

## 2023 MEMBER HANDBOOK CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
9/20/2023	Notice of Non-Discrimination	2	Added 'sexual orientation or gender identity' to NDN statement
9/20/2023	Important Phone Numbers	9	Changed 'Envolv PeopleCare' to 'Nurse Advice Line'
9/20/2023	Important Phone Numbers	9	Removed 'Member Connections' from table
9/20/2023	Services Covered and Not Covered by Absolute Total Care	19	Under BabyNet: changed verbiage to maintain consistency ('covered for children from birth to age three' changed to 'Ages 3 and younger')
9/20/2023	Services Covered and Not Covered by Absolute Total Care	21	Added 'Pediatric' to 'Inpatient Pediatric Rehabilitation Services' and changed \$25.00 to \$0
9/20/2023	Services Covered and Not Covered by Absolute Total Care	21	Insulin Pumps – removed 'Not covered for Type 2 diabetics'
9/20/2023	Services Covered and Not Covered by Absolute Total Care	23	Vaccines/Immunizations (Adult) – added 'Certain' in front of Vaccines/Immunizations (Adult); Replaced 'only if medically necessary' with 'Covered in accordance with the CDC Advisory Committee on Immunization Practices (ACIP) vaccine recommendations guidelines for adult beneficiaries 19 years of age and older'
9/20/2023	Services Covered and Not Covered by Absolute Total Care	23	Vaccines/Immunizations (Children) – Changed 'Ages 21 and younger' to 'Ages 18 and younger'
9/20/2023	Transplant Services	25	2 <sup>nd</sup> bullet point: Pre-transplant services 72 hours prior to 'pre-admission' updated to 'the transplant event/surgery'
9/20/2023	Pharmacy	30	Added bullet: Members of a federally recognized tribe when services are rendered by the Catawba Service Unit in Rock Hill, SC and when referred to a specialist or other medical provider by the Catawba Service Unit.
9/20/2023	Rehabilitative Therapy for Members Ages 20 and Younger	31	Updated 'Under' to 'Younger'
9/20/2023	Start Smart for Your Baby	33	1 <sup>st</sup> paragraph – changed 'women who are pregnant and for moms' to 'pregnant persons and birth parents'

<b>9/20/2023</b>	Start Smart for Your Baby	33	2 <sup>nd</sup> paragraph – changed ‘find out that’ to ‘think’ (you are pregnant)
<b>9/20/2023</b>	Premature Delivery	33	Removed ‘Premature Delivery’ section
<b>9/20/2023</b>	Care Management	36	2 <sup>nd</sup> paragraph: added ‘preventive health, wellness and’ after ‘who can help you understand’
<b>9/20/2023</b>	Care Management	36	2 <sup>nd</sup> paragraph: added ‘The care manager calls or schedules a home visit to assess your needs. You, your care manager and PCP develop a personal care plan to work on your goals for your health and well-being’ after ‘care you need.’ and before ‘to contact the Case Management program....’
<b>9/20/2023</b>	Foster Care	37	Added Foster Care section
<b>9/20/2023</b>	Diabetes	37	Removed sentence ‘They also work with you and your PCP to help you gain better control of your diabetes.’
<b>9/20/2023</b>	High-Risk Pregnancy	38	1 <sup>st</sup> paragraph: Added ‘Start Smart for Your Baby’ after Absolute Total Care and changed ‘Care Management Team’ to ‘Care Management program’
<b>9/20/2023</b>	High-Risk Pregnancy	38	2 <sup>nd</sup> paragraph: changed ‘after you find out’ to ‘when you think’ (you are having a baby)
<b>9/20/2023</b>	Wellness and Disease Prevention	38	Replaced ‘has partnered with Healthy Solutions for Life to provide a wellness program that not only assists our members with long lasting or serious health conditions, but also provides’ with ‘lifestyle management program and chronic conditions program provides’
<b>9/20/2023</b>	Wellness and Disease Prevention	38	Replaced ‘Healthy Solutions for Life’ with ‘These’
<b>9/20/2023</b>	HIV Testing and Counseling	40	Replaced ‘mothers’ with ‘birth parents’
<b>9/20/2023</b>	Vaccines and Immunizations	40	Updated entire paragraph to read: ‘Absolute Total Care wants its members to avoid disease at all costs. Vaccines and immunizations protect you and your children from serious diseases such as measles, whooping cough, and rubella. Recommended immunizations and vaccines for ages 18 and younger are covered by the Vaccines for Children (VFC) program. Immunizations are covered for adult members ages 19 and older in accordance with the Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP) vaccine recommendations guidelines. Covered services include the vaccine and administration of the vaccine. Adult vaccinations and immunizations include pneumococcal, influenza, Hepatitis A and B, Human Papillomavirus (HPV), measles, mumps, rubella and varicella (MMRV), rabies, serogroup B meningococcal (MenB); measles, mumps, and rubella (MMR); varicella (VAR); Tetanus and diphtheria toxoids (Td); Tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis vaccine (Tdap) and varicella (MMRV).’
<b>9/20/2023</b>	Before You Become Pregnant	41	3 <sup>rd</sup> paragraph: added ‘street’ in front of ‘drugs’
<b>9/20/2023</b>	When You Are Pregnant	42	Start Smart for Your Baby (Start Smart) – updated ‘women’ to ‘birth parents’
<b>9/20/2023</b>	Member Grievances and Appeals	45	How to File a Grievance: updated email to <a href="mailto:atc-appeals_grievances@centene.com">atc-appeals_grievances@centene.com</a>
<b>9/20/2023</b>	Filing an Appeal	48	How to File an Appeal: updated email to <a href="mailto:atc-appeals_grievances@centene.com">atc-appeals_grievances@centene.com</a>

