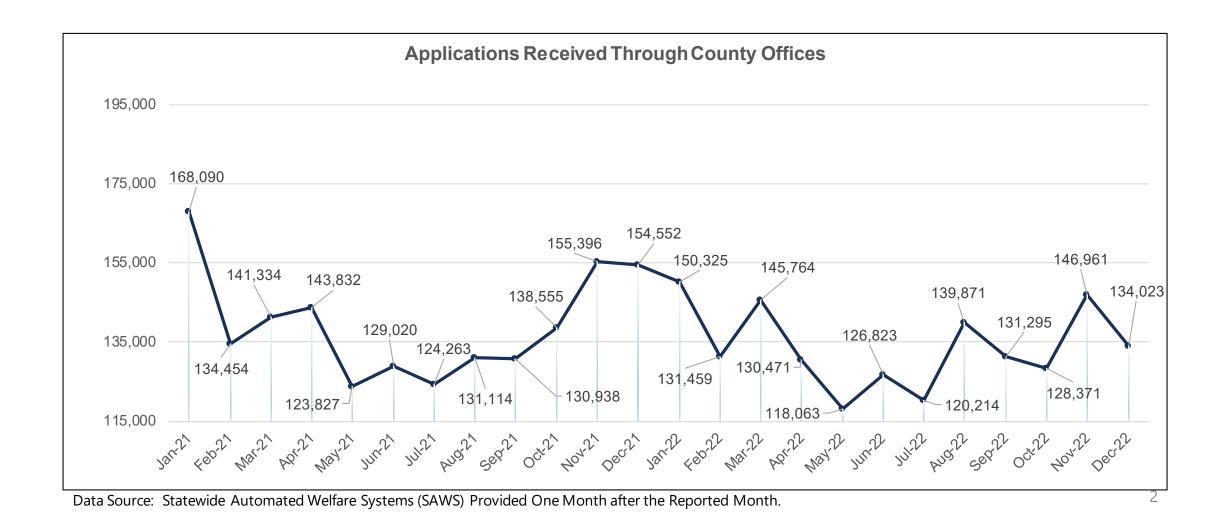




#### **Medi-Cal Applications**

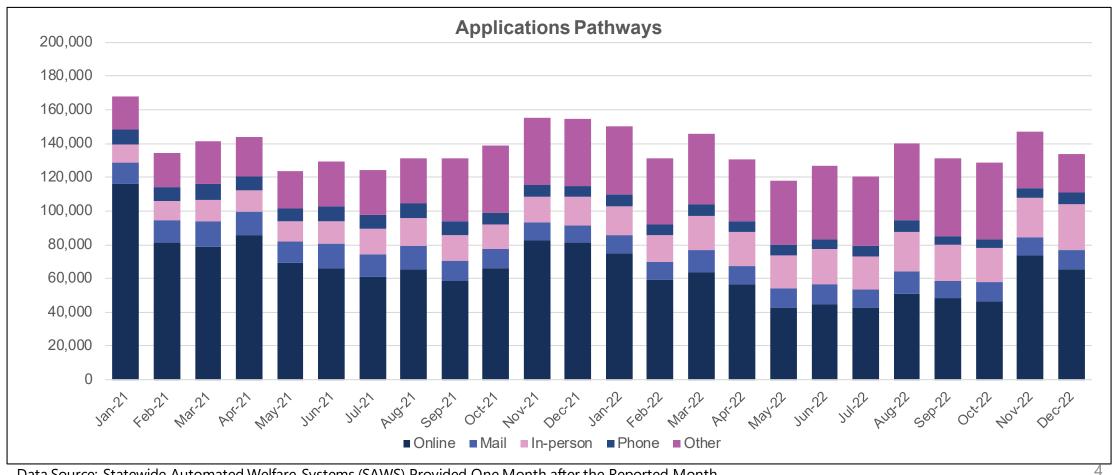


#### **County Application Pathways**

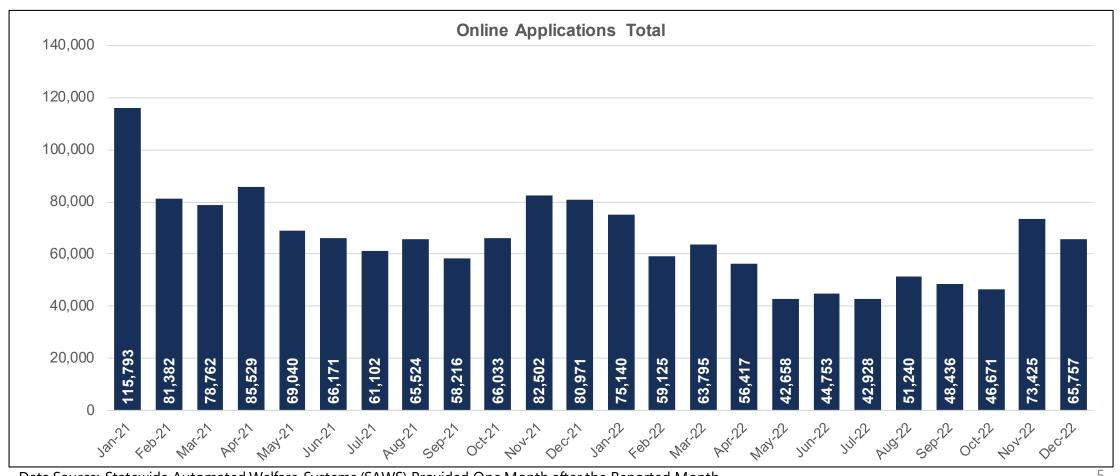
- Online
- In Person
- Phone
- Mail/Fax
- Other
  - Includes applications received from sources not included in the above categories, such as those received by IHSS, and CBO(s) referrals, etc.

Note: This data is reported at the application level, with a single application potentially including more than one person (for example, a parent and two children are likely to apply for health coverage on a single application).

