



**Ventura County Medi-Cal Managed
Care Commission (VCOMMCC) dba
Gold Coast Health Plan (GCHP)
Consumer Advisory Committee Meeting**

711 E. Daily Drive, Suite 106, Camarillo, CA 93010
Wednesday, July 22, 2015
5:00 p.m.

AGENDA

CALL TO ORDER / ROLL CALL

WELCOME AND INTRODUCTIONS

PUBLIC COMMENT A Speaker Card must be completed and submitted to the Secretary of the Committee by anyone wishing to comment:

- **Public Comment** – Comments regarding items not on the agenda but within the subject matter jurisdiction of the Committee.
- **Agenda Item Comment** – Comments on the subject matter jurisdiction of the Committee pertaining to a specific item on the agenda. The speaker is recognized and introduced by the Committee Chair during the Committee's consideration of the item.

APPROVE MINUTES

1. [Regular Meeting of March 18, 2015](#)

DISCUSSION ITEMS

2. CEO Perspective – Dale Villani, Chief Executive Officer
3. COO Update – Ruth Watson, Chief Operations Officer
4. [Financial Update – Lyndon Turner, Director of Financial Analysis](#)
5. [Action Item Update – Luis Aguilar, Member Services Manager](#)
6. [Operations Update – Tami Lewis, Director of Operations](#)

Meeting Agenda available at <http://www.goldcoasthealthplan.org>

ADMINISTRATIVE REPORTS RELATING TO THIS AGENDA AND MATERIALS RELATED TO AN AGENDA ITEM SUBMITTED TO THE COMMITTEE AFTER DISTRIBUTION OF THE AGENDA PACKET ARE AVAILABLE FOR PUBLIC REVIEW DURING NORMAL BUSINESS HOURS AT THE OFFICE OF THE SECRETARY OF THE COMMITTEE, 711 E. DAILY DRIVE, SUITE 106, CAMARILLO, CA 93010.

IN COMPLIANCE WITH THE AMERICANS WITH DISABILITIES ACT, IF YOU NEED SPECIAL ASSISTANCE TO PARTICIPATE IN THIS MEETING, PLEASE CONTACT CONNIE AT (805) 437-5562. REASONABLE ADVANCE NOTIFICATION OF THE NEED FOR ACCOMMODATION PRIOR TO THE MEETING (48 HOURS ADVANCE NOTICE IS PREFERABLE) WILL ENABLE US TO MAKE REASONABLE ARRANGEMENTS TO ENSURE ACCESSIBILITY TO THIS MEETING.

**Ventura County Medi-Cal Managed Care Commission (VCMCC) dba Gold Coast Health Plan
July 22, 2015 Consumer Advisory Committee Meeting Agenda (continued)**

PLACE: 711 E. Daily Drive, Suite 106, Camarillo, CA 93010

TIME: 5:00 p.m.

7. [Care Management Department – Polly Wohland, Care Management Lead](#)
8. [Communications Update – Steve Lalich, Director of Communications](#)
9. [Health Education Update – Lupe Gonzalez, Director of Health Education](#)

COMMENTS FROM COMMITTEE MEMBERS

ADJOURNMENT

Unless otherwise determined by the Committee, the next regular meeting of the Consumer Advisory Committee will be held on September 16, 2015, 5:00 p.m. at 711 E. Daily Drive, Suite 106, Camarillo, CA 93010.

Meeting Agenda available at <http://www.goldcoasthealthplan.org>

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**Ventura County Medi-Cal Managed Care Commission
(VCOMMCC) dba Gold Coast Health Plan (GCHP)
Consumer Advisory Committee Minutes
March 18, 2015**

(Not official until approved)

CALL TO ORDER

COO/Interim CEO Ruth Watson called the meeting to order at 5:07 p.m. at the offices of Gold Coast Health Plan, 711 E. Daily Drive, Suite 106, Camarillo, CA 93010, in the Carnegie Conference Room.

ROLL CALL

COMMITTEE MEMBERS IN ATTENDANCE

Alicia Flores, La Hermandad (arrived at 5:20 p.m.)

Norma Gomez, Mixteco / Indigena Community Organizing Project (arrived at 5:23 p.m.)

Frisa Herrera, Casa Pacifica

Paula Johnson, ARC of Ventura County

Laurie Jordan, Rainbow Connection / Tri-Counties Regional Center

Ruben Juarez, County Health Care Agency

Pedro Mendoza, Tri-Counties Regional Center

Katharine Raley, County of Ventura Area Agency on Aging

Curtis Updike, County Human Services Agency (HSA)

EXCUSED / ABSENT COMMITTEE MEMBERS

Rita Duarte-Weaver, Ventura County Public Health Department

Michelle Gerardi, Beneficiary

STAFF IN ATTENDANCE

Ruth Watson, Chief Operating Officer / Interim Chief Executive Officer

Tami Lewis, Director of Operations

John Meazzo, Interim Chief Financial Officer

Connie Harden, Member Services Specialist

Luis Aguilar, Member Services Manager

Vickie Connaughton, Health Education Specialist

Stacy Cortez, Member Services Representative

William Freeman, Director of Network Operations

Anne Freese, Pharmacy Director

Guillermo Gonzalez, Director of Government Affairs

Lupe Gonzalez, Director Health Education

Steve Lalich, Director of Communications

Al Reeves, MD, Chief Medical Officer

Nancy Wharfield, MD, Associate Chief Medical Officer

Language interpreting and translating services were provided by GCHP from Lourdes González Campbell and Associates.

PUBLIC COMMENT / CORRESPONDENCE

None

APPROVAL MINUTES

1. Regular Meeting of December 10, 2014

Committee Member Curtis Updike moved to approve the Meeting Minutes of December 10, 2014. Committee Member Pedro Mendoza seconded. The motion carried with the following vote:

AYE: Flores, Gomez, Herrera, Johnson, Jordan, Juarez, Mendoza, Raley and Updike.
NAY: None.
ABSTAIN: None.
ABSENT: Duarte-Weaver and Gerardi.
RECUSED: None.

APPROVAL ITEMS

None

DISCUSSION ITEMS

2. CEO / COO Update

Chief Operating Officer (COO) / Interim Chief Executive Officer (CEO) Ruth Watson presented information from the recent Strategic Planning Session. Interim CEO Watson stated that Gold Coast Health Plan (GCHP) had hired a third party, Health Management Associates (HMA), who provided very interesting information which she shared with CAC members. Interim CEO Watson stated that she asked permission from HMA to share the slides with the CAC members. She went on to say that all of the information furnished is public information. Highlighted information from the presentation was:

- One out of every two children in Ventura County is covered by GCHP.
- GCHP has grown from 100,000 members in August 2013 to over 180,000 today.
- GCHP has added 59,000 members since January 1, 2014.
- There are approximately 20,000 people in Ventura County who are eligible for Medi-Cal but not yet enrolled.
- Medi-Cal covers one in five Ventura County residents.
- GCHP enrollment grew by 44% in 2014 following expansion, outpacing statewide enrollment which increased 20%.

Committee Member Laurie Jordan asked how GCHP was compensated. CEO Watson replied that GCHP is paid by the State monthly, and that the capitation rate per-member is based on the member's aid code.

Interim CEO Watson reported that Vision 2020 planning is in process. Vision 2020 is the next state Waiver. She added that the Waiver is how money comes in for the Medi-Cal program. The 1115 Waiver ends October 31, 2015 and is a five year waiver.

Interim CEO Watson stated there is good news with regards to GCHP's financial position. She went on to say that improved ongoing operations, along with Department of Health Care Services (DHCS) capitation reimbursement for the Medi-Cal Expansion members, combined with lower than expected utilization of services, has helped to produce \$70 million in Tangible Net Equity (TNE). She added that this allowed for the first across-the-board physician provider rate bump beginning in March 2015. GCHP is now reinvesting in projects to improve care for new members and building financial reserves.

Interim CEO Watson presented further information on Medicaid statistics in all states, California and Ventura County. She added that what is interesting is that we have members drop off every month so the increase shown is a net increase. Committee Member Jordan asked if we are following the members who drop off and do we know why they dropped off. Interim CEO Watson replied that GCHP is not provided with a termination reason on the eligibility file we receive from DHCS. She went on to say that one thing we can do to get a better handle on this issue is to send a letter to a member reminding them to re-enroll with Medi-Cal so there is no gap in coverage. Interim CEO Watson stated that we plan to take on this project in the next fiscal year. Committee Member Curtis Updike stated that prior to the Affordable Care Act (ACA) about 40% of Medi-Cal members did not re-enroll, adding that they are looking into reasons why members did not re-enroll. Committee Member Updike went on to say that these were mostly people who did not provide requested information, mostly the transient population. He added that HSA reached out to people and were able to bring back about 60% of those and plans to continue this process independently or with GCHP.

Committee Member Updike stated that for the next CAC meeting, we should report on the 1115 Waiver. Interim CEO Watson agreed and stated that as it was just passed, she wanted to have more information before reporting to the Committee. She went on to say that it is very important to understand the Waiver as it is what funds Medi-Cal. Discussion was held about the Waiver.

Discussion was held about access to care standards for appointments. Interim CEO Watson stated that if members are having problems getting timely appointments, they should call GCHP and we can assist them.

RECESS

A break was provided at 6:15 p.m. The meeting reconvened at 6:30 p.m.

3. CFO Update

Interim Chief Financial Officer (CFO) John Meazzo reviewed the written update as presented to the Committee.

4. Action Item Update

Member Services Manager, Luis Aguilar, presented the Action Items from the December 10, 2014 meeting. Manager Aguilar stated that of the seven action items from the meeting, all had been completed with the exception of two items which will be presented separately at this meeting by Dr. Nancy Wharfield and Director of Government Affairs, Guillermo Gonzalez.

5. Rainbow Connection Update

Committee Member Laurie Jordan of the Rainbow Connection reported on Attention Deficit Disorder (ADD) and how Rainbow Connection works to help the affected clients. She stated that the Rainbow Connection is about families helping families. She went on to state that Rainbow Connection is a part of Tri-Counties Regional Center serving Ventura County with offices in Oxnard and satellite offices in Simi Valley and other locations. Funding comes from various programs, including grants from different agencies, and that Tri-Counties Regional Center funds those clients age three (3) years and older. The Rainbow Connection provides families with information, training and support. They also help parents with resources and teach them advocacy skills for their children. They provide health care notebooks to help parents with their appointments. The agency is helping families at the level they understand. Committee Member Jordan stated that some of the functions they hold are social functions, dances, support groups and conferences in different locations.

6. Operations Update

Director of Operations, Tami Lewis, reported on the Operations Update as presented. Director Lewis stated that we have exceeded enrollment expectations and currently are at approximately 183,000 members.

Director Lewis stated that the 2015-2016 Member Handbook has been reviewed and sent to the state for their approval and that we hope to have it for use with new members in July.

Director Lewis stated that with regards to membership and claims, we are receiving over 6,500 claims a day as members are utilizing services more. She added that a year ago we were receiving around 5,000 claims a day.

10. Pharmacy Benefits Overview

Pharmacy Director, Anne Freese, reviewed the Pharmacy Benefits Overview as presented to the Committee. Director Freese commented that the state has a prescription limit of six (6) prescriptions per month, but that GCHP had increased that limit to ten (10) for GCHP members. She went on to state that going forward, GCHP was going to eliminate the limit on prescriptions as it was more cost effective to lift the limit than to monitor it for the very few members who have need for more than ten (10) prescriptions per month.

Committee Member Updike asked how we fund the additional prescriptions for these members. Director Freese replied that we are able to set our formulary and restrictions as we see necessary. Committee Member Updike asked if GCHP gets reimbursed from Medi-Cal for the additional prescriptions. Interim CEO Watson explained that yes, as a managed care plan we are expected to manage prescription needs within the capitation they give us. Committee Member Updike asked how this impacts the bottom line. Interim CEO Watson explained that Director Freese has been able to save us significant dollars with our pharmacy benefits manager (PBM), Script Care. Interim CEO Watson said that when looking at the duals population, they take about seventeen (17) drugs a day and we are looking at those members to see if they really require all seventeen (17) drugs and to make sure they have been evaluated properly.

