



Amerigroup District of Columbia, Inc. Alliance

# Enrollee Handbook



WE ARE WASHINGTON  
GOVERNMENT OF THE DISTRICT OF COLUMBIA  
DC MURIEL BOWSER, MAYOR

This program is funded in part by the Government of the District of Columbia Department of Health Care Finance.

## **Amerigroup District of Columbia, Inc.**

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You can call us 24 hours a day, 7 days a week, or stop by our office Monday through Friday from 8:00 a.m. to 6:00 p.m. Eastern time. For directions on how to visit us, call 800-600-4441 (TTY 711).

### **Washington DC office**

609 H Street NE, Ste. 200  
Washington, DC 20002

Office hours: 9:00 a.m. to 5:00 p.m. Eastern time  
800-600-4441 (TTY 711)

## English

“If you do not speak and/or read English, please call 800-600-4441 (TTY 711) between Monday through Friday from 8:00 a.m. to 6:00 p.m. Eastern time. A representative will assist you.”

## Spanish

“Si usted no habla ni lee inglés, llame al 800-600-4441 (TTY 711) de lunes a viernes de 8:00 a.m. a 6:00 p.m. hora del Este. Un representante le ayudará”

## Vietnamese

“Nếu quý vị không nói và/hoặc đọc Tiếng Anh, vui lòng gọi 800-600-4441 (TTY 711) từ Thứ Hai đến Thứ Sáu từ 8 giờ sáng đến 6 giờ tối, giờ miền Đông. Một đại diện sẽ hỗ trợ quý vị.”

## Korean

“영어를 구사하지 못하시거나 읽지 못하시는 경우 800-600-4441 (TTY 711)번으로 월요일-금요일 동부 시간으로 오전 8시에서 오후 6시까지 연락해 주십시오. 담당자가 도와드릴 것입니다.”

## French

“ Si vous ne parlez pas et/ou ne lisez pas l’anglais, veuillez appeler 800-600-4441 (TTY 711) du lundi au vendredi de 8:00 a.m. à 6:00 p.m., heure de l’Est. Un agent vous aidera. “

## Arabic

“إذا كنت لا تتحدث و/أو تقرأ الإنكليزية، فيرجى الاتصال على الرقم (TTY 711) 800-600-4441 من الاثنين إلى الجمعة من الساعة 8:00 صباحًا وحتى الساعة 6:00 مساءً بالتوقيت الشرقي. وسوف يساعدك ممثل.”

## Amharic

“እንግሊዘኛ የማይናገሩ እና/ወይም የማያነቡ ከሆነ፣ እባክዎ ወደ 800-600-4441 (TTY 711) ከሰኞ እስከ አርብ ከ8 ኤም እስከ 6 ፕኤም በምስራቃዊያን ሰዓት አቆጣጠር ይደውሉ። ተወካይ ለእርስዎ እገዛ ያደርጋሉ።”

## Mandarin/Chinese Simplified

[如果您不会说和/或读英语，请致电 800-600-4441 (TTY 711)，服务时间：东部时间周一至周五 8:00 a.m.-6:00 p.m.。我们的服务代表将为您提供协助。]

## Russian

«Если вы не говорите и/или не читаете по-английски, пожалуйста, позвоните по номеру 800-600-4441 (TTY: 711) с понедельника по пятницу с 8:00 до 18:00 по восточному времени. Наш представитель поможет вам»

**Burmese**

“အကယ်၍ သင် အင်္ဂလိပ်စကားပြောခြင်း သို့မဟုတ် စာဖတ်ခြင်းမရှိပါက၊ ကျေးဇူးပြု၍ တနင်္လာနေ့မှ သောကြာနေ့အကြား မနက် ၈ နာရီမှ ညနေ ၆ နာရီ ( အရှေ့တော်ချိန်) တွင် 800-600-4441 (TTY 711) သို့ခေါ်ဆိုနိုင်ပါသည်။ ကိုယ်စားလှယ်တစ်ဦးသည် သင့်အား အကူအညီပေးပါမည်”

**Cantonese/Chinese Traditional**

[如果您不會說和/或讀英語，請致電 800-600-4441 (TTY 711)，服務時間：東部時間週一至週五8:00 a.m.-6:00 p.m.。我們的服務代表將為您提供協助。]

**Farsi**

«اگر نمی‌توانید به انگلیسی صحبت کنید و/یا بخوانید، لطفاً با شماره 800-600-4441 (TTY 711) از دوشنبه تا جمعه از ساعت 8 صبح تا 6 بعداز ظهر به زمان شرقی تماس بگیرید. یک نماینده به شما کمک خواهد کرد.»

**Polish**

Jeśli nie potrafisz mówić i/lub czytać po angielsku, zadzwoń pod numer 800-600-4441 (TTY 711) od poniedziałku do piątku w godzinach od 8:00 a.m. do 6:00 p.m. czasu wschodniego. Przedstawiciel udzieli Ci pomocy.

**Portuguese**

“Caso não seja capaz de falar e/ou ler em inglês, telefone para o número 800-600-4441 (TTY 711) de segunda a sexta-feira, das 8:00 a.m. às 6:00 p.m., ET. Teremos um assistente disponível para lhe prestar apoio.”

**Punjabi**

“ਜੇ ਤੁਸੀਂ ਅੰਗਰੇਜ਼ੀ ਨਹੀਂ ਬੋਲਦੇ ਅਤੇ/ਜਾਂ ਪੜ੍ਹਦੇ ਨਹੀਂ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸੋਮਵਾਰ ਤੋਂ ਸ਼ੁੱਕਰਵਾਰ ਵਿਚਕਾਰ ਈਸਟਰਨ ਸਮੇਂ ਅਨੁਸਾਰ ਸਵੇਰੇ 8:00 ਵਜੇ ਤੋਂ ਸ਼ਾਮ 6:00 ਵਜੇ ਤੱਕ 800-600-4441 (TTY 711) 'ਤੇ ਕਾਲ ਕਰੋ। ਇੱਕ ਨੁਮਾਇੰਦਾ ਤੁਹਾਡੀ ਸਹਾਇਤਾ ਕਰੇਗਾ।”

**Haitian Creole**

“Si ou pa pale oubyen li anglè, tanpri rele 800-600-4441 (TTY 711) de lundì a vendredi de 8:00 a.m a 6:00 p.m lé de lest. Youn reprezantan ap ede'w.”

**Hindi**

यदि आप अंग्रेज़ी नहीं बोलते हैं और/या पढ़ते नहीं हैं, तो कृपया 800-600-4441 (TTY 711) पर सोमवार से शुक्रवार के बीच ईस्टर्न समय के अनुसार सुबह 8:00 बजे से शाम 6:00 बजे तक कॉल करें। एक प्रतिनिधि आपकी मदद करेगा।

## **Somali**

“Haddii aanad ku hadlin iyo/ama akhriyin Ingiriisiga, fadlan soo wac 800-600-4441 (TTY 711) inta u dhaxaysa Isniinta ilaa Jimcaha laga bilaabo 8:00 subaxnimo ilaa 6:00 fiidnimo Wakhtiga bariga. Wakiil ayaa ku caawin doona.”

## **Hmong**

“Yog tias koj tsis paub hais thiab/los sis nyeem ntawv Askiv, thov hu rau 800-600-4441 (TTY 711) nyob rau Hnub Monday txog Hnub Friday thaum 8:00 teev sawv ntxov txog 6:00 teev tsaus ntuj raws lub sij hawm Sab Hnub Tuaj. Yuav muaj ib tug neeg sawv cev los pab koj.”

## **Italian**

“Se non parlate e/o non leggete l’inglese, chiamate il numero 800-600-4441 (TTY 711) dal lunedì al venerdì dalle 8:00 a.m. alle 6:00 p.m. EST. Un rappresentante Vi assisterà.”

## **Tagalog**

“Kung hindi ka nagsasalita at/o nagbabasa ng Ingles, mangyaring tumawag sa 800-600-4441 (TTY 711) sa pagitan ng Lunes hanggang Biyernes mula 8:00 a.m. hanggang 6:00 p.m. oras sa Silangan. Isang kinatawan ang tutulong sa iyo.”

