

CommuniCare Advantage Cal MediConnect Plan (Medicare-Medicaid Plan): **Summary of Benefits**



This is a summary of health services covered by CommuniCare Advantage Cal MediConnect plan for 2015. This is only a summary. Please read the Member Handbook for the full list of benefits.

- ❖ **CommuniCare Advantage Cal MediConnect Plan** is a health plan that contracts with both Medicare and Medi-Cal to provide benefits of both programs to enrollees. It is for people with both Medicare and Medi-Cal.
- ❖ Under **CommuniCare Advantage Cal MediConnect Plan** you can get your Medicare and Medi-Cal services in one health plan. A **CommuniCare Advantage Cal MediConnect Plan** care coordinator will help manage your health care needs.
- ❖ This is not a complete list. The benefit information is a brief summary, not a complete description of benefits. For more information contact the plan or read the **CommuniCare Advantage Cal MediConnect Plan** Member Handbook.
- ❖ Limitations, co-pays, and restrictions may apply. For more information, call **CommuniCare Advantage Cal MediConnect Plan** Member Services or read the **CommuniCare Advantage Cal MediConnect Plan** Member Handbook.
- ❖ Benefits, List of Covered Drugs, pharmacy and provider networks and/or copayments may change from time to time throughout the year and on January 1 of each year.
- ❖ Co-pays for prescription drugs may vary based on the level of Extra Help you receive. Please contact the plan for more details.
- ❖ You can ask for this information in other formats, such as Braille or large print. Call 1-888-244-4430. The call is free.
- ❖ You can get this information for free in other languages. Call 1-888-244-4430. The call is free. Maaari kang makakuha ng manwal na ito nang libre sa iba pang mga wika. Miyembro Serbisyo Department Tumawag sa 1-888-244-4430. Ang mga tawag ay libre. Esta información está disponible en otros idiomas y es gratis. Llame al 1-888-244-4430. La llamada es gratis. Bạn có thể nhận được thông tin này miễn phí trong các ngôn ngữ khác. Gọi 1-888-244-4430. Các cuộc gọi miễn phí. يمكنك الحصول على هذه المعلومات مجاناً في لغات أخرى. استدعاء 1-888-244-4430. المكالمات مجانية..

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If you have questions, please call **CommuniCare Advantage Cal MediConnect Plan** at **1-888-244-4430, 24 hours a day, 7 days a week**. The call is free. **For more information**, visit www.chgsd.com.



CommuniCare Advantage Cal MediConnect Plan (Medicare-Medicaid Plan): **Summary of Benefits**

The following chart lists frequently asked questions.

Frequently Asked Questions (FAQ)	Answers
What is a Cal MediConnect plan?	A Cal MediConnect Plan is an organization made up of doctors, hospitals, pharmacies, providers of long-term services, and other providers. It also has care coordinators to help you manage all your providers and services. They all work together to provide the care you need. CommuniCare Advantage Cal MediConnect Plan (Medicare-Medicaid Plan) is a Cal MediConnect Plan that provides benefits of Medi-Cal and Medicare to enrollees.
What is a CommuniCare Advantage Cal MediConnect Plan care coordinator?	A CommuniCare Advantage Cal MediConnect Plan care coordinator is one main person for you to contact. This person helps manage all your providers and services and makes sure you get what you need.
What are long-term services and supports?	Long-term services and supports are help for people who need assistance to do everyday tasks like taking a bath, getting dressed, making food, and taking medicine. Most of these services are provided at your home or in your community but could be provided in a nursing home or hospital.



