ROCKY MOUNTAIN HEALTH PLANS
PRIME MEMBER HANDBOOK

RMHP Prime is a health plan for Health First Colorado Members
(Colorado's Medicaid Program)
Colorado Counties: Garfield | Gunnison | Mesa | Montrose | Pitkin | Rio Blanco

Updated November 2019
Welcome to Rocky Mountain Health Plans: How We Can Help

This handbook gives information about how Rocky Mountain Health Plans (RMHP) can help you with your health. This handbook explains how to get physical and behavioral health care and how your health plan works. Please read it carefully.

RMHP has many health plans for people who live on the Western Slope. To be in this RMHP plan you must have Health First Colorado, you must be an adult or have disability status, and you must live in one of the following Colorado counties:

Garfield | Gunnison | Mesa | Montrose | Pitkin | Rio Blanco

Do you have questions or need help with your health care?

We are here to help and easy to reach. Call RMHP Customer Service at 888-282-8801 (TTY: 711) to find answers to these questions and more.

- Have you not seen a doctor in more than a year?
- Do you need help finding a doctor?
- Do you need help getting care? Do you need help getting physical health, mental health or substance use disorder care?
- Are you confused about your health care?
- Do you have an ongoing health condition?
- Do you need help with activities of daily living?
- Are you a loved one, caregiver, or family member of someone with health care needs?
- Do you smoke, drink, or use drugs and want help?
- Do you want to talk to a counselor?
- Do you want to know about other services in your community that can help you?
- Do you need help with life planning activities like an advanced care plan or advance directive?
- Do you need health care information in another language or format?

- Do you need large print?

How to Contact RMHP

If you have a question, need help with your health care, or have a special need, please contact us. We’re here to help.

- **Call RMHP Customer Service at 888-282-8801.** Representatives are available Monday – Friday, 8:00 a.m. – 5:00 p.m. If you are deaf, hard of hearing, or have a speech disability, dial 711 for Relay Colorado or use our Live Chat on rmhp.org.
- **Email** RMHP at customer_service@rmhp.org. Receive a response within 24 business hours.
- **Live Chat** with an RMHP Representative on rmhp.org. Representatives are available Monday – Friday, 8:00 a.m. – 5:00 p.m.
- **Visit RMHP at 2775 Crossroads Boulevard, Grand Junction, CO.** No appointment required. Representatives are available Monday – Friday, 8:00 a.m. – 5:00 p.m.
- **Para asistencia en español llame al 888-282-8801**
- **For Large Print, call 888-282-8801**

**Important Community Phone Numbers, Emails, and Websites**

**In these counties:** Garfield | Gunnison | Mesa | Montrose | Pitkin | Rio Blanco

**Call 211** for easy access to information about health and human services, including local transportation

**Call 911** for emergency assistance

**Colorado Children's Immunization Registry:** Call at 888-611-9918 or 303-692-2437

**Colorado Managed Care Ombudsman:** Call 877-435-7123 or email help123@maximus.com

**DentaQuest Member Services Support Line:** Call 855-225-1729 or visit dentaquest.com

**Department of Human Services and Social Services in Your Area**

- Garfield County: 970-945-9191
- Gunnison County: 970-641-3244
- Mesa County: 970-241-8480
- Montrose County: 970-252-5000
- Pitkin County: 970-920-5235
- Rio Blanco County: 970-878-9640

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**Questions? Rocky Mountain Health Plans is here to help.**
Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m.. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
Health Care Program for Children with Special Needs (HCP): Call Health First Colorado at 800-221-3943

Health First Colorado (Colorado’s Medicaid Program) Customer Contact Center: Call 800-221-3943 for questions about Health First Colorado (Medicaid) services and benefits.

Healthy Communities Early & Periodic Screening Diagnosis & Treatment (EPSDT) Family Health Coordinators

- Mesa and Gunnison Counties: 970-248-6930 or 888-685-8576 (toll-free)
- Garfield and Pitkin Counties: 970-665-6371
- Montrose County: 970-252-5000
- Rio Blanco County: 970-824-8233

Special Connections: Call 800-221-3943 (toll-free) or 303-866-7400 if pregnant and drink or use drugs

QuitLine Tobacco Cessation Counselor: Call 800-QUIT-NOW (800-784-8669) or visit MyQuitPath.com

Women, Infants & Children Food Program (WIC): Call 800-688-7777 or visit wicprograms.org/state/colorado

Important Websites

Rocky Mountain Health Plans – get information about the RMHP, participating providers, benefits and services, and information about this plan at rmhp.org.

Health First Colorado (Colorado’s Medicaid Program) – get information about Health First Colorado (Medicaid) benefits & services at healthfirstcolorado.com.

PEAK offers an online benefits portal for Coloradans to screen and apply for medical, food, and cash assistance programs. Members can also create an account to help manage their benefits including updating their contact information, income, and family size. Visit Colorado.gov/PEAK

Connect for Health Colorado – if you lose your Health First Colorado (Medicaid) coverage and need health insurance, visit Connect for Health Colorado at connectforhealthco.com or call RMHP for help.

Questions? Rocky Mountain Health Plans is here to help.
Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
Information for New Members

Are you getting this Member handbook as a new Member of RMHP? This information is mailed to new Members:

- **Member Handbook** – this Member handbook is for Rocky Mountain Health Plans Prime, also called RMHP Prime.
- **Rocky Mountain Health Plans Member ID card** – this Member ID card shows your name and your RMHP plan name. Show this to providers so they know who to bill for your care.

The Member handbook and the Provider Directory are available at [rmhp.org](http://rmhp.org) where you can view or print these documents. If you need a copy mailed to you at no cost, please call RMHP Customer Service at 888-282-8801 (TTY: 711).

I am a New Member. What Do I Do Now?

Each year you should see a primary care doctor like a family practitioner, internal medicine doctor, or pediatrician, even if you feel well.

1. Pick a primary care doctor
   
   This doctor is who you want to see for your yearly health check-up, and who you want to call when you are sick. This doctor will help with your well-care exams and will refer you to other doctors or medical providers when needed.

   Look in the RMHP Provider Directory. If you need a copy, go to [rmhp.org](http://rmhp.org) or ask RMHP to send the Directory to you. If you have a doctor or medical provider, look to see if this clinic or medical provider is listed. If you do not have a doctor or medical provider, use the information in the directory to pick a primary care provider for you and all members of your family.

2. Make an appointment now with a primary care doctor
   
   Call the doctor’s office and make an appointment if you have not had a visit at the practice in the past 12 months. See your doctor at least once a year. It is important to see your doctor when you are well so he or she knows you and can help you when you are sick. When you feel sick, tell your doctor. Your doctor will see you or will refer you to other medical and behavioral health care providers who can help you. If you cannot make a visit, call and tell your doctor at least one day before your scheduled visit.

3. Do you need help with your health care needs now?
   
   Ask for help. RMHP can help, and we work with doctors and people in your community who can help you with all of your physical, mental health, and substance use disorder needs.

4. Show your RMHP Member ID card
   
   You were mailed an RMHP Member ID card. Show this ID card any time you go to the doctor, hospital, or get prescription drugs. This will tell people where to send the bill. If you need another card, ask RMHP.
# Table of Contents

Welcome to Rocky Mountain Health Plans: How We Can Help................................................................. i
  Do you have questions or need help with your health care?............................................................... i

How to Contact RMHP .......................................................................................................................... ii

Important Community Phone Numbers, Emails, and Websites ................................................................. ii

Information for New Members ................................................................................................................ iv
  I am a New Member. What Do I Do Now? ........................................................................................ iv

RMHP is Here to Help ............................................................................................................................ 3

Contact RMHP ....................................................................................................................................... 3

Your RMHP Member ID Card .................................................................................................................. 4

Your Doctor or Primary Care Provider is Important ............................................................................... 4
  How to Pick a Doctor or PCP .................................................................................................................. 5
  The Importance of a Medical Home ....................................................................................................... 5
  How Your Primary Care Provider and Medical Home Can Help You ................................................... 5
  How to Change Your PCP ..................................................................................................................... 6
  Getting Care – the Basics ....................................................................................................................... 6
  Rocky Mountain Health Plans has People Who Can Help ................................................................. 10
  In Case of Emergency ........................................................................................................................... 12

Covered Benefits and Services ............................................................................................................... 14
  List of Services and Benefits ................................................................................................................ 14
  Wrap-around Services – Services Covered by Health First Colorado, not RMHP .................................. 24

Staying Healthy ..................................................................................................................................... 25
  Preventive Care for Adults ................................................................................................................... 26
  Suggested preventive care for women ................................................................................................. 27
  Suggested preventive care for men .................................................................................................... 27

Keeping Your Child Healthy .................................................................................................................... 28
  Early Periodic Screening, Diagnosis & Treatment ............................................................................... 28
  EPSDT Services .................................................................................................................................. 28
  Immunizations .................................................................................................................................. 30

Community Services and Resources ....................................................................................................... 31
  Children with Special Needs – Health Care Program for Children with Special Needs ..................... 31
  Dental Services .................................................................................................................................. 31
  Family Planning .................................................................................................................................. 31
  Hearing Services .................................................................................................................................. 32
  Home- and Community-Based Services (HCBS) ............................................................................... 32
  Human Services Department in Your Area ......................................................................................... 32
  Immunization Registry – Colorado Children’s Immunization Registry ............................................... 32
RMHP is Here to Help

Please call us whenever you have a question or need help with your health care. If you have a special need, call us. This Member handbook has information about how your health plan works. You can get a new RMHP Prime Member Handbook each year or any time you want it — just ask RMHP to mail it to you or look online. You can get this handbook in:

- Large print
- Braille
- A different language
- Or in another form that will work for you

Contact RMHP

Call Customer Service at 888-282-8801 or visit us on the web at rmhp.org to learn more about your benefits, finding providers, authorizations, how to file a claim, and more.

- **Para asistencia en español llame al 888-282-8801.** Español representantes de Servicio al Cliente están disponibles. For callers who do not speak English or Spanish, RMHP uses Language Line Services. RMHP provides interpretation services at no cost to Members. Tell Customer Service if you need interpreter services or help in other languages.

- **E-mail:** customer_service@rmhp.org

- **Online Live Chat:** rmhp.org, Monday-Friday, 8:00 a.m. – 5:00 p.m.

- **TTY and hearing impaired:** If you are deaf, hard of hearing, or have a speech disability, dial 711 for Relay Colorado. You can use this service 24 hours a day 365 days a year. This service helps people that are deaf or hard of hearing communicate through a special state-sponsored service known as a relay center. Operators get calls from TTY users on their own TTY devices. The operator will speak the information to a hearing person using a telephone. When the hearing person replies, the relay operator types the response into their TTY phone and sends the response to the TTY user at the other end. If a hearing person needs to initiate a call to a TTY user, the hearing person will start the conversation and the relay center operator dials the hard-of-hearing person’s TTY device. The relay center can also help people with speech disabilities to communicate by phone.

In-person - RMHP street address:
Rocky Mountain Health Plans
2775 Crossroads Blvd.
Grand Junction, CO 81506

Mailing address:
Rocky Mountain Health Plans
P.O. Box 10600
Grand Junction, CO 81502-5600

Questions? Rocky Mountain Health Plans is here to help.
Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
Your RMHP Member ID Card

All Members in RMHP Prime will receive the card below. If you think you are in RMHP Prime and do not have an ID card, ask us to send you one.

Show this card every time you get health care. This card shows health care providers like doctors, hospitals, and pharmacies where to send the bill. This card also has information for you if you need help.

Your Doctor or Primary Care Provider is Important

The first thing you should do after joining RMHP is pick a doctor to see when you are sick and for routine care. If you have not seen a doctor in the past year, call this doctor and make an appointment. This doctor is your primary care physician, or PCP. This doctor is very important. He or she provides or arranges for most of the care you will need. If you are new to RMHP and you have special health care needs and are seeing a doctor that is not on our list, you can:

- Keep seeing your previous primary care doctor for 60 calendar days. You can keep getting the same ongoing care you received before you joined RMHP.
- Keep seeing your other doctors for 75 calendar days. You can keep getting the same care you received before you joined RMHP.
- Keep seeing your previous primary care doctor if you are in your fourth through ninth month of pregnancy. You can keep seeing your previous primary care doctor until you finish the care you need following the birth of your child.

American Indian/Alaska Native members may choose an Indian health center provider as their PCP or any participating RMHP PCP.

Questions? Rocky Mountain Health Plans is here to help.

Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
How to Pick a Doctor or PCP

We have an RMHP Prime Provider Directory that lists doctors in your county. Look for a doctor that you want to see when you are healthy and when you are sick. This doctor may be a physician with a focus on primary care, general practice, internal medicine, pediatrics, geriatrics or obstetrics and gynecology. If you do not know the doctors on the list, pick a doctor with an office close to your home. If you pick a doctor you have not seen before, call the doctor’s office. Ask the office if they will take you as a new patient. If they will take you as a patient, tell them you are picking the doctor as your PCP. If you have not seen a doctor in the past year, make an appointment. Keep your scheduled appointment, or let the doctor’s office know you need to reschedule. The doctor may have you sign a form that shows that you want them to be your medical home.

Call RMHP Customer Service at 888-282-8801 (TTY: 711) if you need help finding a PCP or if you need a Provider Directory. Each person in your family can have a different PCP.

The Importance of a Medical Home

Having a medical home with a primary care provider is an important step in helping you get healthy, stay healthy, and get the care you need when you are sick.

If you have prescriptions or you are getting care from a specialist, talk to your new PCP about it. Your new PCP needs to know everything about your health to be sure you get the care you need.

