



HUSKY Health Program

Member Handbook

HUSKY B



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NOTICE OF AVAILABILITY OF LANGUAGE ASSISTANCE SERVICES AND AUXILIARY AIDS AND SERVICES

The HUSKY Health program provides free services to help you communicate with us better. If you need help, language assistance services and appropriate auxiliary aids and services to provide information in accessible formats are available to you. Please call us at [1.800.859.9889](tel:1.800.859.9889) (TTY: 711) and listen for the prompt to connect you to Member Engagement. We're here Monday through Friday, from 8:00 a.m. to 6:00 p.m.

Español (Spanish)

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al 1.800.859.9889 (TTY: 711).

Português do Brasil (Portuguese)

ATENÇÃO: Se você fala Português do Brasil, serviços gratuitos de assistência linguística estão disponíveis para você. Auxílios e serviços auxiliares apropriados para fornecer informações em formatos acessíveis também estão disponíveis gratuitamente. Ligue para 1.800.859.9889 (TTY: 711).

POLSKI (Polish)

UWAGA: Osoby mówiące po polsku mogą skorzystać z bezpłatnej pomocy językowej. Dodatkowe pomoce i usługi zapewniające informacje w dostępnych formatach są również dostępne bezpłatnie. Zadzwoń pod numer 1.800.859.9889 (TTY: 711).

中文 (Chinese)

注意：如果您說[中文]，我們可以為您提供免費語言協助服務。也可以免費提供適當的輔助工具與服務，以無障礙格式提供資訊。請致電 1.800.859.9889 (TTY : 711)。

Italiano (Italian)

ATTENZIONE: se parli Italiano, sono disponibili servizi di assistenza linguistica gratuiti. Sono inoltre disponibili gratuitamente ausili e servizi ausiliari adeguati per fornire informazioni in formati accessibili. Chiama l'1.800.859.9889 (TTY: 711).

Français (French)

ATTENTION : Si vous parlez Français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et services auxiliaires appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le 1.800.859.9889 (TTY: 711).

Kabuverdianu (Creole)

ATENÇÃO: Caso fale Kabuverdianu, existem serviços de assistência linguística gratuitos disponíveis. Estão também disponíveis apoios e serviços auxiliares adequados para prestar informações em formatos acessíveis. Ligue 1.800.859.9889 (TTY: 711).

РУССКИЙ (Russian)

ВНИМАНИЕ: Если вы говорите на русский, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Позвоните по телефону 1.800.859.9889 (TTY: 711).

Việt (Vietnamese)

LƯU Ý: Nếu bạn nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các hỗ trợ dịch vụ phù hợp để cung cấp thông tin theo các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi theo số 1.800.859.9889 (Người khuyết tật: 711).

العربية (Arabic)

تنبيه: إذا كنت تتحدث اللغة العربية، فستتوفر لك خدمات المساعدة اللغوية المجانية. كما تتوفر وسائل مساعدة وخدمات مناسبة لتوفير المعلومات بتنسيقات يمكن الوصول إليها مجانًا. اتصل على الرقم 711 (1.800.859.9889) أو تحدث إلى مقدم الخدمة".

한국어 (Korean)

주의: [한국어]를 사용하시는 경우 무료 언어 지원 서비스를 이용하실 수 있습니다. 이용 가능한 형식으로 정보를 제공하는 적절한 보조 기구 및 서비스도 무료로 제공됩니다. 1.800.859.9889(TTY: 711).

SHQIP (Albanian)

VINI RE: Nëse flisni [shqip], shërbime falas të ndihmës së gjuhës janë në dispozicion për ju. Ndhima të përshtatshme dhe shërbime shtesë për të siguruar informacion në formate të përdorshme janë gjithashtu në dispozicion falas. Telefononi 1.800.859-9889 (TTY: 711).

हिंदी (Hindi)

ध्यान दें: यदि आप हिंदी बोलते हैं, तो आपके लिए निःशुल्क भाषा सहायता सेवाएं उपलब्ध होती हैं। सुलभ प्रारूपों में जानकारी प्रदान करने के लिए उपयुक्त सहायक साधन और सेवाएँ भी निःशुल्क उपलब्ध हैं। 1.800.859.9889 (TTY: 711)।

Tagalog (Filipino)

PAALALA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng serbisyong tulong sa wika. Magagamit din nang libre ang mga naaangkop na auxiliary na tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa 1.800.859.9889 (TTY: 711).

Ελληνικά (Greek)

ΠΡΟΣΟΧΗ: Εάν μιλάτε ελληνικά, υπάρχουν διαθέσιμες δωρεάν υπηρεσίες υποστήριξης στη συγκεκριμένη γλώσσα. Διατίθενται δωρεάν κατάλληλα βοηθήματα και υπηρεσίες για παροχή πληροφοριών σε προσβάσιμες μορφές. Καλέστε το 1.800.859.9889 (TTY: 711).

NOTICE INFORMING INDIVIDUALS ABOUT NONDISCRIMINATION AND ACCESSIBILITY REQUIREMENTS

Discrimination is Against the Law

Community Health Network of Connecticut, Inc.® (CHNCT) and the HUSKY Health program comply with applicable Federal and State civil rights laws and do not discriminate on the basis of race, color, national origin (including limited English proficiency and primary language), age, disability, or sex. CHNCT and HUSKY Health do not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. With respect to the prohibition on sex-based discrimination, “sex” includes various characteristics, as defined by law.

CHNCT and HUSKY Health:

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

If you need these services, contact HUSKY Health Member Engagement Services at 1.800.859.9889.

If you believe that CHNCT or the HUSKY Health program has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can contact and file a complaint with the HUSKY Health Program Section 1557 Coordinator by contacting: HUSKY Health Program, Attention: Member Engagement Services, P.O. Box 5005, Wallingford, CT 06492, Phone: 1.800.859.9889, Fax: 1.203.265.3197. For the deaf or hard of hearing, please dial 711 or use your Telecommunications or Video Relay Service. You can also go to huskyhealthct.org, click “**Contact Us,**” then “**Send us a secure member email.**” You can file a complaint by telephone, mail, fax, or email. If you need help filing a complaint, Member Engagement Services 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 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, D.C. 20201
1.800.368.1019, 1.800.537.7697 (TDD)

Complaint forms are available at hhs.gov/ocr/office/file/index.html.

This notice is available at the CHNCT and HUSKY Health website: huskyhealthct.org/members/members_rights.html

IMPORTANT TELEPHONE NUMBERS

For the deaf or hard of hearing, please dial [7.1.1](#), or use your Telecommunications or Video Relay Service.

SERVICES	CONTACT INFORMATION
<p>Member Engagement Services For information about your medical benefits, to find HUSKY Health providers and community resources, to learn about special programs you may be eligible for, or if you're concerned about the medical care you received.</p>	<p>1.800.859.9889 huskyhealthct.org</p>
<p>2-1-1 of Connecticut A free, 24/7 confidential information and referral service that can connect you to essential health and human services.</p>	<p>2.1.1 211ct.org</p>
<p>Access Health CT For HUSKY A, B, or D applications or renewals, eligibility questions and updating personal information.</p>	<p>1.855.805.4325 accesshealthct.com</p>
<p>Behavioral Health Services: CT Behavioral Health Partnership/Carelon Behavioral Health (CT BHP) For behavioral health or substance use disorder benefits, treatment, and providers.</p>	<p>1.877.552.8247 ctbhp.com</p>
<p>ConnectCT Electronic Benefit Transfers (EBT) Customer Service To replace your gray ConneCT card for SNAP (food stamps) and cash assistance.</p>	<p>1.888.328.2666 connect.ct.gov</p>
<p>988 Suicide and Crisis Lifeline Free and confidential emotional support 24/7 to people in suicidal crisis or emotional distress, and crisis resources for you and your loved ones.</p>	<p>Call or text 9.8.8 or chat at 988lifeline.org</p>
<p>Pharmacy Benefit Customer Call Center For pharmacy services, benefits, and prior authorization requirements.</p>	<p>1.866.409.8430 portal.ct.gov/HUSKY/Pharmacy</p>
<p>2-1-1 CT Crisis Services To speak with a trained crisis worker at any time.</p>	<p>Call CT Crisis Services at 2.1.1 and choose the Crisis Services option (option 1).</p>
<p>Dental Services: CT Dental Health Partnership (CTDHP) For dental health benefits and to locate dental providers.</p>	<p>1.855.283.3682 ctdhp.org</p>
<p>Department of Social Services (DSS) Client Information Line & Benefit Center/ConneCT For HUSKY C, SNAP (food stamps), all Medicare savings programs, and all family and cash programs.</p>	<p>1.855.626.6632 connect.ct.gov</p>

Fraud Reporting Hotline To report someone who's receiving benefits they're not entitled to, or a provider who's misrepresenting the services provided.	1.866.700.6109 huskyhealthct.org/members/fraud.html
CT Medical Assistance Client Assistance Center/Gainwell Technologies For questions about a claim or a bill for healthcare services.	1.866.409.8430
24/7 Nurse Helpline To reach a nurse at any time.	1.800.859.9889 Follow the prompts.
CT Quitline/Department of Public Health For information and support while quitting tobacco use.	1.800.784.8669 (1.800.QUIT.NOW)
Women, Infants, and Children (WIC) For extra food and nutrition during and after pregnancy, and for infants and children up to age five.	Apply through your local WIC office: 1.800.741.2142 ct.gov/dph/wic

DSS RESOURCE CENTERS		
Bridgeport 925 Housatonic Avenue Bridgeport, CT 06606	Middletown 2081 South Main Street, Suite B Middletown, CT 06457	Stamford 1642 Bedford Street Stamford, CT 06905
Danbury 342 Main Street Danbury, CT 06810	New Britain 30 Christian Lane New Britain, CT 06051	Torrington 62 Commercial Boulevard Torrington, CT 06790
Greater Hartford 20 Meadow Road Windsor, CT 06095	New Haven 50 Humphrey Street New Haven, CT 06513	Waterbury 249 Thomaston Avenue Waterbury, CT 06702
Manchester 699 East Middle Turnpike Manchester, CT 06040	Norwich 401 West Thames Street Norwich, CT 06360	Willimantic 1320 Main Street / Tyler Square Willimantic, CT 06226

To learn more about the DSS Resource Centers, like available services and business hours, please visit this website: portal.ct.gov/DSS/About-the-Department-of-Social-Services/Contact.

