



2022 MARKETPLACE MEMBER GUIDE

FOR USE WITH:

Community Elite Gold 001
Community Vital Bronze 003
Community Advance Preferred Silver 004
Community Enhanced Gold 005
Community Essential Bronze 008 HSA
Community Value Bronze 10
Community Virtual Now Bronze 11
Community Standard Silver 12
Community Advance Silver 13
Community Elite Gold HSA 14
Community Silver Plan 15

CommunityHealthChoice.org
713.295.6704 | 1.855.315.5386







WELCOME

Thank you for choosing Community Health Choice as your health insurance. We are a local non-profit health plan that makes it easy and hassle-free to get the care you need.

Your Member Guide is a quick overview of what you need to know about your plan. If you have any questions, you may call our Member Services team at **713.295.6704** (toll-free 1.855.315.5386) or visit our website, CommunityHealthChoice.org.

We look forward to serving your healthcare needs.

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YOUR COMMUNITY MY MEMBER ACCOUNT

Now is the perfect time
to create an online
My Member Account with
Community Health Choice.

**Your My Member Account
is a quick and easy way to:**

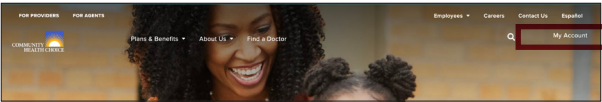
- Print a temporary ID card
- Find a doctor or pharmacy
- Check your Member Handbook
- Make a quick payment
- Manage automatic payments
- Sign-up for paperless billing
- Update your address
- View your dependents
- Change you Primary Care Provider
- View your benefits
- Check your payment, invoice or policy history
- Live chat directly with our Member Services team

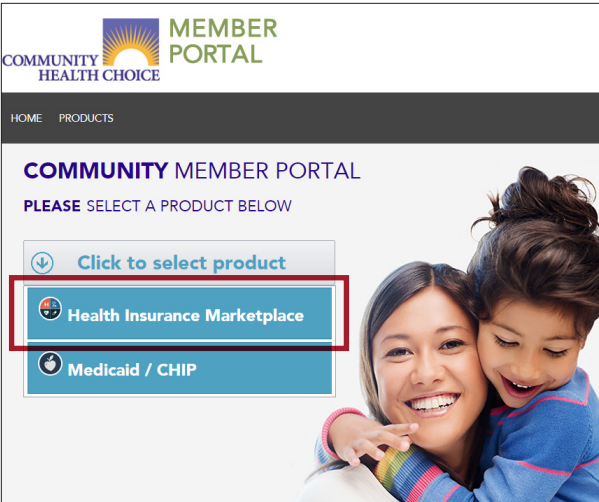


CREATE AN ACCOUNT

1

To get started, visit
CommunityHealthChoice.org
and click Member Login in
the top right corner of the
homepage.





2

Select **Health Insurance Marketplace** as your product.

Marketplace Plan

Member:
Member ID:
Plan name:
Effective date:
Assigned Provider:

Deductibles	In-network visit after meeting deductible	Prescription cost after meeting deductible
Individual:	PCP:	Generic:
Family:	Specialist:	Preferred:
	Urgent care:	Non-preferred:
	Hospital ER:	Specialty:

No charge for preventive care. * Deductible does not apply.
Pharmacy: Navitus Health Solutions BIN: 610602 PCN: NVT RXGroup: TDI/QHP

3

Click **Create an Online Account** to register for a new account.

- You will need your Member ID number to finish registering.
- This information is on your Community Health Choice Member ID card.

Member Web Access Registration (Health Insurance Marketplace)

Register Now! Sign up for a secure online account to:
• Update your account information • Pay your premium online • Check eligibility, print ID cards, and more...

*Your Member ID number can be found on your Member ID card. If you have not received a Member ID card yet, you can still make a quick payment by clicking [here](#).

Step 1 Step 2 Step 3 Done

Complete all fields and click "Next" to continue. Enter your information as it appears on your Community Member ID card.

Member ID Number:
Last Name:
First Name:
Date of Birth (mm/dd/yyyy):
ZIP Code:

88753
[Generate New Image](#) Enter the code.

Next >>

4

Complete all three steps to finish setting up your account.

