



Department of Health Care Services



Full-Scope Medi-Cal Coverage and Affordability and Benefit Program for Low-Income Pregnant Women and Newly Qualified Immigrants (NQIs)

Stakeholder Meeting
Friday, July 25, 2014
3:30 pm – 5:00 p.m.
1500 Capitol Avenue
Training Rooms A & B



Today's Agenda

3:30 p.m. - 5:00 p.m.



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- ***Welcome***
 - ***Program Overview***
 - ***Overview of Process and Procedures for Information Notices and Exercise of Options***
 - ***Next Steps***
 - ***Questions and Responses***
 - ***Stakeholder Meeting Schedule***
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Welcome



- ***Mari Cantwell, Chief Deputy Director, Health Care Programs***
- ***René Mollow, MSN, RN, Deputy Director, Health Care Benefits & Eligibility***
- ***Laurie Weaver, Chief, Benefits Division***
- ***Today's attendees include legislative, CHHS, DHCS, and CDPH staff, representatives from Covered California, qualified health plans, consumer advocates, Medi-Cal providers, county maternal, child and adolescent health directors, and county CPSP coordinators.***

Program Overview ^{1/6}



- ***Background:***

- ❖ Pregnant women with incomes up to 208% of the Federal Poverty Level (FPL) and no other health coverage are eligible for Medi-Cal.
- ❖ DHCS currently provides Medi-Cal full-scope benefits to any NQI who is 21 years of age or older, eligible for Medi-Cal under the five-year eligibility limitation. These services are 100% state-funded, except that DHCS is eligible to receive federal financial participation for emergency services provided to NQIs.
- ❖ DHCS currently provides full-scope Medi-Cal benefits to NQI individuals under 21 and pregnant women who meet applicable eligibility requirements pursuant to 1903(v)(4) and 2107(e)(l)(J) of the Social Security Act (SSA). These services are 50% state-funded, 50% federally funded.

Program Overview 2/6



- ***Background:***

- ❖ DHCS currently provides full-scope Medi-Cal benefits to qualified low-income pregnant women who meet applicable eligibility requirements pursuant to 1902(a)(10)(A)(i)(III) of the SSA. Income eligibility for pregnant women under this coverage group is approximately 60% of the FPL.
- ❖ DHCS currently provides pregnancy related coverage (limited-scope) to pregnant women with incomes above 60% of the FPL, up to 208% of FPL pursuant to 1902(a)(10)(A)(i)(IV) of the SSA (pregnancy-only program). Individuals are provided with prenatal and 60-days postpartum services, medically necessary services related to their pregnancy, and any condition(s) that may complicate their pregnancy.

Program Overview ^{3/6}



- ***Affordability and Benefit Program:***

- ❖ The following beneficiaries will be eligible for full-scope Medi-Cal coverage:
 - Pregnant women with incomes between 0 percent and 138 percent of the FPL.
 - Pregnant women with incomes above 138 percent and up to 213 percent of the FPL will be able to choose to receive premium and out-of-pocket payment assistance and access additional Medi-Cal services to the extent services are not covered in the Exchange QHP. Such services may include, but are not limited to:
 - Family planning services,
 - Comprehensive Perinatal Services Program services,
 - Certified nurse-midwife services, and
 - Alternative and freestanding birth center services
 - NQIs under the five-year bar, 21 to 64 years of age, who would otherwise be eligible for Medi-Cal benefits under the new adult group under W & I Code Section 14005.60 if not for the five-year bar will enroll in a QHP and be eligible to receive premium and out-of-pocket payment assistance.



- ***Affordability and Benefit Program:***

- ❖ Pregnant women will have the option to enroll or remain enrolled in Medi-Cal for pregnancy-related and postpartum services without enrolling or remaining enrolled in an Exchange QHP, or remain enrolled in an Exchange QHP without enrolling or remaining enrolled in Medi-Cal for pregnancy-related and postpartum services.
- ❖ Medi-Cal providers, Exchange QHPs, and QHP providers are prohibited from charging, billing, requesting, or requiring the women or NQIs to pay any of the costs or charges for any services covered by the Exchange QHP, or any premiums or cost sharing during their pregnancy and postpartum coverage or eligibility in the Affordability and Benefit Program.
- ❖ If a beneficiary makes any premium or cost sharing payments, DHCS will promptly reimburse the beneficiary. Further, Medi-Cal providers cannot refuse to provide Medi-Cal covered services that are not covered in the Exchange QHP.
- ❖ The Affordability and Benefit Program will be available after the DHCS Director determines in writing that the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) has been programmed for implementation, but no sooner than January 1, 2015.

Program Overview ^{5/6}



- ***Overarching Goals:***

- ❖ Pregnant women eligible under the new income standard (0 to 138% FPL) will receive full-scope services through the Medi-Cal managed care delivery system.
- ❖ Improve health coverage for pregnant women and aid in the prevention of premature delivery and low birth weights, and promote women's overall health, well-being and financial security.
- ❖ Ensure compliance with the [IRS Final Rule](#), 26 CFR Parts 1 and 602, the requirement for individuals to remain MEC enacted by the ACA.
- ❖ Improve NQI access to benefits for which he or she would have been eligible but for the five-year eligibility limitation and
- ❖ Ensure the beneficiary has the same expenses he or she would have in the Medi-Cal program.