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Frequently Asked Questions (FAQ)	Answers
Will you get the same Medicare and Medi-Cal benefits in CommuniCare Advantage Cal MediConnect Plan that you get now?	<p>You will get most of your covered Medicare and Medi-Cal benefits directly from CommuniCare Advantage Cal MediConnect Plan. You will work with a team of providers who will help determine what services will best meet your needs. This means that some of the services you get now may change. When you enroll in CommuniCare Advantage Cal MediConnect Plan you and your care team will work together to develop an Individualized Care Plan to address your health and support needs, reflecting your personal preferences and goals.</p> <p>Also, if you are taking any Medicare Part D prescription drugs that CommuniCare Advantage Cal MediConnect Plan does not normally cover, you can get a temporary supply and we will help you to transition to another drug or get an exception for CommuniCare Advantage Cal MediConnect Plan to cover your drug if medically necessary.</p>
Can you go to the same doctors you see now?	<p>Often that is the case. If your providers (including doctors and pharmacies) work with CommuniCare Advantage Cal MediConnect Plan and have a contract with us, you can keep going to them. Providers who have an agreement with us are “in-network.” You must use the providers in CommuniCare Advantage Cal MediConnect Plan’s network. If you need urgent or emergency care or out-of-area dialysis services, you can use providers outside of CommuniCare Advantage Cal MediConnect Plan.</p> <p>To find out if your doctors are in the plan’s network, call Member Services or read CommuniCare Advantage Cal MediConnect Plan’s <i>Provider and Pharmacy Directory</i>.</p> <p>If CommuniCare Advantage Cal MediConnect Plan is new for you, we will work with you to develop an Individualized Care Plan to address your needs. You can continue seeing the doctors you go to now for up to six (6) months for Medicare services and up twelve (12) months for Medi-Cal services.</p>



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CommuniCare Advantage Cal MediConnect Plan (Medicare-Medicaid Plan): **Summary of Benefits**

Frequently Asked Questions (FAQ)	Answers
<p>What happens if you need a service but no one in CommuniCare Advantage Cal MediConnect Plan’s network can provide it?</p>	<p>Most services will be provided by our network providers. If you need a service that cannot be provided within our network, CommuniCare Advantage Cal MediConnect Plan will pay for the cost of an out-of-network provider.</p>
<p>Where is CommuniCare Advantage Cal MediConnect Plan available?</p>	<p>The service area for this plan includes: San Diego County, California. You must live in this area to join the plan.</p>
<p>Do you pay a monthly amount (also called a premium) under CommuniCare Advantage Cal MediConnect Plan?</p>	<p>You will not pay any monthly premiums to CommuniCare Advantage Cal MediConnect Plan for your health coverage.</p>
<p>What is prior authorization?</p>	<p>Prior authorization means that you must get approval from CommuniCare Advantage Cal MediConnect Plan before you can get a specific service or drug or see an out-of-network provider. CommuniCare Advantage Cal MediConnect Plan may not cover the service or drug if you don’t get approval.</p> <p>If you need urgent or emergency care or out-of-area dialysis services, you don't need to get approval first. CommuniCare Advantage Cal MediConnect Plan can provide you with a list of services or procedures that require you to obtain prior authorization from CommuniCare Advantage Cal MediConnect Plan before the service is provided.</p>



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Frequently Asked Questions (FAQ)	Answers
What is a referral?	A referral means that your primary care provider must give you approval to see someone that is not your primary care provider. If you don't get approval, CommuniCare Advantage Cal MediConnect Plan may not cover the services. There are certain specialists in which you do not need a referral, such as women's health specialists. For more information on when a referral is necessary, see the Member Handbook.
What is Extra Help?	Extra Help is a Medicare program that helps reduce your prescription drug program costs such as copays. Your prescription drug copays under CommuniCare Advantage Cal MediConnect Plan already include the amount of Extra Help you qualify for. For more information about Extra Help, contact your local Social Security Office, or call Social Security at 1-800-772-1213. TTY users should call 1-800-325-0778.



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Frequently Asked Questions (FAQ)	Answers
Who should you contact if you have questions or need help?	<p>If you have general questions or questions about our plan, services, billing, or member cards, please call CommuniCare Advantage Cal MediConnect Plan, Member Services:</p> <p>CALL 1-888-244-4430.</p> <p>Calls to this number are free. Staff is available 24 hours a day, 7 days a week. You can ask also for this information in other formats, such Braille or large print.</p> <p>Member Services also has free language interpreter services available for people who do not speak English.</p> <p>You can get this information for free in other languages. Call 1-888-244-4430. The call is free. Esta información está disponible en otros idiomas y es gratis. Llame al 1-888-244-4430. La llamada es gratis. Bạn có thể nhận được thông tin này miễn phí trong các ngôn ngữ khác. Gọi 1-888-244-4430. Các cuộc gọi miễn phí. يمكنك الحصول على هذه المعلومات مجاناً في لغات أخرى. استدعاء 1-888-244-4430. المكالمات مجانية..</p> <p>TTY 1-855-266-4584.</p> <p>This number is for people who have hearing or speaking problems. You must have special telephone equipment to call it.</p> <p>Calls to this number are free. Staff is available 24 hours a day, 7 days a week.</p>



