

INTRODUCTION TO CAL MEDICCONNECT

A program of the Coordinated
Care Initiative for dually eligible
beneficiaries.

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Health Insurance Advocacy &
Counseling Program (HICAP)

December 2013



HEALTH INSURANCE COUNSELING AND ADVOCACY PROGRAM (HICAP) A PROGRAM OF ELDER LAW & ADVOCACY

Some of Our Services Include:

- Medicare and related health insurance counseling for residents of San Diego and Imperial counties.
- Long- Term Care Insurance Counseling
- Low-Income application assistance for Part D prescription drug plans and Medicare Premiums
- Legal Assistance for Medicare appeals and billing issues
- ALL SERVICES ARE FREE
- ALL SERVICES ARE CONFIDENTIAL

• Call: 1800-434-0222



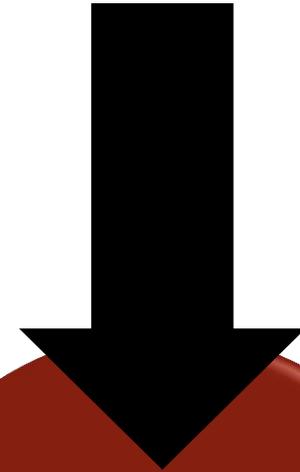
What is the Coordinated Care Initiative?

Mandatory
Medi-Cal
Managed
Care

LTSS
Integration
into
Managed
Care

Cal MediConnect

Dual Beneficiaries Only



Mandatory
Medi-Cal
Managed
Care

LTSS
Integration
into
Managed
Care

Cal MediConnect

HOW THE OF BENEFITS MEDICARE AND MEDI-CAL ARE DELIVERED TODAY:

MEDICARE

Part A: Hospital, Hospice, Home Health, Short Term Nursing Facility
Part B: Physicians, Durable Medical Equipment, Ambulance
Part D: Prescription Medication

LTSS

In-Home Supportive Services (IHSS),
Community Based Adult Services (CBAS),
Multipurpose Senior Services Program (MSSP),
Nursing Facility Care

MEDI-CAL

Medicare deductibles, co-pays, Part B premium and other medically necessary health care not covered or not fully covered by Medicare.

HOW THE OF BENEFITS MEDICARE AND MEDI-CAL ARE DELIVERED TODAY:

