



OPTIONS PPO

member guide

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WHO'S WHO?

Group Health Cooperative and its subsidiary Group Health Options, Inc. work together to provide health care for all members. Therefore, you will see both names mentioned throughout this guide as follows:

- Group Health refers to Group Health Cooperative
- Group Health Options refers to Group Health Options, Inc.
- Options PPO refers to the Options PPO health plan, offered by Group Health Options



THE BASICS OF YOUR PLAN

Welcome

Welcome to the Options PPO plan offered by Group Health Options, Inc. We are delighted to have you as a member and look forward to helping you live your healthiest life.

This guide is designed to help you understand your plan and how to access your care. It's broken up into snapshots of the care you might receive: primary care, specialty care, urgent care, emergencies, hospitalization, and prescriptions. We've also outlined the valuable online services that give you more control of your health care than ever before, the additional special member services, additional plan information, and your rights and responsibilities as a member.

If you still have questions after you read this guide, please call Customer Service for more information.

Network choices

The Options PPO plan offers you two levels of coverage: preferred providers and nonpreferred providers. Generally, the care you receive from preferred providers will be covered at a higher benefit level than care received by nonpreferred providers.

Preferred providers

Preferred providers include the many thousands who practice with Group Health Physicians, Virginia Mason Medical Center, The Everett Clinic, First Choice Health, and Beech Street. Plus, you have access to a number of additional preferred providers. By choosing preferred providers, you get care at maximum savings.

Nonpreferred providers

You can see any other licensed provider you want, anywhere, for most covered services. However, your costs will be higher than if you choose care from preferred providers.

GROUP HEALTH CONVENIENCE

Group Health Cooperative owns clinics and facilities throughout Washington. When you choose care with Group Health Medical Centers, getting the most from your health plan becomes a lot easier. Your personal physician, the lab, X-ray, and pharmacy are all in one location. So driving around town is now a thing of the past.

Identification card

You and each member of your family will soon receive an identification (ID) card with an individual member number. Have your ID card with you to make, cancel, or check appointments; order or pick up prescriptions; receive emergency care, or use the Consulting Nurse helpline. Call Customer Service if any covered family member does not receive a card, if any information on the card is wrong, if it's lost or stolen, or if it needs to be replaced.

Benefit booklet

Your benefit booklet (also called a certificate of coverage) details your benefits and services, what is and isn't covered, and cost share information. If you have specific coverage questions about any benefits mentioned in this guide, your benefit booklet is a great resource.

Provider directory

There is an online provider directory that lists all the providers from Group Health Physicians, Virginia Mason, and The Everett Clinic that are available to you as an Options PPO member. You can request a printed directory by mailing the enclosed courtesy reply card. For the most current directory information, check our online provider directory at www.ghc.org/provider.

- To find providers with the First Choice Health Network, visit www.fchn.com
- To find providers with the Beech Street Network, visit www.beechstreet.com

WELLNESS

We're big on preventive care—and we place an emphasis on staying well. As you read this booklet, you'll discover all the ways we try to help you do just that. And because of our commitment to your good health, you're covered for preventive care services including Lifestyle Coaching, immunizations, and a range of health screenings for you and your family.

Step 1: Choose a personal physician

The first step in your plan to get or stay well is to select a personal physician. Choosing a personal physician is important because your doctor helps guide your total health care program. From arranging your laboratory tests, X-rays, and hospital care, to prescriptions, specialty referrals, physical therapy, and more, your doctor is your partner in keeping you in the best of health. And each member of your family can choose their own physician in order to start developing a personal wellness plan.

Preferred providers

To choose a preferred provider, do one of the following:

- Go online to:
 - www.ghc.org/provider to select your physician online. You can see doctors from Group Health Physicians, Virginia Mason, and The Everett Clinic as well as other contracted providers.
 - www.virginiamason.org to see only Virginia Mason doctors.
 - www.everettclinic.com to see only doctors practicing at The Everett Clinic.
 - www.fchn.com to see First Choice Health doctors.
 - www.beechstreet.com to see Beech Street doctors.
- Call Group Health Customer Service for help in making a selection.

