



# 2019 Annual Notices Newsletter

## OneCare Customer Service

If you have questions or need help, call our Customer Service Department toll-free at **1-877-412-2734**, 24 hours a day, 7 days a week, or visit our office Monday through Friday, from 8 a.m. to 5 p.m. at 505 City Parkway West, Orange, CA 92868. TTY users can call **1-800-735-2929**.

### **After-Hours Advice:**

- If you need after-hours medical advice, call your PCP's office or the phone number on the back of your health network or medical group card.

### **Medical Emergency:**

- Dial 9-1-1 or go to the nearest emergency room for a true medical emergency.

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## Get Information in Other Languages or Formats

Information and materials from CalOptima are available in large-size print and other formats and languages. Please call CalOptima's Customer Service department if you need information or materials in another format or language.

### New Address or Phone Number?

We need your correct address and phone number to contact you about your health care. If you have a new address or phone number, please report it by calling:

- Your Orange County Social Services Agency eligibility worker
  - CalOptima's Customer Service department
  - United States Postal Service at 1-800-275-8777
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### OneCare Evidence of Coverage

The most current OneCare Evidence of Coverage (EOC) is available on our website at [www.caloptima.org](http://www.caloptima.org) and upon request. To get an EOC mailed to you, please call OneCare Customer Service department.

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### Organ or Tissue Donation

When you become an organ or tissue donor, you can help save or improve another person's life. To be an organ or tissue donor, you can:

- Answer the organ or tissue donation question on your Advance Directive form
- Get a donor sticker for your driver's license, or
- Carry a donor card

For more information, visit [www.donatelifecalifornia.org](http://www.donatelifecalifornia.org), or call toll-free at 1-866-797-2366.

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### CalOptima's Quality Improvement Program Goals and Accomplishments

Every year, we tell our members, providers and community partners about the goals of our Quality Improvement (QI) Program. We also share our accomplishments we have made in the past year. This is how we let people know about our activities, achievements and projects with the QI Program. Go to our website at [www.caloptima.org](http://www.caloptima.org) to read the 2018–2019 QI Program and Progress in Meeting Goals.

If you would like a hard copy of the QI Program and Progress in Meeting Goals, call CalOptima's Customer Service department at **1-714-246-8500** or toll-free at **1-888-587-8088**. TTY users can call toll-free at **1-800-735-2929**.

# CalOptima Standards of Access to Care — 2019

A brief description of the access standards for CalOptima OneCare and OneCare Cal MediConnect Plan (Medicaid-Medicare Plan) members:

### Access to Emergent/Urgent Medical Care and Telephone Access:

Covered Services	Standards of Care
Emergency Services	Immediately, 24 hours a day, 7 days a week
Urgent Care Services	Within 24 hours of request
Telephone Triage	Telephone triage shall be available 24 hours a day, 7 days a week. Telephone triage or screening waiting time shall not exceed 30 minutes.

### Access to Primary Care:

Covered Services	Standards of Care
Urgent Appointments –that DO NOT Require Prior Authorization	Within 48 hours of request
Non-Urgent Primary Care	Within 10 business days of request
Routine Physical Exams and Wellness Visits	Within 30 calendar days of request

### Access to Specialty and Ancillary Care:

Covered Services	Standards of Care
Urgent Appointments that DO Require Prior Authorization	Within 96 hours of request
Non-Urgent Specialty Care	Within 15 business days of request
First Prenatal Visit	Within 2 weeks of request
Non-Urgent Ancillary Services	Within 15 business days of request

### Access to Behavioral Health Care

Covered Services	Standards of Care
Routine Care with a Non-Physician Behavioral Health Provider	Within 10 business days of request
Follow-up routine care with a non-physician behavioral health care provider (i.e. psychologists and Licensed Clinical Social Workers (LCSW))	Within 20 calendar days of initial visit for a specific condition
Follow-up Routine Care with a Non-Physician Behavioral Health Provider	Within 30 calendar days of initial visit

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To see our Standards of Access to Care, please visit [www.caloptima.org](http://www.caloptima.org) and select Members, OneCare or OneCare Connect and go to the “Member Documents” webpage, then choose the link for “Other Important Documents.”

OneCare (HMO SNP) is a Medicare Advantage Organization with a Medicare contract. Enrollment in OneCare depends on contract renewal. OneCare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Please call our Customer Service number at **1-877-412-2734**, 24 hours a day, 7 days a week. TTY users can call **1-800-735-2929**.

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## Take an Active Role in Your Health!

CalOptima has an online health assessment to help you see how you can improve your health and quality of life. After you take the digital survey and submit your answers, you will get a low, moderate or high health score. You will also get details on areas for you to work on, as well as resources to help you make healthier choices. This survey is intended for CalOptima members ages 18 and older.