## **Japanese**

[英語がわからない場合は、月曜から金曜の8 a.m.-6 p.m.（東部標準時）の間に800-600-4441（TTY 711）までお電話ください。担当者がサポートいたします。

## Important Phone Numbers

<b>For questions about your MCO:</b>	Enrollee Services	800-600-4441 (toll-free)	24 hours a day, 7 days a week
	TTY/TDD Enrollee Services	711 (toll-free)	24 hours a day, 7 days a week
<b>If you need care after your doctor's office is closed:</b>	Nurse Helpline	800-600-4441 (toll-free)	24 hours a day, 7 days a week
	TTY/TDD Nurse Helpline	711 (toll-free)	24 hours a day, 7 days a week
<b>If you need to see a doctor within 24 hours ("Urgent Care:</b>	Your <u>PCP</u> 's Office	(fill in your <u>PCP</u> 's information here)	
	Nurse Helpline	800-600-4441 (toll-free)	24 hours a day, 7 days a week
<b>If you need a ride to an Appointment:</b>	Enrollee Services	Medical Transportation Management (MTM) 24 hours a day, 7 days a week 888-828-1081 (TTY 711) (toll free)	
<b>If you need mental health care or have a mental health question:</b>	Your <u>PCP</u> 's Office	(fill in your <u>PCP</u> 's information here)	
	Nurse Helpline	800-600-4441 (TTY 711) (toll-free)	24 hours a day, 7 days a week
	DC Department of Mental Health Hotline	1 (888) 793-4357	24 hours a day, 7 days a week
<b>If you need someone who speaks your language or if you are Hearing Impaired:</b>	Enrollee Services	800-600-4441 (toll-free)	Monday through Friday from 8 a.m. to 6 p.m. Eastern time
	TTY/TDD Enrollee Services	711 (toll-free)	Monday through Friday from 8 a.m. to 6 p.m. Eastern time
<b>Dental Questions:</b>	Avesis	833-554-1012	Monday through Friday from 7 a.m. to 8 p.m. Eastern time
<b>Vision Questions:</b>	Avesis	833-554-1012	Monday through Friday from 7 a.m. to 8 p.m. Eastern time
<b>FOR AN EMERGENCY, DIAL 911 OR GO TO YOUR NEAREST EMERGENCY ROOM</b>			

**Personal information**

**My Alliance ID Number:**

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**My Primary Care Provider (PCP):**

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**My Primary Care Provider (PCP) Address:**

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**My Primary Care Provider (PCP) Phone:**

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**My Primary Dental Provider (PDP)Name:**

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**My Primary Dental Provider (PDP) Address:**

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**My Primary Dental Provider (PDP):**

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## **Welcome to Amerigroup DC**

Thank you for choosing Amerigroup District of Columbia, Inc. as your health plan. We are proud to serve enrollees of the DC Healthcare Alliance Program.

This Enrollee Handbook has important information about Amerigroup DC and how your health plan works. Please review it carefully. As an Amerigroup DC enrollee, you have all your regular health benefits, like preventive screenings, checkups, medicines, and emergency care, plus extras to help you live healthy and feel your best.

Each month, we will host a new enrollee orientation. This is another way you can learn more about your Amerigroup DC benefits. During the orientation, you can also speak with a member of our team to get questions answered. Need to speak with us right away? We're a click or call away. Log in to your account or register online at [myamerigroup.com/DC](https://myamerigroup.com/DC). Send us a secure message or schedule a call back. Or call our Enrollee Services team at 800-600-4441 (TTY 711), Monday through Friday from 8:00 a.m. to 6:00 p.m. Eastern time. We're here to help you every step of the way.

### **About this MCO**

Words used in Health Care and by your doctor can sometimes be hard to understand. Amerigroup DC is a managed care plan that the District of Columbia pays to help you get health care. In this Handbook, we tell you how Amerigroup DC works, how to find doctors, how to call us, and what we pay for. In the Definitions section, we have explained these words at the back of this book.

If you have questions about things you read in this book or other questions about Amerigroup DC, you can call Amerigroup DC Enrollee Services at 800-600-4441 (TTY 711) or visit [myamerigroup.com/DC](https://myamerigroup.com/DC), and we will do our best to help you.

### **How this Enrollee Handbook can help you**

This Enrollee Handbook tells you:

- How to access healthcare
- Your Covered Services
- Services NOT covered
- How to choose your Primary Care Provider and Primary Dental Provider (your PCP or PDP)
- What to do if you get sick
- What you should do if you have a Grievance or want to change (Appeal) a decision by Amerigroup DC

This Enrollee Handbook gives you basic information about how Amerigroup DC works. Please call Amerigroup DC Enrollee Services anytime, 24 hours a day and 7 days a week, if you have any questions.

## **Your Rights**

- Know that when you talk with your doctors and other providers, it's private
- Have an illness or treatment explained to you in a language you can understand
- Participate in decisions about your care, including the right to refuse treatment
- Receive a full, clear, and understandable explanation of treatment options and the risks of each option so you can make an informed decision
- Refuse treatment or care
- Be free from any form of restraints or seclusion used as a means of coercion, discipline, convenience, or retaliation
- Can see and receive a copy of your medical records and request an amendment or change, if incorrect
- Receive access to health care services that are available and accessible to you in a timely manner
- Choose an eligible PCP/PDP from within the Amerigroup DC network and change your PCP/PDP
- Make a Grievance about the care provided to you and receive an answer
- Request an Appeal or a Fair Hearing if you believe Amerigroup DC was wrong in denying, reducing, or stopping a service or item
- Receive Family Planning Services and supplies from the provider of your choice
- Obtain medical care without unnecessary delay
- Receive a second opinion from a qualified healthcare professional within the network or, if necessary, obtain one outside the network, a no cost to you
- Receive information on Advance Directives and choose not to have or continue any life-sustaining treatment.
- Receive a copy of the Amerigroup DC Enrollee Handbook and Provider Directory
- Continue the treatment you are currently receiving until you have a new treatment plan
- Receive interpretation and translation services free of charge
- Refuse oral interpretation services
- Receive transportation services free of charge
- Get an explanation of prior authorization procedures
- Receive information about Amerigroup DC's financial condition and any special ways we pay our doctors
- Obtain summaries of customer satisfaction surveys
- Receive the Amerigroup DC "Dispense as Written" policy for prescription drugs
- Receive a list of all covered drugs
- Be treated with respect and due consideration for your dignity and right to privacy.

## **Your Responsibilities**

- Treating those providing your care with respect and dignity
- Following the rules of the DC Medicaid Managed Care Program and Amerigroup DC
- Following instructions you receive from your doctors and other providers
- Going to scheduled appointments
- Telling your doctor at least 24 hours before the appointment if you must cancel
- Asking for more explanation if you do not understand your doctor's instructions
- Going to the Emergency Room only if you have a medical emergency
- Telling your PCP/PDP about medical and personal problems that may affect your health
- Reporting to Economic Security Administration (ESA) and Amerigroup DC if you or a family Enrollee have other health insurance or if you have a change in your address or phone number
- Reporting to ESA and Amerigroup DC if there is a change in your family (i.e., deaths, births, etc.)
- Trying to understand your health problems and participate in developing treatment goals
- Helping your doctor in getting medical records from providers who have treated you in the past
- Telling Amerigroup DC if you were injured as the result of an accident or at work

## Your Enrollee ID Card



Once you are assigned a primary care provider (PCP), we will mail you an Enrollee ID Card. This card lets your doctors, hospitals, drug stores, and others know you are an Enrollee of Amerigroup DC. Please make sure that the information on your Enrollee ID Card is correct. If there are any problems, or you have lost your card, call Enrollee Services at 800-600-4441 (TTY 711)—each Amerigroup DC enrollee has their card. Your Children will also have their cards. You must keep your children’s cards so they don’t get lost. It is against the law to let anyone else use your Enrollee ID card.

### Your Enrollee ID Card looks like this:

#### Front of Card

	Effective Date: Date of Birth: Amerigroup DC #: <b>123456789</b>
<b>myamerigroup.com/DC</b> Enrollee Name: <b>JOHN Q SAMPLE</b> DC Healthcare Alliance Program Number: Primary Care Provider (PCP): PCP Telephone #: Primary Dental Provider (PDP): PDP Telephone #: Vision: <b>833-554-1012</b> Dental: <b>833-554-1012</b> Pharmacy: RxBIN: 020107; RxPCN: FC; RxGRP: RX8489	

#### Back of Card

<b>Keep this card with you at all times   Call 911 if you think you have a medical emergency</b> Enrollee Services/24-hour Nurse HelpLine: <b>800-600-4441 (TTY 711)</b> Behavioral Health Crisis Line: <b>844-405-4300 (TTY 711)</b> Pharmacy Enrollee Services: <b>833-214-3604</b> Transportation Services: <b>888-828-1081 (TTY 711)</b> Economic Security Administration (ESA): <b>202-727-5355</b> <b>PROVIDERS:</b> Certain services must be preauthorized. Care that is not preauthorized may not be covered. For preauthorization/billing information, call <b>800-454-3730</b> . For preauthorization of medications, call <b>800-454-3730</b> . <b>SUBMIT MEDICAL CLAIMS TO: AMERIGROUP DC P.O. BOX 61010 VIRGINIA BEACH, VA 23466-1010</b>	
	 GOVERNMENT OF THE DISTRICT OF COLUMBIA DC MURIEL BOWSER, MAYOR
This program is funded in part by the Government of the District of Columbia Department of Health Care Finance.	Amerigroup complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.
DC01 04/23	

Please remember to always carry your Enrollee ID Card and Picture ID with you. Always show your card before receiving any medical care or getting medicine at a pharmacy.