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Frequently Asked Questions (FAQ)	Answers
Who should you contact if you have questions or need help? (continued)	<p>If you have questions about your health, please call the Telephone Advised Nurse line.</p> <p>CALL 1-800-647-6966.</p> <p>Calls to this number are free. Staff is available 24 hours a day, 7 days a week. We can also give you this information in Braille, in large print or other alternate formats if you need it.</p> <p>Member Services also has free language interpreter services available for people who do not speak English.</p> <p>TTY 1-855-266-4584.</p> <p>Calls to this number are free. Staff is available 24 hours a day, 7 days a week.</p> <hr/> <p>If you need immediate behavioral health services, please call the CommuniCare Advantage Cal MediConnect Plan, Behavioral Health Services Line.</p> <p>CALL 1-800-404-3332.</p> <p>Calls to this number are free. Staff is available 24 hours a day, 7 days a week. We can also give you this information in Braille, in large print or other alternate formats if you need it.</p> <p>Member Services also has free language interpreter services available for people who do not speak English.</p> <p>TTY 1-855-266-4584</p> <p>This number is for people who have hearing or speaking problems. You must have special telephone equipment to call it.</p> <p>Calls to this number are free. Staff is available 24 hours a day, 7 days a week.</p>



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The following chart is a quick overview of what services you may need, your costs and rules about the benefits.

Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions, & benefit information (rules about benefits)
You want to see a doctor	Visits to treat an injury or illness	\$0	Authorization rules may apply.
	Wellness visits, such as a physical	\$0	Authorization rules may apply.
	Transportation to a doctor's office	\$0	Authorization rules may apply.
	Specialist care	\$0	Authorization rules may apply.
	Care to keep you from getting sick, such as flu shots	\$0	Authorization rules may apply.
	"Welcome to Medicare" preventive visit (one time only)	\$0	Authorization rules may apply.
You need medical tests	Lab tests, such as blood work	\$0	Authorization rules may apply.
	X-rays or other pictures, such as CAT scans	\$0	Authorization rules may apply.

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Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions, & benefit information (rules about benefits)
	Screening tests, such as tests to check for cancer	\$0	Authorization rules may apply.



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Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>You need drugs to treat your illness or condition</p>	<p>Generic drugs (no brand name)</p>	<p>\$0 for a 31- day supply. \$0 for a three-month (93-day) supply.</p>	<p><i>There may be limitations on the types of drugs covered. Please see CommuniCare Advantage Cal MediConnect Plan’s List of Covered Drugs (Drug List) for more information.</i></p> <p>CommuniCare Advantage Cal MediConnect Plan uses a formulary. The plan will send you the formulary. You can also see the formulary at www.chgsd.com.</p> <p>The plan may require you to first try one drug to treat your condition before it will cover another drug for that condition. Some drugs have quantity limits.</p> <p>Your provider must get prior authorization for CommuniCare Advantage Cal MediConnect Plan for certain drugs.</p> <p>If you request a formulary exception for a drug and CommuniCare Advantage Cal MediConnect Plan approves the exception, you will pay the Brand Drugs cost sharing for that drug.</p> <p>The plan offers national in-network prescription coverage (i.e., this would include 50 states and the District of Columbia). This means that you will pay the same cost-sharing amount for your prescription drugs if you get them at an in-network pharmacy outside of the plan’s service area (for instance when you travel). You may have to pay more than your normal cost-sharing amount if you get your drugs at an out-of-network pharmacy. In addition, you will likely have to pay the pharmacy’s full charge for the drug and submit documentation to receive reimbursement from CommuniCare Advantage Cal MediConnect Plan.</p>

