



# 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, September 26, 2014  
10:30 a.m. – 12:00 p.m.  
1500 Capitol Avenue  
Training Rooms A & B

---



# Today's Agenda

10:30 a.m. – 12:00 p.m.



- *Welcome*
- *Introductions*
- *Update on Stakeholder Comments & Recommendations*
- *Update on Federal Approvals of SPA and 1115 Waiver Amendment*
- *Other Health Coverage (OHC) Overview*
- *Timeline*
- *Next Steps*
- *Questions and Responses*



# Welcome



- 
- ***Rene Mollow, MSN, RN, Deputy Director, Health Care Benefits & Eligibility***
  - ***Laurie Weaver, Chief, Benefits Division***
  - ***Jeff Blackmon, Chief, Third Party Liability Division***
  - ***Bob Bonkowski, Chief, Other Coverage Branch***
-



# Today's Presentation



- ***DHCS Updates***
- ***Other Health Coverage***
  - ***Welfare & Institutions Code Section 14148.65(c)(3)***

“The department shall consult with the Exchange, Exchange contracting health care service plans and health insurers, and stakeholders, including consumer advocates, Medi-Cal providers, counties, the State Department of Public Health, county maternal, child, and adolescent health directors, and county CPSP coordinators, in the development and implementation of all of the following:

(3) The process for implementing other health coverage policy and the right to access Medi-Cal providers' services through the Medi-Cal program that are not contracting with the Exchange qualified health plan, including, but not limited to, family planning services, services provided by CPSP Medi-Cal providers, perinatal specialists, certified nurse-midwife services, and alternative and freestanding birth center services, to the extent those services are not available through the beneficiary's Exchange qualified health plan, except when state or federal law requires the right to access the service without regard to its availability through the beneficiary's Exchange qualified health plan.”

# Updates on Stakeholder Comments and Recommendations



- ***Status of Revisions to Notices and Informing Materials***
  - ***No comments on materials for pregnant women***
  - ***Comments on materials for NQIs received Monday, September 22<sup>nd</sup>***
    - ***Comments under Review***
    - ***Updates to NQI materials before our next meeting***



# Activity Update Status of Federal Approvals



## State Plan Amendment 14-021

- Full-scope Medi-Cal coverage for individuals with income less than or equal to 109% of the Federal Poverty Level (FPL)
- Submitted to CMS on September 12, 2014
- Anticipated approval on or before January 1, 2015

## 1115 Waiver Amendment

- Full-scope Medi-Cal coverage for individuals with income over 109% of and including 138% of, the FPL
- Submitted to CMS on September 3, 2014
- Anticipated approval on or before January 1, 2015



# OHC Premium Payments for Pregnant Women and NQIs



- ***Authority***
  - ***Welfare and Institutions Code Section 14148.65(b)(1)***
- ***Methodology***
  - ***DHCS will use existing premium payment processes***



