



Cal MediConnect Plan (Medicare-Medicaid Plan) New Member Guide



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Thank you for joining Santa Clara Family Health Plan Cal MediConnect Plan!

This New Member Guide provides an overview of your coverage under Santa Clara Family Health Plan Cal MediConnect Plan (Medicare-Medicaid Plan) (SCFHP Cal MediConnect Plan). It will help you understand your benefits and services, who to contact if you need help, and resources that are available to you.

*Words in *italics* are defined in the “Words to know” section.



Getting started as a member



Using your SCFHP ID card

Under SCFHP Cal MediConnect Plan, you will have one card for your Medicare and Medi-Cal services and prescriptions. You will receive your SCFHP Cal MediConnect Plan member ID card within two weeks of enrollment. You must show your ID card when you get any health care services or prescriptions. Your ID card has important information for your health care providers. You should not need to show your Medicare or Medi-Cal cards.

Your ID card also has helpful information for you, including:

- Your member ID number, name, and date of birth
- Your doctor or clinic and their phone number
- The 24-hour nurse advice line phone number
- Santa Clara County Mental Health Services phone number
- Customer Service phone number

Please make sure the information on your ID card is correct. If it is not, call Customer Service. If you do not get your ID card or if you lose your card, you can request a new one through the mySCFHP member portal or by calling **Customer Service**.



Choose your primary care provider (PCP)

Your personal doctor, also called a primary care provider or PCP, is very important. Your PCP will help you get the medical care you need. You must choose a PCP within 30 days from the time you join SCFHP. If you do not choose a PCP, SCFHP will choose one for you.

You can find a PCP that is accepting new patients using our:

- “Find a Doctor” tool at **www.scfhp.com**
- Provider and Pharmacy Directory

To make your selection:

- Log in to the mySCFHP member portal
- Call Customer Service

You may change your PCP at any time, and the change will be effective the first of the following month.

For questions or for more information about choosing a PCP, see Chapter 3, Section D “Care from primary care providers” in your SCFHP Cal MediConnect Plan *Member Handbook* or call **Customer Service**.



Complete your Health Risk Assessment

Your health risk assessment (HRA) form is included in your new member kit. It asks questions about your overall health and wellness. The HRA will inform your individualized care plan that you can share with your caregiver and your providers.

If you have any questions or need help filling out this form, call **Case Management at 1-877-590-8999 (TTY: 711), Monday through Friday, 8:30 a.m. to 5 p.m.**



Sign up for the mySCFHP member portal

Visit www.member.scfhp.com to sign up for your member portal! In order to register, you will need information from your SCFHP Cal MediConnect Plan member ID card. **You will be able to:**

- View your health plan benefits and summaries
- Request a new ID card
- Print a temporary ID card
- View or change your primary care provider (PCP)
- Find a network healthcare provider
- Request transportation to medical appointments
- Sign up for health education classes



Review your member materials

To learn more about your coverage through SCFHP Cal MediConnect Plan, **refer to the following member materials:**

- *Member Handbook*
- *Provider and Pharmacy Directory*
- *List of Covered Drugs (Formulary)*

These member materials are available online at:

www.scfhp.com/healthcare-plans/cal-mediconnect/ or by calling **Customer Service.**

Where and how to get care

What are network providers?

The providers who work with SCFHP Cal MediConnect Plan are called *network providers*. While you are a member of our plan, you must use network providers to get **covered services**.

This includes:

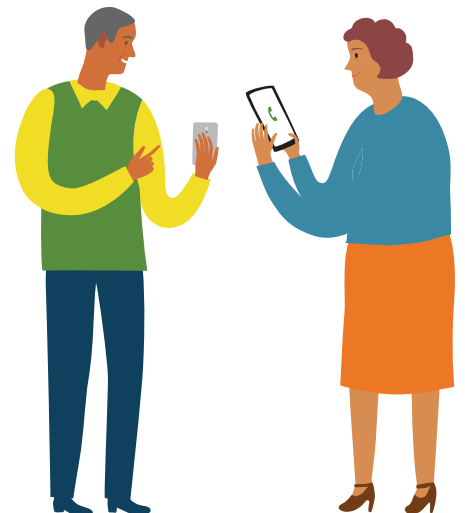
- Doctors, nurses, and other health care professionals that you can go to as a member of our plan
- Clinics, hospitals, nursing facilities, and other places that provide health services in our plan
- Pharmacies
- Long-term services and supports, behavioral health services, home health agencies, durable medical equipment suppliers, and others who provide goods and services that you get through Medicare or Medi-Cal.

