

# Member Guide

## Value



### Welcome to Ambetter from Superior HealthPlan!

We are happy to have you as a member. Use this member guide to help you take charge of your health and get the most out of your benefits.

### Create Your Online Member Account

1. Set up your secure Online Member Account to get the most out of your plan.
2. Do this by visiting the Login page on **Ambetter.SuperiorHealthPlan.com**.

Your member account gives you access to see your benefits and coverage information, access your Schedule of Benefits, claims information, digital Member ID, and more – all in one convenient place.

### Payment Information

Best Option! **Pay online.**

- **AmbetterQuickPayTX.com**
- Enroll in automatic bill pay
- Make a one-time payment

Visit **Ambetter.SuperiorHealthPlan.com** for even more ways to pay. You will receive your Welcome Packet and Member ID Card(s) after your first month's premium is paid in full.

### Learn More About Your Value Member Plan

Your Value plan has you assigned to a Primary Care Physician (PCP) within a Medical Group. Your PCP is your main doctor and first option for care. You can view your assigned Medical Group and PCP by logging into your Online Member Account. You can also change your PCP or Medical Group at any time through your Online Member Account or by calling Member Services. If you change your PCP or Medical Group, remember to check **guide.ambetterhealth.com** and select the "VALUE" network to ensure that your PCP and Medical Group are in-network.



### **A referral from your assigned PCP is required for any medically necessary care not provided by your PCP.**

Your PCP will help coordinate your care and can also issue referrals. Referrals are required for all medically necessary health care services not provided by your PCP. Those services exclude emergency care, urgent care, mental health, substance use disorders, OB/GYN, and any state-mandated exemptions.

**In-network or network provider** means a physician or provider who is identified in the most current list for the network shown on your Member ID Card. Services received from an **out-of-network** provider are not covered, except as specifically stated in your Evidence of Coverage (EOC). **Non-Emergent Services:** You can access providers in other states only if they are a part of an Ambetter Value network in that state.

Learn about how to get the most out of your plan.

Refer to your EOC for more information by visiting:

**[Ambetter.SuperiorHealthPlan.com/health-plans.html](https://www.ambetter.com/superiorhealthplan/health-plans.html)**

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### Stay Healthy and Stay Well with Ambetter Health

Get the most from your Ambetter Health insurance with our health and wellness benefits. Ambetter Health offers the benefits you need to take control of your health today. Learn about the benefits below and more by visiting

[Ambetter.SuperiorHealthPlan.com/health-plans/our-benefits.html](https://Ambetter.SuperiorHealthPlan.com/health-plans/our-benefits.html).

- Mail-Order Pharmacy Program
- Essential Health Benefits
- Care Management Services
- Health Management Programs
- Virtual 24/7 Care\*
- My Health Pays® Rewards Program\*\*
- Start Smart for Your Baby®

### My Health Pays® Rewards Program

You love being healthy, we love paying you for it. Our My Health Pays® program is a rewards program that pays you for the healthy decisions you're already making each and every day.

Learn more at [Ambetter.SuperiorHealthPlan.com](https://Ambetter.SuperiorHealthPlan.com).



Eat Right



Move More



Be Well



Save Smart



### Member Services

If you have questions, call us at: **1-877-687-1196 (Relay Texas/TTY 1-800-735-2989)**. We're here to help. We're available Monday through Friday, 8 a.m. to 8 p.m. local time.



### On The Web

For more information, visit: [Ambetter.SuperiorHealthPlan.com](https://Ambetter.SuperiorHealthPlan.com).



