

Thank you for trusting us with your health for 20 years!

living healthy

June 2016
Volume 22, Issue 2

A newsletter for the members of Central California Alliance for Health



CENTRAL
CALIFORNIA
ALLIANCE
FOR HEALTH

20th ANNIVERSARY

CREATING HEALTH CARE SOLUTIONS

1996-2016



HEALTHIER LIVING PROGRAM

Take control for a better you

The Alliance offers **FREE** Healthier Living Program workshops in English and Spanish. This program is based on Stanford University's Chronic Disease Self-Management Program and is offered once a week for

six weeks. You can learn skills to better manage and take control of your chronic health condition(s). A chronic disease is a health condition that can be managed but not cured—for example, diabetes, asthma, high blood pressure and heart disease.

Who can attend? Alliance members who:

- Are 18 years of age and over
- Have a chronic disease
- Want to improve their health and fitness and meet new people
- Are family and caregivers of an Alliance member living with a chronic disease

Members who attend the six-week workshop will receive:

- A book titled *Living a Healthy Life with Chronic Conditions*
- An audio CD called "Relaxation for Mind and Body"

Gift baskets will also be raffled throughout the workshop session.

How do I sign up? To find a workshop near you, please call the **Alliance Health Education Line at 1-800-700-3874, ext. 5580**. We are always here to help you!

» IMPORTANT NOTICE:

Member Services will not be available the following dates and times due to companywide and departmental meetings.

June 16 Closed from
noon to 4:15 p.m.

Sept. 15 Closed from
12:15 to 4:15 p.m.

Standard
U.S. Postage
PAID
Merced, CA
Permit No. 1186

Central California Alliance for Health
1600 Green Hills Road, Suite 101
Scotts Valley, CA 95066

Need a ride?

Nonmedical transportation for children receiving EPSDT services

This is a Medi-Cal benefit for children receiving Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services. EPSDT services are extra Medi-Cal services. This program helps find and care for health problems in children from birth to 21 years of age. These services are for those who have full-scope Medi-Cal.

Ask your doctor or clinic about EPSDT services. You may get these services if your health provider thinks that you need them. These services may also include nonmedical transportation (NMT). NMT can help you get to and from medical appointments for EPSDT services covered by the Alliance.

NMT must be approved in advance by the Alliance. Please call **1-800-700-3874, ext. 5577**, at least five business days (Monday through Friday) before your appointment to ask for NMT. Or call as soon as you can if you have an urgent appointment. Depending upon your location, options for NMT may be taxi, bus, or other public or private vehicle.



Frequently asked questions about mental health services

Q. Do Alliance Medi-Cal members have access to mental health care services?

A. Yes, mental health benefits are available to Alliance Medi-Cal members through Beacon Health Strategies. Depending on the level of services you need, you may be referred to your county mental health plan.

Q. What services are available?

A. These services are offered:

- Therapy—individual or group
- Psychiatric consultation
- Psychological testing
- Behavioral health treatment for children with autism spectrum disorder (ASD)

Q. How can I get services?

A. Alliance Medi-Cal members can access the services listed above by calling Beacon Health

Strategies at **1-855-765-9700**.

Q. Does Beacon offer substance use services?

A. No. Medi-Cal substance use services are not available through Beacon. These services are managed by your county mental health plan. Beacon staff can let you know where to call for these services.

Q. What should I expect when I call?

A. You or a family member can call Beacon Health Strategies and talk to a mental health professional. They will ask you a few questions and will then help you find a provider near you.

Q. Do In-Home Supportive Services (IHSS) and Medi-Cal Access Program (MCAP) members have access?

A. Yes, IHSS and MCAP members have access through OptumHealth at **1-800-808-5796**.

Let your voice be heard!

Our Member Services Advisory Group meets four times a year. Advisory Group members tell us how we are doing and how we can improve services. Meetings are held by videoconference in our Scotts Valley, Salinas and Merced offices. Alliance members can be reimbursed \$50 per meeting.

Any Alliance member, parent or foster parent of a child who is an Alliance member can join the Advisory Group. If you don't want to join, you can still come to the meetings.

