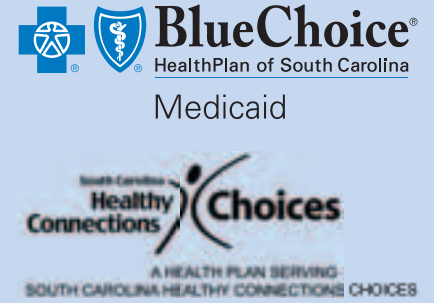


MyHealth

Serving BlueChoice HealthPlan Members



Don't Get Fooled

Top Vaccine Myths



Do vaccines hurt kids? A vaccine is a shot or nasal spray that helps teach your body how to fight certain diseases. Some parents have heard stories that vaccines cause problems. You might have heard them too.

But chances are those stories are just myths. Vaccines are actually very safe. What's risky is skipping vaccines. Why?

Vaccines help your child's immune system – the parts of the body that work together to protect health – fight infections. They also protect kids from more than a dozen diseases. Some of these diseases can harm a child's brain. Others are even deadly.

So take a little time to learn the facts about vaccines. Don't be confused by myths like these:

Myth: Vaccines don't matter anymore. The diseases they prevent are too rare.

This simply isn't true. Some diseases aren't very common, but this doesn't mean the germs that cause them are gone. The germs still exist, and they can make kids who aren't vaccinated very sick. That's why some children still get measles and end up in the hospital.

Myth: Chickenpox isn't serious, so my child doesn't need the vaccine.

Again, not true. Before there was a chickenpox vaccine, about 50 kids died every year from this disease. Many more got very sick.

Myth: Some vaccines cause autism.

A while ago, mercury was used in vaccines as a preservative. And rumors that it causes autism are still around. But no valid research has ever shown that the rumors are true. Also, mercury hasn't been used in most vaccines since 2001. But autism rates have still increased. The causes of autism are not known. Most research points to genetic factors, or certain genes, as one of the main causes. Also, there could be things in the environment that trigger or affect it.

Myth: It's not safe for babies to have so many shots.

It's true that there are more vaccines now than even just a few years ago. This is good news, though. It means your child is protected from more diseases than ever before. Plus, studies show that kids' bodies can handle many shots at once. That includes newborns.



Myth: Older kids and teens don't need vaccines anymore.

Wrong! Preteens, teens and college students all need vaccines. Since some vaccines that younger children get can wear off, older kids need booster shots (extra doses) to stay protected from diseases. There also are certain vaccines made just for preteens and teens. The primary care provider (PCP) can tell you which vaccines are right for your older child.

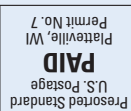
So be sure your child, preteen or teen gets all the vaccines and shots he or she needs. Ask your PCP if you need help. You also can ask your PCP any other questions you might have about vaccines.

Sources: American Academy of Pediatrics; Centers for Disease Control and Prevention, www.cdc.gov; U.S. Food and Drug Administration, www.fda.gov

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COLUMBIA SC 29202-3148
PO BOX 100148
OF SOUTH CAROLINA
BLUE CHOICE HEALTH PLAN

Medicaid



New Vision and Dental Benefits

Check out these new member benefits and learn more about the new member rewards program. **See page 8.**

Kids Need Checkups and Screenings

When you think of checkups, are shots the first thing that comes to mind? While kids do need checkups to get their shots, there are other important tests kids need at checkups. For example, at age 3 your child should have a vision and hearing test. Doctors also check how kids develop as they grow. Your child needs these checkups, or well visits, often. How often?

The American Academy of Pediatrics says to get Well-Child visits at these ages:

- Birth
- 3 to 5 days
- 1 month
- 2 months
- 4 months
- 6 months
- 9 months
- 12 months
- 15 months
- 18 months
- 24 months
- 30 months
- Ages 3 to 21: at least one well visit per year

The good news is that we pay for well visits for children. To schedule one, call your child's PCP. Be sure to ask if your child has had all needed shots and vaccines.

