



Member Guide

Using Your HMA Benefits | Health Plan Basics

The Suquamish Tribe Indian Health Plan

Plan year 2023-2024

HMA

Your Guide to Better Healthcare with HMA

Thank you for being a member of Healthcare Management Administrators (HMA). Whether you are new to HMA or have been a member for years, we want to make sure you have the tools and resources you need to make the most of your health plan.

Your healthcare journey is a very personal experience. At times, it can seem rather confusing and complicated. HMA is here to make it easy to find the answers you need to guide you in making more informed healthcare decisions. Whether you need to find a doctor, know what's covered on your plan, or need simple explanations of confusing healthcare terms, HMA is here to help you understand your benefits so that you can stay healthy and save money.

About This Guide

Please take a few minutes to review this guide. It provides information about how to use your health plan benefits including:



How to find an in-network healthcare provider



How to submit a claim



Online tools and resources available to help you along the way



This booklet is meant to be a summary of member services only. Benefits and coverage levels vary by plan and are explained in more detail in your Summary Plan Description and other formal plan documents. Please refer to those documents for details on your medical coverage including deductibles, co-payments, co-insurance, and covered services.

Healthcare Management Administrators provides administrative claims payment services only and does not assume any financial risk or obligation with respect to claims.



Visit accesshma.com to log in to your HMA account

Welcome to the HMA Member Portal

Healthcare Management Administrators (HMA) is pleased to be your health plan administrator! We are here to help you create a healthier future by making the most of your benefits.

Quickly and easily access your benefits and services in one place using our secure member portal.

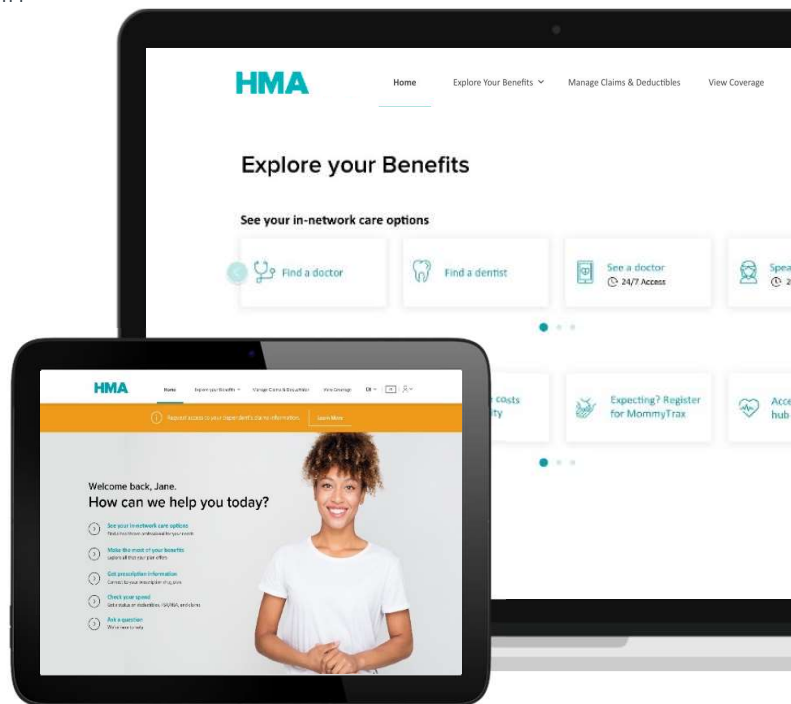
Connect to Your Health Plan

- Access claims, deductibles, and spend
- Find in-network doctors or hospitals in your area
- Connect to your prescription drug plan
- View, print, or share your ID card
- Verify your coverage for services

Creating an account for the first time?

Before you start, you will need your Employee ID number located on your Member ID card. *If you don't have your Employee ID number, please call our Customer Care number at the bottom of the page.*

1. Visit accesshma.com. Then select the button “HMA Member Login” at the top of your screen.
2. On the log in page, select “Create an Account Now” and follow the directions by entering your full name, Employee ID, and date of birth as shown on your Member ID card.
3. Confirm your email address using the verification code that was sent to you. You're ready to use the member portal!



The member portal is only supported in the latest version of Chrome, Edge, Safari, and Firefox

**Note: Not all tiles shown above are available to all health plans. Some plans will display different tiles and resources.*

Already have an account?

