



Medi-Cal
CalOptima
Better. Together.

2020 Annual Notices Newsletter

How to Contact CalOptima

If you have questions or need help with your health care services, call CalOptima's Customer Service department at **1-714-246-8500**, or toll-free at **1-888-587-8088 (TTY 711)**, Monday through Friday, from 8 a.m. to 5 p.m. We have staff who speak your language. You can also visit our website at **www.caloptima.org**.

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:

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- 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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CalOptima Handbook

The most current CalOptima handbook is available upon request. To get a handbook, please call CalOptima's Customer Service department at **1-714-246-8500** or toll-free at **1-888-587-8088** (TTY 711), Monday through Friday, from 8 a.m. to 5:30 p.m. We have staff who speak your language. You can also visit our website at **www.caloptima.org**.

Know Your Benefits and How to Get Care

CalOptima wants you to know your benefits and how to get care, including:

- Covered and excluded services
- Pharmacy procedures
- Payment of services, such as co-payments or what to do if you receive a bill
- Out-of-area services and benefit restrictions
- No-cost language assistance services
- Information about our providers and making an appointment with your primary care provider
- Care from a specialist, behavior health care services and hospital services
- After-hours care
- Emergency medical services
- How to file a complaint or appeal
- New medical technology

For more about your benefits and services, please read the member handbook. Or you can visit our website at **www.caloptima.org**.

Facts about providers are on CalOptima's online provider directory at **www.caloptima.org**.

You can also call CalOptima's Customer Service department to get a copy of the member handbook or provider directory.

Do You Know About These Medi-Cal Benefits and Services?

Women's Health Services

Women can get preventive care, basic prenatal care, family planning and emergency services without a referral or prior authorization. They can see any women's health specialist (such as an obstetrician/gynecologist or certified nurse-midwife) within their health network for basic prenatal care, breast exams, mammograms and pap tests. Call your women's health specialist directly to make an appointment.

Out-of-Network Services

If you need covered health care services that are not available from your health network, you may be able to get them out of network. Your health network will cover these services as long as they are needed and are not available from your health network. If you need help with out-of-network services, contact your health network.

Second Opinions

Your primary care provider (PCP) will help you get a second opinion when you ask for one or if your PCP believes you should have one. The doctor who gives the second opinion will not take over your case but will help you and your PCP decide on a treatment plan.

Prior Authorization

What is Prior Authorization?

Prior authorization, or PA, is an approval for special medical services given by your health network. These services include:

- Specialty care
- Inpatient and outpatient hospital care
- Ancillary care, such as home health care
- Medical supplies
- Durable medical equipment (wheelchairs, walkers, etc.)
- Non-emergency medical transportation

The general response time for PAs is:

- Routine authorizations: 5 working days
- Urgent authorizations: 72 hours (or 3 calendar days)

Your PCP and your health network will decide if you need special medical services. Call your health network if you have questions about PA.

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You can get preventive care, basic prenatal care, family planning and emergency services without PA. Women can see any women's health specialist (such as an obstetrician/gynecologist or certified nurse midwife) within their health network for basic prenatal care, breast exams, mammograms and pap tests without a referral or prior authorization. You can call your women's health specialist directly to make an appointment.

IT'S ALL ABOUT YOU! Decisions About Your Health Care

If you need special medical services, our Utilization Management (UM) department will work with your doctor to decide if the services are appropriate. We base our decisions on your medical needs and Medi-Cal coverage. We do not reward our staff or your doctor if they do not approve services. Your doctor or our staff do not receive financial incentives for their decisions about your care.

As a CalOptima member, you have the right to ask about our UM process and decisions. If you have questions, please call CalOptima's Customer Service department at **1-714-246-8500** or toll-free at **1-888-587-8088** (TTY 711) to be connected with a staff member who can answer questions about our UM process. Language services are available to help you speak with our UM staff.

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**.

