

WELCOME TO MIDWEST HEALTH PLAN

We are happy that you have picked Midwest Health Plan (MHP) for your health care. You will have your own doctor – your Primary Care Provider (PCP) - who will take care of all of your medical care. Midwest Health Plan has doctors serving members in Wayne, Oakland, Macomb, and Washtenaw counties.

Use this book as your guide to good health. Please take time to read it. We hope it will answer all your questions about MHP. If you do have questions, please call our Customer Service Department toll-free at **1-888-654-2200** or at **1-313-581-3700**. Our office hours are from 8:30 am to 5:30 pm Monday through Friday, but we can answer questions by phone, 24 hours a day. When you call, have your MHP membership card handy. Give your identification (ID) number to the person answering the phone.

The Customer Service staff can answer your questions about services and benefits under MHP. Our Customer Service Specialists are polite and helpful. They speak English, Arabic, and Spanish. They also can use other services and special equipment for the deaf. Feel free to call us – we are here to help you!

Please call if you need to:

- Ask questions about enrollment for you and your family.
- Find the name and address of your Primary Care Provider (PCP).
- Choose or change your PCP.
- Ask questions about a bill.
- Arrange transportation services.
- Let us know about changes in your address, phone number, family size, or health insurance.
- Let us know about emergency care you received.
- Ask questions about your PCP or specialty doctor.

WHAT YOU SHOULD KNOW

There are some important things you need to know as a member of MHP:

- You must use MHP doctors.
- You will choose one doctor who will keep track of all of your health care. This will be your Primary Care Provider (PCP).
- Your PCP will send you to a specialist, if needed.
- You should only use the emergency room if you are very sick.
- Your Provider Directory lists your doctor's name, address, telephone numbers, hospital affiliation, board status, and languages spoken.
- The directory also lists the participating hospitals, pharmacies, medical suppliers, vision providers, and other types of health providers

YOUR RIGHTS AND RESPONSIBILITIES

We are committed to providing quality health care to you and your family. As a member of Midwest Health Plan, you have certain rights and responsibilities regarding your health care.

You have a right to:

- Be treated with respect, dignity, and privacy.
- Have medical care that meets your health needs.
- Receive a list of MHP Primary Care Providers (PCPs).
- Understand how to use MHP health care services.
- Pick a Primary Care Provider (PCP).
- Change your Primary Care Provider (PCP).
- Ask your doctor about your health problems, and what you can do to help yourself.
- Discuss all treatment options with your doctor.
- Decide what type of care you would want if critically ill. This is called "Advance Directive". For example, if you are hurt and need a machine to keep you alive, you have to decide if you want this treatment. It is important for you to know how you want to be treated if this happens to you.
- Receive medical care through a Federally Qualified Health Center.
- Give your permission or say no when a doctor wants to give you treatment, unless it is a life-threatening emergency. (A legal guardian must give permission to treat someone who is under 18 years old, unless it is a life-threatening emergency and the guardian is not available.)

- Ask for an opinion from another doctor when you are not sure about the treatment your doctor suggests. MHP will help you find another doctor, if needed.
- Read your medical records. All information in your medical record is confidential and is kept private. You must call your doctor to see your record.
- Get timely service from the Customer Service department.
- Call or visit the Customer Service department to file a complaint or a written grievance.
- Appeal a decision MHP has made about your complaint or grievance.
- You have a right to have your grievance reviewed by the State Office of Financial and Insurance Services if you are unhappy with the decision made by MHP.
- Call for a ride if you cannot get to your doctor's on your own or with the help of family and friends. (You should call us for a ride the day before your scheduled appointment).
- Have these rights and responsibilities explained to you if you have any questions.
- Receive information about, and suggest changes to MHP's rights and responsibilities policy.

