

October 2, 2022

Changes to your 2023 health plan

Dear Member,

Santa Clara Family Health Plan Cal MediConnect Plan (Medicare-Medicaid Plan) (SCFHP Cal MediConnect Plan) is changing to Santa Clara Family Health Plan DualConnect (HMO D-SNP) (SCFHP DualConnect) on January 1, 2023. Unless you change plans, SCFHP DualConnect will provide your Medicare benefits. It will work with its matching Medi-Cal Managed Care Plan to provide and coordinate your Medicare and Medi-Cal services and Medicare prescription drugs through one organization to coordinate your benefits. Together these plans are called a Medicare Medi-Cal Plan ("Medi-Medi"). You will keep all of your Medicare and Medi-Cal benefits. **You will not have a gap in your coverage.** If you want to change plans and pick a different Medicare health plan, read your options on pages 2 through 4.

You will be automatically enrolled in SCFHP DualConnect and do not need to do anything to keep these services.

The SCFHP DualConnect is very similar to your current Cal MediConnect plan. With SCFHP DualConnect, you will still have a SCFHP DualConnect care coordinator to get help for your needs.

You won't pay a premium, or pay for doctor visits or other medical care if you go to a provider that works with our health plan. To learn more about your prescription drug costs, call SCFHP Customer Service.

To ask if your PCP or other providers are in our network in 2023, call SCFHP DualConnect Customer Service.

To learn more, read the *Notice of Additional Information*. It came with this letter.

Read below to learn more about SCFHP DualConnect and other choices for you.

What services will my Medicare Medi-Cal Plan cover?

SCFHP DualConnect will cover many of the Medicare and Medi-Cal benefits you get now, including:

- All Medicare covered services, including doctors, hospitals, labs, and x-rays
- You will have access to a provider network that includes many of the same providers as your current plan
- Prescription drugs covered by Medicare
- Coordination of the services you get now or that you might need
- Transportation to medical services

- Medical supplies
- Durable Medical Equipment (DME)
- Nursing home care
- Community-Based Adult Services (CBAS)
- Community Supports

In December, SCFHP DualConnect will send you a new member ID card. You should have received your Annual Notice of Changes (ANOC), an ANOC letter, and instructions to get your *Member Handbook*, *Provider and Pharmacy Directory*, *List of Covered Drugs* (Formulary), and *List of Durable Medical Equipment* (DME list) online or to ask for hard copies in September.

You will not have a gap in your coverage. You will be automatically enrolled in a Medicare Medi-Cal Plan offered by SCFHP DualConnect. You don't have to do anything if you want to join this plan. If you want to change plans, read your options below.

You should also read the *Notice of Additional Information*. It came with this letter.

If you have questions, you can contact SCFHP DualConnect,

- Call SCFHP DualConnect Customer Service at 1-877-723-4795 (TTY: 711), 7 days a week, 8 a.m. to 8 p.m.
- Call 1-877-723-4795(TTY: 711)Go to www.scfhp.com/dualconnect

At the end of this letter, we tell you who to contact with questions about Medicare or Medi-Cal.

Do I have choices for coverage?

Yes. You have five options for coverage. If you want to talk to someone about your options, read the list of phone numbers in the chart at the end of this letter. Here are your five options:

Option 1: Keep SCFHP DualConnect.

You will be automatically enrolled in the Medicare Medi-Cal Plan offered by SCFHP DualConnect. This Medicare Medi-Cal plan will start January 1, 2023. You do not need to do anything.

The Medicare Medi-Cal Plan:

- Will cover all of your Medicare, including Medicare Part D, and many Medi-Cal benefits, such as prescription drugs
- May offer extra coverage such as vision, hearing, or dental
- Has a network of doctors and other providers to give you care

Option 2: Join a different health plan that combines your Medicare and Medi-Cal coverage.

Choose from the list of plans in your county that combine Medicare and Medi-Cal. The list came with this letter. You can call other plans for more information and can call the plan you choose directly to enroll.

The Medicare Medi-Cal Plans on the list:

- Will cover all of your Medicare, including Medicare Part D, and many Medi-Cal benefits, such as prescription drugs
- May offer extra coverage such as vision, hearing, or dental
- Has a network of doctors and other providers you can see to receive care

To learn more about Medicare Medi-Cal Plans in your county, call 1-800-MEDICARE (1-800-633-4227) (TTY: 1-877-486-2048), 24 hours a day, 7 days a week and ask about dual eligible special needs plans (D-SNPs). Or go to www.Medicare.gov.

