

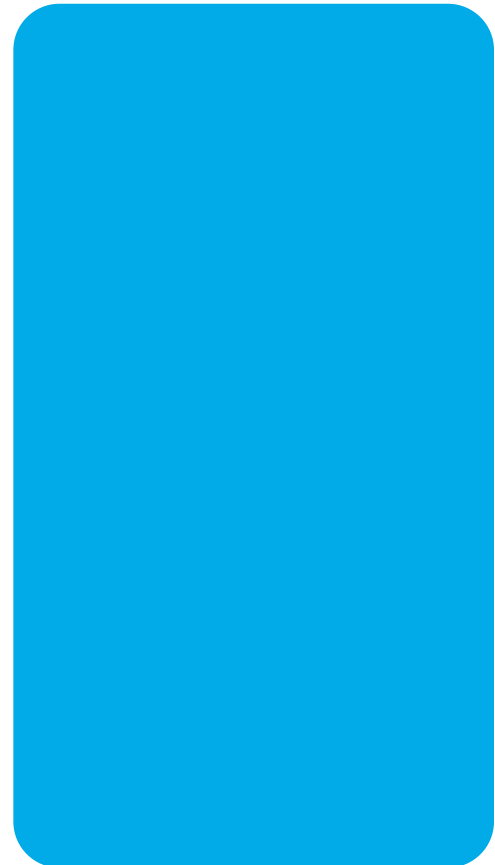


MedStar Family Choice

DISTRICT OF COLUMBIA

DC Healthy Families and Immigrant Children's Program Enrollee Handbook

2020



**It's how we
treat people.**



WE ARE WASHINGTON DC GOVERNMENT OF THE DISTRICT OF COLUMBIA
MURIEL BOWSER, MAYOR

This program is funded in part by the Government of the District of Columbia Department of Health Care Finance.

MedStar Family Choice – DC

You can call us 24 hours a day, 7 days a week,
or stop by our office Monday through Friday from 8:00 a.m. to 5:30 p.m.
For directions on how to visit us, call **202-363-4348**.

3007 Tilden St., N.W., Pod 3N
Washington, DC 20008

Office Hours: Monday - Friday 8:00 a.m. to 5:30 p.m.

Enrollee Services: **202-363-4348** or toll free **888-404-3549**



Language Accessibility

English

Attention: If you do not speak and/or read English, please call **888-404-3549** between 8:00 a.m. to 5:30 p.m. A representative will assist you.

Spanish/Español

Atención: 'Si no habla y/o lee español, llame al **888-404-3549** entre las 8:00 a. m. y las 5:30 p. m. Un representante lo asistirá.'

Vietnamese/Tiếng Việt

Chú ý: 'Nếu bạn không nói và/hoặc đọc Tiếng Việt, vui lòng gọi **888-404-3549** giữa 8 giờ sáng đến 5 giờ 30 chiều. Một người đại diện sẽ hỗ trợ bạn'

Korean/한국어

알립니다:한국어를 읽거나 말할 수 없다면, 오전 8시에서 오후 5시 30분 사이에 **888-404-3549**로 문의하십시오. 대표가 도움을 드릴 것입니다.

French/Français

ATTENTION: "Si vous ne parlez pas et / ou ne lisez pas le Français, veuillez composer le **888-404-3549** entre 8h00 et 17h30, un représentant vous répondra".

العربية/Arabic/

تنبيه: إذا كنت لا تتحدث أو تقرأ اللغة العربية، يُرجى الاتصال بـ **888-404-3549** بين الساعة 8:00 صباحًا و 5:30 مساءً. أحد مندوبينا سيقوم بمساعدتك.

Chinese (Mandarin)/普通话

注意:“如果你不会说或读 普通话，请在早上8点到下午5点半之间拨打**888-404-3549**。有个代表会帮助你的。”

Russian/русском

ВНИМАНИЕ. 'Если вы не говорите и/или не можете читать на русском языке, позвоните по телефону **888-404-3549** с 8:00 до 17:30. Представитель поможет вам.'

Burmese/မြန်မာဘာသာစကား

သတိပြုရန်- 'သင့်ညွှန် မြန်မာဘာသာစကားကို ဝေပုဟ်ပုခင်း ဝဲဒုဒုဒု/သိုမဟုတု ဖတုပုခင်း မရွံလွံဒု ဝဲကးဇူးပုပိၤ နံနကု ၈:၀၀ နာရီဝဲဒုဒု ညေန ၅:၃၀ နာရီအဖုကားတြဒု ၈၈၈-၄၀၄-၃၅၄၉ သိုမဟု ဖုနးဝဲခင်းဆိုပါ။ ကိုယွားလွယွစိုဦးက သင့်ကို ကူညီပါမည့်။'

Cantonese/粵語

注意: '如果你不會說或讀 粵語，請在早上8點到下午5點半之間撥打**888-404-3549**。有個代表會幫助你的。'

Language Accessibility

Farsi/فارسى

8.00 نیستید، لطفاً بین ساعات توجه: «اگر قادر به صحبت کردن و/یا خواندن به زبان انگلیسی تماس بگیرید. 888-404-3549 صبح تا 5.30 عصر با شماره

Polish/Polsku

UWAGA: 'Jeśli nie mówisz i/lub nie czytasz po Polsku, zadzwoń pod numer 888-404-3549 między 8:00 a 17:30. Nasz przedstawiciel będzie mógł Ci pomóc'.

Portuguese/Português

ATENÇÃO: 'Se Você não fala e não lê na Português chame pelo número 888-404-3549; hora de recepção de chamadas – das 8.00 de manhã às 05.30 de tarde. Nosso representante ajudar-lhe.'

PUNJABI/ਪੰਜਾਬੀ

ਧਿਆਨ ਦਿਓ: 'ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲ ਅਤੇ/ਜਾਂ ਪੜ੍ਹ ਨਹੀਂ ਸਕਦੇ ਹੋ, ਕਿਰਪਾ ਕਰਕੇ ਸਵੇਰੇ 8:00 ਵਜੇ ਤੋਂ ਸ਼ਾਮ 5:30 ਵਜੇ ਦੇ ਵਿਚਕਾਰ 888-404-3549' ਤੇ ਕਾਲ ਕਰੋ। ਇੱਕ ਨੁਮਾਇੰਦਾ ਤੁਹਾਡੀ ਸਹਾਇਤਾ ਕਰੇਗਾ।'

Haitian Creol/Kreyòl Ayisyen

ATANSYON: 'Si w pa pale ak/oubyen li Kreyòl Ayisyen, tanpri rele 888-404-3549 ant 8:00 a.m. ak 5:30 p.m. Yon reprezantan pral ede w.'

Hindi/हिन्दी

ध्यान दें: यदि आप इंग्लिश बोलते और / अथवा पढ़ते नहीं हैं, तो कृपया 888-404-3549 पर सुबह 8:00 बजे से शाम 5:30 बजे के बीच फोन करें। एक प्रतिनिधि आपकी सहायता करेगा।

Somali/Soomaaliga

OGEYSIIS: 'Haddii aadan ku hadlin iyo/ama aadan akhrin karin Soomaaliga, fadlan wac ambarkaan 888-404-3549 inta u dhexeysa 8:00 subaxnimo iyo 5:30 galabnimo waxaa ku caawin doona qof wakiil ka ah.'

Hmong/Hmong

NCO NTSOOV: 'Yog tias koj tsis hais thiab / los sis tsis nyeem Hmong, thov hu rau 888-404-3549 thaum 8:00 sawv ntxov thiab 5:30 tsaus ntuj. Ib tus sawv cev yuav pab koj.'

Italian/Italiano

ATTENZIONE: 'Se non parli e/o leggi Italiano, chiama il numero 888-404-3549 tra le 8:00 e le 17:30. Un rappresentante ti assisterà.'









Tagalog/Tagalog

ATENSYON: 'Kung hindi ka nagsasalita at/o nagbabasa ng Tagalog, pakitawagan ang 888-404-3549 sa pagitan ng 8:00 a.m. at 5:30 p.m. May kinatawan na tutulong sa iyo.'

Japanese/日本語

お知らせ: '日本語を話せないまたは読めない場合、888-404-3549までご連絡ください。8:00～17:30までこちらの代表者が対応いたします。'

Important Phone Numbers

	For questions about your MCO:	Enrollee Services	202-363-4348 OR 888-404-3549 (toll free)	24 hours a day, 7 days a week
		TTY/TDD	711	
	If you need care after your doctor's office is closed:	Nurse Helpline	855-798-3540 (toll free)	24 hours a day, 7 days a week
		TTY/TDD	711	
	If you need to see a doctor within 24 hours ("Urgent Care"):	Your <u>PCP's</u> Office	_____ (fill in your <u>PCP's</u> information here)	
		Nurse Helpline	855-798-3540 (toll free)	24 hours a day, 7 days a week
	If you need a ride to an Appointment:	Transportation Services	202-363-4348 OR 866-201-9974 (toll free)	
	If you need Mental Health care or have a Mental Health question:	Your <u>PCP's</u> Office	_____ (fill in your <u>PCP's</u> information here)	
		Helpline	800-777-5327 (toll free)	24 hours a day, 7 days a week
		DC Department of Behavioral Health Access Hotline	888-793-4357	24 hours a day, 7 days a week
	If you need someone who speaks your language or if you are Hearing Impaired:	Enrollee Services	202-363-4348 OR 888-404-3549 (toll free)	24 hours a day, 7 days a week
		TTY/TDD	711	24 hours a day, 7 days a week
 	Dental and Vision Questions:	Avēsis	844-391-6678	24 hours a day, 7 days a week

FOR AN EMERGENCY, DIAL 911 OR GO TO THE NEAREST EMERGENCY ROOM.

Personal information

My Medicaid ID Number: _____

My Primary Care Provider (PCP): _____

My Primary Care Provider (PCP) Address: _____

My Primary Care Provider (PCP) Phone: _____

Child's Medicaid ID number:

Child/Children Primary Care Provider (PCP): _____

Child/Children Primary Care Provider (PCP) Address: _____

Child/Children Primary Care Provider (PCP) Phone: _____

My Primary Dental Provider (PDP): _____

My Primary Dental Provider (PDP) Address: _____

My Primary Dental Provider (PDP) Phone: _____

Child/Children Primary Dental Provider (PDP): _____

Child/Children Primary Dental Provider (PDP) Address: _____

Child/Children Primary Dental Provider (PDP) Phone: _____

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Welcome to MedStar Family Choice – District of Columbia

Thank you for choosing MedStar Family Choice - District of Columbia. We are happy to be your Medicaid managed care organization (MCO). We know that nothing is more important than you and your family's health. That's why we work hard to make sure that you and your family are treated with the kind of care and respect you want and deserve. We are committed to your health and want to make sure that you and your family receive the highest quality of care possible.

This handbook contains important information. Please read it carefully. You will learn what services you can receive from MedStar Family Choice - DC. If we make changes to MedStar Family Choice - DC that will affect you, we will tell you 30 days ahead of time.

All new enrollees will be invited to a new enrollee orientation. At the orientation, you will be able to speak with MedStar Family Choice - DC employees and ask any questions you may have. It is a chance to meet some of our team and let us welcome you to MedStar Family Choice - DC.

New enrollees will receive calls from us soon after you join. We want to make sure you schedule a visit with your doctor quickly. We will also provide you with a health benefits overview at this time, as well as ask you to complete a health risk assessment. The results of your assessment will allow us to ensure you get the care that you need. If we leave you a message and ask that you call us back, please try to return our call so we can get you into care. If you are pregnant, please call our Care Management department right away at **855-798-4244** and ask to speak with the prenatal coordinator.

If you have any questions, please call our **Enrollee Services department** at **888-404-3549**.

How this Handbook Works

MedStar Family Choice - DC is a managed care plan that is paid by the District of Columbia to help you get health care. In this Handbook, we tell you about how MedStar Family Choice - DC works, how to find doctors, how to call us, and what things we pay for. Words used in Health Care and words used by your doctor can sometimes be hard to understand. We have explained these words in the back of this book in the Definitions section.