7. Government Affairs Update

Director of Government Affairs, Guillermo Gonzalez, reviewed his report as presented. Director Gonzalez provided a description of the 1115 Waiver. He stated that a Medicaid program has to have certain, set services provided through the program and that when a state wants to change services offered that are not in the statute, the state has to request a waiver. He went on to say that the current waiver expires at the end of October 2015 which is the end of the five-year period. Director Gonzalez said that the state is preparing for the new waiver and is planning to do some innovative things in the next waiver. He went on to say that the new waiver is called *Medi-Cal 2020* and that some of the programs they are recommending are the whole person care pilot program, housing and supportive services, a work force development program, etc.

8. Behavioral Health Utilization Demographics

Associate Chief Medical Officer (Associate CMO), Dr. Nancy Wharfield, presented her report on behavioral health utilization demographics. Associate CMO Wharfield began her presentation by stating that this is a picture of mild to moderate health care, not those who are being seen at the county level. Dr. Wharfield stated that when we first began taking care of the behavioral health issues, the number of people seeking services were in the single digits and teens. Now we are getting about 200 – 300 people a month through the system.

9. Newsletter and Annual Report Update

Director of Communications, Steve Lalich, stated that the Winter 2015 edition of the Winning Health newsletter has been mailed and was in homes the end of February or beginning of March. He added that it goes out to unique households, not individual members; we sent out about 78,000 copies of the newsletter. Director Lalich also commented on the Provider Operations Bulletin and the Pharmacy newsletter that both are distributed quarterly to providers. He added that he just completed the *Annual Report to the Community*, and will be distributing it digitally next week. Director Lalich thanked Committee Member Updike for providing information needed for that publication. Committee Member Updike commented on the Daily Health News Report being sent out by Director Lalich.

10. Pharmacy Benefits Overview (presented after Item 6 above)

11. Health Education Update

Director of Health Education, Lupe Gonzalez, announced that the invitation has been sent out to our community partners for GCHP's 4th Annual Community Resource Fair. She went on to state that Health Education had received about fifteen (15) registrations to date. She stated that the fair would be held in downtown Oxnard at Plaza Park on Saturday, June 6, 2015, from 10:00 a.m. until 2:00 p.m. She added that the venue was moved to allow more vendors and more community participation.

Comments from Committee Members

None

ADJOURNMENT

Meeting was adjourned at 7:28 p.m.



AGENDA ITEM 4

To: Gold Coast Health Plan Consumer Advisory Committee
From: Lyndon Turner, Director of Financial Analysis
Date: July 22, 2015
Re: Financial Update

Financial Update

Gold Coast Health Plan continued to increase its net assets from operations. For the eleven months ended May 31, 2015, total revenues were \$514.2 million, and total operational expenses were \$482.7 million resulting in an increase in net assets of approximately \$69.1 million.

Continued growth in membership, particularly in the new Adult Expansion category, was the main contributor to the Plan's growth. Approximately 31,000 members have been added since the beginning of the fiscal year and exceed budget projections by 22,500.

During the eleven month period, expenditures for providing medical care to our members totaled \$413.6 million, below budget expectations of \$496.1 million. The variance was largely the result of the Adult Expansion population which had no historical experience and had significantly lower utilization than had been estimated.

Gold Coast Health Plan's Tangible Net Equity (TNE), or statutory capital, stood at \$108.9 million. This level is 490% of the required TNE, and exceeded both the budget of \$46.5 million and the State minimum required TNE amount of \$22.2 million. The Plan was at approximately 457% of the minimum TNE requirement when the county lines of credit are excluded from the calculation.

During recent months, the Plan's investment policy was approved by the Commission and implemented by Finance staff. The result is a low-risk, well-diversified portfolio which currently yields approximately 0.45%.



Ventura County Medi-Cal Managed
 Care Commission (VCMCC) dba
 Gold Coast Health Plan
 Action Items

Consumer Advisory Committee Meetings - 2015

Date	Owner	Department	Action Required	Response	Date Completed
3/18/2015	Ruth Watson or Guillermo Gonzalez	Administration or Government Relations	Present report on the 1115 Waiver at June 17, 2015 meeting.	Ruth Watson, COO to present information at 7/22/2015 meeting.	7/22/2015

AGENDA ITEM 6

To: Gold Coast Health Plan Consumer Advisory Committee

From: Tami Lewis, Director of Operations

Date: July 22, 2015

Re: Operations Update

Membership Update – July 2015

Gold Coast Health Plan (GCHP) added another 1,520 members in July. This brings the total membership to 189,321 as of July 1, 2015. GCHP’s membership has increased by 70,809 or 59.7% since January 2014. The cumulative new membership since January 1, 2014 is summarized as follows:

Aid Code	# of New Members
L1 – Low Income Health Plan (LIHP)	3,218
M1 – Adult Expansion	40,948
7U – CalFresh Adults	2,918
7W – CalFresh Children	770
7S – Parents of 7Ws	355
Traditional Medi-Cal	22,600
Total New Membership 1/1/14 – 6/1/15	70,809

Members assigned to an M1 aid code increased again in July. All other Medi-Cal Expansion aid codes, with the exception of 7S, decreased either due to re-determination into other aid codes or loss of coverage. GCHP had 98 potential new members transitioning from Covered CA as of July 1, 2015; 77 were included on the July eligibility file from DHCS.

Member Handbook

The 2015-16 version of GCHP’s Member Handbook was implemented into production beginning with July 2015 new members.

Member Orientation Meetings – GCHP Member Services continues to offer three (3) Member Orientation meetings, in both English and Spanish, each month in various locations throughout the county. A total of 127 members (97 English, 30 Spanish) plus 17 County Employees/Others have attended meetings in the first six month of 2015 compared with a total of 28 during the same time period in 2014. GCHP continues to include an

informational flyer in each new member packet to make members aware of this opportunity to learn more about GCHP and their Medi-Cal benefits.

Call Center Statistics – GCHP’s call center received 14,341 member calls during 2Q2015. The Average Speed to Answer (ASA) was 9.4 seconds compared to a goal of 30 seconds or less and the Abandonment Rate was .63% compared to a goal of 5% or less.

Grievance and Appeals (G&A) – GCHP received 309 member grievances during 2Q2015; 275 were administrative and 34 were clinical. GCHP also received 12 appeals during the quarter. The majority of the administrative grievances were related to balance billing (266). The G&A team provides information to Network Operations regarding the providers who are balance billing members incorrectly so the providers can be educated that they are not allowed to bill these members. As of July 1st, GCHP will remove balance billing as a grievance type to be in alignment with the other COHS plans. If the provider continues to balance bill a member after being advised not to do so, the member then has the option to file a formal grievance with GCHP.



**Gold Coast
Health Plan**SM
A Public Entity



Medi-Cal Expansion Update

Consumer Advisory Committee

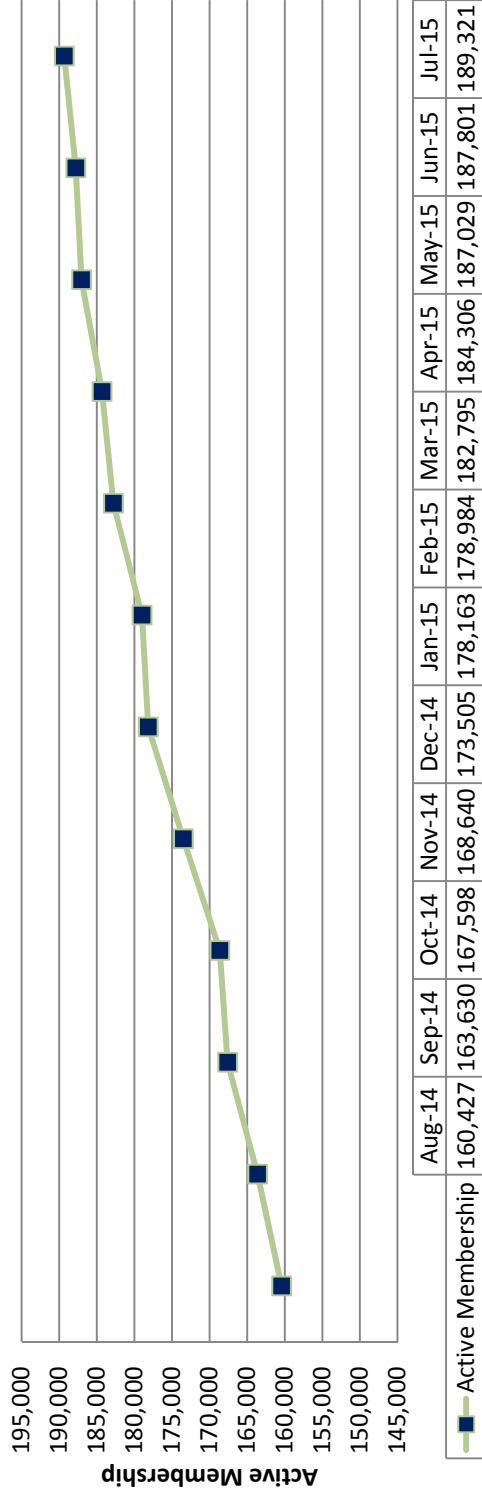
July 22, 2015

Tami Lewis, Director of Operations

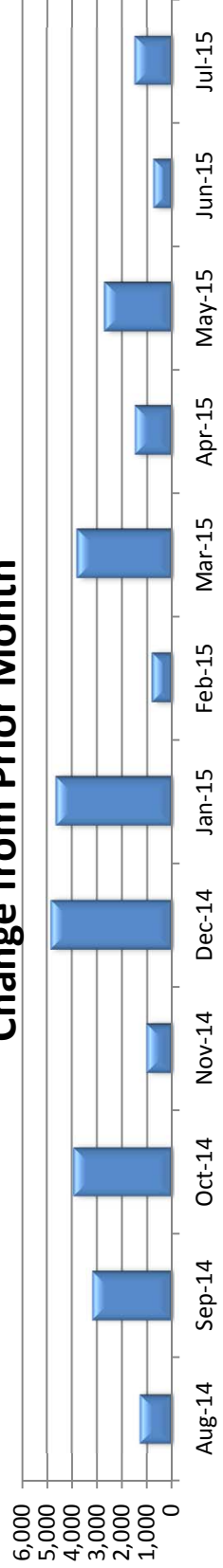
GCHP Membership

Total Membership as of July 1, 2015 – 189,321
New Members Added Since January 2014 – 70,809

