

# CalAIM Managed Long Term Services and Supports (MLTSS) and Duals Integration Workgroup

# How to Add Your Organization to Your Zoom Name

- » Click on the "Participants" icon at the bottom of the window.
- » Hover over your name in the "Participants" list on the right side of the Zoom window and click "More."
- » Select "Rename" from the drop-down menu.
- » Enter your name and add your organization as you would like it to appear.

# Agenda

<b>12:00 – 12:05</b>	Welcome and Introductions
<b>12:05 – 12:35</b>	2026 Medi-Medi Plan Expansion, Medi-Cal Matching Plan Policy Updates, and Stakeholder Q&A
<b>12:35 – 12:50</b>	D-SNP Coordination with County Behavioral Health Delivery Systems, and Stakeholder Q&A
<b>12:50 – 12:55</b>	Exclusively Aligned Enrollment (EAE) Dual Eligible Special Needs Plan (D-SNP) Default Enrollment Pilot
<b>12:55 – 1:00</b>	2026 D-SNP State Medicaid Agency Contract (SMAC) and Policy Guide Updates
<b>1:00 – 1:20</b>	Duals data on Medicare Enrollment, and Stakeholder Q&A
<b>1:20 – 1:30</b>	Next Steps + Adjourn

# Workgroup Purpose and Structure

- » Serve as stakeholder collaboration hub for CalAIM MLTSS and integrated care for dual eligible beneficiaries. Provide an opportunity for stakeholders to give feedback and share information about policy, operations, and strategy for upcoming changes for Medicare and Medi-Cal.
- » Open to the public. [Charter posted](#) on the Department of Health Care Services (DHCS) website.
- » ***We value our partnership with plans, providers, advocates, beneficiaries, caregivers, and the Centers for Medicare & Medicaid Services (CMS) in developing and implementing this work.***

# 2026 Expansion of Medi-Medi Plans

# Overview: Medi-Medi Plans



# Dual Eligible Members in California

- » In California, almost a quarter of Medicare members (**1.7 million Californians**) also have Medi-Cal.
- » Statewide, about 50 percent of dual eligible members are in Original (fee-for-service) Medicare, and about 50 percent are enrolled in some type of Medicare Advantage plan, including integrated plans.
  - Medicare Advantage is a Medicare-approved plan from a private company that offers an alternative to Original Medicare for health coverage.
- » All dual eligible members in California are enrolled in Medi-Cal MCPs.

