



SUPERIOR

Health Plan™

STAR Health Member Handbook



*We are ready to help! Call 1-866-912-6283. * ¡Estamos listos para ayudar! Llamar a 1-866-912-6283.*

IN AN EMERGENCY

WHAT DO I DO IN AN EMERGENCY?

Call 911 or go to the nearest hospital/emergency facility if you think you need emergency care. You can call 911 for help in getting to the hospital emergency room. If you receive emergency services, call your doctor to schedule a follow up visit as soon as possible.

Remember to call Superior at 1-866-912-6283 and let us know of the emergency care you received.

Superior defines an emergency as a condition in which you think you have a serious medical condition, or not getting medical care right away will be a threat to your/your child's life, limb or sight.

WHAT DO I DO IN A BEHAVIORAL HEALTH EMERGENCY?

You should call 911 if you/your child is having a life-threatening behavioral health emergency. You can also go to a crisis center or the nearest emergency room. You need to call Behavioral Health services at 1-800-716-5650 to coordinate continuing care.

You do not need a referral from your doctor to get emergency care. If you have a real emergency, go to the nearest emergency room or call 911 right away! After you have received emergency care, call Superior at 1-866-912-6283.



NUMBERS TO REMEMBER

If you have any questions, call us at 1-866-912-6283. Superior's Member Services staff will help you. Our staff is there from 8 a.m. to 5 p.m. Monday to Friday. NurseWise® (our nurse helpline) is available 24 hours a day, 7 days a week to answer your health questions. You can call NurseWise after hours and weekends at 1-866-912-6283 (choose option 7.) Our staff is bilingual in English and Spanish. If you speak another language or are hearing impaired, call Member Services for help.

SUPERIOR MEMBER SERVICES 1-866-912-6283

SUPERIOR TTY LINE (HEARING IMPAIRED) 1-800-735-2989

PHARMACY HELPLINE (PRESCRIPTION DRUGS) 1-800-335-8957

MEDICAL TRANSPORTATION 1-877-633-8747

EYE CARE (TOTAL VISION HEALTH PLAN) 1-866-642-8959

BEHAVIORAL HEALTH (CENPATICO) 1-866-218-8263

DENTAL SERVICES (DELTA DENTAL) 1-866-287-3419

ALCOHOL/DRUG CRISIS LINE 1-866-218-8263

CONNECTIONS (ADDITIONAL COMMUNITY SERVICES) 1-866-912-6283

MEMBER ADVOCATE 1-866-912-6283

You can get behavioral health and/or substance abuse help right away by calling 1-866-218-8263. You can call 24 hours a day, 7 days a week. Cenpatico (our Behavioral Health provider network) will help you find the best provider for you/your child. You should call 911 if you/your child is having a life-threatening Behavioral Health emergency. You can also go to a crisis center or the nearest emergency room. You do not have to wait for an emergency to get help. Cenpatico staff is bilingual in English and Spanish. If you speak another language or are hearing impaired, call 1-866-218-8263 for help.

Superior's Service Coordinators are available to help you coordinate your/your child's medical and behavioral health care. We can also help you understand the STAR Health services and benefits. Please call us at 1-866-912-6283.



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INTRODUCTION

ABOUT

STAR Health provides health care to Texas children in the State's Foster Care Program. Superior HealthPlan Network provides the services under a contract with the Texas Health and Human Services Commission (HHSC). Superior works with many doctors, clinics, and hospitals to care for you/your child.

You/your child will get health care from doctors in Superior's Provider Network. Children can get regular check ups, exams, primary care, and specialist care when needed. Superior also has hospitals, specialists, labs, and many more providers when you/your child needs them.

You Must Use A Superior Provider To Get Health Services.

Your/your child's Member ID card will arrive in the mail once you/your child is enrolled with Superior. It will have your/your child's primary care provider name and office number. Carry this ID card and you/your child's Medicaid ID Card with you at all times. Show both cards to the doctor so they know you are covered through Superior HealthPlan Network.

If you do not understand this Member Handbook, or need help reading it, call Member Services. We can tell you how to use our services and will answer your questions. You can get this handbook in audiotape, CD, larger print, Braille, or in another language if you need it.

FOR MORE INFORMATION, CALL MEMBER SERVICES AT 1-866-912-6283.

REMEMBER:

- The 2085 form is a DFPS form that is sent to the child's caregiver. It lists the child's medical consentor and has their DFPS ID number. Doctors can use this form to verify a child's eligibility and their medical consentor.
- Carry your/your child's Superior ID card and their Medicaid ID Card with you at all times.
- Call your/your child's primary care provider first if you/your child has a medical problem that is NOT life threatening.
- If you/your child cannot reach the primary care provider, call Superior at 1-866-912-6283. We are here to help 24 hours a day, 7 days a week.

Superior HealthPlan Network, by law, will keep your/your child's health records private. Your discussions with doctors or other healthcare providers are also private. If you are the medical consentor, you have the right to say yes or no to requests for your child's records by someone other than those handling your child's health care.

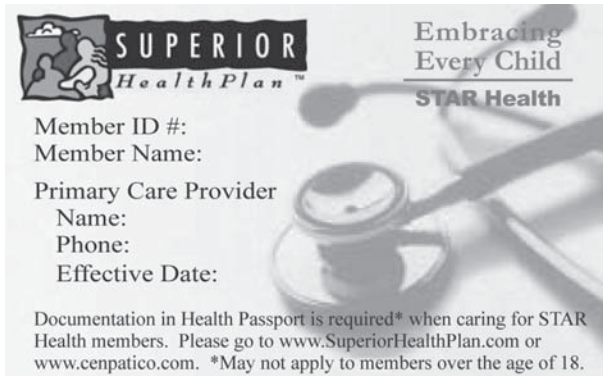
Thank you for choosing Superior HealthPlan!



INTRODUCTION

YOUR SUPERIOR ID CARD

You should receive your/your child's Superior HealthPlan ID card in the mail as soon as you/your child is enrolled with Superior. Here's what the front and back of the Superior ID card looks like. If you did not get this card, please call Superior at 1-866-912-6283.



Service Coordinator/Coordinadora de Servicios: 1-866-912-6283

Member Services/Servicios para Miembros: 1-866-912-6283

Available 24 hours a day/Disponible las 24 horas del día

Behavioral Health/Servicios de salud mental: 1-866-218-8263

Available 24 hours a day/Disponible las 24 horas del día

Vision Services/Servicios de la vista: 1-866-642-8959

Dental Service/Servicios dentales: 1-866-287-3419

If you need emergency care, go immediately to the nearest Emergency Room. (Your doctor does not have to refer you for emergency care.)
Si tiene una emergencia, vaya inmediatamente a la sala de emergencias más cercana. (No necesita un envío a servicios de su doctor para recibir atención de emergencia.)

If you have a medical question, call NurseWise® at 1-866-912-6283. NurseWise is open 24 hours a day – every day of the year.
Si tiene una pregunta acerca de la salud, llama a NurseWise al 1-866-912-6283. NurseWise esta abierta las 24 horas del día/ todos los días del año.

Always carry your/your child's Superior ID card with you and show it to the doctor, clinic or hospital to get the care you need. They will need the facts on the card to know that you/your child is a Superior member. Do not let anyone else use you/your child's Superior ID card.

Your/your child's Superior ID card is in English and Spanish, and has:

- Member's name
- Member's Medicaid ID number
- Doctor's name and phone number
- 24 hour a day/7day a week toll-free number for Superior Member Services
- 24 hour a day/7day a week toll-free number for Behavioral Health Services
- Directions on what to do in an emergency

If you lose your Superior ID card or need to pick a new doctor/primary care provider, call Superior at 1-866-912-6283. You/your child will get a new ID card.

The Texas Health and Human Services Commission (HHSC) will send your/your child's Medicaid ID Card. If you have not received your Medicaid ID Card, call HHSC at 1-800-252-8263.

INTRODUCTION

YOUR TEXAS BENEFITS MEDICAID CARD

When you are approved for Medicaid, you will get a Your Texas Benefits Medicaid Card. This plastic card will be your everyday Medicaid ID card. You should carry and protect it just like your driver's license or a credit card. The card has a magnetic stripe that holds your Medicaid ID number. Your doctor can use the card to find out if you have Medicaid benefits when you go for a visit.

You will get a new Your Texas Benefits Medicaid card every time you change your health plan.

If you are not sure if you are covered by Medicaid, you can find out by calling toll-free at 1-800-252-8263. You can also call 2-1-1. First pick a language and then pick option 2.

Your health history is a list of medical services and drugs that you have gotten through Medicaid. We share it with Medicaid doctors to help them decide what health care you need. If you don't want your doctors to see your health history through the secure online network, call toll-free at 1-800-252-8263.

The Your Texas Benefits Medicaid card has these facts printed on the front:

- Your name and Medicaid ID number.
- The name of the Medicaid program you're in if you get your Medicaid services through a health plan. This would be STAR Health.
- The date HHSC made the card for you.
- Facts your drug store will need to bill Medicaid.
- The name of the health plan you're in and the plan's phone number.
- The name of your doctor and drug store if you're in the Medicaid Limited program.

The back of the Your Texas Benefits Medicaid card has a website you can visit (www.YourTexasBenefits.com) and a phone number you can call (1-800-252-8263) if you have questions about the new card.

If you forget your card, your doctor, dentist, or drug store can use the phone or the Internet to make sure you get Medicaid benefits.

If you lose the Your Texas Benefits Medicaid card, you can get a new one by calling toll-free at 1-855-827-3748.

 Your Texas Benefits Health and Human Services Commission		STAR Health
Medicaid card		
Member name: Your name	Health plan / Plan de salud: Your plan	
Member ID (Medicaid ID): XXXXXXXXXX	1-800-###-####	Second program (optional):
Issuer ID: (0000) XXXXXXXXXX		Third program (optional):
RxBIN: 001111		
RxPCN: ADV	Date card sent:	
RxGRP: RX1234	09/01/2011	

This card does not guarantee eligibility. La tarjeta no garantiza la elegibilidad.	
Need Help? ¿Necesita Ayuda?	
1-800-252-8263	
Questions about your doctor? Call your health plan.	¿Preguntas sobre su doctor? Llame su plan de salud.
www.YourTexasBenefits.com	

REMEMBER:

You must carry your/your child's Superior ID card and your Medicaid ID Card at all times.



MEDICAID

MEDICAID AND PRIVATE INSURANCE

WHAT IF I HAVE OTHER INSURANCE IN ADDITION TO MEDICAID?

You are required to tell Medicaid Program staff about any private health insurance you have. You should call the Medicaid Third Party Resources hotline and update your Medicaid case file if:

- Your private health insurance is canceled.
- You get new insurance coverage.
- You have general questions about third party insurance.

You can call the hotline toll-free at 1-800-846-7307.

If you have other insurance you may still qualify for Medicaid. When you tell Medicaid staff about your other health insurance, you help make sure Medicaid only pays for what your other health insurance does not cover.

IMPORTANT:

Medicaid providers cannot turn you down for services because you have private health insurance as well as Medicaid. If providers accept you as a Medicaid patient, they must also file with your private health insurance company.

WHAT HAPPENS IF I LOSE MY MEDICAID COVERAGE?

If you lose Medicaid coverage but get it back again within six (6) months you will get your Medicaid services from the same health plan you had before losing your Medicaid coverage. You will also have the same Primary Care Provider you had before.

WHAT IS THE MEDICAID LIMITED PROGRAM?

You may be put in the Limited Program if you do not follow Medicaid rules. It checks how you use Medicaid pharmacy services. Your Medicaid benefits remain the same. Medicaid pharmacy rules to follows:

1. Pick one pharmacy at one location to use all the time.
2. Be sure your main doctor or the specialists he refers you to are the only doctors that give you prescriptions.
3. Do not get the same type of medicine from different doctors.

To learn more call 1-800-436-6184 Option 4.



SUPERIOR HEALTH TIP:
Don't forget to ask the doctor if your child needs any shots.

JUST FOR CHILDREN IN FOSTER CARE

WHAT IS THE HEALTH PASSPORT? HOW DO I ACCESS THE HEALTH PASSPORT?

