

2023 CHECKLIST FOR NEW MEDICARE MEDI-CAL PLANS (MMP) PRODUCT AND BENEFIT EXPANSION FILINGS

****Note - This Checklist is provided for guidance and reference purposes only. The Plan is required to review and comply with the Knox-Keene Act, Title 28 Regulations, and other applicable laws.***

In anticipation of health care service plan filings regarding Medicare Medi-Cal Plans (MMPs), also known as Exclusively Aligned Enrollment Dual Eligible Special Needs Plans (EAE D-SNPs), the Department of Managed Health Care (the Department) offers the following information to assist health plans with filings in relation to the Knox-Keene Act and implementing regulations (references to the Act and implementing regulations are hereinafter referred to as the Act or Sections, and Rules respectively).

This checklist is not intended to be all-inclusive and only represents issues that are required to be addressed by a health plan for purposes of compliance with the Act and Rules in relation to EAE D-SNP. Additional information may be requested by the Department within the course of reviewing a plan filing.

EXCLUSIVELY ALIGNED ENROLLMENT DUAL ELIGIBLE SPECIAL NEEDS PLANS

Plans offering an EAE D-SNP must file a Notice of Material Modification with the Department and obtain an Order of Approval.

Although this is a Material Modification filing, plans that have submitted and received approval of their DHCS CY2024 Integrated Materials may continue to operationalize and offer the MMP product for CY2024.

When submitting the filing, please use the subject title “EAE D-SNP: [Insert Name of County/Countries].” The Material Modification should include the following exhibits/information:

- 1) Exhibit E-1
 - a. If the plan is proposing an EAE D-SNP, provide a detailed description of the filing.
 - b. Address all exhibits that are amended to include a new EAE D-SNP, including outlining all changes to the documents and the filing number in which the document was most recently approved.

- c. If the plan currently offers a D-SNP, provide the current service area and confirm whether it will stay the same (no Exhibit H-1 is needed if there are no changes to service area, and this is detailed in the Exhibit E-1).
- d. Affirm the Plan has an adequate network of providers necessary to deliver Medi-Cal wraparound and Medi-Cal-only services in-network, including the following services:
 - i. Community-Based Adult Services
 - ii. Skilled Nursing Facilities
 - iii. Durable Medical Equipment
 - iv. Community Supports
 - v. Medical and Non-Medical Transportation
- e. Identify all contracted plans for EAE D-SNP and whether the delegated plan is providing Medi-Cal, Medicare, both, or specialized services. If specialized, please indicate if the plan provides the specialized services for Medi-Cal, Medicare or both. If the Plan is contracting with another Knox-Keene licensed plan to deliver services, the Plan should coordinate its filing with the other plan.

2) Exhibit D-2

- a. Include the CMS certification form (the document that the Department will be asked to complete in time for the February CMS filing) and a separate document detailing required government approvals.

3) Exhibits I

- a. File all notices to be sent by the Plan regarding EAE D-SNP services, as Exhibit I-9.
- b. If the Plan has added any providers to its network to deliver the Medi-Cal wraparound and Medi-Cal-only services, submit a roster of those providers as an Exhibit I-1, I-2, or I-3, as applicable.

4) Exhibits F, L, and M

- a. If any administrative or personnel changes, file appropriate exhibits.
- b. If no changes, please indicate no changes are necessary in the Exhibit E-1.

5) Exhibits K

- a. If any changes to existing or new provider contracts, file appropriate exhibits.
- b. If any provider contract and/or reimbursement changes, file appropriate exhibits.
- c. If no changes, please indicate no changes are necessary in the Exhibit E-1.

6) Exhibits N

- a. If any changes to existing or new ASAs, file appropriate exhibits.
- b. If filing a contract for only claims processing services, file as Exhibit N-3.
- c. For new ASAs, also file a description of the Plan's oversight arrangements as Exhibit N-2.
- d. If no changes, please indicate no changes are necessary in the Exhibit E-1.

7) Exhibits P

- c. If any changes to existing or new plan-to-plan contracts, file appropriate exhibits.
- d. If no changes, please indicate no changes are necessary in the Exhibit E-1.

8) Exhibits S, T, or U

- a. In Exhibit E-1, affirm that members will receive a single Evidence of Coverage (EOC)/member handbook specific to EAE D-SNP and the Plan is utilizing the model member materials.
- b. File any changes to the Plan's Disclosure Form (DF), EOC, or combined EOC/DF, in connection with EAE D-SNP as an Exhibit S, T, and/or U.

9) Exhibits EE and HH

- a. If the Plan anticipates any new enrollment that will exceed 5% current enrollment, file enrollment and financial projections including detailed underlying assumptions. Please provide the projections in Excel format on a monthly basis for the first year and on a quarterly basis for the second year.

10) Exhibit H-1

- a. If there is a change to the Plan's service area, provide a description of the entire service area. For partial counties, zip codes must be listed. The Plan is not required to file additional Network-related exhibits for the EAE D-SNP line of business.