Get started today!

We want to help you better understand your Ambetter insurance plan and how to use it. Review the information inside to learn how to take charge of your health to get the most out of your health plan benefits.

Keep this booklet as a tool to help answer questions.

Text updates: Sign up to receive text messages. Send a text to AZ 36453.*

*Data rates may apply.
Start Using Your Coverage

Use this worksheet to help you begin using your Ambetter from Arizona Complete Health insurance. Follow each of these steps to start managing your health.

FILL IN YOUR INFORMATION AND CHECK OFF ACTIVITIES AS YOU COMPLETE THEM.

Create Your Member Account
Login: 
Password: 

Pay Your Ambetter Bill
Ambetter monthly premium amount: 
Premium due date: 
☐ Set up automatic bill pay.
Premium withdrawal date: 

Start Earning myhealthpays® Rewards
☐ Complete your Ambetter Wellbeing Survey in the first 90 days of your membership.*
☐ Complete your wellness exam with your primary care provider (PCP).

Know Your Care Options
24/7 nurse advice line number: 

Find Your Primary Care Provider (PCP)
PCP name: 
Address: 
Phone: 
Email: 
Office Hours: 
1st Appointment Date: 

Read Important Health Plan Information
(Member Handbook, Evidence of Coverage, Schedule of Benefits)

*You must be 18 years of age or older to complete the Wellbeing Survey.
How to Set up Your Member Account

Your member account is where you can always find information about your Ambetter coverage in one place.

Use your member account to:

- View your plan benefits and claims information
- Complete your Ambetter Wellbeing Survey
- Check your myhealthpays™ account balance
- Pay your monthly premiums
- Get a replacement ID card
- Find a primary care provider (PCP) and select your PCP

Just follow the steps below to create your account.

**STEP 1:** Go Online

Visit Member.AmbetterHealth.com. Click Login and choose Create An Account.

**STEP 2:** Enter Your Information

Fill in your birthdate and Ambetter member ID number (on your ID card). Then click Find Member.

**STEP 3:** Register Your Account

Enter your email address and 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 verification. Click on the link in your email to complete your account registration.

**STEP 4:** Verify Your Account

Choose your preferred language and add answers to the secret questions you pick. These questions will help you access your account if you forget your password. When you are done, click Submit.
How to Pay Your Monthly Premium

As an Ambetter from Arizona Complete Health member, you’ve already made your first premium payment. Each month, you will receive an invoice. It’s important that you continue to pay your premium by the first of each month.

If you make your monthly premium payment late, your account may fall into a delinquent or suspended status. This puts you at risk of not being able to use your Ambetter insurance or any of your health plan benefits.

YOU CAN CHOOSE FROM SEVERAL WAYS TO MAKE YOUR PREMIUM PAYMENT:

- Visit Ambetterhealth.com and click "Pay My Premium"
- Log in to your member account to enroll in automatic bill pay using your debit card, bank account or credit card. Your monthly payment is deducted at the same time each month. So you don’t have to worry, because your payment is never late.
- Call us at 1-844-PAY-BETTER (729-2388) and use our Interactive Voice Response (IVR) system. It’s quick and available 24/7!
- It’s quick and easy to use when you need to make same-day premium payments. And Ambetter covers the MoneyGram fee!
- Be sure to mail it at least seven to 10 days prior to your premium payment due date. Be sure to include the payment coupon from your invoice with your payment.

Words to Know

- **Premium**: The amount of money you pay each month in order to have health insurance.
- **Coinsurance**: The costs we share with you. After you meet your deductible, you will pay a percentage of your coinsurance, and we will pay the rest.
- **Deductible**: The fixed amount of money you have to pay for certain services each year before we begin to pay.
- **Out-of-Pocket Costs**: Your expenses for medical care that aren’t reimbursed by us. Out-of-pocket costs include deductibles, coinsurance and copays for covered services plus all costs for services that aren’t covered.
Start Earning my healthpays™ Rewards

EARN REWARDS FOR TAKING CHARGE OF YOUR HEALTH

As an Ambetter member, you can start earning my healthpays® rewards today!* Complete healthy activities, such as:

- Your online wellbeing survey**
- Seeing your Primary Care Provider (PCP) for your annual wellness exam
- Getting your flu vaccine in the fall

As you earn rewards, they will be automatically added to your my healthpays® Visa® Prepaid Card. You will receive your my healthpays® card when you earn your first reward.

USE YOUR my healthpays® REWARDS TO:

- Shop for everyday items at Walmart®

OR TO HELP PAY FOR:

- Doctor copays†
- Deductibles
- Coinsurance

Visit Ambetter.AZcompletehealth.com to learn all of the ways you can earn and use rewards. Log in to your member account to view your rewards account balance.

DID YOU KNOW?

You can use your online member account to track your my healthpays® rewards, view your card balance and more!

*DID YOU KNOW?

You can use your online member account to track your my healthpays® rewards, view your card balance and more!