You have a responsibility to:

- Practice good health habits.
- Learn how MHP works.
- Show your MHP and Medicaid cards when you need care.
- Make sure no one else uses your MHP and Medicaid cards.
- Treat other members, MHP staff, and providers with respect.
- Tell your Primary Care Physician (PCP) about your medical history. This will help him or her give better care to you and your family.
- Give correct, honest answers to your health care provider's questions. They need this to make sure you get the health care you need.
- Understand your health problems and develop treatment goals with your doctor.
- Follow instructions that your health care provider gives you. That's how you get well quickly.
- Keep scheduled appointments. Arrive on time. If you cannot keep your appointment, call your doctor as soon as possible.
- Follow MHP's rules for getting health care services.
- Know what to do when your Primary Care Provider's (PCP's) office is closed.
- Contact MHP to report changes in the following information:
 - Address and phone number
 - Family size
 - Medicaid status

THE BEST CARE

Midwest Health Plan wants to be sure you receive the best care you can get. We only choose high quality doctors to care for you. We make sure their offices are clean and safe. We want to let you know that your good health is our first concern. There are some things you can do to be sure you get the best care. You should be honest with your doctor, ask questions if you don't understand what your doctor says, bring a list of questions you have to your office visit, follow the doctor's instructions, and keep a record of all your tests and screenings (mammograms, pap smears, immunizations, etc.). Before taking your medicines, ask your doctor or pharmacist: What is the medication? What is it for? Could it make me sleepy or cause other problems? When should I take it, How much should I take and for how many days should I take the medicine.

We do not pay money to doctors to not give you any care or services. Decisions about your care are based on good, high quality medical care and standards.

CHOOSING YOUR PRIMARY CARE PROVIDER

When you joined MHP, you chose a doctor for yourself and each of your family members.

Your Primary Care Provider (PCP) plays an important part in your health care. Think of him or her as your personal physician. Your doctor will get to know you, your medical history, and your health needs. He or she will give you medical advice and care. Call your doctor's office as soon as possible to make an appointment.

Your Primary Care Provider (PCP) is responsible for your health care. Your doctor is available to you 24 hours a day, 7 days a week. The directory and your MHP membership card lists the phone number to reach the doctor during office hours and the phone number to call when the office is closed. Call your doctor for all health care services except life-threatening emergencies. (If your problem is life threatening, go directly to the emergency room).

CHANGING YOUR PRIMARY CARE PROVIDER

There are many reasons you may want to change your Primary Care Provider (PCP). Here are some reasons:

- You have moved and now your doctor is too far away.
- You or your children are going to one doctor and you would like to have different doctors.
- You are unhappy with your doctor.
- Your doctor is no longer part of MHP.

To change doctors, call the Customer Service department toll-free at 1-888-654-2200 or at 1-313-581-3700. A Customer Service representative will help you. A transfer form will be mailed to you. You fill out the form and mail it back to us. If we get the form back from you by the 16th day of the month, the change in your doctor will occur the first day of the next month. If we receive the form back from you after the 16th day of the month, it is too late to change your doctor for the next month. The change will occur in the following month. For example, if we get your transfer form back on April 15th, your doctor will change May 1st. If we get your transfer form back on April 17th, your doctor will change June 1st.

SPECIALIST AS YOUR PCP

People with chronic health conditions often need to see a specialist to obtain needed care. In limited cases, it may be better for the specialist to be responsible for all of your health care needs. You should call the Customer Service department at 1-888-654-2200 if you have any questions about this process.

OPEN ACCESS FOR OB/GYNS AND PEDIATRICIANS

If you are a woman and want to see an OB/GYN doctor for a well woman check up or for pregnancy, you can make an appointment with any OB/GYN in the Midwest Health Plan Directory without a referral from your Primary Care Provider (PCP). If you need help finding an OB/GYN, call us at 1-888-654-2200.

If your child's Primary Care Provider (PCP) is not a Pediatrician and you want your child (under 18 years old) to see a Pediatrician, you can make an appointment with any Pediatrician in the Midwest Health Plan Directory without a referral from your child's Primary Care Provider (PCP). If you need help finding a Pediatrician, call us at 1-888-654-2200.

MAKING AND CANCELING APPOINTMENTS

Call your Primary Care Provider (PCP) when you need a routine checkup or physical exam. It is a good idea to schedule it weeks ahead of time. Have your MHP membership card handy when you make an appointment.

If you are sick or hurt, you may need to see your doctor the same day. If possible, call your doctor early in the morning. This may give you a better chance of fitting into the doctor's schedule. If your doctor cannot see you, ask if another doctor in the office can. When visiting your doctor, always show your MHP and Medicaid membership cards. It is important to be on time! Please call your doctor when you will be late or if you cannot keep an appointment.

