

Medicare Assured[®] Gateway to Health

A MEMBER NEWSLETTER

November 2008



www.gatewayhealthplan.com

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■ Si desea recibir una copia de esta información en español, por favor llame al número 1-800-685-5209 for PA and 1-888-447-4505 for Ohio.

■ TTY users call 1-800-654-5988.

■ This managed care plan may not cover all your health care expenses. Read your member handbook carefully to determine which health care services are covered.

Ready or Not...Here It Comes!

Yes, it is that time of year already! The kids have returned to school, football season is underway, the leaves are turning, and of course, Medicare's Fall Open Enrollment Period begins.

During Medicare's Open Enrollment period, many Gateway Health Plan *Medicare Assured*SM members often get a lot of information from other Medicare Plans. Getting all of this information, along with seeing more TV commercials about Medicare, often leads to questions. We have put together a list of the most frequently asked questions with answers to help guide you during this year's annual fall open enrollment period.

Q. How long does Open Enrollment for Medicare last?

A. November 15 through December 31.

Q. If I am a member of Medicare Assured[®], does Open Enrollment apply to me?

A. Medicare's open enrollment does NOT apply to people who qualify for a Special Needs Plan such as *Medicare Assured*[®].

Q: What do I have to do?

A: Nothing! If you are already a member of *Medicare Assured*[®], you will automatically stay in your current plan through 2009. You will be mailed information on Gateway's updated 2009 benefits later this Fall.

Q: What is Medicare "lock-in"?

A: Medicare "lock in" refers to the period after Medicare's Fall open enrollment, from November 15 to December 31,

where certain beneficiaries now have limited choices as to what type of plan they can join.

Q: Does Medicare "lock-in" apply to me?

A: No! If you are an existing *Medicare Assured*[®] member, you are in a Special Needs Plan. Special Needs Plans are specifically designed for people like YOU! Not everyone qualifies for a Special Needs Plan. Participants must meet certain requirements to be eligible, and they are not limited to any specific enrollment periods.

Q: If I am contacted by another plan, what should I do?

A: If you want to continue to remain a *Medicare Assured*[®] member, be careful not to sign up for another plan since that will automatically disenroll

(cont. on page 2)

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you from your current plan and benefits.

If you feel that you may have been taken off your current *Medicare Assured*[®] plan, or you receive another plan's I.D. card that you did not request, please call 1-877-GATEWAY, and we will work with you to get your coverage back.

Q: Do I need an additional prescription drug plan or "Part D" plan?

A: No! As a *Medicare Assured*[®] member you not only have your hospitalization and doctor's office visits covered, but you also get your Part D or prescription drug coverage, as well as all the additional benefits you are eligible for (such as vision, hearing, fitness club membership, etc)

Q: What if my question is not addressed in this list?

A: You can contact a Gateway Member Services representative at 1-800 685-5209 in PA; 1-888-447-4505 in Ohio (TTY users should call 1-800-654-5988), 8:00AM to 8:00 PM, 7 days a week. We will be happy to answer ANY questions you may have!



Free Diabetic Supplies, Wheelchairs & Scooters – Too Good to be True?

While watching television you may see commercials stating that you can get your diabetic supplies, powered wheelchairs, or scooters at no cost. These claims can be very confusing, perhaps even misleading.

These companies may participate with original Medicare, but they may not be in Gateway Health Plan's *Medicare Assured*SM network. If they aren't in our network, you can't receive services from them without an authorization. It is very important to always use providers that are in the Gateway Health Plan[®] (Gateway) network.

Any pharmacy in Gateway's network can provide your diabetic supplies (such as glucose monitors, test strips, lancets and screening

tests) on the formulary, with a prescription from your doctor.

Since powered wheelchairs and scooters cost more than \$500, your doctor must contact Gateway to get a prior authorization before writing the order. Your doctor must also submit proof to Gateway that the item is medically necessary.

If you have any questions or need a network pharmacy or medical equipment provider, please call Gateway Member Services at 1-800-685-5209 in Pennsylvania; 1-888-447-4505 in Ohio (TTY users may call 1-800-654-5988). They can send you names and numbers of network providers. Network provider listings are also available on our website at www.gatewayhealthplan.com.

