
Community Health Workers

Linkages to Health Plan Services

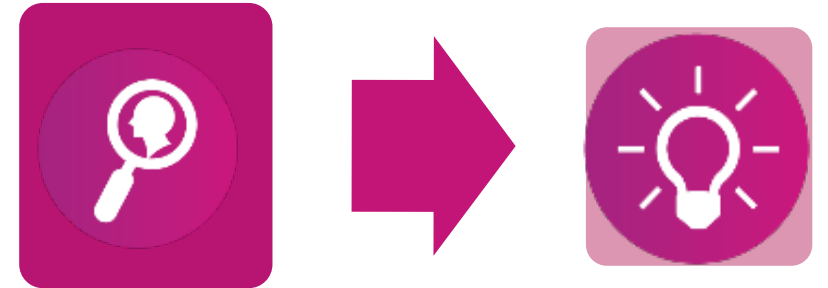
CalViva

Linkages to Health Plan Resources (CalViva)

As part of the Community Health Worker services, Health Navigation is integral to support the member by providing information, training, referrals, or support to assist Members to access health care, understand the health care delivery system, or engage in their own care.

Additional services and information can be found:

- [Community Health Worker Workflow](#)
- [CalViva Website](#)
- [CalViva findhelp](#)
- [Member Handbook](#)



Member Services toll free at 1.888.893.1569 TTY 71124 hours a day, 7 days a week.

The next slides show some examples of services and how to connect with health plan services.

Transportation Services



Travel time or distance to care

If a member needs care from a provider and that provider is located far from where they live. If CalViva Health cannot find care for you with a closer provider, you can ask CalViva Health to arrange transportation for you to go to your provider, even if that provider is located far from where they live.

Call member services at 1-888-893-1569 (TTY 711). They can help you find care with a provider located closer to the member.

If a members needs help with pharmacy providers:

Call Medi-Cal Rx at 800-977-2273 (TTY 800-977-2273 and press 5 or 711).

Transportation

ModivCare - FREE benefit service for Medi-Cal members.

The health plan covers rides to any place that offers medical care or health care services.

There is no mileage limit. Call ModivCare at 1-855-253-6864 to schedule your ride.

Hearing impaired members, call TTY: 1-866-288-3133.

For more information: <https://www.calvivahealth.org/benefits/member-resources/>

Transportation

Medi-Cal offers transportation to and from appointments for services covered by Medi-Cal.

This includes transportation to medical, dental, mental health, or substance use disorder appointments, and to pick up prescriptions and medical supplies.

There are two types of transportation for appointments:

- Non-emergency medical transportation (**NEMT**) is transportation by ambulance, wheelchair van, or litter van for those who cannot use public or private transportation. (All NEMT services require a Physician Certification Statement (PCS) form which validates the level of service).
- Non-medical transportation (**NMT**) is transportation by private or public vehicle which includes car, van, taxi, rideshare and mass transit.

Primary Care Services



Primary Care Physician (PCP)

PCP will:

- Get to know the member's health history and needs
- Keep their health records
- Give them preventive and routine health care they need
- Refer (send) them to a specialist if they need one
- Arrange for hospital care if they need it

The Provider Directory has a list of IHCPs, FQHCs and RHCs that work with CalViva Health.
If a member needs a Provider Directory, they can find the CalViva Health Provider Directory online at www.CalVivaHealth.org.

Or

They can request a Provider Directory to be mailed to them by calling 1-888-893-1569
(TTY 711).

They can also call to find out if the PCP you want is taking new patients.

The Provider Directory can also be found on

Referrals

Your PCP will start the referral process. Your PCP will know whether you need an authorization or whether you can make the appointment directly. If you have any questions about whether care from a specialist or from a hospital needs approval:

Call Member Services at 1-888-893-1569 (TTY 711).

Routine referrals take up to working days to process (“working days” are Monday through Friday), but may take up to 28 calendar days (14 days from the date of the original request plus an additional 14 days if an extension is requested) if more information is needed from the PCP.

In some cases, the PCP may ask to rush your referral. Expedited (rush) referrals, including standing referrals for a condition or disease that requires specialized medical care over a prolonged period of time and is life-threatening, degenerative, or disabling, may not take more than 72 hours. Please call CalViva Health if you do not get a response by these times.

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

Second Opinions

A member might want a second opinion about care their provider says they need or about their diagnosis or treatment plan.

For example, they may want a second opinion if they are not sure they need a prescribed treatment or surgery, or they have tried to follow a treatment plan and it has not worked.

If they want to get a second opinion, we will refer them to a qualified network provider who can give them a second opinion.

For help choosing a provider, call 1-888-893-1569 (TTY 711).

Urgent Care

For urgent care, call your PCP.

If you cannot reach your PCP, call 1-888-893-1569 (TTY 711).

Or you can call the nurse advice line by dialing the Member Services phone number 1-888-893-1569 to learn the level of care that is best for you.

If you need urgent care out of the area, go to the nearest urgent care facility.

