



Member Handbook

1-866-769-3085

TDD/TTY: 1-855-742-0123

NHHealthyFamilies.com

Other Formats Available

The information in this booklet is about your New Hampshire Healthy Families benefits. If you need information in a different language, please call Member Services 1-866-769-3085 so we can help you.

Spanish: La información incluida en este folleto es acerca de sus beneficios del Plan de Salud New Hampshire Healthy Families Si necesita obtener la información en un idioma diferente, llame al Departamento de Servicios para Miembros al 1-866-769-3085 para que podamos ayudarle.

Interpreter Services

For members who do not speak English or do not feel comfortable speaking it, New Hampshire Healthy Families has a free service to help. This service is very important because you and your doctor must be able to talk about your medical or behavioral health concerns in a way you both can understand. Our interpreter services are provided at no cost to you and can help with many different languages. This includes sign language. We also have Spanish-speaking representatives available who can help you as needed. New Hampshire Healthy Families members who are blind or visually impaired can call

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Member Services for an oral interpretation. To arrange for interpretation services, call Member Services 1-866-769-3085 (TDD/TTY 1- 1-855-742-0123).

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Welcome

Welcome to New Hampshire Healthy Families

New Hampshire Healthy Families is your new health plan. This Member Handbook describes your healthcare benefits and is designed to make it easy for you to make the most of your benefits and services.

You became a New Hampshire Healthy Families member because you live in New Hampshire; you currently receive Medicaid benefits, and are eligible for the New Hampshire Medicaid Care Management program. New Hampshire Healthy Families is a Managed Care Organization (MCO) overseen by the New Hampshire Department of Health and Human Services (DHHS). New Hampshire Healthy Families is a healthcare plan that gives you choices – from establishing a Medical Home by choosing your Primary Care Provider (PCP) to participating in special programs that help you stay healthy.

You may also visit our website at www.nhhealthyfamilies.com for more information and services.

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Member Handbook

The Member Handbook is a detailed guide to New Hampshire Healthy Families and your healthcare benefits. It is our contract with you. The Member Handbook explains your rights, your benefits, and your responsibilities as a member of New Hampshire Healthy Families. Please read this booklet carefully. It gives you information on your New Hampshire Healthy Families benefits and services such as:

- What is covered by New Hampshire Healthy Families
- What is not covered by New Hampshire Healthy Families
- How to get the care you need
- How to get your prescriptions filled
- What you will have to pay for your healthcare or prescriptions
- What to do if you are unhappy about your health plan or coverage
- Eligibility requirements
- Materials you will receive from New Hampshire Healthy Families

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Call Member Services 1-866-769-3085 to receive an additional copy of the Member Handbook at no charge. You may also visit our website **at** www.nhhealthyfamilies.com to view the Member Handbook. Want to know more about your health plan? Just ask Member Services at 1-866-769-3085. NH Healthy Families can send you information about how our plan operates and how it is structured. We can also tell you about provider incentive plans.

Your Provider Directory

Visit the New Hampshire Healthy Families Provider Directory at www.nhhealthyfamilies.com to find a list of providers to choose from, including information on PCPs, specialists, Family Planning Providers, dentists, pharmacies, Federally Qualified Health Centers (FQHCs) and Rural Health Centers (RHCs), Mental Health and Substance Abuse Providers, and hospitals. This online directory gives you the names, locations, office hours and telephone numbers, non- English language spoken by current contracted providers with New Hampshire Healthy Families and is free of charge.

At any time, you can request an additional copy at no charge by calling Member Services at 1-866-769-3085. New Hampshire Healthy Families can also help you pick a PCP. You can also

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find the most current version of New Hampshire Healthy Families' Provider Directory on the internet at www.nhhealthyfamilies.com.

Call your PCP's office to make an appointment within 90 days of enrollment. If you need help, call Member Services at 1-866-769-3085. We will help you make the appointment.

New Hampshire Healthy Families Website

New Hampshire Healthy Families' website helps you get the answers. Our website has resources and features that make it easy for you to get quality care. New Hampshire Healthy Families' website can be found at www.nhhealthyfamilies.com. It also gives you information on your New Hampshire Healthy Families benefits and services such as:

- Member Handbook
- Provider Directory
- Current news and events
- Member self-service features
- Online form submission
- New Hampshire Healthy Families programs and services

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Member Advisory Committee

You can help New Hampshire Healthy Families with the way our health plan works. We have a Member Advisory Committee that gives members like you a chance to share your thoughts and ideas with New Hampshire Healthy Families. At the meetings, you have a chance to talk about the way services are delivered. The group meets at least two times a year. We may ask members, parents/foster parents, guardians of children who are members, member advocates and New Hampshire Healthy Families staff to join in the meeting. This gives you a chance to talk about your concerns with a variety of people. You also have a chance to tell us how we are doing. You may ask questions or share any concerns that you have about the delivery of services. Call Member Services 1-866-769-3085 if you would like to attend.

Quality Improvement (QI)

New Hampshire Healthy Families is committed to providing quality healthcare for you. Our primary goal is to improve your health and help you with any illness or disability. Our program is consistent with National Committee on Quality Assurance (NCQA) and Institute of Medicine (IOM) priorities. To help promote safe, reliable, and quality healthcare, our programs include:

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- Conducting a thorough check on providers when they become part of the New Hampshire Healthy Families provider network.
- Monitoring the access that New Hampshire Healthy Families members have to all types of healthcare services.
- Providing programs and educational items about general healthcare and specific diseases.
- Sending reminders to you to get annual tests, such as an adult physical, cervical cancer screening, and breast cancer screening.
- Investigating your concerns regarding the healthcare you have received. If you have a concern about the care you received from your doctor or any service provided by New Hampshire Healthy Families, please contact us at 1-866-769-3085.

New Hampshire Healthy Families believes that getting input from members, like you, can help make the services and quality of our programs better. We conduct a member survey each year that asks questions about your experience with the healthcare and services you are receiving. If you receive one of our member surveys, please be sure to fill out the survey and drop it back in the mail.

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How to Contact Us

New Hampshire Healthy Families

2 Executive Park Drive

Bedford, NH 03110

www.nhhealthyfamilies.com

**Normal Business Hours of Operation 8:00 a.m. to
5:00 p.m. EST – Full service available daily after hours**

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Member Services.....	1-866-769-3085
TDD/TTY line.....	1-855-742-0123
Member Services Fax.....	1-877-502-7255
New Hampshire Relay Services	711
Behavioral Health Services.....	1-888-282-7767

Other Important Phone Numbers

Non-Emergency Transportation (Access2Care)	1-866-769-3085
Vision Services	1-866-769-3085
Emergency Services.....	Call 911

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Your Member ID card

When you enroll in New Hampshire Healthy Families, you will receive a New Hampshire Healthy Families Member ID Card within 10 calendar days of enrollment. This card is proof that you are enrolled with New Hampshire Healthy Families. You need to keep this card with you at all times. Please show this card every time you go for any service under the New Hampshire Healthy Families program. The New Hampshire Healthy Families ID card will show your name, Medicaid ID#, PCP name and number. If you do not get your New Hampshire Healthy Families ID card within a few weeks after you join our plan, please call Member Services at 1-866-769-3085. We will send you another card.

Here is an example of your New Hampshire Healthy Families ID card

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Front

- Name
- Date of Birth
- Medicaid ID#
- PCP Name/Number
- PCP effective date
- Pharmacy vendor information





NAME: Jane Doe
 MEDICAID ID#: XXXXXXXXXXXX BIN: 008019
 PCP Name:
 PCP Phone: DOB:

If you have an emergency, call 911 or go to the nearest emergency room (ER).
 Emergency services by a provider not in the plan's network will be covered without
 prior authorization. www.NHhealthyfamilies.com

Back

- Important Member & Provider Phone Numbers (24/7 hotline #)
- Medical paper claims address
- Website address



IMPORTANT CONTACT INFORMATION

Members: Member Services: 1-866-769-3085 TDD/TTY: 1-855-742-0123 24/7 NurseWise: 1-866-769-3085 Vision: 1-866-769-3085 Pharmacy: 1-866-862-8615 File a Grievance: 1-866-769-3085	Providers: Provider Services: 1-866-769-3085 NR Eligibility Inquiry - Prior Auth: 1-866-769-3085
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New Hampshire Healthy Families
 Address:
 264 South River Road
 Bedford, NH 03110

EDI/EFT/ERA please visit
 Provider Resources at
www.NHhealthyfamilies.com

Medical Claims:
 New Hampshire Healthy Families
 Attn: Claims
 PO Box 4060
 Farmington, MO 63640-3831

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How Your Plan Works

Service Areas Covered

New Hampshire Healthy Families is a health plan available through New Hampshire Department of Health and Human Services (DHHS). New Hampshire Healthy Families' service area includes all counties in New Hampshire.

Member Services

Our Member Services department will tell you how New Hampshire Healthy Families works and how to get the care you need. The Member Services call center can help you to:

- Find a PCP.
- Schedule an appointment with your PCP.
- Obtain a new ID card.
- Obtain information about covered and non-covered benefits.
- Obtain a list of health plan providers.
- Report potential fraud issue.
- Request new member materials.

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- Obtain information about case management.

Please call 1-866-769-3085 (TDD/TTY 1-855-742-0123). We are open Monday through Friday from 8:00 a.m. to 5:00 p.m. (expanded hours to 8:00 p.m. available three days per week) Calls received after business hours are sent directly to NurseWise. NurseWise nurses are available 24 hours a day, seven (7) days a week, including holidays.

NurseWise®

NurseWise is a free health information phone line. NurseWise is ready to answer your health questions 24 hours a day – every day of the year. NurseWise is staffed with registered nurses. These nurses have spent lots of time caring for people. They are ready and eager to help you.

The services listed below are available by calling NurseWise, New Hampshire Healthy Families' 24-hour nurse hotline at 1-866-769-3085.

- Medical advice.
- Health information library.
- Answers to questions about your health.
- Advice about a sick child.

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- Help with scheduling PCP appointments.

Sometimes you may not be sure if you need to go to the emergency room (ER). Call NurseWise. They can help you decide where to go for care. If you have an emergency, call 911 or go to the nearest ER.

Membership and Eligibility Information

Eligibility

You must have Medicaid and be eligible for the New Hampshire Medicaid Care Management program in order to be eligible for this health plan. New Hampshire Healthy Families does not determine eligibility. The populations covered will include TANF, CHIP, ABD, and voluntary dual eligibles and Foster Care participation in Step One; Step Two will expand coverage to include mandatory dual eligibles and Foster Care, as well as waiver services and long term care services; Step Three includes further expansion to additional eligibles as identified as a result of the Patient Protection and Affordable Care Act.