Many children in foster care have chronic and complex conditions. It takes a team of medical and behavioral health professionals to meet the child's needs. Superior's Health Passport is a community health record that gives professionals information about care received outside of their office so they can coordinate care and make the best decisions for each child. It is a web-based tool with security controls to manage who sees the information.

The Health Passport may include information such as:

- Medical and behavioral health visit history.
- Pharmacy claim history.
- Allergies.
- Texas Health Steps forms and results.
- Lab results.

The Health Passport is available to the person authorized to consent to medical care for a child in conservatorship as well as the providers of medical care, DFPS workers and authorized Superior staff.

To get access to the Health Passport:

- Log onto www.fostercaretx.com
- Click on the Foster Care Program description.
- Go to the Health Passport.
- Follow the registration instructions.



Note: For help with the Health Passport, call the help desk at 1-866-714-7996.

WHAT IS A MEDICAL CONSENTER?

A medical consenter is the person whom a court has authorized to consent to medical care for a child in State conservatorship. The medical consenter may be the child's foster parent, a relative of the child, or a person named by the Department of Family and Protective Services. The child's parent may also be a medical consenter if the parent's rights have not been terminated and the court determines that it is in the best interest of the child to allow the parent to make medical decisions on behalf of the child. A medical consenter may also be a child in conservatorship of at least 16 years of age, if a court says the child has the capacity to consent to medical care.

WHAT IS THE ROLE OF A MEDICAL CONSENTER?

The role of a medical consenter includes consenting to the child's medical care and participating in the child's medical appointments. Medical care means "health care and related services." This may include medical, behavioral, dental, eye care and surgical treatment. This does not apply to emergency services. Contact 911 or go to the nearest hospital or emergency facility if you think you need emergency care.

ACCESSING CARE- PRIMARY CARE PROVIDERS

WHAT IS A PRIMARY CARE PROVIDER?

A Primary Care Provider is the doctor that will:

- make sure that you/your child gets the right care
- give you/your child regular checkups
- write prescriptions for medicines and supplies when you/your child are sick
- tell you if you/your child needs to see a specialist

When a child is first enrolled with Superior but does not have a Primary Care Provider, a doctor is automatically selected for the child by Superior. If you are not happy with the doctor selected, the doctor can be changed. If you/your child is a girl, you may pick an obstetrician (OB) or gynecologist (GYN) as her Primary Care Provider. You will need to pick a Primary Care Provider for each eligible child. You can pick from:

- Pediatricians (only see children)
- General/Family Practice (they see all ages)
- Internal Medicine (they usually see adults)
- OB/GYNs (they see women)
- Federally Qualified Health Centers/ Rural Health Clinics

CAN A CLINIC BE MY PRIMARY CARE PROVIDER? (RHC/FQHC)

Yes! Superior lets you pick a clinic as your Primary Care Provider. If you have any questions, call Superior at 1-866-912-6283.

WHAT IF I CHOOSE TO GO TO ANOTHER DOCTOR WHO IS NOT MY PRIMARY CARE PROVIDER?

Your Primary Care Provider is your/your child's doctor and they have the job of taking care of you/your child. They keep your medical records, know what medications you/your child are taking, and are the best people to make sure you are getting the care you need. This is why it is very important that you stay with the same doctor. Remember: If you go to a doctor that is not signed-up as a Superior provider and is not a Medicaid provider, Superior will not pay that doctor and you will get billed for the services.

HOW CAN I CHANGE MY/MY CHILD'S PRIMARY CARE PROVIDER?

If you are not happy with your doctor talk to them. If you still are not happy, call Superior at 1-866-912-6283. They can help you pick a new doctor. You might change your doctor because:

- Office is too far from your home
- Long waiting time in the office
- Can't talk to your doctor after-hours

WHEN WILL A PRIMARY CARE PROVIDER CHANGE BECOME EFFECTIVE?

You/your child's change of doctor will be effective right away. You/your child will get a new ID card with the new doctor's name and phone number.



ACCESSING CARE- PRIMARY CARE PROVIDERS

HOW MANY TIMES CAN I CHANGE MY PRIMARY CARE PROVIDER?

You can change you/your child's doctor whenever necessary.

Remember:

You should go to the same doctor. They will get to know you and your health care needs.

ARE THERE ANY REASONS WHY MY REQUEST TO CHANGE A PRIMARY CARE PROVIDER MAY BE DENIED?

If you ask to change your doctor, it can be denied because:

- Your new doctor will not take more patients
- Your new doctor is not a Superior Primary Care Provider

CAN MY PRIMARY CARE PROVIDER MOVE ME TO ANOTHER PRIMARY CARE PROVIDER FOR NON-COMPLIANCE?

Yes. If your doctor feels that you are not following their medical advice or if you miss a lot of your appointments, your doctor can ask that you go to another doctor. Your doctor will send you a letter telling you that you need to find another doctor. If this happens, call Superior at 1-866-912-6283. We will help you find a new doctor.

WHAT IF MY DOCTOR LEAVES THE NETWORK OF SUPERIOR PROVIDERS?

If your doctor decides he/she no longer wants to participate in the network of Superior providers, and that doctor is treating you for an illness, Superior will work with your doctor to keep caring for you until your medical records can be transferred to a new doctor in the Superior network of providers.

If your doctor leaves your area, call Superior at 1-866-912-6283 and they will help you pick another doctor close to you. You will also get a letter from Superior telling you when your doctor's last day as a Superior network provider will be and asking you to call Superior so we can help you pick a new doctor.



SUPERIOR HEALTH TIP:
Obesity in children is becoming more common. If you are worried about your/your child's weight, talk to your doctor.

ACCESSING SPECIALTY CARE

WHAT IF I/MY CHILD NEEDS TO SEE A SPECIAL DOCTOR (SPECIALIST)?

Your doctor might want you/your child to see a special doctor (specialist) for certain health care needs. While you/your child's doctor can take care of most of your health care needs, sometimes they will want you/your child to see a specialist for your care. A specialist has received training and has more experience taking care of certain diseases, illnesses and injuries. Superior has many specialists who will work with you and your doctor to care for your needs

WHAT IS A REFERRAL?

The doctor will talk to you about your/your child's needs and will help make plans for you to see the specialist that can provide the best care for you. This is called a referral. Your/your child's doctor is the only one that can give you a referral to see a specialist. If you/ your child has a visit, or receives services from a specialist without your doctor's referral, or if the specialist is not a Superior provider, you might be responsible for the bill. In some cases, an OB/GYN can also give you a referral for related services.

WHAT SERVICES DO NOT NEED A REFERRAL?

You do NOT need a referral for:

<ul style="list-style-type: none">• True Emergency Services	<ul style="list-style-type: none">• Regular Eye Care
<ul style="list-style-type: none">• OB/GYN care	<ul style="list-style-type: none">• Regular Dental Services
<ul style="list-style-type: none">• Behavioral Health Services	<ul style="list-style-type: none">• Texas Health Steps medical checkups
<ul style="list-style-type: none">• Ophthalmology or therapeutic optometry services (only for services that do not require surgery).	<ul style="list-style-type: none">• Family Planning Services

Members with disabilities, special health care needs or chronic or complex conditions have direct access to a specialist. Direct access means you/your child does not have to go through a Primary Care Provider to see a specialist. If you/your child needs to see a provider that is not with Superior, that provider needs to call us for an out of network authorization before you/your child gets seen. Remember, you must see a Superior provider for these services. For family planning and emergency services, you/your child can go to any Medicaid provider. If you need help getting these services, call Member Services at 1-866-912-6283.

HOW SOON CAN I EXPECT TO BE SEEN BY A SPECIALIST?

In some situations, the specialist may see you/your child right away. Depending on the medical need, it may take up to a few weeks after you make the appointment to see the specialist.

DOES SUPERIOR NEED TO APPROVE THE REFERRAL FOR SPECIALTY MEDICAL SERVICES?

Some specialist referrals from your/your child's doctor may need approval from Superior to make sure the specialist is a Superior specialist, and the visit to the specialist, or the specialty procedure is needed. In these cases, the doctor must first call Superior. If you or your doctor are not sure what specialty services need approval, Superior can give you that information. Superior will review the request for specialty services and respond with a decision. This will not take more than two business days after getting all the needed information from your doctor. Decisions are made more quickly for urgent care.

ACCESSING SPECIALTY CARE



HOW DO I ASK FOR A SECOND OPINION?

You have the right to a second opinion from a Superior provider if you are not satisfied with the plan of care offered by the specialist. Your primary care doctor should be able to give you a referral for a second opinion visit. If your Primary Care Provider wants you to see a specialist that is not a Superior provider, that visit will have to be approved by Superior.

WHAT IF I/MY CHILD NEEDS TO BE ADMITTED TO A HOSPITAL?

If you/your child needs to be admitted to a hospital for inpatient hospital care, your Doctor must call Superior to let us know about the admission.

Superior will follow your/your child's care while in the hospital to ensure that you/your child gets the proper care. The discharge date from the hospital will be based only on medical need to remain in the hospital. When medical needs no longer require hospital services, Superior and your/your child's doctor will set a hospital discharge date.

If you do not agree with a decision to discharge you from the hospital, you have the right to ask for a review of the decision. This is called an appeal. If this happens, you will receive a letter from Superior that explains Superior's decision to discharge you, and gives your appeal rights. Your appeal rights are also described in this handbook in the appeals section.

IF YOU HAVE AN ADMISSION THROUGH THE EMERGENCY ROOM:

If you/your child needs urgent or emergency admission to the hospital, you should get medical care right away and then you or the doctor should call Superior as soon as possible to tell us of the admission.



SUPERIOR HEALTH SAFETY TIP:
Use the spoon, cup, or dropper included with your liquid medicine to make sure you get the right dose.

ACCESSING CARE – JUST FOR YOUNG WOMEN

WHAT IF I NEED/MY DAUGHTER NEEDS OB/GYN CARE?

You/your daughter can get OB/GYN services from your doctor. You can also pick an OB/GYN specialist to take care of your/your daughter's female health needs. An OB/GYN can help with pregnancy care, yearly checkups or if you/your daughter have female problems. You DO NOT need a referral from a doctor for these services. Your/your child's OB/GYN and doctor will work together to make sure you get the best care.

DO I HAVE THE RIGHT TO CHOOSE AN OB/GYN AS MY PRIMARY CARE PROVIDER? WILL I NEED A REFERRAL?

Superior allows you to pick an OB/GYN, whether that doctor is in the same network as your Primary Care Provider or not.

You have the right to pick an OB/GYN without a referral from your Primary Care Provider. An OB/GYN can give you:

- one well-woman checkup per year
- care related to pregnancy
- care for any female medical condition
- referral to a special doctor within the network

HOW DO I CHOOSE AN OB/GYN?

You may pick an OB/GYN provider from the list in your provider directory. If you need help picking an OB/GYN, call Superior at 1-866-912-6283. Your/your daughter's new OB/GYN will see you/her within two weeks of your request. Once you choose an OB/GYN for you/your daughter, you should go to the same OB/GYN for each visit so they will get to know your/your child's health care needs.

IF I DON'T CHOOSE AN OB/GYN, DO I HAVE DIRECT ACCESS?

If you do not choose an OB/GYN as your/your daughter's main doctor, you can still get most services from a Superior OB/GYN without calling your doctor, or getting approval from Superior. All family planning services, OB care, and routine GYN services and procedures can be accessed directly through the Superior OB/GYN you choose.

CAN I/MY DAUGHTER STAY WITH AN OB/GYN WHO IS NOT WITH SUPERIOR?

If your/your daughter's OB/GYN is not with Superior, please call our Member Services Department at 1-866-912-6283. We will work with your doctor so he/she can keep seeing you or we will be more than happy to help you pick a new doctor within the plan.

WHAT IF I/MY DAUGHTER IS PREGNANT? WHO DO I NEED TO CALL?

