

Quick Guide to Medicaid & CHIP Benefits

Medical | Dental | Hearing | Vision | Maternity | And More



Mountain Health Trust & West Virginia CHIP



Because Life.™

[WV.HighmarkHealthOptions.com](https://www.WV.HighmarkHealthOptions.com)

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Learn About Your Benefits

This Quick Guide includes a list of all your benefits and helpful details about how to get the most out of them.

Find full benefit details online in the Member Handbook.



Thank You for Choosing Highmark Health Options

Look to us for Medicaid coverage and managed care—plus so much more, even when you're not sick.

Our coverage goes beyond the basics so you can live your best life. The basics include care for your physical and mental well-being—all from the doctors, hospitals, and pharmacies you need.

Some of the benefits that Highmark Health Options covers are “extra” benefits. This means they are not the standard benefits that all Medicaid plans cover.

With Highmark Health Options, you can:

- Get an extra \$500 toward dental care for members age 21 and older.
- Earn rewards by completing healthy activities like wellness visits and screenings.
- Get help preventing diabetes for eligible members age 18 and older.
- Get more for expecting and new moms, like rewards for going to prenatal care visits and helpful apps to help with pregnancy.



Ask for a Care Coordinator to learn how Highmark Health Options can work for you. Start by calling Member Services.

If you cannot see or read information that Highmark Health Options sends you, call Member Services. We can send you information in a different way, including large print, audio, or Braille. We can also give you information in a different language. These services are free.

Si usted no puede ver o leer las cartas que le envía Highmark Health Options, llámenos servicios a los miembros. También podemos darle información en español o en otro idioma. Highmark Health Options puede enviarle cartas de una manera diferente, incluyendo letra grande, audio o Braille. Estos servicios son gratuitos.

Here for You

Call when you need help or information. We're here for you.



Call Us

If you have questions about your benefits, call Member Services at **1-833-957-0020**, Monday–Friday, 8 a.m.–5 p.m.

- TTY callers should dial **711**.
- Para asistencia en español llame al **1-833-957-0020**.
- For free language translation services, call **1-833-957-0020**.



Visit Us Online

Here are some of the things you can do at [WV.HighmarkHealthOptions.com](https://www.wvhighmarkhealthoptions.com):

- Find a new doctor or pharmacy. In the upper right corner of the homepage, click Find Care in Your Area to reach the Provider Directory.
- Log in to our member website, which is all about you. You can use the site to schedule an online visit with a care provider, look up your claims information, fill out forms, update your contact information, and much more. Use the login button on the homepage to get started.
- See the full Member Handbook as well as all Here for You newsletters.
- Search the Health Library to learn more about your health conditions.
- File an appeal or grievance.
- Plus much more.



Look for Us

Highmark Health Options has friendly people called Member Advocates who are here to help you. They work for us and are on your side. They can help you with your health care: getting appointments, understanding your benefits, and even filing grievances and appeals. They also plan meetings where you can share your ideas and concerns.

Member Advocates plan and attend community events, too. Find them at food banks, community health fairs and housing events, free clinics, and your local library. They do so much more to provide what you need, right where you live.

Get Started

Your Highmark Health Options ID card and primary care provider (PCP) are important.

Your ID Card

Your ID card was mailed to you. Call Member Services if you did not get it. Every member of your family enrolled with Highmark Health Options will have an ID card.

Your PCP is your family doctor. Make sure the PCP listed on your ID card is the one you want. Call Member Services if the PCP on your ID card is not the PCP you want. Check other information on the ID card to make sure it is right, too.

Call Member Services right away if:

- Your ID card gets lost or stolen.
- You have not received your ID card.
- Any of the information on your ID card is wrong.

Call the phone numbers on the back of your ID card when you need help or information.



Important: Always keep your Highmark Health Options ID card and West Virginia Medicaid or CHIP Medicaid cards with you. Show both cards every time you need health care services.