Providers at Palo Alto Medical Foundation (PAMF) are not taking new SCFHP patients. For more information on selecting PAMF as your PCP, call **Customer Service at 1-877-723-4795 (TTY: 711), Monday through Friday, 8 a.m. to 8 p.m.**

If you are unsure about what care you need or have questions about your care, you can call your PCP or the Nurse Advice Line.

How can I find providers in the SCFHP network?

- Use SCFHP's "**Find a Doctor**" tool at www.scfhp.com/for-members/find-a-doctor. You can find network providers by location, type of provider, gender, language spoken, and more. The listings also include the provider contact information, provider specialties, and if the provider is taking new patients.
- Use the *Provider and Pharmacy Directory* available at www.scfhp.com.



Where do I go for care?

Type of care	Who to call or visit	Services you can get
Routine care	Primary care provider (PCP)	<p>Medically necessary services and preventive care:</p> <ul style="list-style-type: none"> • Regular checkups • Shots • Treatment • Prescriptions • Medical advice • Referrals to specialists, if needed • Order X-rays, mammograms, and lab work, if needed
Urgent care	PCP – Call your PCP or Nurse Advice Line before visiting an urgent care facility.	<p>Care that you get for a sudden illness, injury, or condition that is not an emergency, but needs care right away. You do not need a prior authorization to receive this care. Examples include:</p> <ul style="list-style-type: none"> • Cold • Sore throat • Fever • Ear pain • Sprained muscle • Maternity services
Emergency care	For emergency care, call 911 or go to the nearest emergency room (ER).	<p>Emergency care is for life-threatening medical conditions. These are medical or mental conditions with such severe symptoms that not getting immediate medical care could place your health in serious danger, cause impairment to a body function, or cause a body part or organ to not work. Examples include:</p> <ul style="list-style-type: none"> • Active labor • Broken bone • Severe pain • Chest pain • Severe burn • Drug overdose • Fainting • Severe bleeding • Psychiatric emergency conditions, such as severe depression or suicidal thoughts <p>Do not go to the ER for routine care.</p>

SCFHP is here to ensure you get care in a timely manner. If you need help getting an appointment, call **Customer Service at 1-877-723-4795 (TTY: 711), Monday through Friday, 8 a.m. to 8 p.m.**

What is the Nurse Advice Line?

The SCFHP Nurse Advice Line is a phone line that you can call 24/7, at no cost, to speak with a health care professional about medical or behavioral health advice.

A health care professional can help you with:

- ✓ Instructions on self-care at home
- ✓ What to do if you need care and a health care provider's office is closed
- ✓ Advice on whether you should get medical care
- ✓ How and where to get care
- ✓ Connecting with a telehealth doctor - After being triaged by a nurse, a doctor can discuss your symptoms, recommend a treatment, all from the comfort of your home

If you have health questions, you can call the **Nurse Advice Line:**
1-844-803-6962
(TTY:711).



Who is on my care team?



A care team helps you get the care you need. Your care team can include your PCP and the specialists and hospitals that they work with to provide your care.



Primary Care Provider (PCP)

Your PCP is your first point of contact for routine, urgent care, and non-emergency needs.



24/7 Nurse Advice

If your PCP is not available and you want to get care for simple medical problems or if you are unsure what care you need, call **1-844-803-6962**.



SCFHP Care Coordinator

Your assigned SCFHP care coordinator can help you understand your benefits and help you access them. They will work with your providers and assist you to create an individual plan of care to meet your health care goals.



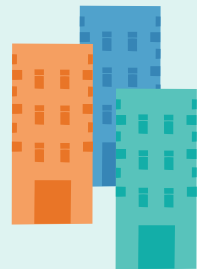
Specialists

Your PCP will refer you to a specialist that they work with if you need advice or treatment for a specific problem or a second opinion.



Hospitals

When you choose a PCP, you are also choosing the hospitals where you may receive care. In an emergency, you can go to any hospital and emergency room.



Pharmacy

When you need medicine, your PCP will prescribe it. Your doctor can send your prescription to a network pharmacy of your choice or you can use SCFHP's pharmacy mail order service.

You will need *referrals* from your PCP before seeing other providers. For some types of care or services, your PCP or specialist will need to ask for permission before you get the care. This is called pre-approval or ***prior authorization***.



