

## 2008 CompCare Member Newsletter

### NEWSLETTER

# PREVENTIVE HEALTH PROGRAMS

CompCare has developed Preventive Health Programs for *Depression, Diabetes, Depression and Congestive Heart Failure (CHF), High risk, Attention Deficit Disorder, and Teen Suicide.*

These programs help to find members who may need to see a behavioral healthcare doctor or therapist. They also tell members about important health problems. CompCare works with your health plan and your medical doctor to find these members and offer appointments.

The *High Risk Program* looks at members who go into the hospital many times. A CompCare social worker follows these members to make sure they get the right kind of care.

The *Teen Suicide Program* looks at young members for dangers of suicide. CompCare works with the member and the members family. CompCare talks to family doctors to remind them they need to look at their young patients for any signs or symptoms of depression.

The *Attention Deficit Hyperactivity Disorder (ADHD) Program* looks at diagnosed members ages 0-17. CompCare works with your family doctor to help them recognize and treat members with (ADHD). CompCare asks members and family doctors to use these programs. If you want more information visit [www.compcare.com](http://www.compcare.com) or call the number on your membership card.

Major health issues of Obesity and Substance Use are being addressed by your provider to improve outcomes through preventive efforts by identifying and referring for treatment.

### Protecting Your Health Information

When a member joins a health plan, they sign a 'routine' consent. This consent lets the doctor or therapist share private or "confidential" information with the Health plan and CompCare. They share information about costs, planning,, care, and quality studies. If a Member cannot give consent, the court will let another person consent for them. A member may refuse to give consent.

CompCare wants to make sure that health information stays private in all settings. The doctors, therapists and CompCare follow rules about health information and medical charts. Sharing more information needs a 'special' consent, such as letting your employer have your health information. A member may ask to see their medical chart. A member may ask to have corrections made to their chart. For information on HIPAA or sharing information, call CompCare at 1 the number on your membership card.

### Communication & Your Health

Communication between you and your health care professionals, both mental health and medical doctors and therapists, is important.

It is important because it will help you receive safe care that is the right kind, in the right place and at the right time.

What they talk about is private and confidential.

## COMPCARE'S SATISFIED MEMBERS

AT THE END OF EACH YEAR, COMPCARE ASKS MEMBERS QUESTIONS TO SEE IF THEY ARE SATISFIED WITH THEIR CARE AND SERVICES. THE OVERALL 2008 MEMBER SATISFACTION SURVEY RESULTS WERE 90%. A FEW OF THE QUESTIONS ON HOW COMPCARE DID ARE IN THE TABLE BELOW.

CompCare will focus on :

- \* Discharge Planning
- \* High risk Case management
- \* Use of community Resources

Service	87.01%
Access	88.91%
Availability	92.88%
Acceptability	92.73%

For additional information or comments and suggestions, call the number on your membership card and ask for the Quality Department.

# AUTHORIZATION OF CARE

A doctor, therapist or hospital talks to CompCare about paying for care they want to give a member. Sometimes, CompCare may not pay for some or all of the care if it is not in the member's health plan benefit or does not fit the care guidelines. This is called a "denial for authorization to payment".

The doctor, therapist or hospital gets a denial letter to explain the reasons.

An appeal is asking CompCare to look at the decision again. The doctor, therapist or hospital may ask for an appeal. The denial letter explains how to do this.

If a doctor, therapist or hospital has a contract with CompCare, they are 'in-network'. This means CompCare pays for the member's care at a cost agreed upon before the member receives the care. Sometimes, if the care is not in the member's plan or the doctor, therapist or hospital is not in-network, the member may have to pay for some or all of the care. The member may get a denial letter too. The member or someone acting on behalf of the member may call CompCare or the health plan about complaints or decisions. The member may ask about appearing in person to talk about the decision, having someone else talk for them, asking about the appeal, or getting someone outside the plan to look at the decision. You may also be entitled to an independent review by someone other than CompCare. For further information call the number on your membership card.