### Free Interpreter Services

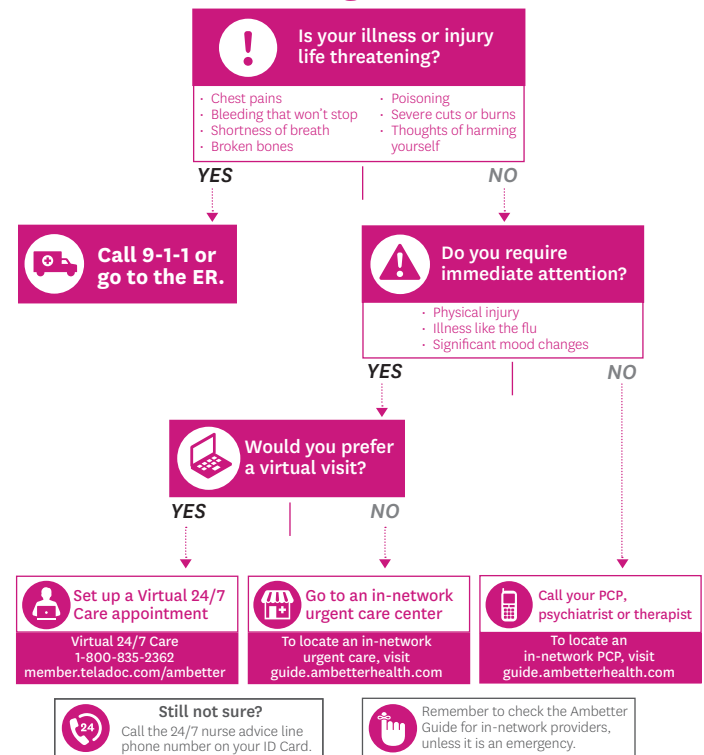
Interpreter services include languages other than English. Call Member Services for more information. This service allows you and your provider to talk about your medical or behavioral health concerns in a way that is most comfortable for you. Members who are blind or visually impaired and need help with interpretation can call Member Services for an oral interpretation.



### Enrollment

If you enrolled through Health Insurance Marketplace and have updates to your enrollment information (your date of birth, address, income, or life changes), you can contact **Ambetter Health at 1-877-687-1196 (Relay Texas/TTY 1-800-735-2989)**. We are available Monday through Friday, 8 a.m. to 8 p.m. local time. Or you can visit [Healthcare.gov](https://Healthcare.gov) or call: 1-800-318-2596 (TTY 1-855-889-4325). If you are enrolled in an off-exchange plan, please contact Member Services to update your enrollment information, such as your date of birth, address or income or life changes. You can do this by calling **1-877-687-1196 (Relay Texas/TTY 1-800-735-2989)**. We're available Monday through Friday, 8 a.m. to 8 p.m. local time.

### Where to go for care?



\*Formerly known as Ambetter Telehealth. Cost sharing may apply when using Virtual 24/7 Care or Virtual Primary Care. Virtual 24/7 Care cost share does not apply to HSA plans until the deductible is met and is only applicable when used through the Virtual 24/7 Care program. Ambetter Health does not provide medical care. Medical care is provided by individual providers which are independent contractors and not agents of Ambetter Health. \*\*Healthcare-related costs will vary by member and the plan in which you are enrolled. Funds expire immediately upon termination of insurance coverage. My Health Pays® rewards cannot be used for pharmacy copays.



FROM

superior  
healthplan.

### Statement of Non-Discrimination

Ambetter from Superior HealthPlan includes EPO products that are underwritten by Celtic Insurance Company, and HMO products that are underwritten by Superior HealthPlan, Inc. These companies are each Qualified Health Plan issuers in the Texas Health Insurance Marketplace. These companies comply with applicable Federal civil rights laws and do not discriminate on the basis of race, color, national origin (including limited English proficiency and primary language), age, disability, or sex (including pregnancy, sexual orientation, gender identity, or sex characteristics). This is a solicitation for insurance. © 2023 Celtic Insurance Company. © Superior HealthPlan, Inc. All rights reserved. [Ambetter.SuperiorHealthPlan.com](https://Ambetter.SuperiorHealthPlan.com)

If you, or someone you are helping, have questions about Ambetter from Superior HealthPlan, and are not proficient in English, you have the right to get help and information in your language at no cost and in a timely manner. If you, or someone you are helping, have an auditory and/or visual condition that impedes communication, you have the right to receive auxiliary aids and services at no cost and in a timely manner. To receive translation or auxiliary services, please contact Member Services at 1-877-687-1196 (Relay Texas/TTY 1-800-735-2989). If you believe that Celtic Insurance Company or Superior HealthPlan, Inc. has failed to provide these services or discriminated in another way on the basis of race, color, national origin (including limited English proficiency and primary language), age, disability, or sex (including pregnancy, sexual orientation, gender identity, or sex characteristics), please contact Member Services at 1-877-687-1196 (Relay Texas/TTY 1-800-735-2989). You may also submit a complaint by phone to 1-877-687-1196 (Relay Texas/TTY 1-800-735-2989). For information on filing a discrimination complaint directly with the U.S. Department of Health and Human Services, Office of Civil Rights, please visit <https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf>.