*Rewards will expire 90 days after your insurance coverage terminates.
**You must be 18 years of age or older to complete the Wellbeing Survey.
Know Your Care Options

When you get sick or hurt, you have to decide where to go for care. There are several options:

- **Primary Care Provider (PCP)**
- **Ambetter Telehealth**
- **24/7 Nurse Advice Line**
- **Urgent Care**
- **Emergency Room (ER)**

**PRIMARY CARE PROVIDER (PCP)**
Your PCP is your main doctor. If your condition isn’t life threatening, call your PCP first.

Visit or call your PCP if you need:
- Help with medical problems such as cold, flu and fevers
- Treatments for an ongoing health issue like asthma or diabetes
- Your annual wellness checkup
- Vaccinations
- Advice about your overall health

**AMBETTER TELEHEALTH**
Telehealth offers convenient, 24-hour access to in-network Ambetter healthcare providers for non-emergency health issues. You can get medical advice, a diagnosis or a prescription by phone or video. Use Telehealth anytime or schedule an appointment for a time that’s convenient for you.

Contact Telehealth for illnesses such as:
- Cold, flu and fevers
- Rash, skin problems
- Sinus problems, allergies
- Upper respiratory infections, bronchitis
- Pink Eye
- Ear Infections

**24/7 NURSE ADVICE LINE**
Our free 24-hour Nurse Advice Line offers quick, reliable advice for medical situations that aren’t life threatening. Every time you call, you will speak to a registered nurse.

Call our 24/7 Nurse Advice Line if you need:
- To know whether you should see a doctor
- Help caring for a sick child
- Answers to questions about your health

Use our online Find a Provider tool to find an in-network provider in your area.
Know Your Care Options

URGENT CARE
An Urgent Care center offers fast, hands-on care for health conditions that need attention right away when your PCP’s office is closed.

Use Urgent Care for medical issues such as:

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

EMERGENCY ROOM (ER)
If you have a medical emergency, call 911 or go to your nearest emergency room.

USING IN-NETWORK PROVIDERS
No matter which care option you choose, you should select your healthcare providers from the Ambetter network. This is called an in-network provider, and they accept Ambetter insurance. Using in-network providers can help save money and prevent unexpected out-of-pocket costs.*

If you go to a provider outside of the Ambetter network, you may be responsible for full payment of your medical services. This is called an out-of-network provider.

*Always refer to your Schedule of Benefits to make sure you understand the costs you may be responsible for if you choose a provider or service outside of our network. Receiving care with a non-participating provider may result in a change to member responsibility.

WORDS TO KNOW

In-Network Provider: A doctor or pharmacy included in the Ambetter network.

Out-of-Network Provider: A doctor, pharmacy, or medical facility not included in the Ambetter network and services not covered by your health plan. If you use an out-of-network provider, you will likely pay more for your care services.

Preventive Care Services: Regular healthcare services designed to help keep you healthy and catch problems before they start. For example: your checkups, blood pressure tests, certain cancer screenings and more.

Primary Care Provider (PCP): Your main personal doctor for basic medical care and annual wellness exams.
Choose Your Primary Care Provider

As you begin your coverage with Ambetter, you will need to select your primary care provider (PCP). Your PCP helps you stay focused on your health.

Be sure to choose your in-network PCP as soon as you can. Use our online Find A Provider tool to search for an in-network provider. Just go to Ambetter.AZcompletehealth.com.

If you’re unable to select, we may recommend a PCP for you. And remember, you can change your PCP at any time.

SCHEDULE YOUR ANNUAL WELLNESS EXAM

A yearly exam with your PCP is the best way for you to stay informed about your health.

Talk with your doctor about any changes you’ve noticed or concerns you may have. Your PCP may recommend tests or other preventive care services to help monitor your health.

GET THE MOST FROM YOUR VISIT

Use your annual wellness exam as an opportunity to ask any questions you may have about:

- Your current medications
- Symptoms you’re experiencing
- Follow-up exams or screenings
- Blood work or other tests
- Instructions from your doctor

Remember to always contact your PCP when you feel sick or have any health questions, so you can receive the best care.

Earn myHealthPays® rewards when you complete your annual wellness exam with your PCP!
Information About Your Coverage

Refer to this section when you have specific questions about your Ambetter coverage.

Your Services

We will approve all covered benefits that are medically necessary. Our Utilization Management (UM) Department checks to see if the service needed is a covered benefit. If it is covered, the UM nurses check to see if the service is medically necessary. They do this by reviewing the medical notes and talking with your doctor. We do not reward or pay our doctors or employees for approving or denying services. All decisions are based on appropriate care and coverage.

YOUR APPEAL RIGHTS
You have the right to appeal any determination where services were denied, reduced or suspended. This includes your right to appeal to an external independent review. We will resolve all appeal requests in a time that is appropriate to your request and condition.

