
Coordinated Care Initiative (CCI) ADVANCED I: Benefit Package and Consumer Protections

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The National Senior Citizens Law Center is a non-profit organization whose principal mission is to protect the rights of low-income older adults. Through advocacy, litigation, and the education and counseling of local advocates, we seek to ensure the health and economic security of those with limited income and resources, and access to the courts for all. For more information, visit our Web site at www.NSCLC.org.



Disability Rights Education & Defense Fund

Founded in 1979, by people with disabilities and parents of children with disabilities, the Disability Rights Education and Defense Fund (DREDF) is a leading national law and policy center, based in Berkeley, CA, dedicated to protecting and advancing the civil and human rights of people with disabilities. For more information, visit us at www.DREDF.org

Today's Discussion

Overview of
CCI



LTSS
Integration

Benefit
Package
Summary



Consumer
Protections

Glossary

- Coordinated Care Initiative (CCI)
 - Cal MediConnect
- Dual Eligible (Dual) ←
- Duals-Special Needs Plan (D-SNP) ←
- Fee-for-Service (FFS)
- Long Term Support and Services (LTSS) ←
 - In-Home Supportive Services (IHSS), Community Based Adult Services (CBAS), Multipurpose Senior Services Program (MSSP), Nursing Facility
- Medi-Cal Managed Care
- Program of All-Inclusive Care for the Elderly (PACE)
- Seniors and Persons with Disabilities (SPDs) ←

