



Enrollee Handbook

Title 19 – BROWARD

T19-04/2011



Dear Family Member,

Welcome to the Children's Medical Services Network for Broward (CMSN-BROWARD). CMSN-BROWARD works with Children's Medical Services (CMS) and Medicaid. We care about you/your child and your health/your child's health. We want you/your child to get the best care you need.

Here is information to help you with the benefits and services you get from CMSN-BROWARD. Please read this information. It is important for you to know how your child's health plan works.

The list of doctors is in this packet. Doctors may change. Check with the doctor before you make an appointment. Make sure they are in the CMSN-BROWARD network. To see a specialist, you must get a referral. Your primary care doctor (PCP) will give you a referral when you/your child need it.

CMS has Care Coordinators who are Registered Nurses. CMS also has social workers that can help. We all work together to help get you/your child the care you/your child need. We will work with your doctors/your child's doctors. We will help if your child needs to see a specialist or get therapy.

We are glad you chose CMSN-BROWARD.

If you have questions, call us at **1-866-209-5022**. Ask for Enrollee Services. If you are deaf or blind call Florida Relay 711.

Sincerely,

The CMSN-BROWARD Staff

Estimado miembro de la familia,
Si usted querria una version espaniola de la Guia de Enrolado o si usted tiene calquier pregunta o necesita ayuda con cualquiera de la informacion contenida en este paquete, contacta por favor nuestro Departamento del Servicio de Enrolado en 1-866-209-5022 tiempo entre 8am y 7pm, el lunes por el viernes.
Sinceramente,
CMSN-BROWARD

Rele nimwo telefon sa 1-866-209-5022 gratis si ou vle resewva enformasyon sa a en kreyol.

TABLE OF CONTENTS

Welcome to CMSN-BROWARD.....	2
What is CMSN-BROWARD?.....	5
CMS Mission	5
History of the Program	5
CMSN-BROWARD.....	5
What you get	5
Enrollee Services	5
Help with Communication.....	6
Care Coordination	6
Family-to-Family Support	6
Clinic Services	6
Special Need Shelter.....	6
When You Sign Up.....	7
Enrollee ID Card.....	7
Enrollment.....	7
Open Enrollment	7
Disenrollment	7
Re-Enrollment (Reinstatement).....	8
Newborn	8
Change in Address.....	8
Your Child's Doctor	8
The CMSN-BROWARD Network	9
Provider Directory.....	9
Changing Your Doctor.....	9
Doctor's Appointments	10
Specialists	10
Payments	10
Authorizations.....	10
Referrals.....	11
Out Of Area Use.....	11
Protecting Your Information (HIPAA)	11
Advance Directives and Living Wills	11
Things to Remember	12
What is Covered?.....	13
Behavioral and Mental Health	14
Care Coordination	14
Child Health Check Ups	14
Chiropractor.....	15
CMS Clinics	15
Dental Services	15
Diagnostic Tests.....	15
Doctors (Primary Care and Specialists).....	15
Durable Medical Equipment (DME).....	15
Emergency Services	15
Enhanced Benefits	15
Family Planning.....	16
Hearing Services	16
Home Health	16
Hospital Care (Inpatient and Outpatient).....	16
Immunizations (Shots).....	16
Lab/X-Ray	16

Maternity Care	16
Medical Transportation	17
Medications and Prescribed Drugs	17
Nutrition Services	17
Optometry.....	17
Organ Transplants.....	17
Podiatry	17
PPEC Services.....	17
Pharmacy and Prescription Drugs	18
Private Duty Nursing	18
Second Opinion.....	18
Therapy Services	18
Vision Care.....	18
Well Child Care	18
X-Rays.....	18
Complaints and Grievances	19
Complaints	19
Grievances	19
Grievance Coordinator	19
Appeals Procedure.....	20
Appeals Coordinator.....	20
To Continue Services	21
Fast Appeal	21
Medicaid Fair Hearing	21
Beneficiary Assistance Program (BAP).....	22
Enrollee Rights and Responsibilities.....	23
Medicaid Fraud.....	24
Be An Advocate.....	25
Helpful Numbers.....	26

WHAT IS CMSN-BROWARD?

CMSN-BROWARD is the Children's Medical Services Network in Broward. CMSN-Broward provides services for CMS enrolled children and their siblings up to the age of 21. CMSN-Broward works to provide needed care to children with special health care needs.

CMS Mission

Champion excellence in the delivery of health care for children with special health care needs through a comprehensive system of care; and

Provide a family centered, coordinated medically managed system of care for children with special health care needs and provide essential preventive, evaluative and early intervention services for children.

