



**L.A. Care**  
HEALTH PLAN®

# **L.A. Care** *Cal MediConnect Plan* *(Medicare-Medicaid Plan)*

**2018**

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Summary of Benefits



## This is a summary of health services covered by L.A. Care Cal MediConnect Plan (Medicare-Medicaid Plan) for 2018. This is only a summary. Please read the *Member Handbook* for the full list of benefits.

- L.A. Care Cal MediConnect Plan (Medicare-Medicaid 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 L.A. Care Cal MediConnect Plan you can get your Medicare and Medi-Cal services in one health plan. A L.A. Care Cal MediConnect Plan Care Manager 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 L.A. Care Cal MediConnect Plan Member Services or read the L.A. Care 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.
- Benefits and/or copays may change on January 1 of each year.
- Co-pays for prescription drugs may vary based on the level of Extra Help you get. Please contact the plan for more details.
- If you speak English, language assistance services, free of charge, are available to you. Call 1-888-522-1298 (TTY: 711), 24 hours a day, 7 days a week, including holidays. The call is free.
- Si usted habla español, los servicios de asistencia con el idioma estarán disponibles para usted sin costo. Llame al **1-888-522-1298** (TTY: 711), las 24 horas del día, los 7 días de la semana, incluso los días festivos. La llamada es gratuita.
- 如果您說中文，您可免費獲得語言協助服務。請致電 **1-888-522-1298** (TTY: 711)，服務時間為每週 7 天，每天 24 小時（包含假日）。這是免費電話。
- Nếu quý vị nói Tiếng Việt, hiện có các dịch vụ hỗ trợ ngôn ngữ miễn phí cho quý vị. Gọi **1-888-522-1298** (TTY: 711), 24 giờ một ngày, 7 ngày một tuần, kể cả các ngày lễ. Cuộc gọi là miễn phí.
- 한국어를 사용하실 경우 언어지원서비스를 무료로 이용하실 수 있습니다. 연중무휴로 이용할 수 있는 **1-888-522-1298** (TTY: 711) 번으로 전화하십시오. 통화료는 무료입니다.
- Եթե խոսում եք հայերեն, լեզվական աջակցության ծառայությունները հասանելի են Ձեզ անվճար: Զանգահարեք **1-888-522-1298** հեռախոսահամարով (TTY՝ 711), օրը 24 ժամ, շաբաթը 7 օր, ներառյալ տոն օրերը: Հեռախոսագանգն անվճար է:



**If you have questions**, please call L.A. Care Cal MediConnect Plan at **1-888-522-1298** (TTY: 711), 24 hours a day, 7 days a week, including holidays. The call is free. **For more information**, visit [www.calmedicconnectla.org](http://www.calmedicconnectla.org).

• **1-888-522-1298** ىل لعل صتا .أناجم ،كلا تر فوتم ،تئيوغلا ؤدعاسملا تامدخ نإف ،تئيرعلا ؤغلا شذحتت تنك اذا .تيناجم ؤملاكملا هذھ .تلاطعلا مايا كلذ ي فامب ،عوبسلاا ي فاميا 7 و مويلما ي فةعاس 24 (TTY: 711)

