

**WEBER
HUMAN
SERVICES**



**237 26th STREET * OGDEN, UTAH 84401
801-625-3700 or 1-844-778-8746**

Medicaid Prepaid Mental Health Plan

Behavioral Health Services Handbook

Weber & Morgan Counties

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Section 1: Introduction

This handbook is for Medicaid members who are enrolled in Utah Medicaid's Prepaid Mental Health Plan (PMHP). If you live in Weber or Morgan County your PMHP provider is Weber Human Services (WHS). WHS will provide you with mental health and substance use disorder (SUD) services if you need them. This handbook explains the Medicaid mental health and SUD services that WHS covers.

Este manual es para miembros de Medicaid quienes están inscritos en el Plan de Salud Mental Prepagado (PMHP) de Utah Medicaid (PMHP). Si usted vive en el condado de Weber o Morgan, su proveedor de PMHP es Weber Human Services (WHS). WHS provee los servicios de la salud mental y para trastorno por consumo de sustancias si usted los necesita. Este manual explica los servicios de Medicaid para la salud mental y para trastorno por consumo de sustancias que el PMHP provee.

How do I get information in another format?

You can get this handbook and other written information in your language and in other formats (large print, audio, and electronic) for free. For help, call WHS at 801-625-3700 or 1-844-778-8746.

¿Puedo conseguir este manual en otro lenguaje o formato?

Puede obtener este manual y otra información escrita en su idioma, y en otros formatos (letra grande, audio, electrónico, y otros formatos) sin costo para usted. Para obtener ayuda, llame a WHS al 801-625-3700 o 1-844-778-8746.

Other Languages

Free language assistance services are available to you. Please call WHS at 801-625-3700 or 1-844-778-8746.

Los servicios gratuitos de asistencia lingüística están disponibles para usted. Llame a WHS al 801-625-3700 o 1-844-778-8746.

WHS provides mental health and SUD services for kids and adults. If you need these services, call WHS at 801-625-3700 or 1-844-778-8746. (See *Getting Mental Health and SUD Services*, Section 6).

Section 2: Services Available

What mental health and SUD services are covered?

Inpatient hospital care for mental health problems and outpatient services for mental health and SUD problems are covered.

Outpatient mental health and SUD services include:

- Evaluations
- Psychological testing
- Individual and group therapy
- Family therapy
- Individual and group therapeutic behavioral services
- Medication management
- Individual skills training and development
- Psychosocial rehabilitation services (day treatment)
- Peer Support Services
- Recreational therapy
- Detoxification from substances in a social setting
- Targeted case management services

WHS will offer you services after we meet with you to talk about what you need.

Services are provided by licensed mental health and substance abuse professionals, including doctors, nurses, psychologists, licensed clinical social workers, clinical mental health counselors, SUD counselors, recreational therapists, peer specialists, targeted case managers, etc.

After we meet, WHS will tell you which providers are appropriate for the services you need. We will also let you know if they are taking new clients and what other languages they speak. If you want more information on any of these services, call WHS at 801-625-3700 or 1-844-778-8746.

Are any other services covered?

Yes, other covered services are:

- Electroconvulsive therapy (ECT)
- Interpreter services

There are some other services that might be covered based on your needs. These services are:

- Respite care

- Psychoeducational services
- Personal services
- Supportive living

If you have questions, your provider will talk with you about these services.

Section 3: Services Not Covered by WHS

What services might be covered by Medicaid but not by WHS?

Some of the services that might be covered by Medicaid or your physical health plan but not by WHS are medical, dental, and vision care. Medical care includes medical detoxification in a hospital for a substance use problem. If you have questions about these services or any other services that might be covered by Medicaid, call Medicaid at 1-800-662-9651 or your physical health plan.

Also, methadone maintenance services for SUD problems are not covered by WHS. If you need this service, you can get it from a Medicaid methadone maintenance service provider. If you have questions, call Medicaid at 1-800-662-9651.

