

CommuniCare Advantage Cal MediConnect Plan (Medicare-Medicaid Plan):

Summary of Benefits

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Introduction

This document is a brief summary of the benefits and services covered by CommuniCare Advantage Cal MediConnect Plan. It includes answers to frequently asked questions, important contact information, an overview of benefits and services offered, and information about your rights as a member of CommuniCare Advantage Cal MediConnect Plan. Key terms and their definitions appear in alphabetical order in the last chapter of the *Member Handbook*.

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If you have questions, please call CommuniCare Advantage Cal MediConnect Plan at 1-888-244-4430, TTY users should call 1-855-266-4584, we are available to assist you 24 hours a day, 7 days a week. The call is free. **For more information**, visit www.chgsd.com.

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A. Disclaimers



This is a summary of health services covered by CommuniCare Advantage Cal MediConnect Plan for 2019. 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.
- ❖ CommuniCare Advantage Cal MediConnect Plan is a Medi-Cal with a Medicare contract. Enrollment in CommuniCare Advantage Cal MediConnect Plan depends on contract renewal.
- ❖ Medicare evaluates plans based on a 5-star rating system. Star Ratings are calculated each year and may change from one year to the next.
- ❖ Discrimination is against the law. Community Health Group follows Federal civil rights laws. Community Health Group does not discriminate, exclude people, or treat them differently because of race, color, national origin, age, disability, or sex.
- ❖ 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 personal 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 *Member Handbook*.
- ❖ Limitations, copays, and restrictions may apply. For more information, call CommuniCare Advantage Cal MediConnect Plan Customer Service or read the CommuniCare Advantage Cal MediConnect Plan Member Handbook.
- ❖ The List of Covered Drugs and/or pharmacy and provider networks may change throughout the year. We will send you a notice before we make a change that affects you.



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- ❖ Benefits and/or copays may change on January 1 of each year.
- ❖ Copays for prescription drugs may vary based on the level of Extra Help you get. Please contact the plan for more details.
- ❖ ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call Customer Service at 1-888-244-4430, we are open 24 hours a day, 7 days a week to assist you. TTY users should call 1-855-266-4584. The call is free.
- ❖ ATENCIÓN: Si usted habla español, los servicios de asistencia de idiomas están disponibles para usted de manera gratuita. Llame a Servicio al Cliente al 1-888-244-4430, estamos disponibles para ayudarlo las 24 horas del día, los 7 días de la semana. Los usuarios de TTY deben llamar al 1-855-266-4584. La llamada es gratis.
- ❖ CHÚ Ý: Nếu bạn nói tiếng việt, các dịch vụ trợ giúp ngôn ngữ, miễn phí, có sẵn cho bạn. Gọi Dịch Vụ Khách Hàng theo số 1-888-244-4430, chúng tôi mở cửa 24 giờ một ngày, 7 ngày một tuần để giúp bạn. Người dùng TTY nên gọi 1-855-266-4584. Cuộc gọi miễn phí.
- ❖ ATENSYON: Kung nagsasalita ka ng tagalog, ang mga serbisyo sa tulong ng wika, nang libre, ay magagamit mo. Tawagan ang Customer Service sa 1-888-244-4430, bukas kami ng 24 oras sa isang araw, 7 araw sa isang linggo upang tulungan ka. Ang mga gumagamit ng TTY ay dapat tumawag sa 1-855-266-4584. Ang tawag ay libre.

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إذا كنت تتحدث العربية، خدمات المساعدة اللغوية، مجاناً، متاحة لك. اتصل بخدمة العملاء على الرقم 1-888-244-4430، ونحن منفتحون 24 ساعة في اليوم، 7 أيام في الأسبوع لمساعدتك. يجب على مستخدمي تي الاتصال بالرقم 1-855-266-4584. المكالمات مجانية.

- ❖ You can get this document for free in other formats, such as large print, braille or audio. Call Customer Service at 1-888-244-4430, TTY users should call 1-855-266-4584. The call is free.
- ❖ If you prefer to get all our materials, now and in the future, in a language other than English or in an alternate format such as Braille, CD audio or large print, please call Customer Service Department at 1-888-244-4430, TTY users should call 1-855-266-4584. We are open to assist you 24 hours a day, 7 days a week. The call is free.



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B. Frequently Asked Questions

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 personal 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 personal care coordinator?	A CommuniCare Advantage Cal MediConnect Plan personal 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 (LTSS)?	<p>LTSS are for beneficiaries 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.</p> <p>LTSS include the following programs: Multipurpose Senior Services Program (MSSP), Community-Based Adult Services (CBAS), and long-term skilled nursing care provided by Nursing Facilities (NF).</p>



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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.</p> <p>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. 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>



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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.</p> <ul style="list-style-type: none">• 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’s plan. <p>To find out if your doctors are in the plan’s network, call Customer Service 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 12 months.</p>
What happens if you need a service but no one in CommuniCare Advantage Cal MediConnect Plan’s network can provide it?	<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>
Where is CommuniCare Advantage Cal MediConnect Plan available?	<p>The service area for this plan includes: San Diego County. You must live in this area to join the plan.</p>



