



good health report

SPRING 2014

YOUR FAST TRACK TO LIVING WELL

A Step Ahead

Get answers to your
diabetes questions

Member Rights

The care and
service you need

 **AULTCARE**

Where *You* Matter.

www.aulcare.com

Do You Have Questions?

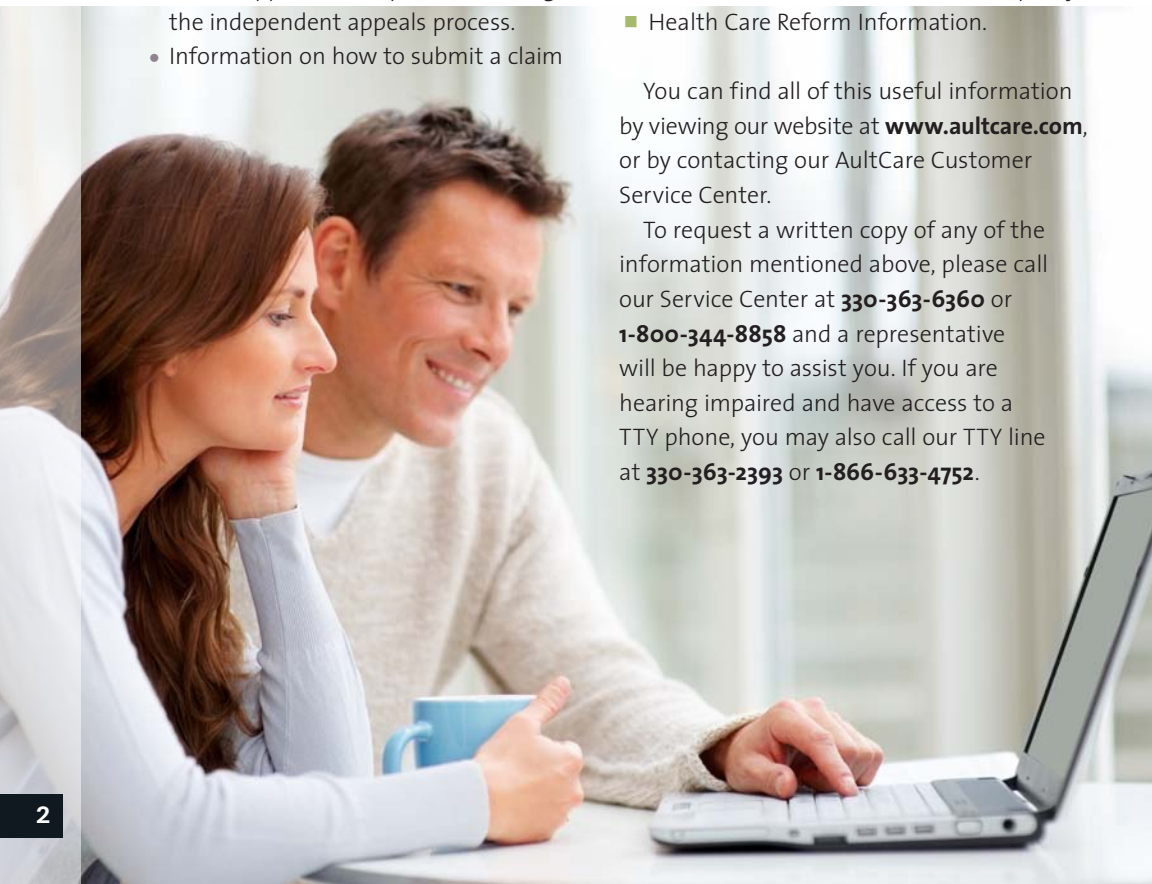
Find the answers at www.aultcare.com. We continue to enhance the information available on our website. You'll find that AultCare puts the answers to your questions right at your fingertips anytime you wish to go online.

