

CORRECTION SHEET (ERRATA) 2023 MEDI-CAL MEMBER HANDBOOK

Partnership HealthPlan of California (PHC) has made important updates to our Medi-Cal Member Handbook. These changes are explained below. **Make sure to read the updates carefully as they may change the way you get care.**

Things to know when reviewing updates:

- New benefit information and explanations are noted by **bold and underlined text**

If you have questions or need help reading this, call (800) 863-4155 (TTY: (800) 735-2929 or 711). We are here Monday – Friday, 8 a.m. – 5 p.m. The call is toll free.

Section 3 - How to get care

Referrals

Your PCP or another specialist will provide you a referral to visit a specialist within the time frame listed in the “Timely access to care” section of this handbook, if you need one. A specialist is a doctor who has extra education in one area of medicine. Your PCP will work with you to choose a specialist. Your PCP’s office can help you set up a time to go to the specialist.

Other services that might need a referral include in-office procedures, X-rays, lab work and more services as appropriate.

Your PCP may give you a form to take to the specialist. The specialist will fill out the form and send it back to your PCP. The specialist will treat you for as long as they think you need treatment.

If you have a health problem that needs special medical care for a long time, you may need a standing referral. This means you can go to the same specialist more than once without getting a referral each time.

If you have trouble getting a standing referral or want a copy of the PHC referral policy, call (800) 863-4155 (TTY (800) 735-2929 or 711).

You do not need a referral for:

- PCP visits
- Obstetrics/Gynecology (OB/GYN) visits
- Urgent or emergency care visits
- Adult sensitive services, such as sexual assault care
- Family planning services (to learn more, call Office of Family Planning Information and Referral Service at 1-800-942-1054)
- HIV testing and counseling (12 years or older)
- Sexually transmitted infection services (12 years or older)
- Chiropractic services (a referral may be required when provided by out-of-network)

CORRECTION SHEET (ERRATA) 2023 MEDI-CAL MEMBER HANDBOOK

FQHCs, RHCs and IHCPs)

- Initial mental health assessment
- Acupuncture (the first two services per month; additional appointments will need a referral)
- Podiatry services (when provided by FQHCs and RHCs)
- Eligible dental services
- Treatment for sexually transmitted infections (only minors 12 years or older)

Minors can also get certain outpatient mental health services, sensitive services and substance use disorder services without parent's consent. For more information, read "Minor consent services" and "Substance use disorder treatment services" in this handbook.

California Cancer Equity Act Referrals

Effective treatment of complex cancers depends on many factors including getting the right diagnosis and getting timely treatment from cancer experts.

If you are diagnosed with a complex cancer, the new California Cancer Care Equity Act allows you to ask for a referral from your doctor to get cancer treatment specifically from an in-network National Cancer Institute (NCI)-designated cancer center, NCI Community Oncology Research Program (NCORP)-affiliated site, or qualifying academic cancer center.

If PHC does not have an in-network NCI-designated cancer center, PHC will allow you to ask for a referral to get cancer treatment from one of these out-of-network centers in California, if one of the out-of-network centers and PHC agree on payment, unless you choose to see a different cancer treatment provider.

If you have been diagnosed with cancer, contact PHC to see if you qualify for services from one of these cancer centers.

CORRECTION SHEET (ERRATA) 2023 MEDI-CAL MEMBER HANDBOOK

Section 4 - Benefits and services

Medi-Cal benefits covered by PHC

Transportation benefits for situations that are not emergencies

You are entitled to medical transportation if you have medical needs that do not allow you to use a car, bus or taxi to your appointments. Medical transportation can be provided for covered services and Medi-Cal covered pharmacy appointments. If you need medical transportation, you can request this by speaking to your doctor, dentist, podiatrist, or mental health or substance use disorder provider. Your provider will decide the correct type of transportation to meet your needs. If they find that you need medical transportation, they will prescribe it by completing a form and submit it to PHC. Once approved, the approval is good for 12 months depending on the medical need. Additionally, there are no limits for how many rides you can get. Your doctor will need to reassess your medical need for medical transportation and re-approve every 12 months.

Medical transportation is an ambulance, litter van, wheelchair van or air transport. PHC allows the lowest cost medical transportation for your medical needs when you need a ride to your appointment. That means, for example, if you can physically or medically be transported by a wheelchair van, PHC will not pay for an ambulance. You are only entitled to air transport if your medical condition makes any form of ground transportation impossible.

Medical transportation must be used when:

- It is physically or medically needed as determined with a written authorization by a doctor or other provider because you are not able to physically or medically able to use a bus, taxi, car or van to get to your appointment.
- You need help from the driver to and from your residence, vehicle or place of treatment due to a physical or mental disability.

