

Anthem Blue Cross 11050 Olson Dr., Suite 110 Rancho Cordova, CA 95670-5600 Tel 916.858.3568 Fax 916.636.2310

May 24, 2012

Melanie Bella, Director Medicare-Medicaid Coordination Office Centers for Medicare and Medicaid Services 7500 Security Boulevard Baltimore, Maryland 21244-1850

Dear Ms. Bella:

On behalf of Anthem Blue Cross d/b/a Blue Cross of California Partnership Plan, Inc. ("Anthem"), I am pleased to provide this letter in support of the demonstration proposal to integrate care for individuals who are eligible for both Medicare and Medicaid ("dual eligibles") currently proposed by the California Department of Health Care Services (DHCS). This initiative (the "Demonstration") is an important step in improving care for a subset of California's most vulnerable populations.

We have partnered with DHCS in serving the needs of the Medi-Cal population since 1996, and we currently support the unique needs of over 750,000 Californians enrolled in the State's Medi-Cal, County Medical Services Program (CMSP), and Healthy Families programs. Additionally, Anthem serves approximately 250,000 Medicare Supplemental members and over 50,000 Medicare Advantage members in California.

As part of the WellPoint corporate organization, Anthem is able to leverage the longstanding experience of our affiliated Medicaid health plans that provide health care services to vulnerable populations in a number of states, and we have built on this experience to develop a model of care that best meets the needs of dual eligibles. Our solution is based upon the differentiated approach provided by CareMore, a new member of the WellPoint family of companies. CareMore is a senior-focused health care delivery program that includes Medicare Advantage plans and Neighborhood Care Centers designed to deliver proactive, integrated, individualized health care to members. The CareMore model has continuously raised the bar in achieving exceptional outcomes for vulnerable populations, and we will approach DHCS' proposed program with the same culture of collaboration and focus on doing what is right for the member.

Our goals for the Demonstration are to design, develop and execute innovative and proven solutions, in collaboration with DHCS, the Centers for Medicare and Medicaid Services (CMS) and county and community partners, to ensure dual eligible members have a full continuum of care that is coordinated and integrated. Building on our CareMore foundation, we will develop a health care delivery model that cuts across traditional Medicare and Medi-Cal service boundaries so that the two programs are delivered in the best overall way – that is, with improved health and quality of life outcomes, high member satisfaction, and overall cost-effectiveness with appropriate incentives to promote quality.

As a longstanding and committed health care partner with the state of California, Anthem fully supports DHCS' Demonstration for dual eligibles. We believe this Demonstration will help

Melanie Bella, Director Centers for Medicare and Medicaid Services May 24, 2012

Page 2 of 2

eliminate barriers to efficient care and produce positive health outcomes for dual eligibles by: (1) increasing access to comprehensive, appropriate, and cost-effective services; (2) integrating various administrative processes for beneficiaries and providers; and, (3) establishing coordinated, person-centered care. These efforts will promote timely, efficient and effective care without the added burden of navigating multiple systems and processes.

More specifically, under the proposed Demonstration, individuals will benefit from expanded access to services and care coordination through person-centered care teams that will include medical providers, behavioral health, long-term services and supports, and other individuals (e.g., family caregivers) identified as important contributors to a member's care. The Demonstration will also give individuals and their care teams the flexibility to develop a package of acute, behavioral health, long-term services and supports, and community support services that best meet the individual's health.

The state of California has taken steps over the past several years to implement innovative strategies to improve care and reduce health care costs for California's most vulnerable populations. We believe that this proposal, which was developed through a collaborative process with a wide variety of stakeholders, represents an important opportunity to make further progress in this important area.

Anthem looks forward to working with DHCS to implement the Demonstration. We strongly believe that the Demonstration will improve the health outcomes of dual eligibles and will help to reduce costs by decreasing unnecessary and duplicative services. If you have any questions about our support for the Demonstration, please do not hesitate to contact me at <u>Steve.Melody@WellPoint.com</u> or (916) 858-3568.