Major Life Changes

Life changes might affect your eligibility with New Hampshire Healthy Families. If you have a major change in your life, please contact your eligibility source (such as your local Social Security

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Administration office, Office of Administration for New Hampshire, county office, or New Hampshire Medicaid Regional office) within 10 days after the change happens (or within 10 days after you realize the change has taken place). You should also contact Member Services 1-866-769-3085.

Some examples of major life changes are:

- A change in your name.
- Move to a different address.
- A change in your job.
- A change in disability.
- Pregnancy.
- Moving to a new county or out of state.

Also, you should call your eligibility source if you have a change in your family size. This might mean that your family got bigger because of a birth or a marriage. You should also report when your family gets smaller. This may happen because a family member moves away or there is a death in the family. A divorce could also change family size.

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Open Enrollment

There will be an annual open enrollment period for New Hampshire Medicaid Care Management program members that Medicaid will tell you about. During this period, you may choose another MCO health plan for any reason. If you want to change your health plan during open enrollment, please contact the Enrollment Center at 1-888-901-4999. You can also visit the state website at <http://www.dhhs.nh.gov/index.htm>.

Disenrollment

You may request to disenroll from New Hampshire Healthy Families with or without cause. DHHS procedures must be followed for all disenrollment requests. Your request for disenrollment must be directed to DHHS either orally or in writing. We will ensure your right to disenroll is not restricted in any way.

To request disenrollment, contact the Enrollment Center at 1-888-901-4999, or in writing at:

Division of Client Services
NH Department of Health & Human Services
129 Pleasant Street
Concord, NH 03301

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You may request disenrollment **without cause** for the following:

- During your initial ninety (90) day enrollment period.
- Any time for members who enroll on a voluntary basis.
- For twelve (12) months for any members who are auto-assigned to a MCO and who have an established relationship with a primary care provider that is only in the network of a non-assigned MCO.
- During annual open enrollment.
- For sixty (60) days upon automatic reenrollment if the temporary loss of Medicaid eligibility has caused you to miss the annual disenrollment opportunity
- When DHHS imposes an intermediate sanction on New Hampshire Healthy Families.

You may request disenrollment **with cause** for the following:

- If the member moves out of state.
- If you need related services to be performed at the same time and not all related services are available within the network.

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- Your PCP or another provider determines receiving the services separately would subject you to unnecessary risk, poor quality of care, lack of access to services covered under the plan, or lack of access to providers experienced in dealing with the member's healthcare needs.

We will let DHHS know in writing within three (3) business days if one of the following occurs:

- Member no longer resides in the State of New Hampshire
- Member dies
- Member no long qualifies for medical assistance under one of the Medicaid eligibility categories in the targeted population
- Fraudulent use of the member ID card

New Hampshire Healthy Families shall not disenroll a member for the following reasons:

- Adverse change in a member's health status
- Utilization of medical services
- Diminished mental capacity

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- Uncooperative or disruptive behavior resulting from his or her special needs
- Abuse of substances, prescribed or illicit, and any legal consequences resulting from substance abuse

New Hampshire Healthy Families will not directly disenroll any member if your disenrollment is not provided on the state Enrollment file.

Newborn Enrollment

For all eligible New Hampshire Healthy Families members who give birth, their Newborns will be covered under the mother's health plan, at the time of the child's birth. You will have up to 60 days to contact New Hampshire Healthy Families to enroll your child.

Benefits

Covered Services

This section describes your New Hampshire Healthy Families covered benefits and benefit limits. With New Hampshire Healthy Families, you are entitled to receive medical services and benefits listed in this section. You are responsible for any non-covered services. Covered benefits are listed below.

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Please Note:

- New Hampshire Healthy Families will not limit or deny services because of a condition you already have.
- For services which are medically necessary and covered by New Hampshire Healthy Families, you will not have any co-payments (co-pays), deductibles, or other cost sharing.
- If you receive healthcare services which are not medically necessary or if you receive care from doctors who are out of the New Hampshire Healthy Families network, you may be responsible for payment. If you have questions about medical necessity or which doctors are in your network, call Member Services at 1-866-769-3085.

Benefits Grid

This list does not intend to be an all-inclusive list of covered services. All services are subject to benefit coverage, limitations, and exclusions as described in the plan coverage guidelines. Some services require prior authorizations.

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Covered Services	Benefit Limitation	Comments
Adult Day Care	Limited to age 18 and up	
Allergy Services		
Ambulatory Surgery Center		
Anesthesia Services		
Audiology Services		
Bariatric Surgery	Certain restrictions and limitations may apply	Prior Authorization Required.
Behavioral Health Services	Includes Community Based, Inpatient and Outpatient Services, Community Mental Health Center Services, Psychology Services.	Services administered by Cenpatico Behavioral Health. 1-866-769-3085

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Covered Services	Benefit Limitation	Comments
Birthing Centers		
Chemotherapy		
Dental Services	For persons age 21 and over, limited to treatment of acute pain or infection. Covered dental services for members under 21 are those rendered in a physician's office as part of the standard EPSDT exam.	
Diabetic Education		
Dialysis		
Durable Medical Equipment (DME)		Authorization Required
Early Periodic Screening Diagnosis and Treatment	For members less than 21 years old	Only for members 20 and under
Emergency Room Services		

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Covered Services	Benefit Limitation	Comments
Enteral & Parenteral Nutrition for Home Use		
Family Planning		
Fluoride Varnish	For members age 6 to 36 months, limited to twice per year.	(PCP/Pediatrician visit)
FQHC & RHC Services		
Hearing Aids and Related Services	Limited to one service every 2 years since the last date of service.	
High Cost Radiology	(MRA,MRI,CT, PET Scan)	Authorization Required.
Home Health Care Services		Authorization Required
Hospice Care		

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Covered Services	Benefit Limitation	Comments
Hospital Services: Inpatient		
Hospital Services: Outpatient		
Hysterectomy	Not covered if performed for the purpose of an individual permanently incapable of reproducing;	Consent Form Required
Laboratory Services		
Medical Services Clinic	Limits based on the type of service delivered except for Methadone maintenance or for immunizations.	Authorization required

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Covered Services	Benefit Limitation	Comments
Maternity Care Services	Includes: <ul style="list-style-type: none"> • Nurse mid-wife services • Pregnancy related services • Services for conditions that might complicate pregnancy 	
Medical Nutrition Therapy		Authorization Required.
Orthotics & Prosthetics (O&P)		Authorization Required.
Oxygen and Respiratory Services		
Pain Management		
Personal Care Services	Limited to over the age of 18	

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Covered Services	Benefit Limitation	Comments
Physician, and Nurse Practitioner Services		
Podiatrist Services	4 per calendar year	
Private Duty Nursing		
Prescription Drugs		Please refer to Preferred Drug List
	\$1 co-pay generic \$2 co-pay brand name Some exclusions apply	(PDL) for covered medications. Contact Member Services for information.
Preventative Care		
Radiology and x-rays	15 per calendar year.	

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Covered Services	Benefit Limitation	Comments
Sterilization Procedures Age 21 and over		Consent Form Required
Therapy (OT, PT, ST) Services (Outpatient)	Limited to 80, 15-minute units per calendar year. The 80 units may be for one type of therapy or any combination.	
Transplant Service		
Transportation (Emergency Ambulance)		
Transportation (Non Emergent Medical)	Must be transportation to medically necessary services	

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Covered Services	Benefit Limitation	Comments
Vision Services and Eyewear	Examinations are covered once per calendar year. Eyeglasses are covered if there is a ½ diopter change.	
Wheelchair Van Service	24 trips per calendar year, either one-way or round trip.	Extensions to the service limits may be granted.

Value Adds and Additional Benefits	Expected Programs	Comments
CentAccount	Well Child visits, birth to 15 months of life (EPSDT Visit)	6 visits within the first 15 months of life, \$10 incentive payment. One reward per lifetime.

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Value Adds and Additional Benefits	Expected Programs	Comments
	Child well-care visits, ages 2-20 (Wellness Screening)	1 visit each year, \$30 incentive payment. One reward per calendar year
	Well care visits, adults aged 21 and over (Wellness Screening)	1 visit each year, \$30 incentive. One reward per calendar year.
	Health Risk Screening	\$30 Complete and return your Health Risk Screening form included in your Welcome Packet or call Member Services at 1-866-769-3085.

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Value Adds and Additional Benefits	Expected Programs	Comments
	<p>Diabetes management, all identified diabetics</p> <p>(Wellness Screening)</p>	<p>Includes A1c testing, LDL screening, eye exam, and nephropathy testing, \$20 incentive payment. One reward per calendar year for completing all four activities.</p>

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Value Adds and Additional Benefits	Expected Programs	Comments
	<p>Prenatal visits, pregnant women identified and enrolled in Start Smart Program. To enroll, fill out Notification of Pregnancy (NOP) form or call member services.</p> <p>(Pregnancy- Start Smart)</p>	<p>Attend the 3rd, 6th, and 9th visit and be enrolled in Start Smart Program, \$10 incentive payment. Incentive paid out upon confirmation of office visits with provider.</p>
	<p>Post-partum visit</p> <p>(Pregnancy – Start Smart)</p>	<p>Attend the post-partum visit 21-56 days after the birth, \$10 incentive payment.</p>

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Value Adds and Additional Benefits	Expected Programs	Comments
Start Smart for Your Baby	17-P program	
	Start Smart Baby Shower Program	
	Start Smart for Your Baby texting program	
Nurse Wise	24/7 nurse hotline	
Nurtur Disease Management	Asthma	
	Diabetes	
	Congestive Heart Failure (CHF)	
	Coronary Artery Disease (CAD)	
	COPD	

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Value Adds and Additional Benefits	Expected Programs	Comments
Member Connections		
Connections Plus		Available to high-risk members
Fluvention		
Interpreter services – telephonic / face to face	Covered upon request free of charge	
Puff Free Pregnancy	A specialized smoking cessation program for high-risk pregnant women	
Smoking Cessation	A disease & case management program for high-risk members that choose to quit smoking	

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Exclusions

What Does New Hampshire Healthy Families Not Cover?

What is and is not covered may change from time to time. When there are changes, we will send you a notice.

