



Quartz

2025 Member Handbook

For BadgerCare Plus and/or Medicaid SSI Plans



Welcome to Quartz

With Quartz BadgerCare Plus or Medicaid SSI, you can feel confident in your health plan. Your Quartz plan covers medical care and extra benefits for your whole health. Our local team is here to answer your questions and help you find care you can count on.

Keep this handbook to help you:

- Learn the basics of BadgerCare Plus and/or Medicaid SSI
- See the services covered by Quartz and ForwardHealth
- Know your rights and responsibilities
- File a grievance or appeal if you have a problem or concern

Thank you for choosing Quartz as your partner for well-living. With your Quartz plan, you get more health benefits and coverage that go beyond what ForwardHealth covers.



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How to contact Quartz Customer Success*

(800) 362-3310 (TTY: 711)

Hours: Monday – Thursday, 7 a.m. – 6 p.m.
Friday, 7 a.m. – 5 p.m.

Call Customer Success for:

- Questions about your Quartz membership
- Questions about how to get care
- Help choosing a primary care physician or other provider
- Help getting a new Quartz Medicaid SSI member ID card
- Help finding a provider or requesting a copy of the provider directory
- Support if you get a bill for a service that you did not agree to

Quartz emergency number*

(888) 297-0970

Call 24 hours a day, seven days a week

Call this number if you need help after-hours or if you are not sure if you are experiencing a medical emergency.

Quartz Member Advocate*

(800) 362-3310

Hours: Monday – Thursday, 7 a.m. – 6 p.m.
Friday, 7 a.m. – 5 p.m.

Call a Quartz Member Advocate for help with:

- Solving problems with getting care
- Filing a complaint or grievance
- Requesting an appeal or review of a decision made by Quartz

HMO Enrollment Specialist

(800) 291-2002

Hours: 7 a.m. – 6 p.m., Monday – Friday

Call the HMO Enrollment Specialist for:

- General information about health maintenance organizations (HMOs) and managed care
- Help with disenrollment or exemption from Quartz or managed care
- If you move out of Quartz's service area



*Calls to this number are free. Free language interpreters are available for non-English speakers.



ForwardHealth Member Services

(800) 362-3002

Hours: 8 a.m. – 6 p.m., Monday – Friday

memberservices@wisconsin.gov

Call ForwardHealth Member Services for:

- Questions about how to use your ForwardHealth card
- Questions about ForwardHealth services or providers
- Help with getting a new ForwardHealth card

External Advocate (Medicaid SSI Only)

(800) 708-3034

Hours: 8:30 a.m. – 5 p.m., Monday – Friday

Call the Medicaid SSI External Advocate for:

- Help solving problems with the care or services you get from Quartz
- Help filing a complaint or grievance
- Help requesting an appeal or review of a decision made by Quartz

State of Wisconsin HMO Ombuds Program

An Ombuds is a person who provides neutral, private, and informal help with any questions or problems you have as a Quartz member.

(800) 760-0001

Hours: 8 a.m. – 4:30 p.m., Monday – Friday

Call the Ombuds Program for:

- Help solving problems with the care or services you get from Quartz
- Help understanding your member rights and responsibilities
- Help filing a grievance, complaint, or appeal of a decision made by Quartz

Call 911 for medical emergencies. Call, text, or chat 988 (or 988lifeline.org) for suicide and crisis support.

Using your ForwardHealth card

All Quartz BadgerCare Plus and Medicaid SSI members have a ForwardHealth card. This is a plastic card with your name, a 10-digit number, and a magnetic stripe. For Medicaid SSI members, your ForwardHealth card is different from your Quartz member ID card.

Always carry your ForwardHealth card with you. Show it every time you go to a provider or hospital and fill a prescription. You may have problems getting health care or your prescriptions if you do not have your card with you. Bring any other health insurance cards you may have. This could include an ID card from Quartz Medicaid SSI or other service providers.

You will get most of your health care through Quartz providers. However, you may need some other services using your ForwardHealth card. Use your ForwardHealth card for the below services:

- Behavioral (autism) treatment services
- Chiropractic services
- Crisis intervention services
- Community recovery services
- Comprehensive community services
- Dental service (covered for Medicaid SSI members in Milwaukee County only)
- Hub and spoke integrated recovery support health home services
- Medication therapy management
- Medications and pharmacy services
- Non-emergency medical transportation
- Prenatal care coordination
- Residential substance use disorder treatment
- School based services
- Targeted case management
- Tuberculosis-related services

Members can call Quartz at **(800) 362-3310 (TTY: 711)** for services from a provider that may not be included on this list.

If you have questions about how to use your ForwardHealth card, to report a lost, stolen, or damaged card, or to find a provider, call ForwardHealth Member Services at **(800) 362-3002**. You can also find a provider that accepts your ForwardHealth card by using these steps:

1. Go to **forwardhealth.wi.gov**
2. Click on the Members link or icon in the middle section of the page.
3. Scroll down and click on the Resources tab.
4. Click on the Find a Provider link.
5. Under Program, select BadgerCare/Medicaid.

Using your Quartz membership card

If you are a Medicaid SSI member, you will also get a Quartz member ID card to keep together with your ForwardHealth card. You may have problems getting health care or prescriptions if you don't have both of your ID cards with you. If your Quartz card is lost, damaged, or stolen, please call the HMO Enrollment Specialist at **(800) 362-3310 (TTY: 711)**.

If you are a Quartz BadgerCare Plus member, you will not receive a Quartz member ID card. Use your ForwardHealth card when you get care or go to the pharmacy.

Understanding insurance, medical, and Medicaid terms

To learn more about common insurance, medical, and Medicaid terms, go to **QuartzBenefits.com/Glossary**.

Using the Quartz Provider Directory

As a member of Quartz, you should get your health care from doctors and hospitals in the Quartz network. See our provider directory for a list of these providers. Providers accepting new patients are called out in the provider directory.

The provider directory is a list of doctors, clinics, and hospitals that you can use to get health care services as a member of Quartz. You can find the directory on our website at [QuartzBenefits.com/BCSSIPProviders](https://www.QuartzBenefits.com/BCSSIPProviders). Quartz offers the provider directory in different languages and formats, as well as a paper copy. Call Quartz Customer Success at **(800) 362-3310 (TTY: 711)** to request a copy.

