L.A. Care's Cal MediConnect Plan: Improving Care for California's Most Vulnerable Patients

Health Plan Provides Support to Physicians and Patients to Ease Transition, Including Continuity of Care Options

With so many changes going on in health care these days, physicians and their eligible patients understandably have many questions about the various programs available to them thanks to the Affordable Care Act. Recently, Cal MediConnect has become a popular topic of discussion for doctors and individuals eligible for both Medicare and Medi-Cal.

California's Coordinated Care Initiative (CCI) is the state-wide effort to transition Medi-Cal beneficiaries from a fragmented fee-forservice model to a coordinated care plan. Cal MediConnect is the part of CCI that allows older, low-income residents who qualify for both Medicare and Medi-Cal (dual eligible patients) to receive all of their benefits from one single, coordinated health plan. The goal of the program is to better coordinate care for seniors and people with disabilities, which will ease the burden and frustration patients often experience while trying to navigate a fragmented, uncoordinated health care system. Research has shown that coordinating care for people with multiple chronic conditions can result in better health outcomes and improved quality of life.

Impact on Physicians and Patients

Since the program was implemented in L.A. County in April 2014, physicians and patients have struggled to understand its impact. Physicians who are part of medical groups and IPAs contracted with Cal MediConnect plans can enjoy the care management aspects of the program, such as:

- A Health Risk Assessment (HRA) completed for each patient, which includes a behavioral health screening.
- Care managers assigned to help patients navigate the system and assist with their treatment plans.
- Enhanced communication between all providers in a patient's care team.

For physicians not contracted with a Cal MediConnect health plan, continuity of care provisions have been put into place. After a patient enrolls in a health plan, a fee-for-service physician may continue to see that patient for up to six months for Medicare services or twelve months for Medi-Cal services. To do so, the physician must be able to demonstrate a preexisting relationship with the patient and be willing to accept the reimbursement rates (similar to Medicare and Medi-Cal fee-for-service rates) from the health plan. Also, there can be no quality-of-care issues or a failure to meet federal or state requirements.

After the continuity of care period ends, the physician will have the option to join the plan's provider network. If the physician chooses not to join, his or her Medi-Cal and Cal MediConnect patients will need to select a physician who is participating in the network.

L.A. Care's Track Record

L.A. Care is the only publicly-operated plan in L.A. County, and one of five Los Angeles County health plans participating in Cal MediConnect. L.A. Care has a 17-year history of providing access to quality health care for the area's most vulnerable and most diverse low-income patients, with the experience and the know-how to effectively serve this population.

L.A. Care has a strong commitment to supporting the physicians who take care of this patient population. The plan provides education on important topics such as Cal MediConnect, and has made a significant investment in technology to help providers prepare for new systems of coordinated care. And, unlike for-profit plans, nearly 95% of L.A. Care's revenue goes back into providing health care for its members.

To find out more about L.A. Care's Cal MediConnect Plan or provider network, please visit: www.calmediconnectla.org or call 1-888-522-1298. To access Cal MediConnect resources for physicians, please see the Provider Resource Center at www.lacare.org/cmc.