Your PCP

Your PCP is your family doctor. You must choose a PCP. You can have the same PCP for your whole family, or you can have a different PCP for each person in your family. The choice is yours. To schedule a PCP visit, call the PCP phone number on the front of your ID card.

Your PCP is usually the first person you call when you need health care. You can call your PCP 24 hours a day, seven days a week. After office hours, your call will go to an answering service. You can leave your name and phone number. Your PCP or an on-call doctor will call you back.

Your PCP knows the most about you and will:





- Provide office visits when you're sick and routine care to help you stay well. Routine care includes checkups, screenings, vaccinations, and prescription drug refills and changes.
- Manage other kinds of care and hospital stays. If you need care that your PCP does not provide, your PCP may schedule a visit with a specialist. This is called a referral.
- Provide care for your specific health issues. For example, a heart doctor, skin doctor, or someone who does surgery. Your PCP or specialist will arrange your hospital stays, except in an emergency.
- Asks for prior authorization for some services. We will look at all the medical facts given to us to decide if a requested service is the best care for you.



You can request a new PCP anytime. Call Member Services if you want to change your PCP.

Know Where to Get Care

This care chart will walk you through your options. Here's where to go based on symptoms, location, and hours of operation.

<p>Online Doctor Visits</p>  <p>Get care online for at-home treatment of common symptoms:</p> <p>Cold and flu</p> <p>Earaches</p> <p>Sinus infections</p> <p>Mental health: Talk therapy and psychiatry</p> <p>Ask your health care provider.</p>	<p>Doctor's Office</p>  <p>Get in-person care for routine checkups and chronic conditions:</p> <p>Ear, throat, and urinary tract infections</p> <p>Stomach issues</p> <p>Diabetes</p> <p>Mental health: Talk therapy and psychiatry</p> <p>Monday–Friday 9 a.m.–5 p.m.</p>	<p>Urgent Care</p>  <p>Get in-person care for urgent conditions that are not life-threatening:</p> <p>Sprains and strains</p> <p>Asthma/breathing conditions</p> <p>Flu or cold with fever</p> <p>Moderate allergic reactions and rashes</p> <p>Mornings, evenings, and weekends</p>	<p>Emergency Room (ER)</p>  <p>Get in-person care for serious or life-threatening problems:</p> <p>Difficulty breathing</p> <p>Uncontrolled bleeding</p> <p>Severe injury</p> <p>Mental health: Severe depression and suicidal thoughts</p> <p>Open 24/7</p>
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Ask a nurse about the kind of care you need. Call the 24-Hour Nurse Line at **1-833-957-0020 (TTY: 711)**.

If you're having a medical emergency, call **911**.

If you're having a mental health emergency, call **988**.



Out-of-Network Care

If you need care from an out-of-network provider, your PCP can call us to request out-of-network coverage. If we find a provider or hospital in the network, we will let your PCP know. If network care is not available, Highmark Health Options will cover out-of-network care for as long as you cannot get network services.

Care Outside Your Area

If you're out of the service area and have a medical emergency, such as a heart attack or car accident, go to the nearest emergency department. Call your PCP as soon as possible.

No Coverage Outside the U.S.

If you're outside the U.S. and need medical care, Highmark Health Options will not cover any services you receive. Medicaid cannot pay for any health care services you get outside the U.S.