Sincerely. er

Steve Melody RVP, Medicaid CA State Business

cc: Toby Douglas, Director, Department of Health Care Services Jane Ogle, Deputy Director, Health Care Delivery Systems, Department of Health Care Services Pam Kehaly, SVP Medicaid, CA President, Anthem Blue Cross Jacqueline Macias, Acting President, Medicaid, Anthem Blue Cross Jenny Colton, Staff VP, Product Development, Anthem Blue Cross



1415 L STREET SUITE 850 SACRAMENTO, CA 95814 916.552.2910 P 916.443.1037 F CALHEALTHPLANS.ORG

May 23, 2012

Ms. Melanie Bella Medicare-Medicaid Coordination Office Centers for Medicare & Medicaid Services 200 Independence Ave SW Mail Stop: Room 315-H Washington, D.C. 20201

Re: California's Coordinated Care Initiative: State Demonstration to Integrate Care for Dual Eligible Individuals

Dear Ms. Bella:

The California Association of Health Plans (CAHP) represents 40 public, non-profit, and commercial Knox-Keene licensed health plans in California. I am writing on behalf of our member plans, which serve over 4 million Medicaid beneficiaries in the Two-Plan, Geographic Managed Care, and County Organized Health System models of California's Medicaid managed care program. Our Association is writing to express our strong support of the California Department of Health Care Services' (DHCS) three-year demonstration proposal to integrate care for dual eligible Medicare and Medi-Cal beneficiaries (Duals Demonstration).

The Duals Demonstration seeks to integrate two fragmented and disparate systems of care which fail to coordinate care for our counties most vulnerable citizens. Under the current system, dual eligible beneficiaries and their health care providers must navigate two systems of care with different rules, different responsibilities and no incentive to work in a cohesive manner. The goal of the Duals Demonstration is to provide a single, patient centered system of care that provides both the medical and long term supports and services vital to the long-term health of these beneficiaries.

Health plans across California have come together to support the state's efforts and integrate care in the most efficient and cost effective manner possible. The integration of the full scope of home and community based services as well as core medical services will not only make health care more user-friendly for dual eligible beneficiaries but also encourage keeping people in the most appropriate care setting. Allowing health plans the flexibility to provide service to help keep people in their homes will improve the patient experience while decreasing the long-term cost of care.

CAHP strongly supports the state's efforts to coordinate care for dual eligible beneficiaries because this effort will improve the health and well-being of this vulnerable population while decreasing costs to both the state and federal government. We urge your support as well.

Strick to hando

Patrick Johnston President & CEO

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

CALIFORNIA DEPARTMENT OF AGING 1300 NATIONAL DRIVE, SUITE 200 SACRAMENTO, CA 95834 Internet Home Page www.aging.ca.gov TDD Only 1-800-735-2929 FAX 916-928-2267 TEL 916-419-7500





May 24, 2012

Ms. Melanie Bella Medicare-Medicaid Coordination Office Centers for Medicare & Medicaid Services 200 Independence Ave SW Mail Stop: Room 315-H Washington, D.C. 20201

Dear Ms. Bella:

The California Department of Aging (CDA) is pleased to provide its support for the proposal the California Department of Health Services (DHCS) is submitting to implement California's demonstration program to integrate care for Dual Eligible Individuals.

CDA, is the designated State Unit on Aging, administers the federal Older Americans Act (OAA) funding through contracts with a network of 33 Area Agencies on Aging (AAAs) that provide these services. Under an Interagency Agreement with DHCS, CDA also is responsible for administering the Multipurpose Senior Services Program (MSSP), the Medi-Cal home and community based waiver for older adults, and for certifying Community Based Adult Service (CBAS) Centers for Medi-Cal participation. CDA also administers the State Health Information Program, (known as the Health Insurance Counseling Program [HICAP] in California), providing Medicare and long-term care insurance counseling to consumers throughout the state.

