



**HEALTH PLANS**  
UNIVERSITY OF UTAH

# HEALTHY U BEHAVIORAL MEMBER HANDBOOK

## HEALTHY U BEHAVIORAL

6053 S. Fashion Square Drive, Murray UT 84107

<https://healthyubehavioral.com/>

Member Services **(801) 213-4104** or toll-free **(833) 981-0212**

## OTHER LANGUAGES

Free language assistance services are available to you. For help, call **801-213-4104** or toll-free **833-981-0212**.

Spanish (Español)

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **801-213-4104** o al **833-981-0212**.



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## INTRODUCTION

As a Medicaid member, you are part of a Prepaid Mental Health Plan (PMHP). If you live in Summit County, your PMHP provider is Healthy U Behavioral. We will provide you with mental health and substance use disorder services if you need them. In the handbook, these services are called behavioral health services.

This handbook explains the Medicaid mental health and substance use disorder (SUD) services that we cover. You can get this handbook and other written information in Spanish. You can also get this handbook electronically in either English or Spanish. For help, call us at **801-213-4104** or toll-free at **1-833-981-0212**.

*Como miembro de Medicaid, usted es parte del 'Prepaid Mental Health Plan' (PMHP). Si usted vive en el Condado de Summit, su proveedor de PMHP es Healthy U Behavioral. Healthy U Behavioral provee los servicios de salud mental y el abuso de sustancias si usted los necesita. Este manual explica los servicios de Medicaid de la salud mental y el abuso de*



*sustancias que el PMHP cubre bajo del programa de Medicaid. Usted puede obtener esta guía y otra información en español. También puede obtener este folleto en versión digital en inglés o español. Para obtener ayuda, llame la oficina Healthy U Behavioral más cercano a su hogar.*

We provide mental health and SUD services for children, youth, and adults. If you need mental health or SUD services, call us at **801-213-4104** or toll-free at **1-833-981-0212**. (See *Getting Behavioral Health Services*)

## SERVICES AVAILABLE

### WHAT BEHAVIORAL HEALTH SERVICES ARE COVERED?

Inpatient hospital care for mental health problems and outpatient services for mental health and substance use disorder (SUD) problems are covered.

Outpatient mental health and SUD services include:

- Evaluations
- Psychological testing
- Individual, family, and group therapy
- Individual and group therapeutic behavioral services
- Medication management
- Individual skills training and development
- Psychosocial rehabilitation services (day treatment)
- Peer support services
- Detoxification from substances in a social setting
- Targeted case management services

Your provider will offer you services after meeting with you to talk about what you need. If your provider thinks a different provider might be better for you, they will let you know. Services are provided by licensed mental health and SUD professionals, including doctors, nurses, psychologists, licensed clinical social workers, SUD counselors, other professional counselors, targeted case managers, and others.

If you want more information on any of these services, call us at **801-213-4104** or toll-free at **1-833-981-0212**.

### ARE ANY OTHER SERVICES COVERED?

Yes, other covered services are:

- Electroconvulsive therapy (ECT)
- Interpreter services

If you have Traditional Medicaid, other services can be covered based on your needs.

These services are:

- Respite care
- Psycho-educational services
- Personal services
- Supportive living

If you have questions, your provider will talk with you about these services.

## SERVICES NOT COVERED BY HEALTHY U BEHAVIORAL

### WHAT SERVICES MIGHT BE COVERED BY MEDICAID BUT NOT BY HEALTHY U BEHAVIORAL?

Some of the services that might be covered by Medicaid or your physical health plan but not by Healthy U Behavioral are:

- Medical care, including medical detoxification in hospital for a substance use disorder (SUD)
- Dental care
- Vision care
- Pharmacy services

If you have questions about these services or any other services that might be covered by Medicaid, call your physical health plan or Medicaid at **1-800-662-9651**.

Also, methadone administration by an Opioid Treatment Program (OTP) is not covered by Healthy U Behavioral. OTPs can bill Medicaid directly for the methadone administration. If you have questions, call Medicaid at **1-800-662-9651**.