<b>9/20/2023</b>	Protecting Your Privacy	59	Changed effective date to 5/5/23
<b>9/20/2023</b>	Protecting Your Privacy	59	Removed 'interpreter services are provided free of charge to you'
<b>9/20/2023</b>	Protecting Your Privacy	59	<p>Replaced 'Covered Entities Duties' section with 'Absolute Total Care is a Covered Entity as defined and regulated under the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Absolute Total Care is required by law to maintain the privacy of your protected health information (PHI), provide you with this Notice of our legal duties and privacy practices related to your PHI, abide by the terms of the Notice that is currently in affect, and notify you in the event of a breach of your unsecured PHI.</p> <p>This Notice describes how we may use and disclose your PHI. It also describes your rights to access, amend and manage your PHI and how to exercise those rights. All other uses and disclosures of your PHI not described in this Notice will be made only with your written authorization.</p> <p>Absolute Total Care reserves the right to change this Notice. We reserve the right to make the revised or changed Notice effective for your PHI we already have as well as any of your PHI we receive in the future. Absolute Total Care will promptly revise and distribute this Notice whenever there is a material change to the following:</p> <ul style="list-style-type: none"> <li>○ The Uses or Disclosures</li> <li>○ Your rights</li> <li>○ Our legal duties</li> <li>○ Other privacy practices stated in the notice</li> </ul> <p>We will make any revised Notices available on our website or through a separate mailing.'</p>
<b>9/20/2023</b>	Protecting Your Privacy	60	<p>Replaced 'Internal Protections of Oral, Written and Electronic PHI' section with 'Absolute Total Care protects your PHI. We have privacy and security processes to help.</p> <p>These are some of the ways we protect your PHI:</p> <ul style="list-style-type: none"> <li>• We train our staff to follow our privacy and security processes.</li> <li>• We require our business associates to follow privacy and security processes.</li> <li>• We keep our offices secure.</li> <li>• We talk about your PHI only for a business reason with people who need to know.</li> <li>• We keep your PHI secure when we send it or store it electronically.</li> </ul>