You are ready. Log in to the member portal using your usual email address and password.



Scan this QR code

If you have any questions or need help, contact our **HMA Customer Care Team** by calling 1-888-450-4491 Monday-Friday 6:00 am– 6:00 pm PT.



Welcome to the HMA Mobile App

Quickly and securely access your benefits and services at home or on the go.

Use the HMA mobile app to access helpful tools such as:

Find an In-Network Provider or Hospital: With one click, take the guesswork out of finding a doctor, hospital, or clinic in your plan's network

Access Claims and Benefits: Check the status of open claims

View Your Digital Member ID Card: Never misplace your Member ID card again!

Manage Your Message Center: Send and receive secure messages to and from our dedicated Customer Care Team

Click to Call: Get connected at the touch of a button to speak with our Customer Care Team

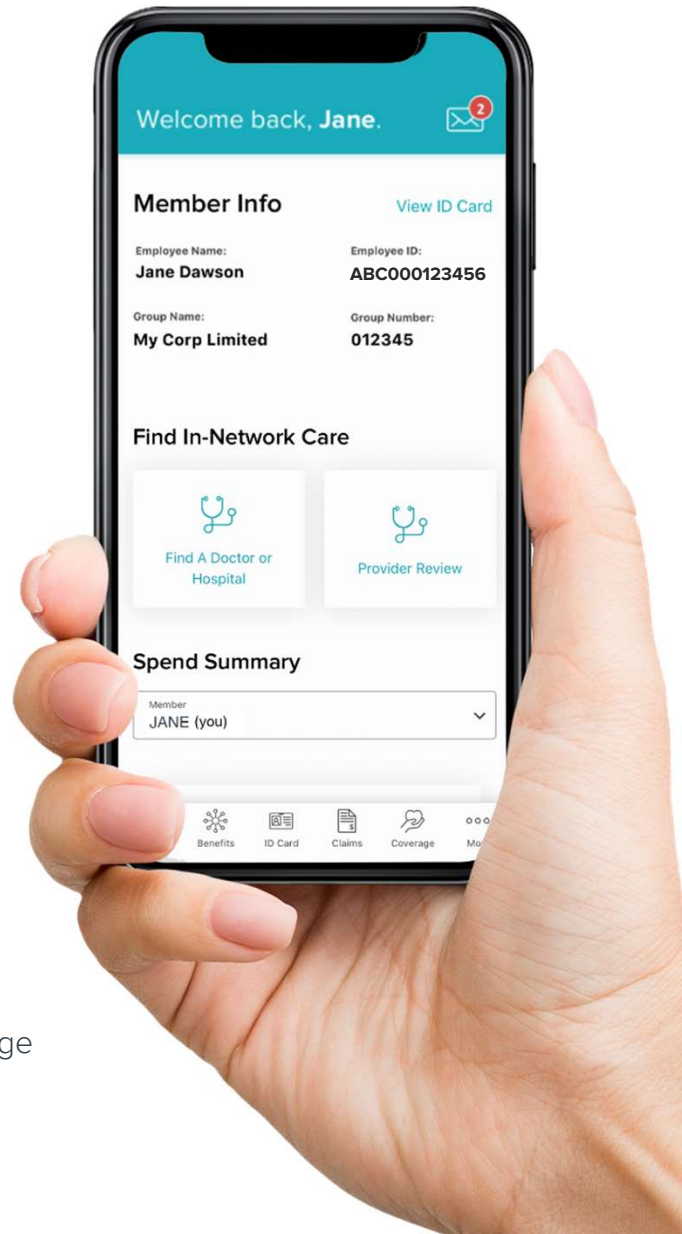
Connect to More: Keep services and discounts offered by your plan at your fingertips

Get Started

Download for free on Apple and Google Play Stores



After downloading the HMA mobile app, sign in with your existing account or create your account at accesshma.com. Then select the button “HMA Member Login” at the top of your screen. Use your Employee ID number found on your Member ID card and follow the directions from the log in page to create your account.



HMA

If you have any questions or need any help, contact our **HMA Customer Care Team** by calling the number on the back of your Member ID card Monday-Friday 6:00 am– 6:00 pm PT.

