

Informing Families

Building Trust

A Partnership for Better Communication
on Developmental Disabilities Issues in Washington State

Ready...Set...Know...

Tips for Choosing a Healthy Options Managed Care Plan

In the coming months, our state is moving to managed health care for individuals who receive SSI-Medicaid (but *not* Medicaid/Medicare). It's called the Healthy Options program. This bulletin is Part Two of a three-part series to help keep you informed and prepared over the coming weeks and months.

The Health Care Authority (HCA) contracts with five different managed care plans (see inset) for its Healthy Options program. Although not all five are offered in every area, everyone will have at least two plans to choose from. The question is, how do you know which plan is the right one for you? The following checklist can help guide your decision and response to your enrollment letter.

Checklist

- Contact the plan (number provided in your Healthy Options handbook) for a list of primary care providers (PCP).** Or, call your current health care provider to ask if s/he is on the plan you've been enrolled in. Your PCP will be the person responsible for referrals to specialists, therapies and treatment.
- If there's a specialist you prefer,** check to make sure s/he is a member of the plan's provider network.
- Consider current or potential treatments** when selecting a plan. What is the plan's hospital affiliation? Which specialists are in its network?
- Ask about the plan's process and policies around pharmacy benefits.** There may be some differences in each plan's formularies; however, Healthy Options requires that the plans continue your treatment plan, including prescriptions, for 90 days or as soon you can be evaluated by the plan's provider.

Healthy Options Plans*



*Although there are five plans throughout the state, not every area will have all five plans.

REQUESTING AN EXEMPTION

If you think the enrollment date will disrupt your care, request an "exemption" BEFORE the effective date. If you are denied an exemption, the denial notice will explain appeal rights. You also can seek legal assistance through **CLEAR: 1-888-201-1014**.

REMEMBER: You can change your plan at any time. To do so, visit the ProviderOne Client Portal at <https://www.waproviderone.org/client>, or call the automated Interactive Voice Response (IVR) system: 1-800-562-3022, press 6 for client services, and then press 2 for health plan enrollment.

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