PHYSICIAN INCENTIVE DISCLOSURE

You may ask if we have special financial arrangements with our doctors, which can affect the use of referrals and other services that you might need. Call our Customer Service Department if you have any questions about this issue.

We want to let you know that your good health is our first concern. We do not pay money to doctors to withhold any care or services. Decisions about your health care are based on good, high quality medical care.

REFERRALS

Your Primary Care Provider (PCP) will manage your health care for you. Your PCP will decide if you need more care from a specialist. If needed, your doctor will give you a referral to get care from another doctor. A referral is a special paper form filled out by your doctor. You must have the referral before you go see the specialist.

Your doctor will also give you a referral for other health care services. These services may include medical supplies like wheelchairs and crutches, hospice care, and outpatient hospital care.

SERVICES COVERED UNDER MIDWEST HEALTH PLAN

MHP covers the same services Medicaid does. Most services require approval by your Primary Care Provider. Those services include:

- Outpatient hospital services
- Inpatient hospital services
- Emergency room services
- Ambulatory (Outpatient) Surgery
- Physician and other practitioner services
- Family planning services
- Prescription drugs
- Laboratory, x-ray, and other diagnostic services
- Preventative care and screenings
- Prenatal care
- Home health care services
- Mental health services, up to 20 outpatient visits
- Vision services
- Physical, speech, and other therapies
- Services of other doctors when referred by your PCP
- Hospice services
- Medical supplies and equipment (such as oxygen and wheelchairs)
- Podiatry services
- Chiropractic services
- Hearing and speech services
- Health education and outreach
- Parenting and birthing classes

- Maternal and infant support services
- Services provided by local health departments
- Short-term nursing home care
- Childhood and adult preventative immunizations
- Early periodic screening, diagnosis and treatment services (EPSDT) – Well Child Care
- Transplant services
- Artificial limbs
- Emergency ambulance services
- Transportation
- Medically necessary weight reduction services
- ESRD services
- Blood lead follow-up services

SERVICES NOT COVERED BY MIDWEST HEALTH PLAN

Following are some services that are not covered by Midwest Health Plan:

- Faith healing
- Acupuncture
- Elective cosmetic surgery
- Elective abortions and related services
- Experimental or investigative treatments and procedures.
- Any service that is not medically necessary
- Any service that is not approved by your Primary Care Provider (PCP) – excluding true emergencies – except as otherwise stated in this membership guide

DENTAL SERVICES

Dental services are covered under Medicaid. You can obtain dental services from any dentist that accepts Medicaid.

OTHER MEDICAID SERVICES NOT COVERED BY MIDWEST HEALTH PLAN

You may need a service that is not offered by MHP. In this case, you should call the Customer Service department at 1-888-654-2200 for help. They will give you specific information on getting the care you need.

WHAT TO DO IN CASE OF AN EMERGENCY

You can get emergency care from a hospital. If you have a life-threatening emergency, go to the nearest hospital or call 911. The emergency room will contact your doctor.

Here are some examples of true emergencies:

- You are in danger of losing your life or a limb.
- You have very bad chest pains or problems breathing.
- You have swallowed poison or have taken too much medicine (overdose).
- You are choking.
- You have been shot.
- You are having severe and uncontrollable bleeding.
- You have extreme burns.
- You think you have a broken bone.
- You are bleeding heavily from a wound or bad cut.
- You are having dizzy spells that cause you to faint.

Follow up care should be done by your doctor. Call and make an appointment after you are released from the emergency room.

Examples of problems that are not emergencies include:

- Sore throat

- Back pain
- Tension headache
- Flu
- Frequent urination
- Earache
- Cold
- Minor illness
- Minor injury

For non-life threatening problems, you must go to your doctor or call to get instructions.

OUT OF AREA EMERGENCY CARE

If you are away from home and have an emergency, go to the closest hospital. The hospital should send the bill to Midwest Health Plan.

If you are away from home and become ill, but not sick enough to go to the hospital, please call your doctor or Midwest Health Plan at 1-888-654-2200 for assistance. We are available to take your call 24 hours a day, 7 days per week.