Benefits not covered by New Hampshire Healthy Families may be covered by state or federal programs. To receive information about eligibility for these benefits, contact the New Hampshire Department of Health and Human Services (DHHS) at 1 (800) 852-3345/ TDD Number of 1-800735-2964, or 2-1-1 New Hampshire at 1-866-444-4211/ TDD Number: 1-603-634-3388

The following services and supplies are not covered or are limited under this plan (Please keep in mind that this may not be an all-inclusive list):

If a service is marked as "Not Covered," that means neither New Hampshire Healthy Families nor the state will pay for these services. If you seek care for any "Not Covered" service, you will be responsible for payment of any charges.

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Non–Covered Services	Additional Detail	Comments
Abortions (Voluntary)	Some abortions are covered in limited circumstances	Not Covered
Alternative Medicine	Acupuncture, Biofeedback	Not Covered
Chiropractic Care		Not Covered
Cosmetic or plastic surgery		Not Covered
Diagnosis and treatment of infertility, impotence and sexual dysfunction		Not Covered
Experimental procedures, drugs and equipment		Not Covered

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Non–Covered Services	Additional Detail	Comments
Gender reassignment surgery		Not Covered
Personal Comfort Items		Not Covered
Non-Medical Equipment		Not Covered
Physical exams required for employment, insurance or licensing.		Not Covered
Radial Keratotomy		Not Covered
Services not allowed by federal or state law		Not Covered

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Non–Covered Services	Additional Detail	Comments
Weight reduction and control services	This includes: weight loss drugs or products, gym memberships or equipment for the purpose of weight reduction.	Not Covered
Intermediate Care Facility MR		Covered by FFS Medicaid
Medicaid to Schools Services		Covered by FFS Medicaid
Dental Benefit Services		Covered by FFS Medicaid
Acquired Brain Disorder Waiver Services		Covered by FFS Medicaid

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Non–Covered Services	Additional Detail	Comments
Developmentally Disabled Waiver Services		Covered by FFS Medicaid
Choices for Independence Waiver Services		Covered by FFS Medicaid
In Home Supports Waiver Services		Covered by FFS Medicaid
Skilled Nursing Facility		Covered by FFS Medicaid
Skilled Nursing Facility Atypical Care		Covered by FFS Medicaid
Inpatient Hospital Swing Beds, SNF		Covered by FFS Medicaid
Intermediate Care Facility Nursing Home		Covered by FFS Medicaid

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Non–Covered Services	Additional Detail	Comments
Intermediate Care Facility Atypical Care		Covered by FFS Medicaid
Inpatient Hospital Swing Beds, ICF		Covered by FFS Medicaid
Glenclyff Home		Covered by FFS Medicaid
Developmental Services Early Supports and Services		Covered by FFS Medicaid
New Substance Abuse Benefit Allowing Masters Licensed Alcohol and Drug Abuse Counselors (MLDAC)		Covered by FFS Medicaid

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Non–Covered Services	Additional Detail	Comments
Home Based Therapy – DCYF		Covered by FFS Medicaid
Child Health Support Service – DCYF		Covered by FFS Medicaid
Intensive Home and Community Services – DCYF		Covered by FFS Medicaid
Placement Services – DCYF		Covered by FFS Medicaid
Private Non-Medical Institutional For Children – DCYF		Covered by FFS Medicaid
Crisis Intervention – DCYF		Covered by FFS Medicaid

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How To Obtain Healthcare

New Hampshire Healthy Families works with a large group of doctors, specialists, hospitals and other healthcare providers. This group is called a network. In most cases, you need to get care within the New Hampshire Healthy Families network.

Except for emergency, urgent care & family planning, all services must be obtained through New Hampshire Healthy Families network providers or pre-approved for out of network providers.

3 Easy Steps to Establish a Primary Care Provider Relationship and a Medical Home

- 1) Choose a doctor. If you do not choose one, New Hampshire Healthy Families will choose one for you. You can find this information on your member ID card. You will be able to switch to a different doctor during our new member welcome call.
- 2) Within 90 days of enrolling, make an appointment with your doctor.
- 3) Talk to your doctor about any health problems you are having.

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What is a Primary Care Provider (PCP)

When you enroll in New Hampshire Healthy Families, you must choose a Primary Care Provider (PCP). Your PCP is a doctor you see on a regular basis to take care of your medical needs. You should receive all of your basic medical care from your PCP. You can call your PCP when you are sick and do not know what to do. Seeing your doctor for regular check-ups helps you find health problems early. This can help prevent going to the emergency room. If you have never seen your PCP, as soon as you join New Hampshire Healthy Families you should call your PCP, introduce yourself as a new member and make an appointment for a preventive visit. It is best to not wait until you are sick to meet your doctor for the first time.

What is a Medical Home

Having a Medical Home means having a partnership between you and your PCP. Your PCP will lead and guide your care, assisting in coordinating any services you might need.

PCP Responsibilities

Your PCP will:

- Make sure that you get all medically necessary services in a timely manner.

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- Follow-up on the care you get from other medical providers.
- Take care of referrals for specialty care and services offered.
- Provide any ongoing care you need.
- Update your medical record, including keeping track of all the care that you get with your PCP and specialists.
- Provide services in the same manner for all patients.
- Give you regular physical exams.
- Provide preventive care. (page 38)
- Give you regular immunizations.
- Make sure you can contact him/her or another doctor at all times.
- Discuss what advance directives are and file the advance directives appropriately in your medical record.

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New Hampshire Healthy Families believes that seeing your PCP is important. New Hampshire Healthy Families offers a program called the CentAccount[®] program. You can earn rewards for healthy behaviors. More information on this program is in your new member welcome packet.

Choosing Your PCP

The New Hampshire Healthy Families Provider Directory is a list of all the providers in New Hampshire Healthy Families's network, including doctors and hospitals. It shows the addresses, phone numbers, and any languages the provider may speak. When picking a PCP, look for one of the following kinds of providers:

- Pediatricians
- Family /General Practitioners
- Internal Medicine
- Obstetricians/Gynecologists
- Registered Nurse Practitioners
- Physician Assistants (under the supervision of a physician)
- Advanced Registered Nurse Practitioners (ARNP)

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Specialists can be your PCP for special needs, upon request. Because New Hampshire Healthy Families is always working to have the best provider network for all of its members, please check the New Hampshire Healthy Families website at **www.nhhealthyfamilies.com** to see if new providers have been added. If you want to know more about the PCP before you choose, please call Member Services at 1-866-769-3085. You may also see a list of network providers at **www.nhhealthyfamilies.com**.

Changing Your PCP

You may change your PCP at any time if:

- Your PCP is no longer in your area
- You are not satisfied with your PCP's services
- The PCP does not provide the services you seek because of religious or moral reasons
- You want the same PCP as other family members

You must notify us when you change your PCP. You can do this in several ways. Call Member Services at 1-866-769-3085.

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Making an Appointment with Your PCP

Once you have selected a PCP, make an appointment to meet with your doctor within 90 days and at least annually. This will give you and your doctor a chance to get to know each other. Your doctor can give you medical care, advice, and information about your health. Call your PCP's office to make an appointment. Remember to take your member ID card with you every time you go to the doctor's office. **If you have difficulty getting an appointment with or seeing your doctor, please call Member Services at 1-866-769-3085.**

Scheduling/Appointment Waiting Times

Network providers will be open at reasonable times. You will get an appointment based on your medical needs. You should be given an appointment within the following time frames:

Type of Provider Appointment	Scheduling Time Frame
Preventive Care	Within thirty (30) calendar days
Regular and Routine	Within ten (10) calendar days
Clinical Assessment post discharge (Transitional)	Within seven (7) calendar days of discharge

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Type of Provider Appointment	Scheduling Time Frame
Home Care Nurse	Within two (2) calendar days of discharge
Urgent	Within forty-eight (48) hours
Emergency	Immediately, or refer to ER
Behavioral Health Care	Scheduling Time Frame
Regular and Routine	An appointment within 10 business days for a routine office visit
Clinical Assessment post discharge (Transitional)	Within seven (7) calendar days of discharge
Home Visit with Registered Counselor post discharge	Within two (2) calendar days
Urgent	Within 48 hours
Emergency	Within 6 hours for a non-life threatening emergency. Immediately for life threatening emergency.

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After Hours Appointments with Your PCP

You can call your PCP's office for information on receiving after hours care in your area. If you have a medical problem or question and cannot reach your PCP during normal office hours, you can call NurseWise, New Hampshire Healthy Families' 24-hour medical nurse line at 1-866-769-3085 to speak to a nurse. If you have an emergency, call 911 or go to the nearest ER.

Note: Except for emergency & family planning, all services must be obtained through New Hampshire Healthy Families network providers or pre-approved for out of network providers.

Important: If you cannot keep an appointment, please call the doctor's office to cancel at least 24 hours in advance. If you need to change an appointment, call the doctor's office as soon as possible. They can make a new appointment for you. If you need help getting an appointment, call Member Services at 1-866-769-3085.

Note: Any requests made on or after the 15th of the month will be effective the first day of the following month.

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What to Do if Your Provider Leaves the New Hampshire Healthy Families Network

If your PCP is planning to leave the New Hampshire Healthy Families provider network, we will send you a notice at least 30 calendar days before the date this occurs. We will automatically reassign you to another PCP. We will send you a new member ID card identifying your new PCP. You can also change your PCP by calling Member Services at 1-866-769-3085.

New Hampshire Healthy Families may approve visits with your doctor for up to 90 days after he/she leaves the network. We can do this if you are in active treatment with your doctor. Members in the second or third trimester of pregnancy can keep the same doctor until after the first post-partum visit. During this time, we will help you find a new doctor. You will receive the same covered services. The doctor must agree to:

- Treat you for your healthcare needs.
- Accept the same payment rate from New Hampshire Healthy Families.
- Follow New Hampshire Healthy Families' quality assurance standards.

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- Follow New Hampshire Healthy Families' policies about prior authorization and using a treatment plan.
- Provide necessary medical information to you related to your care.

Continued coverage is only available if your PCP or specialist was not terminated by New Hampshire Healthy Families due to quality of care.

Continuity and Transition of Care for New Members

Sometimes new members are getting care from a doctor that is not in New Hampshire Healthy Families' provider network. In some cases, you may be allowed to continue care with your doctor for up to 30 days. In order to have your previous doctor's services continue, they must be prior authorized by New Hampshire Healthy Families. If you have questions, call Member Services at 1-866-769-3085.

New members in the second or third trimester of pregnancy can keep the same doctor until you have had your baby and completed your first post-partum visit. If you are a member who is terminally ill, you may continue to see your doctor for your care. In order to have your previous doctor's services continue,

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they must be prior authorized by New Hampshire Healthy Families. If you have questions, call Member Services at 1-866-769-3085.

If you are a member leaving our plan to another plan and have ongoing medical care, we will assist you in transitioning your services to the new plan. New Hampshire Healthy Families' staff will reach out to the new plan and help facilitate the transition of your care.

