



# Member Handbook



Like Insure Oklahoma



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**Insure Oklahoma Helpline**.....888-365-3742

..... or 711 (TDD)

*Monday-Friday 8 a.m.-5 p.m. except Thursday 10:30 a.m.-5 p.m.*

[www.insureoklahoma.org](http://www.insureoklahoma.org)

**Call the Insure Oklahoma Helpline for help with:**

- \*Changing your Primary Care Provider (PCP)
- \*Questions about benefits and services
- \*What to do if you move
- \*Qualifications and enrollment questions
- \*Bills for health care services
- \*Invoices for premiums

Late payments that are received and cashed do not reinstate an expired Insure Oklahoma policy. Reapplication must be made and accepted by Insure Oklahoma. Any funds received for policies which are not subsequently reinstated will be returned and do not constitute an agreement for coverage nor will they be applied to previous periods occurring between cancellation and possible reinstatement.

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*Please note – These help lines are not equipped to deal with emergencies. For any health emergency, contact your PCP or local emergency room.*

*This handbook is a guide and does not answer every question. All benefits are subject to plan and policy rules including qualifications.*

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# Insure Oklahoma

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Welcome to the Insure Oklahoma Individual Plan program for working Oklahomans. This member handbook has been prepared by the Oklahoma Health Care Authority (OHCA). It is provided as a guide for Insure Oklahoma benefits and how to receive services. This handbook is a summary of qualifications, medical coverage, co-payments, definitions of terms, and other rules of the Insure Oklahoma Individual Plan. Read your handbook carefully.

What is the Insure Oklahoma Individual Plan? Insure Oklahoma is a health coverage option for qualified Oklahomans administered by the OHCA. As an Insure Oklahoma Individual Plan member, you can choose an Insure Oklahoma provider for yourself and your dependents who qualify. Your health care provider is called your Primary Care Provider (PCP).

## **This plan provides coverage to qualified uninsured:**

- Self-employed individuals.
- Workers whose employers do not provide a qualified health plan.
- Workers who do not qualify to take part in their employer's health plan.
- Workers who have a disability and have a federal Ticket to Work.
- Those approved for unemployment benefits in Oklahoma.
- College students ages 19 through 22.
- Qualified spouses.

## **Application Process**

Insure Oklahoma is going green and is no longer accepting paper applications. In order to apply an application must be completed online.

## **People who do not qualify for the Insure Oklahoma Individual Plan**

You and/or a family member(s) will not qualify for Insure Oklahoma if you are:

- Qualified for Medicare or SoonerCare (Oklahoma Medicaid) including SoonerCare Choice, etc.
- Currently enrolled in Sooner-Plan (family planning services) or Oklahoma Cares.
- Adults currently covered under a major medical policy.
- Children ages 0-18.

## Renewal

- Your qualification for the Insure Oklahoma Individual Plan has to be renewed at least every 11 months.
- You can start your renewal process at least 60 days before the end of your qualification. You may log on to your account at any time using your User ID and Password at [www.insureoklahoma.org](http://www.insureoklahoma.org). You will receive a renewal notice.
- You need to complete the renewal and return any requested documentation on time to keep your benefits.
- If you do not complete your renewal or return any requested documentation, your benefits will be terminated.

## Change in Family Information and/or Income

It is important that we have your family's most current information. To make changes, log on to your account using your User ID and Password at [www.insureoklahoma.org](http://www.insureoklahoma.org). You must make changes for any of the following changes:

- You or a family member move.
- You or a family member change telephone numbers.
- You or a family member changes name.
- You marry or divorce.
- Your qualified dependent(s) dies.
- You or your qualified dependents begin receiving Social Security benefits, SoonerCare or Medicare benefits.
- Income changes including and not limited to; gambling winnings, IRA distributions, debts forgiven, etc.

## Medical I.D. Card

- An Insure Oklahoma Individual Plan Medical I.D. card can be printed from the member portal at [www.insureoklahoma.org](http://www.insureoklahoma.org).

*If you have questions about your health or need medical care, call your PCP first. In a medical emergency, call 911 or go to the nearest emergency room.*

# You Have Rights and Responsibilities

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## Members' Rights and Responsibilities

**As a member of Insure Oklahoma, you have rights. These rights include, but are not limited to:**

- Getting information in a way that is easy to understand.
- Being treated with respect and dignity and having a right to privacy.
- Taking part in decisions about your medical care.
- Receiving information on available treatment choices and courses of care.
- Voicing concerns about Insure Oklahoma or care provided.
- Making advance directives (living wills).
- Having access to your medical records as stated by federal and state laws.
- Not being discriminated against by your health care provider based on your age, sex, race, physical or mental disability, national origin, or type/degree of illness or condition.
- Prompt resolution of issues you raise.