History of the Program

The CMS program started in 1929. It was a State program for crippled children. There were only a few doctors and nurses at that time. The program has grown over the years. Now it helps all children with special health care needs and their families. It is a model of care for the rest of the country.

CMSN-BROWARD

CMSN-BROWARD is run by Children's Medical Services (CMS), Memorial Healthcare System in South Broward and the North Broward Hospital District (Broward Health). Children with special health care needs sometimes take a lot of time and work. We want to help you care for them. We want to help increase your/your child's potential. We hope to make it easier to handle your/your child's medical condition.

We work with doctors, nurses and hospitals. We will help you with your/your child's doctor visits. We will help you/your child go to the hospital. We will help if you/your child need to see a specialist or get therapy.

CMSN-BROWARD is for children up to 21 years old. You can also get care for your/your child's brothers and sisters. At 21 years old, you/your child are no longer eligible. You will need to choose another plan for you/your child. Your Care Coordinator will help you/your child with this transition.

With CMSN-BROWARD, you get:

Enrollee Services

We have representatives to help you when you call. We care about your child and his/her health. We will answer your questions. If we don't know, we will find out. You can ask about the CMS program. You can ask about the services we pay for. We can help you find a doctor. You can ask about referrals and authorizations. We will take care of your grievances. We will take care of your appeals. Tell us how we are doing. We are always looking to do things better. If we do things well, tell us. We like to hear that too. Call us at **1-866-209-5022**. Ask for Enrollee Services. You can call Monday to Friday from 8:00 am to 7:00 pm.

Help with Communication

We can help if you speak another language. We can interpret over the phone. If you need help to speak with us or your doctor, call us. Call 1-866-209-5022. Ask for Enrollee Services. You can call Monday to Friday from 8:00 am to 7:00 pm. If you need this book in another language, ask us. If you are blind or deaf, call Florida Relay 711. This will not cost you anything.

Care Coordination

You will get help from a CMS Care Coordinator who is a Registered Nurse. You also get help from a Social Worker when you need it. We are here to help you with your/your child's health care. Your Care Coordinator will work with your/your child's doctors, nurses and therapists. They also work with the hospitals, clinics and your/your child's school. All to make sure you get the care you/your child need. Your Care Coordinator helps you with questions. They can help with referrals and authorizations.

Your Care Coordinators are very good advocates for your child. Your Care Coordinator represents you and your family.

You can choose not to have care coordination. If you do not want care coordination, call us. Call 954-713-3100. Ask for the Care Coordinator. You can call Monday to Friday, 8:00 am to 5:00 pm.

Family-to-Family Support

Your Care Coordinator will help you get family-to-family support. CMS works with Family Health Partners. These are parents or family members of children with special health care needs. You can ask questions. The Family Health Partners often are able to put parents and families in touch with support groups related to their child's illness.

Clinic Services

CMS holds clinics at their Broward office location. The clinics are run by doctors and specialists in the CMSN-BROWARD network. Your Care Coordinator is there when you come to the clinic with your child. The Care Coordinator knows you/your child. Your Care Coordinator can help you when you see the doctor at the clinic.

Special Needs Shelter

CMS works with Broward County Emergency Management. We run a special hurricane shelter in Ft. Lauderdale. This shelter is only for children with special health care needs. It is only for CMS children and their families. It is the only one in the State of Florida. It is run by nurses and medical staff. You must register before you/your child can go to this shelter. Your Care Coordinator will help you register. Call 954-713-3100. Ask for the Care Coordinator.

WHEN YOU SIGN UP

CMS decides if a Medicaid child can enroll in CMSN-Broward. CMS will determine if you/your child with special health care needs meet the criteria to enroll. You/your child must have Medicaid and must work with CMS to enroll in the CMSN-Broward.

If you have questions about signing up, call the Choice Counselor. Call 1-866-454-3959. If you are blind or deaf, call 1-866-467-4970 (TDD). You can call Monday to Friday from 8:00 am to 7:00 pm.

Enrollee ID Card

When you sign up you/your child will get an enrollee ID card. The enrollee ID card comes with this packet. Make sure your/your child's name is right. Make sure your address is right. If it is not right, call us. Bring this card with you when you/your child go for medical care. Do not allow anyone else to use your/your child's ID card. If you lose your child's card, call us. We will send you a new card. Call Enrollee Services at 1-866-209-5022.

Enrollment

If you are a mandatory enrollee required to enroll in a plan, once you are enrolled in CMSN-Broward or the state enrollees you in a plan, you will have 90 days from the date of your first enrollment to try the health plan. During the first 90 days, you can change health plans for any reason. After the 90 days, if you are still eligible for Medicaid, you will be enrolled in the plan for the next nine months. This is called "lock-in".

