



TOBY DOUGLAS
Director

State of California—Health and Human Services Agency
Department of Health Care Services



EDMUND G. BROWN JR.
Governor

DATE: OCTOBER 30, 2013

ALL PLAN LETTER 13-015
(REVISED)

TO: ALL MEDI-CAL MANAGED CARE HEALTH PLANS

SUBJECT: MARKETING REQUIREMENTS FOR MEDI-CAL AND COVERED CALIFORNIA

PURPOSE:

The purpose of this All Plan Letter (APL) is to clarify and remind Medi-Cal managed care health plans (MCPs) about marketing requirements, should MCPs seek to perform outreach activities to individuals who may be eligible for Covered California (Covered CA) or Medi-Cal.

BACKGROUND:

Assembly Bill (AB) X1 1 (Chapter 3, Statutes of 2013) and Senate Bill (SB) X1 1 (Chapter 4, Statutes of 2014) expand Medi-Cal eligibility to populations who were previously unable to access health care benefits. Pursuant to the Patient Protection and Affordable Care Act, California opted to develop a health insurance marketplace, known as Covered CA. For individuals who do not have insurance through their employer and who are still ineligible for Medi-Cal, despite the expansion, Covered CA offers affordable and accessible health care coverage.

AB 1494 (Chapter 28, Statutes of 2012), as amended by AB 1468 (Chapter 438, Statutes of 2012), provides for the transition of children enrolled in the Healthy Families Program (HFP) to Medi-Cal. The Department of Health Care Services (DHCS) intends to complete the transition by the end of 2013. Although the HFP children are eligible for Medi-Cal, the parents, guardians, and/or caretakers of these children may be uninsured, have previously been ineligible for Medi-Cal, or may now be able to obtain subsidized insurance through Covered CA.

The multiple options for obtaining health care, combined with the new populations that are now able to access health care coverage, provide MCPs with the opportunity to market their services to these populations.

REQUIREMENTS:

Medi-Cal Marketing Activities:

If a MCP's marketing materials *promote the Medi-Cal Program, use the Medi-Cal logo, or are being used to market to current or potential Medi-Cal beneficiaries*, the MCP is required to adhere to the marketing requirements contained in its' respective DHCS health plan contract and act in accordance with the marketing requirements contained in Title 22 California Code of Regulations (CCR) 53880 and 53881 and Welfare and Institutions Code Sections 10850(b), 14407.1, 14408, 14409, 14410, and 14411. MCPs are required to submit these marketing materials in advance to DHCS for review and approval.

Some of the marketing requirements for MCPs and/or the marketing contractor include, but are not limited to:

- MCPs are prohibited from conducting door-to-door, cold call, and telephone marketing activities for the purposes of enrolling current or potential Medi-Cal beneficiaries.
- MCPs are prohibited from misrepresenting the MCP, the plans it represents, the Medi-Cal program, or the HFP.
- When a MCP intends to conduct activities outside of its' DHCS approved marketing plan, the MCP must submit a request to include the activity and obtain written, prior approval from DHCS. The MCP must submit the written request within 30 calendar days prior to the marketing event, unless DHCS agrees to a shorter time period.
- All marketing materials, including printed materials, need to be approved in writing by DHCS prior to distribution.
- The MCP shall not seek to influence enrollment in conjunction with the sale or offering of any private insurance.
- All marketing materials, presentations, and displays need to conform to the cultural and linguistic requirements prescribed in the MCP's health plan contract.

All marketing materials that require DHCS review and approval should be forwarded to the MCP's Medi-Cal Managed Care Division contract manager. *If MCPs are uncertain if their marketing materials' reference to Medi-Cal would or would not require DHCS approval, DHCS requests that the MCP forward the marketing materials to the Medi-Cal Managed Care Division (MMCD) contract manager as a precautionary measure.*

Covered CA Marketing Activities:

If a MCP's marketing materials only reference Covered CA, or are being used to market to potential or current Covered CA enrollees, no DHCS review or approval is required. Although DHCS review and approval are not required, DHCS encourages MCPs to review and adhere to Covered CA marketing guidelines.

For clarification, an example of language that references Medi-Cal, but would not require DHCS review and approval is: "Your child(ren) already has Medi-Cal health care coverage through <company name> and now you too can have affordable health care coverage through <company name> Covered California plans."

Some examples of the various marketing requirements and guidelines for Covered CA are:

- Qualified Health Plan (QHP) Issuers contracting with Covered CA to offer individual and family plans and/or small business plans through Covered CA must adhere to the Covered CA marketing guidelines for QHP Issuers. A full description of these marketing guidelines can be found at:
<http://www.healthexchange.ca.gov/BoardMeetings/Documents/September%2019,%202013/QHP%20Issuer%20Marketing%20Guidelines.pdf>.
- Health plans contracting with Covered CA to administer its Certified Plan-Based Enrollment Program must adhere to the Plan-Based Enrollment Program guidelines and the requirements contained in CCR, Title 10, Chapter 12, Article 9, Sections 6700 et seq.
 - A full description of the Plan-Based Enrollment Program guidelines can be found at:
<http://www.healthexchange.ca.gov/BoardMeetings/Documents/August%2022,%202013/Plan-Based%20Enrollment%20Regulations%20-DRAFT.pdf>
- The California Health Benefit Exchange CCRs can be found at:
<http://government.westlaw.com/linkedslice/default.asp?SP=CCR-1000&SPC=Timeout>

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If you have any questions regarding this APL, please contact your MMCD contract manager.

Sincerely,

Original Signed by Margaret Tatar

Margaret Tatar, Assistant Deputy Director
Health Care Delivery Systems