

Criteria for Health Care Coverage Initiative (HCCI) Program Participation

Current Program Request for Application

Program Participation Criteria

- Must be a governmental entity that is a county, a city and county, a consortium of counties serving a region consisting of more than one county, or a health authority.
- Must certify local expenditures reflecting the local total-funds expenditure for medical services provided.
- Must utilize an appropriate source of local funds for its total-funds expenditures. The source of funds must not include other federal funds (federal funds received as revenue for providing patient care services are exempted from the limitation on the use of federal funds) or impermissible provider taxes or donations, as defined under section 1903(w) of the Social Security Act, and applicable federal regulations.
- Must ensure that its annual HCCI program allocation supplements, and would not supplant, any county, city and county, health authority, state, or federal funds that would otherwise be spent on health care services in that county, city and county, consortium of counties serving a region, or health authority.
- Must comply with the requirements of section 6036 of the federal Deficit Reduction Act of 2005 entitled, "Improved Enforcement of Documentation Requirements".
- Must currently provide care to Medi-Cal beneficiaries and must coordinate HCCI program care with services provided to Medi-Cal beneficiaries.

HCCI Program Requirements

- Enrollment processes, with an identification system to demonstrate enrollment of the uninsured into the system.
- Use of a medical record system, which may include medical records.

- Designation of a medical home, where a single provider or facility maintains all of the individual's medical information, and assignment of eligible individuals to a primary care provider, from which the individual can access primary and preventive care.
- Provision of a benefit package of services, including preventive and primary care services, and care and case management services designed to treat individuals with chronic health care conditions, mental illness, or who have high costs associated with their medical conditions, to improve their health and decrease future costs.
- Quality monitoring processes to assess the health care outcomes of individuals enrolled in the health care coverage program.
- Promotion of the use of preventive services and early intervention.
- Screening and enrollment processes for individuals who may qualify for enrollment into the Medi-Cal Program, the Healthy Families Program, and the Access for Infants and Mothers Program prior to enrollment into the HCCI program.
- Demonstrate how the HCCI program will promote the viability of the existing safety net health care system.
- Documentation to support the ability to implement the HCCI program in an expeditious manner in order to fully utilize the annual program allocation.
- Demonstrate how the HCCI program will provide consumer assistance to individuals applying to, participating in, or accessing services to the program.
- Expand the number of Californians who have health care coverage.
- Strengthen and build upon the local health care safety net system, including disproportionate share hospitals, county clinics, and community clinics.
- Improve access to high quality health care and health outcomes for individuals.
- Create efficiencies in the delivery of health care services that could lead to savings in health care costs.
- Provide grounds for long-term sustainability of the HCCI program.

Additional Program Participation Criteria for Consideration in the Comprehensive Waiver

Existing HCCI Programs

- Continue funding for those existing HCCI programs that are demonstrating the potential to meet the evaluation criteria as determined in the interim program evaluation.
- Demonstrate that the existing HCCI program will adjust within the next five-year waiver period, to the standards of care for Medi-Cal beneficiaries established by DHCS for adults with behavioral health needs, seniors, and persons with disabilities (SPDs).

Existing HCCI Programs and Expansion Counties/Cities/County Consortium

- Demonstrate the ability, capacity, and commitment to provide specific program data timely and continuously during the five-year program period for evaluation of the progress made in meeting specified performance measures.
- Demonstrate the financial ability to support the HCCI program with 100 percent local funds to be used as the non-federal share for securing federal reimbursement for the program at the approved Federal Medical Assistance Percentage rate.