

# NEWS

YOUR PARTNER IN HEALTH

WINTER 2025

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## The Growing Together Program

Our Growing Together Program (GTP) offers support to parents and their babies. GTP includes prenatal, postpartum, and healthy baby programs. All 3 include welcome and check-in calls. The prenatal and postpartum programs offer incentives for the mother to get the Tdap vaccine, flu shot vaccine, and go to their postpartum visits. The Healthy Baby Program offers incentives to parents who take their children regularly to well-baby visits and stay up to date on their vaccines.

It is important to see a provider early in pregnancy and keep up with

regular care. If you think you may be pregnant, you should schedule a visit with your provider as soon as possible. Early prenatal care services support healthy pregnancies and babies. It is important to keep an eye on changes that happen during your pregnancy and talk about them with a provider.

Health care services during and after your pregnancy are important to keep both you and the baby healthy. Partnership members can learn more or sign up for GTP by calling our Population Health Department at **(855) 798-8764**. ♦

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## Medi-Cal Managed Care Ombudsman

You can call the Department of Health Care Services Managed Care Ombudsman's office at **(888) 452-8609**, Monday – Friday, 8 a.m. to 5 p.m., if you have any questions or a complaint about your health care. ♦

## Lab Services

Partnership and some of our doctors contract with specific labs for services. When your doctor refers you for lab tests, make sure to ask them which lab you should use. If your doctor does not know, you can always call us at **(800) 863-4155**. ♦





## Doula Benefit

A doula is a non-medical provider who supports members during pregnancy, labor, and up to 12 months after childbirth, miscarriage, stillbirth, or abortion. Doulas support emotional and physical health, and connect members to health care services. They can offer guidance and support to improve birth.

Partnership members who are pregnant or have been pregnant in the past 12 months can get doula services at no cost. A referral from your provider is not needed. Our Provider Directory can help you find doulas near you who work with Partnership. Visit our website at [PartnershipHP.org/Members/Medi-Cal/Pages/Find-a-Primary-Care-Provider.aspx](https://PartnershipHP.org/Members/Medi-Cal/Pages/Find-a-Primary-Care-Provider.aspx) to look for Doula Services under the Specialist provider type. ◆

## Annual Disclosure Statement

Choices made by Partnership are based on the care and coverage that members need. Partnership does not pay or reward providers or their staff to refuse members' health care needs. ◆

## Have You Had a Baby Recently?

Our Healthy Babies Growing Together Program (GTP) can help you and your baby get a healthy start. The Healthy Babies GTP gives you:

- Up to \$100 in gift cards for going to:
  - 2 well-baby visits before 3 months
  - 2 well-baby visits between 3 and 9 months
  - 2 well-baby visits between 9 and 15 months
  - 2 well-baby visits between 15 and 30 months
- A \$100 gift card for members who get all the required vaccines and 2 flu shots at their visits by 24 months of age. You will need to send us a vaccine record.
- Live phone support
- Help finding resources near you
- Referrals to case management

To learn more about Healthy Babies GTP, call our Population Health Department at **(855) 798-8764**, Monday-Friday, 8 a.m. – 5 p.m. TTY users can call the California Relay Service at **(800) 735-2929** or call **711**. ◆



- Health screenings or shots you may need
- Making your care plan

This is a great time to talk to your doctor about your health and any concerns you may have. Your doctor will listen to your needs, look over your health history and decide what care you need.

Going to these visits is good for your health. They help you and your doctor understand each other and talk about how to reach your health goals.

Take charge of your health. Be sure to schedule your Initial Health Appointment. ♦

## The Flu Vaccine for Babies

Vaccines are an important part of your child's health. They protect your child from serious diseases, such as the flu. Babies and toddlers are more likely to need hospital care for the flu than older children. This is why it is very important for babies and toddlers to get the flu vaccine.

In their first year of life, babies need two flu shots for protection, one at 6 months and another at least 4 weeks later. Make sure to take your child to all recommended well-child visits and keep them up to date with their vaccines. It is one of the best gifts you can give them. ♦

## What is an Initial Health Appointment?

Every new member should see their doctor within 120 days of joining Partnership. We call this first visit the Initial Health Appointment.

### An Initial Health Appointment includes:

- A full body exam and mental health checkup
- Learning about health risks and how to stay healthy

## Medicare? Medicaid? Medi-Cal? It can be confusing!

### By Lulu Zhang

In the mid-1960s, President Lyndon B. Johnson pushed for the “Great Society” programs. Medicare and Medicaid were a part of the plan to improve access to health care. They were both signed into law. Medicare is federal health insurance for eligible seniors. Medicaid is a federal and state program helping those with low income or a disability.

Medi-Cal is what California calls its version of Medicaid. The state uses many agencies to make Medi-Cal services available to all eligible members.

Partnership HealthPlan of California contracts with the state to cover 24 Northern California counties. They are Butte, Colusa, Del Norte, Glenn, Humboldt, Lake, Lassen, Marin, Mendocino, Modoc, Napa, Nevada, Placer, Plumas, Shasta, Sierra, Siskiyou, Solano, Sonoma, Sutter, Tehama, Trinity, Yolo, and Yuba.