**As a member of Insure Oklahoma, you have responsibilities. These responsibilities include, but are not limited to, the following:**

- Picking an Insure Oklahoma PCP.
- Reading and following the rules of Insure Oklahoma.
- Paying your premium on time to avoid a loss of coverage.
- Submitting changes to Insure Oklahoma about any change in address.
- You must also report anything that may affect your qualifications, such as getting married, divorced or deaths in your family.
- You must report changes in income such as social security benefits, IRA distributions, gambling winnings, pensions, etc.
- Following the treatment plans and guidelines your PCP gives you.
- Scheduling appointments and keeping them.
- Calling your PCP to cancel at least 24 hours before any appointment you cannot keep.
- Providing staff with information to help care for you.

## **Confidentiality (Right to Privacy)**

The law states that some information is private. Certain information cannot be shared without your permission. Private information includes your name, address, and health services you receive. It also includes income qualifications, finances, social conditions, and any medical information.

## **Authorization to release SoonerCare records**

If you would like another person to speak to the helpline regarding your Insure Oklahoma coverage, you will need to fill out an authorization to release SoonerCare records or you may choose to add an Authorized Representative to your account by logging on to your account using your User ID and Password at [www.insureoklahoma.org](http://www.insureoklahoma.org).

## **Complaints or Issues**

We want you to be happy with the Insure Oklahoma Individual Plan. We are here to help you if you have questions or issues. Talking about an issue or filing a complaint or formal grievance will not affect your membership or benefits with Insure Oklahoma.

Call the Insure Oklahoma Helpline if you have problems with Insure Oklahoma or its providers. We want to know. If the issue remains unsolved, ask to speak with an Insure Oklahoma Helpline supervisor.

If you are denied assistance from Insure Oklahoma, or your coverage is terminated, suspended or limited in some fashion, you may appeal the decision of Insure Oklahoma. To appeal, mail a letter telling Insure Oklahoma about your circumstances. The letter will need to have the “who, what, when, where and why” of your situation.

Insure Oklahoma will review your letter. Mail letters to:

**Insure Oklahoma**  
**Oklahoma Health Care Authority**  
**P.O. Box 18497**  
**Oklahoma City, OK 73154-0497**  
**Attention: Docket Clerk**

If you have any questions about filing a formal grievance or complaint, you may contact the Oklahoma Health Care Authority at 405-522-7217 or 711(TDD)

## Living Wills (Advance Directives)

A living will is for people 18 or older. A living will tells people how you want to be treated if you cannot talk or make decisions for yourself. You can list the care you do, or do not want, to receive. For example, some people do not want life-support if they go into a coma.

These papers are also called “Advance Directives for Health Care.” You may call toll-free **877-283-4113** to request the “Advance Directives” form. You will get a brochure with instructions on how to fill out the form. You also may get a living will at office supply stores, pharmacies or a lawyer’s office. Ask your family, your PCP or someone you trust to help you in these matters.

# Your Provider

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## Primary Care Provider (PCP)

Your health care provider is called your Primary Care Provider or PCP. The PCP will take care of you and if applicable, your dependents’ basic health care needs. You and your dependents can use the same PCP, or each of you can have a different PCP. You may want to choose a PCP close to your home or place of work. Doctors, physician assistants, or nurse practitioners who provide primary care services, can all be PCPs.

If you have questions about your choice of PCPs or if you would like to change your PCP, call the Insure Oklahoma Helpline at **888-365-3742**.

To find a PCP, look in the Insure Oklahoma Provider Directory on the Insure Oklahoma website at [www.insureoklahoma.org](http://www.insureoklahoma.org). You also may call the Insure Oklahoma Helpline at **888-365-3742**. The Insure Oklahoma Helpline can help if you need:

- The name or address of a PCP in your area
- To know your PCP name or I.D. number

Sometimes the PCP you choose is not taking new Insure Oklahoma patients. In this case, you will have to select a different PCP.



## **What does a PCP do?**

- Routine checkups.
- Sees you when you are sick or hurt.
- Refers you to a specialist, if needed.
- Admits you to the hospital or arranges for you to be admitted.