## TRANSPORTATION SERVICES

### HOW CAN I GET HELP WITH TRANSPORTATION TO MY BEHAVIORAL HEALTH SERVICES?

**Traditional Medicaid Members:** Rides to your mental health services or substance use disorder (SUD) services are available. If you do not have your own rides to your appointments, you can get help with rides through Medicaid's transportation program. For more information, please see Utah Medicaid's Member Guide. To ask for a copy, or if you have questions, call Medicaid at **1-866-608-9422**. You can also find information online at [medicaid.utah.gov](http://medicaid.utah.gov).

Also, if you live in the Park City area, you can use the free Park City Shuttle. They can be contacted at **1-800-453-1360**.

If you need help with rides in other parts of Summit County or if you have special needs, you



can call us at **801-213-4104** or toll-free at **1-833-981-0212**.

**Non-Traditional Medicaid Members:** Transportation to your behavioral health services is not covered by Medicaid.

## INTERPRETER SERVICES

### WHAT IF I NEED AN INTERPRETER?

We know that it can be hard to talk with your provider if your first language is not English or you are hard of hearing. We might have providers who speak or sign your language. You can ask to get services from them, or you can ask for an interpreter. Interpreters are free and available in all languages, including sign language. An interpreter can help you over the phone or be with you at your mental health or substance use disorder (SUD) visits. The interpreter will help you and your provider understand each other. To ask for information written in another language or for an interpreter or a provider who can speak or sign your language, call us at **801-213-4104** or toll-free at **1-833-981-0212**.

### WHAT IF I WANT TO CALL HEALTHY U BEHAVIORAL AND I AM DEAF, HARD OF HEARING, OR HAVE A HARD TIME SPEAKING?

You can call Relay Utah at **711**. If you have a hard time speaking, you can also call Speech-to-Speech Relay Utah at **1-888-346-5822** and a trained person will help you. If you speak Spanish and are deaf, hard of hearing, or have a hard time speaking, call Spanish Relay Utah at **1-888-346-3162**.

## GETTING BEHAVIORAL HEALTH SERVICES

### HOW DO I GET BEHAVIORAL HEALTH SERVICES?

We have providers in your area.

These are behavioral health services given to treat your emergency. You can call Member Services at **801-213-4104** or toll-free at **1-833-981-0212** for help finding a provider. If you need services in the evenings, let us know when you call. Evaluations and some therapy services can be provided in the evenings.

You can also look at our provider directory at [healthyubehavioral.com](http://healthyubehavioral.com). The directory has providers' addresses, phone numbers, services they provide, languages they speak, and information on whether they are taking new clients.

After you choose a provider, call the provider to schedule your first appointment.

## HOW QUICKLY CAN I BE SEEN?

**Emergency Services:** If you need emergency care, you will be seen right away. See Emergency Services for information on how to get emergency care.

**Urgent Care:** If you need urgent care, the provider will see you within five working days.

**Non-Urgent Care:** If you do not have an urgent need for care, the provider will see you within 15 working days. If your condition changes, and you think you need to be seen sooner, call the provider. If the provider cannot see you sooner, call us at **801-213-4104** or toll-free at **1-833-981-0212**. We will talk about your needs again. We can also help you find a different provider who can see you sooner.

## CHOOSING PROVIDERS

### CAN I CHOOSE MY HEALTHY U BEHAVIORAL PROVIDER?

Yes, you can talk to us at any time about the provider you would like to see. Call us at **801-213-4104** or toll-free at **1-833-981-0212**.

### CAN I GET MENTAL HEALTH OR SUBSTANCE USE DISORDER SERVICES FROM SOMEONE OUTSIDE OF THE HEALTHY U BEHAVIORAL NETWORK?

In some situations, you can go to a provider outside of the Healthy U Behavioral network. You and the provider must get approval before you get services outside of the Healthy U Behavioral network. For more information, call us at **801-213-4104** or toll-free at **1-833-981-0212**.

