CenCal CareConnect

CenCal HEALTH
Local. Quality. Healthcare.

Transition of Care (TOC) Guide



What is Transition of Care?

Transition of Care means we help you keep getting your medicines and treatments when you join our plan, so your care continues smoothly.

Why do I get Transition of Care help?

You get TOC help because you're **new to our plan**. If any of your medicines or treatments aren't on our *List of Covered Drugs (Formulary)*, TOC gives you extra time so your care isn't interrupted.

Does it matter which doctor wrote my prescription?

No. It does **not** matter if the prescription is from your old doctor or your new doctor. TOC is only based on **when you join** our plan.

What does TOC give me?

You may get a **temporary supply** of your medicine (usually 30 days). This gives you time to:

- Talk with your doctor
- Switch to a covered medicine, if needed
- Complete any approvals your medicine may need

Will my medicine stop after the temporary supply?

Not right away. We will work with you and your doctor to decide the best next step. But you may need a different medicine or approval for long-term coverage.

Do I need to do anything?

Yes. During your temporary supply, please:

- Talk with your doctor about your medicine
- Respond to any letters we send
- Call us if you have questions

Questions & Help

CenCal CareConnect Pharmacy Help Desk, 24 hours a day, 7 days a week: Call the number on your CenCal CareConnect member ID card: 1-833-726-0676 (TTY: 711), 7 days a week, 8 a.m to 8 p.m. PT. We're happy to explain how the program works and help you decide if it's right for you.

Extra Help (LIS): Many D-SNP members get Extra Help automatically (for example, with Medi-Cal, a Medicare Savings Program, or SSI). If you don't already have Extra Help, we'll help you check eligibility and apply. Visit **www.ssa.gov/medicare/part-d-extra-help** or call 1-800-772-1213 (TTY: 1-800-325-0778). Your State Health Insurance Assistance Program (SHIP) can also help for free.

File a Complaint or Ask for an Appeal

If you have a complaint about this program (for example, a billing dispute), you can file a grievance. To request a coverage decision or appeal, visit our **Grievances & Appeals page** or call Member Services at **1-877-814-1861** (TTY: CA Relay at 711 for members who are deaf, hard of hearing, or have a speech disability) 7 days a week, 8 a.m. to 8 p.m. PT. You can also visit **www.cencalhealth.org**. We follow Medicare's standard and expedited timeframes.

Accessibility & Language Supports

We can provide materials in large print, braille, audio, or other formats at no cost.

We provide free language assistance. Call Member Services at **1-877-814-1861** (TTY: CA Relay at **711** for members who are deaf, hard of hearing, or have a speech disability), 7 days a week, 8 a.m. to 8 p.m. PT.

We do not discriminate based on race, color, national origin, disability, age, or sex.

Need Support?

Member Services is available to our CenCal CareConnect members.
Call **1-877-814-1861** (TTY: CA Relay at **711**), 7 days a week, 8 a.m. to 8 p.m. PT.

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