How Your Primary Care Provider and Medical Home Can Help You

Your primary care provider and medical home can:

- Know you, care for you, and keep your medical records together
- Help you maintain overall health by providing preventive care, which can find health problems early
- Help you get care from specialists or connect you with services in your area when you need it
- Treat you as a whole person instead of focusing on a particular illness or injury
- Help you achieve the health goals you set for yourself
- Help you control ongoing health conditions, like diabetes
- Help you navigate the health care system, which can be complicated and confusing

In return, you should:

- See your PCP at least once a year for a wellness exam
- Let your PCP know when you are ill or need medical care
- Keep scheduled appointments or let your PCP know you need to reschedule
- Let your PCP know how they can improve

Questions? Rocky Mountain Health Plans is here to help.

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You may go to your PCP:
- For checkups and shots
- For care when you are sick or hurt
- To ask questions about your health
- For help finding a specialist if you need one
- For help getting the care ordered by specialty doctors; for example, surgery or home health care
- To admit you to a hospital if needed

How to Change Your PCP
If you want to change your PCP, follow the steps above for picking a PCP. You can change your PCP at any time. It is important for you to have a PCP. If you are changing doctors because you moved, call RMHP and let us know too so we have your new address. Call RMHP if you need help changing your PCP.

Getting Care – the Basics
Making an appointment with your primary care doctor or PCP
Call your doctor or PCP’s office and tell them you are an RMHP Prime Member. Give them your RMHP Member ID number if requested. For non-urgent illness or injuries, you will get an appointment within 7 days of the day you call. If you are too sick to wait 7 days, you can be seen within 24 hours. For adult physical exams, you should be able to get an appointment within 30 days of the day you call. If you can’t get in to see your PCP as fast as you think you should, call RMHP at 888-282-8801 (TTY: 711).

Canceling doctor appointments
If you can’t make it to your doctor’s appointment, you must call the doctor’s office and tell them as soon as possible. You should call at least 12 hours before your appointment to tell them you can’t make it.

Transportation
Remember to find a ride to your doctor’s appointment if you do not drive. You may want to ask a friend or relative for a ride or you may take the bus. Some communities have programs to help you get to your doctor appointments. Call your local resource center or county Department of Human Services. (See Important Phone Numbers page at the beginning of this handbook). Ask if there is a transportation program to help you get to the doctor. Ambulance services are for emergencies only.

Learn about the doctors and health care providers that work with RMHP
You can find health care providers that work with RMHP in the Provider Directory. You will find names, addresses, phone numbers and any non-English languages that may be spoken at each provider location. You will also see if the provider is not accepting new patients. The directory is available on our website at rmhp.org or you can get a printed copy by calling Customer Service. RMHP looks at information about the providers before we work with them. This includes their license, education and training. We also check their

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background and experience. Customer Service can also help you find out about a health care provider’s professional qualifications, such as schooling and certifications. If you have a question about your doctor, call us at 888-282-8801 (TTY: 711).

Specialty care
Sometimes when you see your PCP, he or she will want you to get specialty care. You do not need a referral to see a specialist that works with RMHP. The specialty care you receive must be on the list of covered services in the Covered Services and Benefits section in this booklet.

Call and make an appointment with the specialist. Be sure to show your RMHP Member ID card when you go to your appointment. Tell your specialist who your primary care doctor is so your specialist can work with your doctor and other members of your health care team. Sign all releases of information you are asked to sign by your doctors and providers. This will let them share information about you so you get the best care possible.

Doctors that do not work with RMHP
In general, care from doctors that do not work with RMHP is not covered and you must go to doctors, hospitals, and drugstores listed in our Provider Directory. This does not apply to Emergency Care, Urgent Care and family planning services. If you have questions about which doctors you can see, call RMHP Customer Service.

Call Customer Service if you need care that you cannot get from a doctor that works with RMHP. You must have permission before going to a doctor that does not work with RMHP. If RMHP gives you permission to see a doctor that does not work with RMHP, you will not have to pay extra for the care you get.

Prior Authorization
RMHP must approve some types of care before you receive it. This is called prior authorization. This helps make sure the care you get will work for you and that the care is medically necessary. The best thing to do is to be sure all your care is arranged by your PCP. Your PCP knows what services need prior authorization and how to ask RMHP for an approval. Examples of services that need prior authorization are:

- some surgeries and prescription drugs
- most services out of RMHP’s network
- medical equipment like wheelchairs

RMHP’s Care Management department reviews requests from providers and determines if the service is necessary. This is also known as utilization management. If you have questions about RMHP’s utilization management program, call Customer Service and ask to talk to someone in care management.

You have the right to appeal any action that RMHP makes. For example, if RMHP denies a service that your doctor requested for you, you can ask RMHP to take a second look. More information about your rights to complain and appeal is included in this document, or call Customer Service for help.

Questions? Rocky Mountain Health Plans is here to help.
Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
What does ‘medically necessary’ mean?

As a Health First Colorado Member and RMHP Member, health services are covered for you when they are medically necessary. Medically necessary means the services you receive from a doctor or clinic are the right services for your problem. They are the services other people with the same medical problem would receive. Just because your doctor requests a service does not make it medically necessary.

Access

You should be able to get most of your health care from doctors within 30 miles or a 30-minute drive from your home. If you live out of town or in a small town, there may not be a doctor close by. In this case, you will be able to see the nearest available doctor who works with us. If you cannot find a doctor close to you, call Customer Service for help. RMHP has a plan for making sure our Members can get to a doctor when they need one. This is called our access plan. You can have a copy of this access plan mailed to you at no cost by calling us at 888-282-8801 (TTY: 711).

Care for pregnancy and other health care for women

You can go to any doctor in our Provider Directory for covered services. This includes women’s services. It also includes care when you are pregnant. Some of these doctors are specialists like obstetricians, gynecologists, and certified nurse midwives. See the Covered Services and Benefits section in this handbook for details.

Hospital care

RMHP will pay for your stay in a hospital when it is arranged by your doctor. If you are having an emergency and need care, go to the nearest hospital emergency room. If you need care at a hospital, but it is not an emergency, you must go to an in-network hospital. This means the hospital works with us. Remember to show your RMHP Member ID card when you get to the hospital.

Mental health and substance use disorder services

Most mental health and some substance use disorder services are covered by RMHP. We can help you find out how and where to get these services in your area. If you’re struggling or someone you love is hurting and you need to get help right away, contact Colorado Crisis Services. Coloradans can get free, confidential, and immediate help 24 hours a day, 7 days a week, 365 days a year from Colorado Crisis Services. Contact Colorado Crisis Services by calling 844-493-TALK (8255) or text TALK to 38255. You can also get online support at ColoradoCrisisServices.org.

Getting prescription drugs

You must get your drugs from a pharmacy listed in the Pharmacies section in our Provider Directory. Show your RMHP Member ID card at the drug store when you pick up your prescription.

Questions? Rocky Mountain Health Plans is here to help.

Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
Some drugs are not covered. *If you want a drug that isn’t covered, you will have to pay for it yourself.*

Some drugs must be approved by RMHP before you get them. Your doctor should know how to ask RMHP to approve these drugs.

If you want a brand name drug when you could get the same drug in a generic form, you will pay the brand name copayment PLUS the difference in cost between the brand name and generic drug. You or your doctor can ask us to pay this extra cost for you. This is called a *Brand Name Drug Request.* Your doctor will be required to supply us with records and other information that shows you must have the brand name version of the drug, and that the generic version is not medically acceptable for you. If the *Brand Name Drug Request* is approved, you will pay the brand name copayment only without having to pay the cost difference.

You can get your drug(s) from any drugstore if you have an emergency away from home. Send us the receipt within 120 days of buying the medicine and we will pay you back for it. *We can’t pay you back if you send us the receipt after 120 days.*

*If you have Medicare Part D prescription drug coverage and RMHP Prime,* most of your drugs are covered by Medicare Part D. RMHP Prime covers some drugs that Medicare does not cover. Show your Medicare Part D card and RMHP ID card so the pharmacy knows where to send the bill.

**Changes to your plan and to your PCP**

RMHP will let you know by mail about any changes to your plan or to your doctor. We will write you a letter if your PCP leaves RMHP. Then you will have to follow the directions in this book to pick another PCP and visit that doctor for your well care and sick care. You can also leave RMHP if you want to stay with the PCP who is leaving us.

*If you must leave Rocky Mountain Health Plans*

You belong to RMHP by choice. There are several reasons why you might leave RMHP. Here are a few:

- You lose your Health First Colorado (Colorado’s Medicaid Program) benefits.
- If you move and no longer live in one of the counties listed in the front of this handbook, you cannot get your health care through RMHP Prime. RMHP can still help you with your Health First Colorado care if you move to other Western Colorado counties or Larimer County. Ask us if you need help.
- Your PCP no longer is in the RMHP network of providers.
- You become a resident of a long-term care facility (e.g. hospice or a skilled nursing facility).
- You are enrolled in long-term community based care (e.g. Home and Community Based Services (HCBS) waiver programs).
- You receive poor quality of care and have notified Health First Colorado Enrollment of the issue.
- You don’t have access to the services you need and you notified Health First Colorado Enrollment.

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You can also request to be disenrolled from RMHP in the following circumstances:

- You can disenroll from RMHP for any reason in your first 90 days as an RMHP Member.
- You can change plans once each year. You will be notified by mail when your open enrollment period starts.
- If you temporarily lose your Health First Colorado eligibility, causing you to miss your open enrollment period.

If you want to leave RMHP because you are unhappy with us, please call or email Customer Service or fill out the complaint form in this handbook. We will review your complaint using the process described in this book. We may be able to fix the problem.

If you are leaving RMHP for any reason, please call us. You must also tell Health First Colorado Enrollment you are leaving us by calling 888-367-6557. They can also help you choose another health care plan.

**Rocky Mountain Health Plans has People Who Can Help**

*What is a whole-person approach to care?*

This is an approach where all care and services in a community, like your doctor, your behavioral health provider and/or your social worker, all work together with you to make sure you get the services you need to stay as healthy as possible.

*Who can help me with my health care needs?*

**Your Primary Care Provider**

See your primary care provider at least once a year if you are well. Your primary care provider will either provide the health and medical care that you need, or will refer you to another provider or to services and supports that can help you. Many primary care practices have participated in activities to be an advanced primary care practice or are designated as a certified primary care medical home.

**Your Community Care Team**

Throughout western Colorado community care teams are helping people navigate the health care system. Community care teams bring together people with different backgrounds and training to support members of the community, including members of RMHP Prime.

**Your RMHP Care Coordinator**

RMHP Care Coordinators are Registered Nurses that are here to help you. Care Coordinators:

- Know about health care and how to help you navigate the health care system
- Know about community services so they can help get you the care you need
- Work with you and your doctors to help you reach your health goals

*Questions? Rocky Mountain Health Plans is here to help.*

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• Can explain covered services
• Can help you learn to care for yourself
• Know how to deal with all types of medical problems
• Can help you coordinate your care while you are pregnant
• Can help coordinate services with community partners

Our nurses can help you with any of your needs or answer questions about your care. Here are examples of how a Care Coordinator can help:

• You have a surgery scheduled and want information about it
• Your doctor ordered tests or medications that you have questions about
• You have a disease or medical problem, and you have questions

Care Coordinators at RMHP work with your doctors to make sure they talk to each other about your care. Care Coordinators also check to see if other services may work for you. This helps to make sure you are getting care that is medically necessary.

Learning to live with a health problem can be frightening and difficult, but RMHP is here to help you. We want you to follow your doctor’s treatment plan and learn about your disease. Our nurses and Care Coordinators will work with you one-on-one.

If you are pregnant, RMHP can help you have a healthy baby. We can talk to you to see if you are at risk of having your baby early. Our Nurses can also help you with special issues such as: twins, breast-feeding, premature labor, diabetes, bed rest, and stop-smoking programs.

If your coverage ends, and you still need care, we can tell you about available options. We can help you with questions about our Programs or your claims. We can also send you information if you want more information.

How to contact an RMHP Care Coordinator

Sometimes your doctor or hospital may also tell Rocky Mountain Health Plans that you need a Care Coordinator. You can also call and ask us for help. Here is how to reach us.

• Call Customer Service at 888-282-8801 and ask to speak to a Care Coordinator.
• If you need language assistance you can call us.

If you are deaf, hard of hearing, or have a speech disability dial, 711 for Relay Colorado or use our Live Chat on rmhp.org.

• You can also send a fax to 970-254-5738 or toll-free 877-201-7302.
• Care Coordination staff are available Monday through Friday, 8:00 a.m. to 5:00 p.m.
• After hours you can leave a message and we will call you back the next business day.

Questions? Rocky Mountain Health Plans is here to help.

Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
Your Team
Together, you, your primary care provider, your community care team, and RMHP will work together to help you with your health care needs. We will:

- Assess your needs
- Refer you to people who can help
- Work together with you toward your health and wellness goals

Together we will work with you and with any other providers who care for you to:

- Coordinate the different services you get
- Help when your health care needs change
- Help you learn about caring for yourself

In Case of Emergency
You can get emergency care anywhere in the United States. You can get care 24 hours a day. You can get care every day of the year. You do not need an okay from RMHP to go to the emergency room for a true emergency. If you are not able to call us and let us know about your emergency room visit or urgent care visit, your care will still be covered.

Emergency room services are expensive. Many doctors will take care of you in their offices after hours or on weekends. Some hospitals even have convenience rooms where you can get care. There may also be an urgent care center near you. These cost less than going to the emergency room. You may have to pay a copay if you go to the emergency room when you don’t have a true emergency.

When you have a true medical emergency, call 911. You can go to the nearest emergency room. The emergency room is the wrong place to go for routine care. It’s the wrong place to get care you could get from your doctor.

When to use the emergency room
Go to the emergency room only when you have a true medical emergency. An emergency is when a person with average knowledge of health and medicine believes that by not getting health care right away, the following could happen: your health or the health of your unborn child would be harmed; or your body, an organ, or a part of your body would not work the right way.