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### Declaración de No Discriminación

Ambetter de Superior HealthPlan incluye productos EPO que están suscritos por Celtic Insurance Company, y productos HMO que están suscritos por Superior HealthPlan, Inc. Estas empresas son proveedores Calificados de Planes de Salud en el Mercado de Seguros de Salud de Texas. Estas empresas cumplen con las leyes de derechos civiles Federales aplicables y no discriminan por motivos de raza, color de piel, nacionalidad de origen (incluidos un nivel de inglés limitado y la lengua materna), edad, discapacidad o sexo (incluidos el embarazo, la orientación sexual, la identidad de género o las características sexuales). Esta es una solicitud de seguro. © 2023 Celtic Insurance Company. © Superior HealthPlan, Inc. Todos los derechos reservados. [Ambetter.SuperiorHealthPlan.com](https://Ambetter.SuperiorHealthPlan.com)

Si usted, o alguien a quien está ayudando, tiene preguntas acerca de Ambetter de Superior HealthPlan y no domina el inglés, tiene derecho a obtener ayuda e información en su idioma sin costo alguno y de manera oportuna. Si usted, o alguien a quien está ayudando, tiene un impedimento auditivo o visual que le dificulta la comunicación, tiene derecho a recibir ayuda y servicios auxiliares sin costo alguno y de manera oportuna. Para recibir servicios auxiliares o de traducción, comuníquese con Servicios para Miembros al 1-877-687-1196 (Servicio de Retransmisión de Texas o TTY 1-800-735-2989). Si considera que Celtic Insurance Company o Superior HealthPlan, Inc. no le proporcionaron estos servicios o lo discriminaron de otra manera por motivos de raza, color de piel, nacionalidad de origen (incluidos un nivel de inglés limitado y la lengua materna), edad, discapacidad o sexo (incluidos el embarazo, la orientación sexual, la identidad de género o las características sexuales), comuníquese con Servicios para Miembros al 1-877-687-1196 (Servicio de Retransmisión de Texas o TTY 1-800-735-2989). También puede presentar una queja por teléfono al 1-877-687-1196 (Servicio de Retransmisión de Texas/TTY: 1-800-735-2989). Para obtener información sobre cómo presentar una queja por discriminación directamente ante la Oficina de Derechos Civiles del Departamento de Salud y Servicios Humanos de EE. UU., visite <https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf>.