To take the health assessment, please visit CalOptima’s Member Portal at **[member.caloptima.org](http://member.caloptima.org)**. For more interactive self-management tools click on “Health Tips” on our home page or go to the Health and Wellness section.

We are here to help. Please call us at **1-714-246-8895** if you have a question. We will be happy to:

- Mail a print version of the health assessment to you
- Help you fill it out over the phone
- Talk to you about your results

At CalOptima, we believe in the importance of providing services in a way that our members can easily understand. We have the health assessment in other languages or in other formats, such as braille or large print.

Please call CalOptima Customer Service at **1-714-246-8500** or toll-free at **1-888-587-8088**, Monday through Friday from 8 a.m. to 5 p.m. TTY users can call toll-free at **1-800-735-2929**. We have staff who speak your language. Visit us at **[www.caloptima.org](http://www.caloptima.org)**.

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## Sign Up Today for Our Member Portal!

### Your Online Access to CalOptima

CalOptima recently launched our new member portal. The member portal is a secure online website that gives you 24-hour access to your health information.

You can access CalOptima’s new member portal on a computer, tablet or smart phone device. Other languages will begin rolling out in fall 2019.

Take an active role in your health care. Register **<https://member.caloptima.org>** today!

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To make changes online go to the member portal at [www.caloptima.org](http://www.caloptima.org).

The new self-service options make it easier and faster for you to:

- Update your personal information
- Request a new ID card
- Print a copy of your ID card
- Change your health network or primary care provider (PCP)
- Ask CalOptima Customer Service a question
- View the history and status of your prescriptions and referrals (coming in mid-2020)
- Complete your annual Health Assessment Survey

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## Health Management Programs

CalOptima offers health management services at NO COST to our OneCare members. We add eligible members to selected programs based on their health records or a doctor referral. Eligible members can also choose to sign up. When enrolled into a program, members may receive information in the mail from CalOptima or get a call from one of our staff. We are here to help you improve your health.

If you no longer want to be part of a health management program and prefer to stop\* getting mailings or calls about your condition, please call us at **1-714-246-8895**. We are here to help you Monday through Friday from 8 a.m. to 5 p.m. TTY users can call toll-free at **1-800-735-2929**. We look forward to helping you improve your health!

Program Name
Adult Asthma Health Program
Congestive Heart Failure Health Program
Diabetes Health Program
Bright Steps Maternity Health Program

*\*The request to stop getting information from us, will only apply to Health Management mailings. You will still get materials that CalOptima is required to mail you.*

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## Call The Nurse Advice Phone Line to Get Health Advice

If you need health advice, first call your doctor or your health network. We want you to be able to get answers to your health questions when you or your loved ones are sick, not feeling good or injured. If you cannot reach your doctor, you can talk to a nurse by phone.

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Call the CalOptima Nurse Advice Phone Line toll-free at **1-844-447-8441** to help you. TTY users can call toll-free at **1-844-514-3774**. The Nurse Advice Phone Line is open 24 hours a day, 7 days a week at no cost to CalOptima members. We have staff that speak your language.

If you think you are having a medical or psychiatric emergency, call **9-1-1** or go to the nearest hospital.

The Nurse Advice Phone Line is only for health advice. It does not have access to your medical records, referrals or prior authorizations. You should call your doctor or health network for that information.

### **The nurse can help you get the facts you need to decide your next steps, like:**

- Figure out your symptoms and what you can do
  - Give you facts about non-urgent and urgent care
  - Provide advice on self-care at home
  - Refer you to an authorized network urgent care center or hospital
  - Explain your condition or your diagnosis
  - Help you know facts about your medication
  - Provide interpreter services by phone
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## Notice of Privacy Practices

CalOptima provides you access to health care through the Medicare and/or Medi-Cal program. We are required by state and federal law to protect your health information. After you become eligible and enroll in our health plan, Medicare and/or Medi-Cal sends your information to us. We also receive medical information from your doctors, clinics, labs and hospitals in order to approve and pay for your health care.

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. **Please review it carefully.**

### **Your Rights**

**When it comes to your health information, you have certain rights.**

This section explains your rights and some of our responsibilities to help you.

