



445 Grant Avenue, Suite 700  
San Francisco, CA 94108

PRSR STD  
US POSTAGE  
**PAID**  
HANDLED WITH  
CARE

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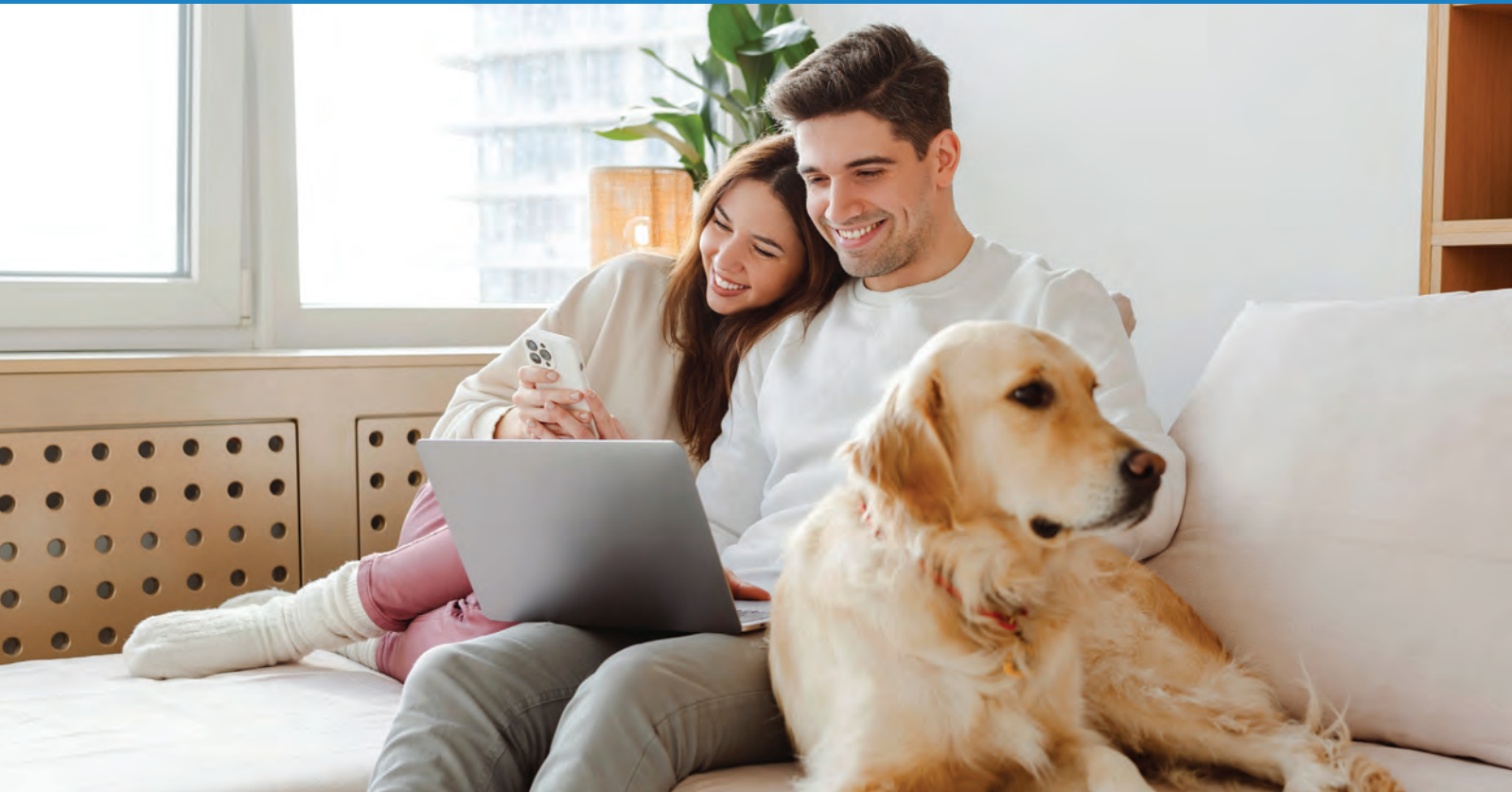
## IMPORTANT PLAN INFORMATION