CHANGES TO YOUR INFORMATION

It's important that we have your current address and phone number. This ensures you get important information from HUSKY Health and DSS.

HUSKY B members can make updates by visiting accesshealthct.com or calling [1.855.805.4325](tel:18558054325).

You should also update your personal information if you:

- Have changes in your household size or income.
- Have moved outside of Connecticut.
- No longer need HUSKY Health as your primary health insurance.

WELCOME TO THE HUSKY HEALTH PROGRAM!

Thank you for joining the HUSKY Health program! HUSKY Health is the State of Connecticut's Medicaid and Children's Health Insurance Program (CHIP). This handbook will help you understand your HUSKY Health benefits and the services available to you. HUSKY Health is committed to your care.

Your HUSKY Health coverage includes medical, dental, behavioral health, and pharmacy services.

If you have questions about any of these services, use the phone numbers below:

- For medical benefits and services, or general information: [1.800.859.9889](tel:18008599889)
- For behavioral health benefits and services: [1.877.552.8247](tel:18775528247)
- For dental benefits and services: [1.855.283.3682](tel:18552833682)
- For pharmacy benefits and services: [1.866.409.8430](tel:18664098430)

We look forward to serving you in good health!

Getting the Most Out of Your Membership

It's important to understand your benefits and services to get the most out of your HUSKY Health membership. If you ever have any questions, please call Member Engagement Services at [1.800.859.9889](tel:18008599889), Monday through Friday, 8:00 a.m. to 6:00 p.m. You can also send us a secure email by [clicking here](#) or going to huskyhealthct.org. Click **"Contact Us,"** then **"Send us a secure member email."**

Member Engagement Services can help you:

- Find a Primary Care Provider (PCP) and make appointments.
- Choose or change a PCP.
- Learn about covered services and how to get them.
- Learn about special programs you can use.
- Find resources in your community that can help you.

Member Engagement Services can give you information about the benefits and services available to you from the HUSKY Health program. We can tell you how the program works and answer any questions you may

have. Sometimes, your question may be better answered by a different organization who's part of the HUSKY Health program. If so, we'll make sure you get to the right place. Many of our team members speak English and Spanish. If you speak another language, we'll get a translator for you.

HUSKY Health has programs to help members with special healthcare needs. Details about these programs are in this handbook. If you still have questions after you read it, please call us at [1.800.859.9889](tel:1.800.859.9889).

Complete Your Health Risk Questionnaire

We want to make sure you're getting the help you need when you need it. Completing your Health Risk Questionnaire helps us do that. Your answers give us important information to connect you with resources for food, medical care, housing, and other basic needs. We may call you to take the survey, or you can do it online. To take the survey online, please visit huskyhealthct.org. Click "**Member Information**," then "**Complete Your Health Risk Questionnaire**."

HOW THE HUSKY HEALTH PROGRAM WORKS FOR YOU

Our Website

On the HUSKY Health website, you can learn about your benefits, services, health conditions, community resources, and so much more. To access the site, go to huskyhealthct.org. This will bring you to the HUSKY Health Member home page.

HUSKY Health Member Home Page

The member home page of the HUSKY Health website is designed just for you. All the information you need about your HUSKY Health benefits is right at your fingertips.

On this page, you'll find links to:

- **Member Information:** Information for new and existing members, including member newsletters and Frequently Asked Questions (FAQs). Complete your personal Health Risk Questionnaire and read your Member Rights & Responsibilities. You can also learn more about your right to privacy and how to report possible fraud.
- **Member Benefits:** Materials related to your HUSKY Health benefits, such as Benefit Grids, Quick Reference Guides, and Member Handbooks.
- **Find a Doctor:** Search the Provider Directory to find a medical provider in your area.
- **Managing Your Care:** Learn about Care Management (CM) services and care after a hospital stay.
- **Health & Wellness:** Information, tools, community resources, and health events to help you stay as healthy as possible. Browse information about many health topics/conditions by selecting "**Health Resources and Information**" under the "**Health & Wellness**" tab.

Secure Member Portal

The HUSKY Health member website also offers a secure member portal. When you log in to the secure member portal, you can see your member information. You can also:

- See who your PCP is and find out how to get a new one.
- View or print your HUSKY Health member ID card.
- Use the HUSKY Health Provider Directory to find providers who participate in the HUSKY Health program (this list is also on the *“Find a Doctor”* page).
- Learn about other programs you can use.
- Find out how to contact us.

This portal is secure, so all your information is safe each time you use it.

Secure Provider Portal

Providers also have a secure web portal. This lets them see the health services and medicines they’ve given you in the past. Your PCP can also see health information about you from other healthcare providers. This includes hospitals, specialists, and pharmacies. It doesn’t include information from your behavioral health providers, unless you agree to it. Your PCP can make better decisions about the type of healthcare you need when they can see your health information from your other providers.



If you don’t want your PCP to see health information about you from your other providers, you can “opt-out” anytime. To opt out, you must tell HUSKY Health in writing. You can download an **Opt-Out Request Form** by going to the HUSKY Health website at: huskyhealthct.org. Click *“Member Information,”* then *“Opt-Out Information & Forms.”*

If you’ve opted out, you can change your mind and cancel your opt-out request anytime. To do so, fill out the **Canceling your Opt-Out Request Form**. To access this form, go to the HUSKY Health website at: huskyhealthct.org. Click *“Member Information,”* then *“Opt-Out Information & Forms.”* If you need a form mailed to you, please call Member Engagement Services at 1.800.859.9889 or [send us a secure email](#).

Member ID Card

The HUSKY Health program sends a blue and white member ID card to all new members. It’s important that you don’t share your card with anyone. When you get your blue and white member ID card, look for your name. If your name is wrong, please update your information by going to portal.ct.gov/updateusDSS. If you have any questions about your card, call Member Engagement Services at [1.800.859.9889](tel:1.800.859.9889).

Always keep your member ID card with you. Show this card each time you go for medical services. These are sample Member ID cards. The first one is what an ID card looks like if there’s a cost share. The second is if there’s no cost share:

 <p>JOHN J. SAMPLE 123456789</p> <p>Co-pays apply:</p> <table border="0"> <tr><td>PCP (preventive care).....</td><td>\$0</td></tr> <tr><td>Behavioral Health</td><td>\$0</td></tr> <tr><td>PCP (non-preventive).....</td><td>\$10</td></tr> <tr><td>Specialist.....</td><td>\$10</td></tr> <tr><td>Pharmacy.....</td><td>\$5/\$10</td></tr> </table> <p>HUSKY B</p> <p>portal.ct.gov/husky</p>	PCP (preventive care).....	\$0	Behavioral Health	\$0	PCP (non-preventive).....	\$10	Specialist.....	\$10	Pharmacy.....	\$5/\$10	<p>If you do not have a Primary Care Provider, call Member Engagement Services.</p> <table border="0"> <tr><td>Member Engagement Services</td><td>1.800.859.9889</td></tr> <tr><td>Behavioral Health Services</td><td>1.877.552.8247</td></tr> <tr><td>Dental Health Services</td><td>1.855.283.3682</td></tr> <tr><td>24/7 Nurse Helpline</td><td>1.800.859.9889</td></tr> <tr><td>Provider Engagement Services</td><td>1.800.440.5071</td></tr> <tr><td>Pharmacy</td><td>1.866.409.8430</td></tr> <tr><td>Eligibility</td><td>1.855.626.6632</td></tr> </table> <p>Providers: File claims directly at www.ctdssmap.com</p> <p>Only the person named on this card can use this card to receive services. Use your PCP to coordinate your medical care.</p> <p>X f @ HUSKYHealthCT</p>	Member Engagement Services	1.800.859.9889	Behavioral Health Services	1.877.552.8247	Dental Health Services	1.855.283.3682	24/7 Nurse Helpline	1.800.859.9889	Provider Engagement Services	1.800.440.5071	Pharmacy	1.866.409.8430	Eligibility	1.855.626.6632
PCP (preventive care).....	\$0																								
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 <p>JOHN J. SAMPLE 123456789</p> <p>No cost share</p> <p>HUSKY B</p> <p>portal.ct.gov/husky</p>	<p>If you do not have a Primary Care Provider, call Member Engagement Services.</p> <table border="0"> <tr><td>Member Engagement Services</td><td>1.800.859.9889</td></tr> <tr><td>Behavioral Health Services</td><td>1.877.552.8247</td></tr> <tr><td>Dental Health Services</td><td>1.855.283.3682</td></tr> <tr><td>24/7 Nurse Helpline</td><td>1.800.859.9889</td></tr> <tr><td>Provider Engagement Services</td><td>1.800.440.5071</td></tr> <tr><td>Pharmacy</td><td>1.866.409.8430</td></tr> <tr><td>Eligibility</td><td>1.855.626.6632</td></tr> </table> <p>Providers: File claims directly at www.ctdssmap.com</p> <p>Only the person named on this card can use this card to receive services. Use your PCP to coordinate your medical care.</p> <p>X f @ HUSKYHealthCT</p>	Member Engagement Services	1.800.859.9889	Behavioral Health Services	1.877.552.8247	Dental Health Services	1.855.283.3682	24/7 Nurse Helpline	1.800.859.9889	Provider Engagement Services	1.800.440.5071	Pharmacy	1.866.409.8430	Eligibility	1.855.626.6632										
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**Note: the no cost share HUSKY B card is for members of federally recognized American Indian tribes or Alaskan Natives.*

View and Print Your Blue and White Member ID Card

You can also **view** and **print** your blue and white HUSKY Health member ID card by logging in to the secure member web portal. The web portal is provided to you by CHNCT on behalf of the HUSKY Health program. It helps you review, manage, and learn more about your health plan and benefits. You can also view and print member ID cards for your dependents **under age 18**.