If you have questions about things you read in this book or other questions about MedStar Family Choice - DC you can call MedStar Family Choice - DC Enrollee Services at **888-404-3549** or visit MedStarFamilyChoice.com and we will do our best to help you.

How this Handbook Can Help You

This Enrollee Handbook tells you:

- How to access health care
- Your covered Services
- Services NOT covered
- How to pick your Primary Care Provider and Primary Dental Provider (your PCP or PDP)
- What to do if you get sick



- What you should do if you have a Grievance or want to change (Appeal) a decision by MedStar Family Choice - DC.
- This Enrollee Handbook gives you basic information about how MedStar Family Choice - DC works. Please call MedStar Family Choice - DC Enrollee Services anytime, 24 hours a day, and 7 days a week if you have any questions.

Your Rights

- Know that when you talk with your doctors and other providers its private
- Have an illness or treatment explained to you in a language you can understand
- Participate in decisions about your care, including the right to refuse treatment
- Receive a full, clear and understandable explanation of treatment options and risks of each option so you can make an informed decision
- Refuse treatment or care
- Be free from any form of restraints or seclusion used as a means of coercion, discipline, convenience, or retaliation
- Can see and receive a copy of your medical records and request an amendment or change, if incorrect
- Receive access to health care services that are available and accessible to you in a timely manner
- Choose an eligible PCP/PDP from within MedStar Family Choice - DC's network and to change your PCP/PDP
- Make a Grievance about the care provided to you and receive an answer
- Request an Appeal or a Fair Hearing if you believe MedStar Family Choice - DC was wrong in denying, reducing or stopping a service or item
- Receive Family Planning Services and supplies from the provider of your choice
- Obtain medical care without unnecessary delay
- Receive information on Advance Directives and choose not to have or continue any life-sustaining treatment
- Receive a copy of MedStar Family Choice - DC's Enrollee Handbook and/or Provider Directory
- Continue treatment you are currently receiving until you have a new treatment plan
- Receive interpretation and translation services free of charge
- Refuse oral interpretation services
- Receive transportation services free of charge
- Get an explanation of prior authorization procedures
- Receive information about MedStar Family Choice - DC's financial condition and any special ways we pay our doctors
- Obtain summaries of customer satisfaction surveys
- Receive MedStar Family Choice - DC's "Dispense as Written" policy for prescription drugs
- Receive a list of all covered drugs

You Have a Right to:

Be treated with respect and due consideration for your dignity and right to privacy.

Your Responsibilities


You are responsible for:

- Treating those providing your care with respect and dignity
- Following the rules of the DC Medicaid Managed Care Program and MedStar Family Choice - DC
- Following instructions, you receive from your doctors and other providers
- Going to scheduled appointments
- Telling your doctor at least 24 hours before the appointment if you must cancel
- Asking for more explanation if you do not understand your doctor's instructions
- Going to the Emergency Room only if you have a medical emergency
- Telling your PCP/PDP about medical and personal problems that may affect your health
- Reporting to Economic Security Administration (ESA) and MedStar Family Choice - DC if you or a family Enrollee have other health insurance or if you have a change in your address or phone number
- Reporting to Economic Security Administration (ESA) and MedStar Family Choice - DC if there is a change in your family (i.e. deaths, births, etc.)
- Trying to understand your health problems and participate in developing treatment goals
- Helping your doctor in getting medical records from providers who have treated you in the past
- Telling MedStar Family Choice - DC if you were injured as the result of an accident or at work

Your Enrollee ID Card

Once you are assigned a primary care provider (PCP), we will send you an Enrollee ID Card in the mail. This card lets your doctors, hospitals, drug stores and others know that you are an Enrollee of MedStar Family Choice - DC. Please make sure that the information on your Enrollee ID Card is correct. If there are any problems, or if you have lost your card, call Enrollee Services. Each MedStar Family Choice - DC enrollee has his/her own card. Your Children will also have their own card. You must keep your children's cards so they don't get lost. It is against the law to let anyone else use your Enrollee ID card.

Your Enrollee ID Card looks like this:


MedStar Family Choice
DISTRICT OF COLUMBIA D.C. Healthy Families Program

Last Name, First Name
 DOB: XX/XX/XXXX
 Medicaid ID#: XXXXXXXXXXXX
 PCP: XXXXName
 PCP Phone: XXX-XXX-XXXX
 CVS CareMark®
 RxPCN: MCAIDADV
 Copayments – OV: \$0, RX: \$0, ER: \$0

Eff Date: XX/XX/XXXX
 MFC ID #: 6XXXXXXXXX*01
 Dentist: XXXXName
 Dentist Phone: XXX-XXX-XXXX
 RxBin: 004336
 RxGroup: RX0610

Enrollee Services
 888-404-3549 PHONE MedStarFamilyChoice.com

PRESENT THIS CARD FOR ALL HEALTH SERVICES

Enrollee Services: 24/7 by phone <small>(Office: Monday – Friday, 8 a.m. to 5:30 p.m.)</small>	888-404-3549 or TTY 711
24/7 Nurse Advice Line	855-798-3540
Transportation	866-201-9974
Dental/Vision	844-391-6678
Behavioral Health	800-777-5327
Pharmacy/After Hours Prescription	855-798-4244
Economic Security Administration	202-727-5355


GOVERNMENT OF THE DISTRICT OF COLUMBIA
 MURIEL BOWSER, MAYOR

Notice to Providers: Most institutional services require pre-authorization. Questions regarding pre-authorization of services should be directed to **855-798-4244**. Claims submission should be mailed to **MedStar Family Choice-DC, P.O. Box 1624, Milwaukee, WI 53201**. Please call **800-261-3371** for claims questions. For questions regarding pharmacy claims submission, please contact **800-364-6331**.

Card Front

Card Back

Each MedStar Family Choice - DC Enrollee has his or her own card. It is against the law to let anyone else use your Enrollee ID Card.

Please remember to carry your Enrollee ID Card and Picture ID with you all the time. Always show your card before receiving any medical care or getting medicine at a pharmacy.

Your Primary Care Provider (PCP)

Now that you are an Enrollee of MedStar Family Choice - DC your PCP (Primary Care Provider) will help you and your family to get the health care you need.

It is important to call your PCP first when you need care. If you had a PCP before you signed up with MedStar Family Choice - DC, please call Enrollee Services at **888-404-3549**. We can help you stay with that PCP if you want to.

Picking your PCP

1. Pick a PCP at the time you enroll in MedStar Family Choice - DC. This person will be your PCP while you are an Enrollee of MedStar Family Choice - DC.
 - If your current PCP is a Provider of MedStar Family Choice - DC's network, you may stay with that doctor.
 - If you don't have a PCP, you can choose from a list of doctors in our Provider Directory or at [MedStarFamilyChoice.com](https://www.MedStarFamilyChoice.com).
 - Call Enrollee Services at **888-404-3549** if you need help in picking a doctor.
 - If you do not pick a PCP within the first 10 days of being in our plan, we will choose a doctor for you. If you do not like the PCP we pick for you, you may change your PCP. Call Enrollee Services at **888-404-3549** to change your PCP.
 - MedStar Family Choice - DC will send you an Enrollee ID Card. Your card will have your PCP's name and phone number on it.
2. Pick a PCP for each family enrollee in our plan, including your children. Your PCP may be one of the following:
 - Family and General Practice Doctor - usually can see the whole family
 - Internal Medicine Doctor - usually sees only adults and children 14 years and older
 - Pediatrician - sees children from newborn up to adult
 - Obstetrician/Gynecologist (OB/GYN) - specializes in women's health and maternity care
 - If you or your child has special health care needs, you may choose a specialist as your PCP.
3. When you pick your PCP, please:
 - Try to pick a doctor who can send you to the hospital you want. Not all doctors can send patients to all hospitals. Our provider directory lists which hospitals a PCP can send you to. You can also call Enrollee Services for help.
 - Sometimes the PCP you choose won't be able to take new patients. We will let you know if you need to pick a different doctor.
 - Pick a doctor who is close to your home or work.

How to Change your PCP

You can change your PCP anytime. Just pick a new PCP from the Provider Directory. Call Enrollee Services at **888-404-3549** once you have picked a new PCP. If you need help picking a new PCP, Enrollee Services can help you.



Your Primary Dental Provider (PDP)

Now that you are an Enrollee of MedStar Family Choice - DC your PDP (Primary Dental Provider) will help you and your family to get the health care you need.

It is important to call your PDP first when you need care. If you had a dentist before you signed up with MedStar Family Choice - DC, please call Enrollee Services at **844-391-6678**. We can help you stay with that dentist if you want to.

Picking your PDP

1. Pick a PDP at the time you enroll in MedStar Family Choice - DC. This person will be your PDP while you are an Enrollee of MedStar Family Choice - DC.

- If your current PDP is a Provider of MedStar Family Choice - DC 's network, you may stay with that dentist.
- If you don't have a PDP, you can choose from a list of dentists in our Provider Directory or at [MedStarFamilyChoice.com](https://www.MedStarFamilyChoice.com).
- Call Enrollee Services at **844-391-6678** if you need help in picking a dentist.
- If you do not pick a PDP within the first 10 days of being in our plan, we will choose a dentist for you. If you do not like the PDP, we pick for you, you may change your PDP. Call Enrollee Services at **844-391-6678** to change your PDP.
- MedStar Family Choice - DC will send you an Enrollee ID Card. Your card will have your PDP's name and phone number on it.
- Choose a PDP for each family Enrollee in our plan, including your children. Your PDP may be one of the following:
 - Family and General Practice Dentist - usually can see the whole family

2. When you pick your PDP, please:

- Try to pick a dentist who can send you to the hospital you want. Not all doctors can send patients to all hospitals. Our provider directory lists which hospitals a PDP can send you to. You can also call Enrollee Services for help.
- Sometimes the PDP you choose won't be able to take new patients. We will let you know if you need to pick a different dentist.

How to change your PDP

You can change your PDP anytime. Just pick a new PDP from the Provider Directory. Call Enrollee Services at **844-391-6678** once you have picked a new PDP. If you need help picking a new PDP, Enrollee Services can help you.



Routine Care, Urgent Care and Emergency Care

There are three (3) kinds of health care you may need: Routine Care, Urgent Care, or Emergency Care.

Routine Care

Routine Care is the regular care you get from your PCP. Routine Care is also care you get from other doctors that your PCP sends you to. Routine Care can be check-ups, physicals, health screenings, and care for health problems like diabetes, hypertension, and asthma. If you need Routine Care, call your PCP's office and ask to make an appointment.

Urgent Care

Urgent Care is medical care you need within 24 hours, but not right away. Some Urgent Care issues are:

- Moderate colds
- Cough
- Sore throat
- Lice, scabies or ringworm
- Minor cuts and scrapes
- Sprains
- Earaches
- Diaper rash
- Urinary tract infections
- Diarrhea
- Throwing up
- Mild headache

If you need Urgent Care, call your PCP's office.

If your PCP's office is closed, leave a message with the person who answers the phone when the office is closed. Then call the Nurse Help Line at **855-798-3540**. A nurse will help you decide if you need to go to the doctor right away. The nurse will tell you how to get care. You do not have to go to the Emergency Room or use an ambulance for routine or Urgent Care.

Emergency Care

Emergency Care is medical care you need right away for a serious, sudden (sometimes life-threatening) injury or illness. You have the right to use any hospital for emergency care.

Examples of medical emergency conditions include:

- Chest pain
- Bleeding that cannot be stopped
- Loss of consciousness
- Poisoning
- Bad burns
- Trouble breathing
- Paralysis

WHAT TO DO IF YOU HAVE AN EMERGENCY

1. Call **9-1-1** or go to your nearest Emergency Room (ER).
2. Show the ER your MedStar Family Choice - DC Enrollee ID Card.
3. As soon as you can, call your PCP.