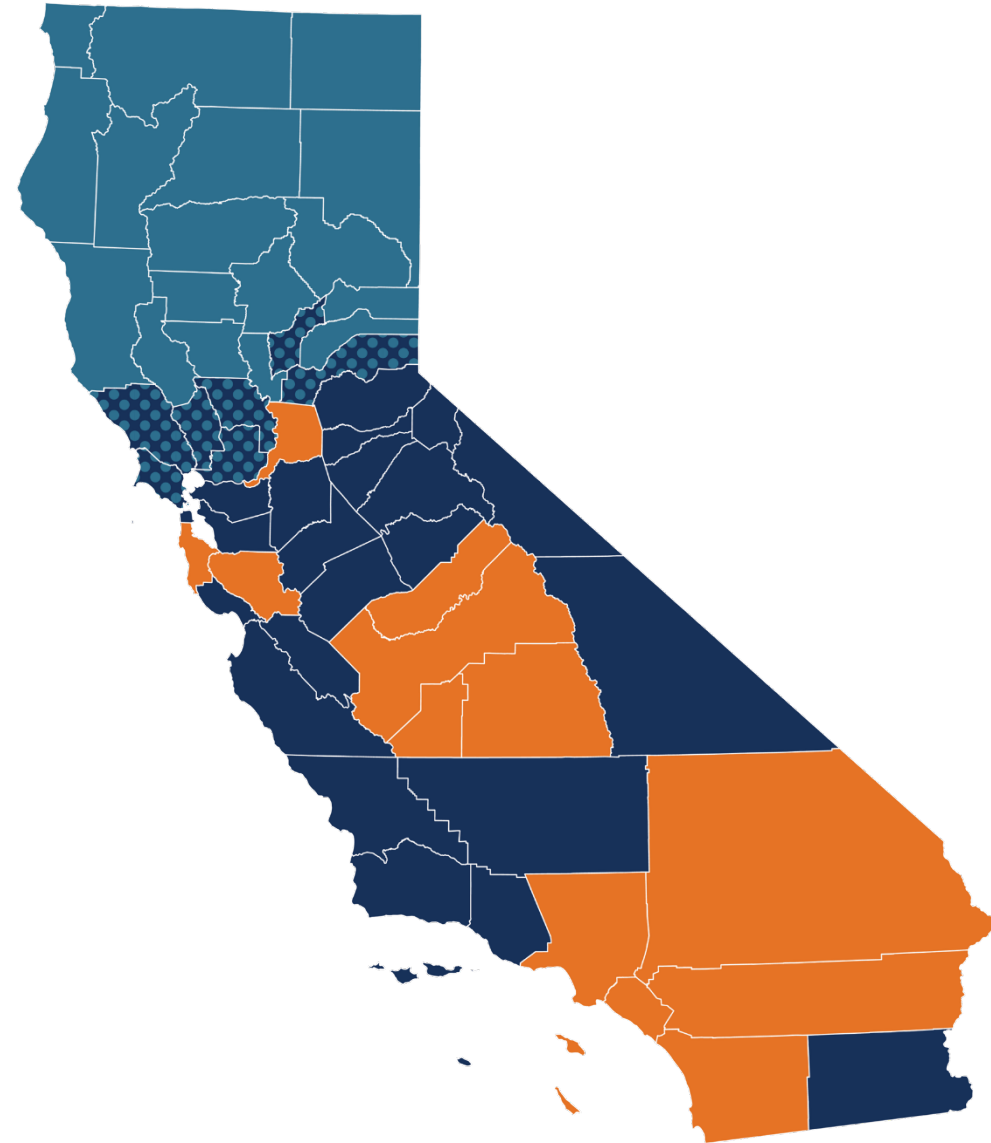
# The Need for Coordinated Care

- » For most dual eligible members, Medicare and Medi-Cal operate separately, with different funding streams.
- » This fragmented system can be confusing and hard to navigate. It may not provide person-centered services.
- » **CalAIM Approach:** Health plans required to coordinate care across Medicare and Medi-Cal, known as Medi-Medi Plans.
  - Available in 12 counties in 2025, with current enrollment totaling 330,000.
  - Will launch in 29 additional counties on January 1, 2026, expanding the Medi-Medi Plan option to an additional 461,000 potential enrollees.
  - A list of Medi-Medi Plans by county is available on the [DHCS website](#).



# Medi-Medi Plans in California Counties

- Currently available:** Fresno, Kings, Los Angeles, Madera, Orange, Riverside, Sacramento, San Bernardino, San Diego, San Mateo, Santa Clara, Tulare
- Will be available in 2026:** Alameda, Alpine, Amador, Calaveras, Contra Costa, El Dorado, Imperial, Inyo, Kern, Mariposa, Merced, Mono, Monterey, San Benito, San Francisco, San Joaquin, San Luis Obispo, Santa Barbara, Santa Cruz, Stanislaus, Tuolumne, Ventura
- At least one plan available in 2026 (additional option expected after 2026):** Marin, Napa, Placer, Solano, Sonoma, Yolo, Yuba
- Will be phased in after 2026:** Butte, Colusa, Del Norte, Glenn, Humboldt, Lake, Lassen, Mendocino, Modoc, Nevada, Plumas, Shasta, Sierra, Siskiyou, Sutter, Tehama, Trinity



# Medi-Medi Plans

- » **Medi-Medi Plans** are a type of **Medicare Advantage plan** in California only available to dual eligible members. Medi-Medi Plans operate with exclusively aligned enrollment.
- » Members enrolled in a Medi-Medi Plan receive coordinated care. A Medi-Medi Plan member's Medicare benefits are delivered through the D-SNP, and their Medi-Cal benefits are delivered through the MCP.
- » Enrollment in Medi-Medi Plans is **voluntary**.