Covered Benefits and Services for Mountain Health Trust & WV CHIP

Standard Benefits	Details
Behavioral Health	<p>Behavioral Health Rehabilitation/Psychiatric Residential Treatment Facility (PRTF). Includes services for children age 20 and younger with mental illness and substance abuse. Limits frequency and amount of services.</p> <p>Inpatient. Hospital services for the diagnosis and treatment of behavioral health and substance use disorder (SUD).</p> <p>Inpatient Psychiatric. Includes treatment through an individual plan of care including post-discharge plans for aftercare. Service is expected to improve the condition or prevent regression so the service will no longer be needed.</p> <ul style="list-style-type: none"> • Age 20 and younger. Includes services at a psychiatric hospital or psychiatric unit of a hospital. Certification that community outpatient behavioral health services did not meet the member's treatment needs is required. Pre-admission and continued stay prior authorization is required. Not covered under West Virginia Health Bridge. • Ages 21–64. Includes services at an Institution for Mental Diseases (IMD). <p>Outpatient. Includes services for individuals with mental illness and substance abuse. Limits frequency and amount of services. Providers must be ACT certified. Children's residential treatment is not covered.</p> <p>Psychological Services. May be delivered using telehealth. Some evaluation and testing procedures have frequency restrictions.</p> <p>Drug Screening. Includes laboratory service to screen for presence of one or more drugs of use.</p> <p>Substance Use Disorder (SUD) Services. Includes targeted case management and physician-supervised medication and counseling services provided to treat those with a SUD. Opioid treatment program services will be provided through fee-for-service (FFS) Medicaid.</p>
Dental	<p>Adults age 21 and older. Includes diagnostic, preventive, and restorative services. Services also include emergency procedures to treat fractures, pain, or infection. Nonemergency coverage limited to \$2,000 per two-year budget period per member.</p> <p>Children age 20 and younger. Includes emergency, nonemergency, and orthodontic services.</p>

Emergency	<p>Post-Stabilization Services. Includes care after an emergency health condition is under control. Care provided in a hospital or other setting.</p> <p>Emergency Transportation. Includes ambulance and air ambulance. Out of state needs prior authorization. To call for emergency transportation, dial 911.</p>
Family Planning	<p>Family Planning. Includes all family planning providers and services. No referral needed for out-of-network providers. Prior authorization is not required.</p> <p>Sterilizations. Covers sterilizations for those who are age 21 and older and not in an institution or considered mentally incompetent.</p> <p>Hysterectomies, pregnancy terminations, and infertility treatments. Not covered.</p>
Home Health Care	Includes services given at member's residence. This does not include a hospital nursing facility, ICF/IDD, or state institutions. Some suppliers have service limits.
Hospice	Includes nursing care, physician services, medical social services, short-term care, durable medical equipment, drugs, biologicals, home health aide, and homemaker. Requires physician certification. For adults age 21 and older, rights are waived to other treatment services related to the terminal illness.
Hospital	<p>Inpatient. Includes all inpatient services (including bariatric and corneal transplants). Transplant services must be in a center approved by Medicare and Medicaid. Adults in institutions for mental diseases and some behavioral health inpatient stays are not included.</p> <p>Outpatient. Includes preventive, diagnostic, therapeutic, all emergency services, and rehabilitative medical services.</p>
Maternity	<p>Maternity Care. Includes prenatal, inpatient hospital stays during delivery, and postpartum care. Home birth is not covered.</p> <p>Right From The Start. Includes prenatal care and care coordination. No prior authorization needed.</p>
Medical	<p>Primary Care Office Visits and Referrals to Specialists.</p> <p>Physician Services. Certain services may need prior authorization or have service limits. May be delivered through telehealth.</p> <p>Laboratory and X-Ray Services. Includes lab services related to SUD treatment. A physician must order the services, and certain procedures have service limits.</p> <p>Clinics. Includes general clinics, birthing centers, and health department clinics. Vaccinations are included for children.</p>

