

**STATUS REPORT OF DHCS ACTIVITIES FOR IMPLEMENTING LEGISLATION
AND STATUS OF REGULATIONS
July 2015 Quarterly Report**

Italicized bold text indicates updated information since January 2015 Report

BILL #/ AUTHOR	Subject	Statutory language	Action Taken/Status of Regulations	Issue Date or Anticipated
<p>AB 82 (Comm on Budget, Ch. 23, Statutes of 2013)</p>	<p>Compassionate release and medical probation program</p>	<p>SEC. 3-5. These sections clarify the requirements that counties must follow to notify DHCS when an inmate is released for medical probation or under the compassionate release program. To the extent the released individual is Medi-Cal eligible, the county is required to pay the nonfederal share of the Medi-Cal costs for these individuals. These sections also specify that individuals released under the compassionate release or medical probation programs may be exempt from enrollment into managed care.</p> <p>SEC 3 – Government Code (GC) Section 26605.6 SEC 4 – GC Section 26605.7 SEC 5 – GC Section 26605.8</p> <p>GC Section 26605.6 (h) and GC Section 26605.7 (g) require DHCS to adopt regulations and submit an annual report to the Legislature until those regulations are adopted.</p>	<p>No interim instructions issued.</p> <p>Status of required regulations: Pending policy development.</p>	

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ABx1 1 (Perez Ch. 3, Statutes of 2013)	Medi-Cal Eligibility	<p>ABX1 1 implements a variety of the Affordable Care Act (ACA) provisions, including implementation of the new “adult group,” streamlining and simplification of the annual renewal and change in circumstance process, and implementation of the MAGI income methodology for selected individuals, including the newly eligible population. ABX1 1 also requires DHCS to seek any necessary federal approvals for services and activities subject to federal financial participation (FFP).</p> <p>The following sections provide authority for all-county letters, plan letters, plan or provider bulletins, or similar instructions until the time regulations are adopted. Thereafter, DHCS is required to adopt regulations, and beginning six months after the effective date of the section, DHCS is required to provide a status report to the Legislature on a semiannual basis until regulations have been adopted.</p> <p><i>SEC 5 – W&I Code Section 14005.36 (e)</i> SEC 9 – W&I Section 14005.60 (d) SEC 11 – W&I Code Section 14005.64 (f) SEC 15 – W&I Code Section 14013.3 (g) SEC 16 – W&I Code Section 14015.5 (e) SEC 17 – W&I Code Section 14015.7 (d) SEC 24 – W&I Code Section 14102.5 (d)</p>	<p>Issued All County & Welfare Directors Letters (ACWDLs)*: 14-01 14-03 14-03E 14-05 14-11 14-15 14-16 14-18 14-21 14-27 14-29 14-29E 14-32 14-33 14-35 14-38</p> <p>Issued Medi-Cal Eligibility Division Information Letters (MEDILs)**: 14-06 14-08 14-09 14-10 14-11</p>	<p>Dates: 1-9-14 2-10-14 3-4-14 2-20-14 3-19-14 3-28-14 4-1-14 4-8-14 4-25-14 6-16-14 8-8-14 8-21-14 9-19-14 9-19-14 9-29-14 10-23-14</p> <p>1-17-14 1-21-14 1-23-14 1-24-14 1-31-14</p>

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			14-13	2-7-14
			14-14	2-18-14
			14-16	2-26-14
			14-17	3-3-14
			14-18	3-6-14
			14-19	3-17-14
			14-20	3-18-14
			14-21	3-25-14
			14-23	4-24-14
			14-25	5-7-14
			14-26	5-7-14
			14-27	5-15-14
			14-29	5-16-14
			14-30	5-22-14
			14-31	6-4-14
			14-33	6-12-14
			14-33E	6-28-14
			14-36	7-8-14
			14-41	7-21-14
			14-42	7-25-14
			14-44	8-1-14
			14-45	8-6-14
			14-54	11-5-14
			14-55	11-14-14
			14-55E	11-18-14
			14-56	11-21-14
			14-58	11-26-14

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			<p>Status of required regulations: <i>Section 5: Public comment period is closed. Regulation package submitted to Office of Administrative Law for review.</i></p> <p>Remaining regulations under development.</p>	6-15-15

