



Member Handbook

USE THIS BOOKLET TO HELP YOU UNDERSTAND YOUR NEW HEALTH PLAN AND BENEFITS.

AND FOCUS ON BEING HEALTHY!



LOOK INSIDE TO FIND:



How to Find a Provider



Where to Go for Care









Other Helpful Programs

QUESTIONS? Call 1-800-704-1484 (TTY/TDD: 1-800-255-0056)
Monday – Friday 7 a.m. – 7 p.m.
or visit www.pshp.com

Make Peach State Health Plan Part of Your Plan.

Peach State Health Plan provides quality healthcare coverage with valuable programs and services, so you can stay focused on being healthy. Use this booklet to get the most out of your insurance. Keep it handy for helpful information about your health plan.

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GO ONLINE:

- Visit **pshp.com** to set up your online member account and view your Peach State Health Plan member handbook.
- See all of the health plan benefits and fill out forms online.

IF YOU DO NOT HAVE INTERNET ACCESS:

- Read the member materials included in this packet
- Fill out the forms and mail them using the postage-paid envelope included in this packet.
- Contact Member Services by calling **1-800-704-1484** (TTY/TDD: **1-800-255-0056**) for help finding a Primary Care Provider (PCP) or answers to any other questions you have.



Learn More About Your Coverage

USE THIS LIST TO HELP YOU GET STARTED.

Follow the steps below:

- Fill out any needed forms
- Check the boxes as you finish each step



Learn More About Your Benefits

Find important information about your coverage inside this Georgia Pathways to Coverage booklet and in your Peach State Health Plan member handbook.



Please visit psnp.com or contact Member Services 1-800-704-1484 (TTY/TDD: 1-800-255-0056) Monday – Friday 7 a.m. – 7 p.m



Set Up Your Member Account

Login: _____

Password: _____ See page 11



Make a Preventative Care Appointment with Your Primary Care Provider (PCP)

1. Complete your Health Risk Assessment Form.

Fill out the form and mail using the postage-paid envelope in this packet.

2. Complete your health screenings at your PCP appointment.

PCP Name: _____

Address: _____

Phone: _____ Email: _____

Office Hours: _____ 1st Appointment Date: _____



Learn More About Your Coverage

Log into your member account at **pshp.com** to learn more about your coverage details. Or, refer to your Peach State Health Plan member handbook. You can also call us with any questions at **1-800-704-1484** (TTY/TDD: **1-800-255-0056**).

Peach State Health Plan offers a wide range of services.

 MEDICAL SERVICES <ul style="list-style-type: none">▪ Doctor office visits▪ Medication▪ Labs▪ X-rays▪ In-home care▪ Hospital admission▪ Medical supplies
 VISION SERVICES <ul style="list-style-type: none">▪ Eye exams▪ Eyeglasses
 DENTAL SERVICES <ul style="list-style-type: none">▪ Oral Exams▪ X-rays▪ Simple tooth removal
 BEHAVIORAL HEALTH SERVICES <ul style="list-style-type: none">▪ Inpatient mental health/alcohol and substance abuse services▪ Outpatient mental health/alcohol and substance abuse services

WE ALSO OFFER THESE BENEFITS AT NO EXTRA COST TO YOU

- **Extra assistance for complex health conditions through our Case & Disease Management Programs**
 - Personalized care to help you manage any complex health conditions.
 - Coordination of care with programs and services in your community.
- **Member Services representatives to help answer your questions**
 - Call **1-800-704-1484** (TTY/TDD: **1-800-255-0056**) Monday – Friday 7 a.m. – 7 p.m or visit www.pshp.com.
- **24/7 Nurse Advice Line for advice about any health-related problems**
 - Call **1-800-704-1484** (TTY/TDD: **1-800-255-0056**) to speak to a medical professional anytime, day or night.
- The **Mental Health Crisis line** is also available for immediate assistance for those with a behavioral health related problem.
 - Call **1-800-704-1484**, 24 hours a day, 7 days a week. This crisis line is FREE and provides bilingual help.



The Georgia Pathways to Coverage (Pathways) Program gives Georgians that do not qualify for Medicaid today **the chance to get quality healthcare coverage** through the Georgia Medicaid program. Pathways members are eligible for most benefits provided to other Medicaid groups, with the exception of Non-Emergency Medical Transportation (NEMT).

Georgia Pathways to Coverage members ages 19 and 20 may access NEMT as part of their benefits.

You are not responsible to pay any copay amount for covered services.