Here's a list of the information, documents and services available on our website:

- Member Guide, which includes information on:
 - How to obtain language/interpreter services.
 - New Technology Assessment/Evaluation.
 - Pharmacy Program Information.
 - Information for obtaining a PCP or specialist for your care.
 - Information for obtaining emergency/urgent care services whether in or out of the network and during or after normal business hours, including inpatient admittance.
 - Information on how and when to submit an appeal or complaint, including the independent appeals process.
 - Information on how to submit a claim for covered services.
- Information on services excluded from your coverage.
- Information on our 24-hour Nursing Healthline.
- Notice of Privacy Practices.
- Searchable Provider Directory, including information on network health care professionals.
- Health Assessment Tools.
- Plan Benefit/Covered Services information (requires login).
- Member claims information (requires login).
- Pharmacy Directory and Prescription Drug Formulary.
- Pharmacy Benefit information for your plan (requires login).
- Quality management programs, evaluations and outcomes.
- Case and Disease Management Programs.
- Enrollee Rights & Responsibilities.
- Pre-certification/Utilization Review policy.
- Health Care Reform Information.

You can find all of this useful information by viewing our website at www.aultcare.com, or by contacting our AultCare Customer Service Center.

To request a written copy of any of the information mentioned above, please call our Service Center at **330-363-6360** or **1-800-344-8858** and a representative will be happy to assist you. If you are hearing impaired and have access to a TTY phone, you may also call our TTY line at **330-363-2393** or **1-866-633-4752**.





Member Appeal Rights

Did you know that when AultCare denies coverage or payment, you have appeal rights? AultCare communicates these rights in many ways to ensure that each member understands their appeal rights. Your plan documents, your Explanation of Benefits, and a benefit denial letter all describe your appeal rights as an AultCare member. Every member is afforded the same first-level appeal rights or an internal review. If you initiate a first-level appeal and we uphold our original decisions, you will receive a resolution letter outlining additional appeal rights, which may include external review rights. Your rights vary depending on state and federal laws.

For more information on your appeal rights:

- Review your plan document, Explanation of Benefits, benefit denial letter or resolution letter.
- Contact the AultCare Service Center at 330-363-6360 or 1-800-344-8858 (TTY 330-363-2393 or 866-633-4752).
- Access your Member Handbook, available online at www.aultcare.com under Member Guide.

Quality Program

We monitor and report our progress.

Did you know that AultCare has a Quality Program through the National Committee for Quality Assurance that monitors the performance outcomes, in comparison with past performances, internal goals and external benchmark standards for both clinical and non-clinical measures? The measurements include preventive health services, member satisfaction, physician credentialing and quality improvement. Ensuring you receive necessary services and are satisfied with AultCare and our network of providers are part of our quality plan. Along with recognizing key areas of performance, NCQA accredits and certifies a wide range of health care organizations, providing information for consumers, purchasers, health care providers and researchers.

The Quality Program is monitored through the Healthcare Effectiveness Data and Information Set (HEDIS®) as well as the Consumer Assessment of Healthcare Providers Survey (CAHPS®) to reflect member satisfaction.

If you would like additional information regarding AultCare's quality improvement initiatives, program or a report of our progress in meeting these initiatives, please visit our Quality information online at www.aultcare.com/quality, or contact Customer Service at 330-363-6360 or toll free at 1-800-344-8858 to request a paper copy. If you are hearing impaired and have access to a TTY phone, you may reach us on our TTY line at 330-363-2393 or 1-866-633-4752.

HEDIS® is a registered Trademark of the National Committee for Quality Assurance.

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



Utilization, Case and Disease Management Services

AultCare offers a Care Coordination Program so you get the care, information and community services you need. The individual services of Utilization Management, Case Management and Disease Management are coordinated by a Care Coordinator, who will help you navigate through

the health care system. Our team of registered nurses, licensed practical nurses and licensed social workers is available by phone to help you take control of your health and well-being. Services include:

- Assistance with the referral process to out-of-network specialists.

EVALUATION OF NEW AND EXISTING TECHNOLOGY

AultCare investigates all requests for coverage of new technology, using a medical technology assessment company as a guideline. If additional information is needed, AultCare utilizes sources including, but not limited to, Medicare and Medicaid policy. The Food and Drug Administration releases any current medical peer-review literature. This information is reviewed and evaluated by AultCare's medical director and other physician advisors in order to determine if a new technology is appropriate for coverage under your AultCare plan.

Members may request that a certain new technology be investigated for coverage by contacting the UM department. UM contact information listed below.