For members in active care leaving New Hampshire Healthy Families, we will communicate active services and coordinate with the new plan to ensure a smooth transition without interruption of care. New Hampshire Healthy Families will share your care plan including authorization of active services to the new plan upon request.

Utilization Management

Medically Necessary Services

Covered services that you get must be medically necessary. This means getting the right care, at the right place, at the right time. New Hampshire Healthy Families uses nationally recognized guidelines, as well as, licensed medical personnel to check medical necessity, meaning we utilize established medical criteria and experience staff to look for services that are

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reasonable and necessary to protect life, to prevent significant illness or significant disability, or to relieve severe pain, through the diagnosis or treatment of disease, illness, or injury. New Hampshire Healthy Families does not reward its network providers or their staff to deny care.

Prior Authorization for Services

When you need care, always start with a call to your PCP. Some covered services may require prior authorization or review by New Hampshire Healthy Families before services are provided. This includes services or visits to an out of network provider and some specialists. Home health services and some surgeries also need to be reviewed. **Your doctor can tell you if a service needs prior authorization.** The list is on New Hampshire Healthy Families' website at www.nhhealthyfamilies.com. You can also call Member Services at 1-866-769-3085 to see if something needs to be reviewed by New Hampshire Healthy Families.

Your doctor will give us information about why you need the service. New Hampshire Healthy Families will look to see if the service is covered and that it is appropriate. New Hampshire Healthy Families clinical staff will make the decision as soon as possible, based on your medical condition. Standard decisions are made within 14 calendar days. If the service is urgent, the

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decision will be made within three (3) business days. We will let you and your doctor know if the service is approved or denied. If you or your doctor is not happy with the decision you can ask us to make a second review. This is called an appeal. See the "Member Satisfaction" section in your Member Handbook for more information about appeals.

If there are any major changes to the prior authorization process, we will let you and your doctors know right away.

Second Medical Opinion

You have the right to a second opinion about your treatment choice. This means talking to a different doctor about an issue to see what they have to say. The second doctor is able to give you their point of view. This may help you decide if certain services or methods are best for you. If you want a second opinion, tell your PCP.

Your PCP or New Hampshire Healthy Families' Member Services can help you find a doctor to give you a second opinion. You may choose any New Hampshire Healthy Families network provider. If you are unable to find a doctor in the New Hampshire Healthy Families network, we will help you find a doctor outside the network. If you need to see an out of network

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provider for the second opinion, it must be prior approved by New Hampshire Healthy Families. Second opinions are covered by New Hampshire Healthy Families at no cost to the Member.

Any tests that are ordered for a second opinion should be given by a doctor in the New Hampshire Healthy Families network. Tests requested by the doctor giving you a second opinion must be prior approved by New Hampshire Healthy Families. Your PCP will look at the second opinion and help you decide on the best treatment plan.

How to Get Medical Care When You Are Out of State

If you are out of the area and have an emergency, **call 911 or go to the nearest ER**. Be sure to call us and report your emergency **within 48 hours**. You do not need prior approval. New Hampshire Healthy Families will cover only medically necessary emergency services out of state.

If you are out of state and have an **urgent problem**, go to an urgent care clinic or you may go to a PCP. Be sure to show your New Hampshire Healthy Families ID card prior to receiving services.

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The two situations where you are covered for services out of state are as follows:

- You are out of state and you have a medical or behavioral health emergency. You can go to an ER in any state if you have a true medical or behavioral health emergency. If you are seen at an out-of-state hospital for an emergency, your follow up care must be with a New Hampshire Healthy Families network provider. You may also need to contact your PCP to get a referral if you need to see a specialist.
- It is determined that you need special care that you cannot receive in New Hampshire. If New Hampshire Healthy Families approves, the cost of the care you get in the other state will be covered. Members are not covered for any services outside of the United States.

Out of Network Care

Out of network emergency services do not need approval from New Hampshire Healthy Families. **All other covered services from an out of network provider need prior authorization by New Hampshire Healthy Families.** We will first check to see if there is a network provider that can treat your medical condition. If there is not, we will help you find an out of network provider. You will be financially responsible for payment of the out of network service(s) if New Hampshire Healthy Families did

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not approve the visit or service. If you have questions, call Member Services at 1-866-769-3085. New Hampshire Healthy Families will notify you when the referral is approved.

Referrals

You may need to see a certain doctor for specific medical problems, conditions, injuries, and/or diseases. Talk to your PCP first. Your PCP will refer you to a specialist in the New Hampshire Healthy Families network who can diagnose and/or treat your specific problem. **Do not go to a specialist without being referred by your PCP.** Generally, a specialist will not be able to see you without approval from New Hampshire Healthy Families and from your PCP. There are exceptions and they are listed in the "Self-Referrals" section of your Member Handbook. Always make sure you have a referral from your PCP first. If you have questions about getting a referral, call Member Services at 1-866-769-3085.

Some conditions may need ongoing care from a specialist. New Hampshire Healthy Families will allow your PCP to give a standing referral to a specialist in the New Hampshire Healthy Families network when:

- The specialist in New Hampshire Healthy Families' network agrees to a treatment plan for you.

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- The specialist provides your PCP with updates on your condition and treatment plan.
- The specialist's services to be provided are part of the benefits covered by New Hampshire Healthy Families.

Note: If your specialist refers you to another specialist, your specialist may need to obtain authorization by New Hampshire Healthy Families and your PCP.

Self-Referrals

You may self-refer for certain covered services. No approval is required from your PCP or New Hampshire Healthy Families for these services.

You may receive benefit coverage for the following services whether or not the doctor is in the New Hampshire Healthy Families provider network. You can self-refer for these services:

- Emergency services.
- Family Planning services and supplies.
- Women's preventive health services.
- Treatment of women's acute health conditions.

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Urgent Care-After Hours

Urgent Care is not Emergency Care. Urgent Care is needed when you have an injury or illness that must be treated within 48 hours. It is usually not life threatening, yet you cannot wait for a visit to your PCP.

Only go to the emergency room if your doctor tells you to go or you have a life-threatening emergency. When you need urgent care, follow these steps:

- Call your PCP. The name and phone number are on your New Hampshire Healthy Families ID card. Your PCP may give you care and directions over the phone.
- If it is after hours and you cannot reach your PCP, call NurseWise 1-866-769-3085 (TDD/TTY 1-855-742-0123). You will be connected to a nurse. Have your New Hampshire Healthy Families ID card number handy. The nurse may help you over the phone or direct you to other care. You may have to give the nurse your phone number. During normal office hours, the nurse will assist you in contacting your PCP.

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If you are told to see another doctor or go to the nearest hospital emergency room, bring your New Hampshire Healthy Families ID card. Ask the doctor to call your PCP or New Hampshire Healthy Families.

Emergency Care

New Hampshire Healthy Families covers emergency medical services 24 hours a day, seven (7) days a week. Emergency services are required to treat an accidental injury or an onset of what reasonably appears to be a medical condition. An emergency arises when the lack of medical attention could be expected by a reasonable layperson to result in jeopardy to a member's health or, in the case of a pregnant woman, the health of her unborn child.

When to go to the ER

- Broken bones.
- Gun or knife wounds.
- Bleeding that will not stop.
- You are pregnant, in labor and/or bleeding.
- Severe chest pain or heart attack.
- Drug overdose.

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- Poisoning.
- Bad burns.
- Shock (you may sweat, feel thirsty or dizzy or have pale skin).
- Convulsions or seizures.
- Trouble breathing.
- Suddenly unable to see, move or speak.

When Not to go to the ER

- Flu, colds, sore throats, and earaches.
- A sprain or strain.
- A cut or scrape not requiring stitches.
- To get more medicine or have a prescription refilled.
- Diaper rash.

Emergency rooms are for emergencies. If you can, call your doctor first. If your condition is severe, call 911 or go to the nearest hospital. You do not need a doctor's approval. If you are not sure if it is an emergency, call your PCP. Your PCP will tell you what to do. If your PCP is not available, a doctor taking

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calls can help. There may be a message telling you what to do. You can also call NurseWise, our 24-hour medical advice line 1-866-769-3085 (TDD/TTY 1-855-742-0123) if you have questions.

It is okay if the hospital does not belong to the New Hampshire Healthy Families network. You can use any hospital if it is an emergency. You or someone acting on your behalf Must call your PCP and New Hampshire Healthy Families within 48 hours of admission. This helps your PCP to provide or arrange for any follow-up care that you may need. We will help you get follow-up care. Call us 1-866-769-3085 (TDD/TTY 1-855-742-0123).

Emergency Transportation Services

New Hampshire Healthy Families covers emergency ambulance ground transportation to the nearest hospital for emergency care. **Ambulance transportation to the hospital emergency room in non-emergency situations is not a covered service under New Hampshire Healthy Families and you may have to pay for it.** Ambulance transportation from a healthcare facility to another healthcare facility is covered only when it is medically necessary and it has been arranged and approved by a New Hampshire Healthy Families network provider.

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Non-Emergency Transportation Services

If you do not have a car or anyone available to give you a ride, as a New Hampshire Healthy Families member, we can help you get to your medical appointments as well as your state-covered dental appointments. Transportation is covered for all medically necessary services. New Hampshire Healthy Families is excited to offer this service through Access2Care.

If you need help getting to your medical appointment call Access2Care at 1-866-769-3085. You must call at least three (3) business days before your appointment. Urgent medical trips can be requested with less than 3 days' notice, and we may check with your doctor to make sure the appointment is urgent. If you have an emergency and you need help getting to an emergency room, you need to call 911.

What information do I need to know when I call?

- You Medicaid number
- The street address including city and zip code of your pick up location and the destination address and telephone number
- If you use a wheelchair or other equipment to get to your appointments

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- For minors 16 and under the name of the adult traveling with the child

You should be ready one hour before your appointment. The driver will call you 24 hours before your appointment to confirm the exact pick up time. If your ride is 15 minutes past pick up time, please call Access2Care at 1-866-769-3085

If you go to more than one appointment, to the same location, in the same week you need to call us. Please call Access2Care as soon as possible so that we can confirm we have your ride to and from your appointment.

Vision

New Hampshire Healthy Families allows members to choose from a standard selection of frames and lenses. Members can choose to opt out of the standard benefit and select frames outside of the standard selection. An allowance will be approved as a credit toward the purchase of glasses with single vision lenses, or glasses with bifocal or trifocal lenses. Any charges exceeding the allowance are the Member's responsibility.