In other words, Partnership helps make Medi-Cal services available for people in these 24 counties. They work with local primary care offices, hospitals, and health centers to provide Medi-Cal services.

## Partnership wants to be your partner in health.

Anyone can check to see if they qualify for Medi-Cal by talking to their county office. The county office can also help fill out an application.

### A QUICK RECAP

**Medicare:** Federal health coverage for eligible seniors

**Medicaid:** Federal and state program to provide health coverage for low-income Americans

**Medi-Cal:** California's Medicaid program

**Partnership:** Health plan serving Medi-Cal members in 24 Northern California counties

*Lulu Zhang is a Partnership member and a UC Davis history graduate. She serves on Partnership's Consumer Advisory Committee. ♦*

## Dyadic Services

### What are dyadic services?

Dyadic services are integrated physical and behavioral health screenings and services for children under 21 years old and their parents or caregivers. Services are available to the parents or caregivers even if they do not have Medi-Cal, as long as the service helps a child enrolled in Medi-Cal. Services include counseling and brief interventions and support.

### How do I get dyadic services?

A doctor or other practitioner will identify children who are eligible for dyadic services during a screening of the child or visit. Parents and caregivers may receive services if their child is eligible for dyadic services.

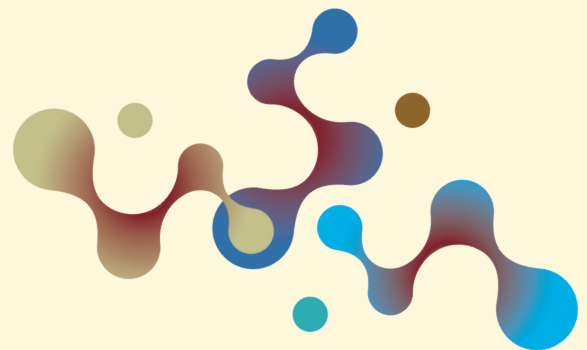
For more information, please talk to your child's provider. ♦

## Partnership's Member Services: (800) 863-4155

If you have questions about your medical care, please call us. We are ready to help Monday – Friday, 8 a.m. – 5 p.m.

### We can help you with:

- General information about your Medi-Cal benefits
- Choosing or changing your doctor or medical clinic
- Getting a new Partnership ID card
- Medical bill issues
- Problems or complaints about your medical care
- Getting appointments
- Interpreter services
- Information about your referral or prior authorization
- Help with transportation to appointments
- Questions about claims or cost of services ♦



## Health Information Exchange

Partnership is working on a project called Health Information Exchange (HIE). It lets providers, nurses, and other health care experts share your health information electronically. This will help your health care teams have your information ready before you come for your visit.

HIE will improve communication between health care experts, your safety, and the quality of your care. This lets you spend more time with your provider to talk about your health care needs.

The transfer of your health information is protected by the Health Insurance Portability and Accountability Act of 1996. It makes sure that your information is safe when shared so that you can get the best care.

To learn more about HIE, scan the QR code below with your smartphone camera or go to <https://www.partnershiphp.org/Members/Medi-Cal/Documents/HIEMemberOptOutForm.pdf>. ◆



## Home Infusion Therapy

Infusion therapy is a way to give medicine or fluids through a needle into the blood. It is used when medicine cannot be taken by mouth. Infusion therapy can be done at a hospital, in a provider's office, or in your home.

Home infusion therapy lets you receive infusion therapy in the comfort of your own home. It is given by health care staff who are trained to help you with your infusion. They work closely with you, your caregiver, and your provider. Home infusion therapy can be given at a time that works for you and your schedule.

Partnership covers home infusion therapy for our members. To learn more, call Member Services at **(800) 863-4155**, Monday – Friday, 8 a.m. – 5 p.m. TTY users can call the California Relay Service at **(800) 735-2929** or call **711**. ◆

## Notice About Estate Recovery

The Medi-Cal program must seek repayment from probated estates of certain deceased members for Medi-Cal benefits received on or after their 55th birthday. Repayment includes Fee-for-Service (FFS) and managed care premiums or capitation payments for nursing facility services, home and community-based services, and related hospital and prescription drug services received when the member was an inpatient in a nursing facility or was receiving home and community-based services. Repayment cannot exceed the value of a member's probated estate.

To learn more, go to the DHCS Estate Recovery Program website at <https://dhcs.ca.gov/er> or call **(916) 650-0590**. ◆




# Resources for You and Your Family







Looking for local resources and not sure where to start? The Partnership HealthPlan of California website can help. We have resources for each of the 24 counties we serve. This is just one way we help our members be safe and healthy.

To see the Community Resources page, visit our website at [PartnershipHP.org](http://PartnershipHP.org) or scan the QR code below with your smartphone camera. Select your county to see all the resources near you. Resources may be different by county, and are usually at no cost to our members.