Sources: American Academy of Pediatrics Periodicity Schedule, www.aap.org; Bright Futures (2008)



ADHD? Don't Forget the Follow-Up Doctor Visit

Has your child just been prescribed a drug for attention-deficit/hyperactivity disorder (ADHD) or attention-deficit disorder? If so, you need to follow up with a visit to your child's doctor **within 30 days of when your child started taking the drug**. It's important for the doctor to make sure the drug is working the way it should.

If your child just resumed taking a drug for ADHD, you also should schedule a doctor visit within 30 days of when your child started taking the drug again.

Going to this doctor visit is crucial because some drugs don't work right away. Your child's doctor may need to try different drug types and amounts. Also, some drugs can have strong side effects that affect appetite, mood or sleep. To keep your child safe, check in with your doctor once your child has been taking the drug for a few days.

Source: American Academy of Child and Adolescent Psychiatry Practice Parameter for the Assessment and Treatment of Children and Adolescents with ADHD, www.aacap.org/galleries/PracticeParameters/JAACAP_ADHD_2007.pdf

What Utilization Management Means and How It Works

You see a PCP or doctor for help deciding what care is best. We want you to have the care you need. For some services, care or procedures, your PCP or doctor may have to ask your medical group or us for an OK so that services will be paid or covered by us. This process is called Utilization Management, or UM.

What You Need to Know

- We make coverage decisions based on care and services you need and the benefits you have.
- We do not reward doctors or other people who make UM decisions for issuing denials of care or coverage.
- We do not provide financial incentives to UM decision-makers to encourage decisions that result in less care given.

To Reach UM

You can learn more about how we make coverage decisions and how we OK payment for care. If you have questions about UM, call toll-free **1-866-781-5094** and ask for someone in UM. Customer Care Center hours are 8 a.m. to 6 p.m. UM hours are 8 a.m. to 5 p.m. You can call even if you are outside of the service area.

After Hours

If you call after hours, you can leave a message, and someone will call you back during business hours. Any staff member who calls you about a UM issue will give you his or her name and title and the name of our company.

Share for Better Care

When you see a specialist or go to the emergency room, do you tell your PCP? You play a big role in making sure you get the right care for any problems you have.

Be sure to:

- Tell your PCP and other doctors about each other.
- Tell your doctors, especially your PCP, when you are prescribed medicine from other providers, are hospitalized or see a specialist.
- Sign a form for the release of medical records so that your information can be shared by different providers.

Do You Have Diabetes?

Make Testing Part of Your Game Plan

Having diabetes means more than keeping track of what you eat and getting plenty of exercise. It also means you need special checkups and tests.

When your blood sugar is high, it can lead to serious problems. You can develop kidney disease, eye issues, high blood pressure, heart trouble or worse problems. Getting diabetes tests and keeping your numbers at goal can help lower your risk of serious problems. Check to see if you've had these tests. Ask your PCP or specialist about them. Take this chart with you to the doctor's office.

With the right planning, you come out a winner!

Test/Activity/Checkup	What It Is and How Often You Need It	What Result Do You Want?
<input type="checkbox"/> A1C	Blood test to measure blood sugar levels in the last three months At least twice a year	A1C below 7%
<input type="checkbox"/> Cholesterol screening	A test to check: • LDL cholesterol (bad cholesterol) • HDL cholesterol (good cholesterol) • Triglycerides Once a year	LDL below 100 mg/dl HDL (male) above 40 mg/dl HDL (female) above 50 mg/dl Triglycerides below 150 mg/dl
<input type="checkbox"/> Micro-albumin	Urine test to check how well your kidneys are working Once a year	Less than 30 ug/mg
<input type="checkbox"/> Dilated retinal eye exam	Check for eye damage or disease from diabetes Once a year	No sign of disease
<input type="checkbox"/> Foot exam	Check feet for problems from diabetes At least once a year	No foot problems
<input type="checkbox"/> Blood pressure	Test blood pressure using a cuff around your arm Every doctor visit	Blood pressure below 130/80
<input type="checkbox"/> Weight and body mass index (BMI)	BMI is calculated based on your weight and height Every doctor visit	BMI 25 or less
<input type="checkbox"/> Dental checkup	Look for dental problems Twice a year	No dental problems
<input type="checkbox"/> Flu vaccine	Shot or nasal spray Every year	Prevent flu
<input type="checkbox"/> Pneumonia vaccine	Shot At least once in a lifetime	Prevent pneumonia
<input type="checkbox"/> Depression screening	Talk to your doctor if you have: • Little interest or joy in doing things • Feelings of sadness or hopelessness	Feel better about yourself, which can help you manage your diabetes

