Evaluation of the Last Year of SAIL

The meeting was mainly focused on an evaluation SAIL over the past year. To begin with we did individual evaluations. The group had a lively discussion about what has been helpful, what has not worked so well, reasons why people come to SAIL, and the direction people think SAIL should go into the future. One of the main things that came out in our discussion is the many ways to use technology to connect groups, reach out more people both young and old and provide information. Moving forward technology will be an important part of our growth as a group. Also talked about was the importance of learning about the legislative process and having a voice with legislators. Thank you to everyone for all of your input and suggestions!

Everybody's voices are important!

Changes Could be Coming to How You Get Your Medical Coverage!

Managed care is coming to Washington! In an effort to educate everyone about what is coming, the second page of information is on the back of this page (the first page was included with last months newsletter). REMEMBER: this applies to MEDICAID ONLY people. Please share with this information with friends!

Put it on your calendar:
The August 2012 meeting has been CANCELLED!

A Note from the Support

June 2012
Hello Everyone!
We talked a lot about where SAIL should go into the future, technology was a big topic of conversation. I think technology is the way we are going to have to go. It could take time, because there are lots of logistics to work out. Please remember the meeting in August 2012 has been cancelled!
Sincerely, Corinna Fale, Chair of SAIL

For more information about SAIL, contact Emily Rogers: emily@arcwa.org; 1.888.754.8798
In the coming months, our state is moving to managed health care for individuals who receive SSI-Medicaid (but not Medicaid/Medicare). It’s called the Healthy Options program. This bulletin is Part Two of a three-part series to help keep you informed and prepared over the coming weeks and months.

The Health Care Authority (HCA) contracts with five different managed care plans (see inset) for its Healthy Options program. Although not all five are offered in every area, everyone will have at least two plans to choose from. The question is, how do you know which plan is the right one for you? The following checklist can help guide your decision and response to your enrollment letter.

**Checklist**

- **Contact the plan (number provided in your Healthy Options handbook) for a list of primary care providers (PCP).** Or, call your current health care provider to ask if s/he is on the plan you’ve been enrolled in. Your PCP will be the person responsible for referrals to specialists, therapies and treatment.  
- **If there’s a specialist you prefer, check to make sure s/he is a member of the plan’s provider network.**  
- **Consider current or potential treatments when selecting a plan.** What is the plan’s hospital affiliation? Which specialists are in its network?  
- **Ask about the plan’s process and policies around pharmacy benefits.** There may be some differences in each plan’s formularies; however, Healthy Options requires that the plans continue your treatment plan, including prescriptions, for 90 days or as soon you can be evaluated by the plan’s provider.

**REMEmber: You can change your plan at any time.** To do so, visit the ProviderOne Client Portal at [https://www.waprownderone.org/client](https://www.waprownderone.org/client), or call the automated Interactive Voice Response (IVR) system: 1-800-562-3022, press 6 for client services, and then press 2 for health plan enrollment.

**Stay Informed!** Sign up for the Informing Families, Building Trust listserv at: www.informingfamilies.org, look for our late breaking updates on Facebook, and watch our Ready...Set...KNOW! video podcasts.