

State of California Department of Health Care Services



Beneficiary FAQ

1. What if I Decide Not to Join Cal MediConnect?

Joining Cal MediConnect is voluntary. This means it is your choice to join. If you choose not to join Cal MediConnect, you will have two options:

- Option 1: Pick a Medi-Cal Managed Care Plan (if you haven't already) and Your Medicare Stays the Same
- Option 2: Join a PACE plan (Program for All-Inclusive Care for the Elderly)

If you are already in a Medi-Cal Managed Care Plan, you can stay in it, or chose Cal MediConnect instead. If you are newly eligible for Medicare or new to a CCI County, you must make a choice to continue to receive your Medi-Cal benefits.

2. Will Joining Cal MediConnect Affect My IHSS or Other Support?

No. If you receive In-Home Supportive Services, you can keep your IHSS provider and hours when you join a Cal MediConnect health plan. You keep all your Medicare And Medi-Cal benefits.

3. Prescription Drugs

• Will I still need my Medicare Part D plan?

No, all medicines will be covered by Cal MediConnect. If you had a Part D plan before, you will get a letter stating that your prescriptions will be provided by your Cal MediConnect health plan. This does not mean you are losing your prescription benefits.

 How can I make sure I won't run out of medicine when I am changing to Cal MediConnect?

When you first join Cal MediConnect, you are eligible for at least a 30-day supply of your medicines. Then, contact your Cal MediConnect plan to find out how to continue getting your medicine. That way, you won't run out as you move to your new plan.

• Will I be able to get all the same medicines I had before?

All Cal MediConnect plans cover the same prescription medicines as Medicare Part D, but the brand names may be different. Your plan will help make sure you get the medicine you need.

Learn more about the CCI by looking at the Cal MediConnect Beneficiary Toolkit.