Sources: American Diabetes Association, "Executive Summary: Standards of Medical Care in Diabetes – 2010"; Centers for Disease Control and Prevention, www.cdc.gov; National Diabetes Fact Sheet, www.cdc.gov/diabetes

Get an Eye Exam Every Year if You Have Diabetes

Caring for your eyes is important, especially when you have diabetes. That's because diabetes can damage blood vessels throughout the body, including vessels in the eye's retina. This eye damage from high blood sugar is called retinopathy. It's one of the most common problems from diabetes. It can cause vision loss and lead to blindness.

To take care of your eyes if you have diabetes, schedule a **dilated retinal eye exam (DRE)** with an ophthalmologist or optometrist **every year**. A DRE is not the same as a routine eye exam. During a DRE, the doctor uses special eye drops to dilate the pupils of your eyes. Then the doctor looks through a scope to see the blood vessels in the back of each eye. He or she can find out if you are having signs of eye disease before it has a chance to get worse.

When you see an eye doctor, it is very important to explain that you have diabetes so the doctor knows to do a dilated exam. After you have your eye exam, ask the provider to send a copy of the results to your PCP or specialist. Your PCP needs to know about any changes in your eyes. He or she can change your treatment plan if needed to help prevent more damage. You and your eyes are worth it!

Sources: National Diabetes Information Clearinghouse, www.diabetes.niddk.nih.gov/dm/pubs/complications_eyes/index.htm; American Diabetes Association; BlueChoice HealthPlan Medicaid



Know Your Rights

We want you to know what your rights and responsibilities are as a member of our health plan. To read about your rights, visit www.bluechoicescmcaid.com.

- Select **Members**.
- Click **Benefits & Services**.
- Select **Member Handbook**.
- Scroll to Part 15, "Your Health Care Rights and Responsibilities."

You also can call us at **1-866-781-5094** for a paper copy.



Need a Lot of Doctor Visits or Care?

If you have a complicated health problem or have had a serious health issue, we can help you – at no cost to you! We have a system called **complex care management**. It has a long name, but the idea is simple. We help members who need a lot of doctor visits or services by working with all of their providers to make sure members get the services they need.

If you think this program might be right for you or you could use help figuring it all out, call **1-866-902-1689** (choose **option 2**). You can call us Monday through Friday from 8 a.m. to 5 p.m. You also can ask your PCP to call us for you.

Don't Lose Your Coverage!

As a member, you have to renew eligibility every 12 months. If you don't follow the instructions on the renewal packet, your benefits could end. We don't want that to happen. Here's what you should do:

- 1 Check your mail for a special packet.** You should receive it 45 days before coverage ends.
- 2 Read the information in the packet carefully, and gather what you will need.** If it's possible, mail all the information by the first day of the month prior to your renewal date.
- 3 Recheck the required return date on your packet.** If you miss the deadline or if the application is incomplete or missing information, you could end up with a break in coverage.
- 4 Mail your packet back well before the deadline.**

If you need help with the process, please call us at **1-800-574-8864**. If you have speech or hearing loss, call the TTY line at **1-866-773-9634**.

Have The Last Cigarette (TLC)

If you're ready to quit smoking, we can help you with a little **TLC**. **TLC** stands for **The Last Cigarette** program. You can take a quit smoking class or ask for our free Quit Kit.

The Quit Kit includes strategies of successful quitters, a flyer about the National Quit Line and more.

You can call **1-866-470-6261**, or call MedCall® to help you get started on your way to putting out the last cigarette. You also can call **1-800-QUIT NOW** for free one-on-one telephone support to help you during the process. Be sure to speak to your health care provider or PCP for medical assistance to help you quit smoking.

