

Compassionate Care,
Accessible to All,
for a Healthy Community.



**Gold Coast
Health Plan**SM
A Public Entity

2020 MEMBER HANDBOOK

What you need to know
about your benefits

Other languages and formats

Other languages

You can get this Member Handbook and other plan materials for free in other languages. Call GCHP's Member Services Department at 1-888-301-1228 Monday through Friday from 8 a.m. to 5 p.m., (excluding holidays). If you use a TTY, call 1-888-310-7347. The call is toll free. Read this Member Handbook to learn more about health care language assistance services, such as interpreter and translation services.

Other formats

You can get this information for free in other auxiliary formats, such as braille, large print (18-point font) and audio. Call 1-888-301-1228; if you use a TTY, call 1-888-310-7347. The call is toll free.

Interpreter services

You do not have to use a family member or friend as an interpreter. For free interpreter, linguistic and cultural services and help (available 24 hours a day, seven days a week), or to get this handbook in a different language, call 1-888-301-1228. If you use a TTY, call 1-888-310-7347. The call is toll free.

العربية (Arabic)

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-888-301-1228 (رقم هاتف الصم والبكم: 1-888-310-7347).

Հայերեն (Armenian)

ՈՒՇԱԴՐՈՒԹՅՈՒՆ` Եթե խոսում եք հայերեն, ապա ձեզ անվճար կարող են տրամադրվել լեզվական աջակցության ծառայություններ: Չանգահարեք 1-888-301-1228 (TTY (հեռատիպ)՝ 1-888-310-7347).



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

繁體中文(Chinese)

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-888-301-1228 (TTY: 1-888-310-7347)。

ਪੰਜਾਬੀ (Punjabi)

ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। 1-888-301-1228 (TTY: 1-888-310-7347) 'ਤੇ ਕਾਲ ਕਰੋ।

हिंदी (Hindi)

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-888-301-1228 (TTY: 1-888-310-7347) पर कॉल करें।

Hmoob (Hmong)

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1-888-301-1228 (TTY: 1-888-310-7347).

日本語 (Japanese)

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-888-301-1228 (TTY: 1-888-310-7347) まで、お電話にてご連絡ください。

한국어 (Korean)

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-888-301-1228 (TTY: 1-888-310-7347) 번으로 전화해 주십시오.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

ໂປດລາບ (Lao)

ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທ 1-888-301-1228 (TTY: 1-888-310-7347).

ខ្មែរ (Cambodian)

ប្រយ័ត្ន: បរិស្ថានជាអ្នកនិយាយ ភាសាខ្មែរ, បសវនករជំនួយខ្លួនភាសា បោកមិនគិតថ្លៃ គឺអាចមានសំរាប់បរិស្ថាន។ ចូរ ទូរស័ព្ទ 1-888-301-1228 (TTY: 1-888-310-7347)។

فارسی (Farsi)

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با 1-888-301-1228 (TTY: 1-888-310-7347) تماس بگیرید.

Русский (Russian)

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-888-301-1228 (телетайп: 1-888-310-7347).

Español (Spanish)

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-301-1228 (TTY: 1-888-310-7347).

Tagalog (Tagalog – Filipino)

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-888-301-1228 (TTY: 1-888-310-7347).



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

ภาษาไทย (Thai)

เรียน: หากคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 1-888-301-1228 (TTY: 1-888-310-7347).

Tiếng Việt (Vietnamese)

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-888-301-1228 (TTY: 1-888-310-7347).



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Notice of non-discrimination

Discrimination is against the law. Gold Coast Health Plan (GCHP) follows state and federal civil rights laws. GCHP 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.

GCHP 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 and other formats).
- Free language services to people whose first language is not English, such as:
 - » Qualified interpreters.
 - » Information written in other languages.

If you need these services, call GCHP at 1-888-301-1228. If you use a TTY, call 1-888-310-7347. The Plan is open Monday through Friday from 8 a.m. to 5 p.m. (excluding holidays).

If you believe that GCHP 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 GCHP's Grievance and Appeals Department. You can file a grievance in person, in writing, by phone or by email:

Gold Coast Health Plan

Attn: Grievance and Appeals

P. O. Box 9176

Oxnard, CA 93031

1-888-301-1228

If you use a TTY, call 1-888-310-7347.

If you need help filing a grievance, GCHP's Grievance and Appeals Department can help you.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

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

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
1-916-440-7370 (TTY 711 California State Relay)
Email: CivilRights@dhcs.ca.gov

You can get complaint forms at http://www.dhcs.ca.gov/Pages/Language_Access.aspx.

If you believe you have been discriminated against on the bases 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 in writing, by phone or online:

U.S. Department of Health and Human Services

200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019 (TTY 1-800-537-7697)
Complaint Portal: https://ocrportal.hhs.gov/ocr/cp/wizard_cp.jsf

You can get complaint forms at <http://www.hhs.gov/ocr/office/file/index.html>.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Welcome to Gold Coast Health Plan!

Welcome to Gold Coast Health Plan (GCHP). Gold Coast Health Plan is the health plan for people who have Medi-Cal in Ventura County. GCHP works with the state of California to help you get the health care you need.

Member Handbook

This Member Handbook tells you about your coverage under GCHP. Please read it carefully and completely. It will help you understand and use your benefits and services. It also explains your rights and responsibilities as a member of GCHP. If you have special health needs, be sure to read all sections that apply to you.

This Member Handbook is also called the Combined Evidence of Coverage (EOC) and Disclosure Form. It is a summary of GCHP rules and policies and is based on the contract between GCHP and the Department of Health Care Services (DHCS). If you would like to learn exact terms and conditions of coverage, you may request a copy of the complete contract from GCHP's Member Services Department.

Call Member Services at 1-888-301-1228; if you use a TTY, call 1-888-310-7347 to ask for a copy of the contract between GCHP and DHCS. You may also ask for another copy of the Member Handbook at no cost to you or visit the GCHP website at www.goldcoasthealthplan.org to view the Member Handbook. You may also request, at no cost, a copy of the GCHP non-proprietary clinical and administrative policies and procedures, or how to access this information on the GCHP website.

Contact us

GCHP is here to help. If you have questions, call 1-888-301-1228; if you use a TTY, call 1-888-310-7347. GCHP is here Monday through Friday from 8 a.m. to 5 p.m. (excluding holidays). The call is toll free.

You can also visit GCHP online at any time at www.goldcoasthealthplan.org.

Thank you,
Gold Coast Health Plan
711 E. Daily Drive, Suite 106
Camarillo, CA 93010



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

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Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

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Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

1. Getting started as a member

How to get help

GCHP wants you to be happy with your health care. If you have any questions or concerns about your care, the Plan wants to hear from you!

Member services

GCHP Member Services Department is here to help you. GCHP can:

- Answer questions about your health plan and covered services.
- Help you choose or change a primary care provider (PCP).
- Tell you where to get the care you need.
- Offer interpreter services if you do not speak English.
- Offer information in other languages and formats.
- Help you obtain a new ID card.

If you need help, call Member Services at 1-888-301-1228; if you use a TTY, call 1-888-310-7347. GCHP is available Monday through Friday from 8 a.m. to 5 p.m. (except holidays). The call is toll free.

You can also visit GCHP online at any time at www.goldcoasthealthplan.org.

Who can become a member

You qualify for GCHP because you qualify for Medi-Cal and live in Ventura County. You can ask questions about qualifying for Medi-Cal at your local county Human Services Agency (HSA) office.

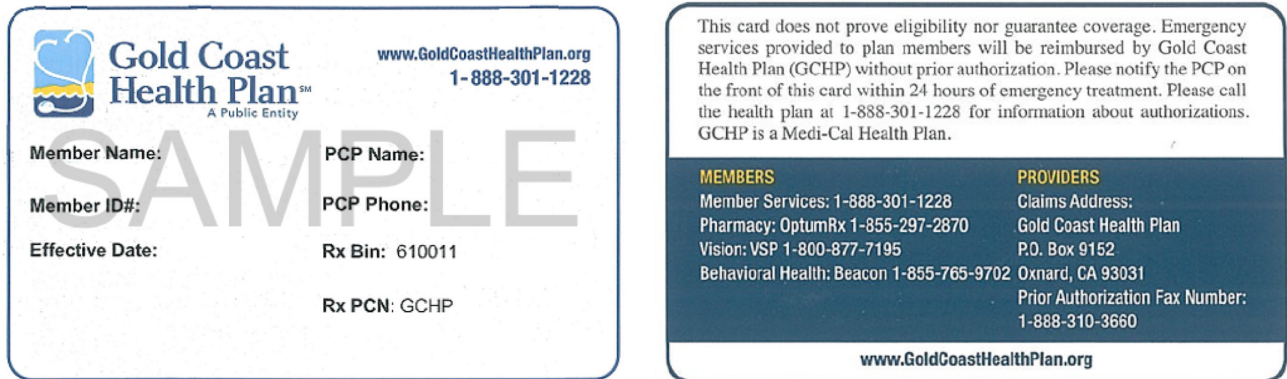
Find your local office at www.dhcs.ca.gov/services/medi-cal/Pages/CountyOffices.aspx. The Ventura County Human Services Agency (HSA) can be reached at 1-888-472-4463. If you use a TTY, call 1-800-735-2922. You may also qualify for Medi-Cal through Social Security. If you receive Supplemental Security Income (SSI), call the local Social Security Administration (SSA) office at 1-800-772-1213. If you use a TTY, call 1-800-325-0778.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Identification (ID) cards

As a member of GCHP, you will get a GCHP ID card. You must show your GCHP ID card and your Medi-Cal Benefits Identification Card (BIC) when you get any health care services or prescriptions. You should carry all health cards with you at all times. Here is a sample GCHP ID card to show you what yours will look like:



If you do not get your GCHP ID card within a few weeks of enrolling, or if your card is damaged, lost or stolen, call member services right away. GCHP will send you a new card for free. Call 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

Reporting a new address and/or telephone number

- If you receive Supplemental Security Income (SSI), call the local Social Security Administration (SSA) office at 1-800-772-1213. If you use a TTY, call 1-800-325-0778.
- All other members should call the local Human Services Agency (HSA) office at 1-888-472-4463. If you use a TTY, call 1-800-735-2922.

Ways to get involved as a member

GCHP wants to hear from you. Each quarter, GCHP has meetings to talk about what is working well and how GCHP can improve. Members are invited to attend. Come to a meeting!

Community Advisory Committee (CAC)

GCHP has a group called the Community Advisory Committee (CAC). This group is made up of agencies, groups and Medi-Cal beneficiaries who represent the Plan's members. Joining this group is voluntary. The group talks about how to improve GCHP's policies and is responsible for:

- Reviewing policies and programs.
- Making recommendations to GCHP.
- Providing GCHP with information about important issues affecting the Plan's members.

If you would like to be a part of this group, call Member Services at 1-888-301-1228; if you use a TTY, call 1-888-310-7347.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

2. About your health plan

Health plan overview

GCHP is a health plan for people who have Medi-Cal in Ventura County. GCHP works with the state of California to help you get the health care you need.

You may talk with one of the GCHP Member Services representatives to learn more about the health plan and how to make it work for you. Call Member Services at 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

When your coverage starts and ends

During your first month as a GCHP member, you may receive a welcome letter from GCHP along with a list of GCHP providers. This list is called a Provider Directory. If you receive a Provider Directory, you must choose a clinic or doctor from the directory as your PCP. Next, you should notify GCHP Member Services which doctor or clinic that you chose. You can notify GCHP of your choice by calling Member Services at 1-888-301-1228; if you use a TTY, call 1-888-310-7347. You can also return your completed PCP Selection Form to GCHP. Members who do not choose a PCP (doctor or clinic) after 30 days, will be assigned to one by GCHP.

You will be assigned to the PCP on the first day of the second month that you are a GCHP member. Until you are assigned to a PCP, you may receive medical care from any GCHP in-area, in-network doctor who is willing to bill GCHP for medically appropriate services. Prior authorization requirements apply even if you are not assigned to a PCP.

There are some GCHP members who are not assigned to a PCP. They are called Administrative members. The following are considered Administrative members:

- Share of Cost (SOC): A member who has Medi-Cal with an SOC requirement.
- Long-Term Care (LTC): A member who is residing in a skilled- or intermediate-care nursing facility and has been assigned an LTC aid code.
- Out of Area: A member who lives outside of GCHP's service area but whose Medi-Cal case remains in Ventura County.
- Other Health Coverage: A member who has other health insurance that is primary to his / her Medi-Cal coverage. This includes members with both Medi-Cal and Medicare as well as those with both Medi-Cal and commercial insurance. Medi-Cal is the payer of last resort; therefore, GCHP members with other health coverage must access care through their primary insurance.
- Hospice: If the Medi-Cal enrollment file indicates a Hospice Restricted Services code.
- BCCTP: A member who has been assigned a Breast and Cervical Cancer Treatment Program aid code.

GCHP ID cards for Administrative members will indicate "Administrative" as the PCP. If you are an Administrative member, you can get care from any willing GCHP doctor in Ventura County. If you want to see a doctor outside of the county, you will need to first get approval from GCHP.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Sometimes GCHP can no longer serve you. GCHP must end your coverage if:

- You move out of Ventura County or are in prison.
- You no longer have Medi-Cal.
- You qualify for certain waiver programs.

Indian Health Services

If you are an American Indian, you have the right to get health care services at Indian health service facilities. You may also stay with or disenroll from GCHP while getting health care services from these locations. American Indians have a right to not enroll in a Medi-Cal managed care plan or may leave their health plans and return to regular (fee-for-service) Medi-Cal at any time and for any reason.

To find out more, please call Indian Health Services at 1-916-930-3927 or visit the Indian Health Services website at www.ihs.gov. You can also call GCHP's Member Services Department for more information. Call 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

How your plan works

GCHP is a health plan contracted with DHCS. GCHP is a managed care health plan. Managed care plans are a cost-effective use of health care resources that improve health care access and assure quality of care. GCHP works with doctors, hospitals, pharmacies and other health care providers in the GCHP service area to give health care to you, the member.

GCHP's Member Services Department will tell you how the Plan works, how to get the care you need, how to schedule provider appointments, and how to find out if you qualify for transportation services.

