

The Resources You Need. Right Here.

For more information, visit Ambetter. ARhealthwellness.com

If this information is not in your primary language, please call 1-877-617-0390 (TTY 1-877-617-0392).

ambette



Welcome to Ambetter from **Arkansas Health & Wellness!**

Thank you for choosing us as your health insurance plan. We're excited to help you take charge of your health and to help you lead a healthier, more fulfilling life.

As our member, you selected the Marketplace insurance plan that offers the coverage options you need that best fits your budget. No matter what Ambetter plan you chose, you're covered on essential medical care, wellness services, and more.

This Quick Reference Guide (QRG) will help you understand all of the helpful services that are available to you, based on your selected health insurance plan. Inside, you'll find important information about:

- How your plan works
- · Where to go for care
- · Information on your Member ID
- · And much more!

YOUR HEALTH IS OUR PRIORITY.

If you have questions, we're always ready to help. And don't forget to check out our online video library at Ambetter. ARhealthwellness.com. It's full of useful information.

Member Services:

1-877-617-0390 (TTY 1-877-617-0392)

Ambetter. ARhealthwellness.com

How To Contact Us

How To Contact Us

Ambetter from Arkansas Health & Wellness

P.O. Box 25538 Little Rock, AR 72221

If you want to talk, we're available Monday through Friday, 8 am to 8 pm Local Time.

Member Services	1-877-617-0390
Fax	1-877-617-0393
TTY	1-877-617-0392
Make a Payment	1-877-617-0390
Behavioral Health Services	1-877-617-0390
24/7 Nurse Advice Line	1-877-617-0390
Complaints and Appeals	1-877-617-0390
Emergency	911
Website	Ambetter.ARhealthwellness.com

When you call, have these items ready:

- · Your claim number or invoice for billing questions

Interpreter Services

Please call Member Services at 1-877-617-0390 (TTY 1-877-617-0392) for free interpreter services as needed. Interpreter services include languages other than English. This service allows you and your provider to talk about your medical or behavioral health concerns in a way that is most comfortable for you. Members who are blind or visually impaired and need help with interpretation can call Member Services for an oral interpretation.

How Your Plan Works

Learn about how to get the most out of your plan. Set up your online member account to get started. Refer to your Evidence of Coverage (EOC) for more information by visiting: https://ambetter. ARhealthwellness.com/ health-plans.html



Want more information about our service area and innetwork providers? Visit guide.ambetterhealth.com.

So You Have Health Insurance — Now What?

Having health insurance is exciting. To get the most out of your plan, complete this simple checklist. If you need assistance, call Member Services at 1-877-617-0390 (TTY 1-877-617-0392). We're available Monday through Friday, 8 am to 8 pm Local Time.

- Set up your secure online member account. Do this by visiting the "Member Login" page on Ambetter. ARhealthwellness.com. Your member account stores all of your plan's benefits and coverage information in one place. It gives you access to your Schedule of Benefits, claims information, this QRG and more.
- Our My healthpays' program helps you focus on your total health. When you complete healthy activities, such as eating right, moving more, saving smart and living well, you can earn reward points! All you have to do is log in to your online member account to get started.
- Pick your primary care provider (PCP). Just log in to your member accoutn and view a list of Ambetter providers in your area by using the *Provider Directory* available on our website. Remember, your PCP, also known as a personal doctor, is the main doctor you will see for most of your medical care. This includes your checkups, sick visits and other basic health needs.
- Schedule your annual wellness exam with your PCP. After your first checkup, you'll earn 500 points in my healthpays' rewards! And anytime you need care, call your PCP and make an appointment!



Member Services

We want you to have a great experience with Ambetter. Our Member Services Department is always here for you. We can help you:

- · Understand how your plan works
- · Learn how to get the care you need
- · Find answers to any questions you have about health insurance
- See what your plan does and does not cover
- · Pick a PCP that meets your needs
- · Get more information about helpful programs, like Care Management
- Find other healthcare providers (like in-network pharmacies and labs)
- · Request your member ID or other member materials

You must call Arkansas DHS to:

- · Update your enrollment information such as your date of birth, address, or when reporting an income or life change.
- · End your coverage with Ambetter.