## **Your Primary Care Provider (PCP)**

### **What is a PCP?**

Now that you are an Enrollee of Amerigroup DC, your PCP (Primary Care Provider) will help you and your family to get the health care you need.

It is important to call your PCP first when you need care. If you had a PCP before you were assigned with Amerigroup DC, please call Enrollee Services at 800-600-4441 (TTY 711). We can help you stay with that PCP if you want to.

### **How to Choose Your PCP?**

1. Choose a PCP when you enroll in Amerigroup DC. This person will be your PCP while you are an Enrollee of Amerigroup DC.
  - If your current PCP is a Provider of the Amerigroup DC network, you may stay with that doctor.
  - If you don't have a PCP, you can choose from a list of doctors in our Provider Directory or at [myamerigroup.com/DC](http://myamerigroup.com/DC).
  - Call Enrollee Services at 800-600-4441 (TTY 711) if you need help choosing a doctor.
  - If you do not choose a PCP within the first 10 days of being with Amerigroup DC, we will choose a doctor for you. If you do not like the PCP we choose, you may change your PCP. Call Enrollee Services at 800-600-4441 (TTY 711) to change your PCP.
  - Amerigroup DC will send you an Enrollee ID Card. Your card will have your PCP's name and phone number on it.
2. Choose a PCP for each family Enrollee in Amerigroup DC. Your PCP may be one of the following:
  - Family and General Practice Doctor - usually can see the whole family
  - Internal Medicine Doctor - usually sees only adults and children 14 years and older
  - Obstetrician/Gynecologist (OB/GYN) - specializes in women's health and maternity care
  - If you have special health care needs, you may choose a specialist as your PCP.
3. When you choose your PCP, please:
  - Choose a doctor who is close to your home or work.
  - Not all doctors can send patients to all hospitals. Choose a doctor who can send you to the hospital you want.
  - Sometimes the PCP you choose won't be able to take new patients. Our provider directory lists which hospitals a PCP can send you to. You can also call Enrollee Services for help.
  - We will let you know if you need to choose a different doctor.

### **How to Change Your PCP?**

You can change your PCP anytime. If you need help picking a new PCP, Enrollee Services can help you. Just choose a new PCP from the Provider Directory. Call Enrollee Services at 800-600-4441 (TTY 711) once you have selected a new PCP.

## **Primary Dental Provider (PDP)**

### **What is a PDP?**

Now that you are an Enrollee of Amerigroup DC, your PDP (Primary Dental Provider) will help you and your family to get the health care you need.

It is important to call your PDP first when you need care. If you had a dentist before you were assigned to Amerigroup DC, please call Enrollee Services at 800-600-4441 (TTY 711). We can help you stay with that dentist if you want to.

### **How to Choose Your PDP?**

1. Pick a PDP when you enroll in Amerigroup DC. This person will be your PDP while you are an Enrollee of Amerigroup DC.
  - If your current PDP is a Provider of the Amerigroup DC network, you may stay with that dentist.
  - If you don't have a PDP, you can choose from a list of dentists in our Provider Directory or at [myamerigroup.com/DC](http://myamerigroup.com/DC).
  - Call Enrollee Services at 800-600-4441 (TTY 711) if you need help choosing a dentist.
  - If you do not choose a PDP within the first 10 days of being in our plan, we will choose a dentist for you. If you do not like the PDP we choose for you, you may change your PDP. Call Enrollee Services at 800-600-4441 (TTY 711) to change your PDP.
  - Amerigroup DC will send you an Enrollee ID Card. Your card will have your PDP's name and phone number on it.
2. Choose a PDP for each family Enrollee in our plan. Your PDP may be one of the following:
  - Family and General Practice Dentist - usually can see the whole family
3. When you choose your PDP, please note the following:
  - Our provider directory lists which hospitals a PDP can send you to. You can also call Enrollee Services for help.
  - Sometimes the PDP you choose won't be able to take new patients. We will let you know if you need to choose a different dentist.

### **How to Change Your PDP?**

You can change your PDP anytime. Just choose a new PDP from the Provider Directory. If you need help choosing a new PDP, Enrollee Services can help you. Call Enrollee Services at 800-600-4441 (TTY 711) once you have selected a new PDP.



## **Routine Care, Urgent Care, and Emergency Care**

You may need three (3) kinds of health care: routine, urgent, or emergency.

### **Routine Care**

Routine Care is the regular care you get from your PCP. Routine Care is also care you get from other doctors that your PCP sends you to. Routine Care can be check-ups, physicals, health screenings, and care for health problems like diabetes, hypertension, and asthma. If you need Routine Care, call your PCP's office, and ask to make an appointment.

### **Urgent Care**

Urgent Care is medical care you need within 24 hours but not right away. Some Urgent Care issues are:

- Throwing up
- Headaches
- Substance abuse
- Minor burns or cuts
- Sore throat
- Mental health
- Earaches
- Muscle sprains/strains
- Fever over 101 degrees Fahrenheit

**If you need Urgent Care, call your PCP's office.** If your PCP's office is closed, leave a message with the person who answers the phone when the office is closed. Then call the Nurse Help Line at 800-600-4441 (TTY 711). A nurse will help you decide if you need to go to the doctor right away. The nurse will tell you how to get care. You do not have to go to the Emergency Room or use an ambulance for routine or Urgent Care.

### **Emergency Care (What to do if you have an emergency)**

Emergency Care is medical care you need right away for a serious, sudden (sometimes life-threatening) injury or illness. You have the right to use any hospital for emergency care. Prior authorization is not required for emergency care services.

- Trouble breathing
- Chest pains
- Loss of consciousness
- Very bad bleeding that does not stop
- Very bad burns
- Shakes called convulsions or seizures
- Pain that is getting worse

## **WHAT TO DO IF YOU HAVE AN EMERGENCY**

- 1. Call 9-1-1 or go to your nearest Emergency Room (ER).**
- 2. Show the ER your Amerigroup DC Enrollee I.D. Card.**
- 3. As soon as you can, call your PCP.**

## **Care When You Are Out-of-Town**

When you need to see a doctor or get medicine when you are out of town:

### **Routine Care**

You must call us and ask if we will pay for you to see a doctor or other provider when you are out of town because doctors who are not in the District of Columbia are not a part of Amerigroup DC. If Amerigroup DC does not say it is okay before you get the care, you must pay for it yourself. If you need medicine from a doctor while you are out of town, call your PCP. Call the Nurse Helpline at 800-600-4441 (TTY 711) if you need help.

### **Urgent Care**

You must call your PCP. If your PCP's office is closed, call the Nurse Help Line at 800-600-4441 (TTY 711). A nurse will help you decide if you need to go to the doctor right away. The nurse can tell you how to get care. You do not have to go to the ER or use an ambulance for routine or Urgent Care.

### **Emergency Care**

If you have an emergency, including mental health or alcohol or another drug emergency, go to the nearest Emergency Room (ER) to get care right away. If you go to the emergency room, you should ask the ER staff to call your PCP. If you go to the emergency room, you should call Enrollee Services as soon as possible. **Prior authorization is not required for emergency care services.**

## **In-Network and Out-of-Network Providers**

Amerigroup DC will pay for your care when you go to one of our doctors or other health care providers. We call these doctors and other healthcare providers our "Network" Providers. A doctor or provider who is not one of ours is called an "Out-of-Network" Provider. All these "In-Network" doctors can be found in your Provider Directory.

If you go to an "Out-of-Network" doctor, hospital, or lab, you may have to pay for your care. You will not have to pay if you have asked us first and we have told you, usually in writing, that it is okay. We call this "prior authorization."

**Prior Authorization (PA)** means approval for a health service not routinely covered by Amerigroup DC. You must get this approval before you receive the service. You do not need a PA to receive emergency care. Call Enrollee Services at 800-600-4441 (TTY 711) to ask about getting a PA. You may go to a Family Planning provider of your choice, even if they are Out-of-Network. No prior authorization is required. See page 19 for more information on Family Planning Services.