GCHP Membership Increase August 2014 - July 2015

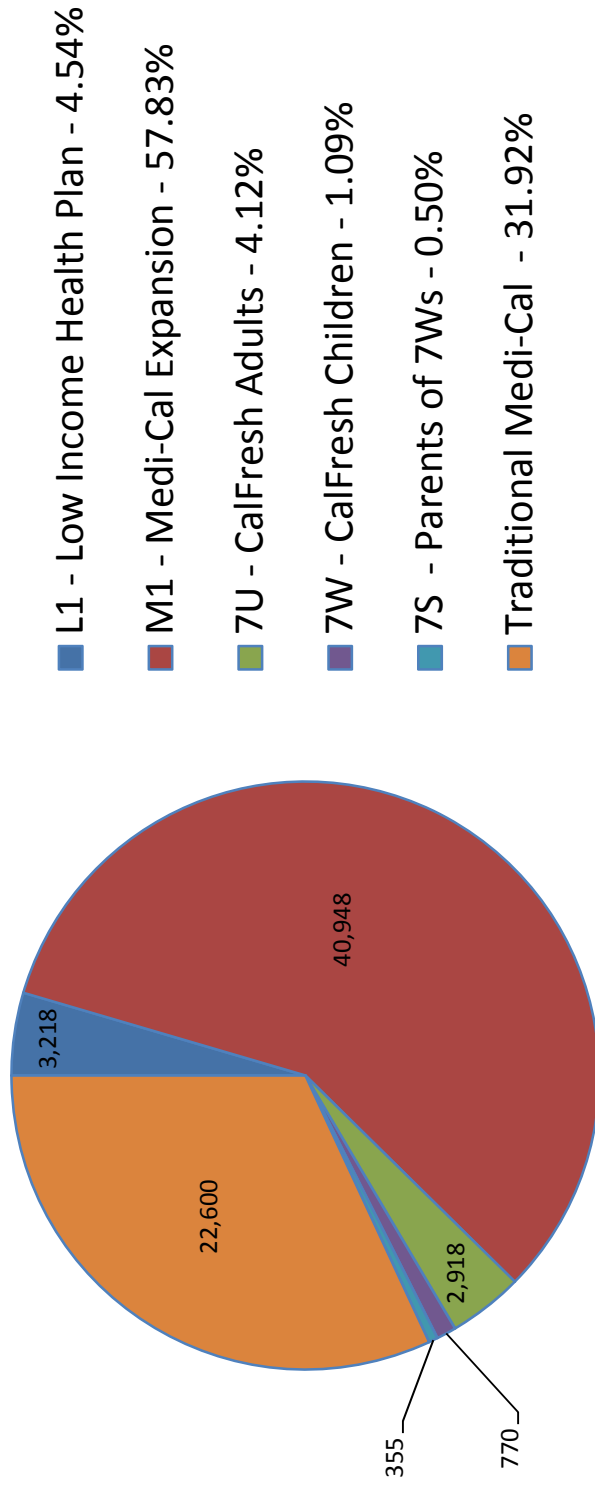


Change from Prior Month



Membership Growth

GCHP New Membership Breakdown



Note: GCHP Pended eligibility (not shown) – 1,187 (decreased 315 from June)

- Members with aid code 8E – accelerated enrollment which provides immediate temporary, fee-for service, full scope Medi-Cal benefits for ages 65 and under



Gold Coast Health Plan Care Management

Consumer Advisory Committee

July 22, 2015

Dee Johnston, RN BA CCM

Manager of Care Management Services

www.goldcoasthealthplan.org

Table of Contents

- Introduction
- What is Care Management?
- What our team does
- Care Management Specialties
- The Continuum of Care
- Collaboration with Community Partners
- Referral process
- How to make a referral
- Contact us
- Care Management team

When a GCHP member has health care needs,



**you may find it valuable to reach out to a
GCHP Care Manager!**

What is Care Management?

Care Managers work with people to get the health care and other community services they need, when they need them, and for the best value.

Through telephonic interaction with our members, the Care Manager collects and analyzes data about the actual and potential care needs for the purpose of developing a care plan.

Care Managers strive to empower members to exercise their options and access services to meet their individual health care needs, in order to promote quality outcomes.

How Do We Do It?

Care Management receives between 300 and 325 referrals per month.



We anticipate that this number will increase due to expanded awareness of GCHP CM Services within the community.

Requests for Care Management services are known as referrals. Referrals can come from:

- GCHP Utilization Management Staff
- Physicians
- Hospital Case Managers
- Community partners and agencies
- Data Mining
- Pharmacy
- Behavioral Health
- Self referrals from members or family



The Case Management Society of America sets nationally recognized Standards of Practice, which GCHP Care Management follows:

- *Addressing total individual needs— Medical, Psychological, Cultural and Spiritual*
- *Increasing caregiver involvement*
- *Minimizing fragmentation of care*
- *Using evidence-based guidelines*
- *Facilitating safe, effective, timely and complete transition of care*
- *Expanding the interdisciplinary team and support system*
- *Moving members to optimal levels of health and well-being*
- *Improving member safety and satisfaction*
- *Improving medication adherence*
- *Improving outcomes*



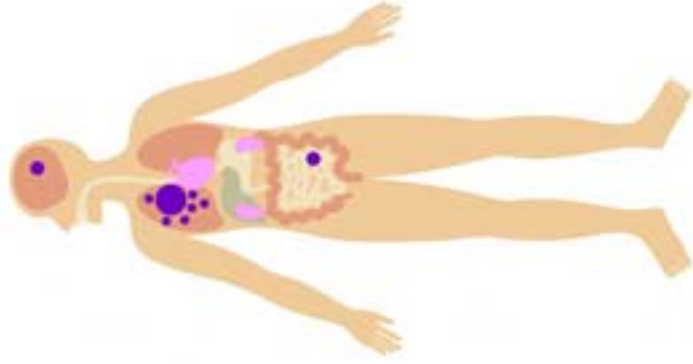
CARE MANAGEMENT SPECIALTIES

Pediatrics

- Pediatric Care Management
- Identification of members for CCS deferral
- NICU review
- Inpatient CCS eligibility review
- Transition from CCS pediatric to GCHP adult providers
- CHDP Triage and management of specified conditions
- SPD (Seniors and Persons with Disabilities) Triage
- CCS Liaison who confers with CCS nurses and case workers



CARE MANAGEMENT SPECIALTIES



Adult General

- Hospice and Palliative Care
- Complex and Catastrophic Conditions
- Substance Use Disorders
- Behavioral Health Issues
- Nutritional Assessments and Education
- SPD (Seniors and Persons with Disabilities)
- Assessment of Member Satisfaction

CARE MANAGEMENT SPECIALTIES

Seniors and Persons with Disabilities (SPD)

- State Mandated Program
- Designated by Aid Code
- 80 to 100 members per month
- Assessed for high and low risk
- Physician involvement
- Individualized Care Plan for each member who agrees to participate



CARE MANAGEMENT SPECIALTIES

Organ Transplant Coordination

- Coordinates care with Utilization Management
- Coordinates care with Transplant Facilities
- Authorizes Organ Transplants
- Provides Member education, ensures understanding of multiple medications and self-management
- Provides intensive Care Management for 1 to 6 months pre-and post transplant
- Provides follow-up as needed



ORGAN DONATION
A GIFT FOR LIFE

CARE MANAGEMENT SPECIALTIES

Social Work

- Provides Care Management for members at psychosocial risk
- Coordinates Behavioral Health Referrals
- Assists members with Share of Cost issues
- Works with State Ombudsman
- Assists with housing needs
- Provides extensive community resources and linkage
- Educates members about IHSS and how to prepare for screening



social worker

CARE MANAGEMENT SPECIALTIES



High Risk OB

- Provide care management for members less than 35 weeks gestation with High Risk OB issues
- Coordinate with transfers to higher level of care
 - i.e., fetus with cardiac issues/defects
- Provide intensive education regarding safety, nutrition, physiological changes, birth control
- Community resources
 - WIC, Public Health, TCRC, CCS
 - Refer to “New Start for Moms”, “Prototypes” (housing)
- Coordinates with CFS (Children Family Services) if required
- Face to face meetings with members



Care Managers Collaborate with our Community Partners

- VC Pact – *Pediatric nurse attends meetings*
- CHDP—*Pediatric Nurse, Manager and Director attend meetings*
- Perinatal Substance Abuse—*Two nurses attend meetings*
- FIMR (Fetal Infant Mortality Report)—*Two nurses attend meetings*
- CCS—*Director, Manager, Medical Director, CCS nurses and COA quarterly meetings*
- TCRC—*As above--quarterly*
- CBAS – *interface with providers daily*
- Behavioral Health—*All staff involved on a case by case basis daily*
- VC Public Health—*All staff interface with case managers*
- TCM (Targeted Case Management)—*Interface as needed*
- Local Education (LEA)—*Interface as needed*
- Early Start
- Pharmacy

When you call Care Management at GCHP, you can speak directly with a nurse who can help you determine:

- Appropriate referral placement
- If a Care Manager will be helpful in reaching health goals
- Behavioral Health referrals
- How GCHP may help with coordination of community resources

Once a referral is received, it is reviewed by the Care Management team, the member is contacted telephonically and needs are assessed.

If complex needs are identified:

- A comprehensive assessment is performed
- An individualized care plan will be established
 - Barriers are identified that may be preventing positive outcomes

Successful communication and coordination with the medical management team and the multiple systems that serve our members is an important component of success!



Jessetalks.wordpress.com



To make a referral, visit the GCHP website at:
goldcoasthealthplan.org





Hover over the “Health Services” tab in the blue banner and click on “Care Management”



Search [Go](#) [YouTube](#)

Member Services Phone Number **888.301.1228**

HOME	MEMBERS	PROVIDERS	HEALTH SERVICES	CALENDAR	ABOUT US	CONTACT US	EN ESPAÑOL
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MEMBERS

- Community Resources
- Care Management
- Cultural and Linguistic Services
- E-newsletters
- Health Library
- Staying Healthy Assessment

PROVIDERS

- Utilization Management

Our Mission:
To Improve the Health of Our Members Through the Provision of Quality Care and Services.



Welcome to Gold Coast Health Plan

Gold Coast Health Plan delivers health care services with a *Member-first focus* that reflects a commitment to our Members and our Providers. We understand the necessity of having a local presence in the cities we serve, and we are committed to establishing and strengthening relationships in those communities. Don't hesitate to call us at **888.301.1228** if you have any questions.

MEMBER SERVICES
 Our *Member-first focus* means the Plan is all about you. See how the Member Services Department can help you and your family better understand your Medi-Cal benefit. [MORE >](#)



PROVIDERS
 Find out more about our local network of Providers and how our Provider Relations Department makes it possible for them to better serve our Members. [MORE >](#)



HEALTH SERVICES
 Health Services cares about the well-being of our Members. In this section you'll find programs and resources that are geared to helping Members make healthy choices. [MORE >](#)



Scroll down to the bottom of the Care Management page to find “click here” for the GCHP Care Management referral form.

Care Management

GCHP Care Management is a collaborative process that includes telephonic contact with the member and communication with the medical management team, led by the primary care provider.

Members eligible for care management services may include those with:

- Multiple medications and difficulty with adherence
- Non-adherence to the medical treatment plan
- Psychosocial barriers that may prevent progress
- Resource barriers and need assistance from a social worker
- Organ transplant
- High risk pregnancy
- Catastrophic or medically fragile conditions
- Frequent hospital admissions
- Frequent emergency room visits for non-emergent care
- Coordination of care issues

Care Managers accept referrals from plan providers, hospital case managers, self-referrals from members and community agencies.

The care management process includes:



Click here for the GCHP Care Management referral form. This fillable form can be completed and emailed to caremanagement@goldchp.org or faxed to 855.883.1552.



Gold Coast
Health PlanSM
A Public Entity

A fillable referral form will open:

Gold Coast Health PlanSM
A Public Entity

CARE MANAGEMENT REFERRAL FORM

Referral Date:

PATIENT INFORMATION

Last Name:

First Name:

CIN:

Date of Birth:

Phone Number(s):

City:

Preferred Language:

HEALTH CARE TEAM INFORMATION

Tools: Fill & Sign Comment

- ▶ Fill & Sign Tools
- ▶ Send or Collect Signatures
- ▶ Work with Certificates

This form can be completed and emailed to caremanagement@goldchp.org or faxed to 855-883-1552

**For further information about the
Care Management Program, or to
speak to a Nurse, please contact the
Care Management Department at
(805) 437-5653.**



Your GCHP Partners





What is a specialist?

A specialist:

- Is a doctor who has extra training.
- Treats only certain parts of the body or certain health problems.

Your doctor will:

- Refer you to a specialist if you need one.
- Approve a visit with a Gold Coast Health Plan (GCHP) specialist.

Your specialist visit should happen no more than fourteen (14) days after it is approved.

If you have questions about the referral process, talk to your doctor or call GCHP Member Services at **1-888-301-1228**, TTY **1-888-310-7347**.

CEO MESSAGE

For your health



Dale Villani, CEO

Hello, I'm Dale Villani, the new chief executive officer (CEO) at Gold Coast Health Plan (GCHP). It is an incredible honor for me to lead and serve this great organization. Since joining GCHP in June, I've had the distinct pleasure of meeting members, providers and other stakeholders throughout the County.