Visit https://humanservices.arkansas.gov/divisions-shared-services/medicalservices/healthcare-programs/arhome or call 1-888-987-1200 7 am to 9 pm 7 days a week. When you're connected, be ready to provide your state and then ask for a representative to help you.

We Care About Your Health



Have total or partial hearing loss? Call 1-877-617-0390 (TTY 1-877-617-0392) or visit Ambetter. ARhealth wellness.com

Your Ambetter Member Welcome Packet

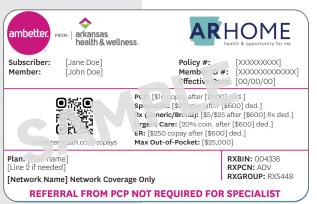
When you enroll with Ambetter, you will receive a Member Welcome Packet. Your Welcome Packet includes basic information about the health plan you selected. You will receive your Welcome Packet before your Ambetter health coverage begins.

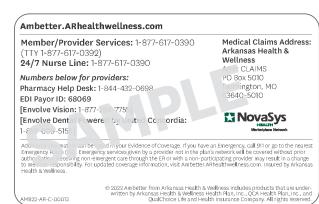
Your Ambetter Member ID

Your member ID is proof that you have health insurance with us. And it's very important. Here are some things to keep in mind:

- · Keep this card with you at all times.
- · You will need to present this card anytime you receive healthcare services.
- You will receive your Member ID(s) before your Ambetter health coverage begins. If you don't get your Member ID before your coverage begins, call Member Services at 1-877-617-0390 (TTY 1-877-617-0392). We will send you another card.

To download your Digital ID or request a replacement ID, please log in to your secure member account.





Front

Back

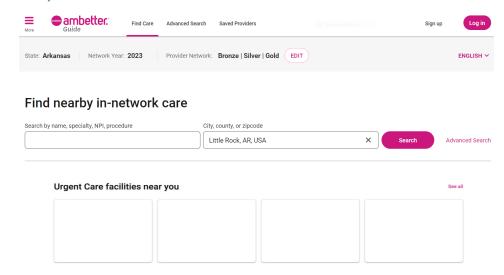
Refer to your Evidence of Coverage (EOC) for more information on Dependent Member Coverage.

Membership & Coverage Information

We're proud to offer our quality service. Our local provider network is the group of doctors, hospitals and other healthcare providers who have agreed to provide you with your healthcare services.

To view our online Provider Directory, visit guide.ambetterhealth.com and use our Ambetter Guide - the Ambetter provider search tool. It can help you find a Primary Care Physician (PCP), pharmacy, lab, hospital, or specialist.

A Provider Directory is a listing of providers near you. If you would like a printed copy of this listing, please call Member Services at 1-877-617-0390 (TTY 1-877-617-0392).



Finding the Right Care





Get the right care at the right place! When you need medical care, get to know your options. They include: Calling our 24/7 Nurse Advice Line, making an appointment with your Primary Care Physician (PCP), visiting an Urgent Care or going to the Emergency Room (ER). Your decision will depend on your specific situation.



To find another provider or specialist in our network, check out our provider list on the *Find a Doctor* page at guide.ambetterhealth.com

Your Primary Provider (PCP)

Your primary care provider is your main doctor — the one you see for regular checkups. If your condition isn't life-threatening, calling your PCP should be your first choice. Use our online Ambetter Guide to find an in-network provider in your area.

Visit or call your PCP if you need:

- · Your annual wellness checkup & vaccinations
- · Advice about your overall health
- Help with medical problems such as cold, the flu and fevers
- · Treatments for an ongoing health issue like asthma or diabetes

Selecting A Different PCP

We want you to be happy with the care you receive from our providers. To search our online Provider Directory, visit guide.ambetterhealth.com.