Care When You Are Out-of-Town

When You are Out of Town

When you need to see a doctor, or get medicine when you are out-of-town, you should:

Routine Care

You must call us and ask if we will pay for you to see a doctor or other provider when you are out of town because doctors who are not in the District of Columbia are not a part of MedStar Family Choice - DC. If MedStar Family Choice - DC does not say it is okay before you get the care, you must pay for the care yourself. If you need medicine from a doctor while you are out-of-town, please call our Enrollee Services department. If you need assistance after hours, please call our **Nurse Advice Line** at **855-798-3540**. Our pharmacy network contains numerous national chains that can be used to fill your prescription while you are out of town.



Urgent Care

Call your PCP. If your PCP's office is closed, call the Nurse Help Line **855-798-3540**. A nurse will help you decide if you need to go to the doctor right away. The nurse can tell you how to get care. You do not have to go to the Emergency Room or use an ambulance for routine or Urgent Care.

Emergency Care

If you have an emergency, including Mental health, alcohol, or other drug emergency, go to the nearest Emergency Room (ER) to get care right away. If you go to the emergency room, you should ask the ER staff to call your PCP. If you go to the emergency room, you should call Enrollee Services as soon as you can.

In-Network and Out-of-Network Providers

MedStar Family Choice - DC will pay for the care you get when you go to one of our doctors or other health care providers. We call these doctors and other health care providers our "network" providers. All these "In-Network" doctors can be found in your Provider Directory. A doctor or provider who is not one of ours is called an "Out-of-Network" Provider.

If you go to an "Out-of-Network" doctor, hospital or lab, you may have to pay for the care you get. You will not have to pay if you have asked us first and we have told you, usually in writing, that it is okay. We call this "prior authorization."

Prior Authorization (PA) means approval for a health service that is not routinely covered by MedStar Family Choice - DC. You must get this approval before you receive the service. Call Enrollee Services at **888-404-3549** to ask about getting a PA. You do not need a PA to receive emergency care.

You may go to a Family Planning provider of your choice even if they are Out-of-Network. No prior authorization is required. See page 20 for more information on Family Planning Services.

Making an Appointment

Making an Appointment with your PCP

- Have your Enrollee ID Card and a pencil and paper close by.
- Call your PCP's office. Look for your PCP's phone number on the front of your Enrollee ID Card. You can also find it in your Provider Directory or online at [MedStarFamilyChoice.com](https://www.MedStarFamilyChoice.com).
- Tell the person who answers that you are a MedStar Family Choice - DC Enrollee. Tell them you want to make an appointment with your PCP.
- Tell the person why you need an appointment. For example:
 - You or a family Enrollee is feeling sick
 - You hurt yourself or had an accident
 - You need a check-up or follow-up care
- Write down the time and date of your appointment.
- Go to your appointment on time and bring your Enrollee ID Card and picture ID with you.
- If you need help making an appointment, call Enrollee Services at **888-404-3549**.

Changing or Cancelling an Appointment

- It is very important to come to your appointment and to be on time.
- If you need to change or cancel your appointment, please call the doctor at least 24 hours before your appointment.
- For some appointments, you may have to call more than 24 hours before to cancel.
- If you do not show up for your appointment, or if you are late, your doctor may decide you cannot be his or her patient.

Getting care when your PCP's or PDP's office is Closed

If you need to speak to your PCP or PDP when the office is closed, call your PCP's or PDP's office and leave a message including your phone number with the person who answers the phone. Someone will call you back as soon as possible. You can also call the Nurse Help Line 24 hours a day at: **855-798-3540**. If you think you have an emergency, call **911** or go to the Emergency Room.

How long does it take to see your doctor?

Your doctor's office must give you an appointment within a certain number of days after you call. The table below shows how long it will take to get an appointment. Please call **888-404-3549** if you cannot get an appointment during these time periods.

Type of Visit	Your Condition	How Long it Takes to See Your Doctor
Urgent Visit	You are hurt or sick and need care within 24 hours to avoid getting worse, but you don't need to see a doctor right away. Examples include flu/fever, vomiting/diarrhea, sore throats, earaches, eye infection, sprains/strains, possible broken bones, throwing up, minor cuts or scrapes, lice, scabies or ringworm, urinary tract infections	Within 24 hours
Routine Visit	You have a minor illness or injury, or you need a regular checkup, but you don't need an urgent appointment.	Within 30 days
Follow-up Visit	You need to see your doctor after a treatment you just had to make sure you are healing well.	Within 1-2 weeks depending on the kind of treatment
Adult Wellness Visits	<p>You are having your first appointment with a new doctor</p> <p>You are due for a regular adult checkup</p> <p>You are due for a prostate exam, a pelvic exam, a PAP smear or a breast exam</p>	Within 30 days or sooner if necessary
Non-urgent appointments with specialists (by Referral)	Your PCP referred you to see a specialist for a non-urgent condition	Within 30 days
Child EPSDT checkups -not urgent	Your child is due for an EPSDT checkup	<p>Initial checkup: Within 60 days</p> <p>Additional checkups: within 30 days of due dates for children under age two; within 60 days of due dates for children age two and older</p>
IDEA (Early Intervention) assessments	Tests ("assessments") for children up to age 3 at risk of developmental delay or disability	Within 30 days

Support Services

Transportation Services

MedStar Family Choice - DC will provide transportation to your doctor's appointments if you need it. MedStar Family Choice - DC will also provide transportation to/from most non-covered services. Non-covered services are services not covered by the MedStar Family Choice - DC but covered by DHCF or other District agencies.

- Call Transportation Services at **866-201-9974** to tell them what time and what day you need to be picked up.
- You must call at least 3 business days (not including Saturday and Sunday) before your appointment to get transportation. If you need transportation to EPSDT visits or urgent visits, you can call the day before the appointment to ask for transportation.
- The types of transportation are bus, metro, vouchers to pay for a taxi, wheel chair vans, and ambulances. The type of transportation you get depends on your medical needs.
- Give our Transportation Service your Enrollee ID, phone number and address where you can be picked up. Also, tell them the name, address, and phone number of the medical/dental facility or doctor's office you are going to.

Interpretation & Translation Services/Auxiliary Aid Services for the Hearing and Visually Impaired

Interpretation Services

MedStar Family Choice - DC will provide oral Interpretation Services if you need them for FREE, including at the hospital.

Please call Enrollee Services at **888-404-3549** to get Interpretation Services. Please call us before your doctor's appointment if you need Interpretation Services.

Interpreter Services are usually provided over the telephone. If you need an interpreter to be with you at your doctor's appointment, you must let us know within 3-5 days before the appointment.

Translation Services

If you get information from MCO and need it translated into another language, please call Enrollee Services at **888-404-3549**.

Auxiliary Aid Services for the Hearing and Visually Impaired

For assistance please call Enrollee Services at **711**.

If you have trouble seeing, call Enrollee Services at **888-404-3549**. We can give you information on an audio tape, in Braille or in large print.



Specialty Care and Referrals

How to get specialty care

Your primary care provider (PCP) may decide that you need to see a doctor who can give you special help. We call these doctors specialists. Your PCP will tell you where to go for treatment if he or she thinks you need a specialist. Your PCP will either make the appointment for you or give you the phone number to make the appointment. Your PCP will give you a referral to take to the specialist. Your PCP will still be your regular doctor and will talk to the specialist who takes care of you. For female enrollees, if your PCP is not an Ob/Gyn, you have the right to see an Ob/Gyn or a family planning provider within the MedStar Family Choice - DC network without a referral. If you feel like you want a second opinion, you have the right to obtain one from another in-network provider. If another in-network provider is not available, MedStar Family Choice - DC will help arrange a second opinion outside of the MedStar Family Choice - DC network at no cost to you. You can contact your PCP or Enrollee Services at **888-404-3549** for help in getting a second opinion. A referral may be required, so it is best to keep your PCP informed of your concerns.



If you want to see a specialist, but MedStar Family Choice - DC said it wouldn't pay for the visit, you can:

- Make an appointment with another doctor in the MCO's network and get a second opinion
- Appeal our decision (see page 37 on Appeals)
- Ask for a Fair Hearing (see page 37 on Fair Hearings)

Self-Referral Services

There are certain services you can get without getting prior permission from your PCP. These are called self-referral services and are listed below.

You DO NOT need a Referral to:

- See your PCP
- Get care when you have an emergency
- Receive services from your OB/GYN doctor in within the MedStar Family Choice - DC network for routine or preventive services (females only)
- Receive Family Planning Services
- Receive services for sexually transmitted infections (STIs)
- Receive Immunizations (shots)
- Visit a vision provider in the network
- Take your child to a dental provider in the network
- Receive Mental health or services for problems with alcohol or other drugs

Mental Health Services

Mental health care is for both adults and children. This care helps when you feel depressed or anxious.

If you need help, or someone from your family needs help, call

- The crisis hotline at MedStar Family Choice - DC **800-777-5327**
- The DC Department of Behavioral Health Hotline at **888-793-4357**, 24 hours a day, 7 days a week

Services for Alcohol or Other Drug Problems

Problems with alcohol or other drugs are dangerous to your health and can be dangerous to the health of people around you. It is important to go to the doctor if you need help with these problems. MedStar Family Choice - DC will help you arrange for detoxification services and provide care coordination to help you get other services. To get services for these problems, you can:

- Call Enrollee Services at **800-777-5327**, 24 hours a day, and 7 days a week.
- Call the DBH Assessment and Referral Center (ARC) directly at **202-727-8473**.
- All Mental health, Alcohol and Drug Abuse Services are confidential.

Birth Control and other Family Planning Services

You do NOT need a Referral to receive birth control or other Family Planning Services. All birth control and other Family Planning Services are confidential.

You can get birth control and other Family Planning Services from any provider you pick. You do not need a referral to get these services. If you choose a Family Planning Services doctor other than your PCP, tell your PCP. It will help your PCP take better care of you. Talk to your PCP or call MedStar Family Choice - DC Enrollee Services at **888-404-3549** for more information on birth control or other Family Planning Services.

Family Planning Services include:

- Pregnancy testing
- Counseling for the woman and the couple
- Routine and emergency contraception
- Counseling and Immunizations
- Screening for all sexually transmitted infections
- Treatment for all sexually transmitted infections
- Sterilization procedures (must be 21 or older and requires you to sign a form 30 days before the procedure)
- HIV/AIDs testing and counseling

Family Planning Services do not include:

- Routine infertility studies or procedures
- Hysterectomy for sterilization
- Reversal of voluntary sterilization
- HIV/AIDs treatment
- Abortion

HIV/AIDS Testing, Counseling and Treatment

You can get HIV/AIDS testing and counseling:

- When you have Family Planning Services
- From your PCP
- From an HIV testing and counseling center
- For information on where you can go for HIV testing and counseling, call Enrollee Services **888-404-3549**. If you need HIV treatment, your PCP will help you get care or you can call **888-404-3549**. You can also get Pre-exposure prophylaxis (PrEP) if you or your doctor believe you are at high risk for HIV/AIDS.

Pharmacy Services and Prescription Drugs

Pharmacies are where you pick up your medicine (drugs). If your doctor gives you a prescription, you must go to a pharmacy in MedStar Family Choice - DC 's network.

You can find a list of all the pharmacies in the MedStar Family Choice - DC 's network in your provider directory or online at [MedStarFamilyChoice.com](https://www.MedStarFamilyChoice.com).

If you are out of town and need Urgent Care, call your PCP. If your PCP's office is closed, call the Nurse Advice Line at **855-798-3540**. A nurse will help you decide if you need to go to the doctor right away. The nurse can tell you how to get care. You do not have to go to the emergency room or use an ambulance for routine or urgent care.

If you are out of town and have an emergency including a Mental health, alcohol, or other drug emergency, go to the nearest emergency room (ER) to get care right away or call **911**. If you go to the ER, you should ask the ER staff to call your PCP. If you go to the ER, call your PCP for a follow-up visit. If you need help scheduling an appointment, call Enrollee Services.