GCHP offers monthly Member Orientation / Benefits Information meetings. The meetings are held in both English and Spanish. At these meetings, you get information about GCHP benefits and programs. You can also have your questions answered and get help with health care services. For times and locations of the meetings, call Member Services at 1-888-301-1228. If you use TTY, call 1-888-310-7347. You can also find information on the Plan's website at www.GoldCoastHealthPlan.org.

Changing health plans

Members assigned to GCHP do not have an option to change their health plan in Ventura County. Medi-Cal members in Ventura County are served by GCHP only.

GCHP is the health plan for Medi-Cal beneficiaries in Ventura County. You will stop being a GCHP member only if you lose your Medi-Cal eligibility or if you move out of the GCHP service area. GCHP coverage may also end if your local county health and human services office changes how you qualify for Medi-Cal. Find your local office at www.dhcs.ca.gov/services/medi-cal/Pages/CountyOffices.aspx.

College students who move to a new county

If you move to a new county in California to attend college, GCHP will cover emergency services in your new county. Emergency services are available to all Medi-Cal enrollees statewide regardless of county of residence.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

If you are enrolled in Medi-Cal and will attend college in a different county, you may not need to re-apply for Medi-Cal in that county. Please contact the Human Services Agency Medi-Cal Department at 1-888-472-4463. If you use a TTY, call 1-800-735-2922.

When you temporarily move away from home to attend college there are two options available to you. You may:

- Notify your local county social services office that you are temporarily moving to attend college and provide your address in the new county. The county will update the case records with your new address and county code in the state's database. Since GCHP does not operate outside of Ventura County, you will have to change your plan to the available options in the new county by transferring your Medi-Cal to that county. For additional questions and in order to prevent a delay in the new health plan enrollment, contact HSA at 1-888-472-4463. If you use a TTY, call 1-800-735-2922.

OR

- Choose not to change your health plan when you temporarily move to attend college in a different county. You will only be able to access emergency room and urgent care center services in the new county. For routine or preventive health care, you would need to use GCHP's regular network of providers in Ventura County.

Continuity of care

If you now go to providers who are not in the GCHP network, you may get continuity of care and be able to go to them for up to 12 months in certain cases. If your providers do not join the GCHP network by the end of 12 months, you will need to switch to providers in the GCHP network.

Members with the following issues or conditions are eligible for continuity of care:

- Acute condition (cancer) for as long as the condition lasts.
- Serious Chronic Condition, such as diabetes or heart disease, for no more than 12 months or until treatment is completed or the member can be safely transferred.
- Pregnancy - during pregnancy and immediately after the delivery.
- Terminal illness for as long as the person lives.
- Care of a child under the age of 3 for up to 12 months.
- An already scheduled surgery or other procedure - the surgery or procedure must be scheduled to happen within 180 days of the doctor or hospital leaving the health plan.

GCHP provides continuity of care services if:

- The member was seen by this provider in the last 12 months.
- The provider agrees to accept the Plan's rates.

GCHP does not provide continuity of care services if:

- The member has not seen the provider in the last 12 months.
- The provider does not agree to accept the Plan's rates.
- There are quality concerns about the provider (sanctions, etc.).



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

In accordance with state mandates, it is GCHP's intent to ensure that all members requiring continuity of care services receive their services through a Medi-Cal enrolled provider. The Plan recognizes that this is not always possible for many reasons and will strive to work with any such non-Medi-Cal provider on a case by case basis subject to the terms outlined above.

To learn more about continuity of care and eligibility qualifications, call Member Services at 1-888-301-1228; if you use TTY, call 1-888-310-7347.

Providers who leave GCHP

If your provider stops working with GCHP, you may be able to keep getting services from that provider. This is another form of continuity of care. GCHP provides continuity of care services for:

- Acute condition (pneumonia) for as long as the condition lasts.
- Serious Chronic Condition, such as diabetes or heart disease, for no more than 12 months or until treatment is completed or the member can be safely transferred.
- Pregnancy - during pregnancy and immediately after the delivery.
- Terminal illness for as long as the person lives.
- Care of a child under the age of 3 for up to 12 months.
- An already scheduled surgery or other procedure - the surgery or procedure must be scheduled to happen within 180 days of the doctor or hospital leaving the health plan.

GCHP provides continuity of care services if:

- The member was seen by this provider in the last 12 months.
- The provider agrees to accept the Plan's rates.

GCHP does not provide continuity of care services if:

- The member has not seen the provider in the last 12 months.
- The provider does not agree to accept the Plan's rates.
- There are quality concerns about the provider (sanctions, etc.).

In accordance with state mandates, it is GCHP's intent to ensure that all members requiring continuity of care services receive their services through a Medi-Cal enrolled provider. The Plan recognizes that this is not always possible for many reasons and will strive to work with any such non-Medi-Cal provider on a case by case basis subject to the terms outlined above.

To learn more about continuity of care and eligibility qualifications, call Member Services at 1-888-301-1228; if you use TTY, call 1-888-310-7347.

Costs

Member costs

GCHP serves people who qualify for Medi-Cal. GCHP members do not have to pay for covered services. You will not have premiums or deductibles. For a list of covered services, go to "Benefits and services."



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

For members with a share of cost

You may have to pay a share of cost each month if assigned by Medi-Cal. The amount of your share of cost depends on your income and resources. Each month you will pay your own medical bills until the amount that you have paid equals your share of cost. After that, your care will be covered by GCHP for that month. You will not be covered by GCHP until you have paid your entire share of cost for the month. After you meet your share of cost for the month, you can go to any GCHP doctor. If you are a member with a share of cost, you do not need to choose a PCP.

How a provider gets paid

GCHP pays providers in these ways:

- Capitation payments
 - » GCHP pays some providers a set amount of money every month for each GCHP member. This is called a capitation payment. GCHP and providers work together to decide on the payment amount.
- Fee-for-service payments
 - » Some providers give care to GCHP members and then send GCHP a bill for the services they provided. This is called a fee-for-service payment. GCHP and providers work together to decide how much each service costs.

To learn more about how GCHP pays providers, call Member Services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347.

Asking GCHP to pay a bill

If you get a bill for a covered service, call Member Services right away at 1-888-301-1228. If you use a TTY, call 1-888-310-7347.

If you pay for a service that you think GCHP should cover, you can file a claim. Use a claim form and tell GCHP in writing why you had to pay. Call 1-888-301-1228. If you use a TTY, call 1-888-310-7347 to ask for a claim form. GCHP will review your claim to decide if you can get money back.

Other Health Coverage Premium Payment (OHCPP) Program

If you have a serious medical condition and you are paying for other health insurance, GCHP may be able to pay your other insurance premium for you. For more information, contact GCHP Member Services at 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

Newborn and Infant Enrollment

Infants born to mothers who had Medi-Cal coverage at the time of delivery and continue to live in Ventura County may be eligible for GCHP Medi-Cal coverage.

If you recently had a baby and have questions about how to enroll your baby in Medi-Cal, call HSA at 1-888-472-4463. If you use a TTY, call 1-800-735-2922.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

3. How to get care

Getting health care services

PLEASE READ THE FOLLOWING INFORMATION SO YOU WILL KNOW FROM WHOM OR WHAT GROUP OF PROVIDERS HEALTH CARE MAY BE OBTAINED.

You can begin to get health care services on your effective date of coverage. Always carry your GCHP ID card and Medi-Cal BIC card with you. Never let anyone else use your GCHP ID card or BIC card.

New members must choose a primary care provider (PCP) in the GCHP network. The GCHP network is a group of doctors, hospitals and other providers who work with the Plan. You must choose a PCP within 30 days from the time you become a member of GCHP. If you do not choose a PCP, GCHP will choose one for you.

You may choose the same PCP or different PCPs for all family members in GCHP.

If you have a doctor you want to keep, or you want to find a new PCP, you can look in the Provider Directory. It has a list of all PCPs in the GCHP network. The Provider Directory has other information to help you choose a PCP. If you need a Provider Directory, call 1-888-301-1228; if you use a TTY, call 1-888-310-7347. You can also find the Provider Directory on the GCHP website at www.goldcoasthealthplan.org.

If you cannot get the care you need from a participating provider in the GCHP network, your PCP must ask GCHP for approval to send you to an out-of-network provider.

Read the rest of this chapter to learn more about PCPs, the Provider Directory and the provider network.

Initial health assessment (IHA)

GCHP recommends that, as a new member, you visit your new PCP within 120 days for an initial health assessment (IHA). The purpose of the IHA is to help your PCP learn your health care history and needs. Your PCP may ask you some questions about your health history or may ask you to complete a questionnaire. Your PCP will also tell you about health education counseling and classes that may help you.

When you call to schedule your IHA appointment, tell the person who answers the phone that you are a member of GCHP. Give your GCHP ID number.

Take your BIC card and your GCHP ID card to your appointment. It is a good idea to take a list of your medications and questions with you to your visit. Be ready to talk with your PCP about your health care needs and concerns.

Be sure to call your PCP's office if you are going to be late or cannot go to your appointment.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Routine care

Routine care is regular health care. It includes preventive care, also called wellness or well care. It helps you stay healthy and helps keep you from getting sick. Preventive care includes regular checkups and health education and counseling. In addition to preventive care, routine care also includes care when you are sick. GCHP covers routine care from your PCP.

Your PCP will:

- Give you all your routine care, including regular checkups, shots, treatment, prescriptions and medical advice.
- Keep your health records.
- Refer (send) you to specialists if needed.
- Order X-rays, mammograms or lab work if you need them.

When you need routine care, you will call your PCP for an appointment. Be sure to call your PCP before you get medical care, unless it is an emergency. For an emergency, call **911** or go to the nearest emergency room.

To learn more about health care and services your plan covers, and what it does not cover, read Chapter 4 of this handbook.

Urgent care

Urgent care is **not** for an emergency or life-threatening condition. It is for services you need to prevent serious damage to your health from a sudden illness, injury or complication of a condition you already have. Urgent care appointments require care within 48 hours. If you are outside GCHP's service area, urgent care services may be covered. Urgent care needs could be a cold, sore throat, fever, ear pain, sprained muscle or maternity services.

For urgent care, call your PCP. If you cannot reach your PCP, call Member Services at 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

If you need urgent care out of the area, go to the nearest urgent care facility. You do not need pre-approval (prior authorization). If you need mental health urgent care, call Ventura County Behavioral Health at 1-866-998-2243, which is available 24 hours a day, seven days a week. To find all counties' toll-free telephone numbers online, visit <http://www.dhcs.ca.gov/individuals/Pages/MHPContaktList.aspx>.

Emergency care

For emergency care, call **911** or go to the nearest emergency room (ER). For emergency care, you do not need pre-approval (prior authorization) from GCHP.

Emergency care is for life-threatening medical conditions. This care is for an illness or injury that a reasonable layperson (not a health care professional) with average knowledge of health and medicine could expect that, if you don't get care right away, your health (or your unborn baby's health) could be in danger, or a body function, body organ or body part could be seriously harmed. Examples include:

- Active labor
- Broken bone



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

- Severe pain, especially in the chest
- Severe burn
- Drug overdose
- Fainting
- Severe bleeding
- Psychiatric emergency condition

Do not go to the ER for routine care. You should get routine care from your PCP, who knows you best. If you are not sure if your medical condition is an emergency, call your PCP.

If you need emergency care away from home, go to the nearest ER, even if it is not in GCHP's network. If you go to an ER, ask them to call GCHP. Either you or the hospital to which you were admitted should call GCHP within 24 hours after you get emergency care. If you are traveling outside the U.S., other than to Canada or Mexico, and need emergency care, GCHP will **not** cover your care.

If you need emergency transportation, call **911**. You do not need to ask your PCP or GCHP first before you go to the ER.

If you need care in an out-of-network hospital after your emergency (post-stabilization care), the hospital will call GCHP.

Remember: Do not call **911** unless it is an emergency. Get emergency care only for an emergency, not for routine care or a minor illness like a cold or sore throat. If it is an emergency, call **911** or go to the nearest emergency room.

Sensitive care

Minor consent services

If you are under 18 years old, you can go to a doctor without consent from your parents or guardian for these types of care:

- Outpatient mental health (only minors 12 years or older) for:
 - » Sexual or physical abuse.
 - » When you may hurt yourself or others.
- Pregnancy.
- Family planning / birth control (except sterilization).
- Sexual assault.
- HIV/AIDS prevention / testing / treatment (only minors 12 years of age or older).
- Sexually transmitted infections prevention / testing / treatment (only minors 12 years of age or older).
- Drug and alcohol abuse treatment (only minors 12 years of age or older).

The doctor or clinic does not have to be part of the GCHP network and you do not need a referral from your PCP to get these services. For help finding a doctor or clinic that provides these services, or for help getting to these services, you can call GCHP Member Services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Adult sensitive services

As an adult, you may not want to go to your PCP for certain sensitive or private care. If so, you may choose any doctor or clinic for these types of care:

- Family planning
- HIV/AIDS testing
- Sexually transmitted infections (STIs)

The doctor or clinic does not have to be part of the GCHP network. Your PCP does not have to refer you for these types of services. For help finding a doctor or clinic giving these services, you can call 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

Advance directives

An advance health directive is a legal form. On it, you can list what health care you want in case you cannot talk or make decisions later on. You can also list what care you do **not** want. You can name someone, such as a spouse, to make decisions for your health care if you cannot.

You can get an advance directive form at drugstores, hospitals, law offices and doctors' offices. You may have to pay for the form. You can also find and download a free form online. You can ask your family, PCP or someone you trust to help you fill out the form.

You have the right to have your advance directive placed in your medical records. You have the right to change or cancel your advance directive at any time.

You have the right to learn about changes to advance directive laws. GCHP will tell you about changes to the state law no later than 90 days after the change.

Where to get care

You will get most of your care from your PCP. Your PCP will give you all of your routine preventive (wellness) care. You will also go to your PCP for care when you are sick. Be sure to call your PCP before you get non-emergency medical care. Your PCP will refer (send) you to specialists if you need them.

If you need urgent care, call your PCP. Urgent care is care you need within 48 hours but is not an emergency. It includes care for such things as colds, sore throats, fever, ear pain or sprained muscles.