2022 Benefits and services



Benefits

Your **covered services** will not cost you anything as long as they are medically necessary and provided by an in-network provider.

Benefits include:

- Behavioral health care
- Doctor visits
- Emergency services
- Fitness benefit
- Health education—Services designed to support members in living healthier lives, such as:
 - Diabetes Prevention Program
 - Health education programs
 - Chronic disease self-management
 - Counseling and support
- Hospital stay
- Labs and x-ray services
- Long-term services and supports
- Personal care manager—SCFHP can assign a personal care manager to help you navigate the health care system and get care. Depending on your needs, your personal care manager may be a:
 - Registered nurse (RN) case manager
 - Social work case manager
 - Behavioral Health case manager
 - Other trained professional
 - Combination of all
- Prescriptions
- Preventive care
- Transportation—Unlimited round trips to health-related locations
- Vision

For more information, visit www.scfhp.com/for-members/health-education/

This is not a complete list. The benefit information is a brief summary, not a complete description of benefits. For more information contact the plan or read the SCFHP Cal MediConnect Plan *Member Handbook*.



How do I access vision, hearing, prescription, and dental benefits?



Vision

- One routine eye exam every year (a **referral** may be required).
- Up to \$200 for eyeglasses or up to \$200 for contact lenses every two years.

Find a provider at www.vsp.com or by calling **VSP Customer Service at 1-800-877-7195 (TTY: 1-800-428-4833), Monday through Saturday, 6 a.m. to 5 p.m., Sunday, closed.**



Hearing

SCFHP pays up to \$1,510 per fiscal year (July 1-June 30) for hearing aids for both ears provided by an in-network specialist.



Prescriptions

Your doctor can send your prescription to a network pharmacy of your choice or you can use SCFHP's pharmacy mail order service.



Dental

Find a provider at <https://smilecalifornia.org/> or by calling the **Medi-Cal Dental Program Customer Service Line at 1-800-322-6384 (TTY: 1-800-735-2922), Monday through Friday, 5 a.m. to 5 p.m.**

To find vision and hearing providers or pharmacies, use SCFHP's **"Find a Doctor"** tool or the SCFHP Cal MediConnect Plan *Provider and Pharmacy Directory*.



Things you need to know

Do I have to pay for SCFHP Cal MediConnect Plan?

You will not have any monthly **premiums** or **copays** for covered medical services with SCFHP Cal MediConnect. In 2022, your copays for prescriptions drugs can range from \$0 to \$9.85. All generic prescription drugs have a \$0 copay.

Does SCFHP offer interpreter services?

Yes, SCFHP offers free interpreter services for people who do not speak English or who need an American Sign Language interpreter. Call **Customer Service** to schedule interpreter services. An over-the-phone interpreter can be scheduled at any time and does not require advance notice. An in-person interpreter at your doctor's appointment requires a 72-hour advance notice.

How do I schedule transportation?

SCFHP offers unlimited round trips to health-related locations. Schedule transportation through the mySCFHP member portal at www.member.scfhp.com or by calling **Customer Service**.

Transportation must be scheduled in advance of the appointment date:

- Non-medical transportation (NMT) requires a 3 business day notice.
- Non-emergency medical transportation (NEMT) requires a 5 business day notice.

Refer to the "How to get transportation services" section in Chapter 3 of your *Member Handbook* for more information.

How do I select someone to represent me?

If you want to choose a friend, relative, or other person to be your representative to communicate with SCFHP, you will have to fill out an Appointment of Representative (AOR) form. The form can be found at www.scfhp.com or by calling **Customer Service**.

How can I get involved as a member?

SCFHP Cal MediConnect Plan has a group called the Consumer Advisory Board (CAB). This group is made up of representatives who include, but are not limited to:

- SCFHP members
- Family members and caregivers of members
- Representatives of community based organizations

This group meets four times a year to talk about what is working well and how SCFHP Cal MediConnect Plan can improve. If you would like to join this group, call **Customer Service**.



How do I maintain my eligibility and update my contact information?

To keep your health care coverage as a member with SCFHP Cal MediConnect Plan, you need to keep your Medi-Cal benefits active. Most people need to renew their benefits every year. Be sure to complete any forms you receive from the County of Santa Clara Social Services Agency. If you have a change in your contact information, like your address or phone number, let Customer Service know. You will also need to tell both the County of Santa Clara Social Services Agency and Social Security Administration. **For contact information, see Page 15.**

How do I report and solve problems?