Free Diabetes Care Available

November is Diabetes Awareness Month. This is a good time to make a doctor's appointment to have routine blood work done that can determine if you might have diabetes. Most people with diabetes don't know they have it until they go to the doctor with a problem. If you have family members with diabetes (like a parent, brother, or sister) or you are an African-American, you have a greater chance of having diabetes and may not know you have it.

If you do have diabetes, this is also a good time to follow up with your doctor to make sure it is under control.

You are eligible to go to individual or group diabetic classes at no cost to learn how to best manage your diabetes. These classes are usually held at your local hospital or clinic.

Gateway Health Plan[®] (Gateway) will pay for the classes, and you don't even need a referral from your doctor.

Some members may not be able to get to classes, so Gateway also provides the Healthy Returns Diabetes Program at no cost. Nurses, dieticians, and a pharmacist are available by phone to answer any questions you may have about your diabetes. The **toll-free phone number for the Healthy Returns Diabetes Program is 1-866-366-9415.** It answers 24 hours a day, 7 days a week, including holidays.

Some members go to classes and call the Healthy Returns Program. Even if you do both, there is no cost to you. Do something good for yourself and take advantage of these free ways to take control of your diabetes!

Follow-up Necessary in Treating Depression

Current medications ordered by either medical or behavioral health providers for the treatment of depression are considered so safe that they can be prescribed at the first office visit and be adjusted on an outpatient basis. This is helpful for the patient, but it also means that the patient must be responsible to return to the office for follow-up as directed.

The office visit to check on your medication—either with your own provider or a consulting psychiatrist—is often concerned with the following areas: mood, appetite, sleep, and thoughts. The doctor will be assessing if this is the right medication for you and teaching you about how to take it correctly, how it works, and any side effects.

Since you will begin to feel better in about two weeks, many doctors will ask for a follow-up visit or a phone call in that two-week timeframe. However, a follow-up office visit is necessary within 30 days. This visit has several purposes:

- It will give you a chance to develop a better doctor-patient relationship regarding the course of medication.
- Your doctor can obtain additional social and clinical information.
- You can report on benefits of the medication as well as side effects.
- You can learn more about your diagnosis and the treatment.



- After improving with the medication, you may be better able to talk about your issues with your doctor.

The follow-up visit within 30 days is essential in establishing a good relationship with your doctor, assessing the choice of medication and the dose, and completing the clinical work-up. Since one goal of treatment is to get rid of symptoms as quickly as possible, this follow-up visit can help to achieve that goal.

Keeping Your Mental Health Treatment on Track

Sometimes dealing with mental health issues, like depression, can be hard. But there are some simple things you can do to stay on track and feeling good:

1. Keep all your mental

health appointments. It is especially important to have an appointment within **30 days** (1 month) of any hospital stay so the doctor or therapist can be sure your treatment plan is working for you.

2. Follow your treatment plan.

This includes all your therapy and group sessions, and taking your medication as ordered. If your plan isn't working for you, tell your doctor or therapist so it can be changed. Don't just stop something—talk to your doctor or therapist first. They can better

help you if they know there's a problem.

3. Tell your doctor about any new symptoms. You should tell your doctor if you are having new symptoms or if your medicine is making you feel bad. You should also tell your doctor if you feel sad or down for longer than 2 weeks, or if you have thought about hurting yourself.

4. Take your medicines as ordered. Don't stop or change your medicines without telling your doctor first. You should also not change your dose of medicine without talking to you doctor. Your doctor will want to know the reason why you want to stop or change your medicines. If a change is

needed, your doctor can help you do it safely.

5. Give it time to work. It usually takes 2-3 weeks for a new medicine to work, so you need to take it for at least that long before you will see results. If you don't feel like the medicine is working, then tell your doctor or therapist.

By doing these simple things, you can help yourself stay healthy and on the right track. Remember, mental illness is like any other illness. It needs to be followed by a healthcare professional to make sure the treatment plan ordered is working. If you have questions or need help, please call the **Care Management Department** (see back page).

Facts about the Pneumonia Shot

The pneumococcal vaccine or pneumonia shot protects children and adults from severe infections related to a bacteria called “strep.” These bacteria can cause pneumonia, a lung disease that infects the upper respiratory tract. It can spread to the blood, middle ear, or nervous system.

