



San Mateo County Access and Care for Everyone (ACE) Program Fee Waiver Quick-Start Guide



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WELCOME TO HEALTH PLAN OF SAN MATEO (HPSM)

Dear ACE Program Participant,

Welcome to the San Mateo Access and Care for Everyone Program (ACE). ACE is a San Mateo County health coverage program managed by the Health Plan of San Mateo (HPSM). You have been automatically enrolled in the San Mateo County ACE Fee Waiver Program. That is because your Restricted Medi-Cal coverage is active. ACE Fee Waiver covers most services not covered by Restricted Medi-Cal.

It covers health care services such as:

- **Doctor and hospital visits**
- **Prescription drugs**
- **Eye care**
- **Preventive care – including check-ups, screenings, tests, immunizations and other office visits with a primary care provider (PCP) clinic**

This guide will help you start using the ACE program. An online version is available on HPSM's website at hpsm.org/ace-guide. More information can be found online at hpsm.org/ace.

You can also order print copies of the San Mateo County ACE Participant Handbook by mailing the card included with your Welcome Packet. If you have questions about the ACE program or anything in this guide, call HPSM Member Services at 650-616-2133 or 1-800-750-4776. TTY: call 1-800-735-2929 or 7-1-1. Representatives are available Monday to Friday from 8am to 6pm.

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HOW TO CONTACT HPSM

Call HPSM Member Services if you:

- Have questions about your benefits or anything in this guide
- Want help finding a doctor or getting an appointment
- Are dissatisfied with the quality of care or service you receive
- Would like to request printed member materials

Local 650-616-2133	Toll-free 1-800-750-4776	TTY 1-800-735-2929 or 7-1-1
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FOUR STEPS TO A HEALTHY START!

As a participant in the San Mateo County ACE program, you have access to a wide range of health care services. Want to start using them? Just take these four simple steps!

1

Choose a primary care provider (PCP) clinic. This doctor will lead your care team. If you need to see a specialist, they will give you a referral. To choose a PCP, use our online Provider Directory at hpsm.org/ace-clinics. Complete the PCP change form and return it with the envelope provided. Your selected PCP will be added to your records.

2

Call your PCP clinic to schedule an appointment within the next two months. Do this even if you are healthy. Your PCP will give you a health exam to review your health concerns and find out what kind of care you need.

3

Find out how to get your medications. Search our online formulary at hpsm.org/ace-drugs or ask a pharmacist. If your medications need prior authorization, call your doctor to get the authorization.

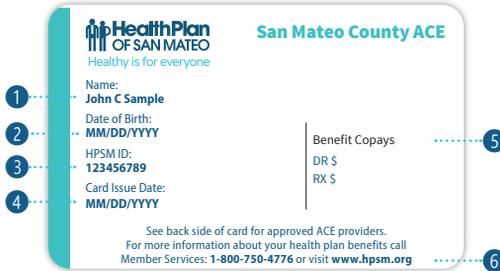
4

Find out how to get your medical supplies. If you use durable medical equipment (DME), talk to your doctor to see if you need prior authorization. Or call HPSM Member Services (see page 1 for contact information).

YOUR MEMBER ID CARD

Your **San Mateo County ACE ID card** is proof of that you are a program participant. Key information includes:

FRONT



- 1 Member name
- 2 Date of birth
- 3 Member ID number
- 4 Card issue date
- 5 Drug benefit info
- 6 Member Services phone number

BACK



- 1 Emergency instructions
- 2 Nurse Advice Line phone number
- 3 Drug benefits contact info
- 4 Listing of ACE Providers

PROGRAM SERVICES

The San Mateo County ACE program gives you access to a range of health care services.

