



HEALTHY OPTIONS | BASIC HEALTH PLUS
STATE CHILDREN'S HEALTH INSURANCE PROGRAM (SCHIP)

member guide

Need a translation?

Group Health Cooperative has special services to help people who can't read English or who have trouble hearing or seeing. These services are offered at no cost. Please call Customer Service for more information at **1-888-901-4636**.

If this is not in a language you can read, please call 1-888-901-4636 for help. (TTY/TDD only through the Washington Relay Service at 1-800-833-6388.)

ENGLISH

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AMHARIC

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CAMBODIAN

如果您看不懂這種語言，請電1-888-901-4636 請求幫助。

CHINESE

اگر این زبانی نیست که بتوانید بخوانید، لطفاً برای کمک با شماره 1-888-901-4636 تماس

FARSI

Yog koj nyeem tsis tau yam lus no, thov hu xovtooj rau 1-888-901-4636 uas yuav muaj kev pab.

HMONG

No daytoy saan a pagsasao nga inka mabasa, pangaasim ta awagam ti numero 1-888-901-4636 tapno matulungan ka.

ILOCANO

あなたには専門家による言語支援を無料で受ける権利があります。通訳が必要な場合はお知らせください。

JAPANESE

이 내용의 글이 귀하가 읽지 못하는 언어로 써여져 있으면 1-888-901-4636로 전화하여 도움을 요청하십시오.

KOREAN

ຖ້າບໍ່ແມ່ນພາສາທີ່ທ່ານຊ່ານໄດ້, ກະລຸນາໂທຫາ 1-888-901-4636 ເພື່ອຂໍຄວາມຊ່ວຍເຫລືອ.

LAOTIAN

Yoo afaan waraqaan kun ittiin barreffame dubbisu hindandeesu ta'e lakkoofsa bilbila 1-888-901-4636 bilbli gargaarsa gaafadhu.

OROMO

ਅਗਰ ਇਹ ਅਜੇਹੀ ਭਾਸ਼ਾ ਹੈ ਜਿਸ ਨੂੰ ਤੁਸੀਂ ਪੜ੍ਹ ਨਹੀਂ ਸਕਦੇ ਤਾਂ ਮਦਦ ਲਈ ਕਿਰਪਾ ਕਰਕੇ 1-888-901-4636 ਨੰਬਰ 'ਤੇ ਫੋਨ ਕਰੋ।

PUNJABI

Dacă nu este limba pe care o puteți citi, vă rugăm să telefonați la 1-888-901-4636 pentru asistență.

ROMANIAN

Если данный документ напечатан на языке, на котором вы не можете читать, пожалуйста, обратитесь за помощью, позвонив по телефону 1-888-901-4636.

RUSSIAN

Afai o lenei fa'amatalaga e le o iai ile gagana e mafai ona e faitauina, fa'amolemole telefoni ile 1-888-901-4636 mo se fesoasoani.

SAMOAN

Ako ovo nije pisano na jeziku koji Vi čitate, molimo da nazovete 1-888-901-4636 za pomoć.

SERBO-CROATIAN

您有權免費獲得由專業人員提供的語言幫助。如果您需要請一位口譯人員，請告訴我們。

SIMPLIFIED CHINESE

Haddii aysan tani ahayn luqadda aad akhrin kartid, fadlan wac 1-888-901-4636 si lagu caawiyo.

SOMALI

Si esto no está en un idioma que puede leer, por favor llame al 1-888-901-4636 para recibir ayuda.

SPANISH

Kung hindi ito nasa isang wika na inyong mababasa, mangyaring tumawag sa 1-888-901-4636 para matulungan.

TAGALOG

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TIGRIGNA

Якщо ви не можете прочитати цю інформацію, будь ласка, зверніться по допомогу за телефоном 1-888-901-4636.

UKRAINIAN

Nếu đây không phải là ngôn ngữ của quý vị, xin hãy gọi số 1-888-901-4636 để được giúp đỡ.

VIETNAMESE

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GROUP HEALTH IS A SMOKE-FREE ENVIRONMENT

To demonstrate our national and community leadership role in health promotion and wellness, smoking and all tobacco use are prohibited on all Group Health property—including both building interiors and on the facility grounds. Smoking and all tobacco use are also prohibited on or in any property owned or leased by Group Health (including vehicles).



THE BASICS OF YOUR PLAN

Welcome

With Group Health Cooperative's Healthy Options and Basic Health Plus plans and the State Children's Health Insurance Program, you can see many doctors. You can also go to many hospitals and pharmacies. We want to help you and your family stay healthy. And when you are ill, we want to give you the best care possible. That's why your plan covers checkups, prenatal care, vision care, well-child care, and specialty and hospital care.

You will get a copy of this guide 15 days after you are enrolled. You can also request a guide at any time after you are enrolled in any of the health plans listed above. Call Customer Service with any questions.

If someone you know is a member of one of the health plans listed above and that person cannot see or read, we can provide this information in a different format. Please call Customer Service at **1-888-901-4636**.

Your network

The Group Health Plan gives you access to Group Health's many physicians plus thousands of contracted doctors.

GROUP HEALTH CONVENIENCE

Group Health Cooperative owns medical centers and facilities throughout Washington and North Idaho. When you choose care with Group Health and get your care at Group Health medical centers, getting the most from your health plan becomes a lot easier. Your personal physician, the lab, and pharmacy are all in one location. So driving around town is now a thing of the past.