Implementation proposed to begin April 1, 2014

90 day
notice
1/1

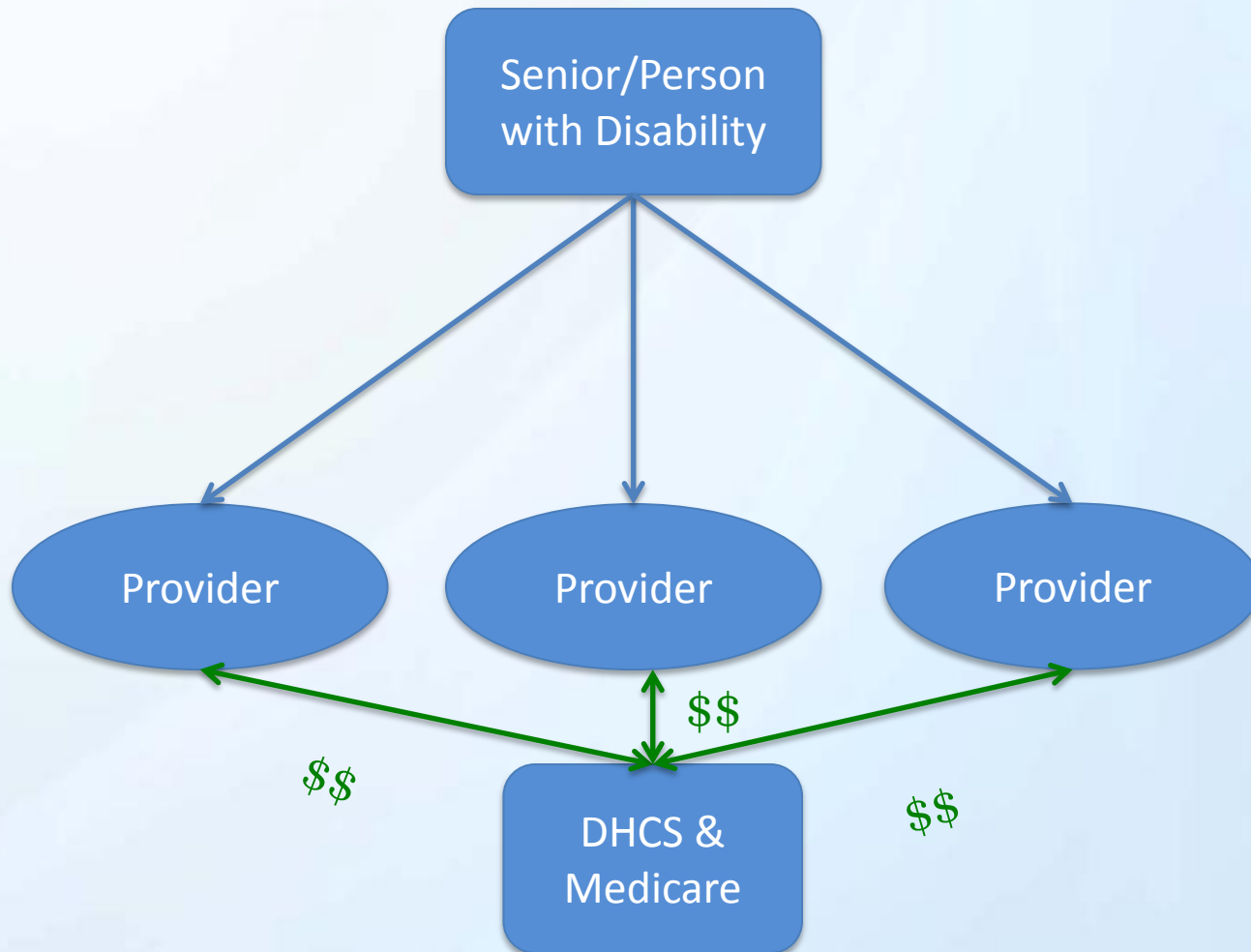
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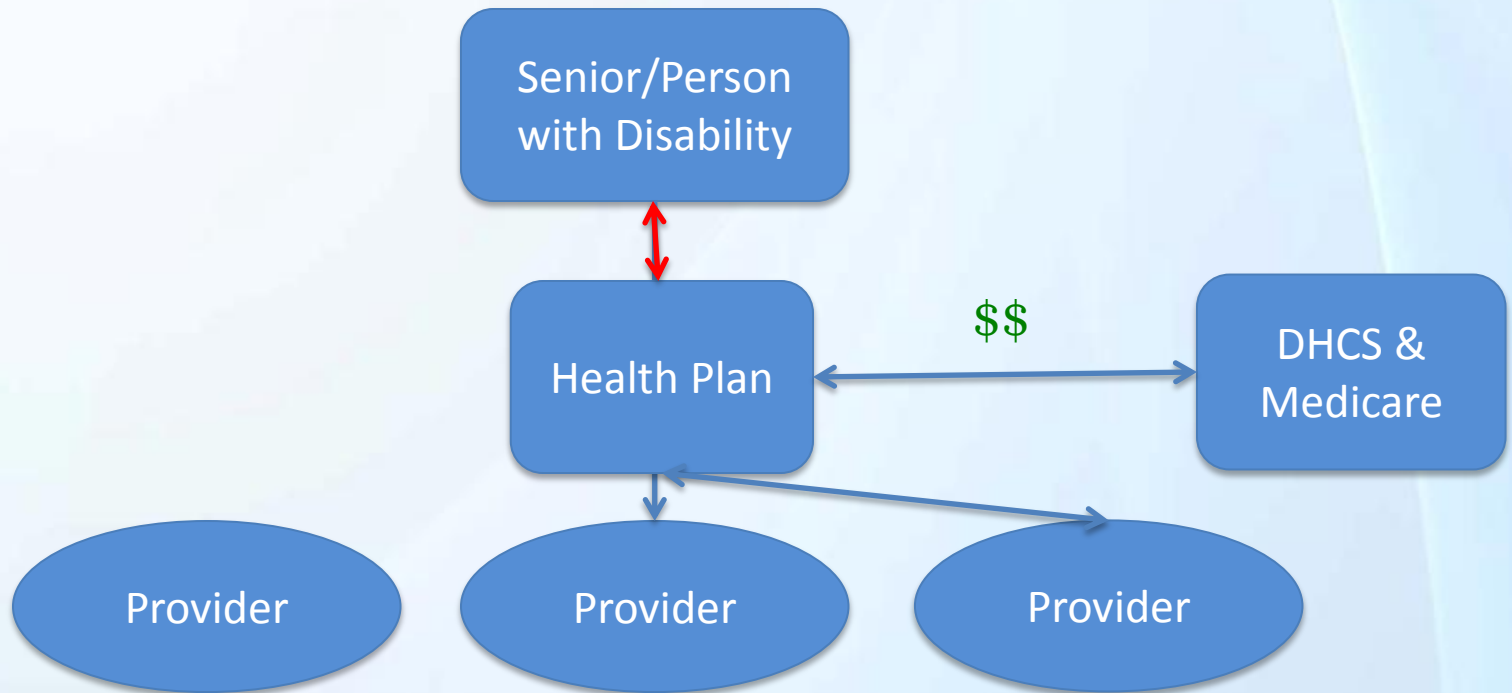
CCI = three big changes

| CCI Change | Description | Federal Approval |
|-----------------------------------------------|--------------------------------------------------------------------------------------|------------------|
| Mandatory Medi-Cal Managed Care | Duals and previously excluded SPDs must in enroll in Medi-Cal Managed Care | Pending |
| LTSS Integration | LTSS added to Medi-Cal Managed Care plan benefit package | Pending |
| Medicare Integration (Cal MediConnect) | For duals, integration of Medicare and Medi-Cal benefits into one managed care plan. | Approved |

