

2027 Summary of Benefits



**CenCal
CareConnect™**

(HMO D-SNP)

1-877-814-1861 (TTY: CA Relay at **711**), 8 a.m. to 8 p.m. PT, 7 days a week
(except Thanksgiving and Christmas) from October 1 through March 31,
and Monday through Friday (except holidays) from April 1 through September 30

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CenCal CareConnect (HMO D-SNP) | 2027 Summary of Benefits

Introduction

This document is a brief summary of the benefits and services covered by CenCal CareConnect. It includes answers to frequently asked questions, important contact information, an overview of benefits and services offered, and information about your rights as a member of CenCal CareConnect. Key terms and their definitions appear in alphabetical order in the last chapter of the *Member Handbook*.

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If you have questions, please call CenCal CareConnect at 1-877-814-1861 (TTY: CA Relay at 711), 8 a.m. to 8 p.m. PT, 7 days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday through Friday (except holidays) from April 1 through September 30. The call is free. **For more information**, visit www.cencalhealth.org/careconnect.

A. Disclaimers



This is a summary of health services covered by CenCal CareConnect for January 1, 2027 through December 31, 2027. This is only a summary. Please read the *Member Handbook* for the full list of benefits. You can access the *Member Handbook* by visiting our website at www.cencalhealth.org/careconnect or by calling Member Services at 1-877-814-1861 (TTY: CA Relay at 711).

- ❖ CenCal CareConnect is an HMO D-SNP with a Medicare and a Medi-Cal contract. Enrollment in CenCal CareConnect depends on contract renewal.
- ❖ For more information about **Medicare**, you can read the *Medicare & You* handbook. It has a summary of Medicare benefits, rights, and protections and answers to the most frequently asked questions about Medicare. You can get it at the Medicare website (www.medicare.gov) or by calling 1-800-MEDICARE (1-800-633-4227), 24 hours per day, 7 days a week. TTY users should call 1-877-486-2048. For more information about **Medi-Cal**, you can check the California Department of Healthcare Services (DHCS) website (www.dhcs.ca.gov/) or contact the Medi-Cal Office of the Ombudsman at 1-888-452-8609, Monday through Friday, between 8 a.m. and 5 p.m. You can also call the Medicare and Medi-Cal Ombudsperson Program (MMOP) at 1-855-501-3077, Monday through Friday, between 9 a.m. and 5 p.m.

Notice of Availability of Language Assistance Services and Auxiliary Aids and Services

English

ATTENTION: If you need help in your language, call 1-877-814-1861 (TTY: CA Relay at 711). Aids and services for people with disabilities, like documents in braille and large print, are also available. Call 1-877-814-1861 (TTY: CA Relay at 711). These services are free of charge.

(Arabic) العربية

انتباه: إذا كنت بحاجة إلى مساعدة بلغتك، فاتصل على الرقم 1-877-814-1861 (TTY: CA Relay 711). وتتوفر أيضاً المساعدات والخدمات للأشخاص ذوي الإعاقة، مثل المستندات المكتوبة بطريقة برايل والمطبوعة بحروف كبيرة. اتصل على الرقم 1-877-814-1861 (TTY: CA Relay 711). هذه الخدمات مجانية.



If you have questions, please call CenCal CareConnect at 1-877-814-1861 (TTY: CA Relay at 711), 8 a.m. to 8 p.m. PT, 7 days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday through Friday (except holidays) from April 1 through September 30. The call is free. **For more information**, visit www.cencalhealth.org/careconnect.

Հայերեն (Armenian)

ՈՒՇԱԴՐՈՒԹՅՈՒՆ. Եթե ձեր լեզվով օգնության կարիք ունեք, զանգահարեք 1-877-814-1861 (TTY: CA Relay 711) հեռախոսահամարով: Հաշմանդամություն ունեցող անձանց համար հասանելի են նաև օժանդակ միջոցներ և ծառայություններ, օրինակ՝ բրայլով և խոշոր տառերով տպված փաստաթղթեր: Զանգահարեք 1-877-814-1861 (TTY: CA Relay 711) հեռախոսահամարով: Այս ծառայություններն անվճար են:

中文 (Chinese)

请注意：如果您需要以您的母语获得帮助，请致电 1-877-814-1861 (TTY: CA Relay 711)。我们也为残疾人士提供辅助和服务，例如盲文版和大字号文件。请致电 1-877-814-1861 (TTY: CA Relay 711)。这些服务都是免费的。

ਪੰਜਾਬੀ (Punjabi)

ਧਿਆਨ ਦਿਓ: ਜੇਕਰ ਤੁਹਾਨੂੰ ਆਪਣੀ ਭਾਸ਼ਾ ਵਿੱਚ ਸਹਾਇਤਾ ਦੀ ਲੋੜ ਹੈ ਤਾਂ 1-877-814-1861 (TTY: CA Relay 711) 'ਤੇ ਕਾਲ ਕਰੋ। ਅਪਾਹਜ ਲੋਕਾਂ ਲਈ ਸਹਾਇਤਾ ਅਤੇ ਸੇਵਾਵਾਂ ਵੀ ਉਪਲਬਧ ਹਨ ਜਿਵੇਂ ਕਿ ਬ੍ਰੇਲ ਅਤੇ ਵੱਡੇ ਅੱਖਰਾਂ ਵਿੱਚ ਦਸਤਾਵੇਜ਼। 1-877-814-1861 (TTY: CA Relay 711) 'ਤੇ ਕਾਲ ਕਰੋ। ਇਹ ਸੇਵਾਵਾਂ ਮੁਫ਼ਤ ਹਨ।



If you have questions, please call CenCal CareConnect at 1-877-814-1861 (TTY: CA Relay at 711), 8 a.m. to 8 p.m. PT, 7 days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday through Friday (except holidays) from April 1 through September 30. The call is free. **For more information**, visit www.cencalhealth.org/careconnect.