Understanding Your Drug Benefit

Medications and Drugs

Information about your drug benefits is in the Members section of our website at www.caloptima.org on the Pharmacy Program webpage. You can find:

- The Drug Formulary, also called the Approved Drug List
- Changes and updates to the Approved Drug List, made every 3 months
- The process for you or your doctor to ask for an approval for drugs not on the Approved Drug List

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You can also use the CalOptima website to:

- View all your drugs covered by CalOptima
- See if there is a generic or other generic option for your drugs
- See if the drug(s) that you are taking may interact with other drugs
- Find out possible side effects of a drug
- Find out which pharmacies work with CalOptima
- See drugs that were recalled by the manufacturer

How to Use the Drug Formulary

CalOptima has a list of drugs covered (paid for) by CalOptima if you fill your prescription at a pharmacy that works with CalOptima. This list is called the Approved Drug List. This list can be found in the Members section at www.caloptima.org on the Pharmacy Program webpage. You can also call CalOptima's Customer Service department and ask us to mail the list to you. The Approved Drug List will show:

- A list of generic and brand-name drugs that we cover
- The limits for a covered drug
- The rules to change a drug to generic. If a drug is available in a generic, you must use the generic drug first.
- Rules to try certain drugs first before we cover another drug for the same condition
- Rules that require you to have a certain condition first before a drug may be covered
- Rules that require you to use a different drug that has the same effect as another drug

Formulary Updates

The CalOptima Pharmacy and Therapeutics Committee reviews new drugs and new uses of a drug on the Approved Drug List every 3 months. This Committee has pharmacists and doctors who decide which drugs are included on the Approved Drug List. They also review the rules or limits to put on a drug.

Pre-Approvals for Drugs Not on CalOptima's Approved Drug List

If your doctor writes a prescription for a drug that is not on the Approved Drug List, your doctor or your pharmacy must ask for an approval from CalOptima first. Your doctor or pharmacy must use a Prior Authorization (PA) form. You can also ask us for an approval by calling Customer Service or filling out the Online Drug Prior Authorization Request form in the Members section at www.caloptima.org on the Pharmacy Program webpage. When you complete and submit this form, CalOptima will work with your doctor to ask for all the information needed to review your request.

Your doctor must provide us with your diagnosis and what drugs on CalOptima's list you have already tried. Your doctor must also tell us why the requested drug is medically required for you and why drugs on our list cannot be used. For more information on the pre-approval process, see your Member Handbook.

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How to Get More Information

CalOptima lets you know about pharmacy procedures and updates by mail or on our website if we tell you that it is available online. (Online updates are every 3 months.) We will mail updates to you if you do not have fax, email or internet access. We can also mail the information to you about step therapy and how to ask for an exception.

To receive updates by mail or to learn more, contact CalOptima's Customer Service department toll-free at **1-888-587-8088 (TTY 711)**, Monday through Friday from 8 a.m. to 5 p.m. We have staff who speak your language. Visit us at **www.caloptima.org**.

CalOptima is Here to Help You

You have the right to file a complaint if you are not happy with the care you are getting.

To File a Grievance or a Utilization Management (UM) Appeal

You can file a grievance if you are not happy with the care you are getting. You can file a UM appeal if your health network or CalOptima does not approve or pay, stops, changes or delays a service, and you do not agree. You can ask CalOptima to continue providing the service while we process your appeal. To do so, call us within 10 calendar days of getting the UM notice to stop or change a service you have already been getting. To file a grievance or UM appeal, call CalOptima's Customer Service department. Your CalOptima member handbook has more information about your grievance and appeal rights.

If you need help filling out your grievance or appeal forms, CalOptima staff is here to help you. If you speak another language, you may ask for an interpreter at no cost to you to help you file your grievance or appeal. If you want someone else to represent you, you must give us written notice.

To File a State Hearing

If you do not agree with your health network's or CalOptima's action or decision, you may ask for a State Hearing at any time. To do this, contact the Department of Social Services (DSS) within 120 days of the action or decision. A hearing is where you can present your concern directly to the State of California. You may do this yourself or have another person do it for you. DSS can get a free Legal Aid lawyer to help you.

To ask for a State Hearing, write to:

Department of Social Services
State Hearings Division
P.O. Box 944243, M.S. 9-17-37
Sacramento, CA 94244-2430

or

Call **1-800-952-5253**. TTY users can call **1-800-952-8349**.

Protecting You and the Health Care System

What Is Health Care Fraud?

Health care fraud is when a provider or person plans to do something dishonest, knowing that it could result in an illegal benefit for them or another person.

