

Member Guidebook

2009



Numbers You Should Know

Call Univera Community Health's Customer Service:

- If your address or telephone number change
- If you would like an updated provider directory

Call 1 (716) 847-1433 or toll free 1 (800) 683-3781. You can also call the number on your Identification Card to reach our Customer Service Department.

Birth & BeyondSM Program or Case Management: 1 (800) 509-5290

Health Coach: 1 (800) 348-9786

Learn to Read: 1 (716) 876-8991

NYS Smokers' Quitline:

1 (866) 697-8487

24-Hour WNY Poison Control

Center: 1 (800) 222-1222

Crisis Services: 1 (716) 834-3131

Kids Helpline: 1 (716) 834-1144,
1 (877) KIDS-400

Chautauqua County Crisis

Services Hotline: 1 (800) 724-0461

Language Line

If you need a translator, ask a Customer Service representative to connect you to the Language Line. This service is available in 140 languages.

Univera Community Health's Customer Service Hours

Mondays–Thursdays, 8 a.m.–5 p.m.

Fridays, 9 a.m.–5 p.m.

 You can also find us online at univeracommunityhealth.org.

Números de teléfono importantes Lláme al Departamento de Servicio al Cliente de Univera Community Health para:

- Cambio de dirección o teléfono
- Directorio actualizado de proveedores

Lláme 1 (716) 847-1433 o toll free 1 (800) 683-3781

Programa Birth & BeyondSM o Programas de Administración de Casos: 1 (800) 509-5290

Entrenador de salud:
1 (800) 348-9786

Aprenda a leer: 1 (716) 876-8991

Línea para dejar de fumar:
1 (866) 697-8487

Envenene el Centro de Control:
1 (800) 222-1222

La Crisis Atención a: 1 (716) 834-3131

Bromea Teléfono de la esperanza:
1 (716) 834-1144, 1 (877) KIDS-400

**La Crisis del Condado de Chautauqua
Atienda a Línea Directa:**

1 (800) 724-0461

Línea de idiomas

Si necesita un traductor, solicite que un representante del Servicio al cliente lo comunique con la Línea de idiomas. Disponible en 140 idiomas.

Horarios de Servicio al cliente de Univera Community Health

De lunes a jueves, de 8 a.m. a 5 p.m.

Viernes, de 9 a.m. a 5 p.m.

When you visit a specialist ...

Please ask your specialist to send a report to your regular doctor. This will help your doctor manage your health care.

SAVE MONEY

Generic drugs are safe, effective and approved by the FDA. They also cost you less. Learn more about generic drugs at go.univerahealthcare.com/generics.

Univera Community Health is sponsored by Univera Healthcare, Kaleida Health and the Erie County Medical Center. The member newsletter is published for members of Child Health Plus, PlusMed & Family Health Plus.

GRIEVANCE PROCESS CHANGES

Your health plan will no longer use a panel to review level two grievances. A grievance is a complaint you have about your health plan. When you are not happy with the way your grievance was resolved, you have the right to submit a level two grievance.

From now on, level two grievances will be decided by an individual instead of a panel. The individual will be at a higher level than those who made the first decision about your grievance. If your level two grievance deals with a clinical matter, it will be reviewed by a health care professional.

To file a level two grievance, call Customer Service at the phone number listed in your Member Handbook or on the back of your member ID card.

WE EMPHASIZE QUALITY FOR YOU

It is our mission and philosophy to provide access to affordable, high-quality health benefits and related services to as many people as possible, while meeting or exceeding their expectations. That is why we've created a Quality Improvement Program.

The focus of the program is to assess and improve, on an ongoing basis, the quality of care and services provided to our members in an effort to improve the overall health of those members.

You can find information about our Quality Improvement Program and the progress made toward meeting its goals by visiting our Web site or calling the Customer Service phone number listed on your member ID card.

TRAVELING THIS YEAR OR THINKING ABOUT COLLEGE?

Don't forget to bring a copy of your member ID card. Your health plan can help you and your family obtain emergency care when needed.

You can request a duplicate ID card by going to the Web site or calling the phone number listed on your member ID card.

CARING FOR YOU

Our plans review health care services to see if they are medically necessary. This process is called a utilization review.

Reviews are based solely on the need for care and service and are conducted by licensed health care professionals and physicians.

We do not compensate, reward or provide financial incentives to decision-makers for denying coverage or services.