हिंदी (Hindi)

ध्यान दें: अगर आपको अपनी भाषा में सहायता चाहिए, तो 1-877-814-1861 (TTY: CA Relay 711) पर कॉल करें। विकलांग व्यक्तियों के लिए सहायताएँ और सेवाएँ, जैसे कि ब्रेल और बड़े प्रिंट में दस्तावेज़, भी उपलब्ध हैं। 1-877-814-1861 (TTY: CA Relay 711) पर कॉल करें। ये सेवाएँ मुफ्त दी जाती हैं।

Hmoob (Hmong)

CEEB TOOM: Yog koj xav tau kev pab txhais koj hom lus hu rau 1-877-814-1861 (TTY: CA Relay 711). Muaj cov kev pab txhawb thiab kev pab cuam rau cov neeg xiam oobqhab, xws li puav leej muaj ua cov ntawv su thiab luam tawm ua tus ntawv loj. Hu rau 1-877-814-1861 (TTY: CA Relay 711). Cov kev pab cuam no yog pab dawb xwb.

日本語 (Japanese)

注意: 日本語での対応が必要な場合は 1-877-814-1861 (TTY: CA Relay 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。1-877-814-1861 (TTY: CA Relay 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。



If you have questions, please call CenCal CareConnect at 1-877-814-1861 (TTY: CA Relay at 711), 8 a.m. to 8 p.m. PT, 7 days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday through Friday (except holidays) from April 1 through September 30. The call is free. **For more information**, visit www.cencalhealth.org/careconnect.

한국인 (Korean)

유의사항: 귀하의 언어로 도움을 받고 싶으시면 1-877-814-1861 (TTY: CA Relay 711) 번으로 문의하십시오. 점자나 큰 활자로 된 문서와 같이 장애가 있는 분들을 위한 도움과 서비스도 이용 가능합니다. 1-877-814-1861 (TTY: CA Relay 711) 번으로 문의하십시오. 이러한 서비스는 무료로 제공됩니다.

ພາສາລາວ (Laotian)

ປະກາດ: ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອເປັນພາສາຂອງທ່ານໃຫ້ ໂທຫາເບີ 1-877-814-1861 (TTY: CA Relay 711). ຍັງມີຄວາມຊ່ວຍເຫຼືອ ແລະ ການບໍລິການສໍາລັບຄົນພິການ, ເຊັ່ນເອກະສານທີ່ເປັນ ອັກສອນນູນ ແລະ ຕົວພິມໃຫຍ່. ໃຫ້ໂທຫາເບີ 1-877-814-1861 (TTY: CA Relay 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 1-877-814-1861 (TTY: CA Relay 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 1-877-814-1861 (TTY: CA Relay 711). Naaiv deix nzie weih gong-bou jauv-louc se benx wang-henh tengx mv zuqc cuotv nyaanh oc.



If you have questions, please call CenCal CareConnect at 1-877-814-1861 (TTY: CA Relay at 711), 8 a.m. to 8 p.m. PT, 7 days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday through Friday (except holidays) from April 1 through September 30. The call is free. **For more information**, visit www.cencalhealth.org/careconnect.

ខ្មែរ (Cambodian)

យកចិត្តទុកដាក់៖ ប្រសិនបើអ្នកត្រូវការជំនួយជាភាសារបស់អ្នក សូម ទូរស័ព្ទលេខ 1-877-814-1861 (TTY: CA Relay 711)។ ជំនួយនិងសេវាសម្រាប់អ្នកដែលមានភាពពិការ ដូចជាឯកសារជាអក្សរ ស្នាបន្លឹងអក្សរធំៗ ក៏មានជូនផងដែរ។ ទូរស័ព្ទទៅលេខ 1-877-814-1861 (TTY: CA Relay 711)។ សេវាកម្មទាំងនេះមិនគិតថ្លៃទេ។

(Farsi) فارسی

اگر به زبان خودتان نیاز به کمک دارید، با شماره 1-877-814-1861 تماس بگیرید (TTY: CA Relay 711). خدمات و کمک‌هایی برای افراد دارای معلولیت، مانند مدارک به خط بریل و چاپ درشت، نیز موجود است. با شماره 1-877-814-1861 تماس بگیرید (TTY: CA Relay 711). این خدمات به صورت رایگان ارائه می‌شوند.

Русский (Russian)

ВНИМАНИЕ! Если вам нужна помощь на вашем языке, позвоните по телефону 1-877-814-1861 (TTY: CA Relay 711). Также доступны вспомогательные средства и услуги для людей с ограниченными возможностями, такие как документы, напечатанные шрифтом Брайля и крупным шрифтом. Позвоните по телефону 1-877-814-1861 (TTY: CA Relay 711). Эти услуги бесплатны.

Español (Spanish)

ATENCIÓN: Si necesita ayuda en su idioma, llame al 1-877-814-1861 (TTY: CA Relay 711). También hay disponibles aparatos y servicios de asistencia para personas con discapacidad, como documentos en braille y letra grande. Llame al 1-877-814-1861 (TTY: CA Relay 711). Estos servicios no tienen costo.



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Tagalog (Filipino)

PAUNAWA: Kung kailangan ninyo ng tulong sa inyong wika tumawag sa 1-877-814-1861 (TTY: CA Relay 711). Ang mga tulong at serbisyo para sa mga taong may kapansanan, gaya ng mga dokumento na nasa braille at malaking letra, ay available rin. Tumawag sa 1-877-814-1861 (TTY: CA Relay 711). Ang mga serbisyong ito ay walang bayad.