To access the secure HUSKY Health member web portal, visit huskyhealthct.org and click the [“Member Login” button](#). If you’re a new user, choose **“Create Account.”** For existing users, enter your username and password and click **“Submit.”**

Authorized Representative (AREP)

When you receive your blue and white HUSKY Health member ID card, you’ll also receive a form to complete for anyone you’d like to give permission to talk with us on your behalf. That person will be known as your Authorized Representative (AREP). Any person you pick to be your AREP must be at least 18 years old. The form should be filled out completely, signed, and returned to us, if you want someone to be able to talk to us on your behalf. Please return the completed and signed form by fax to 203.265.3197, or by mail to:

Attention: Compliance
Community Health Network of Connecticut, Inc.®
HUSKY Health Program
P.O. Box 5005
Wallingford, CT 06492

You can also return the completed form by [sending us a secure email](#).

24/7 Nurse Helpline

If your provider or their answering service isn't available, HUSKY Health gives you a way to contact a registered nurse 24 hours a day, 7 days a week through our 24/7 Nurse Helpline. Skilled nurses are here for you if you're sick, hurt, or in need of healthcare advice. They can help you decide what to do.

Our 24/7 Nurse Helpline will:

- Answer your healthcare questions quickly and correctly.
- Tell you where you can go for the care you need.
- Teach you about self-care.
- Help you find what services you can use.

Simply call [1.800.859.9889](tel:1.800.859.9889) and follow the prompts for the 24/7 Nurse Helpline. **If you're experiencing a medical emergency, please call 911.**

Translation Services

If you call Member Engagement Services, our staff can call an interpreter line when needed. This lets us talk to you in the language you prefer.

If you need our written materials translated, we can help. All our materials are available in English and Spanish. If you prefer a different language, any of our written materials can be translated into that language for you.

If you have trouble seeing, our written materials can be printed with larger words. They can also be transcribed into braille.

HOW TO ACCESS YOUR HEALTHCARE SERVICES

HUSKY Health Providers

All healthcare you receive through the HUSKY Health program must be from providers who participate in HUSKY Health. You can use the HUSKY Health Provider Directory on our website to find providers who are part of the program. To access the directory, visit huskyhealthct.org and click "**Find a Doctor.**" You can search for providers in your area. Please call Member Engagement Services at [1.800.859.9889](tel:1.800.859.9889) for help with finding providers.

If any of your providers are not in the Provider Directory, you can call them to find out if they participate in the HUSKY Health program. If they don't, let us know. We'll contact them to see if they're willing to join the network.

We can help them enroll so they can treat HUSKY Health members. If your providers don't want to participate in the HUSKY Health program, we can help you find new providers. We can even help you make an appointment.

You may be responsible for the cost of office visits or other services if you receive care from a non-HUSKY Health provider.

Choosing Your Primary Care Provider

It's important that you have a Primary Care Provider (PCP). Your PCP is the main source of your healthcare. You should have a good relationship with your PCP. They'll know your health history and can follow your healthcare needs as they change over time. You should see your PCP for regular checkups and when you feel sick. It's very important to have a PCP if you have serious healthcare needs or several health problems.

Member Engagement Services can help you choose a PCP or change the one you currently have. You can change your PCP at any time. We can also help you make an appointment with your PCP. Call us at [1.800.859.9889](tel:1.800.859.9889), Monday through Friday from 8:00 a.m. to 6:00 p.m. or [send us a secure email](#).

If you don't choose a PCP, we'll assume that the provider you saw for routine healthcare in the past is your PCP. To see who your PCP is, visit our secure website by going to huskyhealthct.org and clicking "**Member Login**" at the top of the page. If you change your PCP, you don't need to get a new blue and white HUSKY Health member ID card. The member ID card you have right now will work for any PCP that you see.

There are different types of medical providers who can be your PCP. They are:

PCP Type	Description	Specialty on the "Find a Doctor" Web Page
Family Practitioner	A medical doctor who cares for all family members.	Family Practitioner
General Pediatrician	A medical doctor who cares for children generally up to age 18 or 21.	General Pediatrician, Pediatric Adolescent Medicine, Pediatric Nurse Practitioner
General Practitioner/Internal Medicine	A medical doctor who offers preventive care and treats a wide range of health problems.	General Practitioner, Internal Medicine, Preventive Medicine
Nurse Practitioner	A registered nurse who has extra training.	Adult Health Nurse Practitioner, Pediatric Nurse Practitioner, Family Nurse Practitioner, Nurse Practitioner (Other), Primary Care Nurse Practitioner, Advanced Practice Registered Nurse (APRN)
Physician Assistant (PA)	A healthcare professional trained to take care of your medical needs. They're supervised by a doctor.	Physician Assistant, Primary Care Physician Assistant, Medical Physician Assistant
Person-Centered Medical Home (PCMH)	A care team who works together and is led by a PCP. They make sure you get care from all team members when you need it.	PCMH practices can be found by clicking the " PCMH Practice Listing " link on the " Find A Doctor " page.

To learn more about the types of providers who can be your PCP and the process of choosing one, please visit our "**Choose a Primary Care Provider & Have Annual Well-Visits**" web page [here](#), or go to huskyhealthct.org, click "**Health and Wellness**," then "**PCP & Well-Visits**." You'll also find other helpful resources such as sample questions to ask your provider and Care Checklists to bring to your appointments.

Person-Centered Medical Home (PCMH)

Many HUSKY Health PCPs are part of the state's Person-Centered Medical Home (PCMH) program. In a PCMH practice, a team of providers, nurses, and office staff work closely with you to help improve your overall health and wellness. They may coordinate your care with additional team members including social workers, behavioral health specialists, dietitians, occupational and physical therapists, and specialty providers.

What is a PCMH?

- A PCMH practice has a PCP-led clinical team who works closely with you to help with every part of your healthcare. You're a major player on that team.
- The PCMH team works with you to stay healthy by treating illnesses and keeping up with your preventive care. Preventive care includes things like immunizations and cancer screenings. It depends on your specific healthcare needs.
- PCMH practices can often see you the same day you call. They often have evening and weekend hours. Many can speak with you virtually on their website (telehealth) and by phone. You don't have to go to the Emergency Department for care that's not an emergency.
- The team also keeps in contact with your other providers to follow your care.

Specialists

You should tell your PCP if you visit a specialist. An example of a specialist could be an ear, nose, and throat provider. Other examples are a surgeon, allergist, or pulmonary (lung) provider. This will help your PCP keep track of your care. There are also times when a specialist will only see a new patient after they're seen by a PCP. If you need a specialist, your PCP or Member Engagement Services can help you. Call us at [1.800.859.9889](tel:1.800.859.9889). You can also use the HUSKY Health Provider Directory to find one.

Other Providers

In addition to PCPs and specialists, all other providers you see must participate in the HUSKY Health program. This includes pharmacies, hospitals, urgent care clinics and walk-in medical centers, medical equipment companies, and home healthcare agencies. **You may be responsible for the cost of office visits or other services if you receive care from a non-HUSKY Health provider.** If you get care from a provider who doesn't participate in HUSKY Health, please let us know. We can contact them to see if they're willing to join the HUSKY Health provider network.

Second Opinions

You have the right to get a second opinion on any medical diagnosis. There are many reasons you might want to ask for a second opinion. Some reasons are:

- You think there could be better treatments.
- You're not getting better even though you've followed your provider's orders.
- The treatment is very serious, like surgery or chemotherapy.
- The treatment is long-term or lifelong.
- The treatment has serious medical risks.

- You don't completely trust your provider's advice.

Getting a second opinion might give you more details about your diagnosis. It could help you feel that you're making the best decision possible when it comes to your treatment. If you need help finding a provider for a second opinion, call us at [1.800.859.9889](tel:1.800.859.9889).

Canceling Appointments

If you schedule an appointment with a provider that you can't keep, please call them to cancel or reschedule it. When you cancel an appointment, your provider can make room to see another patient who needs care. If you miss a doctor's appointment without canceling it, the provider might not continue to make appointments for you. Be sure to always cancel any appointment you can't keep to avoid a potential gap in your care.

HUSKY B BENEFITS

As a HUSKY B member, there are many benefits and services available to you. They must be medically necessary for you to receive them. "Medically necessary" means medical, dental, and behavioral health services needed to:

- Keep you as healthy as possible.
- Improve your health.
- Find or treat an illness.
- Help you heal after getting hurt.
- Help you function on your own.

Medically necessary services must meet standards for quality medical care. They must:

- Be the right type, level, amount, and length for you.
- Be given in the right healthcare setting.
- Not be provided only to make things easier for you or your provider.
- Cost no more than a different service that would get the same results.
- Be based on your medical condition.

Some covered goods/services, like physical therapy, might need prior authorization (pre-approval). This means that your provider must first get prior authorization from the HUSKY Health program before you can get the service. Some services, like preventive care, don't need prior authorization. If a service needs prior authorization, you don't have to contact the HUSKY Health program. Your provider will do that for you.

HUSKY Health will only pay for services to a provider who participates in the HUSKY Health program. **You may be responsible for the cost of office visits or other services if you receive care from a non-HUSKY Health provider.** If you need help finding a participating provider, please call Member Engagement Services at [1.800.859.9889](tel:1.800.859.9889), Monday through Friday, 8:00 a.m. to 6:00 p.m.

The information below is a guide to understanding your benefits. It's a general list and doesn't name every service that's covered or all the rules for each service. If you have any questions about whether or not a service is covered, or if you'd like more information about your benefits, go to huskyhealthct.org, click "**Member Benefits**," then "**Medical**." There, you'll find the HUSKY Health benefit grids. You can also call Member Engagement Services at [1.800.859.9889](tel:1.800.859.9889) with any benefits questions.

Some of these services will need a co-pay. The co-pay information is listed below for each service.

Cost Share

Families with members on HUSKY B shouldn't pay more than 5% of their gross income on premiums, co-pays, or co-insurance during their eligibility year. Once you reach the 5% maximum, we'll send you a new Member ID card that will show there's no cost share for the services covered by HUSKY Health. This card should be used for the remainder of the eligibility year. After you receive your new card, your premium bills will show a balance of zero. Once your next eligibility year starts, your bill will have the premium amount due. You'll need to pay co-pays and co-insurance again, until you reach the 5% maximum.

HUSKY B members who are proven members of a federally recognized American Indian Tribe or are Alaskan Natives, don't have to pay premiums, co-insurance, or co-pays. If you're a member of a federally recognized American Indian Tribe or Alaskan Native, please share those details with the HUSKY Health program. HUSKY Health will give you a new Member ID card. We'll also give you a letter that tells your providers and pharmacies that you don't have to pay premiums, co-insurance, or co-pays.