Section 4: Transportation

How can I get help with transportation to my outpatient mental health or SUD services?

If you do not have your own rides to services, you may be able to get help with rides.

- Ask for a Utah Transit Authority (UTA) Transit Card (bus pass) by calling the Medicaid Health Program Representatives (HPRs) at 1-844-238-3091.
- If UTA bus service is not available where you live or you cannot use the bus for some reason, ModivCare may be able to help with rides: ModivCare: 1-855-563-4403
- In Weber County, UTA Flex Trans is a special bus that might be able to help: Flex Trans: 1-877-882-7272

To learn more about help with rides, see the *Utah Medicaid Member Guide*. You can find the guide online or to ask for a copy or if you have questions, call Medicaid.

- *Utah Medicaid Member Guide* at Medicaid.utah.gov or

- Call Medicaid at 1-866-608-9422

You can also talk to us about your needs. If you are scheduling your first appointment, tell the WHS employee that you need help with rides. If you are getting services, talk to your therapist.

Section 5: Interpreter Services

What if I need an interpreter?

We know that it can be hard to talk with your provider if your first language is not English or you are deaf, hard of hearing, or have a hard time speaking. You can ask us for an interpreter. Interpreters are free and available in all languages, including sign language. An interpreter can help you over the phone and be with you at your mental health or SUD visits. The interpreter will help you and your provider understand each other. Also, we might have providers who speak or sign your language.

To ask for an interpreter or a provider who can speak or sign your language, call WHS at 801-625-3700 or 1-844-778-8746.

What if I want to call WHS and I am deaf, hard of hearing, or have a hard time speaking?

You can call Relay Utah at 711 or 1-800-346-4128. If you have a hard time speaking, you can also call Speech-to-Speech Relay Utah at 1-888-346-5822 and a trained person will help you. If you speak Spanish and are deaf, hard of hearing, or have a hard time speaking, call Spanish Relay Utah at 1-888-346-3162.

Servicios de intérpretes

¿Qué sucede si necesito un intérprete?

Sabemos que puede ser difícil hablar con su proveedor si su primer idioma no es inglés o es sordo, tiene problemas de audición, o tiene dificultad para hablar. Usted puede pedir por un intérprete. Intérpretes son gratuitos and están disponibles en todos los lenguajes, incluyendo el lenguaje de señas. Un intérprete le puede ayudar por teléfono y acompañarlo a sus citas de la salud mental y

para trastorno por consumo de sustancias. El intérprete puede facilitar la comunicación entre su proveedor y usted. También puede que tengamos proveedores que hablan su idioma o el lenguaje de señas.

Para pedir un intérprete o un proveedor que hable su idioma o por señas, llame a WHS al 801-625-3700 o 1-844-778-8746.

¿Qué sucede si deseo llamar a WHS y soy sordo, tengo problemas de audición, o tengo dificultades para hablar?

Puede llamar a Relay Utah al 711 o al 1-800-346-4128. Si le resulta difícil hablar, también puede llamar a Speech-to-Speech Relay Utah al 1-888-346-5822 y una persona capacitada lo ayudará. Si habla español y es sordo, tiene problemas de audición, o le cuesta trabajo hablar, llame a Spanish Relay Utah al 1-888-346-3162.

Section 6: Getting Mental Health or SUD Services

How do I get mental health or SUD services?

If you live in Weber County, call WHS at 801-625-3700 or 1-844-778-8746 to make an appointment or come by our office at 237 26th Street in Ogden.

If you live in Morgan County, call WHS at 801-625-3700 or 1-844-778-8746 to make an appointment. Our office is located at 50 W 100 N in Morgan. You must call ahead for an appointment.

If you need services in the evenings, let us know when you call. Evaluations and some therapy services may be provided in the evenings.

How quickly can I be seen?