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Post-Stabilization Services

These are services that are needed to stabilize your condition after an emergency. They do not require prior authorization. It does not matter whether you receive the emergency care in or outside of the New Hampshire Healthy Families network. We will still cover services to make sure you are stable after an emergency.

Pharmacy

Pharmacy Program

You can get prescriptions through your New Hampshire Healthy Families coverage if you go to a pharmacy that takes New Hampshire Healthy Families members. There are some drugs that may not be covered through New Hampshire Healthy Families. A New Hampshire Healthy Families pharmacy can let you know which drugs are not covered, or help you find another drug that is covered. You can also ask your doctor about what drugs are covered, and what is best for you.

Prior Authorization

Some drugs have limits or require prior approval before your prescription can be filled. If prior approval is needed the pharmacy will inform your doctor. If your doctor feels you have

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a medical reason to get the drug, they can ask New Hampshire Healthy Families for coverage authorization. If New Hampshire Healthy Families does not grant the approval you and your doctor will be notified of the decision and given instruction on how to file an appeal.

Emergency Drug Supply

If your doctor cannot be reached to approve a prescription, you may be able to get a 72 hour (three day) emergency supply. Pharmacies that are contracted with US Script are authorized to provide a 72 hour supply and will be reimbursed for the ingredient cost and dispensing fee drug.

Over-the-Counter Medications

Some covered over-the-counter (OTC) drugs are covered through New Hampshire Healthy Families. In order for an OTC drug to be covered, it must be written on a valid prescription by a licensed doctor. If you purchase OTC drugs without a prescription from a doctor you will have to pay for them.

Excluded Drugs

Some drugs are not covered through New Hampshire Healthy Families. These include, but are not limited to:

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- Drug Efficacy Study Implementation (DESI) drugs
- Fertility agents
- Topical Minoxidil
- Vaniqa[®]
- Drugs used to treat erectile or sexual dysfunction

Filling a Prescription

New Hampshire Healthy Families covers most of the drugs your doctor says you need. Your doctor will write a prescription so you can take it to the pharmacy, or may be able to send the prescription for you. New Hampshire Healthy Families provides prescriptions for its members through pharmacies that are contracted with US Script. You can get your prescriptions filled at most pharmacies. It is important that you show your New Hampshire Healthy Families ID card at the pharmacy. If you need help finding a pharmacy or have trouble getting your drugs, call New Hampshire Healthy Families at 1-866-769-3085 (TDD/TTY 1-855-742-0123).

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Specialty Pharmacy Provider

Certain drugs are only covered when they are supplied by New Hampshire Healthy Families' specialty pharmacy provider. CVS/Caremark is New Hampshire Healthy Families' specialty pharmacy provider. These drugs are not available at retail pharmacies. CVS/Caremark provides you with the following services:

- They can deliver drugs to your home or doctor's office.
- They have staff that can answer questions about drugs.
- They are available 24 hours a day, seven (7) days a week.
- They can give you information, materials, and ongoing support.
- CVS/Caremark wants to help you take the drugs the right way to manage your health condition.

If you have questions about any of the pharmacy program, call Member Services at 1-866-769-3085.

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Health Management

Health Risk Screening

New Hampshire Healthy Families wants to know how we can better serve you. One way we do this is by asking you to fill out the Health Risk Screening form found in your Welcome Packet. This form gives us information to determine your needs. Once you fill out the form, please send it back to us right away in the postage-paid envelope we have provided for you. You can also fill out this form on our website **www.nhhealthyfamilies.com**. If you have questions about the form, please call us at 1-866-769-3085.

Case Management

We understand some members have special needs. In those cases, New Hampshire Healthy Families offers our members case management services to assist our members with special healthcare needs. If you have special healthcare needs, behavioral health needs, pregnant, or you have a disability, case management may be able to help you. Our case managers are registered nurses or social workers. They can help you understand major health problems and arrange care with your doctors. A case manager will work with you and your doctor to help you get the care you need.

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This service is for members who have complex medical conditions. These members often see several doctors. They may need medical supplies or help at home.

Conditions may include:

- Sickle Cell
- Multiple Sclerosis
- Kidney or Renal Disease
- Organ Transplants
- HIV/AIDS
- Hemophilia
- Behavioral Health

Our case managers are nurses or social workers that can help members understand their health problems.

Our nurse works with the member and their doctors to help them get the care they need. The nurse can set up home health or other needed services. If you have special healthcare needs or you have a disability, case management may be able to help

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you. Our Member Services department can give you more information about Case Management Services. You can ask to speak to a case manager.

Disease Management

New Hampshire Healthy Families has several programs to improve the health of our members. We know this means more than just helping you to see a doctor. It also means helping you find your way through the healthcare system so you get the treatments and the social services you need. It also means helping you understand and manage your health conditions. We do this through education and personal help from New Hampshire Healthy Families staff. The goal of this service is to add to the quality of your care and help you to improve your health. New Hampshire Healthy Families works with Nurtur to give disease management services to our members. Nurtur Health Coaches know a lot about conditions like:

- Asthma.
- Diabetes.
- High blood pressure.
- Heart problems.
- Weight Management

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- COPD

All of our programs are geared toward helping you understand and actively manage your health. We are here to help you with things like:

- How to take medicines.
- What screening tests to get.
- When to call the doctor.

We will help you get the things you need. We will provide tools to help you learn and take control of your condition. For more information call Member Services at 1-866-769-3085. You can ask to speak to a Health Coach.

Preventive Care

New Hampshire Healthy Families recognizes the importance of good health. We offer preventive care services to help you and your family stay healthy. We encourage you to receive immunizations and health screenings to help lower your risk for chronic diseases. Health screening provides the opportunity for early detection and treatment with possibly better outcomes. It is important for you to visit your primary care provider or

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Medical Home for such preventive care services. We will work with you and your provider to ensure access to care. Below are some of the Preventive Care services provided.

Covered Preventive Care Services for Adults:

- Immunizations–vaccines for adults
- Behavioral, Depression screenings
- Well visits
- Disease Management including:
 - Asthma
 - Heart Disease
 - Diabetes
 - Obesity

Covered Preventive Care Services for Women include:

- Prenatal Care
- Educational and clinical services
- Start Smart For Your Baby
- Routine screenings and labs

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- Well Women Visits
- Breast Cancer screenings
- Cervical Cancer screenings

Covered Preventive Care Services for Children may include:

- Autism screenings
- Behavioral screenings
- Congenital screenings
- Depression screenings
- Developmental screening
- Fluoride Varnishing – Oral health
- Height, Weight, Body Mass monitoring
- Immunizations
- Risk Screenings
- Vision Care

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CentAccount[®] Program

New Hampshire Healthy Families has a program to reward you for completing healthy behaviors. These healthy behaviors begin with a Health Risk Screening received in your Welcome Packet. New rewards will be added to your CentAccount card once you complete each healthy behavior. Your CentAccount card can be used for health-related products at stores which accept MasterCard[®] (such as Target, Wal-Mart, Walgreens, and local pharmacies). You can also use the card for health-related services at healthcare provider offices that accept MasterCard. Information on the CentAccount program can be found on our website at www.nhhealthyfamilies.com. Please call Member Services at 1-866-769-3085 for more information.

Early and Periodic Screening, Diagnosis and Treatment (EPSDT)

Health Check (EPSDT) is a preventive healthcare program for age birth to 21 years old. Children and young people need to see their doctor regularly even when they are not sick. This chart shows when babies, children and young adults need to see their doctor for a health check. We don't want your child to miss any key steps toward good health as they grow.

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Doctors and nurses will examine your child or teen. They will give shots for diseases when necessary. Shots are important to keep your child healthy. They will also ask questions about health problems and tell you what to do to stay healthy. If there is a problem found during the checkup, your doctor can send you to a specialist, or order any tests that might be needed, such as laboratory work, x-rays, etc.

Age Group	Health Check Schedule
Infancy	Birth 3 to 5 days By 1 month 2 months 4 months 6 months 9 months
Early Childhood	12 months 15 months 18 months 24 months 30 months

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Age Group	Health Check Schedule
	3 years 4 years
Middle Childhood & Adolescence	Every year until age 21

To schedule a Health Check visit, call your doctor. If you have problems scheduling your visit, please call Member Services at 1-866-769-3085.

Family Planning Services

New Hampshire Healthy Families Health Plan covers family planning services. You can get these services and supplies from providers that are not in our network. You do not need a referral. These services are free for our members. These services are voluntary and confidential, even if you are less than 18 years old.

Some examples of family planning services are:

- Education and advice from a trained personnel to help you make choices
- Information about birth control

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- Physical exams
- Follow-up visits
- Immunization services
- Pregnancy tests
- Birth control supplies
- Tests and treatment of STDs (sexually transmitted diseases)

When You Are Pregnant

Keep these points in mind if you are pregnant now or want to become pregnant:

- Go to the doctor as soon as you think you are pregnant. It is important for your health and your baby's health to see a doctor as early as possible. Seeing your doctor early will help your baby get off to a good start. It's even better to see your doctor before you get pregnant to get your body ready for pregnancy.
- Make an appointment with your dentist for a cleaning and checkup.

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- Set a goal to live a healthier lifestyle. Healthy lifestyle habits include exercising, eating balanced healthy meals, and resting for 8-10 hours at night.

Pregnancy & Maternity Services

There are things you can do to have a **safe pregnancy**. See your doctor about any medical problems you have such as diabetes and high blood pressure. Do not use tobacco, alcohol, or non-prescribed drugs either now or while you are pregnant. New Hampshire Healthy Families recommends that you see your doctor before becoming pregnant if you have experienced any of the following problems:

- You have had three or more miscarriages.
- You have given birth to a premature baby (this means the baby came before 37 weeks of pregnancy), or a "preemie."
- You gave birth to a stillborn baby.

A note about folic acid: Folic acid is a very important nutrient that can help you have a healthier baby. You should take folic acid before you become pregnant or as soon as you find out you are pregnant. Some foods that have folic acid in them include: orange juice, green vegetables, beans, peas, fortified breakfast cereals, enriched rice, and whole wheat bread. It is

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difficult to get enough folic acid from food alone. Ask your doctor about taking prenatal vitamins and see your doctor as soon as you think you are pregnant. If you have questions about folic acid or your pregnancy, call Member Services at 1-866-769-3085.

Start Smart for Your Baby®

Start Smart for Your Baby (Start Smart) is our special program for women who are pregnant. New Hampshire Healthy Families wants to help you take care of yourself and your baby through your whole pregnancy. Information can be provided to you by mail, telephone, and through the Start Smart website, **www.startsmartforyourbaby.com**. Our Start Smart staff can answer questions and give you support if you are having a problem. We can even arrange for a home visit if needed.