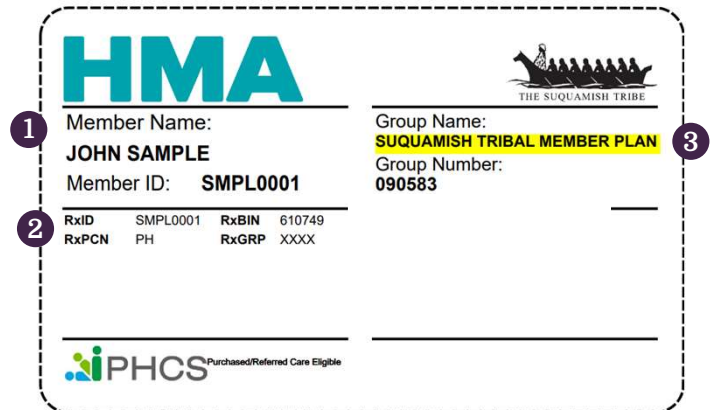
Understanding Your HMA Member ID Card

Learn about your HMA Member ID card. Your card provides you with more personalized information about your cost-sharing responsibilities related to your health plan.

Information on Your Member ID Card:

- 1 Name and unique member ID Number
- 2 Pharmacy information, your pharmacist can access eligibility, benefits, and submit claims by using the RxBIN
- 3 Your group name and group ID number
- 4 Identifies your health plan administrator as **Healthcare Management Administrators**
- 5 Information for your provider or facility to submit claims
- 6 HMA Member portal to access your member account
- 7 Important telephone numbers for your plan**
- 8 Explanation of network access between the HMA Preferred and PHCS networks
- 9 Your pharmacy benefits administrator

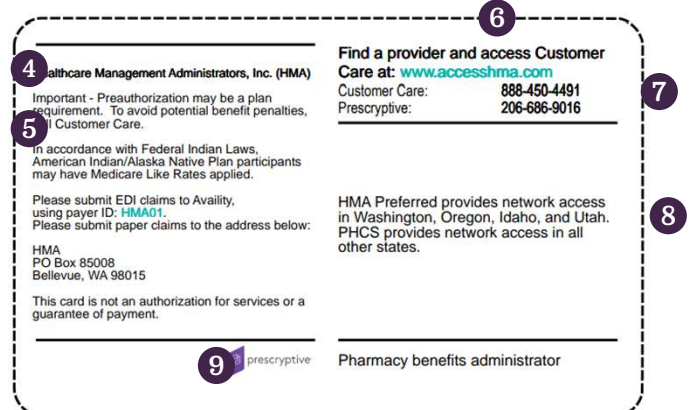
Front of the ID card



The front of the ID card features the HMA logo on the left and the Suquamish Tribe logo on the right. The card is divided into several sections with numbered callouts:

- 1** Member Name: **JOHN SAMPLE**
- 2** Member ID: **SMPL0001**
- 3** Group Name: **SUQUAMISH TRIBAL MEMBER PLAN**
- 3** Group Number: **090583**
- 2** RxID: SMPL0001, RxBIN: 610749, RxPCN: PH, RxGRP: XXXX
- 4** PHCS Purchased/Referred Care Eligible

Back of the ID card



The back of the ID card contains detailed information and instructions, with numbered callouts:

- 4** Healthcare Management Administrators, Inc. (HMA)
- 5** Important - Preauthorization may be a plan requirement. To avoid potential benefit penalties, please contact Customer Care.
- 5** In accordance with Federal Indian Laws, American Indian/Alaska Native Plan participants may have Medicare Like Rates applied.
- 5** Please submit EDI claims to Availity, using payer ID: **HMA01**. Please submit paper claims to the address below:
HMA
PO Box 85008
Bellevue, WA 98015
- 5** This card is not an authorization for services or a guarantee of payment.
- 6** Find a provider and access Customer Care at: www.accesshma.com
- 7** Customer Care: 888-450-4491
- 7** Prescriptive: 206-686-9016
- 8** HMA Preferred provides network access in Washington, Oregon, Idaho, and Utah. PHCS provides network access in all other states.
- 9** prescriptive Pharmacy benefits administrator



View your member ID card on your HMA member portal. Log in by visiting accesshma.com or scan the QR code to the left.