Pneumonia spreads through

contact with people who have pneumonia or who carry the bacteria in their throat. Symptoms are fever, cough, shortness of breath, rapid breathing, and chest pains.

Since pneumonia mainly causes illness in children under age 2 and adults over age 65, these people should get the pneumonia shot.

Other at-risk populations are people with chronic illness and serious medical conditions. If you are unsure if you need the pneumonia shot, ask your doctor.

References: Medline Plus. Retrieved July 31, 2008 from <http://www.nlm.nih.gov/medlineplus/ency/article/002029.htm>, National Institute of Allergy and Infectious Diseases. Retrieved July 31, 2008 from <http://www3.niaid.nih.gov/healthscience/healthtopics/pneumonia/default.htm>

Facts about the Flu Shot (Influenza Vaccine)

The flu season is from November to April. Gateway Health Plan® covers an annual flu shot (often called a “vaccination”) so you won’t get the flu.

The flu is an illness caused by a virus. There are many types of viruses that cause the flu, and each year the types of virus change. Since the viruses are different every

year, the flu shot changes every year. Each year, flu shots become available in the fall.

The flu is a respiratory illness. Symptoms are fever, chills, cough, runny nose, and muscle aches. The flu can also lead to pneumonia, which can make someone sick enough to go to the hospital or die.

People should get the flu shot if they are likely to get very sick from the flu. These people might have chronic illnesses or be elderly. Ask your doctor if you should get the flu shot.

Reference: Pennsylvania Department of Public Welfare. Retrieved July 30, 2008 from <http://www.dpw.state.pa.us/partnersproviders/mentalretardation/healthcare/003670130.htm>




GATEWAY
Health Plan
Medicare Assured®

Learn Why You Smoke; Teach Yourself to Quit!

Put an “X” next to the reasons why you smoke. Read the corresponding tips to learn what you can do instead of smoking.

Reasons why you smoke:	Tips to Quit:
<p>1. Energy: You feel that smoking helps you wake up, get moving, or keep going when you are tired.</p>	<ul style="list-style-type: none"> • Get more sleep so you aren't tired. • Eat healthy foods and drink lots of cold water. • Exercise. • Take a walk when you crave a cigarette.
<p>2. Craving: Most smokers are addicted or “hooked” on the nicotine in cigarettes. They crave a cigarette when they haven't smoked for a while.</p>	<ul style="list-style-type: none"> • Ask your doctor about drugs that may help you quit like gum, the patch, lozenges, or nasal spray. • Avoid secondhand smoke. • Ask family and friends to not smoke near you.
<p>3. Handling: You like to hold a cigarette and enjoy the “act” of smoking.</p>	<ul style="list-style-type: none"> • Pick up a pencil or pen and doodle. • Do something that keeps your hands busy. • Put a straw in your hand or mouth. • Eat meals on time so you aren't hungry.
<p>4. Habit: You may smoke without even being aware of it. Sometimes you light a new cigarette when you already have one in the ashtray.</p>	<ul style="list-style-type: none"> • Wait one minute each time you want to smoke. • Don't do anything else when you smoke so you pay attention to why you are smoking. • Cut back slowly; smoke less each day.
<p>5. Pleasure: Many smokers say they just plain enjoy smoking.</p>	<ul style="list-style-type: none"> • Save the money you would spend on cigarettes and treat yourself to something fun, like shopping or a nice dinner. • Think about how good it feels to be a non-smoker.
<p>6. Crutch: You use cigarettes to get through bad times. You think a cigarette also helps you relax.</p>	<ul style="list-style-type: none"> • Close your eyes, breathe deep, and calm down. • Take time each day to relax. • Avoid stressful things. • Do something restful, like sitting on your porch, listening to music, or taking a long bath.

Adapted from National Cancer Institute, NIH Publication No. 98-1822 and The GlaxoSmithKline Group of Companies.



Think you want to quit smoking COLD TURKEY? Think again!

You are TWICE as likely to quit smoking if you take drugs (often called “nicotine-replacement therapies” or NRT) like gum, the patch, lozenges, or nasal spray than if you don't!

