SoonerCare

Member Handbook

4345 N. Lincoln Blvd., OKC | 800-987-7767 | okhca.org

numbers to know

For Emergencies |911

If you are not sure if you have an emergency, call your medical home.

SoonerCare Helpline | 800-987-7767 or 711 (TDD)

For questions concerning benefits, access to medical care and eligibility, call 8 a.m. to 5 p.m. Monday through Friday. Visually impaired and translation services are available.

SoonerCare Choice Provider List | 800-987-7767

A list of medical home providers may also be found at okhca.org/providers.

SoonerRide | 877-404-4500 or 711 (TDD)

SoonerRide arranges for non-emergency transportation for members who have no other way to get to medical and dental appointments. Available Monday through Saturday, 8 a.m. to 6 p.m.

Care Management | 877-252-6002 or 711 (TDD)

For members who have complex or unusual health care needs, call Monday through Friday 8 a.m. to 5 p.m.

Behavioral Health Helpine | 800-652-2010 or 711 (TDD)

For help finding a behavioral health provider, call Monday through Friday from 8 a.m. to 5 p.m. Please note this is not for emergencies. For emergencies, call 911.

SOONERCARE UPDATES

SoonerCare member ID card changes

You no longer need to show your SoonerCare ID card for appointments. However, you will need to know your ID card number to fill prescriptions.

If you are asked to show your ID card, you can print it from the member portal, if you applied online. You can print a SoonerCare ID card from the member portal at mysoonercare.org for each covered member in your household. If you applied through the Department of Human Services, they can print an ID card for you. Call the SoonerCare Helpline if you need assistance.

Cost-sharing copays

Cost-sharing does not apply to everyone. If you do have a copay, your cost-sharing copay caps are monthly. This means your out of pocket cost will be 5% of your household monthly income for copays. This is regardless of whether a copay is for your medical home services or prescriptions.

You will not pay any more copays for that month after the 5%.

Update email and mailing address

You can change usernames and passwords to your account online instead of calling the SoonerCare Helpline. If you enroll or renew online, you are required to have an active email address. Once you provide an active email address, you will start receiving helpful information via email. We will still send some member letters and information through the mail, so be sure you have a correct email and mailing address on your account. Update your information anytime by visiting mysoonercare.org.

After-hours locator

Don't forget, you now have a way to search for after-hours care providers using your mobile device! To find after-hours clinics, visit afterhoursok.com and use our locator tool.

SOONERQUIT

SoonerCare can help when you are ready to quit smoking. Smoking and other types of tobacco can cause major health problems.

SoonerCare provides all seven FDA-approved medications to help you quit. Nicotine gum, patches, lozenges, inhaler, nasal spray, Chantix and Zyban are all free with your coverage. Talk to your health care provider to see if one of these options will work for you.

The Oklahoma Tobacco Helpline offers free help to Oklahomans who are cigarette and cigar smokers; smokeless or spit tobacco users; and friends or family who want to offer support.

Call 1-800 QUIT NOW (800-784-8669) to receive the following resources:

- Free information on quitting tobacco.
- One-to-one telephone counseling with a Quit Coach to boost your chance for success in quitting.
- Referrals on local programs and services in your community to help you quit tobacco (dependent on availability).

Visit quitnow.net/oklahoma to register and receive services through the web without any phone calls.

WELCOME TO SOONERCARE CHOICE

What is it?

SoonerCare Choice is a program run by the Oklahoma Health Care Authority. Like other medical insurance, SoonerCare helps pay for your medical care. In some cases though, SoonerCare may not pay for all or any of your medical care. When you have questions, please call the SoonerCare Helpline at 800-987-7767 or 711 (TDD).

Insure Oklahoma and Family Planning are not part of SoonerCare Choice.

Who qualifies?

If you applied through online enrollment and selected your medical home, you are a SoonerCare Choice member.

If any of the following situations apply to you, you do not qualify for SoonerCare Choice and have limited SoonerCare benefits:

- in a health management organization, nursing home or special care center;
- in a home and community-based waiver program;
- receive Medicare; or
- in a subsidized adoption, tribal custody or state custody.

It is very important to keep your membership information current. Please respond to all letters and phone calls from the Oklahoma Department of Human Services and OHCA as soon as possible so your coverage does not end.

If you have questions or need help finding out if you are covered for a medical service, call the SoonerCare helpline at 800-987-7767. The helpline is open from 8 a.m. to 5 p.m., Monday through Friday.

important

Before SoonerCare can help pay for your medical care, the following three conditions must be met:

- The person receiving care must be a SoonerCare member when care is provided.
- The provider who treats the member must have a current contract with SoonerCare.
- The medical care or service given must be a covered benefit under SoonerCare.

If any of the above conditions are not met, you will be responsible for payment. Please note that most out-of-state providers are not contracted with SoonerCare. SoonerCare will make an effort to offer a contract to an out-of-state provider on your behalf. If that provider is unwilling to accept a SoonerCare contract, you will be responsible for payment.

Online enrollment and renewal

Most SoonerCare Choice members can apply or renew online. If you do not have internet access, you can apply at your local DHS office, county health department office or an Indian health center.

SoonerCare no longer processes paper applications. Applicants wanting to use a paper form may download a form from the federal website, healthcare.gov, or they may call the Federally Facilitated Marketplace at 800-318-2596 and request a paper application to be mailed to them. Please mail the application to the address that is provided. These applications will be evaluated by the FFM, and the information will be given to OHCA.

Not all SoonerCare members can use the online application. For example, if you receive Social Security Income payments or cash assistance Temporary Assistance for Needy Families, you must apply at your local DHS office.