KEEP YOUR ACCOUNT **CURRENT**



1

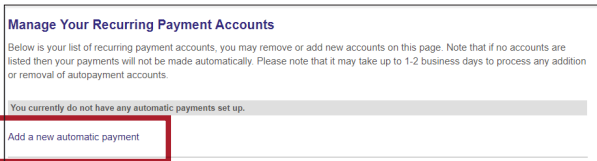
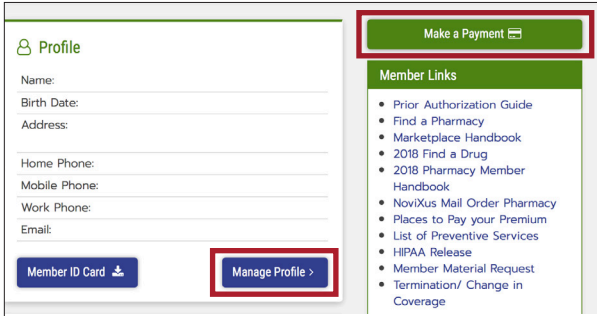
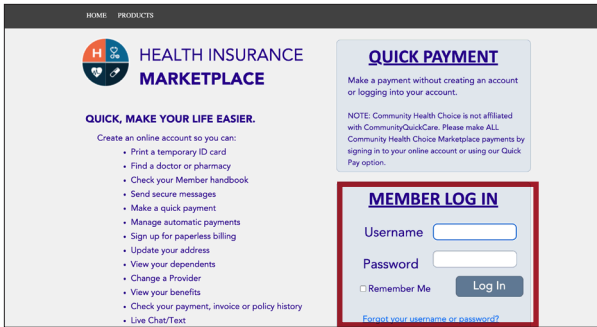
Visit the [Member Login page](#) to sign into your My Member Account. If you have not created an account, please see page 4 for instructions.

2

From the home screen of your My Member Account, select [Manage Profile](#) and then select [Manage Recurring Payments](#). You can also make a one-time payment by selecting [Make a Payment](#).

3

Click Add a New Automatic Payment and fill in the required information. The amount you choose to pay should be your owed monthly premium, which will be paid every month on the date you select.



FOLLOW US!



@CommunityHealthChoice



@CHCTexas



Community Health Choice



communityhealthchoicetx

PAY BY PHONE OR MAIL



You may also make your payments over the phone by calling **713.295.6704** (toll-free 1.855.315.5386) or by mail to:

Community Health Choice
P.O. Box 844124
Dallas, TX 75284-4124

PLEASE NOTE

Payments must be received by Community Health Choice by the due date in order to avoid interruption of coverage. Since checks can take up to six business days to process, we recommend that you mail payments 7 - 10 business days prior to your payment due date.

WHAT IS A “GRACE PERIOD”?

When Members enroll in coverage through Community Health Choice, they pay a monthly premium in order to maintain their health coverage. If you do not make your monthly premium payment or have an outstanding balance, you enter into a Grace Period.

The Grace Period is different for Members who receive an Advance Premium Tax Credit (APTC) and those who do not. If you have APTC, you have a Grace Period of 90 days to bring your account up to date. If you do not have APTC, you have 30 days

to bring your account up to date. If you are unsure whether you have APTC, please call Member Services at 713.295.6704 (toll-free 1.855.315.5386).

When you are in a Grace Period, you are able to maintain health coverage if you pay all outstanding amounts before the Grace Period ends. If you do not pay the outstanding amounts, you risk losing your health coverage and may not be able to re-enroll in a plan until the next open-enrollment period.





COMMUNITY REWARDS

Simply go to memberaccount.communityhealthchoice.org to get started.

DID YOU KNOW?


You may be eligible to earn gift cards by joining our Community Rewards program and doing some simple, health-related activities.

You can earn gift card rewards for completing any of the activities you are eligible for...

- 1 Flu Shots
- 2 Read and Earn Activities
- 3 Breast Cancer Screening – all females (35+)
- 4 Colon Cancer Screening – all Members (45+)
- 5 Annual Wellness Visit with labs – all Members (30+)

It's another way we say **thanks** for being a Member through our Community Rewards program. Simply go to memberaccount.communityhealthchoice.org to get started.

