

January 1, 2024

Easy Guide

to Health Share of Oregon, CareOregon and the Oregon Health Plan



Welcome

We're glad you're in the CareOregon and Health Share of Oregon family

CareOregon is proud to be part of the Health Share of Oregon coordinated care organization (CCO). Whether you're a new member or have been with us for a while, we hope this Easy Guide makes the Oregon Health Plan (OHP) easy to use. You can also find details about your coverage online in the Members section at careoregon.org/members or call CareOregon Customer Service at 503-416-4100, 800-224-4840 or TTY 711.





Benefits overview

The Oregon Health Plan provides benefits in many areas

We're here for you at every step.....	2
Welcome call and questionnaire	3
Medical care from your primary care provider	4
Physical health (traditional and alternative care)	6
Choosing a provider	8
Dental care benefits.....	10
Mental health care and substance use treatment	12
Pharmacy benefits and services.....	14
Language services	16
Preferred Language card.....	17
Transportation.....	18
Care coordination	20
Who is CareOregon	22
Other questions?	24
Important contact information.....	26

Let's get started.

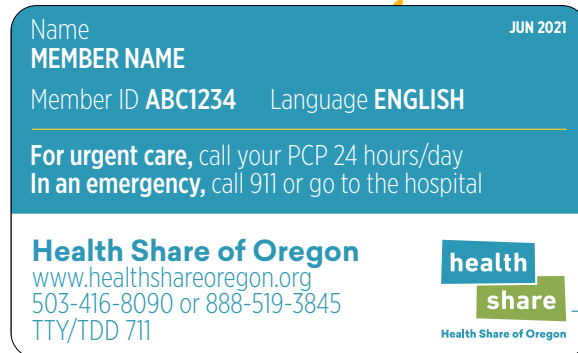
We're here for you at every step.

Member ID card

- ▶ Your Member ID card will come soon. It shows your benefits, which may include physical, dental and mental health care and substance use treatment. Your welcome letter will also tell you what benefits you have.
- ▶ When you visit your provider or the pharmacy, bring both your Health Share Member ID card and a photo ID. (If you also have Medicare coverage, please bring your Medicare ID card, too.)

Start with a wellness visit

- ▶ As soon as you can, call the primary care provider's office on the front of your Member ID card. Let the clinic know you're a new patient and CareOregon member, and that you'd



Your Coordinated Care Organization (CCO)

Your Physical Health Plan

Your Dental Health Plan

Your Primary Care Provider (PCP)



Your Mental Health Plan

like to schedule a wellness visit. Many providers offer telehealth appointments, which are appointments by phone or video. Ask your provider what kind of appointment is best for you.



Welcome call and questionnaire

If you are a new member, you will be receiving a welcome call soon from CareOregon. We will be happy to answer any questions you may have about your coverage and benefits. We will also send you a survey about your health in the mail soon. When you get it, please take a minute to fill it out. These questions help us learn more about you and your needs and how we can best support you! Once we have your answers, our Care Coordination team will review them. We may call you to share some health resources that can help you.

Stay connected to care

- ▶ To keep your OHP coverage, you may need to reapply every 12 months. OHP will send you a letter about how to do this.
- ▶ If your address, name or phone number changes, update your account at one.oregon.gov

We're here to help

- ▶ CareOregon Customer Service: 503-416-4100, toll-free 800-224-4840 or TTY 711. We can help with common needs like finding a provider or refilling a prescription.



Medical care from your primary care provider

A primary care provider, often known as a PCP, is the person who knows your health best. Your PCP might be a doctor, nurse practitioner or physician's assistant. If needed, your PCP can refer you to a specialist for cancer, pregnancy, physical therapy and much more. These services are all covered by CareOregon. **Start with your PCP for all of your health care needs.**

Build a relationship with your PCP



As a CareOregon member, you are automatically assigned to a PCP, and you'll find their name and number on your Member ID card. But it's also important for your PCP to get to know you. As soon as you receive your Member ID card, make an appointment with your assigned PCP — for a regular check-up, even if you're not sick.

Here's what a strong relationship with your PCP looks like:



See your PCP for regular checkups and health screenings.



Get care for minor health issues like cold, flu, fever, chronic pain, etc.



They can help prevent serious problems by staying on top of your health, and find issues when they arise.



Your PCP sees you often, so they know you best!