## **Call your PCP when you:**

- Are sick or hurt.
- Need a checkup.
- Need a referral to a specialist.
- Need prescription drugs.
- Need health advice.

## **How to Get Service**

- Call and make an appointment with your PCP.
- If you have not received a Medical I.D. card, your PCP may need your Social Security Number and date of birth to check if you qualify.
- Pay your co-pay (If you have questions please call the Insure Oklahoma Helpline 888-365-3742).

## **Choosing Your PCP If You Are Pregnant**

Pregnant Insure Oklahoma members will probably qualify for coverage through SoonerCare until after your delivery. You may return to Insure Oklahoma coverage after the pregnancy. There may be a lapse in coverage if you change programs. This lapse in coverage could cause you and/or your dependents to be uninsured. Please contact the Insure Oklahoma Helpline to help you make an informed decision.

## **Choosing Your PCP If You Are American Indian (AI)/ Alaska Native (AN)**

An American Indian/Alaska Native in the Insure Oklahoma program must choose a PCP from the Insure Oklahoma Provider Directory.

- There is a special section in the Provider Directory that lists IHS, Tribal and Urban Indian Clinics (ITU) that are also Insure Oklahoma PCPs.
- You must meet the requirements of the ITU to be accepted to an ITU as your PCP.
- To enroll with an ITU clinic, you need to contact the Insure Oklahoma Helpline or the clinic of your choice.

- You may choose a provider from any section of the directory.

*Whether your PCP is an ITU provider or not, you can still use the ITU clinics for medical care without a referral. However, if you need care the ITU clinic cannot provide (such as contract health). You will need to get a referral from your PCP for those services.*

## **Changing Your PCP**

Call the Insure Oklahoma Helpline to change your PCP. The change may not happen right away. The Insure Oklahoma Helpline can tell you what the effective date of your new PCP will be. Once your PCP has been changed, you may contact your new PCP to make an appointment.

The Insure Oklahoma Provider Directory is on the Insure Oklahoma website at [www.insureoklahoma.org](http://www.insureoklahoma.org). If the PCP you pick is not taking any new patients, you will be asked to choose a different PCP. *Please do not pick a provider from an office that has dismissed or dropped you.*

## **Getting a Second Medical Opinion**

If your doctor wants you to have treatment or surgery, you may ask for a second medical opinion. Talk with your PCP about a referral for another opinion.

### **If you are denied a second opinion, you can:**

- Call the Insure Oklahoma Helpline at 888-365-3742.

## **Removal from Your PCP**

Your PCP cannot stop seeing you as a patient because your health gets worse. However, he/she can remove you if:

- You move out of the PCP area.
- Your behavior is disruptive.
- You are verbally abusive (threatening) to the PCP, to their office staff, or to other patients.
- You regularly miss scheduled appointments without telling your PCP at least 24 hours before the appointment.
- You have been dismissed previously by the provider or others in that office.
- You have not paid your co-pay or you have an outstanding balance.
- You are no longer qualified for the Insure Oklahoma Individual Plan.
- You are in violation of contract with your PCP.

## **Your First Visit to your PCP**

Your PCP wants to get to know you and your health care needs. Help your PCP take care of you by making an appointment. The first appointment is your PCP time to get to know you.

### **When you go to your first appointment:**

- Bring all prescription drugs you are taking.
- Tell your PCP about any doctors or counselors you have seen in the past.
- Tell your PCP if you have had any surgeries or about any illnesses you have had.
- Tell your PCP about any medical equipment you are using and the name of the rental company.
- During your visit, fill out a Release of Medical Information form. This signed form will allow your new PCP to get your old health care records and better understand your health care needs. Check with your provider's staff about how to get your records to your new PCP.
- Ask your PCP any health questions that you may have.

*If you need to cancel your appointment, call the provider's office and let them know at least 24 hours before your appointment.*

## **Questions to Ask About Care and Treatment Choices**

It is your right as a member of Insure Oklahoma to take part in your care and to know what to expect. Sometimes it is hard to know what questions to ask. The following are a few questions you might ask when talking to provider about care and treatment.

### **When a test is suggested:**

- What reason is there for this test? What problems are we looking for?
- What will the test tell us? If the test finds a problem, what will happen next?

### **When treatment or intervention is suggested:**

- What is the problem? Why is it a problem? How serious is it? When do we start treatment?
- 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)?