These are examples of possible health care fraud:

- Using someone else's CalOptima ID card
- Getting a bill for services or medicines covered by CalOptima
- Getting unneeded services from your provider
- Getting a bill for services you did not receive
- Getting a bill for supplies (like a wheelchair) that was not ordered by your provider or was not sent to you
- Getting medicines from your provider that you don't need
- Selling medicines to someone else that was prescribed to you

Fraud hurts all of us. If you suspect fraud, please report it by calling CalOptima's Compliance and Ethics Hotline at **1-877-837-4417 (TTY 711)**. **You do not have to give your name to report fraud.**

What Is HIPAA?

HIPAA stands for the Health Insurance Portability and Accountability Act. It is a set of rules that hospitals, health plans and health care providers have to follow. HIPAA helps staff make sure that all medical records, medical billing and patient accounts meet strict standards. CalOptima does not keep your medical records from your doctor. If you would like copies of your medical records, please contact your doctor or primary care provider (PCP) office.

How Does CalOptima Keep Protected Health Information Safe?

Keeping your Protected Health Information (PHI) safe is very important to us. CalOptima staff members are trained to handle your PHI in a secure and private way. Our staff has agreed in writing to keep your information private. Only those who need to see your PHI to arrange or pay for covered health services are allowed to use your PHI.

Papers that have your PHI are kept securely locked in the CalOptima office. When we no longer need your PHI, these papers are shredded so that no one can read them.

We have built-in security in our computer system to keep anyone else from seeing your PHI. If your PHI is sent in an email or on an electronic device, CalOptima uses a system to scramble your PHI so that only those who are allowed to have your PHI can unlock the scramble so it can be read. For a copy of our Notice of Privacy Practices, visit our website at **www.caloptima.org** or contact CalOptima's Customer Service department.

Need Help From a Case Manager?

If you have health problems that are hard to manage, you may need help from a case manager. Case managers are nurses who can help you:

- Learn how to take care of your health
- Work with your doctors to manage your health care treatment
- Prepare a plan of care
- Solve problems with getting care

Your doctor can help you get case management services, or you can call your health network or CalOptima's Customer Service department.

Did You Know?

If you go to the emergency room, to keep your condition from getting worse, your doctor at the hospital may give you a 72-hour supply of medicine without a prior authorization. Also, your pharmacist may give you up to a 10-day supply of a medicine that was prescribed to you by your doctor at the hospital without a prior authorization.

If you are not happy with the care, service or treatment you received, you also have the right to file a complaint by doing one of these things:

- Fill out the online grievance form at www.caloptima.org
 - Call the Customer Service department at **1-714-246-8500** or toll-free at **1-888-587-8088** (TTY **711**);
 - Come into our office at 505 City Parkway West, Orange, CA 92868
 - Fill out the printed Grievance Form or send a letter to CalOptima, 505 City Parkway West, Orange, CA 92868
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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 to read the 2019–2020 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 **711**).

CalOptima Standards of Access to Care — 2020

A brief description of the access standards for CalOptima Medi-Cal 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
Initial Health Assessment (IHA) or Individual Health Education Behavioral Assessment (IHEBA)	Within 120 calendar days of Medi-Cal enrollment

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 10 days 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, Licensed Clinical Social Workers (LCSW), Marriage and Family Therapists (MFT))	Within 20 calendar days of initial visit for a specific condition

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Covered Services	Standards of Care
Follow-up Routine Care with a Physician Behavioral Health Provider	Within 30 calendar days of initial visit

To see our Standards of Access to Care, please visit www.caloptima.org and go to the Medi-Cal “Member Documents” webpage, then choose the link for “Other Important Documents.”

