People with Medicare and Medicaid face the most complexity in America’s health care, and in many ways, are the least prepared to deal with it. The average dually eligible adult lives on less than $12,000 per year; 41 percent don’t have a high school diploma; and 37 percent speak a primary language other than English. The traditional systems that serve people eligible for both Medicare and Medicaid have a long, sad history of failing to coordinate health care delivery or financing.

With neither program really in charge, most consumers interact with two coverage cards, two completely different systems for problem resolutions, and often completely different health care provider networks that do not communicate with each other. This leaves duals and families stressed and confused, and frustrated with long wait times and improper bills.

Last week, The SCAN Foundation released a novel web-based tool to empower California’s dual eligibles with a better understanding of their choices for organized care in their neighborhood, all based on the things they care about most. You would think this resource was out there already, and yet the reality is no entity – public or private, federal or state – owns this role or has organized this information clearly.
Enormous health care delivery and public policy energy has focused on the fact that the highest utilizing Medicare beneficiaries (top 5 percent) represent roughly 40 percent of all Medicare spending and that dual eligibles (also referred to as the Medi-Medi population) represent roughly half of this high-utilizing population. However no organization has solved this very simple last mile problem: As a dual eligible, what care choices are available to me nearby and which model might be the best fit for the way I want to get health care and support?

In the last 20+ years, a number of models have been created to tackle coordination for this population in various ways, yet they still remain dramatically under-utilized relative to the need for more organized care. The major models include Medicare Advantage and its Special Needs Plans, California’s Cal MediConnect pilots, PACE programs, and more recently Accountable Care Organizations (ACOs). Having all these choices is great, but only if they are actually available where you live and they are easily distinguishable. What’s more, not all choices operate the same way, have the same benefits, or use the same providers. So, which choice is best for you, your parents, and your friends? The few tools that do exist literally do nothing to answer these most important questions for duals.

My Care, My Choice is a working solution to answer these questions here in California. It helps duals identify the things that are most important to them as they seek more coordinated care and then helps them understand the trade-offs between these programs. My Care, My Choice then lists the actual choices available to a person based on their ZIP code. This tool is straightforward enough so that dual eligibles and those who support them will find the information useful, but we are also hopeful that those organizations that provide help, such as duals Ombudsmen and HICAP, will find this a helpful starting point to share the range of options available in someone’s backyard.

Many thought partners provided valuable input – health plans, CalPACE, the National Association of Accountable Care Organizations (NAACOS), the Special Needs Plan (SNP) Alliance, community-based organizations, and many others – as we developed this “1.0” work in progress. Each deeply understands the importance of more organized care for dual eligibles. More importantly, many dually eligible individuals, their family, and friends co-designed this solution with us.

At The SCAN Foundation, we fundamentally believe in a society where older adults can access health and supportive services of their choosing to meet their needs. Respecting what older adults want, what we will all ultimately want when we are “older,” gets at the heart of the promise of dignity. Dignity springs from increased knowledge, agency, and accessibility to real options that people can choose. Dignity also comes from solutions that are designed with rather than for end users. And ultimately, dignity comes with health care that allows every older adult to live to their fullest potential with joy and confidence.