TABLE OF CONTENTS

Important phone numbers 2
Welcome to SoonerCare Choice 5
My SoonerCare story 7
How does SoonerCare Choice work? 8
American Indian members 9
SoonerRide (transportation) 9
Specialists and referrals 11
Pharmacy 11
Durable medical equipment and supplies 12
Emergency services 13
Pregnancies 14
Child health services 15
Vision services 16
Hearing services 16
Dental services 17
Behavioral health and substance abuse 17
Population Care Management 18
What is the Health Management Program 18
How to keep your benefits and medical home 19
Living wills (advance directives) 21
Other things to know 21
SoonerPlan (family planning) 22
Soon-to-be-Sooners 23
Help fight fraud 24
Insure Oklahoma Individual Plan 25

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SOONERCARE STORY

Stephanie Miller is a member of the OHCA's Member's Task Advisory Board. She and her husband have been foster parents for six years and have adopted two boys from Oklahoma's foster care system.

When they first started this journey, Stephanie says the couple was unprepared not only for the initial amount of paperwork and follow-ups but also for unexpected health issues that hit them head on.

"Two days after we got our first placement, we ended up being in the hospital for three days," Stephanie said.

"Our oldest was in the NICU for the first 30 days," she said, explaining that the baby boy had pancreatic issues his first year of life. The same child was hospitalized a year later due to an abscessed tonsil.

However, Stephanie said her family did not let these setbacks panic them because they could rely on SoonerCare.

"Because we had SoonerCare, we didn't worry about it," said Stephanie. "He was able to see the doctors he needed that specialized in what he had."

Stephanie credits SoonerCare with allowing her to focus on the well-being of her children instead of stressing about their health care needs. She says it also helps the children not to worry.

"Being removed from home is very traumatic," Stephanie said. "The fact that [SoonerCare] is there is just very reassuring, especially for the kids – knowing that they will be cared for."

Stephanie is grateful for the opportunity to provide a loving, safe environment for children who have had a rough start in life. Being able to connect them with quality health care has been an invaluable part of the process. "SoonerCare has meant peace of mind for me and my family," said Stephanie.

"We've used the ER at least three different times, all of them resulting in extended hospital stays," she said. "I've had three sets of kids that have had tonsils out. I've had kids that have had to have counseling, which has allowed them to actually see real improvement and changes in their behavior that I really feel will carry with them lifelong."

WANT TO SHARE YOUR SOONERCARE STORY?

We want to hear how SoonerCare or Insure Oklahoma has helped you or your family member. Email your story to strategiccommunications@okhca.org.

HOW DOES SOONERCARE CHOICE WORK?

In SoonerCare Choice, members have their own health care provider called a medical home. You get to choose your medical home.

Medical home refers to:

- One provider.
- Sees you when needed.
- Provides for your overall health care needs.
- Continues to provide care as long as you are his or her patient.
- Coordinates your care with other medical providers as needed.

Sometimes you may need specialized care that your medical home cannot provide. If the service is covered under SoonerCare, your medical home will help by referring you to the appropriate medical provider.

Payment for services

Children (birth through age 20) do not have copays for SoonerCare-covered services. Adult pregnant women do not have copays for pregnancy-related SoonerCare-covered services, including prescriptions. Adults have copays for most SoonerCare-covered services. Payment is due at the time of service.

Choosing a medical home

If you have a mysoonercare.org account, you can select a medical home at the end of your application. You can also login and change your medical home at any time. If you applied by any other method, you will need to choose a medical home. You must call the SoonerCare helpline to choose your medical home at 800-987-7767. Your SoonerCare benefits will be limited if you do not choose a medical home.

You can use the same medical home for your whole family or each family member can choose a different one. Your medical home must be within 45 miles of your home to qualify for SoonerRide. SoonerRide is free transportation for non-emergency care.

Making an appointment with your medical home

If you have never been seen by your medical home, please call them as soon as possible to schedule your first appointment. It is very important that your medical home knows who you are and your health history. When you call, please:

- Tell the staff why you need an appointment.
- Know your SoonerCare member ID number.
- If you have a problem getting an appointment, call the SoonerCare Helpline.

Call your medical home's office if your problem gets worse before your scheduled appointment. Ask to speak to the nurse to explain your symptoms. Ask if you can get an earlier appointment based on your symptoms.

If you can't make your doctor's appointment, you must let them know as soon as possible. Your provider may choose not to continue your care if you miss too many visits or you do not call ahead to cancel.

AMERICAN INDIAN MEMBERS

If you are an American Indian, you may select Indian Health Service, tribal or urban Indian (I/T/U) health clinics as your medical home provider. If you do not enroll with an I/T/U clinic, you may still receive your health care services there.

Most I/T/U clinics have patient benefit coordinators or registration clerks who can assist you with choosing a medical home and managing your SoonerCare membership.

There are copay exemptions for American Indian SoonerCare members for services received at an I/T/U.

SOONERRIDE (TRANSPORTATION)

SoonerRide provides non-emergency transportation to and from your scheduled SoonerCare appointments:

- You must call at least three business days before your regularly-scheduled appointment to arrange for your ride.
- If you are sick and need a ride, make an appointment with your provider first and then immediately call SoonerRide.
- SoonerRide will not take you to your medical home or pay for your gas if you live more than 45 miles from your medical home without prior approval.

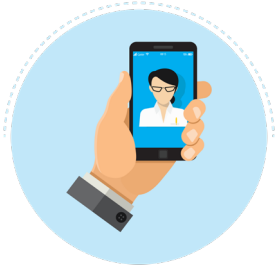
Additional child passengers

If you or your child is sick and your provider wants to see you right away (to be seen within 24 hours), SoonerRide can take you and up to three children to the urgent medical appointments. The appointment can be for either a sick child or sick parent. All of the following conditions must be met:

- The medical appointment must be urgent (to be seen within 24 hours) as dermined by your doctor. SoonerRide will confirm this with your doctor.
- All children must be the member's by birth, marriage, legal adoption, foster child or legal guardianship.
- All additional children (not the patient) must be younger than 13 years of age unless the child has complex medical, intellectual or physical disabilities that require constant care and supervision.
- Each child must have their own car seat, provided by the caretaker if required by state law.