MEDICARE

FFS or Managed Care

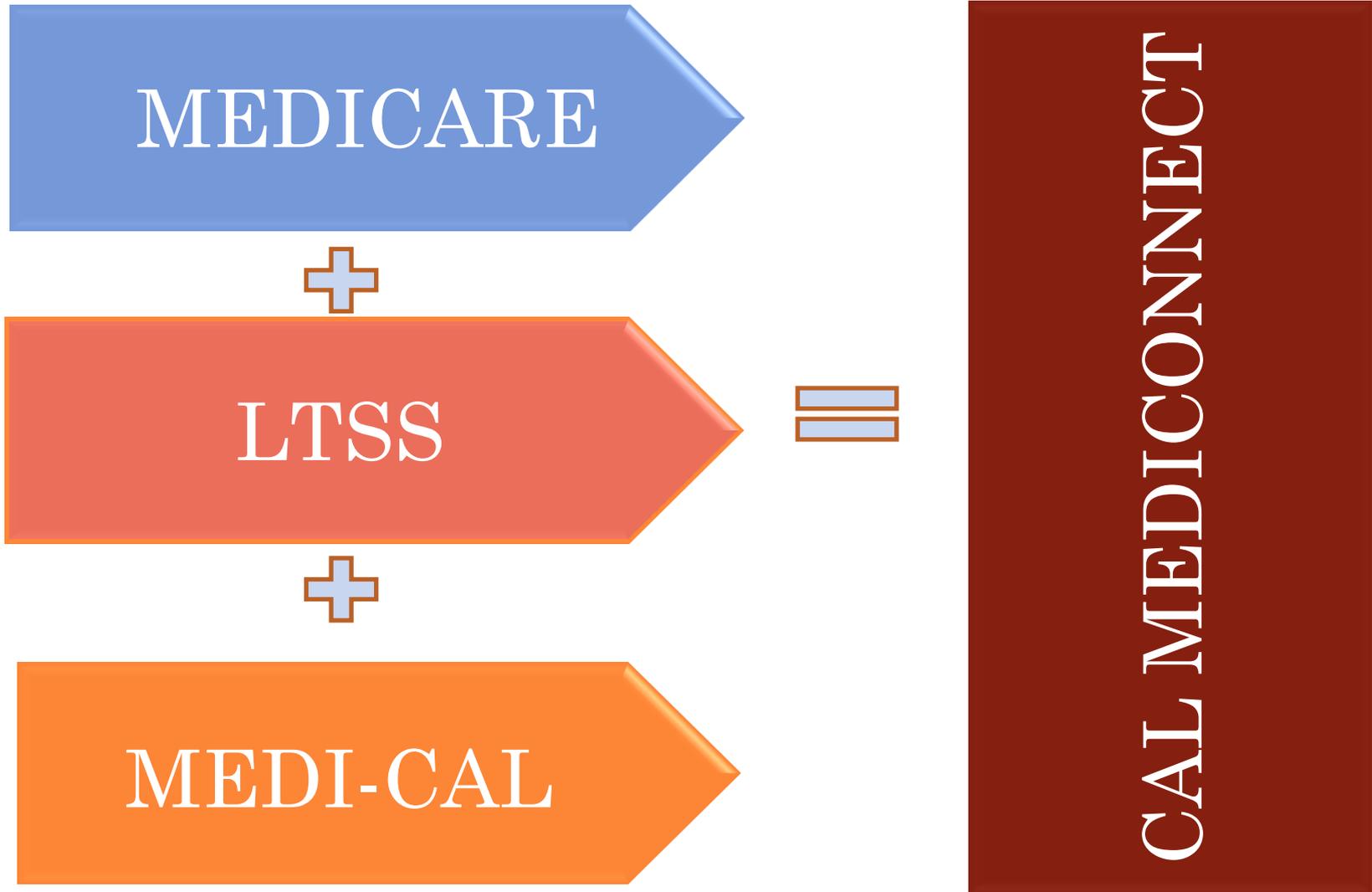
LTSS

FFS

MEDI-CAL

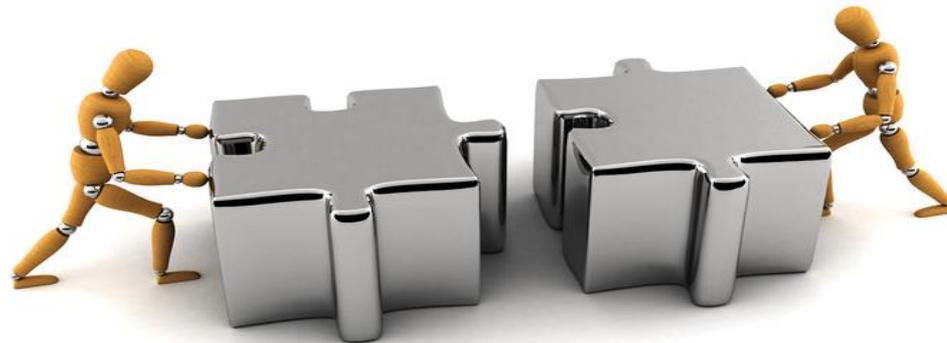
FFS or Managed Care

THIS PROGRAM MOVES EVERYTHING INTO
A SINGLE MANAGED CARE PLAN.



WHAT IS CAL MEDICONNECT?

Integration of **Medicare** and **Medi-Cal** into a single managed care plan.



**DUAL
BENEFICIARIES
ONLY!**

WHAT IS MANAGED CARE?

Government does not pay the providers directly but rather pays the Plan who then pays the providers.