Merged: Sisters of Charity Hospital and St. Joseph Hospital

As of April 1, 2009, St. Joseph Hospital merged with Sisters of Charity Hospital and is now known as Sisters of Charity Hospital, St. Joseph Campus. If you receive services at Sisters of Charity Hospital, St. Joseph, any Explanation of Benefits (EOB) form that you receive from us will reflect the new name. If you have questions about your hospital bill after April 1, please call Catholic Health's Customer Service Department at 1 (716) 601-3600.

ARE YOU PREGNANT?

It is important to get care as soon as you think you are going to have a baby. Doctors recommend 12 to 14 visits during your pregnancy. These visits are called prenatal visits. Usually, your first prenatal visit will take place when you are between six and eight weeks pregnant.

At your first prenatal visit, you:

- Will be asked about your health and your family's health history.
- Will be given a complete physical examination.
- Will be asked about your medications.
- Can ask your doctor questions about having a baby.
- Will arrange to have tests (screenings) to check your blood and urine.

The first three months of pregnancy is called your "first trimester." Between eight and 28 weeks of pregnancy, you should see your doctor at least every four weeks. From 28 to 36 weeks (called the third trimester), your doctor should see you at least every two weeks.

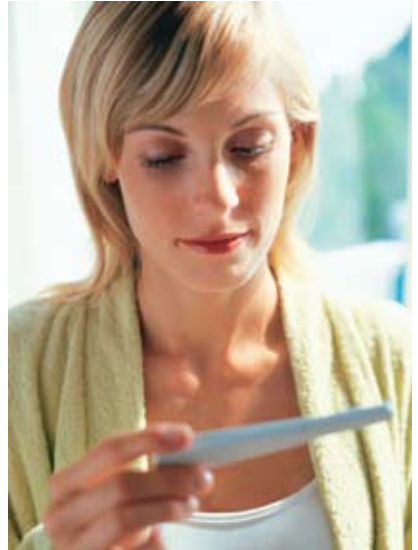
It's normal to get tested for these conditions when you're pregnant:

- HBV (hepatitis B virus).
- HIV (human immunodeficiency virus).
- Chlamydia and other sexually transmitted diseases that might affect your baby.

The doctor will check your blood pressure, height and weight. Your baby's heart rate will also be tested.

Your doctor will also talk to you about what to do during your pregnancy:

- Stop smoking and using alcohol.
- Use your seat belt.
- Eat a healthy diet, take vitamins and don't gain too much weight.
- Get a car seat to bring your baby home from the hospital.



Remember: Take care of yourself, even after your baby is born. Visit your doctor between three and eight weeks (21 to 56 days) after giving birth. If you had a cesarean delivery, you may see your doctor sooner, but this doesn't take the place of a regular visit. Your doctor will examine you, and you can ask questions.

¿Habla español?

Pulse en las páginas de nuestro español sitio Web al univeracommunityhealth.org/espanol/index.html. ¡Un motivo más para contar con nosotros cuando precise todo tipo de información sobre su salud!

A Healthy Mouth Is Good for You

A healthy mouth does not have cavities, bone disease and harmful bacteria. To keep your teeth and mouth in good shape, brush regularly with fluoride toothpaste, floss and eat healthy foods.

You should also see your dentist at least twice a year.* The dentist will:

- **FIX** an unhealthy mouth to make it healthy.
- **HELP KEEP** your mouth healthy.

A visit to the dentist might include a professional cleaning, fluoride treatment and X-rays. These services help you avoid problems in your mouth. When you visit your dentist, he or she can also teach you how to take care of your teeth.

**Your dentist is the only person who can tell you how often you should go to the dentist.*

External Appeals Are Available

Insured health plan members in New York state have the right to request an independent external review when health care services are denied by an insurer as not medically necessary, or as experimental or investigational.

To request an external appeal, members must complete a New York State External Appeal Application for Health Care Consumers and send it to the New York State Insurance Department.

Members will receive an application along with the notice of final adverse determination when their internal appeal has been denied. To get additional information about this process, you can refer to your Member Handbook or the New York State Insurance Department Web site at ins.state.ny.us.



medical policies

Each month, we revise medical policies for the care of you and your family.

Be aware that these medical policies are written for doctors and include medical and technical language. That's why it is important for you to review these policies with your doctor.

You may call the phone number on your member ID card and ask for a copy of a policy.

Well-Child Visits Keep Kids Healthy

Get in the habit of bringing your children to their doctor for routine checkups, even when they are well. Well-child visits give you and your son or daughter the opportunity to get to know the doctor, who can monitor your child’s development and identify potential problems early on.

