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SPEAKERS

Anastasia Dodson

Anastasia Dodson:

Hello, and welcome to the webinar. This webinar is provided by the California Department of Health Care Services, which is the state's Medi-Cal agency. This webinar will provide you with information about choices for people with Medicare and Medi-Cal, particularly in seven counties where a special type of Medicare plan is available for people with both Medicare and Medi-Cal. We understand this is a complex area to learn about the difference between Medicare and Medi-Cal and options for people with both types of coverage. So, in this webinar, we'll break down those differences, and also talk about some upcoming changes for 2023.

Anastasia Dodson:

Today, we're going to be talking about, who are dual eligible beneficiaries? What are Medicare Medi-Cal Plans in seven counties? And you can see the seven counties listed there on the screen. What are D-SNP look-alike plans? And what transitions are coming up in 2023 for those plans? Some other program reminders, and additional resources that are available to you and anyone else that needs additional information. You can see, again, on that screen, the seven counties are Los Angeles, Orange, Riverside, San Bernardino, San Diego, San Mateo, and Santa Clara counties where we have Medicare Medi-Cal plans.

Anastasia Dodson:

Let's start with dual eligible beneficiaries. Dual eligible beneficiaries are individuals that have both Medicare and Medi-Cal, and they're sometimes referred to as Medi-Medi individuals. Nationally, dual eligible beneficiaries are more likely than people with Medicare only to report being in poor health. In California, almost a quarter of Medicare beneficiaries also have Medi-Cal, or 1.5 million Californians. Of those 1.5 million, 43% have Medicare Advantage and 57% have Original or Fee-For-Service Medicare.

Anastasia Dodson:

When we look at dual eligible beneficiaries and the types of benefits and services available and their chronic conditions, we see that there is a complexity for some individuals when they're trying to navigate across both programs. Medicare and Medi-Cal operate separately with different benefits and different plans. And this fragmented system can be confusing, hard to navigate, particularly for people that have chronic conditions, other health concerns, and difficulty with transportation, and needs for a variety of services. So, having a fragmented system also does not provide person-centered services. That person-centered approach is particularly helpful for people with complex and chronic conditions. And when they have to navigate two different systems, streamlining those systems and streamlining their care coordination is very important.

Anastasia Dodson:

Next, we're going to talk about, in those seven counties, a new type of plan that is available to support beneficiaries with both Medicare and Medi-Cal. Right now, in 2022, there is a demonstration, a type of health plan called Cal MediConnect, in seven counties, that combines Medicare and Medi-Cal in one health plan. These plans, Cal MediConnect plans, are available right now in 2022 in Los Angeles, Orange, Riverside, San Bernardino, San Diego, San Mateo, and Santa Clara counties until December 31, 2022. Then, on January 1, 2023, Cal MediConnect plan members will automatically transition into a Medicare Medi-Cal Plan. And, sometimes we call these plans Medi-Medi Plans, that are going to be operated by the same parent company as the Cal MediConnect plans. Or beneficiaries can choose otherwise. They can choose a different type of Medicare Advantage plan or Original Medicare.

Anastasia Dodson:

These Medi-Medi Plans, as they are going to be called for 2023, they are open for new enrollment for 2023 for essentially all people with Medicare and Medi-Cal in those seven counties. Again, those seven counties are listed on the screen, and those are the counties where Medi-Medi Plans will be operating in 2023. And dually eligible beneficiaries can choose to enroll in the Medi-Medi Plans, or they can choose a different Medicare plan, or stay in Original Medicare. Once again, the Cal MediConnect members currently have a Cal MediConnect plan for 2022, they will automatically transition into a Medi-Medi Plan that's operated by their same organization as Cal MediConnect unless they choose otherwise.

Anastasia Dodson:

Let's talk a little bit about these Medi-Medi Plans or Medicare Medi-Cal Plans. Members in a Medi-Medi Plan will receive their Medicare benefits through what's known as a Dual Eligible Special Needs Plan, and their Medi-Cal benefits through a companion Medi-Cal managed care plan. Now, even though there are two plans here, from a beneficiary's perspective, the Medi-Medi Plans are presented as a single plan. In the beneficiary materials, members receive one card, one welcome packet, and have one phone number for member services. Both the Medicare and the Medi-Cal plans are operated by the same parent organization. And of course, these members, they get their Medicare Part A and Part B and Part D services through this Medicare plan. And then, the Medi-Cal plan provides wraparound services, including Medicare cost sharing, long-term services and supports, like in-home care and other types of supportive services, community supports, transportation, durable medical equipment, whatever's not covered by Medicare. All of that is provided on the Medi-Cal side, but again, it's through one parent organization and one plan as far as the beneficiary is concerned.

Anastasia Dodson:

Again, these are Medi-Medi Plans. They're available in the seven counties we've talked about. And they are available for beneficiaries with dual Medicare and Medi-Cal to choose during open enrollment for 2023.

Anastasia Dodson:

There are very few restrictions as far as who can enroll in these plans. So, if you have clients in these seven counties, and they are interested in this type of a plan, it's a great choice. Later, we're going to be talking about some other choices that dual eligible beneficiaries also have. But we are very excited at the Department of Health Care Services to have these Medi-Medi Plans offered in the seven counties that we've listed, again, so that one organization can help the beneficiary, can coordinate across both their Medicare and their Medi-Cal benefits.