Amerigroup DC will provide adequate and timely covered services from an approved Out-of-Network Provider if no In-Network Provider can perform a covered service.

## **Making an Appointment**

### **Making an Appointment with your PCP or PDP**

- Have your Enrollee ID Card and a pencil and paper close by.
- Call your PCP's office. Look for your PCP's phone number on the front of your Enrollee ID Card. You can also find it in your Provider Directory or online at [myamerigroup.com/DC](http://myamerigroup.com/DC).
- Tell the person who answers that you are an Amerigroup DC Enrollee. Tell them you want to make an appointment with your PCP.
- Tell the person why you need an appointment. For example:
  - a. You are feeling sick
  - b. You hurt yourself or had an accident
  - c. You need a check-up or follow-up care
- Write down the time and date of your appointment.
- Go to your appointment on time and bring your Enrollee ID Card and picture ID with you.
- If you need help making an appointment, please call Enrollee Services at 800-600-4441 (TTY 711).

### **Changing or Canceling an Appointment**

- It is very important to come to your appointment and to be on time.
- If you need to change or cancel your appointment, please call the doctor at least 24 hours before your appointment.
- For some appointments, you may have to call more than 24 hours before to cancel.
- If you do not show up for your appointment or are late, your doctor may decide you cannot be their patient.

### **Getting care when your PCP's or PDP's Office is Closed**

If you need to speak to your PCP or PDP when the office is closed, call your PCP's or PDP's office, and leave a message including your phone number with the person who answers the phone. Someone will call you back as soon as possible. Call 911 or go to the Emergency Room if you have an emergency. You can also call the Nurse Help Line 24 hours a day at 800-600-4441 (TTY 711).

### **Waiting time to get Appointments**

Your doctor's office must give you an Appointment within a certain number of days after you call. Please call 800-600-4441 (TTY 711) if you cannot get an Appointment during these time periods. The table below shows how long it will take to get an Appointment.

<b>Type of Visit</b>	<b>Your Condition</b>	<b>How Long it Takes to See Your Doctor</b>
<b>Urgent Visit</b>	You are hurt or sick and need care within 24 hours to avoid getting worse, but you don't need to see a doctor right away. Some examples are minor burns or cuts, headaches, sore throat, or muscle sprains/strains.	Within 24 hours
<b>Routine Visit</b>	You have a minor illness or injury or need a regular checkup, but you don't need an urgent appointment.	Within 30 days
<b>Follow-up Visit</b>	You need to see your doctor after treatment. You just had to make sure you are healing well.	Within 1-2 weeks, depending on the kind of treatment
<b>Adult Wellness Visits</b>	<ul style="list-style-type: none"> <li>• You are having your first appointment with a new doctor</li> <li>• You are due for a regular adult checkup</li> <li>• You are due for a prostate exam, a pelvic exam, a PAP smear, or a breast exam</li> </ul>	Within 30 days or sooner if necessary
<b>Non-urgent Appointments with specialists (by Referral)</b>	Your PCP referred you to see a specialist for a non-urgent condition	Within 30 days

## **Support Services**

### **Transportation Services**

Non-emergency transportation services are provided for doctor's appointments and pharmacy visits.

- Call Medical Transportation Management (MTM) at 888-828-1081 to tell them what time and what day you need to be picked up.
- You must call at least two business days (not including Saturday and Sunday) before your appointment to get transportation.
- If you need transportation to EPSDT visits or urgent visits; you can call the day before the appointment to ask for transportation.
- The types of transportation are Uber, Lyft, buses, metro, vouchers to pay for a taxi, wheelchair vans, and ambulances. The type of transportation you get depends on your medical needs.
- Give MTM your Enrollee ID, phone number, and address where you can be picked up. Also, tell them the name, address, and phone number of the medical/dental facility or doctor's office you are going to.

Amerigroup DC will provide transportation to/from doctor's appointments that are not covered by Amerigroup DC, but are covered by DHCF or other District agencies. Amerigroup DC will also provide transportation to/from most non-covered services.

## **Services if you don't speak English very well**

### **Interpretation Services**

Amerigroup DC will provide oral interpretation services for FREE, including at the hospital.

Please call Enrollee Services at 800-600-4441 (TTY 711) for interpretation services. Please contact us before your doctor's appointment if you need interpretation services.

Interpreter Services are usually provided over the telephone. If you need an interpreter to be with you at your doctor's appointment, you must let us know within 3-5 days or 48 hours. If there is a unique situation that requires face-to-face interpretation, the enrollees or providers must receive prior authorization approval by Amerigroup DC. Enrollees or providers may contact our Enrollee Services team to submit the authorization request before the Appointment.

### **Translation Services**

If you get information from Amerigroup DC and need it translated into another language, please call Enrollee Services at 800-600-4441 (TTY 711).

## **Services if you have trouble Hearing or Seeing**

### **Auxiliary Aid Services for the Hearing and Visually Impaired**

If you have trouble hearing, call Enrollee Services at TTY 711. Call Enrollee Services at 800-600-4441 (TTY 711) if you have trouble seeing. We can give you information on an audio tape, in Braille, or in large print.

## **Specialty Care and Referrals**

### **How to get Specialty Care (What is a "Referral?")**

Your primary care provider (PCP) can take care of most of your healthcare needs, but you may also need care from other kinds of providers. We offer services from many different kinds of providers who provide other medically needed care. These providers are called specialists, because they have training in a special area of medicine.

Examples of specialists are:

- Allergists (allergy and asthma doctors)
- Dermatologists (skin doctors)
- Cardiologists (heart doctors)
- Endocrinologist (diabetes and thyroid doctors)
- Podiatrists (foot doctors)
- Oncologist
- Obstetrics/Gynecology (OB/Gyn)

If you want to see a specialist, but Amerigroup DC declined to pay for the visit, you can:

- Make an appointment with another doctor in the Amerigroup DC network and get a second opinion
- Appeal our decision (see page 29 on Appeals)
- Ask for a Fair Hearing (see page 30 on Fair Hearings)

### **Self-Referral Services**

You can get certain services without prior permission from your PCP. These are called self-referral services and are listed below.

#### **You DO NOT need a Referral to:**

- See your PCP
- Get care when you have an emergency
- Receive services from your OB/GYN doctor in your network for routine or preventive services (females only)
- Receive Family Planning Services
- Receive services for sexually transmitted infections (STIs)
- Receive Immunizations (shots)
- Visit a vision provider in the network

### **Birth Control and Other Family Planning Services**

You do NOT need a Referral to receive birth control or other Family Planning Services. All birth control and other Family Planning Services are confidential.

You can get birth control and other Family Planning Services from a doctor in the Amerigroup DC provider network. You do not need a referral to get these services. If you choose a Family Planning Services doctor other than your PCP, tell your PCP. It will help your PCP take better care of you. Talk to your PCP or call Amerigroup DC Enrollee Services at 800-600-4441 (TTY 711) for more information on birth control or other Family Planning Services.

#### **Family Planning Services include:**

- Pregnancy testing
- Counseling for the woman and the couple
- Routine and emergency contraception
- Counseling and Immunizations
- Screening for all sexually transmitted infections
- Treatment for all sexually transmitted infections
- Sterilization procedures (must be 21 or older and requires you to sign a form 30 days before the procedure)
- HIV/AIDs testing and counseling

**Family Planning Services do not include:**

- Routine infertility studies or procedures
- Hysterectomy for sterilization
- Reversal of voluntary sterilization
- HIV/AIDs treatment
- Abortions

**HIV/AIDS testing, counseling, and treatment**

You can get HIV/AIDS testing and counseling:

- When you have Family Planning Services
- From your PCP
- From an HIV testing and counseling center

For information on where you can go for HIV testing and counseling, call Enrollee Services at 800-600-4441 (TTY 711). If you need HIV treatment, your PCP will help you get care. Or you can call 800-600-4441 (TTY 711). You can also get Pre-exposure prophylaxis (PrEP) if your doctor believes you are at high risk for HIV/AIDs.

**Pharmacy Services and Prescription Medications**

Pharmacies are where you get your medicine (drugs). If your doctor gives you a prescription, you must visit a pharmacy in the Amerigroup DC network.

You can find a list of all the pharmacies in the Amerigroup DC network in your Amerigroup District of Columbia Provider Directory or online at [provider.amerigroup.com/dc-provider](http://provider.amerigroup.com/dc-provider).

