



PASC TELE-TOWN HALL

Understanding your Medicare and Medi-Cal benefits





About the Call

To ask a question	Type the question in the box provided on the screen, along with your contact information.
Leave us a message	Type your message in the box provided on your screen, along with your name and phone number.
Poll Questions	Answer by clicking on the bubble to the left of your answer.



**To listen to the call on your phone Dial 877-229-8493
i.d. code 111563**





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POLL QUESTION #1

If you could request PASC Registry services online, would this be helpful to you?

Press 1 –Yes

Press 2 –no

Center for Health Care Rights

ADVOCACY FOR HEALTH CARE CONSUMERS

Understanding Your Medicare and Medi-Cal Benefits

Center for Health Care Rights (CHCR)

- A non-profit organization that provides free education and help with Medicare and health insurance issues
- We are not part of the Medicare program and we do not endorse or recommend any insurance company or Medicare Advantage plan
- Our services are funded by the Los Angeles City Department of Aging and the Los Angeles County Area Agency on Aging HICAP grants

Medicare– Who Is eligible?

- Persons age 65 and older receiving Social Security retirement benefits
- Persons under the age of 65 receiving Social Security disability benefits
- Persons age 65 and older who are legal residents or US citizens who have lived in the US for at least 5 years –voluntary enrollees

Medicare Benefits

Part A

- Hospital services
- Home health
- Skilled nursing care in a skilled nursing facility

Part B

- Doctor services
- Ambulance services
- Lab, x rays, diagnostic tests
- Medical equipment
- Preventive care
- Outpatient therapy
- Mental health

Using Your Medicare Benefits

- Keep original Medicare and see any Medicare provider of your choice; or
- Join a Medicare Advantage plan and assign your Medicare Part A, B and D benefits to a managed care plan that provides all your medical care.

Medicare Part D Drug Coverage

- Prescription drug plan (PDP)
 - Obtain Medicare Part D drug coverage by enrolling into a PDP plan that only provides drug coverage
 - A PDP drug plan does not affect your ability to use Medicare Parts A and B services
- Medicare Advantage drug plan (MAPD)
 - Enroll into a MAPD and assign your Medicare A, B and D benefits to the plan
 - Use the plan to obtain all of your medical care

Medicare Part D and Medi-Cal

- Persons who have Medicare and full Medi-Cal, must enroll into a Medicare drug plan
- If you do not select a plan, Medicare will select one for you
- When you have no drug plan, the LiNet Program will provide temporary drug coverage until you get into a Medicare drug plan
- Part D copayments are \$1.20-\$3.60 for a 30 day supply of your prescription

Gaps in Medicare Coverage

- Medicare copayments and deductibles, e.g., 20% copayment for doctor services
- No coverage of dental care, eye glasses, or hearing aids
- No coverage of custodial care in a nursing home or at home

Medi-Cal Eligibility

- Persons who receive SSI automatically qualify for Medi-Cal
- Medi-Cal eligibility rules if you are not receiving SSI and are elderly (age 65 or older) or younger and disabled

	<u>Income</u>	<u>Resources</u>
Single	\$1220	\$2000
Married	\$1645	\$3000

Medi-Cal Benefits

- Hospital care
- Doctor services
- Prescription drugs
- Ambulance
- Lab, x-rays
- Emergency services
- Mental health
- Hearing aids
- Incontinence supplies
- Dental care
- Vision services
- Non-emergency medical transportation
- Long Term Services and Supports
 - Nursing home care
 - Adult day health care (CBAS)
 - IHSS
 - Home and community based services

How Medi-Cal Closes Gaps in Medicare Coverage

- Persons who have Medicare and full Medi-Cal do not pay Medicare copayments and deductibles
- Medi-Cal pays the Medicare Part B premium
- Medi-Cal provides benefits not covered by Medicare – dental care, hearing aids, incontinence supplies, custodial care at home and in a nursing home, medical transportation

Medi-Cal Plans Provide Medi-Cal Benefits

- Most persons who have Medi-Cal are required to enroll into a Medi-Cal health plan.
- If you have Medicare and Medi-Cal, you are probably in a Medi-Cal health plan unless you have Medi-Cal with a share of cost.



POLL QUESTION #2

If you have both Medicare and Medi-Cal, have you experienced a problem getting your Medi-Cal benefits from your Medi-Cal plan?

Press 1 – yes

Press 2 – no

La County Medi-Cal Health Plans

- LA Care (principal plan)
 - Partner plans
 - Care 1st
 - Kaiser
 - Blue Cross
- Health Net (principal plan)
 - Partner plan
 - Molina

How Does Your Medicare Work with Your Medi-Cal Health Plan?

