



2025 Member Guide

Clever Care Value (HMO)





Welcome Valued Member

Thank you for choosing Clever Care.

We are committed to providing you with the highest quality health care. This member guide will give you an overview of the benefits included in your plan and will help you learn how to use these valuable services.

You may start using these benefits on your effective date.

Our member service representatives are available if you need help understanding your benefits or to answer any questions. Call **(833) 388-8168 (TTY: 711)** 8 a.m. to 8 p.m., seven days a week, from October 1 through March 31, and 8 a.m. to 8 p.m., weekdays, from April 1 through September 30.

Thank you for entrusting us with your health care needs. We are proud to serve you today and in the future.



A stylized, handwritten signature in black ink that reads "Richard Greene".

Richard Greene
President



New Member Checklist

☐ **Complete your Health Risk Assessment (HRA)**
Be sure to submit this form within the first 90 days of enrollment.

☐ **Schedule your Annual Wellness or Welcome to Medicare doctor visit**
An annual visit to your doctor is an important first step to staying healthy.

☐ **Fill out the Preventive Care Checklist**
Found in the middle of the booklet. Bring the completed form with you to your appointment.

☐ **Schedule Annual Vaccine and Screening Appointments**
Earn up to \$300 in rewards for practicing preventive care.

☐ **Register for the Clever Care Member Portal**
Go to members.clevercarehealthplan.com to download forms (including the HRA) and learn about your benefits.



Your Plan Documents

All plan documents are available on our website.

Evidence of Coverage (EOC)

The EOC details the plan coverage, how much you pay, and more. Visit clevercarehealthplan.com/eoc

Provider Directory

Our search tool allows you to look up PCPs, specialists, and facilities. Visit clevercarehealthplan.com/provider

Pharmacy Directory

Find pharmacy locations that are in the Clever Care network. Visit clevercarehealthplan.com/pharmacy

Formulary (List of Covered Drugs)

Look up generic or brand name drugs to see if they are covered under your plan and how much you will pay. Visit clevercarehealthplan.com/formulary

For help or to request a printed copy of one of these documents be mailed to you, please call us at **(833) 388-8168 (TTY: 711)**.

Managing Your Medical Care

When you enrolled in Clever Care, you selected a Primary Care Physician (PCP). All medical care must be coordinated by your PCP; otherwise, you will be responsible for the cost of treatment.

Member ID Card

The ID card has your PCP, Medical Group, and other important plan information. Show your card whenever you receive care or pick up prescription medicine.

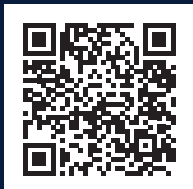
Receiving Medical Care

For Preventive Care

Contact the PCP listed on your ID card to schedule your **Welcome to Medicare** or **Annual Visits**. The doctor will also be the one to call if you are sick or need treatment.

For Specialist Care

If needed, your PCP will arrange for you to see an in-network specialist.



Find a Provider

Search our network of contracted doctors, specialists, hospitals and more.



Being Prepared for the Unexpected

Should a medical emergency arise, you will need to have important documents ready so doctors know to what extent they can provide care. We provide Health Care Management forms, like Advance Directive, Appoint a Representative, and more. Visit members.clevercarehealthplan.com and click **Member Forms**.

Front of the card

This is the name of the plan you are enrolled in.

 **Clever Care**
HEALTH PLAN

Clever Care Value (HMO)
EFFECTIVE DATE: **01/01/25**
PCP EFFECTIVE DATE: **01/01/25**

MEMBER NAME
John A. Smith

MEMBER ID
000-000-0000
Health Plan (80840)

PCP NAME
Brandon Lee MD
(555) 555-5555
MEDICAL GROUP/NETWORK
Acme Medical Partners

COPAYMENTS (\$0 if Full Medi-Cal)
PCP VISIT: **\$0**
SPECIALIST VISIT: **\$5**
URGENT CARE: **\$0**
ER: **\$125**

Medicare^{Rx}
Prescription Drug Coverage

RxBIN: **015574**
RxPCN: **ASPROD1**
RxGRP: **CLC01**

H7607 011-001

This number identifies you as a member of our plan.

These are the cost of services for the plan.

Note: Full Medi-Cal members will have all \$0 copays.

Back of the card

This has our Member Services phone number and other information that is helpful to you and your doctor.