I joined the team at GCHP for the same reason most people join GCHP—*To Improve the Health of Our Members through the Provision of the Best Possible Quality Care and Services*. Our mission statement might sound idealistic, but it's true. GCHP has—and always will maintain—a member-first focus. Building a system that focuses on improving the member's experience and establishing a medical home model of care is a primary goal of the Plan.

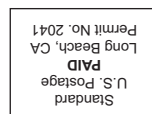
GCHP is part of the historic change in the health care industry. As health care coverage continues to evolve, my job will be to ensure that GCHP continues to thrive and meet the challenges and expectations of our members and providers.

While we have achieved much success in our short history, there is still so much more to do. The current health care industry will not tolerate convention; it demands transformation. Along with the entire team here at GCHP, I promise to lead the charge of delivering meaningful change to our members.

Here's wishing you the best of health!

Dale Villani
CEO, Gold Coast Health Plan

» **BE A WINNER!** Find out about our member incentives on page 4. To learn more, visit www.goldcoasthealthplan.org or call Member Services at **1-888-301-1228**/TTY **1-888-310-7347**.



Man up! 5 good reasons to see your provider

Guys can come up with a lot of reasons not to go in for a checkup: "I'm too busy" or "I'll do it next year."

But checkups are too important to skip. They are the best way to know if you're on the right health track. Also, you may be due for a test that could find a serious health problem.

Do these five excuses sound familiar? If so, be sure to read the responses that follow. You may decide to make that long overdue appointment.

1 "I feel fine!" Some common health problems can sneak up with no warning, such as:

- High blood pressure.
- High cholesterol.
- Diabetes.

Yet they can be managed with your provider's help.

2 "I don't have a doctor." Call Member Services at Gold Coast Health Plan and we can tell you the name of your assigned doctor or clinic. Our number

ALCOHOL

Real risks—now and later

Heavy drinking can harm your health—right now and down the road too.

Right now. Drinking alcohol can cause harm now, such as:

- You are more likely to make poor choices. You might choose to drive drunk, hurt yourself or

someone else, or have sex without a condom.

■ If you are pregnant, alcohol can damage the baby's brain. Stop all drinking if you think you might be pregnant.

■ You may drink to try to cope with depression or another mental health problem. But you'll need real help—not alcohol—to get better.

Down the road. Long-term heavy drinking also causes harm. It can lead to liver

disease, brain damage and heart trouble.

Cancer risk. Alcohol use raises the risk for cancers of the mouth, throat, voice box and esophagus. It also raises the risk for breast cancer, colorectal cancer and liver cancer.

Talk with your provider about alcohol. He or she can help you do what's best for your health and safety.

Sources: American Cancer Society; American Public Health Association; Centers for Disease Control and Prevention; National Institute on Alcohol Abuse and Alcoholism

is **1-888-301-1228** (TTY **1-888-310-7347**) Monday through Friday from 8 a.m. to 5 p.m.

If you have other health insurance or don't have an assigned doctor, we can tell you that also. Member Services can help you choose a doctor in your area.

3 "I hate needles and all those medical gadgets." A quick shot or peek in your throat can be uncomfortable for a moment. But these steps can help prevent a serious illness. Or they may find one when it is easy to treat.

4 "I'm too embarrassed." There are few things



doctors haven't heard before. You can discuss very personal matters, such as sexual issues or depression.

5 "I already know what I need to do."

With the right approach, your doctor will become a coach who helps you improve your health and life. Set goals together. Embrace the challenge!

Source: American Heart Association

winning
health

WINNING HEALTH is published as a community service for the friends and patrons of GOLD COAST HEALTH PLAN, 711 E. Daily Drive, Suite #106, Camarillo, CA 93010-6082, telephone 1-888-301-1228/TTY 1-888-310-7347.

Information in WINNING HEALTH comes from a wide range of medical experts. If you have any concerns or questions about specific content that may affect your health, please contact your health care Provider.

Models may be used in photos and illustrations.

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Self-exams for testicular cancer

IT'S A YOUNG MAN'S DISEASE

The best time to do a self-exam is after a shower or bath.

Using both hands:

- Hold a testicle

between your thumbs and fingers.

- Roll it gently.

- Look and feel for lumps or bumps.

- Look for any change in size, shape or how it feels.

Sources: American Cancer Society; National Cancer Institute



PROSTATE CANCER SCREENING

A discussion, not a schedule

When it comes to cancer, we hear a lot about early screening. And for the most part, that's great advice. But times are changing when it comes to prostate cancer.

As it turns out, many cancers of the prostate develop so slowly that treatment might not be needed. So the American Cancer Society and other experts no longer recommend set screening times.

Instead, men should talk with their doctors. Together, they can decide based on each man's risk factors. Those include:

- Age.
- Family history.
- Ethnic background.
- Diet.
- Overall health.

Screening is generally not recommended for men older than 70 or those who have serious health problems. In these cases, the benefits usually don't outweigh the risks.

If you decide on screening.

There are two common screenings. One is a blood test

to measure prostate-specific antigen (PSA). The other is a digital rectal exam. For this test, the doctor inserts a gloved finger into the rectum to feel the prostate. If these tests show possible signs of cancer, the next step is a biopsy.

What to watch for. Prostate cancer usually has no symptoms early on. Later symptoms can include:

- Blood in the urine.
- Problems with urinating.
- Trouble getting an erection.
- Weakness or numbness in the legs or feet.

But remember: Other conditions can also cause these symptoms. And most are less serious than cancer. See your doctor to get the right diagnosis.

Start the conversation. Ask your doctor about screening around age 50. If you're at high risk, ask about screening around age 45. Those at high risk include:

- African American men.
- Men who have a father, brother or son who had prostate cancer before age 65.

Screening tests by age for men

20

BLOOD PRESSURE

Start screening at least every 2 years.

CHOLESTEROL

Start screening every 5 years.

30

DIABETES

Ask your doctor about screening.

45

DIABETES

Start screening at least every 3 years.

50

COLORECTAL CANCER

Talk to your doctor about screening options.

PROSTATE CANCER*

Ask your doctor about screening.

65

ABDOMINAL AORTIC ANEURYSM

Get screened once between ages 65 and 75, if you've ever smoked.

70

OSTEOPOROSIS

Start screening, depending on your risk factors.

These recommendations are for most men. Talk with your doctor about what's right for you.

*African American men should talk with their doctor at age 45.

Sources: American Cancer Society; American Heart Association; National Institute of Diabetes and Digestive and Kidney Diseases; National Osteoporosis Foundation



It's not too late!

■ Win a gift card for the movies!

If you have diabetes, make an appointment and get your regular retinal eye exam.

■ **Monthly raffle!** Schedule and take your children for a well-child checkup with their doctor.

■ Win a Welcome New Baby gift set for getting your postpartum visit!

Schedule and have a postpartum checkup within four to six weeks of giving birth.

Remember to mail back the completed forms! **All checkups must be completed by December 31, 2015.**

ACCESS TO CARE

Getting an appointment

How long should you have to wait?

We know it is important for you to get care from your doctor when you need it. But it is not always possible for a doctor to see you right away. Some types of appointments take longer to get than others. Some

specialty appointments may take longer to get than an appointment with your Primary Care Provider (PCP).

California health plans must meet certain standards for access to care. The regulations for this law are called the Timely Access to Non-Emergency

Care Services standards. There are different standards for different kinds of appointments.

There are some exceptions. The waiting time for an appointment may be longer if your provider feels that it will not harm your health if you have a longer wait.

TYPE OF CARE	GCHP STANDARDS OF CARE
Emergency Services	Immediately
Urgent Care	Within forty-eight (48) hours (no preauthorization required)
Primary Care—routine care	Within ten (10) business days of request for appointment
Specialty Care	Within fifteen (15) business days of request for appointment
Non-Urgent Services for diagnosis or treatment	Within fifteen (15) business days of request for appointment
Initial Health Assessment (IHA), Staying Healthy Assessment (SHA), and Individual Health Education Behavioral Assessment (IHEBA)	Within one hundred twenty (120) calendar days after enrollment in GCHP
Sensitive Services	Any GCHP provider; no referral or authorization required
Mental Health Services—Emergency, life-threatening	Immediate—call 911
Mental Health Services—Emergency, non-life-threatening	Go directly to the Emergency Room
Mental Health Services—Urgent	Within forty-eight (48) business hours of request; no referral or authorization required
Mental Health Services—Non-urgent	Within ten (10) days of request; no referral or authorization required

salud para triunfar



Gold Coast
Health PlanSM
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Edición 2 • Verano 2015



¿Qué es un especialista?

Un especialista:

- Es un médico con entrenamiento adicional.
- Trata solo ciertas partes del cuerpo o ciertos problemas de salud.

Su médico:

- Lo mandará con un especialista cuando sea necesario.
- Aprobará una consulta con un especialista de Gold Coast Health Plan (GCHP).

Su consulta con el especialista se deberá hacer dentro de catorce (14) días después de su aprobación.

Si tiene preguntas sobre el proceso de referimiento, llame a su doctor o a Servicios para Miembros de GCHP al **1-888-301-1228**/
TTY **1-888-310-7347**.

» **¡SEA UN GANADOR!** Lea sobre nuestros incentivos para miembros en la página 4. Para obtener más información, visite www.goldcoasthealthplan.org o llame a Servicios para Miembros al **1-888-301-1228**/
TTY **1-888-310-7347**.

MENSAJE DEL DIRECTOR EJECUTIVO

Para su salud



Dale Villani
Director Ejecutivo

Hola. Soy Dale Villani, el nuevo Director Ejecutivo de Gold Coast Health Plan (GCHP). Es un inmenso honor para mí dirigir y servir a esta gran organización. Desde que llegué a GCHP en junio, he tenido el gran placer de conocer a miembros, proveedores y otros grupos en el condado.

Me uní al equipo de GCHP por la misma razón que la mayoría de las personas se unen a GCHP *–para mejorar la salud de nuestros miembros al proveerles atención y servicios de la mejor calidad posible*. Aunque nuestra declaración

de misión suene idealista, es la verdad. GCHP siempre ha mantenido –y siempre mantendrá– un enfoque en los miembros. Un objetivo principal del Plan es desarrollar un sistema centrado en mejorar la experiencia de los miembros y establecer un modelo de atención de su hogar médico.

GCHP es parte del cambio histórico en el sector de la atención a la salud. A medida que sigue evolucionando la cobertura de la atención a la salud, mi tarea consistirá en asegurarme de que GCHP siga floreciendo y respondiendo a los retos y las expectativas de nuestros miembros y proveedores.

A pesar de que hemos logrado mucho éxito en nuestra breve historia, sigue quedando mucho más por hacer. El sector de la atención a la salud no tolerará lo convencional; exige transformación. Junto con todo el equipo con el que contamos aquí en GCHP, prometo encabezar la tarea que se me ha encomendado de ofrecer a nuestros miembros un cambio significativo.

¡Les deseo la mejor salud!

Dale Villani
Director Ejecutivo, Gold Coast Health Plan

¡Ya está grandecito!

5 buenos motivos para visitar a su proveedor

Los hombres pueden encontrar muchos motivos para no hacerse chequeos médicos: “Estoy muy ocupado” o “Lo haré el año que viene”.

Pero los chequeos son demasiado importantes como para ignorarlos. Son la mejor forma de saber si su salud va por buen camino. Además, es posible que esté dejando pasar una prueba con la que se podría detectar un problema de salud grave.

¿Le suenan familiares estas cinco excusas? Si es así, lea las cinco respuestas a continuación. Podrían hacer que decida ir a esa cita que tanto ha ignorado.

1 “¡Me siento bien!”

Algunos problemas de salud comunes pueden surgir sin aviso, entre ellos:

- Presión arterial alta.
- Colesterol alto.
- Diabetes.

Pero se pueden controlar con la ayuda de su proveedor.

ALCOHOL

Riesgos reales –ahora y en el futuro

Beber en exceso puede dañar su salud, tanto ahora mismo como en el futuro.

