



**The Affordable Care Act's  
Section 2703  
Health Home Option**

# The ACA Health Home Option

---

- 90% FMAP for care coordination provided in conjunction with a health home
- States determine which chronic condition(s) population to include
- Can be limited to certain acuity levels and by geography



# Population Selection

---

- Must have:
  - Two chronic conditions
  - One chronic condition and “at risk” for another
  - Only one chronic condition if it is a “Serious Mental Illness”
- May include the ACA Medicaid expansion population
- Must include Dual eligibles and 1915(c) populations that meet the State’s condition criteria
- The State may set acuity level eligibility requirements and geographic limits.





# Covered Services

---

- Care coordination services provided in conjunction with a Health Home = 90% FMAP
- Direct medical services, such as in-depth assessments and prevention services are not eligible for 90% FMAP.



# Assessment of Options

---

- Over the next few months DHCS will assess these options:
  - Conditions to be included and acuity level
  - Geographic area and systems of care: managed care, FFS, LIHPs
  - What applicable care coordination services are currently being provided vs. new services
  - Fiscal effects of implementation in near term for State General Fund.



# Timeline

---

- Within the next month DHCS will contact CMS:
  - Availability of planning grant funds
  - Submit clarifying questions about the option
- Over the next few months - conduct an assessment of options and fiscal effects
- No CMS time limit/due date for planning grant or program implementation
- 90% FMAP is available for eight quarters



# QUESTIONS

Email: [brian.hansen@dhcs.ca.gov](mailto:brian.hansen@dhcs.ca.gov)

