed care regions

- Greater Columbia
- Pierce
- Salish
- North Central
- King
- Spokane
- Great Rivers
- Southwest Washington
- North Sound
- Thurston-Mason

Apple Health Foster Care (statewide)[†]

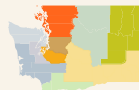
[†]Apple Health Foster Care is a statewide program. Managed care is provided through Apple Health Core Connections (Coordinated Care of Washington - CC).

Health plans offered

- CC – Coordinated Care
- CHPW – Community Health Plan of Washington
- MHW – Molina Healthcare of Washington
- UHC – UnitedHealthcare Community Plan of Washington
- WLP – Wellpoint Washington (previously Amerigroup)

Apple Health managed care service area matrix

County	Community Health Plan of Washington	Coordinated Care	Molina Healthcare of Washington	United Healthcare of Washington	Wellpoint Washington (previously Amerigroup)
Adams	X	X	X		X
Asotin	X	X	X		X
Benton	X	X	X		X
Chelan	X	X	X		X
Clallam	X	X	X	X	X
Clark	X	X	X		X
Columbia	X	X	X		X
Cowlitz	X	X	X	X	X
Douglas	X	X	X		X
Ferry	X	X	X		X
Franklin	X	X	X		X
Garfield	X	X	X		X
Grant	X	X	X		X
Grays Harbor	X	X	X	X	X
Island	X	X	X	X	X
Jefferson	X	X	X	X	X
King	X	X	X	X	X
Kitsap	X	X	X	X	X
Kittitas	X	X	X		X
Klickitat	X	X	X		X
Lewis	X	X	X	X	X
Lincoln	X	X	X		X
Mason	X	X	X	X	X
Okanogan	X	X	X		X
Pacific	X	X	X	X	X
Pend Oreille	X	X	X		X
Pierce	X	X	X	X	X
San Juan	X	X	X	X	X
Skagit	X	X	X	X	X
Skamania	X	X	X		X
Snohomish	X	X	X	X	X
Spokane	X	X	X		X
Stevens	X	X	X		X
Thurston	X	X	X	X	X
Wahkiakum	X	X	X	X	X
Walla Walla	X	X	X		X
Whatcom	X	X	X	X	X
Whitman	X	X	X		X
Yakima	X	X	X		X
Foster Care (statewide)		X			



Note: Apple Health Foster Care is a statewide program, provided through Apple Health Core Connections (Coordinated Care of Washington).

Choosing a primary care provider

It's important to choose a primary care provider (PCP). **If you don't choose a PCP, your health plan will choose one for you.** Your PCP is the main health professional you see. They will become familiar with your health history, current health issues, and can refer you to specialists. Having a dedicated PCP makes it easier to take care of your health.

To choose a 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 the PCP you want is not in your health plan's network, ask which health plan they work with. You have the right to change health plans.

You can specify what gender you would prefer for your 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 already have a primary care provider

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. However, 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 they work with.

How to make an appointment

Once you have selected a PCP, call to make an appointment. You must have an appointment to see a PCP. 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.

Routine care	Make an appointment with your PCP. You should be able to make an office visit with your PCP or another provider within 10 days.
Preventive care	Make an appointment with your PCP or other provider. You should be able to get an appointment within 30 days.
Specialty care	Call your health plan or PCP.
Mental Health	Call your health plan or PCP.
Substance use disorder treatment services	Call your health plan or PCP.
For after-hours care	Call your health plan's nurse advice line 24 hours a day, seven days per week.
For urgent care	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.
For emergency care	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.
For care away from home	If it is not an emergency, call your PCP or the nurse advice line, listed on your plan ID card.

Behavioral health services

If you're enrolled in Apple Health, you have access to mental health and substance use disorder treatment services (together known as behavioral health services). Behavioral health services are included in your managed care plan benefit package. The benefits have not changed. The only change is the managed care plan will cover these services instead of a regional Behavioral Health Organization.

Contact your health plan or primary care provider if you need help coordinating your care.

Substance use disorder treatment services may include:

Assessment – An “interview” by a health provider to decide the services you need.

Brief Intervention Treatment – Time limited, to reduce problem use. You **do not** need an outpatient intake evaluation before this service.

Withdrawal Management (Detoxification) – Help with decreasing your use of alcohol or other drugs over time, until it is safe to stop using. You **do not** need an outpatient intake evaluation before this service.

Outpatient Treatment – individual and group counseling sessions in your community.

Intensive Outpatient Treatment – More frequent individual and group counseling sessions.

Inpatient Residential Treatment – A comprehensive program of individual counseling, group counseling, and education provided in a 24-hour-a-day supervised facility.