Identification card

When you join Group Health, you will get a Group Health ID card. Your family members will too when they join. There are important phone numbers on the back of your Group Health ID card. If each family member does not receive a card, please call Customer Service at **1-888-901-4636**. Please carry your Group Health ID card with you. Office staff will ask for your identification number when you:

- Make, cancel, or check appointments
- Order or pick up prescriptions
- Receive emergency care
- Call the Consulting Nurse

Call us if any information on the card is wrong, lost, stolen, or if it needs to be replaced, let us know. Just call Customer Service.

Provider directory

If you would like a list of Group Health doctors you can see, please go to **www.ghc.org** or contact Customer Service at **1-888-901-4636** and tell them where you live. Our Customer Service staff can tell you, or send you information, about providers' qualifications, languages spoken, any practice restrictions, and availability.

PREVENTIVE CARE

We want to keep you well at Group Health. Our preventive care services cover a wide range of important health care issues. Your doctor will work with you to design a health care approach that best meets your needs.

To find out more, call **1-800-992-2279**.

WHAT IS COVERED

Member Services

Group Health's Healthy Options/Basic Health Plus/SCHIP members get the following services:

- Physician and other professional services
- Office visits, physical exams, TB testing, and immunizations/shots
- Vision care exams (Note: a vision care exam is covered once every 24 months for adults and once every 12 months for children under 21 years of age)
- Second opinions by Group Health providers
- Lab, radiology, and other medical imaging services
- Radiation therapy and chemotherapy
- Drugs
- Oxygen and respiratory services
- Emergency care for emergencies
- Hospital care, inpatient and outpatient surgery; and nursing facility services when medically needed
- Medically necessary transport, including ambulance
- Home health and hospice care
- Durable medical equipment, prosthetic and orthotic devices, surgical and orthopedic appliances, braces, and medical supplies
- Rehabilitation services, inpatient and outpatient physical therapy, occupational therapy, and speech therapy
- Maternity care, including prenatal care, labor, and delivery
- Family planning services, including contraceptives
- Newborn screenings
- STD and HIV testing
- Medically necessary termination of pregnancy
- Sterilizations for members over the age of 21
- Chiropractic services (children only if referred by personal physician)
- Hemodialysis
- Blood, blood components, and human blood products
- Help to quit smoking
- Acute emergency detoxification services
- Limited outpatient mental health services: up to 12 one-hour visits for adults and 20 one-hour visits for children up to the age of 19 for treatment per calendar year by an approved Group Health mental health professional if you cannot get services from your local community mental health center
- Organ transplant services, including bone marrow, cornea, heart, heart-lung, kidney, kidney-pancreas, liver, lung, pancreas, and peripheral blood stem cell

Group Health or its contractors cannot charge you for covered services.



You also have the right to self-refer

For the following services, you can either go to your personal physician or you can self-refer, which means you can get these services without your doctor's referral.

- Immunizations, TB/HIV, and sexually transmitted disease (STD) testing from a local health department
- Family planning services from a local family planning clinic (for example: Planned Parenthood, health departments)

Other services

Following are some services covered by using your DSHS Medical ID card.

Please call DSHS Customer Service at **1-800-562-3022** for more information

- Eyeglasses, frames, lenses, fabrications, and fittings
- Dental services
- Gastric bypass surgery when all requirements have been met
- Hearing aid devices, fittings, follow-up care, and repairs
- School medical services for special students
- Neurodevelopmental therapy services provided at DSHS recognized neurodevelopmental centers
- First Steps maternity services
- Family planning, STD, and HIV testing
- Voluntary termination of pregnancy, including complications
- Sterilizations for those under age 21
- Substance abuse treatment from a Division of Alcohol and Substance Abuse facility
- Inpatient psychiatric services
- Drugs and lab services for medical management of drugs provided by community mental health providers whose services are purchased by the Mental Health Division
- Drugs prescribed by dentists, dental care and prostheses, including physicals required prior to hospitalization for oral surgery
- Gender dysphoria surgery and related procedures, treatment, prosthetics, or supplies when approved by DSHS in accord with WAC 388-531



WHAT IS NOT COVERED

Noncovered services

The following are not available through Group Health's Healthy Options, Basic Health Plus, SCHIP, or DSHS:

- Any ancillary services provided in association with services not covered by either DSHS or the Contractor
- Medical examinations for Social Security Disability
- Services for which plastic surgery or other services are indicated primarily for cosmetic reasons
- Physical examinations required for obtaining continuing employment, insurance or governmental licensing
- Sports physicals
- Experimental and Investigational Treatment or Services, determined in accord with the Experimental and Investigational Services, provision of this Section and services associated with experimental or investigational treatment or services
- Reversal of voluntary induced sterilization
- Personal comfort items, including but not limited to guest trays, television and telephone charges
- Massage Therapy
- Acupuncture
- TMJ for Adults
- Diagnosis and treatment of infertility, impotence, and sexual dysfunction
- Orthoptic (eye training) care for eye conditions
- Naturopathy
- Tissue or organ transplants that are not specifically listed as covered
- Immunizations required for international travel purposes only
- Court-ordered services
- Gender dysphoria surgery and other services not covered by DSHS for gender dysphoria
- Any service provided to an incarcerated enrollee, beginning when a law enforcement officer takes the enrollee into legal custody and ending when the enrollee is no longer in legal custody
- Pharmaceutical products prescribed by any provider related to a service not covered by either DSHS or the Contractor
- Any noncovered product, service or supply under DSHS' fee-for-service program



Step 1: Choosing a doctor

Your doctor is the key to care at Group Health. He or she helps to coordinate your care.