## D-SNP + MCP Medi-Medi Plan



**D-SNP** provides care coordination and Medicare services, such as:

- Hospitals
- Doctor visits
- Prescription drugs

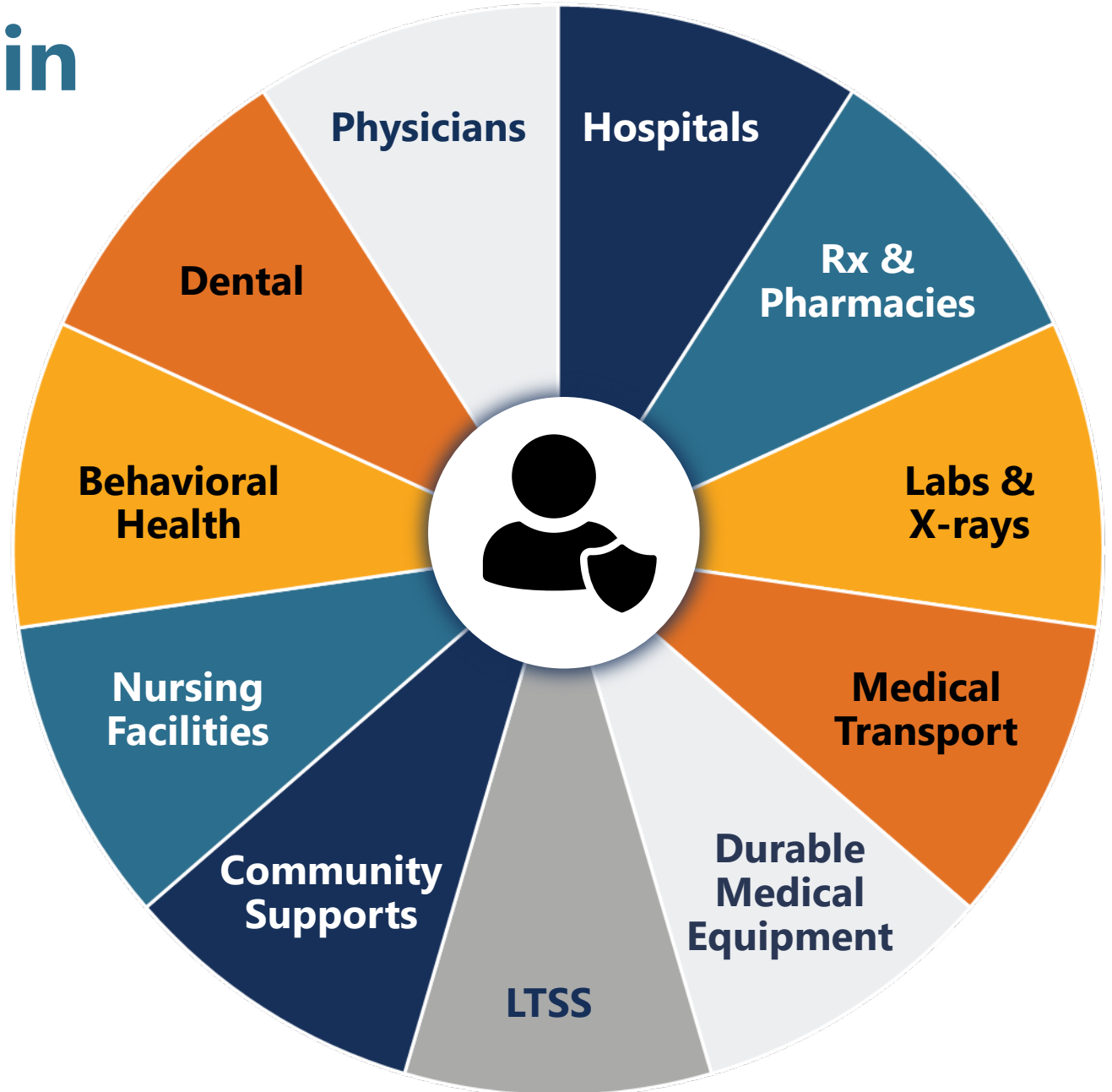


**MCP** provides wrap-around services, such as:

- Medicare cost-sharing
- LTSS
- Transportation
- Other Medi-Cal benefits

# Care Coordination in Medi-Medi Plans

- » Medi-Medi Plans help members with all of their health care needs and coordinate benefits and care, including carved-out benefits, medical and home and community-based services, durable medical equipment, and prescriptions.
- » Instead of Medi-Cal Enhanced Care Management (ECM), Medi-Medi Plans provide **California Integrated Care Management (CICM)**.



# Coordination with Related Medi-Cal Benefits

- » Medi-Medi Plans are required to coordinate all Medicare and Medi-Cal benefits, including “carved-out” benefits such as:
  - In-Home Supportive Services (IHSS)
  - Multipurpose Senior Services Program (MSSP)
  - Specialty Mental Health and Substance Use Disorder Services provided by the county
  - Medi-Cal Dental (including Dental Managed Care Plans)
- » Joining a Medi-Medi Plan will **not** impact a member’s IHSS benefits.
  - Members can keep their IHSS providers and hours.
  - Members still retain the right to hire, fire, and manage their IHSS providers.

# Community Supports and ECM for Members in Medi-Medi Plans

- » Members in Medi-Medi Plans can receive Community Supports.
  - Community Supports are provided by a member's Medi-Cal MCP.
  - The Medi-Medi Plan is responsible for coordinating Community Supports, as with other Medi-Cal benefits.
- » Dual eligible members in Medi-Medi Plans may also receive California Integrated Care Management (CICM), which is similar to Medi-Cal ECM.
  - Care management is provided by a member's D-SNP, including clinical care management for chronic conditions.
  - The Medi-Medi Plan is responsible for providing sufficient care management.

