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**Fear of change the biggest reason for not choosing coordinated care under Cal MediConnect, but large majorities of enrollees satisfied with the health services they are receiving**

The new health care demonstration project Cal MediConnect, intended to improve the coordination of care among the state's dual Medicare and Medi-Cal beneficiaries (dual eligibles), has thus far been experiencing higher than expected numbers of beneficiaries choosing to not participate in the new program.

According to the results of a new survey of dual eligible beneficiaries who are eligible for Cal MediConnect, avoiding change appears to be the main reason why those choosing not to participate are doing so. The top two reasons cited by dual eligible beneficiaries for opting out of the program are: "I was satisfied with my current health care services and didn't want to make any changes" (cited by 84%) and "I didn't want to risk losing my doctor" (71%).

The study, completed among 2,502 dual eligible beneficiaries or their proxies by telephone in seven California counties\*, is the first in a series of polls of dual eligible beneficiaries to be conducted by Field Research Corporation on behalf of The SCAN Foundation in conjunction with the California Department of Health Care Services (DHCS). The polls are intended to bring important metrics to the state's evaluation of the Cal MediConnect program.

The survey also measured the satisfaction and confidence that those participating in Cal MediConnect (CMC enrollees) have with the health care services they are receiving under the new program. The results show that large majorities of CMC enrollees express confidence or satisfaction with the health care services they are receiving. For example, about eight in ten say they are very or somewhat confident that...

- They can get their questions answered about their health needs (80%)
- They know how to manage their health conditions (79%)

In addition, more than seven in ten CMC enrollees are very or somewhat satisfied with each of six aspects of health services measured in the survey. They include:

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\* This included five counties participating in the Cal MediConnect demonstration project – Los Angeles, San Diego, Riverside, San Bernardino and Santa Clara – as well as two large counties not participating in the program – San Francisco and Alameda.

- The amount of time their doctor and other staff people spend with them (83%)
- The choice of doctors they can see (77%)
- The way different health care providers work together to give them the services they need (77%)
- The choice of hospitals they can use (76%)
- The information provided by health plans to explain their benefits (76%)
- How long they have to wait to see a doctor when needing an appointment (73%)

In each case, the proportion of CMC enrollees who are dissatisfied or who lack confidence in each of these matters ranges narrowly between 7% and 17%.

"Despite challenges of starting a new program of this magnitude, most Cal MediConnect enrollees are satisfied and confident about their care," said Bruce Chernof, president and CEO of The SCAN Foundation. "These results also demonstrate a continued need for the state and Cal MediConnect health plans to educate consumers on this care model and continue to strengthen care coordination programs."

"These Californians have complex needs and often require multiple providers to stay independent and in their community. For too long, they had to navigate two health care systems to access care. DHCS knew implementing this program would come with challenges – no one had ever tried to simplify and integrate the health system for them," said Jennifer Kent, director of the Department of Health Care Services. "We're excited that these initial results show that Californians enrolled in Cal MediConnect see its value and are generally satisfied with their care. In the months ahead, we will continue to work closely with the Cal MediConnect plans, stakeholders, and community partners, to improve the program and educate eligible beneficiaries."

Yet, in several areas CMC enrollees are somewhat less likely to express very high levels of confidence and satisfaction than dual eligibles living in the same counties who opted out of the program or to those residing in two large counties not participating in the program.

- The proportion of CMC enrollees who report being "very confident" that they know how to manage their health conditions (44%) is somewhat lower than those who opted out of the program (52%), and dual eligibles living in non-participating counties (54%).
- While one in four (27%) CMC enrollees say they are "very satisfied" with the choice of doctors they can see under the new Cal MediConnect program, larger proportions of dual eligibles who opted out of the program (34%) or who live in non-participating counties (36%) say the same.
- Slightly fewer CMC enrollees than dual eligible beneficiaries not participating in the program also report being "very satisfied" with the way different health care providers are working together to give them the health care services they need. Among CMC enrollees 26% say this, compared to 30% among those who had opted out of the program and 33% among dual eligibles living in non-participating counties.

- In addition, while less than a third of Cal MediConnect enrollees (30%) say they are "very satisfied" with the amount of time their doctor and other staff spend with them, 40% report being very satisfied among dual eligibles who opted out of the program and 36% among those living in non-participating counties.

Another area where significant differences are observed between Cal MediConnect enrollees and other dual eligibles relates to the amount of time enrollees have been associated with the doctor they consider to be their personal doctor. Among CMC enrollees nearly a third (30%) say they have been seeing their personal doctor for one year or less. Among opt outs just 16% say this vs. 19% among those living in other non-participating counties. More than one in four CMC enrollees (28%) also say that the physician they consider as their personal doctor is now different than the one they were seeing prior to enrolling in Cal MediConnect.