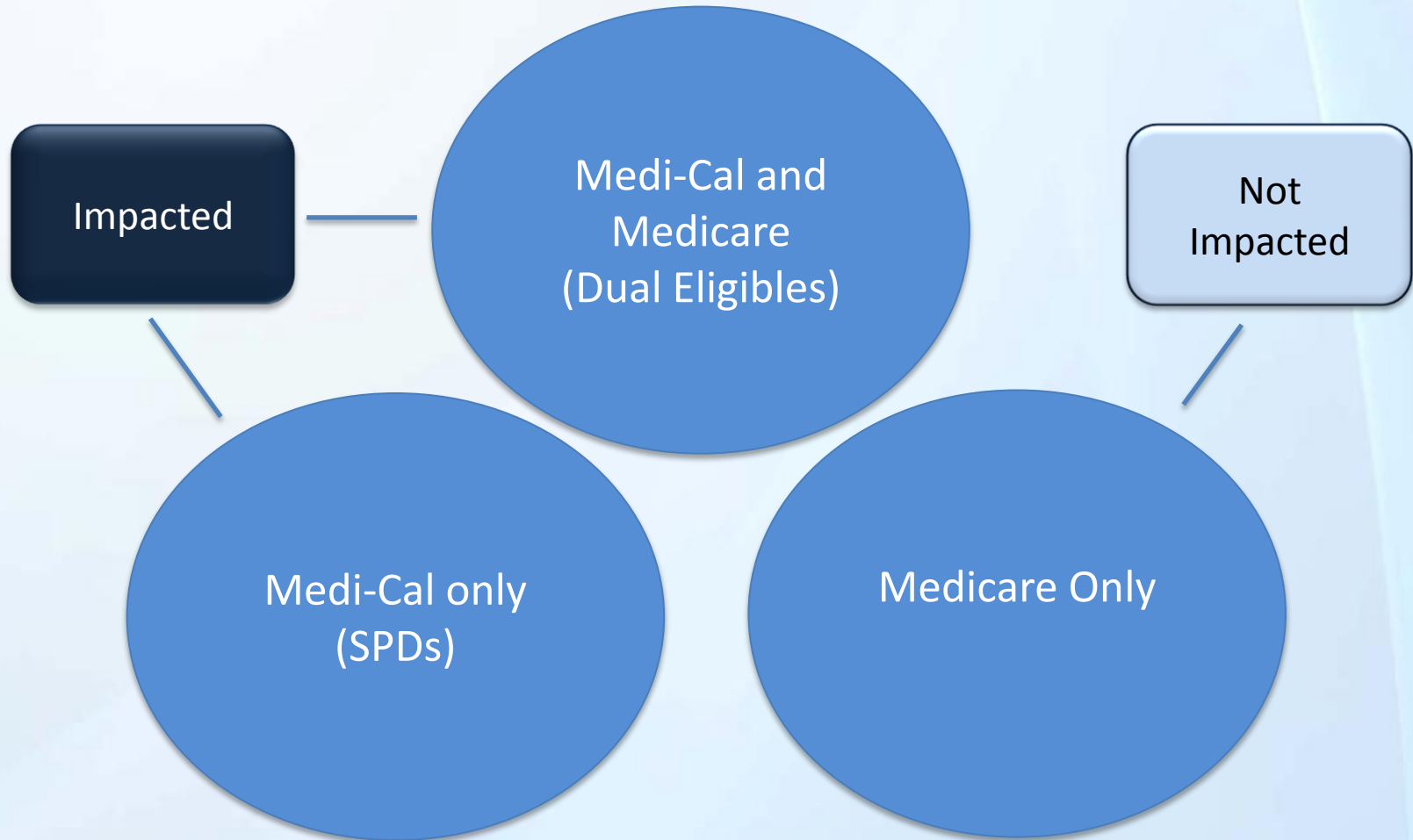
Fee-For-Service



More Managed Care



CCI impacts duals & seniors and persons with disabilities with Medi-Cal



Different groups of duals and SPDs are affected differently

- SPDs who are already required to enroll in Medi-Cal managed care
- SPDs who will remain exempt from mandatory Medi-Cal managed care enrollment
- Dual eligibles who will be passively enrolled into Cal MediConnect
- Dual eligibles who can enroll into Cal MediConnect, but will not be passively enrolled
- Dual eligibles who cannot enroll in Cal MediConnect

