

## MARIA: Opting In

Age: 62 Gender: Female Ethnicity: Mexican Primary Language: Spanish

Education: Completed 1 year of high school (in Mexico) U.S.-Born: No Enrollment Status: CMC Enrollee

### Read the related study:

*Cal MediConnect Enrollment: Why Are Dual-Eligible Consumers in Los Angeles County Opting Out?*

<http://healthpolicy.ucla.edu/publications/search/pages/detail.aspx?PubID=1661>

### Feeling "Helpless"

"Maria" is 62 years old and has been eligible for both Medicare and Medi-Cal since 2012. While it is unclear what kind of care (i.e., managed care or fee-for-service) she had prior to Cal MediConnect (CMC), Maria has received services through a publicly funded health plan for three years. Maria was born in Mexico and has been living in the U.S. for 37 years. She became eligible for disability benefits at the age of 58, when osteoporosis began to affect her hands. Maria struggles to make ends meet financially. She currently rents a room in a friend's home, and she has no relatives in the area. She takes care of her own daily needs and requires no special equipment or assistive devices. Maria relies on transportation services, which she now receives through her CMC health plan.

In addition to osteoporosis, Maria has diabetes and thyroid disease. She complains about her diabetes affecting her eyesight and making her more prone to anxiety. She also mentions that she needs a dentist but has not yet seen one because her current health plan has not given her information about how to access these services. Maria understands and speaks a little English but prefers communicating in Spanish. Language becomes a barrier when Maria has questions or concerns about her health care, making her feel helpless. Unlike many of the monolingual Spanish-speaking participants in the CHOICE study, Maria is not actively connected to additional information and resources offered by her health plan and other community-based organizations.

### Maria's Enrollment Decision

Maria first learned of the CMC program when she received notices in the mail from the state of California. At the time, she was satisfied with her health plan and decided that she wanted to stay with it, but she does not recall filling out the CMC form and mailing it back. Maria seemed to be unaware of the other CMC options available to her, and she may have either ig-

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nored or dismissed the notifications, not understanding that they required action.

Prior to the CMC enrollment period, Maria saw promotional ads on television for different health plans, but she did not consider them: "I pay attention to it [the advertisements] but I think, well, I already have mine [my health plan]." However, shortly after Maria received the CMC notices, a woman called and came

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to her home to offer her the CMC plan. She told Maria that Medi-Cal and Medicare were going to unite and that eventually everyone would have to be in CMC. Maria understood that she was *required* to enroll in a CMC plan, and she agreed to switch to the representative's plan when she learned that she would receive more benefits and save money. Making the switch was appealing to her, since keeping up with her day-to-day expenses had been a challenge. Maria also appreciated that she was going to be able to keep her trusted primary care provider, with whom she had built a good relationship over many years. In addition, Maria was told that she would receive more benefits -- specifically, enhanced transportation and dental services. Interestingly, when Maria notified her previous plan that she was going to switch, they told her that they had the same extra benefits. Apparently, because she had never asked for them, they had never been offered.

## How Maria Is Doing Now

Now that she is in a new CMC plan, Maria says that she pays for medications, something she did not have to do before. Although the cost of medications is low, these out-of-pocket expenses are negatively affecting her finances. Still, Maria refuses to take a step back, since she considers herself a person who keeps her word. In the course of the interview, she repeatedly stated that the switch was a decision that she had made, that no one had obligated her, and that she felt that she must honor what she had agreed to. At the same time, she blames herself for being in this situation, saying that she must have misinterpreted what the woman told her and referring to herself as "burra," or uneducated.

Maria receives information from her current health plan in the mail, but her go-to source of information is her primary care provider. She mentions two other people — she believes they are social workers associated with her health plan

who also help explain plan benefits and policies. However, she notes that it is very difficult to contact them. When she calls for information, she usually reaches either an automated voice system or people who answer in English. Although she understands and speaks

some English, she cannot fully express herself in English and prefers to talk with someone who speaks Spanish. For this reason, she turns to her trusted primary care provider when she has questions or concerns. She says, "It's just that... it's difficult communicating with him [social worker], like I was telling you, because I dial the number and everything is in English and they leave you on hold and I don't know English."

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When she decided to enroll in her current CMC health plan, Maria was told that her care would include dental benefits. However, she has not visited the dentist because the health plan has not given her information about where to obtain dental care. Still, she complains about needing dental care because her teeth are loose and falling out. She plans to call her social worker to ask for help. Maria also sees an optometrist every year who tells her that her eyesight is good and that she doesn't need glasses. However, she says that she has trouble reading. When she last asked for glasses, her optometrist suggested that she buy some nonprescription glasses at the dollar store. Although she followed his recommendation, she continues to struggle with reading.

In spite of these limitations, Maria states that her current health plan has been good to her. At the same time, she repeats that she was also very happy with her previous plan. Maria feels as though she "betrayed" her previous health plan by switching to another, since she had a good history with them and felt well treated. Overall, Maria appears to take little initiative regarding her health care, and she may experience additional barriers because of her limited English-speaking ability. She only became aware of other options because a CMC plan representative came to her home; ironically, it was through this visit that she learned about the extra benefits that were available through her previous plan, benefits that she never used.