**Understanding the Preferences of Dual-Eligible Consumers in Los Angeles County**

**The Question:**
Why are dual eligible consumers in Los Angeles County opting out of Cal MediConnect?

Approximately 10.7 million individuals are eligible for both Medicare and Medicaid in the United States. Dual-eligible individuals are a high-need population, and also a diverse one, and any system that serves them needs to be accommodating of their myriad needs and preferences, while also attuned to the barriers they encounter. In California, dual-eligible individuals in seven counties are served by Cal MediConnect, a managed care demonstration program that integrates medical and behavioral health, and long-term services and supports for enrollees. Despite the extra benefits offered by Cal MediConnect, Los Angeles County has the lowest rate of enrollment at 19 percent, with significant linguistic disparities and ethnic differences in the opt-out rates. This is despite the state’s ‘passive enrollment’ system, in which during the first year of the program consumers were automatically enrolled in the full managed care program unless they actively requested not to be, or actively dis-enrolled. Kathryn Kietzman, Ph.D. and colleagues at the UCLA Center for Health Policy Research conducted a Robert Wood Johnson Foundation-funded study to understand the decision-making processes of Cal MediConnect eligible individuals in Los Angeles County. The study included 53 in-depth, one-on-one interviews and six focus groups, and was conducted in partnership with the Westside Center for Independent Living and a Community Advisory Group of five consumers and five stakeholders. A full policy brief from this study as well as several case studies are available at [http://healthpolicy.ucla.edu/publications/search/pages/detail.aspx?PubID=1661](http://healthpolicy.ucla.edu/publications/search/pages/detail.aspx?PubID=1661).

**The Implications:**

Relationships and networks have a significant impact on individuals’ decisions to opt-out of the program, and should be leveraged to improve outreach about the Cal MediConnect program.

The study revealed that consumer understanding of the health plans was directly influenced by the source of information about the plan. Study participants cited doctors as their most trusted information source, and family and friends as their second. Additionally, participants expressed that they most trusted information from individuals with whom they had long-standing relationships. However, the information about Cal MediConnect health plans was mailed to consumers, and the information provided was often too dense and confusing for consumers to use effectively. As a result, consumers felt overwhelmed by their options and were often misinformed about the benefits of the plans. Even in cases where consumers understood the benefits, some opted out of the program in order to remain within a trusted network of care. Being able to maintain continuity of care was of extreme importance to nearly all the study participants. In order to boost enrollment, Cal MediConnect must find ways to better inform dual-eligible consumers and empower them to navigate the complex information about the program. Health plans should involve trusted community organizations and distribute culturally and linguistically appropriate information, so that consumers have a full understanding of their health care options. Furthermore, health plans should take into account the long-standing provider relationships that consumers value, and not underestimate the importance of preserving an existing network of care.

**Contact Us**

For more information on the results from this grant, please contact the principal investigator Kathryn Kietzman, Ph.D., UCLA Center for Health Policy Research | kietzman@ucla.edu

If you would like to learn more about other related work, please contact: Megan Collado, M.P.H., Director, AcademyHealth | megan.collado@academyhealth.org