## Here are some of the resources you can find:

|   |  |
|---|--|
|  | <p><b>EMERGENCY RESPONSE</b></p> <p>This page has resources for counties impacted by emergencies like wildfires or earthquakes.</p> <p>Here you will find:</p> <ul style="list-style-type: none"> <li>• Where you can get help during an emergency</li> <li>• Where animals can go during an emergency</li> <li>• How to replace lost documents</li> </ul> |
|  | <p><b>CHILDREN AND FAMILIES</b></p> <p>Here you will find:</p> <ul style="list-style-type: none"> <li>• Childcare resources</li> <li>• Family resource centers</li> <li>• Foster and kinship support services</li> <li>• Home visiting programs</li> <li>• Child development services</li> </ul>   |
|  | <p><b>CLOTHING AND PERSONAL CARE</b></p> <p>Here you will find:</p> <ul style="list-style-type: none"> <li>• Places that offer clothes, blankets, and sleeping bags</li> <li>• Mobile showers and laundry services</li> </ul>  |

|   |  |
|---|--|
|    | <p><b>CRISIS</b></p> <p>Here you will find:</p> <ul style="list-style-type: none"> <li>• Mental health services</li> <li>• Domestic violence and abuse services</li> <li>• Crisis hotline phone numbers</li> </ul>   |
|    | <p><b>FOOD</b></p> <p>Here you will find:</p> <ul style="list-style-type: none"> <li>• CalFresh Program</li> <li>• WIC (Women, Infants and Children) resources</li> <li>• Senior meals</li> <li>• Farmers markets</li> <li>• Food banks and pantries</li> </ul>  |
|    | <p><b>HOUSING</b></p> <p>Here you will find:</p> <ul style="list-style-type: none"> <li>• Shelter(s)</li> <li>• Temporary housing</li> </ul>   |
|   | <p><b>LGBTQ+</b></p> <p>Here you will find:</p> <ul style="list-style-type: none"> <li>• Hotline phone numbers</li> <li>• Legal resources</li> <li>• Senior resources</li> <li>• Teen resources</li> <li>• Transgender resources</li> </ul>  |
|  | <p><b>PERINATAL</b></p> <p>Here you will find:</p> <ul style="list-style-type: none"> <li>• Pregnancy support services</li> <li>• Home visiting programs</li> <li>• Maternal mental health resources</li> <li>• Postpartum services</li> <li>• Breastfeeding support services</li> </ul>                 |
|  | <p><b>TRANSPORTATION</b></p> <p>Here you will find:</p> <ul style="list-style-type: none"> <li>• Partnership's Transportation Benefit             <ul style="list-style-type: none"> <li>o Non-Medical Transportation (NMT)</li> <li>o Non-Emergent Medical Transportation (NEMT)</li> </ul> </li> </ul> |

## Partnership Offers Interpreter and Translation Services

Partnership has interpreter services for our members at no cost to you or your doctor. You do not need your children, friends, or family members to interpret for you.

When you call our Member Services Department, ask for an interpreter and tell us the language you need. If you are hearing impaired, you can also get an interpreter or services when you need to speak to Member Services, Claims, Utilization Management, Population Health Management, Care Coordination, Grievance and Appeals, or Transportation Services staff.

You can have an interpreter at your health care visits, including a qualified sign language interpreter. You can get interpreter services over the phone, video, or in-person. To get an in-person interpreter, please call us at least 3 business days before your visit.

Partnership translates all our member materials into Spanish, Russian, and Tagalog. Please call us if you need materials in another language. You can also ask for materials in large print, braille, or audio.

Let us know if your language needs have not been met. You have the right to file a complaint or an appeal. You can find out how to do this on Partnership's website at <https://www.partnershiphp.org/Members/Medi-Cal/Pages/GrievanceAndAppeals.aspx>.

To find out more about these services or to file a complaint or appeal, please call us at **(800) 863-4155**. TTY users can call **(800) 735-2929 or 711**. ♦

## Intimate Partner Violence

Intimate partner violence is abuse that happens in a romantic relationship. It can affect people of any age, race, religion, sexual orientation, or gender. The abuse can be emotional, verbal, physical, or sexual. It can be in the form of threats, bullying, or physical harm.

Intimate partner violence can look like many things. Here are some questions to ask yourself:

- Does my partner make me feel afraid?
- Does my partner act jealous when I am around other people?
- Has my partner ever threatened to harm me?
- Has my partner ever pushed me, hit me, choked me, thrown things at me, or forced me to have sex?
- Does my partner control the household money or refuse to give me money?
- Does my partner threaten to have me deported?
- Does my partner keep me from seeing my loved ones or following my interests?

### You are not alone

Intimate partner violence is common. If your partner abuses you, you may feel:

- Afraid
- Angry
- Ashamed
- Hopeless
- Upset
- Hurt
- Confused

Your partner can make these feelings worse by blaming you. No one deserves to be treated that way. You can get help for yourself.