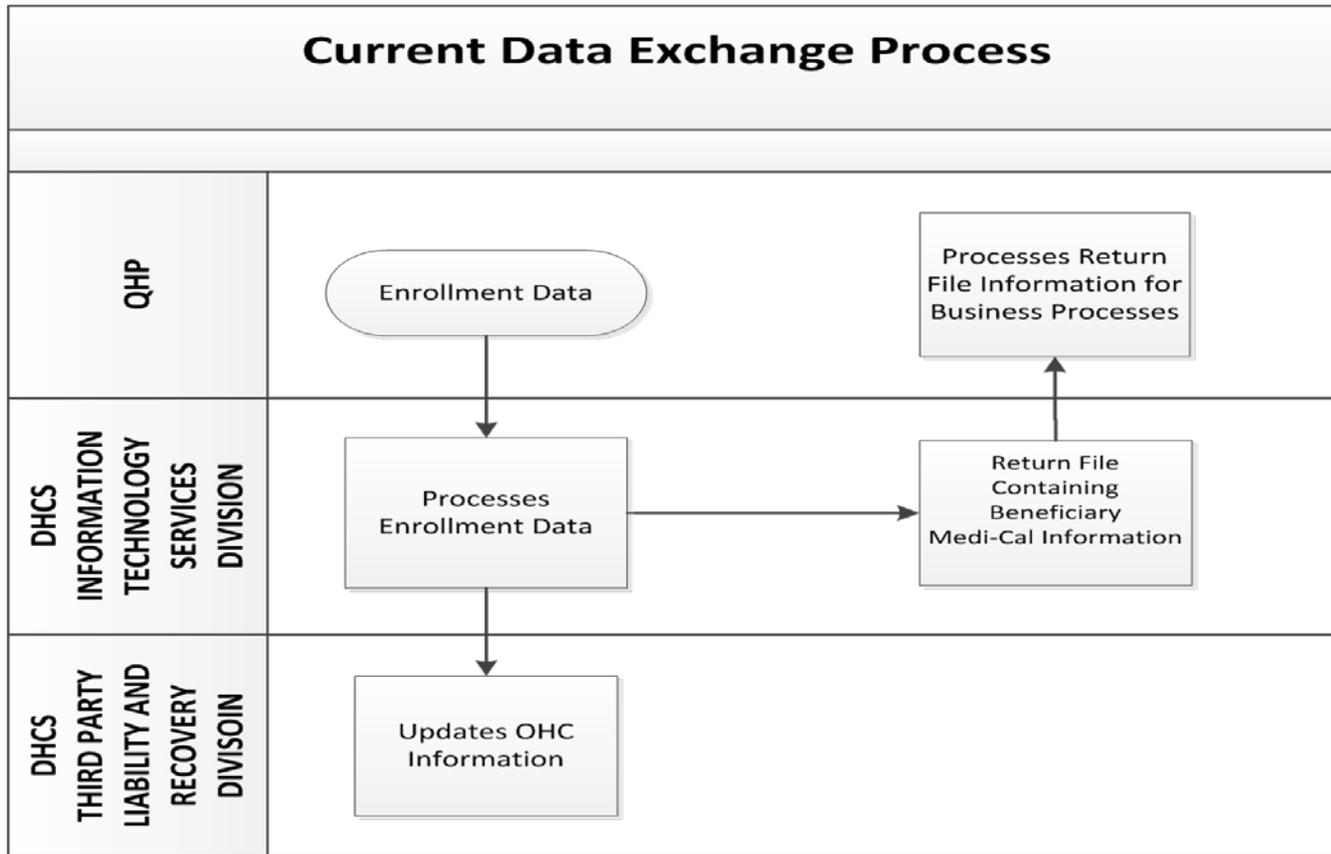
# Existing Qualified Health Plans



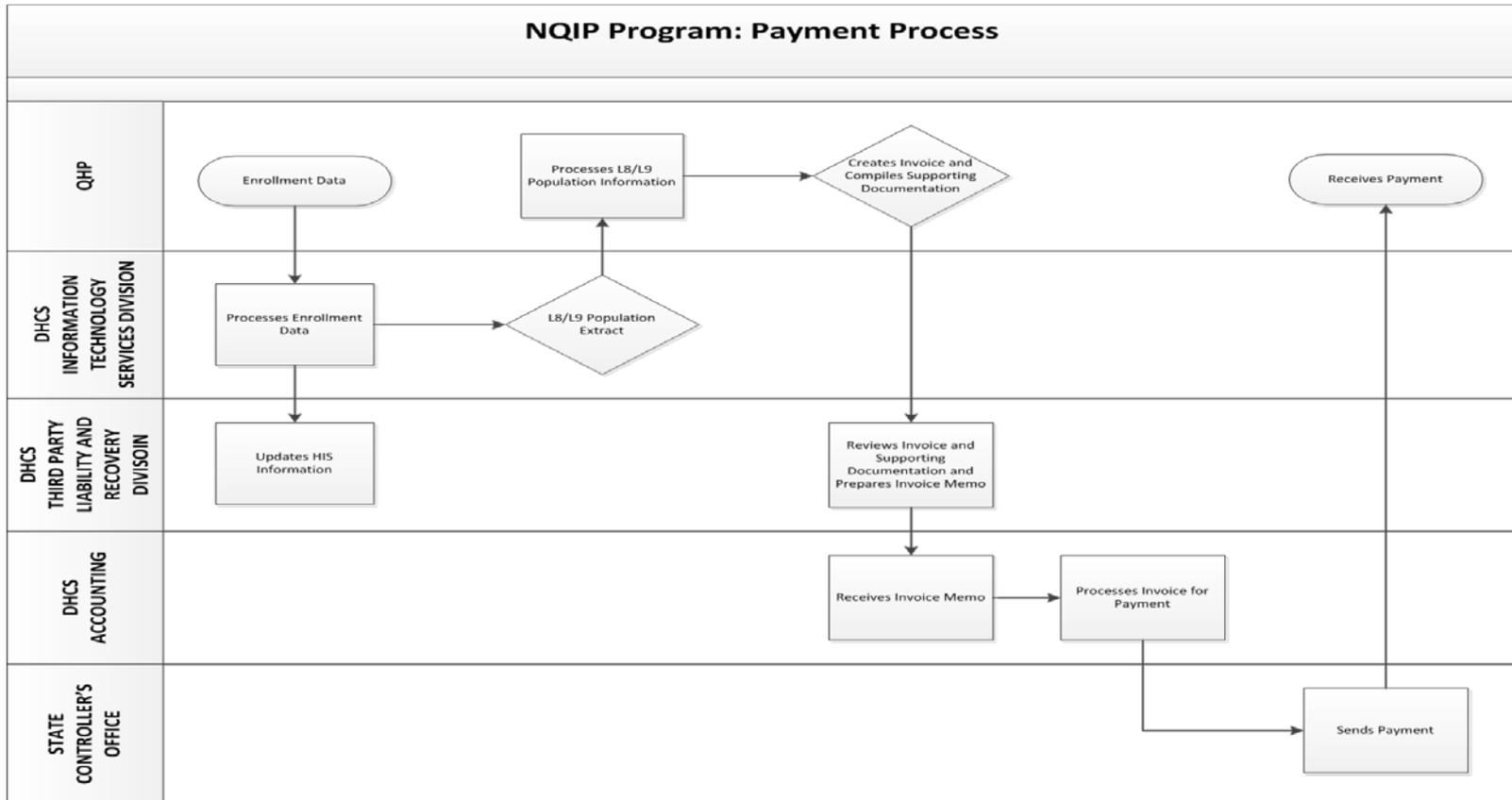
QHP	Regions Served	Network
Kaiser Permanente	All of California Except Monterey, San Benito and Santa Cruz	14k physicians 35 hospitals
Anthem Blue Cross	All of California	30k physicians 300 hospitals
Blue Shield of California	All of California	114k physicians 838 hospitals
Health Net	Alameda, Contra Costa, Kern, Los Angeles, Marin, Mariposa, Merced, Monterey, Napa, Orange, Riverside, San Benito, San Bernardino, San Diego, San Francisco, San Joaquin, San Mateo, Santa Clara, Santa Cruz, Solano, Sonoma, Stanislaus, and Tulare	44k physicians 204 hospitals
Western Health Advantage	El Dorado, Marin, Napa, Sacramento, San Bernardino, San Diego, Yolo	3k physicians 15 hospitals
Molina Healthcare	El Dorado, Los Angeles, Placer, Riverside, Sacramento, San Bernardino, San Diego, and Yolo	4,568 physicians 29 hospitals
L.A. Care Health Plan	Los Angeles	1,005 physicians 35 hospitals
Sharp Health Plan	San Diego	2,600 physicians 7 hospitals
Valley Health Plan	Santa Clara	993 physicians 4 hospitals
Chinese Community Health Plan	San Francisco and San Mateo	315k physicians 9 hospitals

*Highlights indicate trading partners with Third Party Liability and Recovery Division*

# Data Exchange



# Premium Invoice Process





# OHC Authority and Services



**W&I 14148.65 (b) (2)** – “The department shall provide beneficiaries who are receiving benefits under this section with only those Medi-Cal benefits for pregnancy-related and postpartum services that are covered under the Medi-Cal program and, except when otherwise required by state or federal law, that are not available through the beneficiary’s qualified health plan. These beneficiaries shall retain all rights and responsibilities to which they are legally entitled under the Medi-Cal program. The beneficiaries shall have the right to access Medi-Cal providers’ services through the Medi-Cal program that are not contracting with the Exchange qualified health plan as required under state or federal law, including, but not limited to, the right to access family planning services, services provided by Comprehensive Perinatal Services Program (CPSP) Medi-Cal providers, perinatal specialists, certified nurse-midwife services, and alternative and freestanding birth center services, to the extent those services are not available through the beneficiary’s Exchange qualified health plan, except when state or federal law requires the right to access the service without regard to its availability through the beneficiary’s Exchange qualified health plan. The department shall implement its policies and procedures on other health care coverage in a manner consistent with this subdivision.” (Emphasis added).