If you would like to change your PCP for any reason, log in to your online member account and select "Change PCP" under the Doctors tab.

For new members, visit https://ambetter.ARhealthwellness.com/resources/newmembers/get-started.html.

*If you choose a nurse practitioner or physician assistant as your PCP, your benefit coverage and co-payment amounts are the same as they would be for services from other participating providers. Review your Schedule of Benefits for more information.



When To Go To An Urgent Care Center

An urgent care center provides fast, hands-on care for illnesses or injuries that aren't life threatening but still need to be treated within 24 hours. Typically, you will go to an urgent care center if your PCP cannot get you in for a visit right away.

Common urgent care issues include:

- Sprains
- · Ear infections
- · High fevers
- · Flu symptoms with vomiting

If you think you need to go to an urgent care center, follow these steps:

- · Call your PCP. Your PCP may give you care and directions over the phone or direct you to the right place for care.
- If your PCP's office is closed, you can do one of two options:
 - 1. Locate an in-network urgent care center by using our online Ambetter Guide at Guide. Ambetterhealth.com, type in "Urgent Care" and your zip code, then click search.
 - 2. Call our 24/7 nurse advice line at 1-877-617-0390 (TTY/TDD 1-877-617-0392). A nurse will help you over the phone or direct you to other care. You may have to give the nurse your phone number.

Check your Schedule of Benefits to see how much you must pay for urgent care services. After your visit, let your PCP know you were seen at an urgent care and why.

When To Go To The FR

Anything that could endanger your life (or your unborn child's life, if you're pregnant) without immediate medical attention is considered an emergency situation. Emergency services treat accidental injuries or the onset of what appears to be a medical condition. We cover emergency medical and behavioral health services both in and out of our service area. We cover these services 24/7. Emergency services are covered in-network and out-of-network. When receiving Emergency Care at either an in-network or out-of-network provider the only bill you should receive is for any applicable cost share. (e.g. co-pay, deductible or co-insurance)

Refer to your Evidence of Coverage for information on Protection from Balance Billing.



Remember to select an innetwork PCP! Check out our Provider Directory for a full list of your options and their contact information. It's on the Find a Doctor page of guide.ambetterhealth.com.

Refer to your Evidence of Coverage for more information on your Provider Directory.

Every time you receive care, make sure to stay within the Ambetter Network.

Access to Care





Call our 24/7 nurse advice line anytime: 1-877-617-0390 (TTY 1-877-617-0392).



Go to the ER if you have:

- · Broken bones
- · Bleeding that won't stop
- · Labor pains or other bleeding (if you're pregnant)
- · Severe chest pains or heart attack symptoms
- · Overdosed on drugs
- Ingested poison
- Bad burns
- · Shock symptoms (sweat, thirst, dizziness, pale skin)
- · Convulsions or seizures
- Trouble breathing
- · The sudden inability to see, move or speak
- · Gun or knife wounds

Don't go to the ER for:

- · Flus, colds, sore throats or earaches
- · Sprains or strains
- Cuts or scrapes that don't require stitches
- · More medicine or prescription refills
- Diaper rash

What if you need Emergency Care out of our service area?

Our plan will pay for emergency care while you are out of the country or state. If you go to an out-of-network ER and you aren't experiencing a true emergency, you may be responsible for any amounts above what your plan covers. Those additional amounts could be very large and would be in addition to your plan's cost sharing and deductibles.

Learn more about your options by visiting https://Ambetter.ARhealthwellness. com/resources/handbooks-forms/where-to-go-for-care.html

24/7 Nurse Advice Line

Our free 24/7 nurse advice line makes it easy to get answers to your health questions. You don't even have to leave home! Staffed by licensed nurses, our 24/7 nurse advice line runs all day, every day. Learn more about your options by calling 1-877-617-0390 (TTY 1-877-617-0392) or by visiting Ambetter. ARhealthwellness.com.