This may include:

- Laboratory and X-ray services
- Hospital care
- Prescription drugs
- Physical therapy
- Referrals to consulting specialists
- Second opinions

Here are three easy ways to choose your doctor:

- Go online to the Group Health Web site at **www.ghc.org**. Then:
 - Select **“Doctors & Health Care Services”** on the left
 - Select **“Provider Directory”**
 - Select your health plan: **Healthy Options**
- Call Customer Service at **1-888-901-4636** for assistance. They will help you select a doctor in your area.
- Check our provider directory. To get it, call Customer Service.

It's important to have a doctor you like getting care from. If you want to change doctors for any reason just call Customer Service.

There are many ways to get care at Group Health. Where you go for care depends on where you live. In some areas, Group Health owns its medical centers and hospitals. In other areas, Group Health contracts with doctors, medical centers, hospitals, and pharmacies to help care for you.

You may get care when you are away from home even if you are on a trip or a vacation. You can get this care from Kaiser Permanente, which can be found across the nation. You can get medically necessary care. You must call Group Health first if the care you need is not an emergency. Call Customer Service before you go on a trip. They will tell you where you can get care when you are traveling. Medical care is only covered in the United States.

Step 2: Make an appointment

When you want to see your doctor, just call their office and ask for a time to come in.

Or log on to MyGroupHealth at **www.ghc.org** and request an appointment online.

If you make an appointment that you can't keep, please call the doctor's office 24 hours before your visit to cancel the appointment. Appointments will be scheduled for you in the following three ways:

MYGROUPHEALTH FOR MEMBERS

When you get your primary care at Group Health medical centers you can use all of the services available to you on MyGroupHealth for Members at **www.ghc.org**. For more information, visit the chapter in this guide entitled “Online services for members” on page 20.

- If you do not feel sick but want to have a medical checkup, your appointment will be within 30 calendar days
- If you feel sick but don't need urgent care, your appointment will be within 10 calendar days
- If you feel sick and think you need to be seen right away, your appointment will be within 48 hours. Or you can go to one of our urgent care centers. Please call Customer Service at **1-888-901-4636** for their locations and hours

If you don't speak English, or have trouble seeing or hearing, Group Health will have someone help you at no cost. Please call the Resource Line at **1-800-992-2279**, or e-mail us at resource.l@ghc.org or call Customer Service for assistance.

Please give your Group Health ID card to the receptionist. We want you to get the care you need. **Remember:** Your doctor may tell you about some services that are not part of your health benefits. Before you visit your doctor, we suggest you do the following:

- Write down any questions or concerns.
- Be ready to describe symptoms. The doctor will want to know where the symptoms are occurring and how long you've had them
- Bring the names of any medicines you are now taking
- Be sure you understand any medical instructions the doctor gives you. If you have any questions, ask the doctor before you leave the office
- Pay attention to the progress of your recovery. Make notes and take them to your next visit. Record any changes in symptoms or side effects from medicine. Immediately report to your doctor any problems with medicines or treatment
- When you're with your doctor, remember to tell him or her about any treatment you are receiving from other doctors

Be sure you understand any medical instructions your doctor gives you. If you have any questions, it's a good idea to ask your doctor before you leave the office.

SAME-DAY APPOINTMENTS

Group Health strives to offer you same-day appointments. If you go to a Group Health medical center, call your doctor's office in the morning. You might be able to see your doctor or a member of the medical team that day.

Specialty care

You can see a number of specialty care doctors who can help you with certain health care needs. To get specialty care, talk to your family doctor or call Customer Service for help. You can see most Group Health medical center specialty care doctors for covered services without going to your family doctor first. To get a list of specialists who you can refer yourself to, call Customer Service at **1-888-901-4636**.

Members with special health care needs

If you have a complex or chronic condition, you can see most Group Health medical center specialty doctors without a referral. If you need to see a specialty care doctor that is not a Group Health medical center doctor, you can receive a special type of referral that allows for more visits. Talk to your family doctor about this. Some specialists can only be seen if your doctor says so, such as: occupational therapists, respiratory therapists, endocrinologists, and others. For more information, please call Customer Service at **1-888-901-4636**.

Alcohol, drug, or mental health care

If you need this care, we can set it up for you. Just call one of these numbers:

- Western Washington: **1-888-287-2680**
- Eastern/Central Washington: **1-800-851-3177**

Mental health care includes up to 12 one-hour visits for adults and 20 one-hour visits for children up to the age of 19 for treatment each calendar year by an approved Group Health mental health professional if you cannot get services from your local community mental health center.

Children's care

Group Health wants your child to be well and stay well. Good well-child care includes shots and regular checkups to prevent diseases for young people under 21 years of age. Group Health uses the Early, Periodic Screening Diagnosis Treatment program (EPSDT) as part of their care for children. This program includes checking and treating all types of illnesses and conditions. Your doctor will work with you to make sure that your child receives the care that he or she needs. So, if you have children or young adults, contact their doctor for an appointment. These checkups or well-child exams include the following:

- Complete health and developmental history
- Complete physical exam
- Immunizations (shots)
- Lab tests
- Screens for:
 - Vision
 - Hearing
 - Dental/oral health
 - Mental health
 - Substance abuse

Maternity care

Women who are pregnant can see a Group Health doctor or a Group Health–contracted doctor for maternity care. In addition, your doctor can assist you in receiving First Step Maternity Service and Maternity Case Management Services.