If you are out of town, have an emergency, or need Urgent Care:

- If you are traveling and need to refill your medicine early, call Pharmacy Enrollee Services at 833-214-3604 to request a vacation supply.
- For emergency services, go to the nearest hospital emergency room or call 911.
- For urgent care:
  - Call your PCP. If your PCP's office is closed, leave a phone number where you can be reached. Your PCP or covering practitioner will call you back.
  - Follow your PCP's advice. You may be told how soon you need to get care and where to get the care.
  - Call the Nurse Helpline at 800-600-4441 (TTY 711) if you need help.

**To get a prescription filled:**

- Choose a pharmacy that is part of the Amerigroup DC network and is close to your work or home.
- When you have a prescription, go to the pharmacy and give the pharmacist your prescription and your Amerigroup DC Enrollee ID Card.
- If you need help, please call Pharmacy Enrollee Services at 833-214-3604.

**Things to remember:**

- You should not be asked to pay for your medicines. Call Amerigroup DC Enrollee Services if the pharmacy or drug store asks you to pay.
- Sometimes, your doctor may need a prior authorization (PA) from Amerigroup DC for a drug. While your doctor is waiting for the prior authorization (PA), you have a right to get the medication:
  - For up to 72 hours or
  - For one complete round of the medicine, if you take it less than once a day

**Disease Management**

If you have a chronic illness or special health care need such as asthma, high blood pressure, or mental illness, we may put you in our Disease Management Program. This means you will have a Disease Manager. A Disease Manager works for Amerigroup DC and will help you get the services and information you need to manage your illness and be healthier.

**Care Coordination and Case Management Programs**

If you have a chronic illness or special health care needs such as diabetes, high blood pressure, mental health, or asthma, Amerigroup DC may offer you special services and programs to help you with your health care needs. You will have a Case Manager to help you get the services and information you need to manage your illness and improve your health.

The Amerigroup DC Case Manager can help you with the following:

- Getting covered services;
- Setting up medical appointments and tests;
- Setting up transportation;
- Finding ways to make sure you get the right service;
- Finding resources to help with special health care needs and help your caregivers deal with day-to-day stress; and
- Connecting with community and social services.

Our staff can give you more information. They can also let you know what programs you are currently enrolled in. You can also ask for a referral or ask to be removed from a program. For more information, contact Amerigroup DC Case Management Program at 833-346-1663.

**Services to Keep You from Getting Sick**

Amerigroup DC wants you to take care of your health. We also want you to sign up for our health and wellness services. Health and wellness services include screenings, counseling, and immunizations.



### **Recommendations for Check-Ups (“Screenings”)**

Please make an appointment and see your PCP at least one time every year for a check-up. See the “Adult Wellness Services” list in the “Your Health Benefits” section for things to talk with your PCP about during your check-up.

### **How to stay healthy**

Preventive counseling is available to help you stay healthy. You can get preventive counseling on the following:

- Diet and Exercise
- Alcohol and Drug Use
- Smoking Cessation
- HIV/AIDS Prevention
- Contraceptive care

### **Immunizations or “Shots”**

You may need some immunizations (shots) if you are an adult. Please talk to your PCP about which ones you may need.

### **Pregnancy - Having a Baby**

If you are pregnant or think you are pregnant, it is very important that you go to your OB/GYN doctor right away. You do not need to see your PCP before making this appointment.

#### **If you are pregnant, please call:**

- Economic Security Administration (ESA) at (202) 727-5355 to report your pregnancy
- Enrollee Services at 800-600-4441 (TTY 711)
- Your PCP

There are certain things that you need to get checked if you are pregnant. This will help make sure that you have a healthy pregnancy, delivery, and baby. This is called Prenatal Care. You get prenatal care before your baby is born.

**Remember, if you are pregnant or think you are pregnant,  
do not drink alcohol, use drugs, or smoke.**

## **Before and after you have a baby**

### **Special care for pregnant Enrollees**

Taking Care of Baby and Me<sup>®</sup> is the Amerigroup DC program for all pregnant Enrollees. It is very important to see your primary care provider (PCP) or obstetrician or gynecologist (OB/GYN) for care when you are pregnant. Prenatal care is always important even if you have already had a baby. With our program, Enrollees receive health information and rewards for getting prenatal and postpartum care.

Our program also helps pregnant Enrollees with complicated healthcare needs. Nurse case managers work closely with these Enrollees to provide:

- Education
- Emotional support
- Help in following their doctor's care plan
- Information on services and resources in your community, such as transportation, WIC, home-visitor programs, breastfeeding support, and counseling

Our nurses also work with doctors and help with other services Enrollees may need. The goal is to promote better health for Enrollees and the delivery of healthy babies.

**Once you have your baby, call Enrollee Services at 800-600-4441 (TTY 711) and ESA at (202) 727-5355.**

It's important to set up a visit with your PCP or OB/GYN after you have your baby for a postpartum checkup. You may feel well and think you are healing, but it takes the body at least six weeks to mend after delivery.

- The visit should be done between 7 to 84 days after you deliver.
- If you delivered by C-section or had complications with your pregnancy or delivery, your PCP or OB/GYN may ask you to come back for a one or two week checkup. This is not considered a postpartum checkup. You will still need to go back and see your provider within 7 to 84 days after your delivery for your postpartum checkup.

## Your Health Benefits

### Services covered by Amerigroup DC

The list below shows the health care services and benefits for all Amerigroup DC Enrollees. For some benefits, you must be a certain age or have a specific need for the service. Amerigroup DC will not charge you for any health care services on this list if you go to a network provider or hospital.

If you have a question about whether Amerigroup DC covers specific health care, call Amerigroup DC Enrollee Services at 800-600-4441 (TTY 711).

Benefit	What You Get
<b>Adult Wellness Services</b>	<ul style="list-style-type: none"> <li>• Immunizations</li> <li>• Routine screening for sexually transmitted infections</li> <li>• HIV/AIDS screening, testing, and counseling</li> <li>• Breast cancer screening</li> <li>• Cervical cancer screening (women only)</li> <li>• Osteoporosis screening (post-menopausal women)</li> <li>• HPV screening</li> <li>• Prostate cancer screening (men only)</li> <li>• Abdominal aortic aneurysm screening</li> <li>• Screening for obesity</li> <li>• Diabetes screening</li> <li>• Screening for high blood pressure and cholesterol (lipid disorders)</li> <li>• Screening for depression</li> <li>• Colorectal cancer screening (Enrollees 50 years and older)</li> <li>• Smoking cessation counseling</li> <li>• Diet and exercise counseling</li> <li>• Mental Health Counseling</li> <li>• Alcohol and Drug Screening</li> </ul>
<b>Dental Benefits</b>	<ul style="list-style-type: none"> <li>• General dentistry (including regular and emergency treatment)               <ul style="list-style-type: none"> <li>○ Care and treatment of the teeth and gums, including General dental exams every 6 months</li> <li>○ Simple and complex surgical services and extractions</li> <li>○ Emergency dental care</li> <li>○ Fillings</li> <li>○ Cleaning and fluoride treatments every 6 months</li> <li>○ Partial dentures when medically necessary</li> <li>○ X-rays (complete series limited to 1 time every 3 years)</li> <li>○ Dentures (one new set every 5 years) and denture repair</li> <li>○ Oral surgery</li> <li>○ \$1000 limit for services per calendar year</li> <li>○ Any dental service that requires inpatient hospitalization must have prior authorization</li> <li>○ Elective surgical procedures requiring general anesthesia</li> </ul> </li> </ul> <p>*Does not include routine orthodontic care</p>