Some examples for when you should go to the emergency room:

- Your primary care provider tells you to go to the emergency room
- You have severe bleeding
- You have chest pain
- You have difficulty breathing

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• You think your condition may endanger the life of your unborn child
• You have sudden and/or severe pain
• You think you might be having signs of a stroke or heart attack
• You have sudden vision changes
• You have loss of consciousness
• You have a head injury

Here’s what to do if you have a life- or limb-threatening emergency
• Go to the closest emergency room, call 911, or call the local emergency phone number.
• Tell the emergency room staff you are an RMHP Member.
• Call your PCP as soon as you can.
• Show your RMHP Member ID card at the hospital.

Here’s what to do if you have a non-life-threatening emergency
• Call your PCP, if you can, and tell them about your illness or injury.
• Follow what your doctor tells you about whether to go to the hospital or to the doctor’s office.
• If you can’t reach your doctor, go to the nearest emergency room.
• Show your RMHP Member ID card at the hospital.

Here’s what to do if you get sick or injured but it’s not an emergency
• Call your PCP at any time.
• The office telephone message may give you a number to call for a doctor who can take care of you. This may happen if your doctor is not there. This may also happen when the office is closed. There will always be someone to answer your call. You can always get help.
• Tell the doctor you are an RMHP Member and tell them about your illness or injury.
• Follow the doctor’s instructions about whether to go to the hospital or to the doctor’s office.

Urgent care
You can get urgent care anywhere in the United States. Urgent care is not the same as emergency care. Urgent care is for a sickness or injury that needs medical care quickly but is not life- or limb-threatening. If you need urgent care, call your PCP’s office and follow what they tell you to do. If you need urgent medical care after normal business hours, you still have to call your PCP’s office. This includes weekends and holidays. Your care will still be covered even if you are not able to call us and let us know about your urgent care visit.

Questions? Rocky Mountain Health Plans is here to help.
Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
There is always a doctor who will return your call and give you instructions. Doctors who care for RMHP patients are on call day and night, every day, for emergencies. If you need urgent care, you can call your PCP’s office any time of the day or night and leave a message. Even if your PCP is not there, a doctor will call you back to tell you how to get care. For urgent care, you will get an appointment with a doctor within two days of the time you call your PCP’s office.

**Covered Benefits and Services**

This section gives information about your Health First Colorado (Colorado’s Medicaid Program) services and benefits that you can get. Most are covered by Rocky Mountain Health Plans. This means that RMHP pays the provider. Some are covered by Health First Colorado. This means that Health First Colorado pays the provider. And some services are not covered. If something is not covered it means that you will have to pay for the service yourself.

RMHP provides interpretation services at no cost to members. Tell Customer Service or your provider if you need interpreter services or help in other languages.

**List of Services and Benefits**

The next several pages list some health services people use or ask for.

- RMHP pays for services marked with this symbol: ✓
- Health First Colorado pays for services marked with this symbol: H
- Services that aren’t covered by RMHP or Health First Colorado are marked with this symbol: ∅
- If you don’t know if a service is covered or not, call us and ask. In most cases, you must use doctors, hospitals, and pharmacies listed in the RMHP Provider Directory.

**Ambulance**

✓ RMHP covers ambulance rides for a medical emergency and when other transportation is not medically advisable.

**Cochlear Implants**

H Cochlear implants, batteries and supplies are covered for members up to age 21 as a wrap-around benefit.

**Dental Care**

✓ RMHP covers a dental evaluation for children from a doctor.
✓ Surgical services in your mouth and dental splints are covered, but only to treat:
  - Accidental injury to jawbones or nearby tissues
  - Conditions like TMJ that are not dental and severely impair the function of your mouth or jaw

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• Tumors and cysts by means of pathological exams of the jaws, cheek, lips, tongue, or roof or floor of the mouth
• Dental treatment provided in a hospital or outpatient facility under deep sedation or general anesthesia when medically necessary. General anesthesia is covered in these cases.

Health First Colorado covers routine dental care for children and adults, including exams, cleanings, x-rays, sealants, space maintainers and fluoride treatments. Restorative services such as fillings, crowns and root canals are also covered (some procedures may require approval from Health First Colorado before the services are received). For adults, Health First Colorado will pay up to $1,500 for these services each benefit year (July 1 through June 30).

The following dental services are not covered:
• Dental splints, except to treat the conditions listed above
• False teeth, bridges and dental appliances
• Surgery to fix overbite or underbite
• Orthodontia treatment
• Any kind of treatment on or to or for the teeth, gums, or jaws, except to treat the conditions listed above
• For adults, covered dental services costing more than $1,500 each benefit year (July 1 through June 30)

Diabetic Education and Nutritional Counseling
✓ Counseling to learn how to take care of your diabetes is covered. Counseling to learn how to eat healthy is covered. This kind of counseling is covered only when you have a sickness or illness is caused by being very overweight. These services are covered if you get your counseling from primary care physicians, or by referral to other specialists, such as nutritionists or dietitians.

Emergency Services
✓ Emergency room services are covered for true emergencies only. You can go to a hospital that works with RMHP or to the nearest hospital. The doctors will evaluate and stabilize your condition. They will provide services and supplies necessary to maintain a stabilized condition or to improve your condition. You must get follow-up care from your PCP. Your doctor decides when you are stable enough for transfer or release. If you go to the emergency room and it is not an emergency, you may have to pay a copay. If you have an emergency outside our service area, we will cover your visit. We will cover follow-up care only until you are able to safely return to the service area. RMHP covers “post-stabilization care”. This means care you get after you have been seen in the Emergency Room/Urgent Care for an illness or injury.

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RMHP will provide emergency care or urgent care until you are “stable”. This means you are not at risk to get worse.

RMHP will provide the medically necessary covered care and services you need to continue to get better. This is called “post-stabilization”.

You will not be transferred or released until your doctor says you are ready.

RMHP has a policy about the costs of post-stabilization care. If you go to a non-RMHP provider and get post-stabilization care, your costs will not be more than what you would pay if you went to an RMHP provider. Call Customer Service if you would like to have this policy explained. They can tell you what costs RMHP covers. They can also tell you what you might owe. You can ask for a copy of the policy by calling 888-282-8801 (TTY: 711) and one will be mailed to you at no cost.

**Family Planning Services**

- Family planning helps you decide if you will have children and when to have them. You can get counseling. You can also get birth control pills, diaphragms, and condoms.

- Surgery to keep you from ever having children is also covered. This is covered for most Members age 21 or older. You must sign a consent form 30 days before this type of surgery. The consent form tells you about the surgery and what the long-term results will be. It also says you have been told that you probably won’t be able to ever have children again. It tells Health First Colorado that you want to have this surgery of your own free will. You can get a consent form from your doctor. You must have the surgery within 180 days after you sign the consent form. If you don’t, you will have to sign another one.

- You can see any family planning provider for family planning services even if you see a provider that does not work with us.

☐ These family planning services are **not covered**:

  - Surgeries to keep you from having children if you are not mentally competent or if you are in an institution. Services to undo these surgeries are also not covered. This includes getting tubes untied or undoing a vasectomy.
  
  - Services to help you get pregnant. This includes surgery.
  
  - Abortion, unless your life as the mother is in danger or the pregnancy happened as a result of rape or incest.

**Foot Care**

- Toenail trimming and other routine foot care is covered if you have diabetes or other health conditions that affect your legs or feet. Other foot care services are covered if they are medically necessary. You must see a doctor that works with RMHP for the services to be covered.

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Questions? Rocky Mountain Health Plans is here to help.

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Habilitative Therapy and Devices
✓ Habilitative services and devices include therapy and medical equipment that helps a person retain, learn, or improve skills and functioning for daily living. Habilitative therapy is covered for certain Health First Colorado Members ages 19 through 64. Eligible Members includes people who qualify for Health First Colorado due to the eligibility expansion through the Affordable Care Act. Coverage includes outpatient physical, occupational, and speech therapy benefits for the purposes of habilitation in addition to rehabilitation. Eligible members may receive habilitative therapy and devices when they are approved in advance by RMHP.

Hearing Care
✓ Ear exams and hearing tests are covered if they are needed because of an illness or injury.

✓ Other hearing services may be covered. This includes hearing aids and help for children under the age of 21 with hearing problems. They would be covered by a program called Health Care Program for Children with Special Needs.

Home Health Care
✓ Skilled nursing and home health aide services are covered. This includes therapies and supplies. Services are limited to 60 calendar days per condition. Services must be ordered and directed by your PCP or another provider that works with RMHP.

✓ Long-term home health care over the 60 day limit may be covered by Health First Colorado.

✓ Nurse Home Visitor Program services may be covered by the Early & Periodic Screening Diagnosis & Treatment (EPSDT) program or by Health First Colorado as a wrap-around benefit. Call the local Healthy Communities Coordinator listed on the Important Phone Numbers page at the beginning of this handbook.

✓ Private Duty Nursing is covered by Health First Colorado as a wrap-around benefit.

✓ Personal care for children is covered by Health First Colorado as a wrap-around benefit. Personal care means getting help with daily activities. This includes taking a bath, getting dressed and eating.

∅ Personal care for adults is not covered. The State has other programs to help seniors and people with disabilities to get personal care to help them live in the community.

Hospice Care
✓ Hospice care is special care for patients who are expected to live for less than nine months. This care is covered by Health First Colorado.
Hospital Services

✓ When you stay in the hospital for one day or more it is called “inpatient care.” Inpatient care is covered. This includes a semiprivate room, operating room, and related services. Some of these related services are food, drugs, oxygen, surgery, and tests to find out what is wrong. Unless you have a true emergency, you must go to a hospital that works with us. Your hospital will let us know if you are admitted.

∅ Personal items for comfort or ease while you are getting “inpatient care” are not covered. This includes having a private room.

Immunizations

✓ All suggested shots for children and adults are covered.

∅ Shots needed for foreign travel are not covered.

Laboratory and X-ray Services

✓ X-rays and diagnostic tests to find out what is wrong are covered. They need to be ordered by your PCP or specialist.

Medical Equipment and Supplies

✓ Equipment like crutches, wheelchairs, and oxygen are covered. Supplies like insulin needles and colostomy bags are covered. Children with special needs can get therapeutic toys and other equipment. You must have a doctor’s prescription for medical equipment. The equipment must be approved by RMHP. RMHP uses Health First Colorado coverage guidelines, and if none exist, RMHP uses Medicare coverage guidelines when making a decision about approving or not approving medical equipment and supplies.

∅ Some types of equipment are not covered. This includes wheelchair lifts for cars, ramps, hot tubs and exercise equipment. Health club fees are not covered. Items mainly for convenience care are not covered.

Medicine

✓ Prescription drugs on the RMHP drug list are covered. Your doctor must prescribe them. You must get them from a drugstore that works with RMHP. Some drugs are not covered. Some drugs must be approved by RMHP before you can pick them up. Brand name drugs cost more than generic drugs, so ask your pharmacist if a generic or preferred brand is available.

• You can also see the list of prescription drugs (called a formulary) covered by RMHP by visiting RMHP’s website, rmhp.org, and selecting RX Drugs. The drug list also provides information about coverage guidelines, quantity limits, which medications require pre-authorization, and what to do if you are prescribed a medication that is not on the list. Copayments for prescription drugs are listed on page 37 of this handbook.

Questions? Rocky Mountain Health Plans is here to help.
Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
You can get a 31-day supply of prescription drugs at a retail pharmacy or a 90-day supply through mail order. If you get a 31-day supply at a retail pharmacy, you pay one copayment when the prescription is filled. If you get a 90-day supply at a retail pharmacy, you pay the same copayment you would pay for a 90-day supply at our mail order pharmacy. You can use our network mail order pharmacy for drugs you use all the time. The mail order pharmacy may save you money and your medicine is delivered to your door. If you have medications you would like to fill through our mail order pharmacy (OptumRx), you can sign up by taking any one of the following actions:

- Access the OptumRx portal. You can access the OptumRx portal by logging into MyRMHP.
- Ask your doctor to send an electronic prescription to OptumRx.
- Call OptumRx home delivery at 855-473-8889.
- Download and complete the OptumRx new prescription mail-In order form found at rmhp.org and mail it to OptumRx with your prescription.

When you sign up, be sure to set up your credit card or billing preference with OptumRx. Make sure your provider writes the prescription for a three-month supply of medicine with refills as appropriate. Ask RMHP Customer Service if you need help.

For continued mail order service, three weeks before you run out of medicine, order a refill through the OptumRx portal or app, or by calling OptumRx home delivery at 855-473-8889.

Infertility drugs to help you get pregnant are not covered. Medicine and supplies you can buy without a doctor’s prescription are not covered. This is true even if the doctor tells you to buy it.

**Mental Health Care**

RMHP covers the following Health First Colorado mental health services:

- ✔ Behavioral health assessments
- ✔ Electroconvulsive therapy
- ✔ Inpatient psychiatric hospital services
- ✔ Medication management
- ✔ Outpatient day treatment
- ✔ Outpatient hospital services
- ✔ Psychological or neuropsychological testing including administering tests, interpreting results and preparing reports (does not include educational testing, vocational testing or testing for medical conditions)
- ✔ Psychotherapy: family, individual, individual brief, and group counseling and therapeutic contact.
- ✔ Targeted case management services

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**Questions? Rocky Mountain Health Plans is here to help.**

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RMHP also works closely with the Community Mental Health Centers in your area. They may also have additional services available, such as:

- Vocational services
- Intensive case management
- Prevention/early intervention activities
- Clubhouse and drop-in centers
- Residential
- Assertive community treatment (ACT)
- Recovery services
- Respite services

Some of these behavioral health care services require prior authorization. Your provider will know which services must be approved by RMHP before you can receive them.