Opiate Substitution Treatment Services – Provides outpatient assessment and treatment for opiate dependency. Includes approved medication and counseling.

Case Management – Help with finding medical, social, education, and other services.





Mental health services may include:

Intake Evaluation – Identifies your needs and goals and helps your mental health care provider recommend other services and plan treatment.

Individual Treatment Services – Counseling and/or other activities designed to meet the goals in your service plan.

Medication Management – Licensed staff prescribing medicine and talking to you about side effects.

Medication Monitoring – Services to check on how your medication is working and to help you to take it correctly.

Group Treatment Services – Counseling with others who have similar challenges.

Peer Support – Help with navigating the mental health system and reaching your recovery goals, provided by a trained person who has similar challenges.

Brief Intervention and Treatment – Short-term counseling focused on a specific problem.

Family Treatment – Family-centered counseling to help build stronger relationships and solve problems.

High Intensity Treatment – Services provided by a team of mental health providers to help you meet the goals in your service plan.

Therapeutic Psychoeducation – Education about mental illness, mental health treatment choices, medications and recovery, including supports and/or supportive services.

Day Support – Intensive program to learn or assist with independent living skills.

Evaluation and Treatment/Community Hospitalization – Medically necessary inpatient crisis care. You **do not** need an outpatient intake evaluation before this service.

Stabilization Services – Provided in your home or home-like setting to help prevent a hospital stay. You **do not** need an intake evaluation before this service.

Rehabilitation Case Management – Coordination between your inpatient and outpatient mental health services. You **do not** need an outpatient intake evaluation before this service.

Mental Health Services Provided in Residential Settings – Services provided where you live if you live in a group setting.

Special Population Evaluation – Treatment planning assistance from a specialist who works with special populations, such as children, older adults, or individuals from other cultural backgrounds.

Psychological Assessment – Testing that helps with diagnosis, evaluation, and treatment planning.

Crisis services

Crisis services are 24-hour services intended to stabilize you if you are in crisis, provided in a location that is best suited to meet your needs. You **do not** need an intake evaluation for these services.

- For immediate help, call 911 or go to the nearest hospital emergency room. Call 988 for a mental health emergency. You **do not** need an authorization for crisis services.
- For a State Crisis Lines directory, visit: hca.wa.gov/mental-health-crisis-lines.
- **Washington Recovery Help Line** is a 24-hour crisis intervention and referral line for those struggling with issues related to mental health, substance abuse, and problem gambling. Call 1-866-789-1511 (TTY 206-461-3219); email recovery@crisisclinic.org, or visit warecoveryhelpline.org. Teens can connect with teens during specific hours: call 1-866-833-6546, email teenlink@crisisclinic.org, or visit 866teenlink.org.
- For the National Suicide Prevention Lifeline: call or text 988 or call 1-800-273-8255 (TTY users 1-800-799-4889).

Information for American Indians and Alaska Natives

If you are American Indian or Alaska Native, you may be able to get health care services through an **Indian Health Service (IHS) facility, tribal health care program or Urban Indian Health Program (UIHP)** such as the Seattle Indian Health Board or NATIVE Project of Spokane. The providers at these facilities know your culture, community, and health care needs.

They will give you the care you need or refer you to a specialist. They may also help you with decisions you need to make about whether to choose a managed care plan, (which may be a Behavioral Health Services Only [BHSO] plan), or Apple Health coverage without a managed care plan (this is also called Apple Health fee-for-service). If you have questions about your health care or your health care coverage, your tribal or UIHP staff may be able to help you.



Primary Care Case Management

Some IHS facilities, tribal health care programs, and UIHPs offer Primary Care Case Management (PCCM) if you choose Apple Health coverage without a managed care plan. PCCM is an Apple Health program that supports management and coordination of your health care, including referring you to a specialist and sharing

your medical and health information with specialists when necessary, for evaluation and treatment. If you are interested in the PCCM program, you can ask your IHS facility, tribal health program, or UIHP if they participate in the PCCM program and if you can enroll. You can enroll or dis-enroll from the PCCM program at any time, but your enrollment or dis-enrollment will not take effect until the next available month.

Ways to receive health care

HCA gives American Indians and Alaska Natives in Washington a choice between Apple Health managed care or Apple Health coverage without a managed care plan. HCA does this to comply with federal rules, in recognition of the complexity of the Indian health care delivery system, and to help ensure that you have access to culturally appropriate health care.