To learn more about the Medi-Cal Plans in your county, call Health Care Options at 1-800-430-4263 (TTY: 1-800-430-7077), Monday – Friday, 8 a.m. to 6 p.m. Or go to Health Care Options at www.healthcareoptions.dhcs.ca.gov.

Option 3: Join a Medicare Advantage health plan.

Medicare Advantage plans:

- Cover all services that Original Medicare covers
- May offer extra coverage such as vision, hearing, or dental
- May **not** coordinate with your Medi-Cal plan

Remember: If you decide to join a Medicare Advantage plan:

- Your Medi-Cal plan may change.
- If the Medicare Advantage plan doesn't also offer a Medi-Cal plan, you can enroll in any Medi-Cal plan in your county.
- If the Medicare Advantage plan has a matching Medi-Cal plan in your county, you will be enrolled in that Medi-Cal plan.

To join a Medicare Advantage plan, call 1-800-MEDICARE (1-800-633-4227) (TTY: 1-877-486-2048), 24 hours a day, 7 days a week. Or go to www.Medicare.gov.

To learn more about Medi-Cal Plans in your county, call Health Care Options at 1-800-430-4263 (TTY: 1-800-430-7077), Monday – Friday, 8 a.m. to 6 p.m. Or go to Health Care Options at www.healthcareoptions.dhcs.ca.gov.

Option 4: You can change to Original Medicare (sometimes called Fee-For-Service).

- The federal government manages Original Medicare (sometimes called Fee-For-Service coverage).
- If you choose Original Medicare and don't choose a Part D prescription drug plan by December 31, Medicare will enroll you in a separate Part D prescription drug plan. They will send you a letter telling you the name of your new drug plan.
- If you choose Original Medicare, your Medi-Cal plan will be SCFHP Cal MediConnect Plan.
- You may also be able to change your Medi-Cal plan.

To change to Original Medicare call 1-800-MEDICARE (1-800-633-4227) (TTY: 1-877-486-2048), 24 hours a day, 7 days a week or visit www.Medicare.gov.

To learn more about Medi-Cal Plans in your county, call Health Care Options at 1-800-430-4263 (TTY: 1-800-430-7077), Monday – Friday, 8 a.m. to 6 p.m. Or go to Health Care Options at www.healthcareoptions.dhcs.ca.gov.

Option 5: If you qualify, you can join the Program of All-Inclusive Care for the Elderly (PACE).

PACE will cover your Medicare and Medi-Cal benefits, including prescription drugs. It will coordinate your healthcare, homecare, transportation, and dental care. PACE also offers social centers and senior gyms. If you choose to join a PACE plan, your Medi-Cal Plan and Medicare Advantage Plan will change, and your providers may change.

To find out if PACE is available in your county or to learn more about PACE, go to www.CalPACE.org. Or call Health Care Options Monday – Friday, 8 a.m. to 6 p.m. at 1-800-430-4263 (TTY 1-800-430-7077). Or go to Health Care Options at www.healthcareoptions.dhcs.ca.gov.

From **October 15** through **December 7**, you can change your Medicare plan or choose Original Medicare for coverage that begins January 1, 2023. You can choose Medicare prescription drug coverage for the next year.

You have until **March 31, 2023**, 3 months after your coverage starts in SCFHP DualConnect to make a different Medicare choice. Because you have Medi-Cal, you may have other opportunities to join a different Medicare health or prescription drug plan. If you join a new Medicare plan after **December 31, 2022**, your coverage in the new plan won't start until the month after you choose the new Medicare plan.

You can also choose Original Medicare and join a separate Medicare prescription drug plan.

Because you have Medi-Cal, you can also change how you get Medicare one time during each of these periods:

- January – March
- April – June
- July – September

There may be other situations where you are eligible to make a change to our enrollment.

If you want to learn more or make a change, call 1-800-MEDICARE (1-800-633-4227) (TTY: 1-877-486-2048), 24 hours a day, 7 days a week or visit www.Medicare.gov.

Questions?

Find contact information for your questions on the next page.

Thank you for being a member of SCFHP. We appreciate you trusting us with your health care.

SAMPLE

Who can I contact with questions?