**PCP and Other Doctor Visits**

✓ Visits to your PCP or another doctor that works with RMHP are covered. This includes visits because of injuries or when you are sick or when you need allergy testing.

**Pregnancy and Hospital Delivery**

✓ Care women need while pregnant is covered. Services in the hospital when having a baby are covered. You can get care from any OB doctor that works with RMHP.

∅ Tests to find out the baby’s sex are **not covered**. Having the baby at home when it is not an emergency is **not covered**.

**Preventive Care**

✓ Even if you are not sick, it is very important to get routine care and preventive screenings. See the section on Staying Healthy for more on what Rocky Mountain Health Plans covers to help keep you healthy. Annual routine physicals for adults are covered.

✓ Preventive visits to your PCP and your obstetrician/gynecologist (OB/GYN) are covered. This includes physical exams and well-child care. Tests like mammograms, Pap smear and pelvic exams are covered.

✓ For children from birth to 3 years old: well-child visits are covered as needed for their age.

✓ For Members over 3 years old: 1 routine physical exam is covered each year.

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Some exams are not covered. These exams are:

- For a job
- To get a license
- To get married
- For insurance
- For school, camp, or sports
- For adoption

Prosthetic and Orthotic Devices

- Devices like artificial arms and leg braces that replace or strengthen a body part are covered.
- Devices put in your body during surgery are covered. This includes artificial joints. They must be medically necessary. RMHP must approve them before they are put in your body.

Rehabilitation

- Therapy because of an injury or sickness is covered. This includes medically necessary:
  - Physical therapy
  - Occupational therapy
  - Speech therapy
  - Pulmonary therapy
  - Cardiac rehabilitation

Second Opinions

- Second opinions are covered. This is when you want to make sure what your first doctor told you is correct. You do not need a referral to see a doctor for a second opinion about your care. You or your doctor will need to call Customer Service when you get a second opinion so that your visit is covered with no copayment. You can also call Customer Service for help finding a doctor for your second opinion.

Skilled Nursing Facility Services

- Skilled Nursing Facility services and swing bed services may be covered by Health First Colorado as a wrap-around benefit.

Smoking Cessation

- FDA-approved prescription medications and over-the-counter tobacco cessation products for a maximum of two 90-day sessions in a 12-month period. Counseling services related to Tobacco Cessation are covered, limited to 5 sessions per year.

Questions? Rocky Mountain Health Plans is here to help.

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**Specialty Care**

✓ Visits and health care services from doctors other than your PCP are covered. They are covered if:
  - The services are benefits of your plan
  - The doctor you get care from works with RMHP

∅ Services from a doctor that does not work with us are **not covered** unless it is an emergency or for Family Planning Services.

**Substance Use Disorder (SUD) Services**

✓ Alcohol/drug screening and counseling.
✓ Detoxification in an inpatient hospital setting for medical stabilization is covered.
✓ Detoxification for drug or alcohol use is also covered as an outpatient service or in an emergency setting.
✓ Medication-assisted treatment
✓ Outpatient counseling and intensive outpatient treatment
✓ Social ambulatory detoxification is covered. These services relate to detoxification and can include the following:
  - Physical assessment of detox progression, including vital signs monitoring
  - Assessment of motivation for treatment
  - Provide for daily living needs (can include hydration, nutrition, cleanliness and toiletry)
  - Safety assessment

✓ Substance use disorder assessment is an evaluation that is covered to determine the most appropriate level of care, the extent of drug/alcohol abuse, abuse or dependence related problems, and the comprehensive treatment needs of a Member with a drug or alcohol diagnosis.

H Substance use disorder treatment is covered for pregnant women through Special Connections. See *Important Community Phone Numbers* at the beginning of this handbook to contact Special Connections.

∅ Inpatient and residential rehabilitation for alcohol and substance use disorder is **not covered**. The Colorado Office of Behavioral Health has programs that cover residential treatment for SUD. You can talk to your SUD provider or contact RMHP Customer Service for more information.

**Surgery**

✓ Surgery is covered. You must go to a facility that works with RMHP. The surgery must be done by a doctor that works with RMHP. The surgery must be medically necessary.

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**Questions? Rocky Mountain Health Plans is here to help.**

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✓ Some plastic surgery is covered. It must be medically necessary. Plastic surgery is covered when you need it to get back function you had before you got hurt or sick. It must be needed to fix damage from a sickness or injury.

∅ Cosmetic surgery is **not covered**.

**Transportation**

✓ Ambulance rides are covered if you have a true emergency and when other transportation is not medically advisable. RMHP does not cover ambulance rides when it is not an emergency.

Health First Colorado will help you get a ride to the doctor’s office or hospital. Call the county Department of Human Services for details. (See *Important Phone Numbers* page at the beginning of this handbook).

**Vision**

*For Children and Adults*

✓ Routine eye exams

- Treatment and exams for your eyes are covered when you have a sickness and injury to your eyes. Members with a medical condition and/or disability such as diabetes, retinal dysplasia or glaucoma may need more frequent exams. Ask your doctor if you need to see a vision provider more frequently.

✓ Ocular prosthetics are covered if approved by RMHP.

✓ For Members under age 21: Eye glasses are covered. You can also get glasses fixed or replaced whenever you need. Contact lenses are covered when your doctor thinks they are medically necessary, or after you have eye surgery, or to treat or prevent an ophthalmic medical condition. Any other vision products and services that are medically necessary and approved by RMHP are covered.

✓ For Members 21 years old and older: Standard eye glasses and contact lenses are only covered after you have eye surgery to treat or prevent an ophthalmic medical condition. Contact lenses are also covered for medical diagnosis of Keratoconus.

∅ The amount RMHP pays for glasses is limited. This means extra costs are not covered. If you want extra items, your vision providers will ask you to agree to pay for them. This includes extra costs for:

- Scratch or mirror coatings
- Tinted lenses (sunglasses)
- LASIK surgery
- Expensive frames for adults

**Questions? Rocky Mountain Health Plans is here to help.**

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For Members 21 years old and older: Eye glasses and contact lenses are not covered unless you have had an eye surgery to treat or prevent an ophthalmic medical condition.

Contact lens supplies and contact lens insurance are not covered.

Wrap-around Services – Services Covered by Health First Colorado, not RMHP

RMHP covers most medical services you will need like doctors, hospitals, and preventive care. Health First Colorado covers some additional services that are not offered by RMHP. These are called wrap-around services. Wrap-around services may include, but are not limited to:

- Hospice care
- Non-emergent medical transportation (NEMT) through your county Department of Human Services or Social Services
- Private duty nursing
- Extraordinary home health
- Special Connections (a program for pregnant women on Health First Colorado who have alcohol and/or drug abuse problems)
- Skilled nursing facility services
- Orthodontia assessment and coverage for some children
- Limited Case Management Services
- Hearing aids and batteries, auditory training, audiological assessment and hearing evaluation.
- Dental services
- Intestinal transplants (excluding immunosuppressive medications, which are covered by RMHP) either covered alone or with other simultaneous organ transplants (e.g., liver)
- Cochlear implants
- HCBS Services including case management (for Model 200 children); home modification, electronic monitoring, personal care and non-medical transportation
- Personal care benefit for children
- Pediatric behavioral therapies (ABA)

If you are in need of a wrap-around service, your doctor may help you or may refer you to the county public health department or the Health First Customer Contact Center. For more information and assistance in accessing these services, you may call your local County Health Department, or the Health First Customer Contact Center at the numbers listed on the Important Phone Numbers page at the beginning of this handbook. You may also call RMHP Customer Service or your Care Coordinator.

Questions? Rocky Mountain Health Plans is here to help.

Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
Non-Covered Services – services not covered by RMHP or Health First Colorado

Some health services are not covered by either RMHP or Health First Colorado. If you want any non-covered services, you will have to pay for them yourself.

Some services that are not covered by RMHP or Health First Colorado include:

- Treatments, drugs or procedures that are experimental
- Acupuncture
- Care by a Chiropractor
- Care or exams ordered by the court if the care or exam is not usually covered
- Institutional care, such as custodial care provided by a long-term care facility
- Continuous blood glucose monitor for adults. However, continuous blood glucose monitors are covered for children with prior authorization.
- Travel costs
- Government-sponsored care
- Any services, including emergency and urgent care, outside the United States

Services from providers who do not work with RMHP are not covered, unless:

- The services are authorized in advance by RMHP
- You need urgent or emergency care
- You receive family planning services from a provider that does not work with us

Staying Healthy

Even if you are not sick, it is very important for you to see your PCP for routine screenings. Use this guide to know how often you should visit your doctor. If you have any questions, ask your PCP. You will get an appointment for these routine screenings within 30 days from when you call and ask for the appointment.

Annual routine physicals for adults are covered. RMHP wants you to stay healthy. RMHP has and will send you information about being healthy. Examples are:

- Exercise programs
- Healthy eating habits
- Tips to help you stay healthy
- How to take better care of yourself

Questions? Rocky Mountain Health Plans is here to help.

Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
Preventive Care for Adults

Good preventive care starts with being physically active, eating a healthy diet, staying at a healthy weight, being smoke-free, and if you drink alcohol, drinking only in moderation. Yearly flu shots are recommended. Your doctor may also recommend other shots to prevent certain illnesses. Below is a list of preventive care services. Other preventive services are available to you. Talk with your doctor to find out which tests and shots you and your family should have to help you stay healthy and identify health problems early.

Colorectal Cancer Screening

You should be tested for colorectal cancer at age 50. You should be tested sooner if you are at high risk. Talk with your doctor to find out if you are at high risk for this type of cancer. Talk with your doctor about which test is right for you.

Depression Screening

Your emotional health is as important as your physical health. If you have felt “down”, sad or hopeless over the last 2 weeks or have felt little interest or pleasure in doing things, you may be depressed. Talk to your doctor about being screened for depression.

Diabetes

Have testing done that your doctor recommends for diabetes.

High Blood Pressure

Have your blood pressure checked regularly.

Cholesterol Screening

Have your cholesterol tested at age 35 for men; age 45 for women. You should be tested beginning at age 20 if you are at high risk for heart disease.

HIV

Talk with your doctor to find out if you are at high risk for HIV.

Obesity

Body Mass Index (BMI) is a measure of body fat based on height and weight. Have your BMI checked routinely. Check with your doctor if you haven’t had your BMI checked recently.

Sexually Transmitted Infections

Talk with your doctor to find out if you should be screened for sexually transmitted infections.

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Suggested preventive care for women

Breast Cancer Screening
Mammogram with or without clinical breast exam: covered every 1 – 2 years starting at age 40. Talk with your doctor about how often to have this screening.

Cervical Cancer Screening
Pap smears every 3 years for women ages 21 – 65. Talk with your doctor about how often to have this screening.

Osteoporosis Screening
Have a bone density test at age 65 to screen for osteoporosis (bone thinning). Your doctor may advise you to have this test sooner than age 65. You may need to have this test again every two years.

Suggested preventive care for men

Abdominal Aortic Aneurysm
If you are between ages 65 – 75 and have ever been a smoker, talk to your doctor about being screened.

Prostate Cancer Screening
Talk with your doctor about whether you should be screened for prostate cancer starting at age 50.

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Keeping Your Child Healthy

Early Periodic Screening, Diagnosis & Treatment

This program is for children with Health First Colorado who are 20 years old and under. When your child or teen is a part of the RMHP Prime plan, they are part of the EPSDT program. The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit provides comprehensive and preventive health care services for children under age 21 who are enrolled in Health First Colorado. EPSDT is key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, and developmental, and specialty services.

<table>
<thead>
<tr>
<th>E</th>
<th>EARLY</th>
<th>Assessing and identifying problems early</th>
</tr>
</thead>
<tbody>
<tr>
<td>P</td>
<td>PERIODIC</td>
<td>Checking children’s health at periodic, age-appropriate intervals</td>
</tr>
<tr>
<td>S</td>
<td>SCREENING</td>
<td>Providing physical, mental, developmental, dental, hearing, vision, and other screening tests to detect potential problems</td>
</tr>
<tr>
<td>D</td>
<td>DIAGNOSTIC</td>
<td>Performing diagnostic tests to follow up when a risk is identified, and</td>
</tr>
<tr>
<td>T</td>
<td>TREATMENT</td>
<td>Control, correct, or reduce health problems found.</td>
</tr>
</tbody>
</table>

EPSDT Services

Your primary care doctor will examine your child and provide necessary screenings. The below information shows how often your child should get screenings:

- 3 to 5 days after birth and within 48 – 72 hours after discharge
- by 1 month
- 2 months
- 4 months
- 6 months
- 9 months
- 12 months
- 15 months
- 18 months
- 24 months
- 30 months
- Once every year for ages 3 to 20

Your doctor will identify your child’s needs and will make referrals for treatment as necessary. Finding and treating even little problems helps your child grow up healthy. The following are EPSDT benefits:

- Physical exams
- Sick care
- Developmental and depression screening

Questions? Rocky Mountain Health Plans is here to help.

Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
• Lead Testing
• Mental/behavioral health screening
• All the shots your child needs
• Vision exams and eyeglasses
• Dental care starting at age 1
• Hearing exams
• Limited Orthodontia for those with severe conditions
• Home health, Durable Medical Equipment
• Family planning
• Help for children with disabilities
• Case Management for all families as well as all pregnant women who are in Health First Colorado by a Healthy Communities Family Health Coordinator

Healthy Communities combines aspects of the Early Periodic Screening Diagnostic and Treatment (EPSDT) Outreach and Administrative Case Management program and Child Health Plan Plus (CHP+) outreach into one model to better meet the needs of Members. Family Health Coordinators are available statewide to serve Members through Healthy Communities. This outreach and case management model takes into account that many of our families do not always understand the distinction between Health First Colorado and CHP+. In fact, many families have one child that is enrolled in Health First while another is enrolled in CHP+.

