



**The Coordinated Care Initiative and  
Beneficiaries with HIV/AIDS and Medicare and/or Medi-Cal  
May 2014**

The Coordinated Care Initiative (CCI) in California, promotes integrated delivery of medical, behavioral, and long-term care services, and also provides a road map to integrated Medicare and Medi-Cal services for people on both programs, called “Medi-Medi” or “dual eligible beneficiaries.”

**The CCI includes two parts:**

*Cal MediConnect:* All of a beneficiary’s medical, behavioral health, long-term institutional, and home-and community-based services will be combined into a single health plan. This will allow your providers to better coordinate your care and make it simpler for you to get the right care at the right time in the right place. Beneficiaries in the ALW program would need to disenroll from that program to join Cal MediConnect.

*Managed Medi-Cal Long-Term Services and Supports (MLTSS):* Medi-Cal beneficiaries, including dual eligible beneficiaries who have opted out of Cal MediConnect or who are not eligible for Cal MediConnect, are required to join a Medi-Cal managed care health plan to receive their Medi-Cal benefits, including long-term supports and services (LTSS) and Medicare wrap-around benefits. Beneficiaries in the ALW program will need to pick a Medi-Cal plan for their Medi-Cal benefits.



**Location**

CCI will take place in eight counties: Alameda, Los Angeles, Orange, Riverside, San Bernardino, San Diego, San Mateo, and Santa Clara.

The participating health plans in each county are part of the state’s existing network of Medi-Cal health plans and have experience providing Medicare managed care. Each underwent a rigorous selection process and an extensive readiness review process.

**Enrollment Process**

Coverage for these beneficiaries will begin no sooner than April 2014. Notification of these changes will be mailed to eligible participants starting 90 days before their scheduled date of coverage, which is typically their month of birth. Beneficiaries don’t need to do anything until they receive that notice. More details about enrollment are available at [www.CalDuals.org](http://www.CalDuals.org).

**Understanding Enrollment**

**Optional enrollment in Cal MediConnect Health Plan:** The state will use a *passive enrollment* process for dual beneficiaries. This means that the state will enroll eligible

individuals into a health plan that combines their Medicare and Medi-Cal benefits unless the individual actively chooses not to join and notifies the state of their choice to keep their Medicare the way it is now and to choose a Medi-Cal plan for their Medi-Cal benefits. The state will send eligible individuals multiple notices describing their choices, including the option to keep their Medicare the way it is now. Beneficiaries with HIV/AIDS will not be passively enrolled into Cal MediConnect.

- Mandatory enrollment into Medi-Cal Health Plan:** Nearly all Medi-Cal beneficiaries, including those with HIV/AIDS, MUST get their Medi-Cal benefits through Medi-Cal health plans. This now includes Medi-Cal beneficiaries with a share of cost and those residing or formerly residing in nursing facilities. They will receive notices describing their plan choices. The state will automatically enroll them in a plan if they do not make a choice. This includes people with both Medicare and Medi-Cal who choose not to join a Cal MediConnect health plan.

**Table 1: CCI Enrollment Scenarios for Beneficiaries with HIV/AIDS**

	<b>Dual Eligible Beneficiary</b>	<b>Medi-Cal Only Beneficiary</b>
<b>AIDS Waiver Client</b>	<ul style="list-style-type: none"> <li>Will NOT be passively enrolled into a Cal MediConnect since the beneficiary is already enrolled in the AIDS Waiver Program.</li> <li>Must disenroll from the AIDS Waiver Program if he/she chooses to join a Cal MediConnect.</li> <li>Must elect a Medi-Cal health plan or be auto-enrolled in a plan.</li> </ul>	<ul style="list-style-type: none"> <li>Must elect a Medi-Cal health plan or be auto-enrolled in a plan.</li> </ul>
<b>AIDS HealthCare Foundation (AHF) Member</b>	<ul style="list-style-type: none"> <li>Will NOT be passively enrolled into a Cal MediConnect since beneficiary is already enrolled in an AHF plan.</li> <li>Must disenroll from an AHF plan to join a Cal Medi-Connect health plan.</li> </ul>	<ul style="list-style-type: none"> <li>NOT required to enroll in a Medi-Cal health plan since already enrolled in an AHF plan.</li> <li>May join a Medi-Cal health plan ONLY if they first dis-enroll from an AHF plan.</li> </ul>
<b>All other people with HIV.</b>	<ul style="list-style-type: none"> <li>Will be passively enrolled into a Cal MediConnect, if otherwise eligible.</li> <li>May opt-out any month of a Cal MediConnect and must choose a Medi-Cal health plan for Medi-Cal benefits.</li> </ul>	If not already in a Medi-Cal health plan: <ul style="list-style-type: none"> <li>Must elect a Medi-Cal health plan or be auto-enrolled in a plan.</li> </ul>

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## Common Questions

### 1. If someone “opts out” of Cal MediConnect, do they have to opt-out each year?

No. People only need to notify the state ONCE that they do not want to enroll in a Cal MediConnect health plan. If they do join and decide they don't like it, they can disenroll at any time. If at first they do not want to enroll in Cal MediConnect and later change their mind, they may enroll at any month. A beneficiary or their approved representative can make all these choices by calling **Health Care Options at 1-800-430-4263 (TTY: 1-800-430-7077)**.

### 2. How will Medi-Cal health plans coordinate services with AIDS Waiver providers?

The health plans are expected to coordinate Members' care across the full continuum of service providers, including medical, behavioral, long-term services and supports, and home-and community-based waiver services. Care coordination will be performed by nurses, social workers, primary care providers, and, if appropriate, other medical or long-term services and supports professionals, and health plan care coordinators.

### 3. How will HIV/AIDS medications be provided under the CCI?

People who enroll in a Cal MediConnect health plan will receive all of their prescription medications, including HIV/AIDS medications through that health plan.

People with Medi-Cal only will get their HIV/AIDS medications like they do today through Medi-Cal. People who are fully covered by Medi-Cal (Medi-Cal only and no share of cost) are not eligible for the AIDS Drug Assistance Program (ADAP).

ADAP can pay for outpatient prescription out-of-pocket costs for drugs on the ADAP formulary to eligible individuals co-enrolled in Medi-Cal with a share of cost and/or Medicare Part D. For information on ADAP eligibility, covered drugs, or how to enroll, call **888-311-7632** or visit Ramsell Public HealthRx at <http://www.ramsellcorp.com/individuals/ca.aspx>.

### 4. How will programs funded by the Ryan White Care Act be coordinated under the CCI?

The federal Ryan White HIV/AIDS Program provides HIV-related services to people who do not have sufficient health care coverage or financial resources for coping with HIV. As the “payer of last resort,” the Ryan White program fills gaps in care not met by other payers, such as private insurance, Medicare and Medi-Cal. For example, Ryan White programs may provide wrap-around support services for a dual eligible or Medi-Cal beneficiary like a food bank or home-delivered meals.

**5. What if I have HIV/AIDS and receive a letter saying I will be enrolled in Cal MediConnect?**

Individuals HIV/AIDS should not have received notices about Cal MediConnect.

- The State is taking steps to automatically disenroll these beneficiaries from Cal MediConnect so they can keep their waiver services
- The beneficiary or their representative should call Health Care Options at 1-844-580-7272 if they want confirmation that they have been disenrolled.
- The beneficiaries will not lose their place in an HCBS waiver program. If they join Cal MediConnect and then decide to go back into the waiver, they will still have a place.