WHAT TO DO AFTER AN EMERGENCY ROOM VISIT

You should see your doctor as soon as possible after an emergency room visit. It is important to call him or her for an appointment. This way your doctor can make sure you are getting the care you need. They can also determine whether you need other services. If you are unable to call, a family member or friend may call for you.

SPECIAL CARE FOR YOUR CHILDREN

- **Early Periodic Screening, Diagnosis, and Treatment (EPSDT)**

Your children are important to us at MHP. There is a special program for children under age 21, covered by Medicaid. It is called Early and Periodic Screening, Diagnosis, and Treatment (EPSDT). This program provides regular health check ups for your child. These well child check-ups are important!

EPSDT can help with:

- Finding your child's health problems early. If you think your child has a medical problem, talk with your doctor about EPSDT.
- Providing information about all the special health services available for your children.
- Keeping your children healthy by giving them the shots they need, when they need them.

- **Women, Infants, and Children (WIC)**

Women, Infants, and Children (WIC) is a government nutrition program. WIC will teach you how to eat healthy and help by giving you and your children nutritional food. The WIC program is for pregnant women, women who have just had a baby, women who are breast-feeding babies, infants, and children up to 5 years old. If you would like to know more about WIC, call the Customer Service department at 1-888-654-2200.

SPECIAL CARE FOR ADULTS

- **Pregnancy Services**

If you are pregnant or think you are, see your doctor right away. Your baby's health and your health depend on it. You need to see your doctor to be sure you get the care you and your baby need and deserve. You can make an appointment with any OB/GYN in MHP's directory without a referral from your Primary Care Provider (PCP). Please make an appointment today.

- **Family Planning Services**

Your doctor, Planned Parenthood, or your local health department can help find the best birth control for you. Ask your doctor or a local public health provider to help you understand your choices. Your doctor can also help you stay healthy by giving yearly exams. You and your health are important to Midwest Health Plan. We will make sure your records remain private.

- **Sexually Transmitted Disease (STD) Services**

There are many diseases related to sexual activity. If you think you have a problem, see your doctor. Your doctor can offer you testing, treatment, and counseling. All information about your care will be confidential.

If you think you have HIV, do not wait. HIV can lead to AIDS. Your doctor offers testing and counseling. Early testing can help you stay well. If you have HIV, be sure to talk to your doctor.

MHP wants to make sure you get the care you need. You can get care from your Primary Care Provider (PCP) or your local health department.

OTHER SPECIAL SERVICES

- **Vision Services**

MHP covers vision services including prescription eyeglasses. Eye check ups and new glasses, if needed, are available once a year. You do not need to get a referral from your Primary Care Provider (PCP), but you must go to a MHP vision provider listed in the directory. Contact the Customer Service department at 1-888-654-2200 if you need help finding a vision provider closest to you.

- **Hospice Services**

There is help available to you should you become terminally ill. Midwest Health Plan will help you and your family members meet your physical, mental, and social needs

during this difficult time. Your doctor will help you get these services, or you can call the Customer Service department at 1-888-654-2200.

- **Transportation Services**

If you can't get a ride to your doctor's office, Midwest will find one for you. To get a ride, you need to call the Customer Service department at 1-888-654-2200 Monday through Friday from 8:30 am to 5:30 pm. You must call at least 24 hours before your scheduled visit. If your appointment is on Monday, you need to call by Friday. If you need life threatening emergency transportation, call 911 for an ambulance. If you have questions about transportation, call the Customer Service department. All transportation requests must be for medical reasons.

- **Pharmacy Services**

Midwest Health Plan will cover your prescription needs at no cost to you – you will not be charged a co-payment. You make take your prescriptions to over 200 local drug stores, including Kroger, Farmer Jack, CVS, Rite Aid, Walgreen, and K-mart Drug Stores. Midwest Health Plan also uses some local, independent drug stores. If you have questions about a local pharmacy, please call Customer Service at 1-888-654-2200.

Midwest Health Plan follows the Michigan Medicaid Formulary. We cover most commonly ordered drugs for your heart, diabetes, high blood pressure, asthma, antibiotics for infections, birth control pills, and many, many others. We do not charge you a co-payment for any drugs. If you have a question about which drugs are on the Medicaid formulary, contact your pharmacist, doctor, or Midwest Health Plan. There are some drugs that must have approval from your doctor or Midwest Health Plan before you can get them. You or your doctor can call Customer Service at 1-888-654-2200 to get information about these drugs and how to obtain approval.

