



From Coverage to Care: How to Use Health Coverage



CMS Office of Minority Health

January 30, 2020

“Working to Achieve Health Equity”

Agenda

- Welcome & Logistics
- Helping Consumers Make the Most of Their Health Coverage
- Additional C2C Resources
- How to Get Involved
- Question & Answer Session

Overview

CMS OMH

Mission

To ensure that the voices and the needs of the populations we represent (racial and ethnic minorities, sexual and gender minorities, and people with disabilities) are present as the Agency is developing, implementing, and evaluating its programs and policies.

Vision

All CMS beneficiaries have achieved their highest level of health, and disparities in health care quality and access have been eliminated.

From Coverage to Care (C2C)

What is C2C?

C2C aims to help individuals understand their health coverage and connect to primary care and the preventive services that are right for them, so they can live a long and healthy life.



Helping Consumers Make the Most of Their Health Coverage

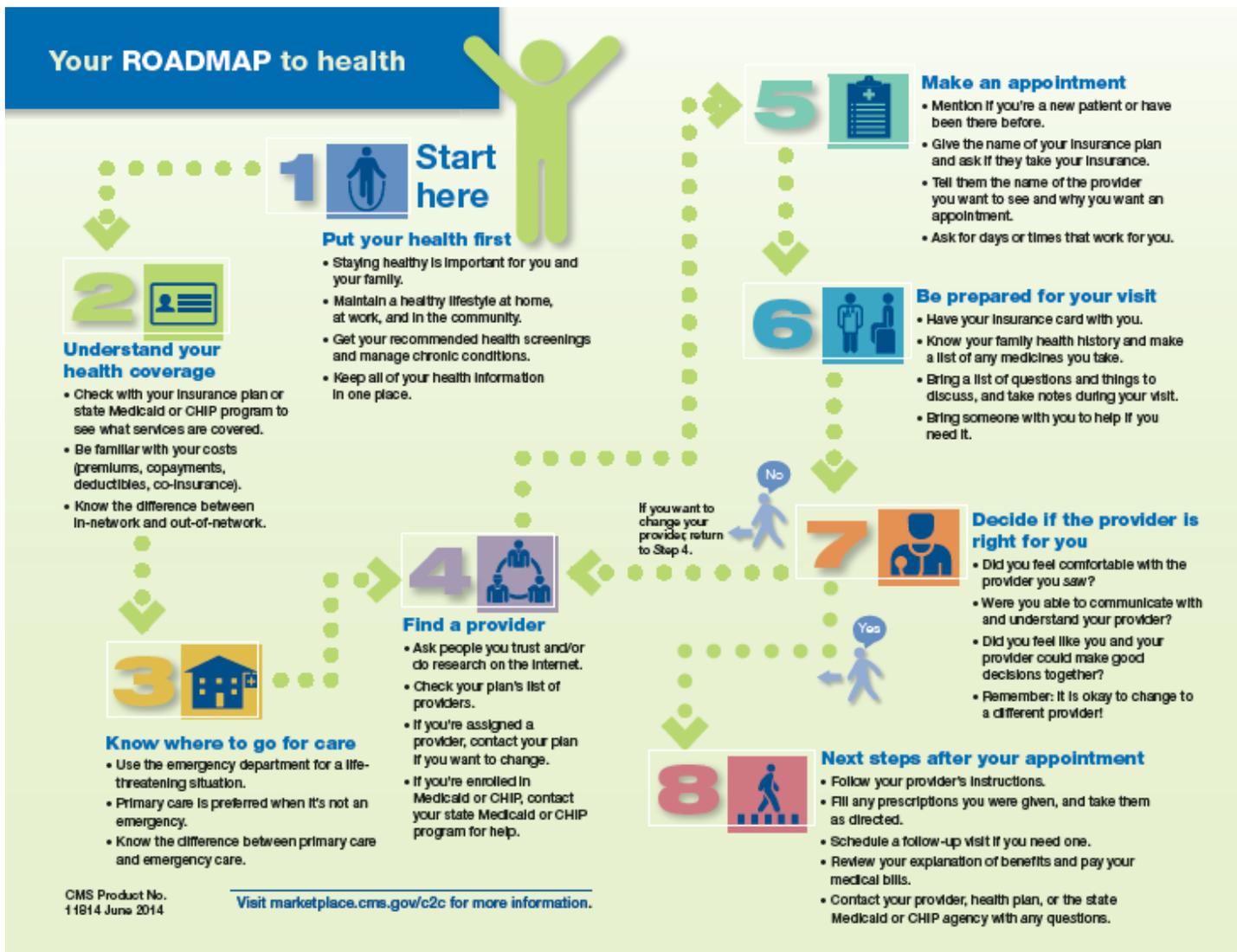
Roadmap to Better Care and a Healthier You