Members must make the request for additional child passengers when making the trip reservation. The total number of passengers, including the driver, cannot be more than five for any vehicle.

If your ride is 15 minutes late, call "Where's My Ride?" at 800-435-1034 or 711 (TDD).



For more information about SoonerRide, visit okhca.org/soonerride.

To set up a ride or a gas reimbursement trip number, please call 877-404-4500 or 711 (TDD).

*In order to receive gas reimbursement, you must call SoonerRide no later than one business day before your scheduled appointment to get a trip number.

SPECIALISTS AND REFERRALS

Sometimes your health care needs require you to see a specialist. When this happens, your medical home will make the referral for you. If you have never been seen by your medical home, you must be seen by them first before a specialty referral can be made. If you do not keep your appointment, the specialist may not reschedule you.

How referrals work with a medical home:

- You schedule an appointment with your medical home provider.
- Your medical home provider will assess your needs.
- If a referral is needed, your medical home provider will provide one at this time.
- Schedule an appointment with the specialist.

Prior Authorizations

A prior authorization is required before SoonerCare will pay for some medical procedures or medications. Your medical home or specialist will ask SoonerCare, on your behalf, to authorize your treatment. You and your provider will be notified by mail about SoonerCare's decision whether to authorize the treatment.

- Your doctor must send all medical records with the PA to show a medical need for the services.
- A PA is not a promise of payment.

If you have questions, call the SoonerCare helpline.

PHARMACY

Adult member:

- You are limited to six covered prescriptions per month (four generic and two brand names).
- Your medical home may need to have some drugs approved by SoonerCare.
- You do not have a monthly limit for vitamins for pregnancy (prenatal), birth control, some drugs for HIV/AIDS, some cancer drugs and some stop-smoking products.
- You may have a copay.

Members birth through age 20

- You have no limits or copays for medically-necessary prescriptions.

You must know your SoonerCare member ID number or show your card to get your prescriptions. The pharmacy may not fill your prescription if you do not know your member ID number.

If you are not sure if a drug is covered, call your medical home or the pharmacy help desk at 405-522-6205 (OKC area) or 800-522-0114.

DURABLE MEDICAL EQUIPMENT AND SUPPLIES

SoonerCare's Durable Medical Equipment program covers items such as oxygen equipment and supplies, wheelchairs, walkers and hospital beds ordered by your medical home for use in the home. These supplies can also be ordered by any health specialist contracted with SoonerCare.

Some DME items are covered for children only (birth through age 20), such as orthotics. There are additional items covered for use in nursing facilities.

Services for children and adults

- Oxygen and related supplies.
- Parenteral nutrition.
- Diabetic supplies, urinary catheters, as well as colostomy and urostomy supplies.
- Ventilators.
- Manual wheelchairs.
- Power wheelchairs.
- Nebulizers.
- Enteral nutrition.
- Incontinence supplies.

Services for children only (birth through age 20)

- Apnea monitors.
- Orthotics.
- Prosthetics.

Oklahoma Durable Medical Equipment Reuse Program

Oklahoma ABLE Tech partners with us to provide the OKDMERP. The program is designed to reuse durable medical equipment that is no longer needed by its previous owner and reassign it to those who are in need at no cost.

- Medical equipment purchased by SoonerCare belongs to SoonerCare.
- Contact OKDMERP at 405-523-4810 when you no longer need OHCA medical equipment to arrange for pickup and reuse.
- To request donated equipment, visit okabletech.org or call 405-523-4810.

EMERGENCY SERVICES

Medical emergencies are a covered benefit if you receive services from a hospital contracted with SoonerCare.

Most hospitals outside Oklahoma are not contracted with SoonerCare. SoonerCare will try to contract with the out-of-state hospital that provided your emergency care. However, if a hospital or doctor does not sign a contract, you are responsible for your bill from the hospital.

If you are not sure you have an emergency:

Call your medical home. Someone should be available to answer your questions 24 hours a day.

If you have an emergency:

- Go to the nearest emergency room, call 911 or your local emergency number.
- You do not need a referral to go to the emergency room.
- Call your medical home as soon as possible.

What is an emergency?

- You could die if you don't get the care you need.
- You could be permanently hurt (disabled).

Examples of emergencies:

- Decreased consciousness or not being able to respond to questions.
- Chest, head or eye injuries.
- Difficulty breathing or extreme shortness of breath.
- Babies younger than 3 months with a high fever.
- Extreme bleeding.
- Broken bones.
- Accidental poisoning.
- Sexual assault or abuse.
- Burns with blisters.
- Pain or tightness in chest.
- Drug overdose.
- Feeling you might hurt yourself or others.
- Breathing tube blockage.

Care after emergency room visit

If you or a covered family member go to the emergency room, you may need follow-up care from your medical home. If the emergency room referred you to a specialist, you must call your medical home for a referral to see the specialist.

After-hours locator

Don't forget, you now have a way to search for after-hours care providers using your mobile device! To find after-hours clinics, visit afterhoursok.com and use our locator tool.

PREGNANCIES

Pregnant women whose monthly income is less than or equal to 133% of the federal poverty level still may qualify for full benefits under SoonerCare. If you have a third party medical policy you may not be eligible.

If you are pregnant, it is important to see a provider as soon as possible.

- You may continue to see your medical home if they provide prenatal care and deliver babies.
- You can choose any SoonerCare obstetrician, gynecologist (OB/GYN) or nurse midwife for your pregnancy care without a referral from your medical home.
- The SoonerCare helpline can help you find a pregnancy provider.
- Your eligibility will continue for 60 days after you deliver. After the 60 days, you may qualify for the SoonerPlan family planning program.

Pregnancy services

SoonerCare has many services to help you have the healthiest pregnancy possible:

- Prenatal care (pregnancy visits).
- Help with breastfeeding at 877-271-MILK (6455).
- Help to quit smoking.
- Help for drug or alcohol use.
- Help with mental health problems.
- Prenatal vitamins and medicines.
- Hospital and delivery services.
- Hospital nursery services for your newborn.
- Ultrasounds.
- Extra benefits for high-risk pregnancy.
- Transportation to appointments (SoonerRide) at 877-404-4500 or 711 (TDD).
- Postpartum (after delivery) appointment.