Nonemergency Transportation	Rides for Medical Care: Includes free rides for medical reasons. This benefit is provided by the State. The service provider is ModivCare. To schedule your ride, call ModivCare at 1-844-549-8353 (TTY: 1-866-288-3133) , Monday–Friday, 9 a.m.–5 p.m. After 5 p.m., call 1-844-889-1941 (TTY: 1-866-288-3133) . This benefit cannot be used in an emergency. In an emergency, call 911.
Nursing	<p>Nurse Practitioner Services. Some procedures have service limits.</p> <p>Private Duty Nursing. Includes 24-hour nursing care (not covered for adults age 21 and over). Prior authorization may be needed.</p>
Other	<p>Federally Qualified Health Centers. Includes physician, physician assistant, nurse practitioner, and nurse midwife services.</p> <p>Prosthetics. Customized special equipment is considered. Certain procedures have services limits or need prior authorization.</p> <p>Durable Medical Equipment. Covered in nursing facilities and intermediate care facilities for individuals with intellectual/developmental disabilities (ICFs/IDD). Customized special equipment is considered. Certain procedures have services limits or need prior authorization.</p> <p>Ambulatory Surgical Care. Includes services and equipment for surgical procedures. Physician services; lab and X-ray; prosthetic devices; ambulance; leg, arm, back, and neck braces; artificial limbs; and Durable Medical Equipment are not covered.</p> <p>Organ and Tissue Transplants. Corneal transplants only.</p> <p>Gender Affirmation for Gender Dysphoria. Procedure that aligns an individual’s biological sex with their gender identity. Adults must be age 21 or older prior to being considered for the procedure. Prior authorization is required.</p>
Preventive Care and Disease Management	<p>Early and Periodic Screening, Diagnostic, and Treatment Program (EPSDT). Includes health care services for any medical or psychological condition discovered during screening (for children age 20 and younger).</p> <p>Tobacco Cessation. Includes therapy and counseling and Quitline services. Guidance and risk-reduction counseling covered for children.</p> <p>Sexually Transmitted Infection Services. Includes screening for a sexually transmitted infection from your PCP or a specialist in our network.</p>

Rehabilitation	<p>Physical Therapy. Thirty visits per year for habilitative and rehabilitative services (combined for physical and occupational therapy).</p> <p>Occupational Therapy. Thirty visits per year for habilitative and rehabilitative services (combined for physical and occupational therapy).</p> <p>Speech Therapy. Habilitative and rehabilitative services including hearing aid evaluations, hearing aids and supplies, batteries, and repairs (for children age 20 and younger. Some procedures have service limits or need prior approval).</p> <p>Chiropractor Services. Includes radiological exams and corrections to subluxation. Certain procedures have service limits.</p> <p>Pulmonary Rehabilitation. Includes procedures to increase strength of respiratory muscle and functions.</p> <p>Cardiac Rehabilitation. Includes supervised exercise sessions with electrocardiograph monitoring.</p> <p>Inpatient Rehabilitation. Includes inpatient rehabilitation services and general medical outpatient services that meet the certification requirements.</p>
Specialty	<p>Podiatry. Includes treatment of acute conditions for children and adults. Includes some surgeries, treatment of fractures and other injuries, and orthotics. Routine foot care is not covered.</p> <p>Handicapped and Children with Special Health Care Needs Services. Includes coordinated services and limited medical services, equipment, and supplies.</p>
Vision	<p>Includes eye exams, treatment, lenses, frames, and repairs for children age 20 and younger. Includes medical treatment, one pair of glasses after cataract surgery, and contact lenses (for certain diagnosis) for adults age 21 and older. Does not cover prescription sunglasses or designer frames.</p>



Dental, Hearing, and Vision Benefits



Dental Benefit

For adults age 21 and older, your dental benefit includes an additional \$500 for dental care each year. You have coverage for exams, cleanings, surgery, periodontics, preventive services, and denture repair. Dentures are not covered as part of this benefit. Nonemergency adult coverage is limited to \$2,000 per member per two-year budget period. Call Member Services or search the Provider Directory to find a dentist.

Dental benefits for children age 20 and younger include coverage for exams, cleanings, orthodontic services, and more.



Hearing Benefit

Hearing benefits for children age 20 and younger, include hearing exams, hearing aids, batteries, and repairs. Hearing benefits for adults are not available.



Vision Benefit

Your vision benefit includes an annual eye exam with no copay. Coverage also includes disposable or extended-wear contact lenses or a choice of eyeglass frames with clear plastic prescription lenses. Prescription sunglasses or designer frames are not covered. Call Member Services or search the Provider Directory to find an eye doctor.

If your child's glasses are broken and need repair or replacement, take the glasses to the store where you bought them. The store will repair or replace your child's glasses.