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SB 28 (Steinberg & Hernandez, Ch. 442, Statutes of 2013)	Medi-Cal Eligibility	<p>SB 28 requires the Managed Risk Medical Insurance Board (MRMIB) to provide California's Health Insurance Exchange (Covered California) with contact information for MRMIB subscribers, so Covered California can provide outreach to these individuals regarding their potential eligibility for Covered California products or the Medi-Cal program. SB 28 also includes cleanup language to SB x1 1 and Assembly Bill (AB) x1 1, including provisions to: 1) permit DHCS to implement various provisions of the Affordable Care Act (ACA) using ACWDL until regulations are developed no later than July 1, 2017; and 2) development and implementing a new budgeting methodology no sooner than the 2015-16 fiscal year for Medi-Cal county administrative costs for conducting Medi-Cal eligibility determinations and case maintenance activities.</p> <p>The following sections provide authority for all-county letters, plan letters, plan or provider bulletins, or similar instructions until the time regulations are adopted. Thereafter, DHCS is required to adopt regulations by July 1, 2017, and beginning six months after the effective date of the section, DHCS is required to provide a status report to the Legislature on a semi-annual basis until regulation have been adopted.</p>	<p>Issued ACWDLs*: 14-14 14-22 14-27 14-28 14-31 14-35</p> <p>Status of required regulations: Under development.</p>	<p>Dates: 3-27-14 4-25-14 6-16-14 7-7-14 9-11-14 9-29-14</p>

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		SEC 3 – W&I Code Section 14005.28 (b) SEC 4 – W&I Code Section 14005.30 (f) SEC 6 - W&I Code Section 14005.37 (v) SEC 7 – W&I Code Section 14005.39 (c) SEC 9 – W&I Code Section 14011.66 (f) SEC 10 – W&I Code Section 14015.8 (b) SEC 12 - W&I Code Section 14102 (f) SEC 13 – W&I Code Section 14132.02 (e) SEC 14 – W&I Code Section 14154 (a)(6)(G)		

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SBx1 1 (Hernandez, Ch. 4, Statutes of 2013)	Medi-Cal Eligibility	<p>SBx1 1 is a companion bill to ABx1 1 and implements various provisions of the ACA, including the provision of essential health benefits for newly eligible populations, coverage of former foster care youth, and streamlined eligibility and enrollment processes to facilitate enrollment of low-income individuals into insurance affordability programs, specifically the Medi-Cal program. It includes the use of presumptive eligibility (PE) by hospitals. The bill specifies the benefit package for the newly eligible population under Medi-Cal for newly eligible populations as well as existing Medi-Cal beneficiaries. It also requires DHCS to seek any necessary federal approvals for services and activities subject to FFP.</p> <p>The following sections provide authority for all-county letters, plan letters, plan or provider bulletins, or similar instructions until the time regulations are adopted. Thereafter, DHCS is required to adopt regulations, and beginning six months after the effective date of the section, DHCS is required to provide a status report to the Legislature on a semiannual basis until regulations have been adopted.</p> <p>SEC 3 – W&I Code Section 14000.7 SEC 7 – W&I Code Section 14005.31 (d) SEC 9 – W&I Code Section 14005.32 (d)</p>	<p>Issued ACWDLs*: 14-06 14-06E 14-14 14-24 14-41</p> <p>MEDILs* 14-02 14-04 14-05 14-18 14-32 14-43 14-48 14-57</p> <p>Status of required regulations: Sections 3 and 11: Regulation package currently under development.</p> <p>Sections 17, 18 and 20: Regulation package currently under review.</p>	<p>2-21-14 5-7-14 3-27-14 5-6-14 12-4-14</p> <p>1-9-14 1-15-14 1-17-14 3-6-14 6-11-14 7-30-14 10-1-14 11-26-14</p>

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		<p><i>SEC 11 – W&I Code Section 14005.63</i> SEC 17 – W&I Code Section 14007.1 SEC 18 – W&I Code Section 14007.15 SEC 20 – W&I Code Section 14007.6</p>	Remaining regulations under development.	
AB 617 (Nazarian, Ch. 869, Statutes of 2014)	California Health Benefit Exchange: appeals.	<p><i>SEC 7 – W&I Code Section 10950</i></p> <ul style="list-style-type: none"> • DHCS, Covered California and DSS shall implement a process to receive state fair hearing requests for health subsidy programs in electronic form and provides for communication with applicants/beneficiaries through commonly available electronic means. • DHCS is to provide a semi-annual status report to the Legislature starting July 1, 2015, until regulations are adopted. • DHCS shall adopt regulations by July 1, 2017. 	No interim instructions issued. Status of required regulations: Under development.	

