



OneCare  
CalOptima Health

# CalOptima Health OneCare Flex Plus

## New Member Orientation 2025

### Our Mission

To serve member health with excellence and dignity, respecting the value and needs of each person.

### Our Vision

By 2027, remove barriers to health care access for our members, implement same-day treatment authorizations and real-time claims payments for our providers, and annually assess members' social determinants of health.

# What is CalOptima Health OneCare Flex Plus?

- CalOptima Health OneCare Flex Plus (HMO D-SNP) is a plan that covers all your Medicare services and coordinates all your Medi-Cal services
- OneCare Flex Plus provides coverage for your Medicare, Medi-Cal and pharmacy benefits
- OneCare Flex Plus also provides supplemental benefits that are not covered by Medicare

# Who is Eligible for CalOptima Health OneCare Flex Plus?

- **Medicare and Medi-Cal recipients who:**
  - Are enrolled in Medicare Parts A and B
  - Are age 21 or older
  - Have full Medi-Cal (no Share of Cost)
  - Live in Orange County
  - Are United States citizen or are lawfully present in the United States

# CalOptima Health OneCare Flex Plus Services

- **Customer Service:**

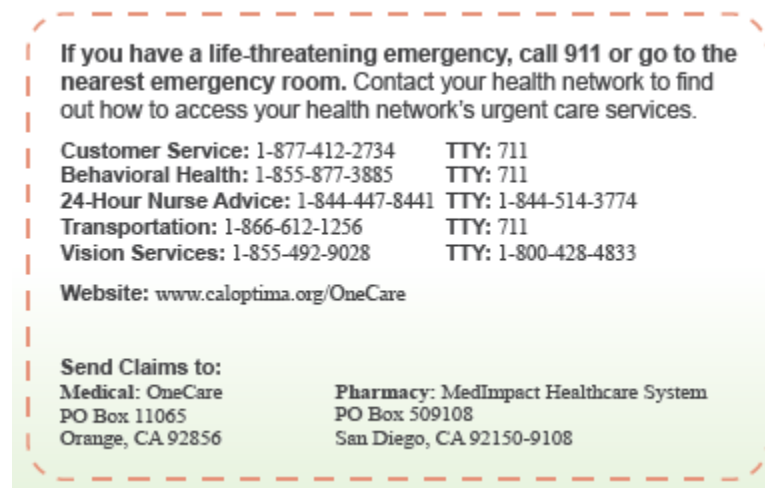
- Helps you access and understand your benefits
- Helps you get your medicine
- Tells you about community resources

- **Your primary care provider (PCP) and health network:**

- Provide or arrange routine and specialty care
- Provide one-on-one case management
- Request and authorize specialty care or services



# CalOptima Health OneCare Flex Plus Identification (ID) Card



## Lost Your Card?

Call OneCare Customer Service  
Toll-free: **1-877-412-2734 (TTY 711)**  
24 hours a day, 7 days a week

# If you Lose Your Medi-Cal Eligibility

- CalOptima Health OneCare Flex Plus will continue to cover all your Medicare-covered benefits for up to 6 months while you re-apply for Medi-Cal
- During the 6-month period:
  - You will **not** have Medi-Cal benefits
  - You may choose to disenroll from OneCare Flex Plus
  - After 5 months without full Medi-Cal eligibility, you will get a final disenrollment letter that explains your options

# Your Primary Care Physician (PCP)

- Provides care for illness, routine exams and preventive care at \$0 copay
- Requests authorization for durable medical equipment (DME), such as wheelchairs and walkers
- Requests authorization for supplies such as diapers, catheters and skin care cream
- You should schedule your first visit with your PCP **within 90 days** of enrollment



# Your PCP (cont.)

- Your PCP refers and submits authorizations for:
  - Specialty care
  - Special services
  - Medicines
- Call OneCare Customer Service to change your PCP or health network
- You can change your PCP or health network monthly





# Online Access at [www.caloptima.org](http://www.caloptima.org)



- CalOptima Health's website makes it easy for you to find what you need on any device
- It also has a secure member portal where you can:
  - Update your personal information
  - Request a new ID card
  - Print a copy of your ID card
  - Change your health network or PCP

# Prior Authorization

- Prior authorization is required for certain services from your health network or CalOptima Health OneCare Flex Plus
- You will get a response for routine referrals within 14 calendar days
- You will get a response for urgent referrals within 72 hours

# Medicines

- To find a contracted pharmacy, use your Provider and Pharmacy Directory, check the member portal or call Customer Service
- Show your CalOptima Health OneCare Flex Plus ID card at the pharmacy
- Copays for generic or brand-name prescriptions and refills:
  - \$0, \$1.60, or \$4.90 for a 30-day supply of generic prescriptions
  - \$0, \$4.80, or \$12.15 for a 30-day supply of brand-name prescriptions