Preventive/Routine Care

Preventive care visits are for healthcare needs such as immunizations (shots), well-visits, and health screens. The goal of preventive care is to keep you healthy. It's recommended that adults go to their provider for a routine care visit (wellness checkup) once a year. The preventive/routine care schedule for children is based on the child's age.

If you have a sore throat, flu, cold, headache, stomach virus, or other sickness, you should see your provider for a routine sick visit. They are there to help you with these types of needs. Don't wait to make an appointment if you feel sick.

Urgent Care Clinics and Walk-In Medical Centers

Urgent medical problems are conditions or symptoms that need evaluation and/or treatment within 24 hours. These aren't emergencies. Examples include fever, a bad cold, and symptoms of an ear infection or persistent cough. Urgent care clinics and walk-in medical centers are very helpful when you need immediate care and your PCP can't see you right away. You can find a list of urgent care clinics and walk-in medical centers on our website. Visit huskyhealthct.org, click "**Find a Doctor**," then "**View a list of Urgent Care Clinics & Walk-In Medical Centers**." You can also call Member Engagement Services at [1.800.859.9889](tel:1.800.859.9889).

Please also see *Emergency Care & Urgent Care Clinic/Walk-In Medical Center Services* under the **List of Covered Services** section of this handbook. Co-pays may apply for urgent care.

Emergency Care

Emergency care is medical care that's needed right away. Go to the Emergency Room (ER) or call 911 if you have an emergency. Examples include:

- Bleeding that can't be stopped
- Chest pain
- Severe burns
- Seizures or convulsions
- Other health problems that could cause serious injury or death

If you go to the ER, bring your blue and white HUSKY Health member ID card. You don't need an authorization for emergency care.

You should always follow up with your PCP after you go to the ER. It's recommended that you call your PCP right after your ER visit to schedule a follow-up visit. This will help them check on your recovery and see if there's any change in your condition or medicines. Remember to bring your medication list and the instructions you were given in the ER. If you need help making an appointment, please call Member Engagement Services at [1.800.859.9889](tel:1.800.859.9889).

You can also call the 24/7 Nurse Helpline at [1.800.859.9889](tel:1.800.859.9889) to talk to a nurse about your symptoms. They can help you decide if you should see your PCP, go to an Urgent Care Clinic/Walk-In Medical Center, or go to the ER. For additional help deciding where to get care when you're sick or injured, visit huskyhealthct.org/members/where_to_get-care.html.

Please also see *Emergency Care & Urgent Care Clinic/Walk-In Medical Center Services* under the **List of Covered Services** section of this handbook.

LIST OF COVERED SERVICES

Important Things to Remember

All services must be medically necessary. This means the services are needed to diagnose or treat an illness, injury, or condition, or symptoms of an illness, injury, or condition.

All services must be obtained from providers who participate in the HUSKY Health program. If the provider you see doesn't participate in the HUSKY Health program, you may be responsible for the bill. Some services may require prior authorization (approval requested by the provider before performing the service). If a service requires prior authorization, the provider will reach out to HUSKY Health for you. It's the provider's responsibility to obtain prior authorization.

Ambulatory Surgery

An ambulatory surgery center is a healthcare facility that provides surgery and certain diagnostic services, like a colonoscopy. It's an outpatient setting, so patients don't spend the night. An ambulatory surgery center isn't a hospital. Ambulatory surgery centers don't provide emergency services.

There's no co-pay. Services are covered at 100%.

Ambulance

Emergency ground ambulance (road) and air ambulance (flight) is covered for emergencies only. Call 911 during an emergency for a ground ambulance. Transportation by ambulance is also covered when a member is moved from one inpatient facility to another inpatient facility.

There's no co-pay. Services are covered at 100%.

Behavioral Health Services

The Connecticut Behavioral Health Partnership/Carelon Behavioral Health (CT BHP) can help you find the mental health and/or substance use disorder services you need.

How to reach CT BHP:

- Call CT BHP Member Support at [1.877.552.8247](tel:1.877.552.8247), Monday through Friday, from 9:00 a.m. to 7:00 p.m. If you're deaf or hard of hearing, call [711](tel:711).
- Visit their website at ctbhp.com.

To find a behavioral health provider, please visit ctbhp.com and click on **"Find a Provider."**

Cardiac Care and Cardiac Rehabilitation

Cardiac services are services related to the heart. Cardiac care (including diagnostic screening and testing) is covered when medically necessary and provided by a cardiologist or PCP. A Cardiac Rehabilitation program is covered when medically necessary and provided by a hospital.

Chiropractor

A chiropractor treats musculoskeletal issues with a focus on the spine/back. Services provided by a chiropractor are covered. Services must be performed in an independent office setting, at a Federally Qualified Health Center (FQHC), or an outpatient hospital. Prior authorization is required.

Dental Services

Your dental care is covered under the HUSKY Health program by the Connecticut Dental Health Partnership (CTDHP).

How to reach CTDHP:

- Call CTDHP's Member Services team at [1.855.283.3682](tel:1.855.283.3682) (1.855.CTDental), Monday through Friday from 8:00 a.m. to 5:00 p.m. If you're deaf or hard of hearing, call [711](tel:711).
- Visit their website at ctdhp.org.

To find a dental provider, please visit ctdhp.org, click on **"Members,"** then **"Find a Dentist."**

Diabetic Supplies

Diabetic supplies are items such as a blood glucose monitor, alcohol wipes, test strips, and lancets. They're covered for members from birth to age 20 under the pharmacy or Durable Medical Equipment (DME) benefit. Diabetic shoes aren't covered.

For members who are 21 or older, diabetic supplies are covered under the DME benefit, with specific items covered under the pharmacy benefit. Diabetic shoes are covered for members who are 21 and older. Up to two pairs per year without prior authorization are covered.

Insulin is covered for **all ages** under the pharmacy benefit.

Dialysis

Dialysis treatment helps your body remove extra fluid and waste products from your blood when your kidneys can't.

There's no co-pay. Services are covered at 100%.

Durable Medical Equipment (DME)

Durable Medical Equipment (DME) is:

- Used many times (non-disposable).
- Used for medical purposes.
- Useful to people who are sick, hurt, or disabled.

Examples of covered DME:

- Bathroom equipment such as commodes and safety equipment
- Breast pumps
- Hospital beds and accessories
- Inhalation therapy equipment such as nebulizers
- Insulin pumps and glucometers
- Devices like Continuous Positive Airway Pressure (CPAP) machines, apnea monitors, and ventilators

- Walking aids such as walkers, canes, and crutches
- Wheelchairs and accessories

You'll need a prescription from your provider for DME. Prior authorization is also needed for many DME items. If prior authorization is needed, your DME provider will contact the HUSKY Health program.

Other items may be approved for coverage based on each member's case. Your DME provider can call Member Engagement Services at [1.800.859.9889](tel:1.800.859.9889) to find out which supplies are covered.

There's no co-pay. Services are covered at 100%.

Emergency Care & Urgent Care Clinic/Walk-In Medical Center Services

Emergency care is medical care that's needed right away. Go to a hospital Emergency Room (ER) or call 911 if you have an emergency.

Urgent care clinics and walk-in medical centers can provide care for non-threatening medical problems that can't wait. To find an Urgent Care Clinic/Walk-In Medical Center near you, please visit huskyhealthct.org, click **"Find a Doctor,"** then **"View a List of Urgent Care & Walk-In Medical Centers."**

If you go to the ER or an Urgent Care Clinic/Walk-In Medical Center, bring your blue and white HUSKY Health member ID card. You don't need prior authorization for emergency care or urgent care. You should always call your PCP after you go to the ER or an Urgent Care Clinic/Walk-In Medical Center to schedule a follow-up visit. This helps them check on your recovery and see if there's any change in your condition or medicines. Remember to bring your medication list and the instructions you got in the ER or Urgent Care Clinic/Walk-In Medical Center. If you need help making an appointment, please call Member Engagement Services at [1.800.859.9889](tel:1.800.859.9889).

Emergency Care - Outside of Connecticut and the United States (U.S.)

Emergency care is covered when you travel outside Connecticut but still in the United States, including Puerto Rico and other U.S. territories (Virgin Islands, Guam, Northern Mariana Islands, and American Samoa). **The care must be medically necessary and a true emergency.** Also, the hospital and provider need to agree to participate in the HUSKY Health program to be paid. If the provider doesn't agree to participate, or if the visit is determined not to be a true emergency, you may receive a bill for the services. Out-of-state emergency care at the ER doesn't require prior authorization. It is, however, reviewed retrospectively for medical necessity. If you get a bill, please contact Member Engagement Services as soon as you can. If out-of-state emergency care is needed, you should call your PCP within 24 hours of the ER visit. If you're traveling outside of the United States, Puerto Rico, and other U.S. territories, HUSKY Health doesn't cover any care or services, even if it's an emergency. You might want to purchase travel health insurance.

Having Trouble Deciding Between an Urgent Care Clinic/Walk-In Medical Center or the ER?

When should you go to an Urgent Care Clinic/Walk-In Medical Center?

- Mild/Moderate COVID-19, cold, or flu-like symptoms
- Ear pain or eye irritations
- Mild rashes, minor burns, or skin infections
- New onset slurred speech, facial drooping, weakness
- Small cuts that might require stitches
- Sprains, strains, and minor sports injuries

When should you go to the ER?

- Chest pain and shortness of breath
- Broken bones and dislocated joints
- Head or eye injuries
- Bleeding from a large, open wound
- Suicidal thoughts (or call/text 988 for Suicide & Crisis Lifeline)
- Changes in mental state
- Fainting or loss of consciousness
- Severe pain

If you're still unsure whether you should go to an Urgent Care Clinic/Walk-In Medical Center or the ER, we can help. HUSKY Health has a 24/7 Nurse Helpline to call for advice. Call [1.800.859.9889](tel:1.800.859.9889) and follow the prompts to speak to a nurse. If you're experiencing a medical emergency, please call 911.

Eye/Vision Care

Vision care is a covered service that you can receive from ophthalmologists, optometrists, and opticians. Please keep in mind:

- Eye exams have a \$15 co-pay.
- Limit of one pair of eyeglasses every 24 months. No exceptions made for lost, stolen, or broken eyeglasses.
- Some limits apply on types of frames and lenses.
- Contact lenses are only covered for certain diagnoses.