*In an emergency, you may not be able to get answers to these questions. The provider should tell you how serious and urgent the problem is.*

## **Scheduling Appointments with your PCP**

You need to call and make an appointment as early as possible. You can call the Insure Oklahoma Helpline to find out your PCP name and telephone number if you do not know it. Your PCP will decide if your needs are routine or urgent. Ask what the PCP's office hours are so you will know when you can make appointments. Do not expect same-day appointments, unless your PCP says you need to be seen the same day because of your medical needs.

### **When you call to make an appointment, you should always be ready to:**

- Tell the staff why you need an appointment.
- Give any information the staff might need such as your Insure Oklahoma number, etc.

### **Other helpful appointment information:**

- Call your PCP office if your problem gets worse before your scheduled appointment. Ask to speak to the nurse for advice or an earlier appointment.
- Sometimes, even if you have an appointment, you may have to wait to see your PCP. He/she can be very busy with emergencies. You even may be asked to reschedule your appointment. If you cannot wait and choose to leave, let the office staff know and reschedule your appointment.

## **Canceling Appointments**

If something happens and you cannot keep your appointment, call your PCP office. Your provider may dismiss you as a patient if you keep missing your appointments. Call at least 24 hours before your appointment if you think you will not be able to make it. If you do not call and cancel your appointment you may be responsible for the co-payment.

## Specialists and Referrals

Sometimes your health care needs require you to see a specialist. Your PCP will make the referral for you. If you have never been seen by your PCP, you must be seen by them first before a specialty referral can be made.

- Your PCP will send the specialist a referral form.
- Make sure the specialist's office has received your referral form **BEFORE** you call to set up an appointment. Sometimes, the PCP office will call and set up the appointment for you.
- You must get a referral **BEFORE** you go to the specialist. Do not ask your PCP for a referral **AFTER** you have seen the specialist.
- Ask how many visits your referral is for. If you need additional specialist care, you will need a new referral from your PCP
- If you go to a specialty provider without a referral, you **WILL** have to pay for those services and cannot file for payment from Insure Oklahoma.
- If your PCP gives you a referral for a service that is not covered under the Insure Oklahoma program, you will have to pay for this service.
- A referral is not a guarantee of payment.
- If you have questions about a covered service, please call the Insure Oklahoma Helpline at **888-365-3742**.

### If You Want To See a Specialist:

Ask your PCP for a referral **BEFORE** going to the specialist. If you think you need a referral but your PCP will not give you one, call the Insure Oklahoma Helpline at **888-365-3742**.

You **MUST** have a referral from your PCP in order to see a specialist or it will be your responsibility to pay for the visit.

## Services That Do Not Need a Referral

### (Self-Referral Services):

- **Emergency Care** – If you think you have a true *medical* emergency, go to the nearest emergency room or call your local emergency number. An emergency room visit does not require a referral. If other services are performed, such as surgery, or you are admitted to the hospital, a referral will be needed.
- **Outpatient Behavioral Health Services** – You can ask your PCP to help you get care if you think it is needed.

- **OB Care** – Pregnancy care.
- **Indian Health Benefits** – Members who qualify do not have to have a referral to go to any IHS, Tribal, or Urban Indian Health Clinic provider.

*Insure Oklahoma can only pay providers that are contracted with the OHCA.*

## **Emergency Care:**

### **What is an emergency?**

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

### **If you have an emergency:**

- Go to the nearest emergency room or call 911 (or your local emergency number).
- Call your PCP as soon as possible so he/she will know about the emergency.
- Your PCP will need to manage your follow-up care.
- You do not need a referral to go to the emergency room.
- 

### **Examples of emergencies are:**

- Extreme bleeding
- Broken bones
- Rape/Sexual Assault or Abuse
- Pain and tightness in chest
- Chest or head injuries
- Decreased consciousness or not being able to respond to questions
- Difficulty breathing or extreme shortness of breath
- Breathing Tube Blockage
- Feeling you might hurt yourself or others
- Accidental poisoning
- Miscarriage
- Burns with blisters
- Drug overdoses

### **If you are not sure you have an emergency, call:**

- Your PCP office if it is during office hours and ask if a nurse is available and explain your symptoms.

## **Care After an Emergency Room Visit**

If you went to the emergency room, care may be needed. It is important to follow all care instructions. Be sure to call your PCP who will help you with your follow up care including specialty care. Your PCP also can help if you have problems filling prescriptions.