AULTCARE CARE COORDINATION CONTACT INFORMATION:

PHONE NUMBER:** 330-363-6360 or (toll-free) 1-800-344-8858

TTY (HEARING IMPAIRED): 330-363-2393 or (toll-free) 1-866-633-4752

FAX: 330-454-9635

**The organization offers language assistance to members and providers requiring a translator by calling the phone numbers listed above.

- Help with transitioning your care to panel providers, if appropriate.
- Care coordination to help you get the most from your plan benefits while maintaining quality, cost-effective treatment.
- Community-resource information to provide assistance with prescriptions, utilities and transportation if you are having financial difficulties.
- Phone calls with a nurse who specializes in managing care for health conditions.
- Educational materials to supplement information your physician has provided.
- Informative mailings and handouts about your condition.
- Equipment such as the Cardiocom Telescale® and Gluco-Com Telemonitoring System to help you manage your condition from the convenience of your home.
- Staff to guide you in the right direction and help you work with your doctors to improve your health.
- Reliable referrals to service agencies in the community.

You may benefit from our Care Coordination services if you:

- Have questions about your health status or health care,
- Are in need of a transplant,
- Have been newly diagnosed with cancer,
- Are experiencing complex medical issues,
- Are receiving specialty care outside of the network.

To inquire about any of these services, please contact us at the phone numbers below to speak to a Care Coordination staff member.

MAKING DECISIONS BASED ON MEDICAL NECESSITY

- Utilization Management decisions are based on the appropriateness of care and services as well as eligibility and coverage of requested services.
- AultCare does not reward practitioners or other individuals for issuing denials of coverage or service of care. There are no financial incentives for Utilization Management decision makers that result in underutilization.
- The specific criteria used in decisions are available at no cost by contacting the Care Coordination department at the numbers listed below.
- A physician, nurse or pharmacist reviewer is available to discuss Utilization Management denial decisions. Please contact the Care Coordination department at the numbers listed below.



STAFF AVAILABILITY

- Care Coordination staff members are available from 8 a.m. until 4:30 p.m., Monday through Friday for inbound calls regarding Utilization Management issues and questions regarding the Utilization Management process.
- Care Coordination staff members can receive inbound communications regarding Utilization Management issues after normal business hours via voicemail or fax at the numbers listed below.
- Care Coordination staff can send outbound communications regarding Utilization Management inquiries during normal business hours.
- Care Coordination staff members will identify themselves by name, title and organization when initiating or returning calls regarding Utilization Management issues.

An Update on Access & Office Site Standards

Consumers value timely accessibility to medical care and providers. AultCare monitors primary care and behavioral health practitioner appointment and after-hours accessibility annually against AultCare standards. Our accessibility standards are measured with physician surveys, and providers are notified if particular trends are identified. Accessibility is also measured by member surveys, complaints and grievances, and providers are also notified if particular trends are identified that could result in an on-site visit.

Appointment Accessibility Standards (Internists, Family Practitioners, General Practitioners, Pediatricians, Obstetricians):

- Routine appointments are available within two weeks involving non-acute symptoms or follow-up care.
- Preventive care appointments are available within eight weeks.
- Urgent appointments are available within 24–48 hours, depending upon the severity of the condition at the time of the initial call.
- Emergent life-threatening symptoms offer an immediate appointment or direct patient to the Emergency Department.
- Less than 30 minutes average wait time in office.
- Practice facilities must be wheelchair accessible, with easy entry and exit from the building.
- AultCare to maintain a provider network that has at least 85 percent of practices accepting new patients.

Appointment Accessibility Standards for Behavioral Health (BH):

- Routine BH appointments within 10 business days.
- Urgent appointments within 48 hours.
- Non-life-threatening emergent appointments within six hours.
- Follow-up care following hospitalization for mental illness within seven days of discharge.

After-Hours Accessibility Standards

- 24 hours a day, seven days a week on-call coverage mechanisms directing members to access care outside practice hours.

Office-Site Quality Standards

Here is a summary of our standards for quality of office-site criteria:

- Physical accessibility and appearance including handicapped accessible.
- Well-lit waiting rooms.
- Adequate seating.
- Posted office hours.
- Adequate examination room space.

Stay a Step Ahead of Diabetes

Get answers to some common questions.

When it comes to managing your diabetes effectively and avoiding serious complications, your health care provider is your best friend. Whether you choose to see an endocrinologist, internist or a primary care provider, it's important to make sure that he or she is someone you're comfortable with, listens to your concerns and answers your questions.