- In Apple Health coverage without a managed care plan, you may choose any provider who participates in the Apple Health fee-for-service program and currently accepts patients. These providers must meet all requirements of their state-issued licenses. To find an Apple Health fee-for-service health provider, visit <https://fortress.wa.gov/hca/p1findaprovider/>

This choice can make sense if your care is already being managed, such as by a tribal health program or UIHP.

- With Apple Health managed care, your health care is managed by a managed care organization (MCO). This means that the MCO serves as your single point of contact to get services and helps coordinate your care.

This choice can make sense if you do not have anyone managing your care.

You can change your selection(s) at any time, but the change will not take effect until the next available month. If you are connected or partnered with a Tribal Assister through an IHS facility, Tribal health program or UIHP, they can help you make your decision. You can also contact the Health Care Authority at 1-800-562-3022 to let us know of your choice(s), including any change you wish to make, and to ask questions.

Behavioral Health Advocates

A behavioral health advocate is a person who is available to provide free and confidential assistance resolving concerns related to your behavioral health services. They can help if you have a behavioral health grievance, appeal, or administrative hearing to resolve your concerns. Behavioral health advocates are independent of your health plan or Behavioral Health Administrative Services Organization (BH-ASO).

Reach all regions at 1-800-366-3103. Or email the Office of Behavioral Health Advocacy at info@obhadvocacy.org

Region	Counties	Email	Phone numbers
Great Rivers	Cowlitz, Grays Harbor, Lewis, Pacific, Wahkiakum	greatrivers@obhadvocacy.org	360-561-2257
Greater Columbia	Asotin, Benton, Columbia, Franklin, Garfield, Kittitas, Walla Walla, Whitman, Yakima	greatercolumbia@obhadvocacy.org	360-292-5038
King	King	kingcounty@obhadvocacy.org	206-265-1399
North Central	Chelan, Douglas, Grant, Okanogan	northcentral@obhadvocacy.org	509-389-4485
North Sound	Island, San Juan, Skagit, Snohomish, Whatcom	northsound@obhadvocacy.org	360-528-1799
Pierce	Pierce	piercecounty@obhadvocacy.org	360-292-5038
Salish	Clallam, Jefferson, Kitsap	salish@obhadvocacy.org	360-481-6561
Spokane	Adams, Ferry, Lincoln, Pend Oreille, Spokane, Stevens	spokaneregion@obhadvocacy.org	360-292-5038
Southwest	Clark, Klickitat, Skamania	southwestern@obhadvocacy.org	509-434-4951
Thurston-Mason	Mason, Thurston	thurstonmason@obhadvocacy.org	360-489-7505



They will help you and your provider understand each other. Learn more at hca.wa.gov/interpreter-services.

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.

If you are Deaf, DeafBlind, or Hard of Hearing, and need a sign language interpreter, please let the receptionist know. A professional interpreter is available, at no cost to you.

You can get help with transportation

You may be eligible for help with transportation to your health care appointment at no cost to you. The appointment must be for services covered by Apple Health. 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. A list of brokers can be found at hca.wa.gov/transportation-help.



Services covered by Apple Health without a managed care plan

Apple Health coverage without a managed care plan (also known as fee-for-service) covers certain benefits and services even when you are enrolled in an Apple Health managed care health plan. Some of these benefits include:

- Long-term services and support.
- Services for individuals with developmental disabilities.
- Dental services.
- Eyeglasses and fitting services for children (under age 21).
- Maternity support services, prenatal genetic counseling, and pregnancy termination.

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

Services you may need to access health care

You might need an interpreter

If English is not your preferred language or you are Deaf, DeafBlind, or Hard of Hearing, 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. Spoken language interpreters can go to the provider's office, be on video, or be on the phone during your appointment. Sign language interpreters can go to the provider's office or be on video 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.



2023 Washington Apple Health Plan Report Card

This report card shows how Washington Apple Health plans compare to each other in key performance areas. You can use this report card to help guide your selection of a plan that works best for you.

Performance areas	Coordinated Care of Washington	Community Health Plan of Washington	Molina Healthcare of Washington	United Healthcare Community Plan	Wellpoint (previously Amerigroup)	KEY: Performance compared to all Apple Health plans	
Getting care	★★★★	★★★★	★★★★	★★★★	★★★★	Above average: ★★★	
Keeping kids healthy	★★★★	★★★★	★★★★	★★★★	★★★★	Average: ★★★	
Keeping women and mothers healthy	★★★★	★★★★	★★★★	★★★★	★★★★	Below average: ★★★	
Preventing and managing illness	★★★★	★★★★	★★★★	★★★★	★★★★	<i>These ratings were based on information collected from health plans and surveys of health plan members in 2022. (some of the data used in the Getting Care category is from 2021). The information was reviewed for accuracy by independent auditors. Health plan performance scores were not adjusted for differences in their member populations or service regions.</i>	
Ensuring appropriate care	★★★★	★★★★	★★★★	★★★★	★★★★		
Satisfaction of care provided to adults	★★★★	★★★★	★★★★	★★★★	★★★★		
Satisfaction with plan for adults	★★★★	★★★★	★★★★	★★★★	★★★★		