- Explains what health coverage is and how to use it to get primary care and preventive services
- Roadmap Poster
- Consumer Tools:
 - Insurance card
 - Primary Care vs. Emergency Care
 - Explanation of Benefits
- Pull-out step booklets
- Available in 8 languages
- Tribal version
- Customizable version



go.cms.gov/c2c

From Coverage to Care Roadmap



1. Put Your Health First

Key Points for Consumers

- Staying healthy is important for you and your family.
- Maintain a healthy lifestyle at home, at work, and in the community
- Get your recommend health screenings and manage chronic conditions.
- Keep all of your health information in one place.
- While coverage is important, **there's no substitute for living a healthy lifestyle**



2. Understanding Your Health Coverage

Key Points for Consumers

- Health coverage pays for provider services and medications when you're sick.
- It's also important when you're *not* sick - most coverage includes **immunizations** for children and adults, **annual visits** for women and seniors, **obesity screening** and **counseling** for people of all ages
- Check with your insurance plan or state Medicaid or CHIP program to see what services are covered, and familiarize yourself with your costs including premiums, co-payments, and deductibles
- Know the difference between **in-network** and **out-of-network**; if a provider is out-of-network it might cost more to see them



2. Understanding Your Health Coverage

Key Points for Consumers

- You should receive a membership package and insurance card from your health plan or your state Medicaid or CHIP program.
 - If you can't read or understand it, call and ask them to explain it to you.



| | |
|--|--|
| Plan type 4 | Member Name: Jane Doe 1 |
| Effective date | Member Number: XXX-XX-XXX 2 |
| | Group Number: XXXXX-XXX 3 |
| Prescription Group # XXXXX | PCP Copay \$15.00 5 |
| Prescription Copay 7 \$15.00 Generic \$20.00 Name brand | Specialist Copay \$25.00 Emergency Room Copay \$75.00 |
| | Member Service: 800-XXX-XXXX 6 |

3. Know Where to Go For Care

Key Points for Consumers

- Although you can get health care from many different places, it's best for you to get routine care and recommended preventive services from a **primary care provider**.
- If you have an emergency or life-threatening situation, call **9-1-1**.
- There are big differences between visits to your primary care provider and visits to the emergency department, such as cost, time spent waiting for care, and follow up.



3. Know Where to Go For Care



Key Points for Consumers

| Primary Care Provider | Emergency Department |
|---|--|
| Go when you feel sick and when you feel well | Only go when you're injured or very sick |
| Pay your primary care copay | Likely pay a copay, co-insurance, and have to meet your deductible |
| Call ahead to make an appointment | Show up when you need to and wait until they can get to you |
| Usually see the same provider every time | See the provider who is working that day |
| Provider will usually have access to your health record | Provider probably won't have access to your health records |

4. Find a Provider

Key Points for Consumers

- A **primary care provider (PCP)** is who you'll see for most health problems. They will also work with you to get your recommended screenings, keep your health records, help you manage chronic conditions, and link you to other types of providers if you need them.
- A **specialist** will see you for certain services or to treat specific conditions. These include: cardiologists, psychologists, allergists, etc.
- You may need a **referral** from your PCP before you go to a specialist in order to have your health plan pay for your visit.



4. Find a Provider

Key Points for Consumers

1. Identify providers in your network

- Call your insurance company or state Medicaid and CHIP program or look at their website to find providers in your network who take your health coverage

2. Ask around

- Ask your friends or family if they have providers they like and what they like about them

3. Pick a provider

- Call the provider's office and ask questions (e.g., Is the provider accepting new patients or patients with your health coverage?)

4. Give them a try



5. Make an Appointment

Key Points for Consumers

- When you make your appointment, have your insurance card or other documentation handy and know what you want.
- Mention:
 - Your name and if you're a new patient
 - Why you want to see the provider
 - The name of your insurance plan
 - The name of the provider you'd like to see
 - If you have a specific need (like translation or accessible medical equipment)
 - The days and times that work for you



6. Be Prepared for Your Visit

Key Points for Consumers

- If this is your first visit to a new provider or you are using new health coverage, you will need to bring a few things with you:
 - Insurance card or other documentation
 - Photo identification
 - Completed forms
 - Your copay, if you have one. Ask for a receipt for your records.
- It is important to **show up early** for your appointment.



