



Department of
Health Care Services



California's Coordinated Care Initiative

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Why Coordinated Care?

- Some people with multiple chronic conditions see an average of 14 different doctors and fill 50 prescriptions a year.
- This is common among people with both Medicare and Medicaid, referred to as “dual eligibles,” who often are sicker and poorer than other beneficiaries.
- Today’s care delivery system is fragmented and doesn’t provide the care coordination dual eligibles need. This fragmentation leads to increased risk of admission to the hospital or nursing home.

Federal-State Cooperation

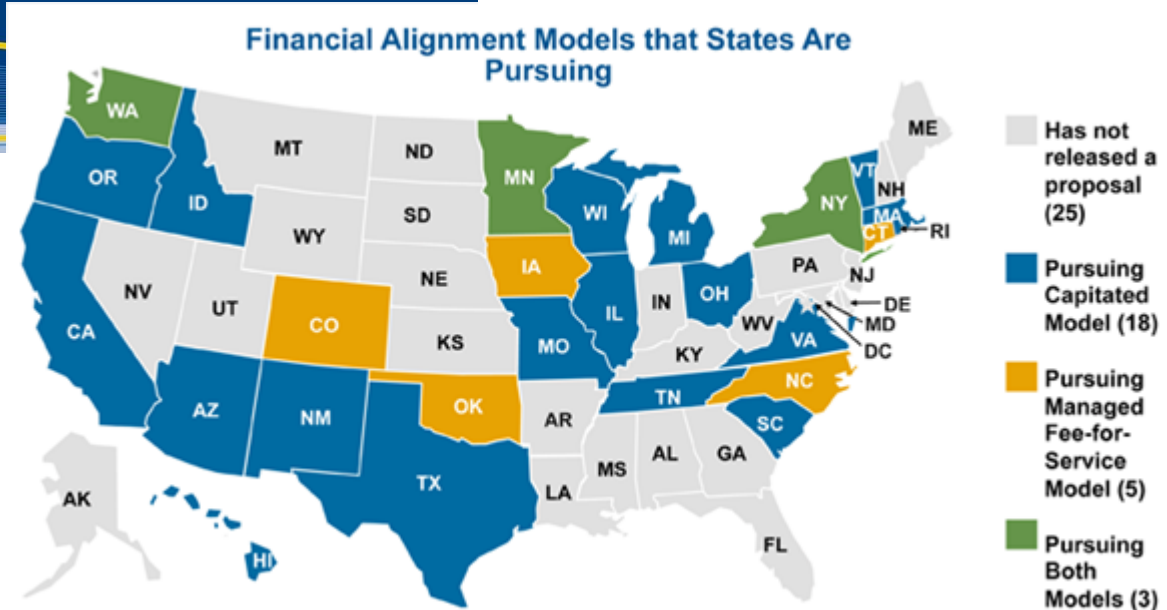


Integrating Care for Medicare-Medicaid Enrollees



Medicare-Medicaid Coordination Office
Centers for Medicare & Medicaid Services

2010 Health Reform Law created the **Medicare-Medicaid Coordination Office** in the Center for Medicare Innovation. Working with states on “**financial alignment models.**”



State Efforts to Coordinate Care

- California is on the forefront of the movement toward coordinated care.
 - Seniors and Persons with Disabilities
 - Coordinated Care Initiative (CCI), including the Duals Demonstration
 - Community-Based Adult Services (CBAS) as a managed care benefit
 - Expansion of managed care in rural counties

The Coordinated Care Initiative (CCI)

- Building on many years of stakeholder discussions, the CCI was enacted in July 2012 to expand coordinated care to Medi-Cal beneficiaries in eight counties.
- CCI Legislation:
 - [SB 1008](#) (Chapter 33, Statutes of 2012) and
 - [SB 1036](#) (Chapter 45, Statutes of 2012).