Anastasia Dodson:

This slide lists some of the types of services that Medi-Medi Plans will help people and coordinate with. So, of course, their Medicare physicians, hospital stays, other types of providers, their pharmacy benefits, labs and x-rays, but also transportation to medical appointments, durable medical equipment, nursing facility stays, and long-term services and supports, which can include in-home care. Also, community supports, other strategies and tools to help people continue living at home when they need extra help to stay at home. Also, mental health services, mental health benefits, both on the Medicare and the Medi-Cal side, are coordinated and provided through the Medi-Medi Plans.

Anastasia Dodson:

All right. This slide gives a little bit of information about provider networks. We know this is very important for people with Medicare and Medi-Cal members who have Cal MediConnect and are transitioning to the Medi-Medi Plan. They will continue to have access to a provider network through their Medi-Medi Plan that will include similar providers as they see today, or the Medi-Medi Plan will help them find a new doctor that they like. But for the most part, the networks, the provider networks, should remain very similar from Cal MediConnect to Medi-Medi Plans. If, by chance, a beneficiary's provider is not in their Medi-Medi network, there's a continuity of care period, so the member can continue to see their provider for up to 12 months in most cases, but they have to have a prior relationship with the provider.

Anastasia Dodson:

All right, so we're going to transition now to a different topic, but again, a very important topic as far as transitions that are coming up in 2023 for people who have Medicare and Medi-Cal. And this transition is based on a federal change.

Anastasia Dodson:

D-SNP look-alike plans, those are known as D-SNP "look-alikes" because they are Medicare Advantage plans that have 80% or more of their members eligible for Medi-Cal. So, they mostly serve dual eligible beneficiaries, but they are not a true D-SNP, because they do not have all the same care coordination requirements with Medi-Cal as a true D-SNP does. So, look-alike plans do not meet D-SNP integration

requirements. And because of concerns with the types of care coordination that are available in true D-SNPs and Medi-Medi plans, Medicare is requiring members in D-SNP look-alike plans to transition to other Medicare Advantage or D-SNP packages in 2023.

Anastasia Dodson:

For 2023, Medicare will permit Medicare Advantage organizations to transition D-SNP look-alike members into another MA plan or plans offered by that same Medicare Advantage organization. Because it's the same organization that currently offers a D-SNP look-alike and then will be transitioning members into a different plan in that same organization, there should be continuity of care across provider networks, and of course cost sharing protections for members, as well as better care options for people currently enrolled in a look-alike plan. Medicare, the federal government is working with D-SNP look-alike plans to facilitate this crosswalk enrollment so that it is an automatic transition. Members will be notified of their new plan via the Annual Notice of Change that they will receive by September 30th. And those members can also choose a different plan or Original Medicare, again during open enrollment. Once again, the Medicare Advantage organizations that offer D-SNP "look-alikes", they will be transitioning their members into another MA plan or D-SNP offered by that same organization to ensure continuity of care. And there should be a seamless transition for beneficiaries across the state that are in D-SNP look-alike plans.

Anastasia Dodson:

This is the noticing timeline that will start in September 2022. You can see on the left, D-SNP look-alike members, they will receive their Annual Notice of Change by September 30th. And Cal MediConnect members will also receive their Annual Notice of Change by September 30th. Both of those will explain the transition. In October, there will also be notices, a 90-day notice that goes to Cal MediConnect members that are transitioning to Medi-Medi Plans. And then, there will also be outbound calls to Cal MediConnect transitioning members. And then, in November, there'll be a 45-day notice to Cal MediConnect transitioning members. And you're all well aware of the Medicare Annual Enrollment Period that runs from October 15th to December 7th.

Anastasia Dodson:

Okay, so we have talked about some transitions, particularly in the seven counties that we've mentioned above, although the D-SNP look-alike transitions will occur in other counties as well. Let's talk about an overall look at the options for dual eligible beneficiaries in those seven counties.

Anastasia Dodson:

A dual eligible beneficiary could choose Original Medicare and any Medi-Cal plan that's available in their county. In some counties, there is just one Medi-Cal plan, in Orange County and San Mateo counties. But in the other five counties that are on that list, there is more than one Medi-Cal plan that beneficiaries can choose from.

Beneficiaries can also choose a Medicare Medi-Cal Plan, a Medi-Medi Plan that offers both sets of benefits under one plan with coordination across both sets of benefits. The beneficiary could also choose a Medicare Advantage plan that may or may not be a D-SNP or could be a regular MA plan with automatic enrollment in their affiliated Medi-Cal plan, if one is available. And we will talk more about that affiliation with Medicare plans on an upcoming slide. They can also choose a Medicare Advantage plan without an affiliated Medi-Cal plan. And in certain counties and locations, beneficiaries can also choose to enroll in PACE, which is another type of integrated care or SCAN Health Plan, again another type of integrated care.