Cal MediConnect: Who is Impacted

Duals Excluded from Cal MediConnect

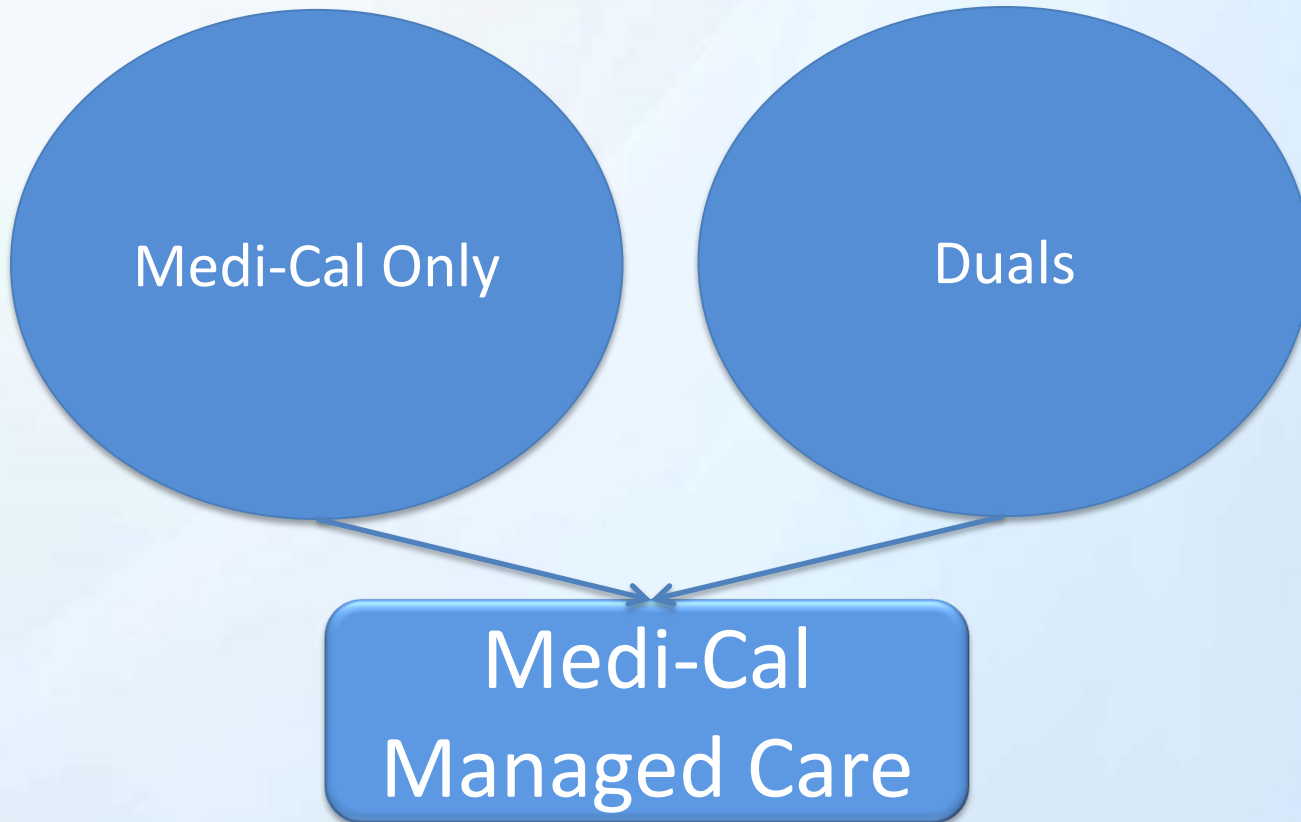
- End Stage Renal Disease (except COHS)
- Reside in certain LA County, Riverside, San Bernardino zip codes
- Resident of VA Home
- Resident of an ICF-DD
- Share of Cost not regularly met
- Other Health Insurance
- DDS waiver or receiving services from a regional or dev center

Duals Who Can Participate but Will NOT be Passively Enrolled

- PACE Enrollees
 - Enrolled in AIDS Healthcare Foundation
 - Live in certain zip codes in San Bernardino County*
 - Enrolled in Kaiser
 - Enrolled in NF/AH, HIV/AIDS, Assisted Living, IHO Waiver
 - Enrolled in Medicare Advantage including D-SNPs (2014)
- *Will receive notice of option to enroll

