

VEBA Chiropractic California Member Benefits



As part of VEBA, you receive chiropractic benefits as long as you receive care from participating OptumHealth Physical Health of California (Optum) providers. Your benefits include:

- Unlimited visits (subject to medical necessity)
- Copays that align with your PCP office visit copay
- X-rays as authorized
- 100% coverage for durable medical equipment up to \$50

If your PCP copay is:	Your benefit copay is:
\$0, \$5, or \$10	\$10
\$15 or \$20	\$20
\$25, \$30, \$35, or \$40	\$30

Only Optum chiropractors are eligible for reimbursement under the plan. So, before you receive services, please verify that your chiropractor still participates with Optum.

Three ways to find a provider.

1. Go to the Provider Locator search at www.myoptumhealthphysicalhealthofca.com
 - a. To identify a participating provider, select “California Schools VEBA” in the list under the tab headed “Plan/Product”.
2. **Call Optum Member Services at 1.800.428.6337** (5 a.m. to 5 p.m., Pacific Time, Monday – Friday) for the most current and up to date information.
3. **Call the provider directly** to schedule an appointment, and verify they are part of the Optum network for California Schools VEBA.

How do my benefits work?

At the time of your appointment:

- Your provider will verify your eligibility using your Optum ID Card. Then, simply pay your designated co-pay. If you have misplaced your ID card or don't have an ID card, you can still access services. Just tell your provider you are covered under VEBA, and they can verify your benefits with Optum.
- Your provider may also ask you to complete a Patient Summary Form*. This form makes it easy for you to share important information about your condition with your provider. It also helps them determine what type of treatment to provide so you can improve as quickly as possible.

Note: Most patients only complete this form once; but if your condition requires prolonged treatment, you may need to complete the form again with updated information.

- When your provider submits the Patient Summary Form information to Optum, you and your provider may receive a recovery milestone document, which represents a number of treatments within which most patients with a similar condition have recovered.

Note: This is not an authorized number of treatments or a limit on the number of treatments available to you. It simply helps your provider set a point when your condition should be reviewed again to determine the level of improvement you have made with the treatment you have already received.

- If you need additional treatment, your provider will advise you and Optum.

IMPORTANT:

If you are having trouble reading this document and have language needs other than English, we can have somebody help you. You may call 1-800-428-6337 Monday through Friday, 5 a.m. to 5 p.m. Pacific Time. There is no fee for this service. Because this document may require action by you, you are encouraged to call as soon as possible.

*The Patient Summary Form applies to the Chiropractic Clinical Support Program.

The information provided on included programs is for informational purposes only and is not a substitute for your doctor's care. Please discuss with your doctor how the information provided is right for you. Always refer to your plan documents for specific benefit coverage and limitations.

Health plan coverage provided by or through UnitedHealthcare of California, UnitedHealthcare of Oklahoma, Inc., UnitedHealthcare of Oregon, Inc., UnitedHealthcare Benefits of Texas, Inc., UnitedHealthcare of Washington, Inc. Administrative services provided by UnitedHealthcare Services, Inc., Optum Rx, Inc. or OptumHealth Care Solutions, Inc. Behavioral health products are provided by U.S. Behavioral Health Plan, California (USBHPC) or United Behavioral Health (UBH).

Chiropractic services administered through Optum, a UnitedHealth Group company.



Questions?

Call Optum Member Services at
1.800.428.6337 (5 a.m. to 5 p.m.,
Pacific Time, Monday – Friday).



Physical Health of California

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