6. Be Prepared for Your Visit

Key Points for Consumers

- The staff may ask you to fill out additional forms and to read over their privacy policy, which tells you how they will keep your information private.
- If you need to change your appointment, **contact your provider's office as soon as possible** to avoid costs.
- When you see your provider, it is helpful to share your **family health history, any available medical records, medications you are taking, and questions or concerns** you may have about your health



6. Be Prepared for Your Visit

Key Points for Consumers

- You should be able to answer questions like these before you leave your provider's office:
 - How is my health? What can I do to stay healthy?
 - What do I do next? Do I need blood work or another test?
 - If I need to take medicine, when do I take it and how much do I take? Are there any side effects? Is a generic option available?
- Ask your provider for written materials you can take home and read. Don't leave until all of your questions have been answered and you understand what to do next.



7. Decide if the Provider is Right for You

Key Points for Consumers

- Your health and well-being are important and personal. You should have a provider that you can work with, trust, and feel comfortable talking to.
- If you were assigned a provider and you want to try someone else, call your health plan or go to their website to make that change.



7. Decide if the Provider is Right for You

Key Questions for Consumers

- Did your provider pay attention to what you had to say and speak in a way that made you comfortable?
- Did they provide any assistance you asked for? Could you move around in the office and use the medical equipment without barriers?
- Did you feel you were treated fairly by your provider and the office staff?
- Could you contact your provider or the office staff if you needed to ask a question?



8. Next Steps

Key Points for Consumers

- You'll see your PCP for your recommended preventive care and for help managing chronic conditions, as well as when you feel sick
- Ask your provider to notify you when your next visit or recommended health screenings should happen. Make an appointment for that visit as soon as you can and write it down somewhere you'll remember it.
- If you have questions between visits, call your provider.



8. Next Steps

Key Points for Consumers

- Follow through with your provider's recommendations
- After you visit your provider, you may receive an **Explanation of Benefits (EOB)** from your insurer.
- Pay your bills and keep any paperwork
- Fill any prescriptions you need.



Explanation of Benefits (EOB)

It's a summary of health care charges from the care you or those covered under your policy received. It is NOT A BILL!

Explanation of Benefits (EOB) Customer service: 1-800-123-4567

Statement date: XXXXXX Member name:
 Document number: XXXXXXXXXXXXXXXXXXXX Address:
THIS IS NOT A BILL City, State, Zip:

Subscriber number: XXXXXXXXX ID: XXXXXXXXX Group: ABCDE Group number: XXXXXX

Patient name: 5 Provider: Claim number: XXXXXXXXXXXX
 Date received: Payee: Date paid: XXXXXXXX

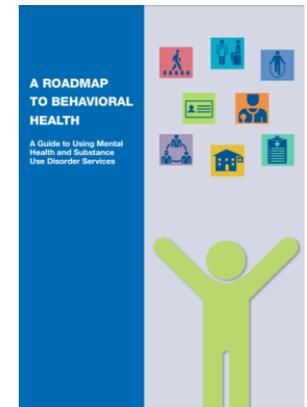
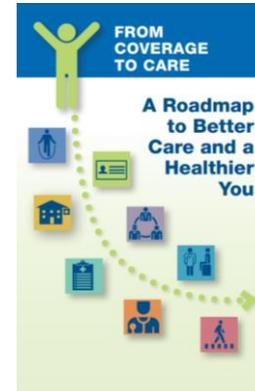
| Claim Detail | | | | What your provider can charge you | | Your responsibility | | | Total Claim Cost | | |
|--------------|-----------------|-----------------------|--------------|-----------------------------------|-------------------|---------------------|------------|--------------|-------------------|----------------|---------------|
| Line No. | Date of Service | 1 Service Description | Claim Status | 2 Provider Charges | 3 Allowed Charges | Co-Pay | Deductible | Co-Insurance | 4 Paid by Insurer | 6 What You Owe | 7 Remark Code |
| 1 | 3/20/14-3/20/14 | Medical care | Paid | \$31.60 | \$2.15 | \$0.00 | \$0.00 | \$0.00 | \$2.15 | \$0.00 | PDC |
| 2 | 3/20/14-3/20/14 | Medical care | Paid | \$375.00 | \$118.12 | \$35.00 | \$0.00 | \$0.00 | \$83.12 | \$35.00 | PDC |
| Total | | | | \$406.60 | \$120.27 | \$35.00 | \$0.00 | \$0.00 | \$85.27 | \$35.00 | |

Remark Code: PDC—Billed amount is higher than the maximum payment insurance allows. The payment is for the allowed amount.

