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CCI Advocates Alert

December 16, 2015

The CCI Advocates Alert is a summary of changes, on-the-ground reports, advocacy tips, and resources regarding California's Coordinated Care Initiative.

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Announcements

New Cal MediConnect Enrollment Data Available

DHCS releases enrollment dashboards each month, which present data on the number of dual eligible beneficiaries who have enrolled, opted-out, and disenrolled from the Cal MediConnect program. The November 2015 dashboard is available [here](#). DHCS also released a breakdown of Cal MediConnect opt-out rates by language, ethnicity, and age through November 2015 (available [here](#)).

New Cal MediConnect Health Risk Assessment Data Available

Cal MediConnect plans are required to conduct a Health Risk Assessment (HRA) for each enrolled member of the health plan. DHCS has released an updated

quarterly HRA dashboard summarizing the completion of HRAs by each Cal MediConnect plan starting in April 2014 through June 2015. The HRA dashboard is available [here](#).

A revised Dual Plan Letter (DPL) was released on August 18, 2015, providing Cal MediConnect plans additional guidance and details for completing HRAs. The DPL is available [here](#).

First Cal MediConnect Polling Results Released

The Field Research Corporation—in collaboration with the California Department of Health Care Services and funded by the SCAN Foundation—released the first polling results examining reasons individuals opted out of the Cal MediConnect program and the experience of enrolled Cal MediConnect beneficiaries. The full report is available [here](#), and a slide deck summarizing the data is available [here](#).

The top two reasons beneficiaries reported for opting out of the Cal MediConnect program were that they were satisfied with how they were receiving their care and did not want to make changes (84%) and that they did not want to risk losing their doctor (71%).

Beneficiaries enrolled in Cal MediConnect reported an overall high rate of satisfaction (73%-83%) on a number of factors including choice of doctors, amount of time doctors spend with patients, choice of hospitals, information from the health plan, how providers work together, and appointment wait time. These rates of satisfaction, however, were the same or lower than those reported by beneficiaries who opted out of the program and by beneficiaries in non-participating counties. Beneficiaries enrolled in Cal MediConnect plans also reported similar problems at similar rates with their health care services as those beneficiaries who opted out of the program and those in non-participating counties.

The goals of Cal MediConnect program are to improve the coordination of benefits and the quality of care beneficiaries receive compared to the delivery of services through uncoordinated delivery systems. This study offers plans and

stakeholders early data as an opportunity to make changes and improvements to the Cal MediConnect program to accomplish these goals.

DHCS Submits Letter of Intent to CMS to Extend Demonstration

The CMS Medicare Medicaid Coordination Office issued states (with implemented duals demonstrations) a letter offering the opportunity to extend their demonstrations from three years to five years. California submitted its non-binding letter of intent on August 26, 2015, available [here](#). While California has indicated its interest in considering an extension of the Cal MediConnect demonstration, it has not committed to the extension.

CMS Releases Updated Reporting Requirements

CMS issued updated California-specific reporting requirements for Cal MediConnect plans on August 24, 2015, available [here](#).

On-the-Ground Reports and Advocacy Tips

The Enrollment Assistant Process Can Help Beneficiaries Make an Enrollment Choice

Under prior guidelines, only a beneficiary (or his or her Appointed Representative filed with the County) could make a health plan enrollment decision. DHCS recognized that many beneficiaries, for number of different reasons, need assistance with an enrollment decision and do not have an Authorized Representative on file – including beneficiaries who have a Power of Attorney or a conservator or guardian. In response to feedback from advocates, DHCS created a process that allows an Enrollment Assistant to make an enrollment decision on behalf of a beneficiary that includes an attestation process and safeguards to ensure there is no abuse. This process is available statewide for any beneficiary who needs to make a health plan enrollment choice through Health Care Options (HCO). A summary of the policy is available [here](#).

Individuals Enrolled in Medi-Cal Plans and Cal MediConnect Plans Report Issues with Transportation

Beneficiaries have reported issues with accessing transportation to their medical appointments and services. If you have a client experiencing a transportation issue, please contact the CCI Ombudsman at (855) 501-3077.

Balance Billing of Dual Eligibles is Illegal

It is illegal for a medical provider to bill dual eligible beneficiaries or Medi-Cal beneficiaries for medically-covered services. Dual eligibles who decide to opt-out of Cal MediConnect or duals not able to participate in Cal MediConnect still must enroll in a Medi-Cal plan. For dual eligibles, this means the Medi-Cal plan will now be responsible for paying the Medicare provider the 20% co-insurance that the State used to pay.

The Medicare provider does not need to be contracted with the Medi-Cal plan to receive payment from the plan. The State has created this [fact sheet](#) for providers on this issue.

The Medicare provider is NOT allowed to balance bill the dual eligible for the 20%. This [fact sheet](#) explains how balance billing is prohibited in California. You can also watch our webinar covering the prohibition of balance billing available [here](#). CMS released a report about the illegal balance billing of dual eligibles available [here](#). The LA Times also wrote about the illegal balance billing of Medi-Cal beneficiaries [here](#). If a Medicare provider has billed your dual eligible client, please contact Denny Chan (dchan@justiceinaging.org).

Upcoming Events and Trainings

To view Justice in Aging's past CCI Basic and Advanced trainings, please visit our [website](#).

Resources and Other Materials

Advocates Guide to California's Coordinated Care Initiative (Ver. 4)

On June 15, 2015, Justice in Aging released a new version of the Advocates Guide to the CCI. This comprehensive Guide explains the CCI and who is impacted and provides advocacy tips and citations to CCI rules and regulations. The Guide is available [here](#).

DHCS Physician Toolkit

DHCS has provided a Coordinated Care Initiative toolkit of fact sheets and other information for providers. The toolkit is available [here](#).

National Duals Demonstration Resources

[Key Consumer Provisions in the Dual Demonstrations](#) (ACAP, December 2015)

[Dementia Care Coordination in Seven Duals Demonstration States](#) (UCSF, December 2015)

[Assessing Success in Medicare-Medicaid Integration](#) (CHCS, December 2015)

Resources for Beneficiaries

Beneficiaries should contact their local **Health Insurance Counseling & Advocacy Program (HICAP)** to receive free individualized choice enrollment counseling for Cal MediConnect. The HICAP counselors can help the beneficiary review his choices and make an informed decision. The HICAP can be reached at (800) 434-0222.

The **Cal MediConnect Ombudsman** is available to provide assistance with both pre-enrollment and post enrollment issues. You should contact the Ombudsman if you believe a beneficiary has incorrectly received a notice, a beneficiary is having

difficulty disenrolling or changing his plan, or if the beneficiary has been denied coverage or is experiencing a disruption in care.

The Ombudsman program is available by calling (855) 501-3077 (TTY: 855-847-7914), Monday through Friday, 9:00 a.m. - 5:00 p.m. To find the local program acting as the ombudsman in your county, visit the CalDuals [website](#).

DHCS has developed a **Beneficiary Toolkit**, which is scheduled for release in 2016. A draft of the Toolkit is available [here](#). Comments were due December 11, 2015.

This is a resource to help advocates keep abreast of the many developments in the roll out of the CCI. Please let us know how we can improve. We value your feedback. To submit comments, please email us at info@justiceinaging.org.

If you have a question regarding the content of this document, please contact Amber Cutler (acutler@justiceinaging.org).