You and your doctor will work with each other on how long you and your baby need to stay in the hospital and what kind of care you need.

Midwifery services

These people work with doctors to help women who are pregnant deliver their babies. Call Customer Service at **1-888-901-4636** to learn more.

Vision care

Call any of the doctors listed at **www.ghc.org** if you need basic eye care. For more serious eye attention, we have doctors for those needs too. Call Customer Service for help. Note: Again, vision care exam is covered once every 24 months for adults and once every 12 months for children less than 21 years of age.

Women's health care

Women can see a Group Health doctor or a Group Health–contracted doctor who is an expert in female health problems and concerns. You can get these services without your doctor's referral. These services can be for routine care as well as follow-up care for problems that may have been found. If you would like this care, please call Customer Service to find the right doctor for you.

Urgent care situations

An urgent care situation is one that is not a serious threat to your life. But someone needs to look at you quickly within 24 hours.

For urgent care during the day

Business hours are normally 8:30 a.m. to 5 p.m. During these hours, please call your doctor or the Consulting Nurse if you need care. The nurse can give you medical advice right away, 24 hours a day, seven days a week. He or she also can OK a visit to a local urgent care clinic or emergency room if that is what you need. You can call this service if you want advice but don't think you need to see the doctor right away. You do not need an appointment, but please try to call ahead so staff will know you're coming.

For urgent care after hours

You might need care after hours, weekends or holidays. If you do, call the Consulting Nurse at one of the numbers listed below.

Urgent care when you're away from home

If you need urgent care while away, please call the Group Health Consulting Nurse. They will tell you what to do. If you're away from home but still in the United States, a nurse will help you. They will direct you to a hospital that can provide the medical care you need. By calling before you seek care, we may be able to arrange for you to go to a facility we work with. Urgent care is only covered in the U.S.

Consulting Nurse numbers

- Western Washington: **1-800-297-6877**
- Eastern/Central Washington: **1-800-826-3620**

GROUP HEALTH'S CONSULTING NURSE SERVICE

You can use the Consulting Nurse helpline all day and all night. The nurses will answer your questions, provide care advice, and tell you if you should see a doctor. There is also a doctor who works with the Consulting Nurse.

Emergencies

If you have an emergency

You might need emergency care at some point. If you think you need immediate care, it is an emergency. If so, call 911 or call the number for emergencies in the area where you are or go to the nearest emergency room. You do not need to get permission from your Group Health doctor or have a review by Group Health to get this care. But it does need to be clear that you need to have this care because you are seriously hurt or sick. The emergency room staff may tell you that you do not have a true emergency. When you get better, you may need to go back to your doctor for follow-up care.

Emergency medical conditions

An emergency medical condition is when you have pain or other symptoms that you think or know needs help from a doctor right away. It also means that if you do not get the help of a doctor, the condition will get worse. The symptom can be inside your body or on a body part that you can see. Or, it is a condition that you think might be hurting your baby if you are pregnant. After the emergency is over, services may be provided to you in the emergency room to keep you well or to stabilize your condition. Group Health will pay for these services.

Ambulance services

If you have an emergency, you can use an ambulance. You can use an ambulance when it's ordered by a Group Health doctor, too. You don't have to pay for the ambulance when you need emergency care.

If you are admitted to a nonparticipating facility in an emergency

If you have an emergency, you need to get care right away. This may even be at a hospital that Group Health does not run or contract with. Get care. Then, after you are better, you or a family member should call the Notification Line. Try to call within 24 hours. Your own doctor will be told that you are in the hospital. He or she will work with you to make sure you stay healthy when you get home. Group Health has the right to move a person who has gotten better to another hospital. Group Health may choose this hospital.

Emergency care when you're away from home

In an emergency, call 911 or your local emergency number. Get care right away. If you are traveling, make sure you know the right number to call. It isn't always 911. Then, as soon as you are able, you must call the Notification Line. You can also have a family member call. Be sure to call within 24 hours. Emergency care is only covered in the United States.

Notification Line

- Statewide: **1-888-457-9516**

USING THE EMERGENCY ROOM IF YOU DON'T HAVE AN EMERGENCY

If you go to an emergency room for care when it is not an emergency, the emergency room staff may tell you that you do not have a true emergency. If you want to receive immediate care anyway, you may be asked to sign an agreement to pay and you may be billed.

Hospitalization

If you need to stay in a hospital, your doctor will set that up for you. We run or have contracts with many hospitals in the state so you can get care close to home. If you want a hard copy of the contracted hospitals in your area, call Customer Service at **1-888-901-4636**.

These are the primary hospitals and medical centers where you can get care:

In Western Washington

- Group Health Central Hospital on the Group Health Capitol Hill Campus in Seattle
- Overlake Hospital Medical Center in Bellevue
- Virginia Mason Medical Center in Seattle
- St. Joseph Medical Center in Tacoma
- Harrison Memorial Hospital in Bremerton

In Eastern Washington

- Sacred Heart Medical Center in Spokane
- Holy Family Hospital in Spokane



What's covered

Group Health has a list of drugs that are covered by your plan. In most cases, we cover only drugs on this list. If your doctor determines that you need a drug that is not on the list, your doctor will look at the request and see if the drug can be covered. Your plan covers some over-the-counter drugs. Talk to your pharmacist.

