

Medicaid and private insurance

What if I have other health insurance in addition to Medicaid?

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

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

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

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

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

Provider incentive plans

A physician incentive plan rewards doctors for treatments that reduce or limit services for people covered by Medicaid. Texas Children's Health Plan cannot make payments under a physician incentive plan if the payments are designed to induce providers to reduce or limit Medically Necessary Covered Services to Members. You have the right to know if your primary care provider (main doctor) is part of this physician incentive plan. You also have a right to know how the plan works. You can call 1-800-659-5764 to learn more about this.

Your privacy

Texas Children's Health Plan takes the confidentiality of your personal health information—information from which you can be identified—very seriously. In addition to complying with all applicable laws, we carefully handle your personal health information (PHI) in accordance with our confidentiality policies and procedures. We are committed to protecting your privacy in all settings.

We use and share your information only to give you health benefits.

Our Notice of Privacy Practices has information about how we use and share our members' PHI. A copy of our Notice of Privacy is included with your member handbook and is on our website at www.TexasChildrensHealthPlan.org. You may also get a copy of our Notice of Privacy by calling Member Services toll-free at 1-800-659-5764.

If you have questions about our notice, call Member Services.

When you are not satisfied or have a complaint

What is a complaint?

A complaint is when you are not happy with your health care or services provided by your doctor, his or her office staff, or the Texas Children's Health Plan staff.

What should I do if I have a complaint? Who do I call?

We want to help. If you have a complaint, please call us toll-free at 1-800-659-5764 to tell us about your problem. A Texas Children's Health Plan Member Services Advocate can help you file a complaint. Just call 1-800-659-5764. Most of the time, we can help you right away or at the most within a few days.

Once you have gone through the Texas Children's Health Plan complaint process, you can complain to the Health and Human Services Commission (HHSC) by calling toll-free 1-866-566-8989. If you would like to make your complaint in writing, please send it to the following address:

Texas Health and Human Services Commission
 Health Plan Operations - H-320
 P.O. Box 85200
 Austin, TX 78708-5200
 ATTN: Resolution Services

If you can get on the Internet, you can send your complaint in an email to HPM_Complaints@hhsc.state.tx.us.

Can someone from Texas Children's Health Plan help me file a complaint?

A Texas Children's Health Plan Member Advocate can help you file a complaint. Just call us toll-free at 1-800-659-5764. Most of the time, we can help you right away or at the most within a few days.

If you would like to make your complaint in writing, send it to:

Texas Children's Health Plan
Attention: Member Services Complaints
PO Box 301011
Houston, TX 77230

Be sure to include your name and member ID number from your member ID card.

What are the requirements and timeframes for filing a complaint?

You can file a complaint at any time. You will get a letter within 5 days telling you your complaint was received.

How long will it take to process my complaint?

Within 5 business days of receiving your oral or written complaint, Member Services will send you a letter. It will confirm the day we received your complaint. Texas Children's Health Plan will review the facts and take action within 30 days of receiving your complaint. A resolution letter will be sent to you.

The letter will:

- Describe your complaint.
- Tell you what has been or will be done to solve your problem.
- Tell you how to ask for a second review of your complaint.

How do I file a complaint with HHSC, once I have gone through Texas Children's Health Plan's complaint process?

Once you have gone through Texas Children's Health Plan's complaint process, you can complain to the Health and Human Services Commission (HHSC) by calling toll-free 1-866-566-8989.

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