Medi-Cal managed care is mandatory

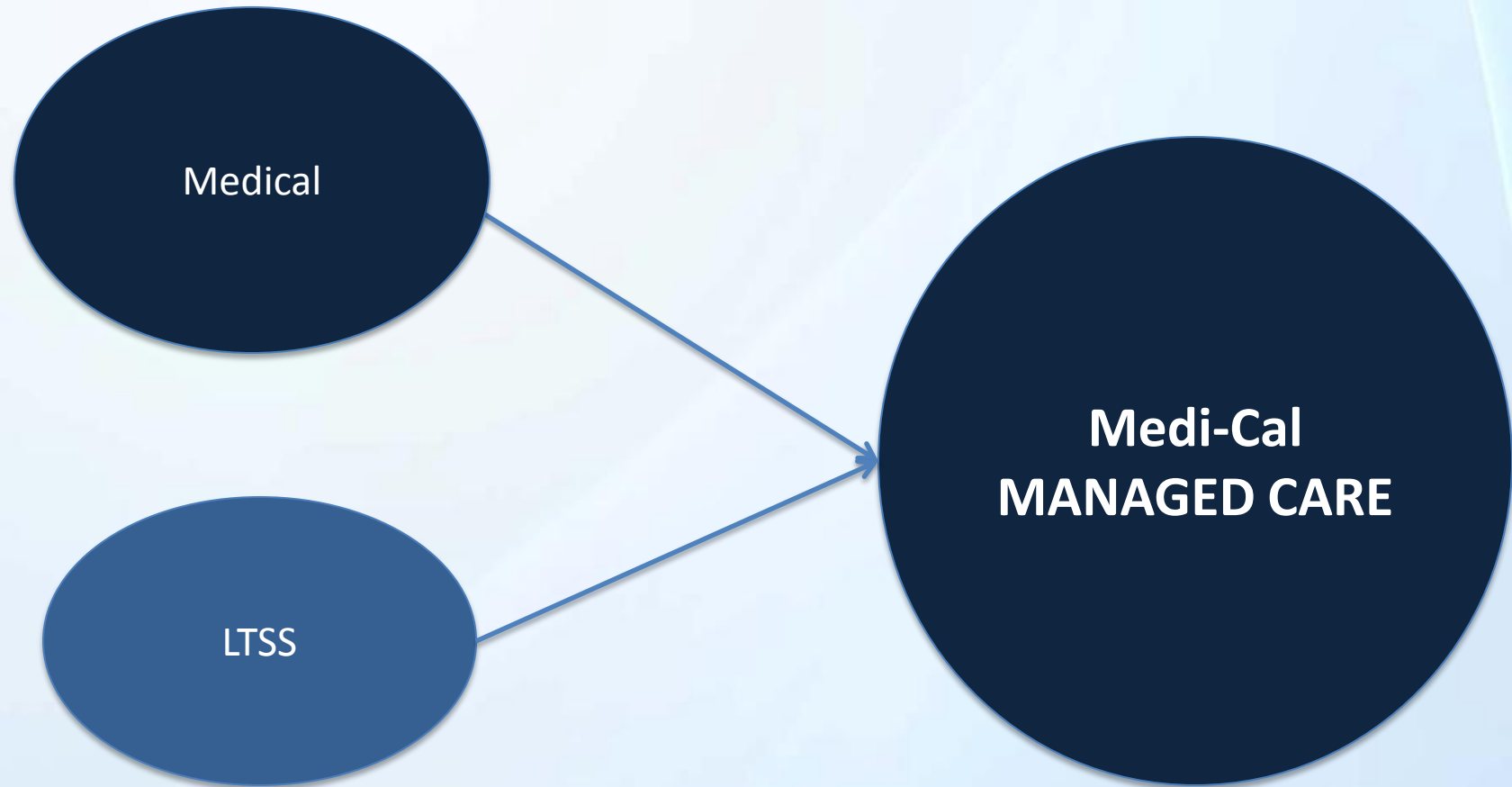
Even if a Dual opts out of Cal MediConnect, must still enroll in Medi-Cal MC