Filling your prescriptions

Any drug order from your Group Health doctor must be filled by Group Health. An order from a Group Health–contracted doctor can be filled at any pharmacy Group Health owns or works with. You can see a list of these pharmacies at www.ghc.org or by calling Customer Service at **1-888-901-4636** and requesting a hard copy.

- Bring your Group Health ID card, your DSHS Medical ID card, and your prescription.
- Group Health provides up to a 30-day supply.

Get refills delivered to you

When a Group Health doctor writes a drug order for you, you can get refills mailed to your home. Delivery is free. Be sure to plan ahead if you use this service. Deliveries can take up to 10 days, although in most cases, they arrive sooner. There are four ways to receive your prescription refills at home:

Online

Register with MyGroupHealth for Members at www.ghc.org. Give your Group Health ID card number. This will be checked. Once you're signed up, log in to MyGroupHealth for Members. Then go to the Pharmacy Online page.

Mail or fax

Call to request a form. Fill out the form. Then send the form by mail or fax.

- To get the form, call **206-901-4444** or toll-free at **1-800-245-7979**
- To send your fax, fill out the form then fax it to **206-901-4443**

Phone

When you call, have your prescription handy. There's a number on the label you will need. You'll also need your Group Health ID number. Call **206-901-4444** or call toll-free **1-800-245-7979**.

Transfer your prescription

Even if a contracted Group Health physician (one who doesn't work at a Group Health medical center) wrote your prescription, you can still have refills delivered to your home by transferring your prescription into the Group Health pharmacy system. To transfer your prescription:

- Call the Mail-Order Pharmacy Service at **1-800-245-7979** and request a prescription transfer, or
- Log on to MyGroupHealth's Pharmacy Online at **www.ghc.org** and select "**Transfer a prescription**"

Emergency prescriptions after hours

You might need an order when your Group Health pharmacy is closed. Try to fill the order at a pharmacy Group Health works with. Group Health provides 24-hour emergency pharmacy access. Call Customer Service at **1-888-901-4636** for the pharmacy nearest you.

Prescriptions when you're away from home

It's smart to plan ahead and pack enough medicine before you leave. Call your doctor before you travel. You can talk with him or her and make sure you have enough supply while you're away from home.

CHECK YOUR MEDS

If you are new to Group Health, you may be taking medicine from a non-Group Health doctor. Please see your new doctor so he or she can look over your medicines. We want to make sure they are still the right ones for you. Because health care needs change, previous prescriptions are not always refilled.

MyGroupHealth for Members

When you join Group Health, you also can use our Web site. It is called MyGroupHealth for Members. You can find it at www.ghc.org. Once you go there, you can use it to talk with a nurse, or make an appointment. You can even read up on health care. To see how it works, go to www.ghc.org and click “Tour Our Online Services.”

There are two levels of service basic and enhanced. Basic services are available to all members. And basic services are easy to access. Just go online and complete a one-time ID verification process. When you register, you’ll only need to provide your name, Group Health member ID number, and birth date.

To use the enhanced services, you must prove your identity. This helps protect your privacy. (Once you register, you’ll get instructions on how to get access to these services. Some services are only available if you get primary care at Group Health medical centers.)

Basic services

Choose a doctor

Use the online list to find out about doctors. You can also choose or change your doctor online.

Healthwise® Knowledgebase

Get access to all kinds of health information. There are more than 5,000 topics to choose from.

Health tools and quizzes

Use these tools to help understand and manage your personal health. Check your risk for heart disease or your symptoms for colds and flu. Calculate your body mass index or your pregnancy due date.

Condition centers

Get help managing the most common health issues. There are many topics available, and more are on the way.

Discussion groups

Go online to meet with other members about health topics. Group Health staff serves as hosts.

CUSTOMER SERVICE —ONLINE AND BY PHONE

You can ask questions by e-mail or by phone. Call Customer Service at **1-888-901-4636** or go to www.ghc.org and click on “Customer Service.” You can request a new ID card, get coverage information, submit a compliment, and much more. Generally, you’ll receive an e-mail response within 24 hours.

Enhanced services

Refill prescriptions

Order and pay for your prescription refills online. You can see a list of the drugs you're taking, and see a list of drug information. You can also order refills for your family.

E-mail your health care team*

You can contact your doctors, the Consulting Nurse, or other members of your health care team. It is a secure service. You'll get a reply in your MyGroupHealth inbox by the end of the next business day.

Parental access*

See your child's online medical record. You can do this through age 12. You can e-mail your child's doctor and request appointments. You must enhance your account and then fill out the "Request for Parental Access" form. You can find this form at the business desk in your medical center. Parents need to show a picture ID. If you are not the parent, you must show papers that prove you can make decisions for a child.

Request appointments*

You can make requests to see your doctors or other members of your health care team. Go online and suggest days and times that are convenient for you. You'll get a confirmation by the end of the next business day.

Your online medical record*

Get access to your online medical record. You can see all kinds of information about the care you've received.

Your Health Profile

The Health Profile is an assessment to help you take better control of your health. After you complete it, you'll receive a report. The report will give you ideas on how to improve your health. It will also tell you how you can lower your risk of certain diseases.

Your health coverage

Go online to see a list of your benefits. You can also check how claims were paid.

* Available only to members who receive their care at Group Health medical centers.

Special services

All, or some, of these services may be available to you, depending on where you live. Some services are free and some are not. To learn more, please call Customer Service at **1-888-901-4636**. Phone numbers are listed on the back cover.