If you think or know you/your daughter are pregnant, make an appointment to see your doctor or an OB/GYN. They will be able to confirm if you are pregnant or not and discuss the care you and your unborn child will need. When you know that you are pregnant, call Superior at 1-866-912-6283. Superior will provide you with a Pregnancy Case Manager who will make sure you get you the medical care you need during your pregnancy.

ACCESSING CARE – JUST FOR YOUNG WOMEN

HOW SOON CAN I/MY DAUGHTER BE SEEN AFTER CONTACTING AN OB/GYN FOR AN APPOINTMENT?

Your doctor should see you within two weeks of your request.

WHAT OTHER SERVICES/ACTIVITIES/EDUCATION DOES SUPERIOR OFFER PREGNANT WOMEN?

Superior also has a special program to help you with your pregnancy called, START SMART for Your Baby®. This program answers your questions about childbirth, newborn care, and eating habits. Superior also provides home visits for new mothers as needed, and hosts special Baby Showers in many areas to teach you more about your pregnancy and new baby.

WHAT IS CASE MANAGEMENT FOR CHILDREN AND PREGNANT WOMEN (CPW)?

WHAT TYPE OF SERVICES WOULD MY CHILD OR I GET?

Case Management is a service offered by the State of Texas that helps you get the care you need, when you need it. It is a program for people who have a health condition that needs special care and attention. There are many ways your Case Manager can help. They can:

- Coordinate services with community agencies that will help you get the extra care you need
- Help you get important facts to help you better understand your illness or condition
- Develop a plan of care with your help and the help of your (or your child's) doctor
- Follow your (or your child's) progress and help to make sure you are getting the care you need

If you have any questions, call Superior at 1-866-912-6283 or visit the Texas Department of State Health Services "Case Management for Children and Pregnant Women (CPW)" website at: <http://www.dshs.state.tx.us/caseman/default.shtm>

CAN I CHOOSE MY BABY'S PRIMARY CARE PROVIDER BEFORE THE BABY IS BORN? WHO DO I CALL? WHAT INFORMATION DO THEY NEED?

You can pick your baby's doctor even before he/she is born. Superior can even help you pick a doctor for your baby, just call us at 1-866-912-6283.



ACCESSING CARE – JUST FOR YOUNG WOMEN

HOW AND WHEN CAN I CHANGE MY BABY'S PRIMARY CARE PROVIDER/ DOCTOR?

As soon as Superior knows you/your child is pregnant, we send you information about pregnancy and her unborn baby. Superior will ask you to choose a doctor for the baby, even before the baby's birth. This will ensure that the baby's doctor will check the baby while in the hospital, and then take care of the baby's health care needs after you/your daughter and her baby are discharged from the hospital.

If a doctor has not been selected for the baby before birth, you/your daughter will be contacted to select a doctor for her baby. After the baby is 30 days old, you/your child can change the doctor for the baby if she wants a different doctor than the one that she originally chose.

HOW DO I SIGN UP MY NEWBORN BABY?

If you/your daughter are a Superior Member when the baby is born, the baby is enrolled with Superior on his or her date of birth. Superior gets information from the hospital to add the baby as a new Superior Member, and the hospital will also notify Medicaid about the baby's birth. However, it is **IMPORTANT** that you/your daughter contact the Department of State Health Services (DSHS) office to also report the birth of her baby, to ensure the baby's Medicaid enrollment is processed as soon as possible, so the baby can get all the health care he/she needs.

Important: For Former Foster Care in Higher Education (FFCHE)

FFCHE newborns are not eligible for STAR Health and are not automatically enrolled in Medicaid. The mother can apply for Medicaid benefits for her child by calling 2-1-1.

HOW AND WHEN DO I TELL MY HEALTH PLAN?

You/your daughter should let Superior know as soon as possible about the birth of her baby. Superior may already have the information about her baby's birth, but call us just in case. Superior will verify the correct date of birth for your daughter's baby with you, and also confirm that the name we have for the baby is correct.

HOW AND WHEN DO I TELL MY CASEWORKER?

If you/your daughter are in Foster Care, call your DFPS Caseworker after your/your daughter's baby is born. You **DO NOT** have to wait until you/your daughter gets her baby's social security number to get the baby signed up.

If you/your daughter have MTFCY (Medicaid for Transitioning Foster Care Youth) call Superior Member Services at 1-866-912-6283 when your baby is born.



ACCESSING CARE – APPOINTMENTS



HOW DO I MAKE AN APPOINTMENT?

You can call your doctor's office to make an appointment. If you need help making an appointment or if you need help with transportation, an interpreter or other services, call Superior at 1-866-912-6283.

Please keep your appointment. If you can not keep your appointment, let the office know as soon as you can. This will give them time to put another patient in that appointment time.

WHAT DO I NEED TO BRING WITH ME TO MY/MY CHILD'S DOCTOR'S VISITS?

You must take your current Medicaid ID Card and your Superior ID card with you when you get any health care services. You will need to show your Medicaid ID Card and Superior ID card each time. Also take your child's shot record if your child needs his/her vaccines.

Doctors can use the following forms to verify eligibility and medical consenters:

- 2085 Form
- Medicaid ID Card
- Superior ID Card

HOW DO I GET MEDICAL CARE AFTER THE DOCTOR'S OFFICE IS CLOSED?

If your doctor's office is closed, your doctor will have a number you can call 24 hours a day and on weekends. Your doctor can tell you what you need to do if you are not feeling well. If you can not reach your doctor or want to talk to someone while you wait for your doctor to call you back, call NurseWise®, Superior's nurse helpline, at 1-866-912-6283. Our nurses are ready to help you 24 hours a day, 7 days a week. If you think you have a real emergency, call 911 or go to the nearest Emergency Room.



SUPERIOR HEALTH TIP:

If you are having trouble managing your/your child's care, Superior has case managers that can help. Just call Member Services at 1-866-912-6283 for help.

ACCESSING CARE – OUT OF THE AREA

WHAT IF I/MY CHILD GETS SICK OR INJURED WHEN OUT OF TOWN OR TRAVELING?

If you/your child get sick and need urgent care and, go to a Texas Medicaid doctor or clinic nearest you. Show them your/your child's Medicaid ID Card and Superior ID card before you receive services. The doctor or clinic will need to get an authorization from Superior for the visit. The phone number for the doctor to call is listed on the back of the Superior ID card.

If you/your child has a true emergency and you/your child are out of town, go to the nearest hospital emergency room. Make sure you show them your/your child's Medicaid ID Card and Superior ID card. Call Superior within 24 hours of the visit.



WHAT IF I/MY CHILD ARE OUT OF STATE?

If you/your child has an emergency out of state, go to the nearest emergency room for care. If you/your child get sick and need medical care while you are out-of-state, call your Superior doctor or clinic. Your doctor can tell you what you need to do if you are not feeling well. If you visit a doctor, clinic, or Emergency Room out of state, they must be enrolled in Texas Medicaid to get paid. Please show your Texas Medicaid ID Card and Superior ID card before you are seen. Have the doctor call Superior for an authorization number. The phone number to call is on the back of your Superior ID card.

Important: Before you/your child is taken out-of-state, call Superior at 1-866-912-6283 and ask what clinics or hospitals accept the Texas Medicaid Program.

WHAT IF I/MY CHILD ARE OUT OF THE COUNTRY?

If you are outside of the United States and need medical care, any health care services you receive will not be covered by Superior.

Medicaid does not cover any medical services out of the Country.



SUPERIOR HEALTH TIP:

Asthma is one of the most common chronic diseases of childhood. Your doctor can help you keep it under control.

MAKING CARE EASIER – LANGUAGE & TRANSPORTATION

CAN SOMEONE INTERPRET FOR ME WHEN I TALK WITH MY/MY CHILD’S DOCTOR? WHO DO I CALL FOR AN INTERPRETER?

Superior has staff that speaks English and Spanish. If you speak another language or are hearing impaired and need help, please call Member Services at 1-866-912-6283 (TTY 1-800-735-2989).

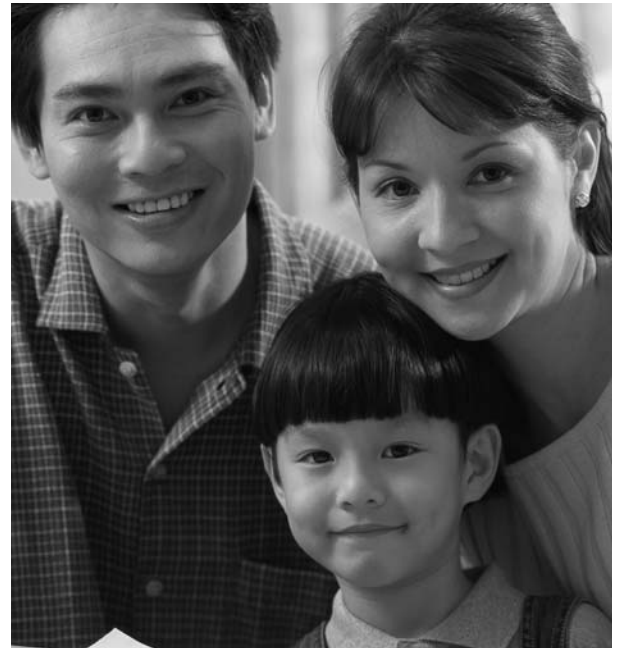
You can also call Member Services at 1-866-912-6283 if you need someone to go to a doctor’s visit with you to help you understand the language. Superior works closely with companies that have lots of people who speak different languages and can serve as sign language interpreters.

HOW FAR IN ADVANCE DO I NEED TO CALL? HOW CAN I GET A FACE-TO-FACE INTERPRETER IN THE PROVIDER’S OFFICE?

Member Services will help you set up the doctor’s visit. They will get someone to go to the visit with you. Please call at least two workdays (48 hours) before your/your child’s visit.

IF I DON’T HAVE A CAR, HOW CAN I GET A RIDE TO A DOCTOR’S OFFICE? WHO DO I CALL FOR A RIDE TO A MEDICAL APPOINTMENT?

If you need a way to get to a doctor’s visit, Medicaid has a program to help you. The Medical Transportation Service will get you to your medical visits. You can get a ride to and from your visits if you have a current Medicaid Identification Card or your Medicaid Verification Letter and you have no other way to get to your visit.



WHAT ARE THE HOURS OF OPERATIONS AND LIMITS FOR TRANSPORTATION SERVICES? HOW FAR IN ADVANCE DO I NEED TO CALL?

If you need a ride, call Monday to Friday from 8 a.m. – 5 p.m. Call at least two workdays (48 hours) before your visit.

When you call you will need to give:

- Your Medicaid number, Social Security number or other client facts
- Doctor’s (or other provider’s) name, address, and phone number
- Date, time, and reason for the visit

To ask for medical transportation services, call: 1-877-633-8747 (1-877-MED-TRIP)

If you need to cancel a ride, call no later than one working day before. If you do not cancel a ride, you might not get services the next time you need them.

MAKING CARE EASIER – LANGUAGE & TRANSPORTATION

WHO DO I CALL IF I HAVE A COMPLAINT ABOUT THE TRANSPORTATION PROGRAM?

If you have any problems with the medical transportation services program, call them at 1-877-633-8747.

CAN SOMEONE I KNOW GIVE ME A RIDE TO MY APPOINTMENT AND GET MONEY FOR MILEAGE?

The medical transportation services program can also help with money for gas. Call the medical transportation services program at 1-877-633-8747 to learn more.

Because you are a Superior member, we can also help you get to and from non-medical visits such as health education classes or New Member Orientations. Just call Superior at 1-866-912-6283 between the hours of 8 a.m. and 5 p.m. at least two workdays before the class and we will send you bus tokens (where available).



CARE DEFINED

WHAT IS EMERGENCY MEDICAL CARE AND HOW SOON CAN I EXPECT TO BE SEEN?

Emergency Medical Care is given for:

A medical condition is a medical condition manifesting itself by acute symptoms of recent onset and sufficient severity (including severe pain), such that a prudent layperson, who possesses an average knowledge of health and medicine, could reasonably expect the absence of immediate medical care could result in:

- placing the person's health in serious jeopardy;
- serious impairment to bodily functions;
- serious dysfunction of any bodily organ or part;
- serious disfigurement; or
- in the case of a pregnant woman, serious jeopardy to the health of the woman or her unborn child.