You can also get services directly from a federally qualified health center (FQHC) without approval from Healthy U Behavioral.

If you are an American Indian or Alaska Native, you can get services directly from an Indian health care program (a program run by Indian Health Services, an Indian Tribe, Tribal Organization, or an Urban Indian Organization) without approval from Healthy U Behavioral.

### CAN I GET A SECOND OPINION?

Yes. You can get a second opinion about your behavioral health needs. If you would like help finding a provider or have questions about getting a second opinion, call us at **801-213-4104** or toll-free at **1-833-981-0212**.



# EMERGENCY SERVICES

## WHAT IS AN EMERGENCY?

- When you think your life is in danger.
- When you believe you might harm yourself or others.
- When your safety or others' safety is at risk.

## HOW DO I GET EMERGENCY SERVICES?

To get emergency care day or night, call the National Suicide Prevention Lifeline toll-free at **1-800-273-8255** and you will be connected to the Huntsman Mental Health Institute's (HMHI) crisis line. They will help you with your emergency. They might send you to a treatment provider, or send their crisis team to meet with you if needed.

If you are already getting services from a Healthy U Behavioral Health provider, you can call your provider on weekdays.

Also, day or night, you can go to any hospital emergency room (ER) for emergency care. Even if you are out of town, go to the nearest hospital ER.

You can get emergency services from any mental health or substance use disorder provider, even if they are not one of our providers.

You do not need approval from us before you get emergency services.

# MENTAL HEALTH CARE IN A HOSPITAL

## HOW DO I GET MENTAL HEALTH CARE IN A HOSPITAL?

Mental health care in a hospital after an emergency is usually called post-stabilization care services. We use the Huntsman Mental Health Institute (HMHI) for mental health care in a hospital.

Huntsman Mental Health Institute  
501 Chipeta Way  
Salt Lake City, Utah 84108

If you think you need hospital care, call us at **801-213-4104** or toll-free at **1-833-981-0212**.

If it is an emergency, go to the nearest hospital.

If a hospital other than HMHI treats your emergency and wants to admit you, the hospital must call us at **801-213-4104** or toll-free at **833-981-0212** to ask for approval. It is important to let the hospital know Healthy U Behavioral is your Medicaid behavioral health provider so they can call us if they want to admit you. We might have you stay at that hospital or we might transfer you to Huntsman Mental Health Institute.

# PAYMENT FOR SERVICES

## HOSPITAL EMERGENCY ROOM (ER) SERVICES

Will I have to pay for emergency services? You will not have to pay for emergency services in a hospital ER. If you have copays, there is a copay if you use the ER when it is not an emergency.

## MENTAL HEALTH CARE IN A HOSPITAL

Will I have to pay for mental health care in a hospital? If you have copays, the hospital can charge you a \$75 copay for each hospital stay but you will not have to pay more than the copay.

These members never have a copay:

- Alaska Natives
- American Indians
- Members on hospice care
- Members who qualify for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) benefits
- Pregnant women

You can look at Utah Medicaid's Member Guide for information on individuals and services that do not have copays.

## OUTPATIENT BEHAVIORAL HEALTH SERVICES

Will I have to pay for outpatient behavioral health services?

### Non-Emergency Outpatient Services

You might have to pay your provider for a non-emergency outpatient service if:

- You get a service that is not covered by Healthy U Behavioral or Medicaid; or
- You get a service that is not pre-approved by Healthy U Behavioral (the provider or you tried to get approval, but we denied the request or approved less than was asked for); or
- You do not go to a Healthy U Behavioral provider.

If any of the above happens, your provider might ask you to pay for the service. You should only be billed for the service if all four things below are met:

1. The provider has a written policy for billing all patients for services that are not covered, not just Medicaid patients;



2. The provider tells you before you get the service that you will have to pay for the service;
3. You agree to pay for the service; and
4. There is a written agreement signed by you and the provider that says what the service is and how much you will have to pay.