Eligibility Requirements

Requirements to join the Georgia Pathways to Coverage program differ from other Georgia Medicaid programs.

To be eligible, you must:

- Be a Georgia resident
- Be a U.S. citizen or legal resident
- Not be eligible for any other category of Medicaid
- Be at least 19 years old and between the ages of 19 and 64
- Have a household income below the poverty line. For Federal Poverty Level information please visit <https://aspe.hhs.gov/poverty-guidelines>
- Not be in jail or prison
- Provide proof of participation in one or more qualifying activities for at least 80 hours per month

Income verification will be determined prior to your enrollment in the Georgia Pathways to Care program.

Reasonable Modifications

In addition, Reasonable Modifications unique to the Pathways Qualifying Activity and Hours requirement are available to persons with disabilities who need help doing the 80 hours of qualifying activities.

Maintaining Georgia Pathways to Coverage Eligibility

To remain eligible for Medicaid coverage, through the Georgia Pathways to Coverage program, a member must show they are completing at least 80 hours per month of one or more of the allowable Qualifying Activities. Report Qualifying Activity and Hours directly to the state using one of the following state-approved reporting methods:

- **Gateway:** Attest to hours and activities for the past month and upload documentation (pdf, jpg, tiff, bmp, docx) through your account. You can access Gateway by visiting www.gateway.ga.gov.
- **Paper/Mail:** Attest to hours and activities using a standard form template with attached documentation and mail it to a local Department of Family & Children's Services (DFCS) office. Mail must be postmarked by the 17th of the month of reporting.
- **In-Person:** Attest to hours and activities and provide documentation at a local DFCS office. Documentation must be stamped upon receipt by the 17th of the month of reporting.
- **Telephone:** You may call to attest to your hours and activities. You will need to submit supporting documentation via one of the other allowable channels by the 17th of the month of reporting.
- **Mobile:** Members may attest to hours and activities for the past month and upload documentation to their account.



About the Georgia Pathways to Coverage Program

Our Member Engagement Team

Peach State Health Plan's Member Engagement Team is committed to ensuring Georgia Pathway Members enrolled have the proper support in place to help you maintain eligibility. Our Member Engagement Team is here for you (by phone, email, text, etc.) and will provide you with support and engagement services that include:

- Conducting assessments
- Screening and triaging Pathways Members
- Coordinating for ongoing engagement and support that may be needed (i.e., resources for transportation, housing, etc.) of their Qualifying Activities.

We will work in collaboration with Georgia Pathway Members and our Community Partners to assist you with securing Qualifying Activities and hours in maintaining eligibility.

Qualifying Activities

Qualifying Activities that count towards maintaining Georgia Pathways to Coverage eligibility include:

- Employment, including self-employment
- On-the-Job Training
- Job Readiness
- Community Service
- Vocational Educational Training
- Enrollment in an Institution of Higher Education
- Enrollment and Active Engagement in the Georgia Vocational Rehabilitation Agency (GVRA) Vocational Rehabilitation Program

You must provide a Good Cause Exception request for any month you fail to meet the 80 hours of Qualifying Activities while participating in the Georgia Pathways to Coverage program.

Reporting Your Qualifying Activity and Hours

When you report your Qualifying Activity and Hours, you need to include a self-attestation of your Qualifying Activity and Hours and supporting documents for proof of those hours. Once you have successfully reported your Qualifying Activity and Hours for six (6) months in a row, you will no longer have to meet the Qualifying Activity and Hours requirement – except to inform the state of any changes to your situation.

Keep the following deadlines in mind when gathering your Qualifying Activity and Hours documents:

- **3rd of Every Month:** Due date to report hours and activities for the previous month.
- **17th of Every Month:** Final reporting deadline to keep Georgia Pathways to Coverage for the next month.
- **After the 17th of Every Month:** If you do not report Qualifying Activity and Hours by the late reporting deadline, you will be suspended from the Georgia Pathways to Coverage program the first day of the next month. While in suspension, you will not have medical coverage.