At Your Fingertips

Any time, day or night, you can find information on our website about your plan. This information is in your Member Handbook/Evidence of Coverage. To view the handbook online, go to www.bluechoicescmcaid.com.

- Click **Members**.
- Click **Benefits & Services**.
- Select **Member Handbook**.

The handbook includes:

- A list of what's covered and not covered in your plan, even things that need prior approval.
- What is not covered by us but is covered by Healthy Connections.
- How your pharmacy benefits work.
- How to get prescriptions filled and other pharmacy program information.
- What you have to pay for services, if anything.
- What happens if you go out of your service area.
- What happens if you use a provider not in your plan.
- How to learn about providers in our plan.
- How to see your PCP and get care.
- How to get specialty care and use the hospital.
- What an emergency is.
- How to get care in an emergency, after hours or out of your service area.
- How to submit a claim for covered services.
- How to make a complaint or grievance.
- What to do if you are disenrolled from your plan.
- How to learn about Advance Directives (Living Wills).
- How we make decisions about what medical technology will be covered.

If you have questions or would like a paper copy of the handbook, call **1-866-781-5094**. If you have hearing or speech loss, call the TTY line at **1-866-773-9634**.

Tests and Checkups That Matter

Don't let illness sneak up on you. Paying attention to your health, even when you feel fine, can make staying well easier. We have a chart that lists the checkups, tests and shots needed for all age groups from child to adult. This chart is called *Preventive Health Care Guidelines*. To get any of these checkups, tests or shots, just call your PCP and schedule a visit.

To view the guidelines online:

- Go to www.bluechoicesmedicaid.com.
- Click **Members**, then **Benefits & Services**.
- Then choose **Preventive Health Care Guidelines**.

You also can find the list in your Member Handbook, or call us at **1-866-781-5094** for a paper copy. For TTY, call **1-866-773-9634**.

How to Get a Paper Copy of Notices

If you have any questions, or if you would like a current paper copy of the notices or updates in this newsletter or a new Member Handbook, call **1-866-781-5094**. If you have hearing or speech loss, call the TTY line at **1-866-773-9634**.



Start Smart: See the PCP

When you first become a member, you are sent a South Carolina Healthy Connections ID card and a BlueChoice HealthPlan Medicaid ID card. Your BlueChoice HealthPlan Medicaid ID card lists a PCP, the main provider you see for care. It can be a pediatrician, family doctor, general practitioner, internist, obstetrician/gynecologist or even a clinic.

Check that the ID card has the name and phone number of a PCP on it. This is the provider you chose or the one you were assigned if you didn't choose one.

Use Your PCP

It's important that you choose a PCP and use that PCP as your personal doctor. You need to see the PCP for care or a well visit. If you see a doctor who is not your PCP without an OK from us, it may not be covered. You may have to pay for the services you get. Call your PCP for a visit or checkup.

You can change your PCP at any time for any reason. Remember, see your PCP before you go to another doctor. It's the best way to get the care you need.

A Nurse on the Phone 24/7

"I don't understand my lab results. What does this mean?"

"My daughter has a high fever. What should I do?"

If you've got questions or a health situation, it's great to know you can call MedCall® at **1-866-577-9710**. The free nurse help line is open 24 hours a day, 7 days a week.

An on-call nurse can help you:

- Answer your questions about common health issues.
- Understand what results mean.
- Figure out how to take care of a health concern.
- Find information about a diagnosis or drug.
- Locate a provider.

Teens can call with specific health questions. All calls are private and confidential. You also can listen to recorded messages on more than 300 health topics in both English and Spanish.

If You Speak a Language Other Than English

We want to help you no matter what language you prefer to speak. If you or a family member would like to use a language other than English, you can ask for an interpreter through MedCall or by calling the Customer Care Center and asking for an interpreter in your preferred language. If you have hearing or speech loss, call our TTY line at **1-800-368-4424**.