# Pregnancy Wrap Authority and Services



## Medi-Cal Wrap Covered Services for Pregnant Beneficiaries Include

	Dental Services	Out of Network Pregnancy Termination	Certified Nurse Midwife	Alternative Birthing Centers	Comprehensive Perinatal Services Program	Out of Network Family Planning	Federally Qualified Health Centers	Non Emergency Medical Transportation
Medi-Cal Wrap Coverage	Yes	Yes**	Yes**	Yes**	Yes**	During 60 days Postpartum Period Only*	Yes	Yes**

***\*Freedom of Choice***

***\*\*To the extent services are not available in QHP***

# NQI WRAP Services



## Medi-Cal Wrap Covered Services for NQI\* Beneficiaries Include

	Dental Services	NEMT
Medi-Cal Wrap Coverage	Yes	Yes**

*\*Pregnant NQI beneficiaries can elect to move to Medi-Cal or remain in the QHP during their pregnancy*

*\*\*To the extent services are not available in QHP*



# Pregnancy and NQI Wrap Aid Codes



- ***DHCS has established two new Medi-Cal aid codes for pregnant women and NQIs enrolled in a QHP. These beneficiaries will receive a BIC card and a QHP card.***
  - ***Medi-Cal aid code L8:*** *Pregnant women can elect to enroll in the Wrap to receive a benefits package through the QHP and pregnancy-related Medi-Cal that is equivalent to full-scope Medi-Cal coverage. Medi-Cal pays for the premium and out-of-pocket payment during the pregnancy and post partum period.*
  - ***Medi-Cal aid code L9:*** *NQIs who are 21 years of age or older are enrolled in the NQI wrap will receive a combined benefits package through the QHP and Medi-Cal that is equivalent to full-scope Medi-Cal. Medi-Cal pays for the QHP premiums and out-of-pocket payments for services to the extent not covered by the QHP.*



# Point of Service (POS) Message Medi-Cal Contracted QHP Providers



For L9:

MESSAGE: "SUBSCRIBER IS MEDI-CAL ELIGIBLE WITH NO SHARE OF COST/SPEND DOWN."

AND

"BILL DHCS FOR COPAYMENTS, DEDUCTIBLES AND COINSURANCE. MEDICAL SERVICES MUST BE BILLED TO QUALIFIED HEALTH PLAN BEFORE BILLING MEDI-CAL.

For L8:

MESSAGE: "SUBSCRIBER IS MEDI-CAL ELIGIBLE FOR PREGNANCY AND POST PARTUM RELATED MEDICAL SERVICES WITH NO SHARE OF COST/SPEND DOWN."

AND

"BILL DHCS FOR COPAYMENTS, DEDUCTIBLES AND COINSURANCE. MEDICAL SERVICES MUST BE BILLED TO QUALIFIED HEALTH PLAN BEFORE BILLING MEDI-CAL.