Examples of Qualifying Activities verification include:

Employment	<ul style="list-style-type: none"> ■ Work number ■ Pay stubs ■ Written statement from source/employer ■ Gross earnings (if hourly pay is known) ■ Timesheet
Self-employment	<ul style="list-style-type: none"> ■ Signed Standardized Work/Participation Calendar from member indicating hours engaged (<i>Member may fill in a standardized worksheet template indicating total weekly hours worked per client/activity; OR submit a snapshot of their actual work calendar from the reporting month (e.g. Photo of ledger of appointments or Screenshot of calendar with work activities)</i>)
On-the-job training (OJT)	<ul style="list-style-type: none"> ■ Statement from supervisor sponsoring the OJT
Job Readiness	<ul style="list-style-type: none"> ■ Signed statement from Recognized Agency or Community Resource indicating hours engaged. (<i>Recognized agencies include: Georgia Department of Labor Career Center, Workforce Development Board, Georgia Vocational Rehabilitation Agency, Goodwill, and other agencies as authorized by the state</i>) ■ Signed statement from habilitation/rehabilitation institution verifying hours in last four weeks
Community Service	<ul style="list-style-type: none"> ■ Signed Standardized Work/Participation Calendar ■ Signed statement on organization letterhead from supervisor verifying hours
Vocational Educational Training	<ul style="list-style-type: none"> ■ Official course enrollment for the current semester from the Office of the Registrar ■ Copy of class schedule for the current semester ■ Enrollment status through an interface (if available and if the student has consented to have their enrollment information shared with the Department of Human Services)
Enrollment in an Institution of Higher Education	<ul style="list-style-type: none"> ■ Official course enrollment for the current semester from the Office of the Registrar ■ Copy of class schedule for the current semester ■ Enrollment status through an interface (if available and if the student has consented to have their enrollment information shared with the Department of Human Services)
Enrollment and active engagement in the Georgia Vocational Rehabilitation Agency (GVRA) Vocational Rehabilitation program	<ul style="list-style-type: none"> ■ Signed statement from GVRA dated within four weeks of Pathways application submission by the individual ■ Enrollment letter dated within four weeks of Pathways application submission by the individual ■ Current active client status through GVRA interface (if available)



About the Georgia Pathways to Care Program

Reasonable Modification

Changes made by eligibility staff to the Georgia Pathways Medicaid rules, policies, or practices for enrolled Georgia Pathways members are considered Reasonable Modifications. This includes:

- Allowing a member to maintain Georgia Pathways coverage up to 90 days if they can no longer work/engage in a Qualifying Activity due to a disability while they are referred to and going through the intake process with GVRA.

Good Cause Exception

You can request a Good Cause Exception for not meeting the 80 hours of Qualifying Activities during the reporting month. The Good Cause Exception must be a situation that temporarily prevents, or changes your ability to, complete Qualifying Activity and Hours. You can submit this request directly to the state using one of the following state-approved methods:

- Gateway: You can access Gateway by visiting www.gateway.ga.gov
- Paper/Mail: mail request to a local Department of Family & Children's Services (DFCS) office
- In-Person at your local DFCS office
- Telephone: You may call in your Good Cause Exception request at 1-877-423-4746 or 711 for hearing-impaired

You must complete the following requirements to make a Good Cause Exception request.

- Select a reason for the Good Cause Exception from the options
- Provide a written explanation of the event
- Indicate the number of hours requested for the Good Cause Exception
- Submit documentation to support the request





You can only request a Good Cause Exception for the previous month's Qualifying Activity and Hours. There is a maximum of 80 hours of Good Cause Exceptions during the certification year.

The list of Good Cause reasons include:

- Family emergency or life event
- Birth, adoption, foster placement, or death of an immediate family member
- Temporary illness/short term injury
- Serious illness or hospitalization of member, or immediate family member
- Natural or human-caused disaster
- Temporary homelessness
- COVID-19
- Other

Suspension

You will be suspended from the Georgia Pathways to Coverage program, if you do not report your monthly Qualifying Activity and Hours or have an approved Good Cause Exception. The approved Good Cause Exception would allow you to meet your 80-hour monthly threshold to avoid coverage suspension.

For example, May hours are due by June 3rd or at the latest June 17th to continue Georgia Pathways eligibility for July.

- You can report your Qualifying Activity and Hours for the previous month by the 3rd day of the current month.
- You must report and prove your hours by the 17th of each month to keep medical coverage for the next month.
- You will receive instructions on the Good Cause Exception request process in your Monthly Qualifying Activity Incomplete Notice.
- If you do not report by the 17th of the month, the suspension begins on the first day of the following month.

To resume coverage after suspension:

- You have 90 days from the start of the suspension to report you are meeting the 80 hours of Qualifying Activities or to request a Good Cause Exception for the number of hours missing that month
- After verifying your hours, the Georgia Pathways coverage resumes the first day of the next month.
- If you do not meet the Qualifying Activity and Hours within 90 days from the start of the suspension, your Georgia Pathways coverage will be terminated, and you must reapply.
- You may reapply at any time following the termination.