On the other hand, when read a list of six possible problems or difficulties that individuals can have with their health care services, the proportions of Cal MediConnect enrollees who report experiencing problems are generally similar to the levels reported by other dual eligible beneficiaries not enrolled in the program. These include:

- Having a misunderstanding about your health care services or coverage (20% among CMC enrollees vs. 26% among those who opted out and 21% among dual eligibles in non-participating counties).
- Being denied a treatment or referral for another service recommended by a doctor (15% among CMC enrollees vs. 16% among those who opted out and 17% among those in non-participating counties).
- Transportation problems kept you from getting needed health care (13% among CMC enrollees vs. 17% among both opt-outs and those in non-participating counties).
- Having trouble communicating with a doctor or health care provider because of a speech, hearing or other disability (12% among CMC enrollees vs. 12% among opt outs and 14% among those in non-participating counties).
- The doctor or other health care professional did not speak your language or there was not an interpreter available (11% among non-English-proficient CMC enrollees, 12% among non-English-proficient opt outs and 13% among non-English-proficient dual eligibles in non-participating counties).

-30-

*Note: See topline findings (attached) for the wording and distributions of replies to common questions asked across all three samples of dual eligible beneficiaries examined in this survey.*

**About the Survey**

The results in this release come from a telephone survey of 2,502 dual eligible beneficiaries conducted in seven California counties by [Field Research Corporation](#) on behalf of The SCAN Foundation, in conjunction with the California Department of Health Care Services. The survey included 1,394 interviews completed with Cal MediConnect enrollees across five counties where the program is operating – Los Angeles, San Diego, Riverside, San Bernardino and Santa Clara, and 678 interviews with those who chose to opt of Cal MediConnect in these same counties. In addition, another 430 interviews were completed for control purposes with dual eligible beneficiaries in two other large counties, San Francisco and Alameda, where the program has not been implemented.

To enable the study to include the opinions of dual eligible beneficiaries who were either unable or found it difficult to complete the telephone interview themselves, the survey offered these beneficiaries the option of naming another individual who assisted them in making their health care decisions to complete the survey on their behalf (their proxy). Of the 2,502 interviews completed, 1,967 were completed with dual eligible beneficiaries themselves and 535 with a proxy.

Interviewing was completed between the period June 16 – September 12, 2015 in four languages and dialects, English, Spanish, Cantonese and Mandarin. Up to eight attempts were made to reach and complete an interview with each randomly selected dual eligible beneficiary or their proxy on different days and times of day during the interviewing period.

The samples of dual eligible beneficiaries interviewed in the Cal MediConnect counties under study were stratified both by county and between CMC enrollees and those who had opted out of the program within each county. After the completion of interviewing, weights were developed to return these stratified sample allocations to overall population characteristics of dual eligible beneficiaries in each county and across the five counties under study. In addition, weights were assigned to the samples of dual eligible beneficiaries in the two control counties to match the demographic characteristics of dual eligible beneficiaries across the five Cal MediConnect counties for comparative purposes.

Sampling error estimates applicable to any probability-based survey depend upon its sample size. According to statistical theory, 95% of the time results from the CMC enrollee sample are subject to a maximum sampling error of +/- 2.7 percentage points, while those from the opt out sample have a maximum sampling error of +/- 3.9 percentage points. The maximum sampling error is based on percentages in the middle of the sampling distribution (e.g., at or near 50%). Percentages at either end of the distribution (such as those closer to 30% or 70%) have somewhat smaller margins of sampling error.

**About the Polling Project**

This project is supported by a grant from [The SCAN Foundation](#) – advancing a coordinated and easily navigated system of high-quality services for older adults that preserve dignity and independence.

**Dual Eligible Beneficiary Survey  
 – Topline Findings Across the Three Samples –**

		CMC ENROLLEES	OPT-OUTS	NON-CMC COUNTIES
How confident are you that you know how to manage your health conditions – very confident, somewhat confident, not too confident or not at all confident?	VERY CONFIDENT .....	44%	52%	54%
	SOMEWHAT CONFIDENT .....	35	29	33
	NOT TOO CONFIDENT.....	11	9	7
	NOT AT ALL CONFIDENT .....	6	7	5
	DON'T KNOW/REFUSED.....	5	4	2
Do you know who to call if you have a health need or a question about your health?	YES.....	81%	82%	83%
	NO .....	16	15	15
	DON'T KNOW/REFUSED.....	3	3	1
How confident are you that you can get your questions answered about your health needs – very confident, somewhat confident, not too confident or not at all confident?	VERY CONFIDENT .....	48%	50%	47%
	SOMEWHAT CONFIDENT .....	32	30	33
	NOT TOO CONFIDENT.....	9	11	13
	NOT AT ALL CONFIDENT .....	6	5	5
	DON'T KNOW/REFUSED.....	5	4	2
A personal doctor is the doctor who knows you best and can refer you to other doctors when you need to see a specialist. Do you have a doctor who you think of as your personal doctor?	YES.....	87%	92%	87%
	NO .....	12	7	11
	DON'T KNOW/REFUSED.....	2	1	2
<b>IF HAS A PERSONAL DOCTOR:</b>				
About how long have you been going to this doctor? How many years? Just your best estimate. (IF LESS THAN 6 MONTHS, ENTER "0")	LESS THAN 1 YEAR .....	15%	6%	7%
	1 YEAR.....	15	10	12
	2-3 YEARS.....	18	17	19
	4-5 YEARS.....	13	13	14
	6-10 YEARS .....	21	26	18
	10-15 YEARS .....	7	10	14
	MORE THAN 15 YEARS.....	8	15	13
	NOT RECORDED .....	3	3	3