			<ul style="list-style-type: none"> <li>We use technology to keep the wrong people from accessing your PHI.'</li> </ul>
9/20/2023	Protecting Your Privacy	61	Permissible Uses and Disclosures of Your PHI, under 'Payment,' removed bullet points and replaced with 'processing claims, determining eligibility or coverage for claims, and reviewing services for medical necessity.'
9/20/2023	Protecting Your Privacy	61	<p>Healthcare Operations: Replaced section with 'We may use and disclose your PHI to perform our healthcare operations. These activities may include providing customer service, responding to complaints and appeals, and providing care management and care coordination.</p> <p>In our healthcare operations, we may disclose PHI to business associates. We will have written agreements to protect the privacy of your PHI with these associates. We may disclose your PHI to another entity that is subject to the federal Privacy Rules. The entity must also have a relationship with you for its healthcare operations. This includes the following:</p> <ul style="list-style-type: none"> <li>Quality assessment and improvement activities</li> <li>Reviewing the competence or qualifications of healthcare professionals</li> <li>Care management and care coordination</li> <li>Detecting or preventing healthcare fraud and abuse'</li> </ul>
9/20/2023	Protecting Your Privacy	62	<ul style="list-style-type: none"> <li>Other Permitted or Required Disclosures of Your PHI: replaced entire section with '<b>Fundraising Activities</b> – We may use or disclose your PHI for fundraising activities, such as raising money for a charitable foundation or similar entity to help finance their activities. If we do contact you for fundraising activities, we will give you the opportunity to opt-out, or stop, receiving such communications in the future.</li> <li><b>Underwriting Purposes</b> – We may use or disclose your PHI for underwriting purposes, such as to make a determination about a coverage application or request. If we do use or disclose your PHI for underwriting purposes, we are prohibited from using or disclosing your PHI that is genetic information in the underwriting process.</li> <li><b>Appointment Reminders/Treatment Alternatives</b> - We may use and disclose your PHI to remind you of an appointment for treatment and medical care with us or to provide you with information regarding treatment alternatives or other health-</li> </ul>

			<p>related benefits and services, such as information on how to stop smoking or lose weight.</p> <ul style="list-style-type: none"> <li>• <b>As Required by Law</b> - If federal, state, and/or local law requires a use or disclosure of your PHI, we may use or disclose your PHI information to the extent that the use or disclosure complies with such law and is limited to the requirements of such law. If two or more laws or regulations governing the same use or disclosure conflict, we will comply with the more restrictive laws or regulations.</li> <li>• <b>Public Health Activities</b> - We may disclose your PHI to a public health authority for the purpose of preventing or controlling disease, injury, or disability. We may disclose your PHI to the Food and Drug Administration (FDA) to ensure the quality, safety or effectiveness of products or services under the jurisdiction of the FDA.</li> <li>• <b>Victims of Abuse and Neglect</b> - We may disclose your PHI to a local, state, or federal government authority, including social services or a protective services agency authorized by law to receive such reports if we have a reasonable belief of abuse, neglect or domestic violence.</li> <li>• <b>Judicial and Administrative Proceedings</b> - We may disclose your PHI in response to an administrative or court order. We may also be required to disclose your PHI to respond to a subpoena, discovery request, or other similar requests.</li> <li>• <b>Law Enforcement</b> - We may disclose your relevant PHI to law enforcement when required to do so for the purposes of responding to a crime</li> <li>• <b>Coroners, Medical Examiners and Funeral Directors</b> - We may disclose your PHI to a coroner or medical examiner. This may be necessary, for example, to determine a cause of death. We may also disclose your PHI to funeral directors, as necessary, to carry out their duties.</li> <li>• <b>Organ, Eye and Tissue Donation</b> – We may disclose your PHI to organ procurement organizations. We may also disclose your PHI to those who work in procurement, banking or transplantation of cadaveric organs, eyes, and tissues.</li> </ul>
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9/20/2023	Protecting Your Privacy	66	Uses and Disclosures of Your PHI that Require Your Written Authorization: replaced entire section with, 'We are required to obtain your written authorization to use or disclose your PHI, with limited exceptions, for the following reasons:

			<ul style="list-style-type: none"> <li>• <b><i>Sale of PHI</i></b> – We will request your written authorization before we make any disclosure that is deemed a sale of your PHI, meaning that we are receiving compensation for disclosing the PHI in this manner.</li> <li>• <b><i>Marketing</i></b> – We will request your written authorization to use or disclose your PHI for marketing purposes with limited exceptions, such as when we have face-to-face marketing communications with you or when we provide promotional gifts of nominal value.</li> <li>• <b><i>Psychotherapy Notes</i></b> – We will request your written authorization to use or disclose any of your psychotherapy notes that we may have on file with limited exception, such as for certain treatment, payment or healthcare operation functions.</li> </ul> <p>You have the right to revoke your authorization, in writing at any time except to the extent that we have already used or disclosed your PHI based on that initial authorization.'</p>
9/20/2023	Protecting Your Privacy	67	<p>Individual Rights: replaced entire section with, 'The following are your rights concerning your PHI. If you would like to use any of the following rights, please contact us using the information at the end of this Notice.</p> <ul style="list-style-type: none"> <li>• <b><i>Right to Request Restrictions</i></b> - You have the right to request restrictions on the use and disclosure of your PHI for treatment, payment, or healthcare operations, as well as disclosures to persons involved in your care or payment of your care, such as family members or close friends. Your request should state the restrictions you are requesting and state to whom the restrictions apply. We are not required to agree to this request. If we agree, we will comply with your restriction request unless the information is needed to provide you with emergency treatment. However, we will restrict the use or disclosure of PHI for payment or health care operations to a health plan when you have paid for the service or item out of pocket in full.</li> <li>• <b><i>Right to Request Confidential Communications</i></b> - You have the right to request that we communicate with you about your PHI by alternative means or to alternative locations. This right only applies if the information could endanger you if it is not communicated by the alternative means or to the alternative location you want. You do not have to explain the reason for your request, but you must state that the information could</li> </ul>