**NOTE:** If we did not approve a service you or your provider asked for, you can ask us to review this decision before you agree to pay for the service. This is called an appeal. (See section “How do I file an appeal?”)

You might also have to pay your provider for a service if:

1. You ask for and get services during an appeal with or during a Medicaid state fair hearing. You would only have to pay if the appeal or state fair hearing decision is not in your favor.
2. You are not on Medicaid when you get the service.

### **Emergency Outpatient Services**

You will not have to pay for emergency outpatient services.

### **Ambulance Services for Emergency Care**

You will not have to pay for ambulance services for emergency care.

## **COPAYMENTS**

### **ARE THERE COPAYMENTS FOR MENTAL HEALTH AND SUBSTANCE USE DISORDER (SUD) SERVICES?**

There is a \$75 copay for an inpatient hospital stay. There are no copays for outpatient mental health and SUD services.

## **CLIENT RIGHTS AND RESPONSIBILITIES**

### **WHAT ARE MY RIGHTS AS A CLIENT?**

As a client, you have the right to:

- Have information presented to you in a way that you will understand, including help with language needs, visual needs, and hearing needs.
- Be treated fairly and with respect.
- Have your health information kept private.
- Receive information on all treatment alternatives.

- Make decisions about your health care, including agreeing to treatment.
- Take part in decisions about your medical care, including refusing service.
- Ask for and receive a copy of your medical record.
- Have your medical record corrected if needed.
- Receive medical care regardless of race, color, national origin, sex, sexual orientation, gender identity, religion, age, or disability (See Non-Discrimination Policy, below).
- Obtain information about grievances, appeals, and hearing requests.
- Ask for more information about our plan structure and operations.
- Get emergency and urgent care 24 hours a day, seven days a week.
- Use any hospital or other medical facility for emergency services.
- Not feel controlled or forced into making medical decisions.
- Ask how we pay your providers, including your right to request information about physician incentive plans.
- Create an advance directive that tells doctors what kind of treatment you do and do not want in case you become too sick to make your own decisions.
- Be free from any form of restraint or seclusion used as a means of force, discipline, convenience, or retaliation. This means you cannot be held against your will. You cannot be forced to do something you do not want to do.
- Use your rights at any time and not be treated badly if you do. This includes treatment by our health plan, your medical providers, or the State Medicaid agency.
- Be given health care services that are the right kind of services based on your needs.
- Get covered services that are easy to get to and are available to all members. All members include those who may not speak English very well, or have physical or mental disabilities.
- Get a second opinion at no charge.
- Get the same services offered under the fee-for-service Medicaid program.
- Get covered services out-of-network if we cannot provide them.
- Get health care services that are close to where you live.

## WHAT ARE MY RESPONSIBILITIES AS A CLIENT?

- Keep your appointments and cancel 24 hours in advance.
- Read your Member Handbook.
- Show your State Medicaid ID card each time you receive medical care.
- Cancel doctor appointments 24 hours ahead of time, if needed.
- Be on time for your appointments. If you are a parent/guardian and your child is in treatment, you are responsible to make sure your child comes for scheduled



appointments.

- Participate with your therapist in your treatment plan and care.
- Tell the Healthy U Behavioral Case Worker, Care Manager, your therapist, and your Medicaid eligibility worker of changes in your address, phone number, insurance, or financial situation.
- Tell medical staff of all medications you are taking. This includes medical and mental health prescriptions and over-the-counter medications, herbs, etc.
- Complete surveys about the services we give you.
- Respect the staff and property at your provider's office.
- Respect the comfort and confidentiality of clients and staff.
- Use providers in the Healthy U Behavioral network.
- Follow the rules of your plan and program participation guidelines.
- Notify your treatment provider when you want to stop getting services.

