

State Profile for the Capitated Financial Alignment Demonstration

California: Cal MediConnect	
Dates	
Memorandum of understanding signed date	March 27, 2013
Opt-in enrollment start date ¹	April 1, 2014–July 1, 2015
Passive enrollment start date ^{1,2}	April 1, 2014–August 2015
Enrollment	
Covered population	<ul style="list-style-type: none"> • Age 21 and older; • Not enrolled in certain home and community-based services waivers, not residing in certain institutions, and meets certain continuous eligibility requirements; and, • Living in one of the following seven counties: Los Angeles, Orange, Riverside, San Bernardino, San Diego, San Mateo, and Santa Clara
Estimated number eligible	424,000
Number enrolled as of September 1, 2015	120,039
Number that opted out as of February 1, 2015	178,701
Payment	
Number of participating plans	10
Savings percentage range	1–5.5% ³
Number of rating categories	4
Other risk mitigation strategies	<ul style="list-style-type: none"> • Risk corridors
Benefits	
Expanded benefits	<ul style="list-style-type: none"> • Transportation • Vision
Carved out benefits	<ul style="list-style-type: none"> • Behavioral health⁴ • Hospice
Required community involvement	<ul style="list-style-type: none"> • None
Care Coordination	
Number of days to complete health risk assessment	<ul style="list-style-type: none"> • Within 45 days of enrollment for high-risk enrollees • Within 90 days of enrollment for low-risk enrollees
Number of days to establish individualized care plan	<ul style="list-style-type: none"> • With 30 working days of completing the health risk assessment
Education requirements for care coordinator	<ul style="list-style-type: none"> • Not specified
Care coordinator caseload requirements	<ul style="list-style-type: none"> • Not specified
Number of days to maintain continuity of care from previous coverage	<ul style="list-style-type: none"> • Maintain Medicare providers and services for 6 months • Maintain Medicaid (Medi-Cal) providers and services for 12 months
Consumer Protections	
Integrated Medicaid and Medicare appeals process	<ul style="list-style-type: none"> • No
Organization acting as ombudsman	<ul style="list-style-type: none"> • Legal Aid Society of San Diego⁵

Notes:

¹Opt-in and passive enrollment start dates had varying start dates by county or region.

²Two counties (Santa Clara and San Mateo) automatically enrolled beneficiaries in the demonstration without an initial opt-in enrollment period (Cal Duals 2014).

³In California minimum savings percentages were established by the state but each county has specific interim savings percentages added to the state's minimum (CMS 2013e).

⁴Plans are financially responsible for all Medicare behavioral health services, but some Medicaid specialty mental health rehabilitative and targeted case management services and non-Medicare drug services are not included in the capitated payment made to the participating health plans. These services are financed and administered by county agencies under the provisions of the state's Medicaid managed care waiver and its regular Medicaid state plan.

⁵The Legal Aid Society of San Diego has subcontracted additional entities in each county to serve as the Ombudsman in that specific county.

Sources: Centers for Medicare & Medicaid Services (CMS), U.S. Department of Health and Human Services. 2015a. California financial alignment demonstration (Cal MediConnect). Baltimore, MD: CMS. <http://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/FinancialAlignmentInitiative/California.html>.

Centers for Medicare & Medicaid Services (CMS), U.S. Department of Health and Human Services. 2015b. Monthly enrollment by plan. Baltimore, MD: CMS. <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MCRAAdvPartDENrolData/Monthly-Enrollment-by-Plan.html>.

Centers for Medicare & Medicaid Services (CMS), U.S. Department of Health and Human Services. 2013. Memorandum of understanding (MOU) between the Centers for Medicare & Medicaid Services (CMS) and the State of California regarding a federal-state partnership to test a capitated financial alignment model for Medicare-Medicaid enrollees: California demonstration to integrate care for dual eligible beneficiaries. Baltimore, MD: CMS. <https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/FinancialAlignmentInitiative/Downloads/CAMOU.pdf>.