Healthy Communities focuses on the “life cycle of a Member” which may involve all of the activities necessary for the Member to obtain coverage and access to coordinated health care services in appropriate settings called a Medical Home. Family Health Coordinators perform the following activities:

• Generate awareness of the existence of the Health First Colorado and CHP+ programs;
• Offer information about how to apply for Health First Colorado and CHP+ and the availability of face-to-face application assistance;
• Inform families about where to submit applications for processing and eligibility determination;
• Educate families on the value of preventive health care services and how to access benefits at the appropriate settings;
• Link Members to Health First Colorado and CHP+ providers who will serve as the Member’s Medical Home;
• Provide Members with information and referrals to other community programs and resources; and
• Explain the re-enrollment process to families who continue to be eligible for Health First Colorado and CHP+ to eliminate gaps in coverage.

Questions? Rocky Mountain Health Plans is here to help.
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EPSDT and Healthy Communities services are for Health First Colorado Members. You pay nothing for these services. For more information on EPSDT services and how to obtain them, ask your doctor, call RMHP Customer Service, or call a Healthy Communities (EPSDT) Family Health Coordinator in your area. See the Important Phone Numbers page at the beginning of this handbook for contact information.

**Immunizations**

Your child needs shots to protect him or her from serious illnesses. The following list shows the shots your child will need as he or she grows up. Your child may need other shots as well if your child has certain medical conditions. There is a catch up schedule for shots if your child misses some shots. Talk with your child’s doctor to find out what shots your child should have and how many.

<table>
<thead>
<tr>
<th>Age</th>
<th>Shots</th>
</tr>
</thead>
</table>
| Birth to 2 years old | Hepatitis B (HepB)  
Rotavirus (RV)  
Hib (prevents meningitis)  
Pneumococcal (PCV)  
Diphtheria, Tetanus, Pertussis (DTaP)  
Polio (IPV)  
Influenza (yearly starting at age 6 months – 18 years old)  
Measles, Mumps, Rubella (MMR)  
Varicella (protects against chicken pox)  
Hepatitis A (HepA) |
| 4 to 6 years         | Diphtheria, Tetanus, Pertussis (DTaP)  
Polio (IPV)  
Measles, Mumps, Rubella (MMR)  
Varicella (protects against chicken pox)  
Influenza (yearly) |
| 11 to 12 years       | Tetanus, Diphtheria, Pertussis (Tdap)  
Human Papillomavirus (HPV)  
Meningococcal Conjugate Vaccine (MCV) |
| 13 to 18 years       | Meningococcal Conjugate Vaccine (MCV) Booster at age 16  
Your child should have shots they missed at an earlier age. Talk with your child’s doctor about a catch up schedule.  
Influenza (yearly) |

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Community Services and Resources

RMHP will take care of most of your health care while you are a Member, but you can also get services from many community resources. Some community services are described here, but there are many more. In your area some programs may have different names. These are not RMHP programs. Ask your doctor, your community care team, Rocky Mountain Health Plans, or your county’s human services department to find out more. The phone numbers for some local resources are listed on the Important Phone Numbers page at the beginning of this handbook.

Children with Special Needs – Health Care Program for Children with Special Needs

The Health Care Program (HCP) for children with special health care needs gives services for:

- Orthodontia (for severe problems)
- Hearing aids
- Advice on a healthy diet
- Home-based language development for children with hearing impairment
- Cleft lip and/or palate

For more information, call Health First Colorado at 800-221-3943.

Dental Services

RMHP does not cover dental services. Call the Healthy Communities Family Health Coordinator for children’s dental health listed on the Important Phone Numbers page at the beginning of this handbook. This includes orthodontia services.

For information about adult dental services, contact Health First Colorado at 800-221-3943.

You will need to get an approval before you have some services on your teeth. You don’t need approval if you need your teeth taken out because it is an emergency.

Family Planning

Rocky Mountain Health Plans will pay for family planning services. Birth control and abstinence are part of family planning. RMHP may cover drugs or items to prevent pregnancy. See the Covered Services and Benefits section in this booklet. RMHP Prime pays for family planning services that you get from:

- Any Health First Colorado provider — also may be known as a health care provider that accepts Colorado Medicaid
- Rocky Mountain Planned Parenthood clinics
- Your county health department

Ask your primary care doctor or your women’s care doctor if you have any questions about these services.

Questions? Rocky Mountain Health Plans is here to help.

Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
Hearing Services
Call Health First Colorado at 800-221-3943 for hearing care for children. This includes hearing aid batteries.

Home- and Community-Based Services (HCBS)
Home- and community-based services help you and your family in your home. You may qualify for home health care and non-skilled home help. You can ask your doctor or an RMHP Care Coordinator for help setting up this service.

Human Services Department in Your Area
There are many services you can get in your area. Some services are offered by Health First Colorado. Your county health department can tell you about these services. This includes transportation. They can also give you information on the services that are not covered by RMHP. You can find out more about them by calling the human services office in your county, which is listed on the Important Phone Numbers page at the beginning of this handbook.

Immunization Registry – Colorado Children’s Immunization Registry
Rocky Mountain Health Plans takes part in the Colorado Immunization Information System (CIIS). The immunization registry is used to keep track of a child’s immunizations (shots). This makes it so all the information is stored in one place. Keeping a complete record of your child’s shots is important. It helps make sure your child gets all the shots they need. Your doctor can also use the registry to see what shots they have received. RMHP sends the CIIS immunization data we have from immunization claims.

Information in the CIIS can only be given to some people or companies. They have to be listed in the Colorado Immunization Act. Parents can choose not to have their child’s shot record in the Colorado Immunization Registry. You can choose this at any time. You can get a form from the CIIS. For more information, contact CIIS at 1-888-611-9918 or 303-692-2437.

Prenatal Plus Program
Prenatal Plus gives extra services to pregnant women. Prenatal Plus gives you access to a case manager, a registered dietician, and a mental health professional who work together to help reduce the risk of having a low birth weight baby. Prenatal Plus services are in addition to a woman’s regular prenatal care. It also gives services while you apply for Health First Colorado. Contact your PCP to see if this program is right for you.

Special Connections
This program helps pregnant women who drink or use drugs. Call 800-221-3943. An RMHP Care Coordinator can also help with questions about this program and the inpatient drug rehabilitation unit at Valley View Hospital.

Questions? Rocky Mountain Health Plans is here to help.
Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
Women, Infants, and Children Food Program (WIC)

Women, Infants, and Children (WIC) is a program that helps women who are pregnant or breast-feeding. It also helps women who have small children. Women who qualify can get healthy food for themselves and their children. Information about how to find a WIC clinic is listed on the Important Phone Numbers page at the beginning of this handbook.

Questions? Rocky Mountain Health Plans is here to help.
Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
Paying for Care

For Members enrolled in this plan, RMHP pays for health care for you under a contract with the Colorado Department of Health Care Policy and Financing. That contract and state and federal laws control the health care services you get. This handbook is not a contract and is subject to change.

When You have Health Coverage in Addition to Health First Colorado

There are times when a third party is responsible for paying for your health and medical care. A third party is someone that is NOT you, RMHP, or the Colorado Department of Health Care Policy and Financing (Health First Colorado). A third party could be another insurance company. If we think a third party should pay, we may send you a letter. The letter will ask you questions about the third party. You will need to answer all of our questions so we know when another entity is responsible for paying for your health and medical care.

There are times when a third party is Medicare. Your Medicare plan pays first. It pays before your RMHP Prime plan. After Medicare pays, RMHP Prime will pay what Medicare did not pay. You will pay only your Health First Colorado copayment for covered services.

Sometimes the third party is another insurance company that may cover you. In this case you must follow their rules about how to get care. The third party will pay for your care before RMHP pays. If you do not follow the third party’s rules about how to get care and it was not an emergency, you will have to pay for the care yourself.

Sometimes a third party may need to pay for your health care for a sickness or injury. (Example: You are in a car accident.) If RMHP pays for any of these services and you receive money from the third party, you will need to pay RMHP back for these services. This is true whether or not you file a lawsuit.

If RMHP pays for your care and a third party should have paid, we can collect and keep the money from the third party. You must help us get the money from a third party that should have paid for your sickness or injury. If you do not help us get that money, you will have to pay for that health care yourself.

Tell RMHP if you think or know a third party should pay for your health care. Also let us know if you make a claim against a third party to pay for your health care.

You must:

- Let us know within 15 days if you told a third party you think they should pay for your health care.
- Let us know within 15 days of filing a claim with the third party you think should pay for your health care.
- Let us know by bringing a letter to our office or mail it to us by certified mail.

Questions? Rocky Mountain Health Plans is here to help.

Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
You can pick someone else other than yourself to tell us about the third party. That person must follow the rules listed above.

You cannot let RMHP pay for your care and then keep money from the third party for yourself.

**Member Claims Payment**

This section explains how to file a claim and to receive a reimbursement for services. If you are billed for services and you have questions or concerns about if you are responsible, ask Rocky Mountain Health Plans for help. Most providers will not bill you. Some non-participating or out-of-area providers may bill you.

**Acceptable Claims**

Because participating providers handle the paperwork for you, RMHP does not have standard claim forms. However, if you receive covered services from a nonparticipating or out-of-area provider, you must submit itemized bills containing the following information:

- Your identification number
- Your name and address
- Your date of birth
- Date(s) of service or purchase
- Diagnosis and type of treatment
- Procedure and amount charged
- Accident or surgery date (when applicable)
- Name and address of the provider
- Copayment paid, if any

When you receive an itemized bill from a nonparticipating hospital for emergency care or urgent care, send it to RMHP. RMHP requires proof of payment, such as a receipt, to reimburse you directly.

Prescription drug bills must include the pharmacy name and address, drug name, prescription number, and amount charged. You can get your medicine from any drugstore if you have an emergency away from home.

If you want reimbursement for covered services that you have paid for, please submit proof of payment, such as receipts and canceled checks, with the items listed above. Balance due statements are not acceptable. All information on the itemized statements must be readable. If information is missing or is not readable, then RMHP will return it to you or to the provider to furnish the missing information. If you provide proof that you have paid the provider, RMHP will reimburse you directly. Otherwise, RMHP will pay the provider, less the amount of your copayment, if applicable. You will be responsible for paying your copayment, if applicable, to the provider.

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**Questions? Rocky Mountain Health Plans is here to help.**

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Where to Send Your Claim
Make copies of the itemized bills for your own records and send the original bills to:

Rocky Mountain Health Plans
Attn: Claims
PO Box 10600
Grand Junction, CO 81502-5600

Overpayments
If RMHP pays you in error, RMHP reserves the right to recover the payment from you. Providers may also ask you to pay billed charges if RMHP had made an earlier payment for any services received and for which you received the payment by mistake. RMHP also reserves the right to refuse to pay new claims if RMHP has made an earlier payment in error. RMHP reserves the right to take legal action to correct payments made in error.

Copayments
You may have to share in the cost of the health care you get. This cost sharing is called a copayment. You pay your copayments at the doctor’s office or hospital.

You do not pay copayments if:
- You are a child 18 and under
- You are pregnant
- You are an American Indian or Alaska Native
- You live in a skilled nursing facility
- You live in a transitional care facility or mental institution
- Former foster care children ages 18 through 26
- Your household has paid more that 5% of your household income in copays for the month

You or your doctor can tell RMHP if you do not need to pay copayments for any of these reasons. Call Customer Service if you believe that you should be copay exempt so that RMHP can correct our records. If you have Medicare, please call and tell us so we can coordinate your care.

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<table>
<thead>
<tr>
<th>Service</th>
<th>Copayment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatient Hospital Services</td>
<td>$10.00 per day</td>
</tr>
<tr>
<td>Outpatient Hospital Services</td>
<td>$4.00 per visit</td>
</tr>
<tr>
<td>Office Visits (PCP)</td>
<td>No copayment</td>
</tr>
<tr>
<td>Emergency Room</td>
<td>No copayment if determined an emergency;</td>
</tr>
<tr>
<td></td>
<td>$6.00 per visit if not an emergency</td>
</tr>
<tr>
<td>Specialist Doctors other than your PCP, Federally Qualified Health</td>
<td>$2.00 per day</td>
</tr>
<tr>
<td>Centers, and Rural Health Clinics</td>
<td></td>
</tr>
<tr>
<td>Second Opinions</td>
<td>No copayment</td>
</tr>
<tr>
<td>Lab Work</td>
<td>$1.00 per date of service</td>
</tr>
<tr>
<td>X-rays</td>
<td>$1.00 per date of service</td>
</tr>
<tr>
<td>Durable Medical Equipment (wheelchairs, glucose monitors, etc.)</td>
<td>$1.00 per date of service</td>
</tr>
<tr>
<td>Mental Health and Substance Use Disorder Services</td>
<td>No copayment</td>
</tr>
<tr>
<td>Prescriptions – Generic Drugs</td>
<td>$1.00 for up to a 31-day supply from a retail pharmacy.</td>
</tr>
<tr>
<td></td>
<td>$2.00 for a 90-day supply from a mail order pharmacy.</td>
</tr>
<tr>
<td>Prescriptions – Brand Name Drugs</td>
<td>$3.00 for up to a 31-day supply from a retail pharmacy.</td>
</tr>
<tr>
<td></td>
<td>$6.00 for a 90-day supply from a mail order pharmacy.</td>
</tr>
<tr>
<td></td>
<td>You pay more if you buy a brand name drug when you could buy the same drug in a generic form.</td>
</tr>
<tr>
<td></td>
<td>You will pay the brand name drug copayment PLUS the difference in cost between the brand name and generic drug.</td>
</tr>
<tr>
<td></td>
<td>Your doctor might be able to give us records and other info we require that will show us you must have the brand name drug.</td>
</tr>
<tr>
<td></td>
<td>If your doctor can prove to us the generic drug does not work for you, RMHP may approve for you to pay the brand name copayment only without having to pay the cost difference.</td>
</tr>
</tbody>
</table>