Nonpreferred providers

Select from any licensed provider anywhere in the U.S. (for covered services).

MYGROUPHEALTH FOR MEMBERS

Getting care with Group Health Medical Centers gives you access to the full breadth of services and information available to you on MyGroupHealth for Members at ghc.org. For more information on these valuable services, visit the chapter in this guide titled "Online services: MyGroupHealth for Members" on page 12.

Step 2: Make an appointment

When you need medical care, making an appointment is easy once you have selected your personal physician. All you need to do is call your doctor's office and make the request.

There are a few of things to do to prepare for your visit. Write down any questions or concerns so you can be sure to remember them when the time comes. Be ready to describe your symptoms and bring the names of any medicine you're taking. Also, remember to take your ID card with you.

When you're with your doctor, remember to tell him or her about any treatment you are receiving from other doctors, and be sure you understand any medical instructions he or she gives you. If you have any questions, it's a good idea to ask your doctor before you leave the office.

Step 3: Plan for your cost share

When it's time for your appointment, be prepared to pay your cost share. Your portion may include a copayment, coinsurance, or your deductible. See your benefit booklet for your specific deductible and cost share amounts.

SAME-DAY APPOINTMENTS

Group Health strives to offer you same-day appointments. If you get care with Group Health Medical Centers, call your doctor's office in the morning and there's a good chance you can get to see your physician or a member of the medical team that very day.

ALL ABOUT SPECIALTY CARE

Specialty care

Once you've found a specialist who you'd like to see, or one your primary care doctor has recommended to you, just call the doctor's office and request an appointment. Keep in mind, you'll have more coverage and your costs will be lower if you choose from the thousands of preferred providers.

Alternative care

You're covered for alternative care, which includes acupuncture, chiropractic, and naturopathy services, based on your benefit level. (Check your benefit booklet for your specific coverage.)

Mental health and chemical dependency (Behavioral Health Services)

When you find a mental health or chemical dependency provider that you want to see, just call the provider's office to schedule an appointment. If you want to see a provider with Group Health's Behavioral Unit, please call toll-free **1-888-287-2680**. Coverage may vary depending on your plan. Please check your benefit booklet.

Pediatric and teen health care

Your child is covered, from regular checkups to immunizations, and you can select a pediatrician as your child's personal physician. Teen health care needs are unique, so young adults can schedule their own appointments and see a physician for all kinds of health and well-being issues. Call Customer Service for more information.

There's great teen health information on MyGroupHealth for Members at **ghc.org**. You'll find tips for raising teens, healthy lifestyle information, and links to information about teen development, sexually transmitted diseases, and lots more—all geared toward being a healthy teenager.

Vision care

Most Options PPO plans include coverage for routine eye exams and standard lenses or contacts. Check your benefit booklet to see if you have contact lens and other vision hardware coverage. Group Health offers vision services at Group Health Eye Care locations. For the nearest Eye Care location, call Customer Service, or go online to **gheyecare.org**.

Women's health care

Women can self-refer for reproductive health care, gynecological care, maternity care, and general preventive care, such as Pap smears and breast exams. There are many local hospitals in the network to provide convenient birthing services for members. Group Health also offers the Family Beginnings Birthing Center on the Capitol Hill Campus in Seattle.



URGENT CARE, EMERGENCIES, AND HOSPITALIZATION

24-hour Consulting Nurse helpline

The Consulting Nurse helpline is available 24 hours a day. Group Health's team of experienced registered nurses are specially trained to answer your medical questions, provide care advice, and advise you whether or not you should see a doctor. There is also a doctor on staff working directly with the Consulting Nurse Service. What's more, if you get your care with Group Health Medical Centers, the Consulting Nurse Service staff has access to portions of your medical history and prescriptions, so they can better advise you on what's best for your personal situation.