ภาษาไทย (Thai)

โปรดทราบ: หากคุณต้องการความช่วยเหลือเป็นภาษาของคุณ กรุณาโทรศัพท์ไปที่หมายเลข 1-877-814-1861 (TTY: CA Relay 711) นอกจากนี้ ยังพร้อมให้ความช่วยเหลือแล
ะบริการต่าง ๆ สำหรับบุคคลที่มีความพิการ เช่น เอกสารต่าง ๆ ที่เป็นอักษรเบรลล์และเอกสารที่พิมพ์ด้วยตัวอักษรขนาดใหญ่ กรุณาโทรศัพท์ไปที่หมายเลข 1-877-814-1861 (TTY: CA Relay 711) ไม่มีค่าใช้จ่ายสำหรับบริการเหล่านี้

Українська (Ukrainian)

УВАГА! Якщо вам потрібна допомога вашою мовою, зателефонуйте на номер 1-877-814-1861 (TTY: CA Relay 711). Також надаються допомога й послуги для людей з інвалідністю, як-от документи, надруковані шрифтом Брайля або великими літерами. Телефонуйте на номер 1-877-814-1861 (TTY: CA Relay 711). Ці послуги надаються безкоштовно.



If you have questions, please call CenCal CareConnect at 1-877-814-1861 (TTY: CA Relay at 711), 8 a.m. to 8 p.m. PT, 7 days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday through Friday (except holidays) from April 1 through September 30. The call is free. **For more information**, visit www.cencalhealth.org/careconnect.

B. Tiếng Việt (Vietnamese)

CHÚ Ý: Nếu quý vị cần trợ giúp bằng ngôn ngữ của mình, vui lòng gọi số 1-877-814-1861 (TTY: CA Relay 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 bản in chữ cỡ lớn. Vui lòng gọi số 1-877-814-1861 (TTY: CA Relay 711). Các dịch vụ này đều miễn phí.

- ❖ This document is available for free in Spanish.
- ❖ To make a standing request to receive materials in languages other than English or in an alternate format, or to make changes to a standing request, please call CenCal CareConnect Member Services at 1-877-814-1861 (TTY: CA Relay at 711), 8 a.m. to 8 p.m. PT, 7 days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday through Friday (except holidays) from April 1 through September 30. CenCal CareConnect will keep your information as a standing request for future mailings and communications so you do not need to make a separate request each time.



If you have questions, please call CenCal CareConnect at 1-877-814-1861 (TTY: CA Relay at 711), 8 a.m. to 8 p.m. PT, 7 days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday through Friday (except holidays) from April 1 through September 30. The call is free. **For more information**, visit www.cencalhealth.org/careconnect.

C. Frequently asked questions (FAQ)

The following table lists frequently asked questions.

Frequently Asked Questions	Answers
What's a Medi-Medi Plan?	A Medi-Medi Plan is a health plan that contracts with both Medicare and Medi-Cal to provide benefits of both programs to enrollees. It's for people age 21 and older. A Medi-Medi Plan is an organization made up of doctors, hospitals, pharmacies, providers of Long-term Services and Supports (LTSS), and other providers. It also has care coordinators to help you manage all your providers and services and supports. They all work together to provide the care you need.
Will I get the same Medicare and Medi-Cal benefits in CenCal CareConnect that I get now?	You'll get most of your covered Medicare and Medi-Cal benefits directly from CenCal CareConnect. You'll work with a team of providers who will help determine what services will best meet your needs. This means that some of the services you get now may change based on your needs, and your doctor and care team's assessment. You may also get other benefits outside of your health plan the same way you do now, directly from a State or county agency like In-Home Supportive Services (IHSS), specialty mental health and substance use disorder services, or regional center services. When you enroll in CenCal CareConnect, you and your care team will work together to develop a care plan to address your health and support needs, reflecting your personal preferences and goals. If you're taking any Medicare Part D drugs that CenCal CareConnect doesn't normally cover, you can get a temporary supply and we'll help you to transition to another drug or get an exception for CenCal CareConnect to cover your drug if medically necessary. For more information, call Member Services.



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Can I use the same doctors I use now? (continued on the next page)

Often that's the case. If your providers (including doctors, hospitals, therapists, pharmacies, and other health care providers) work with CenCal CareConnect and have a contract with us, you can keep going to them.

- Providers with an agreement with us are “in-network.” Network providers participate in our plan. That means they accept members of our plan and provide services our plan covers. **You must use the providers in CenCal CareConnect’s network.** If you use providers or pharmacies that aren’t in our network, the plan may not pay for these services or drugs.
- If you need urgent or emergency care or out-of-area dialysis services, you can use providers outside of CenCal CareConnect’s plan.
- If you’re currently under treatment with a provider that’s out of CenCal CareConnect’s network, or have an established relationship with a provider that’s out of CenCal CareConnect’s network, call Member Services to check about staying connected and ask for continuity of care.
- If you have had a non-emergency visit to a primary or specialty care provider once during the last 12 months prior to your enrollment into our plan, you and your provider can request continuity of care. If your provider is willing to accept our plan’s payment rates, then you can continue to receive care from this primary or specialty care provider for an additional 12 months after enrolling into our plan. You, your provider, or your authorized representative can request continuity of care to continue treatment.
- We determine an existing relationship by reviewing your available health information or information you give us. We have 30 days to respond to your request. You can ask us to make a faster decision, and we must respond in 15 days. You or your provider must show documentation of an existing relationship and agree to certain terms when you make the request.
- After the continuity of care period ends, you will need to use doctors and other providers in CenCal CareConnect’s network that are affiliated with your primary care provider’s health network, unless we make an agreement with your out-of-network doctor.
- Call Member Services to find out more and initiate your request.