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Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>You need drugs to treat your illness or condition (continued)</p>	<p>Brand name drugs</p>	<p>Depending on your income and institutional status, you pay the following for a 31 or a three-month supply (93-day):</p> <p>Brand name drugs treated as generic, either:</p> <p>\$0 co-pay; or \$1.20 co-pay; or \$2.65 co-pay</p> <p>For all other drugs, either:</p> <p>\$0 co-pay; or \$3.60 co-pay; or \$6.60 co-pay</p> <p>Co-pays for prescription drugs may vary based on the level of Extra Help you receive. Please contact the plan for more details.</p>	<p><i>There may be limitations on the types of drugs covered. Please see CommuniCare Advantage Cal MediConnect Plan's List of Covered Drugs (Drug List) for more information.</i></p> <p>CommuniCare Advantage Cal MediConnect Plan uses a formulary. The plan will send you the formulary. You can also see the formulary at www.chgsd.com. The plan may require you to first try one drug to treat your condition before it will cover another drug for that condition. Some drugs have quantity limits.</p> <p>Your provider must get prior authorization for CommuniCare Advantage Cal MediConnect Plan for certain drugs.</p> <p>If you request a formulary exception for a drug and CommuniCare Advantage Cal MediConnect Plan approves the exception, you will pay the Brand Drugs cost sharing for that drug.</p> <p>The plan offers national in-network prescription coverage (i.e., this would include 50 states and the District of Columbia). This means that you will pay the same cost-sharing amount for your prescription drugs if you get them at an in-network pharmacy outside of the plan's service area (for instance when you travel). You may have to pay more than your normal cost-sharing amount if you get your drugs at an out-of-network pharmacy. In addition, you will likely have to pay the pharmacy's full charge for the drug and submit documentation to receive reimbursement from CommuniCare Advantage Cal MediConnect Plan.</p>

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Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions, & benefit information (rules about benefits)
<p>You need drugs to treat your illness or condition (continued)</p>	<p>Over-the-counter drugs</p>	<p>\$0 for a 31-day supply \$0 for a three-month (93-day) supply</p>	<p><i>There may be limitations on the types of drugs covered. Please see CommuniCare Advantage Cal MediConnect Plan's List of Covered Drugs (Drug List) for more information.</i></p> <p>CommuniCare Advantage Cal MediConnect Plan uses a formulary. The plan will send you the formulary. You can also see the formulary at www.chgsd.com.</p> <p>The plan may require you to first try one drug to treat your condition before it will cover another drug for that condition. Some drugs have quantity limits.</p> <p>Your provider must get prior authorization for CommuniCare Advantage Cal MediConnect Plan for certain drugs.</p> <p>If you request a formulary exception for a drug and CommuniCare Advantage Cal MediConnect Plan approves the exception, you will pay the Brand Drugs cost sharing for that drug.</p> <p>The plan offers national in-network prescription coverage (i.e., this would include 50 states and the District of Columbia). This means that you will pay the same cost-sharing amount for your prescription drugs if you get them at an in-network pharmacy outside of the plan's service area (for instance when you travel). You may have to pay more than your normal cost-sharing amount if you get your drugs at an out-of-network pharmacy. In addition, you will likely have to pay the pharmacy's full charge for the drug and submit documentation to receive reimbursement from CommuniCare Advantage Cal MediConnect Plan.</p>

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Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions, & benefit information (rules about benefits)
	Medicare Part B prescription drugs	\$0 annual deductible for Medicare Part B drugs \$0 co-pay for Medicare Part B drugs in and out-of-network	Authorization rules may apply. Part B drugs include drugs given by your doctor in his or her office, some oral cancer drugs, and some drugs used with certain medical equipment. Read the Member Handbook for more information on these drugs.
You need therapy after a stroke or accident	Occupational, physical, or speech therapy	\$0	
You need emergency care	Emergency room services	\$0	Emergency room services are provided Out of Network and without prior authorization.
	Ambulance services	\$0	
	Urgent care	\$0	Urgent care services are provided Out of Network and without prior authorization.

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Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions, & benefit information (rules about benefits)
You need hospital care	Hospital stay	\$0	Authorization rules may apply.
	Doctor or surgeon care	\$0	Authorization rules may apply.
You need help getting better or have special health needs	Rehabilitation services	\$0	Authorization rules may apply.
	Medical equipment for home care	\$0	Authorization rules may apply.
	Skilled nursing care	\$0	Authorization rules may apply.
You need eye care	Eye exams	\$0	Authorization rules may apply.
	Glasses or contact lenses	\$0	Authorization rules may apply.
You need hearing or auditory services	Hearing screenings	\$0	Authorization rules may apply.
	Hearing aids	\$0	Authorization rules may apply.