Set Up Your Online Member Account

Your secure online member account is where you can always find details about your ***Peach State Health Plan*** coverage. Your member account is the first place to go for information about your health plan. It is easy to use when you need quick answers, health forms and more!

VISIT YOUR MEMBER ACCOUNT TO:

- ✓ View your plan benefits
- ✓ Find and complete health forms
- ✓ Print or request a replacement member ID card
- ✓ Choose or change your Primary Care Provider (PCP)



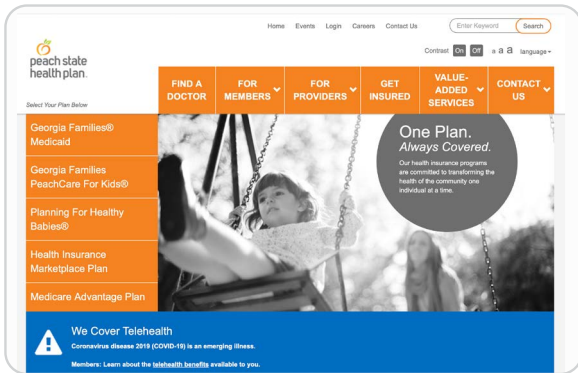


STEPS TO CREATE YOUR ACCOUNT

STEP 1: Go Online

Go to pshp.com

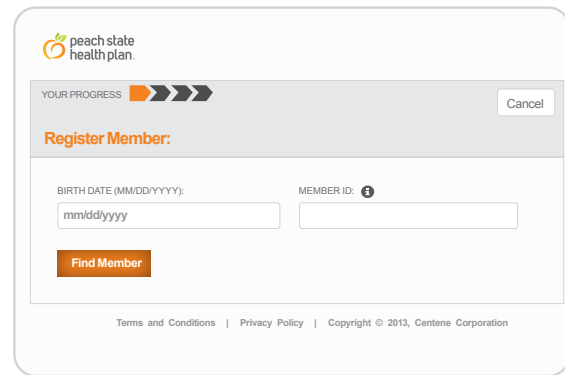
Click [Login](#) and choose [Sign Up Now](#).



STEP 2: Enter Your Information

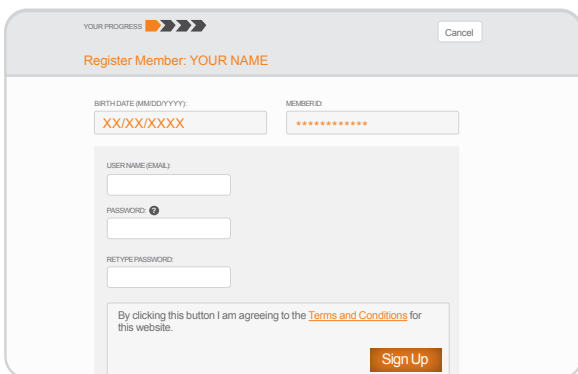
Enter your birth date and member ID number (on your Member ID card).

Click [Find Member](#).



STEP 3: Register Your Account

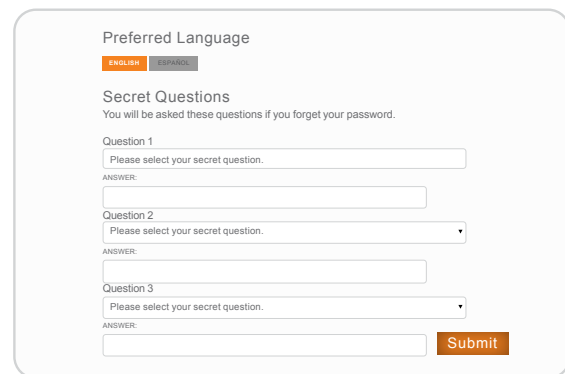
Enter your email address. Choose a password that is a combination of at least eight letters, numbers and/or symbols. Check the [Terms and Conditions](#) box and click [Sign Up](#).



A confirmation message will appear on your screen and you will receive an email. Click the link in your email to finish registering your account.

STEP 4: Verify Your Account

Choose your *preferred language* and enter answers for your *secret questions*. If you forget your password, the *secret questions* can help you access your account. Click the [Submit](#) button.



You can add dependents to your account by clicking [Continue](#).



Know Where to Go for Care

Get the Right Care at the Right Place

Make sure you know where to get medical care when you need it. If you get sick or hurt, you have several options to get the care you need.



PRIMARY CARE PROVIDER (PCP)

Your PCP is your main doctor. Call the office to schedule a visit if you do not need immediate medical care. Visit pshp.com to choose or change your PCP.