If you need emergency care you will be seen right away. (*See Emergency Services, Section 8*). We will give you urgent care for conditions that need to be taken care of right away, but that are not emergencies. If you need urgent care, we will see you within *5 working days*. If you do not have an urgent need for care, we will see you within *15 working days*. If your condition changes and you think you need to be seen sooner, please call WHS at 801-625-3700 or 1-844-778-8746. We will talk about your needs again.

Where do I go for mental health or SUD services?

In Weber County, our offices are located at 237 26th Street in Ogden.

In Morgan County, our office is located at 50 W 100 N in Morgan. You must call ahead for an appointment.

Section 7: Choosing Providers

Can I choose my WHS provider?

Yes, you can talk to us at any time about the WHS provider you would like to see. Call WHS at 801-625-3700 or 1-844-778-8746.

Does WHS have a provider directory and where can I find it?

WHS has a directory of all our mental health and SUD providers. You can see our directory on our website at www.weberhs.net.

WHS providers is organized in our directory in alphabetical order. Our directory also includes other community providers that we have a written agreement with to provide services when authorized by WHS.

Can I get outpatient mental health or SUD services from a provider outside WHS?

In some situations, you can go to a provider outside of WHS. You and the provider must get approval before you get services outside WHS.

If you want services from a community provider in our directory or a community provider that is not in our directory, call us at 801-625-3700 or 1-844-778-8746.

You do not need approval before you get emergency services. (See Section 8 *for Emergency Services*.) For more information, call us and ask for the Compliance Supervisor.

When will I be told if I can get services from a provider outside WHS?

We can usually decide within 14 calendar days after you ask. If you or your provider want us to take more time to make a decision, let us know. Sometimes we might need more time to make a decision. Medicaid lets us take up to another 14 calendar days to make a decision. If we need more time, we will let you know in writing. If you are unhappy that we need more time, you can file a grievance.

If you or your provider think it is important to make a decision quickly

and we agree, we will try and make a decision in 72 hours. If you want us to take more time, or if we need more time to make a decision, Medicaid lets us take up to 14 more calendar days.

We will give you our decision in writing and also let the provider know what our decision is.

If we do make a decision as soon as Medicaid wants us to, or we do not approve the service or approve less than you or the provider asked for, this is an adverse benefit determination. We will also send you a Notice of Adverse Benefit Determination letter explaining that you can ask for an appeal of this decision. See Section 12, Adverse Benefit Determinations, and Section 13, Appeals.

Are there any outpatient mental health and SUD services that do not need approval from WHS?

You do not need approval from WHS to get emergency services. See Section 8, Emergency Services.

You do not need approval from WHS to get mental health and SUD services from a federally qualified health center (FQHC).

If you are an American Indian or Alaska Native, you do not need approval from WHS to get mental health and SUD services from an Indian health provider. An Indian health provider is Indian Health Services, an Indian Tribe, Tribal Organization, or an Urban Indian Organization.

Can I get a second opinion?

Yes. You can get a second opinion about your mental health or SUD problem or services. There is no cost to you for a second opinion. If you would like a second opinion, call WHS at 801-625-3700 or 1-844-778-8746 and ask for the Compliance Supervisor.

Section 8: Emergency Services

What is an emergency?

- When you think your life is in danger;
- When you believe you might harm yourself or others; or
- When your safety or others' safety is at risk.

What are emergency services?

These are mental health or substance abuse services given to treat your emergency.

How do I get emergency services?

You can call the national Suicide Prevention and Crisis Lifeline at 988, 24 hours a day, seven days a week including holidays. You will be connected with a Utah crisis worker.

You can also talk to our crisis worker in person. You can come to our outpatient clinic between 8 a.m. and 5 p.m. and talk to a crisis worker.

Day or night, you can go to any hospital ER for emergency services, even if you are out of town.

You can get emergency services from any mental health or substance use disorder provider, even if they are not one of WHS providers.