If you would like to find out more or want to know when the next meeting is, please call Member Services at **1-800-700-3874**.



Call on us for help

Do you have questions about your health? If yes, the Alliance can help!

Call the **FREE Alliance Nurse Advice Line** for answers 24 hours a day, 7 days a week, at **1-844-971-8907**.

Do you need help managing your health? Call the Case Management Line at **1-800-700-3874, ext. 5512**. Or if you would like health education information, please call the Health Education Line at **1-800-700-3874, ext. 5580**.

You can talk to someone on our Care Management team from 8 a.m. to 5 p.m. Monday through Friday.



Other health coverage

WHAT YOU NEED TO KNOW

You may have other health coverage (OHC) if:

- You have health insurance through your job, Covered California, your spouse or partner, or if you bought insurance on your own
- You became eligible because of a new life event—getting married, for example

Your OHC may have ended if:

- You were moved from Covered California to Medi-Cal
- Your job ended or you were laid off
- You didn't work enough hours to qualify for insurance through your job

- You stopped paying your premiums
- You canceled your policy for any reason

Who do I contact to update my OHC information? If you have Medi-Cal, call your county Medi-Cal office. It is important that you give them this information so they can update your case. You should also call Alliance Member Services. They will have to verify that your OHC has ended before they can update your information.

Why is it important that I update my OHC?

- To make sure there are no problems with being seen at your doctor's office or getting prescriptions at the pharmacy
- So you won't get a bill from your doctor's office

Back-to-school checkups

The back-to-school season is a great time to reconnect with your child's doctor to make sure your child arrives at school in good health.

A checkup lets your doctor review your child's growth and overall health. A checkup also helps prevent future illnesses and ensures that your child is up-to-date with his or her immunizations.

Some children are required to get certain shots before school starts. For example, proof of a whooping cough shot is now required to start seventh grade.

Make sure to schedule appointments early, as your doctor's schedule could be very busy right before school starts. Try to call at least a month or more before your child goes back to school. It will be much easier to get an appointment time that fits into your busy schedule too.



» **TO FIND OUT MORE** about vaccines, contact your doctor or go to the Centers for Disease Control and Prevention website at www.cdc.gov/vaccines.

Formulary additions



Drug name	Use
Alkeran oral tablet 2mg	Anticancer
Etoposide oral capsule 50mg	Anticancer
Fluorouracil topical cream 5%	Anticancer
Fluorouracil topical solution 2%, 5%	Anticancer
Myleran oral tablet 2mg	Anticancer
Targretin topical gel 1%	Anticancer
Succimer (Chemet)	Lead poisoning treatment
Electrolytes, oral maintenance solutions (Pedialyte, Oralyte)	Fluid replacement
Auranofin (Ridaura)	Arthritis
Proparacaine HCl	Numbing eye drop
Lidocaine Ophth.	Numbing eye drop
Leucovorin Calcium (Wellcovorin, Citrovorum Factor, Folinic Acid)	Helps body make new cells
Sodium chloride 2%, 5% Ophth. (Muro 128)	Eye drop for dry eyes

What do I do if I get a bill?

As an Alliance member, you should not have to pay for covered services unless you:

- Have a Medi-Cal Share of Cost
- Are an Alliance Care IHSS member getting a service that has a co-payment
- Go to a provider that doesn't take the Alliance, but you tell the provider you want to be seen there anyway and that you will pay for the services yourself
- Have Medicare and Medi-Cal and:
 - » You are paying your Medicare drug co-payment
 - » You choose to see a doctor that doesn't accept Medi-Cal as your secondary insurance

But there may be times when you get a bill. Don't ignore it. Follow these steps:

- 1.** Call the phone number on the bill and ask why they sent it to you. They might not know what insurance you have.
- 2.** If you were eligible with the Alliance when you got the services, tell the provider you were an Alliance member and give them your Alliance ID number. You will find this on your Alliance card.
- 3.** Ask the provider to bill us for the service(s).