Pregnancy to-do list

- Make an appointment with your SoonerCare pregnancy provider right away. If you don't have a pregnancy provider, call 800-987-7767 or 711 (TDD) for help finding one in your area.

- Take a prenatal supplement with folic acid each day. Certain vitamins can prevent some birth defects. Ask your doctor for a prenatal supplement prescription.

- If you use alcohol or illegal drugs, stop now. They can hurt your baby. For help quitting, call your provider or the OHCA care management unit at 877-252-6002.

- If you use tobacco, stop now. Tobacco can cause problems in your pregnancy and affect your baby's health. Talk with your provider about getting help to quit. You can also call the Oklahoma Tobacco Helpline at 800 QUIT-NOW (800-784-8669) for help.

- Keep seeing your provider regularly throughout your pregnancy. These appointments allow your doctor to closely watch the health and progress of both you and your baby.

- If you have questions about your pregnancy benefits, please call the SoonerCare Helpline.

CHILD HEALTH SERVICES

SoonerCare provides medical, vision, hearing and dental checkups for babies, children and teens with SoonerCare coverage. Regular checkups help children stay healthy.

Why are health check-ups important?

- You get helpful information on your child's growth and development.
- Your provider may find problems that you may not be aware of and catch them before they get worse.
- You and your provider can make sure your child gets needed services at the right time.
- If your child has ongoing health needs, you and your provider can discuss the plan of care.
- They allow time for you, your child and your child's provider to get to know one another.

What will a child health check-up include?

At each child health check-up, your child's provider will talk with you and check your child from head to toe. The checkup will include:

- A medical history.
- Growth measurements.
- Immunizations (shots).
- A developmental and behavioral check (be ready to discus your child's learning and behaviors).
- Lab tests (if needed).
- Lead testing (at 12 and 24 months).
- Vision, hearing and dental screens at some ages.
- Health education and information, such as keeping your child and family safe, healthy sleep habits, preventing injury and violence, and healthy nutrition.

If your child has any special problems or if you have worries, your provider may suggest extra visits. These extra visits will still be free.

Should I get a child health check-up?

Regular health checkups are important for all children from birth through age 20. Children and teens who have SoonerCare need to have health checkups at the ages listed below:

- Newborn
- 3-5 Days
- By 1 Month
- 2 Months
- 4 Months
- 6 Months
- 9 Months
- 12 Months
- 15 Months
- 18 Months
- 24 Months
- 30 Months

After 30 months, children should receive a well-child checkup annualy from ages 3-20.

note

The teen years bring many changes for teenagers and their families. Physical, mental, emotional and social changes are all part of growing up.

It is important to remember that these changes happen at different times for teens. Health checkups are important to track changes and keep them healthy.

After 30 months, children should receive a well-child checkup annually from ages 3-20.

CHILD HEALTH SERVICES

Immunizations (shots)

- Immunizations are important to keep your child healthy.
- Shots are given according to a recommended schedule (available at okhca.org).
- If you are not sure your child has received their recommended shots, talk with your medical home.
- Remember to take your child's current shot record to each medical home appointment.
- If your child misses a shot, call your medical home for a make-up appointment.

Developmental checks

Developmental checks let your provider know about your child's overall development, not just his or her physical health. At every child health checkup, the doctor will ask you about your child's behavior, development and learning progress. If concerns arise during the exam, your provider will do more screening. Your medical home also will tell you if other steps are needed.

Blood lead test

Getting a blood test is the only way to know if your child has lead poisoning. Too much lead can damage a child's body and brain. It can cause permanent health, behavior and learning problems. You can find lead in unexpected places.

How do children get lead poisoning?

- Breathing in or swallowing lead dust or paint chips from old paint.
- Breathing in or swallowing dust while playing in dirt that has lead in it.
- Chewing on toys or other things that have lead in them.
- Eating foods cooked or kept in dishes made with lead.

Lead levels must be checked at:

- 1 year • 2 years • 6 years (if not previously checked)

VISION SERVICES

Services for children include:

- Eye exams and glasses. Referral is not required.

Services for adults include:

- Treatment of eye disease or injuries. Referral from your medical home is required.

HEARING SERVICES

Services for children include:

- Hearing exams and hearing aids. This must be prior authorized.

Services for adults include:

- Hearing evaluation only.

DENTAL SERVICES

Early childhood oral health:

- Early childhood caries (cavities) are the number one chronic disease affecting young children.
- Early childhood caries are five times more common than asthma and seven times more common than hay fever.
- Fluoride varnish has been proven to lessen tooth decay.

Services for children (birth through age 20):

- Prevention – exams, cleaning, education, sealants and fluoride.
- Treatment – fillings, crowns, root canals, gum disease treatment, full or partial dentures and extractions.
- Emergency – control bleeding, relieve pain and eliminate acute infection.
- Correction of cleft palate.
- Medically necessary braces.
- Smoking and tobacco use cessation counseling for teens ages 12 and older.

Medical home providers may give two applications of fluoride varnish during the course of a child health check-up for members ages 6 months to 60 months.

Services for adults

Emergency extractions, which may include:

- Immediate or persistent pain or symptoms of a short-term infection.
- Advanced gum disease resulting in the loss of supporting bone or gum tissue.
- A member has been placed on antibiotics to remove an infection prior to removing a tooth. (Note: Removal of teeth without documented medical necessity is not a covered service).
- Smoking and tobacco use cessation counseling.

BEHAVIORAL HEALTH AND SUBSTANCE ABUSE

For help finding a behavioral health provider, call the behavior health helpline at 800-652-2010. You do not need a referral to see a behavioral health provider.

- Your medical home can screen your child or teenager for possible depression, anxiety, substance abuse or other issues.
- Your medical home can refer you to a local behavioral health provider.