*Note: Percentages may add to slightly more or slightly less than 100% due to rounding.*

The next questions are about different aspects of health care services. For each, please tell me how satisfied or dissatisfied you are with the health care services you are receiving now (under Cal MediConnect.) Are you very satisfied, satisfied, neither satisfied nor dissatisfied, dissatisfied or very dissatisfied with ITEM? (READ ITEMS IN RANDOM ORDER)

	VERY SATIS- FIED	SATIS- FIED	NEITHER SAT. OR DISSAT.	DISSAT- ISFIED	VERY DISSAT- ISFIED	DK/ REF
( ) a. the choice of doctors you can see						
CMC ENROLLEES	27%	50	6	8	4	6
OPT-OUTS	34%	49	3	6	3	4
NON-CMC COUNTIES	36%	48	4	6	3	3
( ) b. the choice of hospitals you can use						
CMC ENROLLEES	27%	49	4	5	2	12
OPT-OUTS	36%	48	3	5	2	7
NON-CMC COUNTIES	29%	57	5	5	2	3
( ) c. the information that your health plan has given you explaining your benefits						
CMC ENROLLEES	25%	51	5	9	3	7
OPT-OUTS	25%	50	5	11	3	6
NON-CMC COUNTIES	24%	54	6	8	2	6
( ) d. your ability to call someone if you need help in the evenings or on weekends						
CMC ENROLLEES	22%	43	5	7	3	20
OPT-OUTS	26%	41	7	7	3	16
NON-CMC COUNTIES	24%	44	6	11	5	10
( ) e. the amount of time your doctor and other staff people spend with you						
CMC ENROLLEES	30%	53	4	6	2	4
OPT-OUTS	40%	46	4	6	2	2
NON-CMC COUNTIES	26%	52	3	5	3	1
( ) f. how long you have to wait to see a doctor when you need an appointment						
CMC ENROLLEES	24%	49	6	13	4	3
OPT-OUTS	29%	48	5	10	5	3
NON-CMC COUNTIES	28%	46	6	13	6	3
( ) g. the way different health care providers work together to give you the services you need						
CMC ENROLLEES	26%	51	5	8	3	7
OPT-OUTS	30%	48	6	8	4	4
NON-CMC COUNTIES	33%	51	6	6	2	2

Note: Percentages may add to slightly more or slightly less than 100% due to rounding.

Next, I am going to read some problems or difficulties that people sometimes have with their health care services. For each, please tell me if you had a problem like this (with your current health services in the past year or so) (since your health care services changed over to Cal MediConnect). (**READ ITEMS IN RANDOM ORDER, ASKING:**) Has this happened to you (in the past year or so) (since changing over to Cal MediConnect)?

	<u>YES</u>	<u>NO</u>	<u>DK/REF</u>
( ) a. You had a misunderstanding about your health care services or coverage			
CMC ENROLLEES .....	20% ...76	.....	4
OPT-OUTS .....	27% ...71	.....	2
NON-CMC COUNTIES .....	21% ...77	.....	2
( ) b. Your health plan denied a treatment or referral for another service recommended by a doctor			
CMC ENROLLEES .....	15% ...80	.....	4
OPT-OUTS .....	16% ...83	.....	1
NON-CMC COUNTIES .....	17% ...80	.....	3
( ) c. <b>(IF NON-ENGLISH LANGUAGE INTERVIEW)</b> Your doctor did not speak your language or there was not an interpreter available for you when you visited your doctor or other health care professional			
CMC ENROLLEES (NON-ENGLISH-PROFICIENT) .....	11% ...87	.....	2
OPT-OUTS (NON-ENGLISH-PROFICIENT).....	12% ...87	.....	1
NON-CMC COUNTIES (NON-ENGLISH- PROFICIENT) .....	13% ...87	.....	*
( ) d. Transportation problems kept you from getting needed health care			
CMC ENROLLEES .....	13% ...84	.....	3
OPT-OUTS .....	17% ...82	.....	1
NON-CMC COUNTIES .....	17% ...83	.....	*
( ) e. A doctor you were seeing is not available through your plan			
CMC ENROLLEES .....	23% ...71	.....	6
OPT-OUTS .....	18% ...80	.....	2
NON-CMC COUNTIES .....	20% ...78	.....	2
( ) f. You had trouble communicating with a doctor or health care provider because of a speech, hearing or other disability			
CMC ENROLLEES .....	12% ...86	.....	3
OPT-OUTS .....	12% ...87	.....	2
NON-CMC COUNTIES .....	14% ...86	.....	1