If you want to:	Contact:
<p>Ask questions about your Medicare and Medi-Cal services provided by SCFHP Cal MediConnect Plan</p>	<ul style="list-style-type: none"> • Call SCFHP Cal MediConnect Plan Customer Service at 1-877-723-4795, Monday through Friday, 8 a.m. to 8 p.m. • Call 1-877-723-4795 (TTY: 711) • Go to www.scfhp.com
<p>Ask if your doctors are in the new health plan's network</p>	<ul style="list-style-type: none"> • Call SCFHP DualConnect Customer Service at 1-877-723-4795, 7 days a week, 8 a.m. to 8 p.m. • Call 1-877-723-4795 (TTY: 711) • Go to www.scfhp.com/dualconnect
<p>Ask a question about Medicare</p>	<ul style="list-style-type: none"> • Call 1-800-MEDICARE (1-800-633-4227) (TTY: 1-877-486-2048)
<p>Talk to a health insurance counselor for free about these changes and your options</p>	<ul style="list-style-type: none"> • Call the California Health Insurance Counseling & Advocacy Program (HICAP) at 1-800-434-0222 • TTY: 711 • Call the Medicare Medi-Cal Ombudsman Program (also known as Cal MediConnect Ombudsman) at 1-855-501-3077. The Cal MediConnect plan is another name for your plan. The Ombudsman helps with complaints, grievances, and concerns for free. They are not part of your health plan.

If you want to:	Contact:
Ask a question about Medi-Cal or your Medi-Cal plan choices	<ul style="list-style-type: none"> • SCFHP at 1-877-723-4795 (TTY: 711), Monday through Friday, 8 a.m. to 8 p.m. • Call Health Care Options 1-844-580-7272 (TTY:1-800-430-7077) • Call the Medi-Cal Helpline at 1-800-541-5555, Monday through Friday, except national holidays, 8:00 a.m. to 5:00 p.m. • Call the Department of Health Care Services (DHCS), Office of the Ombudsman at 1-888-452-8609 (TTY: 711) Monday – Friday, except state holidays, 8:00 a.m. and 5:00 p.m.
Get help with health plan problems and complaints	<ul style="list-style-type: none"> • Call SCFHP Cal MediConnect Plan Customer Service at 1-877-723-4795, Monday through Friday, 8 a.m. to 8 p.m. • Call 1-877-723-4795 (TTY: 711) • Go to www.scfhp.com • Call the Medicare Medi-Cal Ombudsman Program (also known as Cal MediConnect Ombudsman) 1-855-501-3077 (TTY: 1-855-847-7914) • Call Health Consumer Alliance 1-888-804-3536 or go to www.healthconsumer.org.
Learn more about my Medicare and Medi-Cal plan options.	<ul style="list-style-type: none"> • A list of matching Medicare Medi-Cal Plans available in your county is included with this letter. • Visit Medicare.gov or refer to your Medicare & You handbook for a list of all Medicare health and prescription drug plans in your area. • Go to MyCareMyChoice.org to compare different Medicare options. It's a tool just for people with Medicare and Medi-Cal.

You can get this information for free in other formats, such as large print, braille, or audio. Call 1-877-723-4795 (TTY: 711). The call is free.

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-877-723-4795 (TTY: 711).

Santa Clara Family Health Plan Cal MediConnect Plan (Medicare-Medicaid Plan) is a health plan that contracts with both Medicare and Medi-Cal to provide benefits of both programs to enrollees.

SAMPLE

Notice of Additional Information

1. How is my health plan changing?

On January 1, 2023, your current Cal MediConnect health plan will change to a new plan. The new plan is called a **Medicare Medi-Cal Plan** (“Medi-Medi Plan”). It will cover **both** your Medicare benefits **and** your Medi-Cal benefits. Your new plan will be with the same company as the plan you have now. Your new Medicare Medi-Cal Plan coordinates care for people who have **both** Medicare and Medi-Cal.

Your new plan will coordinate services you get now or might need. This includes:

- All Medicare covered services, including doctors, hospitals, labs, and x-rays
- You will have access to a provider network that includes many of the same providers as your current plan
- Prescription drugs covered by Medicare
- Coordination of the services you get now or that you might need
- Transportation to medical services
- Community-Based Adult Services (CBAS)
- Medical supplies
- Durable Medical Equipment (DME)
- Vision, dental, and hearing benefits
- Nursing home care

You do not need to do anything to join your new plan. You will get all your services through your current Cal MediConnect plan until December 31, 2022. Your new Medicare Medi-Cal Plan will start on **January 1, 2023**.

2. How will I get my prescription drugs?

You will get most of your prescriptions and medications the way you do now. Medicare will still cover most prescription and medication benefits and services. Your new Medicare Medi-Cal Plan will coordinate this coverage.

Medi-Cal Rx may cover some prescriptions and medications. Your new Medicare Medi-Cal Plan will help you get these through Medi-Cal Rx.