- Если вы говорите по-русски, вы можете воспользоваться бесплатными услугами переводчика. Звоните по телефону **1-888-522-1298 (TTY: 711)**, круглосуточно, без выходных, включая праздничные дни. Звонок бесплатный.
- 日本語のサービスを無料でご利用いただけます。**1-888-522-1298 (TTY: 711)** までお電話ください。このサービスは年中無休(祝祭日を含む)でご利用いただけます。通話料は無料です。
- مامت رد ديناوتى م .دراد رارة امشر رايئخا رد ناگيار روطب نابز نميمز رد ككمك تامدخ ،دينك م تبحص ي سراف نابز مبرگا سامت .ديريگب سامت (TTY: 711) **1-888-522-1298** ابل يطعت ي اهزور ي تد ،متفه زور 7 و زور منابش ت عاس 24 دشاب ي م ناگيار .
- अगर आप हिंदी बोलते हैं, तो मुफ्त में भाषा सहायता सेवाएं, आपके लिए उपलब्ध हैं। अवकाश के दिनों समेत, दिन के 24 घंटे, सप्ताह के 7 दिन **1-888-522-1298 (TTY: 711)** पर कॉल करें। कॉल नि:शुल्क है।
- បើអ្នកនិយាយភាសា ខ្មែរ, សេវាជំនួយផ្អាកភាសា គ្មានបង្ខំថ្លៃ គឺមានស្រាប់ជួយអ្នក។ សូមទូរស័ព្ទទៅ **1-888-522-1298 (TTY: 711)**, 24 ម៉ោងក្នុងមួយថ្ងៃ 7 ថ្ងៃក្នុងមួយសប្តាហ៍រួមទាំងថ្ងៃឈប់ស្រមាក។ ការហៅទូរស័ព្ទនេះគឺមិនគិតថ្លៃទេ។
- Kung nagsasalita ka ng Tagalog, magagamit mo ang mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa **1-888-522-1298 (TTY: 711)**, 24 na oras sa isang araw, 7 araw sa isang linggo, kabilang ang mga piyesta opisyal. Libre ang pagtawag.
- หากท่านพูดภาษาไทย เรามีบริการช่วยเหลือด้านภาษาให้คุณโดยไม่เสียค่าใช้จ่าย โปรดโทรฟรีที่ หมายเลข **1-888-522-1298 (TTY: 711)** ได้ตลอด 24 ชั่วโมง ทุกวัน ไม่เว้นวันหยุด
- ຖ້າວ່າ ທ່ານເວົ້າພາສາລາວ, ມີບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາໃຫ້ທ່ານໂດຍບໍ່ເສັຽຄ່າ. ໂທ 1-888-522-1298 (TTY: 711), ໄດ້ຕະຫຼອດ 24 ຊົ່ວໂມງ, 7 ວັນຕໍ່ອາທິດ, ລວມເຖິງ ວັນພັກຕ່າງໆ. ເບີໂທນີ້ແມ່ນບໍ່ເສັຽຄ່າ.
- Yog koj hais lus Hmoob, muaj kev pab txhais lus pub dawb rau koj, hu rau **1-888-522-1298 (TTY: 711)**, 24 teev hauv ib hnuv, 7 hnuv hauv ib asthiv, suav nrog cov hnuv so tib si. Qhov hu no yog hu dawb xwb.
- ने तुमी पंजाबी बोलते है, उां तुहाडे लयी मुदत उांमा सहायता सेवाएं उपलब्ध रन। कुँटी वाले दिनं समेत 24 षंटे, 7 दिन **1-888-522-1298 (TTY: 711)** 'उे बाल बरोबाल मुदत री।
- You can get this document for free in other formats, such as large print, braille or audio. Call **1-888-522-1298 (TTY: 711)**, 24 hours a day, 7 days a week, including holidays. The call is free.
- If you want to receive materials, now and in the future, in a language other than English or in an alternate format, call Member Services at **1-888-522-1298 (TTY: 711)**, 24 hours a day, 7 days a week, including holidays. The call is free.



**If you have questions**, please call L.A. Care Cal MediConnect Plan at **1-888-522-1298 (TTY: 711)**, 24 hours a day, 7 days a week, including holidays. The call is free. **For more information**, visit [www.calmediconnectla.org](http://www.calmediconnectla.org).