Resources

C2C Resources

- [5 Ways to Make the Most of Your Health Coverage](#)
- [Prevention Resources](#)
- [Roadmap to Behavioral Health](#)
- [Enrollment Toolkit](#)
- [My Health Coverage at-a-Glance](#)



5 Ways to Make the Most of Your Health Coverage



- Quick reference material to start the journey from coverage to care.
- Available in Arabic, Chinese, English, Haitian Creole, Korean, Russian, Spanish, and Vietnamese.

5 Ways to Make the Most of Your Health Coverage



1 Confirm your coverage

- Be sure your enrollment is complete. Contact your health plan and/or state Medicaid office.
- Pay your premium if you have one, so you can use your health coverage when you need it.



2 Know where to go for answers

- Contact your health plan to see what services are covered, and what your costs will be.
- Read the *Roadmap to Better Care and a Healthier You* to learn about key health insurance terms, like coinsurance, and deductible.



3 Find a provider

- Select a health care provider in your network who will work with you to get your recommended health screenings.
- Remember you might pay more if you see a provider who is out-of-network.



4 Make an appointment

- Confirm your provider accepts your coverage.
- Talk to your provider about preventive services.
- Ask questions about your concerns and what you can do to stay healthy.



5 Fill your prescriptions

- Fill any prescriptions you need.
- Some drugs cost more than others. Ask in advance how much your prescription costs and if there is a more affordable option.

For more information about
From Coverage to Care,
visit go.cms.gov/c2c



Prevention Resources

- Focus on prevention and healthy living, and can be shared with consumers, reposted online, printed or ordered.
- Tailored for women, men, and parents and guardians of teens, children, and infants.
- We also have **Put Your Health First** infographics:
 - [Get Screened: Find Cancer Early](#)
 - [Use Your Health Coverage to Take Care of You and Your Baby!](#)
 - [Get Screened and Stay Healthy](#)

Put Your Health First
GET SCREENED
FIND CANCER EARLY

Breast Cancer
screening tests help find colorectal cancer early, when it may be more treatable

Colorectal Cancer
screening tests help find colorectal cancer early, when it may be more treatable

ADULTS

COVERAGE TO CARE >>> Prevention

Put Your Health First
Get the preventive services that are right for you!
Take advantage of these and other services available at no cost to adults under most health coverage.

Blood pressure and cholesterol screenings

Alcohol misuse and tobacco use counseling

Type 2 Diabetes Screening

Aspirin use for some adults

Colorectal cancer screening for adults over 50

Depression screening

Diet counseling and obesity screening

Hepatitis B and C screening

HIV screening and STD prevention counseling

Lung Cancer screening for some adults

Immunization Vaccines:

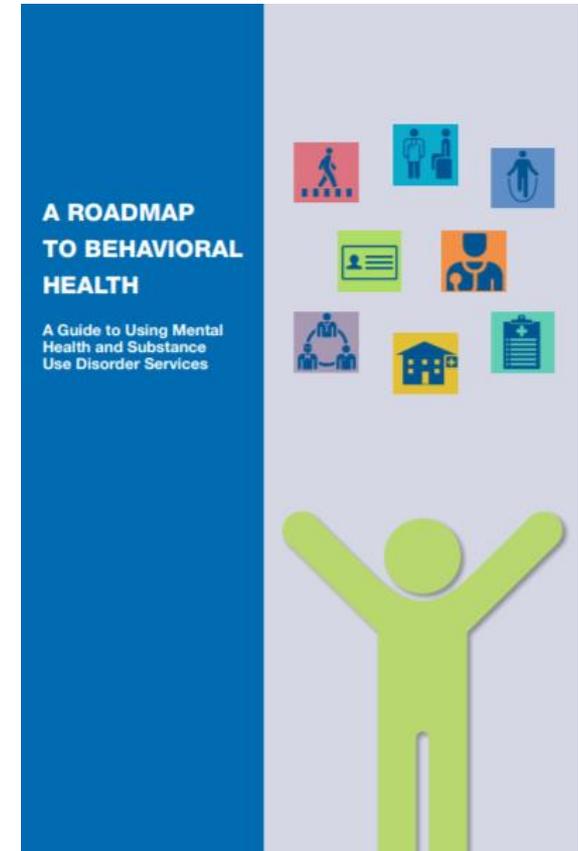
- Hepatitis A and B
- Herpes Zoster
- Human Papillomavirus (HPV)
- Influenza (Flu Shot)
- Measles, Mumps, Rubella
- Meningococcal
- Pneumococcal
- Tetanus, Diphtheria, Pertussis
- Varicella (Chicken Pox)

