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NOTICE OF PRIVACY PRACTICES

EFFECTIVE DATE: APRIL 14, 2003

THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

We are required by law to protect the privacy of your health information. We are also required to send you this notice, which explains how we may use information about you and when we can give out or “disclose” that information to others. You also have rights regarding your health information that are described in this notice.

The terms “information” or “health information” in this notice include any personal information that is created or received by a health care provider or health plan that relates to your physical or mental health condition, the provision of health care to you, or the payment for such health care.

We have the right to change our privacy practices. If we do, we will provide the revised notice to you within 60 days, by direct mail, or post it on our website at www.gihealthplan.org.

How We Use or Disclose Information

We must use and disclose your health information to provide information:

- To you or someone who has the legal right to act for you (your personal representative).
- To the Secretary of the Department of Health and Human Services, if necessary, to make sure your privacy is protected, and
- Where required by law.

We have the right to use and disclose health information to pay for your health care and operate our business. For example, we may use your health information:

- **For Payment** of premiums due us and to process claims for health care services you receive.
- **For Treatment.** We may disclose health information to your physicians or hospitals to help them provide medical care to you.
- **For Health Care Operations.** We may use or disclose health information as necessary to operate and manage our business and to help manage your health care coverage. For example, we might conduct, or arrange for medical review, legal services, and auditing functions, including fraud and abuse detection or compliance programs.
- **To Provide Information on Health Related Programs or Products** such as alternative medical treatments and programs or about health related products and services.
- **To Plan Sponsors.** If your coverage is through an employer group health plan, we may share summary health information and enrollment and disenrollment information with the plan sponsor. In addition, we may share other health information if the plan sponsor agrees to special restriction on its use and disclosure of the information.

- **For Appointment Reminders.** We may use health information to contact you for appointment reminders with providers who provide medical care to you.
We may use or disclose your health information for the following purposes under limited circumstances:
 - **To Persons Involved With Your Care.** We may use or disclose your health information to a person involved in your care, such as a family member, when you are incapacitated or in an emergency, or when permitted by law.
 - **For Public Health Activities** such as reporting disease outbreaks.
 - **For Reporting Victims of Abuse, Neglect, or Domestic Violence** to government authorities, including a social service or protective service agency.
 - **For Health Oversight Activities** such as governmental audits and fraud and abuse investigations.
 - **For Judicial or Administrative Proceedings** such as in response to a court order, search warrant or subpoena.
 - **For Law Enforcement Purposes** such as providing limited information to locate a missing person.
 - **To Avoid a Serious Threat to Health Safety** by, for example, disclosing information to public health agencies.
 - **For Specialized Government Functions** such as military and veteran activities, national security and intelligence activities, and the protective services for the President and others.
 - **For Workers Compensation** including disclosures required by state workers compensation laws of job-related injuries.
 - **For Research Purposes** such as research related to the prevention of disease or disability, if the research study meets all privacy law requirements.
 - **To Provide Information Regarding Decedents.** We may disclose information to a coroner or medical examiner to identify a deceased person, determine a cause of death, or as authorized by law. We may also disclose information to funeral directors as necessary to carry out their duties.
 - **For Organ Procurement Purposes.** We may use or disclose information for procurement, banking, or transplantation of organs, eyes, or tissue.

If none of the above reasons apply, **then we must get your written authorization to use or disclose your health information.** If a use or disclosure of health information is prohibited or materially limited by other applicable law, it is our intent to meet the requirements of the more stringent law. Once you give us authorization to release your health information, we cannot guarantee that the person to whom the information is provided will not disclose the information. You may take back or “revoke” your written authorization, unless we have already acted based on your authorization. To revoke an authorization, contact the phone number listed on your ID card.

What Are Your Rights

The following are your rights with respect to your health information. Please note that in some situations, state law may prohibit us from releasing your dependent's information to you.