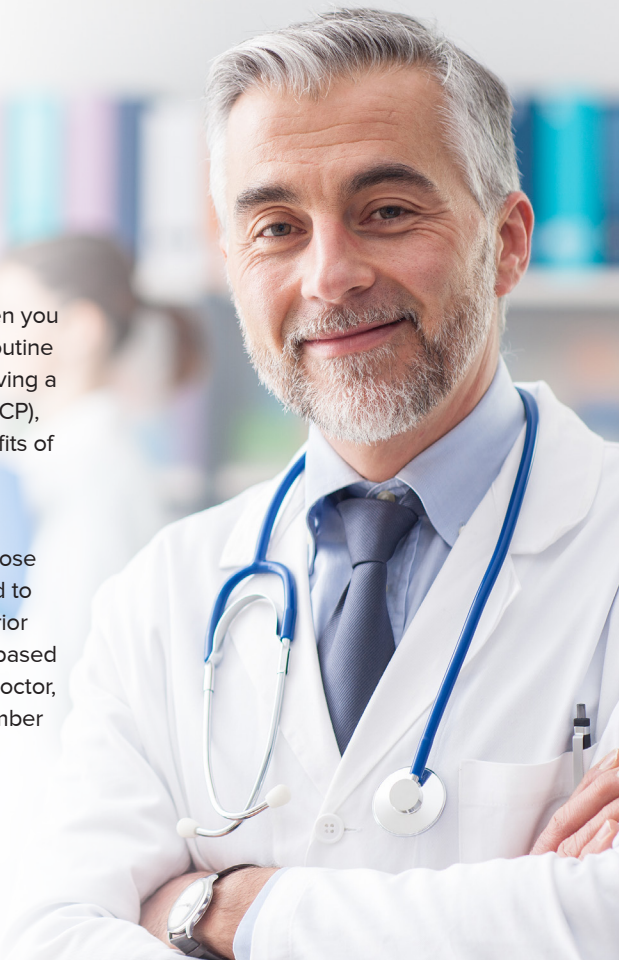


Get Rewards! 

FIND A DOCTOR

Your health is greatly improved when you have a doctor to see regularly for routine and preventive medical care. By having a preferred Primary Care Physician (PCP), you are better able to use the benefits of your Community health plan.

In our efforts to promote health and wellness, Members who do not choose a PCP will be automatically matched to a PCP using criteria that consider prior doctor and patient relationships or based on where you live. If you do find a doctor, switching is easy by calling our Member Services team at 1.855.315.5386.



TO SELECT YOUR PRIMARY DOCTOR:

1

Go to
CommunityHealthChoice.org
and select FIND A DOCTOR.

STEPS

1
PLAN

2
LOCATION

3
PROVIDER

FIND A DOCTOR

STAR Harris Primary Care Provider Directory
STAR Jefferson Primary Care Provider Directory
CHIP and CHIP Perinatal Combined Full Directory
CHIP Perinatal Only Full Directory

SKIP GUIDED SEARCH
& TAKE ME TO THE SEARCH PAGE

DISCLAIMER: Community Health Choice follows the Mental Health Parity and Addiction Equity Act (MHPAEA). We review to make sure that requirements for mental health benefits are the same and not more restrictive than medical benefits.

FIND A DOCTOR

Health

Our Service Area Map

Welcome to Community Health Choice's "Find a Doctor" search!

This tool can help you find doctors, pharmacists, hospitals, facilities, and much more. We make it easy to find what you need.

Click "Next" to get started.

Frequently Asked Questions

- How do I pick a Primary Care Provider, Doctor or Clinic?
- Need help scheduling an appointment or finding a Provider?
- How do I get family planning services? Do I need a referral?
- What if I need to see a special doctor specialist?
- What is a referral?
- How soon can I expect to be seen by a specialist?
- What services do not need a referral?
- How can I ask for a second opinion?
- How do I get help if I have behavioral (mental) health, alcohol or drug problems?
- Do I need a referral for that?

Next

2

Select **Community Marketplace** as your product.

STEPS

1. PLAN 2. LOCATION 3. PROVIDER

SELECT YOUR PLAN

1. SELECT YOUR PLAN

STAR
No-cost health insurance program for children under the age of 21 who qualify and for pregnant women who cannot afford health insurance.

CHIP
A low-cost health insurance plan for qualifying children under the age of 19.

CHIP PERINATAL
No-cost health insurance plan for the unborn child/born children. It covers the prenatal care for the pregnant woman.

COMMUNITY MARKETPLACE
A variety of individual health insurance plans available through the Health Insurance Marketplace.

KELSEY-SEYBOLD MARKETPLACE
Limited Plan Network health insurance plan composed of only Kelsey-Seybold Clinic Providers.

SKIP GUIDED SEARCH & TAKE ME TO THE SEARCH PAGE

Back Next

3

Validate your zip code or address for results that are near you.

STEPS

1. PLAN 2. LOCATION 3. PROVIDER

ENTER YOUR CURRENT LOCATION

2. ENTER YOUR CURRENT LOCATION

Please enter your zip code or address so we can bring you results that are near you. You can always change this later in your search.

ADDRESS OR ZIP CODE **Validate Address**

*Required

SKIP GUIDED SEARCH & TAKE ME TO THE SEARCH PAGE

Back Next

SHRPA disclaimer: Community Health Choice follows the Mental Health Parity and Addiction Equity Act (SHRPA). We review to make sure that requirements for mental health benefits are the same and not more restrictive than medical benefits.