In general, would you say your health is excellent, very good, good, fair, or poor?	CMC		NON-CMC
	ENROLLEES	OPT-OUTS	
EXCELLENT .....	7%	7%	7%
VERY GOOD.....	13	11	16
GOOD .....	28	24	31
FAIR .....	37	40	27
POOR .....	14	16	17
DON'T KNOW/REFUSED.....	1	2	1

\* Less than 1/2 of 1%.

Note: Percentages may add to slightly more or slightly less than 100% due to rounding.

The next questions ask about any long-term impairments or disabilities you may have that have lasted or can be expected to last for at least 3 months.

		CMC ENROLLEES	OPT-OUTS	NON-CMC COUNTIES
Do you require assistance for any common daily activities?	YES.....	41%	47%	51%
	NO .....	58	50	46
	DON'T KNOW/REFUSED.....	1	2	3
Do you use any specialized equipment, such as a cane, wheelchair, scooter, a special bed or other assistive devices?	YES.....	47%	52%	55%
	NO .....	53	48	45
	DON'T KNOW/REFUSED.....	1	*	*
In the past 12 months, have you been an overnight patient in a hospital for one day or longer?	YES.....	24%	33%	26%
	NO .....	75	66	74
	DON'T KNOW/REFUSED.....	1	2	*
What is the highest grade or year of school you completed – 8 <sup>TH</sup> grade or less, some high school, high school graduate or equivalent, trade or vocational school, some college, college graduate or post graduate education?	8 <sup>TH</sup> GRADE OR LESS.....	30%	32%	29%
	SOME HIGH SCHOOL.....	11	9	11
	HIGH SCHOOL GRADUATE.....	22	21	22
	SOME COLLEGE/TECH. SCHOOL.....	21	20	22
	COLLEGE GRADUATE.....	12	16	15
	DON'T KNOW/REFUSED.....	4	3	1
Are you currently receiving Supplemental Security Assistance benefits from the federal government?	YES.....	59%	63%	60%
	NO .....	31	29	30
	DON'T KNOW/REFUSED.....	10	8	9
Which of the following best describes the place where you live – a private residence, a nursing home or assisted living facility, or are you living in some other type of place?	PRIVATE RESIDENCE .....	78%	75%	69%
	NURSING HOME/ ASSISTED LIVING FACILITY.....	8	8	12
	OTHER.....	13	15	17
	DON'T KNOW/REFUSED.....	1	2	2
<b>IF PRIVATE RESIDENCE, ASK:</b>				
Including yourself, how many people currently live in your household?	1.....	23%	25%	31%
	2.....	26	32	33
	3.....	17	17	16
	4.....	13	10	7
	5+.....	19	14	10
	DON'T KNOW/REFUSED.....	1	2	2

\* Less than ½ of 1%.

Note: Percentages may add to slightly more or slightly less than 100% due to rounding.

	CMC ENROLLEES	OPT-OUTS	NON-CMC COUNTIES	
Gender	MALE.....	46%.....	40%.....	44%
	FEMALE.....	54.....	60.....	56
Age	LESS THAN 45.....	10%.....	6%.....	6%
	45-64.....	24.....	26.....	27
	65-74.....	34.....	32.....	33
	75-84.....	22.....	25.....	23
	85 OR OLDER.....	9.....	11.....	10
Race/Ethnicity	WHITE NON-HISPANIC.....	22%.....	21%.....	22%
	BLACK / AFRICAN-AMERICAN.....	12.....	13.....	12
	ASIAN / PACIFIC ISLANDER.....	10.....	12.....	11
	LATINO/HISPANIC.....	42.....	43.....	43
	OTHER.....	*.....	1.....	*
	NOT RECORDED.....	13.....	11.....	13
Preferred Language	ENGLISH.....	63%.....	61%.....	63%
	SPANISH.....	33.....	33.....	33
	CHINESE.....	4.....	6.....	5

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\* Less than ½ of 1%.

Note: Percentages may add to slightly more or slightly less than 100% due to rounding.