California's proposed the Coordinated Care Initiative (CCI) seeks to align the fiscal incentives and health and long term services and supports delivery systems to create a more seamless, integrated set of benefits for Californians that are dually eligible for both Medicare and Medi-Cal. The goal is to improve care coordination, health outcomes, and quality of life for these individuals, while also achieving substantial savings by moving from a fee-for-service to a managed care payment system and reinvesting those savings in supporting additional home and community-based care options.

CDA has been involved in DHCS' Duals Demonstration implementation efforts since the first Bridge to Reform Waiver Dual Eligible stakeholder workgroup was established in 2010. CDA was actively involved in reviewing the 22 proposals submitted by health plans earlier this Spring and participated in the plans' oral proposal presentations to DHCS.

Ms. Melanie Bella May 24, 2012 Page 2

I can assure you that CDA will remain a very engaged partner with DHCS, our sister departments, and the many stakeholders involved, as California moves from the design to implementation stage of this demonstration.

We appreciate your recent discussion with us about consumer outreach and assistance in the enrollment process. This is an important area that CDA and the HICAP programs will be involved in to assure that systems are in place to assist consumers with questions or concerns they may have about these changes. We will also be working closely with our MSSP waiver contractors in the participating counties to ensure that their clients' transition into a managed care plan is successful and that this integrated model of care achieves increased care coordination that more fully involves the client, their health provider(s) and the agencies involved in their long term services and supports, including MSSP.

CDA urges your favorable consideration of California's proposal.

Im comole Lora Connolly Director



STATE OF CALIFORNIA DEPARTMENT OF MANAGED HEALTH CARE

May 29, 2012

Ms. Melanie Bella Medicare-Medicaid Coordination Office Centers for Medicare & Medicaid Services 200 Independence Ave SW Mail Stop: Room 315-H Washington, D.C. 20201

Dear Ms. Bella:

Governor Jerry Brown has proposed the Coordinated Care Initiative (CCI) to enhance health outcomes and beneficiary satisfaction for low-income seniors and persons with disabilities, while achieving substantial savings from rebalancing service delivery away from institutional care and into the home and community. The three-year demonstration proposal to integrate care for dual eligible Medicare and Medi-Cal beneficiaries is a critical component of the Initiative.

The goal of the demonstration is to examine how patient-centered, coordinated care delivery can improve beneficiary health and quality of life, while reducing fragmentation and inefficiencies. Specifically, the demonstration will examine how Medicare and Medi-Cal could be aligned to drive improved access to. and coordination of, the full continuum of social and medical services beneficiaries need to maintain good health, remain in their homes and communities, and avoid unnecessary costly hospital and emergency department visits.

The California Department of Managed Health Care (DMHC) is pleased to partner with the California Department of Health Care Services (DHCS) and other state agencies to ensure the success of the CCI. The DMHC licenses and regulates managed health care plans, conducts routine and non-routine financial and medical surveys, and operates a Help Center where consumers can lodge complaints and get comprehensive assistance with problems they are having with their health plans.

DMHC will ensure that each health plan participating in the demonstration holds a current license issued by the DMHC under the Knox-Keene Health Care Services Act, the body of law that regulates many health plans in California. Requirements for licensure include access to care through adequate provider networks, care coordination, continuity of care, financial solvency and treatment decisions unencumbered by fiscal or administrative considerations.

We look forward to working with DHCS to implement the CCI in California. Thank you for your consideration.

ncerely

Brent A. Barnhart, Director Department of Managed Health Care

> EDMUND G. BROWN JR. -GOVERNOR

980 9th Street Suite 500 Sacramento, CA 95814-2724 320 West 4th Street Suite 880 Los Angeles, CA 90013-2353

916-324-8176 Voice 916-322-9430 Fax

213-620-2744 Voice 213-576-7183 Fax

Brent A. Barnhart Director

www.healthhelp.ca.gov 1-888-HM0-2219

HEALTH AND HUMAN SERVICES AGENCY



STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY DEPARTMENT OF SOCIAL SERVICES

