AB 1296 Written Update

February 3, 2015

Assembly Bill 1296 (Chapter 641, Statutes of 2011) enacted the Health Care Reform Eligibility, Enrollment, and Retention Planning Act, which requires the California Health and Human Services Agency (CHHSA), in consultation with the (DHCS), the California Health Benefit Exchange (Exchange), the California Office of Systems Integration, counties, health care service plans, consumer advocates, and other stakeholders, to plan and develop standardized single, accessible application forms and related renewal procedures for state health subsidy programs. The AB 1296 workgroup continues to meet regularly and is currently meeting on a monthly basis in Sacramento.

Updates on the topics discussed at the AB 1296 stakeholder meetings are included below:

Remote Identification Proofing (RIDP)

Remote Identity Proofing (RIDP) is a required process for online or telephonic health insurance affordability program applications. For paper applications, the physical signature on the application satisfies the RIDP requirement. If an individual who submitted a paper application then wants to move into an electronic process (for example, to select a health plan online), he or she will need to complete the online RIDP process. DHCS and Covered CA are exploring the use of several documents that could be used to verify identity in the California Healthcare Eligibility, Enrollment, and Retention System (CalHEERS).

Single Streamlined Application

The Single Streamlined Application has been provided to stakeholders for review and recommendations on changes to both the paper and online application. Revisions of the single streamlined application have been finalized. Several application questions have been revised to include more consumer friendly language. Additionally clarifying text and FAQs have been provided to help navigate consumers through the application questions. User acceptance testing is currently underway.

Notices

DHCS, Covered California and several advocacy organizations are working jointly to improve the beneficiary notices process. Joint effort includes reviewing text changes on notices to better inform beneficiaries of their eligibility status and communicate the additional information that may be required of consumers to ensure a timely eligibility

assessment. Discussions also include system changes to limiting the number of notices generated to beneficiaries. System changes are expected to be deployed in the next several months.

Negative Action

CalHEERS has implemented a short term solution for negative action functionality. Full execution of the long term solution is aimed for Spring/Summer of 2015. Joint Application Development (JAD) sessions have begun for the long-term Negative Action functionality. Guidance has been provided to Counties on administering the short-term solution for the negative action workaround.

AB x 1-1 Report

DHCS in collaboration with Covered California is required to develop and prepare one or more reports to be issued on at a quarterly basis with the purpose of informing the CHHS, the Legislature, and the public about the enrollment process for all insurance affordability programs. DHCS plans to release the first AB X1-1 report in late winter of 2015, which will be reflective of the first open enrollment period under the Affordable Care Act. DHCS plans to release subsequent reports on a quarterly basis.