*If you have Medicare and Health First Colorado, your Medicare drug plan will cover your drugs.
Member Rights and Responsibilities

It is Your Right

• To get information about RMHP and its services, doctors, and health care providers and to get information about your rights and responsibilities
• To be treated with respect and with recognition of your dignity and right to privacy
• To accept or refuse medical treatment to the extent provided by Colorado state law and to participate in making decisions about your health care
• To have open discussion with health care providers about appropriate or medically necessary treatment options for your conditions, regardless of cost or benefit coverage, and presented in a manner appropriate to your condition and ability to understand
• To make appeals, and to bring complaints to RMHP, the Insurance Commissioner of the State of Colorado, or the Department of Health Care Policy and Financing
• To be furnished health care services in accordance with federal health care regulations for access and availability, care coordination and quality
• To expect all communications regarding your care to be kept confidential as required by law
• To freely exercise your rights without being treated differently
• To be free from the use of physical restraint or being isolated. These methods may not be used to make you cooperate, to punish you, for the ease of the caregiver, or as a way of getting back at you
• To get family planning services from any Health First Colorado provider, in or out of RMHP’s network, with no referral
• To request and receive your medical records and to have them changed according to federal law
• To get a second opinion without a referral
• To be free from discrimination based on race, color, national origin, age, disability, sex, sexual orientation, or gender identity
• To make recommendations regarding RMHP’s rights and responsibilities policy
• To use any hospital or other setting for emergency care

It is Your Responsibility

• To choose a Primary Care Physician (PCP) for each member of your family and to let that PCP know of any advance directive regarding your medical care
• To let your PCP direct your care with specialists and other health care providers, except in cases of medical emergencies, urgent care when outside the service area, obstetrical or gynecological care, and eye care

Questions? Rocky Mountain Health Plans is here to help.
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• To learn about your RMHP health care benefits, procedures, and limitations and to be cooperative and considerate with health care providers and staff
• To notify RMHP Customer Service of membership or address changes, marriage, birth of a child, or adoption of a child
• To take responsibility for copayments and costs for certain health care services and any services that are not covered by Health First Colorado
• To understand your health problems and participate in making treatment goals
• To provide the health care provider with all information needed for you to receive appropriate care
• To follow the plans and instructions for care that you and your provider agreed on
• To tell your providers about any Advance Directives about your health care
• To tell RMHP about any other insurance you may have, including Medicare
• To follow any protocols of a responsible third party payor (such as other insurance) prior to receiving any non-emergency services
• To provide RMHP with written notice after filing a claim or action against a third party responsible for your illness or injury
• To file a complaint or grievance, please follow the rules as described in the Appeal and Grievance section of this handbook

**Appeal and Grievance Processes**

You have many rights with Health First Colorado. You have the right to complain about RMHP. You have the right to complain about your care. **You, your provider, or a Designated Member Representative may complain about anything you disagree with or have a problem with.**

**If You Want Help at Any Time Filing an Appeal or a Grievance**

A Designated Member Representative (DCR) is someone you choose to help you with an Appeal or a Grievance, including a provider. You must sign a form to give your DCR permission to act for you. The form must have the person’s name, address, and telephone number. If your complaint is about your medical care, your DCR will have access to your medical records and specific details about your medical care.

If you need help filing an appeal or grievance, you can also call the Managed Care Ombudsman at 877-435-7123. You can e-mail them at help123@maximus.com. TTY users should call 888-876-8864.

**Right to File Appeal, Grievance, and State Fair Hearing**

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• You have the right to appeal an Adverse Decision. This means you can ask for a review of something RMHP has done. Examples of decisions you can appeal are listed in Section A below.
• You have the right to “File a Grievance.” This means you can complain about any matter other than a Decision (see Section A). Grievances are the kinds of things listed in Section B below.
• In addition to filing an appeal or grievance with RMHP, you may file for a State Fair Hearing, with the State of Colorado. The State Fair Hearing process is described in Section C below.

Section A. Appeal an Adverse Decision
RMHP may make a decision that you do not agree with. Then you, your provider or your DCR may ask for an appeal. An appeal is a review of an RMHP Adverse Decision (or decision). For example, your doctor may order you a medication or service that RMHP must okay. If it is approved, you will receive what the doctor wanted you to have. If RMHP does not approve the request, then the request by the doctor has been denied by RMHP. The decision RMHP made is to deny the request. You can appeal that decision.

Once RMHP has made a decision, you always have the right to appeal. This means you can ask RMHP to take a second look. These are examples of the kinds of decisions you may appeal:

• RMHP denies services your doctor requested for you.
• RMHP denies payment for services you received.
• RMHP shortens or ends a service we had agreed to provide you.
• RMHP does not provide services in a timely way.
• RMHP does not act within the amount of time it says it will. (This includes answering appeals, grievances and fast reviews in the number of days specified.)
• RMHP denies certain services if you live in a rural area. (This means the rights you have to use a provider, even if he or she is not in our network, when you live in a rural area.)

There are two types of review that can happen.

Standard Review
You must call or write to appeal within 60 calendar days of the day we tell you about the decision that RMHP has made. You or your DCR can fill out the complaint form at the back of this booklet and mail it to us. If you want us to fill out the form for you, please call Customer Service. If you call us with your appeal request, we will send you a letter that you must sign and return to confirm that we understand your verbal request.

Within two working days of the day RMHP gets your appeal, RMHP will write you to tell you we got your appeal. In that letter RMHP will tell you how you may get a copy of RMHP’s file about your appeal. RMHP will also give you a chance to give us any more information about your appeal that you would like us to have. You can arrange to meet a person face to face at RMHP to listen to you about your appeal. Or you may send more information to us.

Questions? Rocky Mountain Health Plans is here to help.
Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
The Appeals and Grievance Coordinator will get all the facts about your case. After this review, RMHP may decide to change its decision. Within 10 working days after we receive your appeal, we will send you our decision in writing.

You may not agree with the decision RMHP makes about your appeal. Then you have the right to ask for a State Fair Hearing about your appeal. You can ask for the State Fair Hearing after RMHP makes a decision to continue to deny your request. You may also request a State Fair Hearing if RMHP fails to make a decision or send you a decision in writing within 10 working days. **You must ask for a State Fair Hearing within 120 calendar days of the date of RMHP’s final decision.**

**Expedited (fast) Review**

You can ask for an expedited or fast appeal. Fast appeals are used when RMHP’s decision puts you in danger. You can ask for a fast appeal if you have a disability. We have only 72 hours to resolve the fast appeal, so you have a short amount of time to get a copy of the file RMHP has about your appeal. You will also have less time to give RMHP any more information about your appeal.

**Continuing Your Benefits**

For any appeal, you can still get services when you ask the plan to take a second look at a decision. The same is true when you have asked for a State Fair Hearing, (see Section C below). To have your benefits continue while your appeal is being reviewed, the following must occur:

- The appeal must involve termination, suspension or reduction of a previously approved course of treatment.
- The original approval must not have expired.
- You must tell RMHP you want to keep getting your services when you send us your appeal. If a provider is helping you with your appeal, they cannot ask to have your benefits continue while your appeal is being reviewed.
- The care was ordered by a provider that works with RMHP.
- If you lose your appeal you may have to pay for the care you have received. To get more information about appeals and grievances call RMHP Customer Service.

**Section B. File a Grievance**

You may have a problem or be unhappy with RMHP about something other than an Adverse Decision (see Section A). To complain about something other than an Adverse Decision, you may “file a grievance.” This means you send your complaint to someone who can help. Please call us if you want to complain. We can help you file a grievance.

A grievance is a verbal or written statement that says you are not happy. You will not lose your Health First Colorado coverage because of your complaint. You will be treated the same as any other Member.

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**Questions? Rocky Mountain Health Plans is here to help.**

Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
Here are some things that you can complain about.

- You are unhappy with your doctor, clinic, or any RMHP provider.
- You can’t find a doctor or get in to see your doctor.
- You have a problem with RMHP Customer Service.
- You are unhappy with how your doctor took care of you.
- You feel you have been treated in a different way by RMHP or one of our providers. This could be because of your race, color, national origin, age, disability, sex, sexual orientation, or gender identity.
- You are unhappy because a provider or RMHP employee was rude to you.
- You disagree with our decision to extend the time to make a decision about your appeal.

How Grievances are Handled

You, your provider or your DCR can fill out the complaint form in this handbook and mail it to RMHP. Or, we can fill out the form for you. Call us for help. You can call or write to file your grievance at any time. In two working days, RMHP will tell you in writing that we got your grievance. RMHP will review your grievance and send you a response within 15 working days of the day we get your grievance. RMHP may respond to your grievance sooner than two working days. If we do, then you will not get a separate letter telling you that we got your grievance.

If you do not like our response, you may call or write the Health Plan Manager of Health First Colorado:

Department of Health Care Policy and Financing
Attn: Health First Colorado Managed Care Contract Manager
1570 Grant Street
Denver, CO 80203

You may also call 303-866-4623 or send an e-mail message to HCPF.MCOS@state.co.us. The Department of Health Care Policy and Financing will tell you that they got your request. They will look into your complaint and send you a response.

Section C. State Fair Hearing

A State Fair Hearing is a chance for a Health First Colorado Member to make a case to a judge that a denied service should have been approved, or that a denied claim should have been paid. You must wait for an answer to an appeal from RMHP before you request a State Fair Hearing.

To request a State Fair Hearing you must:

- Write a request for a hearing within 120 calendar days of the date of RMHP’s final decision (see Section A.)
- If you need help, RMHP Customer Service or the Office of Administrative Courts will help you write your request for a hearing.

Questions? Rocky Mountain Health Plans is here to help.

Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
• Include your name, your address, and your Health First Colorado ID in your request for a hearing.
• Write what RMHP did or did not do that has caused you a problem with your care.
• Tell in writing what you think should be done to solve your problem. You can fax your request to 303-866-5909, or mail it to:
  
  Office of Administrative Courts  
  1525 Sherman Street, 4th Floor  
  Denver, CO 80203  

• For help with asking for a State Fair Hearing, call 303-866-2000.

Dial 711 for Relay Colorado to contact the Office of Administrative Courts if you are deaf, hard of hearing, or have a speech disability.

Your provider may file for a State Fair Hearing for you. Your provider must have your written permission to file for you.

For help from RMHP in writing and submitting a request for State Fair Hearing you may call:

• RMHP Customer Service — 888-282-8801
• If you are deaf, hard of hearing, or have a speech disability, dial 711 for Relay Colorado or use our Live Chat on rmhp.org.
• Para asistencia en español — 888-282-8801

If you lose your State Fair Hearing, you may have to pay for the services you got while your appeal was pending. See Continuing Your Benefits above.

You have certain rights under Colorado rules covering State Fair Hearing:

• You have the right to represent yourself at the hearing.
• You have the right to choose someone to be your representative at the hearing.
• You have the right to present information or evidence to the administrative judge during the hearing.
• You have the right to read or examine all RMHP documents related to the appeal before and during the hearing

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Additional Information

How RMHP Works
You can get more information about how RMHP works. You can get information on how RMHP is arranged. You can also get information on our physician incentive plans. Call Customer Service for further information.

Quality Improvement Plan
RMHP has a Quality Improvement plan that tells us how we are doing in providing health care and member services. We always want to improve our quality. You can request a copy of this plan at no cost to you. If you feel you did not get the right care, you can complain. If your care was not given by the right person, at the right place, or at the right time, you can complain. There is a form at the back of this handbook that you can fill out, or you can call Customer Service at 888-282-8801 (TTY: 711). Your complaints help us see what works and what we need to fix.

Care Management Decisions
We base our care management decisions only on the appropriateness of care and services. Rocky Mountain Health Plans does not pay our participating providers to deny care and services. We do not offer incentives to our employees or others that encourage denying care. When making decisions to approve or not approve a service, RMHP looks at Health First Colorado directives and bulletins, RMHP clinical policies, nationally established evidence based guidelines, and for medical equipment and supplies, Medicare coverage guidelines.

Equal Opportunity Policy
It is the policy of Rocky Mountain Health Plans to provide equal opportunity and to prevent discrimination based on race, color, national origin, age, disability, sex, sexual orientation, or gender identity in admission or access to, or treatment in, or employment in, RMHP programs, health care plans, and activities to the extent required by applicable law.

All federally-funded benefits and services are provided in accordance with Title VI of the Civil Rights Act, as amended, Section 504 of the Rehabilitation Act, as amended, the Age Discrimination Act of 1975, as amended, the Americans with Disabilities Act of 1990, as amended, as well as other related laws. All subcontractors are notified of their responsibility to comply with these laws. If you have any questions concerning this policy, please contact RMHP Customer Service.

Evaluation of New Technologies
RMHP uses a systematic approach to evaluate and address new developments in medical technologies or new applications of existing technologies, including medical procedures, behavioral health procedures, pharmaceuticals, and devices for inclusion in benefit plans. The evaluation includes a review of information from appropriate government regulatory bodies, published scientific evidence, and/or

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input from specialists and professionals with experience in the new technology. If you would like more information regarding RMHP’s approach to evaluation of new technologies, please contact Customer Service.

Confidentiality

It is very important that we keep your medical information private and still provide the best care. To do this, you must give us the right to use your medical records. All you need to do is sign a form. The form makes sure we will share your medical records with only the doctors, hospitals or providers you go to. We will not share them without your written okay, except when they are used for medical studies. Medical records used in studies will not have your name, address, or Health First Colorado number on them.