# QHP POS Message

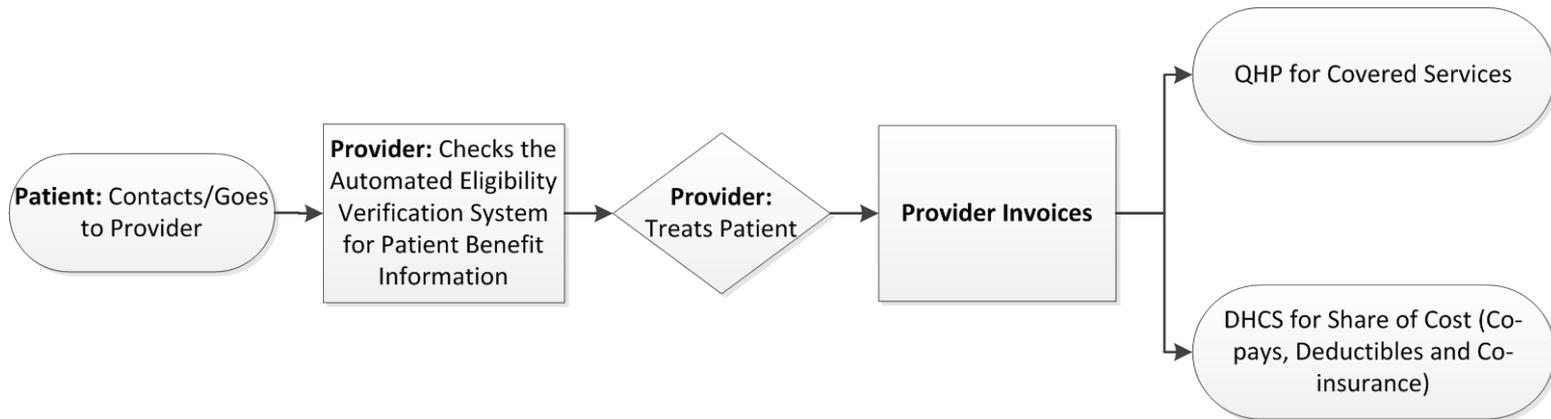


- 
- Non Medi-Cal Contracted Provider's Point of Service (POS) Screen:
    - Language is under development

# OHC Overview (1/4)



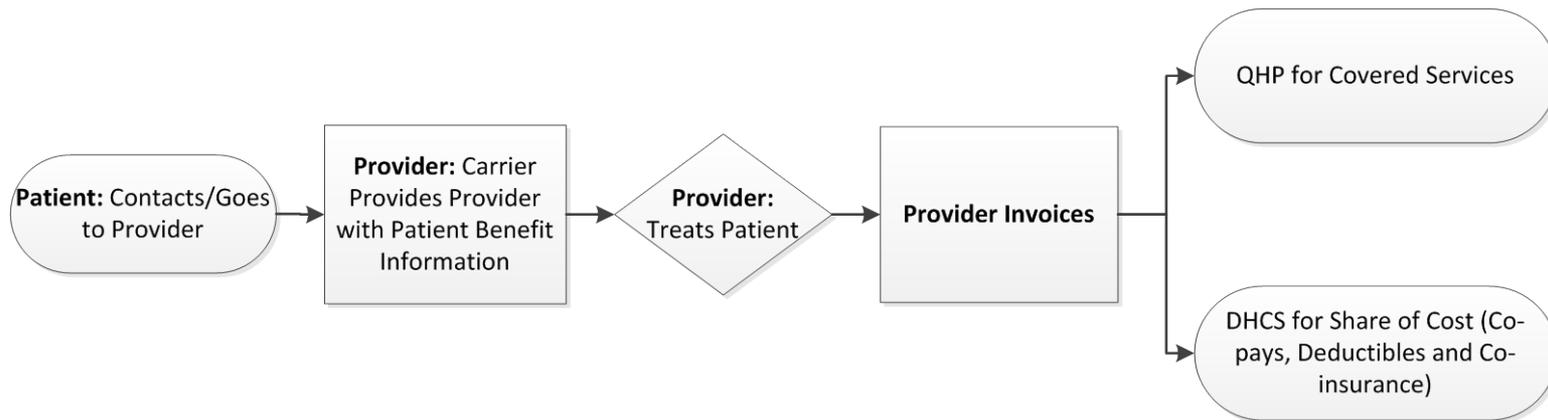
## What happens when a QHP Provider is also a Medi-Cal contracted Provider?