These special services are free:

Free & Clear® Quit For Life™ Program

This service is free to help you quit smoking. For information, please call **1-800-992-2279**.

Group Health Resource Line

This line helps you learn about health education. You also learn about community resources and support groups in your area. The volunteers who staff the line can take your call.

- Call toll-free at **1-800-992-2279**, or
- E-mail us at **resource.l@ghc.org**

Healthwise® Knowledgebase

You can get information on more than 5,000 health care topics at **www.ghc.org**

Health improvement classes and services

For information on baby care, diabetes, heart care, alcohol or drug abuse, AIDS, and violence prevention, call **1-800-992-2279**.

Hear Centers

This staff works with your doctor. They provide hearing tests. They clean, adjust, and repair hearing devices. Call:

- Seattle: **206-326-2050**
- Redmond: **425-883-5110**
- Tacoma: **253-383-5030**
- Olympia: **360-923-7420**

You may live in Eastern Washington. If you do, please call Customer Service at **1-888-901-4636** for Hear Center help.

Language interpreters

You have the right to professional language assistance free of charge. If you need an interpreter, please call Customer Service at **1-888-901-4636**.

Speech, Language, and Learning Services

You can get help here with speech and learning problems. Call **1-800-645-6799**.

Other programs

Please check with your doctor about other programs that may be important for you to know about. Your doctor will help you access and coordinate these services. They include:

- Transportation services
- Developmental Disability Services
- The Infant Toddler Early Intervention Program
- The Patient Review and Coordination Program
- Health Department Services
- Home and Community Services
- Mental Health Services
- First Steps Maternity Services and Maternity Case Management
- Alcohol and Substance Abuse Services

These special services are available to you but are not free:

If you get these services, you will have to pay for them because they are not part of your health plan.

Accomplish™ Weight Management Program

If you would like to learn more about staying at a good weight, call the numbers below.

- Western Washington **1-888-874-7783**
- Eastern Washington **1-800-497-2210, ext. 7886**

The Take Care store

The Take Care store sells self-care and wellness products. You can get bedding that controls allergies. You can get back support cushions, blood pressure monitors, and more. You have to pay for anything bought at the Take Care stores. You can buy Take Care products online at **www.take-care.com**. Or you can go in person to our Capitol Hill store at **125 16th Ave. E, Seattle**.

- Seattle, Capitol Hill Take Care Store **206-326-3496**
- Toll-free, order by phone **1-800-447-2839**
- Order online at **www.take-care.com**

GROUP HEALTH'S CENTER FOR HEALTH STUDIES

People who work here learn all they can about health care. Though you won't go to them personally, they teach people like your doctor about keeping people healthy. This helps you and your family.

ADDITIONAL PLAN INFORMATION

Losing Healthy Options coverage

If you do not have Healthy Options health insurance anymore, call Customer Service at **1-888-901-4636**. They will tell you about plans to help you.

To ask for disenrollment from Group Health's Healthy Options

Call DSHS at this number: **1-800-562-3022**.

Motor vehicle accidents

You might have an accident someday. This could be in your car, truck, or other kind of vehicle. If so, your car insurance will be the first company that will cover the accident. Call Customer Service at **1-888-901-4636** for more information.

On-the-job injuries

If you are hurt on the job, tell your boss and go to a hospital and tell them you were hurt at work. You will have to fill out forms from your company and forms from us.

Other medical insurance

You or a person in your family may have other health insurance. If so, we may have to work with your other plan. This will help to make sure your bills are paid promptly and correctly. Let us know when you or your family member's coverage changes with the other plan. Your DSHS medical benefits cover costs after all other insurance pays. Simply call Customer Service at **1-888-901-4636** and DSHS at **1-800-562-3022**.

Temporary situations

Please call Customer Service at **1-888-901-4636**. They will help you if you are a full-time student, a visitor, or are part of a split family.

Subrogation

You may have gotten an award of money from a person or company because you were hurt or sick. If this is true while you were a member of Group Health, please call us. Group Health has the right to recover medical costs from award money.

Conversion Contract

Upon termination of your Healthy Options health insurance, contact Customer Service at **1-888-901-4636** to learn about your ability to obtain a Conversion Contract and remain a Group Health enrollee.



How to file a grievance

Group Health has a grievance process if you have a complaint. Your complaint will be kept private, except as needed to process your grievance. You can do this if you feel your health care or other services were not good. Or if you feel you were treated rudely.

Here's how a grievance can be filed:

- It must be done by you or someone you have chosen to speak for you
- It can be done in writing or by calling
- We will let you know that we got your grievance within five days
- We will respond to your grievance within 90 days
- You cannot appeal Group Health's response to your grievance unless it is about a clinical issue
- If you want to file a grievance, please call Customer Service at **1-888-901-4636** or write to:

Membership Communications
P.O. Box 34750
Seattle, WA 98124-9745

You may ask for an appeal

An appeal is when you or your doctor asks Group Health to review our decision about certain actions, such as not giving you a service you've asked for, or stopping a service you've been getting. The information that you give us will be kept private, except as needed to process the appeal. If the appeal is not in your favor, you may have to repay Group Health for any services you continued to receive during the appeal process.

How to file an appeal

Step 1

Standard

You must write us or call us within 90 days of the date on the Group Health letter that describes our decision. You must write or call us within 10 calendar days if you want to keep getting care while the appeal is under review. We will send you a letter within five work days to tell you we have received your request. We will send you our answer within 14 days or ask you for more time to review your appeal. All appeal decisions will be completed within 45 days of the appeal request.