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# Annual Member Notice

Issue Date  
10/1/2025





## Timely Access to Care

At Balance, ensuring timely access to care is a top priority. Members can expect prompt medical attention with set standards for appointment wait times, such as urgent care within 48 hours and non-urgent primary care within 10 business days. Interpreter services and a 24/7 nurse advice line are available to support members. For any issues securing appointments, Balance offers direct assistance. For more details, visit [balancebycchp.com/timely-access-to-care](https://balancebycchp.com/timely-access-to-care)

## Access to Benefits

We make accessing your health benefits easy. Members can get help with benefits, claims, and request or change a primary care provider through our Member Portal or contacting Member Services. On Balance website, you can check your benefits with the Evidence of Coverage (EOC) and find available PCPs and specialists in the Provider Directory.

## Member Rights

As a member of Balance, you have the right:

### Confidentiality

1. To keep Your Medical Information private.
2. To ask your doctor or Balance to contact you only in certain ways or at certain locations.
3. To set limits on who gets to see your personal health information.
4. To be told to whom your personal health information has been given.
5. To keep psychotherapy notes private.
6. To review, copy, and request amendments to your medical records.

### Information Disclosure

To have access to medical equipment that is both accessible and functional at a provider's office or facility. Balance offers comprehensive details about your plan benefits, delivery systems, various operational procedures, and review rights through enrollment guides, brochures, and our website. You can find further information including directories, contact information, and other informational materials through the Balance

website. Balance will also refer you to its network of contracted providers or facilities available to you as a member.

### Access to Services

Your Health Care Rights include:

1. To be able to get an appointment when needed. There are limits on how long you may have to wait, including for specialist visits.
2. To request continuity of care if your doctor or medical group leaves Balance.
3. To receive treatment for certain mental health conditions.
4. To get a second opinion.
5. To know why Balance denies a service or treatment.
6. To understand your health problems and treatments.
7. To see written diagnoses (description of your health problems).
8. To give informed consent when you have a treatment.

### Consideration of Member Preferences

1. To choose your own doctor.
2. To choose a doctor in the Balance provider network.
3. To change to another doctor in Balance's network if you are not satisfied with your doctor or specialists.

### Advanced Directive

An Advanced Directive tells your doctor, family, and friends about the health care you want if you can no longer make decisions for yourself. It explains the types of special treatment you want or do not want.

### Submission of Complaints and Appeals

1. To file a complaint (grievance or appeals) if you have a problem with Balance.
2. To ask for an Independent Review if Balance denied, modified or delayed a health care service.

### Culturally and Linguistically Appropriate Services

You have the right to services in your language.

1. To ask a doctor or an interpreter who speaks your language when you receive health care services.
2. Receive written information in your preferred language or the main language spoken by the members of Balance.



## Disability Access Rights

1. To have access to medical equipment that is both accessible and functional at a provider's office or facility.
2. To have most physical barriers removed that make it hard for you to use your health care services.
3. To have extra time for visits if you need it.
4. To have health information provided in a usable format if you are blind, deaf, or have low vision.
5. To take your service animal into exam rooms with you.

## Member Responsibilities

Your Responsibilities as a member of Balance:

1. Supply information to the Balance network providers as needed to access health benefits.
2. Learn how to use your health benefits and access member assistance or Member Services to ask questions about your health benefits.
3. Supply information to the Balance network providers so that they can provide health services you need.
4. Understand your own health and work with Balance network providers to develop and follow an agreed-upon plan.
5. Contact Member Services for Assistance in accessing your covered benefits.

## No Incentives for Utilization Decisions

In order to assure that all authorization decisions are objective, Balance by CCHP uses pre-established criteria to make these decisions. Balance reviewers who use these guidelines do not receive any financial incentives to approve or deny services. Members may request these criteria by contacting our Member Services.

## Medical Loss Ratio Was Met

The Affordable Care Act requires health insurers in the individual and small group markets to spend at least 80% of the premiums they receive on health care services and activities to improve health care quality (in the large group market, this amount is 85%). This is referred to as the Medical Loss Ratio (MLR) rule. If

a health insurer does not spend at least 80% of the premiums it receives on health care services and activities to improve health care quality, the insurer must rebate the difference to its customers.