# Medi-Medi Plans Support Access to Providers

## Provider Network

- » Members will have access to a provider network through their Medi-Medi Plan.
- » If a member's current provider is not in network, a provider can join the Medi-Medi Plan's network, or the Medi-Medi Plan will help the member find a new doctor.
- » To join a Medi-Medi Plan network, a provider should contact the plan's provider relations department.

## Continuity of Care

- » If a member's provider is not currently in network, Medi-Medi Plans must offer a continuity of care period, which allows the member to continue to see their provider for up to 12 months (in most cases).
- » The member must have a prior relationship with the provider, and the provider and health plan must agree to terms, including payments.

# Joining a Medi-Medi Plan

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# Joining a Medi-Medi Plan



» Members can join a Medi-Medi Plan if they:

- Have both Medicare Part A and B and Medi-Cal.
- Are 21 years or older.
- Live in one of the counties that offers Medi-Medi Plans.



» Member enrollment in Medi-Medi Plans is **voluntary**.



» To enroll, a member can contact their Medi-Cal plan or 1-800-MEDICARE.



# Options for Dual Eligible Members in 2026

- » A dual eligible member may have the following choices in 2026:
  - Original Medicare and a Medi-Cal plan
  - A Medicare Advantage plan and a Medi-Cal plan
  - A Medi-Medi Plan\*
  - Program of All-Inclusive Care for the Elderly (PACE)\*\* (for those who need nursing facility level of care)
- » Reminder: 2026 Medicare Open Enrollment is October 15 – December 7, 2025.

\*Except in counties that will be phased in after 2026. Please see the DHCS [Medi-Medi Plan List webpage](#) for more information.

\*\*Please refer to the DHCS [Medi-Cal Managed Care Health Plan Directory](#) to see whether PACE is an option in your county.

# Medicare Enrollment Periods for Dual Eligible Members



- » Dual eligible members can change their Medicare Advantage and Medicare drug coverage for any reason during the Medicare Open Enrollment Period (October 15 – December 7) or the Medicare Advantage Open Enrollment Period (January 1 – March 31).
- » In addition, Medicare Special Enrollment Periods allow dual eligible members to make changes at other times of the year. The full list of Special Enrollment Periods is available on the [CMS website](#).
- » Further information can be found on the [DHCS webpage](#).

# Medicare Special Enrollment Period Changes for 2025

- » Medicare allows dual eligible members to switch to Original Medicare with a stand-alone prescription drug plan once-per-month.
- » A new type of Special Enrollment Period for integrated care allows dual eligible members to choose a Medi-Medi Plan once per month, in any month of the year.
  - Members can continue to enroll in PACE in any month of the year, if they meet PACE enrollment criteria.
- » Dual eligible members cannot enroll in, or change, regular Medicare Advantage plans or other Special Needs Plans outside of the usual times, except if a different Special Enrollment Period applies, such as moving out of the plan's service area.

# **Medi-Medi Plan Expansion Outreach Efforts**

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# DHCS Outreach on the 2026 EAE D-SNP Expansion

- » DHCS is partnering with plans to inform local providers and stakeholders about the launch of Medi-Medi Plans throughout California in 2026.
- » In addition, DHCS is conducting statewide outreach to inform stakeholders about the Medi-Medi Plan expansion.
  - DHCS will continue to share information about the 2026 EAE D-SNP implementation during the quarterly MLTSS and Duals Integration Stakeholder Workgroups.
  - DHCS also hosted a 2026 Medi-Medi Plan Expansion All-Corner Webinar on July 29<sup>th</sup> for providers and stakeholders. The materials from this webinar are on the [DHCS Medi-Medi Plan Webpage](#).
- » DHCS has also been engaging with the following:
  - County Behavioral Health Plans
  - County Social Services Agencies, with a focus on the In-Home Supportive Services (IHSS) program
  - Health Insurance Counseling and Advocacy Programs (HICAPs)
  - Home and Community-based Services (HCBS) Waiver agencies
  - Independent Living Centers

# Resources for Stakeholders

## » **Members:**

- Dual eligible members can learn more about Medi-Medi Plans by viewing the [Medi-Medi Plan Fact Sheet](#) on the [DHCS Medi-Medi Plan Webpage](#).
  - The fact sheet is available in English, Spanish, Hmong, Vietnamese, Traditional Chinese/Cantonese, Russian, Khmer/Cambodian, Arabic, Farsi, American Sign Language, and Mexican Sign Language.
- For support, members can contact:
  - HICAP for free counseling on health care options: 1-800-434-0222
  - MMOP for help resolving issues with providers or health plans: 1-855-501-3077

## » **Providers and Other Stakeholders:**

- Providers should direct questions to their contracted Medi-Cal plan.
- Providers and other stakeholders can also submit general questions to DHCS at [info@calduals.org](mailto:info@calduals.org).
- To learn more about Medi-Medi Plans, providers and stakeholders can:
  - Visit the [DHCS Medi-Medi Plan Webpage](#)
  - View the [Medi-Medi Plans: Information for Providers Fact Sheet](#)

