

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850



Medicare-Medicaid Coordination Office

DATE: September 10, 2021

TO: California Medicare-Medicaid Plans

FROM: Jessica H. May
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Alignment Group, Medicare-Medicaid Coordination Office

SUBJECT: Guidance and Call Center Information for California Medicare-Medicaid Plans

The California Department of Health Care Services (DHCS) has updated demonstration eligibility to exclude the majority of members with Medicaid share-of-cost (SOC) obligations from the Cal MediConnect (CMC) demonstration effective January 1, 2022.¹ Members will still have Medicare and Medi-Cal benefits, including prescription drugs; however, DHCS will disenroll CMC SOC members that do not live in nursing facilities from the CMC plans effective December 31, 2021. Members with a SOC can continue to enroll in the CMC plans until November 30, 2021 (for a December 1, 2021 effective date).

CMS will include impacted SOC members who are enrolled in CMC plans effective late October in the annual reassignment process in the fall of 2021 to ensure they have Medicare drug coverage in place effective January 1, 2022. Plans can expect to see a TRC 212-A, Re-Assignment Enrollment Accepted, or TRC 211-R Re-Assignment Rejected on their Daily Transaction Reply Report in late October or early November. For those members that CMS was not able to include in the annual 2021 reassignment process and who have not chosen a Part D plan for January 1, 2022, CMS will auto-enroll them into the Limited Income Newly Eligible Transition (LINET) in early January, 2022.

CMC plans will send a notice to SOC members in early October informing them of their disenrollment from the CMC plan and their options for health care coverage. DHCS will send an additional notice to SOC members in mid-October 2021 regarding their disenrollment from the CMC plan and a Notice of Additional Information document to assist members with any questions they have regarding their disenrollment. The notice will emphasize that members will still have Medicare and Medi-Cal benefits, including prescription drugs. DHCS will send a second notice and a Notice of Additional Information in November.

¹ [California Advancing and Innovating Medi-Cal \(CalAIM\) Proposal](#)

Your Customer Service Team may receive questions from members who received a disenrollment notice from the state. Your customer service team can explain to members that the CMC policy changed and will no longer cover people that have SOC obligations who do not live in nursing facilities.

If members have questions about SOC or the Medi-Cal program, please direct them to:

- Medi-Cal Help Line, please call 1-800-541-5555, 8:00 a.m. to 5:00 p.m. Monday through Friday, excluding national holidays.

If members have questions about why their plan is changing, please direct them to:

- Health Care Options at 1-844-580-7272. TTY users should call 1-800-430-7077.

If members have general questions about other enrollment choices, please direct them to:

- California Health Insurance Counseling & Advocacy Program (HICAP) at 1-800-434-0222.

Members with questions about Medicare can visit www.Medicare.gov, or call the toll-free number at 1-800-633-4227 (1-800-MEDICARE) 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

If you have any questions about this memo, please contact your account manager.