- **You have the right to ask to restrict** uses or disclosures of your information for treatment, payment, or health care operations. You also have the right to ask to restrict disclosures to family members or to others who are involved in your health care or payment access that may authorize certain restrictions.

Please note that while we will try to honor your request and will permit requests consistent with our policies, we are not required to agree to any restriction.

- **You have the right to ask to receive confidential communications** of information in a different manner or at a different place (for example, by sending information to a P.O. Box instead of your home address).
- **You have the right to see and obtain a copy** of health information that may be used to make decisions about you, such as claims and case or medical records. You also may receive a summary of this health information. You must make a written request to inspect and copy your health information. In certain limited circumstances, we may deny your request to inspect and copy your health information.
- **You have the right to ask to amend** information we maintain about you if you believe the health information about you is wrong or incomplete. We will notify you within 30 days if we deny your request and provide a reason for our decision. If we deny your request, you may have a statement of your disagreement added to your health information. We will notify you in writing of any amendments we make at your request. We will provide updates to all parties that have received information from us within the past two years (seven years for support organizations).
- **You have the right to receive an accounting** of disclosures of your information made by us during the six years prior to your request. This accounting will not include disclosures of information: (1) made prior April 14, 2003, (2) for treatment, payment, and health care operations purposes; (3) to you or pursuant to your authorization; and (4) to correctional institutions or law enforcement officials; and (5) other disclosures that federal law does not require us to provide an accounting.
- **You have the right to a paper copy of this notice.** You may ask for a copy of this notice at any time. Even if you have agreed to receive this notice electronically, you are still entitled to a paper copy of this notice. This notice is also available at our website www.ghealthplan.org.

Exercising Your Rights

- **Contacting your Health Plan.** If you have any questions about this notice or want to exercise any of your rights, please call the phone number on your ID card, or (608) 775-8754.
- **Filing a Complaint.** If you believe your privacy rights have been violated, you may file a complaint with us at the following address: Privacy Officer, 1836 South Avenue, La Crosse, WI 54601.

You may also notify the Secretary of the U.S. Department of Health and Human Services of your complaint. **We will not take any action against you for filing a complaint.**

FINANCIAL INFORMATION PRIVACY NOTICE

We are committed to maintaining the confidentiality of your personal financial information. For the purposes of this notice, “personal financial information” means information, other than health information, about an insured or an applicant for health care coverage that identifies the individual, is not generally publicly available and is collected from the individual or is obtained in connection with providing health care coverage to the individual.

We collect personal financial information about you from the following sources:

- Information we receive from you on applications or other forms such as name, address, age, and social security number, and
- Information about your transactions with us, our affiliates or others, such as premium payment history.

We do not disclose personal financial information about our insureds or former insureds to any third party, except as required or permitted by law. We restrict access to personal financial information about you to employees, affiliates and service providers who are involved in administering your health care coverage or providing services to you. We maintain physical, electronic, and procedural safeguards that comply with federal standards to guard your personal financial information.

We may disclose personal financial information to financial institutions which perform services for us. These services may include marketing our products or services or joint marketing of financial products and services.

Gundersen Lutheran Health Plan

BadgerCare Plus

Member Handbook

INTERPRETER SERVICES:

English – For help to translate or understand this, please call 1-866-537-1477 or 608-775-0150. The TTY number for the hearing impaired is 1-800-947-3529.

Spanish – Si necesita ayuda para traducir o entender este texto, por favor llame al teléfono 1-866-537-1477 or 608-775-0150 (TTY 1-800-947-3529).

Russian – Если вам не всё понятно в этом документе, позвоните по телефону 1-866-537-1477 or 608-775-0150 (TTY 1-800-947-3529).

Hmong – Yog xav tau kev pab txhais cov ntaub ntauv no kom koj totaub, hu rau 1-866-537-1477 or 608-775-0150 (TTY 1-800-947-3529).

Interpreter services are provided free of charge to you.