endanger you if the communication means or location is not changed. We must accommodate your request if it is reasonable and specifies the alternative means or location where you PHI should be delivered.

- ***Right to Access and Receive a Copy of your PHI*** - You have the right, with limited exceptions, to look at or get copies of your PHI contained in a designated record set. You may request that we provide copies in a format other than photocopies. We will use the format you request unless we cannot practicably do so. You must make a request in writing to obtain access to your PHI. If we deny your request, we will provide you a written explanation and will tell you if the reasons for the denial can be reviewed. We will also tell you how to ask for such a review or if the denial cannot be reviewed.
- ***Right to Amend your PHI*** - You have the right to request that we amend, or change, your PHI if you believe it contains incorrect information. Your request must be in writing, and it must explain why the information should be amended. We may deny your request for certain reasons, for example if we did not create the information you want amended and the creator of the PHI is able to perform the amendment. If we deny your request, we will provide you a written explanation. You may respond with a statement that you disagree with our decision and we will attach your statement to the PHI you request that we amend. If we accept your request to amend the information, we will make reasonable efforts to inform others, including people you name, of the amendment and to include the changes in any future disclosures of that information.
- ***Right to Receive an Accounting of Disclosures*** - You have the right to receive a list of instances within the last 6-year period in which we or our business associates disclosed your PHI. This does not apply to disclosure for purposes of treatment, payment, health care operations, or disclosures you authorized and certain other activities. If you request this accounting more than once in a 12-month period, we may charge you a reasonable, cost-based fee for responding to these additional requests. We will provide you with more information on our fees at the time of your request.
- ***Right to File a Complaint*** - If you feel your privacy rights have been violated or that we have violated our own privacy practices, you can file a complaint with us in writing or by phone using the contact information at the end of this Notice.



			<p>You can also file a complaint with the Secretary of the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201 or calling <b>1-800-368-1019</b>, (TTY: <b>1-800-537-7697</b>) or visiting <a href="http://www.hhs.gov/ocr/privacy/hipaa/complaints/">www.hhs.gov/ocr/privacy/hipaa/complaints/</a>.</p> <p><b>WE WILL NOT TAKE ANY ACTION AGAINST YOU FOR FILING A COMPLAINT.</b></p> <ul style="list-style-type: none"> <li>• <b><i>Right to Receive a Copy of this Notice</i></b> - You may request a copy of our Notice at any time by using the contact information listed at the end of the Notice. If you receive this Notice on our web site or by electronic mail (e-mail), you are also entitled to request a paper copy of the Notice.'</li> </ul>
9/20/2023	Race, Ethnicity, Language, Sexual Orientation and Gender Identity Information	70	Updated section title to 'Race, Ethnicity, Language, Sexual Orientation and Gender Identity Information'
9/20/2023	Race, Ethnicity, Language, Sexual Orientation and Gender Identity Information	70	Added 'and sexual orientation and gender identity (SOGI)' to first sentence
9/20/2023	Race, Ethnicity, Language, Sexual Orientation and Gender Identity Information	71	Added 'or SOGI' after 'REL' (3 instances)
9/20/2023	Definitions	72	Alphabetized all definitions
9/20/2023	Definitions	74	Outpatient: replaced definition with, 'Preventive, diagnostic, therapeutic, rehabilitative, surgical, mental health, facility services for dental, and Emergency Services received by a patient through an outpatient/ambulatory care facility for the treatment of a disease or injury for a period of time generally not exceeding twenty-four (24) hours.'