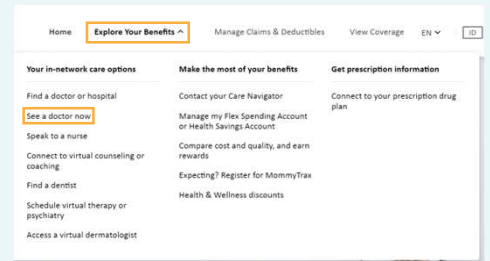
Find a Doctor or Hospital in the HMA Network

Your plan gives you access to the largest healthcare provider networks in the Pacific Northwest and a large provider network when you travel within the U.S. Choose in-network providers for coverage. There are no out of network benefits under this plan.

Connect through your HMA member portal


Visit accesshma.com and select the HMA Member Login button on the top of the page for access to the full search experience.

- 1 After logging in to your HMA account, select “Explore Your Benefits,” and then choose “Find a Doctor or Hospital.”

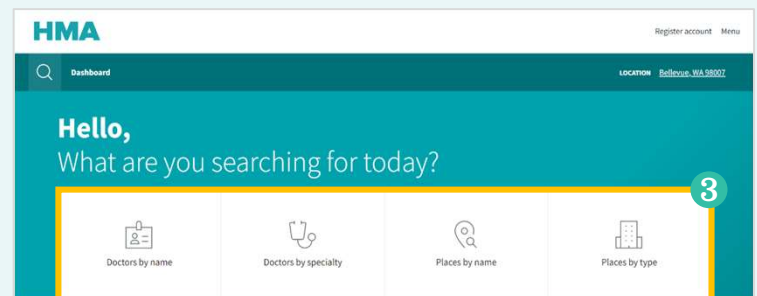


- 2 Enter a location. You can also switch to your current location by 

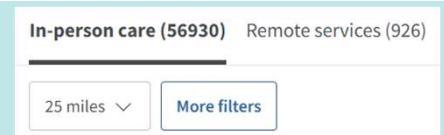


- 3 On the main screen, select one of the category boxes and enter the required information and click on the  to generate results

- **Doctors by name:** search by a specific doctor.
- **Doctors by specialty:** search doctors who specialize in a certain condition.
- **Places by name:** search by hospital name
- **Places by type:** search by labs, hospitals, urgent care facility or emergency services.



- 4 Refine your search results by using the “More Filters,” on the left side of the screen or view doctors that provide telemedicine by clicking on the “Remote Services,” tab on the top left.



Disclaimer: Always call the provider AND facility to verify in-network status before scheduling and before receiving services. Not all services performed by in-network providers are covered. Please review your Summary Plan Documents (Click View Coverage tab and Click on Benefit Plan Details) for more information about covered and excluded services.

If you have any questions or need any help, contact our HMA Customer Care Team by calling the number on the back of your Member ID card Monday-Friday 6:00 am– 6:00 pm PT.

Visit accesshma.com to log in to your HMA account



Nationwide Coverage for Members in Every State

When you're a Healthcare Management Administrators (HMA) member, you have the peace of mind knowing that wherever you are, you are able to access your health plan benefits.

Coverage across the country

No matter where you are in the United States, you will be covered under your HMA Plan. If you temporarily reside outside of Washington, you have access to the network and savings discounts negotiated with healthcare providers in each state.

How to access your national coverage:

- Always carry your current HMA member ID card with you.
- To find in-network doctors and hospitals, log in to the HMA member portal at accesshma.com and select "Find a doctor or hospital."
- Click on the image of the state or region where you would like to search.
- Enter the city, state, and zip code where you would like to search.
- Call HMA's Customer Care Team at **1-888-450-4491** available 6 am – 6 pm PT, Monday – Friday for any required pre-certification or pre-authorization.
- When you arrive at the in-network doctor's office or hospital, show them your HMA member ID card. On the back of the card, the provider can find the information and contact details to inquire about your benefit coverage and to find out how to submit the claim.

How to submit a claim via the HMA member portal:

- 1 Visit accesshma.com and then click the HMA Member Login button at the top of the page.
- 2 After logging in to the HMA member portal, from the top of the screen, select "Manage Claims and Deductibles."
- 3 Select the "Submit a Claim" button.
- 4 To submit a claim, you will first need to attach the following three (3) documents:
 1. The completed Medical Claim Form.
 2. The itemized bill from your healthcare provider.
 3. The itemized receipt showing proof of payment.
- 5 After your claim is submitted, you can visit the "Manage Claims and Deductibles" page to view your claim status.

