

State of California Department of Health Care Services



Coordinated Care Initiative

The Coordinated Care Initiative (CCI) was launched by the state of California to provide better coordinated care to people with both Medicare and Medi-Cal – dual eligibles. The CCI is currently in 7 seven counties. The Coordinated Care Initiative includes:

- Cal MediConnect, a health plan that brings together Medicare and Medi-Cal benefits; and
- Mandatory Managed Long-term Services and Supports (MLTSS), mandatory enrollment in Medi-Cal managed care for people who remain in Original Medicare (fee-for-service) or Medicare Advantage.

Frequently Asked Questions

1. What is the difference between Medicare and Medi-Cal?

<u>Medicare</u> is a federal health insurance program for seniors who are 65 or older and people with disabilities. <u>Medi-Cal</u> is California's Medicaid program, a public health insurance program for individuals with low-income, including seniors and people with disabilities.

Medicare is the primary payer for most medical services for dual eligibles, including doctor and hospital visits. For dual eligibles, Medi-Cal often is referred to as the "wrap around" benefit. Medi-Cal covers most of dual eligibles' out-of-pocket costs, such as deductibles and co-pays. Medi-Cal also pays for most long-term services and supports, including nursing home care and home- and community-based services, such as the In-Home Supportive Services program (IHSS). Click on the image below to see in more detail which program covers which services.

Source: CHCS Policy Brief | Communicating the Value of Integrated Care to Stakeholders

2. How did the CCI come about?

The CCI is a joint state and federal effort to improve care for dual eligible beneficiaries. It is part of California's overall effort to better integrate and coordinate care for Medi-Cal beneficiaries, including dual eligibles.



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The federal Affordable Care Act (ACA), which passed in 2010, included a number of new initiatives and demonstration projects to help improve health care quality and lower costs by promoting coordinated care. To focus specifically on integrating care for people receiving both Medicare and Medicaid benefits, the reform law created the new Medicare-Medicaid Coordination Office within the Centers for Medicare and Medicaid Services (CMS).

The Medicare-Medicaid Coordination Office is partnering with California and several other states on Demonstrations to Integrate Care for Dual Eligible Individuals to design, test, and measure the effect of new approaches to better coordinate care for these beneficiaries.

Cal MediConnect is California's demonstration project. California's Department of Health Care Services and CMS executed a Memorandum of Understanding that provides federal approval for the state's demonstration and lays out the parameters under which it will operate. California's demonstration is called the Cal MediConnect program.

The Cal MediConnect demonstration is part of a larger CCI program in California to improve care for dual eligible beneficiaries. The other main part of CCI is the expansion of mandatory Medi-Cal managed care to duals and the integration of long-term services of supports into managed care. CCI aims to improve care coordination for dual eligible beneficiaries and drive high quality care that helps people stay healthy and in their homes for as long as possible. Shifting services out of institutional settings and into the home and community improves quality of life while creating a sustainable, person-centered health care system.

3. Who are dual eligible beneficiaries?

Dual eligible beneficiaries are individuals who qualify for both Medicare and Medi-Cal. In California, as many as seven in ten dual eligibles are age 65 and older, and most are women. Approximately one in three are younger people with disabilities.



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4. What are the goals of California's Cal MediConnect program?

- 1. Coordinate state and federal benefits and access to care across care settings using a person-centered approach.
- 2. Maximize the ability of dual eligible beneficiaries to remain in their homes and communities with appropriate services and supports in lieu of institutional care.
- 3. Increase the availability and access to home- and community-based alternatives.
- 4. Preserve and enhance the ability for consumers to self-direct their care and receive high quality care.
- 5. Optimize the use of Medicare, Medi-Cal and other State/County resources.

5. Where is the demonstration available?

Seven counties have implemented the demonstration: Los Angeles, Orange, Riverside, San Bernardino, San Diego, San Mateo, and Santa Clara.