Emergency wait time will be based on your medical needs and determined by the emergency facility that is treating you/your child.

WHAT IS POST-STABILIZATION CARE?

Post-stabilization care services are services covered by Medicaid that keep your condition stable following emergency medical care.

WHAT IS URGENT MEDICAL CARE? HOW SOON CAN I EXPECT TO BE SEEN?

If you/your child needs medical care for things such as minor cuts, burns, infections, nausea or vomiting, then your visit is URGENT. Call your/your child's doctor. He/she can usually see you within one day. If you have trouble getting an appointment for an urgent medical need, call Superior for assistance at 1-866-912-6283.

WHAT IS ROUTINE MEDICAL CARE? HOW SOON CAN I EXPECT TO BE SEEN?

If you or your child needs a physical checkup, then the visit is routine. Your doctor will see you within two to ten weeks (sooner if they can). Children should be seen based on the Texas Health Steps schedule for exams.

* See Texas Health Steps section for schedule.

Remember:

It is best to see your doctor BEFORE you get sick so that you can build your relationship with him/her. It is much easier to call your doctor with your medical problems if he/she knows who you are.

You must see a Superior provider for routine and urgent care. You can always call Superior at 1-866-912-6283 if you need help picking a Superior provider or making an appointment.

CARE DEFINED

WHAT DOES MEDICALLY NECESSARY MEAN?

Covered services for STAR Health members must meet the STAR Health definition of “medically necessary.” Medically necessary means:

- 1) Acute care services, other than behavioral health services that are:
 - a. Reasonable and necessary to prevent illnesses or medical conditions, or provide early screening, interventions, and/or treatments for conditions that cause suffering or pain, cause physical deformity or limitations in function, threaten to cause or worsen a handicap, cause illness or infirmity of a member, or endanger life;
 - b. Provided at appropriate facilities and at the appropriate levels of care for the treatment of a member’s health conditions;
 - c. Consistent with the health care practice guidelines and standards that are endorsed by professionally recognized health care organizations or governmental agencies;
 - d. Consistent with the diagnoses of the conditions;
 - e. No more intrusive or restrictive than necessary to give a proper balance of safety, effectiveness, and efficiency;
 - f. Are not experimental or investigative; and
 - g. Are not primarily for the convenience of the member or provider; and
- 2) Behavioral Health Services that are:
 - a. Are reasonable and necessary for the diagnosis or treatment of a mental health or chemical dependency disorder, or to improve, maintain, or prevent deterioration of functioning resulting from such a disorder;
 - b. Are in accordance with professionally accepted clinical guidelines and standards of practice in behavioral health care;
 - c. Are furnished in the most appropriate and least restrictive setting in which services can safely be provided;
 - d. Are the most appropriate level or supply of service that can safely be provided;
 - e. Could not be omitted without adversely affecting the member’s mental and/or physical health or the quality of care rendered;
 - f. Are not experimental or investigative; and
 - g. Are not primarily for the convenience of the member or provider.



SUPERIOR HEALTH TIP:

All children should get at least one blood test to check for lead by the time they turn 2 years old.

BENEFITS & SERVICES

WHAT ARE MY HEALTH CARE BENEFITS? HOW DO I GET THESE SERVICES?

You/your child's doctor will work with you to make sure you/your child gets the services he or she needs. These services **MUST** be given by you/your child's doctor or referred by you/your child's doctor to another provider. Here is a list of **SOME** of the medical services you/your child can get from Superior:

- Doctor visits (for well child care, and preventive care for adults as well as care when you/your child is sick)
- Dental services, including initial Early Childhood Intervention (ECI) screening.
- Hospital care (inpatient and outpatient)
- Emergency care
- Eye exams and eyeglasses for children AND adults
- Lab tests and x-rays
- Mental health care
- Specialist Visits – (some might require a referral)
- Family Planning – Includes birth control, supplies, and education
- Texas Health Steps (children's medical checkups and vaccines)
- Home health care (requires a referral)
- Nurse midwife care
- Physical therapy
- Foot care (if medically necessary, with a referral)
- Speech therapy
- Occupational therapy
- Pregnancy care
- Women's health services
- Transplant services
- Alcohol and substance abuse care for members 21 years of age and younger

In addition, there are other services you can get through Medicaid including:

- Prescription medications
- Transportation to doctor visits
- Hearing tests and hearing aids for children
- WIC services

WHAT NUMBER DO I CALL TO FIND OUT MORE ABOUT THESE SERVICES?

To learn more about you/your child's benefits as a Superior member, call Member Services at 1-866-912-6283.

ARE THERE ANY LIMITS TO ANY COVERED SERVICES?

Most Medicaid services for children (less than 21 years of age) do not have any limits. Some Medicaid services for adults (more than 21 years old) do have limits, such as inpatient behavioral health care, home health services, and therapy services. Members enrolled in Medicaid for Transitioning Foster Care Youth or Former Foster Care in Higher Education will continue to have all STAR Health benefits. If you have questions about limits on any covered services, ask your doctor, or call Superior. We will tell you if a covered service has a limit.



BENEFITS & SERVICES

WHAT SERVICES ARE NOT COVERED?

The following is a list of **SOME** of the services **NOT** covered by the STAR Health program or Superior:

- Services or items only for cosmetic purposes
- First aid supplies
- Items for personal cleanliness and grooming
- Items used for incontinence (i.e. adult disposable diapers)
- Services decided to be experimental or for research
- Sex change operations
- Services **NOT** approved by the doctor, unless the doctor approval is not needed (i.e. family planning, Texas Health Steps and Behavioral Health)
- Care that is not medically necessary
- Abortions except as allowed by state law
- Infertility services

If you have questions about which benefits are or are not covered, call Superior at 1-866-912-6283.



FINDING NEW TECHNOLOGY TO BETTER CARE FOR YOU

Superior has a committee of doctors that review new treatments for people with certain illnesses. They review information from other doctors and scientific agencies. The new treatments that are covered by Texas Medicaid are shared with Superior's doctors. This allows them to provide the best and most current types of care for you.

SPECIAL SERVICES

BEHAVIORAL HEALTH (MENTAL HEALTH AND CHEMICAL DEPENDENCY)

HOW DO I GET HELP IF I HAVE/MY CHILD HAS BEHAVIORAL (MENTAL) HEALTH OR DRUG PROBLEMS? DO I NEED A REFERRAL FOR THIS?

Behavioral Health refers to mental health and substance abuse (alcohol and drug) treatment. If you need help with a behavioral health problem, you should call your doctor or Superior's mental health care provider, Cenpatico. Cenpatico has a group of mental health and substance abuse specialists to help you and your child.

You do not have to get a referral from your doctor for these services. Cenpatico will help you find the best provider for you/your child. Call 1-866-218-8263 to get help right away, 24 hours a day, 7 days a week.

HOW DO I KNOW IF I/MY CHILD NEEDS HELP?

Help might be needed if you/your child:

- Can't cope with daily life
- Feels very sad, stressed or worried
- Are not sleeping or eating well
- Wants to hurt themselves or others or have thoughts about hurting yourself
- Are troubled by strange thoughts (such as hearing voices)
- Are drinking or using other substances
- Are having problems at work or at home
- Seem to be having problems at school

When you/your child have a mental health or substance abuse problem, it is important for you to work with someone who knows them. We can help you find a provider who will be a good match for you. The most important thing is for your child to have someone they can talk to so they can work on solving their problems.

WHAT TO DO IN A BEHAVIORAL HEALTH EMERGENCY

You should call 911 if you/your child is having a life-threatening behavioral health emergency. You can also go to a crisis center or the nearest emergency room. You do not have to wait for an emergency to get help. Call Cenpatico at 1-866-218-8263 for someone to help you/your child with depression, mental illness, substance abuse or emotional questions.

WHAT TO DO IF YOU/YOUR CHILD ARE ALREADY IN TREATMENT

If you/your child is already getting care, ask your provider if they are in the Cenpatico network. If the answer is yes, you do not need to do anything. If the answer is no, call Cenpatico at 1-866-218-8263. We will ask your/your child's provider to join our network. We want you/your child to keep getting the care they need.

If the provider does not want to join the Cenpatico Network, we will work with the provider to keep caring for you/your child until medical records can be transferred to a new Cenpatico doctor.

SPECIAL SERVICES

BEHAVIORAL HEALTH SERVICES

Superior and Cenpatico offer these services:

- Education, planning and coordination of behavioral health services
- Outpatient mental health and substance abuse services
- Psychiatric partial and inpatient hospital services (for members 21 and under)
- Non-hospital and inpatient residential detoxification, rehabilitation and half-way house (for members 21 and under)
- Crisis services 24 hours a day, 7 days a week
- Residential care (for members 21 and under)
- Medications for mental health and substance abuse care
- Lab services
- Referrals to other community resources
- Transitional health care services

BONUS BEHAVIORAL HEALTH SERVICES

- Health psychology interventions
- Enhanced behavioral health services
- Partial hospitalization/extended day treatment (For members over 21)
- Intensive outpatient treatment/day treatment (For members over 21)
- Residential (For members over 21)
- Off-site services (For members over 21)

Note:

Superior and Cenpatico want to help you/your child stay healthy. We need to hear your concerns so that we can make our services better. Call Cenpatico at 1-866-218-8263 / TTY (hearing impaired) 1-800-735-2989.

CONFIDENTIALITY

When you or your child talks to someone, you share private facts. Your child's provider can share these facts only with staff helping with your child's care. These facts can be shared with others when you say it is okay. Superior and Cenpatico work together to deal with you/your child's physical and mental health or substance abuse treatment giving them the best care they need.

SPECIAL HEALTH CARE NEEDS

WHO DO I CALL IF I/MY CHILD HAS SPECIAL HEALTH CARE NEEDS AND I NEED SOMEONE TO HELP ME?

If you/your child have special health care needs, like a serious ongoing illness, disability, or chronic or complex conditions, just call Superior at 1-866-912-6283. We can help you make an appointment with one of our doctors that care for patients with special needs. We will also refer you to one of our case managers who will:

- help you get the care and services you need
- develop a plan of care with the help of you and your/your child's doctor
- will follow your/your child's progress and make sure you are getting the care you need
- answer your health care questions

SPECIAL SERVICES

EYE CARE

HOW DO I GET EYE CARE SERVICES FOR MYSELF/MY CHILD?

You/your child can get an eye exam once a year (more if you/your eyesight changes a lot). They can get glasses once every two years (more if you/your eye sight changes a lot). You can also get you/your child's glasses replaced as often as you need to if they lose them or break them.

Call Total Vision Health Plan, Superior's vision provider at 1-866-642-8959 to find out how!

You/your child do not need a referral from you/your doctor to see the eye doctor for routine eye care. Some eye doctors can also treat you/your child for eye diseases that do not need surgery. You can get these eye care services from Total Vision. To pick an eye doctor, call Superior at 1-866-912-6283 or Total Vision Health Plan at 1-866-642-8959.

DENTAL CARE

HOW DO I GET DENTAL SERVICES?

You/Your child should get regular dental checkups. Regular dental checkups make sure the teeth and gums are healthy. Dental checkups need to start at age six months and repeat every six months after that. Your child can go to any Delta Dental dentist for a checkup. You do not need a referral for regular dental checkups or other dental services. To pick a dentist in your area or if you need help making a visit, call Delta Dental at 1-866-287-3419.

PHARMACY

HOW DO I GET MY/MY CHILD'S PRESCRIPTIONS? WHO DO I CALL IF I HAVE PROBLEMS GETTING MY/MY CHILD'S PRESCRIPTIONS?

All prescriptions you get from your doctor can be filled at any drug store that takes your Medicaid ID Card. If you need help finding a drug store, call Superior at 1-866-912-6283. Remember – always take your Superior ID card and your Medicaid ID Card with you to the doctor and to the drug store.

If you have trouble getting your medicines, please call the HHSC Help Line 1-800-335-8957.

WHAT IF I CAN'T GET MY/MY CHILD'S PRESCRIPTION APPROVED?