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<p><b>Get a copy of your health and claims records</b></p>	<ul style="list-style-type: none"> <li>▪ You can ask to see or get a copy of your health and claims records and other health information we have about you. You must make this request in writing. You will be sent a form to fill out and we may charge a reasonable fee for the costs of copying and mailing records. You must provide a valid form of identification in order to view or get a copy of your health records.</li> <li>▪ We will provide a copy or a summary of your health and claims records, usually within 30 days of your request.</li> <li>▪ We may keep you from seeing certain parts of your records for reasons allowed by law.</li> <li>▪ <b>CalOptima does not have complete copies of your medical records. If you want to look at, get a copy of, or change your medical records, please contact your doctor or clinic.</b></li> </ul>
<p><b>Ask us to correct health and claims records</b></p>	<ul style="list-style-type: none"> <li>▪ You have the right to send in a written request to ask that information in your records be changed if it is not correct or complete. You must make your request in writing.</li> <li>▪ We may refuse your request if the information is not created or kept by CalOptima, or we believe it is correct and complete but we'll tell you why in writing within 60 days.</li> <li>▪ If we don't make the changes you ask, you may ask that we review our decision. You may also send a statement saying why you disagree with our records, and your statement will be kept with your records.</li> </ul>
<p><b>Request confidential communications</b></p>	<ul style="list-style-type: none"> <li>▪ You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address.</li> <li>▪ We will consider all reasonable requests, and must say "yes" if you tell us you would be in danger if we do not.</li> </ul>

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<b>Ask us to limit what we use or share</b>	<ul style="list-style-type: none"> <li>You can ask us <b>not</b> to use or share certain health information for treatment, payment, or our operations.</li> <li>We are not required to agree to your request, and we may say “no” if it would affect your care.</li> </ul>
<b>Get a list of those with whom we’ve shared information</b>	<ul style="list-style-type: none"> <li>You can ask for a list (accounting) of the times we’ve shared your health information for six years prior to the date you ask.</li> <li>You have the right to request a list (accounting) of what information was shared, who it was shared with, when it was shared and why.</li> <li>We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make).</li> </ul>
<b>Get a copy of this privacy notice</b>	<ul style="list-style-type: none"> <li>You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.</li> <li>You can also find this notice on our website at <a href="http://www.caloptima.org">www.caloptima.org</a>.</li> </ul>
<b>Choose someone to act for you</b>	<ul style="list-style-type: none"> <li>If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information.</li> <li>We will make sure the person has this authority and can act for you before we take any action.</li> </ul>
<b>File a complaint if you feel your rights are violated</b>	<ul style="list-style-type: none"> <li>You can complain if you feel we have violated your rights by contacting us using the information in this notice.</li> <li>We will not retaliate against you for filing a complaint.</li> </ul>
<b>Self-pay restriction</b>	<ul style="list-style-type: none"> <li>If you pay the whole bill for a service, you can ask your doctor not to share the information about that service with us. If you or your provider submits a claim to CalOptima, we do not have to agree to a restriction. If a law requires the disclosure, CalOptima does not have to agree to your restriction.</li> </ul>



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### For certain health information, you can tell us your choices about what we share.

If you have a clear preference for how we share your information in the situations described below, please contact us. In most cases, if we use or disclose your PHI outside of treatment, payment or operations, we must get your written permission first. If you give us your permission, you may take it back in writing at any time. We can't take back what we used or shared when we had your written permission, but we will stop using or sharing your PHI in the future.

<b>In these cases, you have both the right and choice to tell us to:</b>	<ul style="list-style-type: none"> <li>▪ Share information with your family, close friends, or others involved in payment for your care</li> <li>▪ Share information in a disaster relief situation</li> </ul>
<b>In these cases we <i>never</i> share your information unless you give us written permission:</b>	<ul style="list-style-type: none"> <li>▪ <u>Psychotherapy Notes</u>: We must obtain your authorization for any use or disclosure of psychotherapy notes except to carry out certain treatment, payment or health care operations.</li> <li>▪ Marketing purposes</li> <li>▪ Sale of your information</li> </ul>

### Our Uses and Disclosures

Your information may be used or shared by CalOptima only for a reason directly connected to Medicare and/or Medi-Cal program. The information we use and share includes, but is not limited to:

<b>Help manage the health care treatment you receive</b>	<ul style="list-style-type: none"> <li>▪ We can use your health information and share it with professionals who are treating you.</li> </ul>	<b>Example:</b> A doctor sends us information about your diagnosis and treatment plan so we can arrange additional services.
<b>Run our organization</b>	<ul style="list-style-type: none"> <li>▪ We can use and disclose your information to run our organization and contact you when necessary.</li> <li>▪ <b>We are not allowed to use genetic information to decide whether we will give you coverage and the price of that coverage.</b></li> </ul>	<b>Example:</b> A We use health information about you to develop better services for you.

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<b>Pay for your health services</b>	<ul style="list-style-type: none"> <li>▪ We can use and disclose your health information as we pay for your health services.</li> </ul>	<b>Example:</b> We share information with the doctors, clinics and others who bill us for your care. We may also forward bills to other health plans or organizations for payment.
<b>Administer your plan</b>	<ul style="list-style-type: none"> <li>▪ We may disclose your health information to the Department of Healthcare Services (DHCS) and/or the Centers for Medicare &amp; Medicaid Services (CMS) for plan administration.</li> </ul>	<b>Example:</b> DHCS contracts with us to provide a health plan, and we provide DHCS with certain statistics.