<b>Dialysis Services</b>	<ul style="list-style-type: none"> <li>• Treatment up to 3 times per week (limited to once per day)</li> </ul>
<b>Durable Medical Equipment (DME) &amp; Disposable Medical Supplies (DMS)</b>	<ul style="list-style-type: none"> <li>• Durable Medical Equipment (DME)</li> <li>• Disposable Medical Supplies (DMS)</li> </ul>
<b>Family Planning</b>	<ul style="list-style-type: none"> <li>• Pregnancy testing; counseling for the woman</li> <li>• Routine and emergency Contraception</li> <li>• Voluntary sterilizations (requires a signature of an approved sterilization form by the Enrollee 30 days prior to the procedure)</li> <li>• Screening, counseling, and Immunizations (including for HPV)</li> <li>• Screening and preventive treatment for all sexually transmitted diseases</li> <li>• Nurse Midwife and Doula services</li> </ul>
<b>Hearing Benefits</b>	<ul style="list-style-type: none"> <li>• Diagnosis and treatment of conditions related to hearing, including hearing aids and hearing aid batteries</li> </ul>
<b>Home Health Services</b>	<ul style="list-style-type: none"> <li>• In-home health care services, including: <ul style="list-style-type: none"> <li>○ Nursing and home health aide care</li> <li>○ Home health aide services provided by a home health agency</li> <li>○ Physical therapy, occupational therapy, speech pathology, and audiology services</li> </ul> </li> </ul>
<b>Hospital Services</b>	<ul style="list-style-type: none"> <li>• Outpatient Services (preventive, diagnostic, therapeutic, rehabilitative, or palliative Services)</li> <li>• Inpatient Services (hospital stay)</li> </ul>
<b>Laboratory &amp; X-ray Services</b>	<ul style="list-style-type: none"> <li>• Lab tests and X-rays</li> </ul>
<b>Nursing Home Care</b>	<ul style="list-style-type: none"> <li>• Full-time skilled nursing care in a nursing home for up to 30 consecutive days</li> </ul>
<b>Pharmacy Services (prescription drugs)</b>	<ul style="list-style-type: none"> <li>• Prescription drugs included on the Amerigroup DC drug formulary. You can find the drug formulary at <a href="http://myamerigroup.com/DC">myamerigroup.com/DC</a> or by calling Enrollee Services.</li> </ul>
<b>Podiatry</b>	<ul style="list-style-type: none"> <li>• Special care for foot problems</li> <li>• Regular foot care when medically needed.</li> </ul>
<b>Primary Care Services</b>	<ul style="list-style-type: none"> <li>• Preventive, acute, and chronic health care Services generally provided by your PCP</li> </ul>
<b>Rehabilitation Services</b>	<ul style="list-style-type: none"> <li>• When pre-authorized as medically necessary to help improve functioning following an acute injury or other medical events. This includes physical, speech, and occupational therapy.</li> </ul>
<b>Specialist Services</b>	<ul style="list-style-type: none"> <li>• Health care Services provided by specially trained doctors or advanced practice nurses.</li> <li>• Referrals are usually required</li> </ul>
<b>Transportation Services</b>	<ul style="list-style-type: none"> <li>• Transportation to and from medical appointments to include services covered by DHCF</li> </ul>

## **Services NOT covered by Amerigroup DC**

- Cosmetic surgery
- Experimental or investigational services, surgeries, treatments, and medications
- Services that are part of a clinical trial protocol
- Abortion, or the voluntary termination of a pregnancy, is not required under Federal law
- Infertility treatment
- Services that are not medically necessary
- Open heart surgery
- Vision care
- Organ transplant
- Some counseling or referral services may not be covered by Amerigroup DC due to religious or moral beliefs. Contact Amerigroup DC Enrollee Services at 800-600-4441 for more information.

## **Transition of Care**

If Amerigroup DC is new for you, you can keep your scheduled doctor's appointments and prescriptions for the first 90 days. If your provider is not currently in the Amerigroup DC network, you may be asked to select a new provider within the Amerigroup DC provider network. If your doctor leaves the Amerigroup DC network, we will notify you within 15 calendar days so that you have time to select another provider. If Amerigroup DC terminates your provider, we will notify you within 30 calendar days before the effective termination date.

## **Other Important Information**

### **What if I move?**

- Update your contact information online at [www.districtdirect.dc.gov](http://www.districtdirect.dc.gov).
- Call Amerigroup DC Enrollee Services at 800-600-4441 (TTY 711).

### **What if I have a baby?**

- Call DC Economic Security Administration (ESA) Change Center at (202) 727-5355.
- Call Amerigroup DC Enrollee Services at 800-600-4441 (TTY 711).

### **What if I adopt a child?**

- Call DC Economic Security Administration (ESA) Change Center at (202) 727-5355.

### **What if someone in my family dies?**

- Call DC Economic Security Administration (ESA) Change Center at (202) 727-5355.
- Call Amerigroup DC Enrollee Services at 800-600-4441 (TTY 711).

## **How to change my MCO?**

- You can change your MCO:
  - During the 90 calendar days following the date of your initial enrollment or 90 calendar days after the date you received your enrollment notice from the District, whichever is later.
  - Once a year during open enrollment.
  - If temporary loss of eligibility causes you to miss open enrollment.
  - If the District imposes sanctions on the MCO or suspends enrollment.
    - At any time, if you have a good reason/cause, such as you move out of the service area;
    - Amerigroup DC does not, because of moral or religious objections, cover the service(s) you need;
    - You need related services to be performed at the same time, and not all the related services are available, and if your provider determines that receiving the services separately is risky.
    - You believe the MCO has discriminated against you based on your race, gender, ethnicity, national origin, religion, disability, pregnancy, age, genetic information, marital status, sexual orientation, gender identification, personal appearance, familial responsibilities, political affiliation, and source of income or place of residence or;
    - You feel you have received poor quality of care, lack of access to covered services, or lack of access to Providers experienced in dealing with your health care needs.
- D.C. Healthy Families will send you a letter two months before open enrollment. The letter tells you how to change MCOs.
- When you change your MCO, your health care information will transition to the new MCO you choose so that you can continue to get the care you need.

## **You will not be allowed to get health care from Amerigroup DC anymore if you:**

- Become eligible for any other medical assistance program or health insurance.

## **The D.C. government may remove you from Amerigroup DC if you:**

- Let someone else use your Enrollee ID Card;
- committed healthcare fraud; or
- do not follow your Enrollee responsibilities.

## **What if I get a bill for a covered service?**

If you get a bill for a covered service in the list above, call Enrollee Services at 800-600-4441 (TTY 711).

### **Paying for non-covered services**

- If you decide you want a service that we do not pay for and you do not have written permission from Amerigroup DC, you must pay for the service yourself.
- If you decide to get a service we do not pay for, you must sign a statement that you agree to pay for the service yourself.
- Remember always to show your Enrollee ID Card and tell doctors you are an Enrollee of Amerigroup DC *before* you get services.

### **Advance Directive**

An Advance Directive can let you choose a person to make choices about your medical care. An advance directive also lets you say what kind of medical treatment you want to receive if you become too ill to tell others your wishes.

It is important to talk about an Advance Directive with your family, your PCP, or others who might help you.

If you want to complete and sign an Advance Directive, ask your PCP for help during your next appointment, or call Enrollee Services at 800-600-4441 (TTY 711), and they will help you.

### **Special information about how we pay your doctors**

You have the right to find out if Amerigroup DC has special financial arrangements with Amerigroup DC doctors.

Please call Amerigroup DC Enrollee Services at 800-600-4441 (TTY 711) for this information.

### **What is Fraud?**

Fraud is a serious matter. Fraud is making false statements or representations of material facts to obtain some benefit or payment for which no entitlement would otherwise exist. An example of fraud for providers is billing for services that were not furnished and supplies not provided. An example of fraud for Enrollees is falsely claiming that you live in the district when you live outside the boundaries of the District of Columbia.

If you suspect fraud, please let us know. It is not required that you identify yourself or give your name. If you would like more information about what constitutes fraud, visit the Amerigroup DC website at [myamerigroup.com/DC](http://myamerigroup.com/DC). To report fraud, call Amerigroup DC Compliance Hotline, **877-660-7890**, or call the DC Department of Health Care Finance's Fraud Hotline at **1 (877) 632-2873**.

## **Grievances, Appeals, and Fair Hearings**

Amerigroup DC and the District government both have ways that you can complain about the care you get or the services Amerigroup DC provides to you. You may complain as described below.

### **Grievances**

- If you are unhappy with something that happened to you, you can file a Grievance. Examples of why you might file a Grievance include the following:
  - You feel you were not treated with respect
  - You are not satisfied with the health care you got
  - It took too long to get an appointment
- To file a Grievance, you should call Enrollee Services at 800-600-441 (TTY 711).
- Your doctor can also file a Grievance for you.

You can file a Grievance at any time after the thing you are unhappy about. Amerigroup DC will usually give you a decision within 90 calendar days but may ask for extra time (but at most 104 calendar days total) to give a decision.

To File a grievance in writing with Amerigroup DC, mail to Centralized Appeals Processing | Amerigroup District of Columbia, Inc. | P.O. Box 62429 | Virginia Beach, VA 23466-2429.

### **Appeals**

- If you believe your benefits were unfairly denied, reduced, delayed, or stopped, you have a right to file an Appeal with Amerigroup DC. If you call and give your Appeal over the phone, Amerigroup DC will summarize your Appeal in a letter and send you a copy. Be sure to read the letter carefully.
- Your Appeal will be decided by Amerigroup DC within 30 calendar days from the date your Appeal was received.
- If Amerigroup DC needs more time to get information and the District decides this would be best for you, or if you or your Advocate requests more time, Amerigroup DC may increase this time for the decision by 14 calendar days. Amerigroup DC must give you written notice of the extension.
- In the mail, you will receive written notice of Amerigroup DC's decision about your Appeal.
- If you are not happy with Amerigroup DC's decision about your Appeal, you may request a Fair Hearing.
- To file an Appeal with Amerigroup DC, call Enrollee Services at 800-600-4441 (TTY 711).
- To file an Appeal in writing with Amerigroup DC, mail to Centralized Appeals Processing | Amerigroup District of Columbia, Inc. | P.O. Box 62429 | Virginia Beach, VA 23466-2429.



