



The Beneficiary Experience – September 2015

Cynthia's Story

Cynthia is 58 years old, has several chronic diseases, and is enrolled in Virginia's Elderly or Disabled with Consumer Direction (EDCD) Waiver.^{1,2} She previously received Medicare benefits through Humana's Medicare Advantage Plan. In March 2014, DMAS sent letters informing dual eligible beneficiaries of a new program to improve care by combining Medicare and Medicaid under

liked the idea of Medicare and Medicaid being together because what Medicare didn't cover, Medicaid would...so I chose to enroll." Because Cynthia was already with Humana, she selected it as her CCC plan. Cynthia said, "I was with Humana, and I liked Humana." Cynthia's decision was also influenced by the fact that most of her providers were in Humana's network. As

Carol [Humana care coordinator] really stays in touch with me...she definitely knows what's going on and she makes sure I have everything I need...I don't even think of her as a coordinator, I just think of her as a friend...without her, who would I have to help me...nobody, except for the home care agency that works with me...she tells me about things that are available to me...she helps me when I do my over the counter [pharmacy] orders...I think that's a good idea, having a coordinator.

– Cynthia (CCC Beneficiary)

one health plan.³ Recalling that, Cynthia said, "I [received] a letter saying I had the option to enroll or stay the way I was and I

¹ Gerald Craver, Mathew Behrens, and Sarah Broughton contributed to this document.

² All individuals agreed to participate in this study prior to data collection.

³ Anthem Healthkeepers, Humana, and Virginia Premier are the three CCC health plans.

Cynthia remarked, "I like to [stay] with the people who know me...whether it's the pharmacy or the doctor...when you're with somebody for so long...you don't want to go with anybody else..."

Once enrolled, individuals receive benefits including one membership card, podiatry, dental, vision, and hearing services. When asked about the

CCC Program and Evaluation

On March 1, 2014, the Virginia Department of Medical Assistance Services (DMAS) implemented the Commonwealth Coordinated Care (CCC) Program in selected regions across the state to improve care for full benefit Medicare-Medicaid beneficiaries. Known as dual eligibles, these individuals often have substantial acute, behavioral, chronic, primary, and long-term service and support (LTSS) needs. While dual eligibles have access to a range of services, most are not coordinated because they are provided through fragmented fee-for-service (FFS) programs. CCC seeks to improve care for dual eligibles by coordinating the delivery of all health and social services they are eligible to receive under a managed care delivery system.

Because CCC represents a new care delivery model, DMAS partnered with George Mason University to evaluate it by forming a team composed of agency staff and faculty. As part of its activities, the evaluation team is conducting interviews with CCC beneficiaries and providers to better understand what the program looks and feels like from the perspective of individuals who are directly involved in it. This case study provides such insight by briefly presenting the experiences of one beneficiary, care coordinator, and EDCD home health agency nurse.

membership card, Cynthia said, "I think [it's] great...I like the fact that it's one card...I don't have to give [providers] my Medicare and Medicaid [cards]..." In addition, Humana beneficiaries receive a monthly \$35 pharmacy benefit that provides home delivery of over the counter supplies. When considering this, Cynthia said, "I started using it because [Humana] delivers [to my home] and I am elderly and live far out..."

The primary benefit of CCC is care coordination, which is provided by care coordinators who support beneficiaries across the care continuum. To achieve this, coordinators must not only have good communication and relationships with beneficiaries, but also with providers. Carol, a Humana care coordinator,

started working with Cynthia in June 2014. Cynthia said, "I like my coordinator, she's always in touch...she and I not only talk [on the phone], but she sees me [in my home]." When asked about how Carol assists her, Cynthia said, "[Carol] tells me about things that are available, like Silver Sneakers [an exercise program]...she helps me when I do my over the counter [pharmacy] orders...she answers my questions...like when I had to find a dermatologist...if I have any problems [with providers or services], she straightens it out." When Cynthia started having mobility issues, Carol ordered a personal emergency response system (PERS) pendant in case she fell and injured herself. Because Cynthia is in the EDCD Waiver, Carol works with Wendy (a home health agency nurse) to

support her at home. Wendy started working with Cynthia in May 2014, and likes CCC because she has a contact person, "I can call [Carol] and I know [concerns] will be taken care of." This doesn't usually happen with Wendy's fee-for-service clients because their case workers change frequently. When comparing her relationships with Carol and Wendy to relationships with other health care staff before CCC started, Cynthia said, "...we do have a relationship...I have a relationship with Wendy...I have a relationship with Carol...we have a good relationship...they can tell when something's going on with me whether I say so or not...this is better...I like the one on one [contact]...I like this...yeah...I like this."

CCC enrollee Cynthia (middle) with her Humana care coordinator, Carol (left), and EDCD Waiver home health agency nurse, Wendy (right). Cynthia is sitting on her new walker that Carol worked with her primary care physician to obtain, and is wearing the PERS pendant that Carol ordered for her through the CCC Program. (For additional information on the Commonwealth Coordinated Care Program, please visit: http://www.dmas.virginia.gov/Content_pgs/altc-enrl.aspx.)