*CompCare does not stop your doctor or therapist from talking to you about all types of care even when your health plan may not pay for it. Call the number on your membership card.*

*Never change or stop your medication without first talking to your doctor. Always take your medication as ordered*

## ADVANCED DIRECTIVES

You are usually asked about "Advanced Directives" when you go into a hospital. However, you may be asked about "Advanced Directives" when you visit your outpatient therapist or doctor. "Advanced Directives" are your instructions as to what you want done if you are too sick to make choices about your physical or mental health. Your instructions tell your doctor or therapist what kind of care you want and who can make choices for you. Ask your doctor or therapist about this.

If you are interested in learning about our study on the number and type of CompCare doctors, therapists or hospitals in your area (the CompCare network) and ways we are improving the CompCare network, please contact CompCare's Quality Department at 1-800-458-6139 or write to 'Contact Us' on our website. [www.compcare.com](http://www.compcare.com).

## COMPCARE'S WEBSITE

KEEPING YOU INFORMED

Join us at [www.compcare.com](http://www.compcare.com) for all the latest information on CompCare, such as, our call abandonment rate was less than 2% at year-end or out urgent, emergent access to care was 100%.

Find out about our:

- \* History
- \* Our services
- \* Our office location

Also find our about our:

- \* Prevention Programs
- \* Studies
- \* Survey
- \* Newsletters
- \* Member Rights and Responsibilities
- \* Level of Care Guidelines
- \* Clinical Practice Guidelines.



*Tell us what you think and tell us what would be helpful to you. We welcome your comments, suggestions and participation so that we may improve our services to you!!*

COMPCARE 2007 UTILIZATION & QUALITY  
 MANAGEMENT EVALUATIONS & 2008 PROGRAM  
 DESCRIPTIONS AND WORK PLANS

CompCare, handling your mental health benefits, sets up work plans to help provide appropriate care and service to Members. Each Year we look at how the plans have worked by evaluating the processes, comments and suggestions from our Members, Providers & Health Plans. We also set up plans for the next year.

For a copy, call CompCare at 1-800-458-6139 or visit our website at [www.compcare.com](http://www.compcare.com)

Is it Really a Bill?

If using a CompCare network doctor or therapist, your health plan services are provided at an agreed upon rate minus the co-payment or deductible. You may receive a copy of a statement that has been sent to CompCare to pay.

If you feel that you have received a bill to pay in error, call our Customer Service Department at the number on your card.

MENTAL HEALTH AND SUBSTANCE ABUSE BENEFITS

A member does not have to see their family doctor to use CompCare's services. They can call directly to CompCare.

CompCare's 800# is located on your membership card. You can call 7 days a week, 24 hours a day. CompCare will find the closest behavioral health doctor or therapist or hospital. If you have an emergency, you may also call 911 or go to the nearest hospital.

CompCare's doctors, therapists and hospitals have special training in mental health care and substance abuse treatment. CompCare will authorize to pay for different types of care if it is in the member's Health Plan benefit. Health Plans vary depending on the type of plan you have. It is important to read the information given to you when you enroll into a health plan.

You may also find out about your mental health and substance abuse benefits by calling your Health Plan or by calling CompCare at the number on your membership card.

MAKING DECISIONS

COMPCARE'S DECISIONS ARE MADE ONLY ABOUT GIVING THE  
 RIGHT KIND OF CARE

COMPCARE DOES NOT REWARD DOCTORS OR THERAPISTS SO THEY  
 WILL NOT GIVE YOU CARE

COMPCARE DOES NOT REWARD DOCTORS OR THERAPISTS TO USE  
 TOO LITTLE CARE

IF YOU HAVE ANY QUESTIONS ABOUT YOUR CARE, PLEASE CONTACT  
 COMPCARE'S UTILIZATION MANAGEMENT DEPARTMENT.