A pharmacy that serves people with Medicaid must give you a three-day emergency supply of medication on you/your prescription when the doctor who prescribed the drug is not available to give prior authorization. This applies to non-preferred drugs and any drug that needs approval from a doctor.

FAMILY PLANNING SERVICES

HOW DO I GET FAMILY PLANNING SERVICES?

Superior offers family planning services to all Members. This includes members under the age of 18. Family planning services are kept private. You should talk to your doctor about family planning. The doctor will help you/your child pick a Medicaid family planning provider. If you do not feel comfortable talking to your doctor, call Superior at 1-866-912-6283 and we can help.

DO I NEED A REFERRAL FOR THIS?

You do not need a referral from your doctor to seek Family Planning services.



WHERE DO I FIND A FAMILY PLANNING SERVICES PROVIDER?

You can go to any family planning clinic that will take Medicaid. You can also get your family planning services from your doctor. If you go to another provider for family planning services, they will work with your doctor to meet your health needs. The following pages list family planning providers in your area.

You can also find a complete listing of family planning services providers at DSHS's website at: <http://www.dshs.state.tx.us/famplan/locator.shtm>



SUPERIOR HEALTH TIP:

Are you or your daughter a new mom? Don't forget to schedule a checkup for 6 weeks after delivery. The doctor will make sure you are healthy and answer any questions you have about being a new mom.

FAMILY PLANNING PROVIDERS

BEXAR AND SURROUNDING COUNTIES

South Texas Rural Health Services - Honda Clinic

2912 Ave E
Hondo, TX 78218
Phone: (830) 426-5288

HCM Community Health Clinic

140 Industrial Loop, Suite 2
Fredericksburg, TX 78624
Phone: (830) 992-2592

CentroMed County Line Road Clinic

1034 W. County Line Road
New Braunfels, TX 78213
Phone: (830) 606-9900

CentroMed Palo Alto Clinic

9011 Poteet Jourdanton Hwy 16
San Antonio, TX 78224
Phone: 210-921-6010

CentroMed San Antonio Street Clinic

1614 San Antonio St
New Braunfels, TX 78130
Phone: (830) 608-1575

CentroMed Somerset Family Clinic

7315 S. Loop 1604 W
Somerset, TX 78069
Phone: (830) 701-3020

CentroMed South Park Medical Center

6315 S Zarzamora
San Antonio, TX 78211
Phone: (210) 977-1900

CentroMed Southside Medical

3750 Commercial
San Antonio, TX 78221
Phone: (210) 334-3750

CentroMed Walzem Clinic

5253 Walzem Road
Windcrest, TX 78218
Phone: (210) 651-1050

Planned Parenthood - South East Family Planning

2346 East Southcross
San Antonio, TX 78223
Phone: (210) 736-2244

Planned Parenthood Family Planning on Ashby

120 West Ashby
San Antonio, TX 78212
Phone: (210) 736-2244

Planned Parenthood Las Plamas Family Planning

803 Castroville
San Antonio, TX 78237
Phone: (210) 736-2244

Community Health Centers of South Central Texas

1201 W. Court Street
Seguin, TX 78155
Phone: (830) 672-6511

South Texas Rural Health Services, Inc. - Devine Clinic

1010 W Hondo Ave
Devine, TX 78016
Phone: (830) 879-2502

FAMILY PLANNING PROVIDERS

BEXAR AND SURROUNDING COUNTIES

UHS - Eastside

210 N. Rio Grande
San Antonio, TX 78202
Phone: (210) 644-8700

UHS - DT Family Planning Program

527 N Leona
San Antonio, TX 78207
Phone: (210) 358-3698

UHS - Kenwood

302 Dora Street
San Antonio, TX 78212
Phone: (210) 644-8000

UHS - NacoPerrin

4020 NacoPerrin Drive
San Antonio, TX 78217
Phone: (210) 644-8900

UHS - Old Hwy 90

911 Old Hwy 90
San Antonio, TX 78237
Phone: (210) 644-8050

UHS - Ricardo Salinas

630 S. Gen McMullen
San Antonio, TX 78237
Phone: (210) 644-8500

UHS - South Flores

7902 South Flores
San Antonio, TX 78221
Phone: (210) 644-8100

Planned Parenthood Marbach Family Planning

8725 Marbach Road, Suite 215
San Antonio, TX 78227
Phone: (210) 736-2244

RMCHP Nacogdoches

206 Mims Plaza
Nacogdoches, TX 75961
Phone: (936) 560-0515

UHS - Westend

1226 N W 18th St
San Antonio, TX 78207
Phone: (210) 644-8425

UHS - Zarzamora

4503 S. Zarzamora
San Antonio, TX 78211
Phone: (210) 644-8600



FAMILY PLANNING PROVIDERS

EL PASO COUNTY

Centro de Salud Familiar La Fe, Inc.

