

## Contact information

Agency & website	Telephone
<b>Enrollment Center</b> <a href="https://www.kmap-state-ks.us/hcp/member">https://www.kmap-state-ks.us/hcp/member</a> <i>Log on and password required.</i> To change your KanCare health plan.	<b>1-866-305-5147</b> TDD/TYY 1-800-766-3777 Business hours: Monday - Friday 7:30 AM - 5:30 PM
<b>Eligibility verification</b> <a href="https://www.kmap-state-ks.us/hcp/member">https://www.kmap-state-ks.us/hcp/member</a> <i>Log on and password required.</i> To confirm your eligibility and KanCare plan.	<b>1-800-766-9012</b> TDD/TYY 1-800-766-3777 Business hours: Monday - Friday 7:30 AM - 5:30 PM
<b>KanCare Clearinghouse</b> <a href="http://www.kancare.ks.gov/">http://www.kancare.ks.gov/</a> For questions about your eligibility. Also to report household changes such as address, phone number, or family size.	<b>1-800-792-4884</b> Business hours: Monday - Friday 8:00 AM - 7:00 PM
<b>Amerigroup</b> <a href="http://www.myamerigroup.com/ks">www.myamerigroup.com/ks</a> To pick a doctor and ask questions about your health care benefits including transportation.	<b>1-800-600-4441</b> Business hours: Monday - Friday 8:00 AM - 5:00 PM
<b>Sunflower Health Plan</b> <a href="http://www.sunflowerhealthplan.com">www.sunflowerhealthplan.com</a> To pick a doctor and ask questions about your health care benefits including transportation.	<b>1-877-644-4623</b> Business hours: Monday - Friday 8:00 AM - 5:00 PM
<b>UnitedHealthcare Community Plan – Kansas</b> <a href="http://www.uhccommunityplan.com">www.uhccommunityplan.com</a> To pick a doctor and ask questions about your health care benefits including transportation.	<b>1-877-542-9238</b> Business hours: Monday - Friday 8:00 AM - 6:00 PM



Enrollment Booklet

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## What if I am not happy with my healthcare?

### Appeals (cont.)

- An appeal must be filed within 30 calendar days after the date of the Notice of Action.
- The appeal will be resolved within 30 calendar days unless more time is needed. You or the Health Plan can ask for an additional 14 days to resolve the appeal. If the Health Plan requests more time, you will be notified of the delay. You have other options for a quicker review of your appeal. Call your health plan for more information.

### State fair hearings

A state fair hearing is a formal meeting where an impartial person (someone you do not know), assigned by the Office of Administrative Hearings (OAH), listens to all of the facts and then makes a decision based on the law.

- If you are not satisfied with the decision made on your appeal, you or your representative may ask for a fair hearing. It must be done in writing and mailed or faxed.

Office of Administrative Hearings  
1020 S. Kansas Ave.  
Topeka, KS 66612-1327  
Fax: 785-296-4848

- The letter or fax must be received at OAH within 30 days, plus 3 days if mailed, of the date of the Notice of adverse decision.
- You can file a state fair hearing with the Office of Administrative Hearings at the same time as you are appealing an adverse action with the health plan.

## How to make a change

### **STEP 1**

Look at the **Enrollment Form** in the packet. It lists the members who are enrolled and may choose to change their health plan. It also lists your choice period end date.

### **STEP 2**

Look at the **Health Plan Highlights**. Ask the plans or check their website for the providers in their networks. You will find doctors, hospitals, pharmacies, or other providers you may use. This includes aging or disability services and mental health or substance abuse services.