Your child’s doctor will also advise you on injury prevention and healthy lifestyle issues appropriate for your child, including nutrition, exercise, dental health, tobacco use, alcohol and substance abuse and prevention of sexually transmitted diseases. Please note that a school or sports physical does not qualify as a well-child visit.

Working with our participating doctors, we’ve developed guidelines for preventive health recommendations for children, shown on this page.

CHP Coverage Tips

To help make sure that your children’s Child Health Plus (CHP) coverage stays effective, please remember:

- **Premium payment.** If you pay a premium for CHP, you must pay the premium 30 days before the coverage date.
- **Yearly renewal.** You need to renew your coverage one year after your CHP coverage becomes effective.



RECOMMENDED IMMUNIZATION SCHEDULE

Vaccines children need												
1 month	2 months	4 months	6 months	12 months	15 months	18 months	19–23 months	2–3 years	4–6 years	7–10 years	11–12 years	13–18 years
HepB*	HepB**	HepB					HepB series					
Rota	Rota	Rota										
DTaP	DTaP	DTaP		DTaP					DTaP		Tdap	Tdap
Hib	Hib	Hib**		Hib			Hib				HPV	HPV
IPV	IPV			IPV					IPV		MCV4	MCV4***
				MMR					MMR		MMR	
				Var					Var		Var	
				Flu (yearly)							Flu (yearly)	
	PCV	PCV	PCV	PCV					PCV		PPV	
									HepA series			
Vaccines below this line are for certain children. Ask your doctor.									MPSV4			MCV4

Compiled with information from the U.S. Centers for Disease Control and Prevention

RECOMMENDED SCHEDULE FOR PREVENTIVE HEALTH EXAMINATIONS

Visit Schedule	Tests and Screenings
<ul style="list-style-type: none"> ■ 3 to 5 days ■ 1 month ■ 2 months ■ 4 months ■ 6 months ■ 9 months 	<ul style="list-style-type: none"> ■ Newborn screen ■ Height and weight measurement ■ Feeding and nutrition assessment ■ Development/behavior assessment ■ Hearing screen ■ Screen for possible lead exposure
<ul style="list-style-type: none"> ■ 1 year ■ 15 months ■ 18 months ■ 2 years ■ 30 months ■ 36 months ■ 4 years 	<ul style="list-style-type: none"> ■ Height and weight measurement ■ Blood pressure measurement beginning at age 3 ■ Development/behavior school assessment ■ Vision screen ■ Hearing screen at age 4 ■ Immunizations ■ Blood lead level at ages 1 and 2 years
<ul style="list-style-type: none"> ■ Every year, from 5 to 10 years 	<ul style="list-style-type: none"> ■ Risk assessment: physical exam and history ■ Height and weight measurement ■ Blood pressure measurement ■ Development/behavior school assessment ■ Hearing screen at age 5 ■ Immunizations ■ Tobacco-use screen
<ul style="list-style-type: none"> ■ Every year, from 11 to 18 years 	<ul style="list-style-type: none"> ■ Risk assessment: physical exam and history ■ Height and weight measurement ■ Blood pressure measurement ■ Development/behavior school assessment ■ Immunizations ■ Tobacco-use screen



Your health plan gathers and approves wellness recommendations from a number of national sources, including the U.S. Preventive Services Task Force, the American Academy of Physicians and the American Academy of Family Physicians. Call the phone number on your member ID card if you have a question about coverage.

PROTECTING YOUR HEALTH INFORMATION

Protecting the privacy of your family's health information is important to us.

Regulations enacted under the Health Insurance Portability and Accountability Act (HIPAA) tightened restrictions regarding our ability to release our members' protected health information to anyone other than that specific individual, without prior written authorization.

Without a signed authorization on file with the health plan:

- Spouses cannot call and check on referrals.
- A son or daughter cannot receive information about his or her elderly parent.

- Parents with dependent children age 18 or older cannot get information about their child's claims.

Parents with children younger than 18 can get their child's health information, although other privacy laws protect some specific medical information for children.

To ask for the required authorization form and other related forms, visit our Web site or call the Customer Service phone number listed on your member ID card.



The Power of Preventive Care

We're here to help you stay healthy. Your doctor visits are covered by your health insurance.

What can you do to stay healthy and prevent disease? You can practice healthy behaviors, take medicines as prescribed and get certain screening tests. When you go for your next checkup, talk to your doctor about how you can stay healthy no matter what your age.