**IMPORTANT GUNDERSEN LUTHERAN HEALTH PLAN
TELEPHONE NUMBERS:**

Customer Service: 1-866-537-1477 or 608-775-0150. Customer Service is available Monday through Friday 8:00 am to 5:00 pm.

Emergency Number: 1-800-858-1050 or 608-775-4454. Call 24 hours a day, seven (7) days a week

The TTY number for the hearing impaired is 1-800-947-3529.

WELCOME:

Welcome to Gundersen Lutheran Health Plan. As a member of Gundersen Lutheran Health Plan, you will receive all your health care from Gundersen Lutheran network doctors and hospitals. See the Gundersen Lutheran Health Plan Provider Directory for a list of these providers. You may also call our Customer Service Department at 1-866-537-1477 or 608-775-0150. Providers not accepting new patients are marked in the Provider Directory.

YOUR FORWARD HEALTH OR FORWARD ID CARD:

Always carry your Forward Health or Forward ID card with you, and show it every time you get care. You may have problems getting care or prescriptions if you do not have your card with you. Also, bring any other health insurance cards you may have.

PRIMARY CARE PHYSICIAN (PCP)

It is important to call your primary care physician (PCP) or clinic first when you need care. This doctor will manage all your health care. If you think you need to see another doctor, or a specialist, ask your PCP. Your PCP will help you decide if you need to see another doctor, and give you a referral. Remember, you must get approval from your PCP before you see another doctor. You can choose your primary care physician (PCP) from those available (NOTE: For women you may also see a women's health specialist, for example an OB/GYN doctor or a nurse midwife, without a referral, in addition to choosing your PCP). There are HMO doctors who are sensitive to the needs of many cultures. To choose a PCP, or to change to a different PCP, call our Customer Service Department at 1-866-537-1477 or 608-775-0150.

EMERGENCY CARE:

Emergency care is care needed right away. This may be caused by an injury or a sudden illness. Some examples are:

- Choking
- Severe or unusual bleeding
- Trouble breathing
- Suspected poisoning
- Serious broken bones
- Suspected heart attack
- Unconsciousness
- Suspected stroke
- Severe burns
- Convulsions
- Severe pain
- Prolonged or repeated seizures

If you need emergency care, go to a Gundersen Lutheran provider for help if you can. BUT, if the emergency is severe, go to the nearest provider (hospital, doctor or clinic). You may want to call 911 or your local police or fire department emergency services if the emergency is severe.

If you must go to a another hospital or provider, call Gundersen Lutheran Health Plan at 1-866-537-1477 or 608-775-0150 as soon as you can and tell us what happened. This is important so we can help you get follow up care.

Remember, hospital emergency rooms are for true emergencies only. Call your doctor or our 24-hour emergency number at 1-800-858-1050 or 608-775-4454 before you go to the emergency room, unless your emergency is severe.

URGENT CARE:

Urgent Care is care you need sooner than a routine doctor's visit. Urgent care is not emergency care. Do not go to a hospital emergency room for urgent care unless your doctor tells you to go there. Some examples of urgent care are:

- Most broken bones
- Minor cuts
- Sprains
- Bruises
- Non-severe bleeding
- Most drug reactions
- Minor burns

If you need urgent care call our Nurse Advisor at 608-775-4454, 800-858-1050 or TTY/TDD 800-947-3529, 608-782-3784. We will tell you where you can get care. You must get urgent care from Gundersen Lutheran Health Plan doctors unless you get our approval to see a non-Gundersen Lutheran Health Plan doctor.

Remember do not go to a hospital emergency room for urgent care unless you get approval from Gundersen Lutheran Health Plan.

You must get urgent care from Gundersen Lutheran doctors unless you get our approval to see a doctor who is not in the Gundersen Lutheran network.

HOW TO GET MEDICAL CARE WHEN YOU ARE AWAY FROM HOME:

Follow these rules if you need medical care but are too far away from home to go to your regular doctor or clinic.

