



Terms You May Not Know

Certain language used in this Handbook is specific to health care, managed care or the Commonwealth's CHIP program. Following are brief definitions of some words you may not know.

Advance Directives – Legal documents used to spell out what medical treatment you will accept, refuse or end if you are too sick to speak for yourself. *See page 30 for more details.*

Ancillary Providers – Non-physician healthcare professionals/agencies that provide any of a number of specialized health services, such as home health care, durable medical equipment and radiology studies (x-rays). Ancillary providers that participate with KidzPartners are included in both the printed and online KidzPartners provider directories.

Case Manager – A healthcare professional who works with members to assure that they receive needed services and extra help that they may need to access these services. Case Managers help KidzPartners members in areas including disease management, special needs and maternity care.

Complaint – When you tell us that you are unhappy with Health Partners, a decision we've made, or a participating provider. *See pages 35-36 for more details.*

Copayment – The part of covered healthcare costs that is your responsibility to pay. The "copay" amount depends on your membership category and on the type of healthcare service. *See page 15 for more details.*

Eligibility Review – Examination of a plan's decision regarding CHIP eligibility. The Pennsylvania Insurance Department conducts these examinations, if requested, when the member or prospective member disagrees with the decision made. *See page 44 for more details.*

Formulary – List of medicines approved for use by KidzPartners members. Non-formulary medicines will not be covered without prior approval by the plan. *See page 21 for more details.*

Grievance – When you tell us that you disagree with Health Partners’ decision to deny, reduce or stop a service or item you requested, or to approve a different service or item in its place. *See pages 36-39 for more details.*

Managed Care – A type of health insurance that takes an active role in overseeing the member’s health care, generally requiring the use of plan-specified doctors and other providers, and the prior approval of certain services by the plan. Health Partners is a managed care organization.

Medical Assistance – A State/Federal funded health program that provides coverage to residents who meet income and other requirements. Pennsylvania residents eligible for Medical Assistance cannot enroll in CHIP. Also known as Medicaid.

Medically Necessary/Medical Necessity – Basis for determining the need for and appropriateness of healthcare services. *See page 25 for more details.*

Participating Provider – A provider contracted with the plan to provide care/services to its members. With very limited exceptions, all services provided to KidzPartners members must be provided by participating providers. Services provided by non-participating providers without prior plan approval will not be covered. *See page 5 for more details.*

Premium – The monthly cost for CHIP coverage for those members enrolled in the low-cost or at-cost programs. Premiums are billed monthly by the plan.

Primary Care Provider (PCP) – Doctor or other healthcare professional who provides or coordinates a member’s basic healthcare needs. The PCP is responsible for issuing a referral when specialist or other care is needed by KidzPartners members. *See page 6 for more details.*

Prior Authorization – Approval by the plan required before some types of healthcare services are performed. Prior authorization should be obtained by the provider on behalf of the member for such services, and can be confirmed by contacting Member Relations. *See page 24 for more details.*

Referral – Request for services issued by a PCP. Referrals are used to obtain specialist, hospital and other covered services for KidzPartners members. Referrals may be issued on a plan referral form or a prescription, and can be used only to obtain services from participating providers. *See page 5 for more details.*

Special Needs Unit - Department that provides extra help to members with physical or behavioral disabilities, complex or chronic health issues or other special needs. *See page 27 for more details.*

Well-child/Well-adolescent Visits – PCP and other visits for screenings, immunizations and other preventive health services. KidzPartners members in all premium categories are covered for preventive services with no copays. *See page 27 for more details.*