Quartz providers are sensitive to the needs of many cultures. You can filter the Quartz provider directory for a list of providers who speak certain languages or understand certain ethnic cultures or religious beliefs. The provider directory can also tell you about the accommodations that providers offer.

Choosing a primary care provider

When you need care, call your primary care provider (PCP) first. A primary care provider could be a doctor, nurse practitioner, physician assistant, or other provider that gives, directs, or helps you get health care services. You can choose a primary care provider from the Quartz provider directory. Use the list of providers accepting new patients. If you are an American Indian or Alaska Native, you can choose to see an Indian Health Care Provider outside of our network.

Call Quartz Customer Success at **(800) 362-3310 (TTY: 711)** to choose or change your primary care provider. You can keep your current primary care provider if they are part of our provider network. Your primary care provider will help you decide if you need to see another doctor or specialist. You'll need a referral from your primary care provider to see some providers. A referral is approval from your primary care provider to see a specialist or have services in a hospital..

You may see a women's health specialist without a referral in addition to choosing a primary care provider. This could be an obstetrician and gynecologist (OB/GYN), nurse midwife, or licensed midwife.

Discussing your health care needs

The Quartz Care Management team may contact you by phone and mail to talk with you about your individual health needs and circumstances. You can ask about resources in your community or that are part of your new health plan that may be available to you. They can learn more about you and help you achieve your health goals. Call Quartz Care Management at **(866) 884-4601** to get started.

Getting the **care you need**

Emergency care

Emergency care is care that is needed right away for an illness, injury, symptom, or condition that is very serious. Some examples are:

- Choking
- Convulsions
- Prolonged or repeated seizures
- Serious broken bones
- Severe burns
- Severe pain
- Severe or unusual bleeding
- Suspected heart attack
- Suspected poisoning
- Suspected stroke
- Trouble breathing
- Unconsciousness

If you need emergency care, get help as quickly as possible. Try to go to a hospital or emergency room in the Quartz network for help if you can. If your condition cannot wait, go to the nearest provider (hospital, doctor, or clinic). Call 911 or your local police or fire department emergency services if the emergency is very severe and you are unable to get to the nearest provider.

If you must go to an out-of-network hospital or emergency room, you or someone else should call Quartz at **(800) 362-3310** as soon as you can to tell us what happened.

Prior authorization is not required for emergency services.

Remember, hospital emergency rooms are for true emergencies only. Unless your condition is very serious, call your doctor or our 24 hour emergency number at **(888) 297-0970** before you go to the emergency room. If you do not know if your illness or injury is an emergency, call **(800) 858-1050, TTY: (800) 947-6644**. We will tell you where you can get care. You may have to pay a copayment if you go to an emergency room for care that is not an emergency.

Urgent care

Urgent care is care for an illness, injury, or condition that needs medical help right away, but does not require emergency room care. Some examples are:

- Bleeding that is not severe
- Bruises
- Minor burns
- Minor cuts
- Most broken bones
- Most drug reactions
- Sprains

**If you are having
an emergency,
call 911**

You must get urgent care from in-network providers unless you get our approval to see an out-of-network provider. Do not go to a hospital emergency room for urgent care unless you get approval from Quartz first.

Specialty care

A specialist is a doctor who is an expert in an area of medicine. There are many kinds of specialists. Here are a few examples:

- Oncologists, who care for people with cancer.
- Cardiologists, who care for people with heart conditions.
- Orthopedists, who care for people with certain bone, joint, or muscle conditions.

Contact your primary care provider if you need care from a specialist. Most of the time, you need to get approval from your primary care provider and Quartz before seeing a specialist.

Care during pregnancy and delivery

Let Quartz and your county or tribal agency know right away if you become pregnant, so you can get the extra care you need. You do not have copayments when you are pregnant.

You must go to a hospital within the Quartz network to have your baby. Talk to your provider to make sure you know which hospital you should have your baby at. Do not go out of the area to have your baby unless you have Quartz approval. Your Quartz provider knows your history and is the best provider to help you.

Also, talk to your doctor if you plan to travel in your last month of pregnancy. Traveling during your last month of pregnancy increases the chance that your baby will be born while you are away from home. Many people have a better birthing experience when they use the doctors and hospitals that cared for them throughout their pregnancy.

Telehealth services

Telehealth is audio and video contact with your doctor or health care provider using your phone, computer, or tablet. Quartz covers telehealth services that your provider can deliver at the same quality as in-person services. This could be doctor office visits, mental health or substance use services, dental consultations, and more. There are some services you cannot get using telehealth. This includes services where the provider needs to examine you in person.

Both you and your provider must agree to a telehealth visit. You always have the right to refuse a telehealth visit and do an in-person visit instead. Your BadgerCare Plus and/or Medicaid SSI benefits and care will not be impacted if you refuse telehealth services. If your provider only offers telehealth visits and you want to do in-person, they can refer you to a different provider.

Quartz and Wisconsin Medicaid providers must follow privacy and security laws when providing services over telehealth.



Care when you are away from home

Follow these rules if you need medical care but are too far away from home to go to your regular primary care provider or clinic:

- For true emergencies, go to the nearest hospital, clinic, or doctor. Call Quartz at **(800) 362-3310** as soon as you can to tell us what happened. If you need emergency care outside of Wisconsin, out-of-area health care providers can treat you and send the bill to Quartz. You may need to pay a copayment if you get emergency care outside of Wisconsin. If you get a bill for services you got outside of Wisconsin, call Customer Success at **(800) 362-3310 (TTY: 711)**.
- For urgent or routine care away from home, you must get approval from Quartz before you go to a different doctor, clinic, or hospital. This includes children who are spending time away from home with a parent or relative. Call us at **(800) 362-3310** for approval to go to a different doctor, clinic, or hospital.
- For urgent or routine care outside the United States, call Quartz first. Quartz does not cover any services provided outside the United States, Canada, and Mexico. This includes emergency services. If you need emergency services while in Canada or Mexico, Quartz will cover it only if the doctor's or hospital's bank is in the United States. Other services may be covered with Quartz approval if the provider has a bank in the United States. Please call Quartz if you get any emergency services outside the United States.



When you may be billed for **services**

Covered and non-covered services

With BadgerCare Plus and/or Medicaid SSI, you do not have to pay for covered services other than required copayments.