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Do you pay a monthly amount (also called a premium) under CommuniCare Advantage Cal MediConnect Plan?	You will not pay any monthly premiums to CommuniCare Advantage Cal MediConnect Plan for your health coverage.
What is prior authorization?	<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 do not get approval.</p> <p>If you need urgent or emergency care or out-of-area dialysis services, you do not 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> <p>See Chapter 3, Section D, page 44 of the <i>Member Handbook</i> to learn more about prior authorization. See the Benefits Chart in Chapter 4 of the <i>Member Handbook</i> to learn which services require a prior authorization.</p>



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Frequently Asked Questions (FAQ)	Answers
What is a referral?	<p>A referral means that your primary care (PCP) must give you approval before you can see someone that is not your PCP or use other providers in the plan's network. If you don't get approval, CommuniCare Advantage Cal MediConnect Plan may not cover the services. You don't need a referral to see certain specialists, such as women's health specialists.</p> <p>See Chapter 3, Section D, page 43 of the <i>Member Handbook</i> to learn more about when you will need to get a referral from your PCP.</p>
What is Extra Help?	<p>Extra Help is a Medicare program that helps people with limited incomes and resources reduce Medicare Part D prescription drug costs such as premiums, deductibles, and copays. Extra Help is also called the "Low-Income Subsidy," or "LIS."</p> <p>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.</p>



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Frequently Asked Questions (FAQ)	Answers
Who should you contact if you have questions or need help? (continued on the next page)	<p>If you have general questions or questions about our plan, services, service area, billing, or Member ID cards, please call CommuniCare Advantage Cal MediConnect Plan Customer Service:</p> <p>CALL 1-888-244-4430</p> <p>Calls to this number are free. We are available to assist you 24 hours a day, 7 days a week. You can ask to get this information in other formats, such as Braille, CD audio or large print.</p> <p>Customer Service 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. We are available to assist you 24 hours a day, 7 days a week.</p>



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Who should you contact if you have questions or need help? (continued from previous page and continued on the next page)

If you have questions about your health, please call the Telephone Advice Nurse line:

CALL 1-800-647-6966

Calls to this number are free. We are available to assist you 24 hours a day, 7 days a week. You can ask also for this information in other formats such as Braille or large print.

TTY 1-855-266-4584

This number is for people who have hearing or speaking problems. You must have special telephone equipment to call it.

Calls to this number are free. We are available to assist you 24 hours a day, 7 days a week.

If you need immediate behavioral health services, please call the Behavioral Health Crisis Line:

CALL 1-800-404-3332

Calls to this number are free. We are available to assist you 24 hours a day, 7 days a week. You can ask also for this information in other formats such as Braille, CD Audio or large print.

TTY 1-855-266-4584

This number is for people who have hearing or speaking problems. You must have special telephone equipment to call it.



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Frequently Asked Questions (FAQ)	Answers
Who should you contact if you have questions or need help? (continued from previous page)	Calls to this number are free. We are available to assist you 24 hours a day, 7 days a week.

C. Overview of Services

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 in-network 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.



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Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
	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.
	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 in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need drugs to treat your illness or condition (This service is continued on the next page)	Generic drugs (no brand name)	\$0 for a 31-day supply	<p>There may be limitations on the types of drugs covered. Please see CommuniCare Advantage Cal MediConnect Plan's <i>List of Covered Drugs</i> (Drug List) for more information.</p> <p><i>For some drugs, you can get a long-term supply (also called an "extended supply") when you fill your prescription. A long-term supply is up to a 93 day supply. It costs you the same as a one-month supply and you can obtain these at a retail pharmacy or via mail order pharmacy.</i></p>



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Health need or problem	Services you may need	Your costs for in-network 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-day or a 93-day supply. Brand name drugs treated as generic: \$0 co-pay For all other drugs, either: \$0 co-pay; or \$3.80, copay; or \$8.50 copay. Copays for prescription drugs may vary based on the level of Extra Help you get. Please contact the plan for more details.</p>	<p>There may be limitations on the types of drugs covered. Please see CommuniCare Advantage Cal MediConnect Plan's <i>List of Covered Drugs (Drug List)</i> for more information.</p> <p>For some drugs, you can get a long-term supply (also called an "extended supply") when you fill your prescription. A long-term supply is up to a 93 day supply. It costs you the same as a one-month supply and you can obtain these at a retail pharmacy or via mail order pharmacy.</p>



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Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need drugs to treat your illness or condition (continued)	Over-the-counter drugs	\$0 for a 31-day supply \$0 for a 93-day supply	There may be limitations on the types of drugs covered. Please see CommuniCare Advantage Cal MediConnect Plan's <i>List of Covered Drugs (Drug List)</i> for more information.
	Medicare Part B prescription drugs	\$0	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 <i>Member Handbook</i> for more information on these drugs.
You need therapy after a stroke or accident	Occupational, physical, or speech therapy	\$0	Authorization rules may apply.
You need emergency care (This service is continued on the next page)	Emergency room services	\$0	Emergency room services are also provided Out Of Network (OON) and without prior authorization.
	Ambulance services	\$0	Authorization is not required for emergency transportation.