4

Click Doctor.

STEPS

1. PLAN 2. LOCATION 3. PROVIDER 4. FILTER

SELECT A PROVIDER

3. SELECT A PROVIDER

What can we help you find near Houston, TX 77009, USA ?

DOCTORS **URGENT CARE** **FACILITIES** **PHARMACIES**

VISION **HOSPITALS** **BEHAVIORAL HEALTH**

SKIP GUIDED SEARCH & TAKE ME TO THE SEARCH PAGE

Back Next

SHRPA disclaimer: Community Health Choice follows the Mental Health Parity and Addiction Equity Act (SHRPA). We review to make sure that requirements for mental health benefits are the same and not more restrictive than medical benefits.

5

Once you have selected your plan type, you can search for a doctor.

STEPS

1. PLAN 2. LOCATION 3. PROVIDER 4. FILTER

FILTER YOUR RESULTS

4. FILTER

Doctors
Are you looking for a Primary Care Physician or a Specialist?

PRIMARY CARE PHYSICIAN
A Primary Care Physician, also known as a PCP, is a general doctor you go to first when you are concerned about your health. PCPs are trained to treat a wide variety of illnesses and help you prevent illness in the first place. If you need special care for a certain illness, your PCP may refer you to a specialist.

SPECIALIST
A Specialist is a doctor who treats a certain part of the body or a particular illness. Your Primary Care Physician (PCP) can help you decide if you need to see a Specialist.

Choose Specialist

SKIP GUIDED SEARCH & TAKE ME TO THE SEARCH PAGE

Back Search

SHRPA disclaimer: Community Health Choice follows the Mental Health Parity and Addiction Equity Act (SHRPA). We review to make sure that requirements for mental health benefits are the same and not more restrictive than medical benefits.

HOW TO USE TELEHEALTH SERVICES

Need to talk to a doctor after hours?

Or not feeling well enough to go to their office?

USE TELEHEALTH SERVICES INSTEAD! Telehealth services doctors are available 24/7 by phone, web or mobile app. You can get treatment and fill prescriptions if necessary. This is a free benefit at no cost to our Marketplace Members.

Call toll-free at **1.800.835.2362** to learn more.

PLEASE NOTE

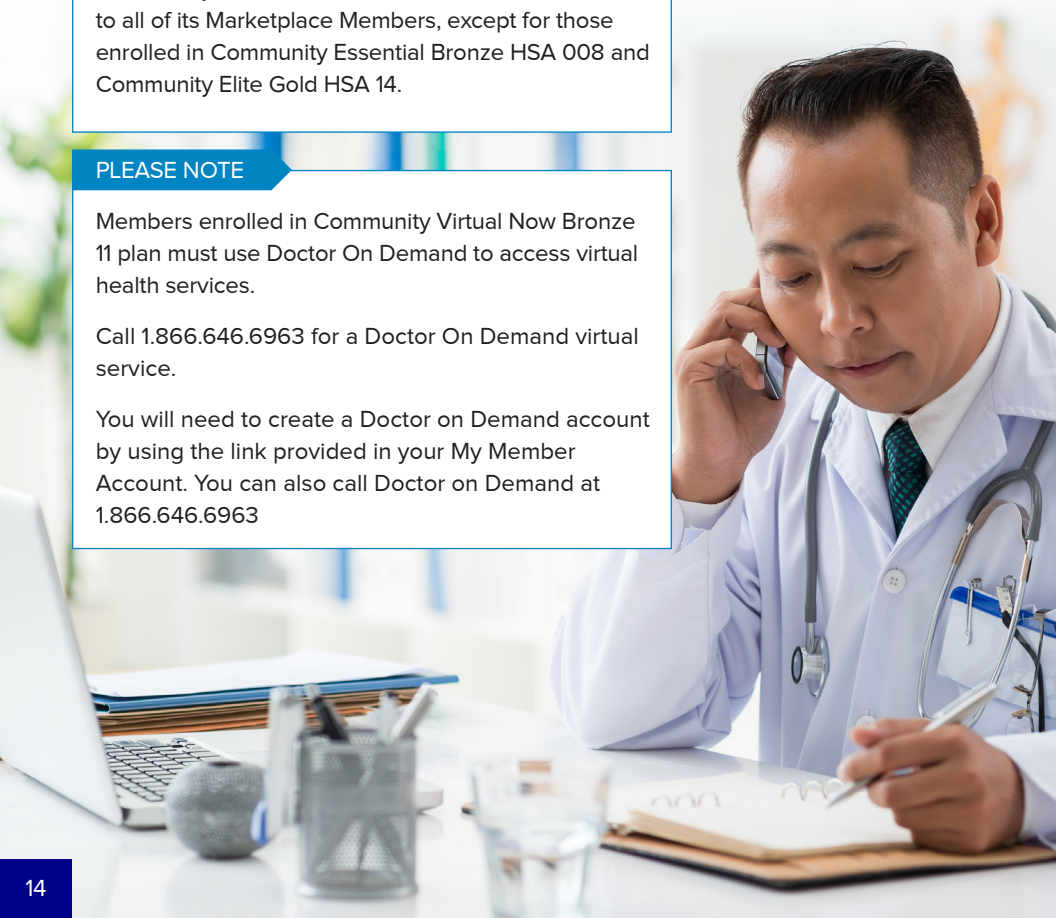
Community Health Choice offers Telehealth services to all of its Marketplace Members, except for those enrolled in Community Essential Bronze HSA 008 and Community Elite Gold HSA 14.