They can:

- Diagnose you better because they understand your health.
- Review your medications to make sure they're up to date.
- Decide if you need to see specialists.
- Advise you about how to feel better.
- Make sure you get what you need to stay healthy.

PCP, urgent care or emergency room?



Go to your PCP for...

- ▶ Checkups.
- ▶ Tests and health screening.
- ▶ Mild illness (cold, flu, constipation, etc.).
- ▶ After-hours care: All providers in our network offer after-hours help.



Go to urgent care if...

- ▶ You need immediate care and your PCP tells you to go to urgent care or can't see you.
- ▶ You aren't assigned to a PCP.



Go to the ER for...

Life-threatening symptoms, like these:

- ▶ Chest pain
- ▶ Hard time breathing
- ▶ Head trauma
- ▶ Mental distress

Physical health (traditional and alternative care)

Your physical health plan is administered by CareOregon

Your benefits include:

- ▶ Visits to your medical providers
- ▶ Lab tests and X-rays
- ▶ Family planning
- ▶ Pregnancy care
- ▶ Hospital stays
- ▶ Hearing services
- ▶ Durable medical equipment, such as a wheelchair or walker
- ▶ Physical therapy, chiropractic care, acupuncture and other alternative care for specific health conditions (with authorization)
- ▶ Prescription drugs (See Pharmacy section)

Your PCP may be a doctor a nurse practitioner, a physician's assistant or a naturopath. To make the most of your visit with your PCP, it's a good idea to prepare. Bring a list of questions you may have. Also, bring a list of all the medications you are currently taking.

Routine vision

Vision services are provided through Vision Service Plan (VSP). Routine eye exams and glasses are covered for members who are:

- ▶ Under 21 or pregnant, when needed and at least every 24 months
- ▶ 21 and older and not pregnant, every 24 months

Contact VSP directly for help with your eligibility, benefits and claims. Go to [vsp.com](https://www.vsp.com) or call VSP Member Services at 800-877-7195. If you have an eye infection or injury, call your PCP to help care for this.

Pregnancy

Newborns are not automatically enrolled in OHP. If you become pregnant, be sure to let OHP know right away so that your child will be covered. Call OHP toll-free at 800-699-9075 or email oregon.benefits@dhsosha.state.or.us

CareOregon also has a program for new parents called CareBaby. It's a special program that was created to help guide our pregnant members through their pregnancy.

We share details about extra benefits. Give you simple checklists for each trimester. And offer ideas, like prenatal vitamins and dental appointments, to help you and your baby be healthy and happy. If you want to know more, go to careoregon.org/carebaby

We cover emergency and urgent care anywhere in the U.S.

Choosing a provider

It's important to have a trusting relationship with all of your providers — including physical, providers. A close relationship means your provider knows you and your health best, and you feel comfortable when you see them. Health Share/CareOregon wants to help you build that relationship and find a provider who works best for you.

Building a relationship



In a good, close relationship with a provider:

- ▶ You can talk with your provider about personal things.
- ▶ You feel listened to and safe.
- ▶ You know that your provider will advocate for your unique needs and give you advice you can trust.

How to choose a provider



- ▶ **Location:** Are they near you?
- ▶ **What makes you you:** Will they understand the issues related to your race, gender, sexual orientation, religion, personal history, culture or whatever makes you unique?
- ▶ **Language:** Do they speak your language?
- ▶ **Approach to care:** Do they offer the services you want?

Switching providers

If you want to switch from one provider to another, that's okay.



To change your provider:

- 1** Find a new provider you'd like to try:
 1. For physical health, visit careoregon.org/find-a-provider
 2. For mental health and substance use treatment, visit healthshare-bhplan-directory.com
 3. For dental health, contact your dental plan (listed on your Member ID card).
- 2** Or, call Customer Service at 800-224-4840 or TTY 711 and we'll help you find a new provider.
- 3** When you've found a new provider, call them and make an appointment.

Dental care benefits

Taking care of your teeth and gums is an important way to take care of your overall health. That's why dental care is covered as part of your Health Share/CareOregon benefits.

