

Policy:	DD.2004
Title:	CalOptima Health Member
<b>D</b>	Orientation
Department:	Customer Service
Section:	Not Applicable
CEO Approval:	/s/ Michael Hunn 10/31/2024
Effective Date:	09/01/2004
Revised Date:	10/01/2024
Applicable to:	

 $\square$  PACE

☐ Administrative

### I. PURPOSE

This policy defines the process for scheduling, conducting, evaluating, and revising the CalOptima Health Member orientation.

### II. POLICY

- A. CalOptima Health shall provide Members with a Member orientation and educational program designed to ensure appropriate and timely provision of Covered Services and a higher level of satisfaction with the Member's health care delivery system.
- B. CalOptima Health shall conduct monthly Member orientations, and provide Members with an overview of the CalOptima Health program and information on:
  - 1. A Member's benefits, rights, and responsibilities, in accordance with CalOptima Health Policy DD.2001: Member Rights and Responsibilities;
  - 2. Material covered in the Member Handbook/Evidence of Coverage (EOC), pursuant to CalOptima Health Policy DD.2005: Member Informing Materials Requirements;
  - 3. Medi-Cal benefits not administered by CalOptima Health; and
  - 4. Other important information to assist Members to understand and access benefits.
- C. CalOptima Health shall conduct Member orientations in all Threshold Languages. Upon request, CalOptima Health shall make available Member orientations in non-Threshold Languages, including American Sign Language (ASL), through the use of interpretive services.
- D. If a Member who is unable to attend a Member orientation requests an orientation, CalOptima Health may conduct an individual Member orientation by telephone. The decision to conduct an orientation over the telephone shall be made on a case-by-case basis.
- E. CalOptima Health shall provide an anonymous method for Members in attendance to evaluate the Member orientation.

### III. PROCEDURE

- A. CalOptima Health shall include a Member Orientation R.S.V.P. Form in all Threshold Languages in the new Member welcome packet with a self-addressed postage-prepaid return envelope.
- B. CalOptima Health shall invite a Member to an orientation, as needed, for information or education on the CalOptima Health program that may come to the attention of the CalOptima Health Customer Service Department or other CalOptima Health staff.
- C. CalOptima Health shall conduct an orientation for Members who are enrolled in, or scheduled to be assigned to, a Health Network or CalOptima Health Community Network (CHCN) on a monthly basis, except in December of each year.
- D. CalOptima Health shall conduct a Member orientation for Members who are assigned to CalOptima Health Direct Administrative every other month.
- E. Upon a Member's request, CalOptima Health shall conduct, in person or by telephone, an individual Member orientation in a non-Threshold Language utilizing translators.
  - 1. A Member may request an ASL or non-Threshold Language interpreter by noting such request on the Member Orientation R.S.V.P. Form or by calling the CalOptima Health Customer Service Department or California Relay Service (CRS) line.
  - 2. If a Member does not speak English, and the appropriately bilingual CalOptima Health staff is not available, CalOptima Health staff may utilize a contracted vendor for interpreter services to conduct an individual Member orientation in a non-Threshold Language.
- F. A Member Liaison Specialist, Customer Service Lead, or Customer Service Supervisor, who is trained in providing the Member orientation shall conduct such Member orientation.
- G. CalOptima Health shall encourage a Member's caregivers, assistants, parents, and family to attend the Member orientation with, or in some cases instead of, the Member.
- H. Providers, staff, associated agencies, or community-based organizations may attend a Member orientation.
- I. CalOptima Health shall include the Member orientation schedule on CalOptima Health's Website, www.caloptima.org.