If you need medicine from a doctor while you are out-of-town, please call our Enrollee Services department. If you need assistance after hours, please call our Nurse Advice Line at **855-798-3540**. Our pharmacy network contains numerous national chains that can be used to fill your prescription while you are out of town.

To get a prescription filled:

- Pick a pharmacy that is part of the MedStar Family Choice - DC network and is close to your work or home.
- When you have a prescription, go to the pharmacy and give the pharmacist your prescription and your MedStar Family Choice - DC Enrollee ID Card.
- If you need help, please call Enrollee Services at **888-404-3549**.

Things to remember:

- You should not be asked to pay for your medicines. Call MedStar Family Choice - DC Enrollee Services if the pharmacy or drug store asks you to pay.
- Sometimes, your doctor may need to get prior authorization (PA) from MedStar Family Choice - DC for a drug. While your doctor is waiting for the prior authorization, you have a right to get the medication:
 - For up to 72 hours or
 - For one full round of the medicine if you take it less than once a day

Disease Management

If you have a chronic illness or special health care need such as asthma, high blood pressure, or mental illness, we may put you in our Disease Management Program. This means you will have a Care Manager. A Care Manager is someone who works for MedStar Family Choice - DC and who will help you get the services and information you need to manage your illness and be healthier.

Care Coordination and Case Management Programs

If you or your child has a chronic illness or special health care need such as diabetes, high blood pressure, mental illness or asthma, MedStar Family Choice - DC may offer you special services and programs to give you extra help with your health care needs. You or your child will have a Care Manager who will help you get the services and information you need to manage your illness and improve your health.

MedStar Family Choice - DC Care Manager can help you or your child with:

- Getting covered services;
- Setting up medical appointments and tests;
- Setting up transportation;
- Finding ways to make sure you get the right service;
- Finding resources to help with special health care needs and/or your caregivers manage day-to-day stress
- Connecting with community and social services
- With transitioning to other care when your benefits end, you choose another MCO or you move to the DC Medicaid Fee-For-Service program, if necessary

For more information contact MedStar Family Choice - DC Care Management Program at **202-363-4348** or **855-798-4244**. Our staff can give you more information. They can also let you know what programs you are currently enrolled in. You can also ask for a referral or ask to be removed from a program.

Services to Keep Adults from Getting Sick

MedStar Family Choice - DC wants you to take care of your health. We also want you to sign up for health and wellness services we offer to you. Health and wellness services include screenings, counseling and immunizations.

Recommendations for Check-Ups ("Screenings")

Please make an appointment and go see your PCP at least one time every year for a check-up. See the list of "Adult Wellness Services" in the "Your Health Benefits" section for things to talk with your PCP about during your check-up.

Make an appointment to see your PCP at least once a year for a check-up.

Preventive Counseling

Preventive counseling is available to help you stay healthy. You can get preventive counseling on:

- Diet and exercise
- Alcohol and Drug Use
- Smoking Cessation
- HIV/AIDS Prevention

MedStar Family Choice - DC wants you to take care of your health. We also want you to sign up for health and wellness services we offer to you. Health and wellness services include screenings, counseling and immunizations. MedStar Family Choice - DC offers gift cards for finishing your recommended yearly screenings. Please call the Care Management office for information on the programs you are qualified for at **202-363-4348** or **855-798-4244**. MedStar Family Choice - DC will cover and pay for diagnostic screening and preventive medical services recommended by a physician or other licensed provider.

Adult Immunizations

If you are an adult, you may need some immunizations (shots). Please talk to your PCP about which ones you may need.

Pregnancy

If you are pregnant or think you are pregnant, it is very important that you go to your OB/GYN doctor right away. You do not need to see your PCP before making this appointment.

If you are pregnant, please call:

- Economic Security Administration (ESA) at **202-727-5355**-to report your pregnancy
- Care Management office at **202-363-4348** or **855-798-4244**.
- Your PCP

There are certain things that you need to get checked if you are pregnant. These will help make sure that you have a healthy pregnancy, delivery, and baby. This is called Prenatal Care. You get prenatal care before your baby is born.

Remember, if you are pregnant or think you are pregnant, do not drink alcohol, use drugs or smoke.

Prenatal and Post-Partum Care

Your Ob/Gyn doctor will want to see you at regular times. It is important for your health and your baby's health that you do not miss these appointments. During the first seven months that you are pregnant, your Ob/Gyn doctor will want to see you every month. After seven months, your Ob/Gyn doctor will want to see you every two weeks. As you get close to the time to have your baby, your Ob/Gyn doctor will want to see you every week. Your Ob/Gyn doctor will also want to see you about six weeks after you have your baby. After this visit, you can go back to your PCP.



Please call MedStar Family Choice - DC as soon as you know you are pregnant. We have a special program for pregnant women that helps encourage good prenatal care. If you are less than 28 weeks pregnant, you may be eligible to join the MedStar Family Choice - DC Momma and Me Incentive program.

This program offers incentives for taking care of yourself and your baby before and after your delivery. As a Momma and Me participant, you will also receive educational materials. For additional information about the program, please call the Care Management office at **202-363-4348** or **855-798-4244**, and select the prompt for Outreach and ask to speak with a prenatal coordinator.

For those moms that do not enroll in the MedStar Family Choice - DC Momma and Me Incentive program, we have a postpartum program called We Care. For participating in this program, you may be eligible for an incentive for receiving your postpartum exam and for taking your newborn to his or her first two-week, well-child visit. For additional information about the We Care program, please call the Care Management office at **202-363-4348** or **855-798-4244** and select the prompt for Outreach and ask to speak with a postpartum coordinator.

Once you have your baby, call Care Management office at **202-363-4348** or **855-798-4244** and ESA at **202-727-5355**.

Your Child's Health

Health Check Program for Children (EPSDT)

MedStar Family Choice - DC wants to help your children grow up healthy. If your child is in the D.C. Healthy Families (Medicaid) program, your child will be in the Health Check Program, also called Early and Periodic Screening, Diagnosis and Treatment (EPSDT). This program starts right after your child is born and lasts until your child turns 21. The Health Check Program gives your child several important checkups.

There is a Health Check (EPSDT) information sheet in this handbook on page 48. You can also ask your doctor, call Enrollee Services, or visit our website [MedStarFamilyChoice.com](https://www.MedStarFamilyChoice.com) for a copy of the Health Check (EPSDT) Periodicity Schedule. The schedule tells you when your child needs to go to the doctor.

In addition to Health Check/EPSDT services, your child can also get the benefits described in the "Enrollee Health Benefits" section below.

Immigrant Children

If your child is in the Immigrant Children's Program, your child will get well-child care services. This program lasts until your child turns 21.

In addition to well-child care, your child can also get the benefits described in the "Enrollee Health Benefits" section below. Immigrant children are only eligible for medical services while in enrolled in (MCO)

You do not have to pay anything for these Services for your child - they are free. If you have any questions or need help with transportation or scheduling an appointment, please call Enrollee Services at 888-404-3549.

Care for your Child's Teeth

All dental health checkups and treatments are free for MedStar Family Choice - DC enrollees under age 21.

Dentists can prevent cavities and teach you and your child how to care for their teeth.

From birth, up to age 3, your child's PCP may provide dental care during regular check-ups. The PCP may decide to send the child to a dentist.

- Beginning at age 3, all children should see a dentist in the MedStar Family Choice - DC network for a checkup every year. Look in the MedStar Family Choice - DC Provider Directory or online at [MedStarFamilyChoice.com](https://www.MedStarFamilyChoice.com) to pick a dentist near you. Please call the dentist's office for an appointment.



Children with Special Health Care Needs

When children have physical, developmental, behavioral, or emotional conditions that are permanent or that last a long time, they can have Special Health Care Needs. These children may need additional health care and other services.

MedStar Family Choice - DC will contact you to complete a health screener to see if your child has Special Health Care Needs. If you have not been contacted by (MCO), please call Enrollee Services at **888-404-3549**.

If your child has Special Health Care Needs:

- Your child has the right to have a PCP who is a specialist
- Your child may be assigned to a case manager to help with your child's special needs.
- Your child's case manager will work with you and your child's doctor to create a treatment plan.
- Make sure your child's treatment plan is signed by you and your child's doctor. If you do not have a treat plan, call MedStar Family Choice - DC Enrollee Services to ask for a treatment plan for your child.



The IDEA Program

IDEA stands for the Individuals with Disabilities Education Act. IDEA is a federal law. The IDEA program provides special services for your child with developmental delays, disabilities or special needs. Children up to age 3 get early intervention services from MedStar Family Choice - DC. Children age 4 and older get special educational services from the D.C. Public School and Public Charter School systems.

The D.C.'s Growth Chart (see page 49) can help you figure out if your child is having delays in growth and development.

If you think your child is not growing the way he or she should, have your child tested ("IDEA evaluation"). To get an IDEA evaluation, call your PCP. If your child needs IDEA Services, your PCP will refer your child to the D.C. Strong Start Early Intervention Program.

MedStar Family Choice - DC has case managers who can tell you more about IDEA and the other services your child can get.

MedStar Family Choice - DC covers the services listed below if your child is eligible for Early Intervention services:

For children, up to age 3, MedStar Family Choice - DC covers all health care services even if the service is in your child's treatment plan (IFSP).

- For children aged 3 and older, MedStar Family Choice - DC:
 - Pays for all health care services and services in your child's treatment plan that your child needs when not in school—even on evenings, weekends and holidays.
 - Coordinates services that are not provided through the school's treatment plan.

For more information on the services your child can get through the IDEA program, contact Enrollee Services **888-404-3549** or your child's school.

Immunizations (Shots) for Children and Teens

Immunizations (shots) are important to keep your child healthy. When your child is very young, your child will need shots every few months. The shots start at birth. These shots protect them from diseases.

Your PCP and MedStar Family Choice - DC will schedule appointments for your child's shots. The Periodicity Chart (see page 48) for the schedule of your child's shots.

Your Health Benefits

Health Services covered by MedStar Family Choice - DC

The list below shows the health care services and benefits for all MedStar Family Choice - DC Enrollees. For some benefits, you must be a certain age or have a certain need for the service. MedStar Family Choice - DC will not charge you for any of the health care services in this list if you go to a network provider or hospital.

If you have a question about whether MedStar Family Choice - DC covers certain health care and how to access services, call MedStar Family Choice - DC Enrollee Services at **888-404-3549**.