## The following chart lists frequently asked questions.

Frequently Asked Questions (FAQ)	Answers
<b>What is a Cal MediConnect plan?</b>	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 Managers to help you manage all your providers and services. They all work together to provide the care you need. L.A. Care Cal MediConnect Plan (Medicare-Medicaid Plan) is a Cal MediConnect Plan that provides benefits of Medi-Cal and Medicare to enrollees.
<b>What is a L.A. Care Cal MediConnect Plan Care manager?</b>	A L.A. Care Cal MediConnect Plan Care Manager 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.
<b>What are Managed Long-Term Services and Supports (MLTSS)?</b>	<p>MLTSS 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>MLTSS 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>
<b>Will you get the same Medicare and Medi-Cal benefits in L.A. Care Cal MediConnect Plan that you get now?</b>	<p>You will get most of your covered Medicare and Medi-Cal benefits directly from L.A. Care 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 L.A. Care 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 L.A. Care 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 L.A. Care Cal MediConnect Plan to cover your drug if medically necessary.</p>



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Frequently Asked Questions (FAQ)	Answers
<b>Can you go to the same doctors you see now?</b>	<p>Often that is the case. If your providers (including doctors and pharmacies) work with L.A. Care 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 L.A. Care Cal MediConnect Plan’s network. If you need urgent or emergency care or out-of-area dialysis services, you can use providers outside of L.A. Care Cal MediConnect Plan’s plan.</p> <p>To find out if your doctors are in the plan’s network, call Member Services or read L.A. Care Cal MediConnect Plan’s <i>Provider and Pharmacy Directory</i>.</p> <p>If L.A. Care 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 12 months.</p>
<b>What happens if you need a service but no one in L.A. Care Cal MediConnect Plan’s network can provide it?</b>	<p>Most services will be provided by our network providers. If you need a service that cannot be provided within our network, L.A. Care Cal MediConnect Plan will pay for the cost of an out-of-network provider.</p>
<b>Where is L.A. Care Cal MediConnect Plan available?</b>	<p>The service area for this plan includes: Los Angeles County, California, with the exception of this zip code: 90704. You must live in this plan’s service area to join the plan..</p>
<b>Do you pay a monthly amount (also called a premium) under L.A. Care Cal MediConnect Plan?</b>	<p>You will not pay any monthly premiums to L.A. Care Cal MediConnect Plan for your health coverage.</p>
<b>What is prior authorization?</b>	<p>Prior authorization means that you must get approval from L.A. Care Cal MediConnect Plan before you can get a specific service or drug or see an out-of-network provider. L.A. Care 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. L.A. Care Cal MediConnect Plan can provide you with a list of services or procedures that require you to obtain prior authorization from L.A. Care Cal MediConnect Plan before the service is provided.</p>
<b>What is a referral?</b>	<p>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, L.A. Care 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 <i>Member Handbook</i>.</p>



