



2017 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. TDD/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.

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

OneCare Evidence of Coverage

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

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, or call toll-free at 1-866-797-2366.

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 to read the 2016–2017 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**. TDD/TTY users can call toll-free at **1-800-735-2929**.

Does Your Doctor Have a Patient Portal?

Have you ever left a doctor's office and realized that you forgot to ask your doctor a question? Can you remember what the doctor told you? More doctors are offering patients access to their health information using a web-based patient portal.

What is a patient portal?

A patient portal is a secure online website that gives patients convenient 24-hour access to personal health information from anywhere with an internet connection. By having a secure username and password, patients can view health information such as:

• Recent doctor visits	• Immunizations
• Discharge summaries	• Allergies
• Medications	• Lab results

How to get started:

- Make sure you have access to a working email address before your next doctor's visit.
 - ◇ You may sign up for a free email account with gmail.com, yahoo.com or hotmail.com
- Ask your doctor if they use a patient portal.
- At your next appointment, sign up for access to your doctor's patient portal.
- After you have signed up, log into your doctor's patient portal to see what information your doctor can provide.
- See if you can communicate with your doctor through the patient portal. It is a safe way to get answers to your questions.

CALOPTIMA STANDARDS OF ACCESS TO CARE — 2017

Below is a list of covered health care services and standards for getting timely access to care for **OneCare (OC)** and **OneCare Connect (OCC)** members.

Access to Medical Care:

Covered Services	Standards of Care
Emergency Services	Immediately, 24 hours a day, 7 days a week
Urgent Care Services	Within 24 hours

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Covered Services	Standards of Care
Urgent Appointments	
Urgent appointments for services that do not need Prior Authorization	Within 48 hours after request
Urgent appointments for services that need Prior Authorization	Within 96 hours after request
Non-Urgent Services	
Acute Care	Within 3 business days
Primary Care	Within 10 business days
Routine Physical Exams and Health Assessments	Within 30 calendar days
Health Risk Assessment	Within 90 calendar days after enrollment
Specialty Care	
Non-urgent	Within 15 business days
Urgent (Authorization required)	Within 96 hours
Routine Behavioral Health Care	Within 10 business days
Ancillary Services	Within 15 business days
In-office Wait Times for Appointments	Less than 45 minutes before seen by a Provider
Rescheduling Appointments	Appointments will be rescheduled in a manner appropriate to the member's health care needs and that ensures continuity of care is consistent with good professional practice.
Minor Consent Services	Offered to any CalOptima member under age 18 without parental consent

Family Planning Services:

Covered Services	Standards of Care
Subsequent Prenatal Appointments	All medically necessary services for pregnant members will be covered. Appointments shall be available to a member in accordance with applicable Department of Managed Health Care (DMHC) regulations and the American of College of Obstetricians and Gynecologists (ACOG) standards and guidelines.

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Covered Services	Standards of Care
Sensitive Services	If sensitive services are not available, members may self-refer to out-of-network services.

Telephone Access Services:

Telephone Access Services	Standards of Care
Telephone Wait Time During Business Hours	30 seconds or less
Urgent Message During Business Hours	Return call within 30 minutes
Non-emergency and Non-urgent Message During Business Hours	Return call within 24 hours of receipt
Telephone Triage or Screening Service	Available 24 hours a day, 7 days a week
Telephone Triage or Screening Wait Time	30 minutes or less
After- hours Access Availability	A PCP or designee shall be available 24 hours a day, seven days a week to respond to after-hours member calls or to a hospital emergency room practitioner.
After- hours Access Message instructing members to dial 911 or go to nearest emergency room (in emergency situation)	If live attendant answers, the attendant shall refer the Member to 911 emergency services or instruct the Member to go to the nearest emergency room. If a recorded message answers, it shall include the following: "If you feel that this is an emergency, hang up and dial nine-one-one (911) or go to the nearest emergency room."

Other Services:

Cultural and Linguistic Services	Standards
Interpreter Services	Offered 24 hours a day, 7 days a week
Written Materials	All written materials to members shall be offered in the threshold languages determined by CalOptima.