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Frequently Asked Questions	Answers
Can I use the same doctors I use now? (continued from previous page)	To find out if your doctors are in the plan's network, call Member Services at 1-877-814-1861 (TTY: CA Relay at 711), 8 a.m. to 8 p.m. PT, 7 days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday through Friday (except holidays) from April 1 through September 30, or read CenCal CareConnect's <i>Provider and Pharmacy Directory</i> on the plan's website at www.cencalhealth.org/careconnect. If CenCal CareConnect is new for you, we'll work with you to develop a care plan to address your needs.
What's a CenCal CareConnect care coordinator?	A CenCal CareConnect care coordinator is one main person for you to contact. This person helps to manage all your providers and services and make sure you get what you need.
What are Long-term Services and Supports (LTSS)?	Long-term Services and Supports (LTSS) are help for people who need assistance to do everyday tasks like bathing, toileting, getting dressed, making food, and taking medicine. Most of these services are provided at your home or in your community but could be provided in a nursing home or hospital. In some cases, a county or other agency may administer these services, and your care coordinator or care team will work with that agency.
What's a Multipurpose Senior Services Program (MSSP)?	A MSSP provides on-going care coordination with health care providers beyond what your health plan already provides and can connect you to other needed community services and resources. This program helps you get services that help you live independently in your home.
What happens if I need a service but no one in CenCal CareConnect's network can provide it?	Most services will be provided by our network providers. If you need a service that can't be provided within our network, CenCal CareConnect will pay for the cost of an out-of-network provider.
Where's CenCal CareConnect available?	The service area for this plan includes: Santa Barbara County and San Luis Obispo County, California. You must live in one of these areas to join the plan.



If you have questions, please call CenCal CareConnect at 1-877-814-1861 (TTY: CA Relay at 711), 8 a.m. to 8 p.m. PT, 7 days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday through Friday (except holidays) from April 1 through September 30. The call is free. **For more information**, visit www.cencalhealth.org/careconnect.

Frequently Asked Questions	Answers
What's prior authorization?	Prior authorization means an approval from CenCal CareConnect to seek services outside of our network or to get services not routinely covered by our network before you get the services. CenCal CareConnect may not cover the service, procedure, item, or drug if you don't get prior authorization. If you need urgent or emergency care or out-of-area dialysis services, you don't need to get prior authorization first. CenCal CareConnect can provide you or your provider with a list of services or procedures that require you to get prior authorization from CenCal CareConnect before the service is provided. If you have questions about whether prior authorization is required for specific services, procedures, items, or drugs, call Member Services at 1-877-814-1861 (TTY: CA Relay at 711), 8 a.m. to 8 p.m. PT, 7 days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday through Friday (except holidays) from April 1 through September 30 for help.
What's a referral?	A referral means that your primary care provider (PCP) must give you approval to go to someone that's not your PCP. A referral is different than a prior authorization. If you don't get a referral from your PCP, CenCal CareConnect may not cover the services. CenCal CareConnect can provide you with a list of services that require you to get a referral from your PCP before the service is provided. Refer to the <i>Member Handbook</i> to learn more about when you'll need to get a referral from your PCP.
Do I pay a monthly amount (also called a premium) under CenCal CareConnect?	No. Because you have Medi-Cal, you won't pay any monthly premiums, including your Medicare Part B premium, for your health coverage.
Do I pay a deductible as a member of CenCal CareConnect?	No. You don't pay deductibles in CenCal CareConnect.
What's the maximum out-of-pocket amount that I'll pay for medical services as a member of CenCal CareConnect?	There's no cost-sharing for medical services in CenCal CareConnect, so your annual out-of-pocket costs will be \$0.



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D. List of covered services

The following table is a quick overview of what services you may need, your costs, and rules about the benefits.

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need hospital care	Hospital stay	\$0	Authorization rules may apply. Contact plan for details.
	Doctor or surgeon care	\$0	Referral requirements may apply. Contact plan for details.
	Outpatient hospital services, including observation	\$0	Authorization rules may apply. Referral requirements may apply. Contact plan for details.
	Ambulatory surgical center (ASC) services	\$0	Authorization rules may apply. Referral requirements may apply. Contact plan for details.
You want a doctor	Visits to treat an injury or illness	\$0	
	Specialist care	\$0	Referral requirements may apply. Contact plan for details.
	Wellness visits, such as a physical	\$0	
	Care to keep you from getting sick, such as flu shots and screenings to check for cancer	\$0	
	“Welcome to Medicare” (preventive visit one time only)	\$0	



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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need emergency care	Emergency room services	\$0	Emergency care services are also covered out-of-network and without prior authorization requirements. Not covered outside the United States. Contact plan for details.
	Urgent care	\$0	Urgent care services are also covered out-of-network and without prior authorization requirements. Not covered outside the United States. Contact plan for details.
You need medical tests	Diagnostic radiology services (for example, X-rays or other imaging services, such as CAT scans or MRIs)	\$0	Authorization rules may apply. Contact plan for details.
	Lab tests and diagnostic procedures, such as blood work	\$0	Authorization rules may apply. Contact plan for details.
You need hearing/auditory services	Hearing screenings	\$0	Supplemental Benefit: One routine exam per year. Exam to diagnose and treat hearing and balance issues.
	Hearing aids	\$0	Supplemental Benefit: \$650 allowance for up to 2 hearing aids with fitting.



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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need dental care	Dental check-ups and preventive care	\$0	Medi-Cal covers dental check-ups and preventive care. If you have questions or want to learn more about dental services, call the Medi-Cal Dental Program at 1-800-322-6384 (TTY 1-800-735-2922 or 711). Medi-Cal covers emergency dental care for all members. You may also visit the Medi-Cal Dental Program website at: www.dental.dhcs.ca.gov or smilecalifornia.org/contact-us/
	Restorative and emergency dental care	\$0	Certain dental services are available through the Medi-Cal Dental Program or FFS Medi-Cal. If you have questions or want to learn more about dental services, call the Medi-Cal Dental Program at 1-800-322-6384 (TTY 1-800-735-2922 or 711). Medi-Cal covers emergency dental care for all members. You may also visit the Medi-Cal Dental Program website at: www.dental.dhcs.ca.gov or smilecalifornia.org/contact-us/
You need eye care	Eye exams	\$0	Medicare-covered exam to diagnose and treat diseases and conditions of the eye (including yearly glaucoma screening). Supplemental Benefit: One routine eye exam every year.
	Glasses or contact lenses	\$0	One pair of Medicare-covered eyeglasses (lenses and frames) or contact lenses after cataract surgery. Supplemental Benefit: \$400 allowance every 2 years for contacts or eyeglasses (frames and lenses).
	Other vision care	\$0	