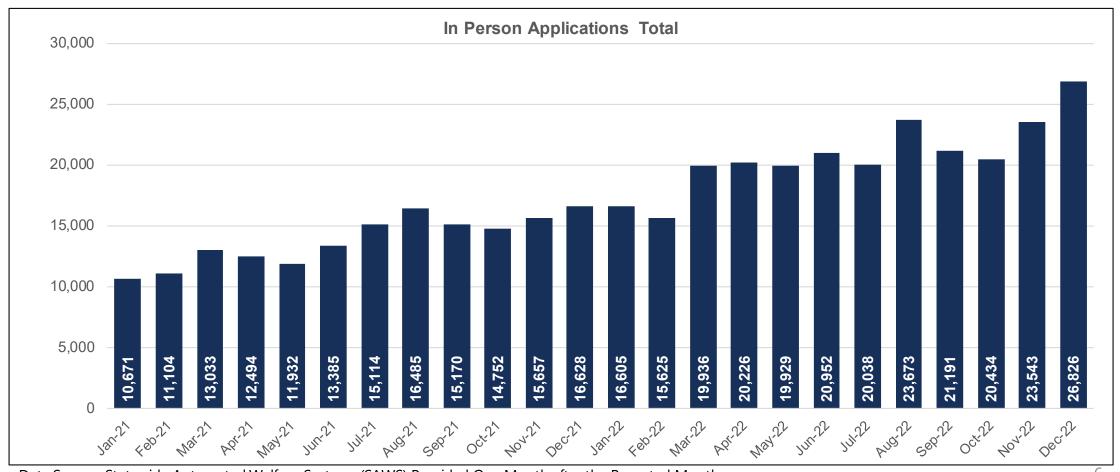
## **County Application Pathway** - All Pathways -



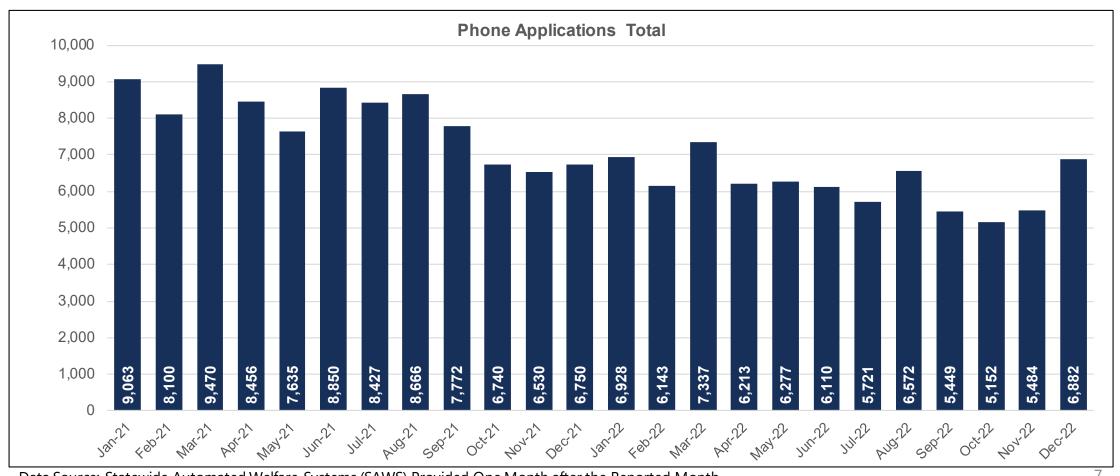
# County Application Pathway - Online Applications -



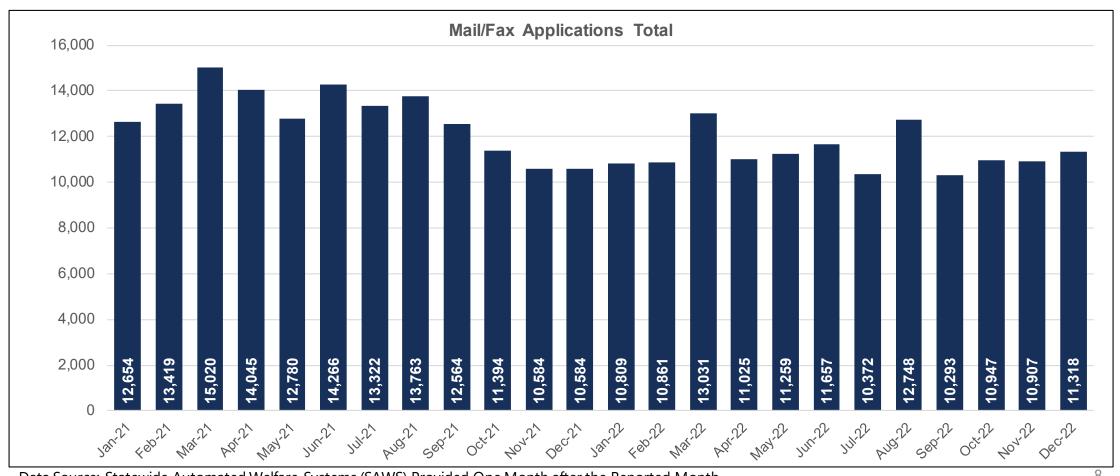
## County Application Pathway - In Person Applications -



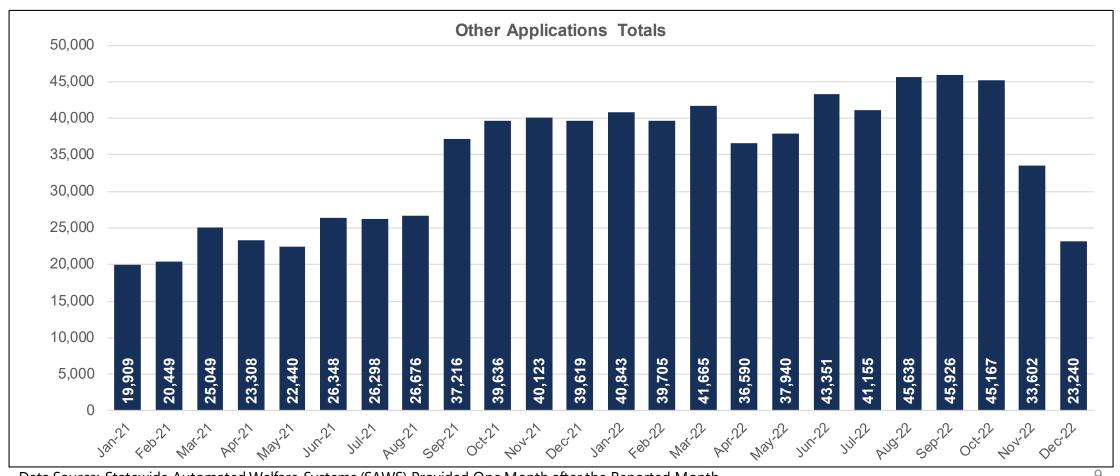
# County Application Pathway - Phone Applications -



# County Application Pathway - Mail/Fax Applications -



# County Application Pathway - Other Applications -



## Medi-Cal Presumptive Eligibility (PE)

There are a variety of Medi-Cal PE programs designed to provide immediate, temporary coverage for eligible low-income individuals, pending a formal Medi-Cal application.