Benefit	What You Get	Who Can Get This Benefit
Adult Wellness Services	<ul style="list-style-type: none"> • Immunizations • Routine screening for sexually transmitted infections • HIV/AIDS screening, testing and counseling • Breast cancer screening • Cervical cancer screening (women only) • Osteoporosis screening (post-menopausal women) • HPV screening • Prostate cancer screening (men only) • Abdominal aortic aneurysm screening • Obesity screening • Diabetes screening • High blood pressure and cholesterol (lipid disorders) screening • Depression screening • Colorectal cancer screening (Enrollees 50 years and older) • Smoking cessation counseling • Diet and exercise counseling • Mental Health counseling • Alcohol and drug screening 	Enrollees over age 21 as appropriate

Benefit	What You Get	Who Can Get This Benefit
Alcohol & Drug Abuse Treatment	<ul style="list-style-type: none"> • Inpatient detoxification • Other alcohol/drug abuse services are provided by the Addiction, Prevention and Recovery Administration (DBH) • Help with getting care from DBH 	All Enrollees
	<ul style="list-style-type: none"> • Inpatient and outpatient substance abuse treatment • Other alcohol/drug abuse Services are provided by the Addiction, Prevention and Recovery Administration (DBH) • Help with getting care from DBH 	Enrollees under age 21
Child Wellness Services	<ul style="list-style-type: none"> • Whatever is needed to take care of sick children and to keep healthy children well, including screening and assessments such as: • Health and development history and screenings • Physical and Mental health development and screenings • Comprehensive health exam • Immunizations • Lab tests including blood lead levels • Health education • Dental screening services • Vision screening services • Hearing screening services • Alcohol and drug screening and counseling • Mental health services • Does not include any health services furnished to a child in a school setting 	Enrollees under age 21



Benefit	What You Get	Who Can Get This Benefit
Dental Benefits	<ul style="list-style-type: none"> • General dentistry (including regular and emergency treatment) and orthodontic care for special problems • Check-ups twice a year with a dentist are covered for children ages 3 through 20. • A child's PCP can perform dental screenings for a child up to age 3 • Does not include routine orthodontic care • Fluoride varnish treatment up to four (4) times a year 	<p>Enrollees under age 21</p> <p>(Enrollees 21 years and older can get dental services from Medicaid. Call MedStar Family Choice - DC Dental Help Line at 844-391-6678)</p>
	<ul style="list-style-type: none"> • General dental exams and routine cleanings every six (6) months • Surgical services and extractions • Emergency dental care • Fillings • X-rays (full series limited to one (1) time every three (3) years) • Full mouth debridement • Prophylaxis limited to two (2) times per year • Bitewing series • Palliative treatment • Sealant application • Removable partial and full dentures • Removeable partial and full dentures • Root Canal treatment limited to two (2) molars per year • Periodontal scaling and root planning • Dental crowns • Removal of impacted teeth • Initial placement of a removeable prosthesis (any dental device or appliance replacing one or more missing teeth, including associated structures, if required, that is designed to be removed and reinserted), once every five (5) years. Some limitations may apply. • Removable partials prosthesis • Any dental service that requires inpatient hospitalization must have prior authorization (preapproval) • Elective surgical procedures requiring general anesthesia 	<p>Enrollees age 21 and older</p>
Dialysis Services	<ul style="list-style-type: none"> • Treatment up to 3 times a week (limited to once per day) 	<p>All Enrollees</p>

Benefit	What You Get	Who Can Get This Benefit
Durable Medical Equipment (DME) & Disposable Medical Supplies (DMS)	<ul style="list-style-type: none"> • Durable medical equipment (DME) • Disposable medical supplies (DMS) 	All Enrollees
Emergency Services	<ul style="list-style-type: none"> • A screening exam of your health condition, post-stabilization services, and stabilization services if you have an emergency medical condition, regardless if the provider is in or out of the MedStar Family Choice - DC network. • Treatment for emergency condition 	All Enrollees
Family Planning	<ul style="list-style-type: none"> • Pregnancy testing; counseling for the woman • Routine and emergency contraception • Voluntary sterilizations for Enrollees over 21 years of age (requires signature of an approved sterilization form by the Enrollee 30 days prior to the procedure) • Screening, counseling and Immunizations (including for Human Papilloma Virus- HPV) • Screening and preventive treatment for all sexually transmitted infections • Does not include sterilization procedures for Enrollees under age 21 	All Enrollees as appropriate
Hearing Benefits	<ul style="list-style-type: none"> • Diagnosis and treatment of conditions related to hearing, including hearing aids and hearing aid batteries 	All Enrollees
Home Health Services	<ul style="list-style-type: none"> • In-home health care services, including: • Nursing and home health aide care • Home health aide services provided by a home health agency • Physical therapy, occupational therapy, speech pathology and audiology services 	All Enrollees
Hospice Care	<ul style="list-style-type: none"> • Support services for people who are nearing end of life 	All Enrollees
Hospital Services	<ul style="list-style-type: none"> • Outpatient services (preventive, diagnostic, therapeutic, rehabilitative, or palliative services) • Inpatient services (hospital stay) 	Any Enrollees with a Referral from their PCP or who has an emergency

Benefit	What You Get	Who Can Get This Benefit
Laboratory & X-ray Services	<ul style="list-style-type: none"> • Lab tests and X-rays 	All Enrollees
Nursing Home Care	<ul style="list-style-type: none"> • Full-time skilled nursing care in a nursing home up to 90 consecutive days 	All Enrollees
Mental Health Services	<ul style="list-style-type: none"> • Services provided by Mental health providers, including: • Diagnostic and assessment services • Physician and mid-level visits, including: • Individual counseling • Group counseling • Family counseling • FQHC Services • Medication/Somatic treatment • Crisis services • Inpatient hospitalization and emergency department services • Intensive day treatment • Case management services • Treatment for any mental condition that could complicate pregnancy • Patient psychiatric residential treatment facility services (PTRF) for Enrollees under 22 years of age for thirty (30) consecutive days • Mental health services for children that are included in an IEP or IFSP during holidays, school vacations, or sick days when the child is not in school • Care coordination for Enrollees receiving the following Services from DBH: • Community-based interventions • Multi-systemic therapy (MST) • Assertive community treatment (ACT) • Community support • Mental health and substance abuse services in an Institution for Mental Disease 	All Enrollees, as appropriate
Personal Care Services	<ul style="list-style-type: none"> • Services provided to an Enrollee by an individual qualified to provide such Services who is not a enrollee of the Enrollee’s family, usually in the home, and authorized by a physician as a part of the Enrollee’s treatment plan. • You must get prior authorization for this service. 	All Enrollees Not available to Enrollees in a hospital or Nursing Home

Benefit	What You Get	Who Can Get This Benefit
Pharmacy Services (prescription drugs)	<ul style="list-style-type: none"> • Prescription drugs included on the MedStar Family Choice - DC drug formulary. You can find the drug formulary at MedStarFamilyChoice.com or by calling Enrollee Services. • Only includes medications from network pharmacies • Includes the following non-prescription over the counter (OTC) medicines: <ul style="list-style-type: none"> • Latex Condoms • Emergency Contraception (such as Plan B) • You must get a prescription from your doctor to get the over the counter medication. A complete list is available on the website or by calling Enrollee Services. 	<p>All Enrollees other than dually eligible (Medicaid/Medicare)</p> <p>Enrollees whose prescriptions are covered under Medicare Part D</p>
Podiatry	<ul style="list-style-type: none"> • Special care for foot problems • Regular foot care when medically needed 	All Enrollees
Primary Care Services	<ul style="list-style-type: none"> • Preventive, acute, and chronic health care services generally provided by your PCP 	All Enrollees
Prosthetic devices	<ul style="list-style-type: none"> • Replacement, corrective, or supportive devices prescribed by a licensed provider 	All Enrollees
Rehabilitation Services	<ul style="list-style-type: none"> • Including physical, speech and occupational therapy 	All Enrollees
Specialist Services	<ul style="list-style-type: none"> • Health care services provided by specially trained doctors or advanced practice nurses. • Referrals are usually required • Does not include cosmetic services and surgeries except for surgery required to correct a condition resulting from surgery or disease, created by an accidental injury or a congenital deformity, or is a condition that impairs the normal function of your body 	All Enrollees
Transportation Services	<ul style="list-style-type: none"> • Transportation to and from medical appointments to include services covered by DHCF 	All Enrollees
Vision Care	<ul style="list-style-type: none"> • Eye exams at least once every year and as needed; and eye glasses (corrective lenses) as needed 	Enrollees under age 21
	<ul style="list-style-type: none"> • One (1) pair of eyeglasses every two (2) years except when the Enrollee has lost his or her eyeglasses or when the prescription has changed by more than 0.5 diopter 	Enrollees age 21 and older

Services We Do Not Pay For

- Cosmetic surgery
- Experimental or investigational services, surgeries, treatments, and medications
- Services that are part of a clinical trial protocol
- Abortion, or the voluntary termination of a pregnancy, not required under Federal law
- Infertility treatment
- Sterilizations for persons under the age of 21
- Services that are not medically necessary
- Services performed outside of the United States
- Some counseling or referral services may not be covered by MedStar Family Choice - DC due to religious or moral beliefs. Contact DHCF at **202-442-5988** for more information.

Transition of Care

If MedStar Family Choice - DC is new for you, you can keep your scheduled doctor's appointments and prescriptions for the first 90 days. If your provider is not currently in MedStar Family Choice - DC network, then you may be asked to select a new provider that is within MedStar Family Choice - DC's provider network. If your doctor leaves MedStar Family Choice - DC's network, we will notify you within 15 days so that you have time to select another provider.

Other Important Things to Know

What to do if I move

- Call the District of Columbia (DC) Economic Security Administration (ESA) Change Center at **202-727-5355**.
- Call MedStar Family Choice - DC Enrollee Services at **888-404-3549**.

What to do if I have a baby

- Call DC Economic Security Administration (ESA) Change Center at **202-727-5355**.
- Call MedStar Family Choice - DC Care Management office at **202-363-4348** or **855-798-4244**.

What to do if I adopt a child

- Call DC Economic Security Administration (ESA) Change Center at **202-727-5355**.

What to do if someone in my family dies

- Call DC Economic Security Administration (ESA) Change Center at **202-727-5355**.
- Call MedStar Family Choice - DC Enrollee Services at **888-404-3549**

How to change my MCO

- You can change your MCO once a year, or at any time if you have a good reason.
- You can change your MCO once a year during the 90 days before your anniversary date—the month and date you first joined MedStar Family Choice - DC.
- D.C. Healthy Families will send you a letter two months before your anniversary date. The letter tells you how to change MCOs.
- Your health care information will transition to the new MCO you choose so that you can continue to get the care you need.

You will not be allowed to get health care from MedStar Family Choice - DC anymore if you:

- Lose your Medicaid eligibility
- Establish Social Security Income (SSI) eligibility

A child will be removed from MedStar Family Choice - DC if the child:

- Becomes a ward of the District

The D.C. government may remove you from MedStar Family Choice - DC if you:

- Let someone else use your Enrollee ID Card;
- The District finds you committed Medicaid fraud; or
- You do not follow your Enrollee responsibilities.

What to do if I get a bill for a covered service

If you get a bill for a covered service that is in the list above, call Enrollee Services at **888-404-3549**.

Paying for Non-Covered Services

- If you decide you want a service that we do not pay for and you do not have written permission from MedStar Family Choice - DC, you must pay for the service yourself.
- If you decide to get a service that we do not pay for, you must sign a statement that you agree to pay for the service yourself.
- Remember to always show your Enrollee ID Card and tell doctors that you are an Enrollee of MedStar Family Choice - DC before you get services.

Advance Directive

An Advance Directive is a legal document you sign that lets others know your health care choices. It is used when you are not able to speak for yourself. Sometimes this is called a “living will” or a “durable power of attorney.”

An Advance Directive can let you pick a person to make choices about your medical care for you. An advance directive also lets you say what kind of medical treatment you want to receive if you become too ill to tell others know what your wishes are.

It is important to talk about an Advance Directive with your family, your PCP, or others who might help you with these things.

If you want to fill out and sign an Advance Directive, ask your PCP for help during your next appointment, or call Enrollee Services at **888-404-3549** and they will help you.

What to do if I have other insurance

If you are an Enrollee of MedStar Family Choice - DC , you must tell us right away if you have any other health insurance. Please call Enrollee Services at **888-404-3549**.

What to do if I am eligible for both Medicaid and Medicare

If you have Medicare and Medicaid, please tell MedStar Family Choice - DC so you can pick Medicare providers. If you have Medicare, you must sign up for Medicare Part D for your prescription drugs. Medicaid will pay your co-pays. See page 47 of this handbook for more information.

Fraud

Fraud is a serious matter. What is fraud? Fraud is making false statements or representations of material facts to obtain some benefit or payment for which no entitlement would otherwise exist. An example of fraud for Enrollees is falsely claiming that you live in the District, when you actually live outside the boundaries of the District of Columbia. An example of fraud for providers is billing for services that were not furnished and/or supplies not provided.

If you suspect fraud, please let us know. It is not required that you identify yourself or give your name. If you would like more information about what is fraud, visit MedStar Family Choice - DC website at MedStarFamilyChoice.com. To report fraud, call MedStar Family Choice - DC Compliance Hotline, **877-811-3411**, or call the DC Department of Health Care Finance’s Fraud Hotline at **877-632-2873**.