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Frequently Asked Questions (FAQ)	Answers
<p><b>What is Extra Help?</b></p>	<p>Extra Help is a Medicare program that helps reduce your prescription drug program costs such as copays. Your prescription drug copays under L.A. Care 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 <b>1-800-772-1213</b>. TTY users should call <b>1-800-325-0778</b>.</p>
<p><b>Who should you contact if you have questions or need help?</b></p>	<p><b>If you have general questions or questions about our plan, services, service area, billing, or Member ID cards, please call L.A. Care Cal MediConnect Plan Member Services:</b>  <b>CALL: 1.888.522.1298</b>                      Calls to this number are free. 24 hours a day, 7 days a week, including holidays. Or, visit <b>www.calmedicconnectla.org</b>.                      Member Services also has free language interpreter services available for people who do not speak English.  <b>TTY: 711</b>                      Calls to this number are free, 24 hours a day, 7 days a week, including holidays.</p> <p><b>If you have questions about your health, please call the L.A. Care Health Plan Nurse Advice Line:</b>  <b>CALL: 1-800-249-3619</b>                      Calls to this number are free. 24 hours a day, 7 days a week, including holidays.  <b>TTY: 711</b>                      Calls to this number are free. 24 hours a day, 7 days a week, including holidays.                      You can call the number above to have a registered nurse answer any health related questions or you can chat live with a nurse using your L.A. Care Connect online member account, which can be accessed at <b>www.calmedicconnectla.org</b>.</p> <p><b>If you need immediate behavioral health services, please call L.A. Care’s Mental Health and Substance Abuse Hotline (Beacon Health Strategies) or L.A. Care Cal MediConnect Plan Member Services:</b>  <b>CALL: 1-877-344-2858</b>                      Calls to this number are free. 24 hours a day, 7 days a week, including holidays. Member Services also has free language interpreter services available for people who do not speak English.  <b>TTY: 1-800-735-2929</b>                      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. 24 hours a day, 7 days a week, including holidays.</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)
<b>You want to see a doctor</b>	Visits to treat an injury or illness	\$0 co-pay	If you need urgent or emergency care or out-of-area dialysis services, you don't need to get approval first. For routine visits, prior authorization rules may apply. You must go to network doctors, specialists, and hospitals.
	Wellness visits, such as a physical	\$0 co-pay	Annual Wellness Visit every 12 months
	Transportation to a doctor's office	\$0 co-pay	<b>Routine Transportation</b> Prior authorization rules may apply. Unlimited round-trips to plan-approved locations every year. <b>Non-Emergency Medical Transportation</b> Contact the plan for more details.
	Specialist care	\$0 co-pay	Prior authorization rules may apply. You must go to network doctors, specialists, and hospitals. Referral required for network hospitals and specialists.
	Care to keep you from getting sick, such as flu shots	\$0 co-pay	Prior authorization rules may apply.
	"Welcome to Medicare" preventive visit (one time only)	\$0 co-pay	During the first 12 months of your new Part B coverage, you can get either a Welcome to Medicare Preventive Visit or an Annual Wellness Visit. After your first 12 months, you can get one Annual Wellness Visit every 12 months.
<b>You need medical tests</b>	Lab tests, such as blood work	\$0 co-pay	Prior authorization rules may apply.
	X-rays or other pictures, such as CAT scans	\$0 co-pay	Prior authorization rules may apply.
	Screening tests, such as tests to check for cancer	\$0 co-pay	Prior 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><b>You need drugs to treat your illness or condition</b></p>	<p>Generic drugs (no brand-name)</p>	<p>\$0 for a 30-day supply.</p>	<p>There may be limitations on the types of drugs covered. Please see L.A. Care Cal MediConnect Plan's <i>List of Covered Drugs</i> (Drug List) for more information.</p> <p>This plan uses a <i>List of Covered Drugs</i> (Drug List). The plan will send you the Drug List and you can also see the Drug List at <b>www.calmedconnectla.org</b>.</p> <p>Some drugs on the Drug List may require you to first try another drug for that condition. This is called <b>step therapy</b>.</p> <p>The plan may limit the amount of a drug that a member can receive. This is called <b>quantity limits</b>.</p> <p>Some drugs on the Drug List require a <b>prior authorization</b> from the plan before the drug will be approved.</p> <p>For some generic drugs, <b>extended-day supplies</b> (90 days) are available at network retail pharmacies or through mail order. The cost sharing amount for these extended-day supplies is the same as for a one-month supply.</p>
	<p>Brand name drugs</p>	<p>\$0–\$8.35 for a 30-day supply.</p> <p>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 L.A. Care Cal MediConnect Plan's <i>List of Covered Drugs</i> (Drug List) for more information.</p> <p>This plan uses a <i>List of Covered Drugs</i> (Drug List). The plan will send you the Drug List and you can also see the Drug List at <b>www.calmedconnectla.org</b>.</p> <p>Some drugs on the Drug List may require you to first try another drug for that condition. This is called <b>step therapy</b>.</p> <p>The plan may limit the amount of a drug that a member can receive. This is called <b>quantity limits</b>.</p> <p>Some drugs on the Drug List require a <b>prior authorization</b> from the plan before the drug will be approved.</p> <p>For some brand drugs, <b>extended-day supplies</b> (90 days) are available at network retail pharmacies or through mail order. The cost sharing amount for these extended-day supplies is the same as for a one-month supply.</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)
<b>You need drugs to treat your illness or condition</b> <i>(continued)</i>	Over-the-counter drugs	\$0 co-pay	There may be limitations on the types of drugs covered. Please see L.A. Care Cal MediConnect Plan's <i>List of Covered Drugs</i> (Drug List) for more information.
	Medicare Part B prescription drugs	\$0 co-pay	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
<b>You need therapy after a stroke or accident</b>	Occupational, physical, or speech therapy	\$0 co-pay	Medically necessary physical therapy, occupational therapy, and speech and language pathology services are covered while you are in the hospital and skilled nursing facility. Referral requirements may apply. Contact plan for details.
