

# Louisiana *Healthy Self Campaign* Newsletter

Created Specifically for Louisiana Consumers by Louisiana Navigators  
September 2016

## Making Your Health Insurance Work For You

Your health insurance can protect you from expensive medical costs due to emergencies, surgeries, and prescription medications, but there are many other ways your health benefits can work for you. You should consider your health insurance not just when you are sick, but when you are healthy too. Many benefits, such as preventative care, are free and can save you money by catching illnesses early. Knowing where to go for care is another easy way to spend less money on medical costs and ensure that you get the right amount of care.

### Utilizing Preventative Care

Preventive care lets your doctor find potential health problems before you start to feel sick and are meant to help keep you healthy. They may also catch some diseases in the early stages of development, which allows for better treatment and lower costs for care. Preventive care can include immunizations, lab work, physical exams, and certain prescriptions. Keeping up with your annual wellness checkups helps to develop a working relationship with your primary care physician. It also allows your doctor to create a “profile” of your health and medical history. This makes it much easier to detect changes in your overall health. For example, your doctor will be more likely to notice an irregular change in your blood pressure if they have previous medical records for comparison. Many of these checks and exams will typically be performed by your PCP (Primary Care Physician) during your annual checkup.

Which

Way

Now?

### Knowing Where to Go for Care

It's important that you know where to go for medical care when you need it. There are many differences between visits to your primary care physician and visits to the emergency room, such as out-of-pocket cost, time spent in the waiting room, and proper scheduling of follow up appointments.

**Regular Medical Care:** Primary care physicians work with you to ensure that you get the right preventive services and provide for all of your basic health needs. Before you go to the doctor's office visit your health plan's website and check their provider directory online. You can also call your health plan directly with questions or call a hospital or doctor to see if they accept your insurance.

**Emergency Care:** In an emergency, you should get care from the closest hospital that can help you. Insurers can't require you to get prior approval before getting emergency room services from a hospital outside your plan's network. Your insurance company can't charge you more for getting emergency room services at an out-of-network hospital.



**Important Notice on Page Three for Healthy Louisiana  
Medicaid Recipients**



## Difference Between Your Provider's Office and the Emergency Room

Primary Care Provider	Emergency Room
You'll <b>pay your primary care copay</b> if you have one. This may cost you between \$0 and \$50.	You'll likely <b>pay a copay, co-insurance, and have to meet your deductible</b> before your health plan pays for your costs, especially if it's not an emergency. Your copay may be between \$50 and \$150.
You go when you <b>feel sick and when you feel well</b> .	You should only go when you're <b>injured or very sick</b> .
You <b>call ahead</b> to make an appointment.	You <b>show up when you need to and wait</b> until they can get to you.
You may have a short wait to be called after you arrive but you will generally <b>be seen around your appointment time</b> .	You may <b>wait for several hours</b> before you're seen if it's not an emergency.
You'll usually see the <b>same provider each time</b> .	You'll see the <b>provider who is working that day</b> .
Your provider <b>will</b> usually have access to your health record.	The provider who sees you probably <b>won't</b> have access to your health records.
Your provider works with you to <b>monitor your chronic conditions</b> and helps you improve your overall health.	The provider <b>may not know what chronic conditions you have</b> .
Your provider will <b>check other areas of your health</b> , not just the problem that brought you in that day.	The provider will only check the urgent problem you came in to treat but might not ask about other concerns.
If you need to see other providers or manage your care, <b>your provider can help you make a plan</b> , get your medicines, and schedule your recommended follow-up visits or find specialists.	When your visit is over you will be discharged with instructions to follow up with your primary care provider and/or specialist. There may not be any follow up support.
In some areas, you may be able to go to an <b>Urgent Care Center</b> . If Urgent Care is available in your area, call your health plan before you go to find out how much you will have to pay	

## The “Right Amount” of Care

It is important to make sure that the care you receive is the “right amount” of care, which means that you’re getting as much care as you need. Too little care or too much care can be damaging to your health and puts an unnecessary burden on you, your insurance plan, and your doctor. People often think of getting too little care as their primary concern when receiving treatment for an illness, which while a valid concern, can be just as disruptive as getting too much care. For example, taking antibiotics for a viral infection is unnecessary and there are side effects that can negatively affect your health (such as vomiting, diarrhea, and allergic reactions). Additionally, there are strains of bacteria that are becoming antibiotic resistant due to the overuse of antibiotic medication, meaning that they have built up a resistance to the antibiotics that have been traditionally used to kill them.