Total Impact: 1,010,000

| County | Duals Subject to Passive Enrollment in Cal MediConnect (2014) | Medi-Cal MC Only |
|----------------|---------------------------------------------------------------|------------------|
| Alameda | 25,502 | Unknown |
| Los Angeles | 223,084 (200,000 cap) | Unknown |
| Orange | 39,969 | Unknown |
| Riverside | 24,395 | Unknown |
| San Bernardino | 26,977 | Unknown |
| San Diego | 41,710 | Unknown |
| San Mateo | 3,701 | Unknown |
| Santa Clara | 32,986 | Unknown |
| Totals | 418,324 (395,204 with cap) | 592,000 |

Medi-Cal Managed Care



New Medi-Cal Benefits

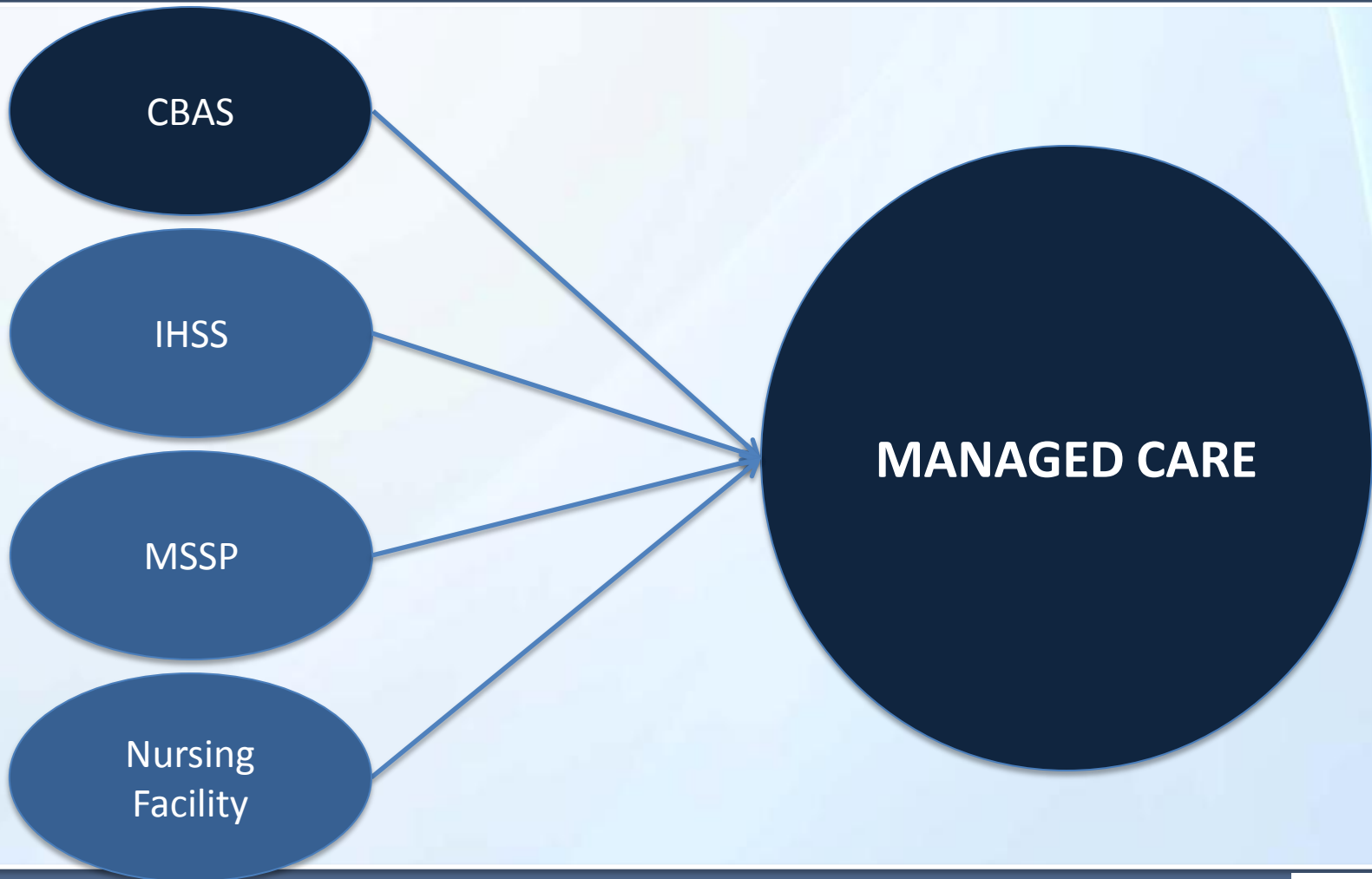
Dental

Dental benefits will be restored to all Medi-Cal recipients starting May 2014.