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Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need emergency care (continued)	Urgent care	\$0	You may get urgent care services whenever you need it, anywhere in the United States or its territories, without prior authorization.
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.
	Services to help manage your disease	\$0	Authorization rules may apply.



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Health need or problem	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You have a chronic condition, such as diabetes or heart disease	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.
	Nebulizers	\$0	Authorization rules may apply.
	Crutches	\$0	Authorization rules may apply.



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	Walkers	\$0	Authorization rules may apply.
	Oxygen equipment and supplies	\$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.
	Training to help you get paid or unpaid jobs	\$0	Authorization rules may apply.
	Home health care services	\$0	Authorization rules may apply.
	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.



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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.

D. Other services that CommuniCare Advantage Cal MediConnect Plan covers

This is not a complete list. Call Customer Service or read the *Member Handbook* to find out about other covered services.

Other services covered by CommuniCare Advantage Cal MediConnect Plan	Your costs for in-network providers
Up to \$200.00 for eyeglasses (frames and lenses) or contact lenses	\$0



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Monthly gym membership if authorized by a nurse or case manager	\$0
Home adaptation (maximum of \$800 per year)	\$0


E. Services covered outside of CommuniCare Advantage Cal MediConnect Plan

This is not a complete list. Call Customer Service to find out about other services not covered by CommuniCare Advantage Cal MediConnect Plan but available through Medicare or Medi-Cal.

Other services covered by Medicare or Medi-Cal	Your costs
Some hospice care services	\$0
California Community Transitions (CCT) pre-transition coordination services and post-transition services	\$0
Certain dental services, such as X-rays, cleanings, fillings, root canals, extractions, crowns, and dentures	Services that are covered under Denti-Cal, the Medi-Cal dental program, are not chargeable to you. However, you are responsible for your share of the cost amount, if applicable. You are responsible for paying for services not covered by your plan or by Denti-Cal.

F. Services that CommuniCare Advantage Cal MediConnect Plan , Medicare, and Medi-Cal do not cover

This is not a complete list. Call Customer Service to find out about other excluded services.

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Services not covered by CommuniCare Advantage Cal MediConnect Plan, Medicare, or Medi-Cal

Routine foot care

Full-time nursing care in your home

A private room in the hospital, except when medically necessary

Reversal of sterilization procedures and non-prescription contraceptive supplies

G. 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
 - Get information in other formats (e.g., large print, braille, and/or audio)
 - Be free from any form of physical restraint or seclusion
 - Not be billed by network providers
 - 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



If you have questions, please call CommuniCare Advantage Cal MediConnect Plan at 1-888-244-4430, TTY users should call 1-855-266-4584, we are available to assist you 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):

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- **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 during the year
 - See a women's health care provider without a referral
 - Get your covered services and drugs quickly
 - Know about all treatment options, no matter what they cost or whether they are covered
 - Refuse treatment, even if your doctor advises against it
 - Stop taking medicine
 - Ask for a second opinion. CommuniCare Advantage Cal MediConnect Plan will pay for the cost of your second opinion visit.
 - 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 timely medical care
 - 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, TTY users should call 1-855-266-4584
- **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
 - 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 get a copy of your medical records in a way that you can understand and to ask for your records to be changed or corrected
 - Have your personal health information kept private
- **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



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CommuniCare Advantage Cal MediConnect Plan (Medicare-Medicaid Plan):

Summary of Benefits

- 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 Customer Service.

H. How to file a complaint or appeal a denied service

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, TTY users should call 1-855-266-4584. 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 Customer Service.

You may file a grievance by contacting the CommuniCare Advantage Cal MediConnect Customer Service Department toll free at 1-888-244-4430 (TTY 1-855-266-4584). CommuniCare Advantage Cal MediConnect Plan representatives are available 24 hours a day, 7 days a week, including holidays. You may opt to submit your Grievance in a letter and send it directly to CommuniCare Advantage Cal MediConnect Plan at the following address:

CommuniCare Advantage Cal MediConnect Plan
Attention: Grievances and Appeals Manager
2420 Fenton Street, Suite 100
Chula Vista, CA 91914
Or fax to (619) 407-4646

I. What to do 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.



If you have questions, please call CommuniCare Advantage Cal MediConnect Plan at 1-888-244-4430, TTY users should call 1-855-266-4584, we are available to assist you 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

- Call us at CommuniCare Advantage Cal MediConnect Plan Customer Service. 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.
- You can also call the Department of Health Care Services (DHCS) Medi-Cal Fraud Hotline at 1-800-822-6222.



If you have questions, please call CommuniCare Advantage Cal MediConnect Plan at 1-888-244-4430, TTY users should call 1-855-266-4584, we are available to assist you 24 hours a day, 7 days a week. The call is free. **For more information**, visit www.chgsd.com.