Ahora mismo. Beber alcohol puede causar daños ahora, entre ellos:

- Ser más propenso a tomar malas decisiones. Usted podría tomar la decisión de conducir alcoholizado,

lastimarse o lastimar a otra persona, o tener relaciones sexuales sin usar condón.

■ Si está embarazada, el alcohol puede dañar el cerebro del bebé. Deje de beber si cree que podría estar embarazada.

■ Es posible que usted beba para aliviar los síntomas de la depresión u otro problema de salud mental. Pero para mejorarse, usted necesitará ayuda verdadera –no la que puede darle el alcohol.

En el futuro. Beber en exceso a largo plazo también causa daños.

Puede causar enfermedad del hígado, daño cerebral y problemas al corazón.

Riesgos de cáncer. El consumo de alcohol eleva el riesgo de cáncer de la boca, garganta, laringe y esófago. También aumenta el riesgo de tener cáncer de mama, cáncer colorrectal y cáncer del hígado.

Hable con su proveedor sobre el alcohol. Él o ella puede ayudarle a hacer lo que es mejor para su salud y su seguridad.

Fuentes: American Cancer Society; American Public Health Association; Centers for Disease Control and Prevention; National Institute on Alcohol Abuse and Alcoholism

2 “No tengo un médico”.

Llame a Servicios para Miembros de Gold Coast Health Plan y podemos darle el nombre del médico o la clínica a la que pertenece. Nuestro número es **1-888-301-1228/TTY 1-888-310-7347**. Puede llamar de lunes a viernes, de 8 a.m. a 5 p.m.

Si tiene otro seguro de salud o no tiene un médico asignado, también podemos darle esa información. Servicios para Miembros puede ayudarle a elegir un médico en su área.

3 “Odio las agujas y todos esos aparatos médicos”.

Una inyección rápida o un vistazo rápido en la garganta puede ser incómodo por un momento. Pero estos



pasos pueden prevenir una enfermedad grave o pueden encontrar una en un momento en que sería fácil tratarla.

4 “Me da mucha vergüenza”.

Son pocas las cosas que los médicos no han escuchado. Usted puede hablar con su médico de cosas muy personales, como un problema

sexual o la depresión.

5 “Ya sé lo que tengo que hacer”.

Con el método adecuado, su médico se puede convertir en un instructor que le ayudará a mejorar su salud y su vida. Establezcan metas juntos. ¡Acepte el desafío!

Fuente: American Heart Association

salud
para triunfar

SALUD PARA TRIUNFAR se publica como un servicio a la comunidad para los amigos y clientes de GOLD COAST HEALTH PLAN, 711 E. Daily Drive, Suite #106, Camarillo, CA 93010-6082, teléfono 1-888-301-1228/TTY 1-888-310-7347.

La información de SALUD PARA TRIUNFAR proviene de una gran variedad de expertos médicos. Si tiene alguna inquietud o pregunta sobre el contenido específico que pueda afectar su salud, por favor comuníquese con su Proveedor de atención médica.

Se pueden utilizar fotos e ilustraciones.

Servicios para Miembros

Educación de Salud

Editor

Editor de Redacción

Director Médico

Luis Aguilar

Lupe González, PhD, MPH

Steven Lulich

Susana Enriquez

C. Albert Reeves, MD

Autoexamen para detectar cáncer de testículo

ES UNA ENFERMEDAD DE HOMBRES JÓVENES

El mejor momento para hacerse el examen es después de bañarse.

Con ambas manos:

■ Sostenga un testículo entre sus pulgares y el resto de los dedos.

■ Hágalo girar suavemente.

■ Observe y palpe para detectar bultos o protuberancias.

■ Verifique si se produjeron

cambios en el tamaño o la forma o en cómo se siente.

Fuentes: American Cancer Society; National Cancer Institute

PRUEBA DE DETECCIÓN DE CÁNCER DE PRÓSTATA

Una conversación, no un programa

Cuando se trata del cáncer, escuchamos hablar mucho de la importancia de la detección temprana. Y la mayor parte del tiempo ese es un buen consejo. Pero cuando hablamos de cáncer de próstata, los tiempos están cambiando.

Al parecer, muchos tipos de cáncer de próstata se desarrollan con tanta lentitud que el tratamiento podría no ser necesario. Por eso, la American Cancer Society y otros expertos ya no recomiendan tiempos fijos para hacerse pruebas.

En lugar de eso, los hombres deben hablar con sus médicos. Juntos pueden decidir en función de los factores de riesgo de cada hombre. Estos factores incluyen:

- Edad.
- Antecedentes familiares.
- Origen étnico.
- Dieta.
- Salud general.

Las pruebas de detección por lo general no se recomiendan para los hombres mayores de 70 años o para quienes tienen problemas de salud graves. En estos casos, los beneficios por lo general no superan a los riesgos.

Si decide realizarse pruebas de detección. Existen dos pruebas de detección comunes. Una es un análisis de sangre para medir el antígeno específico prostático (PSA).

La otra es el tacto rectal. En esta prueba, el médico se coloca un guante e inserta un dedo por el recto para sentir la próstata. Si estas pruebas muestran posibles signos de cáncer, el paso siguiente es una biopsia.

Cosas a las que debe estar atento.

El cáncer de próstata por lo general no tiene síntomas en su etapa temprana. Los síntomas en etapas posteriores pueden incluir:

- Sangre en la orina.
- Problemas al orinar.
- Dificultad para lograr la erección.
- Debilidad o adormecimiento de las piernas o los pies.

Pero recuerde: Existen otras enfermedades que también pueden causar estos síntomas. Y la mayoría son menos graves que el cáncer. Consulte a su médico para obtener el diagnóstico adecuado.

Comience la conversación.

Pregúntele a su médico sobre las pruebas de detección cuando tenga alrededor de 50 años. Si es una persona con riesgo elevado, pregúntele sobre las pruebas cuando tenga cerca de 45 años. Las personas con riesgo elevado son:

- Los hombres afroamericanos.
- Los hombres con un padre, hermano o hijo que han tenido cáncer de próstata antes de los 65 años.

Pruebas de detección por edad para los hombres

20 PRESIÓN ARTERIAL Comience con pruebas de detección al menos cada 2 años.

COLESTEROL Comience con pruebas de detección cada 5 años.

30 DIABETES Consulte a su médico sobre las pruebas de detección.

45 DIABETES Comience con pruebas de detección al menos cada 3 años.

50 CÁNCER COLORRECTAL Hable con su médico sobre las opciones de pruebas de detección.

CÁNCER DE PRÓSTATA* Consulte a su médico sobre las pruebas de detección.

65 ANEURISMA DE AORTA ABDOMINAL Si alguna vez fumó, hágase una prueba una vez entre los 65 y 75 años.

70 OSTEOPOROSIS Comience con las pruebas de detección según sus factores de riesgo.

Estas recomendaciones son para la mayoría de los hombres. Hable con su médico para saber qué es lo adecuado para usted.

*Los hombres afroamericanos deben hablar con su médico a los 45 años.

Fuentes: American Cancer Society; American Heart Association; National Institute of Diabetes and Digestive and Kidney Diseases; National Osteoporosis Foundation



¡No es demasiado tarde!

- **¡Gane una tarjeta de regalo para ver una película!** Si tiene diabetes, haga una cita y realícese su examen regular de la retina.
- **¡Sorteo mensual!** Haga una cita y lleve a sus hijos a un chequeo rutinario para niños con su médico.
- **¡Gane un set de regalo de**

Bienvenida para el Nuevo Bebé por asistir a su visita de postparto! Haga una cita y vaya a un chequeo postparto de cuatro a seis semanas después de dar a luz. ¡Recuerde enviar los formularios completos por correo! **Todos los chequeos se deben realizar antes del 31 de diciembre de 2015.**

ACCESO A LA ATENCIÓN

Pedir una cita

¿Cuánto tiene que esperar?

Sabemos que es importante que reciba los cuidados de su médico cuando los necesita. Pero no siempre es posible que un médico lo vea en seguida. Algunos tipos de citas requieren de más tiempo

de espera que otros. Para algunas citas con especialistas esperará más que para las citas con su Proveedor de Atención Médica Primaria (PCP, por sus siglas en inglés).

Los planes de salud de California deben cumplir con ciertas reglas de acceso a la atención. Los reglamentos para esta ley se llaman normas de Acceso

Oportuno a Servicios de Cuidado de la Salud que No Son de Emergencia (Timely Access to Non-Emergency Care Services). Hay diferentes normas para diferentes tipos de citas.

Existen algunas excepciones. El tiempo de espera para una cita puede ser más largo si el médico cree que esperar un poco más no sería malo para su salud.

TIPO DE ATENCIÓN	ESTÁNDARES DE ATENCIÓN DE GCHP
Servicios de Emergencia	De inmediato
Atención de Urgencia	Dentro de las cuarenta y ocho (48) horas (no requiere autorización previa)
Atención Primaria –atención de rutina	Dentro de los diez (10) días hábiles posteriores a la solicitud de la cita
Atención Especializada	Dentro de los quince (15) días hábiles posteriores a la solicitud de la cita
Servicios que No Son de Urgencia para diagnóstico o tratamiento	Dentro de los quince (15) días hábiles posteriores a la solicitud de la cita
Evaluación de Salud Inicial (IHA, por sus siglas en inglés), Evaluación para Mantenerse Saludable (SHA, por sus siglas en inglés) y Evaluación Individual Educativa y del Comportamiento (IHEBA, por sus siglas en inglés)	Dentro de los ciento veinte (120) días de calendario posteriores a la inscripción en GCHP
Servicios Sensibles	Cualquier proveedor de GCHP; no requieren derivación ni autorización previa
Servicios de Salud Mental –de Emergencia, con riesgo a la vida	De inmediato –llamar al 911
Servicios de Salud Mental –de Emergencia, sin riesgo a la vida	Ir directamente a la Sala de Emergencias
Servicios de Salud Mental –de Urgencia	Dentro de las cuarenta y ocho (48) horas normales de oficina; no requieren derivación ni autorización previa
Servicios de Salud Mental –No de Urgencia	Dentro de los diez (10) días posteriores a la solicitud; no requieren derivación ni autorización



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Health Education Classes 2015

Diabetes Self- Management Classes

www.goldcoasthealthplan.org



Health Education Classes 2015 Diabetes Self-Management Classes Provider Network Locations

Diabetes Self-Management Classes

Santa Paula Area

Location: Conejo Valley Family Medical Group
217 N. 10th Street, Santa Paula
Friday, July 17, 2015
Time: 4:00 PM - 5:30 PM
Language: English

Location: Santa Clara Valley NfL - First 5
217 N. 10th Street, Santa Paula
Friday, July 24, 2015
Time: 4:00 PM – 5:30 PM
Language: * Spanish

Location: Santa Clara Valley NfL - First 5
217 N. 10th Street, Santa Paula
Friday, July 31, 2015
Time: 11:00 AM – 12:30 PM
Language: *English

Conejo Valley Area

Location: Conejo Valley Family Medical Group
125 W Thousand Oaks Bl., Thousand Oaks
Friday, August 21, 2015
Time: 4:00 – 5:30 PM
Language: * Spanish

Location: Conejo Valley Family Medical Group
125 W Thousand Oaks Bl., Thousand Oaks
Friday, August 28, 2015
Time: 4:00 – 5:30 PM
Language: * Spanish

Location: Conejo Valley Family Medical Group
125 W Thousand Oaks Bl., Thousand Oaks
Friday, September 18, 2015
Time: 4:00 – 5:30 PM
Language: * English

Location: Conejo Valley Family Medical Group
125 W Thousand Oaks Bl., Thousand Oaks
Friday, August 25, 2015
Time: 4:00 – 5:30 PM
Language: * Spanish

Location: Conejo Valley Family Medical Group
125 W Thousand Oaks Bl., Thousand Oaks
Friday, October 16, 2015
Time: 4:00 – 5:30 PM
Language: * English



Health Education Classes 2015 Diabetes Self-Management Classes Provider Network Locations

Conejo Valley Area (continued)

Location: Conejo Valley Family Medical Group
125 W Thousand Oaks Bl., Thousand Oaks
Friday, October 23, 2015
Time: 4:00 – 5:30 PM
Language: * Spanish