IN AN EMERGENCY CALL 911 OR GO TO THE NEAREST ER

MEMBER SERVICES
(833) 388-8168 (TTY: 711)
clevercarehealthplan.com
24-hour Nurse Line: (800) 396-1961
Telehealth: (800) 835-2362
Dental: DentaQuest (800) 608-9542
Hearing: NationsHearing (866) 304-7577
Vision: (855) 492-9028
Transportation: CareCar (844) 743-4344

PHARMACY HELP DESK & CLAIMS
(800) 926-3004
MedImpact Healthcare Systems
P.O. Box 509108, San Diego, CA 92150

HOSPITAL ADMIT AUTH & TRANSFER
(888) 888-8888

PRIOR AUTHORIZATION
(800) 800-8080

PROFESSIONAL CLAIMS
NOBLE AMA IPA
1234 Main St, Suite 100
Small Town, CA 90210

INSTITUTIONAL CLAIMS
Prospect Health
456 Elm Dr, Suite 200
Big Town, CA CA

Printed: 01/01/25

Getting Care When You Can't See Your PCP

We offer options for you to get medical help and advice when you can't see your doctor and need non-emergency treatment. Any of the non-emergency options below are useful if you have a:

- Fever, cold, or flu
- Sinus infection
- Ear infection

Getting Care in a Non-Emergency

24-hour Nurseline

A registered nurse is available 24 hours a day, seven days a week, to provide advice or answer medical questions or concerns about symptoms you are experiencing. Call 1-800-396-1961 (TTY: 711).

Teladoc®

Teladoc board-certified doctors and mental health professionals are available by phone or video to consult, diagnose, and treat basic medical conditions and prescribe some medications. To schedule an appointment, call 1-800-TELADOC (1-800-835-2362).

Download the Teladoc App or visit teladoc.com/register.
Registration is required for your first use.

Urgent Care

Go to an urgent care center for situations that need immediate attention but are not life-threatening. These centers are typically used if it is after hours, and your PCP is not available. Urgent care is a good option if you have a minor sprain or broken bone.

MinuteClinic™

MinuteClinics™ are walk-in health care services staffed by nurse practitioners and physician assistants. You can often find MinuteClinics™ inside CVS/pharmacy stores.



Getting Care in an Emergency

Emergency Room (ER)

Go to the nearest Emergency facility or **call 911**. If you experience a life-threatening medical emergency:

- Allergic reaction
- Head or eye injury
- Shortness of breath
- Sudden chest pain
- Severe bleeding or broken bones

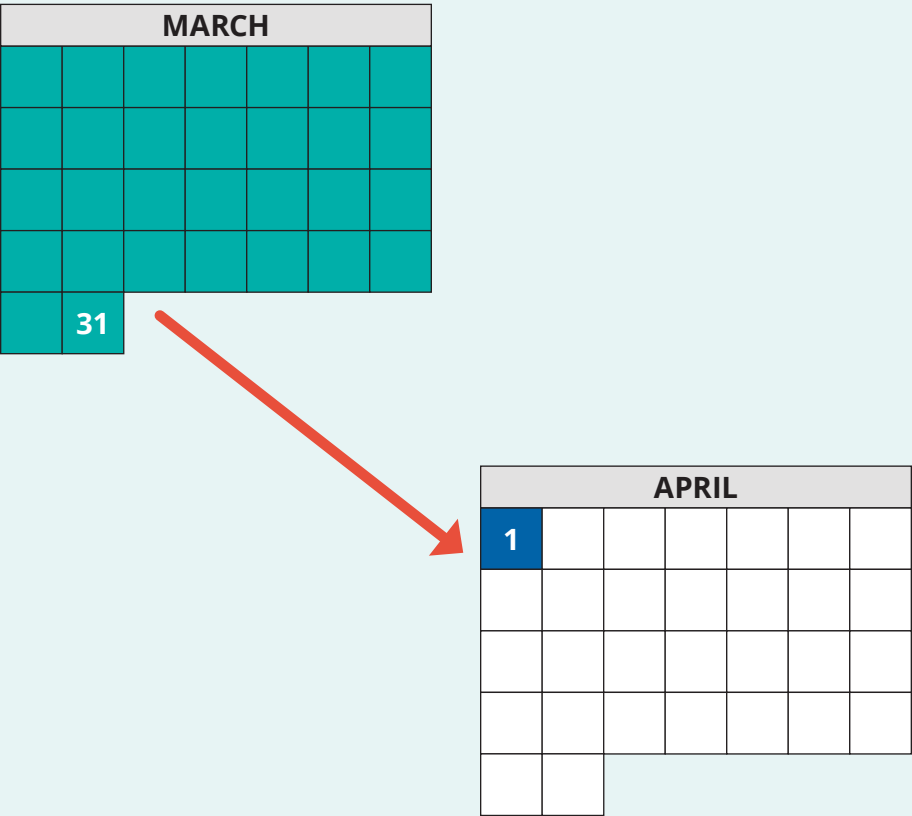
Notify Clever Care about your emergency within 48 hours.
We need to be involved with coordinating your care.