You should visit your doctor for a physical exam on this schedule:

Age	Visit Schedule
■ 21 to 40 years old	■ every five years
■ 41 to 50 years old	■ every three years
■ 51 to 59 years old	■ every two years
■ 60 years and older	■ every one to two years

You can get details about the medical tests you should have as well as other health and wellness information from your health plan or your doctor. Topics include:

- **Height, weight and body mass index (BMI).**
- **Screening tests**, including cholesterol, blood pressure, colorectal cancer, depression, Pap smears, mammograms, chlamydia, osteoporosis, prostate cancer screening and abdominal aortic aneurysm screening.
- **Counseling** about diet and exercise, tobacco and alcohol use, injury prevention, oral hygiene and regular dental visits, advance care planning, adequate calcium intake and importance of taking folate during women's childbearing years.
- **Immunizations for adults**, including tetanus/diphtheria, influenza (flu), pneumococcal (pneumonia), measles/mumps/rubella (MMR) and chickenpox (varicella).



If you have questions about these guidelines, you should ask your doctor or call the phone number shown on your member ID card.



We Speak Your Language

Your health plan offers a telephone-based service that immediately translates members' questions and medical providers' answers into more than 140 languages.

Call the phone number on your member ID card for more information.

GET THE CARE YOU NEED

As a health plan member, you can call your doctor for urgent medical care day or night, seven days a week.

AFTER OFFICE HOURS

If you get sick or hurt and need care after regular office hours, call your doctor's office first, unless it is an emergency medical condition. Your doctor knows your medical history and is the best person to help you. Your doctor may use an answering service or another doctor who is on call to make sure you can get medical care when you need it.

Your doctor or the on-call doctor will decide if you need treatment right away or if you can wait for regular office hours. If you do need care, your doctor may see you at his or her office, send you to his or her on-call doctor, send you to an urgent or after-hours care center or send you to an emergency room.

Examples of problems that might need urgent care are:

- A child with an earache who wakes up in the middle of the night and won't stop crying.
- A sprained ankle.
- A bad splinter that you can't remove.

WHEN IT'S AN EMERGENCY

In an emergency medical situation, you should go directly to the nearest emergency room or call 911 for help. In New York state, an emergency means a medical or behavioral condition that comes on suddenly with pain or other symptoms. This would make a person with an average knowledge of health fear that someone would suffer serious harm to body parts or functions without care right away.

Examples of an emergency are:

- A heart attack or severe chest pain.
- Bleeding that won't stop.
- A bad burn.

- Broken bones.
- Trouble breathing, convulsions or loss of consciousness.
- When you feel you might hurt yourself or others.
- If you are pregnant and have signs like pain, bleeding, upset stomach, minor cuts and bruises, or sprained muscles.

Examples of non-emergencies are:

- Colds.
- A sore throat.
- An upset stomach.
- Minor cuts and bruises.
- Sprained muscles.

If you believe you have an emergency, call 911 or go to the nearest hospital's emergency room. Please also call your doctor as soon as you can. If you're not sure if it is an emergency, call your doctor. Tell the person on the phone what is happening. Your doctor or the person covering for him or her will do one of the following:

- Tell you what to do at home.
- Tell you if you should go to the doctor's office.
- Tell you if you should go to the nearest emergency room.

If you are away from home or out of the area when you have an emergency:

- Go to the nearest emergency room.
- Call your doctor as soon as you can (within 48 hours if possible).

REMEMBER

- The emergency room is only for emergencies—your doctor can help you decide the type of care you need in most other cases.
- The emergency room should not be used for problems like the flu, sore throats or ear infections.
- If you have questions, call your doctor.

Your member rights and responsibilities

As a member of our health plan, you have certain rights and responsibilities that are outlined below.