# **Medi-Cal Matching Plan Policy Updates**

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# 2025 Medi-Cal Matching Plan Policy

- » **Medi-Cal Matching Plan Policy:** Dual eligible beneficiaries who are enrolled in a Medicare Advantage plan must be enrolled in the matching Medi-Cal managed care plan if a matching plan is available.
- » Medicare is the lead plan, meaning a member's Medicare plan choice determines their Medi-Cal plan.
  - This policy does not change or affect a member's choice of a Medicare plan.
- » In 2025, the Medi-Cal Matching Plan Policy continues in 17 counties: Alameda, Contra Costa, Fresno, Kern, Kings, Los Angeles, Madera, Orange, Riverside, Sacramento, San Bernardino, San Diego, San Francisco, San Mateo, Santa Clara, Stanislaus, and Tulare.



# 2026 Medi-Cal Matching Plan Policy

- » **In 2026, the Medi-Cal Matching Plan Policy will be implemented in all counties throughout California.**
- » For more information, please visit the DHCS [Medi-Cal Matching Plan Policy for Dual Eligible Beneficiaries webpage](#).

# Questions?

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# **D-SNP Coordination with County Behavioral Health Delivery Systems**

# Medicare Behavioral Health Services

- » Behavioral health services includes both mental health and substance use disorder (SUD) treatment.
- » Medicare is the primary payer of behavioral health services for dual-eligible members. Medicare services include, but are not limited to:
  - Individual and group therapy and family counseling
  - Diagnostic tests
  - Inpatient hospitalization, partial hospitalization, and intensive outpatient services
  - SUD treatments
- » Additional information is available here: [Supporting Medicare Patients in California: Coverage for Behavioral Health Services](#)
- » Note: Medi-Cal may cover additional services not covered by Medicare. Medicare covers most, but not all, behavioral health services covered by Medi-Cal.

# Medi-Medi Plan Coordination with County Behavioral Health Delivery Systems (1)

- » Medicare Advantage plans, including Medi-Medi Plans, cover Medicare behavioral health services.
- » Dual eligible members in Medi-Medi Plans access Medicare behavioral health services through the plan's provider network.
- » Medi-Cal county behavioral health services are also available to dual eligible members, but please note: **Medi-Cal is the payer of last resort.**
- » Medi-Cal MCPs have MOUs with County Behavioral Health Agencies, to coordinate specialty mental health and SUD services between MCPs and County Behavioral Health Departments.
- » No additional MOU is required between the Medi-Medi Plan and the county, since the same health plan manages the MCP and D-SNP.

# Medi-Medi Plan Coordination with County Behavioral Health Delivery Systems (2)

- » Per federal requirements, Medi-Medi Plans are required to coordinate all Medicare and Medi-Cal mental health services, including services provided by County Behavioral Health Agencies.
- » Note: Under HIPAA, the exchange of PHI data between County Mental Health Plans, MCPs, and D-SNPs (Medi-Medi Plans) for the purpose of care coordination and case management is permitted, without requiring a Business Associate Agreement.

# Medi-Medi Plan Coordination with County Behavioral Health Delivery Systems (3)

- » Medicare providers (including those contracted with county BH systems) must bill Medicare covered specialty behavioral health services directly to the D-SNP.
- » County BH Delivery Systems can bill through the DHCS Short-Doyle system for Medi-Cal services not covered by Medicare.
- » DHCS is in the process of updating MHSD Information Notice 13-24, and the Medi-Cal Specialty Mental Health Billing Manual, to reiterate that Medi-Medi Plans are similar to Cal MediConnect, and for those members county BH can bill DHCS Short-Doyle for Medi-Cal services not covered by Medi-Medi Plans (contingent on certification).
- » DHCS has requested all D-SNPs review, and return if applicable, a certification letter re: non-coverage of BH services beyond Medicare Part A and B benefits.

# Questions?

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# **EAE D-SNP Default Enrollment Pilot**

# EAE D-SNP Default Enrollment Pilot in California

- » Reminder: DHCS launched a D-SNP Default Enrollment Pilot with select Medi-Medi Plans in 2024.
- » When a member enrolled in one of the pilot MCPs becomes eligible for Medicare (either due to age or disability), the member will receive two notices and will be automatically enrolled into their MCP's Medi-Medi Plan unless the member chooses a different Medicare option.

# Limited Impact of EAE D-SNP Default Enrollment Pilot

- » The pilot does NOT impact:
  - Dual eligible Members who are already enrolled in Medicare, or
  - Individuals already enrolled in Medicare who newly enroll in Medi-Cal.
- » This pilot impacts a small number of members each month.
  - For example, in San Diego County, 102 members in Community Health Group were D-SNP Default Enrolled in November 2025. And in San Mateo County, 38 members in Health Plan of San Mateo were D-SNP Default Enrolled in November 2025.