How to change your PCP or Medical Group

You may change your PCP or Medical Group at any time. To change your PCP call Member Services or do it yourself on the Member Portal. A new ID card will be mailed to you 5–7 business days after your request.

- 1. The request must be received **on or before the last day** of the month.
- 2. The change will take effect on the **first day of the next month**.



KEY:

Change request date

1

Effective date

Benefits at a Glance

This is a summary. For a complete description of benefits, cost-sharing, exclusions, and limitations refer to your **Evidence of Coverage (EOC)**.

 Premium \$0 Part B Rebate \$105–\$110 per month, varies by county*	 PCP Visit \$0 copay Specialist Visit \$5 copay
 Deductible \$0	 Inpatient Hospital Stay \$100 days 1–5 \$0 days 6–90
 Out of Pocket Maximum \$2,900	 Urgent Care \$0 copay  Emergency Room \$125 copay

Prescription Drugs: 30-Day Retail

\$0 copay	Tiers 1, 6
\$5 copay	Tier 2
\$47 copay	Tier 3
\$99 copay	Tier 4
33% coinsurance	Tier 5

* Los Angeles, Orange: \$110 per month; Riverside, San Bernardino, San Diego: \$105 per month.

Benefits for Members with Chronic Conditions



Grocery Allowance

\$25 per month, no rollover

Members diagnosed with a qualifying chronic condition, listed below, may be eligible for a monthly grocery allowance.

- Autoimmune disorders
- Cancer
- Cardiovascular disorders
- Chronic alcohol or drug dependency
- Chronic and disabling mental health conditions
- Chronic heart failure
- Chronic lung disorders
- Dementia
- Diabetes
- End-stage liver disease
- End-stage renal disease
- Severe hematologic disorders
- HIV/AIDS
- Neurologic disorders
- Stroke

What you need to know:

- \$25 is loaded onto the flex benefit card on the first day of each month.
- Any remaining balance at the end of the month **will not** rollover to the following month.
- Healthy food items at grocery stores are covered. Non-food items such as napkins, cleaning supplies, alcohol, and cigarettes are not eligible.
- The grocery allowance can be used anywhere that the flex benefit card is accepted.
- Stores include Aldi, Albertsons, Food 4 Less, H-Mart, Ralphs, Safeway, Trader Joes, TS Emporium, Vons, Walmart, and many ethnic supermarkets.
- For a full list of participating stores and to check your card balance go to the **Benefits Pro™ Portal** at **CleverCare.NationsBenefits.com** or the **Benefits Pro™ App**.

The grocery benefit is a part of a special supplemental program for the chronically ill (SSBCI). Not all members will qualify. See pages 16–19 for details on how to use the flex benefit card.



Eastern Medicine Benefits

It is important to talk to your doctor before starting eastern wellness treatments or acupuncture services. Refer to the Clever Guide to Eastern Medicine for details on each service.

Visit clevercarehealthplan.com/eastern-medicine



Acupuncture

\$0 copay up to **\$1,000** per year

What you need to know:

- You must obtain acupuncture from a Clever Care contracted and licensed acupuncturist.
- No referral or prior authorization is required.



Eastern Wellness

\$0 copay up to 12 visits per year

Eastern wellness services included in your Clever Care plan:

- Cupping
- Tui Na and Gua Sha massage therapy
- MedX
- Reflexology

What you need to know:

- You must obtain Eastern wellness services from a Clever Care contracted and licensed acupuncturist.
- No referral or prior authorization is required.

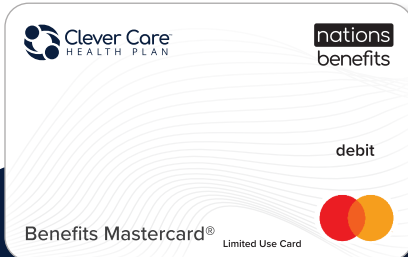
Health & Wellness Flex Benefit Card



Benefit Allowance

\$50 quarterly, no rollover

Your health your way! With the Clever Care flexible health and wellness allowance, you can decide how and where to spend it.