See your PCP if you need:

- Help with colds, flu and fevers
- Care for ongoing health issues like asthma or diabetes
- A health checkup
- Immunizations
- General advice about your overall health



24/7 NURSE ADVICE LINE

Our 24/7 Nurse Advice Line is a free health information phone line. Medical professionals are available to answer questions about your health. They can help decide if you should see your PCP and assist with setting up your appointment.

Call our 24/7 Nurse Advice Line at 1-800-704-1484 if you need:

- Help knowing if you should see your PCP
- Help caring for a sick child
- Answers to questions about your health



BEHAVIORAL HEALTH SERVICES

The Mental Health Crisis line is a free phone line with behavioral health professionals available to help when you need mental health and substance abuse care.

Call our 24/7 nurse advice line at 1-800-704-1484 if you need:

- Help getting immediate care for mental health and substance abuse illness
- Talk to a counselor about a behavioral health crisis



URGENT CARE CENTER

Urgent care centers help diagnose and treat illnesses or injuries that are not life threatening, but cannot wait until the next day. If your PCP's office is closed, an urgent care center can give you fast, hands-on care. Urgent care centers can also offer shorter wait times than an Emergency Room (ER).

Go to an in-network urgent care center for:


- Sprains
- Ear infections
- High fevers
- Flu symptoms with vomiting



Use the chart on this page to help you decide your best care option.

! **Is your illness or injury life threatening?**
 (Shortness of breath, chest pains, bleeding that will not stop, poisoning, burns or a broken bone)

YES | **NO**

 **Call 9-1-1 or go to the ER.**

Immediately visit the ER for:

- Chest pains
- Bleeding that won't stop
- Shortness of breath
- Broken bones
- Poisoning
- Severe cuts or burns
- Behavioral health emergency

 **Do you have a physical injury or an illness like the flu, an ear infection or a fever?**


YES | **NO**

! Remember to check and make sure the doctor, urgent care center or hospital is in our network.


 **Do you want to see a doctor?** **OR**  **Or, do you want to talk to a nurse for advice?**

Is your doctor's office open?

YES | **NO**

 **Call your Primary Care Provider (PCP)**
Set up an appointment to see your main doctor.

 **Go to urgent care**
Get quickly diagnosed and treated for less serious illnesses or injuries.

 **Call our 24/7 Nurse Advice Line**
Get quick, reliable answers to your health questions.



Tell Us About Your Health

The Health Risk Assessment Form helps us stay updated about your current health.

We use this form to find out about any health changes. It is important to complete this form every year. By having this information, we can meet your specific health needs with any additional services or assistance.



Remember
to complete
this form
every year.

COMPLETE YOUR HEALTH RISK ASSESSMENT FORM

Fill out the form online or in this packet. After we receive your form, we will contact you for more information.

This form is private. Make sure to complete one form for every ***Peach State Health Plan*** member. Contact Member Services at **1-800-704-1484, Monday – Friday 7 a.m. – 7 p.m.** to have additional forms mailed to you. Complete this form every year.

FILL OUT THE MEMBER DATA CHANGE FORM TO CHOOSE OR CHANGE YOUR PCP

This form helps us to let your PCP know that you are a ***Peach State Health Plan*** member. Fill out the form online or in this packet and mail it using the postage-paid envelope.

! *Make sure to complete one form for every Peach State Health Plan member.*

Additional health forms are available on the secure member portal and can be completed online!

Find Your Primary Care Provider (PCP)



Your Primary Care Provider (PCP) is your main personal doctor.

After you choose your PCP, it is important for you to meet your doctor so you can get to know each other. Building a strong relationship with your PCP will help you feel comfortable talking about your health.

Your PCP will keep your records and be aware of any changes to your health. Always contact your PCP when you feel sick or have any health questions, so you can receive the best care.

FIND A PCP

Visit pshp.com to choose or change your PCP.

-or-

Call us at **1-800-704-1484**. (TTY/TDD: **1-800-255-0056**).

We can help you find a PCP.

YOUR HEALTH CHECKUPS

After you choose your PCP, call to set up your appointment

An annual checkup with your PCP is the best way for you to stay informed about your health. Talk with your doctor about any changes you have noticed or concerns you may have. Your PCP may recommend tests or other preventive care services to help monitor your health. Take this opportunity to ask any questions you may have.

If you need help scheduling this visit, call us at **1-800-704-1484** (TTY/TDD: **1-800-255-0056**).