700 S Ochoa

El Paso, TX 79901

Phone: (915) 545-7046

El Paso County/Hudspeth County

5115 El Paso Drive, Suite B, Clinic A

El Paso, TX 79905

Phone: (915) 771-5727

Northeast Family Practice and Dental Services

4875 Maxwell

El Paso, TX 79904

Phone: (915) 533-7057

Project Vida Health Center Naftzger Clinic

3612 Pera

El Paso, TX 79905

Phone: (915) 533-7057

Women's Health Center - Alberta Site

4824 Alberta Suite 403

El Paso, TX 79905

Phone: (915) 544-1200

Women's Health Center - Fabens Site

101 Potasio

Fabens, TX 79838

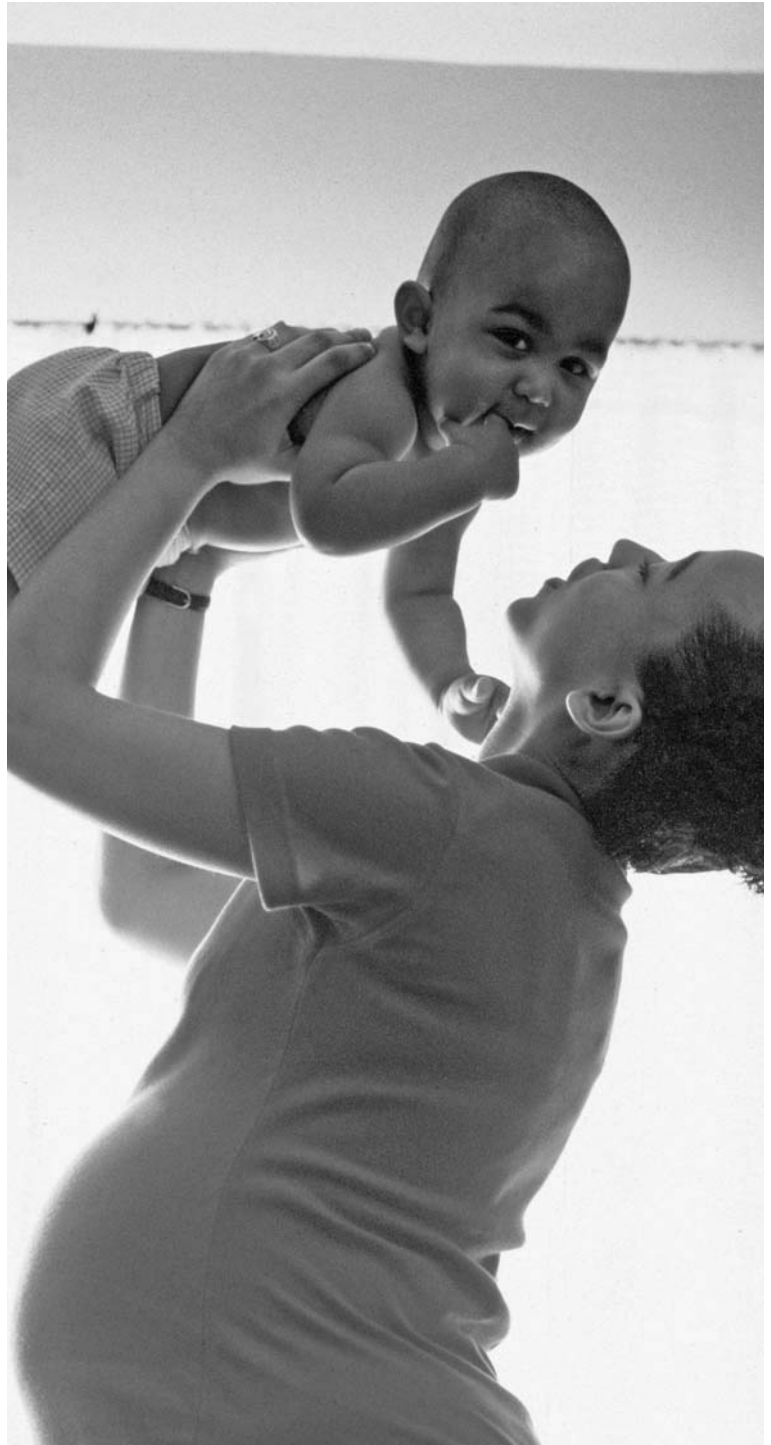
Phone: (915) 764-5000

Ysleta Site

300 S Zargoza Bldg B

El Paso, TX 79905

Phone: (915) 590-5709



FAMILY PLANNING PROVIDERS

TRAVIS AND SURROUNDING COUNTIES

Round Rock Community Health Services

206 W Main, Suite 111
Round Rock, TX 78664
Phone: (512) 716-1402

Lockhart Community Health Services

1710 S Colorado, Ste 115
Lockhart, TX 78644
Phone: (512) 398-3494

MLK Community Health Services

611 W MLK
San Marcos, TX 78666
Phone: (512) 392-5816

CommUnityCare - A.K. Black

928 Blackson Ave
Austin, TX 78752
Phone: (512) 978-9740

CommUnityCare - Del Valle

3518 FM 973
Del Valle, TX 78617
Phone: (512) 978-9760

CommUnityCare - East Austin

211 Comal Street
Austin, TX 78702
Phone: (512) 978-9200

CommUnityCare - Family Wellness Center-UT School of Nursing

2901 North IH 35, Suite 101
Austin, TX 78722
Phone: (512) 232-3900

CommUnityCare - Manor

600 W. Carrie Manor St.
Manor, TX 78653
Phone: (512) 978-9780

CommUnityCare - Montopolis

1200B Montopolis Drive
Austin, TX 78741
Phone: (512) 978-9800

CommUnityCare - Northeast Austin

7112 Ed Bluestein Blvd, Ste 155
Austin, TX 78723
Phone: (512) 978-9300

CommUnityCare - Oak Hill

8656-A HWY 71 West, Suite C
Austin, TX 78735
Phone: (512) 978-9820

CommUnityCare - Pflugerville

15822 Foothill Farms Loop
Pflugerville, TX 78660
Phone: (512) 978-9840

CommUnityCare - Rosewood-Zaragosa

2802 Webberville Road
Austin, TX 78702
Phone: (512) 978-9400

CommUnityCare - South Austin

2529 South First Street
Austin, TX 78704
Phone: (512) 978-9500

FAMILY PLANNING PROVIDERS

TRAVIS AND SURROUNDING COUNTIES

El Buen Samaritano Episcopal Mission

7000 Woodhue Drive

Austin, TX 78745

Phone: (512) 439-0701

Elgin Community Health Services

204 S. Main

Elgin, TX 78621

Phone: (512) 281-5520

Lone Star Circle of Care Ben White Health Clinic

1221 West Ben White Blvd., Ste B 200

Austin, TX 78704

Phone: (512) 524-9249

Family Medicine at Lake Area Medical Center

2423 Williams Drive, Suite 113

Georgetown, TX 78628

Phone: (512) 863-9208

Lone Star - A.W. Gimes Medical Offices

2051 Gattis School Road, Suite 250

Round Rock, TX 78664

Phone: (512) 238-5400

Lone Star Circle of Care - OB/GYN

2300 Round Rock Ave Ste 208

Round Rock, TX 78681

Phone: (512) 828-3300

Texas A&M Health Science Center

3950 North A.W. Grimes Blvd., Ste. 301A

Round Rock, TX 78665

Phone: (512) 524-9257

People's Community Clinic

2909 N. IH-35

Austin, TX 78722

Phone: (512) 478-4939

Austin Children's Center

2909 N. IH-35

Austin, TX 78722

Phone (512) 478-4939

Downtown Austin Clinic - Teen Clinic

1823 East Seventh Street

Austin, TX 78702

Phone: (512) 477-5846

NUECES AND SURROUNDING COUNTIES

Family Planning Clinic and Men's Health Center

4455 So. Padre Island Dr., Ste #30

Corpus Christi, TX 78411

Phone: (361) 883-0619

Family Planning Clinic and Men's Health Center

1218 N. Armstrong

Kingsville, TX 78363

Phone: (361) 595-1929

Family Planning Clinic and Men's Health Center

515 Pat Shutter Ave., Unit #121

Robstown, TX 78380

Phone: (361) 387-6996

Planned Parenthood - Alice Family Planning

313 E 1st Street

Alice, TX 78332

Phone: (210) 736-2244

Planned Parenthood Kingsville Family Planning

1028 South 14th Street

Kingsville, TX 78363

Phone: (210) 736-2244

San Patricio County Department of Public Health

Family Planning Clinic

2681 San Angelo

Ingleside, TX 78368

Phone: (361) 776-3591



FAMILY PLANNING PROVIDERS

NUECES AND SURROUNDING COUNTIES

Family Planning Clinic and Men's Health Center

287 Hwy. 35N
Rockport, TX 78382
Phone: (361) 729-7512

Family Planning Clinic and Men's Health Center

301 S. San Patricio St., Ste C
Sinton, TX 78387
Phone: (361) 364-3306

Planned Parenthood - Dillon Lane Clinic

4410 Dillon Lane, Ste 1
Corpus Christi, TX 78411
Phone: (361) 857-0101

San Patricio County Department of Public Health Family Planning Clinic

313 N Rachal
Sinton, TX 78387
Phone: (361) 364-6208

San Patricio County Department of Public Health Family Planning Clinic

600 N Frio
Mathis, TX 78368
Phone: (361) 547-3328

AMARILLO/LUBBOCK AREA

Community Health Center of Lubbock, Inc.

1318 Broadway
Lubbock, TX 79401
Phone: (806) 765-2611

Hockley County Women's Health Clinic

411 Austin Street
Levelland, TX 79336
Phone: (806) 894-6104

Lubbock Women's Health Clinic

602 W. Loop 289, Suite 100
Lubbock, TX 79416
Phone: (806) 687-9898

Lynn Co Hospital District Family Wellness Clinic

1705 Lockwood
Tahoka, TX 79373
Phone: (806) 998-4604

Regence Health Network - Tyler Street

200 Tyler Street
Amarillo, TX 79101
Phone: (806) 322-0561

Regence Health Network - Plainview Clinic

2601 Dimmit Road
Plainview, TX 79072
Phone: (806) 322-0561

Regence Health Network - Amarillo

850 Martin Road
Amarillo, TX 79107
Phone: (806) 322-0561

Regence Health Network - Yonkers Clinic

2606 Yonkers, Suite 4
Plainview, TX 79072
Phone: (806) 322-0561

FAMILY PLANNING PROVIDERS

AMARILLO/LUBBOCK AREA

Women's and Children's Health Center

814 Martin Road
Amarillo, TX 79107
Phone: (806) 468-4390

Texas Panhandle Family Planning and Health Centers

1501 S Taylor
Amarillo, TX 79101
Phone: (806) 372-8731

Plainview Women's Health Clinic

1501 C West 5th Street
Plainview, TX 79072
Phone: (806) 293-7246

South Plains Rural Health Services Inc

100 FM 300
Levelland, TX 79336
Phone: (806) 894-7842

Planned Parenthood Association of Lubbock, Inc.

Building 14, Briefcroft Office Park
Lubbock, TX 79412
Phone: (806) 795-7123

South Plains Public Health District - Terry County

919 E Main St.
Brownfield, TX 79316
Phone: (806) 637-2164

DALLAS AND SURROUNDING COUNTIES

East Dallas Women's Health Center

3320 Live Oak 5th Floor
Dallas, TX 75204
Phone: (214) 266-1200

Family Health Care, Inc.

3537 South I-35E, Suite 210
Denton, TX 76210
Phone: (940) 381-2313

Farmersville Family Medical Center

4311 Wesley Street
Farmersville, TX 75442
Phone: (972) 782-6131

Garland Women's Health Center

802 Hopkins, 2nd Floor
Dallas, TX 75040
Phone: (214) 266-0780

Maple Women's Health Center

6300 Harry Hines Blvd, Suite 600
Dallas, TX 75235
Phone: (214) 266-0130

McKinney Family Planning Center

1406 North McDonald, Suite C
McKinney, TX 75071
Phone: (214) 491-1728

Oakwest Women's Health Center

4201 Brook Springs
Dallas, TX 75224
Phone: (214) 266-1400

Irving Women's Health Center

1800 N Britain Road
Irving, TX 75061
Phone: (214) 266-3200

FAMILY PLANNING PROVIDERS

DALLAS AND SURROUNDING COUNTIES

Planned Parenthood - Terrell Health Services

804-E. Moore Ave
Terrell, TX 75160
Phone: (972) 563-7571

Planned Parenthood - Plano Health Services

1400 Summit, Ste CA
Plano, TX 75074
Phone: (972) 633-1300

Lakewest Women's Health Center

3737 Goldman Ave
Dallas, TX 75212
Phone: (214) 266-0900

Planned Parenthood - Dallas Surgical Center

7424 Greenville Ave, Ste 211B
Dallas, TX 75231
Phone: (214) 373-1868

Southeast Dallas Women's Health Center

9202 Elam Road
Dallas, TX 75217
Phone: (214) 266-1500

Planned Parenthood - Lewisville Health Services

1288 West Main, Ste 209
Lewisville, TX 75067
Phone: (972) 221-7644

Planned Parenthood - Mesquite Health Services

3220 Gus Thomasson, Suite 231
Mesquite, TX 75150
Phone: (972) 285-0271

Kaufman Community Health Center

101 N. Houston Street
Kaufman, TX 75142
Phone: 972-932-7001

DeHaro Saldivar Women's Health Center

1400 N. Westmoreland Road
Dallas, TX 75211
Phone: (214) 266-0580

WISH Tubal Clinic Parkland Hospital

5201 Harry Hines Blvd
Dallas, TX 75235
Phone: (214) 290-1712

*You can find a complete listing of family planning services providers at DSHS's website at:
<http://www.dshs.state.tx.us/famplan/locator.shtm>*

TEXAS HEALTH STEPS

WHAT IS TEXAS HEALTH STEPS?

WHAT SERVICES ARE OFFERED BY TEXAS HEALTH STEPS?

Texas Health Steps provides free regular medical and dental checkups for infants, children, teens and young adults with Medicaid. It also offers other services like vaccines and vision and hearing screenings.

Texas Health Steps helps to:

- Find and treat your child's medical and dental problems early.
- Make sure your child gets their vaccines
- Give health education to keep your child healthy

During a Texas Health Steps medical checkup, the doctor will look at your child from head to toe, checking for health problems you may not know about. The doctor will also see if your child is growing and developing like other children their age. These checkups can help catch health problems before they get worse and are harder to treat.

Important:

STAR Health Members who are 20 years old and younger need to have a checkup within 30 days and a dental checkup within 60 days of joining the STAR Health program.

HOW AND WHEN DO I GET TEXAS HEALTH STEPS MEDICAL AND DENTAL CHECKUPS FOR MY CHILD?

Regular medical checkups help make sure that your child grows up healthy. You should take them to their doctor or another Superior Texas Health Steps provider for medical checkups at the following ages:

- | | | |
|-------------|-------------|------------|
| • 3-5 days | • 30 months | • 12 years |
| • 2 weeks | • 3 years | • 13 years |
| • 2 months | • 4 years | • 14 years |
| • 4 months | • 5 years | • 15 years |
| • 6 months | • 6 years | • 16 years |
| • 9 months | • 7 years | • 17 years |
| • 12 months | • 8 years | • 18 years |
| • 15 months | • 9 years | • 19 years |
| • 18 months | • 10 years | • 20 years |
| • 2 years | • 11 years | |

TEXAS HEALTH STEPS

Your child should also get regular dental checkups to make sure his or her teeth and gums are healthy. Dental checkups need to start at age six months and every six months after that. You can go to any Texas Health Steps dentist for a dental checkup. Ask your doctor for the name of a dentist near you or call Member Services at 1-866-912-6283. You can also call Delta Dental, Superior's dental provider at 1-866-287-3419. You do not need a referral from your doctor for regular dental checkups or other dental services.

During a Texas Health Steps dental checkup, the dentist will look at your child's mouth, checking for dental problems you may not know about. The dentist will also see if your child's mouth and teeth are developing like other children their age. These checkups can help catch dental problems before they get bigger and harder to treat.

Ask your dentist about dental sealants for your child. A dental sealant is a plastic material put on the back teeth that can help prevent tooth decay.



HOW DO I MAKE MY CHILD'S APPOINTMENT FOR A TEXAS HEALTH STEPS MEDICAL CHECKUP?

You can setup a checkup with your child's doctor. You can also setup a checkup with any Superior provider that gives Texas Health Steps checkups. Need help? You can call Superior toll-free, Monday to Friday, 8 a.m. to 5 p.m. at 1-866-912-6283. Help keep your child healthy.

DO I HAVE TO HAVE A REFERRAL?

You do not need a referral to get Texas Health Steps medical or dental services.

WHAT IF I NEED TO CANCEL AN APPOINTMENT?

Please call your doctor or dentist's office if you need to change or cancel your child's visit. If transportation to the visit was made through the medical transportation service, please call 1-877-633-8747 to cancel the trip.

DOES MY DOCTOR HAVE TO BE A PART OF THE SUPERIOR NETWORK?

If you go to a doctor that is not signed-up as a Superior provider, Superior may not pay that doctor and you may get billed for the services.

WHAT IF I AM OUT OF TOWN AND MY CHILD IS DUE FOR A TEXAS HEALTH STEPS CHECKUP?

If you are out of town and your child is due for a Texas Health Steps checkup, call Superior at 1-866-912-6283. They will help you set up a visit with your doctor as soon as you get home.

BONUS BENEFITS

WHAT EXTRA BENEFITS DOES A MEMBER OF SUPERIOR HEALTHPLAN GET? HOW DO I GET THESE BENEFITS?

Now that you/your child are a member of Superior, you are able to get our extra services such as:

- NurseWise® Superior's 24-hour nurse hotline available to answer your health questions
- Extra transportation benefits, such as bus tokens for medical and non-medical visits such as health education classes (where available)
- START SMART for Your Baby®, a special program for pregnant women that includes education classes, service management and baby showers
- Home visits to new mothers where available
- Pregnant Members and members in other Superior case management programs may qualify for a Superior provided pre-programmed cell phone to allow immediate access to doctors, case managers, 911, NurseWise, and other key contacts in their personal support system
- Quarterly Member Newsletter

Superior is always planning new and exciting programs and services to help keep you/your child healthy. If you need help in getting these extra services or would like more facts, call Superior at 1-866-912-6283.

REMEMBER

If you have any questions on what is or what is not a covered service, call Superior at 1-866-912-6283.

WHAT OTHER SERVICES CAN MY PLAN HELP ME WITH?

Superior cares about your health and well-being. We have many services and agencies that we work with to help get you the care you need. Some of these services/agencies include:

- Prescription Medications
- Early Childhood Intervention (ECI)
- Department of Aging and Disability Services (DADS)
- Public Health Departments
- DARS Division of Blind Services
- Medical Transportation Service

To learn more about these services, call Superior at 1-866-912-6283.



SUPERIOR HEALTH TIP:

*Depression can be treated. Cenpatico can help.
Call 1-866-218-8263 or TTY (hearing impaired)
1-800-735-2989 to learn more.*

BONUS BENEFITS

HOW CAN I LEARN MORE ABOUT THE BENEFITS AND SERVICES THAT ARE AVAILABLE?