For severe emergencies, go to the nearest hospital, clinic, or doctor.

For urgent or routine care away from home, you must get approval from us to go to a different doctor, clinic or hospital. This includes children who are spending time away

from home with a parent or relative. Call us at 1-866-537-1477 or 608-775-0150 for approval to go to a different doctor, clinic, or hospital.

PREGNANT WOMEN AND DELIVERIES:

You must go to a Gundersen Lutheran network hospital to have your baby. Talk to your Gundersen Lutheran doctor to make sure you understand which hospital you are to go to when it's time to have your baby.

Also, talk to your doctor if you plan to travel in your last month of pregnancy. Because we want you to have a healthy birth and a good birthing experience, it may not be a good time for you and your unborn child to be traveling. We want you to have a healthy birth and your Gundersen Lutheran doctor knows your history and is the best doctor to help you have a healthy birth. Do not go out of area to have your baby unless you have Gundersen Lutheran Health Plan approval.

WHEN YOU MAY BE BILLED FOR SERVICES:

It is very important to follow the rules when you get medical care so you are not billed for services. You must receive your care from Gundersen Lutheran Health Plan providers and hospitals unless you have our approval. The only exception is for severe emergencies.

If you travel outside of Wisconsin and need emergency services, health care providers can treat you and send claims to Gundersen Lutheran Health Plan. You will have to pay for any service you get outside Wisconsin if the health care provider refuses to submit claims or refuses to accept Gundersen Lutheran Health Plan payment as payment in full.

Gundersen Lutheran Health Plan does not cover any service, including emergency services, provided outside of the United States, Canada and Mexico.

BILLING ENROLLEES:

Covered and Non-Covered Services

Under BadgerCare Plus – Standard Plan, if you receive a bill for services, call our Customer Service Department at 1-866-537-1477 or 608-775-0150. You do not have to pay for covered services that are provided by a BadgerCare Plus certified provider and that Gundersen Lutheran Health Plan is required to provide you unless prior authorization is denied and you are told there will be a charge for the service before it is provided.

Generally, charging a member for a non-covered service is allowed, except for certain non-covered services or activities related to covered services, like missed appointments, telephone calls and translation services.

Under BadgerCare Plus – Benchmark Plan, Gundersen Lutheran Health Plan providers and subcontractors may bill you for deductibles for covered services that are provided by a BadgerCare Plus certified provider.

You may request non-covered services from providers, and providers may collect payment for non-covered services from you if you accept responsibility for payment and make payment arrangements with the provider. Providers may bill you up to their usual and customary charges for non-covered services.

Copayments

Under the BadgerCare Plus - Standard Plan, Gundersen Lutheran Health Plan will not apply copayments.

Under BadgerCare Plus – Benchmark Plan, Gundersen Lutheran Health Plan and its providers and subcontractors may bill you for copayments for covered services or for other medical services that are provided by a BadgerCare Plus certified provider. The following members are exempt from copayments:

- Pregnant women,
- Members under 19 years of age who are members of a federally recognized tribe.

OTHER INSURANCE:

If you have other insurance in addition to Gundersen Lutheran Health Plan, you must tell your doctor or other provider. Your health care provider must bill your other insurance before billing Gundersen Lutheran Health Plan. If your Gundersen Lutheran Health Plan doctor does not accept your other insurance, call the HMO Enrollment Specialist at 1-800-291-2002. The Enrollment Specialist can tell you how to match your HMO enrollment with your other insurance so you can use both insurance plans.