- Call **1-800-297-6877** or **206-901-2244**
- E-mail via **ghc.org** or the Group Health mobile app

Urgent care

An urgent care situation is one that does not pose an immediate, serious health threat, but does require prompt medical attention within 24 hours of its onset. Some conditions that might be urgent are:

- Stomach or abdominal pain
- Urinary tract infections
- Cuts that might require stitches
- Minor injuries such as sprains
- Respiratory infections

If you need urgent care during the day, you can call your personal physician's office or the Consulting Nurse helpline to get immediate advice. **After business hours, on weekends, or on holidays**, the Consulting Nurse helpline is available to provide assistance. You don't have to call before you seek urgent care, but if you do, you'll be directed to the nearest facility.

If you get care at a nonpreferred medical facility, you'll be covered at your nonpreferred benefit level. If you're traveling and need urgent care while away, please call the Group Health Consulting Nurse helpline for assistance regarding your care. By calling before you seek care, we may be able to arrange for you to go to a facility with which we have a reciprocal agreement. This may keep your share of costs lower.

Emergencies

Emergency medical conditions include those that make you feel you need immediate medical attention to avoid a serious threat to your body or your health. These conditions may include:

- Severe pain
- Suspected heart attack or stroke
- Sudden or extended difficulty in breathing
- Bleeding that will not stop
- Major burns
- Seizures
- Sudden onset of severe headache
- Suspected poisoning

If you're having an emergency, get care immediately. Call **911** or your local emergency number. And if you're traveling, remember to find out the emergency number for the region where you're traveling throughout the world, as it's not always **911**.

Also, emergency ambulance service is a covered benefit. Nonemergency ambulance service must be authorized in advance by your personal physician. Check your benefit booklet for details about emergency care and ambulance service.

Hospitalization

As an Options PPO member, you can choose any hospital you'd like for emergency care, or any hospital in the U.S. for inpatient or outpatient services. There are some differences in coverage, however, depending on whether you get treated at a preferred or nonpreferred facility.

If you need emergency care, go to the nearest hospital to get immediate help; you will be treated at your preferred benefit level. If you are admitted to a nonpreferred hospital, you may elect to be transferred to a preferred facility once you are stabilized for better coordination of care and coverage at your preferred benefit level. You may also choose to remain at the nonpreferred hospital (and not be transferred to a preferred hospital) if you agree to pay for services at your nonpreferred benefit level.

IMPORTANT COVERAGE NOTE

If you receive urgent or emergency care at a nonpreferred hospital or medical center, you may be required to pay in full at the time of service. If so, save your medical receipts and we'll reimburse you for covered services.

Also, if you use an emergency room for nonemergency services, Group Health Options will not cover your care. You will be fully responsible for any costs.

What's covered

Many Options PPO plans include coverage for prescription drugs. Group Health Options has a list of medications (called a formulary) that are covered through your plan with a cost share. The formulary includes both generic and certain brand-name drugs. In most cases, we cover only medications on the formulary. However, if your personal physician determines that you need a particular medication for certain conditions or a drug that is not on the list, your physician will have the request reviewed to determine if the drug can be covered. To check whether your drug is on the formulary, visit ghc.org/pharmacy/formulary.

What's not covered

- Nonprescription or over-the-counter medicines, drugs for cosmetic uses, or travel medications (for motion sickness and/or diarrhea)
- Dental prescriptions (unless prescribed by your provider for a medical condition)
- Drugs used for reasons not approved by the FDA
- Plan-excluded prescription drugs

Filling your prescriptions

Any prescription from a doctor can be filled at Group Health Medical Centers pharmacies, at any Group Health–contracted pharmacy (pharmacies that Group Health contracts with, but does not operate), or any of MedImpact's thousands of pharmacies. If you want a complete list of all the Group Health Medical Centers and Group Health–contracted pharmacies, go online to ghc.org/provider. Visit medimpact.com for MedImpact's national network of pharmacies.

If you need a new prescription when your regular pharmacy is closed, you should make every effort to fill the prescription at another preferred pharmacy. If this is not possible, you can fill the prescription at a nonpreferred pharmacy at your expense and submit a claim for reimbursement. Group Health Options will not reimburse refills or medications for chronic conditions obtained outside of normal business hours when they can be filled during normal business hours.

Depending on the medication you need, prescriptions will be filled for a 90-day or a 30-day supply at one time at Group Health Medical Centers pharmacies and at participating contracted pharmacies.