# Plans Participating in the EAE D-SNP Default Enrollment Pilot

- » On June 1, 2024, **Community Health Group (CHG) in San Diego** sent their initial 60-day notices.
- » On January 1, 2025, **Health Plan of San Mateo (HPSM)** sent their initial 60-day notices.
- » On May 1, 2025, **Kaiser Permanente in San Mateo** sent their initial 60-day notices.
- » Plans have met with local stakeholders to discuss the pilot.

# Community Health Group: Default Enrollment Data

Cohort (Month Member became eligible for Medicare)	% of Members who Enrolled in Plan via Default	% of Members who Disenrolled from Default Plan within 90 Days of Enrollment
April 2025	71.2%	2.2%
May 2025	84.6%	10.6%
June 2025	79.6%	11.5%
July 2025	69.4%	13.3%
August 2025	74.3%	4.0%
September 2025	80.2%	6.3%
October 2025	77.7 %	2.6%
November 2025	77.9%	1%

# Health Plan of San Mateo: Default Enrollment Data

Cohort (Month Member became eligible for Medicare)	% of Members who Enrolled in Plan via Default	% of Members who Disenrolled from Default Plan within 90 Days of Enrollment
April 2025	64.7%	9.1%
May 2025	77.8%	4.8%
June 2025	88.2%	0%
July 2025	90.5%	2.6%
August 2025	81.5%	0%
September 2025	65.4%	0%
October 2025	75.9%	0%
November 2025	84.4%	0%

# Kaiser Permanente: Default Enrollment Data

Cohort (Month Member became eligible for Medicare)	% of Members who Enrolled in Plan via Default	% of Members who Disenrolled from Default Plan within 90 Days of Enrollment
July 2025	100%	0%
August 2025	100%	0%
September 2025	71.4%	0%
October 2025	85.7 %	0%
November 2025	100%	0%

# **2026 D-SNP SMAC and Policy Guide Updates**



# 2026 EAE and Non-EAE SMAC Templates

- » Reminder: All D-SNPs must have a State Medicaid Agency Contract (SMAC) with DHCS.
- » DHCS previously shared draft 2026 SMAC templates with plans and advocates for feedback.
- » All plans have signed their 2026 SMAC.
- » The CY 2026 EAE and Non-EAE SMAC boilerplates are available on the [DHCS website](#).

# 2026 SMAC and D-SNP Policy Guide (1)

- » The 2026 EAE and Non-EAE SMAC templates refer to the 2026 CalAIM D-SNP Policy Guide.
- » Similar to 2025, the 2026 D-SNP Policy Guide contains multiple chapters with detailed operational requirements and instructions for D-SNPs.
  - It is available on the [DHCS website](#).

# 2026 SMAC and D-SNP Policy Guide (2)

- » DHCS released 2026 D-SNP Policy Guide chapters on a rolling basis.
  - Most recently, DHCS released the Medicare Continuity of Care and Network Guidance Chapters of the 2026 D-SNP Policy Guide on September 12, 2025.
- » We anticipate that one remaining chapter (Quality and Reporting Requirements) will be released soon.