If you are pregnant and smoke cigarettes, New Hampshire Healthy Families can help you stop smoking. We have a special smoking cessation program for pregnant women that is available at no cost to you. The program has trained healthcare clinicians who are ready to build one-to-one contacts with you. They will provide education, counseling, and the support you need to help you quit smoking. Working as a team over the

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telephone, you and your health coach can develop a plan to make changes in your behavior and lifestyle. These coaches will encourage and motivate you to stop smoking.

We have many ways to help you have a healthy pregnancy. Before we can help, we need to know you are pregnant. We can help you contact Medicaid to find out if you qualify for maternity coverage. Please call Member Services at 1-866-769-3085 as soon as you learn you are pregnant. We will help you set up the special care that you and your baby need.

MemberConnections®

MemberConnections is a program that promotes preventive health and connects you to quality healthcare and community social services. MemberConnections Representatives are specially trained staff that provides support to New Hampshire Healthy Families members. They can help you determine which doctors are available in your area, find support services, and help arrange for needed services. The MemberConnections Representatives work with New Hampshire Healthy Families' Case Managers to ensure your healthcare needs are addressed. Please call Member Services at 1-866-769-3085. They can also visit your home to help you with healthcare needs and social services.

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ConnectionsPLUS®

ConnectionsPLUS is part of the MemberConnections program that provides free cell phones to certain members who do not have safe, reliable access to a telephone. This program allows our members to have 24-hour instant access to physicians, case managers, New Hampshire Healthy Families staff, telehealth services, and 911. To learn more about the program, please contact Member Services 1-866-769-3085 or log onto our website at **www.nhhealthyfamilies.com**.

Member Satisfaction

We hope you will always be happy with us and our network providers. If you are not happy, please let us know. New Hampshire Healthy Families has steps for handling any problems you may have. New Hampshire Healthy Families offers all of our members the following processes to achieve member satisfaction:

- Internal Grievance Process.
- Internal Appeal Process.
- Access to Medicaid Fair Hearing.

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New Hampshire Healthy Families maintains records of each grievance and appeal filed by our members or by their authorized representatives, and the responses to each grievance and appeal, for a period of seven (7) years.

Internal Grievance Process

New Hampshire Healthy Families wants to fully resolve your problems or concerns. New Hampshire Healthy Families will not hold it against you or treat you differently if you file a grievance. **A Grievance is an expression of dissatisfaction about any matter other than an "action"**. Grievances are any oral or written complaint submitted to New Hampshire Healthy Families that has been initiated by you, or your authorized representative, including your provider, concerning any aspect or action of New Hampshire Healthy Families relative to you. An appeal is a request to review of an action or adverse determination and the steps for an Internal Appeal are followed.

How to File a Grievance

Filing a grievance will **not** affect your healthcare services. We **want** to know your concerns so we can improve our services.

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To file a grievance, call Member Services at 1-866-769-3085 (TDD/TTY 1-855-742-0123). You can also write a letter and mail it to the address below or fax your grievance to New Hampshire Healthy Families at 1-877-502-7255. Be sure to include:

- Your first and last name.
- Your Medicaid ID number.
- Your address and telephone number.
- What you are unhappy with.
- What you would like to have happen.

**New Hampshire Healthy Families
Grievance and Appeal Coordinator**
2 Executive Park Dr.
Bedford, NH 03110

If someone else is going to file a grievance for you, we must have your written permission for that person to file your grievance or appeal. You can call Member Services to receive a form or go to www.nhhealthyfamilies.com. This form is to assign your right to file a grievance or appeal to someone else. A doctor acting for you can file a grievance or appeal for you.

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If you need assistance in completing a grievance or an interpreter, please call New Hampshire Healthy Families at 1-866-769-3085.

If you have any proof or information that supports your grievance, you may send it to us and we will add it to your case. You may supply this information to New Hampshire Healthy Families by including it with a letter, or by sending us an email, a fax, or by bringing it to New Hampshire Healthy Families in person. You may also request to receive copies of any documentation that New Hampshire Healthy Families used to make the decision about your care, grievance, or appeal.

You can expect a resolution orally or a written response from New Hampshire Healthy Families within 45 calendar days of your grievance.

There will be no retaliation against you or your representative for filing a grievance or appeal with New Hampshire Healthy Families.

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Internal Appeal Process

Filing an Appeal

An appeal is a request to review a Notice of Adverse Action. This review makes us look again at the Notice of Action. You can request this review by phone or in writing.

Actions occur when New Hampshire Healthy Families:

- Denies the care requested.
- Decreases the amount of care.
- Ends care that has previously been approved.
- Denies payment for care and you may have to pay for it.

You will know that New Hampshire Healthy Families is taking an action because we will send you a letter. The letter is called a **Notice of Action**. If you do not agree with the action, you may request an **Appeal**.

Who may file an Appeal?

- You, the member (or the parent or guardian of a minor member).
- A person named by you.

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- A doctor acting for you.

You must give written permission if someone else files an appeal for you. eNew Hampshire Healthy Families will include a form in the Notice of Action letter. Contact Member Services at 1-866-769-3085 if you need help. We can assist you in filing an appeal.

When Does an Appeal Have to be Filed?

The Notice of Action will tell you about this process. **You may file an appeal within 30 calendar days from the date of the Notice of Action.** If you make your request by phone or in person, you must also send New Hampshire Healthy Families a letter confirming your request.

You may ask to keep getting care related to your review while we decide. You may have to pay for this care, if the decision is **not** in your favor.

New Hampshire Healthy Families will give you a written decision within **30 calendar days** from the date of your request. If more than **30 calendar days** is needed to make a decision, we will send a letter to you. New Hampshire Healthy Families will ask for extra time if more information is needed. The extra

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time may be better for your case. New Hampshire Healthy Families will ask for the extra 14 calendar days in writing. The letter will say why we need more time.

Expedited Appeals

You or your doctor may want us to make a fast decision. You can ask for an Expedited Review if you or your doctor feel that your health is at risk. If you feel this is needed, call our Grievance and Appeal Coordinator at 1-866-769-3085. **We will decide within 3 calendar days of receipt of the appeal request.** However, the review period may be up to 14 days. New Hampshire Healthy Families will make reasonable efforts to contact you by phone if your appeal is denied. You will also receive a letter telling the reason for the decision and what to do if you don't like the decision.

Medicaid Fair Hearing for Appeals

What if I am still not happy?

If you are dissatisfied with New Hampshire Healthy Families' decision, you may request a Medicaid Fair Hearing after you have exhausted your appeal rights with New Hampshire Healthy Families.

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You or your doctor may request a Medicaid Fair Hearing within **30 calendar days** of receiving the notice of action or resolution. If you request a Medicaid Fair Hearing and want your benefits to continue, you must file your request within **10 calendar days** from the date you receive our decision. If the Medicaid Fair Hearing finds that New Hampshire Healthy Families' decision was right, you may be responsible for the cost of the continued benefits.

To request a Medicaid Fair Hearing, please write to:

Administrative Appeals Unit
Office of Operations Support
NH Department of Health & Human Services
105 Pleasant Street
Concord, NH 03301
1-800-852-3345, ext. 4292

Waste, Abuse, and Fraud (WAF) Program

Authority and Responsibility

New Hampshire Healthy Families is serious about finding and reporting fraud and abuse. Our staff is available to talk to you about this. **Here is the address and phone numbers:**

New Hampshire Healthy Families Member Services
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www.nhhealthyfamilies.com

**New Hampshire Healthy Families
Compliance Department
2 Executive Park Dr.
Bedford, NH 03110**

Or you can call New Hampshire Healthy Families' Waste, Abuse, and Fraud Hotline at 1-866-685-8664.

Waste, abuse, and fraud means that any member, any provider, or another person is misusing Medicaid, or New Hampshire Healthy Families' resources. This could include things like:

- Loaning, selling or giving your New Hampshire Healthy Families member ID card or Medicaid ID card to someone.
- Misusing New Hampshire Healthy Families or Medicaid benefits.
- Billing New Hampshire Healthy Families for "free" services.
- Wrongful billing to New Hampshire Healthy Families by a provider.
- Billing New Hampshire Healthy Families for services not provided.
- Any action to defraud New Hampshire Healthy Families or Medicaid

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You can also report fraud and abuse to Medicaid. Medicaid's address and phone number are:

Office of the Attorney General
Medicaid/Healthcare Fraud Unit
33 Capitol Street
Concord, NH 03301

(603) 271-1246

Your healthcare benefits are given to you based on your eligibility for both Medicaid and the New Hampshire Medicaid Care Management program. You must not share your benefits with anyone. New Hampshire Healthy Families' network providers must also report any misuse of benefits to New Hampshire Healthy Families. New Hampshire Healthy Families must also report any misuse or wrongful use of benefits to Medicaid. If you misuse your benefits, you could lose them. Medicaid may also take legal action against you if you misuse your benefits.

If you think a doctor, a hospital, another New Hampshire Healthy Families member, or another person is misusing the Medicaid or New Hampshire Healthy Families resources, tell us right away. We will take action against anyone who does this. New Hampshire Healthy Families will take your call about

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waste, abuse, and fraud seriously. Call New Hampshire Healthy Families' WAF Hotline at 1-866-685-8664. You do not need to give your name.

What to do if you get a Bill

Be sure to talk with your doctor about services that are covered and services that are not covered. You should not be billed for services that are covered, as long as you follow plan rules. If you get a bill for a service that should be covered by New Hampshire Healthy Families, call your provider right away. Make sure your provider has all of your insurance information and knows to bill New Hampshire Healthy Families. If you still get a bill from the provider after you give your insurance information, call Member Services for help at 1-866-769-3085. Do not pay the bill yourself.

If you ask for a service that is not covered by New Hampshire Healthy Families, your doctor will ask you to sign a statement saying you will pay for the service yourself. If you sign a statement saying you will pay for the non-covered service, then you are responsible for the bill. If you have any questions about a bill, you can call Member Services at 1-866-769-3085.

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Other Insurance

You must let New Hampshire Healthy Families and Medicaid know if you have other insurance coverage with another company. New Hampshire Healthy Families can help coordinate your other benefits with your other insurance company.

Accidental Injury or Illness (Subrogation)

If a New Hampshire Healthy Families member has to see a doctor for an injury or illness that was caused by another person or business, you must call Member Services at 1-866-769-3085 to let us know. For example, if you are hurt in a car wreck, by a dog bite, or if you fall and are hurt in a store, then another insurance company might have to pay the doctor's bills and/or hospital bills. When you call, we will need the name of the person at fault, their insurance company, and the names of any attorneys involved.