Behavioral health services for children include:

- Medication management from a psychiatrist.
- Testing and counseling from a licensed provider.
- Psychiatric inpatient acute or residential medical detox hospital treatment services.
- Therapeutic foster care for children in state custody.*
- Services from a mental health or substance abuse agency.

*prior authorization is required. Your medical home or emergency room can assist you.

The OHCA behavioral health management team can help match services for SoonerCare members who have complex mental health issues.

For substance abuse services, please contact the Oklahoma Department of Mental Health and Substance Abuse at 405-522-3908. Services for adults include:

- Medication management from a psychiatrist.
- Mental health and substance abuse counseling services.
- Psychiatric inpatient acute medical detox hospital treatment services. (Prior authorization is required for those 18 through 20 years old.)

For crisis services, call:

- Reach-Out hotline (for mental health or substance abuse issues): 800-522-9054.
- Safeline (for domestic violence): 800-522-7233 (open 24/7).
- Teenline 800-522-8336 (M - F, 2 p.m. to 6 p.m.).
- Oklahoma Department of Mental Health and Substance Abuse 405-522-3908.

POPULATION CARE MANAGEMENT

The care management team helps match medical services for SoonerCare members who have complex or unusual health care needs. Staff provides education and help for high-risk users, high-risk pregnancies and the very sick who need help keeping up with medical care.

WHAT IS THE HEALTH MANAGEMENT PROGRAM?

The Health Management Program helps SoonerCare Choice members and their medical homes work together to improve members' severe chronic health conditions. Members learn skills to self-manage their conditions. Members also get help with community resources and behavioral health needs.

Who is chosen for the HMP?

Not all SoonerCare Choice members qualify for HMP. Only extremely high-risk members with a chronic condition are chosen to participate in this program. The HMP helps the whole person, not just focusing on a specific condition.

Some examples of health conditions served by the program are diabetes, high blood pressure, high cholesterol, congestive heart failure, hemophilia, asthma and mental health disorders.

SoonerCare Choice members who qualify for the HMP receive a letter in the mail and a phone call from a health coach.

HOW TO KEEP YOUR BENEFITS AND MEDICAL HOME

Renew

- You must renew your SoonerCare Choice membership every 12 months.
- You must renew on time to keep your benefits.
- If you do not renew on time, your benefits will stop and you will lose your medical home.
- If you lose your medical home, call the SoonerCare Helpline to see if you can continue with that medical home after your renewal is approved.

Member rights

As a SoonerCare member, you have the right to:

- Choose your medical home providers as long as they are willing and eligible to receive payment from the Oklahoma Health Care Authority.
- Get information that is easy to understand.
- Be treated with respect and dignity. This includes respect for your privacy.
- Get information about SoonerCare services and providers.
- Take part in decisions about your medical care.
- Get information about available treatments.
- Tell us if you have problems with SoonerCare or any medical care you get.
- Make advance directives (living wills).
- Have access to your medical records as stated by federal and state laws.
- Not be discriminated against by your provider or denied certain benefits based on your age, sex, race, color, national origin, or physical or mental handicap.
- Expect quick action on issues you raise.
- Expect your personal and health information will be kept confidential as required by state and federal law.

Member responsibilities:

- Choose a SoonerCare Choice medical home.
- Read and follow the rules of SoonerCare Choice.
- Follow the treatment plans and guidelines from your medical home.
- Make appointments and keep them.
- Call your medical provider and SoonerRide at least 24 hours before any appointment you cannot keep.
- Give staff information they need to help you. This includes telling them about your symptoms.

Notify SoonerCare when any of the following occur:

- When a family member moves into or out of your house.
- If you or a household family member's name changes.
- When you or a household family member marries, divorces or dies.
- If you or a household family member has a baby or puts a child up for adoption.
- If your child is placed in custody.
- If you or a family household member enters a nursing home or special care center.
- If you or a household family member gets Social Security benefits or Medicare.
- If you or your household have a change in income.
- Report suspected member or provider fraud or abuse. For more information on reporting fraud and abuse, see the Help Fight Fraud section of this handbook.

Who to notify

If you qualify for SoonerCare due to your age (65 or older), a disability, you are in custody or you receive Supplemental Security Income benefits, you must call your DHS caseworker to report any changes. If none of these situations apply to you, you may enter new information online (see online enrollment information on page 5) or call the SoonerCare helpline and report changes to the call representative.

Right to privacy

The law says some of your information is private. Private information includes your name, address and health services you receive. This also includes income, coverage, social conditions, finances and any medical information. The Oklahoma Health Care Authority does not give out your private information unless it is allowed by State or federal law.

Getting a second medical opinion

For a second opinion, you may ask your medical home for a referral to a specialist. If you have a problem getting a second opinion, please call the SoonerCare helpline.

Removal from your medical home

Your medical home cannot stop seeing you as a patient because your health gets worse. However, your medical home can ask to dismiss you as a patient if:

- You are disruptive.
- You are verbally abusive (threats and profanity) to the medical home, the office staff or other patients.
- You regularly miss appointments without telling your medical home at least 24 hours before your appointment.
- You were dismissed by others in the same office.
- You no longer qualify for SoonerCare.
- You don't follow your medical home's treatment advice.

If you have problems

We want you to be happy with SoonerCare. We are here to help you with questions or problems. Talking about an issue or filing a complaint or an appeal for a denied service does not affect your membership or benefits.

How to file a complaint

Call the SoonerCare helpline. We want to know if you have problems with SoonerCare or its providers. The helpline will make document your problem and will work with you to try to resolve it.

Right to Appeal

You may appeal SoonerCare's decision relating to program benefits to an Administrative Law Judge (for example, decisions to deny any services or treatment your medical home or other provider requests, or discrimination complaints). To appeal a decision, you must file a Member Complaint or Grievance form (also called an "LD-1" form). Forms can be obtained by contacting member services at 800-987-7767 or by visiting http://www.okhca.org/memberforms. You must file the LD-1 form within 30 days of the date of a denial of services notice or you will lose your right to appeal.