HOW OFTEN SHOULD I SEE MY HEALTH CARE PROVIDERS?

Schedule a visit with your doctor once every three to six months—and keep your appointment.

During these visits, your doctor will weigh you, check your blood pressure and examine your feet for potential problems. Once a year, your doctor will also perform an eye exam, HbA1C lab test (a three-month snapshot of how well you're managing your blood sugar), cholesterol screening and a urine test to check for kidney damage.

TIPS FOR YOUR VISIT

To make the most of your time together, ask the following questions:

FOOT HEALTH

ASK: How should I care for my feet? How often should I check them? What is cause for concern, and what should I do if I find a problem?

EXERCISE

ASK: Am I healthy enough to begin an exercise program? What do you recommend and what should I avoid? Should I monitor my blood sugar during exercise?

EYE HEALTH

ASK: Should I see an eye doctor? What eye problems should I watch for?

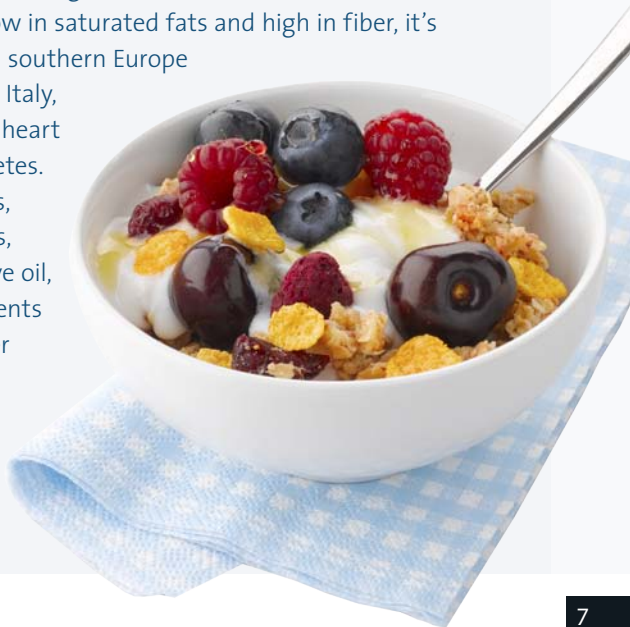
BLOOD SUGAR

ASK: When should I check my blood sugar and what numbers are too high or too low? Should I have glucagon on hand?

EAT WELL, BE WELL

A big part of living well with diabetes is eating well—and the Mediterranean diet may be the best way to do that. Low in saturated fats and high in fiber, it's based on the eating habits of people in southern Europe like Greece, France, Spain and southern Italy, who experience lower rates of obesity, heart disease, hypertension, cancer and diabetes.

The diet focuses on fruits, vegetables, beans, legumes, cereals, nuts and seeds, and includes moderate amounts of olive oil, cheese, yogurt, fish and poultry. Adherents also limit eggs to no more than four per week and red meat to a small amount each week. They also enjoy low to moderate amounts of red wine. Ask your doctor if the Mediterranean diet is right for you.



How Are We Doing?



Whether you are new to AultCare or have been with us for a while, we want your feedback. The New Enrollee Survey allows new members to provide feedback on their enrollment experience, and the Member Satisfaction Survey allows all members to provide feedback on their overall satisfaction with AultCare.

Access our surveys by visiting our website www.aultcare.com and log in to your account.

If you do not already have an account, click on the “create login” link and follow the instructions. Once logged in, click on the link at the bottom of your dashboard titled either “Member Satisfaction Survey” or “New Enrollee Survey.” Tell us about your experience. Your responses will provide us with beneficial information to aid in our goal of delivering the best service to all of our members.

SPECIAL COMMUNICATION NEEDS

AultCare understands that some of our members have special communication needs. AultCare will provide a translator or hearing impaired services (TTY) to those members who are in need. If you require these services, please contact our Service Center at the numbers provided below, and we will gladly assist you.

AULTCARE CONTACT INFORMATION:

PHONE NUMBER: 330-363-6360 or (toll-free) 1-800-344-8858

TTY (hearing impaired): 330-363-2393 or (toll-free) 1-866-633-4752

FAX: 330-438-9804

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