## **Fair Hearings**

If you are not satisfied with the outcome of the appeal you filed with Amerigroup DC, you can request a “Fair Hearing” with the DC’s Office of Administrative Hearings.

To file a request for a Fair Hearing, call or write the District government at:

District of Columbia Office of Administrative Hearings  
Clerk of the Court  
441 Fourth St. NW  
Room N450  
Washington, DC 20001  
Telephone Number: (202) 442-9094

## **Deadlines:**

- You must file an Appeal within 60 calendar days from the date of the Adverse Benefit Determination Notice.
- You may request a Fair Hearing no more than 120 calendar days from the date of the Amerigroup DC Resolution of the Appeal Notice.
- If you want to continue receiving the benefit during your Fair Hearing or Appeal, you must request the Fair Hearing or Appeal within the later of the following:
  - Within 10 calendar days from Amerigroup DC postmark of the Adverse Benefit Determination notice or the Resolution of Appeal notice or
  - The intended effective date of the Amerigroup DC proposed action (or, in other words, when the benefit is to stop).

Your provider may file an Appeal or request a Fair Hearing on your behalf.

## **Expedited (emergency) Grievances and Appeals Process**

If your Appeal is determined to be an emergency, Amerigroup DC will give you a decision within 72 hours. An Appeal is considered an emergency if it would be harmful or painful to you if you had to wait for the standard time frame of the Appeal procedure.

All Appeals filed by Enrollees with HIV/AIDS, mental illness, or any other condition that requires attention right away will be resolved and communicated back to the Enrollee within 24 hours of filing the Appeal.

## **Your Rights during the Grievances, Appeals, and Fair Hearings Process**

- You have the right to a Fair Hearing. You may request a Fair Hearing from the Office of Administrative Hearing after going through the one-level Appeal process with Amerigroup DC. You must request a fair hearing no more than 120 calendar days from the Resolution of the Appeal Notice.
- If Amerigroup DC does not give you notice regarding your appeal or does not give you notice in a timely manner, then the appeal process will be considered complete, and you may request a fair hearing.
- You have a right to keep receiving the benefit we denied while your Appeal or Fair Hearing is being reviewed. To keep your benefit during a Fair Hearing, you must request the Fair Hearing within a certain number of days - this could be as short as 10 calendar days.
- You have the right to have someone from Amerigroup DC help you through the Grievance and Appeals process.
- You have a right to represent yourself or be represented by your family caregiver, lawyer, or another representative.
- You have a right to have accommodations made for any special health care need.
- You have a right to adequate TTY/TTD capabilities and services for the visually impaired.
- You have a right to adequate translation services and an interpreter.
- You have a right to see all documents related to the Grievance, Appeal, or Fair Hearing.

If you have any questions about the Grievances and Appeals/Fair Hearings process, please call Enrollee Services at 800-600-4441 (TTY 711).

## Notice of Privacy Practices

This Notice describes how medical information about you may be used and disclosed and how you can get this information. Please read it carefully.

Information about your health and money is private. The law says we must keep this kind of information, called PHI, safe for our members. That means if you're a member right now or if you used to be, your information is safe.

We get information about you from state agencies for Medicaid and the Children's Health Insurance Program after you become eligible and sign up for our health plan. We also get it from your doctors, clinics, labs, and hospitals so we can OK and pay for your health care.

Federal law says we must tell you what we have to do to protect PHI that's told to us, in writing or saved on a computer. We also have to tell you how we keep it safe. To protect PHI:

- On paper (called physical), we:
  - Lock our offices and files
  - Destroy paper with health information so others can't get it
- Saved on a computer (called technical), we:
  - Use passwords so only the right people can get in
  - Use special programs to watch our systems
- Used or shared by people who work for us, doctors, or the state, we:
  - Make rules for keeping information safe (called policies and procedures)
  - Teach people who work for us to follow the rules

### **When is it OK for us to use and share your PHI?**

We can share your PHI with your family or a person you choose who helps with or pays for your health care if you tell us it's OK. Sometimes, we can use and share it **without** your OK:

- **For your medical care (treatment)**
  - To help doctors, hospitals and others get you the care you need
- **For payment reasons**
  - To share information with the doctors, clinics and others who bill us for your care
  - When we say we'll pay for health care or services before you get them
  - To support you and help you get available benefits
- **For health care business reasons (operations)**
  - To help with audits, fraud and abuse prevention programs, planning, and everyday work
  - To find ways to make our programs better

We may give your PHI to health information exchanges for payment, health care operations and treatment. If you don't want this, please visit [myamerigroup.com/DC](http://myamerigroup.com/DC) for more information.
- **For public health reasons**
  - To help public health officials keep people from getting sick or hurt

- **With others who help with or pay for your care**
  - With your family or a person you choose who helps with or pays for your health care, if you tell us it's OK
  - With someone who helps with or pays for your health care, if you can't speak for yourself and it's best for you

We must get your OK in writing before we use or share your PHI for all but your care, payment, everyday business, research or other things listed below. We have to get your written OK before we share psychotherapy notes from your doctor about you. We would also need your written OK if we were going to sell your PHI or use or share it for marketing.

You may tell us in writing that you want to take back your written OK. We can't take back what we used or shared when we had your OK. But we will stop using or sharing your PHI in the future.

**Other ways we can — or the law says we have to — use your PHI:**

- To help the police and other people who make sure others follow laws. For example, we may use PHI to report abuse and neglect.
- To help the court when we're asked. For example, we may use PHI to answer legal documents that are filed with the court like complaints or subpoenas.
- To give information to health oversight agencies or others who work for the government with certain jobs. For example, we provide information for audits or exams.
- To help coroners, medical examiners or funeral directors find out your name and cause of death.
- To help when you've asked to give your body parts to science or for research. For example, we may share your information if you have agreed to become an organ donor in the event of your death.
- To keep you or others from getting sick or badly hurt. For example, we may share your PHI to prevent you or others from being harmed in an urgent situation.
- To give information to workers' compensation. For example, we may share your information if you get sick or hurt at work.

**What are your rights?**

- You can ask to look at your PHI and get a copy of it. We don't have your whole medical record, though. If you want a copy of your whole medical record, ask your doctor or health clinic.
- You can ask us to change the medical record we have for you if you think something is wrong or missing.
- Sometimes, you can ask us not to share your PHI. But we don't have to agree to your request. For example, if the PHI is part of clinical notes and by law cannot be released, your request may be denied.
- You can ask us to send PHI to a different address than the one we have for you or in some other way. We can do this if sending it to the address we have for you may put you in danger.
- You can ask us to tell you all the times over the past six years we've shared your PHI with someone else. This won't list the times we've shared it because of health care, payment, everyday health care business or some other reasons we didn't list here.

- You can ask for a paper copy of this notice at any time, even if you asked for this one by email.
- If you pay the whole bill for a service, you can ask your doctor not to share the information about that service with us.

**What do we have to do?**

- The law says we must keep your PHI private except as we've said in this notice.
- We must tell you what the law says we have to do about privacy.
- We must do what we say we'll do in this notice.
- We must send your PHI to some other address or in a way other than regular mail if you ask and if you're in danger.
- We must tell you if we have to share your PHI after you've asked us not to.
- If state laws say we have to do more than what we've said here, we'll follow those laws.
- We have to let you know if we think your PHI has been breached.

**We may contact you**

You agree that we, along with our affiliates and/or vendors, may call or text any phone numbers you give us, including a wireless phone number, using an automatic telephone dialing system and/or a pre-recorded message. Without limit, these calls or texts may be about treatment options, other health-related benefits and services, enrollment, payment, or billing.

**What if you have questions?**

If you have questions about our privacy rules or want to use your rights, please call Enrollee Services at 800-600-4441. If you're deaf or hard of hearing, call TTY 711.

**What if you have a complaint?**

We're here to help. If you feel your PHI hasn't been kept safe, you may call Enrollee Services or contact the Department of Health and Human Services.