Location: Conejo Valley Family Medical Group
125 W Thousand Oaks Bl., Thousand Oaks
Friday, November 20, 2015
Time: 4:00 – 5:30 PM
Language: * English

Location: Conejo Valley Family Medical Group
125 W Thousand Oaks Bl., Thousand Oaks
Friday, December 18, 2015
Time: 4:00 – 5:30 PM
Language: * English

Moorpark

Location: Moorpark Family Medical Clinic
612 Spring Rd., Moorpark
Wednesday, August 26, 2015
Time: 10:00 AM – 11:30 AM
Language: * Spanish

Location: Moorpark Family Medical Clinic
612 Spring Rd., Moorpark
Wednesday, September 2, 2015
Time: 10:00 AM – 11:30 AM
Language: * Spanish

Location: Moorpark Family Medical Clinic
612 Spring Rd., Moorpark
Wednesday, September 9, 2015
Time: 10:00 AM – 11:30 AM
Language: * Spanish

Location: Moorpark Family Medical Clinic
612 Spring Rd., Moorpark
Wednesday, September 16, 2015
Time: 10:00 AM – 11:30 AM
Language: * Spanish



Community Health Education Classes 2015 Diabetes Self-Management Classes

Diabetes Self-Management Classes

Santa Paula Area

Location: Santa Clara Valley NfL – First 5
217 N. 10th Street, Santa Paula
Tuesday, July 14, 2015
Time: 9:30 AM - 11:00 AM
Language: *English and Spanish

Location: Santa Clara Valley NfL - First 5
217 N. 10th Street, Santa Paula
Tuesday, July 21, 2015
Time: 9:30 AM -11:00 AM
Language: *English and Spanish

Location: Santa Clara Valley NfL - First 5
217 N. 10th Street, Santa Paula
Tuesday, July 28, 2015
Time: 9:30 AM - 11:00 AM
Language: *English and Spanish

Location: Santa Clara Valley NfL - First 5
217 N. 10th Street, Santa Paula
Tuesday, August 18, 2015
Time: 9:30 AM - 11:00 AM
Language: *English and Spanish



Community Health Education Classes 2015 Diabetes Self-Management Classes

Oxnard

Location: The Wellness Center, Oxnard
2697 Saviers Rd, Next To Public Health -
Center Point Mall, Oxnard, CA
Friday, August 21, 2015
Time: 6:30 PM – 8:00 PM
Language: * Spanish

Location: The Wellness Center, Oxnard
2697 Saviers Rd, Next To Public Health -
Center Point Mall, Oxnard, CA
Friday, August 28, 2015
Time: 6:30 PM – 8:00 PM
Language: *Spanish

Location: The Wellness Center, Oxnard
2697 Saviers Rd, Next To Public Health -
Center Point Mall, Oxnard, CA
Friday, September 4, 2015
Time: 6:30 PM – 8:00 PM
Language: * Spanish

Location: The Wellness Center, Oxnard
2697 Saviers Rd, Next To Public Health -
Center Point Mall, Oxnard, CA
Friday, September 11, 2015
Time: 6:30 PM – 8:00 PM
Language: * Spanish

Location: The Wellness Center, Oxnard
2697 Saviers Rd, Next To Public Health -
Center Point Mall, Oxnard, CA
Friday, August 22, 2015
Time: 1:00 PM – 2:30 PM
Language: * English

Location: The Wellness Center, Oxnard
2697 Saviers Rd, Next To Public Health -
Center Point Mall, Oxnard, CA
Saturday, August 29, 2015
Time: 1:00 PM – 2:30 PM
Language: *English

Location: The Wellness Center, Oxnard
2697 Saviers Rd, Next To Public Health -
Center Point Mall, Oxnard, CA
Saturday, September 5, 2015
Time: 1:00 PM – 2:30 PM
Language: * English

Location: The Wellness Center, Oxnard
2697 Saviers Rd, Next To Public Health -
Center Point Mall, Oxnard, CA
Saturday, September 12, 2015
Time: 1:00 PM – 2:30 PM
Language: * English

save the Date



**Gold Coast
Health Plan**SM
A Public Entity

Diabetes Management Workshop

**Come learn about how to better manage your
Diabetes**

PRESENTED BY

**Gold Coast Health Plan
Health Education Department**

**Tuesday, July 14, 21, 28 and
Tuesday, August 18, 2015**

Santa Clara Valley NfL – First 5
217 – 10th Street, Santa Paula
Telephone: (805) 933-9800
Time: 9:30 A.M – 11:00 A.M

For more information please call the
Health Education Department at 805-437-5500
Or email healtheducation@goldchp.org

If you need transportation, interpreting services or special assistance
to participate, please contact us at least 5 days in advance

Reserve la Fecha



**Gold Coast
Health Plan**SM
A Public Entity

Taller Para Aprender a Manejar Su Diabetes

**Los Invitamos a Participar y Aprender Como
Mejor Manejar su Diabetes**

PRESENTADO POR

Gold Coast Health Plan

Departamento de Educación de la Salud

**14, 21, 28 de julio y el
18 de Agosto, 2015**

Santa Clara Valley NfL – First 5
217 – 10th Street, Santa Paula
Teléfono: (805) 933-9800
Hora: 9:30 A.M. – 11:00 A.M.

Para más información por favor llame a el
Departamento de Educación de la Salud
al 805-437-5500

O por email Outreach@goldchp.org

Si necesita transporte, servicios de intérprete o asistencia especial para
participar, por favor llame 5 días antes



**Gold Coast
Health PlanSM**
A Public Entity

2015
**Community
Outreach Schedule**
July – November

www.goldcoasthealthplan.org



Community Outreach Schedule 2015

July

Tuesday, July 14, 2015

***Baby Steps Program hosted by Ventura
County Medical Center***

VCMC Large Cafeteria Auditorium
3291 Loma Vista Rd., Ventura
Time: 5:00pm – 6:30pm

Wednesday, July 15, 2015

***Monthly Food Distribution Program
& Health Services***

Westpark Community Center
450 W. Harrison Avenue, Ventura
Time: 3:30pm – 5:30pm

Saturday July 18, 2015

***Fruit & Veggie Fest hosted by Ventura
County Public Health***

Bay Marina Center
211 W. Hueneme Rd., Oxnard
Time: 10:00am – 1:00pm

Saturday, July 18, 2015

***Camarillo Certified Farmers Market,
sponsored by Camarillo Hospice***

2220 Ventura Blvd. Old Town, Camarillo
Time: 8:00am – 12:00pm

Sunday, July 19, 2015

***Santa Clara Chapel Carnival hosted by
Dignity Health St. Johns***

Santa Clara Chapel
1333 E. Ventura Blvd., Oxnard
Time: 9:00am – 3:00pm

Tuesday, July 21, 2015

***Baby Steps Program hosted by Santa
Paula Hospital***

Santa Paula Hospital
825 N. 10th Street, Santa Paula
Time: **English** 5:30pm – 6:30pm
Spanish 6:30pm – 7:30pm

Thursday, July 23, 2015

***Community Market Produce Giveaway
hosted by Moorpark/Simi Valley
Neighborhood for Family Learning***

612 Spring Rd. Suite 401, Moorpark
Time: 9:00am – 11:00am

Thursday, July 23, 2015

***Community Market Produce Giveaway
hosted by Moorpark/Simi Valley
Neighborhood for Family Learning***

1955 Bridge Ave., Simi Valley
Time: 12:30pm – 2:30pm

Friday, July 24, 2015

***Homeless Veterans hosted by Ventura
County Stand Down CA Army National
Guard Armory***

1270 Arundell Ave, Ventura
Time: 8:00am – 2:00pm

Friday, July 24, 2015

***Community Health and Resource Fair
Summer BBQ***

1001 W. Gonzalez Rd. Oxnard, CA
Time: 5:30p– 7:00pm



Community Outreach Schedule 2015

July continued.....

Sunday, July 26, 2015
***Jornada Dominical and Health Fair hosted
by the Oxnard Mexican Consulate***
3151 West 5th Street, Oxnard
Time: 8:00am – 2:00pm

August

Saturday, August 1, 2015
***Ventura Community College Back to
School hosted by Ventura College
Foundation and Promotoras y Promotores.***
Market Place 4667 Telegraph Road, Ventura
Time: 08:00am – 2:00pm

Friday, August 7, 2015
***Sharing the Harvest hosted by Santa Clara
Valley Neighborhood for Learning***
217 N. 10th Street, Santa Paula
Time: 9:00am – 11:30 am

Friday, August 9, 2015
National Health Centers Week
Del Sol Park, 1800 Camino Del Sol Oxnard
Time: 10:00am – 2:00pm

Wednesday, August 12, 2015 (Tentative)
***Inaugural K-12 Resource Fair “Transitions
to the Future”***
Oxnard PAL Gym, 350 S. K Street, Oxnard
Time: 2:00pm – 6:00pm

Tuesday, August 11, 2015
***Baby Steps Program hosted by Ventura
County Medical Center***
VCMC Large Cafeteria Auditorium,
3291 Loma Vista Rd., Ventura
Time: 5:00pm – 6:30pm

Friday, August 14, 2015
La Hermandad Food Distribution
350 S. K Street Oxnard PAL Gym
Time: 10:30am – 12:00pm

Tuesday, August 18, 2015
***Baby Steps Program hosted by Santa
Paula Hospital***
Santa Paula Hospital
825 N. 10th Street, Santa Paula
Time: **English:** 5:30pm – 6:30pm
Spanish: 6:30pm – 7:30pm

Wednesday, August 19, 2015
***Monthly Food Distribution Program
& Health Services***
Westpark Community Center
450 W. Harrison St. Ventura
Time: 3:30pm – 5:30pm

Sunday, August 23, 2015
***Mary Star of the Sea Church Carnival
hosted by Dignity Health St. Johns***
463 W. Pleasant Valley Rd. Oxnard
Time: 9:00am– 3:00pm

Thursday, August 27, 2015
***Community Market Produce Giveaway
hosted by Moorpark/Simi Valley
Neighborhood for Family Learning***
612 Spring Rd. Suite 401, Moorpark
Time: 9:00am – 11:00am

Thursday, August 27, 2015
***Community Market Produce Giveaway
hosted by Moorpark/Simi Valley
Neighborhood for Family Learning***
1955 Bridge Ave. Simi Valley CA 93065
Time: 12:30pm – 2:30pm



Community Outreach Schedule 2015

August continued...