And remember to plan ahead when you travel. Be sure to take enough medicine to cover the duration of your trip. Ask for up to a 90-day supply if you need it. Travel medications (for diarrhea and/or motion sickness) are generally not covered. (Check your benefit booklet for coverage details.)

Get refills delivered to you

You can have your refills mailed to your home with no shipping or handling fee. Be sure to plan ahead if you use this service. If you get your prescriptions filled at non-Group Health Medical Centers pharmacies, you will need to transfer your prescription into the Group Health system in order to get your refills mailed to you. Transferring your prescription is easy—just visit ghc.org/pharmacy where you'll find the necessary transfer form. Deliveries can take up to 10 days, although in most cases, they arrive sooner. There are several ways to receive your prescription refills at home.

Online

Register with MyGroupHealth for Members at ghc.org and then complete a one-time ID verification process. Once you're registered, log in to MyGroupHealth for Members then go to the Pharmacy Online page.

Mail or fax

Call the Group Health Mail-Order Pharmacy Service for a mail-order request form, include a check or your credit card information, and drop the form in the mail. To fax, complete a mail-order request form and fax the form to **206-901-4443**.

Phone

Call the Group Health Mail-Order Pharmacy Service 24 hours a day to order refills. When you call, have your prescription number (the 11-digit number on the label), your member ID number, and your credit card handy. Call Pharmacy Services at **206-901-4444**, or toll-free at **1-800-245-7979**.

Questions?

If your prescription was written by a doctor with Group Health Physicians, call to speak to a staff pharmacist. Hours are from 7:30 a.m. to 6 p.m., Monday through Friday, and from 9 a.m. to 1 p.m. on Saturday.

If your prescription was written by any other doctor, contact the pharmacy where your prescription was filled.

If you have questions about the formulary, coverage, or drug costs, please call Customer Service.

CHECK YOUR MEDS

If you are a new patient, you may be taking medicine prescribed by a different doctor. Please make an appointment to review your medicines with your new personal physician. Any prescription medicine you have been taking before seeing your new physician should be reviewed. Because health care needs change, checking your current prescription program will help ensure you're taking the right medicine to stay in the best of health. If you are allergic to any drugs, be sure to tell your new personal physician. This important information will be recorded in your medical record.

MyGroupHealth for Members

Members have access to a very useful resource: MyGroupHealth for Members at **ghc.org**. It's a personal website that gives you access to online health information, tools, and services that make health care accessible and convenient, 24 hours a day from the comfort of your home or office. In addition, Group Health's mobile app is available for iPhone® and Android™ smartphones†. It includes many features available to you on MyGroupHealth for Members. Visit **ghc.org/mobile**.

Be assured: MyGroupHealth for Members is secure. The security of your personal health information is our priority at Group Health Options, both in our medical centers and online. To get started, go to **ghc.org** to set up your account and then get access to all this:

Appointment scheduling*

You can schedule an appointment with your personal physician, specialists, 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. You can cancel appointments this way, too.

Choose a doctor

Use the online provider directory to get information on primary care and specialty doctors and other health care providers, then choose or change your personal physician online.

E-mail your health care team*

Have a follow-up question for your doctor? Contact your Group Health Physicians team, the Consulting Nurse helpline, or other members of your health care team using this secure messaging service. You'll get a reply in your MyGroupHealth inbox by the end of the next business day.

Health and wellness resources

Our health information includes in-depth articles, classes, interactive tools, and videos about treatment options. Check out the seasonal topics.

Health coverage

Your summary of benefits and coverage agreement are available online for easy reference. You can check for covered services, track deductibles and out-of-pocket expenses, and you can also check how individual health plan claims were paid by viewing your Explanation of Benefits statements online.

†iPhone is a registered trademark of Apple Inc.
Android is a trademark of Google Inc.

CUSTOMER SERVICE —ONLINE AND BY PHONE

In addition to calling Customer Service, you can ask questions via e-mail. Just go to **ghc.org** and click on "Contact Us." 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.