The following are four such programs:

- ➤ Hospital Presumptive Eligibility
- ➤ Child Health and Disability Program Gateway
- ➤ Presumptive Eligibility for Pregnant Women
- ➤ Breast and Cervical Cancer Treatment Program

#### **Medi-Cal PE**

#### **► Hospital Presumptive Eligibility (HPE)**

• The HPE Program provides qualified individuals immediate access to temporary, nocost Medi-Cal. To apply for HPE benefits, an individual must visit a hospital that is a qualified HPE Provider. The HPE Provider submits the individual's information via the HPE Medi-Cal Application online portal and eligibility is determined in real-time.

#### **► Child Health and Disability Prevention (CHDP) Gateway**

 The "CHDP Gateway" is an automated pre-enrollment process for non Medi-Cal, uninsured children. Qualified Providers utilize the CHDP Gateway as the entry point for children to enroll in ongoing health care coverage through Medi-Cal, pending a formal determination of Medi-Cal eligibility.

#### **Medi-Cal PE**

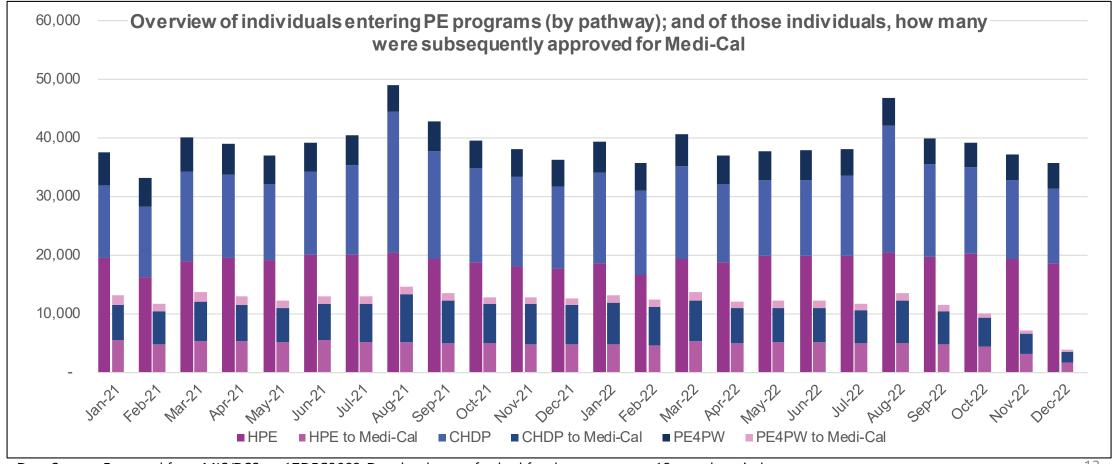
#### Presumptive Eligibility for Pregnant Women (PE4PW)

 The PE4PW Program allows Qualified Providers to grant immediate, temporary Medi-Cal coverage for ambulatory prenatal care and prescription drugs for conditions related to pregnancy to low-income, pregnant patients, pending their formal Medi-Cal application.

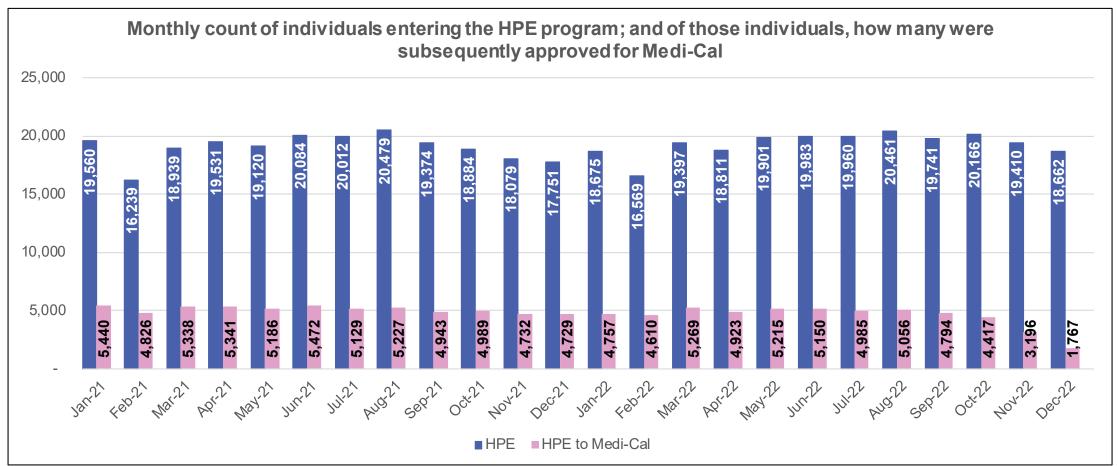
#### Breast and Cervical Cancer Treatment Program (BCCTP)

 The Breast and Cervical Cancer Treatment Program (BCCTP) provides cancer treatment and services for eligible low-income California residents who are screened by Qualified Providers and found to be in need of treatment for breast and/or cervical cancer, pending a formal Medi-Cal application.