All Members will receive a new Benefits Mastercard® by January 1st or within two weeks after enrollment

How to use your flex benefit card

1. Activate your new card by calling **(877) 205-8005**.
2. Login to your account at **CleverCare.NationsBenefits.com** and track your card balance.
3. Be sure to select **CREDIT** when making a purchase.

What you need to know:

- Allowance amounts are added to your flex benefit card quarterly (January 1, April 1, July 1, and October 1).
- Unused balance **will not** carry over to the next quarter.
- You are responsible for all costs over the allowance amount.

The Benefits Mastercard® Prepaid Card is issued by The Bancorp Bank N.A., Member FDIC, pursuant to license by Mastercard International Incorporated and card can be used for eligible expenses wherever Mastercard is accepted. Mastercard and the circles design is a trademark of Mastercard International Incorporated. Valid only in the U.S. No cash access. This is not a gift card or gift certificate. You have received this card as a gratuity without the payment of any monetary value or consideration.

Where to Use Your Flex Benefit Card

Your flexible benefit **quarterly allowance** can help pay for fitness activities, OTC items, and herbal supplements.

Fitness

Improve your body, balance, and mind by joining a gym, playing golf, or doing a fitness activity. Participating locations may vary, and restrictions apply. Some locations include: 24 Hour Fitness, CorePower Yoga, Esporta Fitness, LA Fitness, YMCA, Los Angeles City Golf Courses, Oceanside Golf Course and more.

Over-the-Counter Benefit (OTC)

Purchase non-prescription medications, including pain relievers, allergy treatments, and other qualified items from the OTC Product Catalog or an approved, participating store including, CVS/Pharmacy, Rite Aid, Walgreens, Walmart Pharmacy, and more.

OTC Product Catalog:
clevercarehealthplan.com/flexbenefits

Participating locations:
CleverCare.NationsBenefits.com

Important to know:

- Purchases should be made 48 hours prior to the last day of the month to ensure funds are pulled from the current quarter.
- Each vendor has their own return policy. Any return must be initiated no later than the 25th day of March, June, or September.
- Credit is only given to items returned within the same quarter they were purchased.



Herbal Supplements

Use your flexible benefit allowance to purchase herbal supplements like Red Ginseng, Bird's Nest, White Flower Oil and more:

- By mail through submitting an order form available in the OTC Product Catalog or through other locations. Order forms are available on the Clever Care Member Portal at members.clevercarehealthplan.com
- At participating retail locations such as: TS Emporium, Hansamin, Nam Bac Hang, WAH-FUNG 2016 INC, Kunbo Inc, and Tai Shang Hong.
- To see more locations use the store finder tool on the **Benefits Pro™ Portal** or on the **Benefits Pro™ App**.

Ordering OTC and Herbal Supplements has never been easier



Benefits Pro™ Portal



To place an order through the Benefits Pro™ Portal, scan the QR code using your smartphone camera or visit CleverCare.NationsBenefits.com



Benefits Pro™ App



To place an order through the Benefits™ Pro App, scan the QR code using your smartphone or search “**Benefits Pro**” in the App Store® or Google Play®

The products and claims made about specific herbal supplement products purchased through the Clever Care Flexible Health & Wellness benefit or our Reward & Incentive programs have not been evaluated by the United States Food and Drug Administration and are not approved to diagnose, treat, cure or prevent disease. Some herbal supplements may cause interactions with your prescribed medications. Please consult with your clinician or doctor.

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My Preventive Care Checklist

Prepare for your Welcome to Medicare or Annual Wellness visit by completing this form. Bring it with you to your appointment to discuss with your doctor. It is important that you have an annual visit with your doctor.

Name: _____

Appointment date: _____

PCP Name: _____

Know your numbers

Blood pressure: _____ / _____ Body mass index (BMI): _____

Overall cholesterol value: _____ Blood sugar (A1c): _____

Cholesterol (LDL value): _____ Cholesterol (HDL value): _____

Review current medications

Drug: _____ Dosage: _____ Frequency: _____

Drug: _____ Dosage: _____ Frequency: _____

Drug: _____ Dosage: _____ Frequency: _____

Drug: _____ Dosage: _____ Frequency: _____

Drug: _____ Dosage: _____ Frequency: _____

Drug: _____ Dosage: _____ Frequency: _____

Drug: _____ Dosage: _____ Frequency: _____

Appointments

Preventive care	_____	_____
Routine eye exam	_____	_____
Dental exam/cleaning	_____	_____
Hearing test	_____	_____