Open Enrollment

If you are a mandatory enrollee, the state will send you a letter 60 days before the end of your enrollment year telling you that you can change plans if you want to. This is called "open enrollment". You do not have to change health plans. If you choose to change plans during open enrollment, you will begin in the new plan at the end of your current enrollment year. Whether you pick a new plan or stay in the same plan, you will be locked into that plan for the next 12 months. Every year you can change health plans during your 60 day open enrollment period.

Disenrollment

If you are a voluntary enrollee, you can disenroll at any time. Call Choice Counseling at 1-866-454-3959. You will need your Medicaid ID number when you call.

If you are a mandatory enrollee and you want to change plans after the initial 90 day period ends or after your open enrollment ends, you must have a state-approved good cause reason to change plans. The following are state-approved cause reasons to change health plans:

1. The enrollee moves out of the county, or the enrollee's address is incorrect and the enrollee does not live in a county where the health plan is authorized to provide services. .
2. The provider is no longer with the health plan.
3. The enrollee is excluded from enrollment.
4. A substantiated marketing or community outreach violation has occurred.
5. The enrollee is prevented from participating in the development of his/her treatment plan.
6. The enrollee has an active relationship with a provider who is not on the health plan's panel, but is on the panel of another health plan.
7. The enrollee is in the wrong health plan as determined by the Agency.
8. The health plan no longer participates in the county.
9. The state has imposed intermediate sanctions upon the health plan, as specified in 42 CFR 438.702 (a)(3)

10. The enrollee needs related services to be performed concurrently, but not all related services are available within the health plan network or the enrollee's PCP has determined that receiving the services separately would subject the enrollee to unnecessary risk.
11. The health plan does not, because of moral or religious objections, cover the service the enrollee seeks.
12. The enrollee missed open enrollment due to a temporary loss of eligibility, 180 days or less for Reform populations.
13. Other reasons per 42 CFR 438.56(d)(2), including, but not limited to poor quality of care; lack of access to services covered under the contract; inordinate or inappropriate changes of PCPs; service access impairments due to significant changes in the geographic location of services; lack of access to providers experienced in dealing with the enrollee's health needs; or fraudulent enrollment.

Some Medicaid recipients can change health plans whenever they choose, for any reason. For example, people who are eligible for both Medicaid and Medicare benefits and children who receive SSI benefits can change plans at any time for any reason. To find out if you can change plans, call the Choice Counselor at 1-866-454-3959

CMSN-BROWARD can disenroll you/your child without your permission if you/your child:

1. Move out of Broward County.
2. Lose your Medicaid Benefits.
3. Are admitted to a nursing home, enroll in hospice, or go to prison.
4. Do not use your identification card properly.
5. Sign up with Medicare or another health plan.
6. Do not follow the recommended plan of care.
7. Have one verbal and one written warning.
8. Behave in a disruptive or abusive manner.
9. Miss 3 appointments in a row within a six month period.
10. Turn 21 years old.

Re-Enrollment (Reinstatement)

Sometimes, you/your child can lose Medicaid eligibility. If you get it back within 180 days, you will keep CMSN-BROWARD. When you are re-enrolled, you will get back the PCP you had. If you do not want the same doctor, you can pick another one from the list.

Newborn

You need to let us know if you are pregnant or give birth. You must also tell your Department of Children and Families (DCF) caseworker. When we hear about the birth, we will put your newborn into CMSN-Broward. If you don't want your baby in CMSN-Broward, you need to tell us in a letter. If you want to disenroll your baby from the CMSN-Broward, call the Choice Counselor at 1-866-454-3959.

You need to choose a personal doctor for your baby. A CMSN-Broward Enrollee Service Representative can help you choose. Call Enrollee Services at 1-866-209-5022.

Change in Address

If you move, tell Department of Children and Family (DCF). Call **954-467-4298**. Ask for your case worker. Give your case work your new address. You can go to the DCF Regional office at 201 Broward Blvd, #406, Ft. Lauderdale, FL 33311. This is the only way to make your change official.

Your Child's Doctor

You must choose a doctor for you/your child. CMSN-BROWARD has a whole list of primary care doctors (PCP). The list is called the **Provider Directory**. A PCP is often a pediatrician or a family doctor. You can choose any PCP on the list as long as he/she takes new patients. Your Care Coordinator or Enrollee Services can help you find a doctor. You can keep the same primary care doctor (PCP) that your child had before signing up **as long as that doctor is with CMSN-BROWARD**. If the doctor you want is not in our network, tell us. We will work with him/her to see if he/she wants to join. **If you do not choose a PCP, CMSN-BROWARD will choose one for you.**

You can choose the same doctor (PCP) for your whole family. You can pick a different doctor for each of your children.