- **Inpatient Services**

If you need to go in the hospital for care, your primary care provider (PCP) will make the necessary arrangements at a hospital that he or she is on staff at, or your PCP may refer you to a specialist who will admit you to a hospital. For non-emergency problems that require hospitalization, discuss treatment and hospitalization with your doctor. Midwest Health Plan has agreements with most of the hospitals in Wayne, Oakland,

Macomb, and Washtenaw counties. If you have a life-threatening emergency, you can go to any hospital.

- **Services for the Developmentally Disabled**

Midwest Health Plan works closely with several Community Mental Health Programs to make sure that members with developmental disabilities are provided with good medical care. If you need help getting services for a developmentally disabled person, please call your Primary Care Provider (PCP) or the Customer Service department at 1-888-654-2200.

- **If You Need Help With An Emotional, Alcohol, or Drug Problem**

There may be times when you feel upset, worried, helpless, and alone. You may be depressed or anxious. As a MHP member, you can get help. Call your Primary Care Provider (PCP) or the Customer Service department at 1-888-654-2200. They can refer you to a doctor or counselor if needed.

Sometimes children can experience these same feelings. There is help for them too. Please call the child's doctor or the Customer Service department at 1-888-654-2200 if your child seems to be having an emotional problem. MHP can give you information on how to get help for your child.

If you or some in your family has been a victim of physical, sexual, or emotional abuse, we want to help. There is no cost to you for these services.

Drinking too much alcohol or taking drugs can become habit forming. It can be a problem for any person at any time. You or someone you know may have a drug or alcohol problem if:

- You feel like you have to have drugs or alcohol to make you feel good,
- Alcohol or drugs cause problems in your life.
- You can't remember what happened while you were drinking or on drugs.

- People you live with or work with complain about your drinking or taking drugs.
- You feel sick when you stop drinking or stop taking drugs.
- You feel guilt, anxiety, depression, fear, or violent because of drinking or taking drugs.

If you or a family member have a problem with alcohol or drugs, you can call a phone number right in your county. You do not need to contact Midwest Health Plan about substance abuse services. If you have any questions, call the number for the county where you live. The Central Diagnostic and Referral Agencies and phone numbers are:

Detroit Department of Health

Serving: Persons living in the city of Detroit
(313) 876-4070 or (313) 259-3727

Wayne County Health Division

Serving: Persons living in Wayne County
(800) 686-6543

Oakland County Health Division, Office of Substance Abuse

Serving: Persons living in Oakland County
(248) 858-5200

Macomb County Substance Abuse

Serving: Persons living in Macomb County
(810) 412-0033

Washtenaw-Livingston Substance Abuse Coordinating Agency

Serving: Persons living in Washtenaw and Livingston Counties

(800) 440-7548

MEMBERS FINANCIAL RESPONSIBILITY

MHP Medicaid enrollees cannot be charged co-payments or deductibles, nor can they be billed for any unpaid balances for services provided while covered under MHP. If you owe a doctor money for services you received before you were a member of MHP, you can be billed for those services. Doctors cannot seek any payment from MHP members for referred and authorized services. However, if a member signs a statement stating that they agree to pay for services that are not authorized by Midwest Health Plan, they can be held financially responsible for those services. It is very important that members follow the instructions given to them by their Primary Care Provider (PCP). If you have any questions, call the Customer Service department.

OTHER INSURANCE

If you have any other health insurance, like Medicare or Worker's Compensation, you must let us know. Please call the Customer Service department at 1-888-654-2200.

CHANGES IN FAMILY SIZE

If you have a baby, or if your family size changes for any reason, please let us know. Please call 1-888-654-2200 and inform us of the changes. You must also call your Family Independence Agency (FIA) worker and let them know about the changes. Newborns will be automatically enrolled in the mother's health plan.

CHANGES IN ADDRESS OR TELEPHONE NUMBER

If you move or change your phone number, call the Customer Service department at 1-888-654-2200 to give us the new address and phone number information. You must also call your caseworker at your local Family Independence Agency (FIA) office.