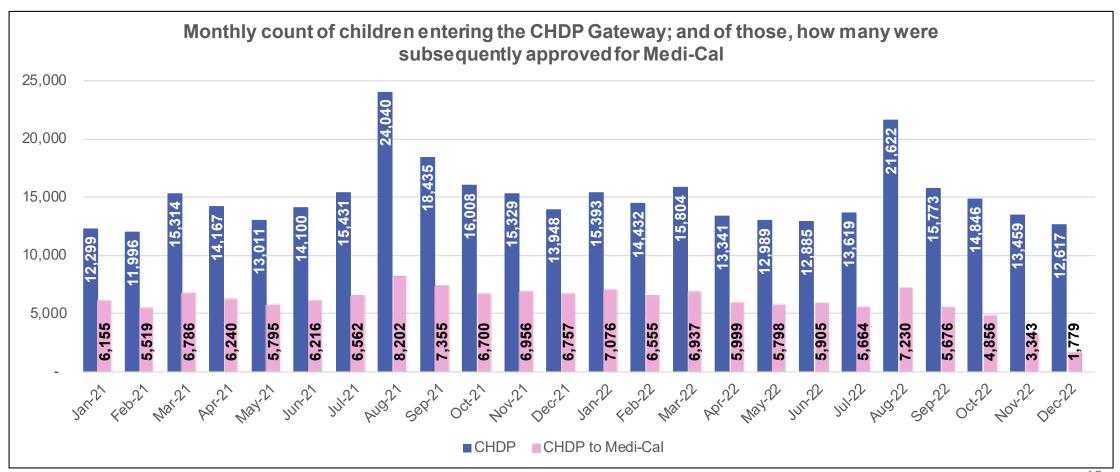
#### **Overview of PE Individuals**



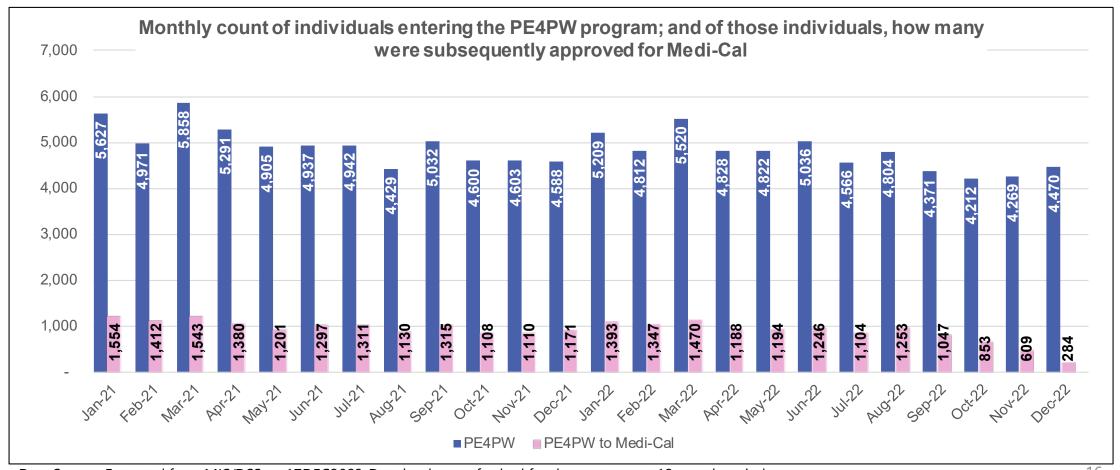
#### **HPE Individuals**



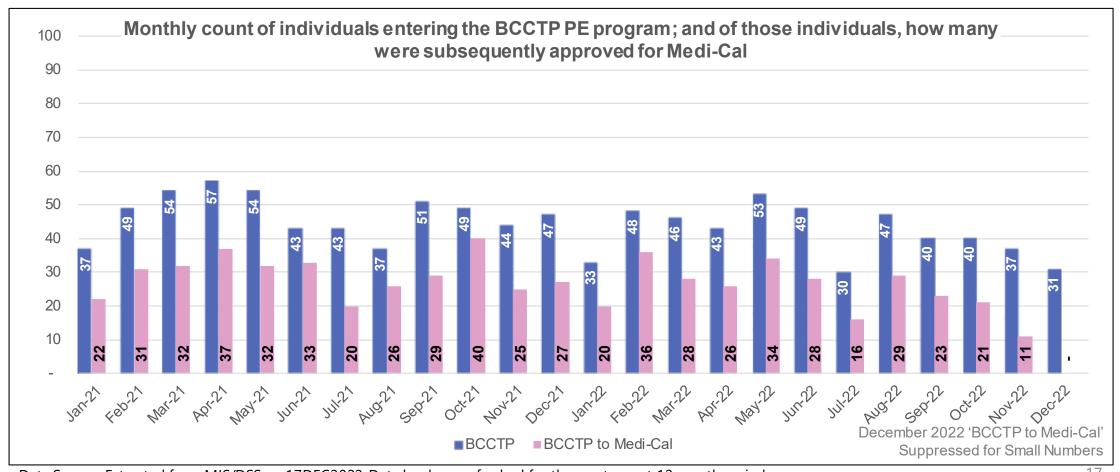
## CHDP Gateway Individuals (Children)



#### **PE4PW Individuals**



#### **BCCTP PE Individuals**



#### Medi-Cal New Enrollment Data

Medi-Cal New Enrollment Data includes the following cohorts:

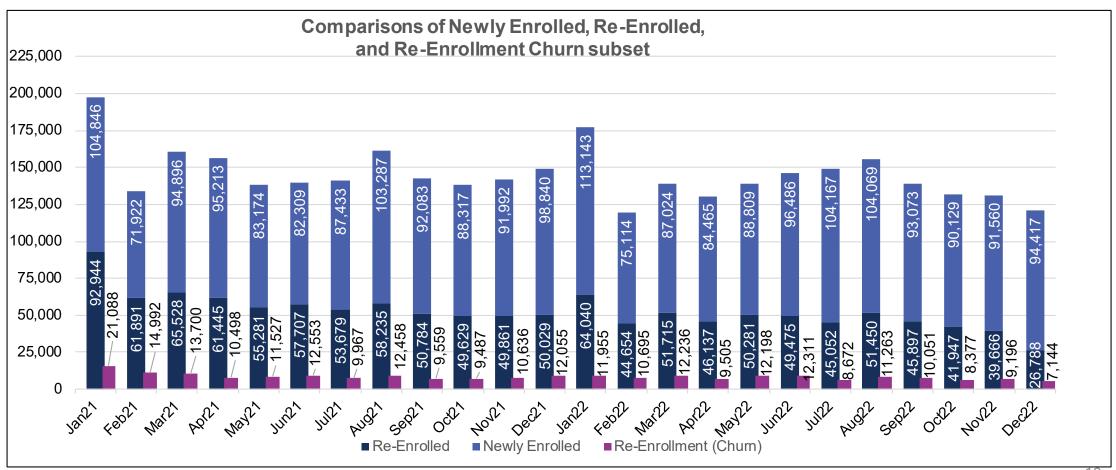
**Total NEW Enrollments** - The sum of *Newly Enrolled* and *Re-Enrolled* individuals (the Universe).