Health Profile

The Health Profile is an assessment to help you take better control of your health. After you complete the online questionnaire, you'll receive a personal report with suggestions on how to improve your health and lower your risk of certain diseases and conditions.

Healthwise® Knowledgebase

Get access to health information on thousands of topics, including a searchable database of articles on diseases, conditions, medications, and medical tests at ghc.org/kbase.

Online medical record*

Get access to your online medical record including after-visit summaries, lab and test results, a list of your medications, your immunizations and allergies, your current health conditions, and patient discharge instructions from an emergency or urgent care visit at Group Health.

Parental access*

Get access to your child's online medical record through age 12. And for nonurgent issues, you can e-mail your child's Group Health Physicians doctor and request appointments. After you've set up your own account at ghc.org, fill out the "Request for Parental Access" form at the business desk in your medical center. Parents need to show a picture ID; other guardians must have documents showing they have legal authority to make health care decisions for a child.

Prescription refills

Order and pay for Group Health prescription refills online, view your current medications list, and get access to a database of drug information. You can even refill prescriptions for other members of your family.

Test results*

Whenever you have a lab test, the results are sent to your MyGroupHealth for Members inbox as soon as they're available. Clickable links provide information about the test.

Usage status

Get quick access to your annual deductible status, out-of-pocket expenses, and lifetime maximum cost shares for the past two years of membership with Group Health Options.

* Services available when you receive care with Group Health Medical Centers.

ONLINE SERVICES: MYGROUPHEALTH FOR MEMBERS

Mobile access for care on the go

Use the Group Health mobile app to e-mail your Group Health doctor, check your test results, find the nearest Group Health clinic, check wait times, and more. It's all yours, at your fingertips, whenever you get care at a Group Health Medical Centers location.

Visit ghc.org/mobile

My Care

When you receive care at Group Health Medical Centers locations, you can securely e-mail your doctor, see test results, make appointments, check allergies and immunizations, refill prescriptions, set parental access*, and get health advice and screening reminders.

Consulting Nurse

Get medical advice anytime. Call or send a secure message to the Consulting Nurse, 24/7.

Wait Times

See lab and pharmacy wait times at nearby Group Health Medical Centers clinics.



Symptom Checker

Get help evaluating whether and how soon you may need medical attention.

Locations

Get a map view of Group Health Medical Centers locations, plus addresses, phone numbers, and hours.

Settings

Personalize your mobile experience with your preferred clinic, MyGroupHealth for Members login, and more.



Scan this with your smartphone to download the free mobile app.

Some services require care with Group Health Medical Centers.

iPhone is a registered trademark of Apple Inc. Android is a trademark of Google Inc.

*For a child aged 12 or under.

Change in employment status

To continue coverage if you leave your current employer or lose eligibility under your employer's medical plan, ask for information about the individual and family plans offered by Group Health Options, Inc. and Group Health Cooperative, our Group Conversion plans. Both offer a variety of options to fit your budget and health care needs. Call Customer Service for more information. Your former employer can also provide you with information about COBRA (a temporary continuation of your benefits plan).

How to file a claim

You can be reimbursed for covered care received out-of-network when these steps are followed:

- You or the provider submit a claim
- You include itemized statements describing the services received, along with a claim form
- Send claims for services to:
Group Health Options Claims Processing, P. O. Box 34585, Seattle, WA 98124-1585

If you need more claim forms, please ask your employer or call Customer Service. Or get them online at ghc.org/customerservice/forms.

Motor vehicle accidents

If you are involved in a motor vehicle accident, your automobile insurance will be the first insurer in case of an injury.

On-the-job injuries

If you are injured on the job, tell your employer immediately and complete any necessary internal forms. When you first visit your doctor for this injury, tell the medical receptionist that you have a work-related injury. You will need to complete workers' compensation forms, including a report of the accident. This will help us bill the appropriate insurance carrier.

Other medical insurance

If you or anyone in your family is covered by another health insurance plan, we may need to coordinate your benefits with the other plan to be sure your bills are paid promptly and correctly. Please let us know when you or your family member's coverage changes with the other plan by calling Customer Service.

Temporary situations

For coverage information for full-time students, temporary residents, and dependents of split families, please call Customer Service.