New Mental Health Benefit

DHCS is creating a new mental health benefit which will be available to all Medi-Cal recipients.

LTSS and Managed Care



HCBS Waivers

What About Individuals Enrolled in an HCBS Waiver?

**MEDI-CAL
MANAGED
CARE PLAN**

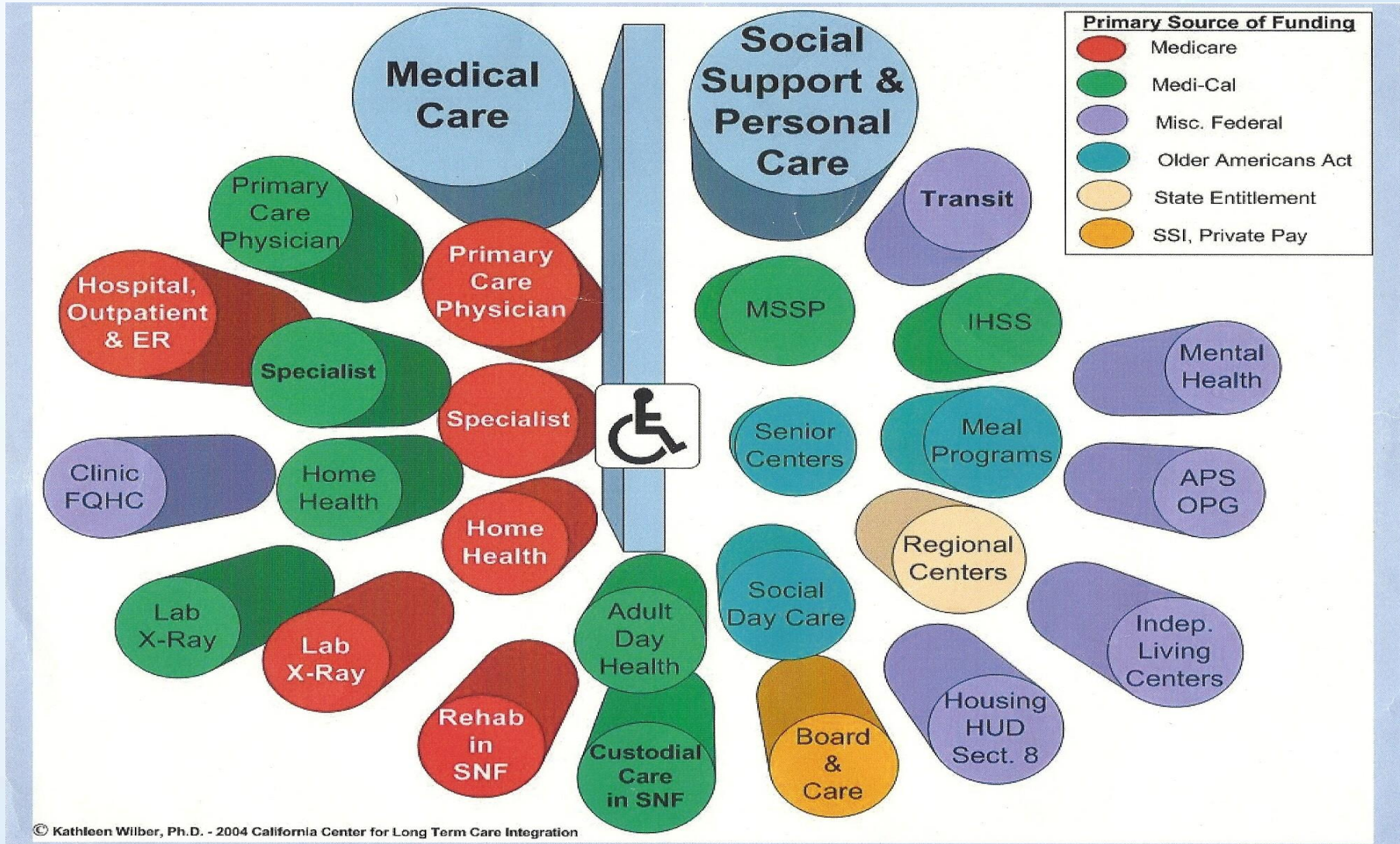
**CAL
MEDICCONNECT**

Cal MediConnect Benefits

Required Benefits

Plans Required to Provide

- Medicare A, B, D
- Medi-Cal services including
 - New Mental Health benefit
 - Dental as of May 2014
 - LTSS: IHSS, CBAS, SNF, MSSP
- Vision
- Transportation
- Care Coordination