- Medicare pays as the primary insurance and you can see any Medicare provider of your choice
- Your Medicare provider does not have to contract with your Medi-Cal health plan or request authorization to see you
- Your Medicare providers bill the Medi-Cal health plan for your Medicare copayments

How Do I Get Medi-Cal Benefits from My Medi-Cal Plan?

- You must meet Medi-Cal requirements
- You need a prescription from your Medicare doctor
- The Medi-Cal health plan or medical group must authorize the services
- You must use the plan's contracted vendors

Dental Services for Adults Age 21 and older

- Exams and x rays
 - Cleanings
 - Fluoride treatments
 - Fillings
 - Anterior root canals (front teeth)
 - Prefabricated crowns (stainless steel or tooth colored)
 - Full dentures
 - Other medically necessary dental services
- *Benefits do not include gum treatment, partial dentures, certain crowns

Medi-Cal Dental Benefits

There are two ways to obtain Medi-Cal dental benefits:

- ❖ Medi-Cal dental plan-- You use a specific network of dental providers available through your plan. Your dental services must be authorized by your plan.
Plan choices in L.A. County – Heath Net, Liberty Dental Plan or Access Dental Plan.
- ❖ Denti-Cal -- You can see any Medi-Cal dental provider. Dental services must be authorized by Denti-Cal.

Dental Services Cont'd

Call the Denti-Cal Beneficiary Hotline at
1-800-322-6384 for:

- Help locating a Medi-Cal dentist
- Questions about Medi-Cal dental coverage or prior authorization
- To file a grievance or complaint against a dentist

To appeal a Medi-Cal dental authorization denial,
call 1-800-952-5253 to request a fair hearing.

Hearing Aid Benefit Cap and Benefits

- Medi-Cal pays up to \$1510 a year for a hearing aid, supplies, repairs, initial set of batteries, adjustments. Medi-Cal permits the purchase of two hearing aids if the total cost is no more than \$1510.
- If the hearing aid cost is more than \$1510, the vendor should not bill the beneficiary if they accept Medi-Cal payment. This is considered “balance billing.”

Hearing Aid Benefit Cap and Benefits

Cont'd

- Hearing aids that are lost, stolen, damaged are not subject to the cap but the beneficiary must follow steps to receive a replacement hearing aid.
- Hearing aid screenings are not covered by Medi-Cal but are covered by Medicare.

Incontinence Medical Supplies

- These supplies may be covered with a prescription from your physician.
- The prescription must describe the medical condition that is causing the incontinence and need for the supplies.
- The prescription must predate the order for the supplies.
- Types of supplies covered— disposable adult briefs/diapers, protective underwear, underpads, shields, liners.

Non Emergency Medical Transportation

- Covered when a beneficiary's medical and physical condition does not allow travel by bus, car, taxi or other form of public or private transportation.
- Transportation is covered obtain Medicare or Medi-Cal covered services.
- Coverage of non-emergency medical transportation requires a written prescription by a medical provider (physician, dentist).
- Prior authorization by your Medi-Cal plan is required.

Medi-Cal Non-Emergency Medical Transportation

- Litter Van – patient must be transported by gurney in a prone position because he is not able to sit for the duration of the trip
- Wheelchair Van -- patient in a wheelchair or has a disabling physical or mental limitation that prevents him from transferring unassisted from home to a public or private vehicle.

Examples of Beneficiaries Who Qualify for Medical Van Transport

- Patients who suffer from severe mental confusion
- Patients with paraplegia
- Dialysis patients
- Individuals with chronic conditions who require oxygen but do not require monitoring

Common Questions About Your Medicare and Medi-Cal Benefits

Question --

My doctor says that he cannot see me because he does not contract with my Medi-Cal health plan. Is this true?

Answer—

No. Your Medicare provider does not need authorization from the Medi-Cal health plan to see you.

Common Questions About Your Medicare and Medi-Cal Benefits

Question –

I just enrolled into a Medi-Cal health plan and the pharmacy that provides my incontinence supplies says that I don't have Medi-Cal anymore. What's going on?

Answer –

Now that you are in a Medi-Cal health plan, you have to obtain your supplies from vendors that contract with your health plan. You must also get authorization to get these services.

Common Questions About Your Medicare and Medi-Cal Benefits

Question –

My doctor's office is charging me the 20% copayment for an office visit. The doctor's office does not want to bill my Medi-Cal health plan. Do I have to pay the doctor?

Answer—

It is illegal for the doctor to balance bill you for the Medicare copayment.

Do You Have Questions about Your Medicare or Medi-Cal?

Call the Center for Health Care
Rights

We are here to help you!

1-800-824-0780



Poll Question #3

Was this call helpful for you?

Press 1 – Yes

Press 2 – No



Tell us how we did

- We want to hear from you. If you have a question(s) that was not answered during tonight's call, type it into the question box along with your contact information and a PASC representative will contact in the next 72 hours.
- Don't have a question, tell us how we are doing and any suggestions to make the calls better.