## What can you do?

- Call 911 if you are in danger.
- Talk with a trusted friend, family member, doctor, or someone in your community.
- Have an emergency kit ready. The kit should have things you need if you have to leave quickly. Include your ID, birth certificate, medicines, and some money. Add things that are important to you like pictures or jewelry. Keep your cellphone and car keys with you at all times.

For help finding shelters and programs in your area, call the National Domestic Violence Hotline at **(800) 799-SAFE (799-7233)**. TTY users can call **(800) 787-3224**. You can also find help near you in the Community Resources section of the Partnership website.

Remember, you know what is right for you. There is no excuse for abuse. ♦

## Keep Your Child Healthy – Schedule a Well-Child Visit

Did you know that your child can see their primary care provider (PCP) every year for a well-child visit? These visits are important to your child's growth, and are at no cost to you.

At the well-child visit, the PCP will check your child's emotional and physical development, oral health, vision, hearing, and nutrition needs. Your child can also get recommended vaccines to protect them from getting sick, and blood lead screenings at 12 and 24 months of age. If your child is under 6 years old, they may need to catch up on certain screenings.

Call your child's PCP today to schedule a well-child visit. If you have questions, call us at

**(800) 863-4155**, Monday – Friday from 8 a.m. to 5 p.m. TTY users can call the California Relay Service at **(800) 735-2929** or **711**. ♦

## Ground Beef Veggie Stew

### What you will need:

- 1 lb. lean ground beef
- 1 Tbsp. olive oil
- 2 small zucchinis, cubed
- 1 red bell pepper, cubed
- 2 cans (15 ounces each) diced tomatoes
- 1 cup water
- Salt
- Pepper

### Toppings:

- Cilantro
- Sour cream



### What to do:

In a large saucepan, season ground beef with salt and pepper and cook fully. Take out meat from pan and set to the side.

In the same pan, add olive oil, zucchini, and red bell peppers. Cook for about 5-7 minutes. Add ground beef, tomatoes, water, salt, and pepper. Cook gently for 5-8 minutes until veggies are soft.

Serve with cilantro and sour cream.

## Tribal Health and Wellness Webpage

Partnership is committed to improving the health of our members in Tribal communities. We are happy to share that Partnership has a helpful webpage. On the webpage, you can find Partnership services and key phone numbers, resources from the Governor's Office of Tribal Affairs, and more. We created this webpage to make it easier for our Tribal members to find resources to stay healthy. ♦



Scan the QR code to visit the Tribal Health and Wellness webpage.



## Programs & Services

### Mental Health:

#### For outpatient services:

Members with Medicare Part B only, please call 1-800-MEDICARE (1-800-633-4227).

All other members, please call Carelon Behavioral Health at (855) 765-9703.

#### For inpatient services:

Each county's mental health department provides inpatient mental health services. For the phone number to your county's mental health department, please call us at (800) 863-4155, Monday – Friday, 8 a.m. – 5 p.m. TTY users can call (800) 735-2929 or 711.

### 24-Hour Advice Nurse:

Call (866) 778-8873; available 24 hours a day, 7 days a week

The Advice Nurse line is a service offered to Partnership members at no cost.

#### You can call the Advice Nurse line:

- When you have medical questions and cannot reach your provider
- If you are having a medical problem and are not sure if you should go to the emergency room

### Population Health:

Call (855) 798-8764; available Monday – Friday, 8 a.m. – 5 p.m.

#### Population Health offers:

- The Perinatal Growing Together Program with incentives for prenatal and postpartum care
- The Healthy Babies Growing Together Program, which connects your baby with a provider and offers incentives for going to well-child visits
- Helping you understand the importance of well care visits and testing
- Healthy Living Tools in Partnership's Member Portal
- Health education
- Community resources

### Care Coordination:

Call (800) 809-1350; available Monday – Friday, 8 a.m. – 5 p.m.

Care Coordination can help you with:

- Finding care and services near you
- Case management
  - o Coordinating care
  - o Complex health problems
  - o Coping with new health problems
- Health education
- Community resources
- California Children Services (CCS)
- Behavioral health services
- Mental health access
- Palliative care
- Chronic pain care
- Getting to medical appointments ♦

## Do You Have Other Health Coverage?

If you have another health insurance (like Medicare), or coverage through your work or a family member (with a company like Blue Cross of California, Blue Shield of California, or Health Net), you must get your care covered by your “primary” insurance first. This is called Coordination of Benefits. Medi-Cal is the “payer of last resort” by state and federal law. This means that Medi-Cal cannot pay for your health care services if another insurance plan could pay for it first. Partnership will not pay for health care unless your primary insurance has paid their part, or if the primary insurance has denied the health care as not a covered benefit.

We have services to help you manage your health care at no cost to you. If you have questions or concerns about how your Medi-Cal works with other insurance, please call Partnership at **(800) 863-4155**. TTY users can call **(800) 735-2929** or **711**.