PLEASE NOTE

Members enrolled in Community Virtual Now Bronze 11 plan must use Doctor On Demand to access virtual health services.

Call 1.866.646.6963 for a Doctor On Demand virtual service.

You will need to create a Doctor on Demand account by using the link provided in your My Member Account. You can also call Doctor on Demand at 1.866.646.6963





NURSE **HOTLINE**

Community Health Choice Members can call the **Nurse Hotline** 24 hours a day, 7 days a week, at **1.833.955.1528**. When your doctor is not available, an after-hours nurse will answer your questions, page your physician if necessary, and schedule needed appointments.

A GUIDE TO INSURANCE TERMS

COINSURANCE

The amount you must pay for healthcare expenses after your deductible has been met. Coinsurance amounts are shared amounts between the health insurance carrier and you. Your portion of the coinsurance is paid until your out-of-pocket maximum is met for the year.

COPAY

A fixed fee that you pay for healthcare services and products (such as doctor visits and pharmaceutical prescriptions).

DEDUCTIBLE

The amount you must pay for healthcare expenses before insurance covers the costs. Sometimes, a health insurance plan will have a yearly deductible that you must meet before coverage begins.

ENROLLMENT PERIOD

A specified period of time when you can enroll in an insurance plan.

EXPLANATION OF BENEFITS (EOB)

An Explanation of Benefits (EOB) provides details about a medical insurance claim that has been processed and explains what portion was paid to the Provider and what portion, if any, is your responsibility.

GRACE PERIOD

This is a period of time when you are still covered but have a late payment. You must exit the grace period in a certain amount of time to avoid losing your health coverage.

IN-NETWORK PROVIDER

A Provider who is contracted with the health plan to provide services to plan Members for specific pre-negotiated rates.

OUT-OF-NETWORK PROVIDER

A Provider who is not contracted with the health plan.

OUT-OF-POCKET MAXIMUM

This is the maximum amount you will pay out of your own pocket in a year for covered healthcare expenses. Typically, after your out-of-pocket maximum expense limit is met, the plan pays 100% of all covered services for the remainder of the year.

PRE-EXISTING CONDITION

A healthcare condition that existed before insurance coverage begins.

PREMIUM

An amount to be paid for an insurance policy.

PRIMARY CARE PROVIDER

A healthcare professional (usually a physician) that is responsible for monitoring your overall health care needs.

SPECIALIST

A healthcare professional who specializes in one area of medicine. For example, a cardiologist is a doctor who specializes in heart conditions.

CONTACT US

MEMBER SERVICES

For questions about your plan, call our Member Services team at **713.295.6704** (toll-free 1.855.315.5386).

COMMUNITY CARES CENTER

Come visit us in person at one of our Community Cares Centers located in Houston and Beaumont.

Learn more at CommunityHealthChoice.org/en-us/Community-Cares-Centers.

CARE MANAGEMENT

The Community Health Choice Care Management team helps you manage chronic illnesses, like diabetes. Call **832.CHC.CARE** (832.242.2273) to learn more.

OTHER IMPORTANT NUMBERS

NAVITUS/PHARMACY/PRESCRIPTIONS:

1.866.333.2757

TDD NUMBER FOR THE HEARING IMPAIRED:

7-1-1

HEALTH INSURANCE MARKETPLACE:

1.800.318.2596

BEHAVIORAL HEALTH/SUBSTANCE ABUSE:

Your Community health plan benefits include support, guidance, and counseling for mental health and substance-use disorders.

1.855.539.5881