Family Planning

Family planning services include those that diagnose, treat, and counsel individuals of child-bearing age. Covered family planning services include:

- Reproductive health exams.
- Patient counseling and education related to family planning.
- Abortion.
- Lab tests to detect the presence of conditions affecting reproductive health.
- Screening, testing, treatment, and pre- and post-test counseling for sexually transmitted diseases and HIV.
- Oral contraceptives (birth control pills).
 - Co-pays will apply at the pharmacy (\$5 for generics and \$10 for brand names).
 - No co-pay if provided in a community health center or family planning clinic.

- Contraceptive devices, insertion of IUD, internal implantable time-release devices and their insertion, and time-release contraceptive injections.
 - No co-pays apply.

Hysterectomies are only covered for medical reasons; they're not covered for family planning. Treatment for infertility, including reversal sterilization, in-vitro fertilization, artificial insemination, cryopreservation, and fertility drugs are not covered. Sterilization is not a covered benefit.

There's no co-pay for office visits. Services are covered at 100%.

Gynecology

Gynecology services are available for preventive care, such as certain cancer screenings and physical exams. They're also for diagnosing and treating issues with female reproductive organs.

There's no co-pay for preventive visits or visits related to family planning.

Hearing Aids & Exams (Audiologists)

Hearing aids and hearing exams are both covered. A prescription from a provider is needed for hearing aids. A medical provider must order a hearing exam.

There's a \$15 co-pay for hearing exams. There's a limit of one pair of hearing aids every two years.

Home Health Care Services

Home health agencies deliver in-home services for those who need them. These services include:

- Skilled nursing visits (less than two hours per day).
 - Skilled nursing visits that are more than two hours per day ("extended nursing visits") aren't covered.
- Home health aide assistance, only with the following daily activities: dressing, bathing, oral hygiene, eating, transferring (help with walking or changing a position, like going from sitting to lying down), and toileting.
- Maternity visits for individuals with high-risk pregnancies.
- Short-term rehabilitation including physical therapy, speech therapy, and occupational therapy.

There's no co-pay. Services are covered at 100%. Prior authorization is needed for some home health services.

Cleaning, companion, or homemaker services aren't covered by the HUSKY Health program.

Hospice

Hospice care is aimed at comfort care and relieving symptoms of terminal illness. It usually doesn't include treatment aimed at a cure.

- Hospice services are available to members who are diagnosed with a terminal illness, with a life expectancy of six months or less.
- For members 20 years old or younger, treatment designed to cure may be received at the same time as hospice services.

Prior authorization is required for inpatient hospice services that last longer than five days.

There's no co-pay. Services are covered at 100%.

Hospital Care

Both inpatient and outpatient hospital services are covered.

Inpatient hospital services have no co-pay. They're covered at 100%. A hospital inpatient stay needs prior authorization unless it's for maternity care and delivery.

Examples of outpatient hospital services:

- Cardiac rehabilitation
 - There's no co-pay. Services are covered at 100%.
- Emergency care
 - There's no co-pay. Services are covered at 100%.
- Laboratory work
 - There's no co-pay. Services are covered at 100%.
- Medical checkups
 - Preventive visits: there's no co-pay. Services are covered at 100%.
 - Sick visits: \$10 co-pay.
- Radiology services
 - There's no co-pay. Services are covered at 100%.
- Urgent Care Clinic/Walk-In Medical Center visits
 - There's a \$10 co-pay for Urgent Care Clinic/Walk-In Medical Center visits.

You should always call your PCP after leaving the hospital to schedule a follow-up office visit. This helps them check on your recovery. It also lets them monitor your response to any treatments and note any change in your condition or medicines. Remember to bring your medication list and the instructions you got from the hospital. If you need help finding a PCP, or making an appointment with one, please call Member Engagement Services at [1.800.859.9889](tel:1.800.859.9889).

Laboratory Work

Laboratory services and diagnostic tests help your provider diagnose or rule out certain illnesses or conditions. These tests can be done in a hospital lab, provider's office, or an independent lab. Some testing, including genetic testing, needs prior authorization.

There's no co-pay. Services are covered at 100%.

Maternity

Maternity visits help make sure you have a healthy pregnancy and that you're healthy after your baby's birth. Prenatal (before birth) and postpartum (after birth) visits are covered. Maternity inpatient stays are also covered.

There's no co-pay. Services are covered at 100%.

- Hospital births: No limitations.
- Home births: Covered when performed by a certified nurse midwife who's enrolled in HUSKY Health.
- Breast pumps: Covered in the third trimester. A prescription in the pregnant individual's name is required.
- Childbirth/Lamaze classes: Not covered.
- Doulas: Up to four visits covered, along with the doula being at the birth.

Medical Surgical Supplies

Medical surgical supplies are:

- Disposable – they can only be used once.
- Used to treat and monitor a medical condition.
- Used after surgery.
- Useful to people who are sick, hurt, or disabled.

Examples of covered medical surgical supplies:

- Catheters
- Diabetes-related supplies
- Dressings

You'll need a prescription from your provider for medical surgical supplies. Some items have a limit to the amount that's covered each month. Prior authorization is needed for many items. If prior authorization is needed, your provider will contact the HUSKY Health program.

There's no co-pay. Services are covered at 100%.

Naturopaths

Naturopathic medicine treats illness using natural treatments such as herbs, diet, and lifestyle changes. Coverage is limited to some specific services. Prior authorization is required for more than five visits per month, per provider.

There's a \$10 co-pay for visits to a naturopath.

Nutritional Counseling

Nutritional counseling is covered when it's received:

- As part of an office visit in a clinic or at a community health center.
- From an independently enrolled physician, APRN, or physician's assistant.
- From a certified dietitian-nutritionist.

Nutritional counseling with an independent certified dietitian-nutritionist must be ordered by your provider. Coverage is limited to three hours per calendar year per HUSKY Health member.

There's no co-pay. Services are covered at 100%.

Orthotic & Prosthetic Devices

Orthotic and prosthetic devices are corrective or supportive tools made to:

- Replace a missing body part.
- Prevent or correct physical deformity or malfunctions.
- Support a weak or deformed body part.

An orthotic or prosthetic device is covered when a provider writes a prescription for it. Prior authorization is needed and age restrictions apply for some items.

There's no co-pay. Services are covered at 100%.

Orthopedic shoes aren't covered. Foot orthotics coverage is limited to foot rotation bars and hallux valgus splints.

Out-of-State Coverage – Care Outside of Connecticut and the United States (U.S.)

Non-emergency services delivered outside of Connecticut, and within the United States, Puerto Rico, and other U.S. territories, must be authorized before you can receive the services. The provider or facility must participate in the HUSKY Health program to be paid for services. If you obtain services outside of Connecticut from a provider who doesn't participate in HUSKY Health, you may be responsible for the bill.

For information about emergency care coverage outside of Connecticut and the United States, please see section: [Emergency Care - Outside of Connecticut and the United States \(U.S.\)](#).

Oxygen

Oxygen therapy that's prescribed by a provider is a covered service unless it's prescribed "as needed."

There's no co-pay. Services are covered at 100%.

Parenteral/Enteral Supplies

Parenteral/Enteral supplies are items used to deliver liquid nutrition into a vein, the stomach, or intestine.

Examples of parenteral/enteral supplies:

- Feeding tubes
- Infusion pumps

Prior authorization may be required. There's no co-pay. Services are covered at 100%.

Pharmacy Services

Pharmacy services are covered under the HUSKY Health program. Most medicines that need a prescription are covered as long as they're a part of the preferred drug list. If you have questions about your HUSKY Health Pharmacy Benefit, you can:

- Talk to your pharmacist.
- Call the Pharmacy Benefit Customer Call Center at 1.866.409.8430, Monday through Friday, from 8:00 a.m. to 5:00 p.m.

The Pharmacy Benefit Customer Call Center can:

- Find a drugstore near you that participates in the HUSKY Health program.
- See if a certain drug or medical item is covered.
- Work with your pharmacist to help you get your medicine.
- Talk about any questions or concerns you may have.

Your provider will always prescribe a generic medicine. To prescribe a brand name, your provider must ask for prior authorization from the Connecticut Pharmacy Assistance program. Some medicines are considered "non-preferred" medicines. "Non-preferred" medicines need prior authorization before they can be given to you.

Your medicines are filled by in-state pharmacies that participate in the HUSKY Health program. If you're going to travel out of state, you can ask your pharmacy for an early refill of your medicine. By having your prescriptions refilled early, you won't run out while you're away. Early refills due to travel are available **once every six months**.

To find out if your medicine can be refilled early, call the Pharmacy Benefit Customer Call Center at [1.866.409.8430](tel:1.866.409.8430), Monday through Friday, from 8:00 a.m. to 5:00 p.m.

Some of your prescriptions may require prior authorization. If you bring a prescription to your pharmacy that needs prior authorization, you won't be able to get a full supply of your prescription. However, the pharmacy may be able to fill a one-time, 14-day temporary supply of the prescription. It's important that your provider gives the pharmacy the information they need to fill the entire prescription. Your provider must also authorize any refills you might need.

You must show your HUSKY Health Member ID card each time you pick up a prescription from the pharmacy.

Services	HUSKY B Pays	Member Pays
Medication	Balance after \$5 co-pay on generics and prescribed Over-the-Counter (OTC)	\$5 co-pay on generics and prescribed OTC
	Balance after \$10 co-pay on brand-name and prescribed OTC	\$10 co-pay on brand-name and prescribed OTC
Oral Contraceptives	Balance after \$5 co-pay on generics	\$5 co-pay on generics
	Balance after \$10 co-pay on brand-name	\$10 co-pay on brand-name

Types of drugs your pharmacy benefit doesn't cover:

- Drugs to treat sexual problems
- Drugs to treat cosmetic conditions
- Drugs to treat obesity
- Experimental drugs
- Fertility drugs

Note: Pharmacy delivery fees aren't covered by the HUSKY Health program. If you request delivery from your pharmacy, you'll be responsible for the delivery cost.