To report changes to your primary insurance, please call Partnership and do one of the things below:

- Call your local county Medi-Cal office
- Call the Department of Health Care Services (DHCS) at **(800) 541-5555**
- Use the website below to report your change to DHCS: [www.dhcs.ca.gov/services/Pages/TPLRD\\_OCU\\_cont.aspx](http://www.dhcs.ca.gov/services/Pages/TPLRD_OCU_cont.aspx) ♦



## Partnership Respects Your Preferences

Partnership aims to use our members’ preferred pronouns and language. We collect information to get to know our members better. This includes race, ethnicity, language, sexual orientation, and gender identity of our members. If you give us this information, this does not change your Medi-Cal benefits or your access to health care. To learn more about how we review gender identity in our decision-making process, please go to our website at [PartnershipHP.org](http://PartnershipHP.org) to view section 5 of the Provider Manual and see our policy on gender-affirming care.

Your right to privacy and the confidentiality of your information is our priority. Partnership protects and uses race, ethnicity, language, sexual orientation, and gender identity data the same way as protected health information (PHI). By law, we can collect and share PHI for treatment, payment, and health care operations.

To learn more about our notice of privacy practices, please visit our website at [www.partnershiphp.org/Members/Medi-Cal/Pages/Notice-of-Privacy-Practices---HIPPA.aspx](http://www.partnershiphp.org/Members/Medi-Cal/Pages/Notice-of-Privacy-Practices---HIPPA.aspx). If you would like to share your preferred pronouns and language, please call us at **(800) 863-4155**, Monday – Friday, 8 a.m. – 5 p.m. TTY users can call the California Relay Service at **(800) 735-2929** or call **711**. ♦

## Telehealth Psychiatry Services

A psychiatrist is a doctor who will work with you to take care of your mental health needs. Partnership members ages 4 and up can access psychiatry services through TeleMed2U. Members below the age of 4 will be referred to UC Davis Health.

### What is a telehealth visit?

A telehealth visit is an online, video call that can be done from your home or anywhere a computer, laptop, tablet, or phone can connect to the internet. This type of visit is a great choice because you do not have to travel. You may be able to see a psychiatrist sooner this way than an in-person visit.

### Here is how it works:

1. Your primary care provider (PCP) may refer you to a psychiatrist or you can refer yourself.
2. Your visit will be setup up by our telehealth providers TeleMed2U or UC Davis Health.
3. Before your visit, TeleMed2U or UC Davis Health will call you to confirm and make sure you have what you need for your visit.
4. You will be sent a Zoom link for your visit. Make sure to log in 5 minutes early.
5. If you need medicine, the order will be sent to your pharmacy.

To set up or reschedule a visit and if you have any questions, please contact your provider.

- For UC Davis Health, call **(800) 482-3284**
- For TeleMed2U, send an email to [referrals@telemed2u.com](mailto:referrals@telemed2u.com), call or text **(855) 446-8628**, or use the QR code below ♦

Scan the QR code to book a TeleMed2U visit today.



## Preventing Food Allergies

By Dr. Teresa Frankovich

Did you know that you can help prevent common food allergies in your children? Talk to your baby's doctor about safe ways to introduce new foods into your baby's diet. This can lower their chance of getting food allergies.

The American Academy of Pediatrics website, [HealthyChildren.org](https://www.healthychildren.org), has helpful resources for the health and safety of all children. For more information on recent prevention guidelines for food allergies, watch their video on how to lower your child's risk of getting peanut and other common food allergies.

*Dr. Teresa Frankovich is a medical director at Partnership HealthPlan of California. ♦*

Scan the QR code to watch the video.



## The Results Are In!

Each year Partnership sends Member Satisfaction surveys to some of our members. In 2024, we sent out 3,375 adult surveys and 4,125 child surveys.

Both surveys showed that members were happy with their providers' services and Partnership's customer service. Child surveys also showed that members were happy that they received care quickly.

Thank you to the members who took the survey. Your feedback is important. The results help us give better service to our members. We will keep working hard to improve access to care for all our members.

We also want to hear from members in the 10 counties that we began serving in 2024. A new survey will be mailed in February 2025. If you get a survey, please help us by filling it out for yourself or your child. ♦



## Well-Child Visits Help Build Happy and Healthy Adults

Well-child visits are an important part of helping your child stay healthy. These visits are at no cost to Partnership members.

Children and youth ages 3 to 21 years old should be seen once a year. The focus of the visits will depend on your child's age, but should always include a physical exam and a review of your child's growth and development. You will talk about how your child is doing at home, in school, and with friends. At some visits, your child may need tests for things like low iron, high cholesterol, and other routine screenings.

Vaccines are also an important part of these visits. They help protect your child from diseases that can be life-threatening. For example, the HPV (human papillomavirus) vaccine is very effective in preventing certain cancers in men and women. This vaccine should be given to boys and girls starting at 9 to 11 years of age.