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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need mental health services (continued on the next page)	Mental health services	\$0	Outpatient mental or behavioral health services include, but are not limited to the following: • Individual and group mental health evaluation and treatment • Intensive Outpatient Program (IOP) services • Partial Hospitalization Program (PHP) services • Psychological testing to evaluate a mental health condition • Electroconvulsive Therapy (ECT) • Transcranial Magnetic Stimulation (TMS) • Inpatient mental health services Authorization rules may apply. Referral requirements may apply. Contact plan for details. For questions about behavioral health, call Member Services at 1-877-814-1861 and select the option to speak to the Behavioral Health team. Medi-Cal specialty mental health services are available through your County Mental Health Plan (MHP) if you meet the eligibility criteria. To access these services, contact the Access Lines for your area: Santa Barbara County Department of Behavioral Wellness Access Line (24/7): 1-888-868-1649 San Luis Obispo Department of Behavioral Health Access Line (24/7): 1-800-838-1381



If you have questions, please call CenCal CareConnect at 1-877-814-1861 (TTY: CA Relay at 711), 8 a.m. to 8 p.m. PT, 7 days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday through Friday (except holidays) from April 1 through September 30. The call is free. **For more information**, visit www.cencalhealth.org/careconnect.

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need mental health services (continued from the previous page)	Inpatient and outpatient care and community-based services for people who need mental health services	\$0	Our plan covers up to 190 days for inpatient mental health care in a psychiatric hospital. The inpatient hospital limitation does not apply to inpatient mental health services provided in a general hospital. After 190 days, the local county mental health agency will coordinate authorization and pay for inpatient psychiatric services. Authorization rules may apply. Referral requirements may apply. Contact plan for details. For questions about behavioral health, call Member Services at 1-877-814-1861 and select the option to speak to the Behavioral Health team. Medi-Cal specialty mental health services are available through your County Mental Health Plan (MHP) if you meet the eligibility criteria. To access these services, contact the Access Lines for your area: Santa Barbara County Department of Behavioral Wellness Access Line (24/7): 1-888-868-1649 San Luis Obispo Department of Behavioral Health Access Line (24/7): 1-800-838-1381



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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need substance use disorder services	Substance use disorder services	\$0	Substance abuse services include: • Screening, Assessment, Brief Intervention and Referral to Treatment (SABIRT); • Opioid Treatment Program (OTP) services For questions about behavioral health and substance abuse services, call Member Services at 1-877-814-1861 and select the option to speak to the Behavioral Health team. Medi-Cal specialty mental health services are available through your County Mental Health Plan (MHP) if you meet the eligibility criteria. To access these services, contact the Access Lines for your area: Santa Barbara County Department of Behavioral Wellness Access Line (24/7): 1-888-868-1649 San Luis Obispo Department of Behavioral Health Access Line (24/7): 1-800-838-1381
You need a place to live with people available to help you	Skilled nursing care	\$0	Authorization rules may apply. Referral requirements may apply. Contact plan for details.
	Nursing home care	\$0	Authorization rules may apply. Referral requirements may apply. Contact plan for details.
	Adult Foster Care and Group Adult Foster Care	\$0	
You need therapy after a stroke or accident	Occupational, physical, or speech therapy	\$0	Authorization rules may apply. Referral requirements may apply. Contact plan for details.



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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need help getting to health services	Ambulance services	\$0	Authorization rules may apply. Contact plan for details. In case of emergency, dial 911.
	Emergency transportation	\$0	In case of emergency, dial 911.
	Transportation to medical appointments and services	\$0	Non-Medical Transportation (NMT): Your benefits include getting a ride to your appointments when the appointment is for a plan-covered service and you do not have any access to transportation. You can get a ride, at no cost to you, when you have tried all other ways to get transportation and are: • Traveling to and from an appointment for a service covered by your plan authorized by your provider, or • Picking up prescriptions and medical supplies Non-Emergency Medical Transportation (NEMT): You can get medical transportation if you have medical needs that do not allow you to use a car, bus, or taxi to your appointments for covered services and plan-covered pharmacy appointments. • For members with medical and physical conditions requiring specialized transport • Requires a written authorization by a doctor or other provider because you are not able to physically or mentally use a bus, taxi, car, or van to get to your appointment • Includes ambulance, wheelchair, gurney, or air transport Contact plan for details.



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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need drugs to treat your illness or condition (continued on the next page)	Medicare Part B drugs	\$0	Part B drugs include drugs given by your doctor in their office, some oral cancer drugs, and some drugs used with certain medical equipment. Read the <i>Member Handbook</i> for more information on these drugs. Authorization rules may apply. Contact plan for details.
	Medicare Part D drugs Tier 1: Preferred Generic Tier 2: Generic Tier 3: Preferred Brand Tier 4: Non-Preferred Drug Tier 5: Specialty Tier 6: Select Care Drugs	Tier 1: Preferred Generic \$0 copay or 25% coinsurance for a 30-day supply. Tier 2: Generic \$0 copay or 25% coinsurance for a 30-day supply. Tier 3: Preferred Brand \$0 copay or 25% coinsurance for a 30-day supply. Tier 4: Non-Preferred Drug \$0 copay or 25% coinsurance for a 30-day supply. Tier 5: Specialty \$0 copay or 25% coinsurance for a 30-day supply. Tier 6: Select Care Drugs \$0 copay or 15% coinsurance for a 30-day supply.	There may be limitations on the types of drugs covered. Please refer to CenCal CareConnect's List of Covered Drugs (Drug List) for more information. Once you or others on your behalf pay \$2,400 you've reached the catastrophic coverage stage and you pay \$0 for all your Medicare drugs. Read the Member Handbook for more information on this stage. Many of the covered drugs are available for extended-day supplies (up to 100 days supply) at most retail and mail order locations for the same cost as a 1-month supply. Please refer to CenCal CareConnect's List of Covered Drugs (Drug List) for more information.