Member Rights and Responsibilities

Members are informed of their rights and responsibilities through the Member Handbook. New Hampshire Healthy Families network providers are also expected to respect and honor member's rights.

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New Hampshire Healthy Families members have the following rights:

- To be treated with respect and with due consideration for his/her dignity and privacy.
- To receive information on available treatment options and alternatives, presented in a manner appropriate to the member's ability to understand
- To participate in decisions regarding his/her healthcare, including the right to refuse treatment.
- To complete information about their specific condition and treatment options, regardless of cost or benefit coverage,
- To seek second opinions
- To obtain information about available experimental treatments and clinical trials and how such research can be accessed
- To obtain assistance with care coordination from the PCP's office.

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- To be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience or retaliation, as specified in the Federal regulations on the use of restraints and seclusion.
- To express a concern or appeal about New Hampshire Healthy Families or the care it provides and receives a response in a reasonable period of time
- To be able to request and receive a copy of his/her medical records, (one copy free of charge) and request that they be amended or corrected.
- To choose his/her health professional to the extent possible and appropriate, in accordance with 42 CFR §438.6(m).
- To receive health care services that are accessible, are comparable in amount, duration and scope to those provided under Medicaid FFS and are sufficient in amount, duration and scope to reasonably be expected to achieve the purpose for which the services are furnished.
- To receive services that are appropriate and are not denied or reduced solely because of diagnosis, type of illness, or medical condition.

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- To receive all information — e.g., enrollment notices, informational materials, instructional materials, available treatment options and alternatives.—in a manner and format that may be easily understood as defined in the Provider Agreement and this Member Handbook
- To receive oral interpretation services free of charge for all non-English languages, not just those identified as prevalent.
- To be notified that interpretation services are available and how to access those services.

New Hampshire Healthy Families members have the following responsibilities:

- To inform New Hampshire Healthy Families of the loss or theft of an ID card
- Present the New Hampshire Healthy Families ID card when using healthcare services
- Be familiar with New Hampshire Healthy Families procedures to the best of the member's abilities
- To call or contact New Hampshire Healthy Families to obtain information and have questions clarified

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- To provide participating network providers with accurate and complete medical information
- Following the prescribed treatment of care recommended by the provider or letting the provider know the reasons the treatment cannot be followed, as soon as possible;
- To make every effort to keep any agreed upon appointments, and follow-up appointments; and accessing preventive care services.
- To live healthy lifestyles and avoid behaviors known to be detrimental.
- To provide accurate and complete information to all health care providers.
- To become knowledgeable about New Hampshire Healthy Families coverage provisions, rules and restrictions.
- To ask questions of providers to determine the potential risks, benefits, and costs of treatment alternatives, and then making care decisions after carefully weighing all pertinent factors
- To follow the grievance process established by New Hampshire Healthy Families (and outlined in the Member Handbook) if there is a disagreement with a provider.

New Hampshire Healthy Families Member Services
Department: 1-866-769-3085; (TDD/TTY) 1-855-742-0123,
Relay 711

www.nhhealthyfamilies.com

Advance Directives

All New Hampshire Healthy Families adult members have a right to make Advance Directives for healthcare decisions. This includes planning treatment before you need it. Advance Directives are forms you can complete to protect your rights for medical care. You can speak to your provider about Advance Directives or call Member Services at 1-866-769-3085 for help in finding the form. Once completed, ask you PCP to put the form in your file.

Together, you and your PCP can make decisions that will set your mind at ease. It can help your PCP and other providers understand your wishes about your health. You should talk to your doctor about your wishes.

Advance Directives will not take away your right to make your own decisions and will work only when you are unable to speak for yourself. If your directive is not being followed you may file a complaint. Complaints concerning noncompliance with the Advance Directives requirements may be filed with the Insurance Department. A request can be sent in writing to:

New Hampshire Healthy Families Member Services
Department: 1-866-769-3085; (TDD/TTY) 1-855-742-0123,
Relay 711

www.nhhealthyfamilies.com

Insurance Department
Consumer Services Division
21 South Fruit Street, Suite 14
Concord, NH 03301
1-603-271-2261

Examples of Advance Directives include:

- Living Will.
- Health Care Power of Attorney.
- "Do Not Resuscitate" Orders.

Our Advance Directive policies and procedures are revised as needed to address any changes in applicable law. We will tell you about those changes within 90 days after the date of the change if the changes affect you.

You should not be discriminated against for not having an Advance Directive.

New Hampshire Healthy Families Member Services
Department: 1-866-769-3085; (TDD/TTY) 1-855-742-0123,
Relay 711

www.nhhealthyfamilies.com

This Notice Describes How Medical Information About You May Be Used And Disclosed And How You Can Get Access To This Information. Please Review It Carefully.

Notice Of Privacy Practices

Effective: December 1, 2013

For help to translate or understand this, please call 1-866-769-3085. If you are hearing impaired, call our TDD/TTY line at 1-855-742-0123 or Relay 711.

Si necesita ayuda para traducir o entender este texto, por favor llame al telefono 1-866-769-3085 (TDD/TTY 1-855-742-0123 or Relay 711). Interpreter services are provided free of charge to you.

Covered Entities Duties:

New Hampshire Healthy Families is a Covered Entity as defined and regulated under the Health Insurance Portability and Accountability Act of 1996 (HIPAA). New Hampshire Healthy Families is required by law to keep the privacy of your protected health information (PHI). We must give you this Notice. It includes our legal duties and privacy practices related to your PHI. We must follow the terms of the current notice. We must let you know if there is a breach of your unsecured PHI.

This Notice describes how we may use and disclose your PHI. It describes your rights to access, change and manage your PHI. It also says how to use rights.

New Hampshire Healthy Families can change this Notice. We reserve the right to make the revised or changed Notice effective for your PHI we already have. We can also make it effective for any of your PHI we get in the future. New Hampshire Healthy Families will promptly update and get you this Notice whenever there is a material change to the following stated in the notice:

- the uses and disclosures
- your rights
- our legal duties
- other privacy practices stated in the notice

Updated notices will be on our website or in our Member Newsletter. We will also mail you or email you a copy on request.

Uses and Disclosures of Your PHI:

The following is a list of how we may use or disclose your PHI without your permission or authorization:

- **Treatment.** We may use or disclose your PHI to a physician or other healthcare provider providing treatment to you. We do this to coordinate your treatment among providers. We also do this to help us with prior authorization decisions related to your benefits.
- **Payment.** We may use and disclose your PHI to make benefit payments for the healthcare services you received. We may disclose your PHI for payment purposes to

another health plan, a healthcare provider, or other entity. This is subject to the federal Privacy Rules. Payment activities may include:

- processing claims
- determining eligibility or coverage for claims
- issuing premium billings
- reviewing services for medical necessity
- performing utilization review of claims
- **HealthCare Operations.** We may use and disclose your PHI to perform our healthcare operations. These activities may include:
 - providing customer services
 - responding to complaints and appeals
 - providing case management and care coordination
 - conducting medical review of claims and other quality assessment
 - improvement activities

In our healthcare operations, we may disclose PHI to business associates. We will have written agreements to protect the privacy of your PHI with these associates. We may disclose your PHI to another entity that is subject to the federal Privacy Rules. The entity must also have a relationship with you for its healthcare operations. This includes the following:

- quality assessment and improvement activities
- reviewing the competence or qualifications of healthcare professionals
- case management and care coordination
- detecting or preventing healthcare fraud and abuse.
- **Appointment Reminders/Treatment Alternatives.** We may use and disclose your PHI to remind you of an appointment for treatment and medical care with us. We may also use or disclose it to give you information about treatment alternatives. We may also use or disclose it for other health-related benefits and services. For example, information on how to stop smoking or lose weight.
- **As Required by Law.** If federal, state, and/or local law requires a use or disclosure of your PHI, we may use or disclose your PHI information. We do this when the use or disclosure complies with the law. The use or disclosure is limited to the requirements of the law. There could be other laws or regulations that conflict. If this happens, we will comply with the more restrictive laws or regulations.
- **Public Health Activities.** We may disclose your PHI to a public health authority to prevent or control disease, injury, or disability. We may disclose your PHI to the Food and Drug Administration (FDA). We can do this to ensure the quality, safety or effectiveness of products or services under the control of the FDA.
- **Victims of Abuse and Neglect.** We may disclose your PHI to a local, state, or federal government authority. This includes social services or a protective services agency

authorized by law to have these reports. We will do this if we have a reasonable belief of abuse, neglect or domestic violence.

- **Judicial and Administrative Proceedings.** We may disclose your PHI in judicial and administrative proceedings. We may also disclose it in response to the following:
 - an order of a court
 - administrative tribunal
 - subpoena
 - summons
 - warrant
 - discovery request
 - similar legal request.
- **Law Enforcement.** We may disclose your relevant PHI to law enforcement when required to do so. For example, in response to a:
 - court order
 - court-ordered warrant
 - subpoena
 - summons issued by a judicial officer
 - grand jury subpoena

We may also disclose your relevant PHI to identify or locate a suspect, fugitive, material witness, or missing person.

- **Coroners, Medical Examiners and Funeral Directors.** We may disclose your PHI to a coroner or medical examiner. This may be needed, for example, to determine a cause of death. We may also disclose your PHI to funeral directors, as needed, to carry out their duties.
- **Organ, Eye and Tissue Donation.** We may disclose your PHI to organ procurement organizations. We may also disclose your PHI to those who work in procurement, banking or transplantation of:
 - cadaveric organs
 - eyes
 - tissues
- **Threats to Health and Safety.** We may use or disclose your PHI if we believe, in good faith, that it is needed to prevent or lessen a serious or imminent threat. This includes threats to the health or safety of a person or the public.
- **Specialized Government Functions.** If you are a member of U.S. Armed Forces, we may disclose your PHI as required by military command authorities. We may also disclose your PHI:
 - to authorized federal officials for national security
 - to intelligence activities
 - the Department of State for medical suitability determinations

- for protective services of the President or other authorized persons
- **Workers' Compensation.** We may disclose your PHI to comply with laws relating to workers' compensation or other similar programs, established by law. These are programs that provide benefits for work-related injuries or illness without regard to fault.
- **Emergency Situations.** We may disclose your PHI in an emergency situation, or if you are unable to respond or not present. This includes to a family member, close personal friend, authorized disaster relief agency, or any other person you told us about. We will use professional judgment and ePHIperience to decide if the disclosure is in your best interests. If it is in your best interest, we will only disclose the PHI that is directly relevant to the person's involvement in your care.
- **Research.** In some cases, we may disclose your PHI to researchers when their clinical research study has been approved. They must have safeguards in place to ensure the privacy and protection of your PHI.