Note: Claims may take up to 30 days to appear in your HMA member portal.

In an emergency, go directly to the nearest hospital.



Visit accesshma.com to log in to your HMA account

PEGNCH-06152023

Getting Started with Your HMA Vision Plan

Know what's covered

Access your vision benefits online from the HMA member portal.

**If this is your first time on the member portal, you will need to register and create an account. Be sure to have your HMA member ID card available.*

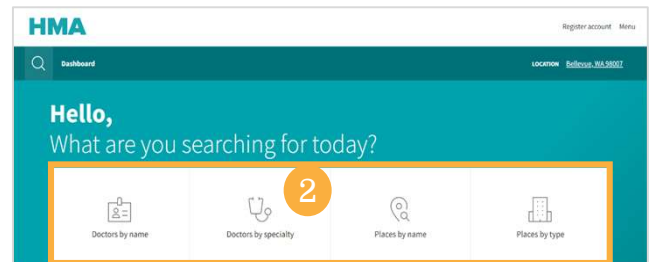
- 1 Go to accesshma.com.
- 2 Select the Login button at the top of the page.
- 3 Once logged in, you can select "View Coverage" in the top navigation bar.
- 4 Then click on "Benefit Plan Details" and open your "Vision Benefits Summary."



Find a Provider For Your Eye Exam

Log in to the HMA member portal to find a vision care provider in the HMA network.

- 1 After logging in, under "Explore Your Benefits," select "Find a Doctor."
- 2 Click the box "Doctors by specialty", and enter optometry, ophthalmology, or search by "Doctors by name," for a specific provider.



Submit Your Vision Claim

If you purchased hardware (glasses or contact lenses) from an out-of-network provider, you need to submit a claim in order to get reimbursed.

Collect and include receipts that indicate who the provider was and what service was performed (including Diagnosis and CPT codes). Make sure that your provider won't bill HMA.

To submit your claim on the member portal:

- 1 Log in to the member portal and select "Manage Claims and Deductibles" in the top navigation bar. From this screen, scroll down and select the "Submit a claim" button.
- 2 Complete and submit the digital claim form and upload your itemized receipts using the step-by-step instructions on the screen.

The HMA Customer Care Team is available for questions, Monday through Friday from 6 am to 6 pm PT at 1-888-450-4491.

Disclaimer: Always call the provider AND facility to verify in-network status before scheduling and before receiving services. Not all services performed by in-network providers are covered. Please review your Summary Plan Documents (Click View Coverage tab and Click on Benefit Plan Details) for more information about covered and excluded services.



Visit accesshma.com to log in to your HMA account

Specialty Medications

If you are taking or are prescribed a specialty medication, a member of our Specialty Medication Support team may reach out to help you receive the medication at a lower cost.

Specialty Medication Steerage Program

Our Specialty Medication Support Team works to transition specialty medications to a lower level of care where and when it is safe to do so.

Transitioning to a lower level of care means you will receive the same treatment, with appropriate clinical support, at a lower cost — and often at a more convenient location, such as a freestanding infusion site or your home.

While not all medications are appropriate for this program, our team continuously looks for ones that are. If there is an opportunity to transition your care to a lower level, our Specialty Medication Support team will coordinate with both you and your provider so that your treatment is not interrupted.



What is a specialty medication?

Specialty medications are given as an infusion or injection and are used to treat complex and chronic conditions. While there are not that many of them, they can be expensive, as they require special handling and careful oversight from a trained healthcare provider.

Know Where to Go

Save time and money by using an in network facility and the right location for coverage. There are no out of network benefits.