**Newly Enrolled** - Individuals with no prior history of Medi-Cal coverage.

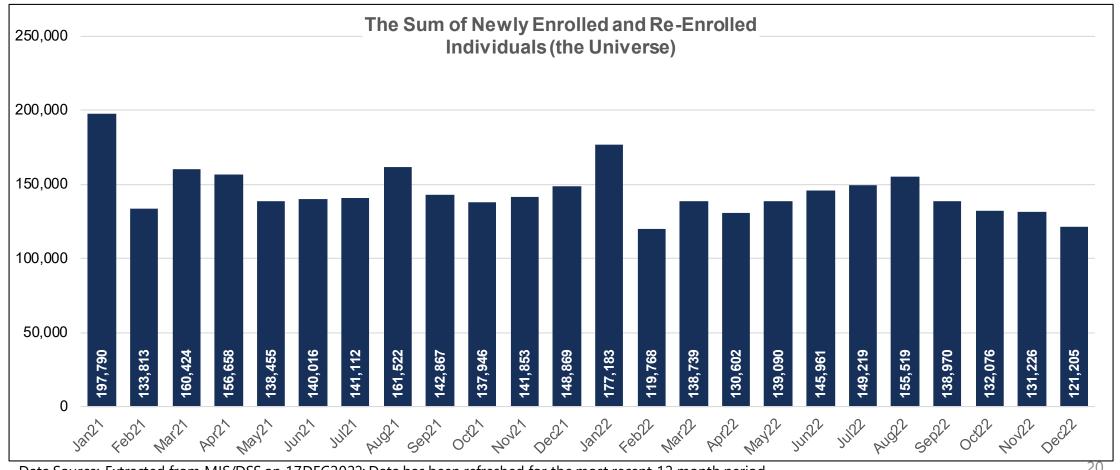
**Re-Enrolled** - Individuals who experienced a break in coverage and <u>came back</u> to the Medi-Cal program by reapplying, and being determined eligible for Re-Enrollment into the program.

- Different from Newly Enrolled, these are individuals with a prior history of Medi-Cal coverage within the previous 15+ year period, but whose Medi-Cal was subsequently discontinued at some point in the past, thereby requiring the individual to reapply.
- ➤ Re-Enrollment Churn (A subset of Re-Enrolled) Individuals who experienced a break in coverage and came back to the Medi-Cal program by reapplying, and being determined eligible for Re-Enrollment into the program.
  - This subset of *Re-Enrolled* individuals <u>have a prior history</u> of Medi-Cal coverage within the previous 12 month period, but whose Medi-Cal was subsequently discontinued at some point in that 12 month period, thereby requiring the individual to reapply.
  - The methodology used to obtain the Churn data was refined on 10/14/2020.