If you need help deciding where to go for care, call our 24/7 nurse advice line at 1-877-617-0390 (TTY 1-617-0392). In an emergency, call 911 or head straight to the nearest emergency room. Seek ER services only if your life is at risk and you need immediate, emergency medical attention.





Have your member ID and photo ID ready. You will need them whenever you receive any type of care. Urgent care is not emergency care. Only go to the ER if your doctor tells you to or if you have a lifethreatening emergency.



To find another provider or specialist in our network, check out our provider list on the *Find a Doctor* page at guide.ambetterhealth.com.



Always make sure your providers are in-network. Using in-network providers can save you money on your healthcare costs.

WHAT TO DO IF YOU RECEIVE A BILL FROM A PROVIDER OR PHYSICIAN:

When seeing an in-network provider, including but not limited to physicians, hospitals, pharmacies, facilities and health care professionals, you are responsible for any applicable cost sharing amounts (e.g. co-pay, deductible or co-insurance). Your member responsibility can be viewed on the explanation of benefits. This can be found by logging into your secure account at Member.AmbetterHealth.com.

As a member of Ambetter, non-network providers should not bill you for covered services for any amount greater than your applicable in-network cost sharing responsibilities when:

- · You receive a covered emergency service or air ambulance service from a non-network provider. This includes services you may get after you are in stable condition, unless the non-network provider obtains your written consent to bill you for their service.
- · You receive non-emergency ancillary services (emergency medicine, anesthesiology, pathology, radiology, and neonatology, as well as diagnostic services (including radiology and laboratory services)) from a non-network provider at a network hospital or network ambulatory surgical facility.
- · You receive other non-emergency services from a non-network provider at a network hospital or network ambulatory surgical facility, unless the nonnetwork provider obtains your written consent to bill you for their service.

If you receive a bill for services in the above situations, please contact Member Services at 1-877-617-0390 (TTY 1-877-617-0392).

Refer to your Evidence of Coverage (EOC) for more information on Balance Billing and Eligible Service Expenses.

Member Complaints, Grievances, & **Appeals Process**



We have steps for handling any problems you may have. To keep you satisfied, we provide processes for filing appeals or complaints. YOu ahve the right to file a complaint, file an appeal, and right to an external review. You ahve the right to appeal any determination where services were denied, reduced or suspended. This includes your right to appeal to an external independent review. We will resolve all appeal requests in a time that is appropriate to your request and condition.

Instruction on this process can be found in the Evidence of Coverage (EOC) and the Summary of Benefits (SBC): ambetter. ARhealthwellness.com/health-plans.

Grievance & Appeals submission PDF: ambetter. ARhealthwellness.com/ resources/handbooks-forms.html.

Mail or Fax all Appeals to:

Ambetter from Arkansas Health & Wellness

Attn: Appeals & Grievances Department

P.O. Box 25538 Little Rock, AR 72221 Fax: 1-866-811-3255

Member Services: 1-877-617-0390 (TTY 1-877-617-0392)

Utilization Management



What Is Utilization Management?

We want to make sure you get the right care and services. Our utilization management (UM) process is designed to make sure you get the treatment you need.

We will approve all covered benefits that are medically necessary. Our Utilization Management Department checks to see if the service needed is a covered benefit. If it is covered, the UM nurses check to see if the service is medically necessary. They do this by reviewing the medical notes and talking with your doctor. Ambetter does not reward or pay our doctors or employees for approving or denying services. All decisions are based on appropriate care and coverage.

Ambetter's utilization review includes services to ensure the care you receive is the best way to help improve your health condition. For questions about UM, please call 1-877-617-0390 (TTY 1-877-617-0392).

Member Resources & Rewards





Visit us online at Ambetter, ARhealth wellness.com

Our website helps you get the answers you need to get the right care, the right way, including an online member account for you to check the status of your claim, view your Evidence of Coverage (EOC) or understand your out-of-pocket costs, copays and progress towards meeting your annual deductible.

