

September 24, 2014

California Department of Health Care Services: delivered via Sarah.Brooks@dhcs.ca.gov

Thank you for this opportunity to comment on DHCS's Draft Duals Plan Letter on D-SNPs in Alameda and Orange Counties.

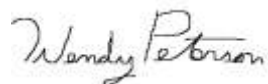
We are concerned that the policy will result in aggressive marketing targeted toward dual eligibles through June 2015. The Cal MediConnect ombudsman has already documented reports of questionable marketing practices in other counties – including marketing toward vulnerable populations residing in senior housing and individuals with cognitive impairments. Insurance brokers are not permitted to market CMC plans, and so are limited to enrolling dual eligibles into non-CMC D-SNPs in order to collect brokerage fees. The proposed policy invites insurance brokers to employ increasingly aggressive marketing efforts before the launch date to maximize enrollment into these plans.

We don't propose a change to the policy regarding this concern, but we strongly recommend that the state and CMS provide additional resources to local HICAPs so that they can to meet the demand for counseling assistance. The current CMS augmentation is inadequate, at least in Alameda County, to meet the need for increased capacity.

We further recommend investing additional resources where necessary to allow both DHCS and CMS to be vigilant regarding marketing violations and the marketing activities of brokers and plans. This includes increased outreach and communication regarding aggressive brokers and marketing fraud, and how to identify and report these activities.

We are concerned that the policy will increase the number of people who will be enrolled in two different managed care plans. Under DHCS's plan, individuals in non-SMC D-SNPs will have to select a different managed care plan for their LTSS and other Medi-Cal wrap-around services. By itself, the idea of being in two managed care plans – when managed care plans have been touted as a comprehensive way to receive all of your healthcare services in a coordinated way – is conceptually daunting, leading to confusion among consumers and professionals alike! But more, in practice this policy may undermine the goal of managed care to coordinate benefits across the continuum of care. Individuals enrolled in two different plans will not benefit from care coordination. Instead, they will have to navigate two different plans with different systems, policies and procedures, and contact information. While not all beneficiaries who are in two different managed care plans will experience fragmentation, the policy increases this possibility.

Sincerely,



Wendy Peterson, Director, Senior Services Coalition of Alameda County