



## Frequently Asked Questions from Members

- **How do I find an Empower pharmacy?**  
Visit [www.getempowerhealth.com](http://www.getempowerhealth.com) and click on “Find a Pharmacy” under the Pharmacy tab. All CVS/Caremark pharmacies are in-network with Empower. Prescription information is on your Empower Member ID card.
- **What if I have not received my Empower ID card? How do I get my Empower ID?**  
You can call Empower Member Services Toll Free 24/7 at 866-261-1286 to get your member ID number and request a replacement card. You can also print your Empower ID card from the Member Portal at [www.getempowerhealth.com](http://www.getempowerhealth.com).
- **What if my provider tells me they are not in network with Empower?**  
Providers may choose not to participate in the PASSE. If this happens, contact your care coordinator so they can help you find another Provider. Out of Network providers can choose to see Empower Members and bill Empower for that service.

### About Empower

- **What is this new PASSE program?**  
Empower is a **PASSE (Provider-Led Arkansas Shared Savings Entity)**. The PASSE is a new Medicaid program to address the needs of people who have behavioral health, intellectual disability, or developmental disability service needs.
- **How can I contact Empower?**  
You can call Empower Member Services Toll Free 24/7 at 866-261-1286 | TTY: 711 or by emailing [empower@empowerarkansas.com](mailto:empower@empowerarkansas.com). You can also contact your Care Coordinator directly or by emailing [CareCoordination@empowerarkansas.com](mailto:CareCoordination@empowerarkansas.com).
- **I would like to share my opinion about care, how can I do that?**  
Empower cares about the services we provide. If you are not happy with any part of your care, please call us at 866-261-1286 | TTY: 711 or email [complaintsandgrievance@empowerarkansas.com](mailto:complaintsandgrievance@empowerarkansas.com). If the issue or complaint cannot be resolved to your satisfaction, please contact the DHS PASSE Office of the Ombudsman at 844-843-7351, individuals who have a hearing or speech impairment can contact 888-987-1200, option 2 or [PASSEOmbudsmanOffice@dhs.arkansas.gov](mailto:PASSEOmbudsmanOffice@dhs.arkansas.gov).

We developed a Consumer Advisory Council (CAC) to ensure people have the opportunity to provide meaningful feedback and important program information across the state. The CAC also helps guide our mission to empower individuals to lead fuller, healthier lives at home and in their communities.



Empower invites our members to meet with us in person to share their opinions. During this meeting, members tell us what they think about our program. Empower uses this information to make program changes based on members' needs. If you have feedback please contact our Consumer Advisory Council by email at [Consumer.Advisory@empowerarkansas.com](mailto:Consumer.Advisory@empowerarkansas.com).

- **Does Empower have a website?**

Yes, our website is available 24/7 at [www.getempowerhealth.com](http://www.getempowerhealth.com). Check out the Members page to find member specific information including how to find a provider, the member handbook, or Facebook at @getempowerhealth.

- **What does being a member of Empower mean for me?**

Empower will be managing your Medicaid benefits. You will be assigned a Care Coordinator who will contact you within 15 business days.

- **How did you get my information? Who referred me to this program?** If you or your family member receives Medicaid and need a high level of behavioral health services, receive developmental disability services through the waiver, or you are on the waiver wait list you should have been contacted for an Arkansas Independent Assessment (ARIA). The Department of Human Services (DHS) enrolled you as a member of Empower based on responses on the ARIA. These answers helped DHS assign you to a level – or tier – of service to meet your needs. If you were assigned a Tier 2 or 3, you were assigned to a PASSE.

- **Will I lose my benefits if I do not participate in a PASSE?**

You are assigned to a PASSE to manage your Medicaid benefits and organize your care if you are a Tier 2 or Tier 3.

- **How do I know what Tier level I was assessed as by the Independent Assessment?**

Members should have received a packet from Optum with their Tier results and a report of needs. If you did not receive this information, contact Optum at 844809-9538.

- **What if I do not agree with my Tier?**

If you do not agree with your tier determination, you have the right to request a hearing. A request must be received at the DHS Office of Appeals and Hearings' address below no later than 35 days from the mailing date. Please put your request for a hearing and for any services in writing. With your request, please include a copy of your assessment results from Optum and mail it to:

Arkansas Department of Human Services  
Office of Appeals & Hearings



P.O. Box 1437, Slot N401  
Little Rock, AR 72203  
Division of Medical Services

- **Is the Empower ID card going to take the place of my Medicaid card?**  
You need to take your Empower ID card to any provider you use for medical, pharmacy, behavioral health or developmental disability services beginning March 1, 2019.
- **Will there be a copay?**  
No, providers are not allowed to bill members for any covered services provided. See your member handbook for a list of covered services.
- **What if my provider is not a provider in the Empower network?**  
All providers are encouraged to join every PASSE so they can see members from every PASSE. If your provider is not in Empower's Network and you would like them to be, please let your Care Coordinator know, or email our Provider Relations team at [EmpowerPR@empowerarkansas.com](mailto:EmpowerPR@empowerarkansas.com).
- **How can I talk with my Care Coordinator if I need an interpreter or special services?**  
Contact Empower at 866-261-1286 or let your Care Coordinator know if you need an interpreter or other services to help with communication. This includes sign language interpreters, translation services including interpreters, and written information in other languages or formats such as large print, audio, and other electronic formats.