If you have questions, please call CenCal CareConnect at 1-877-814-1861 (TTY: CA Relay at 711), 8 a.m. to 8 p.m. PT, 7 days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday through Friday (except holidays) from April 1 through September 30. The call is free. **For more information**, visit www.cencalhealth.org/careconnect.

Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need drugs to treat your illness or condition (continued from previous page)	Over-the-counter (OTC) drugs	\$0	Supplemental Benefit: CenCal CareConnect offers a supplemental benefit that provides an allowance toward the purchase of certain over-the-counter (OTC) items. For more information on this benefit, contact Member Services at the number at the bottom of this page. A \$90 allowance is provided per quarter. Unused amounts DO NOT carry over to the next quarter. There may be limitations on the types of drugs covered. Please refer to CenCal CareConnect's <i>List of Covered Drugs (Drug List)</i> for more information.
You need help getting better or have special health needs	Rehabilitation services	\$0	Authorization rules may apply. Referral requirements may apply. Contact plan for details.
	Medical equipment for home care	\$0	Authorization rules may apply. Contact plan for details.
	Dialysis services	\$0	
You need foot care	Podiatry services	\$0	Authorization rules may apply. Contact plan for details.
	Orthotic services	\$0	Authorization rules may apply. Contact plan for details.



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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need durable medical equipment (DME) Note: This isn't a complete list of covered DME. For a complete list, contact Member Services or refer to Chapter 4 of the <i>Member Handbook</i>.	Wheelchairs, crutches, and walkers	\$0	Authorization rules may apply. Contact plan for details.
	Nebulizers	\$0	Authorization rules may apply. Contact plan for details.
	Oxygen equipment and supplies	\$0	Authorization rules may apply. Contact plan for details.
You need help living at home (continued on the next page)	Home health services	\$0	Home health services covers health services given in your home when found medically necessary and prescribed by your doctor or by a physician assistant, nurse practitioner, or clinical nurse specialist. Home health services are limited to services such as part-time skilled nursing care, part-time home health aide, skilled physical, occupational, and speech therapy, medical social services, and medical supplies. Authorization rules may apply. Contact plan for details.



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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need help living at home (continued from the previous page) (continued on the next page)	Home services, such as cleaning or housekeeping, or home modifications such as grab bars	\$0	For information in the County of Santa Barbara, contact Santa Barbara Social Services In-Home Supportive Services (IHSS): Santa Barbara Office: 805-681-4550 Santa Maria Office: 805-346-8303 Lompoc Office: 805-737-6020 For information in the County of San Luis Obispo, contact San Luis Obispo Social Services In-Home Supportive Services (IHSS): Atascadero Office: 805-461-6110 Arroyo Grande Office: 805-474-2000 If you need assistance or would like to find out which Community Supports may be available for you, call 805-562-1698, and select option 1 for Community Supports, or call your health care provider.
	Adult day health, Community Based Adult Services (CBAS), or other support services	\$0	Eligibility to participate in community-based adult services (CBAS) is determined by an assessment and individualized plan of services that meets your specific health and social needs. Authorization rules may apply. Referral requirements may apply. Contact plan for details.
	Day habilitation services	\$0	Day habilitation is for individuals experiencing homelessness and entered housing in the last 24 months, and individuals at risk of homelessness or institutionalization whose housing stability could be improved through participation in day habilitation program. Authorization rules apply. Contact plan for details.



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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
You need help living at home (continued from the previous page)	Services to help you live on your own (home health care services or personal care attendant services)	\$0	For information in the County of Santa Barbara, contact Santa Barbara Social Services In-Home Supportive Services (IHSS): Santa Barbara Office: 805-681-4550 Santa Maria Office: 805-346-8303 Lompoc Office: 805-737-6020 For information in the County of San Luis Obispo, contact San Luis Obispo Social Services In-Home Supportive Services (IHSS): Atascadero Office: 805-461-6110 Arroyo Grande Office: 805-474-2000 Authorization rules may apply. Referral requirements may apply. Contact plan for details.
Additional services (continued on the next page)	Chiropractic services	\$0	Authorization rules may apply.
	Diabetes supplies and services	\$0	Authorization rules may apply. Contact plan for details.
	Prosthetic services	\$0	Authorization rules may apply. Contact plan for details.
	Radiation therapy	\$0	Authorization rules may apply. Contact plan for details.
	Services to help manage your disease	\$0	



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Health need or concern	Services you may need	Your costs for in-network providers	Limitations, exceptions, & benefit information (rules about benefits)
Additional services (continued from the previous page)	California Integrated Care Management (CICM)	\$0	California Integrated Care Management (CICM) provides integrated care coordination for specific vulnerable populations covered by Dual-Eligible Special Needs Plans (D-SNPs) like CenCal CareConnect. Eligible populations include: • Adults Experiencing Homelessness • Adults at risk for avoidable hospital or Emergency Department utilization • Adults with serious mental health and/or Substance Use Disorder (SUD) needs • Adults transitioning from incarceration • Adults living in the community and at risk for Long-Term Care (LTC) institutionalization • Adult nursing facility residents transitioning to the community • Adults who are pregnant or postpartum and subject to racial and ethnic disparities • Adults with documented dementia needs Contact plan for more details on eligibility and enrollment requirements.