GUIDELINES
Preventive and practice guidelines are based on health needs. We adopt guidelines that are published by nationally recognized organizations or government institutions. These guidelines are based on your age, gender and/or medical conditions. Please log in to your member account for a full copy of these guidelines.

Your Appointments

It’s important for you to be able to schedule appointments when you need medical care. That’s why Ambetter has developed a guide to help you understand what to expect when you need an appointment.

- Routine PCP Visits – within 15 calendar days
- Urgent PCP Visits – within 48 hours of request
- Adult Sick Visits – within 48 hours of request

You should not have to wait more than 30 minutes for a scheduled appointment. If the waiting time is expected to exceed 30 minutes, the office should offer you the choice of waiting or rescheduling the appointment.

Your Rights and Responsibilities

We believe in treating you with dignity, respect and privacy. And you deserve the same from doctors in our network and their office staff. You have the right to change your doctor without reason, to know about other doctors who can treat you and to be told if your doctor is no longer available. You are responsible for telling us if your member ID card gets lost or stolen, for supplying information that we need in order to provide care and for informing your provider if you cannot follow the prescribed treatment of care recommended to you. For a full list of your rights and responsibilities, log in to your member account and review your member handbook.

YOUR PRIVACY
Your privacy is important. And we promise that we will always protect your protected health information (PHI). We have policies in place to protect your health records. We protect all oral, written and electronic PHI. We follow Health Insurance Portability and Accountability Act (HIPAA) requirements and have a Notice of Privacy Practices. We are required to notify you about these practices every year. This notice describes how your medical information may be used and disclosed, and how you can get access to this information. Please review it carefully. If you need more information or would like the complete notice, please visit Ambetterhealth.com.

Your Medications

Take all of your medications as prescribed. Do not stop taking any medication without talking to your doctor first. We have the Ambetter Drug List, or formulary, available online that is periodically updated. Visit Ambetter.AZcompletehealth.com and select Pharmacy Resources under the For Members tab for a link to the current formulary. Our formulary provides information on what is covered, how much the drug costs you and whether you need prior approval. Your doctor can help you with this information. In many cases, there may be a generic medication available.
Information About Your Coverage

Your Medications (cont.)

How do you get your medications?

- Go to a pharmacy that participates with Ambetter.
- Give them your prescription order.
- Show them your member ID card.

Visit Ambetter.AZcompletehealth.com for information about filling prescriptions, for the most current version of the Preferred Drug List (PDL) and to search for a pharmacy near you.

Late Payments

Always pay your premium on time, every month. If your monthly premium payment is late, you may fall into a delinquent or suspended status. This puts you at risk for not being able to use your Ambetter insurance or any of your health plan benefits.

Your Experience

Your health is our priority. And we want to make sure that every experience you have with us or our providers is always a good one. If you are not happy, please let us know. You can file a complaint by writing to us.

Be sure to include:
- Your first and last name
- Your date of birth
- Your member ID number
- Your address and telephone number

Mail your letter to:
Ambetter from Arizona Complete Health
Attn: Grievances Coordinator
P.O. Box 277610
Sacramento, CA 95827

QUALITY PROGRAM
To make sure that you get quality care and services, we have a comprehensive Quality Improvement Program. We are always happy to share information about our progress and goals with you. Visit our website or give us a call if you would like more information about our Quality Improvement Program.

Your Experience (cont.)

YOUR SATISFACTION
We want to hear from you! We conduct member satisfaction surveys each year. If you get a survey, please fill it out. If you get a call, please give us a moment of your time. Your opinion counts!

Additional Health Benefits

DISEASE MANAGEMENT
Our programs help you get involved with your health. And when you stay involved, it’s easier to stay healthy. We offer a variety of disease management programs for conditions like diabetes, asthma and more.

CARE MANAGEMENT
We also have care managers who help members manage their health, develop goals and strive toward better health outcomes. An Ambetter care manager may reach out to you to assess your health needs.

BEHAVIORAL HEALTH SERVICES
We also provide behavioral health services such as depression management programs. To learn more or to see if you could benefit from disease or care management programs, call 1-888-926-5057 (TTY/TDD 1-888-926-5180).

WOMEN’S HEALTH & CANCER RIGHTS ACT NOTICE (WHCRA)
Please visit Ambetter.AZcompletehealth.com or call 1-888-926-5057 (TTY/TDD 1-888-926-5180), to access the Women’s Health and Cancer Rights Act Notice (WHCRA) of 1998. The WHCRA includes important protections for members who elect breast reconstruction in connection with mastectomy.

Have questions? Your Member Handbook, Evidence of Coverage (EOC), and Summary of Benefits and Coverage have answers. You will be able to find information about benefits, how to access care and important phone numbers. Your materials are located on your online member account at Ambetter.AZcompletehealth.com.

Need help? Call Member Services at 1-888-926-5057 (TTY/TDD 1-888-926-5180) if you need help understanding the above information, want it in a different language, want it in a larger font or want us to read it to you over the phone.