Once you pick a doctor, make an appointment to see him/her. Tell the doctor what is happening with you/your child. This will help the doctor identify your/your child's needs. Your child's PCP handles all of your/your child's medical care. Your/your child's doctor will work with your CMS Care Coordinator to get you/your child the care that is needed. The PCP will see you/your child for check-ups. The PCP will help you and your child with health problems. The PCP will set up appointments with other doctors when you/your child need it. The PCP will send you/your child to the specialists when it is needed. Always call your primary care physician (PCP) first when your child needs medical care. If you can't reach your doctor, call your CMS Care Coordinator. Even if you are out of town and you/your child need to see a doctor, call your PCP first. They need to approve care that is not an emergency.

Some doctors have office hours in the evening and on weekends. Some doctor's offices have a doctor on call. Talk to your/your child's doctor about what to do if you need him/her after hours. If you think you have an emergency, call 911. Go to the nearest emergency room.

The CMSN-BROWARD Network

CMSN-BROWARD works with many kinds of health care providers. We work with doctors, nurses and therapists. We work with many specialists. We work with many hospitals and all sorts of centers. All these medical people are part of our network in BROWARD. We keep a list of all the providers in our network. It is called the **Provider Directory**. When you use a provider in the Provider Directory, you are "in network."

If the care you/your child needs is not available in network, we will set it up somewhere else. This is called "out of network." We will work with your doctor and your Care Coordinator. Care outside the network must be approved by CMSN-BROWARD.

Provider Directory

CMSN-BROWARD keeps a list of all the providers in the network. The list is called the Provider Directory. It is in this package. The Provider Directory is also on our website. Go to <http://www.sfccn.org>.

In the Provider Directory you will find:

1. Primary care doctors (PCP).
2. Specialists.
3. Hospitals.
4. Dentists.
5. Community Mental Health Centers.
6. Ancillary Providers such as therapists, home health nurses and medical equipment companies.

You can use anyone in the Provider Directory as long as they take new patients. Some services need to be approved first. Specialists, Hospitals and Ancillary Providers must be approved first. Your Care Coordinator will work with your primary care doctor (PCP) to get approval (see "authorization").

Sometimes, the Provider Directory can change. Check with us before you make an appointment. We will check that the provider is in the network. Call 1-866-209-5022. Ask for Enrollee Services.

Changing Your Doctor

You can change your child's primary care doctor (PCP) any time. You can pick any of the doctors (PCP) in the Provider Directory as long as that doctor takes new patients. The date of the change depends on when you ask. We will help you make the change. To change doctors, call us. Call 1-866-209-5022. Ask for Enrollee Services. You can call Monday to Friday from 8:00 am to 7:00 pm.

Doctor's Appointments

After you sign up, make an appointment with your/your child's primary care doctor (PCP). Make it right away if this is a new doctor. When you call, the doctor will schedule you as soon as possible. The date and time of the appointment depends on your child's health care needs. It depends on the doctor's schedule. If you cannot keep your appointment, call the doctor as soon as possible. This will help you get a new appointment.

To make sure you get timely care, your child's doctor sets appointments this way:

- Urgent care cases will be seen within 24 hours.
- Sick-care cases will be seen within one week.
- Well-care cases will be seen within one month.

Tell us if you are having problems making an appointment. Call Enrollee Services or your CMS Care Coordinator. We will help you.

Specialists

The primary care doctor (PCP) knows about your/your child's health. The PCP knows when you/your child need to see a specialist. The PCP knows which specialist is best for you/your child. Your/your child's PCP will work with your CMS Care Coordinator. They will send you/your child to a specialist when it is needed. This is called a "**referral.**"

The Provider Directory has many specialists to choose from. Check with us before you make an appointment with the specialist. We will check that the specialist is in the network. Call 1-866-209-5022. Ask for Enrollee Services.

Payments

There is no cost to you for Medicaid services approved by CMSN-BROWARD. You don't have to pay for emergency care. You don't have to pay for family planning services. **If you go to a doctor or hospital not in the network, you may have to pay for the service. Your Care Coordinator needs to approve some drugs. If you do not get the approval, you may have to pay for the drugs.** You will not get a bill when you use doctors in the network. If you get a bill from a doctor or hospital, call us. Call 1-866-209-5022. Ask for Enrollee Services.

Authorizations

Some services need to be approved first. Talk to your doctor about the services you/your child need. Show the doctor your CMSN-BROWARD ID card. Your doctor will call us to approve the service. This is called an **authorization**. Your Care Coordinator will work with your doctor to get authorizations. If you get care without authorization, you may have to pay for it yourself.

You do not need an authorization when:

1. You have an emergency. You need to go to the emergency room.
2. You see your primary care doctor (PCP).