Below is an overview of what you get. Check our website at hpsm.org/ace, where you can also:

**SEE A LIST OF ACE CLINICS
WHERE YOU CAN GET CARE
and choose one as your
primary care provider**

hpsm.org/ace-providers

**LEARN ABOUT YOUR
DRUG BENEFITS
and search for drugs covered
by the ACE program**

hpsm.org/ace-drugs

**GET MORE DETAILS
ABOUT THE ACE PROGRAM
such as covered services
in the Participant Handbook**

hpsm.org/ace-materials

**GET INFORMATION
IN YOUR LANGUAGE
with interpreters, translated
materials & alternative formats**

[see page 8](#)



ACE covers many services, including:

- Doctor and hospital visits
- Prescription drugs
- Eye care
- Preventive care – including check-ups, screenings, tests, immunizations and other office visits with a primary care doctor
- Emergency care (covered only at San Mateo Medical Center)



Prescription Drugs

ACE covers brand and generic medications prescribed by your doctor that are in the ACE Formulary. It also covers non-formulary drugs that your doctor prescribes and gets prior authorization for from HPSM. Some over-the-counter medicines may be covered if you have a doctor's prescription.



Costs

Annual Participant Fee and Co-pays

If your income is below certain income limits, you may have qualified for the Fee Waiver. If you are receiving monthly invoices but you think you qualify for the Fee Waiver, you can contact the Health Coverage Unit at **650-616-2002** or at **info-hcu@smcgov.org**.

If you qualify for the Fee Waiver, you do not have to pay the \$360 Participation Fee. You also do not have to pay any co-payments or other charges.

OTHER PROGRAMS & SERVICES

Nurse Advice Line

1-833-846-8773 toll-free — open 24 hours a day, 7 days a week

Registered nurses are on hand to answer questions about your symptoms. They can tell you how urgently you need to see a doctor and may give you advice for self-care at home.

More information: hpsm.org/member/nurse-advice-line

Health Education Unit

The Health Education Unit provides information on a range of topics such as:

- How to quit tobacco and other similar products.
- Managing your diabetes, asthma, blood pressure and more.
- The Baby+Me program, which connects pregnant women and new moms to support services, such as Women, Infants, and Children (WIC), Black Infant Health (BIH), and more. Participants can get \$100 in Target GiftCards™ for attending two doctor's appointments.

More information: Call **650-616-2165** or visit hpsm.org/health-tips

The Bullseye Design, Target and Target GiftCard are registered trademarks of Target Brands, Inc. Terms and conditions are applied to gift cards. Target is not a participating partner in or sponsor of this offer.

Health coverage for children

Call **650-616-2002**, Monday to Friday, 8:30 a.m. to 5:00 p.m.

E-mail info-hcu@smcgov.org

San Mateo County offers health coverage for children. If you have children or other family members who do not have health coverage, you can contact a Community Health Advocate at your PCP clinic or enrollment location.

Free interpreter services

If your doctor does not speak your language, interpreter services are available by phone and video. Just ask your doctor to call an interpreter during your visit. In special cases, an interpreter can go to the visit with you.

More information: hpsm.org/member/language-services

Doctor's visits by phone or video

Many providers can give you advice over the phone or see you by video. Telephone and video visits are fully covered by HPSM. Call your primary care provider (PCP) to check if they provide telephone or video visits.

More information: hpsm.org/member/ACE/benefits

Mental health and substance use

Covered mental health services provided by your PCP clinic, within the scope of staff licensure, are covered under the San Mateo County ACE Program.

Exclusions

The San Mateo County ACE Program does not cover specialty services provided by psychiatrists, clinical psychologists or other specialized mental health professionals. Emergency psychiatric services are also excluded. These may be available through another coverage program.

Emergency dental care

The San Mateo County ACE Program covers emergency dental services and associated supplies and anesthesia for emergency dental procedures. Routine dental care is excluded.

Eye care

One optometry exam is covered once every two years at approved ACE clinics with a referral from your ACE primary care clinic. One pair of eyeglasses (frames and lenses) is covered up to \$150 once every two years with prior authorization. Coverage to see a specialist requires a referral from your ACE primary care clinic.

