

Medi**Impact**

10181 Scripps Gateway Court, San Diego, CA 92131

DATE: 11/09/2015
TO: Third Party/Pharmacy
FROM: Pharmacy Network Management **PHONE:** 800-807-5705
Med**Impact** Healthcare Systems
Subject: CalOptima CalWrap


Med**Impact** Healthcare Systems, Inc. will begin processing for CalOptima CalWrap as of 1/1/2016.

Since you have already agreed to participate with Med**Impact**, there will be no information for you to return. Enclosed please find the following information to assist you in processing claims:

- Sample ID Card(s)
- Profile Sheet

If you have any questions, please feel free to contact our Pharmacy Help Desk at 800-807-5705 on or after 1/1/2016.

Thank you.

 **CalOptima** Better. Together. www.caloptima.org

[MEMBER_NAME]
Member ID: [CIN] Eff Date: [mm/dd/yyyy]
[HEALTH_NETWORK] [HN_PHONE]
Rx Services: 1-888-807-5705 DOB: [mm/dd/yyyy]
Vision Services: 1-800-438-4560* RxBIN: 017142
*for members who meet requirements RxPCN: ASPROD1
 RxGroup: CAT03

**Providers: Eligibility must be verified at time of service.
Failure to obtain authorization may result in non-payment.**

If you have a life-threatening emergency, call 911 or go to the nearest emergency room. Notify your health network within 24 hours. Emergency services for a true emergency are covered by your health network without prior authorization. Your member handbook has more information on emergency services.

For Providers: Member Eligibility Verification:
1-714-246-8540

CalOptima Provider Help Desk:
1-714-246-8600

24-Hour Nurse Advice Line:
1-844-447-8441

Member Medical and Mental Health Services:
1-888-587-8088 or TDD/TTY 1-800-735-2929

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PLAN PROFILE SHEET

PLAN NAME	CalOptima CalWrap		
Number of Lives	84,844	Location	CA
Plan Type	<input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Medicaid <input type="checkbox"/> Medicare <input type="checkbox"/> Cash Discount Card		
Effective Date	01/01/2016		
RX BIN	017142		
RX PCN	ASPROD1		
RX Group	CAT03		
ID Number Format	9 digit alphanumeric		
Person Code	Not Required		
Are ID numbers changing?	No		
Incumbent Processor	PerformRX/Argus		
Sample ID Card(s)	Attached		
Retail	Max Day Supply: 60		
Member Reimbursement	<input type="checkbox"/> MediImpact <input checked="" type="checkbox"/> Plan <input type="checkbox"/> Does Not Apply		
Prior Authorizations	<input checked="" type="checkbox"/> MediImpact <input type="checkbox"/> Plan <input type="checkbox"/> Does Not Apply		
Date of Birth Validation	Yes	Twin/Triplet Validation	Patient First Name
Prescriber Id	NPI		
eCOB Method	Not applicable		

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