Maternity Benefits

Before and After Your Baby is Born

It's very important to pay attention to your health during this time of change. Be sure you see your doctor within 14 days of becoming aware you are expecting. See your doctor regularly before and after your baby is born for prenatal and postnatal exams.

Maternity care is covered under your standard Medicaid benefits. In addition, Highmark Health Options provides extra benefits that are not standard Medicaid benefits.

Standard maternity benefits include:

- Office visits and tests before your baby is born.
- Your hospital stay and care when you have your baby.
- Office visits and tests after your baby is born.

As soon as you find out you're pregnant:

- See your PCP within 14 days.
- Call Highmark Health Options. We will send you information about the MOM Options Program, Pacify, and more.
- Talk to a Care Coordinator if you have questions about your benefits and pregnancy. Also ask about ways to get help in your community.

Note: If you joined Highmark Health Options during the last three months of your pregnancy, you may be allowed to stay with your current doctor, even if that doctor is not in our network.

Extra maternity benefits from Highmark Health Options include:

- Free use of the Pacify app for video visits and calls, 24/7, for expert help with breastfeeding, formula feeding, pumping, weaning, and more.
- Essentials diaper bag packed with diapers and more for your new baby.
- Free maternity classes in the community.

Note: Your benefit also includes family planning. See the list of standard benefits.



Depend on Your Care Coordinator

Your maternity benefit includes a Care Coordinator, one person you can talk to when you're expecting and after your baby is born. A Care Coordinator is a nurse or social worker who can answer your questions, help you plan doctor visits, find community services, and more. Ask your Care Coordinator to enroll you in the MOM Options Program.

Support from Pregnancy to Parenthood

Quit opioid use safely:

Using opioids during and after pregnancy can harm both you and your baby. This includes prescription opioids like codeine and oxycodone, as well as street drugs like heroin. When you use opioids while pregnant, the drug is transferred to your baby, increasing the risk of health complications, premature birth, and serious birth defects. Even after birth, breastfeeding can pass the drug to your baby, causing potential side effects such as breathing difficulties.

The good news is that a combination of therapy and medicines can help you quit using opioids before, during, and after pregnancy. Talk to your doctor about treatment options that reduce risk for you and your baby. Highmark Health Options can connect you to providers who specialize in maternal opioid use disorder treatment.

Don't make this decision alone. To learn about safe treatment when you're trying to quit opioids, call Member Services at **1-833-957-0020 (TTY: 711)**, Monday–Friday, 8 a.m.–5 p.m., and ask for maternity Care Coordination. Or call your Care Coordinator.

Health care coverage for newborns:

Make sure your baby has health care coverage and the pediatrician you want.

As soon as you can or within 30 days after your baby is born:

- Call the Department of Human Services (DoHS) Change Center at **1-877-716-1212**. Your baby will be eligible for benefits for a minimum of 60 to 90 days, starting on the first day of their birth. This helps ensure they'll get all the care they need.
- Call Member Services to tell us which pediatrician you want for your baby. If you do not choose a pediatrician for your baby, we will choose one for you. You will get an ID card for your baby with the pediatrician's name and phone number on it.



Get Help with Pacify

A Pacify membership provides on-demand, video-enabled access to a nationwide network of lactation consultants and nurses, available 24/7. Use your unique sign up code to create an account. Next, download the free Pacify app from the Apple App Store (iPhone) or Google Play (Android).

West Virginia WIC

The Special Supplemental Nutrition program for Women, Infants, and Children, known as WIC, is a free program for:

- Pregnant women
- Breast-feeding mothers
- New mothers
- Children age 5 and younger who are not getting the nutrition they need

The program provides food coupons to buy nutritious foods, such as fresh fruits and vegetables, whole wheat bread or rolls, brown rice, oats, tortillas, soymilk, tofu, jarred baby foods, and more. Many grocery stores take WIC food coupons. WIC also offers information and counseling about nutrition and referrals to health and social services.