Complementary ChoicesSM

You can access an expanded range of noncovered alternative care services beyond your covered benefit at a discount, including acupuncture, naturopathy, chiropractic care, massage therapy, yoga, Pilates, tai chi, and personal trainers. Just pay the provider directly at the time of service. Call Customer Service for information on providers that participate in this program or go online to ghc.org/provider to see a list of alternative care providers.

GlobalFit[®]

This special resource gives you access to numerous affordable options to get fit and have fun. You'll get discounts on more than 10,000 fitness facilities nationwide, plus exercise videos and equipment for the perfect home workout. The popular Nutrisystem[®] weight loss program is also available at valuable savings. Visit globalfit.com/grouphealth.

Group Health Resource Line

The Group Health Resource Line offers free information on health education, community resources, senior services, and support groups in your area. Statewide, call **1-800-992-2279** or e-mail us at resource.l@ghc.org.

Health improvement classes and services

Group Health Cooperative offers a wide variety of educational resources on prenatal and baby care, diabetes, heart care, substance abuse, AIDS, and violence prevention. Go to MyGroupHealth for Members at ghc.org and select "Classes & Events" to see what's offered in your area.

Language interpreters

If you or someone you know needs professional language assistance, please call Customer Service. This service is provided at no extra cost.

Lifestyle Coaching

Take the online Health Profile at ghc.org and depending on your Health Profile answers, and whether or not you provide your phone number, a Lifestyle Coach may contact you. A coach can help you make positive changes in your eating habits, physical activity, tobacco use, or how you cope with stress. The coaches are health care professionals, such as nurses and dietitians, who are trained in helping people make behavior changes. Through ongoing phone conversations, a coach can help you stay on track and reach your own health goals.

Northwest Health magazine

Northwest Health is mailed to your home four times a year and features health information to help you make healthy choices in your everyday living. It also provides information about changes in service hours and telephone numbers, new benefits, and health care programs through Group Health Cooperative and Group Health Options, Inc.

GROUP HEALTH RESEARCH INSTITUTE

Your health and that of the greater community is the focus of the Group Health Research Institute. Founded in 1983 as the Center for Health Studies, the Group Health Research Institute is a leader in health research and is nationally known for its work in cancer prevention, depression, back pain, elder health, injury prevention, and cardiovascular care. As a result of the researchers' studies, the latest information on health issues from prevention to treatment is available to help members like you.

Quit For Life® Program

Quit For Life is a nationally recognized, telephone-based tobacco cessation program offered through Free & Clear®, originally developed by Group Health Cooperative. To register, call **1-800-462-5327** or go to **freeclear.com/ghc**.

Speech, Language & Learning Services

Staff at Group Health Speech, Language & Learning Services treat a wide variety of communication and learning problems. These include language delay, language and learning disabilities, stuttering, impairment due to head injury, cognitive changes, and problems with study and social skills. Not all services are covered. For more information and locations, call **1-800-645-6799**. (Not available in Eastern Washington and North Idaho. Call Customer Service for assistance.)

The Take Care Store

Purchase noncovered self-care and wellness products such as back support cushions, blood pressure monitors, and allergenic-control bedding at the Take Care Store, online at **take-care.com**. Additionally, a sampling of self-care products is available at kiosks found in all Group Health Medical Centers locations.

Travel Advisory Service

If you plan to travel or study outside the United States, you can use the Group Health Travel Advisory Service to learn what immunizations you'll need. The service will send you a packet with information about each country that you plan to visit, including travel advisories. Call **206-326-3488**.

Weight Watchers®

Get special pricing on convenient weight loss programs. You can attend Local Meetings in your neighborhood, get an online subscription offering interactive Web tools, or use an At-Home Kit where you can follow the plan step-by-step. Call toll-free at **1-866-634-0753**.

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).