## Urgent Care (Not an Emergency)

Urgent care is when you get sick or hurt and there is no immediate danger of death or permanent disability. You may need attention soon, but *it is not* an emergency.

### If you need urgent care services:

- Call your PCP office during office hours and ask if a nurse is available. Try to call early in the day and be sure to explain your symptoms.
- Your PCP will usually see you within 24-48 hours or arrange for you to be seen.
- In an emergency, call 911 or your local emergency phone number or go to the nearest hospital emergency room (ER).

## Routine Care (Non-Urgent)

Your PCP will try to see you within three weeks for non-urgent care.

## After Hours

If you become ill or injured after regular office hours, call your PCP, describe your problem, and follow the instructions they give you.

## Out-of-State Care

Insure Oklahoma only pays providers that have a contract with the OHCA. If you get medical services from a provider who does not have a contract with the OHCA, you will have to pay for those services. Some out-of-state providers have a contract with the OHCA. Call the Insure Oklahoma Helpline if you have questions.

For **emergency** out-of-state care:

- Go to the nearest medical provider (doctor, clinic or hospital).
- You do not need a referral from your PCP if you have an emergency.
- The doctor would need to contract with OHCA to get paid for the services provided to you or your covered dependents.

For **urgent** out-of-state care:

- Call your PCP and he/she will tell you how to get the care you need.
- The provider would need to contract with OHCA to get paid for the services provided to you or your covered dependents.

### **You Will Have to Pay for Services If:**

- You receive services that are not covered.
- You get services from another provider that requires a referral without getting one from your PCP.
- You get services from a provider that does not accept Insure Oklahoma.
- You do not show up to scheduled appointments.
- If coverage is canceled for any reason including late or missed payment.

### **Dental Care**

Dental Services are not normally covered by Insure Oklahoma. An exception may be an emergency extraction of a tooth.

### **Durable Medical Equipment**

Insure Oklahoma Individual Plan Durable Medical Equipment (DME) program covers items such as oxygen equipment and supplies, wheelchairs, walkers, and hospital beds ordered by your PCP or any health specialist contracted with OHCA.

Contact a contracted DME supplier for specific coverage. For a list of suppliers, visit [www.okhca.org/dme](http://www.okhca.org/dme).

### **Services Covered include but not limited to:**

- Oxygen and related supplies
- Diabetic Supplies, urinary catheters, and colostomy and urostomy supplies
- Manual Wheelchairs
- Power Wheelchairs

### **Services Not Covered**

- Apnea Monitors
- Enteral Nutrition
- Nebulizers
- Orthotics
- Prosthetics
- Incontinence Supplies



## Oklahoma Durable Medical Equipment Reuse Program (OKDMERP)

Oklahoma ABLE Tech partners with us to provide the OKDMERP. The program is designed to reuse durable medical equipment (DME) 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 obtain an item that has been donated, visit [www.ok.gov/abletech/DME\\_Reuse/](http://www.ok.gov/abletech/DME_Reuse/) or you can call 405-523-4810.

# Services and Benefits

**Remember!** A referral from your PCP, and in some cases, a prior authorization is required before you schedule an appointment with any other health care specialist. The only exceptions are emergencies and those **services listed in the “Self-Referral Services” section.**

## List of Covered Services

The covered services listed below are available for Insure Oklahoma members. **All services are subject to medical necessity. This is NOT a complete list.**

If you have questions regarding a certain service not listed, please contact the Insure Oklahoma helpline at 888-365-3742.

Service	Insure Oklahoma - IP for adults
<b>Ambulance (Ground Only)</b>	Covered for emergency ground transportation effective 9/1/16; Air Ambulance not covered. \$4 co-pay
<b>Ambulatory Surgery Centers</b>	Covered as medically necessary. \$4 co-pay
<b>Anesthesia</b>	Qualified services for covered illness or surgery, including services provided by a certified registered nurse anesthetist.
<b>Asst. Surgeon and Anesthesiologist</b>	Covered if in attendance during surgery. Covered if surgical procedure requires an assistant.
<b>Blood and Blood Products</b>	Processing, storage and administration of blood and blood products in an inpatient and outpatient setting.
<b>Chelation Therapy</b>	Covered for heavy metal poisoning only.
<b>Chemotherapy and Radiation Therapy</b>	Covered as medically necessary. \$4 co-pay per visit
<b>Clinic services including Renal Dialysis services</b>	Covered as medically necessary. \$0 co-pay for dialysis services      \$4 co-pay per office visit

