

Welcome to Heritage Health

Heritage Health is Nebraska's Medicaid Managed Care program. It gives you one health plan for your physical health, behavioral health, and medicines. It also offers extra benefits and services. Heritage Health has three different health plan options:

Nebraska Total Care
UnitedHealthcare Community Plan of Nebraska
WellCare of Nebraska

You can be a member of the health plan that best fits you and your family's needs.

Change a Plan

When you become eligible for Heritage Health, you will be enrolled in one of our three health plans. You will receive a Welcome Packet that explains the plan chosen for you. If you are not happy with the plan chosen for you, it's easy to change your health plan within the first 90 days of enrollment.

Online:

You can log in to your account at www.neheritagehealth.com 24 hours a day, 7 days a week and change health plans online.

Call:

You can call our automated phone enrollment system. It is available 24 hours a day, 7 days a week. Press option 1 when you call our toll free number at 1-888-255-2605. Follow the prompts to pick a new plan.

We have Choice Counselors available from 7am-7pm Central Time, Monday through Friday.

Call us at 1-888-255-2605. TTY/TTD users ONLY call 711.

Please have these things ready for the person you are changing a plan for:

- · Name, address, and date of birth
- The Medicaid ID number, Social Security number, or PIN for the person you are calling about.

Mail:

You can fill out the health plan change form included within your packet. You can mail it in the envelope provided to:

Heritage Health Enrollment Center 9370 McKnight Road, Suite 300 Pittsburgh, PA

Please make sure all parts of the form are filled out and signed by the member before sending it back.

Fax:

Instead of mailing, you may fax your completed health plan change form to 1-800-852-6311.

Please make sure you fill out all parts of the form and that it is signed by the member before faxing it back.

How to Consider the Best Health Plan For You

Here are some things to think about when looking at your health plan:

- What services are important to me and my family?
- Is my doctor or my family's doctor a participating provider in the health plan?
- Does the health plan have all of the different types of doctors that I or my family will need? Different
 doctors might be pediatricians who care for children, family doctors who care for the whole family, or
 specialists who treat an ongoing medical condition.
- Review the Frequently Asked Questions (FAQs) on our Heritage Health website, www.neheritagehealth.com, for information on special needs, how to receive materials and how to use our Provider Directory.
- Review the Health Plan Comparison Chart on our Heritage Health website: www.neheritagehealth.com.

Health Plan Benefits

All Heritage Health plans offer the same health care services. This is not a complete list of services. Your health plan will send you the full list of services.

- Doctor visits
- Prescriptions
- Hospital
- Mental health
- Emergency room visits
- Vision and glasses
- Medical supplies and durable medical equipment

- Chiropractic visits
- Skilled nursing
- Family planning
- HEALTH
- Physical,
- occupational, and speech therapy
- Hearing and hearing aids

- X-rays and lab work
- Home health
- Dialysis
- Hospice
- Birthing center
- Transplants
- Substance abuse treatment

Services Not Covered by Your Health Plan

There are other services that your health plan does not cover, but are still covered by Medicaid. Use your Medicaid card for these services. THE SERVICES LISTED BELOW ARE STILL AVAILABLE TO YOU:

- Dental services
- Non-Emergency Transportation
- Personal Assistance Services (PAS)
- Long Term Care
- Home and Community Based Waiver Services (HCBS) (for those who are eligible)

Rights and Responsibilities

As a Heritage Health member, you have the right to:

- Be treated with respect and dignity, without discrimination or retaliation
- · Get information about your illness or medical condition
- · Understand the treatment options, risks, and benefits
- Make informed decisions about whether or not you will receive treatment
- · Make decisions about your health care including the right to refuse treatment
- Talk with your medical professional and health plan and know your medical information will be kept confidential
- Choose a medical professional as your primary care provider (PCP), which may be a Nurse Practitioner or Physician Assistant
- Have access to your PCP and health plan
- · Receive medical care in a timely manner
- · Request a copy of your medical record and request changes to your medical record
- · Make a complaint about your medical professional and/or health plan and receive a timely response
- Receive information on the medical services provided by your health plan
- Change your PCP at any time
- Change your health plan within 90 days of initial enrollment or during open enrollment each year
- Have Managed Care and health plan materials explained if you do not understand them
- Have interpreters at no cost, if necessary, during medical appointments and in all discussions with your PCP or health plan
- · Request an appeal if services are denied, terminated, or reduced
- · Make advance directives, if desired, and receive assistance if needed
- Receive proper medical care 24 hours a day, 7 days a week

When you are in a Department of Health and Human Services program, you may not be subject to discrimination on basis of:

Race
 Color
 Sex
 Age

National origins
 Religious beliefs
 Political beliefs
 Handicap

As a Heritage Health member, you have the responsibility to:

- Understand, to the best of your ability, how Heritage Health is used to receive health care
- Keep your scheduled appointments with your medical professional
- Call your medical professional's office at least 24 hours in advance if your appointment must be rescheduled
- Tell your medical professional your medical problems
- Ask questions if you do not understand
- Follow your medical professional's orders and advice
- · Assist in the transfer of your medical records
- Get services from your primary care provider unless referred elsewhere
- Report to ACCESSNebraska if your address has changed, you are or become pregnant or any other changes that could affect your Medicaid eligibility or Heritage Health coverage
- Cooperate with all Heritage Health inquiries and surveys
- · Choose providers who participate in the health plan you choose

Contact Information

Heritage Health Enrollment Center

1-888-255-2605 TTY/TTD, call 711 www.neheritagehealth.com

IntelliRide

1-844-531-3783

www.iridenow.com/home/nebraska.aspx

Nebraska Medicaid Eligibility Helpline

ACCESSNebraska toll free at 855-632-7633; 402-473-7000 (Lincoln) or 402-595-1178 (Omaha)

TTDD: 402-471-7256

www.accessnebraska.ne.gov

Social Security Administration

1-800-772-1213 TTY: 1-800-325-0778

www.ssa.gov/agency/contact

Women, Infants and Children (WIC) Program

402-471-2781 or toll free at 1-800-942-1171

www.dhhs.ne.gov/wic

If you need materials in alternative formats and communication modes, please contact the Heritage Health Enrollment Center.