### IV. ATTACHMENT(S)

A. Member Orientation R.S.V.P. Form

### V. REFERENCE(S)

- A. CalOptima Health Contract with the Department of Health Care Services (DHCS) for Medi-Cal
- B. CalOptima Health Network Service Agreement
- C. CalOptima Health Policy DD.2001: Member Rights and Responsibilities
- D. CalOptima Health Policy DD.2005: Member Informing Materials Requirements
- E. Department of Health Care Services (DHCS) All Plan Letter (APL) 21-004: Standards for Determining Threshold Languages, Nondiscrimination Requirements, and Language Assistance Services (Supersedes APL 17-011 and Policy Letters 99-003 and 99-004)(Revised 05/24/2023)
- F. Member Handbook/Evidence of Coverage (EOC)

# VI. REGULATORY AGENCY APPROVAL(S)

Date	Regulatory Agency	Response
05/26/2016	Department of Health Care Services (DHCS)	Approved as Submitted

## VII. BOARD ACTION(S)

None to Date

### VIII. REVISION HISTORY

Action	Date	Policy	Policy Title	Program(s)
Effective	09/01/2004	DD.2004	CalOptima Member Orientation	Medi-Cal
Revised	01/01/2011	DD.2004	CalOptima Member Orientation	Medi-Cal
Revised	01/01/2013	DD.2004	CalOptima Member Orientation	Medi-Cal
Revised	03/01/2016	DD.2004	CalOptima Member Orientation	Medi-Cal
Revised	04/01/2017	DD.2004	CalOptima Member Orientation	Medi-Cal
Revised	09/01/2018	DD.2004	CalOptima Member Orientation	Medi-Cal
Revised	10/01/2019	DD.2004	CalOptima Member Orientation	Medi-Cal
Revised	02/01/2022	DD.2004	CalOptima Member Orientation	Medi-Cal
Revised	10/01/2023	DD.2004	CalOptima Health Member Orientation	Medi-Cal
Revised	10/01/2024	DD.2004	CalOptima Health Member Orientation	Medi-Cal

## IX. GLOSSARY

Term	Definition
CalOptima Health	A managed care network operated by CalOptima Health that contracts
Community Network	directly with physicians and hospitals and requires a Primary Care
(CHCN)	Provider (PCP) to manage the care of the Member.
CalOptima Health Direct	The managed Fee-For-Service health care program operated by
<ul> <li>Administrative</li> </ul>	CalOptima Health that provides services to Members as described in
(COHD-A)	CalOptima Health Policy DD.2006: Enrollment in/Eligibility with
	CalOptima Health Direct.

### Covered Services

Those health care services, set forth in W&I sections 14000 et seq. and 14131 et seq., 22 CCR section 51301 et seq., 17 CCR section 6800 et seq., the Medi-Cal Provider Manual, the California Medicaid State Plan, the California Section 1115 Medicaid Demonstration Project, the contract with DHCS for Medi-Cal, and DHCS APLs that are made the responsibility of CalOptima Health pursuant to the California Section 1915(b) Medicaid Waiver authorizing the Medi-Cal managed care program or other federally approved managed care authorities maintained by DHCS.

#### Covered Services do not include:

- Home and Community-Based Services (HCBS) program as specified in the DHCS contract for Medi-Cal Exhibit A. Attachment III. Subsections 4.3.15 (Services for Persons with Developmental Disabilities), 4.3.20 (Home and Community-Based Services Programs) regarding waiver programs, 4.3.21 (In-Home Supportive Services), and Department of Developmental Services (DDS) Administered Medicaid Home and Community-Based Services Waiver. HCBS programs do not include services that are available as an Early and Periodic Screening, Diagnosis and Treatment (EPSDT) service, as described in 22 CCR sections 51184, 51340 and 51340.1. EPSDT services are covered under the DHCS contract for Medi-Cal. as specified in Exhibit A, Attachment III, Subsection 4.3.11 (Targeted Case Management Services), Subsection F4 regarding services for Members less than twenty-one (21) years of age. CalOptima Health is financially responsible for the payment of all **EPSDT** services:
- 2. California Children's Services (CCS) as specified in Exhibit A, Attachment III, Subsection 4.3.14 (California Children's Services), except for Contractors providing Whole Child Model (WCM) services;
- 3. Specialty Mental Health Services as specified in Exhibit A, Attachment III, Subsection 4.3.12 (Mental Health Services);
- 4. Alcohol and SUD treatment services, and outpatient heroin and other opioid detoxification, except for medications for addiction treatment as specified in Exhibit A, Attachment III, Subsection 4.3.13 (Alcohol and Substance Use Disorder Treatment Services);
- 5. Fabrication of optical lenses except as specified in Exhibit A, Attachment III, Subsection 5.3.7 (Services for All Members);
- 6. Direct Observed Therapy for Treatment of Tuberculosis (TB) as specified in Exhibit A, Attachment III, Subsection 4.3.18 (Direct Observed Therapy for Treatment of Tuberculosis);
- Dental services as specified in W&I sections 14131.10, 14132(h), 14132.22, 14132.23, and 14132.88, and EPSDT dental services as described in 22 CCR section 51340.1(b). However, CalOptima Health is responsible for all Covered Services as specified in Exhibit A, Attachment III, Subsection 4.3.17 (Dental) regarding dental services;
- 8. Prayer or spiritual healing as specified in 22 CCR section 51312;