Talk to your doctor about which drugs might be right for you.

Call **Gateway Health Plan Medicare AssuredSM** at 1-800-685-5209 for more information. (1-800-654-5988 TDD/TTY)

Osteoporosis: Are You at Risk? How You Can Prevent It?

Osteoporosis is a bone disease where bones become weak and are more likely to break. It is more common in women, but men may develop osteoporosis, too. It is called a “silent disease” because you cannot feel or see your bones becoming weak. In fact, most people don’t know they have osteoporosis until they break a bone. The most common bones that break are in the hip, wrist, and spine.

Fortunately, there are steps that you can take to make your bones stronger and to lower your chances of developing osteoporosis and breaking a bone. The first step is to find out if you are at risk. **You could be at risk for osteoporosis if you:**

- Are a postmenopausal woman over the age of 50
- Are Caucasian or Asian, although African-American and Hispanic women are also at risk
- Someone in your family or yourself has broken a bone over the age of 50
- Had early menopause before the age of 45
- Are a smoker or a heavy drinker
- Do not get enough calcium and vitamin D in your diet
- Do not get enough exercise
- Take certain medications or steroids (for example, prednisone).

If any of these risk factors apply to you, it is important to talk to your doctor about osteoporosis. Ask if you need to take a test that will help your doctor measure the strength of your bones. This test is called a bone mineral density (BMD) test.

If your doctor feels that you are at risk for developing osteoporosis, there are a number of things that you can do to make your bones stronger. These include eating foods that contain lots of calcium and vitamin D, exercising regularly, not smoking, and limiting your alcohol.

Your doctor may also feel that medication is right for you. Medications called bisphosphonates are commonly used to treat or prevent osteoporosis. Some examples may include Fosamax®, Actonel®, and Boniva®. **Here are important safety tips for you to follow if you are taking any of these medications:**

1. Take this medicine as soon as you get out of bed in the morning—before you eat or have anything to drink. Swallow

the tablet whole with a large glass of plain water only. Do not chew or suck on the tablet.

2. Wait at least **30 minutes** after you swallow the tablet before you eat or drink anything or take any other medicines.
3. Do not lie down for at least **30 minutes** after taking any of these medicines. This is to avoid side effects such as heartburn and throat pain. **If you experience any side effects, make sure you call your doctor right away.**

Although you will not feel your medicine working, you must take it exactly as prescribed by your doctor. Remember, you have the power to do something good for your bones. Talk to your doctor about osteoporosis and how you can make your bones healthier.



Preventing Falls

Did you know that 1 out of 3 people over age 65 fall every year? These falls can cause injuries and hospitalizations, and their complications can result in death. Many falls happen in the home.

There are steps you can take to help avoid falls. If you have fallen in the past, please tell your doctor. Your doctor should review your medicines with you to make sure that they aren't making you dizzy or weak. Be sure to tell the doctor about any over-the-counter medication you are taking (including vitamins, herbal supplements, or pain relievers). You should also have a yearly eye exam. Changes in vision can

cause falls. Be cautious of wearing reading glasses while walking! If you use a cane or a walker, have the doctor check that as well. If the cane or walker is the wrong size or needs to be repaired, that could cause a fall.

Inside your home you can take steps to keep safe. Some rugs can cause you to trip and should be removed. Clutter on the floors and surfaces of your home can also cause a fall or injury. If you spill liquids, clean up spills quickly to prevent a slip from happening. Consider getting a nightlight to prevent nighttime falls when going to the bathroom. If your home has stairs, be sure the rail is secure, and

keep the steps clear of clutter. A shower chair, grab bars and non-skid bath mat can help prevent bathtub falls. Avoid standing on chairs to reach hard to get item.

A great way to prevent a fall is to keep active and healthy. Maintaining mobility and strength will keep you from having a fall. Keep muscles toned by doing some form of safe exercise everyday. Eat a balanced diet to help prevent weakness and dizziness. As we age, our bodies will change and falls can occur. Let's prevent falls together. If you have more questions, please contact your doctor or Gateway Health Plan®.

Colon Cancer—Prevent It!

Colorectal cancer (“colon cancer”) is the third most common cancer found in men and women in this country. Colon cancer kills about 50,000 people every year.