Physician (doctor) incentive plan disclosure

You have the right to find out if MedStar Family Choice - DC has special financial arrangements with MedStar Family Choice - DC 's doctors.

Please call MedStar Family Choice - DC Enrollee Services at **888-404-3549** for this information.

Grievances, Appeals and Fair Hearings

MedStar Family Choice - DC and the District government both have ways that you can complain about the care you get or the Services MedStar Family Choice - DC provides to you. You may choose how you would like to complain as described below.

Grievances

- If you are unhappy with something that happened to you, you can file a Grievance. Examples of why you might file a Grievance include:
 - You feel you were not treated with respect
 - You are not satisfied with the health care you got
 - It took too long to get an appointment
 - To file a Grievance, you should call Enrollee Services at **888-404-3549**.
- Your doctor can also file a Grievance for you.
- You should file a Grievance as soon as possible and no later than 90 days after the thing you are unhappy about. MedStar Family Choice - DC will usually give you a decision within 90 days but may ask for extra time (but not more than 104 days' total) to give a decision.

Appeals and Fair Hearings

If you believe your benefits were unfairly denied, reduced, delayed or stopped, you have a right to file an Appeal with MedStar Family Choice - DC. If you are not satisfied with the outcome of the appeal you filed with MedStar Family Choice - DC you can request a "Fair Hearing" with the DC's Office of Administrative Hearings.

To file an Appeal with MedStar Family Choice - DC , call Enrollee Services at **888-404-3549**.

To file a request for a Fair Hearing, call or write the District government at:

District of Columbia Office of Administrative Hearings
Clerk of the Court
4th Street, NW
Room N450
Washington, DC 20001
Telephone Number: **202-442-9094**

Deadlines:

- You must file an Appeal within 60 calendar days from the notice of adverse benefit determination is mailed.
- You may request a Fair Hearing within 120 days of getting the MedStar Family Choice - DC's notice of appeal resolution.
- If you want to continue receiving the benefit during your Fair Hearing or Appeal, you must request the Fair Hearing or Appeal within the later of the following:
 - Within 10 days from MedStar Family Choice - DC postmark of the Notice of Adverse Benefit Determination or the Appeal Resolution Notice or
 - The intended effective date of the MedStar Family Choice - DC's proposed action (or, in other words, when the benefit is to stop).

Your provider may file an Appeal or request for a Fair Hearing on your behalf.

Appeals

If you call and give your Appeal over the phone, MedStar Family Choice - DC will summarize your Appeal in a letter and send you the letter for you to sign. Be sure to read the letter carefully. You must sign the letter and return it to the MCO to have an Appeal.

Your Appeal will be decided by MedStar Family Choice - DC within 30 calendar days from the date your Appeal was received.

If MedStar Family Choice - DC needs more time to get information and the District decides this would be best for you, or if you or your Advocate requests more time, MedStar Family Choice - DC may increase this time for the decision by 14 calendar days. MedStar Family Choice - DC must give you written notice of the extension.

You will receive written notice of MedStar Family Choice - DC's decision about your Appeal in the mail.

If you are not happy with MedStar Family Choice - DC's decision about your Appeal you may request a Fair Hearing.

Expedited (Emergency) Grievances and Appeals Process

If your Appeal is determined to be an emergency, MedStar Family Choice - DC will give you a decision within 3 calendar days. An Appeal is considered an emergency if it would be harmful or painful to you if you had to wait for the standard time frame of the Appeal procedure.

All Appeals filed by Enrollees with HIV/AIDS, mental illness or any other condition that requires attention right away, will be resolved and communicated back to the Enrollee within 24 hours of filing the Appeal.

Your Rights during the Grievances, Appeals and Fair Hearings process

- You have the right to a Fair Hearing. You may request a Fair Hearing from the Office of Administrative Hearing after you have gone through the one-level Appeal process with MedStar Family Choice - DC. You must request a fair hearing no more than 120 calendar days from the date the notice upholding the adverse benefit determination is mailed.
- If MedStar Family Choice - DC does not give you notice regarding your appeal or does not give you notice in a timely manner, then the appeal process will be considered complete and you may go ahead and request a fair hearing.
- You have a right to keep receiving the benefit we denied while your Appeal or Fair Hearing is being reviewed. To keep your benefit during a Fair Hearing, you must request the Fair Hearing within a certain number of days - This could be as short as 10 days.
- You have the right to have someone from MedStar Family Choice - DC help you through the Grievance and Appeals process.
- You have a right to represent yourself or be represented by your family caregiver, lawyer, or other representative.
- You have a right to have accommodations made for any special health care need you have.
- You have a right to adequate TTY/TTD capabilities, and services for the visually impaired.
- You have a right to adequate translation services and an interpreter.
- You have a right to see all documents related to the Grievance, Appeal or Fair Hearing.

If you have any questions about the Grievances and Appeals/Fair Hearings process, please call Enrollee Services at **888-404-3549**.



Notice of Privacy Practices

This Notice describes how medical information about you may be used and disclosed, and how you can get this information. Please read it carefully.

Who Will Follow This Notice

MedStar Health Inc. and its affiliated entities and subsidiaries are separate legal entities. However, they are under common ownership and control, and thus have organized themselves as a single Affiliated Covered Entity (ACE) for the purposes of the HIPAA Privacy Rule. This status permits MedStar, its affiliated entities and subsidiaries to maintain a single Notice of Privacy Practices. This notice describes the health information practices of the MedStar organization. All entities, sites and locations will follow the terms of this notice. In addition, these entities, sites and locations may share medical information with each other for treatment, payment and healthcare operations as described in this notice.

Our Obligation to You

We value the privacy of your medical information as an important part of our patient-first pledge. We view the protection of patient privacy as an essential component of our vision to be the Trusted Leader in Caring for People and Advancing Health, and our mission to serve our patients. We strive to use only the minimum amount of your health information necessary for the purposes described in this Notice of Privacy Practice ("Notice").

We collect information from you and use it to provide you with quality care and to comply with certain legal requirements. We are required by law to maintain the privacy of your health information, and to give you this Notice of our legal duties, our privacy practices and your rights. We are required to follow the terms of our most current Notice. When we disclose information to other persons and companies to perform services for us, we will require them to protect your privacy. There are other laws we will follow that may provide additional protections, such as laws related to mental health, alcohol and other substance abuse, and communicable diseases or other health conditions.

This Notice covers the following sites and people: all healthcare professionals authorized to enter information into your chart, all volunteers authorized to help you while you are here, all of our associates and on-site contractors, all departments and units within the hospital, all healthcare students, all healthcare delivery facilities and providers within the MedStar system, and your personal doctor and others while they are providing care at this site. Your doctor may have different policies or notices about the health information that was created in his or her private office or clinic.

How We May Use and Disclose Health Information

Treatment: We may use and disclose your health information to provide treatment or services, to coordinate or manage your health care, or for medical consultations or referrals. We may use and disclose your health information among doctors, nurses, technicians, medical students, and other personnel who are involved in taking care of you at our facilities or with such persons outside our facilities. We may use or share information about you to coordinate the different services you need, such as prescriptions, lab work and X-rays. We may disclose information about you to people outside our facility who may be involved in your care after you leave, such as family members, home health agencies, therapists, nursing homes, clergy, and others. We may give information to your health plan or another provider to arrange a referral or consultation.

Payment: We may use and disclose your health information so that we can receive payment for the treatment and services that were provided. We may share this information with your insurance company or a third party used to process billing information. (As described below, if you pay for your health care in full and out-of-pocket, you may request that we not share your information with your insurance company.) We may contact your insurance company to verify what benefits you are eligible for, to obtain prior authorization and to tell them about your treatment to make sure that they will pay for your care. We may disclose information

to third parties who may be responsible for payment, such as family members or to bill you. We may disclose information to third parties that help us process payments, such as billing companies, claims processing companies and collection companies.

Healthcare Operations: We may use and disclose your health information as necessary to operate our facility and make sure that all of our patients receive quality care. We may use health information to evaluate the quality of services you received or the performance of our staff in caring for you. We may use health information to improve our performance or to find better ways to provide care. We may use health information to grant medical staff privileges or to evaluate the competence of our healthcare professionals. We may use your health information to decide what additional services we should offer and whether new treatments are effective. We may disclose information to students and professionals for review and learning purposes. We may combine our health information with information from other healthcare facilities to compare how we are doing and see where we can make improvements. We may use health information for business planning, or disclose it to attorneys, accountants, consultants, and others in order to make sure we are complying with the law. We may remove health information that identifies you so others may use the de-identified information to study health care and healthcare delivery without learning who you are. If operating as a health plan, we will not use or disclose genetic information for underwriting purposes (this does not apply to long-term care plans).

Business Associates: There are some services provided by MedStar Health through contracts with business associates. Examples include a copy service we use when making copies of your health record, consultants, accountants, lawyers, medical transcriptionists, and third-party billing companies. When these services are contracted, we may disclose your health information to our business associates so they can perform the job we've asked them to do. To protect your health information, however, we require the business associate to appropriately safeguard your information.

Certain Marketing Activities: We may use your medical information to forward promotional gifts of nominal value; to communicate with you about products, services and educational programs offered by MedStar Health; to communicate with you about case management and care coordination; and to communicate with you about treatment alternatives. We do not sell your health information to any third party for their marketing activities unless you sign an authorization allowing us to do this.

Health Information Exchanges: We may participate in health information exchanges to facilitate the secure exchange of your electronic health information between and among several healthcare providers or other healthcare entities for your treatment, payment or other healthcare operations purposes. This means we may share information we obtain or create about you with outside entities (such as hospitals, doctors offices, pharmacies, or insurance companies), or we may receive information they create or obtain about you (such as medication history, medical history or insurance information) so each of us can provide better treatment and coordination of your healthcare services. In addition, if you visit any MedStar Health facility, your health information may be available to other clinicians and staff who may use it to care for you, to coordinate your health services or for other permitted purposes.

The Chesapeake Regional Information System for our Patients (CRISP) is a regional HIE serving Maryland and Washington, D.C., in which we participate. We may share information about you through CRISP for treatment, payment, healthcare operations or research purposes. You may "opt-out" and disable access to your health information available through CRISP by calling 877-952-7477 or completing and submitting an Opt-Out form to CRISP by mail, fax or through their website at CrispHealth.org. As permitted by law, even

if you opt-out of CRISP, public health reporting and Controlled Dangerous Substances information, as part of the Maryland Prescription Drug Monitoring Program (PDMP), will still be available to providers through CRISP.

Appointment Reminders and Service Information: We may use or disclose your health information to contact you to provide appointment reminders or to let you know about treatment alternatives or other health-related services or benefits that may be of interest to you.

Individuals Involved in Your Care or Payment for Your Care: We may give your health information to people involved in your care, such as family members or friends, unless you ask us not to. We may give your information to someone who helps pay for your care. We may share your information with other healthcare professionals, government representatives or disaster-relief organizations, such as the Red Cross, in emergency or disaster-relief situations so they can contact your family or friends or coordinate disaster-relief efforts.

Patient Directories: We may keep your name, location in the facility and your general condition in a directory to give to anyone who asks for you by name. We may give this information and your religious affiliation to clergy, even if they do not know your name. You may ask us to keep your information out of the directory, but you should know that if you do, visitors and florists will not be able to find your room. Even if you ask us to keep your information out of the directory, we may share your information for disaster-relief efforts or in declared emergency situations.

Fundraising Activities: We depend extensively on philanthropy to support our healthcare mission. We may use your name and other limited information to contact you, including the dates of your care, the name of the department where you were treated and the name of your treating physician so that we may provide you with an opportunity to make a donation to our programs. We may collaborate with a third party, including Georgetown University, to manage our fundraising activities. If we or any of our agents contact you for fundraising or philanthropy purposes, you will be told how you may ask us not to contact you in the future.