For emergencies, call **911** or go to the nearest emergency room.

Moral objection

Some providers have a moral objection to some services. This means they have a right to not offer some covered services if they morally disagree. If your provider has a moral objection, he or she will help you find another provider for the needed services. GCHP can also work with you to find a provider.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Some hospitals and other providers do not offer one or more of the services listed below. These services you or your family member might need may be covered under your plan contract:

- Family planning and contraceptive services, including emergency contraception.
- Sterilization, including tubal ligation at the time of labor and delivery.
- Infertility treatments.
- Abortion.

Call the new doctor, medical group, independent practice association or clinic that you want. Or call GCHP at 1-888-301-1228; if you use a TTY, call 1-888-310-7347, to make sure you can get the health care services you need.

Provider Directory

The GCHP Provider Directory lists providers that participate in the GCHP network. The network is the group of providers that work with GCHP.

The GCHP Provider Directory lists hospitals, pharmacies, PCPs, specialists, family planning providers, Federally Qualified Health Centers (FQHCs), vision providers, outpatient mental health providers, long-term services and supports (LTSS), and Rural Health Clinics (RHCs).

The Provider Directory has GCHP network provider names, addresses, phone numbers, business hours and languages spoken. It tells if the provider is taking new patients. It also gives the level of physical accessibility for the building, such as parking, and restrooms.

You can find the online Provider Directory at www.goldcoasthealthplan.org.

If you need a printed Provider Directory, call 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

Provider network

The provider network is the group of doctors, hospitals and other providers that work with GCHP. You will get your covered services through the GCHP network.

If your provider in the network, including a PCP, hospital or other provider, has a moral objection to providing you with a covered service, such as family planning or abortion, call 1-888-301-1228. If you use a TTY, call 1-888-310-7347. Go to Chapter 4 for more about moral objections.

If your provider has a moral objection, he or she can help you find another provider who will give you the services you need. GCHP can also work with you to find a provider.

In network

You will use providers in the GCHP network for your health care needs. You will get preventive and routine care from your PCP. You will also use specialists, hospitals and other providers in the GCHP network.

To get a Provider Directory of network providers, call 1-888-301-1228; if you use a TTY, call 1-888-310-7347. You can also find the Provider Directory online at www.goldcoasthealthplan.org.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

For emergency care, call **911** or go to the nearest emergency room.

Except for emergency care, you may have to pay for care from providers who are out of network.

Out-of-network or Out-of-service area

Out-of-network providers are those that do not have an agreement to work with GCHP. Except for emergency care, you may have to pay for care from providers who are out of the network. If you need covered health care services, you may be able to get them out of the network at no cost to you as long as they are medically necessary and not available in the network.

If you need help with out-of-network services, call 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

If you are outside of the GCHP service area and need care that is not an emergency or urgent, call your PCP right away. Or call GCHP's Member Services Department at 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

For emergency care, call **911** or go to the nearest emergency room. GCHP covers out-of-network emergency care. If you travel to Canada or Mexico and need emergency services requiring hospitalization, GCHP will cover your care. If you are traveling internationally outside of Canada or Mexico and need emergency care, GCHP will not cover your care.

If you have questions about out-of-network or out-of-service area care, call 1-888-301-1228; if you use a TTY, call 1-888-301-7347.

Selecting Kaiser Permanente as your PCP

You may be able to choose Kaiser Permanente (Kaiser) as your PCP if the following conditions are met:

1. You must reside within Kaiser's service area,
2. You have been a Kaiser member within the last six months, or
3. A newborn baby has a mother who is a GCHP member and is assigned to Kaiser as her PCP, or
4. A qualified, immediate family member is living in the same home as a current Kaiser member with one of the following qualifiers:
 - » A spouse (including domestic partners)
 - » An unmarried dependent child under the age of 21
 - » A disabled dependent over the age of 21 (parent or guardian must be the conservator with court-ordered legal power of attorney)
 - » Married / unmarried / stepparents of children under the age of 21
 - » Foster child or stepchild
 - » Legal Guardian
 - » A grandparent, parent, guardian or other relative who applied for Medi-Cal on behalf of a child under the age of 21 and is eligible to enroll in Kaiser as a qualified family addition based on having the same Medi-Cal case number as the child.

To select Kaiser as your PCP, please fill out the PCP Selection Form and provide the requested information for processing. If you do not meet Kaiser's criteria for enrollment, GCHP will notify you and you will need to select another PCP from the GCHP directory. If Kaiser accepts your enrollment request, Kaiser will send you a welcome



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

packet with information on your benefits along with an ID card. Kaiser provides all medical, pharmacy, vision and some behavioral health services. You will not receive an ID card from GCHP.

You cannot select Kaiser as your PCP if you are an Administrative member.

Doctors

You will choose your doctor or a primary care provider (PCP) from the GCHP Provider Directory. The doctor you choose must be a participating provider. This means the provider is in the GCHP network. To get a copy of the GCHP Provider Directory, call 1-888-301-1228; if you use a TTY, call 1-888-310-7347. Or find it online at www.goldcoasthealthplan.org.

You should also call if you want to check to be sure the PCP you want is taking new patients.

If you had a doctor before you were a member of GCHP, you may be able to keep that doctor for a limited time. This is called continuity of care. You can read more about continuity of care in this handbook. To learn more, call 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

If you need a specialist, your PCP will refer you to a specialist in the GCHP network.

Remember, if you do not choose a PCP, GCHP will choose one for you. You know your health care needs best, so it is best if you choose. If you are in both Medicare and Medi-Cal, you do not have to choose a PCP.

If you want to change your PCP, you must choose a PCP from the GCHP Provider Directory. Be sure the PCP is taking new patients. To change your PCP, call 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

Hospitals

In an emergency, call **911** or go to the nearest hospital.

If it is not an emergency and you need hospital care, your PCP will decide which hospital you go to. You will need to go to a hospital in the network. The hospitals in the GCHP's network are listed in the Provider Directory. Hospital services, other than emergencies, require pre-approval (prior authorization).

Primary care provider (PCP)

You must choose a PCP within 30 days of enrolling in GCHP. Depending on your age and sex, you may choose a general practitioner, OB/GYN, family practitioner, internist or pediatrician as your primary care provider (PCP). A nurse practitioner (NP), physician assistant (PA) or certified nurse midwife may also act as your PCP. If you choose an NP, PA or certified nurse midwife, you may be assigned a doctor to oversee your care.

You can also choose an Indian Health Service Facility (IHF), Federally Qualified Health Center (FQHC) or a Rural Health Clinic (RHC) as your PCP. Depending on the type of the provider, you may be able to choose one PCP for your entire family who are members of GCHP.

If you do not choose a PCP within 30 days of enrollment, GCHP will assign you to a PCP. If you are assigned to a PCP and want to change, call 1-888-301-1228; if you use a TTY, call 1-888-310-7347. The change happens the first day of the next month.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Your PCP will:

- Get to know your health history and needs.
- Keep your health records.
- Give you the preventive and routine health care you need.
- Refer (send) you to a specialist if you need one.
- Arrange for hospital care if you need it.

You can look in the Provider Directory to find a PCP in the GCHP network. The Provider Directory has a list of FQHCs and RHCs that work with GCHP.

You can find the GCHP Provider Directory online at www.goldcoasthealthplan.org or you can request a Provider Directory to be mailed to you by calling 1-888-301-1228; if you use a TTY, call 1-888-310-7347. You can also call to find out if the PCP you want is taking new patients.

Choice of doctors and other providers

You know your health care needs best, so it is best if you choose your PCP.

It is best to stay with one PCP so he or she can get to know your health care needs. However, if you want to change to a new PCP, you can change anytime. You must choose a PCP who is in the GCHP provider network and is taking new patients.

Your new choice will become your PCP on the first day of the next month after you make the change. To change your PCP, call 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

GCHP may ask you to change your PCP if the PCP is not taking new patients, has left the GCHP network or does not give care to patients your age. GCHP or your PCP may also ask you to change to a new PCP if you cannot get along with or agree with your PCP, or if you miss or are late to appointments. If GCHP needs to change your PCP, GCHP will tell you in writing.

If you change PCPs, you will get a new GCHP member ID card in the mail. It will have the name of your new PCP or clinic. Call member services if you have questions about getting a new ID card.

Appointments

When you need health care:

- Call your PCP.
- Have your GCHP ID number ready on the call.
- Leave a message with your name and phone number if the office is closed.
- Take your BIC card and GCHP ID card to your appointment.
- Ask for transportation to your appointment, if needed.
- Ask for language assistance or interpretation services, if needed.
- Be on time for your appointment.
- Call right away if you cannot keep your appointment or will be late.
- Have your questions and medication information ready in case you need them.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

If you have an emergency, call **911** or go to the nearest emergency room.

Payment

You do **not** have to pay for covered services. In most cases, you will not get a bill from a provider. You may get an Explanation of Benefits (EOB) or a statement from a provider. EOBs and statements are not bills.

If you do get a bill, call 1-888-301-1228; if you use a TTY, call 1-888-310-7347. Tell GCHP the amount charged, the date of service and the reason for the bill. You are not responsible to pay a provider for any amount owed by GCHP for any covered service. Except for emergency care or urgent care, you may have to pay for care from providers who are not in the network. If you need covered health care services, you may be able to get them at an out-of-network provider at no cost to you, as long as they are medically necessary and not available in the network.

If you get a bill or are asked to pay a co-pay that you think you did not have to pay, you can also file a claim form with GCHP. You will need to tell GCHP in writing why you had to pay for the item or service. GCHP will read your claim and decide if you can get money back. For questions or to ask for a claim form, call 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

Referrals

Your PCP will give you a referral to send you to a specialist if you need one. A specialist is a doctor who has extra education in one area of medicine. Your PCP will work with you to choose a specialist. Your PCP's office can help you set up a time to go to the specialist.

Other services that may require a referral include in-office procedures, X-rays, and lab work.

Your PCP may give you a form to take to the specialist. The specialist will fill out the form and send it back to your PCP. The specialist will treat you for as long as he or she thinks you need treatment.

If you have a health problem that needs special medical care for a long time, you may need a standing referral. This means you can go to the same specialist more than once without getting a referral each time.

If you have trouble getting a referral, call 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

You do not need a referral for:

- PCP visits.
- OB/GYN visits.
- Urgent or emergency care visits.
- Adult sensitive services, such as sexual assault care.
- Family planning services (to learn more, call California Family Planning Information and Referral Service at 1-800-942-1054).
- HIV testing and counseling.
- Treatment for sexually transmitted infections.
- Acupuncture.
- Chiropractic services (when provided by FQHCs and RHCs).



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

- Podiatry services.
- Initial mental health assessment.
- Individual therapy (counseling) services.

Minors also do not need a referral for:

- Outpatient mental health services for:
 - » Sexual or physical abuse.
 - » When you may hurt yourself or others.
- Pregnancy care.
- Sexual assault care.
- Drug and alcohol abuse treatment.

Pre-approval

For some types of care, your PCP or specialist will need to ask GCHP for permission before you get the care. This is called asking for prior authorization, prior approval, or pre-approval. It means that GCHP must make sure that the care is medically necessary or needed.

Care is medically necessary if it is reasonable and necessary to protect your life, keeps you from becoming seriously ill or disabled, or reduces severe pain from a diagnosed disease, illness or injury.

The following services always need pre-approval, even if you receive them from a provider in the GCHP network:

- Hospitalization, if not an emergency
- Services out of the GCHP service area (Ventura County)
- Outpatient surgery
- Skilled Nursing and long-term care at a nursing facility
- Specialized treatments
- Outpatient physical therapy and occupational therapy over 10 visits per calendar year for members 21 years of age and older
- All outpatient physical therapy and occupational therapy for members under the age of 21
- Home health, including home infusion
- Speech therapy
- Chiropractic services greater than two visits per month
- Genetic testing
- Outpatient diagnostic studies
- Pulmonary Rehabilitation
- Cardiac Rehabilitation
- Phototherapy
- Dental Anesthesia
- Non-Emergency Medical Transportation (NEMT)
- Cochlear implants

You may also find the prior authorization list at www.goldcoasthealthplan.org.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

For some services, you need pre-approval (prior authorization). Under Health and Safety Code Section 1367.01 (h)(2), GCHP will decide routine pre-approvals within five working days of when GCHP gets the information reasonably needed to decide.

For requests in which a provider indicates or GCHP determines that following the standard timeframe could seriously jeopardize your life or health or ability to attain, maintain, or regain maximum function, GCHP will make an expedited (fast) pre-approval decision. GCHP will give notice as quickly as your health condition requires and no later than 72 hours after receiving the request for services.

GCHP does not pay the reviewers to deny coverage or services. If GCHP does not approve the request, GCHP will send you a Notice of Action (NOA) letter. The NOA letter will tell you how to file an appeal if you do not agree with the decision.

GCHP will contact you if the Plan needs more information or more time to review your request.

You never need pre-approval for emergency care, even if it is out of the network. This includes labor and delivery if you are pregnant.

Second opinions

You might want a second opinion about care your provider says you need or about your diagnosis or treatment plan. For example, you may want a second opinion if you are not sure you need a prescribed treatment or surgery, or you have tried to follow a treatment plan and it has not worked. A second opinion does not guarantee coverage for continued services or treatment with that provider if available by an in-area contracted provider.

To get a second opinion, call your PCP. Your PCP can refer you to a network provider for a second opinion. You may also call 1-888-301-1228; if you use a TTY, call 1-888-310-7347. GCHP will pay for a second opinion if you or your network provider asks for it and you get the second opinion from a network provider. You do not need permission from GCHP to get a second opinion from a network provider, if the provider is within the Plan's service area (Ventura County). Second opinions with a contracted provider outside of GCHP's service area require a prior authorization.

If there is no provider in the GCHP network to give you a second opinion, GCHP will authorize and pay for a second opinion from an out-of-network provider. GCHP will tell you within five business days if the provider you choose for a second opinion is approved. If you have a chronic, severe or serious illness, or face an immediate and serious threat to your health, including, but not limited to, loss of life, limb, or major body part or bodily function, GCHP will decide within 72 hours.