You are at risk for colon cancer if you:

- Are older than 50 years of age
- Have a history of cancer in your colon, rectum, ovary, breast, or endometrium (en-do-ME-tree-um)
- Have chronic bowel disease
- Have a parent, brother, sister, or child with colorectal cancer or polyps.

You have an **increased** risk of getting colon cancer if you:

- Are overweight or obese
- Drink alcohol
- Smoke
- Don't exercise.

! Get screened today!

THE DOCTOR TAKES A LOOK AT YOUR COLON AND IF THERE'S A POLYP IT'S REMOVED BEFORE IT TURNS INTO CANCER.

American Cancer Society

Call Gateway Health Plan® Medicaid Member Services at 1-800-392-1147 if you want more information about how to prevent colon cancer or need help scheduling an appointment with your doctor. (1-800-654-5988 TDD/TTY)



Glucometer Available

Gateway Health Plan® (Gateway) is now offering more options for its diabetic members by adding Accu-Chek® blood glucose meters to its list of offered supplies. Accu-Chek has been available to members since January 2007. Gateway will continue to cover LifeScan's OneTouch® products. The availability of both Accu-Chek and LifeScan products gives our diabetic members the opportunity to select the type of glucometer they like best. You can receive a free glucometer directly from your pharmacy with a prescription from your physician, giving you easier access to your product of choice.

Albuterol Inhaler Change

Due to a ruling by the FDA (Federal Drug Administration), Gateway Health Plan® (Gateway) members who have asthma and are using albuterol inhalers will need to transition to a different kind of inhaler by the end of 2008. The new inhaler will replace the currently available products that cause harm to the ozone layer.

Gateway covers the new type of inhaler that you will need to use. The name of this product is Ventolin HFA. You may notice a few differences when using the new product. The new inhaler has a softer spray and feels a bit warmer. Also, the new inhaler does not require priming but it may need to be cleaned more often. The FDA says that the new inhalers are just as safe and effective as the old ones despite these differences.

Remember that the best way to control your asthma is to use your long-term controller medications if your doctor prescribed this type of treatment for you. Questions? Call **Member Services** (see back page).



Healthy Reminders

Gateway Health Plan® wants you to stay healthy. We are letting you know what preventive screenings you need. For different reasons, people who are Caucasian, African-American, Latino, or Hispanic may be at a higher risk for certain health problems. Please call your doctor to find out more information. The screenings you need to help you stay healthy are listed below:

Recommended Screening for ADULTS:

- Are you between 50 and 80 years old? Get a colorectal screening to check for colon cancer.
- Are you older than 65 or African American and over 40 years old? Go to your eye doctor and get checked for glaucoma.
- Are you between 18 and 85 years old? Get your blood pressure checked every time you see your doctor. Your blood pressure should be less than 140/90, or lower if you have a chronic health problem like diabetes.

Recommended Screening for WOMEN:

- Are you 65 years or older? Ask your doctor to check for osteoporosis (os-tee-oh-por-OH-sis) to make sure you bones are healthy and strong.

Together we can make a difference!

Address Confidentiality Program

Are you a victim of domestic violence, sexual assault, or stalking? Do you have to move for safety reasons? You may be interested in the Address Confidentiality Program (ACP).

This program can help hide your new home address from your abuser. The ACP provides a substitute mailing address for you. It can be used to meet the address requirements of important records, such as:

- drivers' licenses
- library cards
- traffic tickets
- car registrations.

An ACP address can also be used for:

- employment security,
- school records
- workers' compensation
- court petitions.

The ACP address can help you keep your actual address from showing up on important documents that could somehow be found by your abuser. The program is operated by the PA Office of the Victim Advocate.

If you think the ACP may help you, contact a local domestic violence, sexual assault, or victim service program. An advocate will meet with you to decide if ACP is right for you. The advocate can explain how it works and help you complete the application. You can find more information about the program at the ACP website (www.paacp.state.pa.us) or by calling **1-800-563-6399**.