SERVICES COVERED BY GUNDERSEN LUTHERAN HEALTH PLAN:

Gundersen Lutheran Health Plan covers all medically necessary services. Some services may require a doctor's order or a prior authorization. Check with your doctor or call Gundersen Lutheran Health Plan if you have questions. Covered services include but are not limited to:

- Ambulance (Emergencies only)
- Alcohol and Other Drug Abuse (AODA) services
- Case management services
- Family planning services and supplies
- HealthCheck for members under 21 years of age
- Inpatient and outpatient hospital services
- Inpatient care at institutions for mental disease (care for persons 22-64 years of age is not included)
- Mental health treatment
- Laboratory and X-ray services
- Vision services
- Podiatry services
- Abortions when necessary to protect the health or life of the patient or when the pregnancy was the result of sexual assault or incest

The following services are covered when a doctor gives a written order:

- Medical supplies and equipment
- Prostheses and other corrective support devices
- Hearing aids and other hearing services
- Personal care and independent nursing services
- Home Health care
- Physical therapy
- Occupational therapy
- Speech therapy
- Nursing Home services
- Medical Nutrition counseling
- Hospice
- Transportation to obtain medical care

MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES:

Gundersen Lutheran Health Plan provides mental health and substance abuse (drug and alcohol) services to all enrollees. If you need assistance finding a provider for these services, call our Customer Service Department at 1-866-537-1477 or 608-775-0150.

FAMILY PLANNING SERVICES

We provide confidential family planning services to all enrollees. This includes minors. If you do not want to talk to your primary care doctor about family planning, call our Customer Service Department at 1-866-537-1477 or 608-775-0150. We will help you

choose a Gundersen Lutheran family planning doctor who is different from your primary care doctor.

We encourage you to receive family planning services from a Gundersen Lutheran Health Plan doctor, that way we can better coordinate all your health care. Federal law allows members to choose their provider, including physicians and family planning clinics, for reproductive care and supplies. Therefore, you can also go to any family planning clinic that will accept your Forward Health or Forward ID card even if the clinic is not part of the Gundersen Lutheran Provider Network.

DENTAL SERVICES:

You may get dental services from any dentist who will accept your Forward Health or Forward ID card. Your dental services are provided by the State, not Gundersen Lutheran Health Plan.

DENTAL EMERGENCY:

A dental emergency is an immediate dental service needed to treat dental pain, swelling, fever, infection, or injury to the teeth. For help with a dental emergency call 1-866-537-1477 or 608-775-0150 or our 24-hour emergency number at 1-800-858-1050 or 608-775-4454. You have the right to obtain treatment for your dental emergency within 24 hours after receipt of your request.

CHIROPRACTIC SERVICES:

You may get chiropractic services from any chiropractor who will accept your Forward Health or Forward ID card. Your chiropractic services are provided by the State, not Gundersen Lutheran Health Plan.

PHARMACY BENEFITS:

Your prescriptions and certain over the counter items are provided by the State, not Gundersen Lutheran Health Plan.

You may receive a prescription from a Gundersen Lutheran doctor, specialist or dentist. You can fill your prescription at a Gundersen Lutheran pharmacy or any pharmacy that is a provider for BadgerCare Plus.

Please show your Forward Health or Forward ID card to the pharmacy when you get your prescriptions filled.

HEALTHCHECK:

HealthCheck is a preventive health checkup program for enrollees under the age of 21. The HealthCheck program covers complete health checkups. These checkups are very important for those under 21. The doctor wants to see those under 21 for regular checkups, not just when they are sick.

The HealthCheck health program has three purposes:

1. To find and treat health problems for those under 21.
2. To let you know about the special health services for those under 21.
3. To make those under 21 eligible for some health care not otherwise covered.

The HealthCheck program covers the medical care for health problems found during the checkup including medical care, eye care and dental care.

The HealthCheck checkup includes:

- Health and developmental history (including anticipatory guidance)
- Unclothed physical examination
- Vision screening
- Hearing screening
- Dental screening and a referral to a dentist beginning at age three
- Immunizations appropriate for age (shots)
- Blood and urine lab tests (including blood lead level testing when appropriate for age)

Gundersen Lutheran Health Plan will help arrange for transportation for HealthCheck visits. Call our Customer Service Department at 1-866-537-1477 or 608-775-0150.

