

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



**MEDICARE-MEDICAID COORDINATION OFFICE**

---

**DATE:** September 9, 2021

**TO:** California Medicare-Medicaid Plans

**FROM:** Lindsay P. Barnette  
Director, Models, Demonstrations, and Analysis Group

**SUBJECT:** California MMPs: Contract Year 2021 Exhibit 21.a Model Notice for Share-of-Cost Member Disenrollment Notification of Involuntary Disenrollment

Attached to this memorandum is the Contract Year (CY) 2021 Exhibit 21.a: Model Notice for Share-of-Cost Member Disenrollment - Notification of Involuntary Disenrollment for California Medicare-Medicaid Plans (MMPs) operating in the Cal MediConnect (CMC) program. CMS and California jointly drafted this model notice.

As part of the CalAIM Initiative, California's Department of Health Care Services (DHCS) will standardize which aid code groups will require mandatory managed care enrollment (MMCE) versus mandatory Fee-For-Service (FFS) enrollment, across all models of care and aid code groups statewide. Under CalAIM, beneficiaries who are currently in a non-Long Term Care managed care aid code with a Share of Cost (SOC) will be involuntarily disenrolled from Medi-Cal managed care and be enrolled in Medi-Cal FFS coverage, effective January 1, 2022. Beneficiaries moving from Medi-Cal managed care to FFS because they have a SOC, will no longer be eligible for their CMC plan. DHCS is therefore asking the CMC plans to send the attached notice specific to the CMC beneficiaries who have a SOC and a non-Long Term Care managed care aid code.

The scope of the attached Exhibit 21a, a Model Medicare mandatory care enrollment California MCE CMC SOC Disenrollment Notice, includes why the changes to the beneficiaries' Medi-Cal and Medicare plan enrollments are happening, their initial enrollment into Original Medicare and FFS Medi-Cal, as well as their choice for enrolling into a different Medicare plan along with phone numbers for obtaining help from both DHCS and Medicare. Plans should consult with DHCS regarding timing requirements for when this model notice must be sent.

We will post the attached model notice to [www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/FinancialAlignmentInitiative/MMPInformationandGuidance/MMPMarketingInformationandResources](http://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/FinancialAlignmentInitiative/MMPInformationandGuidance/MMPMarketingInformationandResources).

For any questions about the contents of this memorandum, please contact your Contract Management Team or the Medicare-Medicaid Coordination Office at [MMCOCapsModel@cms.hhs.gov](mailto:MMCOCapsModel@cms.hhs.gov).