Research: We may use or disclose your health information for research that has been approved by one of our official research review boards, which has evaluated the research proposal and established standards to protect the privacy of your health information. We may use or disclose your health information to a researcher preparing to conduct a research project.

Organ and Tissue Donation: We may use or disclose your health information in connection with organ donations, eye or tissue transplants or organ donation banks, as necessary to facilitate these activities.

Public Health Activities: We may disclose your health information to public health or legal authorities whose official activities include preventing or controlling disease, injury or disability. For example, we must report certain information about births, deaths and various diseases to government agencies. We may disclose health information to coroners, medical examiners and funeral directors as allowed by the law to carry out their duties. We may use or disclose health information to report reactions to medications, problems with products or to notify people of recalls of products they may be using. We may use or disclose health information to notify a person who may have been exposed to a disease or may be at risk for contracting or spreading a disease.

Serious Threat to Health and Safety: We may use or disclose your health information when necessary to prevent a serious threat to your health and safety, or the health and safety of the public or another person. We will only disclose health information to someone reasonably able to help prevent or lessen the threat, such as law enforcement or government officials.

Required by Law, Legal Proceedings, Health Oversight Activities and Law Enforcement: We will disclose your health information when we are required to do so by federal, state and other law. For example, we may be required to report victims of abuse, neglect or domestic violence, as well as patients with gunshot and other wounds. We will disclose your health information when ordered in a legal or administrative proceeding, such as a subpoena, discovery request, warrant, summons, or other lawful process.

We may disclose health information to a law enforcement official to identify or locate suspects, fugitives, witnesses, victims of crime, or missing persons. We may disclose health information to a law

enforcement official about a death we believe may be the result of criminal conduct or about criminal conduct that may have occurred at our facility. We may disclose health information to a health oversight agency for activities authorized by law, such as audits, investigations, inspections, and licensure.

Specialized Government Functions: If you are in the military or a veteran, we will disclose your health information as required by command authorities. We may disclose health information to authorized federal officials for national security purposes, such as protecting the President of the United States or the conduct of authorized intelligence operations.

We may disclose health information to make medical suitability determinations for foreign service.

Correctional Facilities: If you are an inmate of a correctional institution or under the custody of a law enforcement official, we may release your health information to the correctional institution or law enforcement official. We may release your health information for your health and safety, for the health and safety of others, or for the safety and security of the correctional institution.

Workers' Compensation: We may disclose your health information as required by applicable workers' compensation and similar laws.

Health Plan: When MedStar Health operates as a health plan, we will not use or disclose your genetic information for underwriting purposes.

Your Written Authorization: Other uses and disclosures of your health information not covered by this Notice, or the laws that govern us, will be made only with your written authorization. These include the sale of your health information, use of your health information for marketing purposes and certain disclosures of psychotherapy notes. You may revoke your authorization in writing at any time, and we will discontinue future uses and disclosures of your health information for the reasons covered by your authorization. We are unable to take back any disclosures that were already made with your authorization, and we are required to retain the records of the care that we provided to you.

Your Privacy Rights Regarding Your Health Information

Right to Obtain a Copy of This Notice of Privacy Practices

We will post a copy of our current Notice in our facilities and on our website, [MedStarHealth.org](https://www.MedStarHealth.org). A copy of our current Notice will be available at our registration areas or upon request. To request a copy of our current Notice of Privacy Practices, please call **410-772-6606**.

Right to See and Copy Your Health Record

You have the right to look at and receive a copy of your health record or your billing record. To do so, please contact the facility where you received treatment or the privacy office at MedStar Health. You may be required to make your request in writing.

You may request an electronic copy of this information, and we will provide access in the electronic form and format requested if it is readily reproducible in the requested format. If not, we will discuss the issue with you and provide a copy in a readable electronic form and format upon which we mutually agree, depending on the information and our capabilities at the time of the request. You may also request that we send your health information directly to a person you designate if your written request is signed, in writing, and clearly identifies both the person designated and an address to send the requested information.

If you would like a copy of your health record, a fee may be charged for the cost of copying or mailing your record (and the electronic media if the request is to provide the information on portable electronic media), as permitted by law. We will provide a copy of your health record usually within 30 days. In certain situations, we may deny your request. If we do, we will tell you, in writing, our reasons for the denial and explain your right to have the denial reviewed.

Right to Update Your Health Record

If you believe that a piece of important information is missing from your health record, you have the right to request that we add an amendment to your record. Your request must be in writing, and it must contain the reason for your request. To submit your request, please contact the facility where you received treatment or the privacy office at MedStar Health. We will make every effort to fulfill your request usually within 60 days. We may deny your request to amend your record if the information being amended was not created by us, if we believe that the information is already accurate and complete, or if the information is not contained in records that you would be permitted by law to see and copy. If we deny your request, you will be notified in writing usually within 60 days. Even if we accept your amendment, we will not delete any information already in your records.

Right to Get a List of the Disclosures We Have Made

You have the right to request a list of the disclosures that we have made of your health information. This list is not required to include disclosures made for treatment, payment and healthcare operations, and certain other disclosure exceptions. Your request must be in writing and indicate in what form you want the list (for example, on paper or electronically). To request a list of disclosures, please contact the facility where you received treatment or the privacy office at MedStar Health. The first list you request in a 12-month period is free. For additional lists, we may charge a fee, as permitted by law.

Right to Request a Restriction on Certain Uses or Disclosures

You have a right to request a restriction on how we use and disclose your medical information for treatment, payment and healthcare operations, and to certain family members or friends identified by you who are involved in your care or the payment of your care. We are not required to agree to your request, and will notify you if we are unable to agree. Your request must be in writing and it must (1) describe what information you want to limit; (2) whether you want to limit our use, disclosure or both; and (3) to whom you want the limits to apply.

In some instances, you may choose to pay for a healthcare item or service out of pocket rather than submit a claim to your insurance company. You may request that we not submit your medical information to a health plan or your insurance company if you, or someone on your behalf, pays for the treatment or service out of pocket in full. To request this restriction, you must make your request in writing prior to the treatment or service. In your request, you must tell us (1) what information you want to restrict and (2) to what health plan the restriction applies.

Right to Breach Notification

You have the right under HIPAA, or as required by law, to be notified if there is a breach of your unsecured medical information. If requested, this notification may be provided to you electronically.

Right to Choose a Representative

You have the right to choose someone to act on your behalf. If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information. We will make efforts to verify that the person you designate has this authority and can act for you before we take any action.

Right to Choose How You Receive Your Health Information

You have the right to request that we communicate with you in a certain way, such as by mail or fax, or at a certain location, such as a home address or post office box. We will try to honor your request if we reasonably can. Your request must be in writing, and it must specify how or where you wish to be contacted. To submit a request, please contact the facility where you received treatment or the privacy office at MedStar Health.

Contact Person

If you believe your privacy rights have been violated, you may call or file a complaint in writing with the MedStar Health Privacy Office or the Department of Health and Human Services (please reference the contact information below). We will take no retaliatory action against you if you file a complaint about our privacy practices.

Privacy Officer - MedStar Health Inc.
10980 Grantchester Way, Columbia, MD 21044
410-772-6606 PHONE
privacyofficer@medstar.net

U.S. Department of Health and Human Services Office for Civil Rights
200 Independence Ave., S.W., Washington, DC 20201
877-696-6775 TOLL FREE
[HHS.gov/OCR/Privacy/HIPAA/Complaints](https://www.hhs.gov/OCR/Privacy/HIPAA/Complaints)

If you have questions about this Notice or would like to exercise your privacy rights, please contact the facility where you received treatment or the MedStar Privacy Office.

Changes to this Notice of Privacy Practices

We reserve the right to change this Notice. We reserve the right to make the revised Notice effective for medical information we already have about you, as well as any information we receive in the future. We will post a copy of the current Notice in each MedStar Health facility and on our website. In addition, each time you register at, or are admitted to, the hospital for treatment or healthcare services as an inpatient or outpatient, we will offer you a copy of our current Notice in effect.

El Aviso sobre Prácticas de Privacidad está disponible en español.
개인 정보 보호 정책 관행의 공지 사항 한글로 사용할 수 있습니다.
تعليمات الخصوصية متوفرة باللغة العربية.
通知隱私做法是可以在简体中文。

Các thông báo về việc bảo mật Thực tiễn hiện có sẵn tại Việt Nam
Уведомление о конфиденциальности доступна на русском языке.

Footnote: MedStar Health Inc., located in Columbia, Maryland, is a nonprofit, community-based healthcare organization serving Maryland and the Washington, D.C., region. The health system is made up of a number of distinguished healthcare providers and other diversified healthcare entities. While these entities operate independently of one another and as separate employers, they also work toward a common mission and values. The mission of MedStar is to serve our patients, those who care for them and our communities, and our vision is to be the trusted leader in caring for people and advancing health. In working to achieve this goal, it is the responsibility of each MedStar entity to enforce its privacy policies and to take appropriate disciplinary or other actions for employee violations. Please note that for purposes of this Notice of Privacy Practices, the MedStar Health parent company and all of its subsidiaries will be referred to collectively as "MedStar Health." For privacy purposes only, MedStar Health is organized as an Affiliated Covered Entity, as described in 45 CFR §164.504(d)(1); legally separate entities that are affiliated may designate themselves as a single covered entity.

MedStar Health complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex.

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 **877-772-6505**。

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le **877-772-6505**.

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. **877-772-6505** 번으로 전화해 주십시오.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **877-772-6505**.

The Office of Health Care Ombudsman and Bill of Rights

The Health Care Ombudsman Program is a District of Columbia Government program that provides assistance and advice to you in receiving health care from your MCO. The Health Care Ombudsman can provide the following services:

Explain the health care you have a right to receive;

- Respond to your questions and concerns about your health care;
- Help you understand your rights and responsibilities as an Enrollee in an MCO;
- Provide assistance in obtaining the medical necessary services that you need;
- Answer questions and concerns you may have about the quality of your health care;
- Help you resolve problems with your doctor or other health care provider;
- Provide assistance in resolving complaints and problems with your MCO;
- Assist with appeal processes; and
- Provide assistance in filing a Fair Hearing Request for you.

To reach the Health Care Ombudsman, please call **202-724-7491** or **1-877-685-6391** (Toll Free). The Health Care Ombudsman does not make decisions in grievances, appeals or Fair Hearings. The Office of Health Care Ombudsman & Bill of Rights is located at:

One Judiciary Square
441 4th Street, NW
Suite 900 South
Washington, DC 20001
Phone: **202-724-7491**
Fax: **202-442-6724**
Toll Free Number: **877-685-6391**
Email: healthcareombudsman@dc.gov

MEDICARE PART D NOTICE FOR ENROLLEES WITH BOTH MEDICARE AND MEDICAID

If you get Medicare and Medicaid at the same time you will get your medicines from the Medicare Part D Program.

MedStar Family Choice - DC will only cover your medicines for:

- Formulary over the counter medications, vitamins, & minerals as prescribed by your doctor.

If you have any questions about your medicines, please call MedStar Family Choice - DC Enrollee Services at **888-404-3549**. If you have questions about Medicare Part D, you can also call Medicare at **800-MEDICARE (800-633-4227)** or visit [Medicare.gov website](https://www.Medicare.gov).

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DC Medicaid HealthCheck Periodicity Schedule

Based on Recommendations from Preventive Pediatric Health Care
from Bright Futures/American Academy of Pediatrics (AAP)



The DC HealthCheck Periodicity Schedule follows AAP health recommendations in consultation with the local medical community. The recommendations are for the care of children who have no manifestations of any important health problems. Additional visit or inter-periodic screens may become necessary if circumstances suggest the need for more screens, i.e., medical conditions, referral by parent, Head Start, DC Public Schools, early intervention services and programs. Developmental, psychosocial, and chronic disease issues may require frequent counseling and treatment visits separate from preventive care visits. Additional visits also may become necessary if circumstances suggest variations from normal. If a child comes under care for the first time, or if any items are not done at the suggested age, the schedule should be brought up to date as soon as possible. The recommendations in this statement do not indicate an exclusive course of treatment or standard of medical care. Variations, taking into account individual circumstances, may be appropriate.