Reminder: The Differences between Medicare and Medicaid

<p style="text-align: center;">MEDICARE</p> <ul style="list-style-type: none"> • People 65 or older • People under 65 with certain disabilities • People with End-Stage Renal Disease (ESRD) & ALS 	<p style="text-align: center;">MEDICAID (Medi-Cal)</p> <ul style="list-style-type: none"> • Low-income Californians
<p>Which program pays for what service?</p>	
<ul style="list-style-type: none"> • Hospital Care • Physician & ancillary services • Short-term skilled nursing facility care • Home health care • Hospice • Prescription drugs • Durable medical equipment 	<ul style="list-style-type: none"> • Medicare cost sharing • Long-term nursing home (after Medicare benefits are exhausted) • Long-term services and supports (LTSS) (including CBAS, MSSP, IHSS, HCBS waivers) • Prescriptions and durable medical equipment not covered by Medicare



Coordinated Care Initiative: Two Parts

- Medi-Cal Managed Long-Term Services and Supports (MLTSS)
 - Medi-Cal beneficiaries in 8 counties, including dual eligibles, will be required to join a Medi-Cal managed care health plan to receive their Medi-Cal benefits, including LTSS and Medicare wrap-around benefits.
- Duals Demonstration
 - A voluntary three-year demonstration program in 8 counties for Medicare and Medi-Cal dual eligible beneficiaries to coordinate medical, behavioral health, long-term institutional, and home- and community-based services through a single organized delivery system.

8 CCI Counties

- **Los Angeles**
 - Health Net and LA Care
- **Orange**
 - CalOptima
- **San Diego**
 - Molina, Care 1st, Community Health Group, Health Net
- **San Mateo**
 - Health Plan of San Mateo
- **Alameda**
 - Alameda Alliance & Anthem Blue Cross
- **Santa Clara**
 - Santa Clara Family Health Plan & Anthem Blue Cross
- **San Bernardino**
 - Inland Empire Health Plan & Molina
- **Riverside**
 - Inland Empire Health Plan & Molina



CCI Goals

- Empower people to achieve their health goals.
- Help people stay in their homes -- and stay out of the hospital and nursing home.
- Improve care coordination across all health care and social services.
- Bend the health care cost curve.

How It Will Be Implemented

- Almost everyone with Medi-Cal benefits in the eight counties will be required to select a managed care plan, including dual eligibles
 - If they do not select a plan, the state will automatically assign them one.
- People with Medi-Cal long-term services and supports will receive them through their health plan.
 - No sooner than March 2013 in Orange and San Mateo counties.
 - Phased in by birth month starting no sooner than March 2013; Alameda, Santa Clara, Los Angeles, San Diego, Riverside, San Bernardino.
- The voluntary Demonstration Project for dual eligibles will be phased-in, starting no sooner than June 2013.
 - Using passive enrollment with an “opt out”
 - Dual eligibles may opt out of integrating their Medicare benefits through the demonstration but must still enroll in a health plan for their Medi-Cal benefits.

The Demonstration

- The Demonstration will run from June 2013 – December 2016
- Brand new opportunity to coordinate care: One person, one plan, all the same benefits.
- Beneficiaries in the Demonstration will benefit from:
 - Keeping all existing Medicare and Medi-Cal benefits
 - Integrated long-term services and supports (LTSS):
 - In-Home Supportive Services (IHSS)
 - CBAS
 - Multipurpose Senior Services Program (MSSP)
 - Nursing home care
 - Coordination with carved out county mental health and substance use programs

Demonstration Timeline

- March 2012: Health Plans were selected via a Request for Solutions process
 - All are Medi-Cal managed care plans
 - All have experience operating a Dual Eligible Special Needs Plans (D-SNP)
 - Health Plans underwent and passed a Model of Care review by NCQA
- Now: Medi-Cal is firming up the details of the Demonstration project with CMS and refining an outreach plan.
- Fall 2012: State and federal governments will conduct a readiness review of the health plans.
- Winter 2012: Three-way contracts between the health plans, CMS and California established.
- Ongoing: Beneficiary and provider outreach

Who is Eligible for the Demonstration?

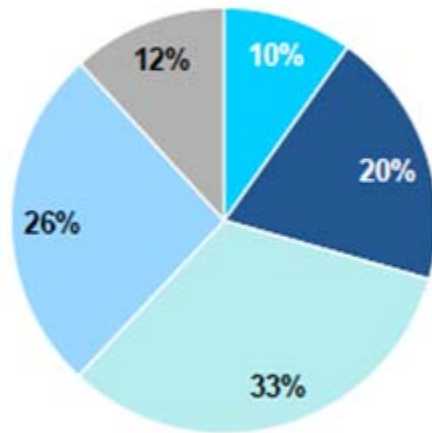
- 560,000 full-benefit dual eligibles in the 8 selected counties
- Exclusions:
 - Dual eligibles younger than 21
 - Duals with partial benefits or other health coverage
 - Home and Community Based Services waiver enrollees (except MSSP)
 - Duals with developmental disabilities
 - Duals with ESRD
 - PACE and AIDS Health Care Foundation enrollees.