Notice of Privacy Practices

RMHP is committed to protecting the confidentiality of your medical information to the fullest extent of the law. In addition to the laws that govern your privacy, RMHP has its own privacy policies and procedures to help protect your information. If you would like a copy of RMHP’s privacy policies and notices, visit rmhp.org/legal/notice-of-privacy-practices or call Customer Service.

Reporting Fraud

Let us know if you suspect fraud. If you would like to report fraud, please use the form at the end of this handbook and mail it to:

Fraud Investigator
Rocky Mountain Health Plans
P O Box 10600
Grand Junction, CO 81502-5600

It is against the law to knowingly provide untrue, incomplete, or misleading information to RMHP to benefit you or anyone else. This is commonly called fraud. Do not commit fraud. Penalties for fraud may include prison, money fines, and denial of insurance.

Fraud causes the cost of health care to go up. You can help decrease these costs by doing the following:

- Be wary of offers to waive copayments. This practice is usually illegal.
- Be wary of mobile health testing labs. Ask what insurance company will be charged for the test.
- Always review this RMHP Member Handbook. If there are any differences between what is in here and what you are offered, call RMHP Customer Service.
- Be very cautious about giving your Health First Colorado or RMHP Member ID over the phone.

Questions? Rocky Mountain Health Plans is here to help.

Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
You will know that you are a victim of medical identity theft or fraud if you:

- Get a bill for medical services you didn’t receive
- Are contacted by a debt collector about medical bills you don’t owe
- See medical collection notices on your credit report that you don’t recognize
- Are told by your health plan that you’ve reached the limit on benefits
- You are promised free goods, such as medical equipment or gift cards, for providing your medical identification to someone.

RMHP reserves the right to take back any benefit payments paid on behalf of a Member if the Member has committed fraud or material misrepresentation in applying for coverage or in receiving or filing for benefits.
Your Right to Make Health Care Decisions

Advance Directives

What is an Advance Directive?

It is a type of written instruction about your health care to be followed if you become unable to make decisions about your medical treatment. You prepare your Advance Directive when you are able to make these decisions.

Then if there is a time when you are unable to make health treatment decisions, the directive will be followed. These instructions do not take away your right to decide what you want, if you are able to do so at the time a decision is needed.

There are a few types of Advance Directives. In this booklet, we will discuss three:

- **A CPR Directive**, sometimes called a DNR or do not resuscitate order, tells emergency health care personnel and others not to do CPR on you. CPR is short for cardiopulmonary resuscitation.
- **A Medical Durable Power of Attorney** allows you to name a person who can make health decisions for you.
- **A Living Will** applies only in cases of terminal illness. This means a disease or injury that leads to death.

Does RMHP require me to fill out an Advance Directive?

No. The law states that you will not be denied services, treatment, or being admitted to a facility if you chose not to sign an Advance Directive. The law applies to all adults, no matter their health problem or condition.

Know the law

At RMHP, we want you to know your rights when it comes to making decisions about your health.

You will not be refused treatment, services, or admission to a facility if you do not fill out an Advance Directive.

You have the right to accept or turn down any medical care and treatment, unless care is ordered by a court. In an emergency, your consent to CPR, health care, and treatment is assumed. We will tell you about Colorado’s laws regarding your right to make health care decisions.

You must be given information about Advance Directives each time you are admitted as a patient or become a resident of:

- Any health care facility that gets Medicare or Colorado Health First Colorado money
- A nursing home, an HMO, hospice, home health care, or a personal care program that gets Medicare or Health First Colorado money

Questions? Rocky Mountain Health Plans is here to help.

Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
You must also be given written information on the facility and provider policies about Advance Directives.

*Colorado law states:*

Before you are no longer able to make your own choices, you can fill out a Medical Durable Power of Attorney. This legal document names or appoints the person who will make legal and health care decisions if you are not able to do so.

Once you are no longer able to make your own choices, if you have not filled out an Advance Medical Directive:

- A person close to you can be a proxy. A proxy is a substitute decision maker.
- The doctor or the doctor’s designee must make reasonable efforts to get in touch with those close to the patient. The goal is to find a proxy or substitute decision maker.

*What if I want to donate my organs after I die?*

You can include your wish about donating your organs in any Advance Directive. Or, you may sign a separate paper called a “Document of Gift” under Colorado’s Revised Uniform Anatomical Gift Act. Talk to your doctor if you would like to learn more about organ donation. Also, we suggest you let your family know your wishes.

*Do I need to fill out an Advance Directive in Colorado if I filled out one in another state?*

We recommend you make out a new Advance Directive that follows Colorado law, even if you have one from another state. If you spend a great deal of time in more than one state, you may wish to think about filling out an Advance Directive for those states, too.

*Answers to your questions about Advance Directives*

This section includes forms you can use to fill out your own Medical Durable Power of Attorney and a Living Will. You can also use any form you prefer. And remember — you do not need to fill out these forms to get health services or treatment from RMHP. You will still get the health care and treatment that is right for your condition and consistent with the policy of the facility.

*How do I complain if my advance directive is not followed?*

Complaints about providers who are not following a member’s advance directive requirements may be filed with the Colorado Department of Public Health and Environment. Send the complaint to:

   Attn: Advance Directive Complaint  
   Colorado Department of Public Health and Environment  
   4300 Cherry Creek Drive South  
   Denver, CO 80246-1530

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**Questions? Rocky Mountain Health Plans is here to help.**

Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
Or call 303-692-2836 for complaints about providers not following advance directive requirements at skilled nursing facilities, assisted living facilities, and long term care providers.

Or, call 303-692-2910 for complaints about providers not following advance directive requirements for all other provider types, including home health, hospital, and hospice.

**About CPR Directives**

*What is CPR?*

CPR is short for cardiopulmonary resuscitation.

CPR is used to try to revive a person whose heart has stopped or who is not breathing. It is done by pressing very firmly on the chest and giving rescue breaths. At times, CPR includes using special drugs or machines to get the heart and breathing started.

*What is a CPR Directive?*

It is a legal written document that states that if you stop breathing or your heart stops, no attempts will be made to get your heart or lungs working again. This document allows you, your agent, your guardian, or your proxy to refuse CPR for you.

It states that doctors, paramedics, or emergency workers:

- Will not try to press on your chest
- Will not use breathing tubes
- Will not use electric shock or other methods

*Who is most likely to sign a CPR Directive?*

While anyone over 18 can sign a CPR Directive, most often people who sign it are:

- Very sick with a fatal illness, or
- Old and very frail, so having CPR could make their health worse. For example, older adults who have had small strokes, a weak heart, or liver or kidney failure may decide against CPR. While CPR has saved many lives, some health problems can get worse after CPR, and the person can be left paralyzed or not able to speak or understand.

*How is a DNR order different from a CPR Directive?*

“DNR” is short for “do not resuscitate.” A DNR order and a CPR Directive are ways of saying the same thing. These orders from the doctor tell health care workers not to do CPR if the person’s heart or breathing stops.

These orders can be made out in advance by the patient or by people who are able to make health care decisions when a patient is not able to do so. The order becomes effective when the patient or a person the patient assigns and the doctor sign the document.

**Questions? Rocky Mountain Health Plans is here to help.**

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What happens if a patient has a heart attack in the hospital or in a nursing home?
The staff will do CPR unless the patient has a DNR order or a CPR Directive that says “no CPR.” These written doctor’s orders are used when the doctor decides, often after talking with the patient, that CPR would not be proper.

Talk to the staff at the nursing home to learn about their policy of giving CPR.

What happens when the patient is under age 18?
Only after a doctor issues a DNR order for a minor child can the parents of the minor carry out the “no CPR” order for the child. Parents married and living together, the custodial parent, or the legal guardian may carry out a CPR Directive for the child.

How do I create a CPR Directive?
You can get one from your doctor or a licensed health care facility, or you can ask your lawyer to draw up a form. This directive must be signed by you, or your agent or proxy and your doctor. The original copy must be available to proper staff, and you are urged to order and wear a necklace or bracelet that will quickly identify you as someone who does not want to be resuscitated. If this directive is not found or you are not wearing a “no CPR” necklace or bracelet, it is likely CPR will be done.

A CPR Directive may be canceled at any time by the person who has signed it. All original forms must be canceled.

Some people choose to wear a necklace or bracelet to let others know not to do CPR

- Order forms for the state-approved necklace or bracelet are available at the time you and your doctor sign a CPR Directive form. There is a charge for the necklace or bracelet.
- Again, you will not be refused proper service or treatment because you have not filled out an Advance Directive form.

If you decide to fill out the form, tell family members about your wishes. Let them know where you keep your form.

If I sign a CPR Directive, will I still get other kinds of needed health treatment?
Yes. Signing a CPR Directive will not stop you from getting other health care, such as treatment for pain, bleeding, broken bones or other comfort care.
What is a Medical Proxy?
A Medical Proxy is a person you appoint who will agree to act in your best interest about your health care if you lose the ability to make decisions about treatment for yourself. A Medical Proxy is sometimes called a substitute decision maker. A Medical Proxy that you complete is the same as a Medical Durable Power of Attorney.

Most often, people pick a person they know well for their proxy. This may be a family member or close friend. Your proxy must be 18 years of age or older.

The proxy can decide to stop or not to start tube feeding and hydration only when two doctors agree that tube feeding and hydration would only draw out dying and is not likely to help the patient get better. One of the doctors must be trained in neurology or neurosurgery.

How do I appoint a Medical Proxy?
You can fill out the form at the end of this member handbook. Or you can get a form on your own. If your proxy is not there at the time to decide for you, your doctor will follow instructions you gave when you were able.

What happens if I have not chosen a Medical Proxy?
If you have not chosen a proxy, or if you do not have an Advance Directive or a guardian, Colorado law says that family members and close friends can select a proxy for you. This happens after a doctor or judge decides that you cannot make your own health decisions. Then your husband or wife, your parent, an adult child, adult grandchild, brother, sister, or a close friend may work together to choose a proxy.

At times, some of the people entitled to choose your proxy disagree with the choice of proxy or with the proxy’s actions. Or the people cannot agree on a proxy. Then the group can ask the court to start a guardianship. Under Colorado’s proxy law, no member of the group has “automatic” priority. The person chosen as your proxy should be the one who knows your health wishes the best.

If anyone believes you have regained decision-making ability, you will be examined again by your doctor. If you have regained decision-making ability, the proxy will be relieved of duty.

Guardians
A guardian is a person chosen by a court to help with the personal affairs of a person who is unable to make his or her own decisions. It may take months for a guardian to be appointed if it is not an emergency.

The law allows a guardian to be appointed when a person is not able to make personal decisions about him/herself or if a person does not have the understanding or ability to make or make known responsible decisions about his or her health care. This may result from mental illness, mental retardation, illness or disability, long-term use of drugs and/or alcohol, or other causes. A person who is subject to a guardianship is called a “ward”.

Questions? Rocky Mountain Health Plans is here to help.
Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
Any person aged 21 or over, or an appropriate agency which is willing to serve, may be chosen as a guardian. One or more people can share this duty.

A guardian does not have to provide for a ward out of his or her own funds, or live with the ward. A guardian is not responsible for a ward’s actions or behavior. The duties of a guardian are to find out where the ward should live and arrange for needed care, treatment or other services for the ward. The guardian also sees that the basic daily personal needs of the ward are met, including food, clothing and shelter. At times, the guardian may be in charge of money matters for ward.

A court may let a guardian make health care and treatment choices. A court may name a limited guardian to give certain services for a specific length of time.
Medical Durable Power Of Attorney

A Medical Durable Power of Attorney is a document you sign naming someone to make your health care decisions. This document can cover more health care decisions than a Living Will does and is not limited to terminal illness. A Medical Durable Power of Attorney that you complete is the same as a Medical Proxy.

The person you name is called your agent. Your agent stands in for you when it is time to make any and all medical or all medical or other health care decisions with your doctor. Your agent can get copies of your medical records and other information to make medical decisions for you.

It is important to talk with your doctor, your family, and your agent about your health care choices in your Advance Directives.

You may put instructions or guidelines into your document telling your agent what you really want. You can cancel your Medical Durable Power of Attorney at any time. Your Medical Durable Power of Attorney can become effective right away. Or, you can make it become effective when you become unable to make your own health decisions.

You can name anyone to be your health care agent. The person must be at least 18 years old and be willing and mentally able to be your agent. While you may want to choose someone who lives nearby, your agent does not have to live in Colorado.

If you appoint your husband or wife as your agent, and then later you get divorced, get legally separated, or get an annulment, your former spouse is automatically removed as your agent. To keep your former husband or wife after you are no longer together, you will need to put it in your Medical Durable Power of Attorney.

You cannot be denied service if you do not fill out a Medical Durable Power of Attorney form. The law states that you will not be denied services, treatment, or being admitted into a facility if you choose not to sign an Advance Directive form. The law applies to all adults, no matter their health problem or condition.

Medical Durable Power Of Attorney for Health Care Decisions

Read this section before you sign the Medical Durable Power of Attorney form.

You should not sign this document unless you understand it fully. You may wish to talk to others or a lawyer before signing.

- This document asks you to name a person as your agent. Your agent then has the power to make health care decisions if you are not able to do so. These decisions and powers are not limited to terminal conditions and life support decisions.
- After you have signed this document, you still have the right to make health care decisions for yourself if you are able to do so.

Questions? Rocky Mountain Health Plans is here to help.

Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
• You may state in this document any type of treatment that you want get or want to avoid. If you want your agent to make decisions about life sustaining treatment, it is best to so state in your Medical Durable Power of Attorney.

• You have the right to take away the authority of your agent unless a court finds you incompetent. If you withdraw the authority of your agent, it is a good idea that you do so in writing. Make sure to copies of the new document to all those who got your original document.

• The enclosed Medical Durable Power of Attorney form follows Colorado law. If you move to another state, make sure to check your new state’s rules.

Your Medical Durable Power of Attorney should contain the following information:

• The name, address and telephone number of the person you choose as your agent.