NEW TECHNOLOGY

Midwest Health Plan covers any service or technology that is included in the State's Medicaid list of benefits. The State of Michigan looks at any new procedures and technology and determines if it should be on the list of benefits. If it is on the list of benefits, MHP also has it as a benefit. We pay for the services and technology that the State has approved for Medicaid.

IF YOU HAVE A CONCERN OR COMPLAINT

We want to know what you think about our services and our member materials. If you have a concern or complaint, you can call the Customer Service department or call directly to the State.

If you wish to file a complaint directly with Midwest Health Plan, you may do so in person, by phone, or in writing. Explain your concern or complaint to a Customer Service Representative and he/she will help you fill out the form. Most of your concerns or complaints can be resolved the same day. All complaints will be reviewed. If you do not agree with the outcome, you may appeal by calling 1-888-654-2200 or by sending a written appeal request to:

Vice President of External Affairs

Midwest Health Plan
5050 Schaefer Road
Dearborn, Michigan 48126

You are entitled to more steps if you are not happy with the outcome. These steps include an appeal to the Midwest Health Plan Board of Directors. Contact the Customer Service department at 1-888-654-2200 for more information and assistance.

If you are not happy with the results after you have done all the steps within MHP, you may ask for an External Review by the Division of Insurance. Write to them at:

Office of Financial and Insurance Services
Division of Insurance
Health Plans Division
611 W. Ottawa, Second Floor
P.O. Box 30220
Lansing, Michigan 48909-7720
Or call #1-877-999-6442

Medicaid Fair Hearing Process

If you are not comfortable filing your complaint with Midwest, you can file your complaint directly with the State. These are the steps you should follow to file a complaint with the State:

1. Call 1-800-642-3195 to have a hearing request (complaint) form sent to you. You may also call to ask questions about the hearing process.
2. Fill out the request (complaint) form and return it to the address listed on the form.
3. A hearing will be scheduled.
4. You will be sent a letter telling you when and where your hearing will be held.
5. If your complaint is taken care of before your hearing date, you must call to ask for a hearing request withdrawal form. You can call 1-800-642-3195 to request this form.

MICHIGAN NOTICE TO PATIENTS (Required by the Patient Self-Determination Act):

The State of Michigan has authorized the use of Medical Durable Power of Attorney for health care. This lets you choose another person to make decisions about your care, custody, and medical treatment if you cannot make these decisions yourself. This way, your desire to accept or refuse medical treatment is honored when you cannot make that choice yourself.

KEEPING YOUR INFORMATION PRIVATE

Your doctor keeps your medical record and cannot give out any information about you unless you sign a special form. If you want to see your record, call your doctor. As a health plan, we look at your medical record to be sure the doctor is giving you the care you need. This information is confidential and is used to improve the care you get. We make sure any information we have about you is kept private and confidential. We require everyone we contract with to follow our privacy policy. We do not give out any information about you unless it is required by the law. When you signed up for a Medicaid health plan, you gave your consent for the use of information about you. We use this information to pay claims for your health care services, administer your benefits, and to be sure you get the care you need. We follow our Notice of Privacy

Practices about your information and changes to your information. If you have any questions or concerns, please call Customer Services at 1-888-654-2200.

NOTICE OF PRIVACY PRACTICES

Effective April 14, 2003

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

Information We Have. We have enrollment information about you which includes your date of birth, sex, identification number and other personal information. We also receive bills, physician reports and other information about your medical care.

Our Privacy Policy. We care about your privacy and we guard your information carefully. We are required by law to maintain the privacy of that information and to provide you with this notice of our legal duties and our privacy practices. We will not sell any information about you. Only people who have both the need and the legal right may see your information. Unless you give us a written authorization, we will only disclose your information for purposes of treatment, payment, business operations or when we are required by law to do so.

Treatment. We may disclose medical information about you for the purpose of coordinating your healthcare. For example, we may notify your personal doctor about treatment you receive in an emergency room.

Payment. We may use and disclose medical information about you so that the medical services you receive can be properly billed and paid for. For example, we may ask a hospital emergency department for details about your treatment before we pay the bill for your care.