To learn more about your prescription drug coverage, call the health plan you have now.

To learn more about Medi-Cal Rx prescription drug coverage and pharmacies that take Medi-Cal:

- Go to www.medi-calrx.dhcs.ca.gov
- Or call the Medi-Cal Rx Customer Service Center at 1-800-977-2273 (TTY: 711)

Have your Medi-Cal Benefits Identification Card (BIC) number when you call.

3. What is a Medicare Medi-Cal Plan?

A Medicare Medi-Cal Plan is type of Medicare Advantage plan. It is for people who have **both** Medicare and Medi-Cal. It is a voluntary program. It combines your Medicare and Medi-Cal benefits and Medicare prescription drug benefits into **one** plan. This means you have:

- One care team to coordinate care.
- One set of benefits, doctors, hospitals, lab tests, x-rays, and some medical equipment. Your new plan will include most of the doctors you have now or will help you find a new doctor you like.
- One health plan to coordinate delivery of services, including medical supplies, transportation, and long-term services and supports.
- You might also get extra benefits like dental, hearing, or vision coverage, in addition to what Medi-Cal covers.

4. What will not change when my new plan starts?

- Your health care benefits that you have now, such as doctors, hospitals, labs, and x-rays will not change.
- Your provider network (group) with many of the same providers.
- Your other medical care if you go to a provider in your plan network.

5. Will I be able to keep my doctors with my new plan?

Your health plan will have many of the same providers you have now. To find out if your providers are in the new plan network, you can call your current health plan.

Your new Medicare Medi-Cal Plan will coordinate your providers. If you have a provider who is not in the network, you may be able to keep that provider for up to 12 months. The health plan will also help you find network providers you like and that meet your needs.

Remember, your health plan will change to the Medicare Medi-Cal plan with the same company as the plan you have now. You do not need to do anything. You cannot stay in your Cal MediConnect plan. The Cal MediConnect plans will end in California on January 1, 2023.

6. Will there be a gap in my coverage?

No. You will not have a gap in your coverage. Your Medicare Medi-Cal Plan will start when the plan you have now ends. If you want to change to a different plan, read Question 8.

7. I like my current plan. What do I do to stay with the same plan?

You don't have to do anything. Your Medicare Medi-Cal Plan will start on January 1, 2023.

You will get the same health care benefits. Your provider network will have many of the same providers as your Cal MediConnect plan.

The Medicare Medi-Cal Plan will have a care coordinator to help you manage your providers and services. They will coordinate long-term services and supports, and other services like transportation.

8. Do I have choices for coverage?

Yes. You have five options for coverage. If you want to talk to someone about your options, read the list of phone numbers in Question 9. Here are your options:

Option 1: Keep the Medicare Medi-Cal Plan listed in the letter you received.

This Medicare Medi-Cal Plan will start on January 1, 2023. You do not need to do anything.

The Medicare Medi-Cal Plan:

- Will cover all your Medicare benefits including prescription drugs, and many Medi-Cal benefits
- May offer extra coverage such as vision, hearing, or dental in addition to what is covered by Medi-Cal
- Has a network of doctors and other providers to give you care

Option 2: Join a different health plan that combines your Medicare and Medi-Cal coverage.

Choose from the list of plans in your county that combine Medicare and Medi-Cal. The list came with this letter. You can call other plans for more information and can call the plan you choose directly to enroll.

The Medicare Medi-Cal Plans on the list:

- Will cover all of your Medicare, including Medicare Part D, and many Medi-Cal benefits, such as prescription drugs
- May offer extra coverage such as vision, hearing, or dental
- Has a network of doctors and other providers you can see to receive care

To learn more about Medicare Medi-Cal Plans in your county, call 1-800-MEDICARE (1-800-633-4227) (TTY: 1-877-486-2048), 24 hours a day, 7 days a week and ask about dual eligible special needs plans (D-SNPs). Or go to www.Medicare.gov.

To learn more about the Medi-Cal Plans in your county, call Health Care Options at 1-800-430-4263 (TTY: 1-800-430-7077), Monday – Friday, 8 a.m. to 6 p.m. Or go to Health Care Options at www.healthcareoptions.dhcs.ca.gov.

Option 3: Join a Medicare Advantage health plan.