### How else can we use or share your health information?

We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes.

<b>Help with public health and safety issues</b>	<p>We can share health information about you for certain situations such as:</p> <ul style="list-style-type: none"> <li>▪ Preventing disease</li> <li>▪ Helping with product recalls</li> <li>▪ Reporting adverse reactions to medications</li> <li>▪ Reporting suspected abuse, neglect, or domestic violence</li> <li>▪ Preventing or reducing a serious threat to anyone's health or safety</li> </ul>
<b>Comply with the law</b>	<ul style="list-style-type: none"> <li>▪ We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.</li> </ul>
<b>Respond to organ and tissue donation requests and work with a medical examiner or funeral director</b>	<ul style="list-style-type: none"> <li>▪ We can share health information about you with organ procurement organizations.</li> <li>▪ We can share health information with a coroner, medical examiner, or funeral director when an individual dies.</li> </ul>

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<b>Address workers' compensation, law enforcement, and other government requests</b>	<p>We can use or share health information about you:</p> <ul style="list-style-type: none"><li>▪ For workers' compensation claims</li><li>▪ For law enforcement purposes or with a law enforcement official</li><li>▪ With health oversight agencies for activities authorized by law</li><li>▪ For special government functions such as military, national security, and presidential protective services</li></ul>
<b>Respond to lawsuits and legal actions</b>	<ul style="list-style-type: none"><li>▪ We can share health information about you in response to a court or administrative order, or in response to a subpoena.</li></ul>
<b>Comply with special laws</b>	<ul style="list-style-type: none"><li>▪ There are special laws that protect some types of health information such as mental health services, treatment for substance use disorders, and HIV/AIDS testing and treatment. We will obey these laws when they are stricter than this notice.</li><li>▪ There are also laws that limit our use and disclosure to reasons directly connected to the administration of CalOptima's healthcare programs.</li></ul>

### Our Responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

### Changes to the Terms of This Notice

CalOptima reserves the right to change its privacy notice and the ways we keep your PHI safe. If that happens, we will update the notice and notify you. We will also post the updated notice on our website.

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## How to Contact us to Use Your Rights

If you want to use any of the privacy rights explained in this notice, please write us at:

**Privacy Officer**  
CalOptima  
505 City Parkway West  
Orange, CA 92868  
**1-888-587-8088**

Or call CalOptima's Customer Service Department at: **1-714-246-8500**

Toll-free at **1-888-587-8088**  
TTY: **1-800-735-2929**

If you believe that we have not protected your privacy and wish to file a complaint or grievance, you may write or call CalOptima at the address and phone number above. You may also contact the agencies below:

**California Department of Health Care Services**  
Privacy Officer  
C/O: Office of HIPAA Compliance  
Department of Health Care Services  
P.O. Box 997413, MS 4722  
Sacramento, CA 95899-7413  
Email: [privacyofficer@dhcs.ca.gov](mailto:privacyofficer@dhcs.ca.gov)  
Phone: 1-916-445-4646  
Fax: 1-916-440-7680

**U.S. Dept. of Health and Human Services**  
Office for Civil Rights  
Regional Manager  
90 7th Street, Suite 4-100  
San Francisco, CA 94103  
Email: [OCRComplaint@hhs.gov](mailto:OCRComplaint@hhs.gov)  
Phone: 1-800-368-1019  
Fax: 1-415-437-8329  
TTY: 1-800-537-7697

## Use Your Rights Without Fear

CalOptima cannot take away your health care benefits nor do anything to hurt you in any way if you choose to file a complaint or use any of the privacy rights in this notice.

This notice applies to all of CalOptima's health care programs.

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## Notice of Nondiscrimination

OneCare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. OneCare does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

### OneCare:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - ✓ Qualified sign language interpreters
  - ✓ Written information in other formats (large print, audio, accessible electronic formats, other formats)

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- Provides free language services to people whose primary language is not English, such as:
  - ✓ Qualified interpreters
  - ✓ Information written in other languages

If you need these services, contact OneCare Customer Service at **1-877-412-2734**, 24 hours a day, 7 days a week. TTY users can call **1-800-735-2929**. If you believe that OneCare has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Grievance & Appeals Resolution Services  
505 City Parkway West, Orange, CA 92868  
Telephone number: 1-714-246-8554  
TTY number: 1-800-735-2929  
Fax: 1-714-246-8562  
Email: [grievancemailbox@caloptima.org](mailto:grievancemailbox@caloptima.org)

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Grievance & Appeals Resolution Services is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

**U.S. Department of Health and Human Services**  
**200 Independence Avenue, SW**  
**Room 509F, HHH Building**  
**Washington, D.C. 20201**  
**1-800-368-1019, 1-800-537-7697 (TTY)**

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

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P.O. Box 11063  
Orange, CA 92856-8163

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