744 P Street • Sacramento, CA 95814 • www.cdss.ca.gov



EDMUND G. BROWN JR. GOVERNOR

May 24, 2012

Ms. Melanie Bella Medicare-Medicaid Coordination Office Centers for Medicare & Medicaid Services 200 Independence Ave SW Mail Stop: Room 315-H Washington, D.C. 20201

Dear Ms. Bella:

Governor Brown has proposed the Coordinated Care Initiative (CCI) to enhance health outcomes and beneficiary satisfaction for low income seniors and persons with disabilities, while achieving substantial savings from rebalancing service delivery away from institutional care and into the community. The three-year demonstration proposal to integrate care for dual eligible Medicare and Medi-Cal beneficiaries is a critical component of the Initiative.

The Affordable Care Act has created the opportunity to fix many of the challenges in the current fragmented system. Medicare and Medi-Cal often work at cross-purposes because they have different payment rules and cover different services. Dual beneficiaries must navigate two separate, complex systems on their own, which can result in inefficient care. Providers must navigate two different payers, thereby needlessly increasing administrative costs. California needs a coordinated care delivery system that is tailored and responsive to beneficiaries' needs and overcomes the challenges created by current categorical funding, service structures and regulatory requirements.

The goal of the demonstration is to examine how patient-centered coordinated care delivery can improve beneficiary's health and quality of life, while reducing fragmentation and inefficiencies. Specifically, the demonstration will examine how Medicare and Medi-Cal could be aligned to drive improved access and coordination of the full continuum of social and medical services beneficiaries need to maintain good health, remain in their homes and communities, and avoid unnecessary costly hospital and emergency department visits.

Our Department is proud and determined to work hand-in-hand with the development and implementation of this Demonstration with the Department of Health Care Services (DHCS). Our Department was an active participant in selecting the duals demonstration health care plans and counties. A team representing departments across the Health Ms. Melanie Bella Page Two

and Human Services Agency reviewed 22 proposals from health plans operating in ten counties and determined which plans could make a positive impact in improving the dual eligible care experience and health outcomes. Our Department continues to collaborate with DHCS in its robust stakeholder process involving multiple workgroups tackling issues such as behavioral health, long term support services and In-Home Supportive Services coordination and integration.

There are efficiencies to be gained by including all services under the same roof. Putting both home and community based services (HCBS) and institutional care under the same capitated payment structure also creates a major incentive for rebalancing and promoting HCBS. This demonstration will strive to include all medical and social services needed by dual eligible beneficiaries. We need to rebalance the current system to ensure dual eligible beneficiaries get the care they need in the best environment possible.

If you have questions about the CCI, particularly related to our involvement and participation, please don't hesitate to ask. My phone number is (916) 657-2598.

Thank you.

Sincerely,

manton

WILL LIGHTBOURNE Director





DIANA S. DOOLEY SECRETARY

Aging

Alcohol and Drug Programs

Child Support Services

Community Services and Development

Developmental Services

Emergency Medical Services Authority

Health Care Services

Managed Health Care

Managed Risk Medical Insurance Board

Mental Health

Public Health

Rehabilitation

Social Services

Statewide Health Planning and Development

State of California HEALTH AND HUMAN SERVICES AGENCY

May 30, 2012

Ms. Melanie Bella Medicare-Medicaid Coordination Office Centers for Medicare & Medicaid Services 200 Independence Ave SW Mail Stop: Room 315-H Washington, D.C. 20201

Dear Ms_Bella

California's proposed Coordinated Care Initiative (CCI) represents an ambitious effort to enhance health outcomes and beneficiary quality of life through coordinating care for our most vulnerable citizens: low-income seniors and persons with disabilities who are eligible for both Medicare and Medi-Cal. Dual beneficiaries must navigate two separate, complex systems on their own, often resulting in inefficient care. The CCI will focus our health care delivery system on providing high value services. Specifically, over a three-year period, the CCI will examine how Medicare and Medi-Cal can align to promote improved access to, and coordination of, the full continuum of social and medical services beneficiaries need to improve their health, remain in their homes and communities, and avoid unnecessary hospital and emergency department visits.