Tribal Clinics



Wellness Center
18490 Suquamish
Way
Suquamish, WA
98392
360-394-8558

Behavioral
Health Services

Marriage & Family
counseling

**Healing House
Medical Clinic**
6968 NE Enetai
Lane
Suquamish, WA
98392
360-394-1350

Primary/Family Care

Naturopath Care

Acupuncture

Urgent Care



Minor Cuts
& Stitches

Minor Burns

Sprains & Strains

Emergency Room



Head Injuries

Chest Pain or
Trouble Breathing

High Fever

Poisoning Or
Drug Overdose

Severe Burns

Major Traumas

Open Wounds
& Bleeding
That Cannot
Be Stopped

Confusion or
Sudden Changes
In Mental Status

Severe
Abdominal
(Stomach) Pain

Coughing Up or
Vomiting Blood

Pregnancy-Related
Problems & Infants
With Fevers

Sudden
Numbness,
Weakness,
Or Paralysis

Utilizing Urgent Care

When accidents and illnesses arise, be prepared and know which Urgent Care providers are part of your network. Urgent care services are less costly than emergency room services and can provide spur-of-the-moment care, except for the most complex conditions. Please use the chart above for guidance in using the right level of care for your illness. Knowing which services are available to you in your community before you need it will allow you and your family to focus on getting the care you need to start feeling better.



Visit accesshma.com to log in to your HMA account

Well-child exam and immunization schedule

Guidelines from the American Academy of Pediatrics and the Centers for Disease Control and Prevention (CDC)

2 to 5 Days Old	HepB ¹	15-18 Months	DTaP Any 12-month immunizations not already given	5-18 Years	Annual Flu shot
2 Months	HepB ² RV ¹ DTaP ¹ Hib ¹ PCV ¹ IPV ¹	24 Months	HepA Flu Shot	11 Years	DTaP booster Flu shot HPV ¹ MCV
4 Months	RV ² DTaP ² Hib ² PCV ² IPV ²	3 Years	Flu Shot	12 Years	HPV ² Flu Shot
6 Months	PVC ³ IPV ³ Flu Shot	4 Years	Vision screen Hearing screen Chickenpox Flu shot DTaP IPV MMR	13 Years	Chickenpox blood test
9-12 Months (1 year)	Hib ⁴			16 Years	MCV booster

IMMUNIZATION DEFINITIONS + KEY

Chickenpox: Varicella (Not before first birthday)

DTaP: Diphtheria, tetanus, acellular pertussis/whooping cough (3-dose series)

Flu shot: Influenza (Annual)

HepA: Hepatitis A

HepB: Hepatitis B (3-dose series)

Hib: Haemophilus influenza b (3- or 4-dose series)

HPV: Human papillomavirus (2-dose series)

IPV: Inactivated poliovirus (3-dose series)

PCV: Pneumococcal conjugate (4-dose series)

MCV: Meningococcal disease

MMR: Measles, mumps, rubella (After age 1)

RV: Rotavirus (3-dose series)

¹ First dose ² Second dose ³ Third dose ⁴ Fourth dose



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HEPCCIH-0515203

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General Preventive Care for Adults

Take charge of your health with preventive care benefits available through your primary care provider (PCP)*

All adults should find an in-network primary care doctor and use the chart below to start a discussion about which preventive services and screenings are right for you.*

Annual wellness physical exam

Screenings and/or counseling for:

- Blood pressure
- Diabetes
- Anemia
- Skin check
- Depression, suicide, family violence
- Hepatitis C, aged 18-79
- HIV, aged 15-65
- Sexually transmitted infection (STI)
- Dental and periodontal disease

Risk based screening and/or counseling for:

- Alcohol and drug misuse
- Tobacco use
- Obesity and diet
- Hepatitis B, Tuberculosis
- Cholesterol, lipid disorders
- Heart disease, statin use
- Type 2 diabetes
- Retinopathy if diabetic
- Dementia

Vaccinations:

- (link to full CDC schedule)
- Influenza- yearly

Preventive Medications:

- Inhaled corticosteroids if diagnosed with asthma
- Insulin and other glucose lowering agents, A1c testing and glucometer if diabetic
- ACE inhibitors, beta-blockers, aspirin if at high risk and meet specific criteria
- PrEP HIV prevention meds if meet certain criteria
- Statins if high risk and 40+

Additional Preventive Care to Discuss with Your Doctor Based on Age and Risk Factors**

Age 19-39, add:

Find an in-network primary care provider

Assigned female at birth

- Clinical breast exam
- Mammogram 1 baseline
- BCRA 1 and 2 testing if high risk
- Pelvic exam
- 1 pap test every 2 years