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Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions, & benefit information (rules about benefits)
You have a chronic condition, such as diabetes or heart disease	Services to help manage your disease	\$0	Authorization rules may apply.
	Diabetes supplies and services	\$0	Authorization rules may apply.
You have a mental health condition	Mental or behavioral health services	\$0	Authorization rules may apply.
You have a substance abuse problem	Substance abuse services	\$0	Authorization rules may apply.
You need long-term mental health services	Inpatient care for people who need mental health care	\$0	Authorization rules may apply.
You need durable medical equipment (DME)	Wheelchairs	\$0	Authorization rules may apply.
	Canes	\$0	Authorization rules may apply.
	Crutches	\$0	Authorization rules may apply.
	Walkers	\$0	Authorization rules may apply.

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Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions, & benefit information (rules about benefits)
	Oxygen	\$0	Authorization rules may apply.
You need help living at home	Meals brought to your home	\$0	Authorization rules may apply.
	Home services, such as cleaning or housekeeping	\$0	Authorization rules may apply.
	Changes to your home, such as ramps and wheelchair access	\$0	Authorization rules may apply.
	Personal care assistant (You may be able to employ your own assistant. Call Member Services for more information.)	\$0	Authorization rules may apply.
	Training to help you get paid or unpaid jobs	\$0	Authorization rules may apply.
You need help living at home	Home health care services	\$0	Authorization rules may apply.



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Health need or problem	Services you may need	Your costs for <u>in-network</u> providers	Limitations, exceptions, & benefit information (rules about benefits)
(continued)	Services to help you live on your own	\$0	Authorization rules may apply.
	Adult day services or other support services	\$0	Authorization rules may apply.
You need a place to live with people available to help you	Assisted living or other housing services	\$0	Authorization rules may apply.
	Nursing home care	\$0	Authorization rules may apply.
Your caregiver needs some time off	Respite care	\$0	Authorization rules may apply.



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Other services CommuniCare Advantage Cal MediConnect Plan covers

Other services CommuniCare Advantage Cal MediConnect Plan covers (This is not a complete list. Call Member Services or read the Member Handbook to find out about other covered services.)	
Worldwide emergency care coverage	\$0 co-pay
Transportation for 30 one way	\$0 co-pay

Services CommuniCare Advantage Cal MediConnect Plan does not cover

Services CommuniCare Advantage Cal MediConnect Plan does <u>not</u> cover (This is not a complete list. Call Member Services to find out about other excluded services.)	
Drugs used to promote fertility	
Drugs for cosmetic purposes or for hair growth	
Drugs used to treat erectile dysfunction	
Acupuncture and other Alternative Therapies	



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Your rights as a member of the plan

As a member of **CommuniCare Advantage Cal MediConnect Plan**, you have certain rights. You can exercise these rights without being punished. You can also use these rights without losing your health care services. We will tell you about your rights at least once a year. For more information on your rights, please read the Member Handbook. Your rights include, but are not limited to, the following:

- **You have a right to respect, fairness and dignity.** This includes:
 - » The right to get covered services without concern about race, ethnicity, national origin, religion, gender, age, mental or physical disability, sexual orientation, genetic information, ability to pay, or ability to speak English.
 - » The right to request information in other formats (e.g., audio CD-ROM, large print, cassette, Braille).
 - » The right to be free from any form of restraint or seclusion.
 - » The right not to be billed by providers.
 - » The right to have your questions and concerns answered completely and courteously.

- **You have the right to get information about your health care.** This includes information on treatment and your treatment options. This information should be in a format you can understand. These rights include getting information on:
 - » Description of the services we cover.
 - » How to get services.
 - » How much services will cost you.
 - » Names of health care providers and care managers.

- **You have the right to make decisions about your care, including refusing treatment.**
This includes the right:
 - » To choose a Primary Care Provider (PCP) and you can change your PCP at any time.
 - » To see a women's health care provider without a referral.