Screenings

Colorectal	_____	_____
Diabetes:		
Retinal eye exam	_____	_____
A1c	_____	_____
Kidney	_____	_____

Women:

Breast cancer	_____	_____
Bone density	_____	_____

Vaccinations

	Last Appointment	Next Appointment
Flu	_____	_____
Pneumonia	_____	_____
COVID-19	_____	_____

Notes:



Pharmacy Benefits

What you need to know:

- Get prescriptions filled at any participating pharmacy, including local independent pharmacies, CVS, Rite Aid, and Walgreens.
- You have a \$0 copay for all Tier 1 preferred generic drugs and Tier 6 select care drugs, like prescription cough medicine and vitamins.
- You will not pay more than \$35 for a 30-day supply of insulin drugs.

Financial help for prescriptions

People with limited incomes may qualify for Extra Help, a program to help pay for their prescription drug costs. To see if you qualify for Extra Help, call:

- 1-800-MEDICARE (1-800-633-4227). TTY users should call (877) 486-2048, 24 hours a day, seven days a week;
- The Social Security office at (800) 772-1213 between 7 a.m. and 7 p.m., Monday through Friday. TTY users should call (800) 325-0778; or
- Your state Medicaid office.



Mail-Order Pharmacy

BirdiRx is our full-service, mail-order pharmacy. This free service is a convenient way to fill most prescriptions, up to a 100-day supply. Save money and skip the line at the local pharmacy.

Sign up today and start saving time and money!

1. Create your member profile at **birdirx.com** and click "Get Started."
2. Ask your doctor to send your 100-day prescription directly to **BirdiRx**.
3. **BirdiRx** will help transfer your prescriptions to their service.

If you have questions, call Birdi at 1-855-873-8739 Monday – Friday 5:00 a.m. – 5:00 p.m., Saturdays 6:00 a.m. – 10:00 a.m. Pacific Time. They are closed on Sundays.

What you need to know:

- Free shipping takes 3–5 days for delivery.
- Track your prescriptions and order history using their website (**birdirx.com**).
- A notification reminder will be sent to you so that you can place your refill order by signing into their website.
- You can authorize another person or family member as your 'representative,' which allows **BirdiRx** to share your information.

Supplemental Benefits



PPO Dental

\$200 quarterly allowance, with rollover

You pay **\$0** up to the allowance amount for dental services, including:

Preventive:

- Oral exam(s)
- Cleaning(s)
- Dental X-ray(s)
- Fluoride treatment

Comprehensive:

- Deep teeth cleanings
- Fillings and repairs
- Root canals
- Dental crowns
- Implants
- Bridges, dentures, extractions

What you need to know:

- You can go to *any* dentist of your choice. If you go to a **DentaQuest** dentist, your out-of-pocket cost may be lower.
- Allowance amounts are paid quarterly and **will** roll over to the next quarter.
- You are responsible for costs over the allowance and/or the plan-allowed amount for out-of-network services.
- Prior authorization is required for implants.
- A referral, limitations and exclusions apply for select comprehensive services.
- Excludes orthodontia.



Vision

\$200 annual eyewear allowance

What you need to know:

- You pay **\$0** for one routine eye exam a year.
- Use your allowance to pay for frames, lenses, or contacts.
- You are responsible for all costs over the allowance amount.
- You must receive care and services from a **VSP** provider.

To find an eye doctor, visit clevercarehealthplan.com/provider



Hearing

\$600 per ear hearing aid allowance, per year

What you need to know:

- You pay **\$0** for a routine hearing exam.
- You pay **\$0** for evaluation and fitting for hearing aids.
- Use your allowance to pay for hearing aids each year.
- You are responsible for all costs over the allowance amount.
- You must receive care from a **NationsHearing** provider.

To schedule a hearing test, call **NationsHearing** at (866) 304-7577 (TTY: 711), Monday – Friday, 8 a.m. – 8 p.m. Pacific time. Or go to clevercare.nationsbenefits.com

IMPORTANT REMINDER:

Any unused Dental, Vision, or Hearing allowance amounts will expire on December 31, 2025.

Supplemental Benefits (Cont'd)



Transportation

16 one-way trips per year

This plan covers non-emergency medical transportation rides through **CareCar**.

What you need to know:

- Schedule a ride by calling **(844) 743-4344** or go online to getcarecar.com
- Rides are one-way and have a maximum of 30 miles per trip.
- CareCar can accommodate wheelchair or gurney transport. Request at least 48 hours in advance.
- Trips scheduled under 24 hours are fulfilled to the best of CareCar's ability and not guaranteed.