You do not need pre-approval from WHS before you get emergency services from an ER or a provider that is not one of WHS providers.

Section 9: Mental Health Care in a Hospital

How do I get mental health care in a hospital?

Mental health care in a hospital after an **emergency** is usually called post-stabilization care services.

WHS uses:

McKay-Dee Hospital—4401 Harrison Boulevard, Ogden UT

Ogden Regional Hospital—5475 S 500 E, Ogden UT.

If one of these hospitals or another hospital wants to admit you after treating your emergency, the hospital **MUST** call WHS at 801-625-3700 or 1-844-778-8746 to ask for approval. It's important to let the hospital know WHS is your Medicaid mental health plan so they can call before they admit you. We might have you stay at that hospital or send you to another hospital.

Section 10: Payment for Services

Will I have a co-payment (co-pay) for outpatient services?

There are no co-pays for outpatient mental health or outpatient SUD services for any Medicaid members.

The *Utah Medicaid Member Guide* has information on co-pays,

including information on Medicaid member groups that do not have co-pays on any Medicaid services.

Hospital Emergency Room (ER) Services

Will I have to pay for emergency services in a hospital ER?

You will not have to pay for emergency services in a hospital ER. If you have co-pays, there is a co-pay if you use the ER when it is not an emergency.

Mental Health Care in a Hospital

Will I have to pay for mental health care in a hospital?

If you have co-pays, the hospital can charge you a \$75 co-pay for each hospital stay, but you will not have to pay more than the co-pay.

Some Medicaid members do not have co-pays. You can look at the *Utah Medicaid Member Guide* for information on individuals who do not have co-pays.

Outpatient Mental Health and SUD Services

Will I ever have to pay for outpatient mental health or SUD services?

Non-Emergency Outpatient Services

You might have to pay your provider for a **non-emergency** outpatient service if:

- You get a service that is not covered by WHS or Medicaid; or
- You get a service that is not pre-approved by WHS; or
- You do not go to a WHS provider.

If any of the above happens, your provider might ask you to pay for the service. You should only be billed for the service if all four things below are met:

- The provider has a written policy for billing all patients for services that are not covered, not just Medicaid patients;
- The provider tells you before you get the service that you will have to pay for the service;
- You agree to pay for the service; and
- There is a written agreement signed by you and the provider that says what the service is and how much you will have to pay.

NOTE: If WHS did not approve a service you or your provider asked for, you can ask for an appeal of this decision with WHS before you agree to pay the provider for the service. Section 13, “**How to file an appeal,**” explains how to ask for an appeal.

You might also have to pay your provider for a service if:

- You ask for and keep getting services during an appeal or a Medicaid Fair Hearing. You would only have to pay if the appeal or Medicaid Fair Hearing decision is not in your favor.
- You are not on Medicaid when you get the service.

Emergency Outpatient Services

You will not have to pay for emergency outpatient mental health or SUD services.

Ambulance Services for Emergency Care

You will not have to pay for the ambulance for emergency care.

Section 11: Client Rights and Responsibilities

What are my rights as a client?

As a client, you have the right to:

- Receive mental health and substance use disorder services regardless of your age, race, color, national origin, sex, sexual orientation, gender identity, religion, age, or disability, or political affiliation, or anything else in state or national law. If you feel you have been treated unfairly or discriminated against for any reason, you can contact:
- WHS Customer Care Manager at 801-625-3700 or 1-844-778-8746
- U.S. Department of Health and Human Services, Office for Civil Rights
 - Phone: 1-800-368-1019, 1-800-537-7697 (TDD)
 - Email: OCRMail@hhs.gov
 - Online: ocrportal.hhs.gov/ocr/smartscreen/main.jsf or hhs.gov/ocr
 - Mail: Centralized Case Management Operations
U.S. Department of Health and Human Services
200 Independence Avenue, S.W. Room 509F
HHH Building
Washington, D.C. 20201

If you want to email or mail your complaint to the Office for Civil Rights, you can write your complaint or you can use their complaint form available at: hhs.gov/civil-rights/filing-a-complaint/complaint-process/index.html

If you have questions or need help filing a complaint, call WHS at 801-625-3700 or 1-877-778-8746.

