MEDICAID Commonwealth Coordinated Care Plus



Things to know about your managed care

- Program Overview: Commonwealth Coordinated Care Plus (CCC Plus) is a Medicaid program that provides medical, behavioral, substance use disorder, and long term services and supports all under one program. Medicaid individuals who meet CCC Plus participation criteria are required to participate.
- Who is Covered? CCC Plus is for full Medicaid members who are either: 65 and older, children or adults with disabilities, nursing facility residents, someone receiving services through a home and community based waiver, or medically complex. If you receive long term services and supports through one of the Developmental Disability (DD) waivers, how you receive your DD waiver services will not change. However, you will receive your non-waiver services through CCC Plus. Non-waiver services include medical, behavioral, substance use disorder, pharmacy, and transportation to non-waiver services.
- Health Plan Choice: You can choose from the CCC Plus Medicaid health plans in your area. Medicare members have the option to choose a companion Dual Special Needs Plan (D-SNP) which is a type of Medicare Advantage Plan limited to people who qualify for both Medicare and Medicaid. These D-SNPs will coordinate services with your Medicaid CCC Plus Health Plan.
- Care Coordination: As a CCC Plus member, you will be assigned a Care Coordinator. The Care Coordinator will work with you and your providers to make sure you are receiving the services you need. If you are enrolled in Medicare, your Care Coordinator can assist you with coordinating your Medicare and Medicaid benefits.
- Your Health Care Team: You will be supported by a team of health care professionals and your Care Coordinator. This team may include your doctors, specialists, pharmacists, therapists, and anyone else you choose. By communicating with each other and with you, the team can help ensure your care needs are met.
- Additional Benefits: You may receive some additional benefits as a CCC Plus member, such as vision and hearing coverage. This will depend on the health plan you choose and the benefits provided by that health plan. A health plan comparison chart will be sent to you in the mail with your assignment letter. When you choose a health plan, you should carefully review the available benefits under that plan. Your Care Coordinator can help you understand and access your plan benefits.

- Must I Enroll in CCC Plus? Enrollment of all CCC Plus eligible Medicaid members into the CCC Plus program is required. If you meet certain eligibility criteria, the Program of All-Inclusive Care for the Elderly (PACE) may be another option for you. This program helps people with their health care needs in the community instead of a nursing home or other facility. You can find out more about the Virginia PACE program at https://www.dmas.virginia.gov/for-providers/long-term-care/programs-and-initiatives/program-of-all-inclusive-care/.
- How will I be Notified? You will receive an assignment letter in the mail with the name of the health plan that has been assigned to you. This letter will also include a health plan comparison chart and will explain your ability to choose a different health plan or keep the assigned health plan. If you want to choose a different health plan, you must do so within 90 days of your enrollment date by calling the CCC Plus Help Line at 1-844-374-9159 (TTY: 1-800-817-6608) or going online at www.cccplusva.com and requesting the change.
- Your Doctors and Providers: To find out if your doctor and other health care providers are in the network of your new health plan, you may call the CCC Plus Help Line at 1-844-374-9159 (TTY: 1-800-817-6608) or go to www.cccplusva.com. If your doctor or other providers do not participate in CCC Plus, you may continue to receive care from them for up to 30 days from the date of enrollment into your health plan. This will allow you time to transition to health care providers that do participate with your CCC Plus health plan.
- Changing Health Plans: You will have 90 days from your CCC Plus enrollment start date to change your health plan by calling 1-844-374-9159 (TTY: 1-800-817-6608). Once you are enrolled in the CCC Plus program, you will have an opportunity every year to change your health plan during the open enrollment period which will occur every year between October and December. Outside of this time period, you can only change your health plan in special cases with approval from Medicaid.