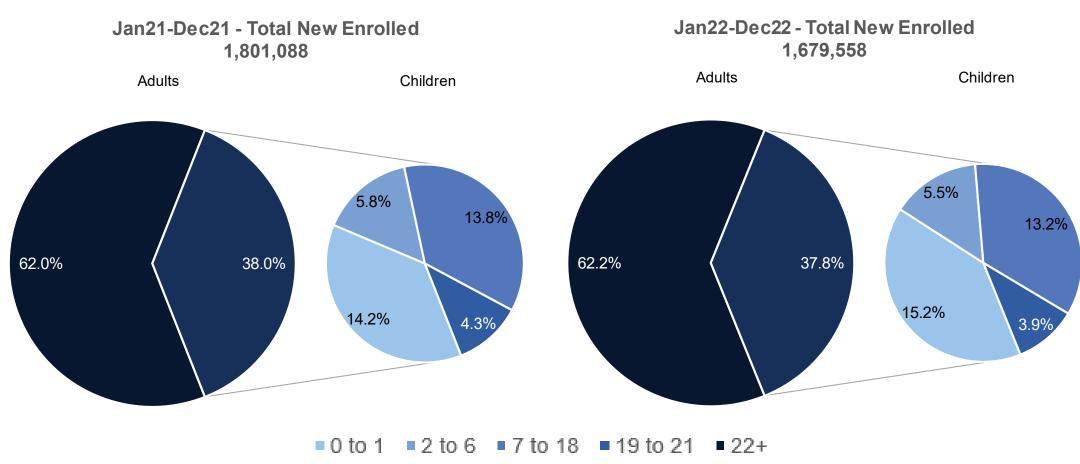
#### Medi-Cal New Enrollment Cohorts



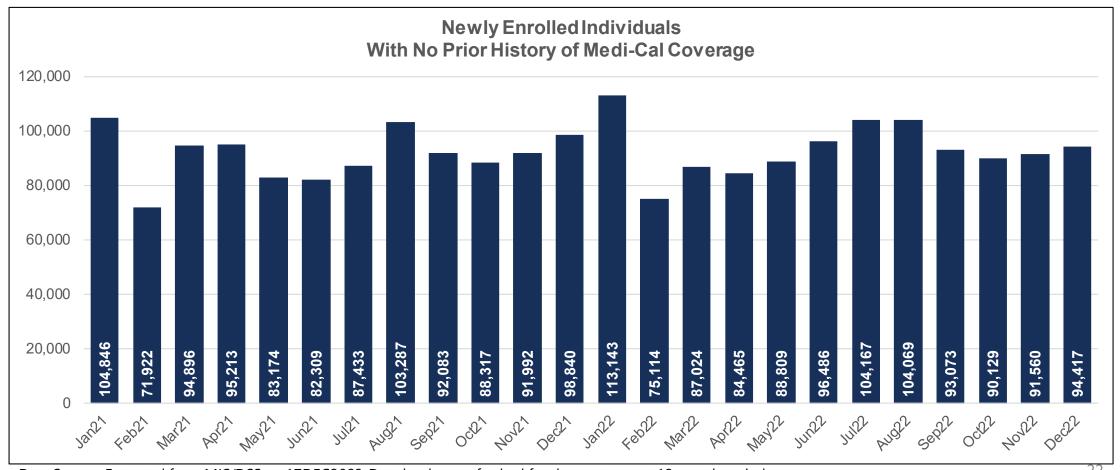
#### **Medi-Cal Total NEW Enrollments**



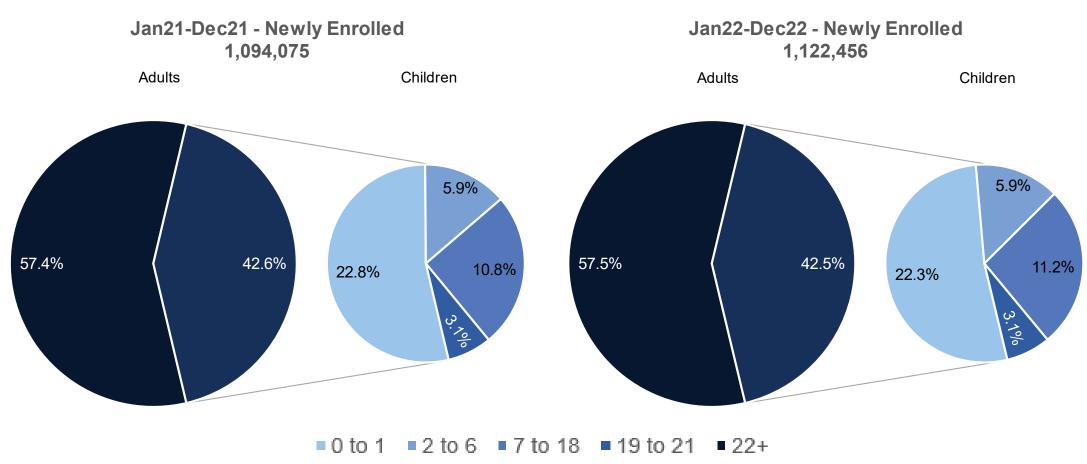
# Medi-Cal Total NEW Enrollments -Age Break-out for Children-



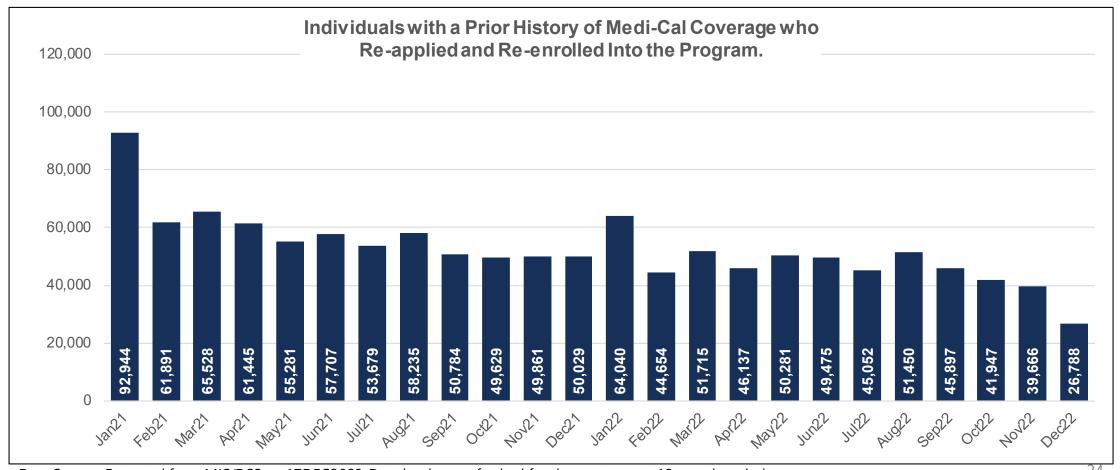
## Medi-Cal Newly Enrolled



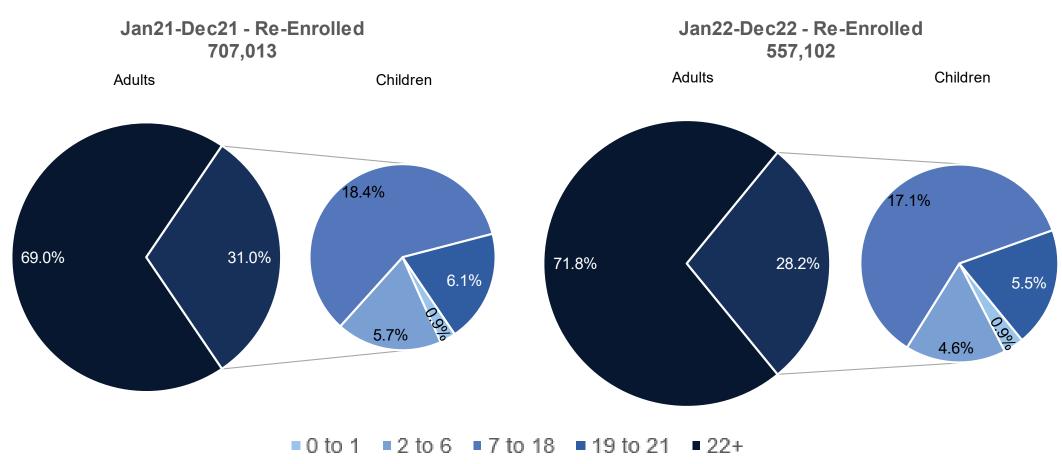
#### Medi-Cal Newly Enrolled -Age Break-out for Children-



