



December 5, 2014

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

This Issue

[Announcements](#)

[News on Notices](#)

[On-the-Ground Reports and Advocacy Tips](#)

[Upcoming Events and Trainings](#)

[Resources and Other Materials](#)

Announcements

The Coordinated Care Initiative will not be implemented in Alameda County. The Department of Health Care Services (DHCS) announced on November 13, 2014, that the Coordinated Care Initiative (CCI) will not move forward in Alameda County. Orange County continues to be slated for implementation starting in July 2015 with voluntary enrollment and in August 2015 with passive enrollment. An updated enrollment chart is available [here](#).

CCI Enrollment Dashboard Available Through November 1. DHCS released the CCI enrollment data through November 1, 2014. The dashboard includes 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. As of November 1, 2014, 51,527 individuals are enrolled in Cal MediConnect plans in five of the CCI counties. The dashboard is available [here](#).

DHCS Releases All Plan Letter for Primary Care Provider Assignment. DHCS has released an All Plan Letter (APL) directed to Medi-Cal plans addressing Primary Care Provider (PCP) assignment for dual eligible beneficiaries. The APL states that Medi-Cal plans should **not** assign a PCP to a dual eligible beneficiary except in very rare circumstances. Instead, a dual eligible will receive his primary care through his Medicare provider. The APL is available [here](#).

DHCS Makes Changes to the MLTSS Enrollment Timeline. Dual eligibles who are enrolled in a Medicare Advantage plans and in Duals Special Needs Plans (D-SNPs) not associated with a Cal MediConnect plan still have to choose a Medi-Cal plan (for example, a beneficiary enrolled in Kaiser’s Medicare plan still must choose a Medi-Cal plan). These individuals should not receive Cal MediConnect notices, but will receive notices informing them that they must choose a Medi-Cal plan. Originally, these individuals were slated for enrollment in Medi-Cal plans beginning in October. This is no longer the case. Instead, these dual eligibles will begin enrollment in January, but enrollment differs by county and birth month. Please refer to the enrollment timeline for county-specific data available [here](#).

DHCS Releases Cal MediConnecToons. DHCS created a series of animated informational videos to explain Cal MediConnect. The videos are available on CalDuals, [here](#) and on Vimeo for download, [here](#). DHCS is working on adding closed captioning and a version with Spanish audio in the near future.

News on Notices

Populations Slated for Enrollment into Cal MediConnect in January 2015 Receive Different Notices. There are multiple populations who are subject to

passive enrollment into Cal MediConnect plans in January who will not be enrolled by birth month. These populations will receive different notices than beneficiaries who are enrolled by birth month.

There are four populations slated for passive enrollment into Cal MediConnect plans in January. We have provided a summary below of the notices each of these populations will receive. For more information on these populations and the unique enrollment issues they face, please see NSCLC's "Cal MediConnect January 2015 Enrollment" factsheet available [here](#), and DHCS's FAQ on January enrollment available [here](#). Note: we have provided links to notices in English. Please visit the [CalDuals](#) website for notices and materials in other languages and for county-specific notices.

Beneficiaries with January birthdays in fee-for-service Medicare and Medi-Cal

Beneficiaries with January birthdays will receive the standard Cal MediConnect notices.

- [90-Day Notice/Medicare Part D Insert](#)
- Part D Disenrollment Notice explaining that the beneficiary will be disenrolled from his current Part D plan effective the first day his Cal MediConnect plan takes effect.
- [60-Day Notice](#)
- [Guidebook/Choice Book and Choice Form](#)
- [30-Day Notice](#)

Beneficiaries enrolled in a Duals Special Needs Plan (D-SNP) operated by a Cal MediConnect Plan

Beneficiaries who are enrolled in a D-SNP operated by a Cal MediConnect plan will receive additional and unique notices.

- [90-Day Notice/D-SNP Insert/Medicare Part D Insert](#)

- [D-SNP Plan Notice](#) (beneficiaries enrolled in LA Care’s D-SNP in Los Angeles County and Community Health Group’s D-SNP in San Diego County will receive a [termination notice](#))
- Part D Disenrollment Notice explaining that the beneficiary will be disenrolled from his current Part D plan effective the first day his Cal MediConnect plan takes effect.
- [60-Day Notice/D-SNP Insert](#)
- [Guidebook/Choice Book and Choice Form](#)
- [30-Day Notice/D-SNP Insert](#)

Beneficiaries who were reassigned to a Part D plan in 2014

Beneficiaries reassigned to a Part D plan in 2014 will receive the same notices as beneficiaries with January birthdays.