Your PCP can be a strong partner in supporting your child's physical and mental health. Taking your child to these yearly well-care visits builds happy and healthy adults. ♦

## Substance Use Treatment Services for Partnership Members

Wellness and Recovery is Partnership HealthPlan of California's program for substance use treatment services. This program is in Humboldt, Lassen, Mendocino, Modoc, Shasta, Siskiyou, and Solano counties. Partnership has helped over 11,000 members get services like:

- Withdrawal management (detox)
- Counseling in outpatient and intensive outpatient settings
- Medication assisted treatment (MAT)
- Residential care

### Substance use counselors and clinical staff provide the services.

If you live in Humboldt, Lassen, Mendocino, Modoc, Shasta, Siskiyou, or Solano county, call Carelon Behavioral Health at **(855) 765-9703**.

In other counties, these services are offered to Partnership members through the county health department, not the Wellness and Recovery Program.

No matter what county you live in, Partnership can help you get substance use treatment services.

You can visit our website at [PartnershipHP.org](http://PartnershipHP.org) to see the Wellness and Recovery Member Handbook, the Provider Directory, county phone numbers, and learn more about the benefit. ♦



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## NONDISCRIMINATION NOTICE

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Discrimination is against the law. Partnership HealthPlan of California follows state and federal civil rights laws. Partnership does not unlawfully discriminate, exclude people, or treat them differently because of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity, or sexual orientation.

Partnership provides:

- Free aids and services to people with disabilities to help them communicate better, such as:
  - ✓ Qualified sign language interpreters
  - ✓ Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Free language services to people whose primary language is not English, such as:
  - ✓ Qualified interpreters
  - ✓ Information written in other languages

If you need these services, contact Partnership between 8 a.m. – 5 p.m. by calling (800) 863-4155. If you cannot hear or speak well, please call (800) 735-2929 or California Relay 711. Upon request, this document can be made available to you in braille, large print, audiocassette, or electronic form. To obtain a copy in one of these alternative formats, please call or write to:

Partnership HealthPlan of California  
4665 Business Center Drive, Fairfield, CA 94534  
(800) 863-4155  
(800) 735-2929 or California Relay 711

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### **HOW TO FILE A GRIEVANCE**

If you believe that Partnership has failed to provide these services or unlawfully discriminated in another way on the basis of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity, or sexual orientation, you can file a grievance with a Partnership Civil Rights Coordinator. You can file a grievance by phone, in writing, in person, or electronically:

- **By phone:** Contact Partnership's Member Services between 8 a.m. – 5 p.m. by calling (800) 863-4155. Or, if you cannot hear or speak well, please call (800) 735-2929 or California Relay 711.
- **In writing:** Fill out a complaint form or write a letter and send it to:

Partnership HealthPlan of California  
Attn: Grievance: Partnership Civil Rights Coordinator  
4665 Business Center Drive  
Fairfield, CA 94534

- In person: Visit your doctor's office or Partnership and say you want to file a grievance.
  - Electronically: Visit Partnership's website at <https://partnershiphp.org>.
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### **OFFICE OF CIVIL RIGHTS – CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES**

You can also file a civil rights complaint with the California Department of Health Care Services, Office of Civil Rights by phone, in writing, or electronically:

- By phone: Call **916-440-7370**. If you cannot speak or hear well, please call **711 (Telecommunications Relay Service)**.

- In writing: Fill out a complaint form or send a letter to:

**Deputy Director, Office of Civil Rights  
Department of Health Care  
Services Office of Civil Rights  
P.O. Box 997413, MS 0009  
Sacramento, CA 95899-7413**

Complaint forms are available at  
[http://www.dhcs.ca.gov/Pages/Language\\_Access.aspx](http://www.dhcs.ca.gov/Pages/Language_Access.aspx).

- Electronically: Send an email to [CivilRights@dhcs.ca.gov](mailto:CivilRights@dhcs.ca.gov).
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### **OFFICE OF CIVIL RIGHTS – U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES**

If you believe you have been discriminated against on the basis of race, color, national origin, age, disability or sex, you can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights by phone, in writing, or electronically:

- By phone: Call **1-800-368-1019**. If you cannot speak or hear well, please call **TTY/TDD 1-800-537-7697**.
- In writing: Fill out a complaint form or send a letter to:

**U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Room 509F, HHH Building  
Washington, D.C. 20201**

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

- Electronically: Visit the Office for Civil Rights Complaint Portal at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>.



**TAGLINES**

**English Tagline**

ATTENTION: If you need help in your language call 1-800-863-4155 (TTY: 1-800-735-2929). Aids and services for people with disabilities, like documents in braille and large print, are also available. Call 1-800-863-4155 (TTY: 1-800-735-2929). These services are free of charge.

**الشعار بالعربية (Arabic)**

يُرجى الانتباه: إذا احتجت إلى المساعدة بلغتك، فاتصل بـ 1-800-863-4155 (TTY: 1-800-735-2929). تتوفر أيضًا المساعدات والخدمات للأشخاص ذوي الإعاقة، مثل المستندات المكتوبة بطريقة برييل والخط الكبير. اتصل بـ 1-800-863-4155 (TTY: 1-800-735-2929). هذه الخدمات مجانية.

