

## CHOOSING AND GETTING THE MOST FROM YOUR MANAGED CARE PLAN



DIVISION OF  
SPECIALIZED CARE FOR CHILDREN

### **What is managed care?**

Managed care is a type of health insurance responsible for both the financing and the delivery of health services. It provides comprehensive health care to an enrolled population at a predetermined price. Members pay fixed, periodic fees and in return receive the health care services their chosen primary care physician deems necessary and appropriate. Enrollment requires the individual to choose a primary care physician from a list of the plan's physicians. The individual must then seek health care service or preapproved physician referrals through that primary care physician. Managed care plans include HMOs (Health Maintenance Organizations), PPOs (Preferred Provider Organizations) and POS (Point of Service) plans.

### **What are some advantages of managed care plans?**

- Comprehensive benefits.

Physician office visits for preventive care (periodic checkups) as well as treatment of acute illnesses, treatment of chronic medical disorders requiring ongoing treatment and hospitalization are usually covered.

- Low out-of-pocket expense.

Families may have co-payments for services but they are usually much less than the deductibles required by traditional indemnity insurance plans.

- Less paperwork

There are usually no claims forms to complete.

- Medical care is coordinated.

The primary care physician coordinates the medical services needed. The physicians in the network usually communicate with each other.



- The next thing you should do is find out about the plan's benefits and care providers.

Are the physicians presently caring for your family included in the plan's provider network?

If not, can they join the network? If they cannot join the network, you will need to consider changing physicians.

Will your child with special health care needs be able to receive needed specialty care?

Does the plan have pediatric specialists? Can the specialist be your child's primary care provider?

Can your physician refer you to physicians outside the provider network if the care you need is not available within the network? If so, will it cost you more?

Are there network providers in your community or will you have to travel to receive needed care?

Does the plan provide for the equipment needed by your child?

Once the original purchase is made, does the plan provide for equipment repairs or replacements?

Are there limits on the amount of any benefit you will need?

Many plans restrict certain benefits, like physical therapy, to a maximum number of visits per year.

## GETTING THE MOST FROM THE PLAN YOU CHOOSE

- **Understand your responsibilities**

Read your benefits booklet carefully. Be sure to get referrals from your primary care physician before making appointments with other physicians or health care providers. Your primary care physician will manage your care and will work with you to make medical decisions. Most managed care plans will pay for care by specialists only if you are referred by your primary care physician.

- **Use network providers.**

Know the names of the physicians and other health care providers in your managed care network. Network providers can change without notice. Check before receiving services to be sure your providers are still in the network.

- **Keep information about your health insurance policy close at hand.**

Know your policy's effective date.

Know where your policy is located. Keep your policy number and enrollment codes with you.

When you write to your insurance agent or company, be sure to include your policy number and any codes you are required to use.

Follow all specified procedures within timeframes required.

- **If your insurance is provided by your employer, know who your insurance representative is at work and how to reach him/her. Another resource could be the Member Services Department of the insurance company your employer contracts with.**

Keep these phone numbers handy.

- **Understand your plan's appeal process.**

Appeal all denials. The process for this is usually outlined in your benefits booklet or policy.

- **Understand your child's medical treatment needs.**

Meet with your child's primary care physician to discuss your child's medical treatment plan. Ask for support in obtaining the specialized services needed. If possible, show how paying for a particular service or item will result in a positive outcome for your child or how it will reduce health care costs in the long run.

Work with your primary care provider to develop a long range plan for anticipated medical needs, including special equipment. Identify the steps needed to obtain payment from your managed care plan for the needed services and equipment.

- **Keep copies of all records and related correspondence.**

**For more information, please contact the DSCC office listed below:**