If GCHP denies your request for a second opinion, you may appeal. To learn more about appeals, go to the appeals section in this handbook.

Women's health specialists

You may go to a women's health specialist within the GCHP network for covered care necessary to provide women's routine and preventive health care services. You do not need a referral from your PCP to get these services. For help finding a women's health specialist, you can call 1-888-301-1228; if you use a TTY, call 1-888-310-7347.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Timely access to care

Appointment Type	Must Get Appointment Within
Urgent care appointments that do not require pre-approval (prior authorization)	48 hours
Urgent care appointments that do require pre-approval (prior authorization)	96 hours
Non-urgent primary care appointments	10 business days
Non-urgent specialist	15 business days
Non-urgent mental health provider (non-doctor)	10 business days
Non-urgent appointments for ancillary services for the diagnosis or treatment of injury, illness or other health condition	15 business days
Telephone wait times during normal business hours	10 minutes
Initial pre-natal care	10 business days

Travel time and distance to care

GCHP must follow travel time and distance standards for your care. Those standards help to make sure you are able to get care without having to travel too long or too far from where you live. Travel time and distance standards are different depending on the county you live in.

If GCHP is not able to provide care to you within these travel time and distance standards, a different standard called an alternative access standard may be used. To see GCHP's time and distance standards for where you live, please, visit www.goldcoasthealthplan.org or call GCHP Member Services at 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

If you need care from a specialist and that provider is located far from where you live, you can call Member Services at 1-888-301-1228; if you use a TTY, call 1-888-310-7347 to get help finding care with a specialist located closer to you. If GCHP cannot find care for you with a closer specialist, you can request GCHP arrange transportation for you to see a specialist even if that specialist is located far from where you live. It is considered far if you cannot get to that specialist within the GCHP's travel time and distance standards for your county, regardless of any alternative access standard GCHP may use for your zip code.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

4. Benefits and services

What your health plan covers

This section explains all of your covered services as a member of GCHP. Your covered services are free as long as they are medically necessary and provided by an in-network provider. Your health plan may cover medically necessary services from an out-of-network provider, but you must ask GCHP for this. Care is medically necessary if it is reasonable and necessary to protect your life, keeps you from becoming seriously ill or disabled, or reduces severe pain from a diagnosed disease, illness or injury.

GCHP offers these types of services:

- Outpatient (ambulatory) services
- Emergency services
- Hospice and palliative care
- Hospitalization
- Maternity and newborn care
- Prescription drugs
- Rehabilitative and habilitative services and devices
- Laboratory and radiology services, such as X-rays
- Preventive and wellness services and chronic disease management
- Mental health services
- Substance use disorder treatment services
- Pediatric services
- Vision services
- Non-emergency medical transportation (NEMT)
- Non-medical transportation (NMT)
- Long-term services and supports (LTSS)
- Telehealth services

Read each of the sections below to learn more about the services you can get.

Medi-Cal benefits

Outpatient (ambulatory) services

- **Adult Immunizations**
You can get adult immunizations (shots) from a network pharmacy or network provider without pre-approval. GCHP covers those shots recommended by the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC).



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

- **Allergy care**
GCHP covers allergy testing and treatment, including allergy desensitization, hyposensitization or immunotherapy.
- **Anesthesiologist services**
GCHP covers anesthesia services that are medically necessary when you receive outpatient care.
- **Chiropractic services**
GCHP covers chiropractic services, limited to the treatment of the spine by manual manipulation. Chiropractic services are limited to two services per month in combination with acupuncture, audiology, occupational therapy and speech therapy services. GCHP may pre-approve other services as medically necessary.

The following members are eligible for chiropractic services:
 - » Children under 21 years of age;
 - » Pregnant women through the end of the month that includes 60 days following the end of a pregnancy;
 - » Residents in a skilled nursing facility, intermediate care facility, or subacute care facility; **or**
 - » All members when services are provided at hospital outpatient departments, FQHC or RHC
- **Dialysis/hemodialysis services**
GCHP covers dialysis treatments. GCHP also covers hemodialysis (chronic dialysis) services if your doctor approves it.
- **Outpatient surgery**
GCHP covers outpatient surgical procedures. Those needed for diagnostic purposes, procedures considered to be elective, and specified outpatient medical procedures require pre-approval (prior authorization).
- **Physician services**
GCHP covers physician services that are medically necessary.
- **Podiatry (foot) services**
GCHP covers podiatry services as medically necessary for diagnosis and medical, surgical, mechanical, manipulative, and electrical treatment of the human foot, including the ankle and tendons that insert into the foot and the nonsurgical treatment of the muscles and tendons of the leg governing the functions of the foot.
- **Treatment therapies**
GCHP covers different treatment therapies, including:
 - » Chemotherapy
 - » Radiation therapy



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Mental health services

- **Outpatient mental health services**

- » GCHP covers a member for an initial mental health assessment without requiring pre-approval (prior authorization). You may get a mental health assessment at any time from a licensed mental health provider in the GCHP's Managed Behavioral Health Organization (Beacon Health Options) network without a referral.
- » Your PCP or mental health provider will make a referral for additional mental health screening to a specialist within GCHP's Managed Behavioral Health Organization (Beacon Health Options) network to determine your level of impairment. If your mental health screening results determine you are in mild or moderate distress or have impairment of mental, emotional or behavioral functioning, GCHP can provide mental health services for you. GCHP covers these mental health services:
 - › Individual and group mental health evaluation and treatment (psychotherapy).
 - › Psychological testing when clinically indicated to evaluate a mental health condition.
 - › Development of cognitive skills to improve attention, memory and problem solving.
 - › Outpatient services for the purposes of monitoring medication therapy.
 - › Outpatient laboratory, medications, supplies and supplements.
 - › Psychiatric consultation.
- » For help finding more information on mental health services provided by GCHP, call Beacon Health Options at 1-855-765-9702; if you use a TTY, call 1-800-735-2929. Beacon Health Options is available Monday through Friday from 8:30 a.m. to 5 p.m.
- » If your mental health screening results determine you may have a higher level of impairment and need specialty mental health services (SMHS), your PCP or your mental health provider will refer you to the county mental health plan to receive an assessment. To learn more, read the “What your health plan does not cover” section in this handbook.

Emergency services

- **Inpatient and outpatient services needed to treat a medical emergency**

GCHP covers all services that are needed to treat a medical emergency that happens in the U.S. or requires you to be in a hospital in Canada or Mexico. A medical emergency is a medical condition with severe pain or serious injury. The condition is so serious that, if it does not get immediate medical attention, anyone with an average knowledge of health and medicine could expect it to result in:

- » Serious risk to your health; **or**
- » Serious harm to bodily functions; **or**
- » Serious dysfunction of any bodily organ or part; **or**
- » In the case of a pregnant woman in active labor, meaning labor at a time when either of the following would occur:
 - › There is not enough time to safely transfer you to another hospital before delivery.
 - › The transfer may pose a threat to your health or safety or to that of your unborn child.

- **Emergency transportation services**

GCHP covers ambulance services to help you get to the nearest place of care in emergency situations. This means that your condition is serious enough that other ways of getting to a place of care could risk your health or life. No services are covered outside the U.S., except for emergency services that require you to be in the hospital in Canada or Mexico.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Hospice and palliative care

GCHP covers hospice care and palliative care for children and adults, which help reduce physical, emotional, social and spiritual discomforts.

Hospice care is a benefit that services terminally ill members. It is intervention that focuses mainly on pain and symptom management rather than on a cure to prolong life.

Hospice care includes:

- Nursing services.
- Physical, occupational or speech services.
- Medical social services.
- Home health aide and homemaker services.
- Medical supplies and appliances.
- Drugs and biological services.
- Counselling services.
- Continuous nursing services on a 24-hour basis during periods of crisis and as necessary to maintain the terminally ill member at home.
- Inpatient respite care for up to five consecutive days at a time in a hospital, skilled nursing facility or hospice facility.
- Short-term inpatient care for pain control or symptom management in a hospital, skilled nursing facility or hospice facility.

Palliative care is patient- and family-centered care that improves quality of life by anticipating, preventing and treating suffering. Palliative care does not require the member to have a life expectancy of six months or less. Palliative care may be provided at the same time as curative care.

Hospitalization

- **Anesthesiologist services**
GCHP covers medically necessary anesthesiologist services during covered hospital stays. An anesthesiologist is a provider who specializes in giving patients anesthesia. Anesthesia is a type of medicine used during some medical procedures.
- **Inpatient hospital services**
GCHP covers medically necessary inpatient hospital care when you are admitted to the hospital.
- **Surgical services**
GCHP covers medically necessary surgeries performed in a hospital.

Maternity and newborn care

GCHP covers these maternity and newborn care services:

- Breastfeeding education and aids.
- Delivery and postpartum care.
- Prenatal care.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

- Birthing center services.
- Certified Nurse Midwife (CNM).
- Licensed Midwife (LM).
- Diagnosis of fetal genetic disorders and counseling.

Prescription drugs

Covered drugs

Your provider can prescribe you drugs that are on the GCHP preferred drug list (PDL), subject to exclusions and limitations. The GCHP PDL is sometimes called a formulary. Drugs on the PDL are safe and effective for their prescribed use. A group of doctors and pharmacists update this list.

- Updating this list helps make sure the drugs on it are safe and effective.
- If your doctor thinks you need to take a drug that is not on this list, your doctor will need to call GCHP to ask for pre-approval before you get the drug.

To find out if a drug is on the GCHP PDL or to get a copy of the PDL, call GCHP Member Services at 1-888-301-1228; if you use a TTY, call 1-888-310-7347. You can also call GCHP Pharmacy Services at 1-855-297-2870; if you use a TTY, call 711. You may also find the PDL at www.goldcoasthealthplan.org.

Sometimes GCHP needs to approve a drug before a provider can prescribe it. GCHP will review and decide these requests within 24 hours.

- A pharmacist or hospital emergency room may give you a 72-hour emergency supply if they think you need it. GCHP will pay for the emergency supply.
- If GCHP says no to the request, the Plan will send you a letter that lets you know why and what other drugs or treatments you can try.

Pharmacies

If you are filling or refilling a prescription, you must get your prescribed drugs from a pharmacy that works with GCHP. You can find a list of pharmacies that work with GCHP in the Plan's Provider Directory at www.goldcoasthealthplan.org. You can also find a pharmacy near you by calling 1-888-301-1228; if you use a TTY, call 1-888-310-7347. You can also call GCHP Pharmacy Services at 1-855-297-2870; if you use a TTY, call 711.

Once you choose a pharmacy, take your prescription to the pharmacy. Your provider may also send it to the pharmacy for you. Give the pharmacy your prescription with your GCHP ID card. Make sure the pharmacy knows about all medications you are taking and any allergies you have. If you have any questions about your prescription, make sure you ask the pharmacist.

Rehabilitative and habilitative (therapy) services and devices

The plan covers:

- **Acupuncture**
GCHP covers acupuncture services to prevent, modify or alleviate the perception of severe, persistent chronic pain resulting from a generally recognized medical condition. GCHP has expanded this benefit



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to 10 services per month. GCHP may pre-approve (prior authorization) additional services as medically necessary.

- ***Audiology (hearing)***

GCHP covers medically necessary audiology services. GCHP has expanded this benefit to 10 services per month. GCHP may pre-approve (prior authorization) additional services as medically necessary.

- ***Behavioral health treatments***

Behavioral health treatment (BHT) includes services and treatment programs, such as applied behavior analysis and evidence-based behavior intervention programs, that develop or restore, to the maximum extent practical, the functioning of an individual.

BHT services teach skills using behavioral observation and reinforcement, or through prompting to teach each step of a targeted behavior. BHT services are based on reliable evidence and are not experimental. Examples of BHT services include behavioral interventions, cognitive behavioral intervention packages, comprehensive behavioral treatment and applied behavioral analysis.

BHT services must be medically necessary, prescribed by a licensed doctor or psychologist, approved by the plan, and provided in a way that follows the approved treatment plan.

- ***Cancer clinical trials***

GCHP covers a clinical trial if it is related to the prevention, detection or treatment of cancer or other life-threatening conditions and if the study is conducted by the U.S. Food and Drug Administration (FDA), Centers for Disease Control and Prevention (CDC) or Centers for Medicare and Medicaid Services (CMS). Studies must be approved by the National Institutes of Health, the FDA, the Department of Defense or the Veterans Administration.

- ***Cardiac rehabilitation***

GCHP covers inpatient and outpatient cardiac rehabilitative services.

- ***Cosmetic Surgery***

GCHP does not cover cosmetic surgery to change the shape of normal structures of the body in order to improve appearance.

- ***Durable medical equipment (DME)***

GCHP covers the purchase or rental of medical supplies, equipment and other services with a prescription from a doctor. Prescribed DME items may be covered as medically necessary to preserve bodily functions essential to activities of daily living or to prevent major physical disability. GCHP does not cover comfort, convenience or luxury equipment, features and supplies.

- ***Enteral and parenteral nutrition***

These methods of delivering nutrition to the body are used when a medical condition prevents you from eating food normally. GCHP covers enteral and parenteral nutrition products when medically necessary.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

- **Hearing aids**
GCHP covers hearing aids if you are tested for hearing loss and have a prescription from your doctor. GCHP may also cover hearing aid rentals, replacements and batteries for your first hearing aid.
- **Home health services**
GCHP covers health services provided in your home, when prescribed by your doctor and found to be medically necessary.
- **Medical supplies, equipment and appliances**
GCHP covers medical supplies that are medically necessary and prescribed by a doctor.
- **Occupational therapy**
GCHP covers occupational therapy services, including occupational therapy evaluation, treatment planning, treatment, instruction and consultative services. GCHP has expanded this benefit to 10 services per month. GCHP may pre-approve (prior authorization) additional services as medically necessary.
- **Orthotics / prostheses**
GCHP covers orthotic and prosthetic devices and services that are medically necessary and prescribed by your doctor, podiatrist, dentist, or non-physician medical provider. This includes implanted hearing devices, breast prosthesis / mastectomy bras, compression burn garments and prosthetics to restore function or replace a body part, or to support a weakened or deformed body part.
- **Ostomy and urological supplies**
GCHP covers ostomy bags, urinary catheters, draining bags, irrigation supplies and adhesives. This does not include supplies that are for comfort, convenience or luxury equipment or features.
- **Physical therapy**
GCHP covers physical therapy services, including physical therapy evaluation, treatment planning, treatment, instruction, consultative services and application of topical medications found to be medically necessary.
- **Pulmonary rehabilitation**
GCHP covers pulmonary rehabilitation that is medically necessary and prescribed by a doctor.
- **Reconstructive Services**
GCHP covers surgery to correct or repair abnormal structures of the body to improve or create a normal appearance to the extent possible. Abnormal structures of the body are those caused by congenital defects, developmental abnormalities, trauma, infection, tumors, or disease.
- **Skilled nursing facility services**
GCHP covers skilled nursing facility services as medically necessary if you are disabled and need a high level of care. These services include room and board in a licensed facility with skilled nursing care on a 24-hour per day basis.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

- **Speech therapy**

GCHP covers speech therapy that is medically necessary. GCHP has expanded this benefit to 10 services per month. GCHP may pre-approve (prior authorization) additional services as medically necessary.