The above summary of benefits is provided for informational purposes only and isn't a complete list of benefits. For a complete list and more information about your benefits, you can read the CenCal CareConnect *Member Handbook*. If you don't have a *Member Handbook*, call CenCal CareConnect Member Services 1-877-814-1861 (TTY: CA Relay at 711) to get one. If you have questions, you can also call Member Services or visit www.cencalhealth.org/careconnect.

E. Benefits covered outside of CenCal CareConnect

There are some services that you can get that aren't covered by CenCal CareConnect but are covered by Medicare, Medi-Cal, or a State or county 'agency. This isn't a complete list. Call Member Services at 1-877-814-1861 (TTY: CA Relay at 711) to find out about these services.



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Other services covered by Medicare, Medi-Cal, or a State Agency	Your costs
Certain dental services Dental Managed Care (Dental MC) member contact information can be found at www.dental.dhcs.ca.gov/Contact_Us/DMC_Member_Contact_Information/DMCMemberContactInformation. For Medi-Cal Dental Fee-for-Service, contact Medi-Cal Dental at 1-800-322-6384 or visit the website at www.smilecalifornia.org or www.sonriecalifornia.org.	\$0
Certain hospice care services covered outside of CenCal CareConnect	\$0
Psychosocial rehabilitation	\$0
Targeted case management	\$0
Rest home room and board	\$0
County specialty mental health and substance use disorder services	\$0
Assisted Living Waiver	\$0
Multipurpose Senior Services Program (MSSP)	\$0
Regional Center Services	\$0
In-Home Supportive Services (IHSS) For information in the County of Santa Barbara, contact Santa Barbara Social Services IHSS: Santa Barbara Office: 805-681-4550 Santa Maria Office: 805-346-8303 Lompoc Office: 805-737-6020 For information in the County of San Luis Obispo, contact San Luis Obispo Social Services In-Home Supportive Services (IHSS): Atascadero Office: 805-461-6110 Arroyo Grande Office: 805-474-2000	\$0
If you need assistance or would like to find out which Community Supports may be available for you, call 805-562-1698, and select option 1 for Community Supports, or call your health care provider.	



If you have questions, please call CenCal CareConnect at 1-877-814-1861 (TTY: CA Relay at 711), 8 a.m. to 8 p.m. PT, 7 days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday through Friday (except holidays) from April 1 through September 30. The call is free. **For more information**, visit www.cencalhealth.org/careconnect.

F. Services that CenCal CareConnect, Medicare, and Medi-Cal don't cover

This isn't a complete list. Call Member Services at 1-877-814-1861 (TTY: CA Relay at 711) to find out about other excluded services.

Services CenCal CareConnect, Medicare, and Medi-Cal don't cover	
Services considered not "reasonable and medically necessary," according to Medicare and Medi-Cal standards, unless listed as covered services.	
Experimental medical and surgical treatments, items, and drugs, unless Medicare, a Medicare-approved clinical research study, or the plan covers them.	
Elective or voluntary enhancement procedures or services (including weight loss, hair growth, sexual performance, athletic performance, cosmetic purposes, anti-aging and mental performance), except when medically necessary.	
Certain durable medical equipment (DME) such as stairway elevators, dehumidifiers, telephone alert systems, and whirlpool baths. If you have questions or are unsure if your DME is covered, please contact Member Services for more information.	

G. Your rights as a member of the plan

As a member of CenCal CareConnect, you have certain rights. You can exercise these rights without being punished. You can also use these rights without losing your health care services. We'll tell you about your rights at least once a year. For more information on your rights, please read the *Member Handbook*. Your rights include, but aren't limited to, the following:

- **You have a right to respect, fairness, and dignity.** This includes the right to:
 - Get covered services without concern about medical condition, health status, receipt of health services, claims experience, medical history, disability (including mental impairment), marital status, age, sex, sexual orientation, national origin, race, color, religion, creed, or public assistance
 - Get information in other languages and formats (for example, large print, braille, or audio) free of charge
 - Be free from any form of physical restraint or seclusion
- **You have the right to get information about your health care.** This includes information on treatment and your treatment options. This information should be in a language and format you can understand. This includes the right to get information on:
 - Description of the services we cover



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- How to get services
- How much services will cost you
- Names of health care providers
- **You have the right to make decisions about your care, including refusing treatment.** This includes the right to:
 - Choose a primary care provider (PCP) and change your PCP at any time during the year
 - Use a women's health care provider without a referral
 - Get your covered services and drugs quickly
 - Know about all treatment options, no matter what they cost or whether they're covered
 - Refuse treatment, even if your health care provider advises against it
 - Stop taking medicine, even if your health care provider advises against it
 - Ask for a second opinion. CenCal CareConnect will pay for the cost of your second opinion visit
 - Make your health care wishes known in an advance directive
- **You have the right to timely access to care that doesn't have any communication or physical access barriers.** This includes the right to:
 - Get timely medical care
 - Get in and out of a health care provider's office. This means barrier-free access for people with disabilities, in accordance with the Americans with Disabilities Act
 - Have interpreters to help with communication with your health care providers and your health plan
- **You have the right to seek emergency and urgent care when you need it.** This means you have the right to:
 - Get emergency services without prior authorization in an emergency
 - Use an out-of-network urgent or emergency care provider, when necessary
- **You have a right to confidentiality and privacy.** This includes the right to:
 - Ask for and get a copy of your medical records in a way that you can understand and to ask for your records to be changed or corrected
 - Have your personal health information kept private
- **You have the right to file a complaint or appeal a denied, delayed, or modified service. Please see Section G below. This includes the right to:**
 - File a complaint or grievance against us or our providers
 - Appeal certain decisions made by us or our providers



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- File a complaint with the California Department of Managed Health Care (DMHC) through a toll-free phone number (1-888-466-2219), or a TDD line (1-877-688-9891) for the hearing and speech impaired. The DMHC website (www.dmhc.ca.gov/) has complaint forms, Independent Medical Review (IMR) application forms, and instructions available online.
- Ask DMHC for an IMR of Medi-Cal services or items that are medical in nature
- Ask for a State Hearing
- Get a detailed reason for why services were denied and ask for free copies of all the information used to make the decision

For more information about your rights, you can read the Member Handbook. If you have questions, you can call CenCal CareConnect Member Services at 1-877-814-1861 (TTY: CA Relay at 711).