You may have to pay the full cost of services if:

- The service is not covered under BadgerCare Plus or Medicaid SSI.
- You needed approval for a service from your primary care provider or Quartz, but you did not get approval before getting the service.
- Quartz determines that the service is not medically necessary for you. Medically necessary services are approved services or supplies needed to diagnose or treat a condition, disease, illness, injury, or symptom.
- You received a non-emergency service from a provider that is not in the Quartz network. Or you received a non-emergency service from a provider that does not accept your ForwardHealth card.

You can ask for non-covered services if you are willing to pay for them. You'll have to make a written payment plan with your provider. Providers may bill you up to their usual and customary charges for non-covered services.

If you get a bill for a service you did not agree to, please call **(800) 362-3310**.

Copayments

Under BadgerCare Plus and Medicaid SSI, Quartz and its providers may bill you for copayments. A copayment is a fixed amount of money you pay for a covered health care service. Copayments for Badgercare Plus and/or Medicaid SSI members are usually \$3 or less. The following members do not have to pay copayments:

- Nursing home residents
- Terminally ill members receiving hospice care
- Pregnant women
- Members younger than 19 years old
- Children in foster care or adoption assistance
- Youth who were in foster care on their 18th birthday. They don't have to pay any copays until age 26.
- Members who join by Express Enrollment
- American Indians or Alaskan Native Tribal members, children or grandchildren of a tribal member, or anyone who can get Indian Health Services. Age and income do not matter. This applies when getting items and services from an Indian Health Services provider or from the Purchase and Referred Care program.

Services covered by BadgerCare Plus and/or Medicaid SSI

Quartz provides most medically necessary, covered services under BadgerCare Plus and/or Medicaid SSI. See Services covered by Quartz on page 14 for more information about services covered by Quartz.

Some services are covered by ForwardHealth. To learn more about these services see page 16, Services covered by ForwardHealth.

Some services require prior authorization. Prior authorization is written approval for a service or prescription. You may need prior authorization from Quartz or ForwardHealth before you get a service or fill a prescription.

Service	Coverage under BadgerCare Plus and/or Medicaid SSI Standard Plan
Ambulatory Surgical Center Care	Full coverage
Behavioral (autism) treatment services*	<ul style="list-style-type: none"> • Full coverage (with prior authorization) • No copay*
Chiropractic <small>Provided and administered by the State of Wisconsin, not Quartz</small>	<ul style="list-style-type: none"> • Full coverage • \$0.50 to \$3.00 copayment per service (varies by service provided)
Dental <small>Provided and administered by the State of Wisconsin, not Quartz. Note: Dental service covered for Medicaid SSI members in Milwaukee County only.</small>	<ul style="list-style-type: none"> • Full coverage of preventive, restorative, and palliative services • \$0.50 to \$3.00 copayment per service (varies by service provided)
Disposable Medical Supplies (DMS)	Full coverage
Drugs <small>Provided and administered by the State of Wisconsin, not Quartz</small>	<ul style="list-style-type: none"> • Comprehensive drug benefit with coverage of generic and brand name prescription drugs and some over-the-counter (OTC) drugs • Members are limited to five prescriptions per month for opioid drugs • Copayments: <ul style="list-style-type: none"> ◦ \$0.50 for OTC drugs ◦ \$1.00 for generic drugs ◦ \$3.00 for brand-name drugs • Copayments are limited to \$12.00 per member, per provider, per month. OTCs are excluded from this \$12.00 maximum
Durable Medical Equipment (DME)	Full coverage

*Covered by ForwardHealth. Use your ForwardHealth card to get this service.

Service	Coverage under BadgerCare Plus and/or Medicaid SSI Standard Plan
Health screenings for children	Full coverage of HealthCheck screenings and other services for individuals under age 21
Hearing services	Full coverage
Home care services <small>Includes home health, private duty nursing (PDN), and personal care</small>	Full coverage of PDN, home health, and personal care services
Hospice	Full coverage
Inpatient hospital	Full coverage
Mental health and substance use treatment	Full coverage (not including room and board)
Nursing home services	Full coverage
Outpatient hospital emergency room	Full coverage
Physical therapy (PT), Occupational therapy (OT), and Speech and language pathology (SLP)	Full coverage
Physician	Full coverage, including laboratory and radiology
Podiatric services	Full coverage
Prenatal/maternity care	Full coverage, including prenatal care coordination, and preventive mental health and substance use screening and counseling for women at risk for mental health or substance use problems
Reproductive health services	Full coverage, excluding infertility treatments, surrogate parenting and related services, including but not limited to artificial insemination and subsequent obstetrical care as a non-covered service and the reversal of voluntary sterilization
Routine vision	Full coverage, including coverage of eyeglasses
Transportation: ambulance, specialized motor vehicle, common carrier	Full coverage of emergency and non-emergency transportation to and from a provider for a covered service
Smoking cessation services	<ul style="list-style-type: none"> • Coverage includes prescription and over-the-counter tobacco cessation products • Copayment: (see Drugs)

Services covered by Quartz

Mental health and substance use services

Quartz provides mental health and substance use (drug and alcohol) services to all members. Call Quartz Behavioral Health Care Management at **(800) 683-2300**. If you need immediate help, call the Suicide & Crisis Lifeline Hotline at **988** or our 24-Hour Nurse Line at **(800) 858-1050**, which is open seven days a week.

All services provided by Quartz are private.

Family planning services

Quartz provides private family planning services to all members, including people under the age of 18. If you do not want to talk to your primary care provider about family planning, call Customer Success at **(800) 362-3310 (TTY: 711)**. We will help you choose a Quartz family planning provider who is different from your primary care provider.

We encourage you to get family planning services from a Quartz provider. This allows us to better coordinate all your health care. However, you can also go to any family planning clinic that will accept your ForwardHealth ID card, even if the clinic is not part of Quartz's provider network.

If you choose an out-of-network family planning provider for family planning services and supplies, please have your provider notify Quartz to better coordinate your care. Quartz does not require a member to obtain a referral before choosing a family planning provider.

HealthCheck services

HealthCheck covers health checkups for members younger than 21 years old. HealthCheck exams, also known as "well-child checks," are doctor visits your child or young adult has when they are well. The doctor asks questions and examines your child. This is to make sure your child is healthy and taking the right steps to stay healthy. It's a good time to ask health questions you or your child may have. HealthCheck also covers treatment for any problems found during your child's HealthCheck exam.