Verbal Agreement to Uses and Disclosure Your PHI

We can take your verbal agreement to use and disclose your PHI to other people. This includes family members, close personal friends or any other person you identify. You can object to the use or disclosure of your PHI at the time of the request. You can give us your verbal agreement or objection in advance. You can also give it to us at the time of the use or disclosure. We will limit the use or disclosure of your PHI in these cases.

We limit the information to what is directly relevant to that person's involvement in your healthcare treatment or payment.

We can take your verbal agreement or objection to use and disclose your PHI in a disaster situation. We can give it to an authorized disaster relief entity. We will limit the use or disclosure of your PHI in these cases. It will be limited to notifying a family member, personal representative or other person responsible for your care of your location and general condition. You can give us your verbal agreement or objection in advance. You can also give it to us at the time of the use or disclosure of your PHI.

Uses and Disclosures of Your PHI That Require Your Written Authorization

We are required to obtain your written authorization to use or disclose your PHI, with few ePHIceptions, for the following reasons:

- **Sale of PHI.** We will request your written approval before we make any disclosure that is deemed a sale of your PHI. A sale of your PHI means we are getting paid for disclosing the PHI in this manner.
- **Marketing.** We will request your written approval to use or disclose your PHI for marketing purposes with limited exceptions. For example, when we have face-to-face marketing communications with you. Or, when we give promotional gifts of nominal value.
- **Psychotherapy Notes.** We will request your written approval to use or disclose any of your psychotherapy notes that we may have on file with limited ePHIception. For example, for certain treatment, payment or healthcare operation functions.

All other uses and disclosures of your PHI not described in this Notice will be made only with your written approval. You may take back your approval at any time. The request to take back approval must be in writing. Your request to take back approval will go into effect as soon as you request it. There are two cases it won't take effect as soon as you request it. The first case is when we have already taken actions based on past approval. The second case is before we received your written request to stop.

Your Rights

The following are your rights concerning your PHI. If you would like to use any of the following rights, please contact us. Our contact information is at the end of this Notice.

- **Right to Request Restrictions.** You have the right to ask for restrictions on the use and disclosure of your PHI for treatment, payment or healthcare operations. You can also ask for disclosures to persons involved in your care or payment of your care. This includes family members or close friends. Your request should state the restrictions you are asking for. It should also say to whom the restriction applies. We are not required to agree to this request. If we agree, we will comply with your restriction request. We will not comply if the information is needed to provide you with emergency treatment. However, we will restrict the use or disclosure of PHI for payment or healthcare operations to a health plan when you have paid for the service or item out of pocket in full.
- **Right to Request Confidential Communications.** You have the right to ask that we communicate with you about your PHI in other ways or locations. This right only applies if the information could endanger you if it is not

communicated in other ways or locations. You do not have to explain the reason for your request. However, you must state that the information could endanger you if the change is not made. We must work with your request if it is reasonable and states the other way or location where you PHI should be delivered.

- **Right to Access and Received Copy of your PHI.** You have the right, with limited exceptions, to look at or get copies of your PHI contained in a designated record set. You may ask that we give copies in a format other than photocopies. We will use the format you ask for unless we cannot practicably do so. You must ask in writing to get access to your PHI. If we deny your request, we will give you a written explanation. We will tell you if the reasons for the denial can be reviewed. We will also let you know how to ask for a review or if the denial cannot be reviewed.
- **Right to Change your PHI.** You have the right to ask that we change your PHI if you believe it has wrong information. You must ask in writing. You must explain why the information should be changed. We may deny your request for certain reasons. For example, if we did not create the information you want changed and the creator of the PHI is able to perform the change. If we deny your request, we will provide you a written explanation. You may respond with a statement that you disagree with our decision. We will attach your statement to the PHI you ask that we change. If we accept your request to change the information, we will make reasonable efforts to inform others of the change. This includes people you name. We will also make the effort to include the changes in any future disclosures of that information.

- **Right to Receive an Accounting of Disclosures.** You have the right to get a list of times within the last 6 year period in which we or our business associates disclosed your PHI. This does not apply to disclosures for purposes of treatment, payment, healthcare operations, or disclosures you authorized and certain other activities. If you ask for this more than once in a 12-month period, we may charge you a reasonable, cost-based fee for responding to these additional requests. We will give you more information on our fees at the time of your request.
- **Right to File a Complaint.** If you feel your privacy rights have been violated or that we have violated our own privacy practices, you can file a complaint with us. You can do this in writing. You can also do this by phone. Use the contact information at the end of this Notice. You can also submit a written complaint to the U.S. Department of Health and Human Services. See the contact information on the HHS website at www.hhs.gov/ocr. If you request, we will provide you with the address to file a written complaint with HHS. **We Will Not Take Any Action Against You For Filing A Complaint.**
- **Right to Receive a Copy of this Notice.** You may ask for a copy of our Notice at any time. Use the contact information listed at the end of the Notice. If you get this Notice on our website or by email, you can request a paper copy of the Notice.

Contact Information

If you have any questions about this Notice, our privacy practices related to your PHI or how to exercise your rights you can contact us in writing. You can also contact us by phone. Use the contact information listed below.

New Hampshire Healthy Families
Attn: Privacy Official
2 Executive Park Dr.
Bedford, NH 03110
1-866-769-3085
(TDD/TTY 1-855-742-0123, Relay 711)

You may also contact the Secretary of the U.S. Department of Health and Human Services:

Office for Civil Rights – Region I
U.S. Department of Health & Human Services
Government Center
John F. Kennedy Federal Building
Boston, MA 02203

Voice phone (617)565-1340 Fax (617)565-3809
TDD (617)565-1343

Authorization to Disclose Health Information

Notice to Member:

- Completing this form will allow New Hampshire Healthy Families to share your health information with the person or group that you identify below.
- You do not have to sign this form or give permission to share your health information. Your services and benefits with New Hampshire Healthy Families will not change if you do not sign this form.
- Right to cancel (revoke): If you want to cancel this Authorization Form, fill out the Revocation Form on the next page and mail it to us at the address at the bottom of the page.
- New Hampshire Healthy Families cannot promise that the person or group you allow Plan to share your health information with will not share it with someone else.
- Keep a copy of all completed forms that you send to us. New Hampshire Healthy Families can send you copies if you need them.
- Fill in all the information on this form. When finished, mail it to the address at the bottom of the page.

Member Information:

Member _____ Name _____ (print):

Member Date of Birth: ____/____/____

Member Medicaid ID Number/Member ID#: _____

I give New Hampshire Healthy Families permission to share my health information with the person or group named below. The purpose of the authorization is to help me with my New Hampshire Healthy Families benefits and services.

Recipient Information:

Name _____ (person/group):

Address:

City: _____ State: _____ Zip: _____

Phone: (____) ____ - _____

New Hampshire Healthy Families can share this Health Information: (check all boxes that apply)

- All of my health information; Or
- All of my health information Except:
- Prescription drug/medication information
- Acquired Immunodeficiency Syndrome (AIDS) or Human Immunodeficiency Virus (HIV) information
- Treatment for alcohol and/or substance abuse information

Behavioral health services or psychiatric care information

Other: _____

Authorization End Date: ___/ ___/ ___(date the authorization ends unless cancelled)

Member Signature: _____

(Member or Legal Representative Sign Here)

Date: ___/ ___/ ___

If you are signing for the Member, describe your relationship. If you are signing for the Member or are the Member's personal representative, describe this below and send us copies of those forms (such as power of attorney or order of guardianship).

New Hampshire Healthy Families - Member Services

2 Executive Park Dr.

Bedford, NH 03110

Toll Free: 1-866-769-3085 Fax: 1-877-502-7255

I want to cancel, or revoke, the permission I gave to New Hampshire Healthy Families to share my health information with this person or group:

Recipient Information:

Member _____ Name _____ (print):

Address: _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____ - _____

Authorization Signed Date (if known): ___/___/___

Member Information:

Member _____ Name _____ (print): _____

Member Date of Birth: ___/___/___

Member Medicaid ID Number/Member ID#: _____

I understand that my health information may have already been shared because of the permission I gave before. I also understand that this cancellation only applies to the permission I gave to share my health information with this person or group. It does not cancel any other authorization forms I signed for health information to be shared with another person or group.

Member Signature: _____

(Member or Legal Representative Sign Here)

Date: ___/___/___

If you are signing for the Member, describe your relationship below. If you are the Member's personal representative, describe this below and send us copies of those forms (such as power of attorney or order of guardianship).

New Hampshire Healthy Families will stop sharing your health information when we get this form. Use the mailing address below. You can also call for help at the number below.

New Hampshire Healthy Families - Member Services

2 Executive Park Dr.

Bedford, NH 03110

Toll Free: 1-866-769-3085 Fax: 1-877-502-7255

Authorized Representative Form

You have the right to choose someone to represent you during your Appeal with New Hampshire Healthy Families. To designate a representative, please complete this form and return it to New Hampshire Healthy Families. You may revoke this designation at any time by submitting a request to us in writing. Please note, if we do not receive a signed Authorized Representative Form in the timeframe for resolving your Appeal, your appeal may be dismissed. If any such action is taken, you will be notified in writing.

1. I hereby give permission to _____
Name of designated representative

to act as my Authorized Representative to New Hampshire Healthy Families and to share information listed below in Section 2 regarding my Appeal or Grievance with New Hampshire Healthy Families or its delegate.

2. New Hampshire Healthy Families may share the following information (**check all that apply**):

- Eligibility notices and information about eligibility for and access to my New Hampshire Healthy Families benefits
- Information about my medical treatment (including medical and psychiatric records). By giving my representative permission to share my information, I am specifically giving permission to share any information about drug and alcohol treatment that is included in such information.
- Other: (**specify**) _____

3. New Hampshire Healthy Families may share information listed in Section 2 above with the person or organization who is serving as my Authorized Representative.
4. New Hampshire Healthy Families may share the information listed in Section II for the timely resolution of my Appeal.
5. This permission is good until: ____/ ____/ ____.

Date

6. I understand that I may cancel this permission at any time by sending a letter to:

New Hampshire Healthy Families

2 Executive Park Dr.

Bedford, NH 03110

Toll Free: 1-866-769-3085 Fax: 1-877-502-7255

I have had the opportunity to read and consider this Authorization and agree to its terms.

____/____/____

Date

Signature

Printed Name



2 Executive Park Drive, Suite 223
Bedford, NH 03110