Over the past year, sister agencies under the umbrella of the California Health and Human Services Agency (CHHS), including the Department of Health Care Services, the Department of Social Services, the Department of Managed Health Care, the Department of Aging, and the Department of Rehabilitation, have come together with consumers and other stakeholders to collaborate on this effort to move care away from institutional settings and into the home and community.

I look forward to working with our federal partners at the Centers for Medicare and Medicaid Services as we move forward in the implementation of the CCI in 2013.

Sincerely,

DIANA S. DOOLEY Secretary

KJ/fmp





May 22, 2012

Melanie Bella Director Medicare-Medicaid Coordination Office Center for Medicare and Medicaid Services 7500 Sunset Blvd. Baltimore, MD 21244

Dear Ms. Bella:

Care1st Health Plan would like to offer support for the California's Dual Eligible Demonstration Project.

The plan is confident that through the Demonstration it will be able to promote coordinated care models that provide full access to a complete spectrum of medical, social and behavioral support and services that Dual Eligible beneficiaries require in order to maintain good health and a high quality of life.

Care1st has been dedicated to serving Medi-Cal recipients since 1994. In 2003, the plan expanded to Arizona, where a majority of the 40,000 members are Dual Eligible beneficiaries. Considering the plan's background and experience serving both Medi-Cal and Medicare special needs members, it is well positioned to serve the dual eligible population in San Diego County.

Care1st Health Plan is looking forward to participating in the Demonstration Project to improve the lives and health of Dual Eligible beneficiaries. If you have any questions or require further information, please let me know. I can be reached at 323-889-6638.

Thank you

Sincerely.

Anna Tran Chief Executive Officer



May 24, 2012

Sent via email

Melanie Bella Director of the Medicare-Medicaid Coordination Office (CMS)

RE: Letter of Support for Community Health Group's Proposal for the Request for Solutions for California's Dual Eligibles Demonstration Project

Dear Ms. Bella:

On behalf of Community Health Group, we are pleased to offer this letter of support to the State of California's Department of Health Care Services (DHCS) and CMS' Dual Eligible Demonstration Project. We understand that with this demonstration project, DHCS and CMS would be able to promote coordinated care models that provide seamless access to the full continuum of medical, social, long-term and behavioral supports and services dual eligibles need to maintain good health and a high quality of life.

Our organization is a not-for-profit community based health plan located in San Diego and dedicated to serving Medi-Cal recipients for 30 years. Our experience with both Medi-Cal and Medicare Special Needs members well positions us for this exciting new project. In preparation for this project, Community Health Group is participating in the multiple Stakeholder Workgroups, San Diego County's Long Term Care Integration Project; DHCS plan calls and Healthy San Diego.

Community Health Group fully supports this exciting new project and looks forward to working with agencies, stakeholders, providers and beneficiaries to meet the goals on the project.

Sincerely Norma Diaz Chief Executive Officer

DOR DEPARTMENT of REHABILITATION

Employment, Independence & Equality

Ms. Melanie Bella Medicare-Medicaid Coordination Office Centers for Medicare & Medicaid Services 200 Independence Ave SW Mail Stop: Room 315-H Washington, D.C. 20201 Edmund G. Brown Jr., Governor



State of California Health and Human Services Agency

> Office of the Director 721 Capitol Mall Sacramento, CA 95814 (916)324-1313 VOICE (916)558-5806 FAX (916)558-5807 TTY

May 25, 2012

Dear Ms. Bella:

Governor Jerry Brown has proposed the Coordinated Care Initiative (CCI) to enhance health outcomes and beneficiary satisfaction for low-income seniors and people with disabilities, while achieving substantial savings from rebalancing service delivery away from institutional care and into the home and community. The three-year demonstration proposal to integrate care and long term services and supports for dual eligible Medicare and Medi-Cal beneficiaries is a critical component of the CCI.