Fast

Ask for a quick appeal if you or your doctor thinks waiting for an answer could harm your health. Your doctor may ask for a quick review for you. We will answer within 72 hours or three calendar days or as quickly as your health requires. If your request doesn't qualify for quick review we will tell you by phone and write you also. We will then answer your appeal within the standard 14 days, or ask for more time.

Who may file an appeal?

You may file an appeal. If you have told us in writing, then your doctor may file an appeal for you.

How do I file an appeal?

Call or write. We suggest that you ask in writing. It helps us understand what you want. You may also send copies of doctor's notes and other papers that tell about your needs and why we should approve your request. You may present evidence in person as well as in writing. There is limited time available for this in the case of a fast appeal. You or your doctor may send an appeal. You must tell us in writing that your doctor may appeal for you.

Group Health Cooperative Member Appeals Department

Attn: Appeals Coordinator

P.O. Box 34593

Seattle, WA 98124-1593

- Or call: **206-901-7359**
- Toll-free: **1-888-901-4636**
- Fax: **206-901-7359**

Do you need help filing your appeal?

Group Health staff will help you in completing forms and other steps in the process. Ask for this help when you call the appeals staff at the above number.

You may look at your appeal file

If you request to see your appeal file within 10 days from the appeal denial, Group Health staff will help you in looking at your appeal file. There is limited time to do this because of the appeal time frames. During the appeal, you can ask that services continue but if you lose the appeal, the services would end and you may be billed for any services provided.

Step 2

Standard

If you do not like our answer to your appeal answer, you may request a DSHS hearing. Call the state's Medical Assistance Customer Service at **1-800-562-3022** if you want to know more about DSHS hearings. You must ask for a DSHS hearing within 90 days of the date you get our appeals decision. Or, if you continue getting services, you must ask for a DSHS hearing within 10 days. If the state hearing agrees with our decision, you may have to pay for any services you received during the hearing process. The state needs to know what we denied, when it was denied, and why we denied it. You can have someone speak for you at the hearing. If you ask, DSHS may provide you with a list of legal clinics that may help you present your case at the state hearing.

How to ask for a DSHS hearing

- Call the Office of Administrative Hearings at **1-800-583-8271** or write to them at:

Office of Administrative Hearings
P.O. Box 42489
Olympia, WA 98504-2489

- Tell the Office of Administrative Hearings the reason for the hearing
- You may consult with a lawyer or have another person represent you at a hearing. If you need help finding a lawyer call the NW Justice CLEAR line at **888-201-1014**, weekdays from 9:15 a.m. until 12:15 p.m., and Tuesdays from 3:30 p.m. until 6:15 p.m. or visit their website at **www.nwjustice.com**

Fast

You can ask for a fast DSHS hearing if your prior appeal was a fast one. You will hear from the DSHS Hearing Unit within 72 hours or 3 calendar days.

Step 3

Standard

If you disagree with what DSHS decides, you may ask for an “Independent Review Organization” (IRO) to look at your case. In the IRO review your case will be looked at by doctors who aren’t part of DSHS or Group Health. You must ask for an IRO review within 180 days when you get the denial letter from the DSHS hearing.

- To ask for an IRO review, call the Group Health Appeals Department: **206-901-7359**, or
- Toll-free: **1-888-901-4636**

Fast

You can ask for a fast IRO review if your DSHS hearing was a fast one. You will hear from the IRO within 72 hours or as quickly as your health requires.

Step 4

Standard

If you disagree with the decision of the IRO, you have the right to ask the DSHS Board of Appeals to review your case. Your request must be made within 21 calendar days after the IRO decision is mailed. The request must be in writing and clearly identify:

- The part(s) of the order you don’t agree with
- Evidence supporting your position

Send your request to:

DSHS Board of Appeals
P.O. Box 45803
Olympia, WA 98504-5803

- Toll free: **1-877-351-0002**
- TTD: **360-644-6178**

Cooperative voting membership

Group Health gives you a voice and a vote in what goes on with your health plan. You will have the power to elect the board that hires the CEO. You can vote on bylaw amendments that influence how Group Health is run. And you'll have more control about the decisions made concerning your coverage. Every adult member 18 or older has this unique privilege. Voting membership is free, but you must sign up separately for this privilege. So sign up now and put the power of the Cooperative in your hands.

How to sign up

- Go online to **www.ghc.org**
- Call toll-free at **1-800-252-3305**
- Call Customer Service at **1-888-901-4636**

Second opinion

Do you want to know about more treatment? You can ask to talk to another Group Health network doctor. We will pay for your visit with the other doctor to get his or her opinion.

Compliments and concerns

At Group Health, we want to hear from you. Good or bad. This will help us provide high-quality care and service to you and your community. For compliments, call Customer Service at **1-888-901-4636**. Or call the place where you received care. If you mention a specific person by name, we will be sure to tell that person. We will also tell his or her supervisor.

We also want to know if you have a concern. When you contact us, we will call you back. If you are unhappy with our decisions about your health care, there is a way to fix that. It is called an appeals process. If you are unhappy with the way we worked with you, there is a way to fix that, too. It is called a grievance process, as described on page 26.