Cal MediConnect Benefits Care Coordination

Care Coordination

- Person-centered
- Focus on least restrictive setting
- Health Risk Assessment
- Individualized Care Plan
- Interdisciplinary Care Team

Available at: www.calduals.org;

Cal MediConnect Benefits Care Plan Option Services

CPO Services

- HCBS-like supports and services
- Discretionary
- In addition to, not in lieu of required benefits
- Assessed during HRA
- Plan appeal process

Available at: www.calduals.org; Summary available at: <http://dualsdemoadvocacy.org/california>

Cal MediConnect Benefits

Carved Out Benefits

Carved Out Benefits

- County Administered and Financed
 - Specialty Medi-Cal Mental Health Benefits
 - Examples: intensive day treatment, portion of inpatient psychiatric services not covered by Medicare, day rehab, crisis intervention , adult residential treatment services
- Medi-Cal Drug Benefits
 - Examples: Methadone therapy, day care rehab, naltrexone for narcotic dependence

Consumer Protections: Continuity of Care

Cal MediConnect

- Keep seeing current providers and maintain service authorizations
 - Medicare = 6 months
 - Medi-Cal = 12 months
- Must have an “existing relationship”
 - Seen the PCP once within twelve months (from enrollment)
 - Seen specialist twice within twelve months (from enrollment)
 - Nursing facilities excluded
- Provider must accept plan reimbursement rate or Medicare or Medi-Cal rate
- Provider must meet quality of care standards
- Continuity of care does not extend to durable medical equipment providers, medical supplies, transportation, or other ancillary services

Consumer Protections: Continuity of Care

Cal MediConnect

- Prescription Drugs

- Medicare – Plans must follow Part D transition rules
 - One-time fill – One 30 day supply (even if not on plan's formulary)
- Medi-Cal -W&I Code §14185(b)
 - Plans must allow beneficiaries to continue use of any (single-source) drugs that are part of a prescribed therapy (by a contracting or non-contracting provider) in effect for the beneficiary immediately prior to the date of enrollment, whether or not the drug is covered by the plan, until a doctor makes a determination that the prescribed therapy is no longer needed.

Consumer Protections: Continuity of Care

Cal MediConnect

DISENROLL

- A beneficiary can disenroll from Cal MediConnect at any time for any reason.
- Disenrollment is effective the first day of the following month
- Must stay in Medi-Cal managed care

Consumer Protections: Continuity of Care

Medi-Cal Managed Care

- 12 months - keep seeing current providers and maintain service authorizations and receive services that are set to occur within 180 days of enrollment.
- Must have an “existing relationship”
 - Seen the provider at least twice within 12 months (from date of plan enrollment)
- Provider must accept plan reimbursement rate or Medi-Cal rate
- Provider must meet quality of care standards
- Continuity of care does not extend to durable medical equipment, medical supplies, transportation, or other ancillary services
- Prescription drugs must be refilled until provider informed and new plan is agreed upon by the provider that is appropriate.

Consumer Protections: Continuity of Care

Medi-Cal Managed Care

- Medical Exemption Request (MER)
 - Available in two-plan or GMC Counties
 - Acts to avoid enrollment in managed care entirely for a certain amount of time
 - Available to individuals with complex medical conditions (e.g., cancer)
 - Administered by Health Care Options (enrollment broker)

Consumer Protections: Cont.

Other Consumer Protections

- Right to receive materials and services in their own language
 - Language, alternative formats
- Accessibility Rights
 - Reasonable modifications to enable people with disabilities to gain full and equal access to services
 - Physical accessibility where readily achievable
 - Plans required to receive training on disability discrimination and cultural competency

Local advocates can help individuals

- HICAP
1-800-434-0222
- Health Consumer Alliance
www.healthconsumer.org/index.php?id=partners
- Disability Rights California
www.disabilityrightsca.org/

Want to know more?

- NSCLC Duals Website
 - Advocate’s Guide
 - News
 - Sign up for alerts

<http://dualsdemoadvocacy.org/>
- CCI Basics – 12/17/13 – 3:00 p.m.
- Contact us:
 - Amber Cutler – acutler@nsclc.org
- DREDF
 - www.dredf.org
 - Silvia Yee – syee@dredf.org
 - Mary Lou Breslin
mlbreslin@dredf.org
 - 510-644-2555
- Department of Healthcare Services
 - www.calduals.org