**(Covered Services Continued)**

Service	Insure Oklahoma - IP for adults
<b>Diabetic Supplies</b>	One spring-loaded lancet device -100 glucose strips and lancets per month, additional supplies require prior authorization <i>\$4 co-pay per item</i>
<b>Diagnostic X-ray services</b>	Covered as medically necessary.
<b>Dialysis</b>	Covered as medically necessary. No co-pay
<b>Durable Medical Equipment and supplies</b>	If rental item, co-pay is per month. <i>\$4 per item for durable/non-durable supplies; \$8 co-pay per item for DME equipment</i>
<b>Emergency Department</b>	Covered as medically necessary. <i>\$30 co-pay per occurrence, waived if admitted. Multiple co-payments are possible</i>
<b>Family Planning services and supplies</b>	Birth control information and supplies- Pap smears- Pregnancy tests- Tubal ligations and vasectomies. Covered as medically necessary.
<b>FQHC services</b>	Covered as medically necessary. <i>\$4 co-pay per visit</i>
<b>Home Health Nurse/Aide</b>	Covered as medically necessary. Limited to 36 total visits per 12 months. <i>\$4 co-pay per visit.</i>
<b>Immunizations</b>	Covered as recommended by the Advisory Committee of Immunization Practices, when administered by your PCP
<b>Inpatient Hospital services (Acute Care only)</b>	Covered as medically necessary. <i>\$50 co-pay per admission</i>
<b>Laboratory</b>	Covered as medically necessary.
<b>Maternity</b>	Additional high risk OB/pregnancy services not covered. <i>\$50 co-pay for delivery</i>
<b>Mammogram (Radiological or Digital)</b>	Medical necessary screening mammography. Additional follow-up mammograms are covered when medically necessary and prior authorized. No co-pay.
<b>MRI, MRA, PET, CT</b>	Covered as medically necessary. <i>\$4 co-pay per scan</i>

**(Covered Services Continued)**

Service	Insure Oklahoma - IP for adults
<b>Mental Health/ Substance Abuse Treatment- Outpatient</b>	All Outpatient benefits require prior authorization. Outpatient benefits limited to 4 visits per month, including psychiatrist services.
	Psychiatrist visits included in four physician visits limit per month.
	<i>\$4 co-pay per outpatient visit</i>
<b>Mental Health/Substance Abuse Treatment- Inpatient</b>	Inpatient acute care only (DRG). Inpatient rehab, not covered
	<i>\$50 co-pay per admission</i>
<b>Nurse Midwife services</b>	Covered as medically necessary. Included in four physician services per month.
	<i>\$4 co-pay per visit; if not pregnancy related</i>
<b>Oral Surgery</b>	Includes removal of tumors or cysts. Does not include removal of wisdom teeth.
	<i>\$50 co-pay per admission of Inpatient Hospital. \$4 co-pay per visit Outpatient Hospital/Facility.</i>
<b>Outpatient Hospital services</b>	(a) Covered as medically necessary; Multiple co-pays are possible (b) Therapeutic radiology or chemotherapy on an outpatient basis without limitation to the number of treatments per month for persons with proven malignancies or opportunistic infections.
	<i>(a) \$4 co-pay (b) \$4 co-pay per visit</i>
<b>PCP visits</b>	Included in four physician services visits limit per month.
	<i>\$4 co-pay per visit</i>
<b>Physical, Occupational and Speech Therapy</b>	Hospital based only. Limited to 15 per discipline per calendar year.
	<i>\$4 co-pay per visit</i>
<b>Physician services, including preventive services</b>	Included in four physician services visit limit per month. One preventative visit allowed per year; included in four visit limit per month.
	<i>\$4 co-pay per visit</i>
<b>Prescription Drugs and insulin</b>	Limited to six per month; two may be brand name. Prenatal vitamins and smoking cessation products do not count toward the six prescription limit.
	<i>\$4 co-pay generic</i> <span style="float: right;"><i>\$8 co-pay per brand name</i></span>
<b>Smoking Cessation Products</b>	Limited coverage, up to 90 day supply without a prior authorization. Products do not count against prescription drug limits.
	<i>\$4 co-pay generic</i> <span style="float: right;"><i>\$8 co –pay per brand name</i></span>
<b>Specialty Clinic visits</b>	Included in four physician services visit limit. (requires referral from PCP)
	<i>\$4 co-pay per visit</i>
<b>Tuberculosis services</b>	Covered as medically necessary.
	<i>\$4 co-pay per visit</i>