To ask for medical transportation that your doctor has prescribed for non-urgent (routine) appointments, please call PHC at **(866) 828-2303** (Monday-Friday, 8 a.m.- 5 p.m.) at least 5 business days before your appointment. For urgent appointments, please call as soon as possible. Please have your member ID card ready when you call.

Limits of medical transportation: PHC provides the lowest cost medical transportation that meets your medical needs to the closest provider from your home where an appointment is available. Medical transportation will not be provided if the service is not covered by Medi-Cal. If the appointment type is covered by Medi-Cal but not through the health plan, PHC will help you schedule your transportation. A list of covered services is in this Member Handbook. Transportation is not covered outside of the network or service area unless pre-authorized by PHC.

CORRECTION SHEET (ERRATA) 2023 MEDI-CAL MEMBER HANDBOOK

For more information or to ask for medical transportation, please call PHC at **(866) 828-2303** (Monday- Friday, 8 a.m. - 5 p.m.)

Cost to member: There is no cost when transportation is arranged by PHC.

How to get non-medical transportation

Your benefits include getting a ride to your appointments when the appointment is for a Medi-Cal covered service and you do not have any access to transportation. You can get a ride, at no cost to you, when you have tried all other ways to get transportation and are:

- Traveling to and from an appointment for a Medi-Cal service authorized by your provider; or
- Picking up prescriptions and medical supplies

PHC allows you to use a car, taxi, bus or other public/private way of getting to your medical appointment for Medi-Cal-covered services. PHC will cover the lowest cost of non-medical transportation type that meets your needs. Sometimes, PHC can give reimbursement for rides in a private vehicle that you arrange. This must be approved by **PHC** before you get the ride, and you must tell us why you cannot get a ride other ways, like the bus. You can tell us by calling us, by emailing, or in person. You cannot drive yourself and be reimbursed.

Mileage reimbursement requires all of the following:

- The driver's license of the driver
- The vehicle registration of the driver
- Proof of car insurance for the driver

To request a ride for services that have been authorized, call PHC at **(866) 828-2303** at least 5 business days (Monday- Friday, 8 a.m. – 5 p.m.) before your appointment or call as soon as you can when you have an urgent appointment. Please have your member ID card ready when you call.

Note: American Indians may contact their local Indian Health Clinic to request non-medical transportation.

Limits of non-medical transportation: PHC provides the lowest cost non-medical transportation that meets your needs to the closest provider from your home where an appointment is available. Members cannot drive themselves or be reimbursed directly. For more information, please call PHC at **(866) 828-2303**.

Non-medical transportation does not apply if:

- An ambulance, litter van, wheelchair van, or other form of medical transportation is medically needed to get to a Medi-Cal covered service.

CORRECTION SHEET (ERRATA) 2023 MEDI-CAL MEMBER HANDBOOK

- You need assistance from the driver to and from the residence, vehicle or place of treatment due to a physical or medical condition.
- You are in a wheelchair and are unable to move in and out of the vehicle without help from the driver.
- The service is not covered by Medi-Cal.

Cost to member: There is no cost when non-medical transportation is arranged by PHC.

Travel expenses: In certain instances, PHC may cover travel expenses such as meals, hotel stays, and other related expenses if you have to travel for doctor's appointments that are not available near your home. This can also be covered for an accompanying attendant and a major organ transplant donor, if applicable. You need to request pre-approval (prior authorization) for these services by contacting PHC at **(866) 828-2303**.

Medi-Cal benefits covered by PHC

Outpatient (ambulatory) services

Cognitive health assessments

PHC covers an annual cognitive health assessment for members who are 65 years of age or older, and are otherwise not eligible for a similar assessment as part of an annual wellness visit under the Medicare Program. A cognitive health assessment looks for signs of Alzheimer's disease or dementia.

Mental health services

Outpatient mental health services

PHC covers a member for an initial mental health assessment without needing preapproval (prior authorization). You may get a mental health assessment at any time from a licensed mental health provider in the PHC network without a referral.

Your PCP or mental health provider may make a referral for additional mental health screening to a specialist within the PHC network to determine your level of impairment.

If your mental health screening results determine you are in mild or moderate distress or have impairment of mental, emotional or behavioral functioning, PHC can provide mental health services for you. PHC covers mental health services such as:

- Individual and group mental health evaluation and treatment (psychotherapy)
- Psychological testing when clinically indicated to evaluate a mental health

CORRECTION SHEET (ERRATA) 2023 MEDI-CAL MEMBER HANDBOOK

- condition
- Development of cognitive skills to improve attention, memory and problem solving
- Outpatient services for the purposes of monitoring medication therapy
- Outpatient laboratory, medications that are not already covered under the
- Medi-Cal Rx Contract Drug List (<https://medi-calrx.dhcs.ca.gov/home/>), supplies and supplements
- Psychiatric consultation
- Family therapy

For help finding more information on mental health services provided by PHC, you can call **Carelon Behavioral Health** at (855) 765-9703 or TTY/TDD: (800) 735-2929 (24 hours a day, 7 days a week), or PHC at (800) 863-4155 or TTY/TDD: (800) 735-2929 or 711 (Monday – Friday, 8 a.m. – 5 p.m.).