You can also call the Medicare and Medi-Cal Ombudsperson Program (MMOP) at 1-855-501-3077, Monday through Friday, between 9 a.m. and 5 p.m., or the Medi-Cal Office of the Ombudsman at 1-888-452-8609, Monday through Friday, between 8 a.m. and 5 p.m.

H. How to file a complaint or appeal a denied, delayed, or modified service

If you have a complaint or think CenCal CareConnect improperly denied, delayed, or modified a service, call Member Services 1-877-814-1861 (TTY: CA Relay at 711), 8 a.m. to 8 p.m. PT, 7 days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday through Friday (except holidays) from April 1 through September 30. You may also submit a complaint in writing to CenCal CareConnect (HMO D-SNP), 4050 Calle Real, Santa Barbara, CA 93110, or Fax: 805-681-3009. You may be able to appeal our decision.

For questions about complaints and appeals, you can read **Chapter 9** of the *Member Handbook*. You can also call CenCal CareConnect Member Services at 1-877-814-1861 (TTY: CA Relay at 711).

You may be able to appeal our decision if CenCal CareConnect denies, modifies, or postpones your request for medical care, refuses to pay for emergency services, or declines to cover experimental or investigational treatments for a serious condition. For questions about complaints and appeals, you can read **Chapter 9** of the *Member Handbook* or call Member Services. **You can ask for help from any of the following:**

- Health Insurance Counseling and Advocacy Program (HICAP) at 805-928-5663.
- Your doctor or other provider. Your doctor or other provider can ask for a coverage decision or appeal on your behalf.
- A friend or family member. You can name another person to act for you as your “representative” and ask for a coverage decision or make an appeal.
- A lawyer. You have the right to a lawyer, but you are not required to have a lawyer to ask for a coverage decision or make an appeal.



If you have questions, please call CenCal CareConnect at 1-877-814-1861 (TTY: CA Relay at 711), 8 a.m. to 8 p.m. PT, 7 days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday through Friday (except holidays) from April 1 through September 30. The call is free. **For more information**, visit www.cencalhealth.org/careconnect.

- Call your own lawyer or get the name of a lawyer from the local bar association or other referral service. Some legal groups will give you free legal services if you qualify.
- Ask for a legal aid attorney from the Health Consumer Alliance at 1-888-804-3536.

Help from the California Department of Managed Health Care

The California Department of Managed Health Care is responsible for regulating health care service plans. If you have a grievance against your health plan, you should first telephone your health plan at **1-877-814-1861** (TTY: CA Relay at **711**) and use your health plan's grievance process before contacting the department. Utilizing this grievance procedure does not prohibit any potential legal rights or remedies that may be available to you. If you need help with a grievance involving an emergency, a grievance that has not been satisfactorily resolved by your health plan, or a grievance that has remained unresolved for more than 30 days, you may call the department for assistance. You may also be eligible for an Independent Medical Review (IMR). If you are eligible for IMR, the IMR process will provide an impartial review of medical decisions made by a health plan related to the medical necessity of a proposed service or treatment, coverage decisions for treatments that are experimental or investigational in nature and payment disputes for emergency or urgent medical services. The department also has a toll-free telephone number **1-888-466-2219** and a TDD line **1-877-688-9891** for the hearing and speech impaired. The department's internet website **www.dmhca.ca.gov** has complaint forms, IMR application forms and instructions online.

I. What to do if you suspect fraud

Most health care professionals and organizations that provide services are honest. Unfortunately, there may be some who are dishonest.

If you think a doctor, hospital or other pharmacy is doing something wrong, please contact us.

- Call us at CenCal CareConnect Member Services. Phone numbers are 1-877-814-1861 (TTY: CA Relay at 711).
- Or, call the CenCal CareConnect Anonymous Hotline at 1-866-775-3944.
- Or, call the Medi-Cal Customer Service Center at 1-800-541-5555. TTY users may call 1-800-430-7077.
- Or, call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users may call 1-877-486-2048. You can call these numbers for free.
- Or, call the California Department of Justice, Division of Medi-Cal Fraud & Elder Abuse (DMFEA) at 1-800-722-0432. TTY users may call 711.
- Or, call the U.S Department of Health and Human Services (HHS) Office of Inspector General (OIG) at 1-800-447-8477, TTY users may call 1-800-377-4950.



If you have questions, please call CenCal CareConnect at 1-877-814-1861 (TTY: CA Relay at 711), 8 a.m. to 8 p.m. PT, 7 days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday through Friday (except holidays) from April 1 through September 30. The call is free. **For more information**, visit www.cencalhealth.org/careconnect.



CenCalHEALTH®
Local. Quality. Healthcare.

4050 Calle Real, Santa Barbara CA 93110
www.cencalhealth.org/careconnect

If you have general questions or questions about our plan, services, service area, billing, or Member ID Cards, please call CenCal CareConnect Member Services:

1-877-814-1861 (TTY: CA Relay at 711), 8 a.m. to 8 p.m. PT, 7 days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday through Friday (except holidays) from April 1 through September 30. Calls to this number are free. Member Services also has free language interpreter services available for non-English speakers.

If you have questions about your health:

- Call your primary care provider (PCP). Follow your PCP's instructions for getting care when the office is closed.
- If your PCP's office is closed, you can also call the Nurse Advice Line 24-hours a day, 7 days a week at 1-800-524-5222. Calls to this number are free. A nurse will listen to your problem and tell you how to get care.
- CenCal CareConnect also has free language interpreter services available for non-English speakers. Call Member Services for more information.

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