For help with scheduling a HealthCheck exam, or for more information call our Customer Service Department at 1-866-537-1477 or 608-775-0150.

TRANSPORTATION:

Bus or taxi rides to receive care are arranged by your county Department of Social or Human Services. Call them for information about arranging a ride. Non-emergency transportation is not a covered benefit.

SPECIAL MEDICAL VEHICLE (SMV):

Gundersen Lutheran Health Plan covers transportation by special vehicle for those in wheelchairs. We may also cover this service for others if your doctor asks for it. Call our Customer Service Department at 1-866-537-1477 or 608-775-0150 if you need this service.

BadgerCare Plus – Benchmark Members

Non-emergency transportation is not a covered benefit.

AMBULANCE:

Gundersen Lutheran Health Plan covers ambulance service for emergency care. We may also cover this service at other times, but you must have approval for all non-emergency ambulance trips. Call our Customer Service Department at 1-866-537-1477 or 608-775-0150, or our 24-hour emergency number at 1-800-858-1050 or 608-775-4454 for approval.

IF YOU MOVE:

If you are planning to move, contact your county Department of Social or Human Services. If you move to a different county, you must also contact the Department of Social or Human Services in your new county to update your eligibility.

If you move out of the Gundersen Lutheran Health Plan service area, call the HMO Enrollment Specialist at 1-800-291-2002. Gundersen Lutheran Health Plan will only provide emergency care if you move out of our service area. The Enrollment Specialist will help you choose an HMO that serves your area.

HEALTH INSURANCE AFTER YOUR ELIGIBILITY ENDS:

You have the right to purchase a private health insurance policy from Gundersen Lutheran Health Plan when your eligibility ends. Call our Customer Service Department at 1-866-537-1477 or 608-775-0150. If you decide to purchase a policy from us, you have 30 days after the date your eligibility ends to apply.

SECOND MEDICAL OPINION:

A second medical opinion on recommended surgeries may be appropriate in some cases. Contact your doctor or our Customer Service Department for information.

HMO EXEMPTIONS:

An HMO exemption means you are not required to join an HMO to receive your health care benefits. Most exemptions are granted for only a short period of time so you can complete a course of treatment before you are enrolled in an HMO. If you think you need an exemption from HMO enrollment, call the HMO Enrollment Specialist at 1-800-291-2002 for more information.

LIVING WILL OR POWER OF ATTORNEY FOR HEALTH CARE:

You have a right to make decisions about your medical care. You have a right to accept or refuse medical or surgical treatment. You also have the right to plan and direct the types of health care you may receive in the future if you become unable to express your wishes. You can let your doctor know about your feelings by completing a living will or power of attorney for health care form. Contact your doctor for more information.

RIGHT TO MEDICAL RECORDS:

You have the right to ask for copies of your medical record from your provider(s). We can help you get copies of these records. Please call 1-866-537-1477 or 608-775-0150 for help. Please note: You may have to pay to copy your medical record. You also may correct wrong information in your medical records if your doctor agrees to the correction.

GUNDERSEN LUTHERAN HEALTH PLAN MEMBER ADVOCATE:

Gundersen Lutheran Health Plan has a Member Advocate to help you get the care you need. The Advocate can answer your questions about getting health care from Gundersen Lutheran providers. The Advocate can also help you solve any problems you may have getting health care from Gundersen Lutheran providers. You can reach the Advocate by calling Customer Service at 1-800-866-537-1477 or 608-775-0150.

STATE OF WISCONSIN HMO OMBUDS PROGRAM:

The State has Ombuds who can help you with any questions or problems you have as an HMO member. The Ombuds can tell you how to get the care you need from your HMO. The Ombuds can also help you solve problems or complaints you may have about the HMO Program or your HMO. Call 1-800-760-0001 and ask to speak to an Ombuds.