Get Online And Get In Control

Did you know you can always access helpful resources and information about your plan? It's all on our website! Visit Ambetter. ARhealthwellness.com and take charge of your health.

On our website, you can:

- · Find a PCP
- · Locate other providers, like a pharmacy
- · Find health information
- · Learn about programs and services that can help you get and stay healthy.

Log into your online member account to:

- · Pay your monthly bill
- · Print an ID or request a replacement ID
- · View your claims status and payment information
- · Change your PCP
- · Find pharmacy benefit information
- · Send us a secure email
- Read your member materials (your Evidence of Coverage, Schedule of Benefits)
- Participate in the My health pays rewards program
- Complete your Wellbeing Survey
- · Contact a nurse online
- Review out-of-pocket costs, copays and progress towards deductibles.

my health pays Rewards Program

Don't miss out on the exciting My health pays program and start earning points today!

Log in now and activate your account to start earning more rewards.

- 1. Log into your online Ambetter member account or create your account now.
- 2. Click Rewards on the home page.
- 3. Accept Terms & Conditions. Then, start earning points!!

If you already activated your account, log back in to complete healthy activities and keep earning!

Funds expire immediately upon termination of insurance coverage.

Connecting Your Healthcare:



NEW OPTIONS FOR MANAGING YOUR DIGITAL MEDICAL RECORDS

The Interoperability and Patient Access rule made it easier to access your health information when you need it most. You have access on your mobile device so you can manage your health better and know what healthcare resources are available to you. You can also request that we receive your health records from a prior health plan. To get started on either of these, visit Ambetter. AR healthwellness.

Imagine:

- You go to a new healthcare provider: you can pull up your health history from the past five years on your mobile device.
- · You can check an up-to-date provider directory: find a provider who can use your health history to diagnose you and ensure you receive the right
- · You have a question about a claim: you can go to your computer and see if it's paid, denied, or still being processed.
- Taking your health history data with you as you move between health plans.

You Can Easily Find Information* on:

- Claims (paid and denied)
- · Specific parts of your clinical information
- · Pharmacy drug coverage
- · Healthcare providers

^{**}Information is available for dates of service on or after January 1, 2016

Words To Know

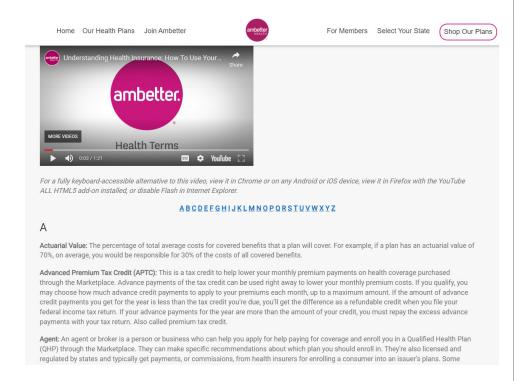


For additional definitions, please refer to your Evidence of Coverage.

Your Healthcare Glossary

We know that health insurance can feel confusing sometimes. To help you out, we put together a list of words you may need to know as you read through this QRG.

Learn more about these healthcare terms by visiting: https://www. ambetterhealth.com/learn-more/words-to-know.html



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Statement of Non-Discrimination

Ambetter from Arkansas Health & Wellness complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Ambetter from Arkansas Health & Wellness does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Ambetter from Arkansas Health & Wellness:

- Provides 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)
- Provides free 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 Ambetter from Arkansas Health & Wellness at 1-877-617-0390 (TTY 1-877-617-0392).

If you believe that Ambetter from Arkansas Health & Wellness has 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: Ambetter from Arkansas Health & Wellness Appeals Unit, P.O. Box 25538, Little Rock, AR 72221, 1-877-617-0390 (TTY 1-877-617-0392), Fax 1-866-811-3255. You can file a grievance by mail, fax, or email. If you need help filing a grievance, Ambetter from Arkansas Health & Wellness is available to help you. You can 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 https://ocrportal.hhs.gov/ocr/portal/lobby.isf, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD).

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.