The Affordable Care Act has created the opportunity to correct many of the challenges in the current, fragmented system. Medicare and Medi-Cal often work at crosspurposes because they have different payment rules and cover different services which do not align fiscal incentives with our values of providing care in the least restrictive environment. California needs a coordinated care delivery system that is tailored and responsive to beneficiaries' needs and overcomes the challenges created by current categorical funding, service structures and regulatory requirements.

The goal of the CCI is to implement a patient-centered, coordinated care delivery system and to examine how it can improve beneficiary's health and quality of life, while reducing fragmentation and inefficiencies. Specifically, the demonstration will examine how Medicare and Medi-Cal could be aligned to drive improved access to, and coordination of, the full continuum of social and medical services beneficiaries need to maintain good health, remain in their homes and communities, and to avoid unnecessary costly hospital and emergency department visits.

As Director of a department that provides employment and independent living services to Californians with disabilities, I look forward to working hand-in-hand with the

M. Bella May 25, 2012

development and implementation of the CCI with the Department of Health Care Services (DHCS). In addition, many of our community-based partner organizations are eager to work with the selected health plans as they implement the CCI. Our department was an active participant in selecting the duals demonstration health care plans and counties. A team representing departments across the Health and Human Services Agency reviewed 22 proposals from health plans operating in ten counties and determined which plans could make positive impact in improving dual eligible beneficiaries' experience, health outcomes and access to long term services. Our department and partner organizations continue to participate with DHCS in its stakeholder process involving multiple workgroups tackling issues such as beneficiary protections, behavioral health, long term support services and In-Home Support Services coordination and integration.

There are efficiencies to be gained by including all services under the same roof. Putting both home-and community-based services and institutional care under the same captivated payment also creates a major incentive for rebalancing and promoting home and community based services. California's initiative will strive over time to integrate or coordinate the medical and social services needed by dual eligible beneficiaries to live safely in the community, and to access necessary healthcare and rehabilitative services to facilitate the right care in the best environment possible. Thank you for your consideration of this proposal.

With regards,

ANTHONY "Tony" P. SAUER, EMMDS Director

May 22, 2012

Melanie Bella Director of the Medicare-Medicaid Coordination Office Centers for Medicare and Medicaid Services 200 Independence Ave, SW Room 315H.01 Washington, DC 20201

Dear Ms. Bella:

I am writing on behalf of Health Plan of San Mateo (HPSM) to express our strong support of and eagerness to partner with the California Department of Health Care Services (DHCS) and the Medicare-Medicaid Coordination Office on the Duals Demonstration Project. HPSM shares the Duals Demonstration Project goals of improved care coordination, better beneficiary health, and a more efficient delivery system.

HPSM has a 25-year history of serving vulnerable residents of San Mateo County, including dually eligible beneficiaries. We also have six years of experience in coordinating Medicare benefits through a Dual Eligible Special Needs Plan, with enrollment in the D-SNP of over 60% of the eligible persons.

HPSM, in partnership with the San Mateo County Health System, has long sought to adopt a more integrated system of care for duals, and comes to the duals process after several years of intensive planning with the County around long-term care and behavioral health integration. As such, HPSM is uniquely positioned for the Duals Demonstration Project having already established relationships with its county partners and is committed to working closely with DHCS to build upon this foundation.

We are extremely excited at the prospect of the Duals Demonstration Project in San Mateo County, allowing the vision of integrated care in San Mateo County to come to fruition.

We urge the favorable consideration of the State of California's application.

Maya Ola

Maya Altman Chief Executive Officer



May 21, 2012

Melanie Bella Director of the Medicare-Medicaid Coordination Office Center for Medicare & Medicaid Services 7500 Security Boulevard Baltimore, MD 21244

Dear Ms. Bella,

Health Net Community Solutions, Inc (Health Net) supports California's Department of Health Care Services (DHCS) and the Centers for Medicare & Medicaid Services (CMS) efforts to find viable and effective means to improve the delivery system for California's dual eligible beneficiaries in an integrated, cost-effective, efficient, and quality-driven manner.