HealthCheck has three purposes:

1. To find and treat health problems for members younger than 21 years old.
2. To share information about special health services for members younger than 21 years old.
3. To make members younger than 21 years old eligible for some health care not otherwise covered.

The HealthCheck exam includes:

- Age appropriate immunizations (shots)
- Blood and urine lab tests
- Dental checks and a referral to a dentist beginning at 1 year old
- Health and developmental history
- Hearing checks
- Head-to-toe physical exam
- Lead testing for children ages 1 and 2 years old and children under age 6 who have never had a lead test
- Vision checks

To schedule a HealthCheck exam or for more information, call Customer Success at **(800) 362-3310 (TTY: 711)**.

If you need a ride to or from a HealthCheck appointment, please call the Wisconsin non-emergency medical transportation (NEMT) manager at **(866) 907-1493** or **TTY: 711** to schedule a ride.

Dental services

In Milwaukee County, you must go to an in-network dentist.

To search the Momentum Provider Directory for an in-network dentist, visit **MomentumPlans.com/QuartzMedicaid** or call Momentum at **(833) 904-0209**, Monday through Thursday from 8 a.m. – 4:30 p.m., and Fridays 8 a.m. – 4 p.m. They can answer questions about dental services, too. You can also reach out to Quartz Customer Success for help finding a network dentist.

For BadgerCare Plus and/or Medicaid SSI members living outside of Milwaukee County, your dental benefits are covered by the state using your ForwardHealth ID card.

To find a Medicaid-enrolled provider:

1. Go to **forwardhealth.wi.gov**.
2. Click on the Members link or icon in the middle section of the page.
3. Scroll down and click on the Resources tab.
4. Click on the Find a Provider link.
5. Under Health Program, select BadgerCare Plus

Or, call ForwardHealth Member Services at **(800) 362-3002**.

You have the right to a routine dental appointment within 90 days of your request for an appointment. Call Quartz at **(800) 362-3310** if you are unable to get a dental appointment within 90 days.

Call the Wisconsin non-emergency medical transportation NEMT manager at **(866) 907-1493** (or **TTY: 711**) if you need help with getting a ride to or from the dentist's office. They can help with getting a ride.

If you have a dental emergency, you have the right to treatment within 24 hours of your request for an appointment. A dental emergency is severe dental pain, swelling, fever, infection, or injury to the teeth. If you are having a dental emergency:

- If you already have a dentist who is with ForwardHealth or with Momentum in Milwaukee County:
 - Call the dentist's office.
 - Tell the dentist's office that you or your child are having a dental emergency.
 - Tell the dentist's office what the exact dental problem is. This may be something like a severe toothache or swollen face.
 - Call us if you need help getting a ride to or from your dental appointment.
- If you do not currently have a dentist who is with ForwardHealth or with Momentum in Milwaukee County:
 - Call Quartz Customer Success at **(800) 362-3310 (TTY: 711)**. Tell us that you or your child are having a dental emergency. We can help you get dental services.
 - Tell us if you need help getting a ride to or from the dentist's office.

Services covered by ForwardHealth

Behavioral (Autism) treatment services

Behavioral treatment services are covered under Quartz BadgerCare Plus. Behavioral treatment services are used to treat autism. You can get autism treatment services from a Medicaid-enrolled provider who will accept your ForwardHealth ID card.

Chiropractic services

Chiropractic services are covered under BadgerCare Plus and/or Medicaid SSI. You can get chiropractic services from a Medicaid-enrolled provider who will accept your ForwardHealth ID card.

To find a Medicaid-enrolled provider:

1. Go to forwardhealth.wi.gov.
2. Click on the Members link or icon in the middle section of the page.
3. Scroll down and click on the Resources tab.
4. Click on the Find a Provider link.
5. Under Health Program, select BadgerCare/Medicaid.

Or, you can call ForwardHealth Member Services at **(800) 362-3002**.

Transportation services

You can get non-emergency medical transportation (NEMT) services through the Wisconsin NEMT manager. The NEMT manager arranges and pays for rides to covered services for members who have no other way to get there. NEMT can include rides using:

- Public transportation, such as a city bus
- Non-emergency ambulances
- Specialized medical vehicles
- Other types of vehicles, depending on a member's medical and transportation needs

If you have a car and are able to drive yourself to your appointment but cannot afford to pay for gas, you may be eligible for mileage reimbursement (money for gas).

You must schedule routine rides at least two business days before your appointment. Call the NEMT manager at **(866) 907-1493** (or **TTY: 711**), Monday through Friday, from 7 a.m. until 6 p.m. You may also schedule rides for urgent appointments. A ride to an urgent appointment will be provided in three hours or less.

Pharmacy benefits

You may get a prescription from a Quartz provider, specialist, or dentist. You can get covered prescriptions and certain over-the-counter items at any pharmacy that will accept your ForwardHealth ID card. You may have copayments or limits on covered medications. If you cannot afford your copayments, you can still get your prescriptions.

If you have any questions about the medications covered under BadgerCare Plus or Medicaid SSI or medication copayments, call ForwardHealth Member Services at **(800) 362-3002**.

Services not covered under **BadgerCare Plus and/or Medicaid SSI**

The services below are not covered under BadgerCare Plus and/or Medicaid SSI:

- Services that are not medically necessary
- Services that have not been approved by Quartz or your primary care provider when approval is required
- Normal living expenses like rent or mortgage payments, food, utilities, entertainment, clothing, furniture, household supplies, and insurance
- Experimental or cosmetic services or procedures
- Infertility treatments or services
- Reversal of voluntary sterilization
- Inpatient mental health stays in institutional settings for members ages 22-64, unless provided for less than 15 days instead of traditional treatment
- Room and board

In lieu of service or setting

Quartz may cover some services or care settings that are not normally covered in Wisconsin Medicaid. These services are called “in lieu of” services or settings.

The following in lieu of services or settings are covered under BadgerCare Plus or Medicaid SSI:

- Inpatient mental health services in an institute of mental disease (IMD) for a person 22-64 years of age for no more than 15 days during a month.
- Sub-acute community based clinical treatment (short-term residential mental health services).