<b>You need emergency care</b>	Emergency room services	\$0 co-pay	<p>You may get covered emergency medical care whenever you need it, anywhere in the United States or its territories without prior authorization.</p> <p>Emergency and urgently needed care services received anywhere in the world are covered to a limit of \$10,000 combined per calendar year.</p>
	Ambulance services	\$0 co-pay	<p>Prior authorization is not required for in-network and out-of-network emergency ambulance services.</p> <p>For non-emergency ambulance services, referral requirements may apply.</p>
	Urgent care	\$0 co-pay	<p>You may get covered urgent care whenever you need it, anywhere in the United States or its territories without prior authorization.</p> <p>Emergency and urgently needed care services received anywhere in the world are covered to a limit of \$10,000 combined per calendar year.</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><b>You need hospital care</b></p>	Hospital stay	\$0 co-pay	<p>Hospital services are covered when determined to be medically necessary by your treating doctor and L.A. Care Health Plan. There are no limits to the number of medically necessary covered days by L.A. Care Cal MediConnect Plan each hospital stay.</p> <p>Except in an emergency, your doctor must tell the plan that you are going to be admitted to the hospital.</p> <p>You must go to network doctors, specialists, and hospitals.</p> <p>Prior authorization may be required for network hospitals non-emergency procedures.</p>
	Doctor or surgeon care	\$0 co-pay	<p>Doctor and surgeon care are provided as part of your hospital stay.</p>
<p><b>You need help getting better or have special health needs</b></p>	Rehabilitation services	\$0 co-pay	<p><b>Outpatient Rehabilitation Services</b>                      Medically necessary physical therapy, occupational therapy, and speech and language pathology services are covered.                      Prior authorization rules may apply. Contact plan for details.</p> <p><b>Cardiac and Pulmonary Rehabilitation Services</b>                      Prior authorization rules may apply.</p>
	Medical equipment for home care	\$0 co-pay	<p>Prior authorization rules may apply.                      Contact plan for details.</p>
	Skilled nursing care	\$0 co-pay	<p><b>Skilled Nursing Facility (SNF)</b>                      Prior authorization rules may apply.                      No limit to the number of days covered by the plan each SNF stay.                      No prior hospital stay is required.</p> <p><b>Home Health Care</b>                      Includes medically necessary short term intermittent skilled nursing care and rehabilitation services.                      Prior authorization rules may apply.                      Contact plan for details.</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)
<b>You need eye care</b>	Eye exams	\$0 co-pay	<p>Prior authorization rules may apply.</p> <p>Medically necessary vision exams for the diagnosis and treatment of diseases and conditions of the eye, including an annual glaucoma screening for people at risk.</p> <p>Up to 1 supplemental routine eye exam every year.</p>
	Glasses or contact lenses	\$0 co-pay	<p>Prior authorization rules may apply.</p> <p>One pair of eyeglasses (lenses and frames) or contact lenses after cataract surgery</p> <p>Up to 1 pair of eyeglasses (lenses and frames) or contact lenses every two years</p> <p>\$200 plan coverage limit for contact lenses and eyeglasses (frames and lenses) every two years.</p>
<b>You need hearing or auditory services</b>	Hearing screenings	\$0 co-pay	Prior authorization rules may apply.
	Hearing aids	\$0 co-pay	Prior authorization rules may apply. Our plan pays up to \$1,510 per year for hearing aids..
<b>You have a chronic condition, such as diabetes or heart disease</b>	Services to help manage your disease	\$0 co-pay	Prior authorization rules may apply.
	Diabetes supplies and services	\$0 co-pay	<p>Diabetes self-management training;</p> <p>Diabetes monitoring supplies;</p> <p>Therapeutic shoes or inserts.</p> <p>Diabetic Supplies and Services are limited to specific manufacturers, products and/or brands. Contact the plan for a list of covered supplies.</p> <p>Prior authorization rules may apply.</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)
<b>You have a mental health condition</b>	Mental or behavioral health services	\$0 co-pay	Coverage includes: <ul style="list-style-type: none"> <li>• Individual therapy visit;</li> <li>• Group therapy visit;</li> <li>• Medication management visit with a psychiatrist or licensed qualified prescribers;</li> <li>• Partial hospitalization program services.</li> </ul> Prior authorization rules may apply.
<b>You have a substance abuse problem</b>	Substance abuse services	\$0 co-pay	<p><b>Inpatient Hospital Care</b> Includes Substance Use Disorder Medical detoxification. No limit to the number of days covered by the plan each hospital stay. Except in an emergency, your doctor must tell the plan that you are going to be admitted to the hospital.</p> <p><b>Outpatient Substance Use Disorder Treatment</b> Individual substance use disorder outpatient treatment visit by a licensed qualified professional. Group substance use disorder outpatient treatment visit by a licensed qualified professional. Prior authorization rules may apply.</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)
<b>You need long-term mental health services</b>	Inpatient care for people who need mental health care	\$0 co-pay	<p>You get up to 190 days of inpatient psychiatric hospital care in a lifetime. Inpatient psychiatric hospital services count toward the 190-day lifetime limitation only if certain conditions are met. This limitation does not apply to inpatient psychiatric services furnished in a general hospital.</p> <p>Plan covers 90 days for an inpatient hospital stay.</p> <p>Plan covers 60 lifetime reserve days. \$0 co-pay per lifetime reserve day.</p> <p>Except in an emergency, your doctor must tell the plan that you are going to be admitted to the hospital.</p> <p><b>Institution for Mental Disease Services for Individuals 65 or Older</b></p> <p>Prior authorization rules and referral requirements may apply. Contact plan for details.</p>
<b>You need durable medical equipment (DME)</b>	Wheelchairs	\$0 co-pay	Provided when medically necessary and prescribed by a licensed provider. Prior authorization rules may apply. Contact plan for details.
	Nebulizers	\$0 co-pay	Provided when medically necessary and prescribed by a licensed provider. Prior authorization rules may apply. Contact plan for details.
	Crutches	\$0 co-pay	Prior authorization rules may apply. Contact the plan for details.
	Walkers	\$0 co-pay	Provided when medically necessary and prescribed by a licensed provider. Prior authorization rules may apply. Contact plan for details.
	Oxygen equipment and supplies	\$0 co-pay	Provided when medically necessary and prescribed by a licensed provider. Prior authorization rules may apply. Referral requirements may apply. Contact plan for details.