Health Plan of San Mateo Nondiscrimination Notice

The Health Plan of San Mateo (HPSM) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. HPSM does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

HPSM:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - o Qualified sign language interpreters
 - o 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:
 - o Qualified interpreters
 - o Information written in other languages

If you need these services, contact Member Services.

If you believe that HPSM has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Member Services

801 Gateway Blvd., Suite 100
South San Francisco, CA 94080

Toll Free: **1-800-750-4776**

Local: **650-616-2133**

TTY: **1-800-735-2929**

Fax: **650-616-8581**

You can file a grievance in person or by mail, fax, or phone. If you need help filing a grievance, CareAdvantage Unit staff are 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 **1-800-368-1019, 800-537-7697** (TDD)
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201

Complaint forms are available at hhs.gov/ocr/office/file/index.html.

English

ATTENTION: If you speak other languages other than English, language assistances services, free of charge, are available to you. Call **1-800-750-4776 (TTY: 1-800-735-2929)**.

Arabic

تنبيه: إذا كنت تتحدث اللغة العربية، فستوفّر لك خدمات المساعدة اللغوية مجاناً. اتصل على الرقم **1-800-750-4776** (رقم هاتف الصم والبكم: **1-800-735-2929**)

Armenian

Ուշադրութեամբ: Եթե խոսում եք հայերեն, ապա ձեզ անվճար կարող են տրամադրվել լեզվական օգնություններ: Զանգահարեք **1-800-750-4776 (TTY (հեռախոյ) 1-800-735-2929)**:

Cambodian

ប្រយ័ត្ន: បរិស្ថានជំនួយសេវាភាសាខ្មែរ, សេវាជំនួយផ្លូវភាសាដោយមិនគិតលុយ គឺអាចមានសំរាប់បរិស្ថាន។ ចូរ ទូរស័ព្ទ **1-800-750-4776 (TTY: 1-800-735-2929)**។

Korean

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. **1-800-750-4776 (TTY: 1-800-735-2929)** 번으로 전화해 주십시오.

Punjabi

ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਵਰਤੋਂ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। **1-800-750-4776 (TTY: 1-800-735-2929)** 'ਤੇ ਕਾਲ ਕਰੋ।

Russian

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните **1-800-750-4776** (телетайп: **1-800-735-2929**).

Spanish

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-800-750-4776 (TTY: 1-800-855-3000)**.

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 **1-800-750-4776 (TTY: 1-800-735-2929)**。

Farsi

توجه: اگر به زبان فارسی صحبت می کنید، سرویس های زبانی بصورت رایگان برای شما فراهم می باشد. با شماره **1-866-890-8506** (خط فکس: **1-800-735-2929**) تماس بگیرید.

Hmong

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau **1-800-750-4776 (TTY: 1-800-735-2929)**.

Hindi

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। **1-800-750-4776 (TTY: 1-800-735-2929)** पर कॉल करें।

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。 **1-800-750-4776 (TTY: 1-800-735-2929)** まで、お電話にてご連絡ください。

Tagalog

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa **1-800-750-4776 (TTY: 1-800-735-2929)**.

Thai

เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร **1-800-750-4776 (TTY: 1-800-735-2929)**.

Vietnamese

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số **1-800-750-4776 (TTY: 1-800-735-2929)**.

Laotian

ໂປດລາບູ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອທາງພາສາ ຈຶ່ງ ໄດຍບໍ່ຄ່າ, ຕມນມພອມໄຫທານ. ໂທສ **1-800-750-4776 (TTY: 1-800-735-2929)**.



Healthy is for everyone

801 GATEWAY BOULEVARD SUITE 100
SOUTH SAN FRANCISCO CA 94080



We have a vision that healthy is for everyone, and we fight to make that possible for you.

Founded in 1987, the Health Plan of San Mateo (HPSM) is a local non-profit health care plan that offers health coverage and a provider network to San Mateo County residents. HPSM improves the health of our members through high quality and preventive care.
hpsm.org