Who is eligible for the Demonstration (cont.)

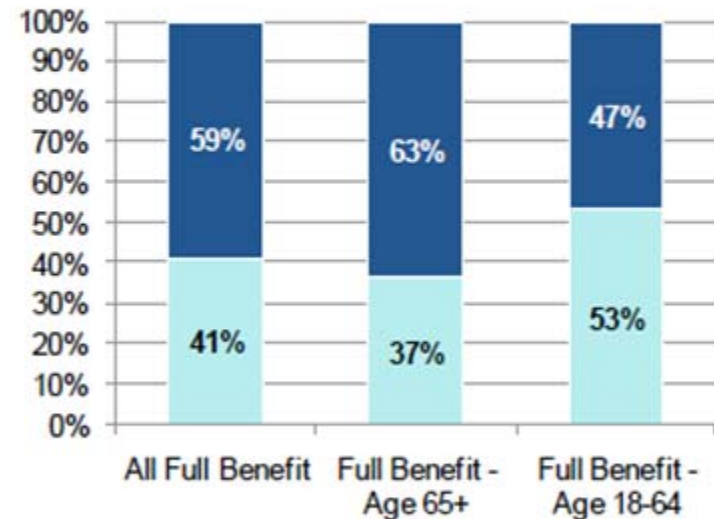
- 71% are age 65 and older
 - People age 85 and older comprised 17% of this group
- The majority are women