Health Net is pleased to have been selected for the Demonstrations in Los Angeles and San Diego counties, and is committed to working with DHCS, CMS, our network providers, county organizations, and the communities to improve the health and care delivery for our State's most vulnerable population. The current system has been fragmented, difficult to navigate, and has often resulted in beneficiary confusion, delays in care, inappropriate utilization and unnecessary costs. Therefore, we fully support the efforts to build from a proven and effective managed care model to bring integration, quality and the patient centered medical home construct to a complex system.

We look forward to assisting California achieve optimal value and care for the dual-eligible beneficiaries in the State and fully support DHCS's efforts to advance this important evolution in care delivery.

Sincerely,

Jugsel

Jay M. Gellert, President and CEO Health Net, Inc. Jay.M.Gellert@healthnet.com (O) 818-676-6703

Martha Shuk

Martha Smith, Chief Dual Program Office Health Net, Inc Martha.Smith@healthnet.com (O) 510-891-6829

CC: Toby Douglas, Director, CA Department of Health Care Services Diana Dooley, Secretary CA Health and Human Services Agency



May 23, 2012

Howard A. Kahn Chief Executive Officer

Melanie Bella Director Medicare-Medicaid Coordination Office (CMS) 7500 Security Boulevard Baltimore, MD 21244-7500

Dear Ms. Bella,

L.A. Care is pleased to submit this letter in support of California's initiative to be selected for the Duals Demonstration Project. We are excited about the potential to expand upon our 15 year partnership with the California Department of Health Care Services (DHCS) and deepen our partnership with the Centers for Medicare and Medicaid Services (CMS) through this opportunity to improve the quality of life and beneficiary experience for Dual Eligibles in Los Angeles County.

As a public entity, we consider the goals of the Duals Demonstration Pilot to be aligned with our vision and mission to provide access to quality health care for Los Angeles County's vulnerable communities and to support the safety net required to achieve that purpose. Through enabling L.A. Care to effectively coordinate Medicare and Medicaid benefits for our members, we have the opportunity to reduce many of the inefficiencies of the current fractured and overly complicated system of benefits. Our objective will be to implement effective improvements in the delivery system in an integrated, cost-effective and quality-driven manner. Ultimately, we envision a successful program which not only provides substantive value to our beneficiaries, while containing the unrelenting increases in costs by stretching the value of our limited health care dollars.

We look forward to continuing our work with you on this important project.

Sincerely,

Howard A. Kahn



A public entity serving Los Angeles County • 1055 West 7th Street, 10th floor, • Los Angeles, California 90017 telephone 213.694.1250 • facsimile 213.694.1246 • www.lacare.org Accreditation of Medi-Cal, Healthy Kids and Healthy Families Program.

For a Healthy Life

GEORGE M. SHIRAKAWA PRESIDENT, BOARD OF SUPERVISORS COUNTY OF SANTA CLARA SUPERVISOR, SECOND DISTRICT COUNTY GOVERNMENT CENTER, EAST WING 70 WEST HEDDING STREET, 10TH FLOOR SAN JOSE, CALIFORNIA 95110 TEL: (408) 299-5020 FAX: (408) 295-8642 george.shirakawa@bos.sccgov.org • www.supervisorshirakawa.org



May 2, 2012

D) E G E I V E MAY 0 9 2012

Mr. Toby Douglas Director, Department of Health Care Services P.O. Box 997413 MS 0000 Sacramento, CA 95899-7413

Dear Mr. Douglas,

The County of Santa Clara has the second largest public healthcare system in the State of California and supports the efforts and partnership by the federal and state governments to reform the health care delivery system towards a more cost-effective, high-quality, and accessible system of care for all vulnerable populations.