If you are worried about your safety and you need to talk, call:

National Domestic Violence Hotline

1-800-799-7233 (SAFE)
1-800-787-3224 (TTY for the Deaf)
www.ndvh.org

National Teen Dating Abuse Hotline

1-866-331-9474
1-866-331-84534 (TTY for the Deaf)
www.loveisrespect.org

Help is available in English and Spanish and many other languages. All contact with the hotline is free and confidential.

Member Services is Dedicated to Helping Our Members

A Gateway Health Plan *Medicare Assured*SM member contacted a Member Services representative because he was running out of OneTouch[®] Ultra[®] Test Strips before the allotted next fill date. He was concerned that his results weren't correct and was frequently retesting. As a result, his supply of test strips was low. He was

also fearful of having a medical complication.

The Member Services representative who received the call listened carefully to the member's concerns and asked how long he had had the glucose meter. The member confirmed it was 3 years old. The Member Services representative

reassured the member and told him he could obtain a new meter. The Member Services representative also contacted the member's doctor, who then called a prescription into the pharmacy. The member was relieved and thanked the Members Services representative for her assistance!

HIPAA: How Gateway Health Plan® Protects PHI

Gateway Health Plan® (Gateway) cares about you! We take steps to protect your PHI (protected health information) and remind our employees about the importance of protecting all information.

There are many ways in which Gateway protects your information. Gateway uses many tools to remind its employees of their important roles in protecting information. These tools include: posters, messages on computers, sharing privacy stories that are in the news, tips on how to keep information safe, easy access to policies, and an online reference library. Gateway also trains all of its employees on laws that protect privacy like HIPAA (Health Insurance Portability and Accountability Act), PHI, and

Security, and reminds employees to report any issue or concern.

Gateway has a Compliance Officer and a Compliance team to review issues or concerns. The Compliance Officer and Compliance team also identify ways to secure information as part of daily practices. One way is requiring Gateway employees to wear and use special picture badges at all times while at work. This is to reduce the chance of someone who shouldn't be allowed to see your information from gaining access to it. Another way is to shred documents that contain PHI or confidential information when they are no longer needed.

Employees are reminded about only sharing minimum necessary information and to protect their

computer passwords. Gateway also periodically checks desks after normal business hours to see if information is protected when the office is closed.

We also use a tool to annually rate each employee's understanding of his/her compliance duties. We share real life stories from the news to bring awareness to employees and celebrate National Compliance and Ethics Week where we share tips with employees regarding protecting member information. We conduct refresher training courses with employees during their regularly scheduled staff meetings.

We are happy to be your health insurance plan. Gateway takes great pride in practicing good, solid ways to protect your PHI!

Privacy Notice

Gateway Health Plan® (Gateway) is required to protect the privacy of your personal medical and non-public personal information. This protection extends to all forms of communication (oral, written, and electronic) of this information. Beneficiaries receive a copy of Gateway's privacy notice in their new member welcome packets as well as in the packets mailed to each beneficiary's home each January.

Gateway's privacy notice can also be found by clicking on the Privacy link at the bottom of the main page on www.gatewayhealthplan.com. If you would like to request another paper copy of our privacy notice, call **Member Services** (see back page).

Grievance & Reconsideration

Do you know how to file a complaint or reconsideration? We certainly hope that you are satisfied with the service that we provide, but we want to be sure that you have a way to let us know about any concerns that you may have. You can find detailed information about our grievance and reconsideration processes in the Member section of our website at www.gatewayhealthplan.com. The processes are outlined in detail in the Evidence of Coverage (EOC) book.

You can also contact **Member Services** (see back page for phone number). They can provide you with information about these processes over the phone or in writing. They can also assist you in filing a grievance or reconsideration.

Member Rights & Responsibilities

All Gateway Health Plan *Medicare Assured*SM members have certain “rights” concerning their care and treatment. They also have specific responsibilities as Gateway Health Plan[®] (Gateway) members. Your Member Rights and Responsibilities can be found in the Gateway Evidence of Coverage (EOC) book you receive every year. Your EOC can also be viewed on Gateway’s website at www.gatewayhealthplan.com. Click on Current Members, PA or Ohio *Medicare Assured*[®] and then on Evidence of Coverage in the list on the right. Look in the index for the page number. If you have any questions concerning this, please call the **Member Services** department (see back page).

