

## Enhanced Care Management (Pinahusay na Pamamahala sa Pangangalaga)

Nag-aalok ang Enhanced Care Management (ECM) ng mga bago at libreng benepisyo para tulungan kang makuha ang pangangalagang kailangan mo:

Tutulungan ka ng Pangangasiwa ng Pangunahing Tagapamahala ng Kaso ECM na:



Maghanap ng mga doktor at makakuha ng appointment



Mas maintindihan ang mga iniresetang gamot sa iyo



Makakuha ng pang-follow up na mga serbisyo pagkatapos mo umalis ng ospital



Maghanda ng transportasyon papunta sa iyong mga pagpapatingin sa doktor



Maghanap at mag-apply para sa mga benepisyo sa pagkain at pabahay



Kumonekta sa ibang programa at serbisyo sa komunidad

### » Kabilang sa iyong team na Pangunahing Tagapamahala ng Kaso

Makikipagtulungan ang team kasama mo at ng iyong mga provider ng pangangalagang pangkalusugan, tulad ng iyong mga doktor, espesyalista, parmasyutiko, at iba pa. Titiyakin nila na alam ng lahat ang tungkol sa iyong kalusugan at mga serbisyong kailangan mo.

# Para sa iyo ba ang ECM?

**Kung OO ang sagot mo sa dalawa o higit pang tanong sa ibaba, maaaring para sa iyo nga ang ECM.**

- Mayroon ka bang Medi-Cal?
- Mayroon ka bang higit sa isang malubhang kondisyon at/o kondisyon sa kalusugang pangkaisipan na nangangailangan ng regular na pangangalaga ng doktor?
- Pumunta ka ba sa emergency room o ospital nang limang beses o higit pa sa loob ng nakaraang 6 na buwan?
- Nakarating ka na ba sa isang facility ng pag-aalaga ng tatlo o higit pang beses sa huling anim na buwan?
- Kailangan mo ba ng mga serbisyo sa pangmatagalang pangangalaga?
- Handa ka na bang bumalik sa bahay matapos mamuhay sa isang pasilidad para sa pangangalaga?
- Pinalabas ka ba sa kulungan o bilangguan sa nakaraang taon at mayroon ka bang kondisyon sa kalusugan?
- Kailangan mo ba ng ligtas na tirahan?

## Mag-sign up para sa ECM ngayon!

Tawagan ang Customer Service ng SCFHP upang pag-usapan ang iyong mga mapagpipilian sa 1-800-260-2055 (TTY 1-800-735-2929 o 711) Lunes hanggang Biyernes 8:30 a.m. hanggang 5:00 p.m. Libre ang pagtawag. Maaari mo ring sabihin sa iyong doktor o tauhan ng klinika na nais mong makatanggap ng mga benepisyo ng ECM.

Nakatuon ang Santa Clara Family Health Plan (SCFHP) sa pagpapabuti ng kalusugan at kapakanan ng mga miyembro nito.



### Mahalalagang bagay na dapat tandaan tungkol sa ECM:

- Mananatili ang mga kasalukuyang benepisyo mo sa Medi-Cal. Nagbibigay ang ECM ng dagdag na hanay ng suporta.
- Hindi magbabago ang iyong mga doktor at provider. Dagdag ang ECM sa iyong pangangalaga.
- Ang pagsali sa ECM ay opsyonal. Maaaring umalis sa programa anumang oras nang walang pagbabago sa iyong mga benepisyo sa Medi-Cal.