### Tips for Getting the “Right Amount” of Care

- If you’re not sure whether or not you need immediate care, call your doctor’s office and ask a nurse. Many insurance plans also have a 24/7 nurse line that you can reach out to.
- Talk to your doctor during your appointment. Asking questions while your physician is prescribing care is often the best way to stay involved with your health and ensure that you’re getting the proper amount of care.
- Look for more information on your own. If you have access to a computer or your local library, it’s always a good idea to do some research. For example, looking up information about type II diabetes either online or at your local library will give you details regarding common symptoms and treatment.
- Get a second opinion. If you are facing a major decision regarding treatment and your doctor has made a recommendation, it’s wise to get a second opinion from another physician. Your doctor will often expect you to get a second opinion (especially if it concerns a major health issue) and will not take it as a criticism or lack of confidence on your part.



# Important: Upcoming Open Enrollment for the Health Insurance Marketplace

Open enrollment for 2017 health plans starts November 1, 2016. Important dates to note:

- **November 1, 2016:** Open Enrollment begins — first day you can enroll, re-enroll, or change a 2017 insurance plan through the Health Insurance Marketplace. Coverage can start as soon as January 1, 2017.
- **December 15, 2016:** Last day to enroll in or change plans for coverage to start January 1, 2017.
- **January 1, 2017:** 2017 coverage starts for those who enrolled or changed plans by December 15, 2016.
- **January 31, 2017:** Last day to enroll in or make changes to a 2017 health plan. After this date, you can enroll or change plans only if you qualify for a Special Enrollment Period

## Health Insurance Changes in Louisiana

The Health Insurance Marketplace is constantly updating in order to help people shop for and enroll in affordable health insurance. One upcoming change is that **UnitedHealthcare** will not offer Marketplace plans in 2017. If you are currently enrolled in a **UnitedHealthcare plan**, you can change to another plan with another health insurance company during the upcoming open enrollment. If you do not choose a different plan, the Marketplace will automatically enroll you into a similar plan with a different health insurance company. You can keep the plan that was automatically assigned to you or change plans before open enrollment ends. It is always a good idea to shop around during open enrollment. Different health insurance companies expand their service areas every year and you may find a plan available in your area that was not available last year.

### Notice to All Medicaid Recipients

**UnitedHealthcare** will not be providing plans through the Health Insurance Marketplace for 2017, but this **does not** affect the **UnitedHealthcare Community Plan** offered through the Healthy Louisiana Medicaid program. This change only affects the Federal Health Insurance Marketplace. If you or a family member is currently enrolled in the **UnitedHealthcare Community Plan** through Medicaid you will be unaffected by **UnitedHealthcare** leaving the Marketplace.

**Have questions or need FREE assistance?  
We are here to help...**

Parish Served	Phone Number
Bossier, Caddo, Bienville, Webster, Claiborne, Lincoln	318-517-2264
Ouachita, Union, Caldwell, Franklin, Tensas, Madison, East Carroll, Morehouse, Richland, West Carroll	318-235-8297
Natchitoches, Desoto, Jackson, Red River, and Sabine	318-352-9299 ext. 2254
East Feliciana, Iberville, Pointe Coupee, West Feliciana, Ascension, East Baton Rouge, Livingston, West Baton Rouge	225-757-9845
Catahoula, Concordia, Grant, LaSalle, Winn, Vernon, Rapides, Avoyelles	318-443-2855
Iberia, Lafayette, St. Landry, St. Martin, Upper St. Mary, Vermilion, Evangeline, Acadia	337-989-0001
Allen, Beauregard, Calcasieu, Cameron, Jeff Davis	337-478-4822
Assumption, Jefferson, Lafourche, Orleans, Plaquemines, St. Bernard, St. Charles, St. James, St. John, St. Tammany, Helena, Tangipahoa, Terrebonne, Washington	866-428-4173 Bi-Lingual, Spanish Navigator


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