- **Transgender Services**

GCHP covers transgender services (gender-affirming services) as a benefit when they are medically necessary or when the services meet the criteria for reconstructive surgery.

Laboratory and radiology services

GCHP covers outpatient and inpatient laboratory and X-ray services when medically necessary. Various advanced imaging procedures are covered based on medical necessity.

Preventive and wellness services and chronic disease management

The plan covers:

- Advisory Committee for Immunization Practices (ACIP) recommended vaccines.
- Family planning services.
- Health Resources and Service Administration's Bright Futures recommendations.
- Preventive services for women recommended by the Institute of Medicine.
- Smoking cessation services.
- United States Preventive Services Task Force A and B recommended preventive services.

Family planning services are provided to members of childbearing age to enable them to determine the number and spacing of children. These services include some methods of birth control approved by the Food and Drug Administration (FDA). GCHP's PCP and OB/GYN specialists are available for family planning services.

For family planning services, you may also choose a doctor or clinic not connected with GCHP without having to get pre-approval from GCHP. Services from an out-of-network provider not related to family planning may not be covered. To learn more, call 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

Diabetes Prevention Program

The Diabetes Prevention Program (DPP) is an evidence-based lifestyle change program. It is designed to prevent or delay the onset of type 2 diabetes among individuals diagnosed with prediabetes. The program lasts one year. It can last for a second year for members who qualify. The program-approved lifestyle supports and techniques include, but are not limited to:

- Providing a peer coach.
- Teaching self-monitoring and problem solving.
- Providing encouragement and feedback.
- Providing informational materials to support goals.
- Tracking routine weigh-ins to help accomplish goals.

Members must meet program eligibility requirements to join DPP. Call GCHP to learn more about the program and eligibility.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Substance use disorder services

The plan covers:

- Alcohol misuse screenings and behavioral health counseling interventions for alcohol misuse.

Pediatric services

The plan covers:

- Early and periodic screening, diagnostic and treatment (EPSDT) services.
 - » If you or your child are under 21 years old, GCHP covers well-child visits. Well-child visits are a comprehensive set of preventive, screening, diagnostic, and treatment services.
 - » GCHP will make appointments and provide transportation to help children get the care they need.
 - » Preventive care can be regular health check-ups and screenings to help your doctor find problems early. Regular check-ups help your doctor look for any problems with your medical, dental, vision, hearing, mental health, and any substance use disorders. GCHP covers screening services (including lead blood level assessment) any time there is a need for them, even if it is not during your regular check-up. Also, preventive care can be shots you or your child need. GCHP must make sure that all enrolled children get necessary shots at the time of any health care visit.
 - » When a physical or mental health issue is found during a check-up or screening, there may be care that can fix or help the problem. If the care is medically necessary and GCHP is responsible for paying for the care, then GCHP covers the care at no cost to you. These services include:
 - › Doctor, nurse practitioner, and hospital care.
 - › Shots to keep you healthy.
 - › Physical, speech / language, and occupational therapies.
 - › Home health services, which could be medical equipment, supplies, and appliances.
 - › Treatment for vision and hearing, which could be eyeglasses and hearing aids.
 - › Behavioral Health Treatment for autism spectrum disorders and other developmental disabilities.
 - › Case management, targeted case management, and health education.
 - › Reconstructive surgery, which is surgery to correct or repair abnormal structures of the body caused by congenital defects, developmental abnormalities, trauma, infection, tumors, or disease to improve function or create a normal appearance.
- If the care is medically necessary and GCHP is not responsible for paying for the care, then the Plan will help you get the right care you need. These services include:
 - » Treatment and rehabilitative services for mental health and substance use disorders.
 - » Treatment for dental issues, which could be orthodontics.
 - » Private duty nursing services.

Vision services

Vision care is provided through Vision Service Plan (VSP) providers. All members can have their eyes examined every two years. Members who have been diagnosed with diabetes are allowed an eye exam every year. When calling for the annual appointment, tell the provider you have diabetes.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

The plan covers:

- Routine eye exam once every 24 months; GCHP may pre-approve (prior authorization) additional services as medically necessary.
- Eyeglasses (frames and lens) once every 24 months; contact lens when required for medical conditions such as aphakia, aniridia and keratoconus.

The VSP phone number is 1-800-877-7195; if you use a TTY, call 1-800-428-4833.

Non-emergency medical transportation (NEMT)

You are entitled to use non-emergency medical transportation (NEMT) when you physically or medically are not able to get to your medical, dental, mental health and substance use disorder appointment by car, bus, train or taxi, and the Plan pays for your medical or physical condition. Before getting NEMT, you need to request the service through your doctor, and they will prescribe the correct type of transportation to meet your medical condition.

NEMT is an ambulance, litter van, wheelchair van or air transport. NEMT is not a car, bus or taxi. GCHP allows the lowest cost NEMT for your medical needs when you need a ride to your appointment. That means, for example, if you can physically or medically be transported by a wheelchair van, GCHP will not pay for an ambulance. You are only entitled to air transport if your medical condition makes any form of ground transportation impossible.

NEMT must be used when:

- It is physically or medically needed as determined with a written authorization by a doctor; or you are not able to physically or medically use a bus, taxi, car or van to get to your appointment.
- You need help from the driver to and from your residence, vehicle or place of treatment due to a physical or mental disability.
- It is approved in advance by GCHP with a written authorization by a doctor.

To ask for approved NEMT services that your doctor has prescribed, please call Ventura Transit Systems (VTS) at 1-855-628-7433; if you use a TTY, call 711, at least two days before your appointment. For urgent appointments, please call as soon as possible. Please have your member ID card ready when you call.

Limits of NEMT

There are no limits for receiving NEMT to or from medical, dental, mental health and substance use disorder appointments covered under GCHP when a provider has prescribed it for you. If the appointment type is covered by Medi-Cal but not through the health plan, your health plan will provide for or help you schedule your transportation.

What does not apply?

Transportation will not be provided if your physical and medical condition allows you to get to your medical appointment by car, bus, taxi or another easily-accessible method of transportation. Transportation will not be provided if the service is not covered by Medi-Cal. A list of covered services is in this Member Handbook.

Cost to member

There is no cost when transportation is authorized by GCHP.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Non-medical transportation (NMT)

You can use non-medical transportation (NMT) when you are:

- Traveling to and from an appointment for a Medi-Cal covered service.
- Picking up prescriptions and medical supplies.
- Able to attest that you are unable to get alternate transportation.

GCHP allows you to use a car, taxi, bus or other public / private way of getting to your medical appointment for Medi-Cal-covered services. GCHP provides mileage reimbursement when transportation is in a private vehicle arranged by the member and not through a transportation broker, bus passes, taxi vouchers or train tickets. Before getting approval for mileage reimbursement, you must state to VTS by phone, by email or in person that you tried to get all other reasonable transportation choices and could not get one. GCHP allows the lowest cost NMT type that meets your medical needs.

To request NMT services, call VTS at 1-855-628-7433; if you use a TTY, call 711, at least two days before your appointment or as soon as you can when you have an appointment. Please have your member ID card ready when you call.

Limits of NMT

There are no limits for receiving NMT to or from medical, dental, mental health and substance use disorder appointments. If the appointment type is covered by Medi-Cal but not through GCHP, your health plan will provide for or help you schedule your transportation.

What does not apply?

NMT does not apply if:

- An ambulance, litter van, wheelchair van, or other form of NEMT is medically needed to get to a covered service.
- You need assistance from the driver to and from the residence, vehicle or place of treatment due to a physical or medical condition.
- The service is not covered by Medi-Cal.

Cost to member

There is no cost when transportation is provided by GCHP.

Long-term services and supports (LTSS)

GCHP covers these LTSS benefits for members who qualify:

- Skilled nursing facility services as approved by GCHP.
- Home and Community Based Adult Services (CBAS) as approved by GCHP.

Telehealth services

GCHP may be able to provide some of your services through telehealth. Telehealth is a way of receiving services without being in the same physical location as your provider. Telehealth may involve having a live video conversation with your provider. Or telehealth may involve sharing information with your provider without a live conversation. It is important that both you and your provider agree that the use of telehealth for a particular service is appropriate for you. You can contact GCHP to determine which types of services GCHP may be able to provide to you through telehealth.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Care Management

GCHP offers services to help you coordinate your health care needs at no cost to you by offering care management services. The care management team at GCHP is made up of registered nurses and social workers that are ready to assist you with:

- Understanding and managing your benefits.
- Communicating with your doctors.
- Establishing a medical home.
- Learning about community resources that may be available to you.
- Setting goals and making plans for improving your health.
- A new diagnosis that is causing you concern.
- Learning about your condition.
- Problems with your pregnancy.
- Organ transplant questions.
- Managing multiple medications.

To reach the GCHP Care Management Department, please call 1-805-437-5656 or email: CareManagement@goldchp.org. If emailing, please include your telephone call back number and GCHP ID for a prompt response. Deaf and hard of hearing members can call the Plan's TTY line at 1-888-310-7347.

Health Education

GCHP offers health education resources and information as a benefit to you. Members receive a newsletter, Winning Health, in English and Spanish. The newsletter is mailed to you and contains various health education options of interest to you and your family. Member may also request health education materials directly by calling the Health Education Department at 1-805-437-5718; if you use a TTY, call 1-888-310-7347, or by email at: HealthEducation@goldchp.org.

Smoking Cessation

GCHP offers free nicotine products and other tobacco cessation medications to help you quit smoking. To receive these products, talk to your doctor about the best method for you. Members can also call California Smoker's Helpline at **1-800-NO-BUTTS (1-800-662-8887)**; for Spanish, call **1-800-45-NO-FUME (1-800-456-6386)** for information on how to quit smoking.

Breastfeeding

GCHP covers maternity and newborn care services. Breastfeeding has many benefits for you and your baby. Breastmilk provides all the nourishment you baby needs. If you would like more information about breastfeeding and breast pumps, please contact your provider and/or GCHP's Member Services Department.

Cultural and Linguistic Services

GCHP knows the importance of being able to communicate with your doctor so you can understand your health. GCHP offers free interpreting and translation services.

It is important to use qualified interpreters at your medical visits. GCHP strongly discourages the use of family or friends – mainly children – as interpreters.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

GCHP offers these language assistance services:

- Sign language interpreter.
- In-person interpreter.
- Telephone interpreter.
- Translation (written).
- Alternative formats such as Braille font size, text and audio.

GCHP's Cultural and Linguistic Services team is here to help you. For questions or to get language assistance services call 1-805-437-5603; if you use a TTY, call 1-888-310-7347, or email CulturalLinguistics@goldchp.org.

What your health plan does not cover

Other services you can get through Fee-For-Service (FFS) Medi-Cal

Sometimes GCHP does not cover services, but you can still get them through FFS Medi-Cal. This section lists these services. To learn more, call 1-888-301-1228. If you use a TTY, call 1-888-310-7347.

Specialty mental health services

County mental health plans provide specialty mental health services (SMHS) to Medi-Cal beneficiaries who meet medical necessity rules. SMHS may include these outpatient, residential and inpatient services:

- Outpatient services:
 - » Mental health services (assessments, plan development, therapy, rehabilitation and collateral).
 - » Medication support services.
 - » Day treatment intensive services.
 - » Day rehabilitation services.
 - » Crisis intervention services.
 - » Crisis stabilization services.
 - » Targeted case management services.
 - » Therapeutic behavioral services.
 - » Intensive care coordination (ICC).
 - » Intensive home-based services (IHBS).
 - » Therapeutic foster care (TFC).
- Residential services:
 - » Adult residential treatment services.
 - » Crisis residential treatment services.
- Inpatient services:
 - » Acute psychiatric inpatient hospital services.
 - » Psychiatric inpatient hospital professional services.
 - » Psychiatric health facility services.

To learn more about SMHS the county mental health plan provides, you can call the county. To find all counties' toll-free telephone numbers online, visit <https://www.dhcs.ca.gov/individuals/Pages/MHPContactList.aspx>



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Substance use disorder services

Ventura County Behavioral Health (VCBH) makes referrals for:

- Outpatient substance use disorder services, including residential treatment services.

Dental services

Medi-Cal covers some dental services, including:

- Diagnostic and preventive dental hygiene (such as examinations, X-rays and teeth cleanings).
- Emergency services for pain control.
- Tooth extractions.
- Fillings.
- Root canal treatments (anterior / posterior).
- Crowns (prefabricated / laboratory).
- Scaling and root planning.
- Periodontal maintenance.
- Complete and partial dentures.
- Orthodontics for children who qualify.