You also have the right to:

- Get information on the Prepaid Mental Health Plan in a way that is easily understood, in common languages and in other formats;
- Be treated with respect and dignity;
- Have your privacy protected;
- Get information on other types of treatment in a way that is easily understood;
- Take part in treatment decisions regarding your mental health or substance use disorder services, including the right to refuse treatment;
- Get a second opinion at no cost to you;
- Be free from restraint or seclusion if it is used to force, discipline, to retaliate, or for convenience;
- Get a copy of your medical records and to ask that it be amended or corrected, when allowed by federal law; and
- Get mental health or substance use disorder covered services in the amount you need and when you need them.
- Be able to exercise these rights and not be treated badly by WHS, your providers, or Medicaid if you do.

What are my responsibilities as a client?

- Keep your appointments and be on time.
- If you need to cancel an appointment, call the provider 24 hours in advance.
- Be involved in your treatment plan and care.
- Tell WHS and your Medicaid eligibility worker of changes in your address, phone number, or insurance.
- Complete surveys about the services WHS has given you.
- Respect the property, comfort, and confidentiality of clients

and staff, and

- Notify your treatment provider when you want to stop getting services.

Section 12: What is an Adverse Benefit Determination?

An Adverse Benefit Determination is when WHS:

- Denies (turns down) or approves fewer services than you wanted;
- Denies all or part of a payment for a service that you might have to pay for;
- Does not offer your first appointment within the required amount of time for emergency, urgent, or non-urgent care and you are not happy with this. (See *Getting Mental Health and SUD Services*, Section 6);
- Does not settle an appeal or grievance you have with us as soon as Medicaid wants us to;
- Does not make a decision about approving services you have asked for as soon as Medicaid wants us to;
- Your provider reduces, suspends, or stops a service previously approved. If you agree with the change, it is not an adverse benefit determination. It is only an adverse benefit determination if you tell us you don't want the change, or
- Denies your request to dispute a financial liability.

How will I know if WHS is making an adverse benefit determination?

We will send you a letter called a Notice of Adverse Benefit Determination. You will have the right to appeal if you disagree with our adverse benefit determination.

Section 13: Appeals

What is an appeal?

An appeal means our review of our adverse benefit determination to see if we made the best decision. If the adverse benefit determination is because we did not settle your appeal as soon as Medicaid wants us to, we will send you a Notice of Adverse Benefit Determination letter. In the letter, we will explain that you can now ask for a Medicaid fair hearing and how and when to ask for one. (See *Medicaid Fair Hearings*, see Section 14)

Who can ask for an appeal?

You, your legally authorized representative, or your provider, can ask for an appeal.

When do I have to ask for an appeal?

Your Notice of Adverse Benefit Determination will give you information on asking for an appeal. It will tell you how soon you must ask for an appeal. You must ask for an appeal within 60 calendar days from the date on the Notice of Adverse Benefit Determination.

How do I ask for an appeal?

You can ask for an appeal:

- In writing using the appeal request form we gave you with your Notice of Adverse Benefit Determination letter. Send your written appeal request to:
WHS Compliance Supervisor
237 26th Street Ogden, UT 84401
Email: ContactWHS@weberhs.net
- By calling us at 801-625-3700 or 1-844-778-8746 and ask for the Compliance Supervisor.

What if I need help asking for an appeal?

If you need help asking for an appeal, call WHS at 801-625-3700 or 1-844-778-8746 and ask for the Compliance Supervisor.

Can I keep getting services if I ask for an appeal?

Your services will not stop because you asked for an appeal.