If your PCP or mental health provider cannot provide you treatment for a mental health disorder available in the PHC network and within the times listed above in the “Timely access to care” section, PHC will cover and help you arrange out-of-network services.

If your mental health screening results determine you may have a higher level of impairment and need specialty mental health services (SMHS), your PCP or your mental health provider will refer you to the county mental health plan to get an assessment and help you connect with the next step in the process.

To learn more, read “Other Medi-Cal programs and services” on page 72 under, “Specialty mental health services.”

Drug Medi-Cal Organized Delivery System (DMC-ODS)/ Wellness and Recovery (W&R) Program

DMC-ODS is a state program that allows PHC to provide substance use disorder treatment services in coordination with other care such as physical and mental health services. This may include residential, intensive outpatient, or outpatient treatment, as well as, opiate and other medication assisted treatment, and recovery services.

PHC administers these substance use services for members in Humboldt, Lassen, Mendocino, Modoc, Shasta, Siskiyou, and Solano counties. We call this the Wellness and Recovery (W&R) Program.

The W&R program’s purpose is to provide substance use disorder treatment services for people who struggle with alcohol and/or drug addictions. If you think you need substance use disorder



CORRECTION SHEET (ERRATA) 2023 MEDI-CAL MEMBER HANDBOOK

treatment services, you can request an assessment from your PCP or by calling Carelon Behavioral Health (855) 765-9703.

If you are a PHC member and do not live in one of PHC’s W&R counties, contact your local county:

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| <ul style="list-style-type: none"> • Del Norte
(707) 464-4813
 • Lake
(707) 274-9101 (North Lake area)
(707) 994-6494 (South Lake area)
 • Napa
(707) 253-4412 Adults
(707) 255-1855 Teens | <ul style="list-style-type: none"> • Marin
(888) 818-1115
 • Sonoma
(707) 565-7450
 • Trinity
(530) 623-1362
 • Yolo
(916) 403-2970 |
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See “Substance use disorder services” on page 64 for more information about services offered by the county.

Section 8 – Important numbers and words to know

PHC’s Member Services The toll-free number to call PHC’s Member Services Department	(800) 863-4155 8 a.m. to 5 p.m., Monday – Friday
PHC’s 24 hour Advice Nurse The toll-free number to speak to a nurse about your health if you’re unsure about going to the ER	(866) 778-8873 24 hours a day, 7 days a week
PHC’s Compliance Hotline The toll-free number to report fraud, privacy concerns and other compliance issues	(800) 601-2146 24 hours a day, 7 days a week
Vision Services PHC’s vision services are covered through Vision Services Plan (VSP).	(800) 877-7195 5 a.m. to 8 p.m., Monday – Friday 7 a.m. to 8 p.m. Saturday 7 a.m. to 7 p.m. Sunday Kaiser Members call (800) 464-4000
Mental Health Services PHC covers the treatment of mild to moderate mental	(855) 765-9703 24 hours a day, 7 days a week

Call Member Services at (800) 863-4155 (TTY (800) 735-2929).
 We’re here Monday-Friday, 8 a.m. - 5 p.m. or visit us at www.partnershiphp.org

CORRECTION SHEET (ERRATA)

2023 MEDI-CAL MEMBER HANDBOOK

health conditions and are covered through Carelon Behavioral Health.	Kaiser members call (800) 464-4000
Disability Services	
California Relay Service (CRS) – TTY/TDD/TDD The toll-free number for the hearing impaired	(800) 735-2929 or 711 24 hours a day, 7 days a week
Important State Numbers	
Medi-Cal Managed Care Ombudsman The State office that helps with your Managed Care concerns	(888) 452-8609 8 a.m. to 5 p.m., Monday – Friday
Premium Payment for Medi-Cal for Families The State phone number to call if you have questions about premiums for Medi-Cal	(800) 880-5305 8 a.m. to 8 p.m., Monday – Friday, or 8 a.m. to 5 p.m. Saturday
Denti-Cal Services The State phone number to learn more about covered dental services	(800) 322-6384 8 a.m. to 5 p.m., Monday – Friday
Department of Social Services (State Hearings) The State office that helps you file a State Hearing	(800) 952-5253
Medi-Cal Fraud and Elder Abuse Hotline The State office that helps you with concerns about fraud in the Medi-Cal program	(800) 722-0432
Medi-Cal Rx The state program that provides you with pharmacy services	(800) 977-2273 (TTY) (800) 977-2273 and press 5 or 711)
U.S. Office for Civil Rights (Privacy Complaints) The federal office that helps you with privacy questions and concerns	(866) 627-7748