• The name, address and telephone number of your second and third choice of agent to act if your first agent is not able to act for you.

• Any written instructions about treatment you do or do not want. Examples include surgery, chemotherapy, tube feeding, kidney dialysis or breathing support.

Questions? Rocky Mountain Health Plans is here to help.
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DURABLE POWER OF ATTORNEY REGARDING MEDICAL TREATMENT

I, ________________________________________________________(Declarant), hereby designate ______ ___________________________my FIRST CHOICE, to serve as my attorney-in-fact and agent for the purpose of making all medical and health treatment, hospitalization, and institutional placement decisions. If my FIRST CHOICE has predeceased me or is unable or unwilling to make such decisions, I then appoint ____________________________my SECOND CHOICE as my attorney-in-fact and agent for the purpose of making all such decisions. To aid in making and effectuating these decisions, my attorney-in-fact and agent shall have the authority to speak with all health care personnel treating me and obtain information and sign forms necessary to carry out these decisions. This Power of Attorney shall remain effective in the event that I become incompetent or otherwise unable to make such decisions for myself.

DATED this______________day of ____________________________, year of _______.

_______________________________________
*Name (Title Case)

The foregoing instrument was signed and declared by _________________________________, to be ______(his/her) declaration, in the presence of us, who, in ______(his/her) presence, in the presence of each other, and at ______(his/her) request, have signed our names below as witnesses, and we declare that, at the time of the execution of this instrument, the Declarant, according to our best knowledge and belief, was of sound mind and under no constraint or undue influence. We further declare that we are not: (1) the Declarant’s physician or employees of ______(his/her) physician; (2) employees or patients of the health care facility in which the Declarant is a patient; or (3) beneficiaries or creditors of the estate of the Declarant or an heir at law of the Declarant.

DATED this______________day of ____________________________, year of _______.

Witness _______________________________________
Address _______________________________________
City, State Zip  __________________________________

Witness _______________________________________
Address _______________________________________
City, State Zip  __________________________________

STATE OF COLORADO  )
COUNTY OF *_____________ ) ss.

DATED this__________day of ____________________________, year of ________.

SUBSCRIBED AND SWORN TO before me by _________________________________, the Declarant, and ___________________________ and ___________________________, witnesses, as the voluntary act and deed of the Declarant, this ______day of ____________________________, year of ________.

Witness my hand and official seal.   _______________________________________
Notary Public
Living Wills

A Living Will is a written document that you sign while you are still able to make decisions about your health care. You must be at least 18 years old to make a Living Will.

The Living Will tells your doctor not to use artificial life support if you are dying and your body is not working on its own and you can’t make your wishes known. In Colorado, the Living Will goes into effect when two doctors agree in writing that life-sustaining treatment will only postpone the moment of death. The doctors must agree in writing that you have a terminal condition.

Two witnesses must sign your Living Will. A witness cannot be:

- A patient in the facility where you are getting care
- Any doctor or any employee of your doctor
- Any employee of the facility or agency providing your care
- One of your creditors
- A person who may inherit your money or property

You can use the Living Will form included in this booklet. This form complies with Colorado law. You don’t have to use the form. You can get one from your doctor or a licensed health care facility, or you can ask your lawyer to draw up a form. Often office supply stores have Living Will forms.

While you do not need a lawyer to complete your Living Will, talk to a lawyer should you have questions.

Colorado Law about Tube Feeding and Hydration

Your Living Will must clearly state you want to stop tube feeding or any other form of artificial feeding and hydration. If you are able to take food by mouth, your Living Will won’t stop you from being fed. In any case, artificial food may be used if needed to give comfort or lower pain.

You can cancel or change your Living Will at any time

Cancel your Living Will by tearing it up and throwing it away.

Or you can sign a statement that you no longer want it, and you may make a new one. Make sure to tell your family, your doctor, and others who have a copy that you have a new Living Will.

Ask anyone who has a copy of the old one that you have canceled or changed your Living Will. You may want to give them the new copy.
LIVING WILL - DECLARATION AS TO MEDICAL OR SURGICAL TREATMENT

I, ______________________________________(Declarant), being of sound mind and at least eighteen years of age, direct that my life shall not be artificially prolonged under the circumstances set forth below and hereby declare that:

1. If at any time my attending physician and one other physician certify in writing that:
   a. I have an injury, disease or illness which is not curable or reversible and which, in their judgment, is a terminal condition; and
   b. For a period of seven consecutive days or more, I have been unconscious, comatose or otherwise incompetent so as to be unable to make or communicate responsible decisions concerning my person; then I direct that, in accordance with Colorado law, life-sustaining procedures shall be withdrawn and withheld pursuant to the terms of this declaration; it being understood that life-sustaining procedures shall not include any medical procedure or intervention for nourishment considered necessary by the attending physician to provide comfort or alleviate pain. However, I may specifically direct, in accordance with Colorado law, that artificial nourishment be withdrawn or withheld pursuant to the terms of this declaration.

2. In the event that the only procedure I am being provided is artificial nourishment, I direct that one of the following actions be taken:
   _____  (initials of Declarant) a. Artificial nourishment shall not be continued when it is the only procedure being provided; or
   _____  (initials of Declarant) b. Artificial nourishment shall be continued for _____days when it is the only procedure being provided; or
   _____  (initials of Declarant) c. Artificial nourishment shall be continued when it is the only procedure being provided.

3. I execute this declaration as my free and voluntary act this________day of this month _____________, in this year of ___________.
   By (Declarant)

The foregoing instrument was signed and declared by __________________________________________ to be his/her declaration, in the presence of us, who, in his/her presence, in the presence of each other, and at his/her request, have signed our names below as witnesses, and we declare that, at the time of the execution of this instrument, the Declarant, according to our best knowledge and belief, was of sound mind and under no constraint or undue influence. We further declare that neither of us is: 1) a physician; 2) the Declarant’s physician or an employee of his/her physician; 3) an employee or a patient of the health care facility in which the Declarant is a patient; or 4) a beneficiary or creditor of the estate of the Declarant.

Dated at________________, Colorado, this__________day of______________, in the year________.
__________________________________________  __________________________________________
(Signature of witness)  (Signature of witness)
Address ___________________________________ Address:_______________________________________
__________________________________________  _______________________________________

OPTIONAL

STATE OF COLORADO, County of_______________________, Subscribed and sworn to or affirmed before me by _______________________________ the Declarant, and ________________________________, and ________________________________, witnesses, as the voluntary act and deed of the Declarant, this _______day of _________________, in the year________.

My commission expires:_____________________ Notary Public ______________________________
Advance Directives Coalition

The original version of the booklet “Your Right to Make Health Care Decisions” was prepared by the Advance Directives Coalition. This group is made up of various health organizations and agencies and private lawyers.

Get a free single copy of the booklet from Colorado Health and Hospital Association. Call 720-489-1630.

For help or more information on Advance Directives, contact your local doctor, hospital, senior group, or lawyer, or any of the organizations below:

- Colorado Association of Home Health Agencies
- Colorado Association of Homes and Services for the Aging
- Colorado Bar Association
- Colorado Department of Public Health and Environment
- Colorado Department of Social Services
- Colorado Health and Hospital Association
- Colorado Healthcare Association
- Colorado Medical Society Governor’s Commission on Life and Law
- Legal Aid Society Licensed Health care Facilities
- Rocky Mountain Center for Health Care Ethics
- The Legal Center for Persons with Disabilities

Questions? Rocky Mountain Health Plans is here to help.
Call us at 888-282-8801 (TTY: 711), Monday - Friday, 8:00 a.m. to 5:00 p.m. You can also email us at customer_service@rmhp.org or visit rmhp.org. Para asistencia en español llame al 888-282-8801.
# Fraud Investigation Referral Form

## Member, Provider, or Health Care Facility Information

<p>| | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td><strong>First Name:</strong></td>
<td><strong>Last Name:</strong></td>
</tr>
<tr>
<td><strong>Street 1:</strong></td>
<td><strong>Street 2:</strong></td>
</tr>
<tr>
<td><strong>City:</strong></td>
<td><strong>State:</strong></td>
</tr>
<tr>
<td><strong>Zip Code:</strong></td>
<td><strong>Telephone Number:</strong></td>
</tr>
<tr>
<td><strong>Patient First Name:</strong></td>
<td><strong>Patient Last Name:</strong></td>
</tr>
<tr>
<td><strong>Member Number:</strong></td>
<td><strong>Provider Number:</strong></td>
</tr>
<tr>
<td><strong>Claim Number:</strong></td>
<td></td>
</tr>
</tbody>
</table>

## Suspected Fraudulent or Abusive Activity

What are they doing?

## Reporting Entity (leave blank for anonymous referrals)

<p>| | | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td><strong>First Name:</strong></td>
<td><strong>Last Name:</strong></td>
<td><strong>Phone #:</strong></td>
</tr>
</tbody>
</table>

Complete and send to:

Fraud Investigator  
Rocky Mountain Health Plans  
PO Box 10600  
Grand Junction, CO 81502-5600
Member Complaint and Appeal Form

Complaint/Appeal is for:

Member Name: _______________________________________________________________
Address: _____________________________________________________________________
City State Zip:  ________________________________________________________________
Telephone: ___________________________________________________________________
Member ID number: ___________________________________________________________

Person submitting this form:_____________________________________________________
Relationship to Member: ________________________________________________________

Tell us the problem (please describe in detail):
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

Mail to:

Rocky Mountain Health Plans
Member Concerns Coordinator
P.O. Box 10600
Grand Junction, CO 81502-5600

You can send us a complaint at any time. You must send us an appeal within 60 calendar days of the letter/notice that told you that RMHP would not cover or pay for a service.

Call Customer Service at 888-282-8801 if you have any questions or need help. We can give you information about complaints and appeals. If you want help filling out the form, please call Customer Service. We will help you.

• If you are deaf, hard of hearing, or have a speech disability, dial 711 for Relay Colorado or use our Live Chat on rmhp.org.
• Para asistencia en español llame al 888-282-8801.
• For callers who speak languages other than English or Spanish, RMHP uses Language Line Solutions.

Member Signature:__________________________________________Date: _________________________
<table>
<thead>
<tr>
<th>Language</th>
<th>Text</th>
</tr>
</thead>
<tbody>
<tr>
<td>English</td>
<td>ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-888-282-8801 (TTY: 711).</td>
</tr>
<tr>
<td>Spanish</td>
<td>ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-282-8801 (TTY: 711).</td>
</tr>
<tr>
<td>Chinese</td>
<td>注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-888-282-8801（TTY：711）。</td>
</tr>
<tr>
<td>Russian</td>
<td>ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-888-282-8801 (телетайп: 711).</td>
</tr>
<tr>
<td>Amharic</td>
<td>የአማርኛ ከማስታወሻ ይርጉም፣ ይህ ይሆና የተረጋገጫ እርዳታ ይደረጉ፣ በነጻ ኃላፊነት ከተዘጋጀተዋል፡ በነጻ እያኩለው የተረጋገጫ 1-888-282-8801 (መስማት ለተሰጠው: 711).</td>
</tr>
<tr>
<td>Arabic</td>
<td>ملاحظة: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية تتوفر لك بالمجان. اتصل برقم 1-888-282-1088 (رقم هاتف الصم والبكم: 117).</td>
</tr>
<tr>
<td>Language</td>
<td>Text</td>
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<tr>
<td>Nepali</td>
<td>ध्यान दिनुहोस्: तपाईंले नेपाली बोल्नुहुन्छ भने तपाईंको निम्नित्त भाषा सहायता सेवाहरू निःशुल्क रूपमा उपलब्ध छ। फोन गर्नुहोस् 1-888-282-8801 (टिटिवाइँ: 711).</td>
</tr>
<tr>
<td>Japanese</td>
<td>注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-888-282-8801（TTY:711）まで、お電話にてご連絡ください。</td>
</tr>
<tr>
<td>Persian</td>
<td>رایگان، امداد، خدمات زبان این گله‌ای، زبان شما اگر بتوسط 1-888-282-8801 تماس. هستند دسترس در شما به (117:TTY).</td>
</tr>
<tr>
<td>Ibo/Igbo</td>
<td>Ige nti: O buru na asu Ibo asusu, enyemaka diri gisite na call 1-888-282-8801 (TTY: 711).</td>
</tr>
<tr>
<td>Yoruba</td>
<td>AKIYESI: Ti o ba nso ede Yoruba ofe ni iranlowo lori ede wa fun yin o. E pe ero ibanisoro yi 1-888-282-8801 (TTY: 711).</td>
</tr>
</tbody>
</table>
Notice of Nondiscrimination

Rocky Mountain Health Plans (RMHP) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity. RMHP does not exclude people or treat them differently because of race, color, national origin, age, disability, sex, sexual orientation, or gender identity.

RMHP takes reasonable steps to ensure meaningful access and effective communication is provided timely and free of charge:

- Provides free auxiliary aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters (remote interpreting service or on-site appearance)
  - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language assistance services to people whose primary language is not English, such as:
  - Qualified interpreters (remote or on-site)
  - Information written in other languages

If you need these services, contact the RMHP Member Concerns Coordinator at 1-888-282-8801, or TTY: 711.

If you believe that RMHP has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, sex, sexual orientation or gender identity you can file a grievance with the RMHP EEO Officer at 1-888-282-8801, ext. 7883, or TTY: 711, or eeoofficer@rmhp.org. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the RMHP EEO Officer is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD).


Para asistencia en español llame al 1-888-282-8801 o eeoofficer@rmhp.org

Call RMHP at 1-888-282-8801, or TTY: 711, if you want this document or any other RMHP document in other formats - like large print, electronically, or other accessible format. RMHP provides free auxiliary aids and services to people with disabilities to communicate effectively with us.

Rev 061418