<b>English:</b>	<p>If you, or someone you are helping, have questions about Ambetter from Superior HealthPlan, and are not proficient in English, you have the right to get help and information in your language at no cost and in a timely manner. If you, or someone you are helping, have an auditory and/or visual condition that impedes communication, you have the right to receive auxiliary aids and services at no cost and in a timely manner. To receive translation or auxiliary services, please contact Member Services at 1-877-687-1196 (Relay Texas/TTY 1-800-735-2989).</p>
<b>Spanish:</b>	<p>Si usted, o alguien a quien está ayudando, tiene preguntas acerca de Ambetter de Superior HealthPlan y no domina el inglés, tiene derecho a obtener ayuda e información en su idioma sin costo alguno y de manera oportuna. Si usted, o alguien a quien está ayudando, tiene un impedimento auditivo o visual que le dificulta la comunicación, tiene derecho a recibir ayuda y servicios auxiliares sin costo alguno y de manera oportuna. Para recibir servicios auxiliares o de traducción, comuníquese con Servicios para Miembros al 1-877-687-1196 (Relay Texas/TTY 1-800-735-2989).</p>
<b>Vietnamese:</b>	<p>Nếu quý vị hoặc người mà quý vị đang giúp đỡ có câu hỏi về Ambetter from Superior HealthPlan và không thành thạo tiếng Anh, quý vị có quyền được trợ giúp và nhận thông tin bằng ngôn ngữ của mình miễn phí và kịp thời. Nếu quý vị hoặc người mà quý vị đang giúp đỡ mắc bệnh về thính giác và/hoặc thị giác gây cản trở giao tiếp, quý vị có quyền được nhận các hỗ trợ và dịch vụ phụ trợ miễn phí và kịp thời. Để nhận dịch vụ thông dịch hoặc dịch vụ phụ trợ, vui lòng liên hệ bộ phận Dịch Vụ Thành Viên theo số 1-877-687-1196 (Relay Texas/TTY 1-800-735-2989).</p>
<b>Chinese:</b>	<p>如果您，或是您正在協助的對象，有關於 Ambetter from Superior HealthPlan 方面的問題，且不精通英語，您有權利免費並及時以您的母語獲幫助和訊息。如果您，或您正在協助的對象有聽力和/或視力上的問題，阻礙了溝通，您有權利免費並及時獲得輔助支援與服務。若要取得翻譯或輔助服務，請聯絡會員服務部，電話是 1-877-687-1196 (Relay Texas/TTY 1-800-735-2989)。</p>
<b>Korean:</b>	<p>귀하 또는 귀하의 도움을 받는 분이 Ambetter from Superior HealthPlan에 대한 질문이 있는 경우 영어에 능숙하지 않으시면 해당 언어로 시의적절하게 무료 지원과 정보를 받을 권리가 있습니다. 귀하 또는 귀하의 도움을 받는 분이 청각 및/또는 시각적으로 의사소통에 장애가 있는 경우 시의적절하게 무료 보조 도구 및 서비스를 받을 권리가 있습니다. 번역 또는 보조 서비스를 받으시려면 1-877-687-1196(Relay Texas/TTY 1-800-735-2989)번으로 가입자 서비스부에 연락하십시오.</p>
<b>Arabic:</b>	<p>إذا كان لديك أو لدى شخص تساعد أسئلة حول Ambetter from Superior HealthPlan، ولم تكن بارعا باللغة الإنكليزية، فلدك الحق في الحصول على المساعدة والمعلومات بلغتك من دون أي تكلفة وفي الوقت المناسب. إذا كنت أنت أو أي شخص تساعد تعاني من حالة سمعية و/أو بصرية تعيق التواصل، فلدك الحق في تلقي مساعدات وخدمات إضافية من دون أي تكلفة وفي الوقت المناسب. لتلقي خدمات الترجمة أو خدمات إضافية، يرجى الاتصال بخدمات الأعضاء على 1-877-687-1196 (Relay Texas/TTY 1-800-735-2989).</p>