Each Plan has its own network of providers and hospitals and formulary of medications.

CAL MEDICCONNECT PLANS IN SAN DIEGO

Molina

Care 1st

Community Health

Health Net



WHY?



Interdisciplinary
Care Team



Patient-Centered
Care



Save Money

WHAT BENEFITS WILL BE INCLUDED?

Services You Already Receive

Access to Care Team
Care Manager, and
Individualized Care
Plan

Single Phone
Number & Card

More Coordinated Care

Additional Benefits
on an Individual
Basis

Vision

Non-Emergency
Transportation

New Medi-Cal
Benefits: Dental &
Mental Health

WHAT RIGHTS WILL I HAVE?

No additional costs

**Continuity of Care:
6 months for
Medicare and 12
months for Medi-Cal**

**Medical Exemption
Request**

**Materials in your
language.**

**Reasonable
modifications so that
you can access these
services.**

Appeal Process

WHEN IS CCI GOING TO HAPPEN?

Cal MediConnect is currently set to begin on April 1st.

Enrollment is based on your birth month.

If your birthday is April 14th, your enrollment date will be April 1st.

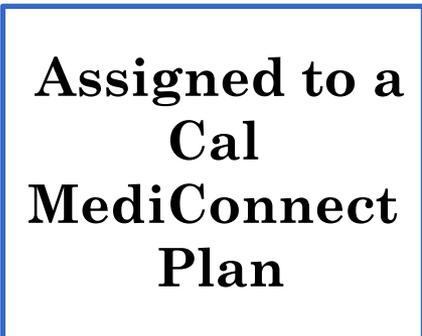
If your birthday is June 21st, your enrollment date will be June 1st.