YOUR RIGHTS AND RESPONSIBILITIES

As a Group Health member, you have the right:

- To be treated with respect and dignity by all Group Health staff
- To privacy and confidentiality regarding your health and your care
- To information about your rights and responsibilities as a patient and consumer
- To information about Group Health, our practitioners and providers, and how to use our services
- To receive timely access to quality care and services
- To information about the qualifications of the professionals caring for you
- To participate in decisions regarding your health care
- To give consent to, or refuse care, and be told the consequences of consent or refusal
- To an honest discussion with your practitioner about all your treatment options, regardless of cost or benefit coverage, presented in a manner appropriate to your medical condition and ability to understand
- To join in decisions to receive, or not receive, life-sustaining treatment including care at the end of life
- To create and update advance directives and have your wishes honored
- To choose a personal primary care physician affiliated with your health plan
- To expect your personal physician to provide, arrange, and/or coordinate your care
- To change your personal physician for any reason
- To be educated about your role in reducing medical errors and the safe delivery of care
- To voice opinions, concerns, positive comments, or complaints
- To appeal a decision and receive a response within a reasonable amount of time
- To suggest changes to consumer rights and responsibilities and related policies and procedures
- To receive written information in prevalent non-English language (as defined by the State)
- To receive oral interpretation services free of charge for all non-English languages
- To be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation
- To be free from all forms of abuse or harassment
- To request and receive a copy of your medical records, and request amendment or correction to such documents, in accordance with applicable state and federal laws

Call Customer Service at **1-888-901-4636** regarding any of the above rights.

Your responsibilities as a Group Health member:

- To provide accurate information, to the extent possible, that Group Health requires to care for you. This includes your health history and your current condition. Group Health also needs your permission to obtain needed medical and personal information. This includes your name, address, phone number, marital status, dependents' status, and name of other insurance companies.
- To use practitioners and providers affiliated with your health plan for health care benefits and services, except where services are authorized or allowed by your health plan, or in the event of emergencies
- To know and understand your coverage, to follow plan procedures, and to pay for the cost of care not covered in your contract
- To understand your health needs and to develop with your personal physician mutually agreed upon goals about ways to stay healthy or to get well when you are sick
- To understand and follow instructions for treatment, and to understand the consequences of following or not following instructions
- To be active, informed and involved in your care, and to ask questions when you do not understand your care or what you are expected to do
- To be considerate of other members, your health care team, and Group Health. This includes arriving on time for appointments, and notifying staff if you cannot make it on time or if you need to reschedule.

Access to new treatments

Group Health does not cover experimental and investigational procedures or services. Generally, we do not use methods of treatment that have not been tested. We also don't pay for these kinds of treatments before they've been proven. Such treatments are reviewed by our team members. These people are doctors, lawyers, and other team members like you. Doctors are strongly encouraged to discuss all care options with their patients. We want patients to make choices they are comfortable with.

Advance directives

An advance directive puts your choices for health care into writing. It may also name someone to speak for you if you are not able to speak for yourself. Having an advance directive means that your loved ones or your doctor will not have to make medical choices for you without your guidance.

Washington state law has two kinds of advance directives:

- **Durable Power of Attorney for Health Care:** This names another person to make medical decisions for you if you are not able to make them for yourself.
- **A Directive to Physicians:** This is a written statement that you do not wish to have treatments to prolong your life and you want to be allowed to die naturally.

You can cancel an advance directive at any time. Talk to your doctor, family, friends and those close to you. Put decisions about your medical care in writing now. If you have a complaint about how Group Health handles your advance directive, you have the right to file a complaint with Group Health or DSHS. If you want more information about advance directives, including our policies and procedures, call Group Health Customer Service at **1-888-901-4636**.

Provider compensation

We pay a fair wage to your doctor and all of the other care providers for care that meets high standards. Doctors are not paid more if they don't talk to you about everything you need to know about your care. They also are not paid more by not giving you the care you need. There are many ways we pay our doctors. Some are paid a salary for their services. Some are paid monthly when they provide a certain set of services for members. Some are paid a set amount for certain services. And some providers are paid at a discounted amount from their billed charges. At times, a bonus payment may be paid to a doctor or group of doctors. They get this when they reach goals of customer satisfaction or excellent medical care quality. If you would like to know more, call Customer Service at **1-888-901-4636**.



CONTACT INFORMATION

Emergency Care

Call **911** or your local emergency number.

Urgent Care

Contact your personal physician's office or the Consulting Nurse.

Consulting Nurse Service

24-hour health advice, and more.

Western Washington

1-800-297-6877 or **206-901-2244**

Central Washington,

Eastern Washington, & North Idaho

1-800-826-3620 or **509-324-6464**

Customer Service

For coverage questions, directions to medical centers, to speak to a health plan representative, and more. Representatives are available to assist you Monday through Friday from 8 a.m. to 5:30 p.m.

Seattle area **206-901-4636**

Statewide **1-888-901-4636**

Department of Social and Health Services (DSHS) Customer Service

For questions about Washington state social and health services.

Statewide **1-800-562-3022**

Mail-Order Pharmacy

Have your prescription refills mailed to your home or work with free delivery.

Statewide **1-800-245-7979**

Notification Line

If you are admitted to a hospital outside our service area, call the Notification Line within 24 hours, or as soon as possible after admittance.

Statewide **1-888-457-9516**

TTY Relay

For members who are hearing- or speech-impaired. Call to access a Group Health facility, physician, or staff member.

Washington **1-800-833-6388** or **711**

Idaho **1-800-377-3529** or **711**

Web **www.ghc.org**

E-mail **info@ghc.org**