



What You Need to Know

You have the right to ...

- **Choose a health plan, primary care provider (PCP) and request a care coordinator that fits your needs.** If you are not happy with your health plan in the first 90 days of Medicaid coverage, you may pick a different plan. You can also request to change your care coordinator or PCP. Health plans can be changed during the annual open enrollment period as well.
- **Have an appointment when you need one.** You can also request an appointment with a specialist, with a prior authorization, when needed.
- **Request an emergency prescription be filled for 72 hours** for a drug requiring prior authorization if a prior authorization cannot be obtained outside of health plan business hours. If you run into any issues, ask the pharmacy to contact the health plan.
- **Request that your health plan reimburse you for driving to medically necessary covered services** or arrange for non-emergent medical transportation if you qualify.
- **File a grievance through the Member Service department at your plan if you are not satisfied with how you are treated.** You can expect to be notified of the outcome.
- **Know why your plan denies service/treatment and take action to reverse a decision.** Have your provider request a peer-to-peer review and/or appeal if your plan has denied, stopped, or reduced treatment or services you *and* your provider think you should get. Request a fair hearing after completing the plan’s appeal process if your plan continues to deny a service you *and* your provider think you should get. Look in your health plan Member Handbook under **Grievances and Appeals** or visit your health plan’s web page to learn more.

Need help?

- **Call your health plan** and inquire if you are not sure what to do about a problem. Your health plan will help you with urgent issues and will assist in getting the services you need.

Health Plan Name	Health Plan Contact Information
AmeriHealth Caritas NH	https://www.amerihealthcaritasnh.com Member Services: 1-833-704-1177 (TTY: 1-855-534-6730)
New Hampshire Healthy Families	http://www.nhhealthyfamilies.com Member Services: 1-866-769-3085 (TTY/TDD: 1-855-742-0123)
Well Sense Health Plan	https://www.wellsense.org Member Services: 1-877-957-1300 (TTY/TDD: 711)

- **Do you still have a problem with your health plan?** You have a place to go – New Hampshire’s Department of Health and Human Services’ Customer Service Center at **1-844-275-3447**. **But, before you contact the Center, take the first step to contact your health plan and exercise your rights for problem solving!**