Member Rights and Responsibilities

Your rights

CalOptima members have these rights:

- Be treated with respect and dignity by all CalOptima, health network and provider staff
- Privacy and to have your medical information kept confidential
- Get information about CalOptima, our health networks, our providers, the services they provide and your member rights and responsibilities
- Choose a PCP within CalOptima’s network
- Get information about the qualifications of our network providers
- Talk openly with your health care providers about medically necessary treatment options, regardless of cost or benefit
- Help make decisions about your health care, including the right to say “no” to medical treatment
- Voice complaints or appeals, either verbally or in writing, about CalOptima or the care we provide
- Get oral interpretation services in the language that you understand
- Make an advance directive
- Access family planning services, Federally Qualified Health Centers, Indian Health Service Facilities, sexually transmitted disease services and emergency services outside CalOptima’s network
- Ask for a State Hearing, including information on the conditions under which your State Hearing can be expedited
- Have access to your medical record, and where legally appropriate, get copies of, update or correct your medical record
- Access minor consent services
- Get written member information at no cost in braille, large-size print a print and other formats upon request and in a timely manner appropriate for the format being requested
- Be free from any form of control or limitation used as a means of pressure, punishment, convenience or revenge
- Get information about your medical condition and treatment plan options in a way that is easy to understand
- Make suggestions to CalOptima about your member rights and responsibilities

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- Freely use these rights without negatively affecting how you are treated by CalOptima, providers or the state

Your responsibilities

CalOptima members have these responsibilities:

- Knowing, understanding and following your member handbook
- Understanding your medical needs and working with your health care providers to create your treatment plan
- Following the treatment plan, you agreed to with your health care providers
- Telling CalOptima and your health care providers what we need to know about your medical condition so we can provide care
- Making and keeping medical appointments and telling the office when you must cancel your appointment
- Learning about your medical condition and what keeps you healthy
- Taking part in health care programs that keep you healthy
- Working with and being polite to the people who are partners in your health care

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**. 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 (TTY 711)** 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 (TTY 711)**, Monday through Friday from 8 a.m. to 5 p.m. We have staff who speak your language. Visit us at **www.caloptima.org**.

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.

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

To make changes online go to the member portal at 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
- Complete your annual Health Assessment Survey

Health Management Programs

CalOptima offers health management services at NO COST to our 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** (TTY 711). We are here to help you Monday through Friday from 8 a.m. to 5 p.m. We look forward to helping you improve your health!

Program Name
Child Asthma Health Program
Adult Asthma Health Program
Diabetes Health Program
Bright Steps Maternity Health Program
Shape Your Life Childhood Obesity 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.*

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.

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

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>Get a copy of your health and claims records</p>	<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.
<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.

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<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).
<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.

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<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.
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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.

<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
<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

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>Example: A doctor sends us information about your diagnosis and treatment plan so we can arrange additional services.</p>
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<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>

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.

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<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.
<p>Comply with special laws</p>	<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.

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.

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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**
TTY: 711

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
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
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.

Nondiscrimination Notice

Discrimination is against the law. CalOptima follows Federal civil rights laws. CalOptima does not discriminate, exclude people, or treat them differently because of race, color, national origin, age, disability, or sex.

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CalOptima Provides:

- Free aids and services to people with disabilities to help them communicate better, such as:
 - ✓ Qualified sign language interpreters
 - ✓ Written information in other formats (large print, audio, accessible electronic formats, other formats)
- 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 CalOptima at **1-714-246-8500**, or toll-free at **1-888-587-8088**, Monday through Friday, from 8 a.m. to 5:30 p.m. Or, if you cannot hear or speak well, please call TTY at **711**.

How to File a Grievance

If you believe that CalOptima 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 CalOptima. You can file a grievance by phone, in writing, in person, or electronically:

- By phone: Contact CalOptima between 8 a.m. and 5:30 p.m. by calling toll-free at **1-888-587-8088**. Or, if you cannot hear or speak well, please call TTY at **711**.
- In writing: Fill out a complaint form or write a letter and send it to:
CalOptima Grievance and Appeals
505 City Parkway West
Orange, CA 92868
- In person: Visit your doctor's office or CalOptima and say you want to file a grievance.
- Electronically: Visit CalOptima's website at **www.caloptima.org**.

Office of Civil Rights

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights by phone, in writing, or electronically:

- By phone: Call **1-800-368-1019**. If you cannot speak or hear well, please call TTY **1-800-537-7697**.
- In writing: Fill out a complaint form or send a letter to:
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201

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

- Electronically: Visit the Office for Civil Rights Complaint Portal at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>.

Language Assistance

English

ATTENTION: If you speak another language, language assistance services, free of charge, are available to you. Call **1-888-587-8088** (TTY 711).

Español (Spanish)

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-888-587-8088** (TTY 711).