Personal Emergency Response System (PERS)

\$0 copay for device and service



This monitoring device will connect you to 24-hour emergency response at the push of a button.

What you need to know:

- This device is good to have, especially if you live alone or are at risk of falling.
 - You pay \$0 for the device and service.
- To request a PERS unit call Connect America at (877) 909-4047 (TTY: 711) or visit clevercare.connectamerica.com



Post-discharge meals

Up to 84 meals per year



Medically tailored and culturally inspired meals are available immediately following an inpatient hospital or skilled nursing facility stay. Outpatient surgery visits are excluded.

What you need to know:

- Meal service may be coordinated by you or a designated family member at the time of discharge.
- If you have questions about this service please call Member Services at **(833) 388-8168 (TTY: 711)**.



Member Rewards and Incentives



Actions that promote improved health and prevent injuries and illness deserve to be rewarded.

What you need to know:

- Rewards amount will be added to your flex benefit card.
- Use your rewards to purchase qualifying grocery items, OTC items, herbal supplements, and/or fitness activities.
- Rewards can be spent at hundreds of participating locations. For a full list of participating stores go to the Store Finder tool on the **Benefits Pro™ Portal** or the **Benefits Pro™ App**.

Important to know:

- Submit a completed verification form to Clever Care, signed by your PCP. Find the form on the **Member Portal** at members.clevercarehealthplan.com
- Limit of one reward per activity during the current benefit year.
- You will have until December 31, 2026 to redeem your 2025 rewards.

Complete any combination of the following preventive health activities and earn up to \$300 in rewards.

Activities to Complete	Reward
Welcome to Medicare or Annual Wellness Visit	\$25
Health Risk Assessment or Social Needs Screening (within 90 days of enrollment)	\$20
PCP Care Planning Discussion	\$25
PCP Visit within 7 days of an ER Visit	\$25
Post-hospitalization Visit with PCP within 30 Days of Inpatient Discharge	\$25
Fall Risk, Incontinence, and Physical Activity Assessment	\$25
Flu Vaccination	\$10
Controlling Blood Pressure	\$10
Diabetic Eye Exam	\$30
HbA1c, uACR, and eGFR Screening	\$30
Mammogram	\$25
Colon Cancer Screening (complete only one)	
Colonoscopy	\$50
Other Colorectal Cancer Screening	\$25

Reward Form
Member Portal:
members.clevercarehealthplan.com

Store Locations
Benefits Pro™ Portal:
CleverCare.NationsBenefits.com



Our commitment to you

Notice of Privacy Practices

Clever Care Health Plan, Inc. (Clever Care) is required by law to protect the privacy of your health information. We are also required to send you this notice, which explains how we may use information about you and when we can give out or “disclose” that information to others. You also have rights regarding your health information that is described in this notice. We are required by law to abide by the terms of this notice.

We will provide you with this information either by direct mail or electronically, in accordance with applicable law. If we maintain a website for your particular health plan, we will post the revised notice on our website, members.clevercarehealthplan.com.



We reserve the right to make any revised or changed notice effective for information we already have and for information that we receive in the future. Clever Care collects and maintains oral, written, and electronic information to administer our business and to provide products, services, and information of importance to our enrollees. We maintain physical, electronic, and procedural security safeguards in the handling and maintenance of our enrollees' information, in accordance with applicable state and federal standards, to protect against risks such as loss, destruction, or misuse.

Member Rights & Responsibilities

Your Rights as a Clever Care Member

You have the right to receive information in a way that meets your needs, is secure, and promotes transparency and quality of treatment. Your rights include but are not limited to:

- Being treated with fairness, respect, and dignity
- Materials available in alternate languages and formats
- Timely access to covered services and drugs
- Confidence that your personal health information is protected
- Making recommendations about Clever Care's member rights and responsibilities policies
- Knowing your treatment choices and participating in decisions about your healthcare
- Appealing medical or administrative decisions Clever Care has made by using the appeals and grievance process
- The ability to make complaints about Clever Care or the care provided and feel confident it will not affect the way you are treated

Member Responsibilities

As a member of Clever Care, you have the responsibility to:

- Become familiar with your coverage and the procedures you must follow to get care as a member
- Tell your PCP and other healthcare providers that you are enrolled in Clever Care and if you have other coverage
- Give your PCP and other providers complete and accurate information to care for you; then, follow the treatment plans and instructions that you agree upon with your providers.

Our full notice of privacy practices, and member rights and responsibilities are provided in the Evidence of Coverage (EOC) or at clevercarehealthplan.com/eoc.