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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)
<b>You need help living at home</b>	Meals brought to your home	\$0 co-pay	Prior authorization rules may apply. Contact plan for details. For Multipurpose Senior Services Program (MSSP)-eligible members.
	Home services, such as cleaning or housekeeping	\$0 co-pay	Prior authorization rules may apply. Contact plan for details. For MSSP or In-Home Supportive Services (IHSS)-eligible members.
	Changes to your home, such as ramps and wheelchair access	\$0 co-pay	Prior authorization rules may apply. Contact plan for details. For MSSP-eligible members.
	Training to help you get paid or unpaid jobs	Not Covered	Not covered
	Home health care services	\$0 co-pay	Prior authorization rules may apply. Contact plan for details.
	Services to help you live on your own	\$0 co-pay	Prior authorization rules may apply. Referral requirements may apply. Contact plan for details. This service is only available to beneficiaries: <ul style="list-style-type: none"> <li>- on the MSSP waiver,</li> <li>- eligible for IHSS, or</li> <li>- eligible for CBAS.</li> </ul>
	Adult day services or other support services	\$0 co-pay	Prior authorization rules may apply. Referral requirements may apply. Contact plan for details.



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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)
<b>You need a place to live with people available to help you</b>	Assisted living or other housing services	\$0 co-pay	Plan will assist with coordinating services offered through other organizations such as Independent Living Centers or programs such as the Assisted Living Waiver Programs. Referral requirements may apply. Contact plan for details.
	Nursing home care	\$0 co-pay	Prior authorization rules may apply. Contact plan for details.
<b>Your caregiver needs some time off</b>	Respite care	\$0 co-pay	Prior authorization rules may apply. Contact plan for details. For MSSP-eligible members.