## Services That Are Not Covered for Adults

Insure Oklahoma does **not cover** everything. Below is a list of some common services that are not covered or paid for. **This is only a partial list.**

- Allergy testing and treatment
- Ambulance (air transport)
- Any medical service when the member refuses to allow release of information needed to make a medical decision
- Benign Skin Lesion Removal (As of 7/1/15)
- Chiropractic and Acupuncture
- Christian Science nurse
- Christian Science practitioner
- Cosmetic surgery
- CPAP Machines (As of 7/1/15)
- Dental Services except emergency extraction
- Donor transplant
- Early and Periodic Screening, Diagnosis and Treatment (EPSDT)
- Experimental procedures, drugs or treatments
- Fertility treatments
- Hearing services/aids
- High risk OB services- Enhanced services for high risk pregnancies
- Hospice
- Infertility services
- Long-term care
- Optometric or Optical services, including glasses
- Organ transplants
- Orthodontics
- Over-the-counter drugs, medicines and supplies except contraceptive devices and products, and diabetic supplies
- Private duty nursing
- Procedures, services and supplies related to sex transformation
- Prosthetic devices, including Orthotics
- Residential treatment centers
- Services not considered medically necessary
- Services that your PCP or Insure Oklahoma does not consider medically necessary
- Skilled nursing facility
- Sleep Studies (As of 7/1/15)
- Standby services
- Sterilization reversal

- Supportive devices for the feet except for the diagnosis of diabetes
- Temporomandibular Joint Dysfunction (TMD)(TMJ)
- Thermograms
- Transplants
- Transportation non-emergency (air or ground)
- Ultraviolet treatment-Actinotherapy
- Vision care and services (including glasses), except services treating diseases or injuries to the eye
- Weight loss intervention and treatment including, but not limited to, bariatric surgical procedures or any other weight loss surgery or procedure, drugs used primarily for the treatment of weight loss including appetite suppressants and supplements, and/or nutritional services prescribed only for the treatment of weight loss

## Care Management

The Care Management team helps coordinate medical services for Insure Oklahoma members who have **complex** and/or **unusual** health care needs.

### **Services provided by Care Management include:**

- Help for health care providers with complex discharge planning.
- Education and help for:
  - \* High service users
  - \* The very sick who have problems keeping up with medical care

Care Management can be reached at 877-252-6002.

**Inpatient: Patient stays longer than 24 hours and receives room and board from the hospital/facility.**

**Outpatient: Patient stays no longer than 24 hours in the hospital/facility and does not receive room and board.**

## Behavioral Health and Substance Abuse Services

### **Do I need a referral from my PCP to visit a Behavioral Health provider?**

- No— Insure Oklahoma members do not need a referral for outpatient behavioral health or substance abuse services, but telling your PCP will make it easier to manage your care.

### **What behavioral health and substance abuse services are available through Insure Oklahoma?**

- Services from a **psychiatrist** contracted with Insure Oklahoma who can diagnose conditions and prescribe medication. A few see patients for therapy services. You will need to contact a specific psychiatrist in your area to see if he or she is taking new clients. You also should ask if he or she provides the services you need. Call the Behavioral Health Helpline at **1-800-652-2010** from 8 a.m. through 5 p.m. Monday through Friday for a list of psychiatrists in your area.

- **Outpatient behavioral health agencies or substance abuse agencies** provide various services. These can include outpatient therapy and rehabilitation, psychological testing and evaluation and medication management services. Call the Behavioral Health Helpline at **800-652-2010** between 8 a.m. through 5 p.m. Monday through Friday for a list of agencies in your area.

### **Does the Insure Oklahoma Individual Plan provide residential substance abuse services?**

- The Insure Oklahoma Individual Plan for adults does not provide coverage for any residential substance abuse service. Acute care requires prior authorization when medically necessary. If you need detoxification help, contact your local Insure Oklahoma contracted hospital.

# Other Things For You To Know

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## **If You Have Other Insurance**

If you have other medical coverage, you must give this information to the Insure Oklahoma staff. The law says this information must be shared.

- To report other insurance or if you have questions about other insurance coverage you can call the OHCA Third Party Liability Unit at 888-365-3742.