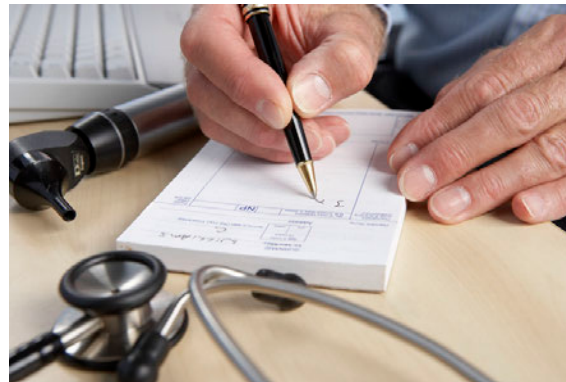


# Medicines (cont.)

- Once you or others on your behalf pay the out-of-pocket limit of \$2,000, you have reached the catastrophic coverage stage. In this stage, you pay \$0 for all your Medicare drugs until the end of the year.
- Prior authorization, step therapy, quantity limits
- In some cases, you can get a temporary supply during the first 90 days of your membership in CalOptima Health OneCare Flex Plus
- Excluded drugs:
  - Non-prescription or some over-the-counter (OTC) drugs
  - Drugs to promote fertility
  - Drugs for cosmetic purposes or to promote hair growth

# Medical Supplies

- A prescription is required from your doctor
- Must be filled at a CalOptima Health OneCare Flex Plus-contracted pharmacy or medical supplier
- Call OneCare Customer Service to coordinate with your doctor and the pharmacist or medical supplier to get your supplies
- Examples of medical supplies:
  - Diapers, bed pads, skin creams, shower chairs



# Behavioral Health Services

- Call Behavioral Health at **1-855-877-3885**  
(TTY **711**)
  - \$0 copay for Medicare-covered inpatient mental health care services
  - \$0 copay for Medicare-covered outpatient mental health care



# Emergency and Urgent Care Services

- If you have a life-threatening emergency, disabling illness or injury:
  - Call 911 or go to the nearest emergency room
  - Show your CalOptima Health OneCare Flex Plus ID card
- You may use urgent care for non-life-threatening emergencies if your doctor is not available
  - Use an urgent care center in your health network
- Call the Nurse Advice Line 24 hours a day, 7 days a week
  - Toll-free at **1-844-447-8441** (TTY **1-844-514-3774**)
  - No-cost interpreter services
  - If you need health advice, call your doctor or health network first

# Emergency and Urgent Care Services (cont.)

- If you are outside of Orange County and need medicine, use a chain pharmacy to fill prescriptions
- If you need emergency, urgent care or emergency transportation outside of the U.S., CalOptima Health OneCare Flex Plus will reimburse you up to \$100,000 per year



# Non-Emergency Medical Transportation

- Ambulance and wheelchair van services available for medical visits
- Available when travel by public or private transportation is not possible due to physical condition
- For this type of transportation, please call OneCare Customer Service at least 2 days before your visit



# Non-Medical Transportation

- Unlimited transportation to plan-approved locations for the following:
  - Medically necessary covered services
  - Picking up drug prescriptions
  - Picking up medical supplies and other medically necessary covered equipment
  - Trips to and from the gym as part of supplemental gym membership benefit (10-mile radius)
- Toll-free number: **1-866-612-1256 (TTY 711)**
  - Call to schedule 8 a.m. to 8 p.m., Monday through Friday
  - Schedule your transportation at least 2 business days before your trip

# Silver & Fit Healthy Aging and Exercise program

- The Silver & Fit® Healthy Aging and Exercise program benefit is offered at \$0 cost
- Choose any contracted fitness center and the Home Fitness program
  - National network of 14,000+ fitness centers, including 24 Hour Fitness, L.A. Fitness, Curves and Gold's Gym
  - The Home Fitness program offers 11 unique options, including a Fitbit Connected kit
  - You can receive up to 1 home kit per benefit year
- Ways to enroll:
  - Go to <[www.silverandfit.com](http://www.silverandfit.com)>
  - Call Silver&Fit toll-free at **1-877-427-4788** (TTY **711**) <Monday through Friday>, 5 a.m. to 6 p.m.
- Talk to your doctor before you start or change your exercise routine

# Over-the-Counter (OTC) Allowance and Groceries

- \$0 cost to you
- \$245 OneCare &more card spending limit per quarter to buy products that do not require a prescription such as cold and cough medicines and other products listed in the OTC mail-order catalog.
  - Some members with certain chronic health conditions may qualify to use the \$245 OneCare &more card to purchase groceries in addition to over-the-counter items. Not all members will qualify.
  - Groceries and OTC items may be purchased at plan-approved retail stores.