Superior wants to make sure you are linked to quality health care and social services. The Superior CONNECTIONS staff can teach you how to use Superior's services. They can visit you at home, talk to you on the phone or send you facts by mail. They will help you with things like:

- How to pick a doctor
- The STAR Health Program
- Transportation Services
- How to use Superior Services
- How to use your/your child's Member Handbook
- Texas Health Steps
- Preventive, Urgent and Emergent Care
- Visits to Specialists
- Complaint and Appeal Procedures



Superior CONNECTIONS can give you resources to help you get food, housing, clothing and utility services. To learn more or to see what classes are being offered at this time, please call Superior's CONNECTIONS staff at 1-866-912-6283.

WHAT HEALTH EDUCATION CLASSES DOES SUPERIOR OFFER?

Superior wants you to lead a healthy life. That is why we started the Superior Health Education Program. This program gives you facts to help make better health choices for you and your family. Classes will be given near you. The information about time and place will be mailed to your home. Classes include:

- Member Orientation - These classes are for all Superior Members.
- START SMART for Your Baby Program - A special program for pregnant women that includes education classes, service management and baby showers.

HEALTH EDUCATION CLASSES OFFERED BY OTHER AGENCIES

Superior will also let you know about other health education classes offered within the community that can help you and your family. Some community health education programs are:

- Youth Diabetes Education classes
- Youth Asthma Education classes
- Nutrition classes for the whole family
- CPR classes
- Healthy Diet classes

If you need extra help because you are pregnant or if you or your child has asthma or another serious medical condition, call Superior at 1-866-912-6283. They will refer you to Superior's service management program. It has registered nurses who can help you manage your (or your child's) illness. The nurses will work with you and your doctor(s) to coordinate your care and make sure you have what you need to help keep you healthy.

BONUS BENEFITS

ASTHMA PROGRAM

If you or your child has asthma, Superior has special program that can help you. Asthma is a disease that makes it hard to breathe. People with asthma have:

- Shortness of breath
- Have a tightness in their chest
- Make a whistling sound when they breathe
- Cough a lot, especially at night

Call Superior at 1-866-912-6283 if you or your child:

- Has been in the hospital for asthma during the past year
- Has been in the emergency room in the past two months for asthma
- Has been in the doctor's office three or more times in the past six months for asthma
- Takes oral steroids for asthma



SERVICE MANAGEMENT

Superior has experienced nurses who can help you/your child understand problems you/your child may have, like:

- Asthma
- Diabetes
- Chronic obstructive pulmonary disease (COPD)
- Transplants
- Using the emergency room frequently
- Being in the hospital often
- Wounds that won't heal
- Multiple diseases or conditions

Our nurses will help you/your child stay healthy and get you/your child the care you/your child need. We help you/your child find care close to you/your child. We will work with your/your child's doctor to improve your/your child's health. The goal of our program is to learn what information or services you/your child need. We want you/your child to become more independent with you/your child health. Please call us at 1-866-912-6283 to talk to a nurse.

Also:

- Superior nurses may contact you/your child if a doctor asks us to call, if you/your child ask us to call, or if Superior feels we can help you/your child.
- We may ask you/your child questions about your/your child's health.
- We will give you/your child information to help you/your child understand how to get the care you/your child need.
- We will talk to your/your child's doctor and other people who treat you/your child, to get you/your child care.
- If you/your child want to talk to a nurse about being in this program, call us at 1-866-912-6283.

ADVANCED DIRECTIVES

THIS SECTION APPLIES TO YOUNG ADULTS 18 YEARS AND OLDER ONLY.

WHAT IF I AM TOO SICK TO MAKE A DECISION ABOUT MY MEDICAL CARE?

All adults in hospitals, nursing homes, behavioral health facilities and other health care places have rights. For example, you have the right to know what care you will get, and that your medical records will always be private.

A federal law gives you the right to fill out a paper form known as an “Advance Directive.” An Advance Directive is a living will or power of attorney for health care when a person is not able to make a decision on their own because of their health. It gives you the chance to put your wishes in writing about what kind of health care you Want or Do Not Want, under special, serious medical conditions when you might not be able to tell your wishes to your doctor, the hospital, or other staff.

WHAT ARE ADVANCED DIRECTIVES? HOW DO I GET AN ADVANCED DIRECTIVE?

An advance directive lets you make decisions about your health care before you get too sick. What you decide is put in writing. Then, if you become too sick to make decisions about your health care, your doctor will know what kind of care you do or do not want. The advanced directive can also say who can make decisions for you if you are not able to.

Through this document, you will have the right to make decisions about your health care like what kind of health care, if any, you will or will not accept. If you sign either of these documents, your doctor will make a note in your medical records so that other doctors know about it.

Superior wants you to know your right to decide so you can fill out the papers ahead of time. These are the types of Advance Directives you can choose under Texas law:

- Directive to Doctor (Living Will) – A living will tells your doctor what to do. If you are near death, it will tell the doctor you don’t want to get care. In the State of Texas you can make a living will. Your doctor must follow your living will in case you become too sick to decide about your care.
- Durable Power of Attorney for Health care – This form gives the person who signs it power. This person can make decisions about your health care if you are not able to.
- Declaration of Mental Health Treatment – This tells your doctor about the mental health care you want. In the State of Texas you can make this choice. It expires three years after you sign it or at any time you pick to cancel it unless a court has considered you incapacitated.
- Out-of-Hospital Do Not Resuscitate – This tells your doctor what to do if you are about to die. In the State of Texas your doctor must follow this request if you become too sick.

When you talk to your doctor about an Advance Directive, he or she might have the forms in their office to give you. You can also call Superior at 1-866-912-6283 and we will help you get one.

MEDICAL BILLS

WHAT DO I DO IF I GET A BILL FROM MY DOCTOR? WHO DO I CALL?

If you have Medicaid, you should not be billed for any services covered by Medicaid. Please remember to always show your Medicaid ID Card and Superior ID card before you see the doctor. If you get a bill from a Medicaid provider, call Member Services at 1-866-912-6283.

WHAT INFORMATION WILL THEY NEED?

When you call, give the Member Services Staff:

- Date of Service
- Your Patient Account Number
- Name of Provider
- Phone number on the bill
- Total Amount of Bill

You will need to pay for services not covered by Medicaid. It is your responsibility to determine which services are covered and which are not.

Remember:

If you go to a doctor that is not signed-up as a Superior provider and is not a Medicaid provider, Superior will not pay that doctor and you will get billed for the services.



SUPERIOR HEALTH SAFETY TIP:

*Medications can be safe if you take them correctly.
Medicines can help you get better when you are sick.
Medicines can also keep a health problem under good control.*

Here are a few tips on how to use medicine safely:

- *Read and follow the directions on the label.*
- *Take the exact amount written on the label.*
- *Take each dose around the same time each day.*
- *Use the same pharmacy for all of your prescriptions.*
- *Don't share your medicine or take someone else's medicine.*
- *Check the expiration date on the label and don't take it past that date.*

COMPLAINTS & APPEALS

WHAT SHOULD I DO IF I HAVE A COMPLAINT? WHO DO I CALL?

Superior wants to help. If you have a complaint, please call us toll-free at 1-866-912-6283 to tell us about your problem.

You can also file a complaint through our website. Go to <http://www.fostercaretx.com> Click on "Contact Us" in the top right corner of the page. You can also use Superior's complaint form. A copy of the complaint form can be printed from Superior's website. You can mail the form to:

Superior HealthPlan
ATTN: Complaints
2100 South IH-35, Suite 202
Austin, TX 78704

Or you can fax your form to 1-866-683-5369.

CAN SOMEONE FROM SUPERIOR HELP ME FILE A COMPLAINT?

A Superior Member Services Advocate can help you file a complaint. Just call 1-866-912-6283 (TTY 1-800-735-2989) or, you can call a Member Advocate in your area at:

Amarillo/Lubbock Area - (806) 698-0267	El Paso Area - (915) 778-7835
Bexar Area - (210) 615-9399	Nueces Area - (361) 994-5600
Dallas Area - (866) 534-5949	Travis Area - (512) 692-1465

HOW LONG WILL IT TAKE TO PROCESS MY COMPLAINT?

Most of the time we can help you right away or at the most within a few days. Superior will have a written answer to your complaint within 30 days of the date you submit your complaint.

IF I AM NOT SATISFIED WITH THE OUTCOME, WHO ELSE CAN I CONTACT?

Once you have gone through the Superior complaint process, you can complain to the Health and Human Services Commission (HHSC) by calling toll-free at 1-800-252-8263. If you would like to make your complaint in writing, please send it to the following address:

Texas Health and Human Services Commission
Health Plan Operations – H320
ATTN: Resolution Services
P.O. Box 85200
Austin, TX 78708-5200

WHAT IS A PRE-APPEALS PROCESS?

There may be times when your child's doctor will request services that may not meet medical necessity. Before denial is given, Superior's medical director will get in touch with the doctor requesting the services. The director will ask your child's doctor questions about the services that he or she is requesting. Your child's doctor may have new information that wasn't presented before that can help with the approval process. This new information may help the medical director approve the request. Superior will let the medical consentor and the DFPS caseworker know what is happening with the request as it moves through the pre-appeals process.

COMPLAINTS & APPEALS

DO I HAVE THE RIGHT TO MEET WITH A COMPLAINT APPEAL PANEL?

If you are not satisfied with Superior's response to your complaint, you have the right to meet with a complaint appeal panel. The panel is made up of Members, Providers and Superior staff. The Panel will meet with you and a final response to your complaint will be completed within thirty (30) calendar days of receiving your written request for an appeal.

HOW WILL I FIND OUT IF SERVICES ARE DENIED OR LIMITED? WHAT CAN I DO IF MY DOCTOR ASKS FOR A SERVICE FOR ME/MY CHILD THAT'S COVERED BY SUPERIOR, BUT SUPERIOR DENIES OR LIMITS IT?

Superior will send you a letter if a requested service is denied or limited. If you disagree with the decision, you may file an appeal.

WHEN DO I HAVE THE RIGHT TO ASK FOR AN APPEAL?

You have the right to appeal Superior's decision if Medicaid covered services are denied based on lack of medical need. Superior's denial is called an "action" or "adverse determination." You can appeal the action if you think Superior:

- is stopping coverage for care you think you/your child needs
- is denying coverage for care you think should be covered
- has not paid a hospital bill you think we should pay
- limits a request for a covered service

You, a doctor, or someone else acting on your/your child's behalf can appeal an action.

CAN SOMEONE FROM SUPERIOR HELP ME FILE AN APPEAL?

A Superior Member Services Advocate can help you file an appeal. Just call 1-866-912-6283.

WHAT ARE THE TIMEFRAMES FOR THE APPEALS PROCESS?

You will have 30 days from the date of the denial letter to appeal the decision. Superior will acknowledge your appeal within 5 days of receipt, and complete the appeal within 30 days. If more time is needed to gather facts about the requested service, you will receive a letter with the reason for the delay.

HOW CAN I ASK FOR CONTINUITY OF CURRENT AUTHORIZED SERVICES?

If you are receiving a service that is being ended, suspended or reduced, you must file an appeal on or before the later of:

- 10 Days following Superior's mailing of the denial letter (10 days from the postage stamp date on the envelope) or
- On the intended effective date of the proposed action

Superior will keep providing the benefits while your appeal is being reviewed, if:

- Your appeal is sent in the needed time frame;
- Your appeal is for a service that was denied or limited, that had been previously approved; and
- Your appeal is for a service ordered by a Superior approved provider.

Call Superior at 1-866-912-6283 for more information.



COMPLAINTS & APPEALS

DOES MY REQUEST HAVE TO BE IN WRITING?

You can call us to let us know you want to appeal an action, but you must follow up your phone call with a request in writing. If you need help, Superior can help you put your appeal in writing.

WHAT IS AN EXPEDITED APPEAL?