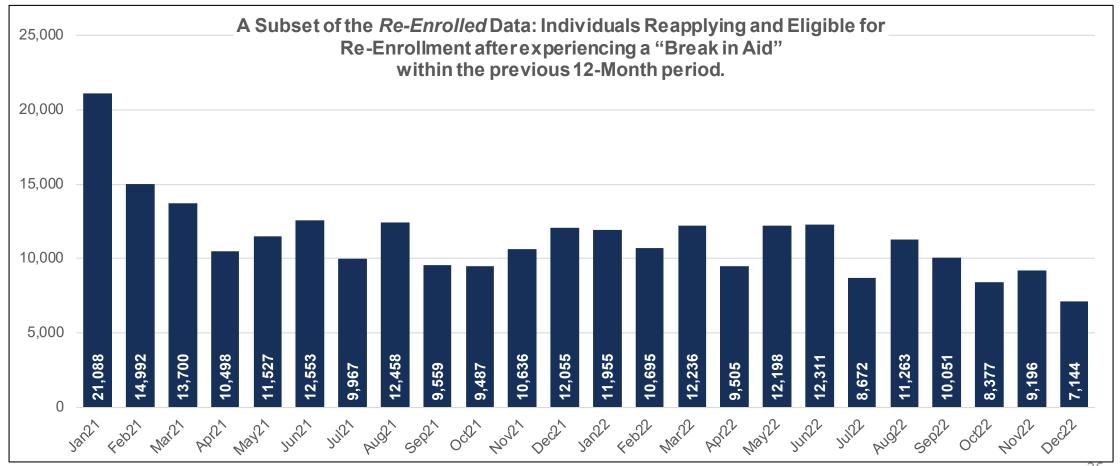
#### Medi-Cal Re-Enrolled



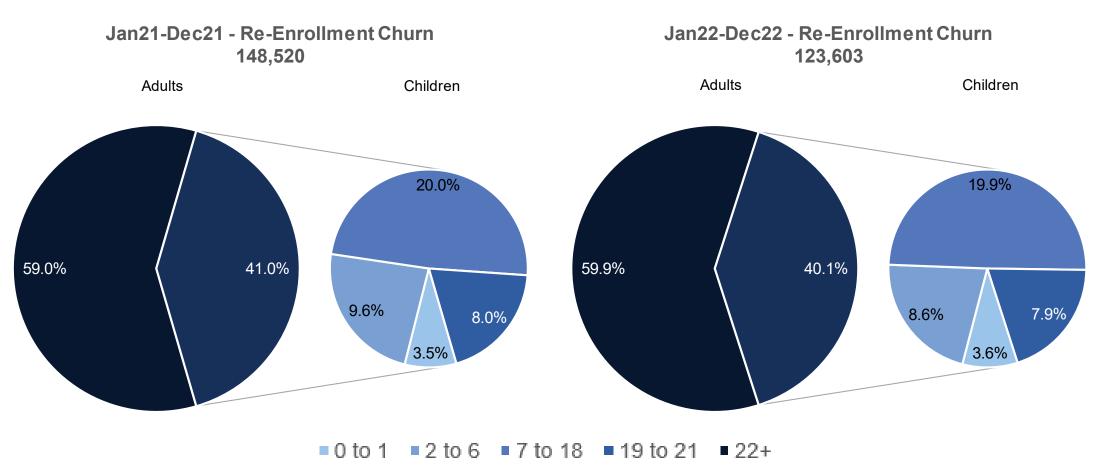
#### Medi-Cal Re-Enrolled -Age Break-out for Children-