Medicare Advantage plans:

- Cover all services that Original Medicare covers
- May offer extra coverage such as vision, hearing, or dental
- May **not** coordinate with your Medi-Cal plan

Remember, if you decide to choose a Medicare Advantage plan:

- Your Medi-Cal plan may change.
- If the Medicare Advantage plan doesn't also offer a Medi-Cal plan, you can enroll in any Medi-Cal plan in your county.
- If the Medicare Advantage plan has a matching Medi-Cal plan in your county, you will be enrolled in that Medi-Cal plan.

To join a Medicare Advantage plan, call 1-800-MEDICARE (1-800-633-4227) (TTY: 1-877-486-2048), 24 hours a day, 7 days a week. Or go to www.Medicare.gov.

To learn more about Medi-Cal Plans in your county, call Health Care Options at 1-800-430-4263 (TTY: 1-800-430-7077), Monday – Friday, 8 a.m. to 6 p.m. Or go to Health Care Options at www.healthcareoptions.dhcs.ca.gov.

Option 4: You can change to Original Medicare (sometimes called Fee-For-Service coverage).

- The federal government manages Original Medicare.
- If you choose Original Medicare and don't choose a Part D prescription drug plan by December 31, 2022, Medicare will enroll you in a Part D prescription drug plan. They will send you a letter with the name of your new drug plan.
- If you choose Original Medicare, your Medi-Cal plan will stay the same.
- You may also be able to change your Medi-Cal plan.

To change to Original Medicare call 1-800-MEDICARE (1-800-633-4227) (TTY: 1-877-486-2048), 24 hours a day, 7 days a week or visit www.Medicare.gov.

To learn more about Medi-Cal Plans in your county, call Health Care Options at 1-800-430-4263 (TTY: 1-800-430-7077), Monday – Friday, 8 a.m. to 6 p.m. Or go to Health Care Options at www.healthcareoptions.dhcs.ca.gov.

Option 5: If you qualify, you can join the Program of All-Inclusive Care for the Elderly (PACE).

PACE will cover your Medicare and Medi-Cal benefits, including prescription drugs. It will coordinate your healthcare, homecare, transportation, and dental care. PACE also offers social centers and senior gyms. If you choose to join a PACE plan, your Medi-Cal Plan and Medicare Advantage Plan will change, and your providers may change.

To find out if PACE is available in your county or to learn more about PACE, go to www.CalPACE.org. Or call Health Care Options Monday – Friday, 8 a.m. to 6 p.m. at 1-800-430-4263 (TTY 1-800-430-7077). Or go to Health Care Options at www.healthcareoptions.dhcs.ca.gov.

9. Questions?

If you have questions about Medicare and Medi-Cal services:

- Call your Cal MediConnect plan.

If you want to know if your doctors are in your new Medicare Medi-Cal Plan:

- Call your Cal MediConnect plan.

If you have a question about Medicare:

- Call 1-800-MEDICARE (1-800-633-4227) 24 hours a day, 7 days a week. Or go to www.Medicare.gov (TTY: 1-877-486-2048).

If you want to talk with a health insurance counselor for free about these changes and your choices:

- Call the California Health Insurance Counseling & Advocacy Program (HICAP) 1-800-434-0222 (TTY: 711).
- Call the Medicare Medi-Cal Ombudsman Program (also called the Cal MediConnect Ombudsman) at 1-855-501-3077. The Ombudsman helps with complaints, grievances, and concerns for free. They are not part of your health plan.

If you have a question about Medi-Cal or your Medi-Cal plan choices:

- Call your current Cal MediConnect plan.
- Call Health Care Options at 1-844-580-7272 (TTY: 1-800-430-7077).
- Call the Medi-Cal Helpline at 1-800-541-5555, Monday – Friday, except national holidays, 8:00 a.m. to 5:00 p.m.
- Call the Department of Health Care Services (DHCS), Office of the Ombudsman at 1-888-452-8609 (TTY: 711), Monday – Friday, except state holidays, 8:00 a.m. and 5:00 p.m.

If you need help with health plan problems or have complaints:

- Call your current Cal MediConnect plan.
- Call the Medicare Medi-Cal Ombudsman Program (also called the Cal MediConnect Ombudsman) at 1-855-501-3077. The Ombudsman helps with complaints, grievances, and concerns for free. They are not part of your health plan.
- Call Health Consumer Alliance 1-888-804-3536. Or go to www.healthconsumer.org.

If you want to learn more about your Medicare choices:

- Read the list to find matching Medicare Medi-Cal plans in your county. The list came with this letter.
- Go to Medicare.gov.
- Read the list of all Medicare health and prescription drug plans in your area in your “Medicare & You” handbook.
- Compare your Medicare choices for people with both Medicare and Medi-Cal at www.MyCareMyChoice.org.