If you have questions or want to learn more about dental services, call Denti-Cal at 1-800-322-6384. If you use a TTY, call 1-800-735-2922. You may also visit the Denti-Cal website at <https://www.denti-cal.ca.gov/>

Institutional long-term care

GCHP covers long-term care services that are medically necessary. To learn more, call 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

Services you cannot get through GCHP or Medi-Cal

There are some services that neither GCHP nor Medi-Cal will cover, including:

- Cosmetic services
- Custodial care
- Experimental care
- Infertility testing and/or treatment
- Reversal of sterilization
- Care for conditions that state or local law requires to be treated in a public facility
- Conditions covered by Workers' Compensation
- Any services that are not considered to be medically necessary
- Non-emergency treatment in an out-of-area or out-of-network facility without prior authorization

Read each of the sections below to learn more. Or call 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

California Children's Services (CCS)

CCS is a state program that treats children under 21 years of age with certain health conditions, diseases or chronic health problems and who meet the CCS program rules. If GCHP or your PCP believes your child has a CCS condition, he or she will be referred to the CCS county program to be assessed for eligibility.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

CCS program staff will decide if your child qualifies for CCS services. If your child qualifies to get this type of care, CCS providers will treat him or her for the CCS condition. GCHP will continue to cover the types of service that do not have to do with the CCS condition such as physicals, vaccines and well-child checkups.

GCHP does not cover services provided by the CCS program. For CCS to cover these services, CCS must approve the provider, services and equipment.

CCS does not cover all health conditions. CCS covers most health conditions that physically disable or that need to be treated with medicines, surgery or rehabilitation (rehab). CCS covers children with health conditions such as:

- Congenital heart disease
- Cancers
- Tumors
- Hemophilia
- Sickle cell anemia
- Thyroid problems
- Diabetes
- Serious chronic kidney problems
- Liver disease
- Intestinal disease
- Cleft lip / palate
- Spina bifida
- Hearing loss
- Cataracts
- Cerebral palsy
- Seizures under certain circumstances
- Rheumatoid arthritis
- Muscular dystrophy
- AIDS
- Severe head, brain or spinal cord injuries
- Severe burns
- Severely crooked teeth

The state pays for CCS services. If your child is not eligible for CCS program services, he or she will keep getting medically-necessary care from GCHP.

To learn more about CCS, call 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

Other programs and services for people with Medi-Cal

There are other programs and services for people with Medi-Cal, including:

- Organ and tissue donation.
- Multi-Purpose Senior Services Program (MSSP) – This program helps the elderly remain in their homes with the aid of social and case management services. For assistance, call 1-805-477-7300.
- Local Education Authority (LEA) Services – Assessments and treatment for eligible children needing help in a school environment. Contact your local school district office.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

- Childhood Lead Poisoning Case Management Programs – For services, contact the Ventura County Child Health and Disability Prevention (CHDP) office at 1-805-981-5291.
- Services provided in a state or federal hospital.
- Alpha-Fetoprotein (AFP) Lab Services – Your doctor will refer you to the Genetics Disease Branch, if medically necessary.
- Mental Health Services – For a severe mental health problem that interferes with your ability to function, you can get help by calling Ventura County Behavioral Health (VCBH) at 1-866-998-2243. If you think you have a mental health emergency, please call 911 or go directly to the closest emergency room for help.
- Alcohol and Drug Program Services – For assistance, call 1-805-981-9200.
- Direct Observed Therapy (DOT) for Tuberculosis – Your doctor can test for tuberculosis. If you need care for tuberculosis, you will be referred to the Tuberculosis Specialty Clinic run by the county Public Health Department. For assistance, call 1-805-385-9451.
- Custodial Care Services – Your doctor can provide information on agencies that can help.
- Some HIV/AIDS Drugs – Your doctor can advise you of covered drugs.
- Some psychotherapeutic drugs – Your doctor can advise you of covered drugs.

Read each of the sections below to learn more about other programs and services for people with Medi-Cal.

Organ and tissue donation

Anyone can help save lives by becoming an organ or tissue donor. If you are between 15 and 18 years old, you can become a donor with the written consent of your parent or guardian. You can change your mind about being an organ donor at any time. If you want to learn more about organ or tissue donation, talk to your PCP. You can also visit the United States Department of Health and Human Services website at www.organdonor.gov.

Care coordination

GCHP offers services to help you coordinate your health care needs at no cost to you. If you have questions or concerns about your health or the health of your child, call 1-888-301-1228. If you use a TTY, call 1-888-310-7347.

Evaluation of new and existing technologies

GCHP requires a review for the medical appropriateness of all procedures not covered by Medi-Cal that are considered “new technology.” When a request for new technology is received, GCHP’s medical staff gathers information about the procedure and looks at the recommended use and safety of the procedure. All of the information collected is then forwarded to an appropriate specialist to review the material. They will advise GCHP about the medical-necessity of the use of the new technology. The recommendation of the specialist will be forwarded to GCHP’s chief medical officer or another designated physician who will decide if it will be approved or denied.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

5. Rights and Responsibilities

As a member of GCHP, you have certain rights and responsibilities. This chapter explains these rights and responsibilities. This chapter also includes legal notices that you have a right to as a member of GCHP.

Your rights

GCHP members have these rights:

- To be treated with respect, giving due consideration to your right to privacy and the need to maintain confidentiality of your medical information.
- To be provided with information about the plan and its services, including Covered Services.
- To be able to choose a primary care provider within GCHP's network. You may change your PCP every month if you are not happy with them.
- To participate in decision making regarding your own health care, including the right to refuse treatment.
- To voice grievances, either verbally or in writing, about the organization or the care received.
- To receive care coordination.
- To request an appeal of decisions to deny, defer or limit services or benefits.
- To receive oral interpretation services for their language.
- To receive free legal help at your local legal aid office or other groups.
- To formulate advance directives.
- To request a State Hearing, including information on the circumstances under which an expedited hearing is possible.
- To disenroll upon request. Members that can request expedited disenrollment include, but are not limited to, those receiving services under the Foster Care or Adoption Assistance Programs and those with special health care needs.
- To access Minor Consent Services.
- To receive written member-informing materials in alternative formats (such as braille, large-size print and audio format) upon request and in a timely fashion appropriate for the format being requested and in accordance with Welfare & Institutions Code Section 14182 (b)(12).
- To be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience or retaliation.
- To receive information on available treatment options and alternatives, presented in a manner appropriate to your condition and ability to understand.
- To have access to and receive a copy of your medical records, and request that they be amended or corrected, as specified in 45 Code of Federal Regulations §164.524 and 164.526.
- Freedom to exercise these rights without adversely affecting how you are treated by GCHP, your providers or the State.
- To have access to family planning services, Freestanding Birth Centers, Federally Qualified Health Centers, Indian Health Service Facilities, midwifery services, Rural Health Centers, sexually transmitted disease services and Emergency Services outside GCHP's network pursuant to the federal law.
- To make suggestions to GCHP about your member rights and responsibilities.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

- To have privacy and your medical information kept confidential.
- To timely medical appointments.
- To get a second opinion for your diagnosis or treatment plan.
- To have an adult represent you with GCHP, once the Plan receives and validates the appropriate permissions from you.

Your responsibilities

GCHP members have these responsibilities:

- Carefully read the GCHP Member Handbook and other materials you may receive to understand how to use your benefits and what steps to follow when you need care.
- Always show your GCHP member identification card and any other active health insurance cards you may have when getting services.
- Promptly let the Medi-Cal eligibility office and GCHP know of any changes to your name, address, phone number and other health care coverage. If you get Supplemental Security Income (SSI), call the Social Security Administration (SSA) office to make changes. All agencies need to have your correct information.
- Select a Primary Care Provider (PCP) within the first 30 days of being a GCHP member.
- Make an appointment with your PCP within the first 120 days of being a GCHP member for a health evaluation.
- Treat GCHP staff, health care provider(s) and their staff in a respectful and courteous way.
- Be on time for your appointments and inform your doctor's office if you must cancel or reschedule and do so at least 24 business hours in advance.
- Tell your medical provider about all of your medical condition(s), health care needs and any medications you are taking to get the best care plan for you.
- Follow the care plan and orders for care that you have agreed upon with your doctor.
- Ask your provider questions if you do not understand something.
- Contact your doctor if you have problems with the care plan.
- Call your doctor first when you need health care.
- Use the emergency room only in cases of an emergency or as directed by your doctor.
- Follow-up with your PCP after getting care at an emergency facility or urgent care center.
- Talk to your doctor about things you can do to improve your health. Take part in health care programs that keep you healthy.
- Request interpreter services at least five working days before a scheduled appointment.
- Call your doctor or pharmacy at least three days before you run out of medicine.
- Pay for your monthly Share of Cost (if you have one) and for Medi-Cal non-covered services.
- Report fraud, waste and abuse to GCHP. You can do this without giving your name by calling GCHP's hotline at 1-866-672-2615, 24 hours a day, seven days a week.
- Call GCHP Member Services at 1-888-301-1228 / if you use a TTY, call 1-888-310-7347 if you do not know how to use your benefits or if you have any problems with services needed or received.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Notice of Privacy Practices

A STATEMENT DESCRIBING GCHP'S POLICIES AND PROCEDURES FOR PRESERVING THE CONFIDENTIALITY OF MEDICAL RECORDS IS AVAILABLE AND WILL BE FURNISHED TO YOU UPON REQUEST.

Notice of Privacy Practices-HIPAA

This notice describes how medical information about you may be used and disclosed. This notice also describes how you can get access to this information. Please review it carefully.

Privacy and you

Your health information is personal and private. GCHP must keep your health information private and notify you if that privacy information has been breached. The Plan gets information about you when you become a GCHP member. Your doctors, clinics, labs, and hospitals send information to GCHP when they ask the Plan to approve and pay for your health care. GCHP must give you a notice informing you of how your health information is kept private.

GCHP is required by law to maintain the privacy of your health information. The Plan is required to inform you of GCHP's legal duties and privacy practices where your protected health information (PHI) is concerned. GCHP agrees to follow the terms of this Notice of Privacy Practices. GCHP also has the right to change the terms of this notice if it becomes necessary, and to make the new notice effective for all health information the Plan maintains. If GCHP needs to make any changes, the Plan will provide you with an updated copy of this notice by mailing it to you at your recorded address. If you received this notice electronically, you have the right to request a paper copy at any time.

How does GCHP use and disclose my health information?

In order to manage your health benefits effectively, GCHP stores health-related records about you, including your claims history, health plan enrollment information, case management records, and prior authorizations for health services. The Plan uses this information and discloses it to others for the following purposes:

- **Treatment:** GCHP uses and discloses your health information to coordinate your health care. It is disclosed to hospitals, clinics, physicians and other health care providers to enable them to provide health care services to you. For example, GCHP maintains your health information in paper and electronic form and allows health care providers to have online access to it to provide treatment to you.
- **Payment:** GCHP uses and discloses your health information to make payment for health care services you receive, including determining your eligibility for benefits, and your provider's eligibility for payment. For example, GCHP informs providers that you are a member of the Plan and tells them your eligible benefits.
- **Health Care Operations:** GCHP uses and discloses your health information as necessary to enable the Plan to operate. For example, GCHP uses members' claims information for internal financial accounting activities and quality assurance purposes.

GCHP also discloses health information to Plan contractors and agents who assist in these functions. However, a confidentiality agreement is obtained before GCHP makes such disclosures for payment or operational purposes. For example, companies that provide or maintain GCHP's computer services may have access to computerized health information in the course of providing services.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Why is GCHP contacting you?

GCHP may contact you to provide appointment reminders or information about treatment options available to you. The Plan may also contact you about other health-related services and programs that may interest you.

Can my health information ever be released without my permission?

Yes, GCHP may disclose your protected health information (PHI) without your authorization to government agencies and private individuals and organizations in a variety of circumstances in which the Plan is required or authorized by law to do so. The general kinds of disclosures GCHP may be required or allowed to make without your authorization include, but are not limited to:

- Disclosures that are required by state or federal law.
- For judicial and administrative proceedings, such as lawsuits.
- To law enforcement agencies.
- To coroners and medical examiners.
- If you are an inmate of a correctional institution or under the custody of a law enforcement official, GCHP may release health information about you to the institution or official.
- To a school, about a member who is a student or prospective student of the school, if: (1) the information that is disclosed is limited to proof of immunization; (2) the school is required by the state or other law to have such proof of immunization prior to admitting the member; and (3) there is documented agreement by the member or the member's guardian.

Are there instances when my PHI is not released?

Your health information may be subject to restrictions that may limit or prevent some uses or disclosures. For example, there are special restrictions on the disclosure of health information relating to HIV/AIDS status, genetic information, mental health treatment, developmental disabilities, and drug and alcohol abuse treatment. GCHP complies with these restrictions in the use of your health information.

GCHP will not permit other uses and disclosures of your health information without your written permission or authorization.

Your Individual Rights

What rights do I have as a GCHP member?

As a GCHP member you have the right to:

- Ask GCHP to restrict certain uses and disclosures of your health information. GCHP is not required to agree to any restrictions requested by its members unless the request is solely for a health care item or service for which you or another person other than GCHP has paid for the service(s) out of pocket.
- Protect your privacy. You have the right to receive confidential communications from GCHP at a particular phone number, P.O. Box, or some other address that you specify to the Plan.
- See and copy any of your health records that GCHP maintains. We must receive your request in writing. We will respond to your request within 30 days. If your records are stored in another location, please allow 60 days for the Plan to respond to your request. GCHP may charge a fee to cover the cost of copying your records. Under certain circumstances, GCHP may deny your request. If your request is denied, the Plan will tell you the reason why in writing. You have the right to appeal the denial.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

- Request that GCHP amend your records if you feel they are wrong. GCHP may deny your request under certain circumstances. If your request is denied, you have the right to submit a statement for inclusion in the record.
- Receive a report of non-routine disclosures that the Plan has made of your health information, up to six years prior from the date of your request (but not earlier than April 14, 2003). There are some exceptions. For example, GCHP does not maintain records of disclosures made with your authorization; disclosures made for the purposes of health care treatment, determining payment for health services, or conducting the health plan operations of GCHP; disclosures made to you; and certain other disclosures.
- If you received this notice electronically, you have the right to request a paper copy at any time.

How do I exercise these rights?

You can exercise any of your rights by sending a written request to the Plan's privacy official at the address below. To facilitate processing of your request, GCHP encourages you to use a request form, which you can obtain below or by calling the Plan at the telephone number below. You can also obtain a complete statement of your rights, including the procedures for responding to requests to exercise your rights, by calling or writing to the privacy official at the address below.

How do I file a complaint if my privacy rights are violated?