If you want to appeal a decision that was made by SoonerCare without a formal notice to you, you must file the LD-1 form within 30 days from the day you knew about (or should have known about) the decision you want to appeal. You can represent yourself at the hearing, or you can have an attorney or other representative.
Important notice to members whose services have been reduced or discontinued: If you want your services to be continued while your appeal is being decided, your LD-1 form must be received within 10 days of the date on the letter that told you services would be reduced or discontinued. If you want to continue receiving services, and the appeal decision is not in your favor, you may have to pay for any services you received.

LIVING WILLS (ADVANCE DIRECTIVES)

A living will is for people ages 18 or older. A living will allows you to say how you want to be treated if you cannot make decisions for yourself. You can also list care you do or do not want to receive. For example, some people do not want to be put on life-support machines if they go into a coma. These papers are also called "advance directives for health care." Call 877-283-4113 toll free to request the "advance directives" form.

You will get a brochure about how to complete it. You may also get a living will at office supply stores, pharmacies or a lawyer's office. Ask your family, your medical home or someone you trust to help you with these matters.

OTHER THINGS TO KNOW

If you have other insurance

If you have other medical benefits, the law says you must give this information to your DHS worker and OHCA.

- To report other insurance or ask questions about other insurance benefits, contact the SoonerCare helpline.
- Even if you have benefits in addition to SoonerCare, you are obligated to follow the rules of the primary policy and SoonerCare.
- To find out what insurance your SoonerCare Choice medical home may take, call your medical home's office.
- All other insurances must be used before SoonerCare pays.

Translation services in your medical home's office

Your medical home can get help to speak with you in another language.

What to do if you get a bill

Usually, you will not get a bill from a SoonerCare provider. Sometimes you will get a statement that is not a bill. If you are not sure, call and ask your provider. If you are billed, you may have to pay the charges. You may have to pay if:

- You received services not covered.
- You received covered services from an out-of-state provider not contracted with SoonerCare.
- You received services without a referral from your medical home.
- You received services from a provider who does not accept SoonerCare.

You also may be billed for copays if you were unable to pay them when you received the service. If you get a bill and do not think you have to pay for the charges, call OHCA at 800-522-0114.

OTHER THINGS TO KNOW

Questions to ask about care and treatment choices

It is your right as a SoonerCare member to take part in your care and to know what to expect. Sometimes it is hard to know what to ask. Here are a few questions you might ask.

When a test is suggested, ask:

- What is the reason for this test?
- What problem are we looking for?
- What will the test tell us?
- If the test finds a problem, what will happen next?
- What will happen if I don't get the test?

When a treatment is suggested, ask:

- What is the problem? Why is it a problem? How serious is it?
- When do we start treatment?
- Would you describe the treatment?
- How is it done? Will it solve the problem?
- What are the side effects?
- What else can we do? Are there other types of treatment (including waiting or doing nothing)?

You may not be able to get answers to these questions in an emergency. The provider should tell you how serious your problem is and how sick you are.

Child abuse

- Parents or guardians may ask their medical home to check a child for signs of abuse.
- Any SoonerCare provider can do the exam. This service does not require a referral from the medical home.

Child Abuse Hotline: 800-522-3511

SOONERPLAN (FAMILY PLANNING)

What is SoonerPlan?

SoonerPlan is a family planning program for men and women who are not enrolled in SoonerCare. It is not health insurance. This program is limited to family planning services, such as birth control.

To apply, you must be a U.S citizen or qualified immigrant and meet income standards. To apply online, please visit mysoonercare.org.

What does SoonerPlan cover?

These services are paid for as part of a family planning visit:

- Birth control information and supplies.
- Limited office visits and physical exams related to family planning.
- Laboratory tests related to family planning services, including pregnancy tests, pap smears and screening for some sexually transmitted infections and diseases.
- Tubal ligations for women aged 21 and older.
- Vasectomies for men aged 21 and older.
- Gardasil for males and females through age 26.

SOON-TO-BE-SOONERS

Soon-to-be-Sooners (STBS) provides health care services for the benefit of an unborn child when:

- The unborn child's pregnant mother has a monthly income up to 185% of the federal poverty level (converted to the MAGI equivalent plus applicable disregards);
- The unborn child's pregnant mother meets residency and most other non-financial eligibility requirements; and
- The services are medically necessary for the benefit of the unborn child.

Exception to eligibility requirements

The unborn child may qualify for STBS even if the unborn child's pregnant mother does not meet citizenship or immigration status requirements.

Who is the member?

In STBS, the unborn child is the member, which means:

- Services are covered when they benefit the unborn child
- As soon as the baby is born, the child is covered under SoonerCare

Examples of STBS covered services the unborn child's pregnant mother may receive:

- Routine office visits that benefit the unborn child
- Medications that benefit the unborn child
- Ultrasounds that benefit the unborn child
- Lab services that benefit the unborn child
- Some specialty services when those services benefit the unborn child
- Hospital services that benefit the unborn child
- Mental health services that benefit the unborn child
- Substance use disorder services that benefit the unborn child
- Services associated with miscarriage or a non-viable pregnancy, such as a molar pregnancy, ectopic pregnancy, or fetal death in utero

soonerplan

Even if you are not a SoonerCare member, you may be eligible to receive family planning services, such as birth control, pregnancy tets and limited office visits.

You can apply for SoonerPlan benefits online at mysoonercare.org.

Note: SoonerPlan is not health insurance.

Miscarriages and non-viable pregnancies do sometimes occur. In these difficult circumstances, STBS covers services that may be necessary for the compassionate or palliative care of the unborn child, as well as those services necessary to support and resolve all outcomes of pregnancy.

Application:

- The unborn child's pregnant mother may apply for the STBS program at mysoonercare.org

Coverage ends:

- Upon delivery; or
- When the pregnancy ends in miscarriage or the pregnancy is non-viable.