# Medicare Enrollment Data for Dual Eligible Members and D-SNPs

# Reminder: Medicare Delivery Systems for Dual Eligible Beneficiaries

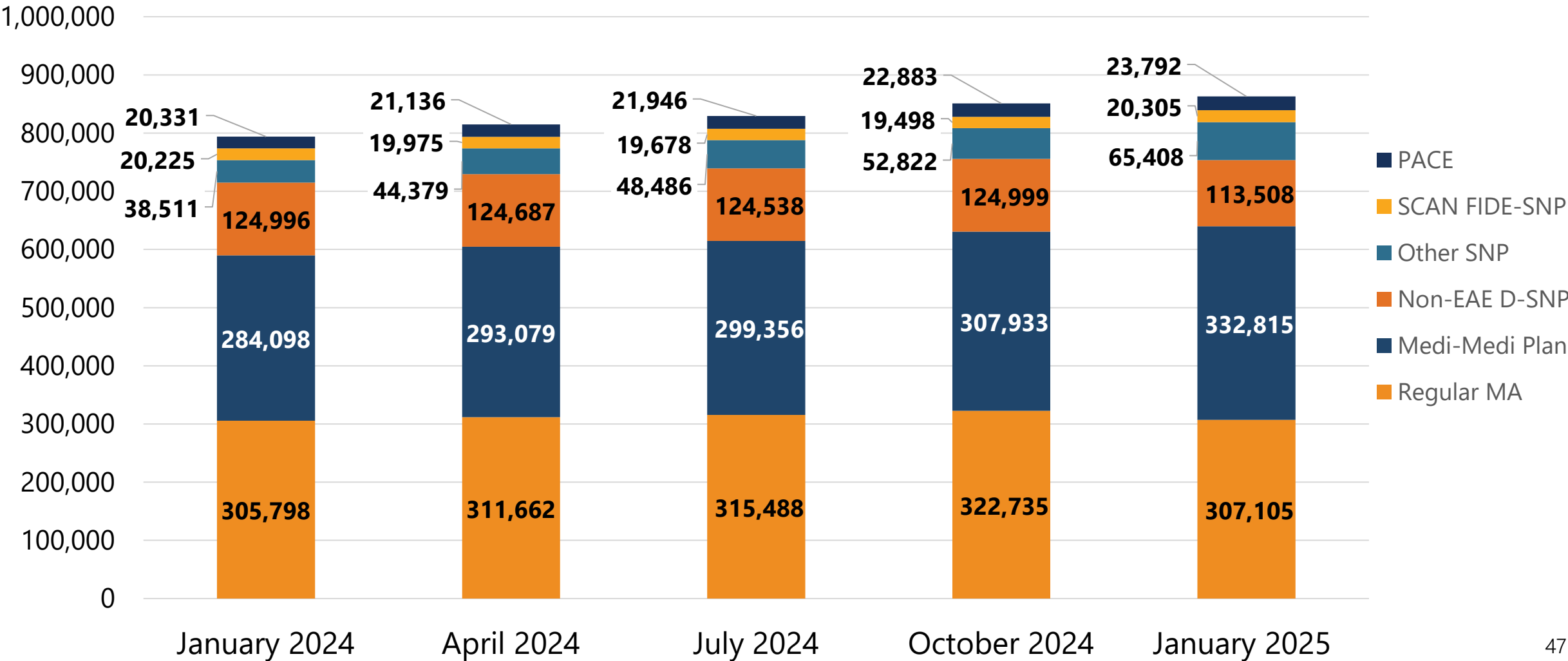
- » **Original Medicare (Fee-for-Service):** The original system where Medicare pays providers for each service rendered.
- » **Regular Medicare Advantage (MA):** Plans serve both dual eligible and Medicare-only members and are not required to have written agreements with DHCS for benefit and care coordination.
- » **Dual Eligible Special Needs Plans (D-SNPs):** Medicare Advantage plans that provide specialized care and wrap around services to members that are dually eligible for both Medicaid and Medicare. D-SNPs must have a State Medicaid Agency Contract (SMAC) with the state Medicaid agency, DHCS, in California.
  - **Medi-Medi Plans (EAE D-SNPs):** These plans meet integrated D-SNP care coordination requirements with integrated member materials, integrated appeals & grievances, and membership is limited to dual eligible members who are also enrolled in the Medi-Cal Managed Care Plan (MCP) affiliated with the D-SNP.
  - **Non-EAE D-SNPs:** These plans either have an affiliated Medi-Cal MCP but are not in counties that offer Medi-Medi Plans yet or are do not have an affiliated Medi-Cal MCP.