<b>Urdu:</b>	<p>اگر آپ، یا جس کی آپ مدد کر رہے ہیں وہ Ambetter from Superior HealthPlan کے بارے میں سوالات کرنا چاہتے ہیں، اور وہ انگریزی میں ماہر نہیں ہیں، تو آپ کو اپنی زبان میں بلا معاوضہ اور بروقت مدد اور معلومات حاصل کرنے کا حق ہے۔ اگر آپ، یا جس کی آپ مدد کر رہے ہیں، انہیں سماعت اور/یا بصارت میں کوئی پریشانی درپیش ہو جس سے مواصلت میں رکاوٹ پیدا ہوئی ہے، تو آپ کو مفت اور ہر وقت معاون امداد اور خدمات حاصل کرنے کا حق ہے۔ ترجمہ یا معاون خدمات حاصل کرنے کے لیے، براہ کرم 1-877-687-1196 (Relay Texas/TTY 1-800-735-2989) پر ممبر سروسز سے رابطہ کریں۔</p>
<b>Tagalog:</b>	<p>Kung ikaw, o ang iyong tinutulungan, ay may mga katanungan tungkol sa Ambetter from Superior HealthPlan, at hindi ka mahusay sa Ingles, may karapatan ka na makakuha ng tulong at impormasyon sa iyong wika nang walang gastos at sa maagap na paraan. Kung ikaw, o ang iyong tinutulungan, ay may kondisyon sa pandinig at/o paningin na nakakaapekto sa komunikasyon, may karapatan kang makatanggap ng mga karagdagang tulong at serbisyo nang walang gastos at sa maagap na paraan. Para makatanggap ng mga serbisyo sa pagsalin o mga karagdagang serbisyo, mangyaring makipag-ugnayan sa Mga Serbisyo para sa Miyembro sa 1-877-687-1196 (Relay Texas/TTY 1-800-735-2989).</p>
<b>French:</b>	<p>Si vous-même ou une personne que vous aidez avez des questions à propos d'Ambetter from Superior HealthPlan et que vous ne maîtrisez pas l'anglais, vous pouvez bénéficier gratuitement et en temps utile d'aide et d'informations dans votre langue. Si vous-même ou une personne que vous aidez souffrez d'un trouble auditif ou visuel qui entrave la communication, vous pouvez bénéficier gratuitement et en temps utile d'aides et de services auxiliaires. Pour profiter de services de traduction ou de services auxiliaires, veuillez contacter Services aux membres au 1-877-687-1196 (Relay Texas/TTY 1-800-735-2989).</p>
<b>Hindi:</b>	<p>अगर आप या कोई ऐसा व्यक्ति जिसकी आप सहायता कर रहे हैं, के पास Ambetter from Superior HealthPlan से जुड़े प्रश्न हैं और आप दोनों अंग्रेजी में माहिर नहीं हैं, तो आपको अपनी भाषा में मुफ्त और समय पर सहायता और जानकारी प्राप्त करने का अधिकार है. अगर आपको या किसी ऐसे व्यक्ति को जिसकी आप मदद कर रहे हैं, सुनने और/या देखने में समस्या होती है और इससे बातचीत बाधित होती है, तो आपको बिना किसी लागत के और समय पर सहायक सहायता और सेवाएं प्राप्त करने का अधिकार है. अनुवाद या सहायक सेवाएं प्राप्त करने के लिए कृपया 1-877-687-1196 (Relay Texas/TTY 1-800-735-2989) पर सदस्य सेवाएं से संपर्क करें.</p>
<b>Persian:</b>	<p>اگر شما یا فردی که دارید به او کمک می‌کنید، سؤالی درباره Ambetter from Superior HealthPlan دارید، و انگلیسی نمی‌دانید، حق دارید کمک و اطلاعات را به زبان خودتان به رایگان و به موقع دریافت کنید. اگر شما یا فردی که دارید به او کمک می‌کنید مشکلات شنوایی یا بینایی دارد که برقراری ارتباط را سخت می‌کند، حق دارید کمک‌ها و خدمات امدادی را به زبان خودتان به رایگان و به موقع دریافت کنید. برای دریافت کمک‌ها و خدمات امدادی لطفاً با خدمات اعضا به شماره 1-877-687-1196 (Relay Texas/TTY 1-800-735-2989) تماس بگیرید.</p>