Sign up at **DHHR.WV.gov/WIC** or call **304-558-0030**.

Help Me Grow

Help Me Grow is a referral service that connects families to developmental resources for their children birth through age 5. The goal of Help Me Grow is to identify at-risk children and get them connected to the help they need.

Parents, families, and friends can call Help Me Grow directly to speak to a care coordinator who can talk with them about how their child is doing, mail a developmental screening tool, and connect them to the appropriate resources.

To learn more, call the hotline at **1-800-642-8522**.

Drug Free Moms and Babies Program

The Drug Free Moms and Babies (DFMB) Program supports healthy outcomes for pregnant and postpartum women and babies in Medicaid and WVCHIP by providing prevention, early intervention, addiction treatment, and recovery support.

Covered benefits through this program include:

- Care coordination with Highmark Health Options case managers, DFMB care coordinators, DFMB community health workers, and DFMB providers.
- Early intervention through provider outreach and education.
- Recovery support services.
- Addiction treatment.

For more information about the DFMB Program, visit **WVPerinatal.org**.

Extra Benefits from Highmark Health Options

Extra Benefits from Highmark Health Options	Details
Benefits for Expecting and New Moms	<ul style="list-style-type: none"> • Eligible members can earn up to \$175 for attending scheduled exams before and after baby's birth. • Free Pacify account and app for video visits and calls, 24/7. No appointment needed. Experts answer in 5 minutes or less. Ask about breastfeeding, formula feeding, pumping, weaning, adding solid foods, crying and colic, and teething. Plus look up these topics on the app. • Free Count the Kicks app for tracking baby's daily movements in the third trimester of pregnancy.
Childhood Development Sensory and Stimulation Toys	For eligible members up to age 12 with autism, ADHD, or other similar diagnosis.
Career Pathways	Covers professional development, mentorship, and employment assistance for high school juniors and seniors (ages 16–18) and members transitioning out of treatment or incarceration. Includes opportunities that can lead to getting a job and continuing education.
Diabetes Prevention Program	Age 18 and older: For eligible members diagnosed with both prediabetes and high BMI.
Enhanced Dental Care	<ul style="list-style-type: none"> • Age 21 and older: Covers an additional \$500 for dental care. • Expecting moms of any age are eligible for two extra cleanings before and 6 weeks after giving birth.
Filters for Safe Drinking Water	Covers one water faucet filter system plus two extra filters per household per year. Note: One filter lasts about 4 months.
Foodsmart	A 12-week online program that provides eligible members with personalized help and access to affordable healthy food options.

Healthy Rewards Program	Provides the chance to earn rewards of \$5–\$25 for activities like wellness visits and screenings. Rewards are put on a debit card.
Healthy Transitions Meal Delivery	Provides free meal delivery to the home for eligible members who had a hospital stay, including new moms.
Healthy Weight Program	Age 18 and older: Helps eligible members eat healthier, move more, and lose weight.
Hypoallergenic Pillowcases and Mattress Protectors	For eligible members diagnosed with asthma.
Junior Member Advisory Council	Ages 13–17: Earn a \$5 gift card by attending quarterly virtual meetings to offer feedback and express concerns about their health and well-being.
Medication Lock Box	Covers one box per eligible member.
Outdoor Activities Program Sponsorship	Ages 5–18: Covers cost for 4-H clubs, health camps, and other supervised activities, including an ATV safety course.
Shoot Your Shot Vaccine Program	<p>Age 18 and older: Covers the cost of one Class X Hunting/Fishing/Trapping license per year upon receiving annual flu shot.</p> <p>If you got your flu shot this year and want to claim your Healthy Reward for your free Class X Hunting/Fishing/Trapping license, call the Healthy Rewards helpline at 1-833-957-0027 (TTY: 711), Monday–Friday, 8 a.m.–5 p.m.</p>
Wider Circle Program	Age 18 and older: Helps members live happier, healthier lives with social groups in their own neighborhood.