Assigned male at birth

- Testicular exam

Ages 40-64, add:

- Colon cancer screening, 45-75
- Lung cancer screening, 50-80
- Shingles vaccine, 50+

Assigned female at birth

- Mammogram, as recommended
- Bone density screening, if post menopausal

Assigned male at birth

- Prostate Cancer exam
- Testicular Exam

Age 65 and older, add:

- Fall prevention
- Glaucoma test
- Hearing impairment
- Pneumococcal vaccine

Assigned female at birth

- Pelvic exam and pap smear- if needed

Assigned male at birth

- Abdominal aortic aneurysm and under 75 and have smoked

Refer to your summary plan document at accesshma.com to log in to your HMA account. Contact our Customer Care by calling the number on the back of your Member ID card, Mon-Fri 6am-6pm PT for more information on your preventive care benefits.

***Consult with your doctor to determine what preventive care is right for you based on your medical history. Not all services listed may qualify as a part of your preventive care benefits. Services performed to diagnose or treat symptoms or provide routine care for chronic conditions may be subject to separate charges. Always ask your doctor about the type of services being rendered at your visit. [http://health.gov/myhealthfinder](https://health.gov/myhealthfinder) is also a great resource.**

**age recommended for those at regular risk as of May 25, 2023, by U.S. Preventive Service Task Force. Content Sourced from the Office of Disease and Prevention and Health Promotion at [Healthcare.gov](https://healthcare.gov), PublicHealth at PublicHealth.org, the Centers for Disease Control and Prevention (CDC), and the U.S. Preventive Services Task Force uspreventiveservicestaskforce.org.

Visit accesshma.com to log in to your HMA account



Preventive Care Basics for Children and Those Who Are or Who May Become Pregnant

Take charge of your health with preventive care benefits available through your primary care provider (PCP)*

Preventive Services

Most health plans include coverage for certain preventive services when visiting an in-network provider. Preventive care benefits vary with age and personal health history. Use the charts below and on the next page to start a discussion with your doctor about which preventive services and screenings are right for you.*

General Preventive Care for Children**

Find an in-network pediatrician before baby's birth

Even when your child isn't sick, it's important for them to see their doctor for regular checkups.

Children may receive age-appropriate preventive exams and counseling, including:

- Well-child exams and vaccinations as shown on the next page
- Newborn hearing, jaundice, PKU, metabolic, and select other screenings (up to 62 days of age)
- Skin cancer counseling (ages 6 months-24 years for those with fair skin type)

- Dental cavities (up to age 6, starting with first tooth)
- Eye exam (ages 3-5)
- Obesity (starting at age 6)
- Anemia and lead poisoning screenings
- Anxiety, depression, abuse, suicide risk screenings
- Alcohol and drug misuse
- Sexually transmitted disease screenings
- Scoliosis, adolescent idiopathic
- Hepatitis B/C, HIV, and Cholesterol screening (if at risk)

Preventive Medications:

- Inhaled corticosteroids if diagnosed with asthma
- Insulin and other glucose lowering agents, A1c testing and glucometer

General Preventive Care for Those Who Are or Who May Become Pregnant**

Find an in-network primary care provider (PCP) and obstetrician/gynecologist (OB/GYN) before pregnancy

Screenings and counseling for:

- Gestational diabetes and anemia
- Hepatitis B and HIV
- Preeclampsia prevention
- Rh incompatibility
- Bacterial vaginosis
- Expanded tobacco use

- Healthy pregnancy weight
- Neural tube defects, ultrasound, and home uterine monitoring (if high risk)
- Breastfeeding support and counseling
- Maternal depression screenings for mothers at well-baby visits

Preventive Medications:

- Birth control
- Folic acid supplements

Procedures:

- Tubal Ligation

Refer to your summary plan document at accesshma.com to log in to your HMA account. Contact our Customer Care by calling the number on the back of your Member ID card, Mon-Fri 6am-6pm PT for more information on your preventive care benefits.

***Consult with your doctor to determine what preventive care is right for you based on your medical history. Not all services listed may qualify as a part of your preventive care benefits. Services performed to diagnose or treat symptoms or provide routine care for chronic conditions may be subject to separate charges. Always ask your doctor about the type of services being rendered at your visit. <http://health.gov/myhealthfinder> is also a great resource.**



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