Your dental benefit package includes services such as:



Exams,
X-rays and
cleanings*



Sealants for
members 15
and under*



Fluoride
treatments*



Deep
cleaning for
gum disease



Fillings



Tooth
removal



Crowns*
(limited)



Root
canals*
(limited)



Partial and
full dentures
(limited)



Braces for
members 20
and under*
(limited)

Restrictions may apply and/or preapproval may be required. A star () in the benefit charts means a service may be covered beyond the limits listed for members under 21, if medically necessary and appropriate.*

Finding a dentist

We partner with local dental plans so you can see the dentist with no cost to you. Your dental plan is listed on your Member ID card. They work with you to take care of your dental needs. Call them when you need dental care or have questions about oral health, before you seek emergency or urgent care.

Your dentist:

- ▶ Is your first contact when you need dental care, except in a life-threatening emergency like uncontrollable bleeding.
- ▶ Arranges for specialty dental care, if you need it.
- ▶ Keeps your dental records and knows your oral health best, so they can offer the best advice even in an emergency.



Who should see the dentist?

Everyone! But regular dental care is most important for people who are pregnant, have diabetes or other chronic conditions, and children.

Mental health care and substance use treatment

Behavioral health is a term used to refer to three services: mental health care, substance use treatment and recovery support. **These services are available at no cost to you.** Getting help is easy: learn about our services below and then call your assigned behavioral health plan to make an appointment, or reach out to Customer Service with questions.

CareOregon offers resources to help you, at no cost



Mental health care

- ▶ Counseling
- ▶ Therapy and psychotherapy
- ▶ Medication



Recovery support

- ▶ In-person care
- ▶ Personal advocacy
- ▶ Peer support



Substance use treatment

- ▶ Detox programs
- ▶ Medication for addiction treatment
- ▶ Office visits and counseling

And much more...

If you're facing one of these situations, you're not alone. We can help.



Feeling overwhelmed



Have a hard time getting out of bed



Thinking about harming yourself



Struggle to handle parenting, work and more



Afraid you'll never get well



Not sure you'll find the right counselor



Feel like you don't have the time to get help

.....
You're not alone. It may seem impossible, but you can start getting the help you need with one call.

We're here to help. Make the first call today.

Your Member ID card has the number of the behavioral health plan you've been assigned to. It's important that you're comfortable with the person providing your care. If the provider you see first is not a good fit, call Customer Service to select from a list of other providers.

Pharmacy benefits and services

Our members rely on medications to get and stay healthy.

That's why we pay for many prescription drugs. We want to make sure you have the medications you need. If you urgently need a drug that's not covered, call Customer Service at **800-224-4840** or **TTY 711**.

Covered medications

Many prescriptions are paid for under your Medicaid drug coverage, but not all of them are. **The formulary is a booklet showing which drugs we cover.**

When your provider prescribes a medicine, ask if it's on CareOregon's formulary.



Refills



Most prescriptions are limited to 31 days or less. For most medications, the earliest date you can get a refill is 23 days after you filled your last prescription. We fill 90-day prescriptions for many medications that treat chronic diseases.

Limits on prescriptions

Health Share/CareOregon does not pay for:



- ▶ Drugs not on our formulary
- ▶ Drugs that treat conditions not covered by the Oregon Health Plan.
- ▶ Drugs for cosmetic purposes.
- ▶ Drugs not approved by the FDA.
- ▶ Drugs not approved for your condition.

Your pharmacy will need to bill OHA directly for mental health prescriptions.

Other limits:



- ▶ You may receive generic drugs rather than name-brand drugs.
- ▶ You may have to try other drugs first (also known as step therapy).
- ▶ The drug may be restricted by age.
- ▶ The drug may have quantity limits.
- ▶ Your prescription may require pre-approval.

Your pharmacy benefit also includes:

- ▶ Reviewing medications with a pharmacist to make sure they interact well together.
- ▶ Some over-the-counter drugs, when you have a prescription.

Language services

You have a legal right to free interpretation and translation services.

If you do not speak or read English or prefer to discuss your health care in a different language, including sign languages, CareOregon is here to serve you.

Here are some examples of when you have the right to request language services:



Any time you talk to someone in your provider's office



Reading or understanding health care information



Provider visits (in-person, phone and video)



When you need to understand a document before you sign it



At the pharmacy



When you have questions about your coverage or costs



When you need help with transportation



Giving feedback about your care



For dental or mental health appointments



When you need to talk to someone about your care



When you're not sure about the next steps in your care



Other times, like help with housing, food resources and more

Free language services are your right and should be simple to access.