### About Empower Benefits and Services

- **What services will be covered for Empower Members?**  
You will have access to the same services covered by Medicaid today. They will be covered as long as those services are medically necessary. Dental services are currently excluded from the PASSE and you will continue to use your Medicaid dental ID card to receive any covered dental services.
- **What services will not be covered for Empower Members?**  
Below is a list of services that Empower does not cover.
  - Services that are experimental or investigational in nature
  - Services that are provided by a provider that is not in the Empower network, unless Empower has given prior authorization
  - Services that are provided without a required prior authorization
  - Elective cosmetic surgery
  - Infertility care



- Any service that is not medically necessary
  - Services provided through local education agencies
  - Extended stays in special needs facilities or nursing homes
  - Other services excluded from the PASSE:
    - Nonemergency transportation (NET)
    - Dental benefits in a capitated program
    - School-based services provided by school employees
    - Skilled nursing facility services unless it is rehabilitative in nature
    - Assisted living facility services
    - Human Development Centers (HDCs)
    - Waiver services provided to the elderly and adults with physical disabilities through the ARChoices in Homecare program or the Arkansas Independent Choices program
  - If you are unsure if a service is covered, call Member Services at 866-2611286 | TTY: 711.
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- **How do I get a Primary Care Physician (PCP)?**

Members select their PCP when they sign up for Medicaid. Members who are also eligible for Medicare are able to keep their Medicare PCP. For any members who do not select a PCP, Empower will automatically assign a PCP based on:

    - the member's claims history (who they have seen in the past);
    - a member's geographical location;
    - appropriate distribution by provider (so that members are not overly concentrated with the same PCP).

Members ages 18 and older will be assigned to a general or family practitioner, internal medicine, or other specialty provider approved by the state. Members under 18 years old will be assigned to a pediatrician or family practitioner. At any time, a member can call Empower Member Services and request that their PCP be changed, and Empower will honor that request if they are an In-Network provider.
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- **How do I know if I am a member of Empower?** Empower members will receive a welcome packet that contains:
    - member welcome letter
    - a member identification (ID) card
    - how to locate the member handbook on our website
    - how to find the provider directory on our website



You can also call our Customer Service line at any time to verify your eligibility at 866-261-1286 | TTY: 711.

## Care Coordination

- **What is a care coordinator?**

A care coordinator will connect you and your family with community supports, doctors, or coordinate the services you are already receiving, or any additional support needed. They will write a Person Centered Service Plan (PCSP) to help you achieve your goals and link your medical health, developmental disability, and specialty health services.

- **Can you help us pay our bills? (light bill, gas bill)**

Your Care Coordinator can connect you to resources in your community that help with these needs.

- **Are you taking the place of our DCFS caseworker?**

No, we are not replacing your DCFS caseworker or any provider you have. You will have a care coordinator to ensure all services are coordinated and organized.

- **Do you have to come to our home every month?**

Empower Care Coordinators are working with you and your family to obtain the best possible outcomes. Meeting face to face can enhance communication and help our Care Coordinators coordinate between you and your service providers. Some of your meetings will be face to face while other visits will be on the phone. Your care coordinator will work with each individual member to schedule visits at the time and place that is easiest for you.

- **What services do you offer?**

See your member handbook for covered services. The member handbook is available to all members or can be found on the Empower website at [www.getempowerhealth.com](http://www.getempowerhealth.com).

- **Do you have to call every month? Why?**

Yes, we want to ensure all services are coordinated. Your care coordinator will also assist with any care related issues. If you would like to talk about the way that your care coordination contacts you, speak with them directly.

- **Do you go to the school to speak to teachers?**

Care Coordinators will only speak with individuals at a member's school when members/guardians have agreed to it. It may be helpful to have your Care Coordinator attend your child's Individual Education Plan (IEP) meetings.

- **Do you call the doctor's office?**



Empower can assist you with calling your doctor's office, if needed. Care Coordinators will only speak with individuals at a member's doctor's office when members/guardians have agreed to it.

- **What is the Person Centered Service Plan (PCSP)?**

Empower members have a Person Centered Service Plan (PCSP). The Care Coordinator gets copies of all treatment and service plans for members from providers. The goal is to prevent duplication of services, ensure timely access to all needed services, and identify any service gaps, as well as provide any health education or health coaching identified. The PCSP is made when you, your family, and your providers work together to meet your needs. It is to make sure you have supports that know your background and the services you receive and may need.

### Pharmacy

- **How do I get my pharmacy information?**

Your Empower ID card will include the necessary information for your pharmacy to fill a prescription under your benefit plan. Show your new ID card to the pharmacy before filling your first prescription in order to avoid any prescription delays.

- **Will my prescription costs change?**

There will be no cost to you for prescriptions with Empower.

- **What if I take a medicine that requires Prior Authorization?**

For those medicines listed on the formulary as Prior Authorization required, a request from your provider prescribing the medication is required. Your provider can contact CVS Customer Care to look up a specific drug to see if a prior authorization is required or for any other questions.