ER Visit for True Emergencies

For all true emergencies, always call 911 or go to the nearest emergency room right

away. A true emergency is a condition that comes on suddenly and shows severe symptoms. These may include intense pain or other signs that could reasonably cause you to think that if you don't get medical help soon, the following could happen:

- Your health could be put in serious danger.
- Body parts or body functions could be harmed, even permanently.
- For a pregnant woman, the health of her unborn child could be seriously harmed.

If you don't have an emergency, call your PCP first. It could save you a lot of time waiting in an emergency room (ER). If you aren't sure what to do, let a nurse from MedCall help you figure things out. Help is only a phone call away.

Notice of Privacy Practices

We can translate this at no cost. Call 1-866-781-5094; TTY 1-866-773-9634.

Podemos traducir esto gratuitamente. Llame al número de servicio de atención al cliente que aparece en su tarjeta de identificación (ID card).

Please read this carefully. This notice tells you who can see your health information with your OK and who can see it without your OK. It also tells what rights you have to see and manage your information.

Your health and financial information are personal and private. The law says that we must protect this information of our current and former members.

We get information about you from the South Carolina Department of Health and Human Services after you become eligible and enroll in our health plan. We also get medical information from your doctors, clinics, labs and hospitals so we can approve and pay for your health care.

Federal law says that we must give you this notice to help you understand what our legal duties are and how we will protect your verbal, written and electronic health information using these methods:

- Physical (files)
- Technical (passwords)
- Procedural (policies to make sure your records stay safe)

When Is It OK for Us to Use and Share Your Health Information?

We can use and share your information without your OK in some cases. Here are some examples:

For Your Medical Treatment

- To help doctors, hospitals and others get you the care you need

For Payment

- To share information with the doctors, clinics and others who bill us for your care
- When we agree to pay for medical care or services before you get them

For Health Care Operations

- To help with audits, fraud and abuse programs, planning and day-to-day work
- To review our programs and try to make them better

For Public Health Reasons

- To help public health officials stop the spread of disease or prevent an injury

To Others Acting for You

- If you tell us it is OK, we can share your health information with your family or a person chosen by you who helps with, or pays for, your health care
- If you cannot speak for yourself and it is best for you, we can share your medical information with someone who helps with, or pays for, your health care

Other Uses Allowed or Required by Law

- To help the police and other people who enforce the law
- To obey laws about reporting abuse and neglect
- To help the court when asked to do so
- To respond to legal documents
- To give information to health oversight agencies for actions such as audits or exams
- To help coroners, medical examiners or funeral directors find out your name and cause of death
- To help when you have asked to give your body parts to science
- To use for research
- To prevent or lessen a serious threat to health and safety
- To help government officials for special government functions
- To give information to workers' compensation for a work-related illness or injury

We will get an OK from you in writing before we use or share your health information for reasons not listed in this notice. You may tell us in writing that you want to take back your OK to share information. We can't take back what we used or shared when we had your OK, but we will stop using or sharing your information in the future.

What Are Your Rights?

- You can ask to look at your health information and get a copy of it. Keep in mind that we do not have a complete medical record about you. If you want a copy of your complete medical record, you should ask your doctor or health clinic.
- If you think that something is missing from, or wrong in, your health record that we have, you can ask us to make changes.
- You can ask us not to share your information in some instances. However, we do not have to agree to your request.
- You can ask us to mail health information to an address that is different from your usual address or to send the information to you in another way. We can do this for you if sending to your usual address may put you in danger.
- You can ask us to give you a list of the times (after April 14, 2003) that we have shared your health information with someone else. This will not include the times we have shared your information for the purposes of treatment, payment, health care operations, or certain other purposes.
- You can ask for a paper copy of this notice at any time, even if you asked for a notice by e-mail.

What Are Our Responsibilities?

- By law, we must keep your health information private except as listed in this notice.
- We must give you this notice that explains our legal duties about privacy.
- We must follow what we have told you in this notice.
- We must agree, when you make reasonable requests and you are in danger, to send your health information to a different address or to send it in a way other than regular mail.
- We must tell you if we cannot agree when you ask us to limit how your information is shared.
- If state laws are more strict than the rules in this notice, we will follow those laws.

What If You Have a Complaint?