We must use and disclose your health information to provide that information:

- To you or someone who has the legal right to act for you (your personal representative) in order to administer your rights as described in this notice; and
- To the Secretary of the Department of Health and Human Services, if necessary, to make sure your privacy is protected.

We have the right to use and disclose health information for your treatment, to pay for your health care and to operate our business. For example, we may use or disclose your health information:

- For Payment, For Treatment, For Health Care Operations, To Provide You Information on Health-Related Programs or, For Plan Sponsors, For Underwriting Purposes, For Reminders

We may use or disclose your health information for the following purposes under limited circumstances:

- As Required by Law, To Persons Involved With Your Care. For Public Health Activities, For Reporting Victims of Abuse, Neglect or Domestic Violence, For Health Oversight Activities, For Judicial or Administrative Proceedings, For Law Enforcement Purposes, To Avoid a Serious Threat to Health or Safety, For Specialized Government Functions, For Workers' Compensation, For Research Purposes, To Provide Information Regarding Decedents, For Organ Procurement Purposes, To Correctional Institutions or Law Enforcement Officials, To Business Associates

If a use or disclosure of health information described above in this notice is prohibited or materially limited by other laws that apply to us, it is our intent to meet the requirements of the more stringent law.

Fraud Waste & Abuse (FWA)

You Can Help Prevent Health Care Fraud.

The National Health Care Anti-Fraud Association (NHCAA) estimates that about \$100 million is lost from health care fraud each day! You can help Clever Care to prevent, detect, and correct health care fraud by reporting any suspicious activity. When you report a situation that may be potential health care fraud, waste, and abuse, you're doing your part to help save money to make our health care system better.

What is Health Care Fraud, Waste and Abuse?

Fraud occurs when someone knowingly and willfully submits a false claim that results in inappropriate payments.

Examples: Billing for services not rendered, falsifying a patient's diagnosis to justify unnecessary procedures, or accepting kickbacks for patient referrals.

Waste is overuse of services or other practices that, directly or indirectly, results in unnecessary medical costs. This includes the misuse of resources which is not generally considered a criminally negligent action.

Examples: Ordering excessive diagnostic tests, overuse of office visits, or a pharmacy sending medications to members without confirming they still need them.

Abuse is an action that may result in unnecessary medical costs. When a person or entity unknowingly or purposely misrepresents fact to obtain payment, this is abuse.

Examples: Charging in excess for services or supplies, providing medically unnecessary services, or going to different doctors or emergency rooms to obtain pain medication.

What can I do to prevent fraud?

- Protect your Clever Care Member ID card like you would a credit card. Be careful about disclosing your personal information. If you lose your ID card, report it to us immediately.
- If you suspect you may be a victim of health insurance fraud, report it immediately.

- Be informed about the health care services you receive, keep good records of your medical care, and review your explanation of benefits (EOB) routinely. Report any services you do not think you received.
- Beware of “free” offers. Offers of free health care services, tests, or treatments are often fraud schemes designed to bill you and your insurance company illegally for treatments you never received.

Why am I getting calls about a survey?

Clever Care is committed to making sure that you receive the best care and that doctors are providing quality services. We sometimes conduct surveys so we can get feedback from members on how we can improve the benefits we offer. The survey is optional to you.

What if a provider is billing me for services that I thought were covered under my insurance?

If you are being billed for services that should have been covered, please give our Member Services a call. They can help you to determine who should be responsible for paying the bill.

How can I help if I have questions or suspect FWA?

Contact Member Services at (833) 388-8168 (TTY: 711). Hours are 8 a.m. to 8 p.m., seven days a week, from October 1 through March 31, and 8 a.m. to 8 p.m., weekdays, from April 1 through September 30. Messages received on holidays or outside of our business hours will be returned within one business day. Member Services can help you with explaining bills, claims and coverage.

Non-Discrimination and Accessibility Requirements

Discrimination is Against the Law

Clever Care Health Plan Inc. (herein referred to as Clever Care) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity). Clever Care does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity). Clever Care:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, please call (833) 388-8168 (TTY: 711).

If you believe that Clever Care has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity), you can file a grievance with:

Clever Care Health Plan
Attn: Civil Rights Coordinator
7711 Center Ave
Suite 100
Huntington Beach, CA 92647

E-mail:
civilrightscordinator@ccmapd.com

Fax:
(657) 276-4721

You can file a grievance by mail, fax, or email. If you need help filing a grievance, our Clever Care Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically

through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, D.C. 20201, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at hhs.gov/ocr/office/file/index.html.