Medicare Medi-Cal Plans in Santa Clara County starting January 1, 2023

The plans below provide your Medicare and Medi-Cal benefits. They will work with the matching Medi-Cal plan to provide and coordinate your Medicare and Medi-Cal benefits in **one** plan.

To enroll in a **Medicare Medi-Cal Plan**, call the plan using the contact information below.

To choose a new **Medicare** health plan or Original Medicare, call 1-800-MEDICARE (1-800-633-4227) (TTY: 1-877-486-2048). Call 24/7. Or go to www.Medicare.gov.

Medicare Medi-Cal Plan:	Contact:
Anthem MediBlue Full Dual Advantage (HMO D-SNP)	<ul style="list-style-type: none"> • Call Anthem MediBlue Full Dual Advantage Member Services at 1-833-707-3129 (TTY: 711), 8 a.m. to 8 p.m., seven (7) days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday to Friday (except holidays) from April 1 through September 30 • Go to shop.anthem.com/medicare/ca
Kaiser Permanente Senior Advantage Medicare Medi-Cal Santa Clara (HMO D-SNP)	<ul style="list-style-type: none"> • Call Kaiser Permanente Senior Advantage Medicare Medi-Cal Santa Clara Member Services at 1-800-443-0815 (TTY: 711), 8 a.m. to 8 p.m., seven (7) days a week • Go to kp.org/medicare
Santa Clara Family Health Plan DualConnect (HMO D-SNP)	<ul style="list-style-type: none"> • Call Santa Clara Family Health Plan DualConnect Member Services at 1-877-723-4795 (TTY: 711), 8 a.m. to 8 p.m., seven (7) days a week • Go to www.scfhp.com/dualconnect

You may be eligible to enroll in the Program of All-Inclusive Care for the Elderly (PACE) instead of a Medicare Medi-Cal plan, Medicare plan or Original Medicare

You may qualify to join a PACE plan in your area if you are 55 or older and need a higher level of care in order to live at home. PACE will coordinate your healthcare, homecare, transportation and dental care. PACE offers social centers and senior gyms.

If you choose to join a PACE plan, you will no longer be enrolled in your Medi-Cal Managed Care Plan and Medicare Advantage Plan.

To find out if PACE is available in your county or to learn more about PACE, go to www.CalPACE.org. Or call Health Care Options Monday – Friday, 8 a.m. to 6 p.m. at 1-800-430-4263 (TTY: 1-800-430-7077).

You can learn more about your choices for getting Medicare and Medi-Cal benefits

Read the letter that came with this insert. Or, call the California Health Insurance Counseling & Advocacy Program (HICAP) at 1-800-434-0222 (TTY: 711), Monday - Friday, 9 a.m. to 4 p.m., except holidays. Counselors will answer your questions, discuss your needs, and explain your choices. All counseling is free.

You can learn more about Medi-Cal Managed Care Plans

Go to www.healthcareoptions.dhcs.ca.gov. Or call Health Care Options at 1-844-580-7272 (TTY: 1-800-430-7077), 8 a.m. to 6 p.m., Monday – Friday.

You can get help with health plan problems and complaints

Call the Medicare Medi-Cal Ombudsman Program (also called Cal MediConnect Ombudsman) at 1-855-501-3077.

SAMPLE

Discrimination is against the law. Santa Clara Family Health Plan DualConnect (HMO D-SNP) (SCFHP DualConnect) follows State and Federal civil rights laws. SCFHP DualConnect 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.

SCFHP DualConnect 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 SCFHP DualConnect between 8 a.m. to 8 p.m., 7 days a week by calling 1-877-723-4795. If you cannot hear or speak well, please call 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:

**Santa Clara Family Health Plan
PO Box 18880
San Jose, CA 95158
1-877-723-4795 (TTY: 711)**

HOW TO FILE A GRIEVANCE

If you believe that SCFHP DualConnect 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 SCFHP DualConnect. You can file a grievance by phone, in writing, in person, or electronically:

- By phone: Contact SCFHP DualConnect between 8 a.m. to 8 p.m., 7 days a week by calling 1-877-723-4795. Or, if you cannot hear or speak well, please call 711.
- In writing: Fill out a complaint form or write a letter and send it to:

**Attn: Grievance and Appeals Department
Santa Clara Family Health Plan
6201 San Ignacio Ave
San Jose, CA 95119**

- In person: Visit your doctor's office or SCFHP DualConnect and say you want to file a grievance.
- Electronically: Visit SCFHP DualConnect's website at www.scfhp.com/dualconnect.