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## Other services that L.A. Care 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.

Other services covered by L.A. Care Cal MediConnect Plan	Your costs for <u>in-network</u> providers
<b>Podiatry Services</b>	<p>\$0 co-pay</p> <p>Prior authorization rules may apply.</p> <p>Podiatry visits are limited to foot exams and treatment if you have diabetes-related nerve damage and/or meet certain conditions.</p>
<b>Prosthetic Devices</b>	<p>\$0 co-pay</p> <p>Prior authorization rules may apply.</p>
<b>Incontinence cream and diapers</b>	<p>\$0 co-pay</p> <p>Prior authorization rules may apply.</p>
<b>Kidney Disease and Conditions</b>	<p>\$0 co-pay</p> <p>Dialysis in a center or in the home is covered when prescribed by a licensed provider. Prior authorization rules may apply.</p> <p><b>Out of Area Dialysis (provided outside of your county but in the United States)</b></p> <p>Is covered with prior approval, when the Medicare licensed center has space and enough information about you to give you the right treatment. An L.A. Care Cal MediConnect care manager and your dialysis center social worker will help you locate a dialysis center when you are traveling.</p>
<b>Dental Services</b>	<p>Dental benefits are covered under Denti-Cal. L.A. Care Cal MediConnect Plan will offer additional supplemental benefits. Refer to the Supplemental Dental Benefits Guide and Directory for a complete list of benefits.</p> <p>Plan offers additional supplemental comprehensive dental benefits.</p>



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Other services covered by L.A. Care Cal MediConnect Plan	Your costs for <u>in-network</u> providers
<b>Wellness/Education and Other Supplemental Benefits &amp; Services</b>	\$0 co-pay The plan covers the following supplemental health and wellness education services and programs: <ul style="list-style-type: none"> <li>- Nutritional counseling</li> <li>- Smoking and tobacco cessation programs</li> <li>- Nurse Advice Line</li> <li>- Coupons to attend Weight Watchers meetings (up to 20 sessions for those who qualify)</li> <li>- “My Health In Motion” on-line member wellness resources available through L.A. Care’s member portal</li> </ul>
<b>Tobacco Cessation Counseling for Pregnant Women</b>	\$0 co-pay Prior authorization rules may apply. Referral requirements may apply. Contact plan for details.
<b>Respiratory Care Services</b>	\$0 co-pay Prior authorization rules may apply. Contact plan for details.
<b>Nursing Home Services</b>	\$0 co-pay Prior authorization rules may apply. Contact plan for details.
<b>Personal Care Services</b>	\$0 co-pay Prior authorization rules may apply. Contact plan for details.
<b>Self-Directed Personal Assistance Services</b>	\$0 co-pay Prior authorization rules may apply. Contact plan for details. For IHSS-eligible members.
<b>Case Management</b>	\$0 co-pay Contact plan for details.



