

November 1, 2017

To Our Valued Customer:

RE: Changes to Mental Health and Substance Use Disorder Coverage

Please read this entire letter and attached documents as they contain important information about your Employee Assistance Plan (EAP) coverage with U.S. Behavioral Health Plan, California.¹ In accordance with the California Department of Managed Health Care requirements, the *Combined Evidence of Coverage and Disclosure Form* (“EOC”) has been amended to reflect updated disclosure language to provide an update regarding coverage of California Senate Bill 1135 and Language Assistance Program (LAP) California Senate Bill 853.² As applicable, USBHPC’s LAP also complies with the provisions of the Patient Protection and Affordable Care Act (“PPACA”) Final Rules.

Beginning **July 1, 2017**, Senate Bill (SB) 1135 requires information regarding the standards for timely access to care; including information about appointment wait times for urgent care, non-urgent primary care, non-urgent specialty care; wait times for telephone screening; and information related to availability of interpreter services at the time of the appointment. This notice is to be provided to enrollees on an annual basis and also in a separate section of the EOC, titled “Timely Access to Care.”

Senate Bill (SB) 853 requires essential elements of the LAP to include: 1) standards for enrollee³ assessment, 2) standards for provision of language assistance services, 3) standards for training USBHPC personnel, and 4) standards for monitoring compliance. The LAP provides for meeting enrollees’ needs for written and spoken language assistance in seeking health care services at all administrative and clinical points of contact.

Please ensure that your employees receive this important information concerning the terms and conditions and benefits of their health plan per the Group Subscriber Agreement, 2.4 Notices to Members. An Amendment to the EOC is enclosed and there are versions which have been translated into Spanish and Chinese.

¹ U.S. Behavioral Health Plan, California is also known as OptumHealth Behavioral Solutions of California or OHBS-CA.

² The USBHPC LAP was implemented on January 1, 2009.

³ Note: Regulations underlying the LAP refer to covered enrollees; for purposes of this document the term “enrollee” may be considered synonymous with the term “member.”

If you have any questions about this information, please contact your U.S. Behavioral Health Plan, California Strategic Account Executive (SAE).

Thank you for your continued business with U.S. Behavioral Health Plan, California.

Sincerely,

U.S. Behavioral Health Plan, California

Enclosures

Timely Access to Care

OHBS-CA has established the following standards to ensure members are able to obtain treatment in a timely manner in accordance with California Health & Safety Code § 1367.03.

Standard	Criteria	Time Frame
Non-Life-Threatening Emergency	A situation in which immediate assessment or care is needed to stabilize a condition or situation, but there is no imminent risk of harm to self or others	Members must be offered an appointment within 6 hours of the request for the appointment
Urgent	A situation in which immediate care is not needed for stabilization but, if not addressed in a timely way, could escalate to an emergency situation	Members must be offered an appointment within 48 hours of the request for the appointment
Routine (non-urgent)	A situation in which an assessment of care is required, with no urgency or potential risk of harm to self or others	Members must be offered an appointment within 10 business days of the request for the appointment
Telephone Access to OHBS-CA Representatives	<u>Triage or screening waiting time</u> : the time waiting to speak by telephone with a physician, registered nurse, or other qualified health professional acting within his or her scope of practice and who is trained to screen or triage an enrollee who may need care	Not to exceed 10 minutes during normal business hours Not to exceed 30 minutes after normal business hours

Please note:

The time for a particular, non-emergency appointment may be extended if it is determined¹ and documented that a longer waiting time will not have a detrimental impact on the member's health. Rescheduling of appointments, when necessary, must be consistent with good professional care and ensure there is no detriment to the member.

Additional Information:

- OHBS-CA expects all network providers to return calls to members within 24 hours.
- Interpreter services are available to members at the time of the appointment as requested by the member or provider. To request interpreter services, contact us at **the phone number on your EAP benefits card**. Language interpretation services are available at no cost to the member.