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.

- **Electronically:** Send an email to CivilRights@dhcs.ca.gov.

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>.

English – ATTENTION: If you need help in your language call 1-877-723-4795 (TTY: 711). Aids and services for people with disabilities, like documents in braille and large print, are also available. Call 1-877-723-4795 (TTY: 711). These services are free of charge.

Mensaje en español (Spanish) – ATENCIÓN: si necesita ayuda en su idioma, llame al 1-877-723-4795 (TTY: 711). También ofrecemos asistencia y servicios para personas con discapacidades, como documentos en braille y con letras grandes. Llame al 1-877-723-4795 (TTY: 711). Estos servicios son gratuitos.

Khẩu hiệu tiếng Việt (Vietnamese) – CHÚ Ý: Nếu quý vị cần trợ giúp bằng ngôn ngữ của mình, vui lòng gọi số 1-877-723-4795 (TTY: 711). 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 1-877-723-4795 (TTY: 711). Các dịch vụ này đều miễn phí.

简体中文标语 (Chinese) – 请注意：如果您需要以您的母语提供帮助，请致电 1-877-723-4795 (TTY: 711)。另外还提供针对残疾人士的帮助和服务，例如文盲和需要较大字体阅读，也是方便取用的。请致电 1-877-723-4795 (TTY: 711)。这些服务都是免费的。

Tagalog – ATENSIYON: Kung kailangan mo ng tulong sa iyong wika, tumawag sa 1-877-723-4795 (TTY: 711). Mayroon ding mga tulong at serbisyo para sa mga taong may kapansanan, tulad ng mga dokumento sa braille at malaking print. Tumawag sa 1-877-723-4795 (TTY: 711). Libre ang mga serbisyo ng ito.

الشعار بالعربية (Arabic)

يُرجى الانتباه: إذا احتجت إلى المساعدة بلغتك، فاتصل بـ 1-877-723-4795 (TTY: 711). تتوفر أيضًا المساعدات والخدمات للأشخاص ذوي الإعاقة، مثل المستندات المكتوبة بطريقة برايل والخط الكبير. اتصل بـ 1-877-723-4795 (TTY: 711). هذه الخدمات مجانية.

Հայերեն պիտակ (Armenian) – ՈՒՇԱԴՐՈՒԹՅՈՒՆ: Եթե Ձեզ օգնություն է հարկավոր Ձեր լեզվով, զանգահարեք 1-877-723-4795 (TTY: 711) : Կան նաև օժանդակ միջոցներ ու ծառայություններ հաշմանդամություն ունեցող անձանց համար, օրինակ՝ Բրայլի գրատիպով ու խոշորատառ տպագրված կյուրթեր: Չանզահարեք 1-877-723-4795 (TTY: 711) : Այդ ծառայություններն անվճար են:

ហ្គាសម្ព័ន្ធជាតិកាខ្មែរ (Cambodian) – ចំណាំ: បើអ្នក ត្រូវ ការជំនួយ ជាភាសា របស់អ្នក សូម ទូរស័ព្ទទៅលេខ 1-877-723-4795 (TTY: 711) (។ ជំនួយ និង សេវាកម្ម សម្រាប់ ជនពិការ ដូចជាឯកសារសរសេរជាអក្សរផុស សម្រាប់ជនពិការភ្នែក ឬឯកសារសរសេរជាអក្សរពុម្ពផ្សំ ក៏អាចរកបានផងដែរ។ ទូរស័ព្ទមកលេខ 1-877-723-4795 (TTY: 711) (។ សេវាកម្មទាំងនេះមិនគិតថ្លៃឡើយ។

(Farsi)مطلب به زبان فارسی

توجه: اگر می‌خواهید به زبان خود کمک دریافت کنید، با 1-877-723-4795 (TTY: 711) تماس بگیرید. کمک‌ها و خدمات مخصوص افراد دارای معلولیت، مانند نسخه‌های خط بریل و چاپ با حروف بزرگ، نیز موجود است. با 1-877-723-4795 (TTY: 711) تماس بگیرید. این خدمات رایگان ارائه می‌شوند.