Urgent care needs could be:

- Cold
- Sore throat
- Fever
- Ear pain
- Sprained muscle
- Maternity services

Nurse advice line

CalViva Health Nurse advice line gives members free medical information and advice 24 hours a day, every day of the year to:

- Talk to a nurse who will answer medical questions, give care advice, and help you decide if you should visit a provider right away
- Get help with medical conditions such as diabetes or asthma, including advice about what kind of provider may be right for your condition

The Nurse advice line cannot help with clinic appointments or medication refills. Call your provider's office if you need help with these.

1-888-893-1569 (TTY 711).

Women's Health Specialists



Women's health specialists

A member may go to a women's health specialist within CalViva Health network for covered care necessary to provide women's routine and preventive health care services. They do not need a referral from your PCP to get these services.

For help finding a women's
health specialist, call 1-888-893-1569 (TTY 711).

Disease Management and Health Coaching Services



Disease Management/Health Coaching

As a CalViva Health Medi-Cal member, they can become healthier by taking advantage of free resources available to them and their family.

Learn more about our free health education programs and services by calling +1-800-804-6074 TTY 711.

Diabetes Prevention Program

The Diabetes Prevention Program (DPP) is an evidence-based lifestyle change program. This 12-month program is focused on lifestyle changes and designed to prevent or delay the onset of type 2 diabetes among individuals diagnosed with prediabetes.

Members who meet criteria may qualify for a second year. The program provides education and group support. 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 CalViva Health at 1-888-893-1569 to learn more about the program and eligibility.

Sensitive Services



Adult Sensitive Services

As an adult (18 years or older), 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 the following types of care:

- Family planning and birth control (including sterilization for adults 21 and older)
- Pregnancy testing and counseling
- HIV/AIDS prevention and testing
- Sexually transmitted infections prevention, testing and treatment
- Sexual assault care
- Outpatient abortion services

For help finding a doctor or clinic giving these services, or for help getting to these services (including transportation), you can call 1-888-893-1569 (TTY 711).

You may also call the 24/7 nurse advice line by calling the Member Services phone number at 1-888-893-1569. Choose the 24-hour nurse advice line option in the menu

Minor Consent Services

If the member is under age 18, they can receive some services without a parent or guardian's permission. These services are called minor consent services.

They may get the following services without their parent or guardian's permission:

- Sexual assault services, including outpatient mental health care
- Pregnancy
- Family planning and birth control
- Abortion services

Minors can talk to a representative in private about their health concerns by calling the 24/7 nurse advice line.

Call the Member Services phone number at 1-888-893-1569(TTY 711) and choose the 24-hour nurse advice line option in the menu.

Minor Consent Services

If the member is 12 years old or older, they may also get these services without your parent or guardian's permission:

Outpatient mental health care for:

- Sexual assault
- Incest
- Physical assault
- Child abuse
- When you have thoughts of hurting yourself or others
- HIV/AIDS prevention, testing, and treatment
- Sexually transmitted infections prevention, testing, and treatment
- Substance use disorder treatment

Minors can talk to a representative in private about their health concerns by calling the 24/7 nurse advice line.

Call the Member Services phone number at 1-888-893-1569(TTY 711) and choose the 24-hour nurse advice line option in the menu.

Pregnant and Post Partum Care



Doula Services

Doula services can be provided virtually or in-person with locations in any setting including, but not limited to, homes, office visits, hospitals, or alternative birth centers. Doulas are birth workers who can help to:

- Provide health education and advocacy on behalf of the member
- Support the physical, emotional and non-medical for pregnant and postpartum persons before, during, and after childbirth, including support during miscarriage, stillbirth, and abortion.
- Assist with health navigation; lactation support; development of a birth plan; and linkages to community-based resources.

1-888-893-1569 (TTY 711).

Community Supports



Community Supports

Community Supports may be available under the member's Individualized Care Plan. Community Supports are medically appropriate and cost-effective alternative services or settings to those covered under the Medi-Cal State Plan. These services are optional for Members to receive.

If they qualify, these services may help you live more independently. They do not replace benefits that the member already has under Medi-Cal.

Community Supports (CS) are services provided by California Advancing and Innovating Medi-Cal (CalAIM), through the Department of Health Care Services (DHCS) to help improve the health of Medi-Cal members across the state.

CalViva Health will partner with CS providers who are community-based organizations with experience working directly in the community who understands the needs of members. The key goal is to allow members to receive care in locations where they feel most comfortable and keep them in their home or community.

There are 14 CS services that are optional to members and will be available at different times

• [Refer Members to CS Services Quick Reference – CalViva Health – English \(PDF\)](#)

Community Supports

Services to address homelessness and housing:

Description	Eligibility criteria
<p>Housing Transition Navigation Services: <i>Assistance with obtaining housing. This may include assistance with searching for housing or completing housing applications, as well as developing an individual housing support plan.</i></p> <p>Housing Tenancy and Sustaining Services: <i>Assistance with maintaining stable tenancy once housing is secured. This may include interventions for behaviors that may jeopardize housing, such as late rental payment and services, to develop financial literacy.</i></p> <p>Housing Deposit¹</p>	<p><i>Receives housing resources through the local homeless Coordinated Entry System or similar system; or</i></p> <p><i>Meets the Dept. of Housing and Urban Development (HUD) definition of homeless; or</i></p> <p><i>At-risk of experiencing homelessness.</i></p>