**Հայերեն պիտակ (Armenian)**

ՈՒ ՇԱԴՐՈՒԹՅՈՒՆ: Եթե Ձեզ օգնություն է հարկավոր Ձեր լեզվով, զանգահարեք 1-800-863-4155 (TTY: 1-800-735-2929): Կան նաև օժանդակ միջոցներ ու ծառայություններ հաշմանդամություն ունեցող անձանց համար, օրինակ՝ Բրայլի գրատիպով ու խոշորատառ տպագրված նյութեր: Չանգահարեք 1-800-863-4155 (TTY: 1-800-735-2929): Այդ ծառայություններն անվճար են:

**ប្រាសាទសំខ្មែរ (Cambodian)**

ចំណាំ: បើអ្នក ត្រូវ ការជំនួយ ជាភាសា របស់អ្នក សូម ទូរស័ព្ទទៅលេខ 1-800-863-4155 (TTY: 1-800-735-2929)។ ជំនួយ និង សេវាកម្ម សម្រាប់ ជនពិការ ដូចជាឯកសារសរសេរជាអក្សរធំ សម្រាប់ជនពិការភ្នែក ឬឯកសារសរសេរជាអក្សរពុម្ពធំ ក៏អាចរកបានផងដែរ។ ទូរស័ព្ទមកលេខ 1-800-863-4155 (TTY: 1-800-735-2929)។ សេវាកម្មទាំងនេះមិនគិតថ្លៃឡើយ។

**简体中文标语 (Simplified Chinese)**

请注意：如果您需要以您的母语提供帮助，请致电 1-800-863-4155 (TTY: 1-800-735-2929)。我们另外还提供针对残疾人士的帮助和服务，例如盲文和大字体阅读，提供您方便取用。请致电 1-800-863-4155 (TTY: 1-800-735-2929)。这些服务都是免费的。

**فارسی زبان به مطلب (Farsi)**

توجه: اگر می‌خواهید به زبان خود کمک دریافت کنید، با 1-800-863-4155 (TTY: 1-800-735-2929) تماس بگیرید. کمک‌ها و خدمات مخصوص افراد دارای معلولیت، مانند نسخه‌های خط بریل و چاپ با حروف بزرگ، نیز موجود است. با 1-800-863-4155 (TTY: 1-800-735-2929) تماس بگیرید. این خدمات رایگان ارائه می‌شوند.

### **हिंदी टैगलाइन (Hindi)**

ध्यान दें: अगर आपको अपनी भाषा में सहायता की आवश्यकता है तो 1-800-863-4155 (TTY: 1-800-735-2929) पर कॉल करें। अशक्तता वाले लोगों के लिए सहायता और सेवाएं, जैसे ब्रेल और बड़े प्रिंट में भी दस्तावेज़ उपलब्ध हैं। 1-800-863-4155 (TTY: 1-800-735-2929) पर कॉल करें। ये सेवाएं नि: शुल्क हैं।

### **Nge Lus Hmoob Cob (Hmong)**

CEEB TOOM: Yog koj xav tau kev pab txhais koj hom lus hu rau 1-800-863-4155 (TTY: 1-800-735-2929). Muaj cov kev pab txhawb thiab kev pab cuam rau cov neeg xiam oob qhab, xws li puav leej muaj ua cov ntawv su thiab luam tawm ua tus ntawv loj. Hu rau 1-800-863-4155 (TTY: 1-800-735-2929). Cov kev pab cuam no yog pab dawb xwb.

### **日本語表記 (Japanese)**

注意日本語での対応が必要な場合は 1-800-863-4155 (TTY: 1-800-735-2929)へお電話ください。点字の資料や文字の拡大表示など、障がいをお持ちの方のためのサービスも用意しています。 1-800-863-4155 (TTY: 1-800-735-2929)へお電話ください。これらのサービスは無料で提供しています。

### **한국어 태그라인 (Korean)**

유의사항: 귀하의 언어로 도움을 받고 싶으시면 1-800-863-4155 (TTY: 1-800-735-2929) 번으로 문의하십시오. 점자나 큰 활자로 된 문서와 같이 장애가 있는 분들을 위한 도움과 서비스도 이용 가능합니다. 1-800-863-4155 (TTY: 1-800-735-2929) 번으로 문의하십시오. 이러한 서비스는 무료로 제공됩니다.

### **ແທກໄລພາສາລາວ (Laotian)**

ປະກາດ: ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອໃນພາສາຂອງທ່ານໃຫ້ໂທຫາເບີ 1-800-863-4155 (TTY: 1-800-735-2929). ຍັງມີຄວາມຊ່ວຍເຫຼືອແລະການບໍລິການສໍາລັບຄົນພິການເຊັ່ນເອກະສານທີ່ເປັນອັກສອນນູນແລະມີໂຕພິມໃຫຍ່ໃຫ້ໂທຫາເບີ 1-800-863-4155 (TTY: 1-800-735-2929). ການບໍລິການເຫຼົ່ານີ້ບໍ່ຕ້ອງເສຍຄ່າໃຊ້ຈ່າຍໃດໆ.