**Discrimination is against the law.** Santa Clara Family Health Plan (SCFHP) follows Federal civil rights laws. SCFHP 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 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 between 8:30 a.m. and 5:00 p.m., Monday through Friday by calling **1-800-260-2055**. Or, 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  
1-800-260-2055 (TTY: 711)**

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

If you believe that Santa Clara Family Health Plan (SCFHP) 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. You can file a grievance by phone, in writing, in person, or electronically:

- By phone: Contact SCFHP between 8:30 a.m. to 5 p.m., Monday through Friday by calling **1-800-260-2055**. 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 and say you want to file a grievance.
  - Electronically: Visit SCFHP's website at [www.scfhp.com](http://www.scfhp.com).
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## **OFFICE OF CIVIL RIGHTS – CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES**

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

- By phone: Call **916-440-7370**. If you cannot speak or hear well, please call **711 (Telecommunications Relay Service)**.
- In writing: Fill out a complaint form or send a letter to:

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

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

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

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

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

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

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

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

**English Tagline – ATTENTION:** If you need help in your language call 1-800-260-2055 (TTY: 711). Aids and services for people with disabilities, like documents in braille and large print, are also available. Call 1-800-260-2055 (TTY: 711). These services are free of charge.

**Mensaje en español (Spanish) – ATENCIÓN:** si necesita ayuda en su idioma, llame al 1-800-260-2055 (TTY: 711). También ofrecemos asistencia y servicios para personas con discapacidades, como documentos en braille y con letras grandes. Llame al 1-800-260-2055 (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 1-800-260-2055 (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 1-800-260-2055 (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 1-800-260-2055 (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 1-800-260-2055 (TTY: 711)。这些服务都是免费的。

**Tagalog Tagline (Tagalog) – ATENSIYON:** Kung kailangan mo ng tulong sa iyong wika, tumawag sa 1-800-260-2055 (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 1-800-260-2055 (TTY: 711) . Libre ang mga serbisyonang ito.

**(Arabic) الشعار بالعربية**

يُرجى الانتباه: إذا احتجت إلى المساعدة بلغتك، فاتصل بـ 1-800-260-2055 (TTY: 711). تتوفر أيضًا المساعدات والخدمات للأشخاص ذوي الإعاقة، مثل المستندات المكتوبة بطريقة بريل والخط الكبير. اتصل بـ 1-800-260-2055 (TTY: 711). هذه الخدمات مجانية.

**Հայերեն պիտակ (Armenian) – ՈՒՇԱԴՐՈՒԹՅՈՒՆ:** Եթե Ձեզ օգնություն է հարկավոր Ձեր լեզվով, զանգահարեք 1-800-260-2055 (TTY: 711) : Կան նաև օժանդակ միջոցներ ու ծառայություններ հաշմանդամություն ունեցող անձանց համար, օրինակ՝ Բրայլի գրաստիպով ու խոշորատառ տպագրված կյութեր: Չանզահարեք 1-800-260-2055 (TTY: 711) : Այդ ծառայություններն անվճար են:

**ប្រាសាទសំខេមបូឌីយ៉ា (Cambodian) – ចំណាំ:** បើអ្នក ត្រូវ ការជំនួយ ជាភាសា របស់អ្នក សូម ទូរស័ព្ទទៅលេខ 1-800-260-2055 (TTY: 711)។ ជំនួយ និង សេវាកម្ម សម្រាប់ ជនពិការ ដូចជា ឯកសារសរសេរជាអក្សរធំ សម្រាប់ជនពិការភ្នែក ឬឯកសារសរសេរជាអក្សរព្រម ក៏អាចរកបានផងដែរ។ ទូរស័ព្ទមកលេខ 1-800-260-2055 (TTY: 711)។ សេវាកម្មទាំងនេះមិនគិតថ្លៃឡើយ។

**(Farsi) فارسی زبان به مطلب**

توجه: اگر می‌خواهید به زبان خود کمک دریافت کنید، با 1-800-260-2055 (TTY: 711) تماس بگیرید. کمک‌ها و خدمات مخصوص افراد دارای معلولیت، مانند نسخه‌های خط بریل و چاپ با حروف بزرگ، نیز موجود است. با 1-800-260-2055 (TTY: 711) تماس بگیرید. این خدمات رایگان ارائه می‌شوند.