OHBS-CA is committed to offering clinically appropriate and timely access to care pursuant to Section 1367.03 of the California Health and Safety Code. If you are unable to obtain a timely referral to an appropriate provider, you may contact OHBS-CA for assistance by calling **us at the phone number on your EAP benefits card**. Additionally, the DMHC Help Center may be contacted at 1-888-466-2219 to file a complaint if you are unable to obtain a timely referral to an appropriate provider.

¹ An extension to the time for a non-emergency appointment may be determined by the referring or treating licensed health care provider, or the health professional providing triage or screening services, as applicable, acting within the scope of his or her practice and is consistent with professionally recognized standards of practice.

U.S. Behavioral Health Plan, California (商業名稱 OptumHealth Behavioral Solutions of California) 和 United Behavioral Health (營運品牌名稱 Optum)

California 語言協助方案

OptumHealth Behavioral Solutions of California (OHBS-CA) 和 Optum 為許多不同文化背景的會員服務。我們的會員習慣說的語言可能不是英語。我們希望絕對不要讓語言成為阻礙取得護理的理由。OHBS-CA 和 Optum 要為習慣說或閱讀的語言不是英語的會員提供免費語言協助。可以應會員或醫療護理提供者要求，在看診時為會員提供口譯服務。OHBS-CA 和 Optum 可以為會員提供口譯服務。我們也可以將特定文件進行書面翻譯。

請致電 **1-844-701-5148** 或傳送電子郵件到 clinical_ops_lap@uhc.com，告訴我們您慣用的語言。如果您已提供過相關資訊，您不需要再次與我們聯絡。此外，如果您慣用的語言是英語，也不需要打電話給我們。如需語言方面的協助，請隨時撥打您員工幫助計劃 (EAP) 福利卡上的電話號碼。

U. S. Behavioral Health Plan, California, que opera como OptumHealth Behavioral Solutions of California; y United Behavioral Health, que opera con la marca Optum

Programa de Asistencia Lingüística de California

OptumHealth Behavioral Solutions of California (OHBS-CA) y Optum prestan sus servicios a miembros de diversas culturas. Es posible que nuestros miembros hablen otro idioma que no sea el inglés. Queremos asegurarnos de que el idioma no es un obstáculo para obtener atención. OHBS-CA y Optum ofrecen asistencia gratuita en otros idiomas para miembros que hablan o leen un idioma que no sea el inglés. A solicitud del miembro o proveedor, se ofrecen servicios de intérprete para los miembros en el momento de la cita. OHBS-CA y Optum tienen intérpretes para los miembros. También podemos traducir determinados documentos por escrito.

Llámenos al **1-844-701-5148** o envíenos un correo electrónico a clinical_ops_lap@uhc.com para informarnos su idioma de preferencia. Si usted ya nos proporcionó esta información, no necesita comunicarse con nosotros nuevamente. Tampoco necesita llamarnos si su idioma de preferencia es el inglés. Para obtener ayuda con el idioma en cualquier momento, puede usar el número de teléfono que se encuentra en su tarjeta de beneficios del Programa de Asistencia a los Empleados (EAP, por sus siglas en inglés).

U. S. Behavioral Health Plan, California, doing business as OptumHealth Behavioral Solutions of California; and United Behavioral Health, operating under the brand Optum

The California Language Assistance Program

OptumHealth Behavioral Solutions of California (OHBS-CA) and Optum serve members from many cultures. Our members may speak a language other than English. We want to be sure that language is not a reason to not get care. OHBS-CA and Optum offer free language assistance for members who speak or read a language other than English. Interpreter services are available to members at the time of an appointment as requested by the member or provider. OHBS-CA and Optum have interpreters for members. We can also translate certain documents in writing.

Call us at **1-844-701-5148** or email us at clinical_ops_lap@uhc.com to tell us your preferred language. If you have already given us this information, you don't need to contact us again. Also, you don't need to call us if your preferred language is English. For help with language at any time, you may use the phone number on your Employee Assistance Program (EAP) benefits card.