If you need any help with language services or have any complaints, we want to hear about it. Call **CareOregon Customer Service at 800-224-4840 or TTY 711**, or send us a secure message at careoregon.org/portal

Preferred Language card

You may have been provided with a Preferred Language card in your mailing to help you inform your provider’s office of your spoken language. If you have any problems getting an interpreter, please let us know by calling CareOregon Customer Service.

Preferred Language Card

I speak Spanish

I need language help. Please give me a qualified or certified interpreter in my spoken language. Please note this language in your permanent records.

Thank you!




Title VI of the Civil Rights Act of 1964 requires all federally funded agencies to provide free language access services.

Preferred Language Card (Spanish 1/2014)

Stop smoking today. Here are fully-covered ways to start:



Your care team

Any provider — physical, mental or dental — would be happy to help you stop smoking. They can help you find good, local programs that work for you and are fully covered. They can also help you decide which medication (such as a nicotine patch or gum) may be a good match for you.



Oregon Tobacco Quit Line

The Quit Line is a **free counseling service** offered by phone and online chat. Get started at quitnow.net/oregon or 800-QUIT-NOW (800-784-8669). This is a covered benefit you may use twice in a 12-month period.



Smokefree.gov

smokefree.gov is a national program that offers various **tools to help you stop smoking**, including online chat and free, encouraging text messages. It’s free to you. Visit the website and choose the service you want to try.

Transportation

Access to health care matters to us, which is why your benefits include help with trips to health care appointments and services that are covered through the Oregon Health Plan (OHP). If you need support getting to a covered appointment, our partner **Ride to Care** can help.

Three ways get to appointments

The Ride to Care customer service team will work with you to find the most-appropriate and least-costly option to fit your needs:



Public transit

We provide daily or monthly transit passes. We'll discuss your appointments and decide whether a day or monthly pass is better suited to your scheduled visits.



Reimbursement

We pay a per-mile rate for mileage to and from health care visits. You can drive yourself, or someone else can drive you. Print an appointment verification form at ridetocare.com and ask your provider's office staff to sign it. Reimbursement is loaded onto a prepaid debit card.



Vehicle-provided rides

We can schedule private and shared rides. Based on your medical needs, we can send a sedan, wheelchair van, stretcher vehicle or non-emergent ambulance.



You have the right to request a same-day or next-day ride. However, if your request is on short notice, and demand for rides is high, we prioritize medically urgent requests.

Call **Ride to Care** to learn more at
855-321-4899 or TTY 711

Call Ride to Care at 855-321-4899 or TTY 711 to see what service is right for you. Each time you call, we'll ask questions about you and the trip you're asking for. Whenever possible, please call us at least two business days before a health care appointment to discuss and schedule your transportation. You can schedule multiple rides up to 90 days in advance.

Care coordination

Care coordinators work with you and your providers and help you get the most out of your health plan. We know how hard and confusing it can be. **We're here to help.**

BEFORE

How will I...



Be understood?



Get a wheelchair?



Find a dentist?



Find a specialist?



Get medicine?



Get diabetic supplies?



Find a counselor?



Get to my appointment?



Connect to housing resources?



Find food resources?



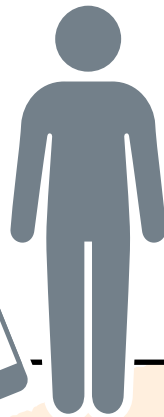
Make sure providers share information about me?



Deal with this bill?



Schedule an appointment?



Find my health plan?

AFTER

With one call...



Your care coordinators can:

- Learn about your needs and help you find the right solution.
- Make sure all of your providers are talking to each other.
- Help with additional services, including housing, food (SNAP) and transportation resources.
- Get you the right supplies, including medication, diabetic supplies, wheelchairs, oxygen tanks and more.
- Help you get the care, tests and treatment you need.

Who is CareOregon

And what do they have to do with Medicaid?

When people talk about Medicaid in Oregon, you may hear them say a lot of different names or letters. That's because there are many organizations involved in making sure you get the care you deserve. How can you make sense of it all?

It helps to think of Medicaid in Oregon like a pyramid

Oregon Health Authority (OHA) runs the Medicaid program for the entire state of Oregon, which is called the Oregon Health Plan (OHP).



Health Share of Oregon (HSO) is what's called a coordinated care organization (CCO). Health Share of Oregon works under OHA to serve OHP members in the tri-county area.