### MEMBER RIGHTS

- \* You have the right to be treated with respect and dignity
- \* You have the right to privacy
- \* You have the right to be told about your health plan and mental health services
- \* You have the right to be told about your doctor or therapist
- \* You have the right to take part in the plans for your treatment
- \* You have the right to know CompCare's clinical guidelines
- \* You have the right to be told about all treatment choices even if not covered by your plan
- \* You have the right to professional and timely treatment
- \* You have the right to treatment that may help you to cope better
- \* You the right be treated in a safe environment free from physical barriers
- \* You have the right to be treated without regard to age, sex, race, religion, national origin or sexual preference
- \* You have the right to refuse treatment your doctor or therapist suggests
- \* You have the right to know what might happen if you don't follow your treatment plan
- \* You have the right to information on follow up care when your benefits run out or are changed
- \* You have the right to make suggestions about Rights and Responsibilities
- \* You have the right to information on how CompCare evaluates new technology and how it may effect your benefits
- \* You have the right to complain about services and care
- \* You have the right to ask that decisions be looked at again if you are unhappy with a decision

### MEMBER RESPONSIBILITIES

- \* You should read the description of your benefits provided by your health plan
- \* You need to know what your plan does and does not cover
- \* You need to follow the rules spelled out in your health plan
- \* You must call CompCare before seeing a doctor or therapist unless it is an emergency
- \* You must state that you are covered by CompCare when seeking care for mental health of substance abuse
- \* You are responsible for paying your portion of the fee at the time you receive services
- \* You must give your doctor or therapist twenty-four hour notice if you must cancel your appointment
- \* You need to share information about yourself to assist your doctor or therapist in planning your care
- \* You need to work with your doctor or therapist to decide on a plan of care
- \* You need to follow the treatment plan that you and your doctor or therapist have agreed upon

#### New Medications & Therapies

- \* Your health plan or your employer decides your health benefits. CompCare looks at new or improved mental health or substance abuse treatments and tells your health plan if we think it should be included in your benefits. If you want us to look at a special medication

### HEALTH CARE FRAUD MEMBERS & PROVIDERS

Healthcare fraud alone costs Americans 54 billion a year. Our Health care system is an easy target and generally poses a low risk of discovery and a high-reward to the person acting in a fraudulent way. Insurance fraud occurs when people deceive an insurance company or agent to collect money to which they aren't entitled. Nearly one third of doctors exaggerate the severity of a patient's illness to help the patient avoid early discharge from the hospital or extend outpatient visits. (Journal of the American Medical Association)

Some states still don't have specific insurance fraud laws and therefore prosecutors are discouraged from tackling tough fraud cases. Jail sentences are light, **but this is changing**. Many states require health plans to educate staff regarding fraud identification and to develop fraud programs to investigate and report. If you suspect fraud give CompCare a call. We take an active approach to all suspected fraud and will investigate. Fraud costs all of us and CompCare is committed preventing fraud abuse that increases the cost of health care.

## COMP CARE DECISIONS

The Clinical Practice Guidelines give the doctors and therapists a guide to follow when talking about care. These guidelines are updated every two years.

The Level of Care Guidelines give the doctors, therapists and CompCare staff a guide to follow when talking about care. These guidelines are updated every year.

Deciding if care is needed is called "Medical Necessity". CompCare uses Clinical Practice Guidelines and Level of Care Guidelines to help make medical necessity decisions.

If you would like information about CompCare staff who make these decisions, if you have questions about these guidelines or would like a copy, call our Quality Management Department at the number on your membership card.

### Patient Privacy & HIPAA

**Need another 'Notice of Privacy Practice' - guess what, CompCare has one too. It is posted at [www.compcare.com](http://www.compcare.com)**

**HIPAA gives you certain RIGHTS:**

- \* You may ask us to stop how we use and / or give out your information
- \* You may ask us to reach you in different ways
- \* You may see and /or copy your information
- \* You may ask to change your information
- \* You may ask for a list of how we have used and /or shared your information
- \* You may ask for a copy of our 'Notice of Privacy'