<b>German:</b>	Falls Sie oder jemand, dem Sie helfen, Fragen zu Ambetter from Superior HealthPlan hat und nicht Englisch spricht, haben Sie das Recht, kostenlos und zeitnah Hilfe und Informationen in Ihrer Sprache zu erhalten. Falls Sie oder jemand, dem Sie helfen, eine Hör- und/oder Sehbeeinträchtigung hat, die die Kommunikation beeinflusst, haben Sie das Recht, kostenlos und zeitnah zusätzliche Hilfe und Dienstleistungen zu erhalten. Um eine Übersetzung oder zusätzliche Dienstleistungen zu erhalten, wenden Sie sich an den Kundendienst unter 1-877-687-1196 (Relay Texas/TTY 1-800-735-2989).
<b>Gujarati:</b>	જો તમને અથવા તમે જેમની મદદ કરી રહ્યા છો એવી કોઈ વ્યક્તિને Ambetter from Superior HealthPlan વિશે પ્રશ્નો હોય અને અંગ્રેજીમાં પ્રવીણ ન હોય, તો તમને કોઈ ખર્ચ કર્યા વિના અને સમયસર તમારી ભાષામાં મદદ તથા માહિતી મેળવવાનો અધિકાર છે. જો તમે અથવા તમે જેમની મદદ કરી રહ્યા છો એવી કોઈ વ્યક્તિ શ્રવણશક્તિ અને/અથવા દૃષ્ટિવિષયક અવસ્થાથી પીડિત હોય કે જે સંચારને અવરોધતી હોય, તો તમને કોઈ ખર્ચ કર્યા વિના અને સમયસર સહાયક સહાય તથા સેવાઓ પ્રાપ્ત કરવાનો અધિકાર છે. અનુવાદ અથવા સહાયક સેવાઓ પ્રાપ્ત કરવા માટે, કૃપા કરીને 1-877-687-1196 (Relay Texas/TTY 1-800-735-2989) પર સભ્યની સેવાઓનો સંપર્ક કરો.
<b>Russian:</b>	Если у вас или у лица, которому вы помогаете, возникли какие-либо вопросы о программе страхования Ambetter from Superior HealthPlan, при этом вы недостаточно хорошо владеете английским языком, вы имеете право на бесплатную и своевременную помощь и информацию на своем родном языке. Если у вас или у лица, которому вы помогаете, наблюдается какое-либо нарушение слуха и/или зрения, которое препятствует коммуникации, вы имеете право на бесплатные и своевременные вспомогательные услуги и помощь. Для получения услуг перевода или вспомогательных услуг обратитесь в отдел обслуживания участников программы страхования по номеру 1-877-687-1196 (Relay Texas/TTY 1-800-735-2989).
<b>Japanese:</b>	ご自身やあなたが介護している他の人が、Ambetter from Superior HealthPlanについてご質問をお持ちの場合、英語に自信がなくても無料かつタイムリーにご希望の言語でヘルプや情報を得ることができます。ご自身や、あなたが介護している他の人の聴覚や視覚の状態のためやり取りが難しい場合でも、無料かつタイムリーに補助サービスを受けることができます。翻訳や補助サービスを受けるには、1-877-687-1196 (Relay Texas/TTY 1-800-735-2989)のメンバーサービスにご連絡ください。
<b>Laotian:</b>	ຖ້າຫາກທ່ານ ຫຼື ຜູ້ໃດຜູ້ໜຶ່ງທີ່ທ່ານກຳລັງໃຫ້ການຊ່ວຍເຫຼືອ, ມີຄຳຖາມກ່ຽວກັບ Ambetter from Superior HealthPlan, ແລະ ບໍ່ຊ່ວຍເຫຼືອພາສາອັງກິດ, ທ່ານມີສິດໄດ້ຮັບການຊ່ວຍເຫຼືອ ແລະ ຂໍ້ມູນທີ່ເປັນພາສາຂອງທ່ານໂດຍບໍ່ມີຄ່າໃຊ້ຈ່າຍ ແລະ ທັນເວລາ. ຖ້າຫາກທ່ານ ຫຼື ຜູ້ໃດຜູ້ໜຶ່ງທີ່ທ່ານກຳລັງໃຫ້ການຊ່ວຍເຫຼືອ, ມີສະພາບທາງການໄດ້ຍິນ ແລະ/ຫຼື ການເບິ່ງເຫັນທີ່ຂັດຂວາງການສື່ສານ, ທ່ານມີສິດໄດ້ຮັບການຊ່ວຍເຫຼືອ ແລະ ການບໍລິການເສີມໂດຍບໍ່ມີຄ່າໃຊ້ຈ່າຍ ແລະ ທັນເວລາ. ເພື່ອໃຫ້ໄດ້ຮັບການບໍລິການແປພາສາ ຫຼື ບໍລິການເສີມ, ກະລຸນາຕິດຕໍ່ຫາ Member Services (ການບໍລິການສະມາຊິກ) ໂດຍທີ່ 1-877-687-1196 (Relay Texas/TTY 1-800-735-2989).

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