## ADVERSE BENEFIT DETERMINATION

### WHAT ARE ADVERSE BENEFIT DETERMINATIONS?

An adverse benefit determination is when we (Healthy U Behavioral):

1. Deny payment or pay less for services that were provided.
2. Deny a service or approve less than you or your provider asked for.
3. Lower the number of services we had approved or end a service that we had approved.
4. Deny payment for a covered service.
5. Deny payment for a service that you may be responsible to pay for.
6. Did not make a decision on an appeal or grievance when we should have. See appeal and grievance time frames below.
7. Did not offer your first appointment within the required amount of time for emergency, urgent, or non-urgent care and you are not happy with this. (*See Getting Behavioral Health Services*)
8. Deny your request to dispute a financial liability.
9. Do not reach a decision about approving a subcontractor who provides your services within a 14-day required time frame.

If your provider reduces or stops a service previously approved and you agree with the change, it is not an adverse benefit determination. It is only an adverse benefit determination if you tell us you do not want the change.

**How will I know if Healthy U Behavioral is taking an adverse benefit determination?** You have a right to receive a Notice of Adverse Benefit Determination if one of the above occurs.

If you did not receive one, contact Member Services at **801-213-4104** or **833-981-0212** and we will send you a notice.

## APPEALS

### WHAT IS AN APPEAL?

An appeal is our review of an adverse benefit determination to see if the right decision was made.

### WHO CAN ASK FOR AN APPEAL?

You, your legally authorized representative, or your provider can ask for an appeal.

### WHEN DO I HAVE TO ASK FOR AN APPEAL?

Your Notice of Adverse Benefit Determination letter will give complete information on the appeal process, including how soon you must tell us you want an appeal. In most situations, you must tell us you want an appeal within 60 days from the date on the Notice of Adverse Benefit Determination letter.

### HOW DO I FILE AN APPEAL?

You, your provider, or any authorized representative may file an appeal.

An appeal form can be found on our website at [apps.uhealthplan.utah.edu/UHealthPlansForms/Appeals/Create](https://apps.uhealthplan.utah.edu/UHealthPlansForms/Appeals/Create).

A request for an appeal will be accepted by filling out an appeal form on our website, by fax at 801-281-6121, over the phone at **801-213-4104** or **833-981-0212**, or by mail:

Healthy U Behavioral

Appeals Team

6053 Fashion Square Drive, Suite 110 Murray, UT 84107

Submit the appeal within 60 days from the date on the notice of adverse benefit determination.

Help will be provided to enrollees, upon request, in carrying out the required steps to file an appeal (e.g., interpreter services, TTY). If you need help filing an appeal request, call us at **801-213-4104** or **833-981-0212**.

If you are deaf or hard of hearing, you can call Utah Relay Services at **711** or **1-800-346-4128**.



## HOW LONG DOES AN APPEAL TAKE?

We will give you a written appeal decision within 30 calendar days from the date we get your oral or written appeal.

Sometimes we might need more time to make our decision. We can take up to another 14 calendar days to make a decision. If we need more time, we will let you know in person or through a phone call as quickly as possible, or in writing within two days.

## CAN I GET A DECISION ON AN APPEAL MORE QUICKLY?

If waiting 30 days for our decision will harm your health, life, or ability to maintain or regain maximum function, you can ask for a quick appeal. This means we will make a decision within 72 hours.

If we deny your request for a quick appeal, we will also let you know in person or through a phone call as soon as possible, or in writing within two days.

## HOW DO I REQUEST A QUICK APPEAL?

You can ask for a quick appeal over the phone or in writing. Call us at **801-213-4104** or **833-981-0212** or write to us at:

Healthy U Behavioral

Appeals Team

6053 Fashion Square Drive, Suite 110 Murray, UT 84107

## WHAT HAPPENS TO MY BENEFITS WHILE I APPEAL?

Your benefits will not be stopped because you asked for an appeal.

If your request for an appeal is because we told you that we are going to reduce, suspend, or stop a service, let us know if you want to keep getting that service. You must let us know if you want to keep getting the service by one of the timeframes below (whichever is later):

- Within 10 calendar days of the date on the notice of adverse benefit determination; or
- Before the date your benefits will be reduced, suspended, or stopped.