### **Mien Tagline (Mien)**

LONGC HNYOUV JANGX LONGX OC: Beiv taux meih qiex longc mienh tengx faan benx meih nyei waac nor douc waac daaih lorx taux 1-800-863-4155 (TTY: 1-800-735-2929). Liouh lorx jauv-louc tengx aengx caux nzie gong bun taux ninh mbuo wuaaic fangx mienh, beiv taux longc benx nzangc-pokc bun hlou mbiutc aengx caux aamz mborqv benx domh sou se mbenc nzoih bun longc. Douc waac daaih lorx 1-800-863-4155 (TTY: 1-800-735-2929). Naaiv deix nzie weih gong-bou jauv-louc se benx wang-henh tengx mv zuqc cuotv nyaanh oc.

### **ਪੰਜਾਬੀ ਟੈਗਲਾਈਨ (Punjabi)**

ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਹਾਨੂੰ ਆਪਣੀ ਭਾਸ਼ਾ ਵਿੱਚ ਮਦਦ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਾਲ ਕਰੋ 1-800-863-4155 (TTY: 1-800-735-2929). ਅਪਾਰਜ ਲੋਕਾਂ ਲਈ ਸਹਾਇਤਾ ਅਤੇ ਸੇਵਾਵਾਂ, ਜਿਵੇਂ ਕਿ ਬ੍ਰੇਲ ਅਤੇ ਮੋਟੀ ਛਪਾਈ ਵਿੱਚ ਦਸਤਾਵੇਜ਼, ਵੀ ਉਪਲਬਧ ਹਨ। ਕਾਲ ਕਰੋ 1-800-863-4155 (TTY: 1-800-735-2929). ਇਹ ਸੇਵਾਵਾਂ ਮੁਫਤ ਹਨ।

### **Русский слоган (Russian)**

ВНИМАНИЕ! Если вам нужна помощь на вашем родном языке, звоните по номеру 1-800-863-4155 (линия TTY: 1-800-735-2929). Также предоставляются средства и услуги для людей с ограниченными возможностями, например документы крупным шрифтом или шрифтом Брайля. Звоните по номеру 1-800-863-4155 (линия TTY: 1-800-735-2929). Такие услуги предоставляются бесплатно.

### **Mensaje en español (Spanish)**

ATENCIÓN: si necesita ayuda en su idioma, llame al 1-800-863-4155 (TTY: 1-800-735-2929). También ofrecemos asistencia y servicios para personas con discapacidades, como documentos en braille y con letras grandes. Llame al 1-800-863-4155 (TTY: 1-800-735-2929). Estos servicios son gratuitos.

### **Tagalog Tagline (Tagalog)**

ATENSIYON: Kung kailangan mo ng tulong sa iyong wika, tumawag sa 1-800-863-4155 (TTY: 1-800-735-2929). Mayroon ding mga tulong at serbisyo para sa mga taong may kapansanan, tulad ng mga dokumento sa braille at malaking print. Tumawag sa 1-800-863-4155 (TTY: 1-800-735-2929). Libre ang mga serbisyonang ito.

### **แท็กไลน์ภาษาไทย (Thai)**

โปรดทราบ: หากคุณต้องการความช่วยเหลือเป็นภาษาของคุณ กรุณาโทรศัพท์ไปที่หมายเลข 1-800-863-4155 (TTY: 1-800-735-2929) นอกจากนี้ ยังพร้อมให้ความช่วยเหลือและบริการต่าง ๆ สำหรับบุคคลที่มีความพิการ เช่น เอกสารต่าง ๆ ที่เป็นอักษรเบรลล์และเอกสารที่พิมพ์ด้วยตัวอักษรขนาดใหญ่ กรุณาโทรศัพท์ไปที่หมายเลข 1-800-863-4155 (TTY: 1-800-735-2929) ไม่มีค่าใช้จ่ายสำหรับบริการเหล่านี้

### **Примітка українською (Ukrainian)**

УВАГА! Якщо вам потрібна допомога вашою рідною мовою, телефонуйте на номер 1-800-863-4155 (TTY: 1-800-735-2929). Люди з обмеженими можливостями також можуть скористатися допоміжними засобами та послугами, наприклад, отримати документи, надруковані шрифтом Брайля та великим шрифтом. Телефонуйте на номер 1-800-863-4155 (TTY: 1-800-735-2929). Ці послуги безкоштовні.

### **Khẩu hiệu tiếng Việt (Vietnamese)**

CHÚ Ý: Nếu quý vị cần trợ giúp bằng ngôn ngữ của mình, vui lòng gọi số 1-800-863-4155 (TTY: 1-800-735-2929). Chúng tôi cũng hỗ trợ và cung cấp các dịch vụ dành cho người khuyết tật, như tài liệu bằng chữ nổi Braille và chữ khổ lớn (chữ hoa). Vui lòng gọi số 1-800-863-4155 (TTY: 1-800-735-2929). Các dịch vụ này đều miễn phí.



**P.O. Box 85**  
**Suisun City, CA 94585**

**(800) 863-4155 (800) 735-2929 (TTY/TDD)**

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