**हिंदी टैगलाइन (Hindi) – ध्यान दें:** अगर आपको अपनी भाषा में सहायता की आवश्यकता है तो 1-800-260-2055 (TTY: 711) पर कॉल करें। अशक्तता वाले लोगों के लिए सहायता और सेवाएं, जैसे ब्रेल और बड़े प्रिंट में भी दस्तावेज़ उपलब्ध हैं। 1-800-260-2055 (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 1-800-260-2055 (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 1-800-260-2055 (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 1-800-260-2055 (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。1-800-260-2055 (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 1-800-260-2055 (TTY: 711) 번으로 문의하십시오. 점자나 큰 활자로 된 문서와 같이 장애가 있는 분들을 위한 도움과 서비스도 이용 가능합니다. 1-800-260-2055 (TTY: 711) 번으로 문의하십시오. 이러한 서비스는 무료로 제공됩니다.

**ແຫກໄລພາສາລາວ (Laotian)** – ປະກາດ: ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອໃນພາສາຂອງທ່ານໃຫ້ໂທຫາເບີ 1-800-260-2055 (TTY: 711) . ຍັງມີຄວາມຊ່ວຍເຫຼືອແລະການບໍລິການສໍາລັບຄົນພິການ ເຊັ່ນເອກະສານທີ່ເປັນອັກສອນນູນແລະມິໂຕພິມໃຫຍ່ ໃຫ້ໂທຫາເບີ 1-800-260-2055 (TTY: 711) . ການບໍລິການເຫຼົ່ານີ້ບໍ່ຕ້ອງເສຍຄ່າໃຊ້ຈ່າຍໃດໆ.

**Mien Tagline (Mien)** – LONGC HNYOUV JANGX LONGX OC: Beiv taux meih qiemx longc mienh tengx faan benx meih nyei waac nor douc waac daaih lorx taux 1-800-260-2055 (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 hluc mbiutc aengx caux aamz mborqv benx domh sou se mbenc nzoih bun longc. Douc waac daaih lorx 1-800-260-2055 (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 1-800-260-2055 (TTY: 711). ਆਹਜ ਲੇਵਾਂ ਲਈ ਸਹਾਇਤਾ ਅਤੇ ਸੇਵਾਵਾਂ, ਜਿਵੇਂ ਕਿ ਬ੍ਰੇਲ ਅਤੇ ਮੋਟੀ ਛਪਾਈ ਵਿੱਚ ਦਸਤਾਵੇਜ਼, ਵੀ ਉਪਲਬਧ ਹਨ। ਕਾਲ ਕਰੋ 1-800-260-2055 (TTY: 711). ਇਹ ਸੇਵਾਵਾਂ ਮੁਫਤ ਹਨ।

**Русский слоган (Russian)** – ВНИМАНИЕ! Если вам нужна помощь на вашем родном языке, звоните по номеру 1-800-260-2055 (линия TTY: 711 ). Также предоставляются средства и услуги для людей с ограниченными возможностями, например документы крупным шрифтом или шрифтом Брайля. Звоните по номеру 1-800-260-2055 (линия TTY:711). Такие услуги предоставляются бесплатно.

**แท็กไลน์ภาษาไทย (Thai)** – โปรดทราบ: หากคุณต้องการความช่วยเหลือเป็นภาษาของคุณ กรุณาโทรศัพท์ไปที่หมายเลข 1-800-260-2055 (TTY: 711) นอกจากนี้ ยังพร้อมให้ความช่วยเหลือและบริการต่าง ๆ สำหรับบุคคลที่มีความพิการ เช่น เอกสารต่าง ๆ ที่เป็นอักษรเบรลล์และเอกสารที่พิมพ์ด้วยตัวอักษรขนาดใหญ่ กรุณาโทรศัพท์ไปที่หมายเลข 1-800-260-2055 (TTY: 711) ไม่มีค่าใช้จ่ายสำหรับบริการเหล่านี้

**Примітка українською (Ukrainian)** – УВАГА! Якщо вам потрібна допомога вашою рідною мовою, телефонуйте на номер 1-800-260-2055 (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 1-800-260-2055 (TTY: 711) . Ці послуги безкоштовні.