**PHONE NUMBERS**

**Rite Share**
- Tel. (401) 462-0311
- Fax. (401) 462-6337

DHS Info Line (401) 462-5300

UnitedHealthcare Dental – RItte Smiles (866) 375-3257

SSI (Supplemental Security Income) (800) 772-1213

**Important:** Please contact RItte Share at 462-0311 if your employment or health insurance changes. See page 6 for more information.
RIte Share Premium Assistance Program

RIte Share is Rhode Island’s Health Insurance Premium Assistance Program for eligible children and families. RIte Share pays for (all or part of) the employee’s health insurance cost.

**IMPORTANT:** Payment is sent to members by direct deposit or by mail every month. If your employment ends or if your health insurance through your employer changes, please contact RIte Share. You must notify us immediately, so that we can stop payments to your account. You are responsible for paying the State back for money that was deposited in your account for the months you were not eligible for or not receiving health insurance coverage. **Accepting payment after your health insurance ends may be considered Medicaid fraud.**
As a RIte Share member, you will have 2 cards for health insurance:

1) Your health plan card and
2) Your Medical Assistance card

Always show BOTH cards to your doctor, pharmacy or hospital.

The health plan card is used for most of your medical care such as: doctor’s office visits, prescription drugs, lab tests, immunizations, prenatal care, hospital care, mental health services, substance abuse services, emergency care, home health care, skilled nursing care, and other ambulatory services.

The Medical Assistance card is used for a few extra covered benefits listed in this booklet. Only members of your family who are eligible for Medical Assistance will get a white Medical Assistance card.

If you lose your Medical Assistance Card, please call your local DHS office. See page 7. Remember to use your most recent ID card when using health care services.

Sample Medical Assistance Card
Eye Care

Eyeglasses (lenses and frames) are a covered benefit when medically necessary. For children under age 19, there is no limit on glasses. For adults, glasses are limited to one pair every 2 years. Contact lenses are a covered benefit, instead of glasses, when medically necessary.

To get glasses, call an optician in your area or call the DHS Info Line at 462-5300 for help finding an optician in your area that is a Medical Assistance provider, or check the DHS website www.dhs.ri.gov under “Provider Search”.

Dental Care Services

There are two ways that children who have Medical Assistance get dental care, through a RIte Smiles dental plan or through Medial Assistance fee-for-service. Some services require prior approval.

RIte Smiles

Children born on or after May 1, 2000, who have no other dental insurance are eligible to enroll in a RIte Smiles dental plan. The parent or guardian will receive information in the mail from UnitedHealthcare Dental, the RIte Smiles dental plan. Covered services include: routine dental exams, cleanings, fluoride treatments, sealants, x-rays, restorative services and other dental services as medically necessary.

Dental Services through Medical Assistance fee-for-service

Children born before May 1, 2000 are eligible to receive dental services using their white Medical Assistance ID card. Parents need to call first to see if a dentist accepts Medical Assistance. Covered services include: routine dental exams, cleansings, fluoride treatments, sealants, x-rays, restorative services and other dental services as medically necessary.
**Bus Passes**

RIte Share members who need transportation to and from medical appointments are eligible to receive a Rhody Ten ride pass. (Some RIte Share members may be eligible for a monthly bus pass.) You can get a Rhody Ten ride pass or a monthly bus pass at any Shaw’s or Stop & Shop supermarket in Rhode Island (at the Customer Service desk.) RIte Share members will need to show their white Medical Assistance ID card to get a bus pass. Bus passes are available on the 25th of the month for the following month’s bus pass. Children under age 5 ride for free.

**Interpreter services**

If you need someone to translate for you at your doctor’s office and your health plan does not offer this service, please call (401) 459-6020 and ask for an interpreter. Please call at least 48 hours before your appointment, and let them know that you are a RIte Share member.

**Additional Services**

Some services covered by your employer’s health plan have an annual limit. Examples include: Mental health services, Physical therapy, Substance abuse services, Occupational therapy, or Speech /Language therapy.

If a RIte Share member reaches the limit (number of visits) in their health plan, Medical Assistance may pay for extra visits if medically necessary. The provider of the service(s) must be a Medical Assistance provider. Please call ahead to see if they accept this type of coverage before you schedule an appointment.