Tiếng Việt (Vietnamese)

CHÚ Ý: Nếu quý vị nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho quý vị. Gọi số **1-888-587-8088** (TTY 711).

Tagalog (Tagalog – Filipino)

PAUNAWA: Kung ikaw ay nagsasalita sa wikang Tagalog, may mga serbisyo sa pananalita na makakatulong sa iyo na maari mong gamitin nang walang bayad. Tumawag sa **1-888-587-8088** (TTY 711).

한국어 (Korean)

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. **1-888-587-8088** (TTY 711) 번으로 전화해 주십시오.

繁體中文 (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 **1-888-587-8088** (TTY 711)。

Հայերեն (Armenian)

ՈՒՇԱԴՐՈՒԹՅՈՒՆ՝ Եթե խոսում եք հայերեն, ապա ձեզ անվճար կարող են տրամադրվել լեզվական աջակցության ծառայություններ: Զանգահարեք **1-888-587-8088** (TTY (հեռատիպ)՝ 711).

Русский (Russian)

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните **1-888-587-8088** (телетайп 711).

(Farsi) فارسی

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با شماره **1-888-587-8088** (TTY 711) تماس بگیرید.

日本語 (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。 **1-888-587-8088** (TTY 711) まで、お電話にてご連絡ください。

Hmoob (Hmong)

LUS CEEBTOOM: Yog tias koj hais lus Hmoob, muaj cov kev pab txhais lus, pab dawb rau koj. Hu rau **1-888-587-8088** (TTY 711).

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ਪੰਜਾਬੀ (Punjabi)

ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਵੱਚਿ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। **1-888-587-8088** (TTY 711) 'ਤੇ ਕਾਲ ਕਰੋ।

العربية (Arabic)

ملحوظة: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية تتوفر لك بالمجان. اتصل على رقم **1-888-587-8088** (TTY 711).

हिंदी (Hindi)

ध्यान दें : यदि आप हिन्दी बोलते हैं, तो आपके लिए निःशुल्क भाषा सहायता सेवाएं उपलब्ध हैं। **1-888-587-8088** (TTY 711) पर कॉल करें।

ภาษาไทย (Thai)

ข้อควรคำนึง:ถ้าหากคุณพูดภาษาไทย,คุณสามารถใช้บริการความช่วยเหลือทางภาษา,โดยไม่เสียค่าใช้จ่ายใดๆได้โดย,โทร**1-888-587-8088** (TTY 711).

ខ្មែរ (Cambodian)

ចំណុចសំខាន់៖ បើសិនជាអ្នកនិយាយភាសាខ្មែរ សេវាជំនួយផ្នែកភាសាគឺមានផ្តល់ជូនលោកអ្នកដោយឥតគិតថ្លៃ។ សូមទូរស័ព្ទទៅកាន់លេខ **1-888-587-8088** (TTY 711)។

ພາສາລາວ (Lao)

ໝາຍເຫດ: ຖ້າທ່ານເວົ້າພາສາລາວ, ທ່ານສາມາດໃຊ້ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາໂດຍບໍ່ເສຍຄ່າໄດ້. ໂທຫາ **1-888-587-8088** (TTY 711).

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CalOptima
Better. Together.

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

Share Your CalOptima Stories and Memories

CalOptima is celebrating 25 years of service in Orange County this year, and we want to hear your stories! Using 25 words or less, we invite you to share a special memory about how CalOptima has helped you. Share your story, anniversary message or photo by emailing us at csu@caloptima.org. We look forward to hearing from you!

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2021 Change to Medi-Cal Pharmacy Benefit

On January 1, 2021, the Department of Health Care Services (DHCS) will change your pharmacy benefit. Your prescription medications will be covered by “Medi-Cal Rx.” DHCS is working with a new contractor (Magellan) to provide Medi-Cal Rx services.

This does not change your Medi-Cal eligibility or benefits. Starting on January 1, 2021 you will get your Medi-Cal covered prescriptions through Medi-Cal Rx instead of CalOptima.

If you have general Medi-Cal Rx questions, contact the DHCS Medi-Cal Member Help Line at 800-541-5555. For TTY call 800-430-7077 Monday through Friday from 8 a.m. to 5 p.m.