Deciding if an “in lieu of” service or setting is right for you is a team effort. Quartz will work with you and your provider to help you make the best choice. You have a right to choose not to participate in one of these settings or treatments.

Getting a **second medical opinion**

If you disagree with your doctor’s treatment recommendations, you may be able to get a second medical opinion. Contact your provider or Customer Success at **(800) 362-3310 (TTY: 711)** for information.

Care management (coordination)

As a member of Quartz, you have access to a care management team at no extra cost. They will help you identify and meet your health and wellness goals. The care management team will also connect you with providers, community services, and social supports.

When you sign up for our plan, you will get an outreach letter or call to talk about your unique health needs. It is important to respond so we know how to best meet your needs. You can also call the Care Management team directly at **(866) 884-4601**.

Your care manager can also help you transition from the hospital or other care settings to home. Call your care manager at **(866) 884-4601** for help if you are hospitalized.

Completing an **advance directive, living will, or power of attorney** for health care

Sometimes people become unable to make health care decisions for themselves due to accidents or serious illness. You have the right to decide what you want to happen when you're not able to make decisions for yourself. This means you can develop an "advance directive."

There are different types of advance directives and different names for them. Documents called "living will" and "power of attorney for health care" are examples of advance directives.

You decide whether you want an advanced directive. Your providers can explain how to create and use an advance directive. But, they cannot force you to have one or treat you differently if you don't have one.

Contact your provider if you want to know more about advance directives. You can also find advance directive forms on the Wisconsin Department of Health Service (DHS) website at **dhs.wisconsin.gov/forms/advdirectives**.

You have the right to file a grievance with the DHS Division of Quality Assurance if your advance directive, living will, or power of attorney wishes are not followed. You can get help filing a grievance by calling the DHS Division of Quality Assurance at **(800) 642-6552**.

New treatments and services

Quartz has a process for reviewing new types of services and treatments. As part of the review process, Quartz:

- Reviews scientific studies and standards of care to make sure new treatments or services are safe and helpful.
- Looks at whether the government has approved the treatment or service.

Other **insurance**

Tell your providers if you have other insurance in addition to BadgerCare Plus or Medicaid SSI. Your providers must bill your other insurance before billing Quartz. If your Quartz provider does not accept your other insurance, call the HMO Enrollment Specialist at **(800) 291-2002**. They can tell you how to use both insurance plans.

If you **move**

If you are planning to move, contact your county or tribal agency. If you move to a different county, you must also contact the county or tribal agency in your new county to update your eligibility for BadgerCare Plus or Medicaid SSI.

If you move out of Quartz's service area, call the HMO Enrollment Specialist at **(800) 291-2002**. They will help you choose a new HMO that serves your new area.

Changes in your **Medicaid coverage**

If you have moved from ForwardHealth or a BadgerCare Plus or Medicaid SSI HMO to a new BadgerCare Plus or Medicaid SSI HMO, then you have the right to:

- Continue to see your current providers and access your current services for up to 90 days. Please call your new HMO when you enroll to let them know who your provider is. If this provider is still not in the HMO network after 90 days, you will choose a new provider that is in the HMO network.
- Get services that you need to avoid serious health risk or hospitalization.

Call Quartz Customer Success at **(800) 362-3310 (TTY: 711)** for more information about changes in your coverage.

Quartz **exemptions**

Quartz is a health maintenance organization, or HMO. HMOs are insurance companies that offer services from select providers.

Generally, you must enroll in an HMO to get health care benefits through BadgerCare Plus and Medicaid SSI. An HMO exemption means you don't have to join an HMO to get your BadgerCare Plus or Medicaid SSI benefits. Most exemptions are granted for only a short period of time. It's usually to allow you to complete a course of treatment before you are enrolled in an HMO.

If you think you need an exemption from HMO enrollment, call the HMO Enrollment Specialist at **(800) 291-2002** for more information.

Filing a grievance or appeal

GRIEVANCES

What is a grievance?

You have a right to file a grievance if you are unhappy with our plan or providers. A grievance is any complaint about Quartz or a network provider that is not related to a decision Quartz made about your health care services. You might file a grievance about things like the quality of services or care, rudeness from a provider or an employee, and not respecting your rights as a member.

Who can file a grievance?

You can file a grievance. An authorized representative, a legal decision maker, or a provider can also file a grievance for you. We will contact you for your permission if an authorized representative or provider files a grievance for you.

When can I file a grievance?

You (or your representative) can file a grievance at any time.

How do I file a grievance with Quartz?

Call a Quartz Member Advocate at **(800) 362-3310**, or write to us at the following address if you have a grievance:

Quartz
2650 Novation Parkway
Fitchburg, WI 53713

If you file a grievance with Quartz, you will have the opportunity to appear by telephone or in-person in front of Quartz's Grievance and Appeal Committee. Quartz will send you a decision on the grievance within 30 days from the date it's received.

Who can help me file a grievance?

A Quartz Member Advocate can help you solve problems with getting care, filing a complaint or grievance, requesting an appeal, and reviewing a decision made by Quartz. Call **(800) 362-3310 (TTY:711)** to speak to a member advocate.

To talk to someone outside of Quartz about the issue, call the Wisconsin HMO Ombuds Program at **(800) 760-0001 (TTY and translation services available)**. The Ombuds Program may be able to help you solve the problem or write a formal grievance to Quartz. If you are enrolled in a Medicaid SSI Program, you can also call the SSI External Advocate at **(800) 708-3034** for help with filing a grievance.

What if I disagree with Quartz's response?

If you don't agree with Quartz's response to your grievance, you can request a review of your grievance with the Wisconsin Department of Health Services (DHS).

Write to:

BadgerCare Plus and Medicaid SSI
HMO Ombuds
P.O. Box 6470
Madison, WI 53716-0470

Or call: **(800) 760-0001**

Will I be treated differently if I file a grievance?

You will not be treated differently from other members because you file a complaint or grievance. Your health care and benefits will not be affected.

APPEALS**What is an appeal?**

You have a right to request an appeal if you are unhappy with a decision made by Quartz. An appeal is a request for Quartz to review a decision that affects your services. These decisions are called adverse benefit determinations.

