



TOBY DOUGLAS
Director

State of California—Health and Human Services Agency
Department of Health Care Services



EDMUND G. BROWN JR.
Governor

March 9, 2011

TO: ALL COUNTY WELFARE DIRECTORS Letter No.: 11-12
ALL COUNTY WELFARE ADMINISTRATIVE OFFICERS
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS
ALL COUNTY HEALTH EXECUTIVES
ALL COUNTY MENTAL HEALTH DIRECTORS
ALL COUNTY MEDS LIAISONS

SUBJECT: ISSUE WITH DUAL ELIGIBLE MEMBERS ENROLLED IN THE SENIOR
CARE ACTION NETWORK (SCAN) HEALTH PLAN

The Department of Health Care Services (DHCS) has identified an issue with dual-eligible members in SCAN in Los Angeles, Riverside, and San Bernardino counties. The issue is regarding the duplication of In-Home Supportive Services (IHSS) authorized by the county and the services provided under SCAN. This letter also provides counties a process for terminating IHSS for Medi-Cal beneficiaries who enroll in SCAN.

SCAN Overview

SCAN is a Medicare Advantage Prescription Drug Plan with a Special Needs Plan designation for the dual eligible subset of its membership. SCAN contracts with the Department of Health Care Services to provide full scope Medicare and Medi-Cal services for the senior dual eligible Medicare/Medi-Cal population on a full risk basis. The Medi-Cal program for SCAN's duals operates in the approved service areas of Los Angeles, San Bernardino, and Riverside counties. The eligibility criteria for SCAN specifies that a member must be at least 65 years of age, have Medicare Parts A and B, have full scope Medi-Cal with no share-of-cost, and live in SCAN's approved service areas of Los Angeles, Riverside, and San Bernardino counties.

SCAN Independent Living Power Overview

SCAN provides home and community-based benefits through its Independent Living Power (ILP) program. These services provide support during an acute or long-term illness. For many seniors, these benefits provide the extra help necessary to remain out of a nursing home for as long as medically possible. SCAN members must agree to an in-home assessment in order to qualify for the program. Criteria are based on Title 22 regulations for nursing facility level of care. Services are provided by contracted agencies and may include personal care, homemaking, adult day, adult day healthcare, home delivered meals, non-Medicare covered durable medical equipment, incontinence supplies, and nutritional supplements.

Description of the Issue

Under the provisions of the SCAN contract with DHCS, SCAN members must receive home care/personal care services through SCAN. SCAN receives a per member per month capitation payment for the provision of those services. DHCS has discovered that a significant number of SCAN dual eligible members are also enrolled in and receiving services through their county IHSS programs. Home care/personal care services provided through both SCAN and county IHSS program results in duplication of payment and services. A SCAN member cannot be enrolled in both programs at the same time. Each month DHCS identifies SCAN members who receive IHSS services through the county. These members will need to decide if they want to receive personal care services by IHSS or the SCAN ILP program.

Process for Termination of IHSS

As part of the SCAN's enrollment application screening process, each potential SCAN member is asked whether they are receiving IHSS through the county. If so, they are informed that if they enroll their Medi-Cal with SCAN, they must terminate IHSS through the county because SCAN provides all personal care services. In addition, DHCS will send SCAN a list of members receiving IHSS authorized by the county.

Upon enrollment, each potential SCAN member choosing to terminate IHSS will be provided with an "IHSS Discontinuance Notification". SCAN will send the signed termination notice to the IHSS office. If it is discovered, through the list provided by DHCS each month, that SCAN members are receiving IHSS, the SCAN Health Plan will send notification of plan disenrollment to the SCAN member.

The SCAN Health Plan will establish a point of contact with the IHSS program in Los Angeles, Riverside, and San Bernardino counties. Each month the SCAN program will send an enrollment list of new SCAN members and notification requesting termination of IHSS members to the established point of contact.

All County Welfare Directors Letter No.: 11-12
Page 3
March 9, 2011

Upon receipt of information from SCAN that the recipient elected to terminate his or her IHSS, the county will process the termination of IHSS for the recipient and issue a Notice-of-Action to the recipient confirming termination of IHSS. Within 10 business days of receipt of the SCAN listing, and IHSS termination notification from the SCAN member, the county IHSS representative will provide SCAN with written confirmation of the SCAN participant's termination of IHSS. This termination of ineligible IHSS recipients will prevent or reduce overpayments to SCAN.

Below is the SCAN contact information which is to be utilized for Los Angeles, Riverside, and San Bernardino counties:

SCAN Health Plan
Attn: Independent Living Power Program
3800 Kilroy Airport Way, Suite 100
P.O. Box 22616
Long Beach, CA 90801-5616
1-800-887-8695

If you have any questions regarding this letter, please call Ms. Tammy Kaylor at (916) 552-9496, or if you have questions regarding SCAN, please call Mr. Joseph Billingsley at (916) 440-7532.

Original signed by:

René Mollow, MSN, RN, Chief
Medi-Cal Eligibility Division