

CALIFORNIA'S DUAL ELIGIBLES DEMONSTRATION

Fact Sheet

The state Medi-Cal program and the federal Medicare program are partnering to launch a three-year demonstration beginning in 2013 that would promote coordinated health care delivery to seniors and people with disabilities who are dually eligible for both of the public health insurance programs. The proposed demonstration aims to create a seamless service delivery experience for dual eligible beneficiaries, with the ultimate goals of improved care quality, better health and a more efficient delivery system.

- Who:** California has about 1.1 million dual eligibles beneficiaries, far more than any other state. Nearly seven in ten are 65 and older, and most are women. Approximately one in three are younger people with disabilities, and more than half live on less than \$10,000 a year. Dual eligibles tend to have multiple chronic conditions and complex medical and social care needs.
- Where:** Under the proposed demonstration, dual eligible beneficiaries who reside in the following four counties would be able to enroll in new integrated plans: **Los Angeles, Orange, San Diego, and San Mateo**. Pending further state and federal authority, readiness reviews and preparations, the state's proposed demonstration calls for implementing the demonstration in up to six additional counties: **Alameda, Contra Costa, Riverside, Sacramento, San Bernardino, and Santa Clara**.
- What:** In the counties selected for the proposed demonstration, a single integrated health plan will be responsible for delivering all Medicare and Medi-Cal benefits and services, including medical care, long-term care, behavioral health care and social supports that help people live at home. Dual eligible beneficiaries will no longer need to carry multiple insurance cards and navigate a confusing maze of services. Beneficiaries, their family members and other caregivers will be able to participate in care coordination teams that help ensure delivery of the right services at the right time and place. Strong consumer protections grounded in personal choice and continuity of care will be core to the demonstration's success. State and federal officials will monitor the demonstration closely to ensure provision of all beneficiary protections. The In-Home Supportive Services program will be an integrated service, but it will remain an entitlement program and consumers' current rights will not change.
- Why:** Today dual eligible beneficiaries must access services through a complex system of disconnected programs funded by different government offices. This fragmentation often leads to beneficiary confusion, delayed care, inappropriate utilization and unnecessary costs. Integrating all services and financing for dual eligible beneficiaries will promote care coordination and result in improved beneficiary health and lower costs.
- When:** Pending federal approval, the new integrated care models would begin in January 2013. Eligible beneficiaries would receive a notice in the fall of 2012 about their enrollment options. Beneficiaries can choose to keep their Medicare benefits separate from this integration, but those who do not opt out of the demonstration would be enrolled into one of the county's demonstration health plans.
- More Info:** Meaningful stakeholder involvement in the development and ongoing operations of the demonstration is required at the state and local levels. The state will seek ongoing feedback on various topics, including beneficiary notification and enrollment, quality evaluation and other consumer protections. Learn more and track developments at www.CalDuals.org.