**Write to or call the Department of Health and Human Services:**

Office for Civil Rights  
 U.S. Department of Health and Human Services  
 200 Independence Ave. SW  
 Washington, DC 20201  
 Phone: 1-800-368-1019  
 TDD: 1-800-537-7697

We reserve the right to change this Health Insurance Portability and Accountability Act (HIPAA) notice and the ways we keep your PHI safe. If that happens, we'll tell you about the changes in a newsletter. We'll also post them on the Web at [myamerigroup.com/pages/privacy.aspx](http://myamerigroup.com/pages/privacy.aspx).

## **Race, ethnicity, language, sexual orientation, and gender identity**

We may receive race, ethnicity, language, sexual orientation, and gender identity information about you. We protect this information as described in this notice.

We use this information to:

- Make sure you get the care you need
- Create programs to improve health outcomes
- Develop and send health education information
- Let doctors know about your language needs
- Provide translator services

We do **not** use this information to:

- Issue health insurance
- Decide how much to charge for services
- Determine benefits
- Disclose to unapproved users

## **Your personal information**

We must follow state laws if they say we need to do more than the HIPAA Privacy Rule. We may ask for, use and share personal information (PI) as we talked about in this notice. Your PI is not public and tells us who you are. It's often taken for insurance reasons.

- We may use your PI to make decisions about your:
  - Health
  - Habits
  - Hobbies
- We may get PI about you from other people or groups like:
  - Doctors
  - Hospitals
  - Other insurance companies
- We may share PI with people or groups outside of our company without your OK in some cases. For example, we may share PI with claims and billing vendors who we hire to help us run our business.
- We'll let you know before we do anything where we have to give you a chance to say no.
- We'll tell you how to let us know if you don't want us to use or share your PI.
- You have the right to see and change your PI.
- We make sure your PI is kept safe.

## **The Office of the Health Care Ombudsman and Bill of Rights**

The Health Care Ombudsman Program is a District of Columbia Government program that assists you in receiving health care from your MCO. The Health Care Ombudsman can provide the following services:

- Explain the health care you have a right to receive;
- Respond to your questions and concerns about your health care;
- Help you understand your rights and responsibilities as an Enrollee in an MCO;
- Assist in obtaining the medically necessary services that you need;
- Answer questions and concerns you may have about the quality of your health care;
- Help you resolve problems with your doctor or other health care provider;
- Assist in resolving complaints and problems with your MCO;
- Assist with appeal processes; and
- Assist in filing a Fair Hearing Request for you.

To reach the Health Care Ombudsman, please call (202) 724-7491 or 1 (877) 685-6391 Toll-Free. The Health Care Ombudsman does not make grievances, appeals, or Fair Hearings decisions. The Office of Health Care Ombudsman & Bill of Rights is located at:

One Judiciary Square  
441 Fourth St. NW  
Suite 250 North  
Washington, DC 20001  
Phone: (202) 724-7491  
Fax: (202) 442-6724  
Toll-Free Number: 1(877) 685-6391  
Email: [healthcareombudsman@dc.gov](mailto:healthcareombudsman@dc.gov)

## Definitions

<b>Advance Directive</b>	A written, legal paper that is signed to let others know what health care you want or do not want if you are sick or hurt and cannot speak for yourself.
<b>Advocate</b>	A person who helps you get the health care and other Services you need.
<b>Appeal</b>	An Appeal is a special complaint you make if you disagree with a decision Amerigroup DC makes to deny a request for health care services or payment for services you already received. You may also make this kind of complaint if you disagree with a decision to stop the services that you are receiving.
<b>Appointment</b>	You and your doctor set aside a time and day to meet your healthcare needs.
<b>Care Manager</b>	Someone who works for Amerigroup DC who will help you get the care, support, and information you need to stay healthy.
<b>Check-Up</b>	<i>See Screening</i>
<b>Contraception</b>	Supplies related to birth control
<b>Covered Services</b>	Health care services that Amerigroup DC will pay for when completed by a provider.
<b>Detoxification</b>	Getting rid of harmful substances from the body, such as drugs and alcohol.
<b>Disease Management Program</b>	A program to help people with chronic illnesses or Special Health Care Needs, such as asthma, high blood pressure, or mental illness, get the necessary care and services.
<b>Durable Medical Equipment (DME)</b>	Special medical equipment that your doctor may ask or tell you to use in your home.
<b>Emergency Care</b>	Care you need right away for a serious, sudden, sometimes life-threatening condition.
<b>Enrollee</b>	The person who gets health care through the Amerigroup DC provider network.
<b>Enrollee Identification (ID) Card</b>	The card that lets your doctors, hospitals, pharmacies, and others know that you are an Enrollee of Amerigroup DC.
<b>Fair Hearing</b>	You can request a fair hearing with DC's Office of Administrative Hearings if you are not satisfied with the decision regarding your appeal.
<b>Family Planning</b>	Services include pregnancy tests, birth control, testing and treatment for sexually transmitted infections, and HIV/AIDs testing and counseling.



<b>Family and General Practice Doctor</b>	A doctor that can treat the whole family.
<b>Grievance</b>	If you are unhappy with the care you get or the health care services Amerigroup DC gives you, you can call Enrollee Services to file a grievance.
<b>Handbook</b>	This book gives you information about Amerigroup DC and our services.
<b>Hearing Impaired</b>	If you cannot hear well or if you are deaf.
<b>Immunization</b>	Shot or vaccination.
<b>Internal Medicine Doctor</b>	Doctor for adults and children over 14 years old.
<b>Interpretation/Translation Services</b>	Help from Amerigroup DC when you need to talk to someone who speaks your language, or you need help talking with your doctor or hospital.
<b>Managed Care Plan (MCP)</b>	A company that the District of Columbia pays to give you health care and health services.
<b>Maternity</b>	The time when a woman is pregnant and shortly after childbirth.
<b>Mental Health</b>	How a person thinks, feels, and acts in different situations.
<b>Network Providers</b>	Doctors, nurses, dentists, and other people who take care of your health and are a part of Amerigroup DC.
<b>Non-Covered Services</b>	Health care that Amerigroup DC does not pay for when completed by a provider.
<b>OB/GYN</b>	Obstetrician/Gynecologist; a doctor trained to care for a woman's health, including when she is pregnant.
<b>Out-of-Network Providers</b>	Doctors, nurses, dentists, and others who take care of your health are not part of Amerigroup DC.
<b>Pharmacy</b>	Where you pick up your medicine.
<b>Physician Incentive Plan</b>	Tells you if your doctor has any special arrangements with Amerigroup DC.
<b>Post-Partum Care</b>	Health care for a woman after she has her baby.
<b>Prenatal Care</b>	Care is given to a pregnant woman the entire time she is pregnant.
<b>Prescription</b>	Medicine that your doctor orders for you; you must take it to the pharmacy to pick up the prescription.
<b>Preventive Counseling</b>	When you want to talk to someone about ways to help you stay healthy or keep you from getting sick or hurt.
<b>Primary Care Provider (PCP)</b>	The doctor that takes care of you most of the time.
<b>Prior Authorization</b>	Written permission from Amerigroup DC to get health care or treatment.

<b>Provider Directory</b>	A list of all providers who are part of the Amerigroup DC network.
<b>Providers</b>	Doctors, nurses, dentists, and other people who take care of your health.
<b>Referral</b>	When your primary doctor gives you a written note that sends you to see a different doctor.
<b>Routine Care</b>	Regular care you get from your primary care provider or a doctor that your primary care provider sends you to. Routine Care can be a check-up, physical, health screen, and regular care for health problems like diabetes, asthma, and hypertension.
<b>Screening</b>	A test that your doctor or other health care provider may do to see if you are healthy.
<b>Self-Referral Services</b>	Certain services you can get without getting a written note or referral from your primary doctor.
<b>Services</b>	The care you get from your doctor or other health care provider.
<b>Special Health Care Needs</b>	Adults who need health care and other special services that are more than or different from what other adults need.
<b>Specialist</b>	A doctor trained to give special care, like an ear, nose, throat, or foot doctor.
<b>Specialty Care</b>	Health care is provided by doctors or nurses trained to give a specific kind of health care.
<b>Sterilization Procedures</b>	A surgery you can have if you do not want children in the future.
<b>Transportation Services</b>	Help from Amerigroup DC to get to your appointment. The type of transportation you get depends on your medical needs.
<b>Treatment</b>	The care you get from your doctor.
<b>Urgent Care</b>	Care you need within 24 hours, but not right away.
<b>Visually Impaired</b>	If you cannot see well or you are blind.





Amerigroup District of Columbia, Inc.

Enrollee Services:

609 H St. NE, Ste. 200

Washington, DC 20002

800-600-4441 (TTY 711) (toll-free)

[myamerigroup.com/dc](http://myamerigroup.com/dc)



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