## 2020 Member Handbook List of Changes





Effective Date	Section	Page	Change
3/12/20	First Choice is the Right Choice	3	<b>Added:</b> If you have changes in your family size, living arrangements, county or residence, or mailing address, call Healthy Connections at <b>1-888-549-0820</b> or visit your local eligibility office to make these updates.
			Changed Healthy Connections phone number to <b>1-888-549-0820</b> .
	Your ID Card	4	Included image of the Healthy Connections ID card, and add captions to identify it and the existing First Choice ID card on the same page.
	Your PCP	5	In the first paragraph, added the following: You can choose a different PCP for each family member, or you can choose one for the whole family. Please note some providers may have age limits.
	Your PCP	6	Added time frame: When we know your PCP is leaving the First Choice network, we will try to let you know by mail within 15 days from when we find out, and give you a new PCP in your area.
	When someone is sick or hurt	11	Corrected typographical error: 24/7 Nurse Call Line
	Your First Choice Benefits	12	Added all groups who do not have a copay to mirror the Copay Reference Guide: There will be no copayment for children younger than age 19, pregnant women, institutionalized individuals, members receiving emergency services, well-child visits from birth through the month of the 21st birthday, or federally recognized Native Americans.
			Deleted the exact copay amount for durable medical equipment (it is in the Copay Reference Guide): Durable medical equipment under a rent-to-purchase payment plan will have the \$3.40 copayment split evenly among the ten-month rental payment schedule.
			Reworded the last paragraph in the first column as follows: Copayment amounts are listed in the Copayment Reference Guide you got with your Member Handbook found on our website in the Getting Started section for members. Please call Member Services at 1-888-276-2020 if you need another a printed copy of the copay reference guide and member handbook, or have questions about copayments.
	Your First Choice Benefits	12	Added an asterisk by "Services*" at the top of column 2. <b>The asterisk corresponding disclaimer was added to the bottom of the page:</b> *Benefits and services may be subject to change, coverage limitations, member eligibility, and/or a determination of medical necessity.
	Your First Choice Benefits	13	Chiropractic care updated: Make an appointment with a First Choice chiropractor. Have your First Choice network provider call First Choice for prior authorization.

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	Your First Choice Benefits	13	Gastric bypass updated: To help make sure
	Your First Choice Benefits	15	Added: Podiatry is covered for medically necessary services for the testing and treatment of foot conditions.  Get a referral from your PCP.
	Long-term care/nursing home	17	Changed: Long-term/nursing home (after disenrollment <del>or 120 calendar days, whichever occurs first</del> ).
	Your First Choice Benefits	19	<b>Second paragraph updated:</b> we work with you and your PCP to help make sure your benefits
	Your First Choice Benefits	20	<b>Last paragraph in first column updated:</b> The goal of the program is to help make sure our members get the highest quality and the safest clinical care and services possible. To help make sure we are meeting our goals, a Quality Improvement
	Your Family and First Choice	21	<b>First paragraph in EPSDT section updated:</b> Well-child visits help make sure your child is growing up healthy.
	Members' responsibilities	24	Added the following: 14. Make every effort to keep any agreed upon appointment or cancel an appointment in advance of when it is scheduled if you will be unable to attend.
	More About your Rights	27	Last paragraph on the page updated:a provider or an authorized representative may file an appeal or request a State Fair Hearing with SCDHHS for you.
	More About your Rights	28	<b>Updated the last paragraph on the page:</b> If you do not agree with the final decision by First Choice, you have the right to request a State Fair Hearing with SCDHHS.
	Enrollment/ Disenrollment Information	31	Under Enrollment/Disenrollment Information, paragraph 4: You may request disenrollment once without a specific reason at any time during the 90 days following your initial enrollment or 90 60 days following re-enrollment.
	More About First Choice	32	Added a new paragraph under bullet three from the top: If your request to change health plans is denied by Healthy Connections, you have the right to file for a state fair hearing of the decision with SCDHHS.