# OHC Overview (2/4)



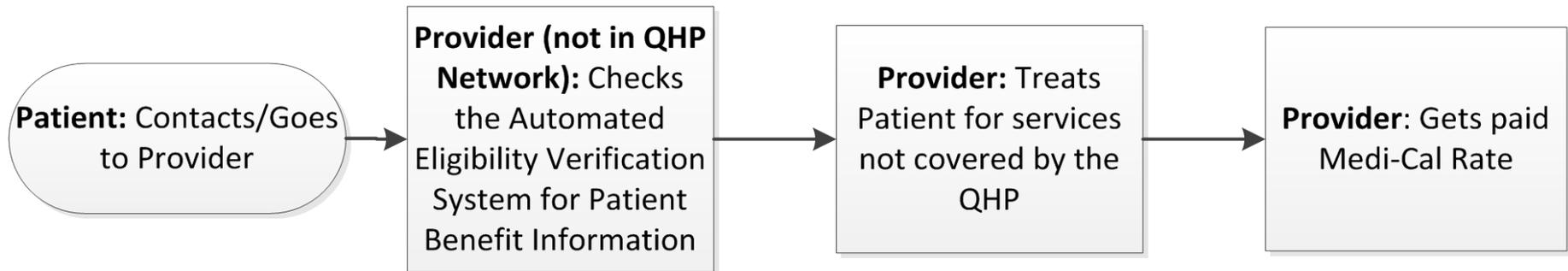
## What happens when a QHP Provider is *not* a Medi-Cal contracted Provider?



# OHC Overview (3/4)



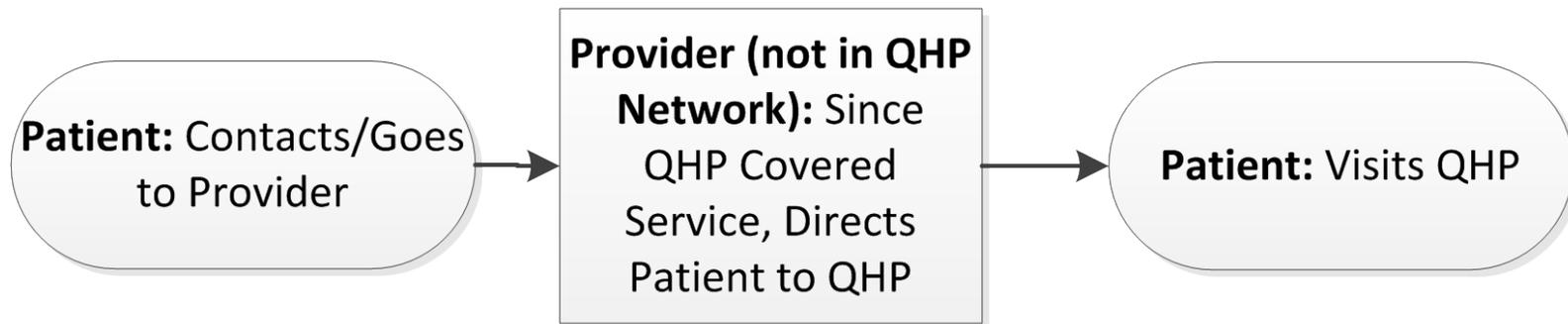
**When a patient visits a Medi-Cal Provider who is not contracted with a QHP for services not covered by a QHP**