If our adverse benefit decision was to reduce, suspend, or stop services we had already approved, and you want to keep getting the services during the appeal, you must ask for continuation of services on or before the later of the following:

- 10 calendar days of WHS sending the Notice of Adverse Benefit Determination letter to you; or
- The effective date of our proposed decision to reduce, suspend, or stop services.

If you ask for an appeal on time, and you let us know on time that you want to keep getting the services while we make a decision, you can keep getting the services. You might have to pay for the services if the appeal decision is not in your favor.

If you are asking for an appeal of any other kind of adverse benefit determination and have questions about services during the appeal, call WHS at 801-625-3700 or 1-844-778-8746 and ask for the Compliance Supervisor.

When will WHS tell me the decision on my appeal?

Usually, we will give you a written decision no later than 30 calendar from the day we get your appeal request. Sometimes we might need more time to make a decision. Medicaid lets us take up to another 14 calendar days to make a decision. If we need more time, we will let you know by phone as quickly as possible and in writing within two calendar days. Also, you or your provider might want us to take more time for some reason. If so, let us know.

Can I get a decision more quickly on my appeal?

If you or your provider thinks waiting 30 calendar days for our decision could harm your health, life, or ability to maintain or regain maximum function, you or your provider can ask for a quick appeal. This means we will usually make a decision within 72 hours. Sometimes we might need more time to make a decision. Medicaid lets us take up to 14 more calendar days to make a decision. If we need more time, we will let you know by phone as quickly as possible and in writing within two calendar days. Also, you or your provider might want them to take more time for some reason. If so, let us know.

If we deny your request for a quick appeal, we will let you know by phone as soon as possible and in writing within two calendar days.

How do I ask for a quick appeal?

You or your provider can ask for a quick appeal by:

- Calling us at 801-625-3700 or 844-778-8746 and ask for the Compliance Supervisor.
- Checking the quick appeal box on the enclosed Appeal Request Form and send it to us and send it to us:

Weber Human Services
Compliance Supervisor
237 26th Street
Ogden, UT 84401

Section 14: Medicaid Fair Hearings

What can I do if I am unhappy with the appeal decision?

If you are unhappy with our appeal decision, or we cannot make a decision as soon as Medicaid wants us to, this is what you can do:

You, your legally authorized representative, or your provider can ask for a fair hearing with Medicaid. In our appeal decision letter, we will tell you that you can ask for a fair hearing. The letter will tell you how and when to ask for the fair hearing. We will also give you the fair hearing request form to send to Medicaid. You must ask for a fair hearing in writing using the form we give you. You can also get a hearing request form from Medicaid by calling Medicaid at 801-538-6576 or 1-800-662-9651.

If you have questions or need helping filling out the form, call our Compliance Supervisor at 801-625-3700 or 1-844-778-8746.

At a fair hearing, you can speak for yourself, or you can have a relative, friend, lawyer, or anyone else speak for you. Before and during the fair hearing, you, and any person helping you, can present documents. Also, you, and any person helping you, can look at all of the documents that will be used at the fair hearing.

When do I have to ask for a fair hearing with Medicaid?

In most situations, you must ask for a fair hearing within 120 days from the date of WHS's appeal decision letter.

If the fair hearing is about our adverse benefit determination to reduce, suspend, or stop services that we had previously approved, and you want to keep getting the services during the fair hearing, you must:

- Ask Medicaid for a fair hearing within 10 calendar days after WHS sends the appeal decision letter; and
- On the hearing request form ask that the services be continued.

If you file your fair hearing request in time, and you ask to keep getting the services during the fair hearing, you can keep getting the services.

You might have to pay for the services if the fair hearing decision is not in your favor.

If the fair hearing is about any other kind of adverse benefit determination, you can discuss your services during the fair hearing.

Section 15: Complaints/Grievances

What if I have a complaint about WHS or a provider?