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Cultural and Linguistic Services	Standards
Alternative Forms of Communication	Informational and educational information for members in alternative formats will be available at no cost in the threshold languages in at least 14 pt. font, audio format or Braille upon request or as needed within 21 days of request or within a timely manner for the format requested.
Telecommunication Device for the Deaf (TDD)	Offered upon request at no cost. TDD/TTY Line: 1-800-735-2929
Cultural Sensitivity	Practitioners and staff shall encourage members to express their spiritual beliefs and cultural practices, be familiar with and respectful of various traditional healing systems and beliefs and, where appropriate, integrate these beliefs into treatment plans.

Your Information is Personal and Private

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.

CalOptima requires its employees to follow CalOptima privacy and security policies and procedures to protect your health information in oral (for example, when discussing your health information with authorized individuals over the telephone or in person), written or electronic form. This means that a CalOptima employee who has access to your information and needs it in order to perform his or her job duties, will not discuss your information in public areas or with unauthorized persons and will lock away and ensure your information is stored away when not in use. If the employee must send your information via an electronic form, he or she will ensure the communication is encrypted. CalOptima limits access to health information about members to those employees who need it to perform their jobs.

Notice of Nondiscrimination

OneCare (HMO SNP) 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:

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- ✓ Qualified sign language interpreters
- ✓ Written information in other formats (large print, audio, accessible electronic formats, other formats)
- 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. TDD/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

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 (TDD)

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

OneCare (HMO SNP) is a Medicare Advantage organization with a Medicare Contract and a contract with the California Medi-Cal (Medicaid) program. 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. TDD/TTY users can call **1-800-735-2929**.

Multi-Language Insert

Multi-language Interpreter Services

English: ATTENTION: If you speak a language other than English, language assistance services, free of charge, are available to you. Call **1-877-412-2734** (TTY: **1-800-735-2929**).

Spanish: ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-877-412-2734** (TTY: **1-800-735-2929**).

Chinese: 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 **1-877-412-2734** (TTY: **1-800-735-2929**)。

Vietnamese: CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số **1-877-412-2734** (TTY: **1-800-735-2929**).

Tagalog: PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa **1-877-412-2734** (TTY: **1-800-735-2929**).

Korean: 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. **1-877-412-2734** (TTY: **1-800-735-2929**)번으로 전화해 주십시오.

Armenian: ՈՒՇԱԴՐՈՒԹՅՈՒՆ՝ Եթե խոսում եք հայերեն, ապա ձեզ անվճար կարող են տրամադրվել լեզվական աջակցության ծառայություններ: Զանգահարեք **1-877-412-2734** (TTY (հեռատիպ)՝ **1-800-735-2929**).

Farsi: توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. باشماره **1-877-412-2734** (TTY: **1-800-735-2929**) تماس بگیرید.

Russian: ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните **1-877-412-2734** (телетайп: **1-800-735-2929**).

Japanese: 注意事項: 日本語を話される場合、無料の言語支援をご利用いただけます。 **1-877-412-2734** (TTY: **1-800-735-2929**)まで、お電話にてご連絡ください。

Arabic: ملحوظة: إذا كنت تتحدث بلغة أخرى غير الإنجليزية، فإن خدمات المساعدة اللغوية تتوفر لك بالمجان. اتصل علي الرقم **1-877-412-2734** (الهاتف النصي/خط الاتصال لضعاف السمع TTY: **1-800-735-2929**).

Punjabi: ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। **1-877-412-2734** (TTY: **1-800-735-2929**) 'ਤੇ ਕਾਲ ਕਰੋ।

Cambodian: ប្រយ័ត្ន: បើសិនជាអ្នកនិយាយ ភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសា ដោយមិនគិតល្អិត គឺអាចមានសំរាប់អ្នក។ ចូរ ទូរស័ព្ទ **1-877-412-2734** (TTY: **1-800-735-2929**)

Hmong: LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau **1-877-412-2734** (TTY: **1-800-735-2929**).

Hindi: ध्यान दें: यदि आप बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। **1-877-412-2734** (TTY: **1-800-735-2929**) पर कॉल करें।

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Thai: เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร **1-877-412-2734** (TTY: **1-800-735-2929**).

Lao: ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທ **1-877-412-2734** (TTY: **1-800-735-2929**).

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.