You may have to pay for the service if the appeal decision is not in your favor.

A request to keep getting benefits does not impact the time you have to file an appeal. You have 60 days from the date on the notice of adverse benefit determination to file an appeal.

# MEDICAID FAIR HEARINGS

## WHAT CAN I DO IF I AM UNHAPPY WITH THE APPEAL DECISION?

If you are unhappy with our appeal decision or we cannot make a decision on the appeal as soon as Medicaid wants us to, this is what you can do:

You, your legally authorized representative, or your provider can ask for a fair hearing with Medicaid. Our appeal decision letter will tell you how and when to ask for the fair hearing. We will also give you the fair hearing request form to send to Medicaid. You must ask for a fair hearing in writing using the form we give you. The form must be sent to Medicaid within 120 calendar days of our appeal decision.

At a fair hearing, you can speak for yourself, or you can have a relative, friend, lawyer, or anyone else you would like to speak for you. Before and during the fair hearing, you, and any person helping you, can present documents. Also, you, and any person helping you, can look at all the documents that will be used at the fair hearing.

If you have questions or need help filling out the fair hearing request form, call us at **801-213-4104** or toll-free at **1-833-981-0212**.

### **CAN I CONTINUE MY SERVICES IF I ASK FOR A FAIR HEARING?**

If the fair hearing is about our decision to reduce or stop services we have previously approved, you need to check the box on the fair hearing form asking that the services continue. If you request a fair hearing in the required timeframe and ask that we keep giving you services, we will continue to give you services. You might have to pay for these services if the fair hearing decision is not in your favor. If the fair hearing is about any other kind of adverse benefit determination, you can discuss your services during the fair hearing.

## **COMPLAINTS/GRIEVANCES**

### **WHAT IF I HAVE A COMPLAINT ABOUT HEALTHY U BEHAVIORAL OR MY PROVIDER?**

If you have a complaint about anything other than an adverse benefit determination, this is called a grievance. You have the right to file a grievance. This gives you a chance to tell us about your concerns.

You can file a grievance about issues related to your care such as:

- When you do not agree with the amount of time that the plan needs to make an authorization decision
- Whether care or treatment is appropriate
- Access to care
- Quality of care
- Staff attitude
- Rudeness
- Any other kind of problem you may have had with us, your health care provider, or services



## WHO CAN FILE A GRIEVANCE?

You, your legally authorized representative, or your provider can file a grievance.

## HOW DO I FILE A GRIEVANCE?

You can file a grievance at any time. If you need help filing a grievance, call us at **801-213-4104** or **833-981-0212**. If you are deaf or hard of hearing, you can call Utah Relay Services at **711** or **1-800-346-4128**, and they can help you file your grievance with us.

You can file a grievance either over the phone or in writing. To file by phone, call Member Services at **801-213-4104** or **833-981-0212**. To file a grievance in writing, please send your letter to:

ATTN: Grievances

Healthy U Behavioral

6053 S. Fashion Square Dr., Ste. 110 Murray, UT 84107

Online Form: [apps.uhealthplan.utah.edu/UHealthPlansForms/Complaints/Create](https://apps.uhealthplan.utah.edu/UHealthPlansForms/Complaints/Create)

Fax: 801-587-9958

If you do not want to talk to us about your grievance, you can call Medicaid weekdays toll-free at **1-800-662-9651**.

## WHAT IF I HAVE QUESTIONS OR NEED HELP FILING MY GRIEVANCE?

You can call us at **801-213-4104** or toll-free at **1-833-981-0212**.

## WHEN WILL HEALTHY U BEHAVIORAL TELL ME THE DECISION ON MY GRIEVANCE?

We will let you know our decision about your grievance within 90 calendar days from the day we get your grievance. Sometimes we might need more time to make our decision. We can take up to another 14 calendar days to make a decision. If we need more time to make a decision, we will let you know in person or through a phone call as soon as possible, or in writing within two days.