KEY: * = to be performed * = risk assessment to be performed with appropriate action to follow, if positive ← . . . → = range during which a service may be provided

CPT CODE	INFANCY			EARLY CHILDHOOD					MIDDLE CHILDHOOD					ADOLESCENCE																						
	PRENATAL ²	NEWBORN ¹ 3-5 d ^a / By 1 mo	By 1 mo	2 mo	4 mo	6 mo	9 mo	12 mo	15 mo	18 mo	24 mo	30 mo	3 y	4 y	5 y	6 y	7 y	8 y	9 y	10 y	11 y	12 y	13 y	14 y	15 y	16 y	17 y	18 y	19 y	20 y	21 y					
PHYSICAL EXAMINATION³		*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*					
MEASUREMENTS																																				
Length/Weight and Weight																																				
Head Circumference																																				
Weight for Length																																				
Body Mass Index ⁴																																				
Blood Pressure ⁵		*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*			
ANTICIPATORY GUIDANCE																																				
ORAL HEALTH																																				
Oral Health Assessment ⁶																																				
Fluoride Varnish ⁶																																				
SENSORY SCREENINGS																																				
Vision ¹¹		*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*		
Hearing			* ¹²																																	
DEVELOPMENTAL/BEHAVIORAL HEALTH																																				
Developmental Surveillance																																				
Developmental Screening ¹⁵																																				
Autism Spectrum Disorder Screening ¹⁶																																				
Autism Spectrum Disorder Screening ¹⁶																																				
Psychosocial/Behavioral Surveillance																																				
Psychosocial/Behavioral Screening ¹⁷																																				
Tobacco, Alcohol, or Drug Use Screening ¹⁸																																				
Behavioral Health Screening ¹⁹																																				
Maternal Depression Screening ²⁰																																				
PROCEDURES²¹																																				
Immunization ²²		*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	
Newborn Screening ²³		*																																		
Lead ²⁴																																				
Arenas ²⁶																																				
Dyslipidemia ²⁷																																				
Tuberculosis ²⁸																																				
Cervical Dysplasia ²⁹																																				
Sexually Transmitted Infections ³⁰																																				
HIV ³¹																																				



**By their
SECOND BIRTHDAY,
most children:**

- Walk alone
- Jump
- Pull toys behind them while walking
- Carry toys while walking
- Begin to run
- Kick a ball
- Climb on and off furniture
- Walk up and down stairs while holding onto support
- Scribble with crayon
- Build tower of 5 blocks or more
- Recognize names of familiar people, objects and body parts
- Use 2 words together
- Follow simple instructions (1 or 2 steps)
- Begin to sort objects by shapes and colors
- Begin to play make-believe
- Imitate behavior of others
- Want to do things for themselves¹

2



**By the end of their
THIRD MONTH,
most babies:**

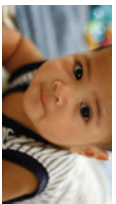
- Lift head and chest when lying on stomach
- Hold upper body up with arms when lying on stomach
- Kick legs
- Open and shut hands
- Bring hands to mouth
- Grab and shake toys
- Watch moving objects
- Watch faces closely
- Recognize familiar objects and people
- Start using hands and eyes together
- Begin to babble and to imitate some sounds
- Smile when they hear their parents' voices
- Enjoy playing with other people
- May cry when playing stops¹



**By their
THIRD BIRTHDAY,
most children:**

- Can do some things for themselves (like putting on clothes and feeding self)
- Enjoy playing imaginatively and with other kids
- Tell stories with 2 to 3 sentences
- Can be understood more than half of the time
- Can name a friend
- Know whether they are a boy or girl
- Build a tower of 6 to 8 cubes
- Throw a ball overhand
- Ride a tricycle
- Walk up stairs alternating feet
- Balance on 1 foot for 1 second
- Copy a circle
- Draw a person with 2 body parts (head and one other part)
- Are toilet trained during the daytime²

3



**By the end of their
SEVENTH MONTH,
most babies:**

- Roll over stomach to back and back to stomach
- Sit up
- Reach for objects
- Move objects from one hand to the other
- Support weight on legs when held up
- See in color
- See at a distance
- Use voice to express feelings
- Respond to own name
- Babble
- Understand emotions by tone of voice
- Explore objects with hands and mouth
- Struggle to get objects that are out of reach
- Enjoy playing peek-a-hoo
- Show an interest in mirrors³



**By their
FOURTH BIRTHDAY,
most children:**

- Play with other children
- Can follow family rules
- Play with favorite toys
- Listen to stories
- Engage in fantasy play
- Know first and last name
- Sing a song or say a poem from memory
- Know what to do if cold, tired, or hungry
- Can be understood
- Name 4 colors
- Play board/gard games
- Draw a person with 3 parts
- Hop on one foot
- Balance on 1 foot for 2 seconds
- Build a tower of 8 blocks
- Copy a cross
- Can eat by themselves
- Brush their teeth
- Can dress self

4



**By their
FIRST BIRTHDAY,
most babies:**

- Crawl
- Pull self up to stand
- Walk holding onto furniture
- May walk few steps without help
- Grasp with fingers
- Say "dada" and "mama"
- Try to imitate words
- Respond to "no" and simple requests
- Use simple gestures, such as shaking head "no" and waving bye-bye
- Explore objects
- Begin to use objects (drinking from cup, brushing hair)
- Find hidden objects easily⁴



**By their
FIFTH BIRTHDAY,
most children:**

- Are more likely to agree to rules
- Like to sing, dance, and act
- Able to distinguish fantasy from reality
- Recall part of a story
- Speak sentences of more than 5 words
- Know their name and address
- Can count 10 or more objects
- Correctly name at least 4 colors
- Stand on one foot for ten seconds or longer
- Hop, swing, and climb
- Copy a triangle and other geometric patterns
- Print some letters of the alphabet
- Use a fork and spoon
- Dress and undress without assistance²

5

Definitions	
Advance Directive	A written, legal paper that you sign that lets others know what health care you want, or do not want, if you are very sick or hurt and cannot speak for yourself.
Advocate	A person who helps you get the health care and other Services you need.
Appeal	An Appeal is a special kind of complaint you make if you disagree with a decision MedStar Family Choice - DC makes to deny a request for health care services or payment for services you already received. You may also make this kind of complaint if you disagree with a decision to stop services that you are receiving.
Appointment	A certain time and day you and your doctor set aside to meet about your health care needs.
Care Manager	Someone who works for MedStar Family Choice - DC who will help you get the care, support and information you need to stay healthy.
Check-Up	See Screening
Contraception	Supplies related to birth control
Covered Services	Health care services that MedStar Family Choice - DC will pay for when completed by a provider.
Detoxification	Getting rid of harmful substances from the body such as drugs and alcohol.
Development	The way in which your child grows.
Disease Management Program	A program to help people with chronic illnesses or Special Health Care Needs such as asthma, high blood pressure or mental illness, get the care and services they need.
Durable Medical Equipment (DME)	Special medical equipment that your doctor may ask or tell you to use in your home.
Emergency Care	Care you need right away for a serious, sudden, sometimes life-threatening condition.
Enrollee	The person who gets health care through MedStar Family Choice - DC's provider network.
Enrollee Identification (ID) Card	The card that lets your doctors, hospitals, pharmacies, and others know that you are an Enrollee of MedStar Family Choice - DC.

Definitions	
EPSDT Early, Periodic Screening, Diagnosis and Treatment Program	Services that provide a way for children ages birth up to 21 to get medical exams, check-ups, follow-up treatment, and special care they need. Also known as <i>Health Check Program</i> .
Fair Hearing	If you file a grievance you can ask for a hearing with DC's Office of Administrative Hearings.
Family Planning	Services such as pregnancy tests, birth control, testing and treatment for sexually transmitted infections, and HIV/AIDs testing and counseling.
Family and General Practice Doctor	A doctor that can treat the whole family.
Grievance	If you are unhappy with the care you get or the health care services MedStar Family Choice - DC gives you, you can call Enrollee Services to file a grievance.
Handbook	This book that gives you information about MedStar Family Choice - DC and our services.
Health Check Program	See EPSDT
Hearing Impaired	If you cannot hear well, or if you are deaf.
IDEA	Individuals with Disabilities Education Act; a federal law that gives services to children with developmental delays and special health care needs.
Immunization	Shot or vaccination.
Internal Medicine Doctor	Doctor for adults and children over 14 years old.
Interpretation/ Translation Services	Help from MedStar Family Choice - DC when you need to talk to someone who speaks your language, or you need help talking with your doctor or hospital.
Managed Care Organization (MCO)	A company that is paid by the District of Columbia to give you health care and health services.
Maternity	The time when a woman is pregnant and shortly after childbirth.

Definitions	
Mental Health	How a person thinks, feels and acts in different situations.
Network Providers	Doctors, nurses, dentists, and other people who take care of your health and are a part of MedStar Family Choice - DC.
Non-Covered Services	Health care that MedStar Family Choice - DC does not pay for when completed by a provider.
OB/GYN	Obstetrician/Gynecologist; a doctor who is trained to take care of a woman's health, including when she is pregnant.
Out-of-Network Providers	Doctors, nurses, dentists, and other people who take care of your health, but are not a part of MedStar Family Choice - DC.
Pediatrician	A children's doctor.
Pharmacy	Where you pick-up your medicine.
Physician Incentive Plan	Tells you if your doctor has any special arrangements with MedStar Family Choice - DC.
Post-Partum Care	Health care for a woman after she has her baby.
Prenatal Care	Care that is given to a pregnant woman the entire time she is pregnant.
Prescription	Medicine that your doctor orders for you; you must take it to the pharmacy to pick-up the medicine.
Preventive Counseling	When you want to talk to someone about ways to help you stay healthy or keep you from getting sick or hurt.
Primary Care Provider (PCP)	The doctor that takes care of you most of the time.
Prior Authorization	Written permission from MedStar Family Choice - DC to get health care or treatment.
Provider Directory	A list of all providers who are part of the MedStar Family Choice - DC.
Providers	Doctors, nurses, dentists, and other people who take care of your health.
Referral	When your main doctor gives you a written note that sends you to see a different doctor.

Definitions	
Routine Care	The regular care you get from your primary care provider or a doctor that your primary care provider sends you to. Routine Care can be a check-up, physical, health screen and regular care for health problems like diabetes, asthma and hypertension.
Screening	A test that your doctor or other health care provider may do to see if you are healthy. This could be a hearing test, vision test, or a test to see if your child is developing normally.
Self-Referral Services	Certain services you can get without getting a written note or referral from your main doctor.
Services	The care you get from your doctor or other health care provider.
Special Health Care Needs	Children and adults who need health care and other special services that are more than or different from what other children and adults need.
Specialist	A doctor who is trained to give a special kind of care like an ear, nose and throat doctor or a foot doctor.
Specialty Care	Health care provided by doctors or nurses trained to give a specific kind of health care.
Sterilization Procedures	A surgery you can have if you do not want children in the future.
Transportation Services	Help from MedStar Family Choice - DC to get to your appointment. The type of transportation you get depends on your medical needs.
Treatment	The care you get from your doctor.
Urgent Care	Care you need within 24 hours, but not right away.
Visually Impaired	If you cannot see well or you are blind.

MedStarFamilyChoice.com



**MedStar Family
Choice**

DISTRICT OF COLUMBIA

Enrollee Services

3007 Tilden St., N.W., Pod 3N
Washington, DC 20008
888-404-3549 (toll free)

20-MFCDC-0037



WE ARE WASHINGTON GOVERNMENT OF THE
DISTRICT OF COLUMBIA
DC MURIEL BOWSER, MAYOR

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