You have the right to:

- Receive all the benefits to which you are entitled under your contract.
- Receive quality health care from your doctor(s) as quickly as is necessary in their offices or other medical locations.
- Considerate, courteous and respectful care.
- Be treated with respect and recognition of your dignity and right to privacy.
- Information about services, staff, hours of operation and your benefits, including access to routine services, as well as after-hours and emergency services and members' rights and responsibilities.
- Participate in decision-making with your physician about your health care.
- Obtain complete, current information concerning a diagnosis, treatment and prognosis from a provider in terms that you can reasonably be expected to understand.
- Refuse treatment as allowed by law, and be informed by your physician of the medical consequences.
- Refuse to participate in research.
- Confidentiality of medical records and information, with the authority to approve or refuse the re-disclosure by us of such information, to the extent protected by law.
- Receive all information needed to give informed consent for any procedure or treatment.
- Access to your medical records as permitted by New York state law.
- Tell us about your concerns and complaints about the care and services provided by doctors and other providers, and have us look into and tell you what we found out.
- Be told honestly about what is the best and necessary care that you need without concern about cost and benefit coverage.
- Care and treatment without regard to age, race, color, sex or sexual orientation, religion, marital status, national origin, economic status or source of payment.
- Make complaints and suggest changes in benefits and services to staff, administration, and/or the New York State Insurance Department or Department of Health, without fear that it will change any part of your health care services.
- Formulate advance directives regarding your care. To obtain a Health Care Proxy form, please contact us.
- Call us for information about the names, important information and titles of providers who give you your care.
- All information about your health plan, its services and its providers and procedures.
- Make suggestions about the member rights and responsibilities.

You have the responsibility to:

Work with your doctor or health care provider to stay healthy or get better by way of the following:

- Tell your doctor or health care provider about any sickness you have had in the past and how you feel now.
- Listen to your doctor or health care provider.
- Call or go back to your primary care provider (PCP) if you do not get better, or ask for a second opinion.
- Treat health care staff with the respect you expect yourself.
- Tell us if you have problems with any health care staff by calling Customer Service.

- Keep your appointments. If you must cancel, call us as soon as you can.
- Use the emergency room only for emergencies.
- Call your PCP when you need medical care, even if it is after hours.
- Understand your health problems and work with your doctor on your treatment goals.

urgent care is convenient care

When a medical issue doesn't require an emergency room visit, or if you can't get in to see your physician, you can visit an urgent care center and get the care you need.

For a location near you in the Buffalo area, call the Lifetime Health Medical Group at 1 (716) 656-4040.

HIV AND AIDS: WHAT YOU NEED TO KNOW

HIV (human immunodeficiency virus) is a virus that makes it difficult for the body to fight infection and disease. AIDS (acquired immunodeficiency syndrome) is the last and most severe stage of the HIV infection.

Having HIV does not mean you have AIDS. There is no cure yet, but people who are being treated for HIV are living longer than before because some drugs slow the speed at which HIV infection leads to AIDS.

HIV is spread by:

- Sexual contact with an infected person.
- Sharing needles and/or syringes (for drug injection, piercing or tattooing) with someone who is infected.
- HIV-infected women to their babies.
- Exposure to HIV-infected blood products on the job (such as in health care).

The only way to know if you have HIV is to be tested. Testing is safe and easy. You can have a blood test or an oral test. An oral test doesn't use needles. Most clinics, health departments and doctors can do the test for HIV. The testing can be confidential or anonymous.

- **Confidential testing** requires that you give your name, and your results can be sent to your doctor.
- **Anonymous testing** means that you do not give your name and that there is no record of the test. If your test shows that you have HIV, you can choose to give your name at that time so that you can receive appropriate medical care.

For more information about HIV and AIDS, contact the New York State HIV/AIDS Hotline, toll free at 1 (800) 541-AIDS (2437) in English or 1 (800) 233-SIDA (7432) in Spanish.

HIV testing and treatment are especially important for pregnant women. It is much better to know your status early so that you can make important decisions about your health and the health of your baby.

WELCOME TO YOUR 2009 GUIDE

This guidebook is written to give health and member information to Plus Med, Family Health Plus and Child Health Plus members. However, if you are not feeling well, you should see your doctor. You should ask your doctor any questions that you might have. Write to us about this guidebook at:

Editor, *Member Guidebook*
Univera Community Health
205 Park Club Lane
Buffalo, NY 14221

Need to Find a Doctor?

Our Web site can help you. You'll find:

- His or her office hours, office locations and phone numbers.
- Whether offices are wheelchair accessible.
- The number of doctors and/or nurse practitioners in the office.
- Details about the doctor's board certification, medical school, residency, fellowship training and where he or she may teach.
- Our provider directories are updated every three months. If you would like the most recent directory, call Customer Service at the number on your member ID card.

Visit the Web site on your member ID card, or call the phone number listed on the card if you do not have Internet access.



if your address changes

For CHP members: Call Customer Service at the phone number listed on your member identification (ID) card.

For FHP and Medicaid members: Contact your local Department of Social Services (DSS).

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