COST TIP
Most preventive services are covered at no cost. However, if you receive additional services, you may be billed. Ask your provider's office or plan to explain any charges.

These screenings and others may be FREE with your coverage.

A Roadmap to Behavioral Health

- Should be used with the *Roadmap to Better Care and a Healthier You* to understand how to use health coverage to improve mental *and* physical health.
- This guide adds to the 8 steps of the Roadmap to give important information about behavioral health.
- Also available in Spanish.



My Health Coverage at-a-Glance

My Health Coverage at-a-Glance

Plan Information

Plan name Group number Member ID number

Website Phone number Other

Know what you pay for care

| | | |
|--|--|---|
| | Premium The payment you make to a health insurance company or plan for your coverage. This is usually paid each month to keep your coverage. | Cost <input type="text"/> \$ or n/a per month/year/etc. |
| | Deductible The amount you pay for health care services before your health plan begins to pay. | Cost <input type="text"/> \$ or n/a <small>Services I can get before I meet my deductible. This includes preventive services, like flu shot, pap test, and colorectal cancer test, etc.</small> |
| | Copayment (Copay) A set amount you pay for a medical service or supply. There may be different costs for a doctor's visit, hospital outpatient visit, or prescription. | Primary care copay <input type="text"/> \$ or n/a Specialist copay <input type="text"/> \$ or n/a Prescription <input type="text"/> \$ or n/a Hospital copay <input type="text"/> \$ or n/a |
| | Coinsurance A portion you pay as your share of the cost for services after you pay any deductibles. | Primary coinsurance <input type="text"/> \$ or n/a Specialist coinsurance <input type="text"/> \$ or n/a Prescription coinsurance <input type="text"/> \$ or n/a Hospital coinsurance <input type="text"/> \$ or n/a |
| | Out-of-pocket maximum The most you pay before your plan starts to pay 100% for covered services in a plan year. | Out-of-pocket maximum <input type="text"/> \$ or n/a <small>Enter current maximum and note if it includes deductible and other costs.</small> |
| | Preventive services Routine health care screenings, check-ups, and vaccines. For example, flu shots, depression screenings, and blood pressure tests. | Cost <input type="text"/> \$ or n/a \$0 (for most plans, adjust if needed) |

This resource lets you work with patients to create a customized guide to their health coverage.

It includes:

- Plan Information
- Know what you pay for care
- Know where to go for care
- Dates to remember, notes

My Health Coverage at-a-Glance

Know where to go for care

Cost tip: Services usually cost less if you use in-network providers. These are facilities, providers, and suppliers your plan has agreed to use to offer services. To find out who is in-network, check the plan directory and ask your provider's office.



Primary Care Provider

The main provider (often a doctor) you see first for most health problems. This could be a private practice, community clinic, or other place. Go to this provider for preventive services, prescriptions or other health questions.

My provider's name ▼

My provider's phone number ▼



Specialists

A physician who focuses on a specific area of medicine or a group of patients to diagnose, manage, prevent, or treat certain types of symptoms and conditions. A non-physician specialist is a provider who has more training in a specific area.

My specialist's name ▼

My specialist's phone number ▼



Pharmacy

A store where prescriptions are given and sold. To fill prescriptions, find a pharmacy that's in-network. This way you won't pay as much. See the plan directory or check with your local pharmacy.

My pharmacy's address ▼

My pharmacy's phone number ▼



Emergency Department (ED or ER)

The ED in your local hospital is where you would receive service for an illness, injury, symptom, or condition so serious that a reasonable person would seek care and treatment right away to keep the condition from getting worse.

