

June 5, 2014

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

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Announcements

CCI Enrollment Dashboard Available Through May 1. The Department of Health Care Services (DHCS) released the CCI enrollment data through May 1, 2014. The dashboard includes information such as the number of individuals who have been sent notices, the number enrolled in Cal MediConnect plans by county, and the number of individuals who have opted out of Cal MediConnect. The new data is available [here](#).

DHCS is Conducting its Second Tele Town Hall Meetings for Beneficiaries.

DHCS is conducting Tele Town Hall Meetings on a monthly basis for beneficiaries who have received their 60-day Cal MediConnect notice. Beneficiaries are



contacted by telephone to participate. The first meeting was held on May 15, 2014. A second meeting is scheduled for June 19, 2014, at 6:00 p.m. A link to the meeting will be available [here](#).

News on Notices

Tables that outline the most recent notice mailings in each county follow.



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Counties	Notice Type	Mailing Date	Targeted Population(s)
Riverside	Cal MediConnect 90-day	6/1/14	Duals with September birthdays
San Bernardino	Cal MediConnect 60-day/Guidebook/Choice Form	6/1/14	Duals with August birthdays
San Diego	Cal MediConnect 30-day	6/1/14	Duals with July birthdays
	90-Day MLTSS Notice	6/1/14	Duals excluded from or not subject to passive enrollment in Cal MediConnect with September birthdays; Medi-Cal only individuals with September birthdays not already in a Medi-Cal plan.
	60-Day MLTSS Notice	6/1/14	Duals excluded from or not subject to passive enrollment in Cal MediConnect with August birthdays; Medi-Cal only individuals with August birthdays not already in a Medi-Cal plan.



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County	Notice Type	Mailing Date	Targeted Population(s)
Los Angeles	Cal MediConnect 90-Day	6/1/14	Duals with September birthdays
	Cal MediConnect 60-Day Notice/Guidebook/Choice Form	6/1/14	Duals with August birthdays
	Cal MediConnect 30-Day	6/1/14	Duals with July birthdays; duals already enrolled in Medi-Cal managed care.
	90-Day MLTSS Notice	6/1/14	Duals excluded from or not subject to passive enrollment in Cal MediConnect with September birthdays; Medi-Cal only individuals with September birthdays not already in a Medi-Cal plan.
	60-Day MLTSS Notice/Guidebook/Choice Form	6/1/14	Duals excluded from or not subject to passive enrollment in Cal MediConnect with August birthdays; Medi-Cal only individuals with August birthdays not already in a Medi-Cal plan.



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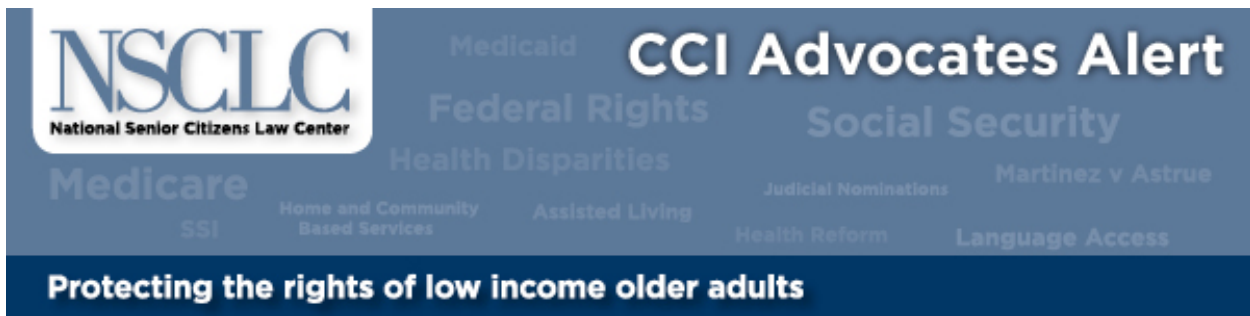
County	Notice Type	Mailing Date	Targeted Population(s)
Santa Clara	90-Day MLTSS Notice	6/1/14	Duals excluded from or not subject to passive enrollment in Cal MediConnect with September birthdays; Medi-Cal only individuals with September birthdays not already in a Medi-Cal plan.
	60-Day MLTSS Notice/Guidebook/Choice Form	6/1/14	Duals excluded from or not subject to passive enrollment in Cal MediConnect with August birthdays; Medi-Cal only individuals with August birthdays not already in a Medi-Cal plan.



On-the-Ground Reports and Advocacy Tips

Beneficiaries Choosing to Opt-Out of Cal MediConnect Received Confirmation Notices with Wrong Names. DHCS reports that 3,378 individuals who opted-out of Cal MediConnect between May 14 and May 21 received confirmation notices with the correct last names and addresses but incorrect first names. DHCS has generated and mailed corrected notices to these beneficiaries.

Health Care Options Did Not Process Opt-Out Requests for Beneficiaries Already in Medi-Cal Plans Who Called to Opt-Out of Cal MediConnect in March and April. Some beneficiaries residing in Riverside, San Bernardino, and San Diego counties already enrolled in Medi-Cal managed care plans who called Health Care Options to opt-out of Cal MediConnect did not have their opt-out requests processed. There are two groups of individuals impacted. One group is people who called HCO in March, but were still passively enrolled on May 1. The other group is people who called in April, but were still passively enrolled on June 1. DHCS reports that this issue was due to a syncing error between the DHCS computer system and the Health Care Options system. DHCS has identified 476 individuals who called HCO options during this time and who they believe may have been calling to opt out. DHCS has reached out to these individuals by phone to confirm their enrollment decision. If they indicate that that they do not want to be in Cal MediConnect, they will be retroactively disenrolled effective May 1 or June 1.