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- » To get your covered services and drugs quickly.
 - » To know about all treatment options, no matter what they cost or whether they are covered.
 - » To refuse treatment, even if your doctor advises against it.
 - » To stop taking medicine.
 - » To ask for a second opinion. **CommuniCare Advantage Cal MediConnect Plan** will pay for the cost of your second opinion visit.
 - » To create and apply an advance directive, such as a will or health care proxy.
- **You have the right to timely access to care that does not have any communication or physical access barriers.** This includes the right to:
 - » Get medical care timely.
 - » Get in and out of a health care provider's office. This means barrier free access for people with disabilities, in accordance with the Americans with Disabilities Act.
 - » Have interpreters to help you communicate with your doctors and your health plan. Call **1-888-244-4430** if you need help with this service.
 - **You have the right to seek emergency and urgent care when you need it.** This means:
 - » You have the right to get emergency services, 24 hours a day, seven days a week, without prior approval in an emergency.
 - » You have the right to see an out of network urgent or emergency care provider, when necessary.
 - **You have a right to confidentiality and privacy.** This includes:
 - » The right to ask for and receive a copy of your medical records in a way that you can understand and to ask for your records to be changed or corrected.
 - » The right to have your personal health information kept private.



If you have questions, please call **CommuniCare Advantage Cal MediConnect Plan** at **1-888-244-4430**, 24 hours a day, 7 days a week. The call is free. For more information, visit www.chgsd.com.

CommuniCare Advantage Cal MediConnect Plan (Medicare-Medicaid Plan): **Summary of Benefits**

- **You have the right to make complaints about your covered services or care.** This includes the right to:
 - » File a complaint or grievance against us or our providers. You also have the right to appeal certain decisions made by us or our providers.
 - » Ask for an Independent Medical Review of Medi-Cal services or items that are medical in nature from the California Department of Managed Health Care.
 - » Ask for a state fair hearing from the State of California.
 - » Get a detailed reason for why services were denied.

For more information about your rights, you can read the **CommuniCare Advantage Cal MediConnect Plan** Member Handbook. If you have questions, you can also call **CommuniCare Advantage Cal MediConnect Plan**, Member Services.

If you have a complaint or think we should cover something we denied

If you have a complaint or think **CommuniCare Advantage Cal MediConnect Plan** should cover something we denied, call **CommuniCare Advantage Cal MediConnect Plan** at 1-888-244-4430. You may be able to appeal our decision.

For questions about complaints and appeals, you can read Chapter 9 of the **CommuniCare Advantage Cal MediConnect Plan** Member Handbook. You can also call **CommuniCare Advantage Cal MediConnect Plan**, Member Services.

As a member of CommuniCare Advantage Cal MediConnect Plan, you have the right to request an organization determination, which includes the right to file an **appeal** or reconsideration if we deny coverage for an item or service, and the right to file a **grievance**. You have the right to request an organization determination if you want us to provide or pay for an item or service that you believe should be covered. If we deny coverage for your requested item or service, you have the right to **appeal** and ask us to review our initial determination. You may ask us for an expedited (fast) reconsideration or appeal if you believe that waiting for a decision could seriously put your life or health at risk, or affect your ability to regain maximum function. If your doctor makes or supports the expedited request, we must expedite our decision. Finally, you have the right to file a **grievance** with us if you have any type of problem with us or one of our network providers that does not involve a coverage decision for an item or service. If your problem involves quality of care, you also have the right to file a **grievance** with the Quality Improvement Organization.



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CommuniCare Advantage Cal MediConnect Plan (Medicare-Medicaid Plan): **Summary of Benefits**

If you suspect fraud

Most health care professionals and organizations that provide services are honest. Unfortunately, there may be some who are dishonest.

If you think a doctor, hospital, or other pharmacy is doing something wrong, please contact us.

- Call us at **CommuniCare Advantage Cal MediConnect Plan**, Member Services. Phone numbers are on the cover of this summary.
- Or, call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. You can call these numbers for free, 24 hours a day, 7 days a week.



If you have questions, please call **CommuniCare Advantage Cal MediConnect Plan** at 1-888-244-4430, 24 hours a day, 7 days a week. The call is free. **For more information**, visit www.chgsd.com.