HELP FIGHT FRAUD

What is SoonerCare (Medicaid) fraud?

Fraud is when a person or organization tries to get benefits that do not belong to them. If someone other than the member presents a SoonerCare card for services, that person is committing fraud. If a member provides false or inaccurate information on their SoonerCare application, this could be considered fraud. Providers who charge for services that the member did not receive could also be considered fraud.

OHCA sends an explanation of benefits every few months to selected members. If you are sent an EOB, please review it to ensure you have received all the services listed. If it is not correct, please contact the SoonerCare helpline. This process helps identify services charged to members who did not receive them.

What can I do to prevent fraud?

- Guard your SoonerCare information carefully. Protect it as you do your social security number and credit cards.
- Do not give your SoonerCare member ID number to anyone except your health care providers.
- Look at your SoonerCare medical bill carefully. Be sure the date of service is correct. Make sure you recognize the names of providers. If you don't, ask them to explain services provided.
- Make sure you have prior authorization or your medical home's referral before getting services from someone other than your medical home. Besides making sure services are medically needed, this step helps protect you from identity theft.
- Do not ask a health care provider for medical care you do not need.
- Never sign your name to a blank form and ask for copy of everything you sign. Keep the copy for your records.
- Do not trust anyone who claims to know how to make SoonerCare pay for services or goods not usually covered.

How do I report fraud?

If you suspect Medicaid fraud, please report it using one of the methods below. If you call, please leave your name, phone number and a detailed message, and we will return your call during normal business hours. If you wish to remain anonymous, please give the provider's name, address and as much information about the fraud as possible. This includes a description of the acts that you suspect involve fraud or abuse. If possible, include the member's name and SoonerCare ID number.

Office of Inspector General: 800-784-5887

OHCA Suspected Provider Fraud Hotline: 405-522-7421 or toll free 855-667-5578

OHCA Suspected Member Fraud Hotline: 405-522-5508 or toll free 855-817-3728

OHCA Email: member.audit@okhca.org

INSURE OKLAHOMA INDIVIDUAL PLAN

Do you know someone who needs health coverage, but can't get it through work, SoonerCare or Medicare? Insure Oklahoma, a state program, may be an option! The Insure Oklahoma Individual Plan offers low-cost health coverage to qualifying adults ages 19-64. Monthly premiums are based on income levels, and the plan features low copays with no deductible.

Oklahoma residents may qualify if they meet the program's income guidelines and one of the additional criteria below:

- Work for an Oklahoma business with 250 employees or less (or are self-employed).
- Are temporarily unemployed and qualify to receive unemployment benefits from Oklahoma Employment Security Commission.
- Have a disability, a Ticket-to-Work and work for any size employer.
- Are a college student ages 19-22.

For more information about Insure Oklahoma or to apply, please call 888-365-3742 or visit insureoklahoma.org.

What's new with Insure Oklahoma?

Insure Oklahoma has made some changes that can help your family manage your OHCA benefits.

- You can now apply for Insure Oklahoma using the same online application and login information that you use for your family's SoonerCare coverage.
- Insure Oklahoma members can also update their personal information and make payments through the same online member portal that SoonerCare members use. Links to the combined portal can be found on both insureoklahoma.org and mysoonercare.org.

SoonerCare

COMPARE OUR BENEFITS

Please note: All covered services must be medically necessary.	**SoonerCare Traditional**		**SoonerCare Choice**	
	Children Under 21	*Adults 21 and Over*	*Children Under 21*	*Adults 21 and Over*
Ambulance or Emergency Transportation	**Covered** *Emergency Only*	**Covered** *Emergency Only*	**Covered** *Emergency Only*	**Covered** *Emergency Only*
Behavioral Health and Substance Abuse Services *(Some services may require prior authorization.)*	**Covered**	**Covered** *Some services may require a $3 copay; Behavioral Health Inpatient - $10 per day, up to a maximum of $75*	**Covered**	**Covered** *Some services may require a $3 copay; Behavioral Health Inpatient - $10 per day, up to a maximum of $75*
Child Health Wellness Screens *(Including health and immunization history; physical exams, various health assessments and counseling; lab and screening tests and necessary follow-up care.)*	**Covered**	**N/A**	**Covered**	**N/A**
Dental Services	**Cleanings** *(Twice a year.)* **X-rays** **Fillings** **Crowns**	**Emergency Extractions**	**Cleanings** *(Twice a year.)* **X-rays** **Fillings** **Crowns**	**Emergency Extractions**
Diabetic Supplies *(100 glucose strips and lancets per month; one spring-loaded lancet device, three replacement batteries per year. Additional supplies require prior authorization.)*	**Covered** *Plus one glucometer per year.*	**Covered** *$4 per claim.*	**Covered** *Plus one glucometer per year.*	**Covered** *$4 per claim.*
Durable Medical Equipment	**Covered** *When prescribed by medical provider and may require prior authorization.*	**Covered** *When prescribed by medical provider and may require prior authorization. $4 copay per claim.*	**Covered** *When prescribed by medical provider and may require prior authorization.*	**Covered** *When prescribed by medical provider and may require prior authorization. $4 copay per claim.*
Emergency Department *(ER services)*	**Covered**	**Covered**	**Covered**	**Covered**

The covered benefits list provided is not all-inclusive. All covered benefits must be medically necessary. Coverage of above benefits is dependent upon meeting requirements provided in accordance with various state and federal regulations. Please verify coverage or consult with a SoonerCare or Insure Oklahoma helpline representative prior to receiving services. Coverage, copays and limitations are subject to change. Updated June 10, 2020.