Get a copy of your health and claims records	<ul style="list-style-type: none">▪ 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.▪ We will provide a copy or a summary of your health and claims records, usually within 30 days of your request.▪ We may keep you from seeing certain parts of your records for reasons allowed by law.▪ 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.
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<p>Ask us to correct health and claims records</p>	<ul style="list-style-type: none"> ▪ 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. ▪ 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. ▪ 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.
<p>Request confidential communications</p>	<ul style="list-style-type: none"> ▪ 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. ▪ We will consider all reasonable requests, and must say "yes" if you tell us you would be in danger if we do not.
<p>Ask us to limit what we use or share</p>	<ul style="list-style-type: none"> ▪ You can ask us not to use or share certain health information for treatment, payment, or our operations. ▪ We are not required to agree to your request, and we may say "no" if it would affect your care.
<p>Get a list of those with whom we've shared information</p>	<ul style="list-style-type: none"> ▪ 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. ▪ 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. ▪ 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).

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<p>Get a copy of this privacy notice</p>	<ul style="list-style-type: none"> ▪ 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. ▪ You can also find this notice on our website at www.caloptima.org.
<p>Choose someone to act for you</p>	<ul style="list-style-type: none"> ▪ 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. ▪ We will make sure the person has this authority and can act for you before we take any action.
<p>File a complaint if you feel your rights are violated</p>	<ul style="list-style-type: none"> ▪ You can complain if you feel we have violated your rights by contacting us using the information in this notice. ▪ We will not retaliate against you for filing a complaint.
<p>Self-pay restriction</p>	<ul style="list-style-type: none"> ▪ 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.

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.

<p>In these cases, you have both the right and choice to tell us to:</p>	<ul style="list-style-type: none"> ▪ Share information with your family, close friends, or others involved in payment for your care ▪ Share information in a disaster relief situation
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<p>In these cases we <i>never</i> share your information unless you give us written permission:</p>	<ul style="list-style-type: none"> ▪ <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. ▪ Marketing purposes ▪ Sale of your information
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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:

<p>Help manage the health care treatment you receive</p>	<ul style="list-style-type: none"> ▪ We can use your health information and share it with professionals who are treating you. 	<p><i>Example:</i> A doctor sends us information about your diagnosis and treatment plan so we can arrange additional services.</p>
<p>Run our organization</p>	<ul style="list-style-type: none"> ▪ We can use and disclose your information to run our organization and contact you when necessary. ▪ We are not allowed to use genetic information to decide whether we will give you coverage and the price of that coverage. 	<p><i>Example:</i> A We use health information about you to develop better services for you.</p>
<p>Pay for your health services</p>	<ul style="list-style-type: none"> ▪ We can use and disclose your health information as we pay for your health services. 	<p><i>Example:</i> 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.</p>
<p>Administer your plan</p>	<ul style="list-style-type: none"> ▪ We may disclose your health information to the Department of Healthcare Services (DHCS) and/or the Centers for Medicare & Medicaid Services (CMS) for plan administration. 	<p><i>Example:</i> DHCS contracts with us to provide a health plan, and we provide DHCS with certain statistics.</p>

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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.

<p>Help with public health and safety issues</p>	<p>We can share health information about you for certain situations such as:</p> <ul style="list-style-type: none"> ▪ Preventing disease ▪ Helping with product recalls ▪ Reporting adverse reactions to medications ▪ Reporting suspected abuse, neglect, or domestic violence ▪ Preventing or reducing a serious threat to anyone’s health or safety
<p>Comply with the law</p>	<ul style="list-style-type: none"> ▪ 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.
<p>Respond to organ and tissue donation requests and work with a medical examiner or funeral director</p>	<ul style="list-style-type: none"> ▪ We can share health information about you with organ procurement organizations. ▪ We can share health information with a coroner, medical examiner, or funeral director when an individual dies.
<p>Address workers’ compensation, law enforcement, and other government requests</p>	<p>We can use or share health information about you:</p> <ul style="list-style-type: none"> ▪ For workers’ compensation claims ▪ For law enforcement purposes or with a law enforcement official ▪ With health oversight agencies for activities authorized by law ▪ For special government functions such as military, national security, and presidential protective services
<p>Respond to lawsuits and legal actions</p>	<ul style="list-style-type: none"> ▪ We can share health information about you in response to a court or administrative order, or in response to a subpoena.

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Comply with special laws	<ul style="list-style-type: none">▪ 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.▪ There are also laws that limit our use and disclosure to reasons directly connected to the administration of CalOptima's healthcare programs.
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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.

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**
TDD/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:

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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

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

Phone: 1-800-368-1019

Fax: 1-415-437-8329

TDD: 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.



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

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