“Over-the-Counter” (OTC) Medications

Some “Over-the-Counter” (OTC) medicines may be covered when your doctor writes a prescription for them. These include:

- Nutritional supplements for members who need tube feeding or can't swallow food in any other form.
- OTC nicotine replacements, like gum, patches, or lozenges.
- OTC diabetic supplies you can get through your pharmacy benefit, like insulin syringes.

To learn more about your pharmacy benefits, please visit: portal.ct.gov/HUSKY/Pharmacy.

Physician Services

You may receive services from a physician and other health professionals. These include APRNs, certified nurse midwives, and PAs who participate in the HUSKY Health program. Services could be provided in a clinic, private practice, or hospital setting. Covered services include:

- Allergy testing
 - \$10 co-pay for allergy office visit.
- Allergy treatment
 - There's no co-pay. Services are covered at 100%.
- Family planning services
 - There's no co-pay for office visits. Services are covered at 100%.
 - Co-pays for contraceptives may apply (please see *Pharmacy* section).

- Gynecological care
 - There's no co-pay for preventive visits or visits related to family planning.
- Obesity treatments
 - Obesity treatments are only covered when obesity is caused by an illness or is making an illness worse. The only types of treatment covered for obesity are surgical treatments.
 - Obesity treatments always require prior authorization.
 - There's no co-pay for the surgery. Services are covered at 100%.
 - Related office visits may have co-pays.
- Obstetrical care, including prenatal visits, labor/delivery, and newborn care
 - There's no co-pay. Services are covered at 100%.
- Office visits
 - \$10 co-pay applies for non-preventive care office visits.
- Preventive visits
 - There's no co-pay. Services are covered at 100%.
- Reconstructive surgery
 - Reconstructive surgery is covered only to take care of a medical issue. It's not covered for cosmetic reasons. There's no co-pay. Services are covered at 100%.
- Second opinions
 - \$10 co-pay (Second opinions from eye doctors and audiologists have \$15 co-pays.)
- Sick visits
 - \$10 co-pay applies.
- Specialist visits
 - \$10 co-pay (Eye doctors and audiologists have \$15 co-pays.)

Podiatry

Podiatry deals with the medical care of the foot.

- Routine foot care includes services such as toenail trimming and treatment of corns and calluses. Your provider must say that it's medically necessary.
- Routine foot care isn't covered unless you have a certain condition, such as diabetes.
- Simple foot hygiene, like washing, drying, and moisturizing, isn't covered.

There's a \$10 co-pay to see a podiatrist.

Radiology Services

Radiology services include things like X-rays, MRIs, CAT scans, PET scans, and ultrasounds. Some radiology services require prior authorization.

There's no co-pay. Services are covered at 100%.

Rehabilitation Therapy

Rehabilitation therapy services* can be provided in an independent clinic, a hospital clinic, or an office setting (depending on age, see below). Services are performed by a licensed therapist for people who

are disabled or hurt. Some services need prior authorization after a certain number of visits. Covered services include:

- Physical therapy
- Speech therapy
- Occupational therapy
- Respiratory therapy
- Audiology

Rehabilitation therapy services provided in an **office setting** are covered only for members up to age 20.

Members 21 and older can get these services through a **clinic, home health agency, or hospital outpatient setting**.

There's no co-pay. Services are covered at 100%.

*For rehabilitation services related to mental health/substance use disorder, please contact CT BHP at 1.877.552.8247, Monday through Friday, from 9:00 a.m. to 7:00 p.m.

Smoking Cessation

Individual and group smoking and tobacco cessation counseling is covered. It can help you stop smoking. The counseling must be in a physician's office or outpatient clinic setting.*

Drugs and OTC nicotine replacement medications are covered under your Pharmacy Benefit. These include gum, patches, or lozenges. To learn more, call the Pharmacy Benefit Customer Center at 1.866.409.8430, Monday through Friday, from 8:00 a.m. to 5:00 p.m.

*For smoking cessation counseling provided by a behavioral health clinician or in a mental health clinic, please contact CT BHP at 1.877.552.8247, Monday through Friday, 9:00 a.m. to 7:00 p.m.

SERVICES THAT ARE NOT COVERED*

Not all services are covered under your HUSKY Health benefits. Examples of non-covered services include:

- Acupuncture/biofeedback/hypnosis
- Ambulatory blood pressure monitoring
- Care outside the United States, except for Puerto Rico and other U.S. territories
- Cosmetic or plastic surgery
- Educational services
- Experimental treatments
- Infertility treatment
- Long-term skilled nursing care
- Non-emergency medical transportation
- Out-of-network services
- Physical exams needed for employment, insurance, school, summer camp, etc.

- Routine foot care
- Services outside of Connecticut, except for emergency services or services from HUSKY Health border providers (providers in states that border Connecticut)
- Services that are not medically necessary
- Sterilization and sterilization reversal
- Weight reduction programs
- Wigs

**Note: this is not a complete list of all non-covered services.*

CARE MANAGEMENT

Care Management services are available to members with chronic health conditions or complex health-related needs, especially those causing frequent hospital visits. Our Care Management team includes nurses, pharmacists, social workers, and dietitians. They can work with you over the phone, in person, or through a video call. They're here to answer your questions about your health or medical condition. They'll discuss ways to address difficulties you may be having and help you meet your health goals. We understand that navigating challenging health concerns can be hard. We want to help you get the care you need.

Care Management programs focus on care related to:

- Chronic health conditions, such as asthma, diabetes, or sickle cell disease.
- Complex care coordination for members who:
 - Need an organ transplant.
 - Are high-risk pregnancy/post-partum.
 - Have newborns following a stay in the Neonatal Intensive Care Unit (NICU).
 - Had a recent trip to the ER or hospital and need help finding care.

If you're enrolled in Care Management, our team can help you:

- Ensure you're getting the right care, in the right place, at the right time.
- Develop a care plan that fits your culture, beliefs, and lifestyle.
- Learn more about your health condition and create an action plan to manage it.
- Select a PCP or schedule appointments with specialists.
- Prepare for your healthcare appointments and advocate for yourself during visits.
- Coordinate care among providers and other health services.
- Review your medications and answer any questions you may have.
- Learn more about healthy eating choices to best manage your health condition(s).
- Understand your HUSKY Health benefits.
- Connect with a community health worker to learn about community resources.

To participate in the Care Management program:

- You may get a call from us asking if you'd like to participate.
- Your provider may call and refer you to Care Management.
- You can call us at [1.800.859.9889](tel:1.800.859.9889), extension 2023, and ask to participate.

Care Coordination

Our Care Management team of nurses helps members with complex or challenging health-related needs. This includes working closely with the family, providers, and other community resources to meet your needs. They can assist with navigating benefits, provider access, and treatment instructions. They can also help coordinate healthcare services.

Children and Youth with Special Health Care Needs

Children and Youth with Special Health Care Needs (CYSHCN) have (or are at increased risk for) a chronic (long-term):

- Physical condition
- Developmental condition
- Behavioral condition
- Emotional condition

They need more health and other related services than children and youth usually need. CYSHCN might be eligible for (and benefit from), Care Management services.

SPECIALIZED CARE MANAGEMENT PROGRAMS

Chronic Condition Management

Our Care Management nurses help members who have chronic (long-term) health conditions, especially those causing frequent hospital visits. We can help you:

- Find a PCP and any other specialty providers needed.
- Learn more about your health condition(s).
- Learn about the importance of having an “Action Plan,” including:
 - When/how to follow it.
 - What to do if symptoms get worse.
- Answer any questions about different medications and your reasons for taking them.
- Connect to our pharmacist to discuss any concerns you have about your medications.
- Coordinate healthcare services.

You'll get person-centered coaching on your condition, and support with any challenges you may have managing your care.

High-Risk Perinatal Program

The Perinatal program helps members start pregnancy care with an obstetrical (OB) care provider. Our nurses also work with those who experience a high-risk pregnancy. They help you participate in care recommended by your provider. They can make sure you have access to the services and supplies you need.

They also provide pregnancy-related education. Topics include breastfeeding and important warning signs during and after pregnancy. They help you know when to seek medical care.

Neonatal Intensive Care Unit (NICU) Program

The Neonatal Intensive Care Unit (NICU) program is for babies who were born early. It's also for babies who need special care after birth. Our nurses work with your family, hospital staff, and providers to get you the services your baby may need.

When You've Been to the Hospital

If you've recently been to the Emergency Room (ER) or hospital, a HUSKY Health nurse might call you. This will be to review your discharge plan and medications and answer any questions you may have. The nurse can also help make sure you have follow-up appointments scheduled. If you need a PCP or specialist, our Care Management Team can help you find one.

COMMUNITY RESOURCES

Community Engagement

HUSKY Health's Community Engagement Team is here to help you navigate the healthcare system and provide community support services.

Community Health Worker Ambassador Program

Our certified Community Health Workers (CHWs) help members with addressing basic needs and using the healthcare system. They listen to your needs and concerns. They can help find the best resources for the difficulties you're facing. Many of our CHWs live and work in your neighborhoods. They also have diverse cultural and linguistic backgrounds.

CHWs are trusted ambassadors of the HUSKY Health program. They connect individuals and families to essential care and resources. Through personalized outreach and community engagement, they help reduce barriers, improve access, and support healthier outcomes for communities we serve.

CHWs can help you find resources for:

- Childcare
- Clothing
- Diapers
- Education
- Employment
- Food
- Housing
- Parenting support
- State benefits
- Utility assistance

To talk to one of our CHWs, call [1.800.859.9889](tel:1.800.859.9889), extension 4326, Monday through Friday, from 8:00 a.m. to 5:00 p.m.

HUSKY Health HUBs

A HUB is a central location for members who need **Help Understanding their Benefits**. At a HUB, you'll be greeted by a CHW who can:

- Answer questions about your HUSKY Health benefits.
- Help you find a PCP.
- Connect you to community resources to help with basic needs like:
 - Food
 - Education
 - Employment

To find a HUB near you, visit our Community Engagement calendar at huskyhealthct.org. Click on **"Health & Wellness,"** then **"Health Events."**

Follow us on Facebook and X: @HUSKYHealthCT for HUB updates.

Nutrition Education Programs

HUSKY Health's nutritional programs are fun and interactive. They teach you ways to fight against obesity, high blood pressure, and diabetes.