If you think that we have not kept our promise to protect your health information, you may complain to us or to the Department of Health and Human Services. Nothing bad will happen to you if you complain.

How We Improve What We Do for You

Contact Information

If you have questions, complaints about our privacy rules, or want to apply your rights, please call us at **1-866-781-5094**. If you have hearing or speech loss, you may call the TTY line at **1-866-773-9634**.

We are here to help. If you still feel that we have not protected your privacy, you also may file a complaint with the Office for Civil Rights in the U.S. Department of Health and Human Services.

We reserve the right to change this notice and the way we protect your health information. If that happens, we will tell you about the changes in a newsletter. We also will post them on our website at **www.bluechoicescmedicaid.com**.

As we told you in our Health Insurance Portability and Accountability Act (HIPAA) notice, we must follow state laws that are more strict than the federal HIPAA privacy law. This notice explains your rights and our legal duties under state law.

Your Personal Information

- We may collect, use and share nonpublic personal information (PI) as described in this notice. Your PI tells us who you are and is often gathered in an insurance matter.
- We may use your PI to make judgments about your health, hobbies and habits.
- We may collect PI about you from other persons or groups such as doctors, hospitals or other carriers.
- We may share PI with persons or groups outside of our company without your OK in some cases.
- We will contact you if we take part in an action that would require us to give you a chance to opt out.
- We will tell you how you can let us know that you do not want us to use or share your PI for a given action.
- You have the right to access and correct your PI.
- We take safety measures to protect the PI we have about you.

You can ask for a state notice that is more detailed. Please call the Customer Care Center phone number printed on your ID card.

Your health is important. That is why the **Quality Improvement (QI)** program has goals to help improve program safety and value. Each year we describe what the QI program will do. We create a yearly plan. The plan helps us map out ways to provide the best care for you. Each year we also check to make sure our program and services are doing what they need for you. The QI team also reviews the services you receive:

- These services could be checkups or programs to take care of health issues such as asthma or diabetes.
- These services could be reminders. We send health reminders:
 - To children to get shots and tests.
 - To women to get a Pap test (a test to help find cervical cancer).
 - To women to get a mammogram (an X-ray picture of the breasts).

How Happy You Are

We also look at members' opinions. Through the member survey and data we have about members, we learn how the plan is doing. We look at what care and services you use. We want to know how you feel about it. What we learn helps us try to make these services better.

In a survey sent to random members, we asked how happy you were with:

- Your care, plan and doctors.

- How easy it was to get in to see the doctor.
- Customer service.

Here's some of what we learned from surveyed members:

- 81% of child members were happy with their specialist.
- 78% of adult members were happy with their personal doctor.
- 64% of child members were happy with their overall health care.
- 70% of child members were happy with customer service.
- 65% of adult members were happy with customer service.
- 54% of child members found it easy to get needed care.
- 59% of adult members found it easy to get needed care.

What We Are Working On for Next Year

We know we can do better. We will:

- Work to improve how we help members with ongoing health concerns.
- Remind women to get screenings and tests they need.
- Focus on national health issues and patient safety.
- Look at ways to help members get info you need online or in writing.

For a paper copy, please call **1-866-781-5094**. If you have hearing or speech loss, call the TTY line at **1-866-773-9634**.

What You Can Request

Members can ask for and get certain information, including:

- Names, addresses and telephone numbers of network providers. You also can find out the languages they speak besides English.
- Names of providers *not* taking new patients.
- Any limits to choosing among network providers.
- How to make a complaint or appeal.
- How to ask for a fair hearing.
- Benefits under the program in enough detail to make sure that you understand your covered benefits.
- How to get benefits, including getting your health plan's OK.
- How to get benefits, such as family planning services, from out-of-network providers; how to learn the limits to those benefits.

- How to get care in emergencies or when your doctor's office is closed.
- How to learn about any limits on what we pay for.
- The policy on referrals for specialty care and for other benefits not given by your PCP.
- How to disenroll (ask to leave the plan). You can ask to leave the plan for cause at any time. You can ask to leave the plan, without any reason, once during the first 90 days of your current 12-month enrollment period. If you don't ask to leave the plan within the first 90 days of enrollment, you will continue to be enrolled for the 12 months and may not ask to leave the plan until the first 90 days of your next enrollment period.
- Our guidelines for provider care.