ENROLLMENT = PASSIVE ENROLLMENT



**Do
Nothing/
Passive
Enrollment**

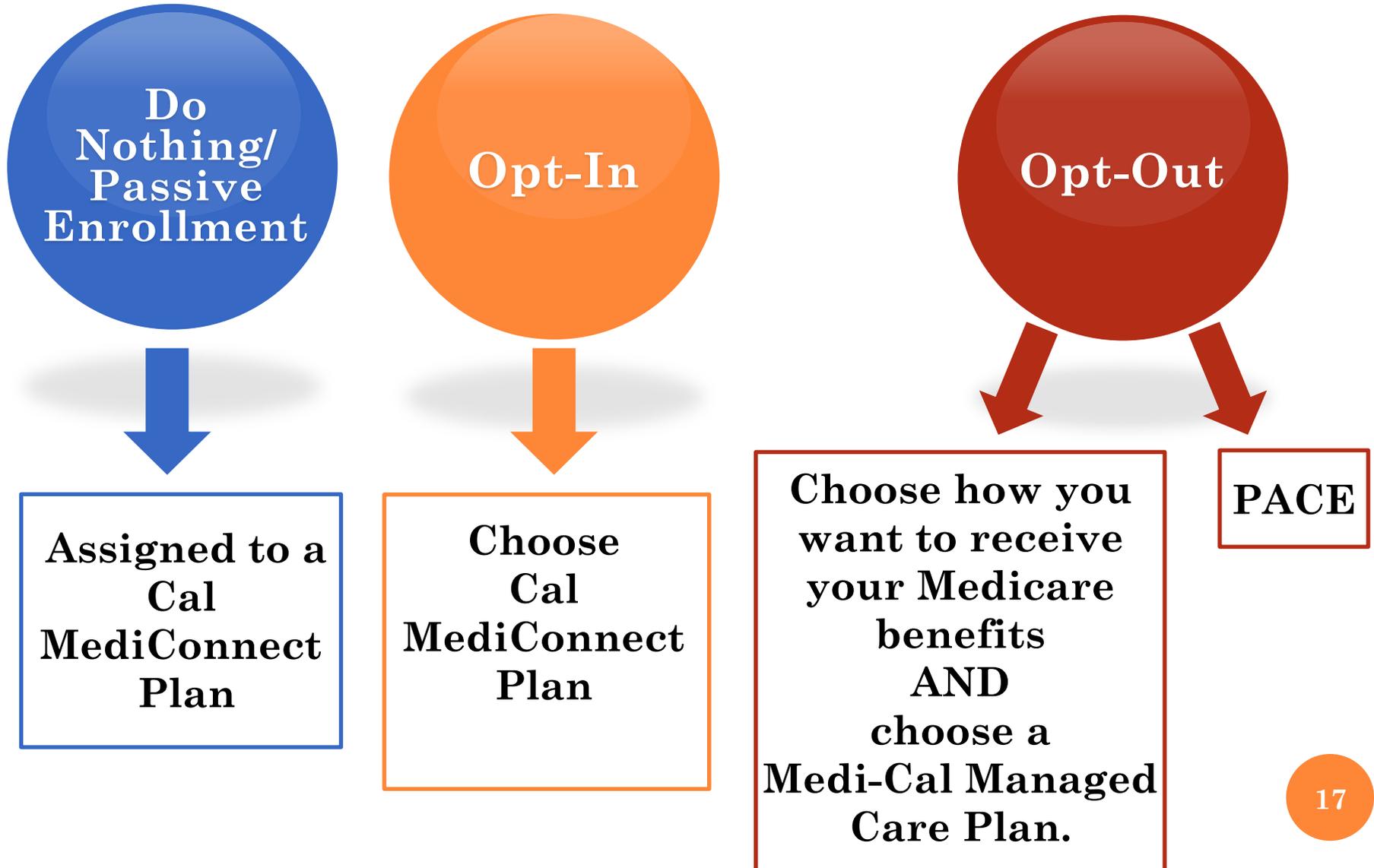


**Assigned to a
Cal
MediConnect
Plan**

ENROLLMENT = PASSIVE ENROLLMENT



ENROLLMENT = PASSIVE ENROLLMENT



MEDICARE:

Original Medicare

--or--

Medicare Advantage
Plan

AND

MEDI-CAL:

Must choose a Medi-Cal
Managed Care Plan

--or--

Medi-Cal Managed Care
Plan will be assigned.



Opt-Out

PACE:

PACE Requirements:

- Are 55 or older
- Able to live in community safely.
- Need a high level of care equal to nursing home services
- Live in a ZIP code served by PACE

See all providers at
PACE Center

EXCEPTIONS

Are you already enrolled in a Medicare Advantage Plan? You will not be passively enrolled into Cal MediConnect.



But, you must still enroll in a Medi-Cal Managed Care Plan.

Other Exceptions Exist As Well including...

ESRD, VA Home Resident, SOC not regularly met, other health insurance (e.g. Medigap), DDS/HCBS waiver

PACE enrollee, AIDS Healthcare Foundation, IHO Waiver



How Will Enrollment Work? Notices in the Mail

90-day
Notice

Basic Notice

60-day
Notice

Bulk of Information

Plan Information
Enrollment Materials

30-day
Notice

Final Reminder

Confirmation of your
choice

-or-

Which plan you will
be assigned to.

HOW TO ENROLL

To choose a plan or opt-out of Cal MediConnect you can:



Mail back the enrollment material included with the 60-day notice.



Call Health Care Options and tell them which plan you would like to enroll with.

OOPS!

After enrollment, you may change your mind and may opt-in, opt-out or disenroll at any time (effective the first of the next month).



HOW TO GET HELP? CONSIDERATIONS

Are your doctors, hospitals and other providers in the plan's network?

Are your medications covered under the new plan?

Are the additional benefits of vision and non-emergency transportation or the idea of care-coordination important to you?

UNSURE ABOUT WHAT TO CHOOSE? STILL CONFUSED?

- Health Insurance Counseling & Advocacy Program (HICAP)
(800) 434-0222 (858) 565-8772
- Consumer Center for Health Education and Advocacy (CCHEA)
(877) 734-3258
- Disability Rights California
(619) 239-7861