Fat Attack™

Fat Attack™ provides information on the importance of healthy fats. It shows how they support many bodily functions and reduce the risk of chronic diseases. Fat Attack™ also teaches you that fat is high in calories, and how consuming too much can lead to weight gain and obesity. The program shows how this raises health risks for heart disease and stroke.

For more information about our Fat Attack™ program, visit our website at huskyhealthct.org. Click on **"Health & Wellness,"** then **"Healthy Eating."**

Sugar Rush

Through hands-on activities, Sugar Rush helps you see how much sugar you're eating and drinking daily. This includes how much added sugar is in your favorite drinks.

Visit our Community Engagement calendar to see when Fat Attack™ or Sugar Rush might be in your area. Go to huskyhealthct.org. Click on **"Health & Wellness,"** then **"Health Events."**

Are you interested in having a Fat Attack™ or Sugar Rush workshop at your school, community organization, or health fair? If so, call us at [203.303.3932](tel:203.303.3932).

Please note: Due to high interest, workshop requests must be made at least one month in advance.

Women, Infants, and Children (WIC) Nutrition Program

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) offers many kinds of nutrition services. Eligible people may include:

- Parents
- Stepparents
- Guardians
- Foster parents of infants and children under age five
- People who are pregnant
- People who are breastfeeding a child under age one
- People who've had a baby in the past six months

People who apply for WIC must:

- Be at nutritional risk
- Have a certain income
- Have legal proof of identity
- Live in Connecticut

WIC services include nutrition risk assessment, nutrition education, and breastfeeding education and support. Additional WIC services may include debit cards or e-WIC to buy specific nutritious foods at participating stores. They may also include referrals to other health and social services.

Healthy Start

Healthy Start is a program that helps promote and protect the health of parents and children. It offers program members health education and care management services. It also offers help filling out the HUSKY Health application for pregnant people who qualify. To learn more about Healthy Start, visit:

uwc.211ct.org/healthy-start.

Birth to Three

This program offers early intervention services to children under age three. These children are either:

- Experiencing a significant developmental delay,
- Or have been diagnosed with a physical or mental condition that could result in a developmental delay.

Visit birth23.org for a list of sites by town. You can also call them:

- For questions about **joining** the program: [1.800.505.7000](tel:1.800.505.7000).
- For questions for the family liaison if **you're already in the program**: [1.866.888.4188](tel:1.866.888.4188).

2-1-1 of Connecticut

There are resources within your community to help when you struggle with basic needs such as food, housing, clothing, and utilities. To get started, check out *2-1-1 of Connecticut*. 2-1-1 is a free, confidential information and referral service. It connects people to essential health and human services 24 hours a day, seven days a week. 2-1-1 is available online and over the phone.

There are several ways to reach 2-1-1:

- Dial [2.1.1](tel:211) and be connected to a trained contact specialist 24/7.
- Visit their website at 211ct.org.
 - Live Chat is available.
- Call [711](tel:711) to access Relay services. Anyone who's out of state or using Relay can connect to Connecticut 2-1-1 toll-free by dialing [1.800.203.1234](tel:18002031234).
- Text CTWARM, CTFOOD, and/or CTRECOVERY to [8898211](tel:8898211) for resources (*standard message & data rates may apply*).

School-Based Health Centers & Child Health Services

School-Based Health Centers (SBHCs) are comprehensive primary care facilities located in schools or on school grounds. They offer primary care, mental health services, health promotion activities, and at some sites, dental services. Services are available to all students with a parent/guardian's written consent. To learn more about SBHCs and where they're located, visit: portal.ct.gov/DPH/Family-Health/School-Based-Health-Centers/School-Based-Health-Centers.

The School-Based Child Health (SBCH) Program offers special diagnostic and treatment services. They're for children eligible under the Individuals with Disabilities Education Act. These children must have an Individualized Education Plan (IEP). To learn more, visit: portal.ct.gov/DSS/Health-And-Home-Care/School-Based-Health-Care-Program/School-Based-Child-Health---SBCH?language=en_US

Peace at Home

Parenting can be the most stressful job of all. Gaining skills and support can make a big difference in how your family functions. HUSKY Health members can view free online parenting classes offered by Peace at Home Parenting Solutions. Classes focus on a wide range of topics including positive discipline, child development, co-parenting, mental health support, raising a lesbian, gay, bisexual, transgender, queer and/or questioning (LGBTQ+) child, and much more. Classes are organized by child's age and theme. To view all the topics and classes, visit: peaceathomeparenting.com/husky-health.

Educational Health Materials Available to Members

The HUSKY Health website doesn't just have information on your benefits and services. It has many other helpful materials available to you. You'll find health fact sheets and videos on many topics. These materials will help you and your family be as healthy as possible. To access the HUSKY Health library of materials, visit: huskyhealthct.org. Click on "**Health & Wellness**," then "**Health Resources & Information**."

Phone & Internet Services

You may be eligible for discounted phone service through the Lifeline program. Lifeline is a federal program that lowers the monthly cost of phone or internet service. To learn more, please visit:

https://getinternet.gov/apply?id=nv_home and click **“Get Started”** to see if you qualify.

COMMUNICATIONS FROM HUSKY HEALTH

Automated Calls/Live Calls

We may call you sometimes to share important health information. These calls could be live or pre-recorded. For example, we might call to welcome you to HUSKY Health and tell you about helpful benefits and services. We might also call you with information on important screenings or to help you find a PCP. Our goal is to make sure you get the most valuable information as soon as possible.

HUSKY Health News Emails

We might send important information straight to your inbox. Topics may be about your HUSKY Health benefits, available resources, and health reminders. You can also sign up to get emails on specific topics like asthma, diabetes, Chronic Obstructive Pulmonary Disease (COPD), and pregnancy. To sign up for “HUSKY Health News,” go to huskyhealthct.org. Click the email **“sign up”** button near the bottom of the page. You can also go to our **“Phone & Communication Services”** page under the **“Member Information”** tab and select **“Email Sign-up.”**

Text Messages from HUSKY Health

HUSKY Health can send you text messages with helpful information about your benefits and services. We can also send Short Message Service (SMS) messages (text only, no images or videos). However, this is **only if you sign up for them**. To sign up for text messages, visit our website at huskyhealthct.org. Click **“Member Information,”** followed by **“Phone & Communication Services,”** then the **“Text Message Opt-in”** button. Messages will come from 2HUSKY or 248759.

Please note: We can only send, not receive, text messages. These are general messages that apply to all HUSKY Health members. For personal information, or information specific to you/your household, please call Member Engagement Services. Any replies to text messages sent by HUSKY Health won't be received. Message and data rates may apply.

MEMBER ADVISORY WORKGROUP

Members have a voice in improving the HUSKY Health program. You can join the Member Advisory Workgroup. Your input can help make the program better.

The Member Advisory Workgroup works together on different projects. They engage in feedback sessions to help members get the most out of the HUSKY Health program. They also help develop the *HUSKY Health Spotlight Member Newsletter*. This newsletter is created for members, by members.

The Member Advisory Workgroup meets online every month. Workgroup members will get a \$25.00 gift card in the mail for each meeting they attend.

To join our Member Advisory Workgroup, please call Member Engagement Services at [1.800.859.9889](tel:1.800.859.9889). You can also [send us a secure email](#).

For upcoming meeting dates, visit our website at huskyhealthct.org. Click **“Member Information,”** then **“Member Advisory Workgroup.”** You can also visit this link: huskyhealthct.org/members/members_workgroup.html.

To see newsletters created by our Member Advisory Workgroup, go to huskyhealthct.org. Click **“Member Information,”** then **“Member Newsletters.”**

MEMBER RIGHTS & RESPONSIBILITIES

We are committed to treating members in a way that respects their rights, as well as its expectations of each member’s responsibilities. By working together, we can help you and your family meet your healthcare needs. As healthcare partners, here are the rights and rules we both agree to:

Member Rights

You have the right to...

- Be treated with respect, dignity, and regard for your privacy
- Get care, or information about your care, in a timely manner
- Choose or change your provider
- Get help with making an appointment with a provider
- Take an active part in planning your care and making treatment decisions
- Get complete and understandable information about your treatment options, regardless of cost or benefit coverage. Have the chance to talk about those choices with your provider
- Get complete and understandable information on any financial programs that might affect the care that you get from your provider
- Refuse treatment, except when that treatment is required by law
- Get a second opinion
- Get translation services
- Request and review your medical records with your provider
- Make an advance directive
- Confidently exercise your rights
- Receive services regardless of race, color, religion, gender, sexual orientation, age, cultural and ethnic background, or status as a HUSKY Health recipient
- Make a complaint, grievance, and/or appeal
- Be free from retaliation
- Learn about your medical benefits and how to use them

- Correct or change your Protected Health Information and control how it is used
- Contact your provider to advocate for medical services
- File an appeal if the authorization of goods or services is partially or fully denied, suspended, reduced or terminated

Member Responsibilities

You have the responsibility to...

- Give your providers and HUSKY Health the information they need to better serve you
- Choose a Primary Care Provider (PCP)
- Get regular checkups
- Follow the plan of care that you made with your providers
- Discuss your care with your PCP before seeing a specialist, unless it is an emergency, pregnancy-related, or for family planning
- Keep your appointments, or let your provider know at least 24 hours in advance if you need to cancel or reschedule
- Respect the dignity and privacy of others
- Carry your HUSKY Health cards
- Notify HUSKY Health and DSS if there are changes to your address, phone number, household members, demographic information, or income

Please call if you have questions about these rights or would like to make a complaint because you feel your rights have been violated. Our number is [1.800.859.9889](tel:1.800.859.9889).

ADVANCE DIRECTIVES

If you're 18 years of age or older, you have the right to make decisions about your healthcare. There may come a time when you can't make or communicate a decision about your healthcare. This could be because of a serious illness, injury, or other disability. An Advance Directive is a legal document that tells your providers and family what treatments you'd like (and not like) to have if you can't tell them yourself.

In Connecticut, there are two types of Advance Directives. They are:

- The living will or healthcare instructions
- The appointment of a healthcare representative

To learn more about Advance Directives, please visit this website: <https://portal.ct.gov/DMHAS/Programs-and-Services/Advocacy/Advance-Directives>

COMPLAINTS AND ADVERSE INCIDENT REPORTING

If you're not happy with how you're being treated by a provider or HUSKY Health staff, or if you can't get an appointment soon enough, you can file a complaint. You should also let us know if you feel any of your Member Rights have been violated. You can file a complaint in writing and send it to us by mail, email, or fax. You can also let us know by phone. We respond to, and look into, all complaints.