Benefits and Services Not Covered

Some services are not available through Highmark Health Options, Medicaid, or CHIP. If you choose to get these services, you may have to pay the entire cost of the service.

Highmark Health Options is not responsible for paying for these services and others:

- All services not considered medically necessary.
- Services from non-enrolled or non-participating providers.
- Services that require a prior authorization but did not get a prior authorization.
- Sterilization of a mentally incompetent or institutionalized individual.
- Except in an emergency, inpatient hospital tests that are not ordered by the attending physician or other licensed practitioner, acting within the scope of practice, who is responsible for the diagnosis or treatment of a particular patient's condition.
- Organ transplants, except in some instances.
- Treatment for infertility and the reversal of sterilization.
- All cosmetic services, except in the case of accidents or birth defects.
- Christian science nurses and sanitariums.

This is not a complete list of the services that are not covered by Medicaid.

If you have a question about whether a service is covered, call Member Services at **1-833-957-0020 (TTY: 711)**.

Find Help Through Community Services

The Highmark Health Options Community Support online platform can connect you with local programs and resources based on your needs and location.

Our free, anonymous search feature can help you with:

- Food
- Goods
- Housing
- Work
- Education
- Transit
- Legal aid
- Financial assistance
- Care and support services



Start searching for resources by visiting **HMHealthOptions.FindHelp.com** and entering your ZIP code.

You Are Not Alone

Every day hundreds of people across West Virginia turn to 211 for information and support—whether financial, domestic, health, or disaster-related. Get connected with 24/7 help by dialing **2-1-1**. Or text your ZIP code to **898-211**. Online chat is also available at **wv211.org**. A trained specialist will help you. 211 is free and confidential.



Earn Healthy Rewards

Healthy Rewards is one of your Highmark Health Options benefits. You can earn rewards when you complete certain healthy activities.

After you've signed up, you'll get a Healthy Rewards card in the mail. You can use your card like a credit card at most retail stores.

Reward activities can include:

Amount	Reward Activity
\$10	<ul style="list-style-type: none"> • Health needs survey
\$25	<ul style="list-style-type: none"> • A1c test for people with diabetes • Annual well-child visit for ages 3–21 • Both doses of the HPV vaccine before age 13 • One doctor visit after giving birth (up to 84 days after delivery)
\$50	<ul style="list-style-type: none"> • All six well-baby visits during baby's first 15 months • One prenatal doctor visit in first trimester • Retina exam for people with diabetes • Breast cancer screening
\$100	<ul style="list-style-type: none"> • All six doctor visits before giving birth



Sign Up for Healthy Rewards

To sign up and see the rewards you can earn, call **1-833-957-0020 (TTY: 711)** or scan the QR code below.





Highmark Health Options complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, creed, religious affiliation, ancestry, sex, gender, gender identity or expression, or sexual orientation. Highmark Health Options does not exclude people or treat them differently because of their race, color, national origin, age, disability, creed, religious affiliation, ancestry, sex, gender, gender identity or expression, or sexual orientation.

Highmark Health Options provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters.
- Written information in a different way, including large print, audio, and Braille.

Highmark Health Options provides free language services to people whose primary language is not English, such as:

- Qualified interpreters.
- Information written in other languages.

If you need these services, contact Highmark Health Options Member Services at 1-833-957-0020 (TTY: 711), Monday – Friday, 8 a.m. – 8 p.m.

If you believe that Highmark Health Options has failed to provide these services or discriminated against you in another way because of your race, color, national origin, age, disability, creed, religious affiliation, ancestry, sex, gender, gender identity or expression, or sexual orientation, you can file a complaint with Highmark Health Options or the WV Human Rights Commission by mail, phone, or fax.