Beneficiaries Already Enrolled in a Medi-Cal Plan Who Opted-Out of Cal MediConnect in Los Angeles County were Erroneously Disenrolled from Their Medi-Cal Plan on June 1. Beneficiaries slated for passive enrollment into Cal MediConnect on July 1, 2014, and who are already enrolled in Medi-Cal plans were erroneously disenrolled from their Medi-Cal plan. The Community Based Adult Services (CBAS) sites were first to identify this issue when they checked the eligibility status of their clients on June 1. The CBAS sites discovered that their clients who had opted-out of Cal MediConnect had also been disenrolled from their Medi-Cal plan and placed in fee-for-service Medi-Cal. This is problematic for CBAS recipients because they can only receive the CBAS benefit if they are enrolled in a Medi-Cal managed care plan.

It is unclear why this problem occurred. DHCS is working diligently to identify the source of the issue and to seamlessly reenroll individuals back into their Medi-Cal plans. If you serve a beneficiary impacted by this issue, please contact [us](#).

Notices Continue to be Mailed to Wrong Populations. Cal MediConnect notices continue to be mailed to excluded populations and to populations who are not scheduled for passive enrollment at this time. Contact the Cal MediConnect ombudsman (phone number below) if you believe a beneficiary received a Cal MediConnect or MLTSS notice in error.

Residents of ICF-DD Facilities

Rule: Individuals who reside in an Intermediate Care Facility for the Developmentally Disabled are excluded from the Coordinated Care Initiative and should not receive any notices regarding the Coordinated Care Initiative.**

**Residents of an ICF-DD in the CCI COHS counties (Orange and San Mateo) are required to enroll in a Medi-Cal managed care plan, and LTSS will be added to their benefit package.

Individuals receiving services at a Regional Center

Rule: Individuals who receive services at a regional center are excluded from Cal MediConnect. Accordingly, they should not receive notices regarding Cal MediConnect. These individuals, however, will have to choose a Medi-Cal managed care plan and will receive notices by birth month directing them to select a plan.

Individuals with a diagnosis of End Stage Renal Disease (ESRD)

Rule: Individuals with an ESRD diagnosis are excluded from Cal MediConnect (except in the COHS counties). These individuals, however, will have to choose a Medi-Cal managed care plan and will receive notices by birth month directing them to select a Medi-Cal plan.

Individuals who have other health insurance

Rule: Individuals who have other health coverage (e.g., Tri-Care; employer-based coverage; or a Medi-Gap plan) are excluded from the Coordinated Care Initiative and should not receive any notices regarding the Coordinated Care Initiative.**

** In the COHS counties, individuals with other health coverage still must enroll in a Medi-Cal managed care plan and LTSS will be added to their benefit package.

Individuals in Home and Community Based Services (HCBS) waivers

Rule: Individuals in an HCBS waiver (e.g. Nursing Facility/Acute Hospital NF/AH waiver; In-Home Operations (IHO) waiver; or an Assisted Living (AL) waiver) are not subject to passive enrollment into Cal MediConnect and should not receive notices. If individuals in an HCBS waiver program want to participate in Cal MediConnect, they need to disenroll from their waiver in order to enroll in Cal MediConnect. Individuals in HCBS waivers will have to choose a Medi-Cal managed care plan and will receive notices by birth month directing them to select a plan.

Note: Individuals on an HCBS waiver waiting list are subject to passive enrollment into Cal MediConnect.

Individuals enrolled in a Medicare Advantage plan

Rule: Individuals enrolled in a Medicare Advantage plan with a corresponding Cal MediConnect plan are not subject to passive enrollment into Cal MediConnect until January 2015. Accordingly, they should receive their first Cal MediConnect 90-day notice in October 2014.

Advocacy Tip: Helping a Beneficiary Make a Choice with Health Care Options

By Mail: If you assist a client with filling out the choice form and mailing it to Health Care Options, it is important to maintain a record of the mailing date and a copy of the completed choice form for the client's record.

If the client has elected not to participate in Cal MediConnect, he should receive a confirmation of this decision from DHCS. DHCS is required to send the opt-out confirmation notice within seven (7) days of receiving the enrollment form. If the



client does not receive a confirmation letter, he should call Health Care Options and verify that his choice has been recorded and request a confirmation letter.

By phone: If you are assisting a client with contacting Health Care Options to make a choice by phone, it is important to document the date, time, and name of the Customer Service Representative assisting the client.

If the beneficiary has elected not to participate in Cal MediConnect, he should receive a confirmation of this decision from DHCS. DHCS is required to send the opt-out confirmation notice within seven (7) days of the beneficiary contacting Health Care Options to opt-out. If the beneficiary does not receive a confirmation letter, he should call Health Care Options and verify that his choice has been recorded and request a confirmation letter.

Upcoming Events and Trainings

NSCLC Trainings

CCI Advanced, June 25, 2014, 1:00 p.m.

[Register Here](#)

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

CalDuals

Recorded DHCS webinars are available on the CalDuals [website](#).

CalDuals also recently released additional fact sheets on the Coordinated Care Initiative available [here](#).



Resources and Other Materials

Medicare Marketing Violation SMART Form. If you believe that a beneficiary has been the victim of fraud or a marketing violation, please use the SMART form, available [here](#), to record and report the incident to the Centers for Medicare and Medicaid Services (CMS).

Payment of Medicare Deductible and Coinsurance Fact Sheet. Medicare doctors do not need to be contracted with a Medi-Cal plan to receive payment for the Medicare deductible or coinsurance payment. Direct misinformed providers to the following [fact sheet](#) on CalDuals.

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 new NSCLC 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@nsclc.org.

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