# ADVANCE DIRECTIVE

## WHAT IS AN ADVANCE DIRECTIVE?

An advance directive is a legal document that allows you to make choices about your health care ahead of time. There may be a time when you are too sick to make decisions for yourself. An advance directive will make your wishes known if you cannot do it yourself.

There are four types of advance directives:

- Living Will (End of life care)
- Medical Power of Attorney

- Mental Health Care Power of Attorney
- Pre-Hospital Medical Care Directive (Do Not Resuscitate)

**Living Will:** A living will is a document that tells doctors what types of service you do or do not want if you become very sick and near death, and cannot make decisions for yourself.

**Medical Power of Attorney:** A Medical Power of Attorney is a document that lets you choose a person to make decisions about your health care when you cannot do it yourself.

**Mental Health Care Power of Attorney:** A Mental Health Care Power of Attorney names a person to make decisions about your mental health care in case you cannot make decisions on your own.

**Pre-Hospital Medical Care Directive:** A Pre-Hospital Medical Care Directive tells providers if you do not want certain life-saving emergency care that you would get outside a hospital or in a hospital emergency room. It might also include services provided by other emergency response providers, such as firefighters or police officers. You must complete a special orange form. You should keep the completed orange form where it can be seen.

To find out more information on how to create one of the advance directives, please go to [uhealthplan.utah.edu/medicaid](http://uhealthplan.utah.edu/medicaid) and select "Education & Resources" or call **801-587-2851**. To file a complaint regarding advance directives, contact the State Survey Agency at **801-538-6158** or **800-662-4157**.

## PRIVACY

### WHO CAN READ OR GET COPIES OF MY MEDICAL RECORD?

We follow federal laws about the privacy of your behavioral health record. We do not use or share your protected health information except as federal law allows. When allowed by federal law, only the minimum necessary information is shared. We will talk to you about privacy when you first come to your provider or us.

## HEALTHY U BEHAVIORAL INFORMATION

### WHAT IF I WANT TO KNOW MORE ABOUT HOW HEALTHY U BEHAVIORAL IS SET UP AND WORKS?

We will answer any questions you have about how we are set up, including questions about our grievance system, billing practices, confidentiality policy, and how we choose providers and what is required of them. Call us at **801-213-4104** or toll-free at **1-833-981-0212**.



# REPORTING FRAUD, WASTE, OR ABUSE

## WHAT IS HEALTH CARE FRAUD, WASTE, AND ABUSE?

Doing something wrong related to Medicaid could be fraud, waste, or abuse. We want to make sure that health care dollars are used the right way. Fraud, waste, and abuse can make health care more expensive for everyone.

Let us know if you think a health care provider or a person getting Medicaid is doing something wrong.

Some examples of Fraud, Waste and Abuse are:

### By a Member

- Changing the amount or number of refills on a prescription
- Giving their Medicaid card to someone else to use
- Lying to get medical or pharmacy services

### By a Provider

- Billing for services that have not been provided
- Not reporting a patient's misuse of a Medicaid card

## HOW CAN I REPORT FRAUD, WASTE, AND ABUSE?

If you think there might be fraud, waste, or abuse, call us at **435-634-5606** or toll-free at **1-800-574-6763**.

You can also contact:

### Internal- Healthy U Behavioral

Healthy U Compliance Department

Email: [healthplanscompliance@utah.edu](mailto:healthplanscompliance@utah.edu)

Phone: **(801) 213-4104** or **toll-free (833) 981-0212**

### Provider Fraud

The Office of Inspector General (OIG)

Email: [mpi@utah.gov](mailto:mpi@utah.gov)

Toll-Free Hotline: **1-855-403-7283**

## Member Fraud

Department of Workforce Services Fraud Hotline

Email: [wsinv@utah.gov](mailto:wsinv@utah.gov)

Telephone: **1-800-955-2210**

You do not need to give your name to file a report. Your benefits will not be affected if you file a report.