FIGURE 4. FULL BENEFIT MEDICARE-MEDICAID ENROLLEES BY AGE GROUP AND GENDER: CALIFORNIA, 2007

■ <45 ■ 45-64 ■ 65-74 ■ 75-84 ■ 85+



■ Male ■ Female

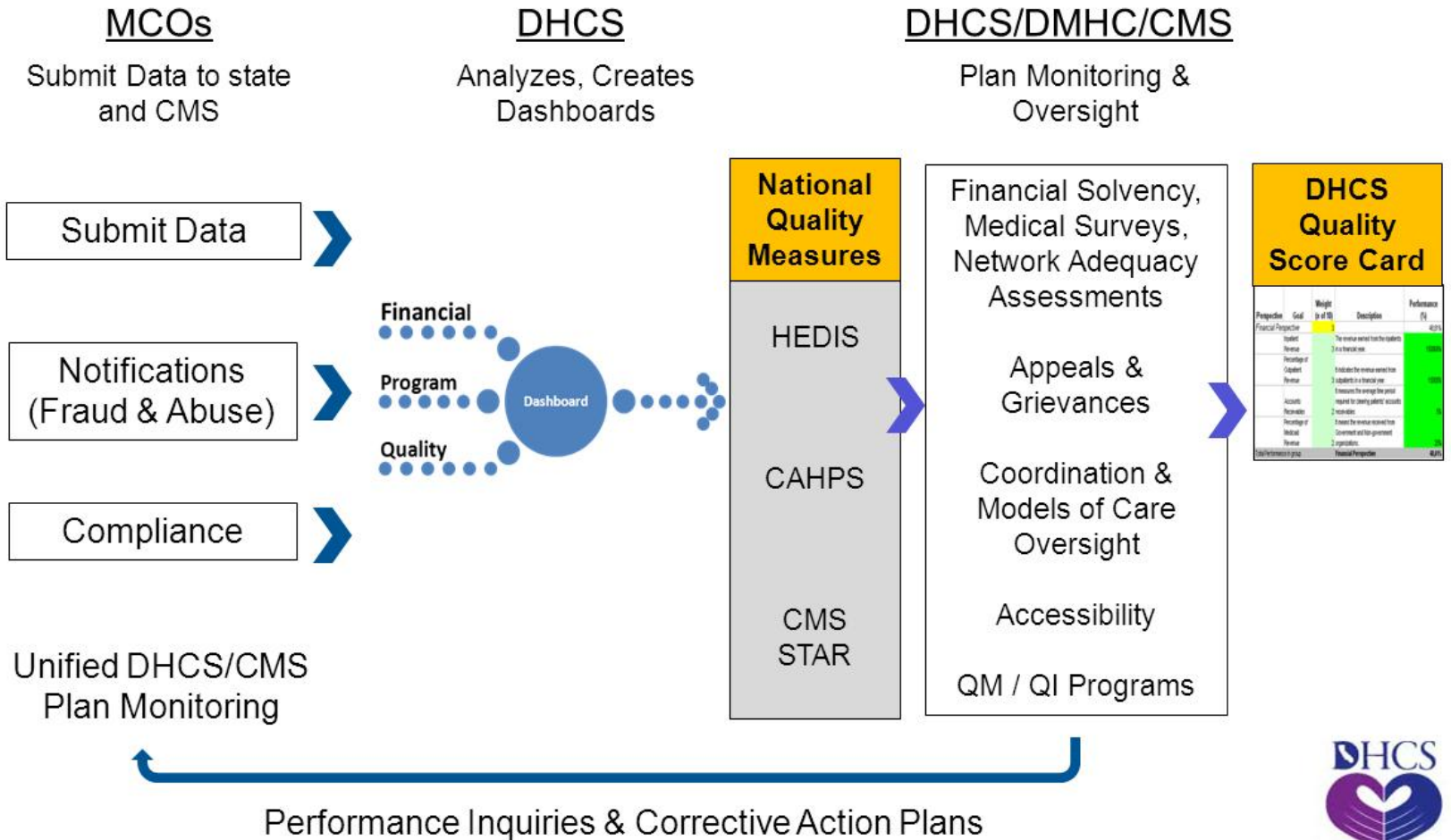


Source: CMS, Medicare-Medicaid Enrollees State Profile, 2012

Coordinated Care Initiative Protections

- The legislation establishing the CCI contains many protections for beneficiaries covering:
 - Meaningful Information of Beneficiary Rights and Choices
 - Notices sent at least 90, 60 and 30 days prior to enrollment (coordinated with CMS).
 - Continuity of Care
 - People can continue to see their Medi-Cal providers for 12 months and Medicare doctors for six months.
 - Self-Directed Care
 - People will have the choice to self-direct their care, including being able to hire, fire, and manage their IHSS workers.
 - Appeals & Grievances
 - DHCS is working with CMS on a coordinated appeals process.
 - Strong Oversight & Monitoring
 - Evaluation Coordinated with DHCS and CMS

Health Plan Monitoring



Projected Savings from Reducing Unnecessary Hospital and Nursing Home Admissions



- Physician services
- Pharmacy
- Home- and community-based services



- Inpatient hospital
- Nursing home


“This is not about cutting rates for providers ... This is about working with providers in a more integrated, coordinated delivery system to drive the right outcomes,” -- Toby Douglas, Medi-Cal Director.

Key Things to Remember

- People can keep the Medicare and Medi-Cal benefits they have today.
- We are building on Medicare Advantage Special Needs Plans.
- People will continue hiring, firing and managing their IHSS providers. Counties will decide hours.
- Care coordination will help people stay in their homes and stay out of the hospital and nursing home.
- People's needs and preferences will drive their care.

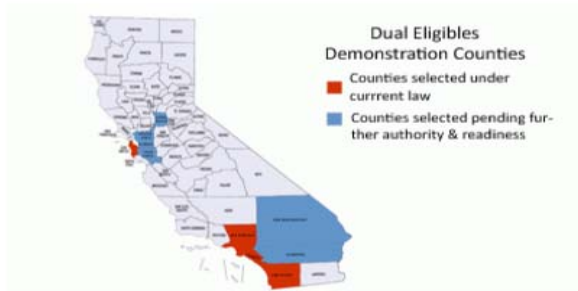
Keeping You Informed

CalDuals Keeping you informed about Medicare/Medi-Cal integration

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Demonstration Counties

The California Department of Health Care Services (DHCS) announced on Wednesday April 4, 2012 that Los Angeles, Orange, San Diego and San Mateo counties would be the initial participants in a proposed three-year demonstration project aimed at improving the coordination of care for low-income seniors and persons with disabilities who are dually eligible for Medicare and Medi-Cal.

[Read More](#)



Learn More

Get background information on California's dual eligibles demonstration, including answers to Frequently Asked Questions.

[Read more](#)



Key Resources

Find key documents and links related to California's demonstration to integrate care for dual eligible individuals.

[Read more](#)



Events

Track upcoming events related to the dual eligibles demonstration, including upcoming stakeholder work group meetings.

[Read more](#)

Website: www.CalDuals.org

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