Please note: All covered services must be medically necessary.	**SoonerCare Traditional**		**SoonerCare Choice**	
	Children Under 21	*Adults 21 and Over*	*Children Under 21*	*Adults 21 and Over*
Family Planning Services	**Birth control** *(Information and supplies.)* **Pap smears** **Pregnancy tests**	**Birth control** *(Information and supplies.)* **Pap smears** **Pregnancy tests** **Tubal Ligations** **Vasectomies**	**Birth control** *(Information and supplies.)* **Pap smears** **Pregnancy tests**	**Birth control** *(Information and supplies.)* **Pap smears** **Pregnancy tests** **Tubal Ligations** **Vasectomies**
Hearing Services	**Covered** *Evaluations, hearing aids and supplies.*	**Covered** *Evaluation only.*	**Covered** *Evaluations, hearing aids and supplies.*	**Covered** *Evaluation only.*
Home Health Care Services	**Covered**	**36 Visits** *Covered annually without prior authorization when prescribed by a physician - $4 copay per visit.*	**Covered**	**36 Visits** *Covered annually without prior authorization when prescribed by a physician - $4 copay per visit.*
Inpatient Hospital Services	**Covered**	**Covered** *$10 per day for first seven days - $5 on the eighth day*	**Covered**	**Covered** *$10 per day for first seven days - $5 on the eighth day*
Immunizations *(As recommended by the Advisory Committee of Immunization Practices)*	**Covered**	**Covered** *As recommended for adults; $4 per date of service.*	**Covered**	**Covered** *As recommended for adults; $4 per date of service.*
Laboratory and X-ray	**Covered**	**Covered** *$4 per visit.*	**Covered**	**Covered** *$4 per visit.*
Long-term Care	**Covered**	**Covered**	**No Coverage**	**No Coverage**
Mammograms	**Covered**	**Covered**	**Covered**	**Covered**
Nurse Midwife Services	**Covered**	**Covered**	**Covered**	**Covered**
Orthodontic Services	**Covered** *With prior authorization.*	**No Coverage**	**Covered** *With prior authorization.*	**No Coverage**
Outpatient Hospital and Surgery Services	**Covered** *If medically necessary.*	**Covered** *If medically necessary. $4 copay per visit.*	**Covered** *If medically necessary.*	**Covered** *If medically necessary. $4 copay per visit.*
Over-the-Counter Contraceptives	**Covered**	**Covered**	**Covered**	**Covered**
Personal Care	**Covered** *As prescribed in treatment plan.*	**Covered** *As prescribed in treatment plan.*	**Covered** *As prescribed in treatment plan.*	**Covered** *As prescribed in treatment plan.*
Physician Services	**Covered**	**4 Visits Per Month** *Including any specialist visits. $4 copay per visit.*	**Covered**	**Unlimited Medical Home PCP Visits** *Up to 4 specialist or non-PCP visits per month. $4 copay per visit.*

Please note: All covered services must be medically necessary.	**SoonerCare Traditional**		**SoonerCare Choice**	
	Children Under 21	*Adults 21 and Over*	*Children Under 21*	*Adults 21 and Over*
Pregnancy and Maternity Services *(Including prenatal, delivery and postpartum)* ** For Soon-to-be-Sooners, refer to the notes at the bottom of this document.*	**Covered**	**Covered**	**Covered**	**Covered**
Prescription Drugs *(Prenatal vitamins and smoking cessation products do not count towards prescription limits. No copays for children and pregnant women.)* *** For Home and Community-Based Waiver Services copays, refer to the notes at the bottom of this document.*	**Unlimited Coverage**	**6 Per Month Limit** *Up to 2 brand-name. $4 copay for each prescription. $4 copay per visit.*	**Unlimited Coverage**	**6 Per Month Limit** *Up to 2 brand-name. $4 copay for each prescription. $4 copay per visit.*
Prosthetic Devices	**Covered** *With prior authorization; Orthotics are covered.*	**Limited Coverage** *With prior authorization; Orthotics are not covered.*	**Covered** *With prior authorization; Orthotics are covered.*	**Limited Coverage** *With prior authorization; Orthotics are not covered.*
Psychiatric Residential Treatment Facility	**Covered** *With prior authorization.*	**No Coverage**	**Covered** *With prior authorization.*	**No Coverage**
Residential Substance Abuse Treatment	**No Coverage**	**No Coverage**	**No Coverage**	**No Coverage**
SoonerRide *Transportation to non-emergency covered medical services*	**Covered**	**Covered**	**Covered**	**Covered**
Stop Smoking (Cessation) Products	**90 Days** *Without authorization.*	**90 Days** *Without authorization.*	**90 Days** *Without authorization.*	**90 Days** *Without authorization.*
Substance Abuse Treatment *(Medical detoxification only.)*	**Covered** *With prior authorization.*	**Covered**	**Covered** *With prior authorization.*	**Covered**
Therapy Services *Physical (PT), Speech (ST), Occupational (OT).*	**Covered** *May require prior authorization.*	**PT, ST, OT** *No prior authorization required; 15 visits per year in hospital outpatient; $4 copay per visit.*	**Covered** *May require prior authorization.*	**PT, ST, OT** *No prior authorization required; 15 visits per year in hospital outpatient; $4 copay per visit.*
Transplant Services	**Covered** *With prior authorization.*	**Covered** *With prior authorization.*	**Covered** *With prior authorization.*	**Covered** *With prior authorization.*
Vision Services	**Covered**	**Covered** *For eye diseases or eye injuries only.*	**Covered**	**Covered** *For eye diseases or eye injuries only.*

*Soon-to-be-Sooners

Members in the Soon-to-be-Sooners (STBS) program receive medically necessary services for the unborn child. Benefits for this program can be found at Oklahoma Administrative Code 317:35-22-1 through 317:35-22-3 and by visiting the OHCA STBS webpage https://oklahoma.gov/ohca/individuals/programs/stbs.html.

**Prescription Drugs for Home and Community-Based Services

Members in Home and Community-Based Services waivers pay the following copays for prescriptions: $0.65 copay per drug costing $10.00 or less; $1.20 copay per drug costing $10.01 - $25.00; $2.40 copay per drug costing $25.01 - $50.00; $3.50 copay per drug costing $50.01 or more.