Multi-language Interpreter Services

English: We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at (833) 388-8168 (TTY: 711). Someone who speaks English/Language can help you. This is a free service.

Español (Spanish): Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al (833) 388-8168 (TTY: 711). Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin: 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 (833) 808-8153 (TTY: 711) (普通话)。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Cantonese: 您對我們的健康或藥物保險可能存有疑問，為我們提供免費的翻譯服務。如需翻譯服務，請致電 (833) 808-8161 (TTY: 711) (粵語)。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

Tagalog: Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggagamot. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa (833) 388-8168 (TTY: 711). Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French: Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au (833) 388-8168 (TTY: 711). Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese: Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương trình sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi (833) 808-8163 (TTY: 711) sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

German: Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelpflichtplan. Unsere Dolmetscher erreichen Sie unter (833) 388-8168 (TTY: 711). Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean: 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 (833) 808-8164 (TTY: 711) 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Russian: Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону (833) 388-8168 (TTY: 711). Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Hindi: हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं। एक दुभाषिया प्राप्त करने के लिए, बस हमें (833) 388-8168 (TTY: 711) पर फोन करें। कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है। यह एक मुफ्त सेवा है।

Italian: È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero (833) 388-8168 (TTY: 711). Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

Português: Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número (833) 388-8168 (TTY: 711). Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole: Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan (833) 388-8168 (TTY: 711). Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish: Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer (833) 388-8168 (TTY: 711). Ta usługa jest bezpłatna.

Japanese: 当社の健康 健康保険と薬品 処方薬プランに関するご質問に
お答えするため に、無料の通訳サービスがあります。通訳をご
用命になるには、(833) 388-8168 (TTY: 711) にお電話ください。日本語を
話す人 者が支援いたします。これは無料のサー ビスです。

Khmer: យើងមានសេវាកម្មបកប្រែដោយឥតគិតថ្លៃដើម្បីឆ្លើយសំណួរទាំងឡាយ
ណាដែលអ្នកមានស្នំអំពី គម្រោងសុខភាព ឬឱសថរបស់យើង។ ដើម្បីទទួលបាន
អ្នកបកប្រែ សូមទូរស័ព្ទមកយើងតាមរយៈលេខ (833) 388-8168 (TTY: 711) ។
អ្នកនិយាយភាសាខ្មែរណាម្នាក់អាចជួយអ្នកបាន។ នេះគឺជាសេវាកម្មឥតគិតថ្លៃ។

Thai: เรามีบริการล่ามฟรีเพื่อตอบคำถามที่คุณอาจมีเกี่ยวกับสุขภาพหรือยาของ
เรา หากคุณต้องการล่ามแปลภาษาไทย เพียงโทรหาเราที่ (833) 388-8168 (TTY:
711) บุคคลที่พูดภาษาอังกฤษสามารถช่วยคุณได้ นี่คือการบริการฟรี

Arabic: إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة
أو جدول الأدوية لدينا. للحصول على مترجم فوري، ليس عليك سوى الاتصال بنا على
(833) 388-8168 (TTY: 711). سيقوم شخص ما يتحدث العربية بمساعدتك. هذه
خدمة مجانية.



Clever Care Member Services

English:

(833) 388-8168 (TTY: 711)

普通話:

(833) 808-8153 (TTY: 711)

廣東話:

(833) 808-8161 (TTY: 711)

Tiếng Việt:

(833) 808-8163 (TTY: 711)

한국어:

(833) 808-8164 (TTY: 711)

Español:

(833) 388-8168 (TTY: 711)

Hours of Operation

October 1 – March 31

8 am – 8 pm, 7 days a week

April 1 – September 30

8 am – 8 pm, Mon – Fri

Keep your member information accurate

Notify Clever Care if you have a new address, telephone number, or any other change to your personal account information.

Other Provider Information

VSP Vision Care	(855) 492-9028
DentaQuest	(800) 608-9542 (TTY: 800-466-7566)
NationsHearing	(833) 388-8168 (TTY: 711)
CareCar (transportation)	(844) 743-4344 (TTY: 711)
BirdiRx (mail-order pharmacy)	(855) 873-8739 (TTY: 711)
NationsBenefits	(833) 388-8168 (TTY: 711)

Clever Care Health Plan, Inc. is an HMO and an HMO C-SNP plan with a Medicare contract. Enrollment depends on contract renewal. Our provider and pharmacy network may change at any time. You will receive notice when necessary. Participating store locations for the flex benefit card are subject to change.