For complaints, please call the following numbers directly, depending on your area of concern:

- Behavioral healthcare or services: [1.877.552.8247](tel:18775528247)
- Dental care or services: [1.855.283.3682](tel:18552833682)
- Medical care or services: [1.800.859.9889](tel:18008599889)

Complaints can be general or related to your specific care quality. Some examples include:

- Having to wait a long time to see your provider
- Finding your provider's office to be unclean
- No handicap access at your provider's office
- Being unable to find a provider who will treat you
- General dissatisfaction with HUSKY Health

A quality-of-care matter is when you think the provider didn't provide the right services for you. For example:

- You believe you need an X-ray, but the provider didn't order one
- You believe your condition isn't properly diagnosed or you were given the wrong medicine
- You unexpectedly develop an infection

A quality-of-service matter may be when:

- The provider or their office staff were rude to you.
- The provider didn't return your call.
- The provider wouldn't give you a referral.

You can also file a complaint if you feel you've experienced an adverse incident. An "adverse incident" is a more serious clinical matter that affected you or your child's health or well-being. Some examples include:

- An unexpected death
- An injury while being treated
- A serious reaction to a medication

Any time a complaint, quality-of-care or service matter, or adverse incident is filed, it's investigated.

Depending on what the complaint is about, we may:

- Talk to you.
- Talk to your provider.
- Ask for and look over your medical records.
- Look over the clinical information/medical records in our databases.
- Report the complaint to DSS.

We collect and report all complaints, quality-of-care and service matters, and adverse incident information to the HUSKY Health Quality Committees. The information is used to create quality improvement activities. Some complaints, such as those related to enrollment, benefits, and fees are sent to DSS.

If you want to file a complaint, you can:

- **File a complaint by telephone:**
Member Engagement Services: [1.800.859.9889](tel:1.800.859.9889)
- **Mail a complaint to:**
HUSKY Health Program
Attn: Member Engagement Services
P.O. Box 5005
Wallingford, CT 06492
- **Fax a complaint to:**
1.203.265.3197 Attn: Member Engagement Services
- **Email a complaint:**
Go to huskyhealthct.org, click **“Contact Us,”** then **“Send us a secure member email.”**
You can also [click here](#).

If you feel that HUSKY Health hasn't resolved your complaint, you can mail it to DSS at:

Department of Social Services
Division of Health Services, Director of Integrated Care
55 Farmington Avenue
Hartford, CT 06105

You can also contact the Office of the Healthcare Advocate by calling [1.866.466.4446](tel:1.866.466.4446).

PRIVACY

Protecting your privacy is very important to the HUSKY Health program. We have many safeguards in place to be sure we protect your personal health information. The Department of Social Services (DSS) has created a Notice of Privacy Practices. This notice describes how your health information is shared during our normal daily operations and as required by law. It also defines our privacy rights. A copy of the DSS Privacy Notice is available on the “Member Privacy” page on our website. To access it, go to huskyhealthct.org, click **“Member Information,”** then **“Member Privacy.”** You can also [click here](#).

If you think your health information was wrongly shared, you can make a complaint. Write a letter to the DSS Privacy Officer and send it to the address below.

- **Mail complaints to:**
Department of Social Services
Attn: Privacy Officer
55 Farmington Avenue
Hartford, CT 06105

You can also mail complaints to the Federal Office of Civil Rights. You must do so within 180 days of when the problem happened.

- **Mail complaints to:**
Office of Civil Rights
U.S. Department of Health and Human Services
200 Independence Avenue, SW
HHH Building, Room 509H
Washington, DC 20201

Your benefits won't be affected if you make a complaint.

APPEALS

Some services require prior authorization. If HUSKY Health partially or fully denies, suspends, reduces, or terminates authorization of goods or services, you'll receive a denial notice. The denial notice will tell you why this decision was made. It also tells you how to get a copy of the guidelines used to make the decision. If you don't agree with the decision, this notice lets you know how to file an appeal.

You or your legally authorized representative can ask for a verbal appeal by phone. You can also file an appeal in writing by mail, fax, or email. You must appeal within 60 calendar days of the date of the denial notice. If you wait longer than 60 days, you'll lose your right to appeal the decision.

To file an appeal, please call Member Engagement Services at [1.800.859.9889](tel:1.800.859.9889). If you're deaf or hard of hearing, you can use a TTY by calling [711](tel:711). You can also send your appeal by mail or fax.

- **Mail appeals to:**
HUSKY Health Program
Attn: Appeals Unit
P.O. Box 5005
Wallingford, CT 06492
- **Fax appeals to:**
203.265.3830

The HUSKY Health program will send you an appeal decision by mail no later than 30 calendar days from the date on which the appeal was received by HUSKY Health.

Expedited (Rushed) Review

Normally, an appeal decision is made within 30 calendar days. However, if that time frame threatens your life, health, or ability to regain maximum functioning, you or your provider can ask for an expedited (rushed) appeal. This means that the appeal will be made faster than the timeframes talked about above.

The HUSKY Health program will decide within one business day if the appeal will be rushed. If your health and safety are not at direct risk, HUSKY Health will make the decision within the usual 30 calendar days. If the appeal is rushed, an appeal decision will be made within 72 hours. You can ask to send more information or to speak with the decision maker(s). The rushed decision will be made in the shortest time possible. The decision will be made no longer than five days from the day the appeal was accepted as rushed.

External Appeals

If you've finished HUSKY Health's internal appeals process and got a final written appeal decision you're unhappy with, you can file an external appeal with DSS. This must happen within 30 calendar days of getting HUSKY Health's final written appeal decision. Your decision letter includes a form and tells you how to submit it to DSS. You can submit the form by:

- **Mail:**
State of Connecticut – Department of Social Services (DSS) Division of Health Services
Medical and Clinical Consultant Team
HUSKY B External Appeals – 9th floor
55 Farmington Avenue
Hartford, CT 06105
- **Fax:**
860.424.4958
- **Phone:**
For HUSKY B External Appeals: 860.424.5181

MEMBER SATISFACTION SURVEYS

Consumer Assessment of Healthcare Providers and Systems (CAHPS®)

As part of its Quality Management program, HUSKY Health works with a company to conduct a member satisfaction survey (CAHPS®) every year. Members asked to take the CAHPS® survey are picked at random. You may be asked for your opinion. Surveys are conducted by mail, phone, and online. If you receive the survey, please complete it. Your feedback helps us get better!

CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

Member Engagement Services Satisfaction Survey

When you call Member Engagement Services, you may be asked if you'd like to take a short, three-question survey. All information is private and HUSKY Health doesn't know which members answered the questions. The information we get from the survey is used to make changes that help us improve. Your answers are very important to us!

RENEWALS

Renewing your HUSKY B Coverage

In partnership with DSS, Access Health CT will send you a coverage renewal form to complete. They'll also include the return envelope. These are the options to complete your renewal:

- Go online to Access Health CT by visiting accesshealthct.com. This is the fastest way to renew and get an immediate eligibility decision.
- Call Access Health CT at [1.855.805.4325](tel:1.855.805.4325).
- Mail the renewal form using the return envelope sent to you.

DSS will try to validate your eligibility using available electronic data sources. If DSS can verify your information, you'll receive up to another year of eligibility. You'll receive a confirmation letter. If DSS can't validate the information, you'll receive renewal paperwork to complete. For assistance, please call Access Health CT at [1.855.805.4325](tel:1.855.805.4325).

Please always keep your address up to date with DSS. This helps make sure you get your renewal paperwork.

PREMIUM BILLING

For premium billing issues **only**, please call [1.800.656.6684](tel:1.800.656.6684), Monday through Friday, from 8:30 a.m. to 5:00 p.m. TTY: [1.866.492.5276](tel:1.866.492.5276) or [711](tel:711).

HUSKY HEALTH IS HERE FOR YOU

As a HUSKY Health member, your health, well-being, and access to care is very important to us. This handbook is your guide to the services HUSKY Health provides to you. It's also a resource for whom to contact if you have questions or need help. Our goal is to make sure you receive the healthcare you need when you need it. We're always here to help. Member Engagement Services is available to you Monday through Friday, 8:00 a.m. to 6:00 p.m. at [1.800.859.9889](tel:1.800.859.9889). Our website is available 24/7 at huskyhealthct.org. You'll find answers to many of your questions and other information to help you be as healthy as possible.

We look forward to serving you in good health!

IMPORTANT HOTLINES

HOTLINE	CONTACT INFORMATION
2-1-1 of Connecticut Crisis Services	2.1.1 Follow the prompts for the Crisis Services Option
988 Suicide and Crisis Lifeline	Call or text 9.8.8
Connecticut Department of Children and Families (CT DCF) Child Abuse and Neglect Careline	1.800.842.2288
CT Safe Connect Domestic Violence Hotline	1.888.774.2900
Connecticut Quitline (through the Department of Public Health)	1.800.QUIT.NOW (1.800.784.8669)
Connecticut Sexual Assault Hotline	1.888.999.5545
Connecticut Protective Services for the Elderly (through the Department of Social Services)	1.888.385.4225 (during business hours) 2.1.1 (after business hours)
Substance Use Services Access Line (through the Connecticut Department of Mental Health and Addiction Services)	1.800.563.4086
Veterans Crisis Line	Dial 9.8.8 then press 1 or text: 838255

MEMBER BASIC INFORMATION FACT SHEET

*For your personal use. You're welcome to make copies.
Please use one fact sheet for every member in the household.
Have your fact sheet ready for caregivers.*

NAMES OF MEMBERS IN HOUSEHOLD	HUSKY HEALTH (MEDICAID) MEMBER ID NUMBER	DATE OF BIRTH	AGE

Address: _____

Phone Number(s): _____

IN CASE OF EMERGENCY CALL:

Name: _____ Relationship: _____ Phone: _____

Police Department Phone Number: _____

Fire Department Phone Number: _____

Provider's Name & Phone: _____

Provider's Name & Phone: _____

Provider's Name & Phone: _____

Therapist's Name & Phone Number: _____

Health Conditions: _____

Allergies: _____

Medications: _____

Special Instructions: _____
