

CORRECTION SHEET (ERRATA) 2024 MEDI-CAL MEMBER HANDBOOK

Partnership HealthPlan of California 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

Sensitive care

Minor consent services

If you are under age 18, you can get some services without a parent's or guardian's permission. These services are called minor consent services.

You may get these services without your parent or guardian's permission:

- **Services for rape and other sexual assaults**
- Pregnancy **testing and counseling**
- **Contraception services such as** birth control **(excludes sterilization)**
- Abortion services

If you are 12 years old or older, you may also get these services without your parent's or guardian's permission:

- Outpatient mental health services based on your maturity level and ability to participate in your own health care
- HIV/AIDS **counseling**, prevention, testing, and treatment
- Sexually transmitted infections prevention, testing, and treatment **which may include sexually transmitted diseases such as syphilis, gonorrhea, chlamydia, and herpes simplex.**
- Substance use disorder treatment **for drug and alcohol abuse including screening, assessment, intervention, and referral services**
 - To learn more, read "Substance Use Disorder Treatment services" in Chapter 4 of this handbook.

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For pregnancy testing, family planning services, birth control services, or services for sexually transmitted infections, the doctor or clinic does not have to be in the Partnership network. You can choose any Medi-Cal provider and go to them for these services without a referral or pre-approval (prior authorization). **For more information related to family planning services, please reference the “Preventive and Wellness Services and Chronic Disease Management” in Chapter 4 of this handbook.**

For minor consent services that are **outpatient** mental health services, you can go to an in-network **or out-of-network** provider without a referral and without pre-approval (prior authorization). Your PCP does not have to refer you and you do not need to get pre-approval (prior authorization) from Partnership to get covered minor consent services.

Minor consent services that are specialty mental health services are not covered. Specialty mental health services are covered by the county mental health plan for the county where you live.

Minors can talk to a representative in private about their health concerns by calling the 24/7 Advice Nurse 1-866-778-8873.

Partnership will not send information about getting sensitive services to parents or guardians. To learn more about how to ask for confidential communications related to sensitive services, read “Notice of privacy practices” in Chapter 7 of this handbook.

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Section 4 - Benefits and services

What your health plan covers

This chapter explains your covered services as a member of Partnership. Your covered services are free as long as they are medically necessary and provided by an in-network provider. You must ask us for pre-approval (prior authorization) if the care is out-of-network except for certain sensitive services and emergency care. Your health plan might cover medically necessary services from an out-of-network provider, but you must ask Partnership for pre-approval (prior authorization) for this.

Medically necessary services are reasonable and necessary to protect your life, keep you from becoming seriously ill or disabled, or reduce severe pain from a diagnosed disease, illness, or injury. For members under the age of 21, Medi-Cal services include care that is medically necessary to fix or help relieve a physical or mental illness or condition. For more on your covered services, call 1-800-863-4155 (TTY 1-800-735-2929 or 711).

Members under 21 years old get extra benefits and services. To learn more, read Chapter 5, “Child and youth well care.”

Some of the basic health benefits Partnership offers are listed below. Benefits with a star (*) need pre-approval (prior authorization).

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- Acupuncture*
- Acute (short-term treatment) home health therapies and services
- Adult immunizations (shots)
- Allergy testing and injections
- Ambulance services for an emergency
- Anesthesiologist services
- Asthma prevention
- Audiology*
- Behavioral health treatments*
- **Biomarker testing**
- Cardiac rehabilitation
- Chiropractic services*
- Chemotherapy & Radiation therapy
- Cognitive health assessments
- Community health worker services
- [For San Mateo County only] Dental services (performed by dental professional)
- [For all other counties] Dental services - limited (performed by medical professional/primary care provider (PCP) in a medical office)
- Dialysis/hemodialysis services
- Doula services
- Durable medical equipment (DME)*
- Dyadic services
- Emergency room visits
- Enteral and parenteral nutrition*
- Family planning office visits and counseling (you can go to a non-participating provider)
- Habilitative services and devices*
- Hearing aids
- Home health care*
- Hospice care*
- Inpatient medical and surgical care*
- Lab and radiology*
- Long-term home health therapies and services*
- Maternity and newborn care
- Major organ transplant*
- Occupational therapy*
- Orthotics/prostheses*
- Ostomy and urological supplies
- Outpatient hospital services
- Outpatient mental health services
- Outpatient surgery*
- Palliative care*
- PCP visits
- Pediatric services
- Physical therapy*
- Podiatry services*
- Pulmonary rehabilitation
- Rapid Whole Genome Sequencing
- Rehabilitation services and devices*
- Skilled nursing services
- Specialist visits
- Speech therapy*
- Surgical services
- Telemedicine/Telehealth
- Transgender services*
- Urgent care
- Vision services*
- Women's health services

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Medi-Cal benefits covered by Partnership

Maternity and newborn care

Partnership covers these maternity and newborn care services:

- Birthing center services
- Breast pumps and supplies
- Breastfeeding education and aids
- **Care coordination**
- Certified Nurse Midwife (CNM)
- **Counseling**
- Delivery and postpartum care
- Diagnosis of fetal genetic disorders and counseling
- Doula Services
- Licensed Midwife (LM)
- Maternal mental health services
- Newborn care
- **Nutrition education**
- Pregnancy-related health education
- Prenatal care
- **Social and mental health assessments and referrals**
- **Vitamin and mineral supplements**