## **What to Do If You Get a Bill**

Usually, you do not receive a bill from an Insure Oklahoma provider. Sometimes, you will get a “statement” from a provider that is not a bill. If you are not sure, call the provider and ask if you have been billed.

There may be times you are responsible for charges if:

- You or your dependents received services that are not covered.
- You missed paying your co-pay.
- You do not have a referral from your PCP for services that require a referral.
- You or your dependents received services from a provider who does not accept Insure Oklahoma.
- If you miss an appointment and do not call at least 24 hours in advance to cancel.



If you receive a bill and do not think you are responsible for the charges, call the Insure Oklahoma Helpline at **888-365-3742** from 8 a.m. through 5 p.m. Monday through Friday except on Thursday 10:30 a.m. through 5 p.m. Give the following information:

- The date of the service.
- The amount being charged.
- Who the bill is from.
- Service you are being billed for.

It is a good idea to have the bill with you when you call. The representative will help you understand what you have received and whether you could be responsible for payment.

## **Out- of-Pocket Reimbursement Information**

- Out-of-pocket medical expenses for all approved and qualified members (and/or their approved and qualified dependents) will be limited to 5 percent of their annual gross household income. The OHCA will provide reimbursement for out-of-pocket medical expenses in excess of the 5 percent annual gross household income. A medical expense must be for an allowed and covered service by a qualified health plan to qualify for reimbursement. For the purpose of this section, an allowed and covered service is defined as an in-network service covered in accordance with a qualified health plan's benefit summary and policies.
- For all qualified medical expenses as defined in OAC 317:45-1-4(a) found at [www.okhca.org](http://www.okhca.org) the member must submit the OHCA required form and all OHCA required documentation to support that the member incurred and paid the out-of-pocket medical expense. The required documentation must be submitted no later than March 31<sup>st</sup> for the previous calendar year expenses. The member's qualification period is per calendar year. The OHCA required documentation must prove that the member actually incurred and paid the qualified out-of-pocket expense. The OHCA may request additional documentation at any time to support a member's request for reimbursement of qualified out-of-pocket medical expenses.

### **What is covered?**

Expenses that are the responsibility of the individual (member) may be reimbursed. These expenses may include premiums and co-pays. Total expenses that exceed 5 percent of the individual's annual household income may be reimbursed.

## **Five percent of annual household income out of pocket limit**

Please refer to the cover acceptance letter (PMS-9011-D). This letter indicates the 5 percent limit (of annual household income) over which the individual (including covered dependents) may be reimbursed by Insure Oklahoma. Individuals must first pay for their covered medical expenses up to the 5 percent limit before qualifying to receive reimbursement. The individual must submit the Out- of- Pocket claim form with original receipts for reimbursement consideration.

### **Covered Medical Care**

The medical care received must be for a qualified family member and must be covered and allowed. The member is responsible to pay for all co-pays due to providers. Members should ensure all medical care is covered by checking their member handbook or by calling the Insure Oklahoma Helpline at 888-365-3742.

**If you have any questions about out- of-pocket expenses or the Insure Oklahoma program, please feel free to call our Insure Oklahoma Helpline at 888-365-3742.**

# Resources

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All correspondence:

Email Address:

[Insureok@okhca.org](mailto:Insureok@okhca.org)

Fax Number:

405-530-3433

Documents can be uploaded from Members Account

Mail:

Insure Oklahoma Individual Plan

P.O. Box 54200

Oklahoma City, OK 73154-1200

Behavioral Health:

Behavioral Health Helpline 800-652-2010

Behavioral Health Access Specialist 405-522-3908

Reachout Hotline 211

[www.odmhsas.org](http://www.odmhsas.org)

Complaints and/or concerns mailing address:

Insure Oklahoma  
Oklahoma Health Care Authority  
P.O. Box 18497  
Oklahoma City, OK 73154-0497  
Attention: Docket Clerk

Helpline number:

888-365-3742

Out- of- pocket Reimbursement:

Fax Number:  
405-530-3433

Email Address:

[Insureok@okhca.org](mailto:Insureok@okhca.org)

Pharmacy Help Desk

800-522-0114, option 4

Premium Payments by phone

866-432-9176

Premium Payments Online

<https://www.paybill.com/insureoklahoma>

Premium payment address:

This address is for payments ONLY. Documents other than payments mailed to this address will NOT be processed and will be destroyed.

Insure Oklahoma  
P.O. Box 840061  
Dallas, TX 75284