Performance area definitions

Getting care

- Members have access to a doctor
- Members report they get the care they need, when they need it

Keeping kids healthy

- Children in the plan get regular checkups
- Children get important immunizations
- Children get the appropriate level of care when they are sick

Keeping women and mothers healthy

- Women get important health screenings, such as cervical cancer screenings
- New and expecting mothers get the care they need

Preventing and managing illness

- The plan helps its members keep long-lasting illness under control, such as asthma, high blood pressure or diabetes
- The plan helps prevent illnesses with screenings and appropriate care

Ensuring appropriate care

- Members receive the most appropriate care and treatment for their condition

Satisfaction with care provided to adults

- Members report high ratings for doctors, specialists and overall health care

Satisfaction with plan for adults

- Members report high ratings for the plan's customer service and the plan overall

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 provider appointments, don't cooperate with your providers, and other reasons. Please contact us if you would 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 waiting 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 provider and how referrals are made to specialists and other providers.
 - » How the health plan pays your providers for your physical and behavioral health 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 your Member's Rights and Responsibilities in writing at least yearly. Your rights include mental health and substance use disorder treatment 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, or becoming eligible for Medicare or other insurance).
- Renew your coverage annually using the Washington Healthplanfinder website at wahealthplanfinder.org. You also can use this website to report changes to your account.

If you're unhappy with your health plan

You or your Authorized Representative have the right to file a grievance. A grievance is a spoken or written complaint regarding your quality of care or how you were treated by your doctor or health plan. Once a grievance is filed:

- Your health plan must let you know by phone or letter within two working days that it received your grievance.
- Your concerns must be addressed as quickly as possible, not taking more than 45 days.

Your health plan must help you file a grievance.

If you're unhappy with a medical decision your health plan made

You or your Authorized Representative have the right to file an appeal. An appeal is a kind of complaint you make when you want your health plan to review a decision they made about coverage or payment of a covered medical service.

- Your plan will notify you in writing of their decision. If you want to appeal their decision, the health plan will include documents on how to file an appeal.
- Your health plan must let you know in writing within 5 days that it received your appeal.
- Your concerns must be addressed as quickly as possible, not taking more than 28 calendar days.

Your health plan must provide you written notice of their decision and help you file an appeal.

Is it urgent? If you are appealing a decision and have an urgent physical or behavioral health condition, you or your provider can ask for an expedited (quick) review or hearing. If your medical condition requires it, a decision will be made about your care within three calendar days. Refer to your member handbook for more detailed information on these steps.

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), 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.

By law, all health plans are required 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 hca.wa.gov and click on "privacy" at the bottom of the page. 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

If you have any questions about	Resource
<ul style="list-style-type: none"> Your Washington Apple Health (Medicaid) coverage 	<ul style="list-style-type: none"> Online: hca.wa.gov/apple-health
<ul style="list-style-type: none"> Changing health plans Eligibility for health care services Services cards 	<ul style="list-style-type: none"> Apple Health Customer Service at 1-800-562-3022 or send your questions to https://fortress.wa.gov/hca/p1contactus/ ProviderOne Client Portal: https://www.waproviderone.org/client
<ul style="list-style-type: none"> Choosing a provider Covered services Your medical care Your behavioral health care Referrals to specialists Health plan cards 	<p>Your health plan. Your health plan's phone number is listed on page 5 of this booklet.</p>
<p>Changes to your account, such as: income, marital status, pregnancy, births, or adoptions.</p>	<p>Coverage for children, pregnant individuals, single adults, and parents/ caretakers:</p> <ul style="list-style-type: none"> Online: wahealthplanfinder.org or Call 1-855-923-4633 (TTY/TDD users call 1-855-627-9604) <p>Coverage for individuals who are aged, blind, or disabled or in need of long-term services and supports:</p> <ul style="list-style-type: none"> Visit your DSHS Customer Service Office (CSO) or go to Washington Connections washingtonconnection.org

List your providers below, so you have the information available when you call for assistance.

	Name and location	Phone number
Doctor		
Specialist		
Specialist		
Specialist		
Pharmacy		
Pharmacy		
Hospital		
Counselor		



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