My local hospital's address ▼

My local hospital's phone number ▼

How to Get Involved

C2C Webpage

go.cms.gov/c2c

[En Español](#)

[CMS Equity Plan for Medicare](#)

[From Coverage to Care](#)

[C2C Consumer Resources](#)

[Prevention Resources](#)

[5 Ways to Make the Most of Your Coverage](#)

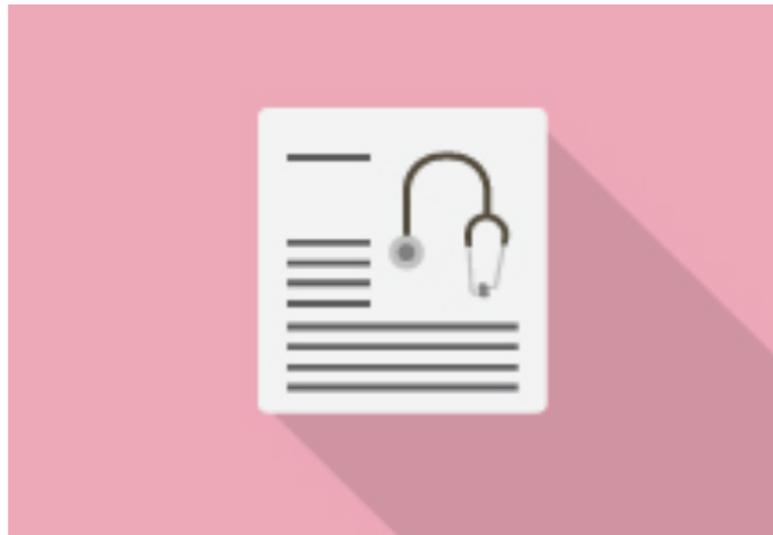
[Roadmap to Better Care](#)

[C2C Partner Resources](#)

[Get Involved](#)

[Connected Care: The Chronic Care Management Resource](#)

From Coverage to Care



Spotlight

New Languages for C2C Prevention Materials

Prevention is an important part of the *From Coverage to Care* (C2C) journey. The C2C's suite of prevention materials are now available in eight languages.

[View Materials](#)

Using C2C Resources

- **Start the Conversation.** Use the Roadmap as a tool to help people understand their new coverage and understand the importance of getting the right preventive services.
- **Help Consumers Understand.** The Roadmap has a lot of information for consumers. You can help them use it as a resource to refer back to as they journey to better health and well-being.
- **Personalize It.** You know your community. Consider adding local resources and information.

How to Get Involved

There are many ways to get involved!

- Become a C2C partner.
- Order and share C2C resources, free of charge to you and your organization.
- Use the C2C Community Presentation.
- Plan an event in your community.
- Subscribe to the C2C listserv.
- Send us stories.

coveragetocare@cms.hhs.gov



Become a C2C Partner

- To become a C2C partner, email coveragetocare@cms.hhs.gov.
- Download the Partner Toolkit, which includes an article for a blog or other publication, newsletter text, social media posts and graphics, and a web badge.
- All sample language is available in English & Spanish.

**Get Involved in
From Coverage to Care**

ABOUT FROM COVERAGE TO CARE

Thank you for your interest in *From Coverage to Care (C2C)*. There are many ways to get involved!

WHY IS THIS INITIATIVE SO IMPORTANT?

In the United States, an estimated [12.7 million](#) people signed up for coverage in the 2016 Open Enrollment, allowing them to gain or renew access to the health coverage they need. Enrolling in a health plan is only the initial step. The next step is to make the most of that coverage to maintain and improve health.

Developed by the Centers for Medicare & Medicaid Services (CMS), C2C aims to help people with health coverage, whether through an employer, Medicare, Medicaid, the Marketplace, or another type of health coverage, understand their benefits and connect to primary care and to preventive services, so they can live a long and healthy life. As part of the initiative, CMS has created [resources in multiple languages](#), free of charge to your organization and consumers, to help health care professionals and national and community organizations support consumers as they navigate their coverage.

WAYS TO COLLABORATE

BECOME A PARTNER

Your support is vital to help consumers make the most of their coverage and access preventive services to support their health goals. Getting involved is simple. Contact us at coveragetocare@cms.hhs.gov with any questions.