Term	Definition	
	<ol> <li>Educationally Necessary Behavioral Health Services that are covered by a Local Education Agency (LEA) and provided pursuant to a Member's Individualized Education Plan (IEP) as set forth in Education Code section 56340 et seq., Individualized Family Service Plan (IFSP) as set forth in California Government Code (GC) section 95020, or Individualized Health and Support Plan (IHSP). However, CalOptima Health is responsible for all Medically Necessary Behavioral Health Services as specified in Exhibit A, Attachment III Subsection 4.3.16 (School-Based Services);</li> <li>Laboratory services provided under the State serum alpha-feto-protein-testing program administered by the Genetic Disease Branch of California Department of Public Health (CDPH);</li> <li>Pediatric Day Health Care, except for Contractors providing Whole Child Model (WCM) services;</li> <li>State Supported Services;</li> <li>Targeted Case Management (TCM) services as set forth in 42 USC section 1396n(g), W&amp;I sections 14132.48 and 14021.3, 22 CCR sections 51185 and 51351, and as described in Exhibit A, Attachment III, Subsection 4.3.11 (Targeted Case Management Services). However, if Members less than twenty-one (21) years of age are not eligible for or accepted by a Regional Center (RC) or a local government health program for TCM services, CalOptima Health must ensure access to comparable services under the EPSDT benefit in accordance with DHCS APL 23-005;</li> <li>Childhood lead poisoning case management provided by county health departments;</li> <li>Non-medical services provided by Regional Centers (RC) to individuals with Developmental Disabilities, including but not limited to respite, out-of-home placement, and supportive living;</li> <li>End of life services as stated in Health and Safety Code (H&amp;S) section 443 et seq., and DHCS APL 16-006; and</li> <li>Prescribed and covered outpatient drugs, medical supplies, and enteral nutritional products when appropriately billed by a pharmacy on a pharmacy c</li></ol>	
Health Network	A Physician Hospital Consortium (PHC), physician group under a shared risk contract, or health care service plan, such as a Health Maintenance Organization (HMO) that contracts with CalOptima Health to provide Covered Services to Members assigned to that Health Network.	
Member	A Medi-Cal eligible beneficiary as determined by the County of Orange Social Services Agency, the California Department of Health Care Services (DHCS) Medi-Cal, or the United States Social Security Administration, who is enrolled in the CalOptima Health program.	
Member Liaison	A CalOptima Health customer service representative with specialized training in assisting seniors and persons with disabilities and coordinating Members' access to services within CalOptima Health, Health Networks and community resources agencies.	
Provider	Any individual or entity that is engaged in the delivery of services, or ordering or referring for those services, and is licensed or certified to do so.	

Term	Definition
Threshold Language	The non-English threshold and concentration standard languages in which
	Contractor is required to provide written translations of Member
	Information, as determined by DHCS.