You are receiving this notice because Balance had a Medical Loss Ratio for 2023 that met the required Medical Loss Ratio. No refund is due to members. For information on Medical Loss Ratio, visit [www.HealthCare.gov](http://www.HealthCare.gov).

## Fraud Awareness

You are one of the first lines of defense against fraud, waste and abuse (FWA). There are many ways you can help Balance combat FWA:

1. Report services or items that you have been billed for, but did not receive. You can review your plan statement and be on the lookout for this scheme:
  - Make sure you received the services or items billed.
  - Check the number of services billed.
  - Ensure the same service has not been billed more than once.
2. Medical transport services are sometimes necessary, but be aware that some ambulance companies are inappropriately billing. These suspect medical transport companies may bill for services that you may not have received; such as oxygen, cardiac monitoring, and more. If you suspect a medical transport company has committed fraud, you must report the matter in order to protect yourself and your health care benefits.
3. Be on the lookout for fraudulent schemes such as:
  - People going door to door to sell you healthcare items or services (only your doctor knows what you need).
  - People calling you to ask for your health plan number.
  - People offering you money or other incentives for health care services you don't need.
  - People using your health plan member number for reimbursements of services you never received.

4. You can protect your identity and your benefits:

- Never give out your Social Security, health plan numbers, or banking information to someone you don't know.
- Carefully review your Plan Statement to ensure all the information is correct. Know that free services DO NOT require you to give your plan number to anyone.

To discuss benefit, coverage or claims payment concerns, please contact Member Services.

To report suspected fraud, waste, or abuse, please call the Balance confidential and anonymous Corporate Compliance Hotline at 1-415-955-8810.

## Utilization Management Program

### Availability of Criteria

Copies of Utilization Management (UM) policies, procedures, and criteria used to authorize, modify, or deny healthcare requests are made available and may be received upon request. Members of the public may request copies of the criteria by calling Member Services at 1-888-775-7888 (toll free), or 1-877-681-8898 (TTY).

### Affirmative Statement about Incentives

UM decision making is based only on appropriateness of care and service and existence of coverage. Plan does not specifically reward practitioners or other individuals for issuing denials of coverage or care. Financial incentives for UM decision maker do not encourage decisions that result in underutilization.

## Privacy of Protection of Data

Balance by CCHP is required to comply with various State and Federal laws to protect, secure, retain, and maintain confidentiality of your sensitive and personal information. These laws include, **but not limited to**, the Health Insurance Portability and Accountability Act of 1996 (HIPAA), the Centers for Medicare and Medicaid Services (CMS), and the California Consumer Privacy Act (CCPA). Balance has put in place policies and procedures to ensure that access to or use of your personal information is secure.

Policies and processes include standards on how Balance manages access to and the utilization of identified race, ethnicity, preferred language, gender identity and sexual orientation information collected for current or prospective health plan members. Balance discloses its procedures for managing access to and the use of collected race, ethnicity, preferred language, gender identity and sexual information at a minimum, at the time of data collection and on Balance's website Compliance Privacy page at **[balancebycchp.com/confidentiality-and-compliance-notice](https://balancebycchp.com/confidentiality-and-compliance-notice)**. For questions on these policies, please call the Balance Compliant Hotline at **415-955-8810** or email to **CCHPComplianceDept@cchphealthplan.com**.

## Member Services Center



1-888-775-7888  
TTY 1-877-681-8898

October 1 – March 31:  
7 days a week from 8 am – 8 pm

April 1 – September 30:  
Monday – Friday, 8 am – 8 pm



[MemberServices@BalancebyCCHP.com](mailto:MemberServices@BalancebyCCHP.com)

445 Grant Avenue, San Francisco, CA 94108

386 Gellert Boulevard, Daly City, CA 94015

Monday – Friday, 9 am – 5 pm

Closed Saturday and Sunday



[BalancebyCCHP.com](https://BalancebyCCHP.com)