

How to Obtain Care

Customer Service will work with your doctor, or **Primary Care Physician** to give you medical care.

Customer Service can help you when you:

- Have questions about your plan and your benefits.
- Want to change your doctor or health network.
- Want to see a family planning doctor.
- Have complaints.
- Access to staff with questions regarding the UM process.

MULTILINGUAL, DEAF AND HARD OF HEARING SERVICES

Customer Service staff will talk to you in the language that works best for you. For help, call 1-888-445-0062. TDD/TTY services can be accessed by calling 711. We can answer many of your questions at any time. Many of our staff speak your language. If not, we can arrange to have an over-the-phone interpreter for you. This over-the-phone interpreter is available at no cost to you, 24 hours a day, 7 days a week. You can ask for a face-to-face interpreter at no cost to you, when you get health care services. You do not have to ask your family members or friends to interpret for you. For example, when you need to talk about difficult medical information with your doctor, you can ask for an interpreter if your doctor or his / her staff do not speak your language. You need to make your request for an interpreter at least five (5) working days before your appointment.

SPECIALIST CARE

Your personal doctor may decide you need to see another doctor, called a specialist. Your doctor will tell you the specialist's name and give you a referral form. The form will tell the specialist why you are going to see him. You will need to call the specialist to make the appointment.

You cannot go to a specialist without your personal doctor's approval and the referral form.

Be sure to call your personal doctor any time you think you need to see a specialist.

Your doctor must approve a routine appointment for you to see a specialist within seven (7) days. Your doctor must approve an emergency appointment for you to see a specialist within 24 hours.

Your PCP will arrange for you to get a second opinion when he or she believes you should have one or when you ask for a second opinion.

The doctor who gives the second opinion will not take over your case, but will help you and your PCP decide on a treatment plan.

If you ask for a second opinion and it is denied, you will get a letter telling you why it was denied. You have the right to appeal the denial. You may also file a grievance with your health network

HOSPITALS

If you need to go to the hospital, your personal doctor or specialist will make the arrangements.

You will usually be sent to a hospital near your home. If you need special treatment, your doctor may send you to a different hospital. Your Medical Group will pay for your hospital costs. Your personal doctor will arrange your care in the hospital and after you are sent home.

EMERGENCIES

What is an “emergency”? It is when you have an illness or injury that threatens your life or may lead to disability and needs a doctor right away. Some emergencies are:

- Severe bleeding
 - Heart attack
 - Hard to breathe or cannot breathe
 - Very bad pains in the chest
 - Convulsions or choking
 - Poisoning
 - Major burns
 - Serious back injuries
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- Fainting or “blacking out”
 - High temperatures

When you have an emergency,

Call 911 or go to the nearest emergency room.

If you are not sure what to do, call your personal doctor. If you cannot reach your doctor right away, call

If your life is in danger, call 911 or go to the nearest emergency room. Do not wait.

URGENT CARE

Sometimes, illnesses and injuries are not emergencies, but you may still need to see a doctor quickly. These illnesses or injuries are called “urgent care.” Urgent care problems are injuries and illnesses that can wait up to 48 hours without getting worse. Your doctor will decide if your problem is urgent.

If you are not sure if you need emergency care or urgent care, call your PCP’s office or contact your Medical Group Customer Service.

COMPLAINTS AND GRIEVANCES

To file a grievance:

If you are not happy with a service provided, you must first call your Health Plan at the phone number listed on the back of your card to file a grievance.

ACCESS TO QUESTIONS REGARDING UM PROCESS

Members may have access to staff for callers with questions regarding the UM process by calling 888-445-0062 during normal business hours, Monday - Friday, 8:30 am - 5:00 pm.