- ***Authority:***

- **❖ State Authority**

- Senate Bill 857, Chapter 31, Statutes of 2014
- Senate Bill x 1-1, Chapter 4, Statutes of 2013

- **❖ Federal Authority**

- Social Security Act (SSA) §1902(a)(10)(A)(i)(III) and SSA §1902(a)(10)(A)(i)(IV)



Overview of Process and Procedures for Information Notices and Exercise of Options 1/3



- ***Noticing Requirements per W & I Code***
§14148.65(c)(1), §14148.67(d)(1), §14148.65(c)(2)
 - ❖ Requires **DHCS to consult** with the Exchange, QHPs, insurers and stakeholders **on the processes and procedures to inform:**
 - Women of all enrollment options under Medi-Cal and the Exchange at the time of application, renewal, or when a woman attests to pregnancy.
 - Adult NQIs of all enrollment options the Exchange and the benefits and services under W & I Code §14102.
 - Pregnant women of their option to remain enrolled in the Exchange and receive pregnancy-related services not covered by the QHP, or to remain in Medi-Cal and not the Exchange at the time of applying to Medi-Cal or the Exchange during the open enrollment.



Overview of Process and Procedures for Information Notices and Exercise of Options 2/3



- ***Noticing Requirements per W & I Code §14148.65(c)(4), §14148.65(c)(5), §14148.65(c)(6) and §14148.67(d)(2)***
 - ❖ **Requires DHCS to consult with the Exchange, QHPs, insurers and stakeholders on standardized notices and procedures to inform:**
 - Applicants and affected individuals when applying for or enrolled in the Exchange of their option and the process to enroll or remain enrolled in the Exchange and receive Medi-Cal pregnancy related and postpartum coverage or to remain in Medi-Cal and not enroll in the Exchange.
 - Beneficiaries receiving program services that infants born to pregnant women receiving Medi-Cal coverage are automatically eligible for Medi-Cal throughout their first year of life and the process to enroll the newborn in Medi-Cal.
 - Providers of the program for women enrolled in the Exchange that they must comply with the state and federal laws for Medi-Cal pregnancy coverage for women who decide to remain in the Exchange.
 - Providers of the program for NQIs that providers must comply with the state laws applicable to coverage for NQIs.



Overview of Process and Procedures for Information Notices and Exercise of Options 3/3



- ***Noticing Requirements per W & I Code §14148.65 and §14148.67***
 - ❖ All notices shall be accessible to persons who have limited English language proficiency and persons with disabilities consistent with all federal and state requirements.
- ***Noticing Requirements per W & I Code §14148.65(g) and §14148.67(f)***
 - ❖ DHCS may implement, interpret, or make specific by means of all-county letters, plan letters, provider bulletins, or similar instruments,
 - ❖ Adopt regulations by July 1, 2017,
 - ❖ Provide a status report to the Legislature six months after June 20, 2014.

Next Steps ^{1/3}



- ❖ DHCS and Covered California will consult with stakeholders regarding the process and procedures and standardized notices and procedures to inform applicants and enrollees of their options under Medi-Cal and the Exchange and will review and consider all recommendations provided.
- ❖ DHCS and Covered California will inform at the time of application, renewal and when an enrollee informs Medi-Cal or the Exchange that she is pregnant via CalHEERS and county eligibility workers.
- ❖ The CalHEERS application system will be updated to include text or screen shot messages of the process to “opt in” or “opt out” of the new benefit. Information will be provided during the application, renewal, or when an enrollee informs Medi-Cal or the Exchange that she is pregnant.
- ❖ DHCS and Covered California will provide information and training to county eligibility workers and eligibility assisters on the functionality of the Affordability and Benefit Program, how to educate individuals about the new program and how to enroll.
- ❖ DHCS and Covered California will post onto their websites enrollment information on the Affordability and Benefit Program and the options individuals have for enrollment into Medi-Cal the Exchange or both.

Next Steps ^{2/3}



- ❖ Informational notices may include but are not limited to the CalHEERS application, Telephone Service Center scripts, Notices of Action, and DHCS and Covered California websites.
- ❖ Examples of materials that will be used to inform applicants regarding the Affordability and Benefit Program are available on the [DHCS website](#).
- ❖ Stakeholders involved in the Full-Scope Medi-Cal Coverage and Affordability and Benefit Program for Low-Income Pregnant Women and Newly Qualified Immigrants are encouraged to review these materials and provide recommendations to DHCS by August 15, 2014.
- ❖ Please email your recommendations to DHCS at AffordabilityandBenefitProgram@dhcs.ca.gov. Please be sure to include the name of the material that you are referencing when providing specific recommendations.
- ❖ Topics for upcoming stakeholder meetings include:
 - ❖ Review of Standardized Notices and Procedures to Inform
 - ❖ Process & Procedures for Other Health Coverage and the Right to Access Medi-Cal Services
 - ❖ Review of Medi-Cal/Denti-Ca Provider Notices
 - ❖ Review of Monitoring and Data
 - ❖ Program Implementation Status and Legislative Report



Next Steps ^{3/3}



If you have questions or would like to provide recommendations related to the processes and procedures or standardized notices, contact DHCS at:

Email Address:

AffordabilityandBenefitProgram@dhcs.ca.gov

Questions and Responses



Stakeholder Meeting Schedule



<p>August 22, 2014 3:30 p.m. – 5:00 p.m. Department of Health Care Services</p>	<p>November 21, 2014 3:30 p.m. – 5:00 p.m. Department of Health Care Services</p>
<p>September 26, 2014 10:30 a.m. – 12:00 p.m. Department of Health Care Services</p>	<p>December 12, 2014 3:30 p.m. – 5:00 p.m. Department of Health Care Services</p>
<p>October 24, 2014 3:30 p.m. – 5:00 p.m. Department of Health Care Services</p>	<p>January 2015 Date and Time TBD</p>