As an Options PPO member, you have the right to:

- Be treated with respect and dignity by Group Health Options staff.
- Be assured of privacy and confidentiality regarding your health and your care.
- Have access to details about your rights and responsibilities as a patient and consumer.
- Be able to access information about Group Health Options, our practitioners and providers, and how to use our services.
- Receive timely access to quality care and services.
- Have access to information about the qualifications of the professionals caring for you.
- Participate in decisions regarding your health care.
- Give consent to—or refuse—care, and be told the consequences of consent or refusal.
- Have 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.
- Join in decisions to receive, or not receive, life-sustaining treatment including care at the end of life.
- Create and update your advance directives and have your wishes honored.
- Choose a personal primary care physician affiliated with your health plan.
- Expect your personal physician to provide, arrange, and/or coordinate your care.
- Change your personal physician for any reason.
- Be educated about your role in reducing medical errors and the safe delivery of care.
- Voice opinions, concerns, positive comments, or complaints.
- Appeal a decision and receive a response within a reasonable amount of time.
- Suggest changes to consumer rights and responsibilities and related policies.
- Receive oral interpretation services free of charge for all non-English languages, and sign or tactile interpretation services for hearing-, sight-, and speech-impairments.
- Receive written information in prevalent non-English language (as defined by the State).
- Be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation.
- Be free from all forms of abuse, harassment, or discrimination.
- Be free from discrimination, reprisal, or any other negative action when exercising your rights.
- 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.

As an Options PPO member, you have the responsibility to:

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

Voting membership

As an Options PPO member, you can have 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 Group Health CEO. You can vote on Group Health bylaw amendments that influence how Group Health Cooperative is run. Every adult member 18 or older has this unique voting privilege. So be sure to sign up and put the power of the Cooperative in your hands. To sign up:

- Go online to ghc.org.
- Get an application by calling Customer Service at **206-901-4636** or toll-free at **1-888-901-4636**.

Compliments and concerns

At Group Health Options, we're committed to serving you in the most caring and effective way possible. We want to hear your concerns, compliments, and questions. This will help us provide high-quality care and service to you and your community. We want to know when you are pleased with the care and service you received. We encourage you to contact our Customer Service Center or the clinic or hospital where you received care. If you mention a specific person by name, we will be sure to share your compliment with that person and his or her supervisor. We also want to know if you have a concern. Once you contact us with your concern, we will respond at the earliest possible opportunity.

Access to new treatments

Widespread use of experimental, unproven methods of treatment can often lead to unintended negative health outcomes. Group Health Cooperative has a rigorous process in place to evaluate the effectiveness of experimental treatments. Group Health Cooperative requires that a new test or treatment have an established body of scientific evidence that supports it before encouraging patients and doctors to use it. Such treatments are reviewed by medical, legal, administrative, coverage, and member teams. Group Health Options concurs with Group Health's approach and uses information from Group Health's rigorous assessment process to make coverage decisions. Doctors are strongly encouraged to discuss all care options with their patients so that patients can make informed choices. For coverage details, please refer to your benefit booklet.

Advance directives

Under the Patient Self-Determination Act passed by Congress, you have the right to make decisions about your care at the end of life using advance directives. The goal of advance directives is to allow you to make such decisions when you are healthy—not when you are ill and under stress. It also allows you to designate whom you would like to make health care decisions for you if you are unable to. An advance directive is a written document. You should discuss it with your doctor and family members ahead of time. It can be in the form of a living will (Directive to Physicians) or a Durable Power of Attorney. When you sign a living will or durable power of attorney for health care, two people must witness it. However, you do not need an attorney to prepare it. If you want more information, there is a booklet to help you understand advance directives. For a copy, and the forms that come with it, call **1-800-992-2279**.

CONTACT INFORMATION

Emergency Care

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

Urgent Care

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

Consulting Nurse Helpline | 1-800-297-6877 or 206-901-2244

24-hour health advice from experienced registered nurses.

Customer Service

For coverage questions, directions to medical centers, to speak to a health plan representative, and more.

Seattle area | 206-901-4636

Statewide | 1-888-901-4636

Mail-Order Pharmacy | 1-800-245-7979

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

Notification Line | 1-888-457-9516

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.

Washington Dental Service | 1-800-554-1907

If your plan offers this coverage, call with questions.

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 | ghc.org



To download our mobile app, scan this code with your smartphone or go to ghc.org.