**Over-the-Counter Medicine**

Medical Assistance will pay for some over-the-counter medicine if the prescription is written by the member’s physician and if it’s on Medical Assistance’s list of over-the-counter medicines.

**RIte Share Will Pay for Co-payments**

RIte Share members do not have to pay for co-payments for office visits or prescription drugs, however, you must go to a doctor, pharmacy or other provider who accepts Medical Assistance. If you go to a provider who does not accept Medical Assistance, you will be required to pay the co-payment.
**Renew your RIte Share/ Medical Assistance every year**

To keep your eligibility for RIte Share, you must renew your Medical Assistance every year. You will get the forms in the mail. Please be sure to fill them out and return them to the Department of Human Services quickly so that your health insurance will continue. **Important:** If you do not complete these forms, you may lose your health insurance.

**Tell us if you have any changes**

It's very important to let us know if you have any changes. Please call RIte Share at 462-0311 if you have a change in your:

- Address
- Job
- Bank account number
- Health insurance plan, including a change in the cost of this health insurance

Please call your DHS representative to report the following changes:

- Name
- Number of people in your family
- Address
- Immigration status
- Income
- Pregnancy

**Monthly Family Premium**

The monthly Family Premium is the amount that families pay to the state of Rhode Island for RIte Care or RIte Share. The amount of the premium depends on a family's income. If you are required to pay a monthly premium, it will be deducted from the amount that RIte Share pays you.

If you do not receive a monthly reimbursement from RIte Share and are required to pay a monthly premium, you have several ways you can pay. The monthly premium can be paid by check, credit or debit card, or by phone. There is also an option to pay in cash at select locations throughout Rhode Island. Please go to www.dhs.ri.gov under “Are you looking for...? Make a Payment” for more information or call 1 (800) 746-6001. Failure to pay the premium will result in the loss of Medical Assistance coverage (RIte Share).
### Department of Human Services (DHS) Offices

<table>
<thead>
<tr>
<th>Office Name</th>
<th>Contact Numbers</th>
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<tbody>
<tr>
<td>Newport Regional Family Center</td>
<td>401-851-2100 or 1-800-675-9397</td>
</tr>
<tr>
<td>Jamestown, Little Compton, Middletown, Newport, Portsmouth, Tiverton</td>
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</tr>
<tr>
<td>South County Regional Family Center (Stedman Center)</td>
<td>401-782-4300 or 1-800-862-0222</td>
</tr>
<tr>
<td>Charlestown, East Greenwich, Exeter, Hopkinton, Narragansett, New Shoreham, N. Kingstown, Richmond, S. Kingstown, Westerly, West Greenwich, Coventry</td>
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<tr>
<td>Pawtucket DHS</td>
<td>401-721-6600 or 1-800-984-8989</td>
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<tr>
<td>Barrington, Bristol, Central Falls, E. Providence, Pawtucket, Warren</td>
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<tr>
<td>Providence Regional Family Center</td>
<td>401-415-8200</td>
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<tr>
<td>Providence, Cranston, Johnston, Scituate</td>
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<tr>
<td>Warwick DHS</td>
<td>401-736-1400 or 1-800-282-7021</td>
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<tr>
<td>Warwick, West Warwick</td>
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<tr>
<td>Woonsocket DHS</td>
<td>401-235-6200 or 1-800-510-6988</td>
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<tr>
<td>Burrilleville, Cumberland, Foster, Glocester, Lincoln, N. Providence, N. Smithfield, Smithfield, Woonsocket</td>
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### Non-Discrimination Notice
The Rhode Island Department of Human Services (DHS) does not discriminate against any person on the basis of race, color, national origin, disability, political beliefs, sexual orientation, age, religion or sex in acceptance for or provision of services, employment or treatment in its educational and other programs and activities. For more information about this policy, call the Community Relations Liaison Officer, (401) 462-2130 or TTY/hearing impaired (401) 462-6239.

### Interpreter Services Notice
DHS will arrange for an interpreter or bilingual staff member to help you read English language notices, letters, or other written information from DHS. If you have problems getting interpreter or bilingual services at the Department of Human Services, please call the Limited English Proficiency Coordinator at (401) 462-2130 or TTY/hearing impaired (401) 462-6239.