We want to be the best health plan possible. If you have questions or need help, we are here for you. Contact us by calling **Customer Service**, mail, or visit www.scfhp.com/for-members/grievance-and-appeal-process/.

What can Customer Service help me with?



Customer Service is here to help you

- ✓ Answer questions about your health plan and **covered services**
- ✓ Choose or change a primary care provider (PCP)
- ✓ Tell you where you can get the care you need
- ✓ Offer interpreter services if you do not speak English
- ✓ Offer information in other languages and formats
- ✓ Schedule transportation to medical appointments
- ✓ If you receive a bill
- ✓ Make a complaint



Help over-the-phone

Phone: **1-877-723-4795**

TTY: **711**

Hours: 8 a.m. to 8 p.m. Monday through Friday



Help in-person

SCFHP Main Office

6201 San Ignacio Ave, San Jose, CA 95119

Hours: 8:30 a.m. to 5 p.m. Monday through Friday

SCFHP Blanca Alvarado Community Resource Center

408 North Capitol Ave, San Jose, CA 95127

Hours: 8:30 a.m. to 5 p.m. Monday through Friday



Important phone numbers

Agency name	Phone number	Hours of operation
SCFHP Customer Service www.scfhp.com	1-877-723-4795 (TTY: 711)	8 a.m. to 8 p.m. Monday – Friday
SCFHP Nurse Advice Line	1-844-803-6962 (TTY: 711)	24 hours a day 7 days a week
SCFHP Case Management	1-877-590-8999 (TTY: 711)	8:30 a.m. to 5 p.m. Monday – Friday
Vision Service Provider (VSP) www.vsp.com	1-800-877-7195 (TTY: 1-800-428-4833)	5 a.m. to 8 p.m. Monday – Friday, and 7 a.m. to 8 p.m. Saturday and Sunday
County of Santa Clara Social Services Agency www.MyBenefitsCalWIN.org	1-877-96-BENEFITS (1-877-962-3633) or 1-408-758-3800 (TTY: 1-408-758-3822)	Available 24/7 8 a.m. to 5 p.m. Monday – Friday
Social Security Administration www.ssa.gov	1-800-772-1213 (TTY: 1-800-325-0778)	8 a.m. to 7 p.m. Monday – Friday
Santa Clara County Mental Health Services www.sccgov.org/sites/bhd	1-800-704-0900	24 hours a day 7 days a week
Medi-Cal Dental Program www.smilecalifornia.org	1-800-322-6384	8 a.m. to 5 p.m. Monday – Friday

My health information

PCP: _____

Pharmacy: _____

Specialist(s)

Name: _____ Type: _____

Name: _____ Type: _____

Name: _____ Type: _____

Name: _____ Type: _____

Name: _____ Type: _____

Medications:

Anyone else who helps with my care:

Words to know

Appeal: A way for you to challenge our action if you think we made a mistake. You can ask us to change a coverage decision by filing an appeal.

Copay: A payment you make, generally at the time of service, in addition to the insurer's payment.

Cost sharing: Amounts you have to pay when you get certain services or prescription drugs. Cost sharing includes copays.

Covered services: The general term we use to mean all of the health care, long-term services and supports, supplies, prescription and over-the-counter drugs, equipment, and other services covered by our plan.

Grievance: A complaint you make about us or one of our network providers or pharmacies. This includes a complaint about the quality of your care or the quality of service provided by SCFHP.

Network Providers: A group of doctors, clinics, hospitals and other providers contracted with SCFHP to provide care.

Premium: An amount paid for coverage; cost for coverage.

Prior Authorization: An approval from SCFHP Cal MediConnect you must get before you can get a specific service or drug or see an out-of-network provider. SCFHP Cal MediConnect may not cover the service or drug if you don't get approval.

Referral: A referral means that your primary care provider (PCP) must give you approval before you can see someone that is not your PCP. If you don't get approval, SCFHP Cal MediConnect may not cover the services. You don't need a referral to see certain specialists, such as women's health specialists.