Anastasia Dodson:

Both PACE and SCAN, they offer particular types of plans for people with significant health care and long-term care needs. So, there's some limitations on PACE and SCAN as far as the types of conditions and level of need to enroll in those programs. But again, both of those are also integrated across Medicare and Medi-Cal. Again, the seven counties that we're talking about where Medi-Medi Plan is available, and of course these other options as well are Los Angeles, Orange County, Riverside, San Bernardino, San Diego, San Mateo, and Santa Clara.

Anastasia Dodson:

Let's go to some other program reminders. These may be new for you, so I'm glad that we're able to share these. First, there is something called a Medi-Cal Matching Plan Policy. So, Medi-Cal has health plans that beneficiaries can choose from. In some counties there's just one Medi-Cal plan. But in other counties there's more than one. And beneficiaries with Medicare and Medi-Cal can choose from among those Medi-Cal plans. In the 12 counties that we have been talking about, the seven counties plus some additional counties, dual eligible beneficiaries who are enrolled in a Medicare Advantage plan, if there is a matching Medi-Cal plan, they have to be enrolled in that matching Medi-Cal plan. Medicare is the lead plan here. And this is an automatic process. So, if your client chooses a particular Medicare Advantage plan in one of these counties and that Medicare Advantage plan also has a Medi-Cal plan, then the client will be automatically enrolled in that matching Medi-Cal plan. There's no action needed. It may not be the same type of integrated care as Medi-Medi Plan, but it can still help to have the same organization administering both sets of benefits.

Anastasia Dodson:

So, the 12 counties where we have this Medi-Cal Matching Plan Policy are Alameda, Contra Costa, Fresno, Kern, Los Angeles, Riverside, Sacramento, San Bernardino, San Diego, San Francisco, Santa Clara, and Stanislaus. Again, in those counties, if someone who has Medicare and Medi-Cal chooses a particular Medicare Advantage plan that also has a companion Medi-Cal plan that is administered by the same organization, then they'll be automatically enrolled in that Medi-Cal plan. But again, the plans can be matching, but they may not be a true Medi-Medi Plan where all of the materials are integrated. But even so, having the same organization for both sets

of benefits can be very helpful to avoid confusion.

Anastasia Dodson:

Also, important reminder around balance billing. This is something that you can certainly share with your clients. Dual eligible beneficiaries should never receive a bill for their Medicare Part A or Part B medical services. Providers that send a bill for the cost sharing portion on Part A or Part B services, if they send a bill, that's called balance billing, and it's illegal under state and federal law to send those types of bills to people who are dually eligible. That co-insurance bill should be sent to the Medi-Cal plan for beneficiaries, should not go to the beneficiary.

Anastasia Dodson:

Balance billing is prohibited both for people who have a Medicare Advantage plan and also folks who have Original Medicare. For beneficiaries that are enrolled in a Medicare Advantage plan, absolutely they should not pay for doctor visits or other medical care when they get those services from a provider in that Medicare plan network. They may still have a copay, a small copay for prescription drugs, but otherwise you really should not have any costs for their Medicare services or their Medi-Cal services through a Medicare Advantage plan. And we want to make sure that beneficiaries know this and providers as well, because we are hearing about balance billing, and we want to protect beneficiaries from these costs.

Anastasia Dodson:

The last two items I want to flag for you all is that effective May 1, 2022, Medi-Cal was expanded to cover individuals age 50 and older regardless of immigration status. So, you may know some clients who are not eligible for Medicare, but if they are age 50 and older and they have income that's within the Medi-Cal income limit, regardless of their immigration status, then they can qualify for Medi-Cal. Again, they have to be low income, their income has to be within the Medi-Cal limits. But even if they don't have Medicare, they can still qualify for Medi-Cal for their medical services.

Anastasia Dodson:

The other flag I want to share with you is that, on the Medi-Cal side, there has been a policy change starting July 1st so that people who are applying for or already have Medi-Cal, they can have assets up to \$130,000 for one person, and \$65,000 for each additional person. That is a big change. Previously, the limit was \$2,000 for one person. That did not include their primary residence, but for certain types of bank accounts and other types of assets, that limit then did prevent some people from being eligible for Medi-Cal. So now, it's really about Medi-Cal income limits. So, Medi-Cal is available for low-income individuals. They can have assets up to \$130,000 for one person, even in addition to their primary residence. It's just that Medi-Cal income limits are the primary eligibility criteria there.

Anastasia Dodson:

Okay, so that's it for the presentation today. I do want to flag that these resources are available on the DHCS website where you found this video. And all of these links are there on the website. As you can see we have information on the future of Cal MediConnect, the Medi-Cal Matching Plan Policy. There are changes for some dual eligible beneficiaries in certain counties with regard to their Medi-Cal plans. We have information about D-SNP contracts and a policy guide there. And we also have a stakeholder workgroup that meets monthly. We have webinar recordings and notes. And there are also, at the bottom, very important for all of you, there are outreach materials. So, we have concise documents that you can print and share or just keep for yourselves as handy reminders for what we've learned today. All right, thank you everyone for joining. And again, thank you for the people that you serve and providing information to people with Medicare and Medi-Cal that is helpful for them and their families. All right, thank you.