Highmark Health Options
Attn: Appeals and Grievances
614 Market Street
Parkersburg, WV 26101
1-833-957-0020 (TTY: 711)
Fax: 1-833-547-2022

WV Human Rights Commission
1321 Plaza East, Room 108A
Charleston, WV 25301
304-558-2616
Fax: 304-558-0085
hho.fyi/wv-hrc

If you need help filing a complaint, Highmark Health Options and the WV Human Rights Commission are available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services Office for Civil Rights online at OCRPortal.hhs.gov, and by mail, phone, or email:

U.S. Department of Health and Human Services
200 Independence Avenue SW
HHH Building Room 509F
Washington, DC 20201
1-800-368-1019 (TTY: 1-800-537-7697)
OCRMail@hhs.gov

A printable version of the complaint form is available at hho.fyi/complaint-form.

Attention: If you speak English, language assistance services, free of charge, are available to you. Call the number on the back of your ID card (TTY: 711).

Atención: Si usted habla español, por favor encuentren disponibles servicios de asistencia en español sin costo alguno. Llame al número que figura al dorso de su tarjeta de identificación (TTY: 711).

(TTY: 711) تنبيه: إذا كنت تتحدث الإنجليزية، فإن خدمات المساعدة اللغوية متاحة لك مجاناً. اتصل بالرقم الموجود على ظهر بطاقة الهوية الخاصة بك.

Attention: Si vous parlez français, des services d'assistance linguistique vous sont offerts gratuitement. Veuillez appeler le numéro qui se trouve au verso de votre carte d'identification (TTY : 711).

Achtung: Wenn Sie Deutsch sprechen, steht Ihnen kostenlose Unterstützung in Ihrer Sprache zur Verfügung. Wählen Sie hierfür bitte die Nummer auf der Rückseite Ihrer Ausweiskarte (TTY: 711).

注意：如果您会说英语，则可以免费获得语言协助服务。请拨打您身份证背面的号码（TTY：711）。

Attenzione: se parli inglese, sono a tua disposizione servizi di assistenza linguistica gratuiti. Chiama il numero sul retro della tua carta d'identità (TTY: 711).

Pansin: Kung nagsasalita ka ng Ingles, ang mga serbisyo ng tulong sa wika, na walang bayad, ay magagamit mo. Tawagan ang numero sa likod ng iyong ID card (TTY: 711).

Chú ý: Nếu bạn nói tiếng Anh, các dịch vụ hỗ trợ ngôn ngữ miễn phí luôn sẵn có dành cho bạn. Gọi đến số ở mặt sau thẻ ID của bạn (TTY: 711).

ध्यान दिनुहोस्: यदि तपाईं अंग्रेजी बोल्नुहुन्छ भने, भाषा सहायता सेवाहरू, निःशुल्क, तपाईंलाई उपलब्ध छन्। तपाईंको आईडी कार्डको पछाडिको नम्बरमा कल गर्नुहोस् (TTY: 711)।

注意: 英語を話せる場合は、言語支援サービスを無料でご利用いただけます。IDカードの裏面に記載されている番号 (TTY: 711) に電話してください。

ध्यान दें: यदि आप अंग्रेजी बोलते हैं, तो भाषा सहायता सेवाएँ आपके लिए निःशुल्क उपलब्ध हैं। अपने आईडी कार्ड के पीछे दिए गए नंबर (TTY: 711) पर कॉल करें।

וּפִמְעֶרְקוֹזאַמְקִיט: אויב איר רעדן ענגליש, שפראך הילף באַדינונגס זענען באַרעכטיגט פֿאַר איר. רופן דעם נומער אויף די צוריק פון (TTY: 711) דיין שיין קאַרט.

주의: 영어를 사용하시는 경우 언어 지원 서비스를 무료로 이용하실 수 있습니다. 신분증 뒷면에 있는 전화번호(TTY: 711)로 전화하세요.

Akiyesi: Ti o ba so Gẹ̀ẹ̀si, awọn iṣẹ iranṣẹ eede, laisi idiyele, wa fun ọ. Pe nomba ti o wa ni ẹhin kaadi ID ẹ (TTY: 711).

Внимание: если вы говорите по-английски, вам доступны бесплатные услуги языковой помощи. Позвоните по номеру, указанному на обратной стороне вашего удостоверения личности (TTY: 711).



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