Nondiscrimination notice

Discrimination is against the law. Santa Clara Family Health Plan Cal MediConnect Plan (Medicare-Medicaid Plan) (SCFHP Cal MediConnect Plan) follows State and Federal civil rights laws. SCFHP Cal MediConnect Plan 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 Cal MediConnect Plan 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 Cal MediConnect Plan between 8 a.m. to 8 p.m., Monday through Friday 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 Cal MediConnect Plan 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 Cal MediConnect Plan. You can file a grievance by phone, in writing, in person, or electronically:

- **By phone:** Contact SCFHP Cal MediConnect Plan between 8 a.m. to 8 p.m., Monday through Friday 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: Grievances and Appeals Department
Santa Clara Family Health Plan
6201 San Ignacio Avenue
San Jose, CA 95119

- **In person:** Visit your doctor's office or SCFHP Cal MediConnect Plan and say you want to file a grievance.
- **Electronically:** Visit SCFHP Cal MediConnect Plan's website at **www.scfhp.com**.

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>.

Language Assistance Services

English: ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call Customer Service at 1-877-723-4795 (TTY: 711), Monday through Friday, 8 a.m. to 8 p.m. The call is free.

Español (Spanish): ATENCIÓN: Si habla español, hay servicios de ayuda de idiomas gratis disponibles para usted. Llame a Servicio al Cliente al 1-877-723-4795 (TTY: 711) de lunes a viernes, de 8 a.m. a 8 p.m. La llamada es gratis.

Tiếng Việt (Vietnamese): CHÚ Ý: Nếu quý vị nói tiếng Việt, có dịch vụ hỗ trợ ngôn ngữ, miễn phí dành cho quý vị. Hãy gọi đến Dịch Vụ Khách Hàng theo số 1-877-723-4795 (TTY: 711), từ Thứ Hai đến Thứ Sáu, 8 giờ sáng đến 8 giờ tối. Cuộc gọi là miễn phí.

中文 (Chinese): 注意: 如果您说中文, 您可申请免费语言援助服务。请于星期一至星期五早上 8 点至晚上 8 点致电 1-877-723-4795 (TTY 用户请致电 711) 与客户服务部联系。本电话免费。

Tagalog (Tagalog): PAUNAWA: Kung nagsasalita ka ng Tagalog, may magagamit kang mga serbisyong tulong sa wika na walang bayad. Tumawag sa Serbisyo para sa Mamimili sa 1-877-723-4795 (TTY: 711), Lunes hanggang Biyernes, 8 a.m. hanggang 8 p.m. Ang pagtawag ay libre.

한국어(Korean): 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 월요일부터 금요일 오전 8시부터 저녁 8시까지 1-877-723-4795 (TTY: 711)번으로 고객 서비스부에 연락해 주십시오. 통화는 무료입니다.

Հայերեն (Armenian): ՈՒՇԱԴՐՈՒԹՅՈՒՆ. Եթե խոսում եք հայերեն, ապա լեզվական օգնության ծառայությունները Ձեզ կտրամադրվեն անվճար: Ձանգահարեք հաճախորդների սպասարկման կենտրոն հետևյալ հեռախոսահամարով՝ 1-877-723-4795 (TTY. 711), երկուշաբթիից ուրբաթ՝ Ժ. 8:00 - 20:00: Ձանգն անվճար է:

Русский (Russian): ВНИМАНИЕ: Если Вы говорите по-русски, Вы можете бесплатно воспользоваться услугами переводчика. Позвоните в Службу поддержки клиентов по номеру 1-877-723-4795 (телетайп: 711), с понедельника по пятницу, с 8:00 до 20:00. Звонок бесплатный.

فارسی (Farsi):

توجه: اگر به زبان فارسی صحبت می کنید، خدمات کمک‌زبانی به‌صورت رایگان در دسترس شما قرار دارد. روزهای دوشنبه تا جمعه، از 8 صبح الی 8 شب، با واحد خدمات مشتریان به شماره 1-877-723-4795 (TTY: 711) تماس بگیرید. تماس با این شماره رایگان است.

日本語 (Japanese): ご注意: 日本語を話される場合、無料の言語支援サービスをご利用いただけます。カスタマーサービス 1-877-723-4795 (TTY: 711) までお電話下さい。サービス時間帯は月曜日から金曜日の午前 8 時から午後 8 時までです。通話は無料です。

Ntawv Hmoob (Hmong): LUS CEEV: Yog hais tias koj hais lus Hmoob, peb muaj kev pab txhais lus pub dawb rau koj. Hu rau Lub Chaw Pab Cuam Neeg Qhua rau ntawm tus xov tooj 1-877-723-4795 (TTY: 711), hnub Monday txog Friday, 8 teev sawv ntxov txog 8 teev tsaus ntuj. Qhov hu no yog hu dawb xwb.