COMPLAINTS, GRIEVANCES AND APPEALS:

We would like to know if you have a complaint about your care at Gundersen Lutheran. Please call 1-866-537-1477 or 608-775-0150 if you have a complaint. Or you can write to us at:

Gundersen Lutheran Health Plan
1836 South Avenue
Mailstop: NCA2-01
La Crosse, WI 54601

If you want to talk to someone outside of Gundersen Lutheran Health Plan about the problem, call the HMO Enrollment Specialist at 1-800-291-2002. The Enrollment Specialist may be able to help you solve the problem, or can help you write a formal grievance to Gundersen Lutheran Health Plan or to the BadgerCare Plus program.

The address to complain to the Wisconsin BadgerCare Plus Program is:

BadgerCare Plus
Managed Care Ombuds
P. O. Box 6470
Madison, WI 53716-0470
(800) 760-0001

If your complaint or grievance needs action right away because a delay in treatment would greatly increase the risk to your health, please call Gundersen Lutheran Health Plan as soon as possible at 1-866-537-1477 or 608-775-0150.

We cannot treat you differently than other members because you file a complaint or grievance. Your health care benefits will not be affected.

You have the right to appeal to the State of Wisconsin Division of Hearings and Appeals (DHA) for a fair hearing if you believe your benefits are wrongly denied, limited, reduced, delayed or stopped by Gundersen Lutheran Health Plan. An appeal must be made no later than 45 days after the date of the action being appealed. If you appeal this action to DHA before the effective date, the service may continue. You may need to pay for the cost of services if the hearing decision is not in your favor.

If you want a fair hearing, send a written request to:

Department of Administration
Division of Hearings and Appeals
P. O. Box 7875
Madison, WI 53707-7875

The hearing will be held in the county where you live. You have the right to bring a friend or be represented at the hearing. If you need a special arrangement for a disability, or for English language translation, please call (608) 266-3096 (voice) or (608) 264-9853 (hearing impaired).

We cannot treat you differently than other members because you request a fair hearing. Your health care benefits will not be affected. If you need help writing a request for a Fair Hearing, please call either the BadgerCare Plus Ombudsman at 1-800-760-0001 or the HMO Enrollment Specialist at 1-800-291-2002.

PHYSICIAN INCENTIVE PLAN:

You are entitled to ask if we have special financial arrangements with our physicians that can affect the use of referrals and other services you might need. To get this information, call our Customer Service Department at 1-866-537-1477 or 608-775-0150 and request information about our physician payment arrangements.

PROVIDER CREDENTIALS:

You have the right to information about our providers that includes the provider's education, board certification and recertification. To get this information, call our Customer Service Department at 1-866-537-1477 or 608-775-0150.

MEMBER RIGHTS:

- You have the right to ask for an interpreter and have one provided to you during any BadgerCare Plus covered service.
- You have the right to receive the information provided in this member handbook in another language or another format.
- You have the right to receive health care services as provided for in federal and state law. All covered services must be available and accessible to you. When medically appropriate, services must be available 24 hours a day, 7 days a week.
- You have the right to receive information about treatment options including the right to request a second opinion.
- You have the right to make decisions about your health care.
- You have the right to be treated with dignity and respect.
- You have the right to be free from any form of restraint or seclusion used as means of force, control, ease or reprisal.

YOUR CIVIL RIGHTS:

Gundersen Lutheran Health Plan provides covered services to all eligible members regardless of:

- Age
- Race
- Religion
- Color
- Disability
- Sex
- Sexual Orientation

- National Origin
- Marital Status
- Arrest or Conviction Record
- Military Participation

All medically necessary covered services are available to all members.

All services are provided in the same manner to all members.

All persons or organizations connected with Gundersen Lutheran Health Plan who refer or recommend members for services shall do so in the same manner for all members.

Translating or interpreting services are available for those members who need them. This service is free.