# Over-the-Counter (OTC) Allowance and Groceries (cont.)

- The benefit becomes valid on the first day of each quarter (January, April, July and October)
- Any remaining balance does not carry over to the next quarter.
- To place your order, call **1-855-263-6673** (TTY **711**)

# Supplemental Vision Benefit

- Vision services offered through Vision Service Plan (VSP)
- Use your Provider Directory or check online to find participating VSP optometrists
- Or call VSP toll-free at **1-800-877-7195** (TTY **711**), 24 hours a day, 7 days a week
- Identify yourself as a CalOptima Health OneCare Flex Plus member
- 1 routine eye exam every year
- Up to \$300 for contact lenses or eyeglasses (frames and lenses) every year

# Dental Services

- CalOptima Health OneCare Flex Plus pays for certain dental services, including but not limited to cleaning, fillings and dentures. What we do not cover may be available through Medi-Cal Dental.
- To get dental services, contact Liberty Dental at 1-888-704-9838



# Stay Connected With CalOptima Health **225678 (CALOPT)**

- CalOptima Health now sends official text messages using a short code: **225678 (CALOPT)**
- This number provides updates about your health care and benefits
- Why it matters:
  - Helps you identify messages from CalOptima Health
  - Makes sure you get information about your health care, such as screening reminders and updates about your coverage
- What you should do:
  - Save **225678 (CALOPT)** in your phone contacts
  - Look out for texts to stay informed about your health care
  - For question, call our Customer Service team at **1-877-412-2734 (TTY 711)**



# Translation and Interpreter Services

- Interpreter services are available at no cost to you
- Translated plan documents are available at no cost to you
- Phone and face-to-face interpreter services are available in all languages, including American Sign Language
  - To schedule face-to-face interpreter services, call your health network at least 1 week before your scheduled visit

# If You Receive a Bill...

- CalOptima Health OneCare Flex Plus members are NOT responsible for outstanding balances for covered services
- If you get a bill, call OneCare Customer Service for help:
  - Toll-free: **1-877-412-2734** (TTY **711**)  
24 hours a day, 7 days a week

# Filing a Complaint

Contact Us	
Call:	<b>1-877-412-2734 (TTY 711)</b> 24 hours a day, 7 days a week
Write to:	CalOptima Health Grievance and Appeals 505 City Parkway West Orange, CA 92868
Website:	<b><a href="http://www.caloptima.org/onecare">www.caloptima.org/onecare</a></b>

# Changing Your Contact Information

Immediately notify:

- 1. OC Social Services Agency:**  
**1-800-281-9799 (TTY 711)**  
8 a.m. to 5 p.m., Monday through Friday
- 2. Social Security Administration:**  
**1-800-772-1213 (TTY 1-800-325-0778)**  
8 a.m. to 7 p.m., Monday through Friday
- 3. OneCare Customer Service:**  
**1-877-412-2734 (TTY 711)**  
24 hours a day, 7 days a week



# CalOptima Health Fraud Hotline

- It's anonymous — you don't have to give your name to report fraudulent activity
- Call toll-free at **1-855-507-1805** (TTY **711**)  
24 hours a day, 7 days a week

# Questions?



# Disclaimer

- CalOptima Health OneCare (HMO D-SNP), a Medicare Medi-Cal Plan, is a Medicare Advantage organization with Medicare and Medi-Cal contracts. Enrollment in CalOptima Health OneCare depends on contract renewal. CalOptima Health OneCare complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. Call OneCare Customer Service toll-free at **1-877-412-2734 (TTY 711)**, 24 hours a day, 7 days a week. Visit us at [www.caloptima.org/OneCare](http://www.caloptima.org/OneCare).
- The CalOptima Health OneCare Flex Plus grocery benefit is part of a special supplemental program for the chronically ill. Not all members qualify.

# Disclaimer (cont.)

- To use the grocery benefit, CalOptima Health OneCare Flex Plus members must have one or more comorbid and medically complex chronic conditions that are life threatening or significantly limits the overall health or function of the enrollee. Eligible conditions include but are not limited to cardiovascular disorder, diabetes mellitus, chronic heart failure, chronic lung disease, or end-stage renal disease. Even if the member has a chronic condition, the member will not necessarily receive the grocery benefit. Receiving the grocery benefit depends on the member having a high risk of hospitalization or other adverse health outcomes and a need for intensive care coordination.



# Disclaimer (cont.)

- Coverage under CalOptima Health OneCare Flex Plus is qualifying health coverage called “minimum essential coverage.” It satisfies the Patient Protection and Affordable Care Act’s (ACA) individual shared responsibility requirement. Visit the Internal Revenue Services (IRS) website at [www.irs.gov/Affordable-Care-Act/Individuals-and-Families](http://www.irs.gov/Affordable-Care-Act/Individuals-and-Families) for more information on the individual shared responsibility requirement.



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