Community Supports

 **Recuperative services:**

Description	Eligibility criteria
<p>Recuperative Care (Medical Respite): <i>Short-term residential care for beneficiaries who no longer require hospitalization, but still need to recover from injury or illness.</i></p> <p>Short-Term Post Hospitalization Housing: <i>Setting in which beneficiaries can continue receiving care for medical psychiatric or substance use disorder needs immediately after exiting a hospital.</i></p>	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> <i>Exiting recuperative care or at-risk of hospitalization or are post-hospitalization; and</i> <input checked="" type="checkbox"/> <i>Meets the HUD definition of homeless.</i>
<p>Respite Services: <i>Short-term relief provided to caregivers of beneficiaries who require intermittent temporary supervision.</i></p>	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> <i>Live in the community and are compromised in their Activities of Daily Living; and</i> <input checked="" type="checkbox"/> <i>Require caregiver relief to avoid institutional placement and provide support.</i>
<p>Sobering Centers: <i>Alternative destinations for beneficiaries who are found to be intoxicated and would otherwise be transported to an emergency department or jail.</i></p>	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> <i>Individuals ages 18 and older who are intoxicated (appropriate for sobering centers); and</i> <input checked="" type="checkbox"/> <i>Transported/present to the emergency department or a jail.</i>

Services for long-term well-being in home-like settings:

Description	Eligibility criteria			
<p>Asthma Remediation: <i>Physical modifications to a beneficiary's home to mitigate environmental asthma triggers.</i></p>	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> <i>Has poorly controlled asthma in the past 12 months: An emergency department visit, hospitalization, two sick or urgent care visits, or a score of 19 or lower on the asthma control test.</i> 			
<p>Day Habilitation: <i>Programs provided to assist beneficiaries with developing skills necessary to reside in homelike settings, often provided by peer mentortype caregivers. These programs can include training on use of public transportation or preparing meals.</i></p>	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> <i>Experiencing homelessness; or</i> <input checked="" type="checkbox"/> <i>Exited homelessness and entered housing in the last 24 months; or</i> <input checked="" type="checkbox"/> <i>At-risk of homelessness or institutionalization whose housing stability could be improved.</i> 			
<p>Environmental Accessibility Adaptation: <i>Physical adaptations to a home to ensure the health and safety of the beneficiary. These may include ramps and grab bars.</i></p>	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> <i>At-risk for institutionalization in a nursing facility.</i> 			
<p>Meals/Medically Tailored Meals: <i>Meals delivered to the home that are tailored to meet beneficiaries' unique dietary needs, including following discharge from a hospital.</i></p>	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> <i>Has chronic conditions; and</i> <input checked="" type="checkbox"/> <i>Discharged from the hospital or skilled nursing facility, or at high risk of hospitalization, nursing facility placement or extensive care coordination needs.</i> 			
<p>Nursing Facility Transition/Diversion to Assisted Living Facility: <i>Services provided to assist beneficiaries transitioning from nursing facility care to community settings or to prevent beneficiaries from being admitted to nursing facilities.</i></p> <p>Community Transition Services/Nursing Facility Transition to Home: <i>Services provided to assist beneficiaries transitioning from nursing facility care to home settings in which they are responsible for living expenses.</i></p>	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> <i>Has resided in a nursing facility for 60+ days.</i> <input checked="" type="checkbox"/> <i>Is willing to live in an assisted setting as alternative to a nursing facility.</i> <input checked="" type="checkbox"/> <i>Can reside safely in an assisted living facility with support.</i> </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> OR </td> <td style="width: 45%; vertical-align: top;"> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> <i>Is interested in remaining in the community.</i> <input checked="" type="checkbox"/> <i>Is willing and able to reside safely in an living assisted living facility an with support.</i> <input checked="" type="checkbox"/> <i>Must be currently receiving necessary nursing facility services or meet the minimum criteria to receive nursing facility services.</i> </td> </tr> </table>	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> <i>Has resided in a nursing facility for 60+ days.</i> <input checked="" type="checkbox"/> <i>Is willing to live in an assisted setting as alternative to a nursing facility.</i> <input checked="" type="checkbox"/> <i>Can reside safely in an assisted living facility with support.</i> 	OR	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> <i>Is interested in remaining in the community.</i> <input checked="" type="checkbox"/> <i>Is willing and able to reside safely in an living assisted living facility an with support.</i> <input checked="" type="checkbox"/> <i>Must be currently receiving necessary nursing facility services or meet the minimum criteria to receive nursing facility services.</i>
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<p>Personal Care and Homemaker Services: <i>Services provided to assist beneficiaries with daily living activities, such as bathing, dressing, housecleaning and grocery shopping.</i></p>	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> <i>At-risk for hospitalization or institutionalization in a nursing facility; or</i> <input checked="" type="checkbox"/> <i>Individuals with functional deficits and no other support system; or</i> 			
	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> <i>Individuals approved for In-Home Supportive Services.</i> 			

Community Supports

Thank you