Sunday, August 30, 2015 (Tentative)
10th Annual Informational Farmworker Fair
hosted by California Employment
Development Department Oxnard
Workforce Services
West Oxnard America's Job Center of
California
635 S. Ventura Road, Oxnard
Time: 12:00pm – 4:00pm

September

Friday, September 4, 2015
Sharing the Harvest hosted by Santa Clara
Valley Neighborhood for Learning
217 N. 10th Street, Santa Paula
Time: 9:00am – 11:30 am

Tuesday, September 8, 2015
Baby Steps Program hosted by Ventura
County Medical Center
VCMC Large Cafeteria Auditorium, 3291
Loma Vista Rd. Ventura
Time: 5:00pm – 6:30pm

Friday, September 11, 2015
La Hermandad Food Distribution
350 S. K Street Oxnard PAL Gym
Time: 10:30am – 12:00pm

Saturday, September 12, 2015 (Tentative)
Walking the Path Together
VCOE Conference Center
5100 Adolfo Road, Camarillo
Time: 8:30am – 1:30pm

Tuesday, September 15, 2015
Baby Steps Program hosted by Santa
Paula Hospital
Santa Paula Hospital
825 N. 10th Street, Santa Paula
Time: **English:** 5:30pm – 6:30pm
Spanish: 6:30pm – 7:30pm

Wednesday, September 16, 2015
Monthly Food Distribution Program
& Health Services
Westpark Community Center
450 W. Harrison Avenue, Ventura
Time: 3:30pm – 5:30pm

Thursday, September 24, 2015
Community Market Produce Giveaway
hosted by Moorpark/Simi Valley
Neighborhood for Family Learning
612 Spring Rd. Suite 401, Moorpark
Time: 9:00am – 11:00am

Thursday, September 24, 2015
Community Market Produce Giveaway
hosted by Moorpark/Simi Valley
Neighborhood for Family Learning
1955 Bridge Ave. Simi Valley CA 93065
Time: 12:30pm – 2:30pm

Sunday, September 27, 2015
Jornada Dominical and Health Fair hosted
by the Oxnard Mexican Consulate
3151 West 5th Street, Oxnard
Time: 8:00am – 2:00pm



Community Outreach Schedule 2015

October

Friday, October 2, 2015

Sharing the Harvest hosted by Santa Clara Valley Neighborhood for Learning

217 N. 10th Street, Santa Paula
Time: 9:00am – 11:30 am

Saturday, October 3, 2015

Oxnard Multicultural Festival (Tentative)

College Park, Oxnard College
3250 S Rose Ave., Oxnard
Time: 10:00am – 6:00pm

Friday, October 9, 2015

La Hermandad Food Distribution

350 S. K Street Oxnard PAL Gym
Time: 10:30am – 12:00pm

Tuesday, October 13, 2015

Baby Steps Program hosted by Ventura County Medical Center

VCMC Large Cafeteria Auditorium, 3291 Loma Vista Rd. Ventura
Time: 5:00pm – 6:30pm

Saturday, October 17, 2015 (Tentative)

Fitness Expo Simi Valley

15555 Simi Town Center Drive
Time: 8:00am – 1:00pm

Tuesday, October 20, 2015

Baby Steps Program hosted by Santa Paula Hospital

Santa Paula Hospital
825 N. 10th Street, Santa Paula
Time: **English:** 5:30pm – 6:30pm
Spanish: 6:30pm – 7:30pm

Wednesday, October 21, 2015

Monthly Food Distribution Program & Health Services

Westpark Community Center
450 W. Harrison Avenue, Ventura
Time: 3:30pm – 5:30pm

Thursday, October 22, 2015

Community Market Produce Giveaway hosted by Moorpark/Simi Valley Neighborhood for Family Learning

612 Spring Rd. Suite 401, Moorpark
Time: 9:00am – 11:00am

Thursday, October 22, 2015

Community Market Produce Giveaway hosted by Moorpark/Simi Valley Neighborhood for Family Learning

1955 Bridge Ave. Simi Valley CA 93065
Time: 12:30pm – 2:00pm



Community Outreach Schedule 2015

November

Friday, November 6, 2015

Sharing the Harvest hosted by Santa Clara Valley Neighborhood for Learning

217 N. 10th Street, Santa Paula
Time: 9:00am – 11:30 am

Tuesday, November 10, 2015

Baby Steps Program hosted by Ventura County Medical Center

VCMC Large Cafeteria Auditorium,
3291 Loma Vista Rd. Ventura
Time: 5:00pm – 6:30pm

Friday, November 13, 2015

La Hermandad Food Distribution

350 S. K Street Oxnard PAL Gym
Time: 10:30am – 12:00pm

Tuesday, November 17, 2015

Baby Steps Program hosted by Santa Paula Hospital

Santa Paula Hospital
825 N. 10th Street, Santa Paula
Time: **English:** 5:30pm – 6:30pm
Spanish: 6:30pm – 7:30pm

Wednesday, November 18, 2015

Monthly Food Distribution Program & Health Services

Westpark Community Center
450 W. Harrison Avenue, Ventura
Time: 3:30pm – 5:00pm

Saturday, November 14, 2015 (Tentative)
Senior Summit

CSU Channel Islands University
1 University Dr., Camarillo
Time: 9:00am – 2:00pm

Thursday, November 26, 2015

Community Market Produce Giveaway hosted by Moorpark/Simi Valley Neighborhood for Family Learning

612 Spring Rd. Suite 401, Moorpark
Time: 9:00am – 11:00am

Thursday, November 26, 2015

Community Market Produce Giveaway hosted by Moorpark/Simi Valley Neighborhood for Family Learning

1955 Bridge Ave. Simi Valley CA 93065
Time: 12:30pm – 2:00pm



Community Outreach Schedule 2015

December

Friday, December 4, 2015

Sharing the Harvest hosted by Santa Clara Valley Neighborhood for Learning

217 N. 10th Street, Santa Paula
Time: 9:00am – 11:30 am

Sunday, December 6, 2015

Jornada Dominical and Health Fair hosted by the Oxnard Mexican Consulate

3151 W. 5th Street in Oxnard
Time: 8:00am – 2:00pm

Tuesday, December 8, 2015

Baby Steps Program hosted by Ventura County Medical Center

VCMC Large Cafeteria Auditorium,
3291 Loma Vista Rd. Ventura
Time: 5:00pm – 6:30pm

Friday, December 11, 2015

La Hermandad Food Distribution

350 S. K Street, Oxnard PAL Gym
Time: 10:00am – 12:30pm

Tuesday, December 15, 2015

Santa Paula Baby Steps Program

Santa Paula Hospital
825 N. 10th Street, Santa Paula
Time: **English:** 5:30pm – 6:30pm
Spanish: 6:30pm – 7:30pm

Wednesday, December 16, 2015

Monthly Food Distribution Program & Health Services

Westpark Community Center
450 W. Harrison Avenue, Ventura
Time: 3:30pm – 5:30pm

Thursday, December 24, 2015

Community Market Produce Giveaway hosted by Moorpark/Simi Valley Neighborhood for Family Learning

612 Spring Rd. Suite 401, Moorpark
Time: 9:00am – 11:00am

Thursday, December 24, 2015

Community Market Produce Giveaway hosted by Moorpark/Simi Valley Neighborhood for Family Learning

1955 Bridge Ave. Simi Valley CA 93065
Time: 12:30pm – 2:00pm



**Gold Coast
Health PlanSM**
A Public Entity

Group Needs Assessment (GNA) Survey

www.goldcoasthealthplan.org

GNA Survey Comparison

2012 GNA Questionnaire	2016 GNA Questionnaire
Q1. What language do you prefer to speak when talking with your primary care doctor?	Q2.
Q2. Does your doctor speak your language?	Q3.
Q3- How well do you speak English?	
Q4. Do you need an interpreter when talking with your doctor? An interpreter can explain what the doctors says in your language.	
4a. If Yes, who most often interprets for you?	Q8. Do you ever need a medical interpreter?
Q5. Does your doctor or staff give you books, brochures, or flyers about health?	
5a. If Yes, are the books, brochures, or flyers easy to read?	Q19.
Q6. Which health topic do you want to learn more about?	
Q7. How do you like to learn about health?	
Q8. In the past year, what have you done to learn more about your health?	Q16. In the past 6 month, did you do any of the following to learn more about your health or a family member's health?
Q9. Do you have any difficulty getting information and support to stay healthy?	
Q10. How happy are you with the health education classes and materials you get from the doctor's office, clinic, hospital or health plan?	
Q11. Health beliefs come from your religion, culture, traditions or family history. How often do your beliefs conflict with the doctor's advice?	Q5.
Q12. How often do you use the Internet?	Q22.
Q13. How do you prefer to get health information from your health plan?	Q21.
Total	Total
13 Questions	22 Questions
	9 New Questions: 1, 6, 7, 11, 12, 13, 15, 17, 18

1. Survey addressed to Adult member:

Dear (MemberName),

(HealthPlanName), your managed care health plan, is doing a survey. The survey is to find out how well your health plan and its doctors are meeting the needs of its members. Your name was chosen at random to do this survey. The survey is confidential to protect your privacy. This means (HealthPlanName) and the doctors will not know your responses. You do not have to do the survey. If you choose to do the survey, we would like to give you a **gift card to XX** to thank you for your time.

2. Survey addressed to Child member:

Dear Parent/Guardian of (MemberName),

(HealthPlanName), your child's managed care health plan, is doing a survey. The survey is to find out how well the health plan and its doctors are meeting the needs of its members. Your child's name was chosen at random. We would like you to fill out the survey for your child. The survey is confidential to protect your privacy. This means (HealthPlanName) and the doctors will not know your responses. You do not have to do the survey. If you choose to do the survey, we would like to give you a **gift card to XX** to thank you for your time.

3. Gift card information for both:

After you fill out the survey, you can mail it back in the enclosed pre-paid envelope. If you would like a **gift card to XX**, please fill in the information below. Send this page back with your survey. This page will not be kept with your survey answers. We will only use this page to send you your gift card.

Thank you.

Name:

Address:

City:

State: California

Zip Code:

Phone number (optional):

Survey Questions/MAIL or IN-PERSON SCRIPT for 2016 GNA

There are no wrong answers. Please be as honest as you can.

Q1. I am filling out the survey for:

- Myself
- My child
- A family member
- The person I take care of
- Other, specify:

If you are filling out this survey for someone else, please answer the questions how you think they would answer.

Primary Care Provider (PCP) is the main doctor you see for regular check-ups. The PCP is the doctor you contact when you get sick or when you want advice about a health problem. This does not include specialists.

Q2. What language do you prefer to speak with your primary care provider?

- Arabic
- Armenian
- Cambodian
- Chinese (Mandarin and Cantonese)
- English
- Farsi
- Hmong
- Korean
- Russian
- Spanish
- Tagalog
- Vietnamese
- Other, please specify:

Q3. Does your primary care provider or their office staff speak the language you prefer?

- Yes
- No
- Don't know

Q4. How often does your primary care provider explain things in a way that is easy to understand?

- Always
- A lot

Survey Questions/MAIL or IN-PERSON SCRIPT for 2016 GNA

- Sometimes
- Never

Q5. Health beliefs can come from your religion, culture, traditions, or family history. In your opinion, how often do your beliefs conflict with your doctor's advice?

- Always
- A lot
- Sometimes
- Never

Q6. Does your doctor understand and respect (Check all that apply):

- Your family health traditions
- Your use of alternative medicine
- Your religious health choices
- Your immigration experience
- Other (please explain):
- None of the above

Medical Interpreter is a person who can speak your preferred language. They explain what the doctor says. And they make sure you understand what the doctor is telling you about your health.

Q7. Do you know that your health plan has medical interpreters available at no cost to you?

- Yes
- No
- Not Sure

Q8. Do you ever want or need a medical interpreter?

- Yes (*Go to Q9*)
- No (*Go to Q13*)
- Not Sure (*Go to Q9*)

Q9. Are you comfortable asking for medical interpreter services?

- Yes
- No
- Not Sure

Q10. If you would like to use a medical interpreter, you can sometimes choose where the person is during the exam. Which of these choices would you prefer?

Survey Questions/MAIL or IN-PERSON SCRIPT for 2016 GNA

- The person in the exam room with me
- The person on the phone
- The person using a video chat
- Other (please explain):
- Not Sure

Q11. Do you ever use a family member to interpret for you?

- Yes (*Go to Q12*)
- No (*Go to Q13*)

Q12. What are all the reasons why a family member interprets for you? Check all that apply:

- My doctor or office staff told me to bring a family member to interpret for me.
- My doctor's office didn't offer interpreter services to me.
- I didn't know I could ask for interpreter services.
- I feel more comfortable when a family member interprets for me.
- Other (please explain):

That was the last question about interpreters.

Q13. How often do you have a hard time filling out health forms by yourself?

- Always
- A lot
- Sometimes
- Never

The next four questions can have many answers. Please check all the answers that apply to you.

Q14. What do you think are important health concerns or issues for people living in your area? Check all that apply:

- Safety (such as crime and safe walking/playing areas)
- Need 'timely' appointments at doctors/clinics
- Doctors who do not treat patients with respect
- Need more information about health conditions (such as whooping cough and asthma)
- Need more information about how to get healthy
- Need more clinics and doctors near my home
- No access to healthy food
- Other (please explain):

Survey Questions/MAIL or IN-PERSON SCRIPT for 2016 GNA

- I don't think there are health concerns in my area.

Q15. What information will be helpful to you on how to use your Medi-Cal health plan?