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	Pregnancy Wrap	<p>Program for Low Income Women, contingent on federal approval and availability of FFP; work with specified stakeholders to develop notices and procedures to inform eligible women and providers of the program; and other provisions. Subdivision (g) requires that DHCS:</p> <ul style="list-style-type: none"> • Issue all county, all plan letter or provider bulletin to implement until regulations are adopted. • Adopt regulations by July 1, 2017. • Six months following effective date of the section (i.e., 12/20/14) report to Legislature on semiannual basis until regulations have been adopted. <p>SEC. 55 - WIC Section 14148.67 specifies requirements for paying premiums and cost-sharing payments for qualified pregnant women. Subdivision (f) requires DHCS to:</p> <ul style="list-style-type: none"> • Issue all county, all plan letter or provider bulletin to implement until regulations are adopted. • Adopt regulations by July 1, 2017. • Six months following effective date of Section (i.e., 12/20/14) provide a status report to Legislature on semiannual basis until regulations have been adopted. 	<p>paying premiums for cost-sharing for pregnant women are under review pending federal guidance.</p> <p><i>Activities to implement the Pregnancy Wrap on hold pending CMS guidance on the designation of pregnancy-only Medi-Cal as minimum essential coverage (MEC). If pregnancy-only Medi-Cal is MEC, DHCS will not implement the Pregnancy Wrap.</i></p> <p>Status of required regulations: Pending policy development <i>and CMS guidance.</i></p>	Date: 7-30-14

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SB 870 (Committee on Budget and Fiscal Review, Ch. 40, Statutes of 2014)	Pharmacy Rebates	SEC. 5 - WIC Section 14105.33 allows DHCS to collect State Supplemental rebates, for high cost prescription drugs, based on drug utilization data from all Medi-Cal managed care plans (MCPs). For prescription drugs subject to the new provisions, the MCPs would be reimbursed by a separate capitation or supplemental payment and the treatment and utilization coverage policies would be developed, in consultation with specified stakeholders, that apply to the entire Medi-Cal program, including FFS and MCPs. Subdivision (b)(7) requires DHCS to implement the new provisions through provider bulletins, all plan letters or similar instructions until regulations are adopted no later than October 1, 2017. Beginning six months after the effective date of the provision (12/20/14), DHCS shall provide a status report to the Legislature on a semiannual basis until regulations have been adopted.	No interim instructions issued. Status of required regulations: Pending policy development & <i>CMS approval of SPA #14-034 with 10/1/14 effective date.</i> <i>DHCS submitted SPA #14-034 and is pending CMS approval.</i>	12/1/14
	Treatment for Autism Spectrum Disorder	SEC. 8 - WIC Section 14132.56 requires DHCS to cover behavioral health treatment (BHT) for Medi-Cal for individuals under 21 years of age. DHCS would be required to implement or continue to implement BHT services, only if: 1) it receives federal approval to obtain FFP, 2) it seeks an appropriation of state funding required for the fiscal year, and 3) it consults with stakeholders.	All Plan Letter (APL) # 14-011 issued to provide guidance on behavioral health treatment services. DHCS submitted SPA #14-026 and is	9/15/14 9/30/14

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		<p>Under specified conditions:</p> <ul style="list-style-type: none"> • Permits DHCS to implement, interpret or make specific this section through all-county letters, plan letters, or provider bulletins until regulations are adopted. • Adopt regulations by July 1, 2017. • Beginning six months after the effective date of this section (12/20/14), provide semiannual status reports to the Legislature until regulations have been adopted. • Permits DHCS to seek federal approval of any necessary SPAs or waivers to implement the section. DHCS shall make any SPAs or waiver request public at least 30 days prior to submission to CMS and will work with stakeholders to address the public comments in the SPA or waiver request. 	<p>pending CMS approval.</p> <p>Status of required regulations: DHCS will develop regulations upon SPA approval.</p>	

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