An adverse benefit determination is any of the following:

- Quartz plans to stop, suspend, or reduce a service you are currently getting.
- Quartz decides to deny a service you asked for.
- Quartz decides not to pay for a service.
- Quartz asks you to pay an amount that you don't believe you owe.
- Quartz decides to deny your request to get a service from a non-network provider when you live in a rural area with only one HMO.
- Quartz does not arrange or provide services in a timely manner.
- Quartz does not meet the required timeframes to resolve your grievance or appeal.

Quartz will send you a letter if you have received an adverse benefit determination.

Who can file an appeal?

You can request an appeal. An authorized representative, a legal decision maker, or a provider can also file an appeal for you. We will contact you for your permission if an authorized representative or provider requests an appeal for you.

When can I file an appeal?

You (or your representative) must request an appeal within 60 days of the date on the letter you get describing the adverse benefit determination.

(continued)

How do I file an appeal with Quartz?

Call a Quartz Member Advocate at **(800) 362-3310** to submit an oral or verbal appeal or write to:

Quartz
2650 Novation Parkway
Fitchburg, WI 53713

If you request an appeal with Quartz, you will have the opportunity to appear by telephone or in-person in front of Quartz's Grievance and Appeal Committee. Once your appeal is requested, Quartz will have 30 calendar days to give you a decision.

What if I can't wait 30 days for a decision?

If you or your doctor think that waiting 30 days could seriously harm your health or ability to perform your daily activities, you can request a fast appeal. If Quartz agrees that you need a fast appeal, you will get a decision within 72 hours.

Who can help me request an appeal?

If you need help writing a request for an appeal or a verbal appeal over the phone, please call a Quartz Member Advocate at **(800) 362-3310**.

If you want to speak with someone outside Quartz, you can call the BadgerCare Plus and Medicaid SSI Ombuds at **(800) 760-0001**. If you are a Medicaid SSI member, you can also call the SSI External Advocate at **(800) 708-3034** for help with your appeal.

Can I continue to get the service during my appeal?

If Quartz decides to stop, suspend, or reduce a service you are currently getting, you have the right to ask to keep getting your service during your appeal. You'll have to mail, fax, or email your request within the below timeframe, whichever is later:

- On or before the date Quartz plans to stop or reduce your service.
- Within 10 days of getting notice that your service will be reduced.

If your request is submitted on time, Quartz will continue or reinstate your benefits during the appeal period. Your benefits will continue until one of the following happens:

- You withdraw your appeal.
- Your appeal is denied, and you decide not to ask for a State Fair Hearing and continuation of benefits. Quartz will send you the result of your appeal and a notice of adverse benefit determination letter resolution letter. You have 10 calendar days from the letter to ask for a continuation of benefits while your State Fair Hearing is going on.

If Quartz's decision about your appeal is not in your favor, you might have to pay Quartz back for the service you got during the appeal process.

Will I be treated differently if I request an appeal?

You will not be treated differently from other members because you request an appeal. The quality of your health care and other benefits will not be affected.

What if I disagree with Quartz's decision about my appeal?

You can request a State Fair Hearing with the Wisconsin Division of Hearing and Appeals if you disagree with our decision about your appeal. Learn more about State Fair Hearing on the next page.

STATE FAIR HEARING

What is a State Fair Hearing?

This is a review of Quartz's decision on your appeal by an Administrative Law Judge in the county where you live. You must appeal to Quartz first before requesting a State Fair Hearing.

When can I request a State Fair Hearing?

You must request a State Fair Hearing within 90 days of the date you get Quartz's written decision about your appeal.

How do I request a State Fair Hearing?

If you want a State Fair Hearing, send a written request to:

Department of Administration
Division of Hearings and Appeals
P.O. Box 7875
Madison, WI 53707-7875

You have the right to be represented at the hearing and can bring a friend for support. If you need special arrangements for a disability or language translation, call **(608) 266-7709**.

Who can help me request a State Fair Hearing?

If you need help writing a request for a State Fair Hearing, please call the BadgerCare Plus and Medicaid SSI Ombuds at **(800) 760-0001**. If you are a Medicaid SSI member, you can also call the SSI External Advocate at **(800) 708-3034** for help.

Can I keep getting the service during my State Fair Hearing?

If Quartz decides to stop, suspend, or reduce a service you are currently getting, you have the right to ask to keep getting your service during your Quartz appeal and State Fair Hearing. You'll have to request that the service continue during your State Fair Hearing, even if you already requested to continue the service during your Quartz appeal. You'll have to mail, fax, or email your request within the below timeframe, whichever is later:

- On or before the date Quartz plans to stop or reduce your service.
- Within 10 days of getting notice that your service will be reduced.

If your request is submitted on time, Quartz will continue or reinstate your benefits during the appeal period. Your benefits will continue until one of the following happens:

- You withdraw your State Fair Hearing request.
- You miss the deadline to ask for Quartz to continue your benefits during your State Fair Hearing. Quartz will send you the result of your appeal and a notice of adverse benefit determination letter resolution letter. You have 10 calendar days from the letter to ask for a continuation of benefits while your State Fair Hearing is going on.

If the decision from the Division of Hearing and Appeals is not in your favor, your services will be stopped, suspended, or reduced. You may also have to pay Quartz back for the service you got during the State Fair Hearing process.

Will I be treated differently if I request a State Fair Hearing?

You will not be treated differently from other members because you request a State Fair Hearing. The quality of your health care and other benefits will not be affected.

Your rights

1. You have a right to get information in a way that works for you. This includes:
 - Your right to have an interpreter with you during any BadgerCare Plus or Medicaid SSI covered service.
 - Your right to get this member handbook in another language or format.
2. You have a right to be treated with dignity, respect, and fairness and with consideration for privacy. This includes:
 - Your right to be free from discrimination. Quartz must obey laws that protect you from discrimination and unfair treatment. Quartz provides covered services to all eligible members regardless of the following:

◦ Age	◦ National origin	◦ Religion
◦ Color	◦ Race	◦ Sexual orientation
◦ Disability	◦ Sex	◦ Gender identity
 - All medically necessary, covered services are available and will be provided in the same manner to all members. All persons or organizations connected with Quartz that refer or recommend members for services shall do so in the same manner for all members.
 - Your right to be free from any form of restraint or seclusion used to coerce, discipline, be convenient, or retaliate. This means you have the right to be free from being restrained or forced to be alone to make you behave in a certain way, to punish you, or because someone finds it useful.
 - Your right to privacy. Quartz must follow laws protecting the privacy of your personal and health information. See Quartz's Notice of Privacy Practices for more information.
3. You have the right to get health care services as provided for in federal and state law. This includes:
 - Your right to have covered services be available and accessible to you when you need them. When medically appropriate, services must be available 24 hours a day, seven days a week.
4. You have a right to make decisions about your health care. This includes:
 - Your right to get information about treatment options, regardless of cost or benefit coverage.
 - Your right to accept or refuse medical or surgical treatment and participate in making decisions about your care.
 - Your right to plan and direct the types of health care you may get in the future if you become unable to express your wishes. You can make these decisions by completing an advance directive, living will, or power of attorney for health care. See more information on page 18, Completing an advance directive, living will, or power of attorney for health care.
 - Your right to a second opinion if you disagree with your provider's treatment recommendation. Call Customer Success at **(800) 362-3310 (TTY: 711)** for more information about how to get a second opinion.

5. You have a right to know about our providers and any physician incentive plans Quartz uses. This includes:
 - Your right to ask if Quartz has special financial arrangements (physician incentive plans) with our physicians that can affect the use of referrals and other services you might need. To get this information, call Customer Success at **(800) 362-3310 (TTY: 711)** and request information about our physician payment arrangements.
 - Your right to request information about Quartz providers, including the provider's education, board certification, and recertification. To get this information, call Customer Success at **(800) 362-3310 (TTY: 711)**.
6. You have a right to ask for copies of your medical records from your provider.
 - You may correct inaccurate information in your medical records if your doctor agrees to the correction.
 - Call **(800) 362-3310** for assistance with requesting a copy or change to your medical records. Please note that you may have to pay to copy your medical records.
7. You have a right to be informed about any Medicaid covered benefits that are not available through Quartz because of moral or religious objection. This includes:
 - Your right to be informed of how to access these services through ForwardHealth using your ForwardHealth card.
 - Your right to disenroll from Quartz if Quartz does not cover a service you want because of moral or religious objections.
8. You have a right to file a complaint, grievance, or appeal if you are dissatisfied with your care or services. This includes:
 - Your right to request a State Fair Hearing if you are dissatisfied with Quartz's decision about your appeal or if Quartz does not respond to your appeal in a timely manner.
 - Your right to request a Department of Health Services grievance review if you are unhappy with Quartz's decision about your grievance or if Quartz does not respond to your grievance in a timely manner.
 - For more information on how to file a grievance, appeal, or State Fair Hearing, see page 20, Filing a grievance or appeal.
9. You have the right to receive information about Quartz, its services, its practitioners, providers, and member rights and responsibilities. This includes:
 - Your right to know about any big changes with Quartz at least 30 days before the effective date of the change.
10. You have a right to be free to exercise your rights without negative treatment by Quartz and its network providers. This includes:
 - Your right to make recommendations about Quartz's Member Rights and Responsibilities Policy.

Your responsibilities

- You have a responsibility to provide the information that Quartz and its providers need to provide care.
- You have a responsibility to let Quartz know how best to contact and communicate with you.
- You have a responsibility to respond to communications from Quartz.
- You have a responsibility to follow plans and instructions for care that you have agreed to with your providers.
- You have a responsibility to understand your health problems and participate in creating treatment goals with your providers.

Ending your membership in Quartz

You may switch HMOs for any reason during your first 90 days of enrollment in Quartz. After your first 90 days, you will be “locked in” to enrollment in Quartz for the next nine months. You will only be able to switch HMOs once this “lock-in” period has ended unless your reason for ending your membership in Quartz is one of the reasons described below:

- You have the right to switch HMOs, without cause, if the Wisconsin Department of Health Services (DHS) imposes sanctions or temporary conditions on Quartz.
- You have the right to end your membership with Quartz at any time if:
 - You move out of Quartz’s service area.
 - Quartz does not, for moral or religious objections, cover a service you want.
 - You need one or more services performed at the same time and you can’t get them all within the provider network. This applies if your provider determines that getting the services separately could put you at unnecessary risk.
 - Other reasons, including poor quality of care, lack of access to covered services, or lack of access to providers experienced in dealing with your care needs.

If you choose to switch HMOs or disenroll from the BadgerCare Plus or Medicaid SSI programs completely, you must continue to get health care services through Quartz until your membership ends.

For more information about how to switch HMOs or to disenroll from BadgerCare Plus and/or Medicaid SSI completely, contact the HMO Enrollment Specialist at **(800) 291-2002**.

Fraud and abuse

If you suspect fraud or abuse of the Medicaid program, you may report it. Please go to **reportfraud.wisconsin.gov**.

Notice of Privacy Practices

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

Your Information. Your Rights. Our Responsibilities.

Your Rights

When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities to help you.

Get a copy of your health and claims records

- You can ask to see or get a copy of your health and claims records and other health information we have about you. Ask us how to do this.
- We will provide a copy or a summary of your health and claims records, usually within 30 days of your request. We may charge a reasonable, cost-based fee.

Ask us to correct health and claims records

- You can ask us to correct your health and claims records if you think they are incorrect or incomplete. Ask us how to do this.
- We may say “no” to your request, but we’ll tell you why in writing within 60 days.

Request confidential communications

- You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address.
- We will consider all reasonable requests, and must say “yes” if you tell us you would be in danger if we do not.

Ask us to limit what we use or share

- You can ask us not to use or share certain health information for treatment, payment, or our operations.
- We are not required to agree to your request, and we may say “no” if it would affect your care.

Get a list of those with whom we’ve shared information

- You can ask for a list (accounting) of the times we’ve shared your health information for six years prior to the date you ask, who we shared it with, and why.
- We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We’ll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.

Get a copy of this privacy notice

- You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.

(Your Rights continued)

Choose someone to act for you	<ul style="list-style-type: none"> If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information. We will make sure the person has this authority and can act for you before we take any action.
File a complaint if you feel your rights are violated	<ul style="list-style-type: none"> You can complain if you feel we have violated your rights by contacting us using the information on page 20. You can file a complaint with 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, calling (877) 696-6775, or visiting hhs.gov/ocr/privacy/hipaa/complaints. We will not retaliate against you for filing a complaint.