Check all that apply:

- How to ask a question related to the health plan
- How to choose a doctor
- Who to call at night when my doctor's office is closed
- When to go to the Emergency Room
- How to handle a chronic condition such as asthma or diabetes
- Other (please explain):
- Nothing. I have all the information I need.

Q16. In the last 6 months did you do any of the following to learn more about your health or a family member's health? Check all that apply:

- Searched the internet for health information
- Went to a health-related class
- Spoke to a health professional (such as a doctor, nurse, nutritionist, or health educator)
- Used the Health Plan website
- Watched a video about health on YouTube
- Other (Please explain):
- I didn't do anything.

Q17. Select the items you would like help with. Check all that apply:

- Getting an appointment with my primary care provider
- Getting an appointment with a specialist
- Finding a provider that lets me bring my children to the appointment
- Transportation to get to doctor visits
- Health information in my language
- Other (please explain):
- I don't need any help.

The next two questions have just one answer each.

Q18. How often do you feel confident filling out health forms by yourself?

- Always
- A lot
- Sometimes
- Never

Survey Questions/MAIL or IN-PERSON SCRIPT for 2016 GNA

Q19. Do the materials you get from your health plan provide the information you need about how your health plan works?

- Always
- A lot
- Sometimes
- Never

The next two questions can have many answers. Please check all the answers that apply to you.

Q20. My health plan gives me information about (Check all that apply):

- Regular check-ups
- Cancer screenings
- Tests for diabetes
- Taking care of my health concerns (such as diabetes or asthma)
- Shots/vaccines (for children, teens and adults)
- Other (please explain):
- None of the above.

Q21. How do you like to get information from your health plan? Check all that apply:

- Health Plan website
- Text messages
- Voice mail/phone messages
- Mail sent to my home
- E-mail
- Social media (such as Facebook, Twitter, Instagram)
- Video on the internet/YouTube
- DVD
- Flash drive
- Audio
- In Braille
- Materials with large text/font size
- Other (Please explain):

This is the last survey question!

Q22. How often do you use the internet?

- Daily
- Weekly
- Monthly

Survey Questions/MAIL or IN-PERSON SCRIPT for 2016 GNA

- A few times a year
- Never

Thank you for your time. Your answers will help (HealthPlanName) plan our programs and services. This concludes our survey. Thank you for your time.

DRAFT

1. Encuesta dirigida al Miembro Adulto:

Estimado (Nombre del Miembro),

(Nombre del Seguro Médico), su plan de salud de atención médica administrada, está haciendo una encuesta. La encuesta es para averiguar que tan bien están su plan de salud y sus médicos satisfaciendo las necesidades de sus miembros. Su nombre fue escogido al azar para llevar a cabo esta encuesta. La encuesta es confidencial para proteger su privacidad. Esto significa que (Nombre del Seguro Médico) y los médicos no conocerán sus respuestas. No tiene que participar en la encuesta. Si usted decide participar en la encuesta, nos gustaría darle una **tarjeta de regalo para XX** para agradecerle por su tiempo.

2. Encuesta dirigida al Niño miembro:

Estimado Padre / Tutor de (Nombre del Miembro),

(Nombre del Seguro Médico), el plan de salud de atención médica administrada de su niño, está haciendo una encuesta. La encuesta es para averiguar que tan bien están el plan de salud y sus médicos satisfaciendo las necesidades de sus miembros. El nombre de su niño fue escogido al azar. Nos gustaría que participara en la encuesta por su niño. La encuesta es confidencial para proteger su privacidad. Esto significa que (Nombre del Seguro Médico) y los médicos no conocerán sus respuestas. No tiene que participar en la encuesta. Si usted decide participar en la encuesta, nos gustaría darle una **tarjeta de regalo para XX** para agradecerle por su tiempo.

3. Información de la tarjeta de regalo para ambos:

Después de que usted llene la encuesta, puede enviarla por correo en el sobre adjunto pre-pagado. Si usted quisiera una **tarjeta de regalo para XX**, por favor llene la información a continuación. Envíe esta página con su encuesta. Esta página no se mantendrá con sus respuestas de la encuesta. Sólo usaremos esta página para enviarle su tarjeta de regalo.

Muchas gracias.

Nombre:

Dirección:

Ciudad:

Estado: California Código Postal:

Número de teléfono (opcional):

Survey Questions/MAIL or IN-PERSON SCRIPT for 2016 GNA

No hay respuestas incorrectas. Por favor sea lo más honesto posible.

Q1. Estoy llenando la encuesta de:

- Mía
- Mi hijo
- Un miembro de mi familia
- La persona a la que yo cuido
- Otra, especifique:

Si usted está llenando esta encuesta por otra persona, por favor conteste las preguntas cómo cree que las contestarían.

El Médico de Cabecera (PCP por sus siglas en inglés) es el doctor principal a quien usted verá durante los chequeos regulares. El PCP es el doctor a quien usted llama cuando se enferma o cuando quiere un consejo sobre un problema de salud. Esto no incluye a especialistas.

Q2. ¿En qué idioma prefiere hablar con su proveedor de atención primaria (médico de cabecera)?

- Árabe
- Armenio
- Camboyano
- Chino (mandarín and cantonés)
- Inglés
- Farsi
- Hmong
- Coreano
- Ruso
- Español
- Tagalo
- Vietnamita
- Otro, favor de especificar:

Q3. ¿Su médico de cabecera o el personal de su oficina hablan el idioma que usted prefiere?

- Sí
- No
- No se

Q4. ¿Con qué frecuencia le explica su médico de cabecera las cosas de una manera fácil de entender?

Survey Questions/MAIL or IN-PERSON SCRIPT for 2016 GNA

- Siempre
- Muy frecuentemente
- Algunas veces
- Nunca

Q5. Las creencias sobre la salud pueden provenir de su religión, cultura, tradiciones o antecedentes familiares. En su opinión, ¿con qué frecuencia están en conflicto sus creencias con los consejos de su médico?

- Siempre
- Muy frecuentemente
- Algunas veces
- Nunca

Q6. Su médico entiende y respeta (marque todo lo que corresponda):

- Las tradiciones de salud de su familia
- Su uso de medicina alternativa
- Sus opciones religiosas de salud
- Su experiencia con la inmigración
- Otro (favor de explicar):
- Nada de lo anterior

El Intérprete médico es una persona que habla su idioma preferido. Ellos explican lo que dice el médico. Y se aseguran que usted entienda lo que el doctor le está diciendo sobre su salud.

Q7. ¿Sabe que su seguro médico cuenta con intérpretes médicos disponibles sin costo para usted?

- Sí
- No
- No estoy seguro

Q8. ¿Alguna vez quiere o necesita un intérprete médico?

- Sí (*Pase a Q9*)
- No (*Pase a Q13*)
- No estoy seguro (*Pase a Q9*)

Q9. ¿Se siente cómodo pidiendo servicios de interpretación médica?

- Sí
- No
- No estoy seguro

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Q10. Si desea utilizar un intérprete médico, a veces puede elegir donde esté esa persona durante el examen. ¿Cuál de estas opciones prefiere?

- Que la persona esté en la sala del examen conmigo
- Que la persona esté por teléfono
- Que la persona use el video chat
- Otra (favor de explicar):
- No estoy seguro

Q11. ¿Usa alguna vez a un miembro de su familia para que le interprete a usted?

- Sí (*Pase a Q12*).
- No (*Pase a Q13*)

Q12. ¿Cuáles son todas las razones por las que le interpreta un miembro de su familia a usted? Marque todas las que le correspondan:

- Mi médico o su oficina me dijeron que trajera a un familiar para que me interprete.
- El consultorio de mi médico no me ofreció servicios de intérprete.
- No sabía que podría pedir servicios de intérprete.
- Me siento más cómodo cuando un miembro de la familia me interpreta.
- Otra (favor de explicar):

Esta fue la última pregunta sobre intérpretes.

Q13. ¿Con qué frecuencia tiene dificultad para llenar los formularios de salud usted solo?

- Siempre
- Muy seguido
- A veces
- Nunca

Las siguientes cuatro preguntas pueden tener muchas respuestas. Por favor, marque todas las respuestas que le correspondan a usted

Q14. ¿Cuáles piensa usted que son preocupaciones importantes o problemas de salud para las personas que viven en su área? Marque todas las que le correspondan:

- Seguridad (como el crimen y zonas seguras para caminar/ jugar)
- Necesitamos que las citas con médicos o clínicas sean “a tiempo”
- Médicos que no tratan a los pacientes con respeto
- Se necesita más información sobre las condiciones de salud (por ejemplo, tos ferina y asma)
- Se necesita más información acerca de cómo recuperar la salud

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- Se necesitan más clínicas y médicos cerca de mi casa
- No hay acceso a alimentos saludables
- Otros (favor de explicar):
- No creo que existan problemas de salud en mi área.

Q15. ¿Qué información será útil para usted sobre cómo usar su plan de salud de Medi-Cal? Marque todas las que le correspondan

- Cómo hacer una pregunta relacionada con el plan de salud
- Cómo elegir a un doctor
- A quién llamar por la noche cuando está cerrado el consultorio de mi médico
- Cuándo ir a la Sala de Urgencias
- Cómo manejar una condición crónica como asma o diabetes
- Otra (favor de explicar):
- Nada. Tengo toda la información que necesito.

Q16. ¿En los últimos 6 meses hizo algo de lo siguiente para aprender más acerca de su salud o la salud de un miembro de la familia? Marque todas las que le correspondan:

- Busqué información de salud en internet
- Fui a una clase relacionada con la salud
- Hablé con un profesional de la salud (por ejemplo, un doctor, enfermera, nutricionista o educador sobre la salud)
- Usé el sitio Web del Plan de Salud
- Vi un video acerca de la salud en YouTube
- Otro (Favor de explicar):
- Yo no hice nada.

Q17. Seleccione los temas en los que desea ayuda. Marque todos los que le correspondan:

- Obtener una cita con mi médico de atención primaria
- Obtener una cita con un especialista
- Encontrar un doctor que me permite traer a mis hijos a la cita
- Transporte para llegar a las citas con el médico
- Información de salud en mi idioma
- Otro (favor de explicar):
- No necesito ayuda.

Las siguientes dos preguntas tienen una respuesta cada una.

Q18. ¿Con qué frecuencia se siente seguro de poder llenar los formularios de salud por si solo?

- Siempre

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- Muy seguido
- A veces
- Nunca

Q19. ¿Los materiales que recibe de su plan de salud le proporcionan la información que necesita acerca de cómo funciona su plan de salud?

- Siempre
- Muy seguido
- A veces
- Nunca

Las siguientes dos preguntas pueden tener muchas respuestas. Por favor, marque todas las respuestas que le correspondan a usted

Q20. Mi plan de salud me da información acerca de (marque todas las que le correspondan):

- Chequeos regulares
- Exámenes de cáncer
- Pruebas para la diabetes
- Cuidar de mis problemas de salud (como diabetes o asma)
- Inmunización/ vacunas (para niños, adolescentes y adultos)
- Otros (favor de explicar):
- Nada de lo anterior

Q21. ¿Cómo le gustaría obtener información de su plan de salud? Marque todo lo que le corresponda:

- Sitio Web del Plan de Salud
- Mensajes de texto
- Correo de voz / mensajes telefónicos
- Correo enviado a mi casa
- Correo electrónico
- Redes sociales (como Facebook, Twitter, Instagram)
- Video en el internet/YouTube
- DVD
- Flash drive (unidad flash)
- Audio
- En Braille
- Materiales con texto y letra tamaño grande.
- Otros (por favor explique):

¡Esta es la última pregunta de la encuesta!

Q22. ¿Con qué frecuencia utiliza internet?

- Diario**
- Semanalmente**
- Mensualmente**
- Algunas veces al año**
- Nunca.**

Gracias por su tiempo. Sus respuestas le ayudarán a (Nombre del Plan de Salud) a planificar nuestros programas y servicios. Con esto concluimos nuestra encuesta. De nuevo, gracias por su tiempo.