हिंदी टैगलाइन (Hindi) – ध्यान दें: अगर आपको अपनी भाषा में सहायता की आवश्यकता है तो 1-877-723-4795 (TTY: 711) (पर कॉल करें। अशक्तता वाले लोगों के लिए सहायता और सेवाएं, जैसे ब्रेल और बड़े प्रिंट में भी दस्तावेज़ उपलब्ध हैं। 1-877-723-4795 (TTY: 711) (पर कॉल करें। ये सेवाएं नि:शुल्क हैं।

Nqe Lus Hmoob Cob (Hmong) – CEEB TOOM: Yog koj xav tau kev pab txhais koj hom lus hu rau 1-877-723-4795 (TTY: 711). 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 1-877-723-4795 (TTY: 711). 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 1-877-723-4795 (TTY: 711) 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。1-877-723-4795 (TTY: 711) 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 1-877-723-4795 (TTY: 711) 번으로 문의하십시오. 점자나 큰 활자로 된 문서와 같이 장애가 있는 분들을 위한 도움과 서비스도 이용 가능합니다. 1-877-723-4795 (TTY: 711) 번으로 문의하십시오. 이러한 서비스는 무료로 제공됩니다.

ແທກໄລພາສາລາວ (Laotian) – ປະກາດ : ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອໃນພາສາຂອງທ່ານໃຫ້ໂທຫາເບີ 1-877-723-4795 (TTY: 711) . ອັງກິດຄວາມຊ່ວຍເຫຼືອແລະການບໍລິການສໍາລັບຄົນພິການ ແລະ ຄຸ້ນເອກະສານທີ່ເປັນອັກສອນນູນແລະມີໂຕພິມໃຫຍ່ ໃຫ້ໂທຫາເບີ 1-877-723-4795 (TTY: 711) . ການບໍລິການເຫຼົ່ານີ້ບໍ່ຕ້ອງເສຍຄ່າໃຊ້ຈ່າຍໃດໆ.

Mien – LONGC HNYOUV JANGX LONGX OC: Beiv taux meih qiemx longc mienh tengx faan benx meih nyei waac nor douc waac daaih lorx taux 1-877-723-4795 (TTY: 711). Liouh lorx jauv-louc tengx aengx caux nzie gong bun taux ninh mbuo wuaaic fangx mienh, beiv taux longc benx nzangc-pokc bun hluo mbiutc aengx caux aamz mborqv benx domh sou se mbenc nzoih bun longc. Douc waac daaih lorx 1-877-723-4795 (TTY: 711). 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 1-877-723-4795 (TTY: 711). ਅਪਾਰਜ ਲੋਕਾਂ ਲਈ ਸਹਾਇਤਾ ਅਤੇ ਸੇਵਾਵਾਂ, ਜਿਵੇਂ ਕਿ ਬ੍ਰੇਲ ਅਤੇ ਮੋਟੀ ਛਪਾਈ ਵਿੱਚ ਦਸਤਾਵੇਜ਼, ਵੀ ਉਪਲਬਧ ਹਨ। ਕਾਲ ਕਰੋ 1-877-723-4795 (TTY: 711). ਇਹ ਸੇਵਾਵਾਂ ਮੁਫਤ ਹਨ।

Русский слоган (Russian) – ВНИМАНИЕ! Если вам нужна помощь на вашем родном языке, звоните по номеру 1-877-723-4795 (линия ТТҮ: 711). Также предоставляются средства и услуги для людей с ограниченными возможностями, например документы крупным шрифтом или шрифтом Брайля. Звоните по номеру 1-877-723-4795 (линия ТТҮ:711). Такие услуги предоставляются бесплатно.

ແທັກໂລນ໌ພາສາໄທຍ (Thai) – โปรดทราบ :หากคุณต้องการความช่วยเหลือเป็นภาษาของคุณ กรุณาโทรศัพท์ไปที่หมายเลข 1-877-723-4795 (TTY: 711) นอกจากนี้ ยังพร้อมให้ความช่วยเหลือและบริการต่าง ๆ สำหรับบุคคลที่มีความพิการ เช่น เอกสารต่าง ๆ ที่เป็นอักษรเบรลล์และเอกสารที่พิมพ์ด้วยตัวอักษรขนาดใหญ่ กรุณาโทรศัพท์ไปที่หมายเลข 1-877-723-4795 (TTY: 711) ไม่มีค่าใช้จ่ายสำหรับบริการเหล่านี้

Примітка українською (Ukrainian) – УВАГА! Якщо вам потрібна допомога вашою рідною мовою, телефонуйте на номер 1-877-723-4795 (TTY: 711) . Люди з обмеженими можливостями також можуть скористатися допоміжними засобами та послугами, наприклад, отримати документи, надруковані шрифтом Брайля та великим шрифтом. Телефонуйте на номер 1-877-723-4795 (TTY: 711) . Ці послуги безкоштовні.