As a GCHP member, you have the right to file a complaint with the Plan's privacy official. You must provide specific, written information to support your complaint. You may also file a complaint with the Health and Human Services (HHS) secretary.

GCHP will not retaliate against you in any way for filing a complaint. Filing a complaint will not adversely affect the quality health care services you receive as a GCHP member.

Contact the Plan at:

Privacy Official: Gold Coast Health Plan
 Mailing address: 711 E. Daily Drive, Suite 106, Camarillo, CA 93010
 Compliance Hotline: 1-866-672-2615; if you use a TTY, 1-888-310-7347

California's Department of Health Care Services:

Privacy Officer
 c/o Legal Services Office
 1501 Capitol Ave., MS-4721
 Sacramento, CA 95814
 P.O. Box 997413
 Sacramento, CA 95899-7413
 Voice Phone 1-916-445-4646

Contact the Secretary of United States

Departments of Health and Human Services at:

Office for Civil Rights
 Attn: Regional Manager
 90 7th Street, Suite 4-100
 San Francisco, CA 94103
 Voice Phone 1-800-368-1019
 FAX 1-202-619-3818
 TTY 1-800-537-7697

Notice about laws

Many laws apply to this Member Handbook. These laws may affect your rights and responsibilities even if the laws are not included or explained in this handbook. The main laws that apply to this handbook are state and federal laws about the Medi-Cal program. Other federal and state laws may apply too.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Notice about Medi-Cal as a payer of last resort

Sometimes someone else has to pay first for the services GCHP provides you. For example, if you are in a car accident or if you are injured at work, insurance or Workers Compensation has to pay first.

The state Department of Health Care Services (DHCS) has the right and responsibility to collect for covered Medi-Cal services for which Medi-Cal is not the first payer. If you are injured, and someone else is liable for your injury, you or your legal representative must notify DHCS within 30 days of filing a legal action or a claim. Submit your notification online:

- Personal Injury Program at <http://dhcs.ca.gov/PI>
- Workers Compensation Recovery Program at <http://dhcs.ca.gov/WC>

To learn more, call 1-916-445-9891.

The Medi-Cal program complies with state and federal laws and regulations relating to the legal liability of third parties for health care services to beneficiaries. GCHP will take all reasonable measures to ensure that the Medi-Cal program is the payer of last resort.

You must apply for and keep other health coverage (OHC) that is available to you for free or is state-paid coverage. If you do not apply for or keep no-cost or state-paid OHC, your Medi-Cal benefits and/or eligibility will be denied or stopped. If you do not report changes to your OHC promptly, and because of this, receive Medi-Cal benefits that you are not eligible for, you may have to repay DHCS.

Notice about estate recovery

The Medi-Cal program must seek repayment from the estates of certain deceased Medi-Cal members from payments made, including managed care premiums, nursing facility services, home and community-based services, and related hospital and prescription drug services provided to the deceased Medi-Cal member on or after the member's 55th birthday. If a deceased member does not leave an estate or owns nothing when they die, nothing will be owed.

To learn more about the estate recovery, call 1-916-650-0490. Or get legal advice.

Notice of Action

GCHP will send you a Notice of Action (NOA) letter any time GCHP denies, delays, terminates or modifies a request for health care services. If you disagree with the plan's decision, you can always file an appeal with GCHP.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

6. Reporting and solving problems

There are two kinds of problems that you may have with GCHP:

- A **complaint** (or **grievance**) is when you have a problem with GCHP or a provider, or with the health care or treatment you got from a provider.
- An **appeal** is when you don't agree with GCHP's decision not to cover or change your services.

You can use the GCHP grievance and appeal process to let us know about your problem. This does not take away any of your legal rights and remedies. We will not discriminate or retaliate against you for complaining. Letting us know about your problem will help us improve care for all members.

You should always contact GCHP first to let us know about your problem. Call Member Services Monday through Friday from 8 a.m. to 5 p.m., (excluding holidays) at 1-888-301-1228. If you use a TTY, call 1-888-310-7347.

If your grievance or appeal is still not resolved, or you are unhappy with the result, you can call the state Department of Managed Health Care (DMHC) at **1-888-HMO-2219**; if you use a TTY, call **1-877-688-9891**.

The state Department of Health Care Services (DHCS) Medi-Cal Managed Care Ombudsman can also help. They can help if you have problems joining, changing or leaving a health plan. They can also help if you moved and are having trouble getting your Medi-Cal transferred to your new county. You can call the Ombudsman Monday through Friday, between 8 a.m. and 5 p.m. at 1-888-452-8609.

You can also file a grievance with your county eligibility office about your Medi-Cal eligibility. Call HSA at 1-888-472-4463; if you use a TTY, call 1-800-735-2922. If you are not sure who you can file your grievance with, call 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

To report incorrect information about your additional health insurance, please call Medi-Cal Monday through Friday, between 8 a.m. and 5 p.m. at 1-800-541-5555.

Complaints

A complaint (or grievance) is when you have a problem or are unhappy with the services you are receiving from GCHP or a provider. There is no time limit to file a complaint. You can file a complaint with us at any time by phone, in writing or online.

- **By phone:** Call GCHP at 1-888-301-1228 Monday through Friday from 8 a.m. to 5 p.m. (excluding holidays), or if you use a TTY, call 1-888-310-7347, between Monday through Friday from 8 a.m. to 5 p.m. (excluding holidays). Give your health plan ID number, your name and the reason for your complaint.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

- **By mail:** Call GCHP at 1-888-301-1228; if you use a TTY, call 1-888-310-7347, and ask to have a form sent to you. When you get the form, fill it out. Be sure to include your name, health plan ID number and the reason for your complaint. Tell GCHP what happened and how the Plan can help you.

Mail the form to:
Gold Coast Health Plan
Attn: Grievance and Appeals
P.O. Box 9176
Oxnard, CA 93031

Your doctor's office will have complaint forms available.

- **Online:** Visit GCHP's website to obtain a form. Go to www.goldcoasthealthplan.org.

If you need help filing your complaint, GCHP can help you. The Plan can give you free language services. Call 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

Within five days of getting your complaint, GCHP will send you a letter letting you know the Plan received it. Within 30 days, GCHP will send you another letter that tells you how the Plan resolved your problem. If you call GCHP about a grievance that is not about health care coverage, medical necessity, or experimental or investigational treatment, and your grievance is resolved by the end of the next business day, you may not receive a letter.

If you want GCHP to make a fast decision because the time it takes to resolve your complaint would put your life, health or ability to function in danger, you can ask for an expedited (fast) review. To ask for an expedited review, call 1-888-301-1228; if you use a TTY, call 1-888-310-7347. The Plan will make a decision within 72 hours of receiving your complaint.

Appeals

An appeal is different from a complaint. An appeal is a request for GCHP to review and change a decision the Plan made about coverage for a requested service. If GCHP sent you a Notice of Action (NOA) letter telling you that the Plan is denying, delaying, changing or ending a service, and you do not agree with the decision, you can file an appeal. Your PCP can also file an appeal for you with your written permission.

You must file an appeal within 60 calendar days from the date on the NOA you received. If you are currently getting treatment and you want to continue getting treatment, then you must ask for an appeal within 10 calendar days from the date the NOA was delivered to you, or before the date GCHP says services will stop. When you request the appeal, please tell GCHP that you want to continue receiving services.

You can file an appeal by phone, in writing or online:

- **By phone:** Call GCHP at 1-888-301-1228 Monday through Friday from 8 a.m. to 5 p.m. (excluding holidays). If you use a TTY, call 1-888-310-7347. Give your name, health plan ID number and the service you are appealing.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

- **By mail:** Call GCHP at 1-888-301-1228; if you use a TTY, call 1-888-310-7347, and ask to have a form sent to you. When you get the form, fill it out. Be sure to include your name, health plan ID number and the service you are appealing.

Mail the form to:
Gold Coast Health Plan
Attn: Grievance and Appeals
P. O. Box 9176
Oxnard, CA 93031

Your doctor's office will have appeal forms available.

- **Online:** Visit GCHP's website to obtain a form. Go to www.goldcoasthealthplan.org.

If you need help filing your appeal, GCHP can help you. The Plan can give you free language services. Call 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

Within five days of getting your appeal, GCHP will send you a letter letting you know the Plan received it. Within 30 days, GCHP will tell you the Plan's appeal decision.

If you or your doctor wants GCHP to make a fast decision because the time it takes to resolve your appeal would put your life, health or ability to function in danger, you can ask for an expedited (fast) review. To ask for an expedited review, call 1-888-301-1228; if you use a TTY, call 1-888-310-7347. GCHP will make a decision within 72 hours of receiving your appeal.

What to do if you do not agree with an appeal decision

If you filed an appeal and received a letter from GCHP telling you the Plan did not change its decision, or you never received a letter telling you of GCHP's decision and it has been past 30 days, you can:

- Ask for a **state hearing** from Department of Social Services (DSS), and a judge will review your case.

You will not have to pay for a state hearing.

You are entitled to a state hearing.

State Hearings

A state hearing is a meeting with people from DSS. A judge will help to resolve your problem. You can ask for a state hearing only if you have already filed an appeal with GCHP and you are still not happy with the decision or if you have not received a decision on your appeal after 30 days.

You must ask for a state hearing within 120 days from the date on the notice telling you of the appeal decision. Your PCP can ask for a state hearing for you with your written permission and if he or she gets approval from DSS. You can also call DSS to ask the state to approve your PCP's request for a state hearing.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

You can ask for a state hearing by phone or mail.

- **By phone:** Call the DSS Public Response Unit at 1-800-952-5253; if you use a TTY, call 1-800-952-8349.
- **By mail:** Fill out the form provided with your appeals resolution notice. Send it to:

California Department of Social Services
 State Hearings Division
 P.O. Box 944243, MS 09-17-37
 Sacramento, CA 94244-2430

If you need help asking for a state hearing, GCHP can help you. The Plan can give you free language services. Call 1-888-301-1228; if you use a TTY, call 1-888-310-7347.

At the hearing, you will give your side. GCHP will give the Plan's side. It could take up to 90 days for the judge to decide your case. GCHP must follow what the judge decides.

If you want DSS to make a fast decision because the time it takes to have a state hearing would put your life, health or ability to function fully in danger, you or your PCP can contact the DSS and ask for an expedited (fast) state hearing. DSS must make a decision no later than three business days after it gets your complete case file from GCHP.

Fraud, waste and abuse

If you suspect that a provider or a person who gets Medi-Cal has committed fraud, waste or abuse, it is your right to report it.

Provider fraud, waste and abuse includes:

- Falsifying medical records.
- Prescribing more medication than is medically necessary.
- Giving more health care services than are medically necessary.
- Billing for services that were not given.
- Billing for professional services when the professional did not perform the service.

Fraud, waste and abuse by a person who gets benefits includes:

- Lending, selling or giving a health plan ID card or Medi-Cal Benefits Identification Card (BIC) to someone else.
- Getting similar or the same treatments or medicines from more than one provider.
- Going to an emergency room when it is not an emergency.
- Using someone else's Social Security number or health plan ID number.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

To report fraud, waste and abuse, write down the name, address and ID number of the person who committed the fraud, waste or abuse. Give as much information as you can about the person, such as the phone number or the specialty if it is a provider. Give the dates of the events and a summary of exactly what happened. Send your report to:

Gold Coast Health Plan
Attn: Compliance Officer – Fraud Investigation
711 E. Daily Drive, Suite 106
Camarillo, CA 93010

You can also make a report by:

- Calling the toll-free hotline, available 24 hours a day, seven days a week at 1-866-672-2615.
- Use GCHP's fraud, waste or abuse website at <https://gchp.alertline.com>.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

7. Important numbers and words to know

Important phone numbers

- GCHP Member Services Department: 1-888-301-1228; if you use a TTY, call 1-888-310-7347
- OptumRx, GCHP's pharmacy benefit manager: 1-855-297-2870
- Beacon Health Options, behavioral health services: 1-855-765-9702
- Vision Service Plan (VSP), vision services: 1-800-877-7195
- Medi-Cal Dental, dental services: 1-800-322-6384
- Ventura Transit System (VTS), transportation services: 1-855-628-7433
- Ventura County Behavioral Health (VCBH): 1-866-998-2243
- Human Services Agency (HSA): 1-888-472-4463
- Social Security Administration / Medicare: 1-800-772-1213

Words to know

Active labor: The period of time when a woman is in the three stages of giving birth and either cannot be safely transferred in time to another hospital before delivery or a transfer may harm the health and safety of the woman or unborn child.

Acute: A medical condition that is sudden, requires fast medical attention and does not last a long time.

Appeal: A member's request for GCHP to review and change a decision made about coverage for a requested service.

Benefits: Health care services and drugs covered under this health plan.

California Children's Services (CCS): A program that provides services for children up to 21 years of age with certain diseases and health problems.

California Health and Disability Prevention (CHDP): A public health program that reimburses public and private health care providers for early health assessments to detect or prevent disease and disabilities in children and youth. The program helps children and youth who qualify have access to regular health care. Your PCP can provide CHDP services.

Case manager: Registered nurses or social workers who can help you understand major health problems and arrange care with your providers.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Certified Nurse Midwife (CNM): An individual licensed as a Registered Nurse and certified as a nurse midwife by the California Board of Registered Nursing. A certified nurse midwife is permitted to attend cases of normal childbirth.

Chronic condition: A disease or other medical problem that cannot be completely cured or that gets worse over time or that must be treated so you do not get worse.

Clinic: A facility that members can select as a primary care provider (PCP). It can be either a Federally Qualified Health Center (FQHC), community clinic, Rural Health Clinic (RHC), Indian Health Service Facility or other primary care facility.

Community-based adult services (CBAS): Outpatient, facility-based services for skilled nursing care, social services, therapies, personal care, family and caregiver training and support, nutrition services, transportation, and other services for members who qualify.

Complaint: A member's verbal or written expression of dissatisfaction about GCHP, a provider, or the quality of care or quality of services provided. A complaint is the same as a grievance.

Continuity of care: The ability of a plan member to keep getting Medi-Cal services from their existing provider for up to 12 months, if the provider and GCHP agree.

Coordination of Benefits (COB): The process of determining which insurance coverage (Medi-Cal, Medicare, commercial insurance or other) has primary treatment and payment responsibilities for members with more than one type of health insurance coverage.