If you have a complaint about anything other than an adverse benefit determination, this is called a grievance. Examples of grievances are complaints about the quality of care or services given to you, rudeness of a provider, or a provider not respecting your rights.

Who can file a grievance?

You, your legally authorized representative, or your provider can file a grievance. A grievance can be filed at any time.

How do I file a grievance?

- You can talk to someone at WHS about your grievance; or
- You can call our Customer Care Manager at 801-625-3700 or 1-844-778-8746 and tell the Customer Care Manager you want to file a grievance; or
- You can give it to us in writing. Give it to your provider or any staff member, or mail it to:

Weber Human Services
Customer Care Manager
237 27th Street
Ogden, UT 84401

If you don't want to talk to us about your grievance, you can call Medicaid Constituent Services weekdays at 1-877-291-5583.

What if I have questions or need help filing my grievance?

Call our Customer Care Manager at 801-625-3700 or 1-844-778-8746.

When will WHS tell me the decision on my grievance?

We will give you a decision no later than 90 calendar days from the

day we get your grievance. Sometimes we might need more time to make a decision. Medicaid lets us take up to another 14 calendar days. If we need more time, we will let you know by phone as quickly as possible and in writing within two calendar days.

Once we make a decision, we will either talk to you about our decision on your grievance or send you a written decision.

Section 16: Advance Health Care Directives

What if I am ill and can't make health care decisions?

An Advance Health Care Directive is a legal document. In it you give permission to someone else to make health care decisions for you if you can't do it yourself. You can give another person specific instructions about decisions for your health care. This will allow you more control over your care.

Once you have filled out the Advance Health Care Directive form, be sure to give a copy to all of your health care providers. You should also keep a copy and give one to your family members.

If you would like the form or need more information call WHS at 801-625-3700 or 1-844-778-8746, or talk to your provider or case manager. If you have an Advance Health Care Directive and there is a problem with it being followed, call the Utah Department of Health and Human Services at 801-273-2994 or 1-800-662-4157.

Section 17: Privacy

Who can read or get copies of my medical record?

We follow federal laws about privacy of your mental health and substance abuse record. We do not use or share your protected health information except as federal law allows. When allowed by federal law, only the minimum necessary information is shared. We will talk to you about privacy when you first come to WHS or your provider.

Section 18: WHS Operations

What if I want to know more about how WHS is set up and works?

We will answer any questions you have about how we are set up, including questions about our grievance system, billing practices, confidentiality policy, and how we choose providers and what is required of them. If you ask, we will give you a copy of our Preferred

Practice Guidelines for mental health and SUD services. Call WHS at 801-625-3700 or 1-844-778-8746.

Fraud, Waste and Abuse

What is health care fraud, waste and abuse?

Doing something wrong related to Medicaid could be fraud, waste, or abuse. We want to make sure that health care dollars are used the right way. Fraud, waste, and abuse can make health care cost more for everyone.

Some examples of fraud, waste, and abuse are:

By a Provider

- Billing for services that have not been provided.
- Not reporting a patient’s misuse of a Medicaid card.

By a Medicaid Member

- Changing the amount or number of refills on a prescription.
- Giving their Medicaid card to someone else to use.
- Not being truthful to get on Medicaid.

If you think there might be fraud, waste or abuse, you can contact WHS’s compliance officer at 801-625-3700 or 1-844-778-8746.

Provider Fraud, Waste, or Abuse

You can also contact the Utah Office of Inspector General of Medicaid Services (OIG):

Phone: 1-855-403-7283

Email: mpi@utah.gov

Online: oig.utah.gov

Medicaid Member Fraud, Waste, or Abuse

You can also contact the Department of Workforce Services:

Phone: 1-800-955-2210

Email: wsinv@utah.gov

You will not need to give your name if you report fraud, waste, or abuse. Also, your Medicaid benefits will not change if you make a report.



**237 26th Street
Ogden UT 84401
801-625-3700 or
844-778-8746**