# Medicare Delivery Systems for Dual Eligible Beneficiaries (cont.)

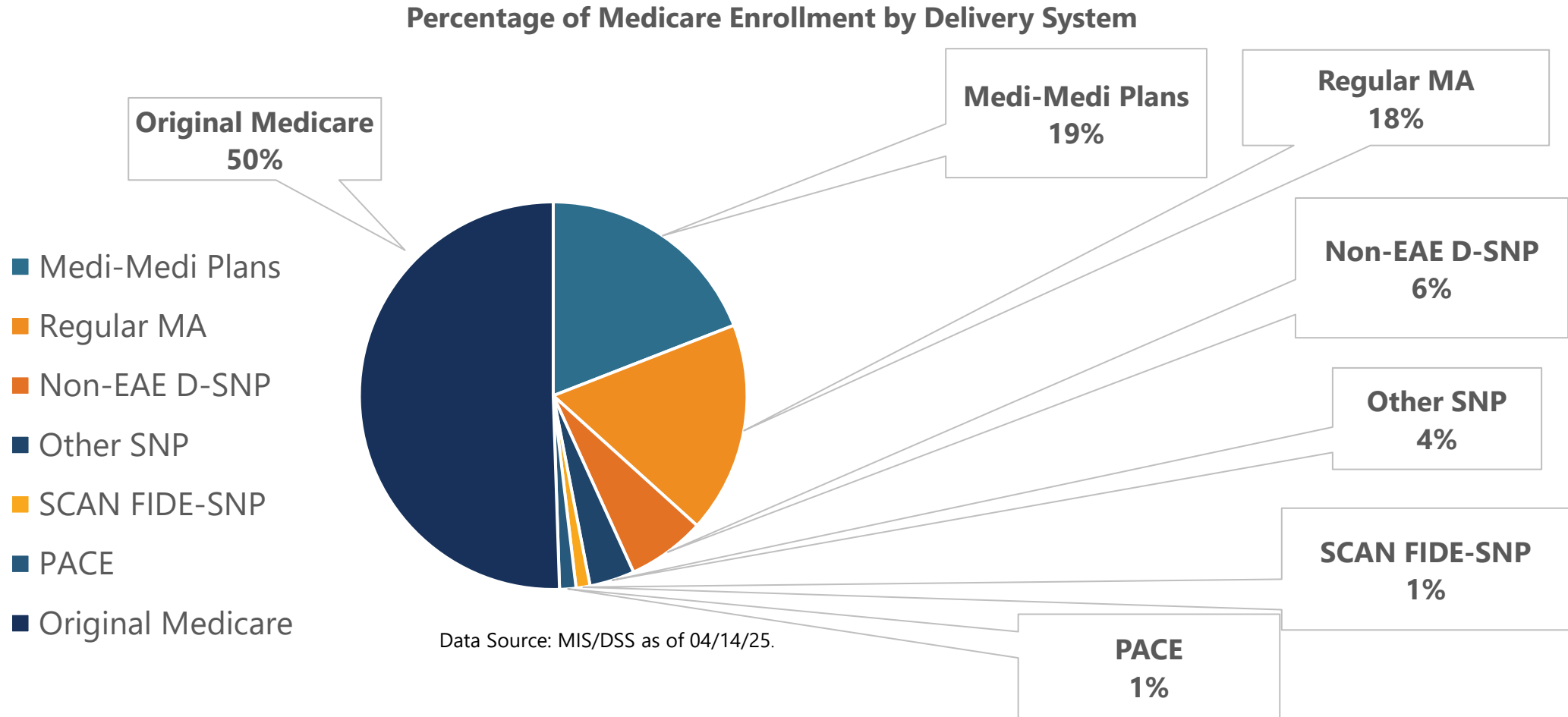
## » Other Integrated Care Options

- **Fully Integrated Dual Eligible Special Needs Plan (FIDE SNP):** California has one FIDE SNP operated by SCAN that provides integrated Medicare and Medi-Cal benefits to dually eligible members.
- **Program of All-Inclusive Care for the Elderly (PACE):** PACE is an integrated care model that provides medical and long-term services and supports to individuals aged 55 and older who meet the criteria for a nursing facility level of care, most of whom are dually eligible. California has a number of PACE organizations.
- **Other Special Needs Plans (SNPs):** Chronic Conditions Special Needs Plans (C-SNPs) and Institutional Special Needs Plans (I-SNPs).

# Medicare Managed Care Enrollment for Dual Eligible Beneficiaries in California



# Medicare Delivery System Enrollment for Dual Eligibles in California (January 2025)





# 2025 D-SNP Data Highlights

# Overview:

## D-SNP Quality and Data Reporting

- » In addition to existing CMS Medicare Advantage requirements, DHCS requires all D-SNPs to submit data on a series of state-specific requirements on a quarterly and annual basis.
- » DHCS conducts completeness reviews and processes data reported by D-SNPs for publication on the DHCS website and the [D-SNP Dashboard](#).
- » The purpose of this presentation is to share updates on D-SNP data submitted for 2025 quarterly and annual measures.

# 2025 D-SNP Data

Quarterly Measure	Plan Type	Quarter 1, 2025	Quarter 2, 2025
ICP1 (Total Members with a Care Plan Completed within 90 days of Enrollment)	Medi-Medi Plan and SCAN FIDE-SNP	<ul style="list-style-type: none"><li>○ 25,927</li><li>○ 64%</li></ul>	<ul style="list-style-type: none"><li>○ 22,060</li><li>○ 59%</li></ul>
	Non-EAE	<ul style="list-style-type: none"><li>○ 5,960</li><li>○ 79%</li></ul>	<ul style="list-style-type: none"><li>○ 3,625</li><li>○ 69%</li></ul>

## 2025 D-SNP Data (Cont.)

Quarterly Measure	Plan Type	Quarter 1, 2025	Quarter 2, 2025
PAL (Total Number of Members Newly Enrolled in Palliative Care Services)	Medi-Medi Plan and SCAN FIDE-SNP	○ 1,081	○ 1,090
	Non-EAE	○ 508	○ 382

# Questions?

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## Next Steps

- » Next MLTSS & Duals Integration Stakeholder Workgroup meeting will be scheduled soon

**Thank You!**