If you have questions, call us toll-free at **1-866-781-5094**.

New Benefits and Rewards for Members

You should see what you've been missing – and now you can! Our benefits now include vision and dental care.

For children under age 21, you can get an eye exam once every 12 months. Children under age 21 can also get one pair of eye glasses or contact lenses with fitting or dispensing fees. This is covered by Healthy Connections. For members over age 21, you can get an eye exam once every 12 months and up to \$125 for lenses and frames every 24 months.

We also offer dental care coverage. We cover two dental cleanings in 12 months and two dental exams in 12 months for our members over age 21. We also cover certain dental X-rays, and minor fillings and extractions (pulling out teeth).

More Extras

- There's no copay for visits to the PCP or for generic drugs.
- We also have health programs for you and your family to help with long-term health concerns such as asthma and diabetes.
- Our 24-hour nurse help line is ready to answer your health questions.
- We offer free programs for new and expecting moms.
- Our member rewards program lets you earn gift cards for taking steps to be healthy.

For more resources, visit us online at www.bluechoicescmemoicaid.com. If you need to renew, see "Don't Lose Your Coverage!" on page 4 to find out what to do when you get your renewal packet.

6 Medicine Musts

Try these tips to be safe and smart when your doctor prescribes a medicine, or drug.

- 1 Ask what the common side effects (possible issues) are with the drug.
- 2 Repeat back to the PCP or other doctor what he or she tells you about what the drug is for and when and how to take it. That way you are sure you understood what the PCP told you.
- 3 When you see the doctor, go over all of the drugs you already take. Be sure to include any medicine you buy over the counter at the drug store (even those for weight loss, cold, cough or allergy). Also list any vitamins, herbs or homemade remedies you take.
- 4 If you are afraid of a drug or afraid of becoming addicted to it, talk with your doctor.
- 5 Call the doctor if you think you are having side effects.
- 6 If you want to stop taking a drug, first talk to the doctor or PCP who prescribed it.

Great Local Doctor? Do Tell!

We know your concerns about doctor choices based on the satisfaction survey results. We hear you and are working to add doctors to your plan. Is there a doctor you would like to be part of the provider network? We want to know. Just call us at **1-866-781-5094**. Tell us the doctor's name. We will check to see if he or she can join the network.



New Plan Members: Get an Initial Health Exam

An Initial Health Exam is your first visit with your PCP or your child's PCP. You should get it right away – **within 90 days** of when you enroll. Why? It helps your PCP:

- Learn about you and your health before you get sick.
- Look at past or ongoing health issues.
- Go over medications you take to make sure they work.
- Tell you what checkups, shots or tests you need.
- Study your family's medical history.

Call your PCP for an exam today! If you need help making that first health exam appointment, call us at **1-866-781-5094**. If you have hearing or speech loss, call the TTY line at **1-866-773-9634**.



If you want to reach us by phone:

Customer Care Center (M–F, 8 a.m. to 6 p.m.)	1-866-781-5094
TTY Line	1-866-773-9634
MedCall	1-866-577-9710
MedCall TTY	1-800-368-4424
Care Management	1-866-757-8286
Healthy Connections Choices	1-877-552-4642

www.bluechoicescmemoicaid.com

This newsletter is designed to give you health education information, not medical advice. Always talk to your doctor about your medical treatment.

We can translate this at no cost. Call the customer service number on your member ID card.

Podemos traducir esto gratuitamente. Llame al número de servicio de atención al cliente que aparece en su tarjeta de identificación (ID card).

With the exception of www.bluechoicescmemoicaid.com, the websites referred to in this newsletter are websites of independent entities not affiliated with BlueChoice HealthPlan of South Carolina.

Copies of any type of member information are made available (at no cost) upon request for translation, Braille, large print or audio format. Just call **1-866-781-5094**. We also can answer questions about your plan. If you have hearing or speech loss, call the TTY line at **1-866-773-9634**.

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