





August 8, 2014

Department of Health Care Services

Delivered via email to Tracy Meeker, <u>Tracy.Meeker@dhcs.ca.gov</u>

CC: Margaret Tatar, <u>Margaret.Tatar@dhcs.ca.gov</u>; Hilary Haycock, <u>Hilary@harbageconsulting.com</u>

Re: Comments on the APL PCP Assignment in Medi-Cal Managed Care for LTSS

Greetings:

Thank you for the opportunity to comment on the All Plan Letter (APL) addressing PCP Assignment for Medi-Cal Managed Care Plans (MCP) for LTSS. We have provided redlined edits to the APL and general comments below.

- The APL should provide the MCPs clear guidance on how to communicate PCP assignment in instances where a beneficiary already has a Medicare PCP. Today, when a PCP is assigned by the MCP, many Medicare PCPs are refusing to see the beneficiary on the basis of the assignment. This is causing an unnecessary disruption in care. The APL should provide the MCPs with specific instructions on how to communicate with the Medicare PCP. We recommend that the MCPs reach out telephonically to the Medicare PCP and by letter explaining the limited care-coordination role the MLTSS PCP will play. Likewise, the MCP should send the beneficiary notice of the PCP assignment in writing and include a description of the MLTSS PCP's role. The APL should also include timeframes for contacting the Medicare PCP. We recommend that the MCP contact the Medicare PCP within two days of MLTSS PCP assignment to avoid disruption in care.
- The APL should include criteria for assigning a PCP. The MCPs must assign PCPs who meet the health, cultural, language, and accessibility needs of the beneficiary. The PCP should also be geographically accessible.

- The APL should direct the MCPs to inform beneficiaries that they can change PCPs at any time and do not have to continue to use the PCP assigned by the plan and have the right to choose their own PCP, with information and support from the plan concerning PCP availability, experience, and cultural, linguistic and accessibility capacity. As stated above, the APL should also direct MCPs to inform beneficiaries of the PCP assignment using a format and language that is ensures effective communication and provides a record of the assignment).
- The APL should include specific guidance on the role an MLTSS PCP will play when 1. the beneficiary has a Medicare PCP; and 2. when the beneficiary does not have a Medicare PCP. References to the APL on care coordination should be included.

Thank you for the opportunity to comment. Please feel free to contact us to discuss our recommendations further.

Sincerely,

Disability Rights California
Disability Rights Education and Defense Fund
National Senior Citizens Law Center