Beneficiaries who would have been reassigned to a Part D plan in 2015

Beneficiaries who would have been reassigned to a Part D plan in 2015 will receive additional and unique notices.

- [90-Day Notice/Medicare Part D Insert](#)
- Part D Notice explaining that the beneficiary’s Part D plan will cost the beneficiary money starting in 2015 (Annual Notice of Change).
- Part D Disenrollment Notice explaining that the beneficiary will be disenrolled from their current Part D plan effective the first day their Cal MediConnect plan takes effect.
- [60-Day Notice](#)
- [Guidebook/Choice Book and Choice Form](#)
- [30-Day Notice](#)

Part D Plans Send a Tailored Part D Disenrollment Notice Starting in November. Beneficiaries receive a Part D Disenrollment Notice from their Part D plan approximately 10 days after they receive their 60-day Cal MediConnect notice. The purpose of the notice is to inform beneficiaries that their Part D plan will change effective the first day they are covered by their Cal MediConnect plan. Previously, the Part D Disenrollment Notice did not make any reference to their pending enrollment into Cal MediConnect. Starting in November, Part D plans will now send a Part D Disenrollment Notice that explains that the beneficiary is being disenrolled because of their pending enrollment into Cal MediConnect. A sample of the notice is available [here](#).

On-the-Ground Reports and Advocacy Tips

Dual Eligibles Enrolled in Medi-Cal Plans Experiencing Problems Accessing Medi-Cal Covered Services. Dual eligible beneficiaries who opt-out of Cal MediConnect or who only have to join a Medi-Cal plan are having problems accessing their Medi-Cal covered services.

For the most part, a dual eligible will receive benefits that are primarily paid for by Medicare. There are, however, certain services that Medicare does not pay for, including non-emergency medical transportation, certain prescription drugs, most costs associated with durable medical equipment, and medical supplies (e.g. diabetic supplies, incontinence supplies, etc.). Prior to the CCI, dual eligibles would receive authorization for these Medi-Cal covered services by obtaining a Treatment Authorization Request (TAR) or a prescription. Duals are reporting that when they join a Medi-Cal plan, the Medi-Cal plan is requiring them to obtain new authorizations for these previously covered services leading to a delay and disruption in the access of these services. If your client is experiencing this problem, please contact the CCI Ombudsman at (855) 501-3077.

Upcoming Events and Trainings

NSCLC Trainings

CCI Basics: December 8, 2014, 3:00 – 4:00 PM, [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

How to Update Your Address. DHCS has provided a summary of how beneficiaries should update their address with either the county or Social Security to ensure that they are receiving notices. The summary is available [here](#).

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. Direct misinformed providers to the following [fact sheet](#) on CalDuals. Providers also cannot balance bill dual eligibles. See NSCLC's alert on balance billing available [here](#). NSCLC released a factsheet supplementing this alert available [here](#).

NSCLC County-Specific Fact Sheets on D-SNP Policy. The Department of Health Care Services (DHCS) released a new [Duals Special Needs Plan \(D-SNP\) policy](#) impacting beneficiaries residing in counties implementing the CCI. The National Senior Citizens Law Center (NSCLC) developed county-specific fact sheets that summarize the D-SNP policy and outline for advocates how beneficiaries are impacted depending on the type of Medicare Advantage plan in which they are enrolled. The fact sheets are available [here](#).

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

DHCS Mailbox For Cal MediConnect Notices Sent in Error. DHCS has created an email inbox that advocates can use to fix situations where beneficiaries have been or are at risk of being erroneously enrolled in Cal MediConnect. The situation arises when an individual not subject to passive enrollment erroneously receives an enrollment notice. The new email inbox is cmc.mltss@dhcs.ca.gov. DHCS has provided the following information about the new inbox:

- Routine plan changes and disenrollments should be handled with Health Care Options. Many beneficiaries can use continuity of care to see their providers while a routine plan change or disenrollment is in process. Beneficiaries should contact their plan to make this request.
- Do not send personal health information or ID numbers through unsecured email. You can send an email request to the new inbox for a secure email from DHCS, and you can respond to that secure email with this information.
- You will receive a response to your request within 2 to 3 business days to confirm receipt and that DHCS is working on the issue. You will receive an email confirmation of the issue resolution.
- You may not receive specifics on the case itself if you are not the authorized representative or the beneficiary.

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@nsclc.org.

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