Compliance with Gateway Policies

Both Gateway Health Plan[®] (Gateway) and your Primary Care Practitioner (PCP) have policies in place to make sure that the care and services you get are what you need. You need to know what these policies are and to follow them.

Examples of some policies can be:

- Time limits for having copies made of your medical record
- Protecting your privacy
- Fees you may be responsible for if you miss an appointment or have an appointment with a specialist without a referral

Remember that before you schedule an appointment with a specialist, you should talk to your PCP first. Your PCP will help you find the best specialist for your healthcare needs.

There are some special services that need to be authorized by *Medicare Assured*SM before the

service is provided. You must work with your provider to get authorization for the services listed below. If you do not get an authorization, you may be responsible for charges incurred.

- Chiropractic services
- Outpatient services/surgery
- Bone densitometry (bone mass measurement)
- CT scans
- MRI/MRA, nuclear cardiology, and PET scan services
- Certain outpatient mental health services
- Outpatient rehabilitation services (occupational therapy, physical therapy, speech and language therapy)
- Durable medical equipment (such as wheelchairs), orthotic and prosthetic devices, and medical supplies (more than \$500)

- Non-emergency ambulance services, except for trips for dialysis.

All PCPs and Specialists are required to have coverage in the evenings and on weekends. This may be through an answering service or an on-call practitioner. You should contact your PCP’s office to determine how the problem can best be handled.

If you have any questions about *Medicare Assured*SM policies, please call the **Member Services Department** at 1-800-685-5209 in Pennsylvania and 1-888-447-4505 in Ohio. TTY users may call 1-800-654-5988.

If you have questions about your PCP’s policies, please call that office.



GATEWAY TO HEALTH is published as a service for the members of Gateway Health Plan[®], US Steel Tower, Floor 41, 600 Grant Street, Pittsburgh, PA 15219. Telephone: PA members 1-800-685-5209 and OHIO members 1-888-447-4505. Website: www.gatewayhealthplan.com. Information in GATEWAY TO HEALTH comes from a wide range of medical experts and other medical resources. If you have any concerns or questions about specific content, please contact Gateway Health Plan[®]. Models may be used in photos and illustrations. Copyright © 2007 Gateway Health Plan[®]



US Steel Tower, Floor 41
600 Grant St.
Pittsburgh, PA 15219

PRSR STD
US POSTAGE PAID
PITTSBURGH PA
PERMIT NO. 3895

MOVING? If you are moving or changing your telephone number, please notify Member Services by calling 1-800-685-5209 for PA and 1-888-447-4505 for OHIO.

Important Phone Numbers

For information or paper copies of forms or other information, call the area listed below to speak with our staff. Information on the Disease Management, Special Needs Areas, and Member Rights and Responsibilities (found under EOB) can also be accessed on our website, www.gatewayhealthplan.com. Click on Current Members and the name of your plan.

ALL PHONE NUMBERS ARE TOLL-FREE

RESOURCE	MEDICARE ASSURED [®]	
	PENNSYLVANIA	OHIO
Gateway Resources		
Member Services	1-800-685-5209	1-888-447-4505
Pharmacy Member Services	1-800-685-5209	1-888-447-4505
Health Services	1-800-685-5212	1-888-447-4506
Special Needs	Option 1	Option 1
Preventive Health	Option 4	Option 4
Outreach Staff	Option 4	Option 4
Disease Management:	1-800-685-5212	1-888-447-4506
“Mom Matters” Maternity Program	Option 2	Option 2
“Help Your Heart” Cardiac Program	Option 3	Option 3
“AIR” Gateway Asthma Program	Option 3	Option 3
Healthy Returns Diabetes Program	1-866-366-9415	1-866-366-9415
Fraud and Abuse	1-800-685-5235	1-800-685-5235
Outside Resources		
Quitline (Stop Smoking) 1-800-QUITNOW	1-800-784-8669	1-800-784-8669
National Domestic Violence Hotline	1-800-799-7233	1-800-799-7233
ATT Operator for Deaf Members (TTY/TDD)	1-800-654-5988	1-800-654-5988
Center for Disease Control Nat'l AIDS Hotline	1-800-342-2437	1-800-342-2437
Medicare (1-800-MEDICARE)	1-800-633-4227	1-800-633-4227