



COORDINATED CARE INITIATIVE SAN DIEGO COUNTY

San Diego County is one of eight counties in California (*Alameda, Los Angeles, Orange, Riverside, San Bernardino, San Mateo, and Santa Clara*) selected to implement the State’s new Coordinated Care Initiative (CCI), an improved delivery system that will coordinate the delivery of health care and long term services and supports (LTSS) to San Diego County seniors and people with disabilities who are either dually eligible for both Medicare and Medi-Cal benefits (*dual eligibles or duals*) or who receive Medi-Cal benefits only.

TWO PARTS OF THE COORDINATED CARE INITIATIVE



Figure 1

1. **Cal MediConnect:** A **VOLUNTARY**, three-year demonstration program that will allow approximately 55,798 dual eligibles in San Diego County to choose a Cal MediConnect plan offered by select health plan providers (Figure 1) or Program of All-inclusive Care for the Elderly (PACE) to deliver their Medicare and Medi-Cal benefits that will coordinate:

- Medical
- Behavioral Health
- Long-Term Institutional
- Long Term Services & Supports (*LTSS listed under # 2*)

2. **Managed Medi-Cal Long-Term Services and Supports (MLTSS):**

Dual eligibles who do not choose a Cal MediConnect plan or PACE and nearly all Medi-Cal beneficiaries age 21 and older (approximately 64,000 in San Diego County) will be **REQUIRED** to join a Medi-Cal managed care health plan to receive their Medi-Cal benefits, including MLTSS and Medicare wrap-around benefits. In addition to the health plan providers listed in Figure 1, Kaiser Permanente is a MLTSS enrollment option. MLTSS services include the following:

- In-Home Supportive Services (*IHSS*)
- Multipurpose Senior Services Program (*MSSP*)
- Community-Based Adult Services (*CBAS*)
- Skilled Nursing Facilities (*SNF*)

COORDINATED CARE INITIATIVE GOALS

- Improve the quality of care for duals.
- Maximize the ability of duals to remain safely in their communities.
- Improve continuity of care across acute care, long-term care, behavioral health, and home-and community-based services settings using a person-centered approach.
- Promote a system that is sustainable, person-and family-centered, and enables duals to attain or maintain personal health goals.



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ENROLLMENT PROCESS

BEGINNING APRIL 2014

1. **Cal MediConnect** enrollment will begin April 2014 and will be phased in over 12 months. The California Department of Health Care Services (DHCS) will mail notification of these changes to **eligible** participants starting in January 2014.
2. **Managed Medi-Cal Long Term Services and Supports (MLTSS)** enrollment will occur in phases beginning April 2014. DHCS will mail notification of these changes to **eligible** participants in advance of their enrollment.

ELIGIBILITY CRITERIA FOR CAL MEDICONECT

To be eligible for coordinated Medicare & Medi-Cal benefits through Cal MediConnect, a beneficiary must meet the following criteria:

- ✓ Be age 21 or older and live in San Diego County
- ✓ Have full benefits:
 - Full Medi-Cal coverage and;
 - Enrolled in Medicare Parts A and B (including those who receive Parts A and B through a Medicare Advantage Plan) and eligible for Part D
- ✓ If they have a Medi-Cal share of cost, they must meet it each month by being in a Medi-Cal funded nursing facility or receiving IHSS

BENEFICIARIES EXCLUDED FROM CAL MEDICONECT IN SAN DIEGO COUNTY

- Enrolled in other private or public health insurance.
- Enrolled in the Program of All-Inclusive Care for the elderly (PACE).
- Have developmental disabilities and are receiving services through a Department of Developmental Services (DDS) 1915(c) waiver; regional center; state developmental center; or intermediate care facilities for the developmentally disabled (ICF/DD).
- Enrolled in the following 1915 (c) waivers: Nursing facility/acute hospital waiver service; HIV/AIDS waiver services; assisted living waiver serves; and In-Home Operations waiver services.
- Residing in a veterans' home of California.
- Diagnosed with end-stage renal disease (ESRD) **PRIOR** to enrolling in Cal MediConnect.

FOR MORE INFORMATION ON HEALTH PLAN AND ENROLLMENT OPTIONS

- Health Insurance Counseling & Advocacy Program (HICAP): **858-565-8772**
- Consumer Center for Health Education & Advocacy: **877-734-3258**