County Organized Health System (COHS): A local agency created by a county board of supervisors to contract with the Medi-Cal program. Enrolled recipients choose their health care provider from among all COHS providers.

Copayment: A payment you make, generally at the time of service, in addition to the insurer's payment.

Coverage (covered services): The health care services provided to members of GCHP, subject to the terms, conditions, limitations and exclusions of the Medi-Cal contract and as listed in this Evidence of Coverage (EOC) and any amendments.

DHCS: The Department of Health Care Services. This is the state office that oversees the Medi-Cal program.

Disenroll: To stop using this health plan because you no longer qualify or change to a new health plan. You must sign a form that says you no longer want to use this health plan or call HCO and disenroll by phone.

DMHC: The California Department of Managed Health Care. This is the state office that oversees some managed care health plans.

Durable medical equipment (DME): Equipment that is medically necessary and ordered by your doctor or other provider. GCHP decides whether to rent or buy DME. Rental costs must not be more than the cost to buy. Repair of medical equipment is covered.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Early and periodic screening, diagnosis and treatment (EPSDT): EPSDT services are a benefit for Medi-Cal members under the age of 21 to help keep them healthy. Members must get the right health check-ups for their age and appropriate screenings to find health problems and treat illnesses early.

Emergency medical condition: A medical or mental condition with such severe symptoms, such as active labor (go to definition above) or severe pain, that someone with a prudent layperson's knowledge of health and medicine could reasonably believe that not getting immediate medical care could:

- Place your health or the health of your unborn baby in serious danger
- Cause impairment to a body function
- Cause a body part or organ to not work right

Emergency room care: An exam performed by a doctor (or staff under direction of a doctor as allowed by law) to find out if an emergency medical condition exists; medically-necessary services needed to make you clinically stable within the capabilities of the facility.

Emergency medical transportation: Transportation in an ambulance or emergency vehicle to an emergency room to receive emergency medical care.

Enrollee: A person who is a member of a health plan and receives services through the plan.

Excluded services: Services not covered by GCHP; non-covered services.

Family planning services: Services to prevent or delay pregnancy.

Federally Qualified Health Center (FQHC): A health center in an area that does not have many health care providers. You can get primary and preventive care at an FQHC.

Fee-For-Service (FFS): This means you are not enrolled in a managed care health plan. Under FFS, your doctor must accept "straight" Medi-Cal and bill Medi-Cal directly for the services you got.

Follow-up care: Regular doctor care to check a patient's progress after a hospitalization or during a course of treatment.

Formulary: A list of drugs or items that meet certain criteria and are approved for members.

Fraud: An intentional act to deceive or misrepresent by a person who knows the deception could result in some unauthorized benefit for the person or someone else.

Freestanding Birth Centers (FBCs): Health facilities where childbirth is planned to occur away from the pregnant woman's residence that are licensed or otherwise approved by the state to provide prenatal labor and delivery or postpartum care and other ambulatory services that are included in the plan. These facilities are not hospitals.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Grievance: A member’s verbal or written expression of dissatisfaction about GCHP, a provider, or the quality of care or services provided. A complaint is the same as a grievance.

Habilitation services and devices: Health care services that help you keep, learn or improve skills and functioning for daily living.

Health Care Options (HCO): The program that can enroll you in or disenroll you from the health plan.

Health care providers: Doctors and specialists such as surgeons, doctors who treat cancer or doctors who treat special parts of the body, and who work with GCHP or are in the GCHP network. GCHP network providers must have a license to practice in California and give you a service GCHP covers.

You usually need a referral from your PCP to go to a specialist. Your PCP must get pre-approval from GCHP before you get care from an out-of-network or out-of-county specialist.

You do **not** need a referral from your PCP for some types of service, such as family planning, emergency care, OB/GYN care or sensitive services.

Types of health care providers:

- Audiologist is a provider who tests hearing.
- Certified nurse midwife is a nurse who cares for you during pregnancy and childbirth.
- Family practitioner is a doctor who treats common medical issues for people of all ages.
- General practitioner is a doctor who treats common medical issues.
- Internist is a doctor with special training in internal medicine, including diseases.
- Licensed vocational nurse is a licensed nurse who works with your doctor.
- A counselor is a person who helps you with family problems.
- Medical assistant or certified medical assistant is a non-licensed person who helps your doctors give you medical care.
- Mid-level practitioner is a name used for health care providers, such as nurse-midwives, physician assistants or nurse practitioners.
- Nurse anesthetist is a nurse who gives you anesthesia.
- Nurse practitioner or physician assistant is a person who works in a clinic or doctor’s office who diagnoses, treats and cares for you, within limits.
- Obstetrician / gynecologist (OB/GYN) is a doctor who takes care of a woman’s health, including during pregnancy and birth.
- Occupational therapist is a provider who helps you regain daily skills and activities after an illness or injury.
- Pediatrician is a doctor who treats children from birth through the teen years.
- Physical therapist is a provider who helps you build your body’s strength after an illness or injury.
- Podiatrist is a doctor who takes care of your feet.
- Psychologist is a person who treats mental health issues but does not prescribe drugs.
- Registered nurse is a nurse with more training than a licensed vocational nurse and who has a license to do certain tasks with your doctor.
- Respiratory therapist is a provider who helps you with your breathing.
- Speech pathologist is a provider who helps you with your speech.



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Health insurance: Insurance coverage that pays for medical and surgical expenses by repaying the insured for expenses from illness or injury or paying the care provider directly.

Home health care: Skilled nursing care and other services given at home.

Home health care providers: Providers who give you skilled nursing care and other services at home.

Hospice: Care to reduce physical, emotional, social and spiritual discomforts for a member with a terminal illness (not expected to live for more than six months).

Hospital: A place where you get inpatient and outpatient care from doctors and nurses.

Hospitalization: Admission to a hospital for treatment as an inpatient.

Hospital outpatient care: Medical or surgical care performed at a hospital without admission as an inpatient.

Inpatient care: When you have to stay the night in a hospital or other place for the medical care you need.

Long-term care: Care in a facility for longer than the month of admission.

Managed care plan: A Medi-Cal plan that uses only certain doctors, specialists, clinics, pharmacies and hospitals for Medi-Cal recipients enrolled in that plan. GCHP is a managed care plan.

Medical home: A model of care that will provide better health care quality, improve self-management by members of their own care and reduce avoidable costs over time.

Medically necessary (or medical necessity): Medically necessary care are important services that are reasonable and protect life. This care is needed to keep patients from getting seriously ill or disabled. This care reduces severe pain by treating the disease, illness or injury. For members under the age of 21, Medi-Cal services includes care that is medically necessary to fix or help a physical or mental illness or condition, including substance use disorders, as set forth in Section 1396d(r) of Title 42 of the United States Code.

Medicare: The federal health insurance program for people 65 years of age or older, certain younger people with disabilities, and people with end-stage renal disease (permanent kidney failure that requires dialysis or a transplant, sometimes called ESRD).

Member: Any eligible Medi-Cal member enrolled with GCHP who is entitled to receive covered services.

Mental health services provider: Licensed individuals who provide mental health and behavioral health services to patients.

Midwifery services: Prenatal, intrapartum, and postpartum care, including family planning care for the mother and immediate care for the newborn, provided by certified nurse midwives (CNM) and licensed midwives (LM).

Network: A group of doctors, clinics, hospitals and other providers contracted with GCHP to provide care.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Network provider (or in-network provider): Go to “Participating provider.”

Non-covered service: A service that GCHP does not cover.

Non-emergency medical transportation (NEMT): Transportation when you cannot get to a covered medical appointment by car, bus, train or taxi. GCHP pays for the lowest-cost NEMT for your medical needs when you need a ride to your appointment.

Non-formulary drug: A drug not listed in the drug formulary.

Non-medical transportation: Transportation when traveling to and from an appointment for a Medi-Cal covered service authorized by your provider.

Non-participating provider: A provider not in the GCHP network.

Other health coverage (OHC): Other health coverage (OHC) refers to private health insurance. Services may include medical, dental, vision, pharmacy and/or Medicare supplemental plans (Part C & D).

Orthotic device: A device used as a support or brace affixed externally to the body to support or correct an acutely injured or diseased body part and that is medically necessary for the medical recovery of the member.

Out-of-area services: Services while a member is anywhere outside of the service area.

Out-of-network provider: A provider who is not part of the GCHP network.

Outpatient care: When you do not have to stay the night in a hospital or other place for the medical care you need.

Outpatient mental health services: Outpatient services for members with mild to moderate mental health conditions including:

- Individual or group mental health evaluation and treatment (psychotherapy).
- Psychological testing when clinically indicated to evaluate a mental health condition.
- Outpatient services for the purposes of monitoring medication therapy.
- Psychiatric consultation.
- Outpatient laboratory, supplies and supplements.

Palliative care: Care to reduce physical, emotional, social and spiritual discomforts for a member with a serious illness.

Participating hospital: A licensed hospital that has a contract with GCHP to provide services to members at the time a member receives care. The covered services that some participating hospitals may offer to members are limited by GCHP’s utilization review and quality assurance policies or GCHP’s contract with the hospital.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Participating provider (or participating doctor): A doctor, hospital or other licensed health care professional or licensed health facility, including sub-acute facilities that have a contract with GCHP to offer covered services to members at the time a member receives care.

Physician services: Services given by a person licensed under state law to practice medicine or osteopathy, not including services offered by doctors while you are admitted in a hospital that are charged in the hospital bill.

Plan: Go to “managed care plan.”

Post-stabilization services: Services you receive after an emergency medical condition is stabilized.

Pre-approval (or prior-authorization): Your PCP must get approval from GCHP before you get certain services. GCHP will only approve the services you need. GCHP will not approve services by non-participating providers if GCHP believes you can get comparable or more appropriate services through GCHP providers. A referral is not an approval. You must get approval from GCHP.

Premium: An amount paid for coverage; cost for coverage.

Prescription drug coverage: Coverage for medications prescribed by a provider.

Prescription drugs: A drug that legally requires an order from a licensed provider to be dispensed, unlike over-the-counter (OTC) drugs that do not require a prescription.

Preferred drug list (PDL): A chosen list of drugs approved by this health plan from which your doctor may order for you. Also called a formulary.

Primary care: Go to “routine care.”

Primary care provider (PCP): The licensed provider you have for most of your health care. Your PCP helps you get the care you need. Some care needs to be approved first, unless:

- You have an emergency.
- You need OB/GYN care.
- You need sensitive services.
- You need family planning care.

Your PCP can be a:

- General practitioner.
- Internist.
- Pediatrician.
- Family practitioner.
- OB/GYN.
- FQHC or RHC.
- Nurse practitioner.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

- Physician assistant.
- Clinic.

Prior authorization (pre-approval): A formal process requiring a health care provider to get approval to provide specific services or procedures.

Prosthetic device: An artificial device attached to the body to replace a missing body part.

Provider Directory: A list of providers in the GCHP network.

Psychiatric emergency medical condition: A mental disorder in which the symptoms are serious or severe enough to cause an immediate danger to yourself or others or you are immediately unable to provide for or use food, shelter or clothing due to the mental disorder.

Public health services: Health services targeted at the population as a whole. These include, among others, health situation analysis, health surveillance, health promotion, prevention services, infectious disease control, environmental protection and sanitation, disaster preparedness and response, and occupational health.

Qualified provider: Doctor qualified in the area of practice appropriate to treat your condition.

Reconstructive surgery: Surgery to correct or repair abnormal structures of the body to improve function or create a normal appearance to the extent possible. Abnormal structures of the body are those caused by a congenital defect, developmental abnormalities, trauma, infection, tumors, or disease.

Referral: When your PCP says you can get care from another provider. Some covered care services require a referral and pre-approval.

Routine care: Medically-necessary services and preventive care, well child visits, or care such as routine follow-up care. The goal of routine care is to prevent health problems.

Rural Health Clinic (RHC): A health center in an area that does not have many health care providers. You can get primary and preventive care at an RHC.

Sensitive services: Medically necessary services for family planning, sexually transmitted infections (STIs), HIV/AIDS, sexual assault and abortions.

Serious illness: A disease or condition that must be treated and could result in death.

Service area: The geographic area GCHP serves. This includes Ventura County.

Skilled nursing care: Covered services provided by licensed nurses, technicians and/or therapists during a stay in a Skilled Nursing Facility or in a member's home.

Skilled nursing facility: A place that gives 24-hour a day nursing care that only trained health professionals may give.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

Specialist (or specialty doctor): A doctor who treats certain types of health care problems. For example, an orthopedic surgeon treats broken bones, an allergist treats allergies, and a cardiologist treats heart problems. In most cases, you will need a referral from your PCP to go to a specialist.

Specialty mental health services:

- Outpatient services:
 - » Mental health services (assessments, plan development, therapy, rehabilitation and collateral)
 - » Medication support services
 - » Day treatment intensive services
 - » Day rehabilitation services
 - » Crisis intervention services
 - » Crisis stabilization services
 - » Targeted case management services
 - » Therapeutic behavioral services
 - » Intensive care coordination (ICC)
 - » Intensive home-based services (IHBS)
 - » Therapeutic foster care (TFC)
- Residential services:
 - » Adult residential treatment services
 - » Crisis residential treatment services
- Inpatient services:
 - » Acute psychiatric inpatient hospital services
 - » Psychiatric inpatient hospital professional services
 - » Psychiatric health facility services

Terminal illness: A medical condition that cannot be reversed and will most likely cause death within one year or less if the disease follows its natural course.

Triage (or screening): The evaluation of your health by a doctor or nurse who is trained to screen for the purpose of determining the urgency of your need for care.

Urgent care (or urgent services): Services provided to treat a non-emergency illness, injury or condition that requires medical care. You can get urgent care from an out-of-network provider if network providers are temporarily not available or accessible.

Vision Service Plan (VSP): GCHP's vision services provider.



Call member services at 1-888-301-1228. If you use a TTY, call 1-888-310-7347 or the California Relay Line at 711. The call is toll free. GCHP is open Monday through Friday from 8 a.m. to 5 p.m. Visit the website at www.goldcoasthealthplan.org.

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