Stakeholder Update Webinar

Coordinated Care Initiative

CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES
DECEMBER 12, 2019
Roadmap

- CalAIM: Expanding Access to Integrated Care for Dual Eligible Californians
- Medi-Cal Managed Long-Term Care
- Questions and Answers
Transitioning to Aligned Managed Care Enrollment for California Dual Beneficiaries

- December 9, 2019 DHCS released this memo for stakeholder feedback
- Feedback is due January 31, 2020
- Please send all feedback to CalAIM@dhcs.ca.gov
Goals of California Advancing and Innovating Medi-Cal (CalAIM):  

1. Identify and manage member risk and need through Whole Person Care approaches and addressing Social Determinants of Health;  
2. Move Medi-Cal to a more consistent and seamless system by reducing complexity and increasing flexibility; and  
3. Improve quality outcomes and drive delivery system transformation through value-based initiatives, modernization of systems and payment reform.  

*Focused on providing intensive care coordination for enrollees with the most complex care needs, addressing the social determinants of health, and advancing integration of physical, behavioral, and oral health care.*
CalAIM Changes for Dual Eligibles

- Learnings from the Coordinated Care Initiative
- DHCS will carve in long-term care and coverage of transplants to become the responsibility of Medi-Cal managed care health plans
- DHCS will carve out the Multipurpose Senior Services Program (MSSP) benefit all 7 CCI counties
- Transition Cal MediConnect and the Coordinated Care Initiative:
  - Statewide mandatory Medi-Cal Managed Care enrollment for duals
  - Statewide Dual Eligible Special Needs Plans (D-SNPs)
    - No mandatory enrollment in D-SNPs
<table>
<thead>
<tr>
<th>Year</th>
<th>Policy Change</th>
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<td>2020</td>
<td>• All existing D-SNPs must meet new regulatory integration standards effective 2021</td>
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| 2021 | • January 1: Statewide integration of long-term care (LTC) into managed care for non-dual eligible Medi-Cal populations  
• Voluntary in lieu of services (ILOS) in all Medi-Cal Managed Care Plans (MCPs)  
• January 1: Multi-purpose Senior Services Program (MSSP) carved out of managed care in CCI counties  
• Plan for transition of CMC members to D-SNPs |
| 2022 | • December 31: Discontinue CMC and CCI |
| 2023 | • January 1: Statewide integration of long-term care (LTC) into managed care for all dual eligible beneficiaries  
• January 1: All CMC members cross walked to matching D-SNP and MCPs, subject to CMS and state requirements  
• Statewide mandatory enrollment of most duals into MCPs  
• MCPs required to begin operating D-SNPs (voluntary enrollment for dual eligibles)  
  o MCPs without existing Medicare products may phase in late |
| 2026 | • Implement MLTSS statewide in Medi-Cal managed care |
Cal MediConnect
Transition

Goals:
- Build on lessons learned in Cal MediConnect
- Create more opportunities for integrated care for dual eligibles
- Simplify administration
- Take advantage of new federal Medicare rules
Statewide mandatory enrollment of duals into MCPs by 2023
  - Duals will NOT be required to change their Medicare coverage

Update education and enrollment materials

Provider education

Technical Assistance
  - Support MCPs with different requirements around care coordination for dual eligibles vs. Medi-Cal only beneficiaries
What is a D-SNP?

- Dual Eligible Special Needs Plans (D-SNPs)
  - Medicare Advantage health care plans that provide specialized care to duals and offer wrap-around services
- State Medicaid Agency Contract (SMAC) with DHCS
  - Updated SMAC for January 1, 2021
- Voluntary enrollment option for duals
- Require all MCPs to pursue offering D-SNPs for full-benefit dual eligibles
- Limit enrollment into DSNP “look-alikes” plans
D-SNP Integration Requirements

- Model of Care should address Medicare & Medi-Cal services to support:
  - Coordinated care
  - High-quality care transitions
  - Information sharing

- FIDE and HIDE D-SNPs will be permitted

- Admissions notification policy
Reporting Requirements, Oversight, and Quality

- Leverage CMS reporting requirements and oversight
- Align DHCS requirements with CalAIM
- Education and training to the LTC Ombudsman
Transitions and Enrollment Policies

- Voluntary Enrollment
  - Medicare Fee-For-Service (FFS) Dual Eligibles
- Default Enrollment
- Crosswalk Enrollment
- Aligned Enrollment
- Look-Alike Plans
- Expectations to Aligned Enrollment
- D-SNPs without Medi-Cal Contracts in Service Area
- Delegated MCPs
Enrollment Consumer Protections

- Limiting Churn
- Marketing and Brokers
- Send Notices to MLTSS Duals
Medi-Cal Managed Long-Term Care

- 2021 – Statewide integration of long-term care into managed care
- Harnessing best practices from Cal MediConnect plans for smooth transitions
- Considerations for coordination with long-term care facilities and skilled nursing facilities
Q & A

If you have a question, please click on the “raise hand” icon.
Next Steps

D-SNP policy feedback is due January 31, 2020. Please send all feedback to CalAIM@dhcs.ca.gov.

For more information on the CCI – including enrollment, quality data, and toolkits – visit www.calduals.org.

You can send any questions or comments to info@CalDuals.org.