Business Operations. We may need to use and disclose medical information about you in connection with our business operations. For example, we may use medical information about you to review the quality of services you receive.

As Required by Law. We will release information about you when we are required by law to do so. Examples of such releases would be for law enforcement or national security purposes, subpoenas or other court orders, communicable disease reporting, disaster relief, review of our activities by government agencies, to avert a serious threat to health or safety or in other kinds of emergencies.

Authorizations. If you give us a written authorization to do so, we may use and disclose your personal information. If you give us a written authorization, you have the right to change your mind and revoke that authorization.

Copies of this Notice. You have the right to receive an additional 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. Please call or write to us to request a copy.

Changes to this Notice. We reserve the right to revise this Privacy Notice. A revised notice will be effective for medical information we already have about you as well as any information we may receive in the future. We are required by law to comply with whatever notice is currently in effect. Any changes to our notice will be published in our Member Newsletter.

Your Right to Inspect and Copy. You may request, in writing, the right to inspect the information we have about you and to get copies of that information. We can deny your request for certain, limited reasons, but we must give you a written reason for our denial. We may charge a fee for copying your records.

Your Right to Amend. If you feel that the information we have about you is incorrect or incomplete, you can make a written request to us to amend that information. We can deny your request for certain limited reasons, but we must give you a written reason for our denial.

Your Right to a List of Disclosures. Upon written request, you have a right to receive a list of our disclosures of your information, except when you have authorized those disclosures or if the disclosures are made for treatment, payment or health care operations. We are not required to give you a list of disclosures made before April 14, 2003.

Your Right to Request Restrictions on Our Use or Disclosure of Information. If you do so in writing, you have the right to request restrictions on the information we may use or disclose about you. We are not required to agree to such requests.

Your Right to Request Confidential Communications. You have the right to request that we communicate with you about medical matters in a certain way or at a certain location. Your request must be in writing. For example, you can ask that we only contact you at home or only at a certain address or only by mail.

How to Use Your Rights Under this Notice. If you want to use your rights under this notice, you may call us or write to us. If your request to us must be in writing, we will help you prepare your written request, if you wish.

Complaints to the Federal Government. If you believe that your privacy rights have been violated, you have the right to file a complaint with the federal government. You may write to: Office of the Secretary, Department of Health and Human Services, 200 Independence Avenue, S.W., Washington, D.C. 20201. You will not be penalized for filing a complaint with the federal government.

Complaints and Communications to Us. If you want to exercise your rights under this Notice or if you wish to communicate with us about privacy issues or if you wish to file a privacy related complaint, you can write to:

Chief Privacy Officer

Midwest Health Plan, Inc.

5050 Schaefer Road

Dearborn, MI 48126

You can also call us as at 1-888-654-2200 to exercise your rights or if you have any questions about this Privacy Notice. You will not be penalized for filing a complaint.

WE ARE HERE TO HELP YOU

We want to know what you think about the care, services and information you get. As a member, you will get a member newsletter four times a year. This newsletter gives you tips on staying well, what care you should receive (care guidelines), and information about our services. You will also be invited to health fairs. At these fairs you will hear about well child care, shots, taking care of yourself, topics like stress and depression, diabetes and preventive care. Some examples of the free programs we have are for persons with diabetes, high blood pressure, high cholesterol, pregnancy, asthma, depression, or if you want to quit smoking. We have a quality improvement program that tells you what MHP is doing each year to help make sure you get the best care. Our program and plan also tell you our goals and our progress to meeting our goals. If you would like information about our quality improvement program, a report on our progress in meeting our goals, or if you have any questions about any of this information, please call Customer Services.

WE WANT TO BE SURE YOU ARE HAPPY WITH MHP

We care about you. You are very important to us.

We want to know what you like and don't like about our plan. We want to know what you think about the information we send you. We want to know how we can make our services better. Please let us know how we can make the care and services you get better by calling Customer Services at 1-888-654-2200.

Midwest Health Plan is a for profit health maintenance organization (HMO). We serve the Medicaid population. We are licensed in the state of Michigan and have received

new health plan accreditation from the National Committee on Quality Assurance (NCQA).

If you have questions, or would like a full copy of the certificate of coverage, please contact our Customer Services Department at 1-888-654-2200.