CareOregon is one of several insurance providers in the tri-county area that help Health Share CCO deliver care. We also help coordinate health care benefits and services for our members.



Your primary care provider (PCP) might be a doctor, a nurse practitioner, a physician's assistant or a naturopath. They coordinate your care with CareOregon and other medical team members like dentists, mental health providers, pharmacists and others.



CareOregon provides services like these for Medicaid (OHP) members:

- ▶ Physical health care
- ▶ Mental health care
- ▶ Substance use treatment
- ▶ Dental care
- ▶ Medicare through CareOregon Advantage
- ▶ Hospice and palliative care through Housecall Providers

You'll also be able to use important services like these:

- ▶ Care coordination
- ▶ Pharmacy
- ▶ Prenatal and infant care
- ▶ Transportation options
- ▶ Language interpreter services
- ▶ ER and urgent care

Other questions?

Q: Will CareOregon ever send me a bill?

A: No. We will never charge you for any covered Medicaid/OHP service. If a health care provider sends you a bill, don't pay it. Instead, call our Customer Service right away. For a list of covered services, please see your Member Handbook.

Q: Will I owe a copayment when I see my provider?

A: Our members are not charged copayments or fees when they see their primary care provider (PCP) or other provider in our network.

There may be a copayment at pharmacies for certain mental health prescriptions that are covered by the state.

If a medical office asks you for a copayment, ask the staff to call Customer Service. When you make an appointment, let the office know you're covered by CareOregon.

Q: What should I do if a provider's office mails me a bill?

A: You probably don't owe anything for covered services while you are a CareOregon member. Call CareOregon Customer Service right away to find out.

Q: I need to see a provider, but I don't have my Health Share Member ID card yet. What should I do?

A: Call Customer Service. They will be happy to help.

Q: I lost my Member ID card. How do I get a new one?

A: Call Customer Service or request a new one through our member portal at careoregon.org/portal

Q: What if I have Medicare and Medicaid coverage?

A: Members enrolled in both Medicaid and Medicare are referred to as “dual eligible” members. Dual eligible members are automatically enrolled in a local CCO plan.

- OHP can help cover Medicare premiums, copays and other things that Medicare does not cover (such as dental care and help getting to appointments).
- You may have other coverage through an employer, retirement plan and/or an individual health plan. If you have other insurance, they are the primary payer over Medicaid or Medicare.

To learn more, call your Medicare plan or CareOregon Customer Service to find out how Medicare and OHP benefits can work together.

Questions? Here's who to contact

Contact Oregon Health Authority:

- ▶ For information about enrollment, including renewals, your application status, changing your CCO, name/address changes, pregnancy/childbirth, and employment or income changes.

Online: one.oregon.gov

Phone: Toll-free 800-699-9075 | TTY 711 | 8 a.m. to 5 p.m.
Monday-Friday

Contact Health Share of Oregon:

- ▶ To replace a lost or stolen Member ID card.
- ▶ To make a health plan or dental plan change within Health Share.

Phone: 503-416-8090 or toll-free 888-519-3845 | TTY 711
8 a.m. to 5 p.m. Monday-Friday

Email: info@healthshareoregon.org

Contact CareOregon:

- ▶ To change your PCP or to find a provider.
- ▶ For questions about your benefits and eligibility, such as: Is my coverage active? What medications or services are covered? What's the status of my appeal or prior authorization?
- ▶ To submit a complaint. You have a right to make a complaint if you are not satisfied with any part of your care. See your Member Handbook or call us for details.

Phone: 503-416-4100 or toll-free 800-224-4840 | TTY 711
8 a.m. to 5 p.m. Monday-Friday

Email: customerservice@careoregon.org

Secure Message: careoregon.org/portal

[Facebook.com/CareOregon](https://www.facebook.com/CareOregon) | [CareOregon](https://www.instagram.com/CareOregon)

Make your voice heard in our Community Advisory Board (COCAB)

Want to have a say in how we improve our community's health? Join our Community Advisory Board. Visit careoregon.org/COCAB to learn more.

You can get this letter in other languages, large print, braille or a format you prefer. You can also ask for an interpreter. This help is free. Call 800-224-4840 or TTY 711. We accept relay calls. You can get help from a certified and qualified health care interpreter.



careoregon.org
healthshareoregon.org

OHP-HSO-23-1688

HSO-23633121-EN-LP-0212