If you have done this but keep getting a bill, call Member Services. Make sure you have:

- Your Alliance ID number

- The name and phone number of the provider billing you
- The account number on the bill
- Information about the service(s) you got and the date(s) you got them
- The amount of the bill

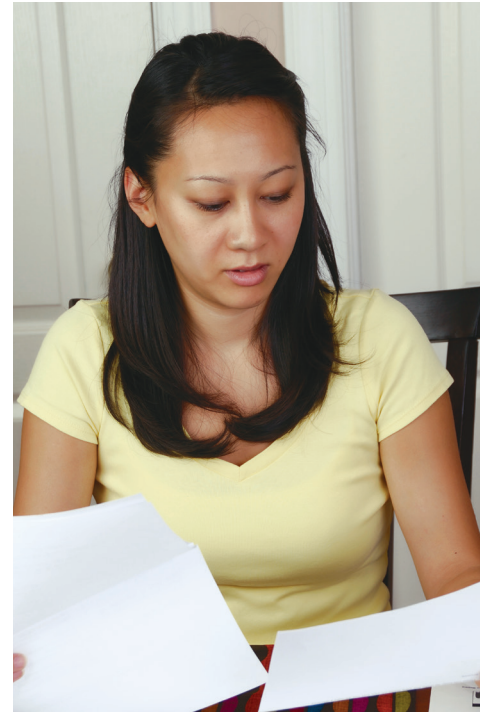
We may not be able to help you if you don't have this information. We also cannot help you with a bill that is more than one year old.

If you have other health insurance.

In most cases, your other health insurance is primary. This means that the provider bills the other insurance first before billing the Alliance. If you get a bill and have other health insurance, check to make sure the provider billed your other health insurance first.

If you get retroactive

Medi-Cal. Medi-Cal beneficiaries sometimes get eligibility after they receive medical services. The eligibility can go back to cover the services that were provided. This is called retroactive eligibility. If you are an Alliance Medi-Cal member who received retroactive eligibility, it is your responsibility to tell the provider you now have Medi-Cal. The provider will have to bill State Medi-Cal for the retroactive period, not the Alliance. Give the provider your Medi-Cal ID number so they can bill the state for the services.



Group needs assessment (GNA)

The GNA is a survey that helps us know if we are meeting the health education and cultural and linguistic needs of our Medi-Cal members.

Some of you may have received a survey in the mail or an outreach phone call asking for your help completing this survey. If you did, please take a few minutes to share your experience when accessing Alliance-covered services. Your feedback will help us improve services for all members.

If you have any questions related to the GNA survey, please call the Alliance Health Education Line at **1-800-700-3874, ext. 5580.**

Breast cancer: What you need to know

Breast cancer is the most common type of cancer and the second most common cause of cancer death in women.

About 1 in 8 women will get breast cancer at some time in their life. The risk may be higher or lower based on personal and family history.

Men also get breast cancer, but less often. About 1 man will get breast cancer for every 100 women who get breast cancer.

What increases my risk? The risk of breast cancer increases with:

- Age—however, though most women who get breast cancer are over 50, it can occur in much younger women.
- A family history of breast cancer or a family history of other cancers.
- Having had breast cancer before or having radiation to your chest area.
- Being from an ethnic group that has an increase in breast cancer genes.
- Increased use of alcohol.

What are some common signs of breast cancer?

- Any lump in the breast or armpit
- Breast or nipple pain or changes in the way your breast or nipple looks
- Nipple discharge (other than breast milk)



Finding breast cancer early can save lives. The best way to find breast cancer is by having routine mammograms.

How often should I get a mammogram screening? For women who are at lower risk of breast cancer, the American Cancer Society (ACS) advice is for women to have the choice to start screening every year as early as age 40 if they want to. Yearly mammograms should begin by age 45 and can change to having mammograms every other year at age 55.

The ACS also recommends early screening at age 35 and perhaps screening with other tests such as

magnetic resonance imaging (MRI) for women with increased risk, such as:

- Family history of cancer
- Personal history of cancer
- Having been in contact with radiation

A woman of any age who finds a breast lump, breast skin changes or abnormal liquid coming from her nipple may need a mammogram and should talk to her doctor.

To learn more about breast cancer, visit the American Cancer Society at www.cancer.org/cancer/breastcancer or the Centers for Disease Control and Prevention at www.cdc.gov/cancer/breast.