ਪੰਜਾਬੀ (Punjabi): ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਤੁਹਾਡੇ ਲਈ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ ਬਿਲਕੁਲ ਮੁਫਤ ਉਪਲਬਧ ਹਨ। 1-877-723-4795 (TTY: 711) 'ਤੇ ਗਾਹਕ ਸੇਵਾ ਨੂੰ ਸੋਮਵਾਰ ਤੋਂ ਸ਼ੁੱਕਰਵਾਰ, ਸਵੇਰੇ 8 ਵਜੇ ਤੋਂ ਰਾਤੀਂ 8 ਵਜੇ ਤੱਕ ਕਾਲ ਕਰੋ। ਕਾਲ ਕਰਨ ਦਾ ਪੈਸਾ ਨਹੀਂ ਲੱਗਦਾ।

العربية (Arabic):

تنبيه: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية المجانية متاحة لك. الاتصال بخدمة العملاء على الرقم 1-877-723-4795 (الهاتف النصي لضعاف السمع (TTY: 711) من الاثنين إلى الجمعة، من 8 صباحًا إلى 8 مساءً. الاتصال مجاني.

हिंदी (Hindi): ध्यान दें: अगर आप हिंदी, भाषा बोलते हैं, तो आपके लिए भाषा सहायता सेवाएँ निःशुल्क उपलब्ध हैं। ग्राहक सेवा को 1-877-723-4795 (TTY: 711) पर, सोमवार से शुक्रवार, सुबह 8:00 से शाम 8:00 बजे तक कॉल करें यह कॉल निःशुल्क है।

ภาษาไทย (Thai): โปรดทราบ: หากท่านพูดภาษาไทย จะมีบริการความช่วยเหลือทางด้านภาษาโดยไม่มีค่าใช้จ่าย ติดต่อศูนย์บริการลูกค้าได้ที่ 1-877-723-4795 (TTY: 711) ได้ในวันจันทร์ถึงศุกร์ เวลา 08.00 น. ถึง 20.00 น. ไม่มีค่าใช้จ่ายในการโทร

ខ្មែរ (Khmer): ជូនចំពោះ: ប្រសិនបើលោកអ្នកនិយាយភាសាស្នេហាជំនួយផ្នែកភាសាមានផ្តល់ជូនលោកអ្នកដោយឥតគិតថ្លៃ។ ទូរស័ព្ទមកផ្នែកសេវាកម្មអតិថិជនតាមលេខ 1-877-723-4795 (TTY: 711) ពីថ្ងៃច័ន្ទដល់ថ្ងៃសុក្រម៉ោង 8 ព្រឹក។ ដល់ម៉ោង 8 យប់ ការហៅទូរស័ព្ទគឺឥតគិតថ្លៃ។

ພາສາລາວ (Lao): ໂປດຊາບ: ຖ້າທ່ານເວົ້າພາສາລາວ, ມີການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາໂດຍບໍ່ຄິດຄ່າໃຊ້ຈ່າຍ ສໍາລັບທ່ານ. ໂທຫາສູນບໍລິການລູກຄ້າໄດ້ທີ່ເບີ 1-877-723-4795 (TTY: 711), ວັນຈັນ ຫາ ວັນສຸກ ເວລາ 8 ໂມງເຊົ້າ ຫາ 8 ໂມງແລງ. ໂທຟຣີ.

Mien (Mien): JANGX LONGX: Beiv taux meih benx gorngv ang gitv waac nyei mienh nor, duqv mbenc maaih nzie weih gong tengx wang-henh faan waac bun muangx maiv zuqc cuotv nyaanh, mbenc nzoih liouh bun meih longc. Douc waac daaih lorx taux nzie weih zipv kaeqv gorn zangc yiem njiec naaiv 1-877-723-4795 (TTY: 711), yiem naaiv liv baaiz yietv mingh taux liv baaiz hmz bouc dauh, yiem 8 diemv lungv ndorm ziagh hoc mingh 8 diemv lungv muonz. Naaiv norm douc waac gorn se wang-henh longc maiv zuqc cuotv nyaanh oc.

Українська (Ukrainian): УВАГА: Якщо ви розмовляєте англійською мовою, ви можете безкоштовно скористатися доступними послугами перекладача. Телефонуйте до служби підтримки клієнтів за номером 1-877-723-4795 (телефонний пристрій із текстовим вводом [Teletype TTY]: 711), понеділок-п'ятниця, з 8:00 до 20:00. Дзвінок безкоштовний.

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.



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