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CCI Advocates Alert

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

Coordinated Care Initiative Trailer Bill Language Released. New trailer bill language reauthorizing the major health care delivery system reforms under the Coordinated Care Initiative (CCI) is available [here](#). In January, the Governor announced in his proposed budget that the CCI would be terminated in order to restructure the financing of the In-Home Supportive Services (IHSS) program. The Governor proposed, however, to continue the major health care delivery system reforms under the CCI including mandatory enrollment in Medi-Cal, the integration of long-term services and supports, and the Cal MediConnect program in the seven CCI counties. Accordingly, [new trailer bill](#) language was released that both reverts IHSS funding to the financing structure in place prior to the CCI and continues the major components of the CCI under the same name. The trailer bill language will be reviewed by Senate Budget on April 27th. Discussions between the counties and state are separately taking place to negotiate the amount and terms of the proposed IHSS funding arrangement. The Legislative Analyst's Office also released its assessment of the Governor's CCI proposal, "The

Coordinated Care Initiative: A Critical Juncture, available [here](#). The Department of Health Care Services (DHCS) released a FAQ document last month about the budget, available [here](#).

DHCS Expands Deeming Protections. Under Cal MediConnect, individuals who lose Medi-Cal eligibility can now remain enrolled in a Cal MediConnect plan for two months (instead of one) to fix their Medi-Cal eligibility issue prior to being disenrolled from the Cal MediConnect plan. This protection is called deeming and prevents unnecessary and disruptive disenrollment from Cal MediConnect. For more information on deeming, see our factsheet available [here](#).

Latest Cal MediConnect Enrollment Data Available. DHCS releases enrollment dashboards each month, which summarize the number of dual eligible beneficiaries who have enrolled and disenrolled from the Cal MediConnect program. The March enrollment dashboard is available [here](#). Enrollment increased across almost all plans in January and February. This uptick in enrollment can be attributed to the notices dual eligibles received in December and January that required them to enroll in a Medi-Cal plan and also provided the option to enroll in Cal MediConnect as well as the streamlined enrollment process, which permits plans to directly accept an enrollment request.

Evaluation News

There are a number of efforts underway to evaluate the Cal MediConnect program. For a summary of these evaluations, what they entail, and the timeline for each, refer to Justice in Aging's fact sheet, "[How is the CCI Working?](#)" We also have links available to all the evaluation findings to date available [here](#).

New Cal MediConnect Rapid Cycle Telephone Survey Results Released. In December 2016, The SCAN Foundation released round four of rapid cycle polling results conducted by the Field Research Corporation. A summary of the results is available [here](#). The survey evaluates how Cal MediConnect enrollees perceive the care they are receiving in Cal MediConnect compared to individuals who either opted out of the program or live in non-CCI counties. The results of round four were consistent with prior rounds. Cal MediConnect enrollees are overall satisfied with the care they receive, but satisfaction is about the same for those in Cal MediConnect as those not in the program. In this round of polling, Cal MediConnect enrollees reported fewer hospitalizations than those who are not in the program.

RTI Releases Two National Reports on Duals Demonstrations. RTI released two reports in March evaluating the duals demonstrations, including Cal MediConnect. One report

evaluates the early findings on care coordination in the demonstrations and is available [here](#). The second report evaluates the beneficiary experience in the demonstrations and is available [here](#).

On-the-Ground Reports and Advocacy Tips

Some Dual Eligibles Received and Were Enrolled Erroneously in MLTSS Plans. Starting in December, dual eligibles who became Medi-Cal eligible after the conclusion of passive enrollment in CCI counties were sent notices requiring them to enroll in a Medi-Cal plan. Advocates and community-based providers have reported that some of these duals should not have received notices because they had other health coverage and as a result were ineligible for MLTSS.

Advocacy Tip: First, make sure that other health coverage has been properly documented with the state. You can enter other health coverage online [here](#).

Inform DHCS that your client has been improperly enrolled in a Medi-Cal plan (or has received an erroneous notice) using the cmc.mltss@dhcs.ca.gov email. DHCS should help you disenroll your client from the Medi-Cal plan or ensure your client is not enrolled in the first place. If you continue to have problems, please email Amber Christ at achrist@justiceinaging.org.

Resources and Other Materials

Advocates Guide to California's Coordinated Care Initiative (Ver. 5). In October 2016, 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](#).

Advocate CCI Presentation. DHCS released a slide presentation for advocates, Coordinated Care Initiative: Information for Advocates, available [here](#).

Improper Billing Toolkit. Dual eligibles continue to be billed for cost sharing and other costs by their Medicare and Medi-Cal providers. This [toolkit](#) includes sample letters you can send to providers who are improperly billing your clients. The toolkit also includes an issue brief with the latest developments, factsheets, fliers, and other resources on improper billing.

Denti-Cal Coverage for Adults. Dental coverage through Medi-Cal, known as Denti-Cal, is

complicated. This [fact sheet](#) provides a summary of what is and is not covered and how to access Denti-Cal services.

Enrollment and Legal 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](#).

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 Christ at achrist@justiceinaging.org.