



STAR+PLUS Continuity of Care Safeguards

Many Texans with disabilities will begin to receive medical benefits through the STAR+PLUS managed care program on September 1, 2014. Check out our [Medicaid Medical Benefits Infographic](#) to determine if you will be affected.

Here are some things that the Health and Human Services Commission and the managed care companies have agreed to do to ensure people with disabilities continue to receive health care services during the transition to STAR+PLUS.

- The STAR+PLUS service coordinator will contact people in their networks with intellectual and developmental disabilities within 90 days following enrollment.
 - The STAR+PLUS service coordinator will educate people about their role in assisting people to access health care and about how to reach a STAR+PLUS service coordinator when needed.
 - NOTE: There may be another service coordinator in your life already. The STAR+PLUS service coordinator is different than the person who helps you with your waiver.
- You may use a doctor other than the primary care provider (PCP) whose name is found on your health plan ID card.
- You may request to change your PCP, or main doctor, at any time.
- Your managed care company will pay your co-pays and deductibles for your private insurance as long as the provider/doctor is also enrolled in Medicaid. You may also continue to get services from any Medicaid enrolled doctor until November 30, 2014.
- Managed care companies will continue to reach out to all of the doctors you would like included in the network. You can tell your service coordinator which doctors they should call.
- Your doctors might not know that the managed care companies will continue to pay the out-of-network reimbursement rate to doctors that choose not to join a managed care company – even after the initial 90 days. Tell your doctor.
- Managed care companies should provide a primary care physician within 30 miles of your home and provide a specialty care provider within 75 miles of your home.
- You are allowed to change health plans every 30 days.