# CARE MANAGEMENT

## WHAT IS CARE MANAGEMENT?

Care management is provided by a team of nurses and social workers who help you with your health care and social needs. They help members find the right care, in the right place, and for the best value. Care managers work hard to get to know you and your health care goals. To speak with a Care Manager, call our Care Management team at **801-587-2851** or toll-free **883-981-0212 Option 3**.

Healthy U Care Management programs include:

- **Adult and Pediatric Complex Care Management:**  
This program focuses on people who have multiple chronic conditions. Our care managers help you navigate the health care system, find providers, and provide health education to keep you as healthy as possible.
- **Chronic Condition Care Management:**  
If you have a diagnosis of asthma, diabetes, or heart failure, our nurses can help you. They will provide education, coordinate care, and help find community resources to best fit your needs.
- **Acute Care Management:**  
If you are in the hospital, our nurses can help you make sure you have a safe discharge and that all of your questions are answered.
- **Behavioral Health Care Management:**  
If you need assistance with mental health and/or substance use treatment, our behavioral health team is here to help you get the care you need. We have an integrated approach for your medical needs as well. We will coordinate with your behavioral health plan (mental health plan) to help you get the care you need.



# WELLNESS SERVICES

## WHAT WELLNESS SERVICES ARE AVAILABLE?

Healthy U offers wellness services and programs that can help you stay healthy.

Wellness app that helps with:

- Self-directed health risk assessments
- Health challenges for sleep, exercise, nutrition and more
- Connection support for fitness tracking devices such as Garmin, Fitbit, and GoogleFit.
- Visit <https://app.1bios.co/#login> to download the app and create an account.

Wellness Incentive Programs may be offered. To learn more about current incentive programs, visit <https://uhealthplan.utah.edu/wellchild/>

# NOTICE OF PRIVACY PRACTICES

## WE PROTECT YOUR PRIVACY

We strive to protect the privacy of your personal health information (PHI) in the following ways:

- We have strict policies and rules to protect PHI.
- We only use or give out your PHI with your consent.
- We only give out PHI without your approval when allowed by law.
- We protect personal information by limiting access to those who need it to do given tasks and through physical safeguards.

You have the right to look at your PHI.

## HOW DO I FIND OUT MORE ABOUT PRIVACY PRACTICES?

Contact Member Services if you have questions about the privacy of your health records. They can help with privacy concerns you may have about your health information. They can also help you fill out the forms you need to use your privacy rights.

The complete notice of Privacy Practices is available at [uhealthplan.utah.edu/pdf/notice-of-privacy.pdf](https://uhealthplan.utah.edu/pdf/notice-of-privacy.pdf). You can also ask for a hard copy of this information by contacting Member Services at **801-213-4104** or **833-981-0212**.

# NON-DISCRIMINATION POLICY

Healthy U complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. We do not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

We 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)

Language services to people whose primary language is not English, such as:

- Qualified interpreters
- Information written in other languages

If you need these services contact Healthy U Behavioral at **1-801-213-4104**.

If you believe we have failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with our Civil Rights Coordinator by:

Mail: 6053 Fashion Square Drive, Suite 110 Murray, UT 84107

Phone: **1-801-587-2835 (TTY 711)**

Fax: 801-281-6121

Email: [healthplanscompliance@utah.edu](mailto:healthplanscompliance@utah.edu)

You can file a grievance in person or by mail, fax, or email. If you need assistance, the Civil Rights Coordinator is available to help you.

You may 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/smartscreen/main.jsf](https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf) or by:

Mail: U.S. Department of Health and Human Services

200 Independence Avenue, SW Room 509F, HHH Building

Washington, D.C. 20201

Phone: **1-800-368-1019, 1-800-537-7697 (TDD)**.

Complaint forms are available at [hhs.gov/civil-rights/filing-a-complaint/index.html](https://hhs.gov/civil-rights/filing-a-complaint/index.html).





**HEALTH PLANS**  
UNIVERSITY OF UTAH