An expedited appeal is when the health plan has to make a decision quickly based on the condition of your health, and taking the time for a standard appeal could jeopardize your life or health. You can ask for an expedited appeal by calling Superior's Medical Management Department at 1-800-218-7453. You can also ask for an expedited appeal in writing and send it to Superior's Medical Management Department, by mail or fax at:

Superior HealthPlan
ATTN: Medical Management
2100 S. IH-35, Suite 202
Austin, Texas 78704
1-866-918-2266 (fax)

If your appeal is about an ongoing emergency or denial to keep getting a hospital stay, Superior will make a decision about your expedited appeal within one business day. Other expedited appeals will be decided within three days. This process can be extended up to 14 days if more facts are needed.

Superior's Member Advocate can help you with your expedited appeal. You can also have your doctor, a friend, a relative, lawyer or another spokesperson help you.

WHO CAN HELP ME FILE AN EXPEDITED APPEAL?

A Superior Member Advocate can help you file an appeal or request an expedited appeal. You can call the Member Advocate at 1-866-912-6283.

WHAT HAPPENS IF THE HEALTH PLAN DENIES THE REQUEST FOR AN EXPEDITED APPEAL?

If Superior thinks your appeal does not need to be expedited, Superior will let you know right away. The appeal will still be worked on but the resolution may take up to 30 days.



RIGHTS & RESPONSIBILITIES

CAN I ASK FOR A STATE FAIR HEARING?

If you, as a member of the health plan, disagree with Superior's final decision, you have the right to ask for a fair hearing. You may name someone to represent you by writing a letter to the health plan telling them the name of the person you want representing you. A doctor or other medical provider may be your representative. If you want to challenge a decision made by your health plan, you or your representative must ask for the fair hearing within 90 days of the date on the health plan's letter with the decision. If you do not ask for the fair hearing within 90 days, you may lose your right to a fair hearing. To ask for a fair hearing, you or your representative should either send a letter to Superior at:

Superior Health Plan
Attn: Fair Hearings Coordinator
2100 S. IH 35 Suite 202
Austin, Texas 78704

or call 1-866-912-6283

You have the right to keep getting any service the health plan denied or reduced, at least until the final hearing decision is made, if you ask for a fair hearing by the later of: (1) 10 days from the date you get the health plan's decision letter, or (2) the day the health plan's letter says your service will be reduced or end. If you do not request a fair hearing by this date, the service the health plan denied will be stopped.

If you ask for a fair hearing, you will get a packet of information letting you know the date, time and location of the hearing. Most fair hearings are held by telephone. At that time, you or your representative can tell why you need the service the health plan denied.

HHSC will give you a final decision within 90 days from the date you asked for the hearing.

You can ask for a fair hearing by contacting the Health and Human Services Commission (HHSC) at 1-800-252-8263. If you would like to make your request in writing, send it to:

Texas Health and Human Services Commission
Health Plan Operations – H320
Attn: Resolution Services
P O Box 85200
Austin, TX 78708-5200

You do not have a right to a fair hearing if Medicaid does not cover the service you asked for.

RIGHTS & RESPONSIBILITIES

WHAT ARE MY RIGHTS AND RESPONSIBILITIES?

MEMBER RIGHTS:

1. You have the right to respect, dignity, privacy, confidentiality and nondiscrimination. That includes the right to:
 - a) Be treated fairly and with respect.
 - b) Know your medical records and discussions with your providers will be kept private and confidential.
2. You have the right to a reasonable opportunity to choose a primary care provider. This is the doctor or health care provider you will see most of the time and who will coordinate your care. You have the right to change to another provider in a reasonably easy manner. That includes the right to:
 - a) Be told of how to choose and change your primary care provider;
 - b) Choose a primary care provider from your health plan;
 - c) Change your primary care provider;
 - d) Be told how to change your primary care provider.
3. You have the right to ask questions and get answers about anything you do not understand. That includes the right to:
 - a) Have your provider explain your health care needs to you and talk to you about the different ways your health care problems can be treated.
 - b) Be told why care or services were denied and not given.
4. You have the right to agree to or refuse treatment and actively participate in treatment decisions. That includes the right to:
 - a) Work as part of a team with your provider in deciding what health care is best for you.
 - b) Say yes or no to the care recommended by your provider.
5. You have the right to use each complaint and appeal process available through the health plan and through Medicaid, and get a timely response to complaints, appeals and fair hearings. That includes the right to:
 - a) Make a complaint to your health plan or to the state Medicaid program about your health care, your provider or your health plan.
 - b) Get a timely answer to your complaint.
 - c) Use the plan's appeal process and be told how to use it.
 - d) Ask for a fair hearing from the state Medicaid program and get information about how that process works.
6. You have the right to timely access to care that does not have any communication or physical access barriers. That includes the right to:
 - a) Have telephone access to a medical professional 24 hours a day, 7 days a week to get any emergency or urgent care you need.
 - b) Get medical care in a timely manner.
 - c) Be able to get in and out of a health care provider's office. This includes barrier free access for people with disabilities or other conditions that limit mobility, in accordance with the Americans with Disabilities Act.
 - d) Have interpreters, if needed, during appointments with your providers and when talking to your health plan. Interpreters include people who can speak in your native language, help someone with a disability, or help you understand the information.

RIGHTS & RESPONSIBILITIES

- e) Be given information you can understand about your health plan rules, including the health care services you can get and how to get them.
- 7. You have the right to not be restrained or secluded when it is for someone else's convenience, or is meant to force you to do something you do not want to do, or is to punish you.
- 8. You have a right to know that doctors, hospitals, and others who care for your child can advise you about your child's health status, medical care, and treatment. Your health plan cannot prevent them from giving you this information, even if the care or treatment is not a covered service.
- 9. You have the right to know that you are not responsible for paying for covered services. Doctors, hospitals, and others cannot require you to pay copayments or any other amounts for covered services.
- 10. You have the right to make recommendations about Superior's Member Rights & Responsibilities Policies.

MEMBER RESPONSIBILITIES:

- 1. You must learn and understand each right you have under the Medicaid Program. That includes the responsibility to:
 - a. Learn and understand your rights under the Medicaid program;
 - b. Ask questions if you don't know your rights.
- 2. You must abide by the STAR Health health plan's and Medicaid's policies and procedures. That includes the responsibility to:
 - a. Learn and follow the STAR Health health plan's rules and Medicaid rules.
 - b. Choose a primary care provider quickly;
 - c. Make any changes in your primary care provider in the ways established by Medicaid and by the STAR Health health plan.
 - d. Keep your scheduled appointments.
 - e. Cancel appointments in advance when you can not keep them.
 - f. Always contact your primary care provider first for your non-emergency medical needs.
 - g. Be sure to have approval from your primary care provider before going to a specialist.
 - h. Understand when you should and should not go to the emergency room.
- 3. You must share information about your health with your primary care provider and learn about service and treatment options. That includes the responsibility to:
 - a. Tell your primary care provider about your health.
 - b. Talk to your providers about your health care needs and ask questions about the different ways your health care problems can be treated.
 - c. Help your providers get your medical records.
- 4. You must be involved in decisions relating to service and treatment options, make personal choices, and take action to keep yourself healthy. That includes the responsibility to:
 - a. Work as a team with your provider in deciding what health care is best for you.
 - b. Understand how the things you do can affect your health.
 - c. Do the best you can to stay healthy.
 - d. Treat providers and staff with respect.

RIGHTS & RESPONSIBILITIES

If you think you have been treated unfairly or discriminated against, call the U.S. Department of Health & Human Services (HHS) toll-free at 1-800-368-1019. You can also view information concerning the HHS Office of Civil Rights online at www.hhs.gov/ocr.

AS A MEMBER OF SUPERIOR HEALTHPLAN, YOU CAN ASK FOR AND GET THE FOLLOWING INFORMATION EACH YEAR:

- Information about network providers – at a minimum primary care doctors, specialists and hospitals in our service area. This information will include names, addresses, telephone numbers, qualifications, and languages spoken (other than English) for each network provider, plus identification of providers that are not accepting new patients.
- Any limits on your freedom of choice among network providers.
- Your rights and responsibilities.
- Information on complaint, appeal and fair hearing procedures.
- Information about benefits available under the Medicaid program including the amount, duration, and scope of benefits available. This is designed to make sure you understand the benefits to which you are entitled.
- How you get benefits including authorization requirements.
- How members can get benefits, including family planning services, from out-of-network providers and/or limits to those benefits.
- How you get after hours and emergency coverage and/or limits to those kinds of benefits, including:
 - What makes up emergency medical conditions, emergency services and post-stabilization services.
 - The fact that you do not need prior authorization from your primary care provider for emergency care services.
 - How to get emergency services, including instructions on how to use the 911 telephone system or its local equivalent.
 - The addresses of any places where providers and hospitals furnish emergency services covered by Medicaid.
 - A statement saying you have the right to use any hospital or other settings for emergency care.
 - Post-stabilization rules.
- Policy on referrals for specialty care and for other benefits you cannot get through your primary care provider.
- Superior's practice guidelines.

PHYSICIAN INCENTIVE PLAN

You have the right to know if your Primary Care Provider is participating in a Physician Incentive Plan through Superior. You can call 1-866-912-6283 to get this information.

RIGHTS & RESPONSIBILITIES

YOUR RIGHT TO PRIVACY

THE FOLLOWING NOTICE DESCRIBES HOW MEDICAL FACTS ABOUT YOU ARE TO BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THESE FACTS PLEASE REVIEW IT CAREFULLY.

At Superior HealthPlan, your privacy is important to us. We will do all we can to protect your health records. You may get a copy of our privacy notice at www.superiorhealthplan.com or by calling Member Services at 1-866-912-6283. By law, we must protect your health records and send you this notice. This notice tells you how we use your health records. It describes when we can share your records with others. It explains your rights about the use of your health records. It also tells you how to use those rights and who can see your health records. This notice does not apply to facts that does not identify you.

When we talk about your health records in this notice, it includes any facts about your past, present or future physical or mental health while you are a member of Superior HealthPlan. This includes providing health care to you. It also includes payment for your health care while you are our member.

Please note: You will also receive a Privacy Notice from the State of Texas outlining their rules for your health records. Other health plans and health care providers have other rules when using or sharing your health records. We ask that you get a copy of their Privacy Notices and read it carefully.

SUPERIOR HEALTH TIP:



If you have diabetes, there are certain tests you need at least once a year. These include your Hemoglobin A1c and cholesterol screening. You should also have your eyes and kidneys checked at least once a year. Call your doctor to schedule an appointment.

FRAUD AND ABUSE

DO YOU WANT TO REPORT WASTE, ABUSE, OR FRAUD?

Let us know if you think a doctor, dentist, pharmacist at a drug store, other health care providers, or a person getting benefits is doing something wrong. Doing something wrong could be waste, abuse or fraud, which is against the law.

For example, tell us if you think someone is:

- Getting paid for services that weren't given or necessary.
- Not telling the truth about a medical condition to get medical treatment.
- Letting someone else use their Medicaid ID.
- Using someone else's Medicaid ID.
- Not telling the truth about the amount of money or resources he or she has to get benefits.

To report waste, abuse, or fraud, choose one of the following:

- Call the OIG Hotline at 1-800-436-6184 or
- Visit <https://oig.hhsc.state.tx.us/> and pick "Click Here to Report Waste, Abuse, and Fraud" to complete the online form.
- You can report directly to your health plan:

Superior HealthPlan
2100 S. IH-35, Suite 202
Austin, TX 78704
1-866-685-8664

To report waste, abuse or fraud, gather as much information as possible.

When reporting about a provider (a doctor, dentist, counselor, etc.) include:

- Name, address, and phone number of provider;
- Name and address of the facility (hospital, nursing home, home health agency, etc.);
- Medicaid number of the provider and facility if you have it;
- Type of provider (doctor, physical therapist, pharmacist, etc.);
- Names and the number of other witnesses who can help in the investigation;
- Dates of events; and
- Summary of what happened.
-

When reporting about somebody one who gets benefits, include:

- The person's name;
- The person's date of birth, social security number or case number if you have it;
- The city where the person lives;
- Specific details about the waste, abuse or fraud.

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*Thank you for being a
Superior Member!*

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