Your Choices

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

In these cases, you have both the right and choice to tell us to:	<ul style="list-style-type: none"> Share information with your family, close friends, or others involved in payment for your care Share information in a disaster relief situation Contact you for fundraising efforts <p><i>If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.</i></p>
In these cases, we never share your information unless you give us written permission:	<ul style="list-style-type: none"> Marketing purposes Sale of your information

Our Uses and Disclosures

How do we typically use or share your health information? We typically use or share your health information in the following ways.

Help manage the health care treatment you receive	<ul style="list-style-type: none"> We can use your health information and share it with professionals who are treating you. <p><i>Example: A doctor sends us information about your diagnosis and treatment plan so we can arrange additional services.</i></p>
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(Our Uses and Disclosures continued)

Run our organization	<ul style="list-style-type: none"> We can use and disclose your information to run our organization and contact you when necessary. We are not allowed to use genetic information to decide whether we will give you coverage and the price of that coverage. This does not apply to long term care plans. <p><i>Example: We use health information about you to develop better services for you.</i></p>
Pay for your health services	<ul style="list-style-type: none"> We can use and disclose your health information as we pay for your health services. <p><i>Example: We share information about you with your dental plan to coordinate payment for your dental work.</i></p>
Administer your plan	<ul style="list-style-type: none"> We may disclose your health information to your health plan sponsor for plan administration. <p><i>Example: Your company contracts with us to provide a health plan, and we provide your company with certain statistics to explain the premiums we charge.</i></p>

How else can we use or share your health information?

We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information see: hhs.gov/hipaa/for-individuals/notice-privacy-practices/index.html.

Help with public health and safety issues	<ul style="list-style-type: none"> We can share health information about you for certain situations such as: preventing disease; helping with product recalls; reporting adverse reactions to medications; reporting suspected abuse, neglect, or domestic violence; and preventing or reducing a serious threat to anyone's health or safety.
Do research	<ul style="list-style-type: none"> We can use or share your information for health research.
Comply with the law	<ul style="list-style-type: none"> We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.
Respond to organ and tissue donation requests and work with a medical examiner or funeral director	<ul style="list-style-type: none"> We can share health information about you with organ procurement organizations. We can share health information with a coroner, medical examiner, or funeral director when an individual dies.

(Sharing Health Information continued)

Address workers' compensation, law enforcement, and other government requests

- We can use or share health information about you:
 - For workers' compensation claims
 - For law enforcement purposes or with a law enforcement official
 - With health oversight agencies for activities authorized by law
 - For special government functions such as military, national security, and presidential protective services

Respond to lawsuits and legal actions

- We can share health information about you in response to a court or administrative order, or in response to a subpoena.

We never sell protected health information for marketing or fundraising purposes.

The HIPAA Privacy Rule generally does not "preempt" (or override) state privacy or other applicable laws that provide individuals with greater privacy protections. As a result, if any state privacy laws or other applicable federal laws provide for a stricter privacy standard, then we will follow the more strict state or federal laws.

Our Responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time.
- Let us know in writing if you change your mind.

For more information see: hhs.gov/hipaa/for-individuals/notice-privacy-practices/index.html.

Changes to the Terms of This Notice

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, on our website, and we will mail a copy to you. Effective date: October 2, 2017.

This Notice of Privacy Practices applies to the following organizations. Quartz Health Benefit Plans Corporation, Quartz Health Plan Corporation, Quartz Health Plan MN Corporation, Quartz Health Insurance Corporation.

Questions?

Contact Kelly Skifton, Privacy Officer, 2650 Novation Parkway, Fitchburg, WI 53713; phone: (800) 362-3309; email: PrivacyOfficial@QuartzBenefits.com.

Accessibility at Quartz

Quartz provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters.
- Written information in other formats (large print, audio, accessible electronic formats, other formats).
- Provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages.

If you need these services, contact Quartz at (800) 362-3310 (TTY: 711).

Spanish – ATENCIÓN: Si habla español, los servicios de asistencia de idiomas están disponibles sin cargo, llame al (800) 362-3310 (TTY: 711).

Hmong – CEEB TOOM: Yog koj hais lus Hmoob, kev pab rau lwj yam lus muaj rau koj dawb xwb. Hu (800) 362-3310 (TTY: 711).

Laotian – ໝາຍເຫດ: ຖ້າທ່ານເວົ້າພາສາລາວ, ທ່ານສາມາດໃຊ້ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາໄດ້ໂດຍບໍ່ເສຍຄ່າ. ໂທ (800) 362-3310 (TTY: 711).

Chinese – 注意: 如果您说中文, 您可获得免费的语言协助服务。请致电 (800) 362-3310 TTY 文字电话 711)。

Somali – DIGTOONI: Haddii aad ku hadasho afka Soomaaliha, adeegyada caawimada luqadda waxaa lagu heli karaa iyagoo bilaash ah. Wac (800) 362-3310 (TTY: 711).

Burmese – ဝဲက်းဇူးပူပီၤၤ နားဆင်ၤ - သဿုၤ ပုမနွာစကားဝေပုဟသုပုဖစွါက၊ သးဒုအတြကု အခမဲ့ပုဖးဒု ဘာသာစကားကူညီဝေရး ဝနုဆေးဌေးမား ရရှိနိဌဉ္ဇူ။ (800) 362-3310 (TTY: 711) တြး ဖုနးဝေဒုဆိပါ။

Vietnamese – LƯU Ý: Nếu bạn nói tiếng Việt, các dịch vụ hỗ trợ ngôn ngữ sẽ được cung cấp miễn phí cho bạn. Gọi (800) 362-3310 (TTY: 711).

Arabic –

تنبيه: إذا كنتم تتحدثون العربية، تتوفر لكم مساعدة لغوية مجانية. اتصلوا بالرقم

(800) 362-3310 هاتف نصي: 711 TTY:



Quartz Customer Success

(800) 362-3310 (TTY: 711)

Quartz is committed to providing members with managed care and utilization management. This allows us to maintain our standards of high-quality, cost-effective care for our members.

- We assess the appropriateness and timeliness of inpatient and ambulatory care (including pre-service, concurrent, or post-service authorization) using utilization review criteria.
- We evaluate the use of new and existing technology for coverage to our members after thorough review of information and recommendations from our specialists.