**Amerigroup** 1-800-600-4441  
[www.myamerigroup.com/ks](http://www.myamerigroup.com/ks)

**Sunflower Health Plan** 1-877-644-4623  
[www.sunflowerhealthplan.com](http://www.sunflowerhealthplan.com)

**UnitedHealthcare Community Plan** 1-877-542-9238  
[www.uhccommunityplan.com](http://www.uhccommunityplan.com)

*If you would like to use the Internet but do not have a computer, try going to your public library, place of worship, neighborhood school, or DCF access point.*

### **STEP 3**

You may change your plan by choosing one of the three options below:

**Option 1** – Enroll online at  
<https://www.kmap-state-ks.us/hcp/member>.

**Option 2** – Complete the Enrollment Form and return it in the enclosed envelope before the deadline.

**Option 3** – Call the Enrollment Center at 1-866-305-5147 from 7:30 a.m. to 5:30 p.m., Monday through Friday (TDD/TTY 1-800-766-3777).

## What are my rights and responsibilities?

### In KanCare, you have the right to:

- Be treated with respect.
- Receive information about KanCare benefits.
- Choose your primary provider within your plan.
- Make decisions about your health care.
- Have access to medical advice from your provider, either in person or by phone, 24 hours a day, 7 days a week.
- A second opinion.
- Voice concerns about your provider or services.
- Appeal any denials from the program.
- File a grievance if you are unhappy with your care.
- Ask if a service is covered before receiving it by asking your provider or calling your health plan.

### In KanCare, you have the responsibility to:

- Review the KanCare enrollment packet. You have until the Choice Period End date on the enrollment form to change plans. If you choose not to change by that date, the next time you are able to change is during your Annual Open Enrollment.
- Choose your primary provider within the available plan.
- Call your provider for any medical problem.
- Go to your primary provider for preventive care.
- Read all the information given to you on your medical benefits.
- Make and keep appointments. If you can't keep an appointment, call and cancel.
- Follow the advice of providers.
- Pay for services that are not covered by KanCare.
- Show respect to providers.
- Use services appropriately. Example: Use the emergency room only when you believe you are having a true emergency.
- Tell your provider about other insurance coverage you have, including Medicare.

## What if I am not happy with my healthcare?

<b>Grievances</b>	
A grievance is an expression of dissatisfaction about any matter other than an Action. Call or write one of the Customer Service centers below to file a grievance. A customer service staff member will help you file a grievance.	
<b>Amerigroup</b>	<b>1-800-600-4441</b>
<b>Sunflower Health Plan</b>	<b>1-877-644-4623</b>
<b>UnitedHealthcare Community Plan</b>	<b>1-877-542-9238</b>

<b>Appeals</b>	
An appeal can only occur under the following circumstances:	
<ul style="list-style-type: none"> <li>• If an <u>Action</u> has occurred. An <u>Action</u> is the denial of services or a limitation of services, including the type or level of service; the reduction, suspension, or termination of a service you have been receiving; the denial, in whole or part, of payment for a service; or the failure of the health plan to act within established time requirements for service accessibility.</li> <li>• You will receive a <u>Notice of Action</u> in the mail if an <u>Action</u> has occurred.</li> <li>• An <u>Appeal</u> is a request for a review of any of the above actions.</li> <li>• To file an <u>Appeal</u>: You, your friend, your attorney, or anyone else on your behalf can file an appeal.</li> <li>• An appeal can be filed verbally or in writing. The Customer Service center for your health plan can also help you with an appeal.</li> </ul>	

## IMPORTANT

**Remember** – you can change plans during your initial Choice Period and then each year during your Annual Open Enrollment. The Enrollment Form in this packet shows you what the deadline is for you to make a change in your KanCare Health Plan. The deadline is listed on the form in the field named, “Choice Period End”.

**If you are pregnant or will be adding a newborn (under 12 months of age) to your case** – the baby will usually be added to the same plan as the mother. The system will try to keep the mother and baby together beginning at birth if eligibility is approved. Think about this when choosing your plan.

### Things to know:

- Your primary care provider may be a doctor, physician assistant, nurse practitioner, or a clinic in your health plan. If you need a specialist, make sure the specialist you want to see is in your health plan.
- Call your primary care provider if you or your child gets sick. In an emergency, go to the nearest emergency room or call 911.
- If you have special health care needs, call your health plan after you are enrolled and they will make sure you get the care you need.
- KanCare does not have copays.
- The Annual Open Enrollment period is based on the case as a whole rather than each person on the case.