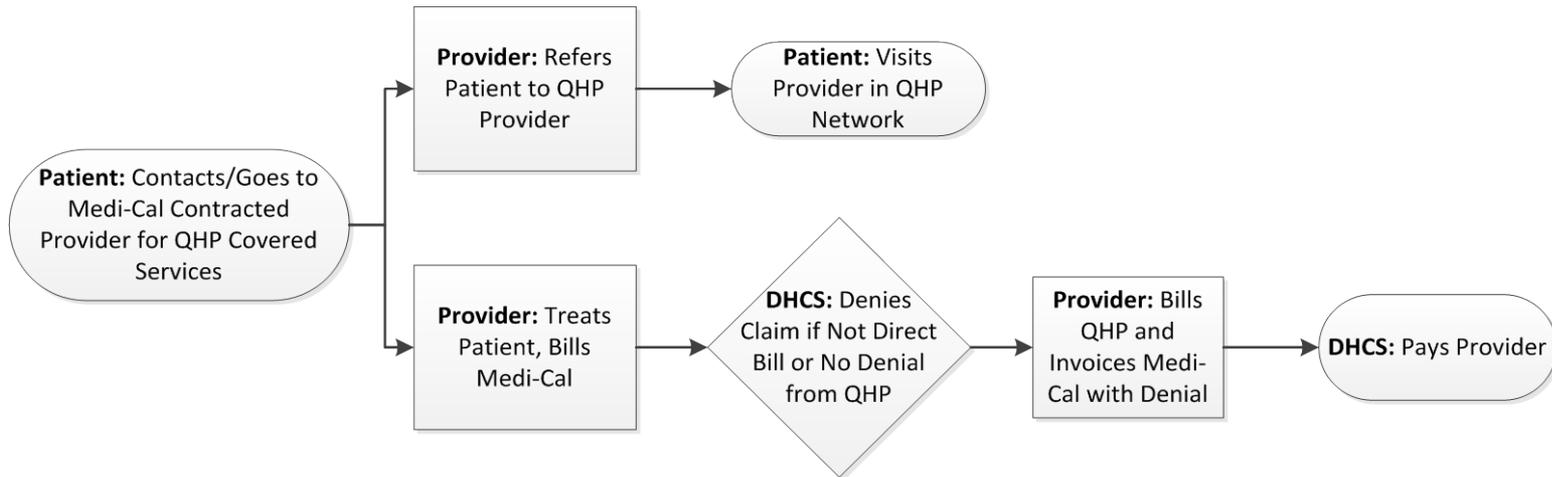
# OHC Overview (4/4)



**When a patient visits a Medi-Cal Provider who is not contracted with a QHP for services covered by QHP**



# Provider Billing Denial



***For Provider Billing Issues, Provider can call 1-800-541-5555***

***1. Provider may bill Medi-Cal directly for applicable services (i.e. perinatal). If dispute arises, resolution is available through the 800 number listed above***



# Collaboration with Xerox Call Center



- 
- The Telephone Service Center (TSC) is available 8 a.m. to 5 p.m., Monday through Friday, except holidays.
  - 1-800-541-5555
  - Information also provided in Provider Manual and All County Welfare Directors Letter
-



# Implementation Timeline



Activities	Expected Completion Date
Development of new aid codes (L8 and L9)	September 2014
Approval of State Plan Amendment 14-021	On or about January 2015
Approval of 1115 Waiver Amendment	On or about January 2015
Submission of SPA for Premium Payment and Beneficiary out-of-pocket recoupment	On or about January 2015
Complete modification of existing aid codes (M7, M8, M9, and M0) <sup>1</sup> and system changes	TBD
Complete system changes associated with QHP Pregnancy Wrap and NQI enrollment	TBD
Implementation of the Affordability and Benefit Program	On or about January 2016

<sup>1</sup> Completion is dependent of the federal approval of the 1115 Waiver Amendment



# Next Steps (1/2)



- ❖ Updated examples of draft materials that will be used to inform NQI applicants regarding the Affordability and Benefit Program will be available on the [DHCS website](#) on or about October 17, 2014.
- ❖ 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 email DHCS at [AffordabilityandBenefitProgram@dhcs.ca.gov](mailto:AffordabilityandBenefitProgram@dhcs.ca.gov) with any comments or questions about the information provided in this Webinar by **November 7, 2014**.
- ❖ 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 Medi-Cal/Denti-Ca Provider Notices
  - ❖ Review of Monitoring and Data
  - ❖ Program Implementation Status and Legislative Report



## Next Steps (2/2)



---

***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](mailto:AffordabilityandBenefitProgram@dhcs.ca.gov)**

# Questions and Responses

---



# Stakeholder Meeting Schedule



<p><b>October 24, 2014</b> <b>3:30 p.m. – 5:00 p.m.</b> <b>Department of Health Care Services</b></p>	<p><b>January 2015</b> <b>Date and Time TBD</b></p>
<p><b>November 21, 2014</b> <b>3:30 p.m. – 5:00 p.m.</b> <b>Department of Health Care Services</b></p>	<p><b>February 2015</b> <b>Date and Time TBD</b></p>
<p><b>December 12, 2014</b> <b>3:30 p.m. – 5:00 p.m.</b> <b>Department of Health Care Services</b></p>	<p><b>March 2015</b> <b>Date and Time TBD</b></p>