SHARE THE TOOLS

Whether you represent an organization or are an individual community advocate, you can be part of an important effort to improve the health of our nation. We encourage you to share C2C resources in churches, clinics, health systems, and in your community settings.

go.cms.gov/c2c #Coverage2Care 1

How to Order Resources

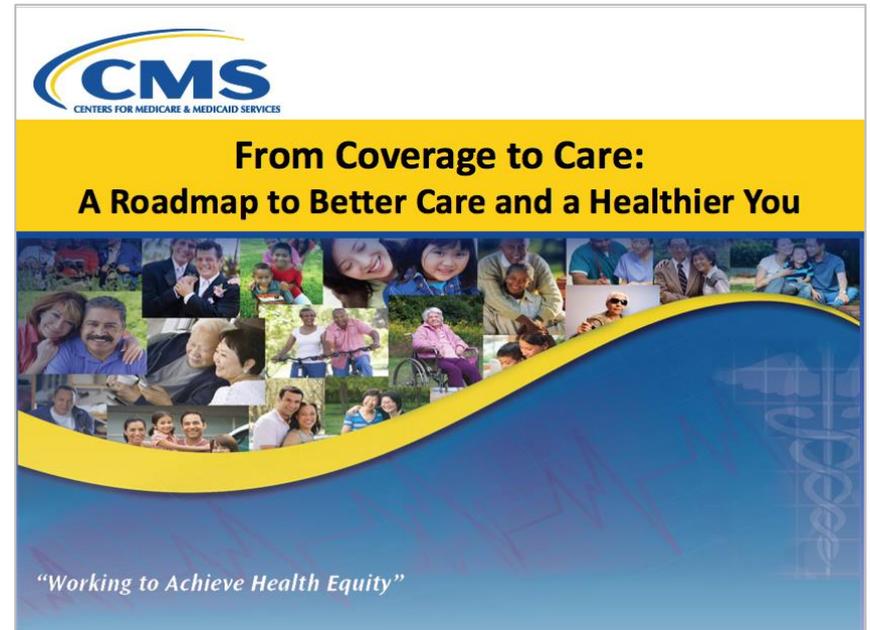
- Order printed copies and have them shipped at no cost to your organization or directly to you from the [CMS product warehouse](#).
- Many resources are available in English, Arabic, Chinese, Haitian Creole, Korean, Russian, Spanish, and Vietnamese.
- Resources for Tribal audiences are also available.



Community Presentation

C2C Community Presentation

- Consider using community presentation materials to help people learn about the C2C initiative and how to make the most of their coverage.
- Materials include:
 - Presentation slides
 - Presenter's guide
 - Resources handout



Who's Using Our Resources?

- Community Health Centers
- Hospitals
- Insurance Companies
- State and County Health Departments
- Area Agencies on Aging
- Tribal Organizations
- Assistors and Brokers
- Libraries
- Faith-Based Organizations
- Congressional Offices
- Voter Rights Organizations
- Legal Aid Societies
- Universities
- United Way
- SHIP Counselors
- Primary Care Associations
- Dialysis Facilities
- Ryan White Providers
- Justice System



Username:

[Forgot your Username or Password?](#)

Password:

[Sign in >>](#)

[Request an Account](#)

Subscribe to the C2C Listserv

Become part of our network by subscribing to the C2C listserv:

<http://bit.ly/CMSOMH>



The screenshot shows the CMS website's email update subscription form. At the top left is the CMS logo with the text "CENTERS FOR MEDICARE & MEDICAID SERVICES". To the right of the logo are the website addresses: "www.cms.gov", "www.medicaid.gov", and "www.medicare.gov". Below this is the heading "Email Updates" followed by the instruction: "To sign up for updates or to access your subscriber preferences, please enter your contact information below." There is a text input field labeled "Email Address" with a red asterisk to its left. Below the input field are two buttons: "SUBMIT" and "CANCEL". At the bottom of the form, there is a line of text: "Your contact information is used to deliver requested updates or to access your subscriber preferences." and a link for "Privacy Policy - Help".

Send Us Your Stories

Send us stories or videos of how your organization uses C2C resources!

CoverageToCare@cms.hhs.gov



Q&A Session

Q&A Session

- Please submit your questions via the chat box or raise your hand and CMS will unmute your line.
- To ask a question through the phone line, for those dialed in by phone, you must have your audio pin entered.
- If you will be using your computer speakers and want to ask a question, you must have a working microphone.

Thank You!

Visit our website:

go.cms.gov/c2c

Contact us:

CoverageToCare@cms.hhs.gov

C2C Listserv:

<http://bit.ly/CMSOMH>