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Other services covered by L.A. Care Cal MediConnect Plan	Your costs for <u>in-network</u> providers
<b>Nursing Facility Resident Services</b>	\$0 co-pay for Nursing Facility Resident: - Chiropractic Care & Foot Care - Vision & Dental - Acupuncture - Hearing Exams & Hearing Aids Prior authorization rules may apply. Contact plan for details.
<b>Multi-Senior Services Program (MSSP)</b>	\$0 co-pay Prior authorization rules may apply. Contact plan for details.

## Benefits covered outside of L.A. Care Cal MediConnect Plan

This is not a complete list. Call Member Services to find out about other services not covered by L.A. Care Cal MediConnect Plan but available through Medicare or Medi-Cal.

Other services covered by Medicare or Medi-Cal	Your costs
<b>Some hospice care services</b>	\$0
<b>California Community Transitions (CCT) pre-transition coordination services and post-transition services</b>	\$0
<b>Certain dental services, including cleanings, fillings, and complete dentures</b>	Services that are covered under the Medi-Cal Dental Program are not chargeable to you. However, you are responsible for your share of cost amount, if applicable. You are responsible for paying for services not covered by your plan or by Medi-Cal.



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## Services that L.A. Care Cal MediConnect Plan, Medicare, and Medi-Cal do not cover

This is not a complete list. Call Member Services to find out about other excluded services.

### Services not covered by L.A. Care Cal MediConnect Plan, Medicare, or Medi-Cal

- Family therapy
- Couple therapy
- Certain durable medical equipment (DME) such as stairway elevators, dehumidifiers, telephone alert systems, and whirlpool baths. If you have questions or are unsure if your DME is covered, please contact Member Services for more information.

## Your rights as a member of the plan

As a member of L.A. Care 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



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### **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
- 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. L.A. Care 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 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 **1-888-522-1298** (TTY: **711**), 24 hours a day, 7 days a week, including holidays 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
- See an out of network urgent or emergency care provider, when necessary



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## You have the 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
- Get a detailed reason for why services were denied

For more information about your rights, you can read the L.A. Care Cal MediConnect Plan *Member Handbook*. If you have questions, you can also call L.A. Care 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 L.A. Care Cal MediConnect Plan should cover something we denied, call L.A. Care Cal MediConnect Plan at **1-888-522-1298** (TTY: 711), 24 hours a day, 7 days a week, including holidays. You may be able to appeal our decision.

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

For complaints, grievances and appeals you may also reach us by:

**Fax:** 1-213-438-5748

**Mail:** L.A. Care Cal MediConnect Plan  
Attn: Appeals and Grievance Unit  
P.O. Box 811610  
Los Angeles, CA 90081

**Online:** [www.lacare.org/online-grievance-form](http://www.lacare.org/online-grievance-form)



If you have questions, please call L.A. Care Cal MediConnect Plan at **1-888-522-1298** (TTY: 711), 24 hours a day, 7 days a week, including holidays. The call is free. **For more information**, visit [www.calmedicconnectla.org](http://www.calmedicconnectla.org).

## 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 L.A. Care 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 suspect someone of using your information or committing fraud, waste or abuse, please call L.A. Care Cal MediConnect Plan's Compliance Helpline at **1-800-400-4889**. This number is available 24 hours a day, 7 days a week.
- You can also call:
  - L.A. Care Cal MediConnect Plan Member Services at **1-888-522-1298** (TTY: **711**) and ask to speak with the Compliance Officer,
  - California Department of Health Care Services Fraud & Abuse Hotline at **1-800-822-6222**, or
  - Department of Justice Office of the Attorney General Bureau of Medi-Cal Fraud & Elder Abuse at **1-800-722-0432**. Your call is free and confidential.



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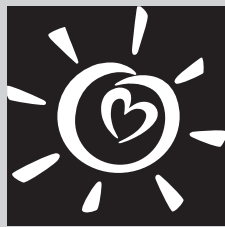












**L.A. Care**  
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For a Healthy Life



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