We would like to express our continued support for Governor Brown's proposals under the 1115 Waiver's "Bridge to Health Care Reform." This includes the transition of the dual Medi-Cal/Medicare eligible population into better systems of care. We believe that this opportunity will maximize the resources of both programs, bring a greater coordination of benefits to the enrollees, and ultimately improve beneficiary health outcomes.

Further, the County supports Santa Clara Family Health Plan's (SCFHP) participation in the Dual Eligible Demonstration Program. We have a long-standing partnership with SCFHP, working collaboratively to serve low-income and frail populations in Santa Clara County.

The establishment of a system that helps dual eligible beneficiaries receive the health care services they need will improve health outcomes for participants. It is for this reason our County supports the California Dual Demonstration Program and SCFHP's participation.

Sincerely,

c:

George Shirakawa President, Board of Supervisors

Board of Supervisors Jeffrey V. Smith, County Executive



May 23, 2012

Ms. Melanie Bella Medicare-Medicaid Coordination Office Centers for Medicare & Medicaid Services 200 Independence Ave SW Mail Stop: Room 315-H Washington, D.C. 20201

Dear Ms. Bella:

Governor Jerry Brown has proposed the Coordinated Care Initiative (CCI) to enhance health outcomes and beneficiary satisfaction for low-income seniors and persons with disabilities, while achieving substantial savings from rebalancing service delivery away from institutional care and into the home and community. The three-year demonstration proposal to integrate care for dual eligible Medicare and Medi-Cal beneficiaries is a critical component of the Initiative. I am writing you today on behalf of SEIU United Long Term Care workers, representing over 180,000 nursing home and home care workers across California, in strong support of this demonstration.

The Affordable Care Act has created the opportunity to fix many of the challenges in the current, fragmented system. Medicare and Medi-Cal often work at crosspurposes because they have different payment rules and cover different services. Dual beneficiaries must navigate two separate, complex systems on their own, which can result in inefficient care. Providers, too, must navigate two different payers thereby needlessly increasing administrative costs. California needs a coordinated care delivery system that is tailored and responsive to beneficiaries' needs and overcomes the challenges created by current categorical funding, service structures and regulatory requirements.

The goal of the demonstration is to examine how patient-centered, coordinated care delivery can improve beneficiary's health and quality of life, while reducing fragmentation and inefficiencies. Specifically, the demonstration will examine how Medicare and Medi-Cal could be aligned to drive improved access to, and coordination of, the full continuum of social and medical services beneficiaries need to maintain good health, remain in their homes and communities, and avoid unnecessary costly hospital and emergency department visits.

We are pleased with the work done so far by the Department of Health Care Services (DHCS) and determined to work hand-in-hand with the development and implementation of this Demonstration with state officials. We are gratified by the ongoing process to collaborate with DHCS in its robust stakeholder process involving multiple workgroups tackling issues such as behavioral health, long term support services and In-Home Support Services coordination and integration.

Los Angeles/Ventura 2910 Beverly Blvd: Los Angeles, CA 90057

Lancaster

42257 6th West St., Unit 301 Lancaster, CA 93534

San Bernardino 195 N. Arrowhead Ave. San Bernardino 92408

Watsonville 10 Alexander St. Watsonville, CA 95076

Sacramento 1127 11th St. Suite 523 Sacramento, CA 95814

Oakland 440 Grand Ave., Suite 250 Oakland, CA 94610

Salinas 334 Monterey Street Salinas, CA 9390

Member Action Center 877- MY ULTCW 877- 698-5829

www.ultcw.org

There are efficiencies to be gained by including all services under the same roof. Putting both home-and community-based services and institutional care under the same capitated payment also creates a major incentive for rebalancing and promoting HCBS. This demonstration will strive to include all medical and social services needed by dual eligibles. We need to rebalance the current system to ensure dual eligibles get the care they need in the best environment possible.

I urge the Centers for Medicare and Medicaid Services to support and approve the California DHCS demonstration proposal.

Japhonga Keth

Laphonza Butler President