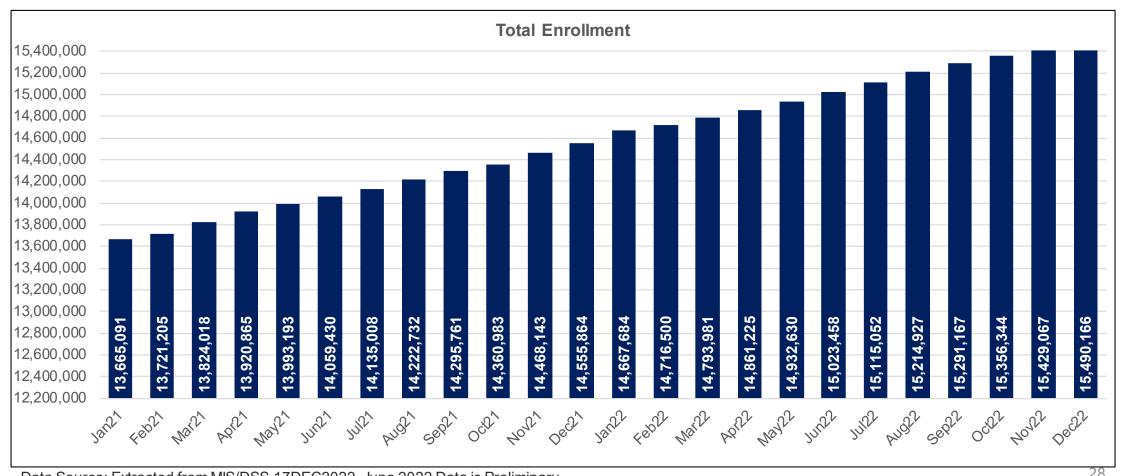
#### Medi-Cal Re-Enrollment Churn



#### Medi-Cal Re-Enrollment Churn -Age Break-out for Children-



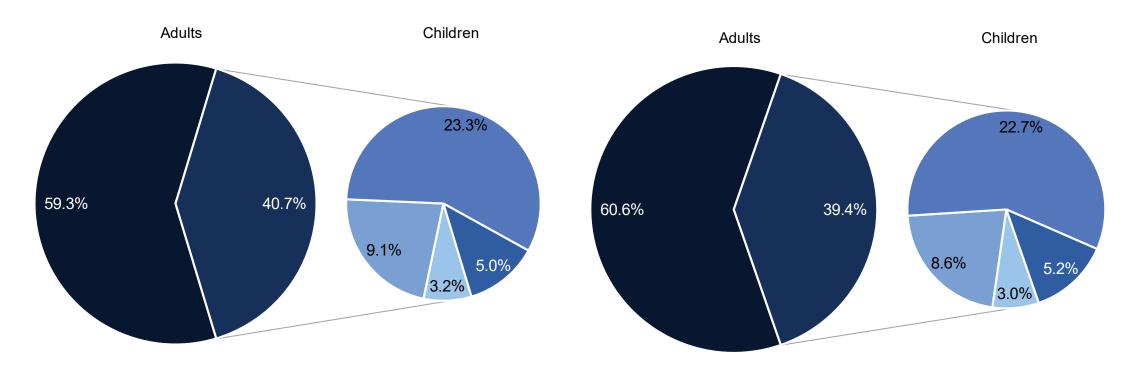
#### **Medi-Cal TOTAL Enrollment**



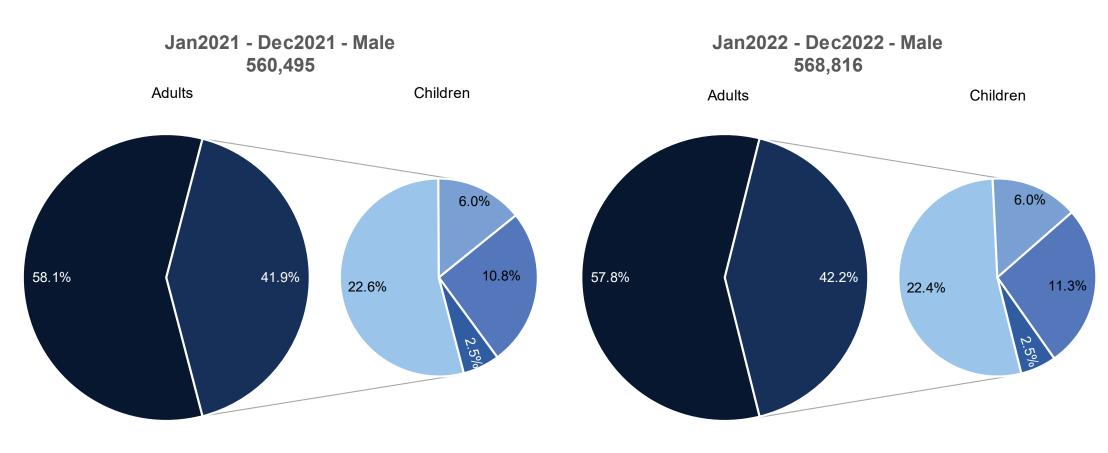
# Medi-Cal TOTAL Enrollment -Age Break-out for Children-

Jan21-Dec21 - Total Enrollment

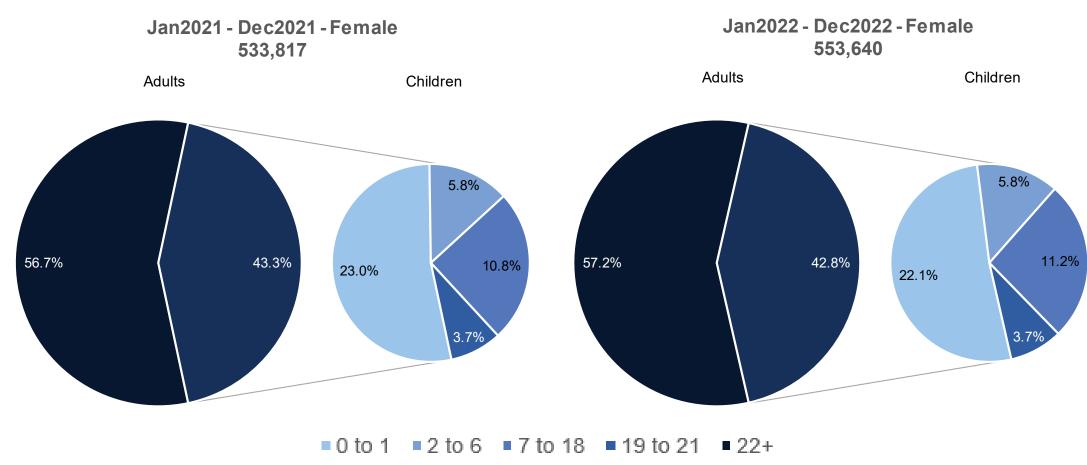
Jan22-Dec22 - Total Enrollment



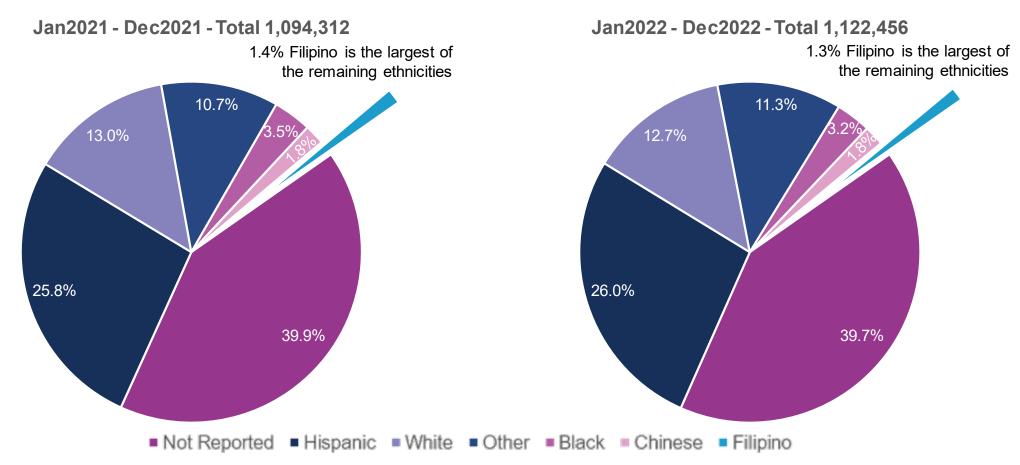
## Medi-Cal New Enrollments Male by Age



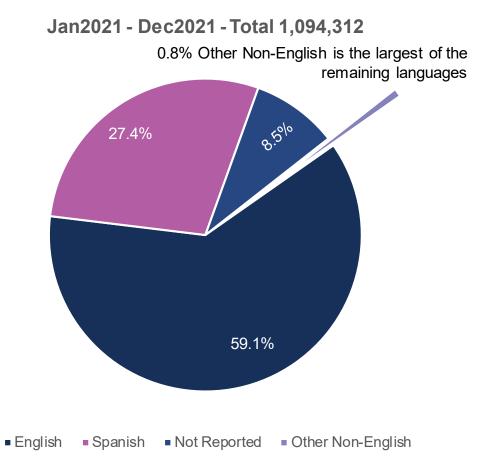
### Medi-Cal New Enrollments Female by Age

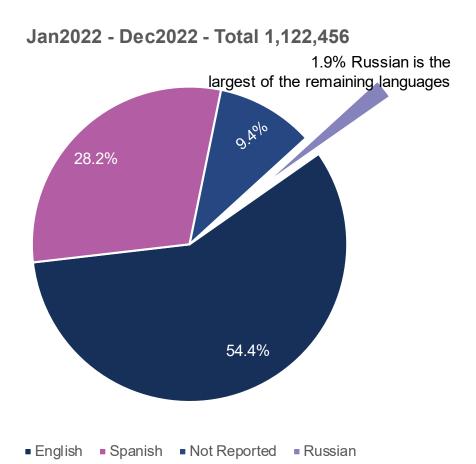


## Medi-Cal New Enrollments Ethnicity



### Medi-Cal New Enrollments Primary Written Language





## Continuous Medi-Cal Coverage Through the Public Health Emergency

- To ensure Californians continued to receive Medi-Cal health coverage during the public health emergency (PHE), per Executive Orders N-29-20 and N-71-20, DHCS issued guidance directing counties to delay the processing of Medi-Cal annual renewals, and to defer discontinuances and negative actions, effective March 16, 2020, through the duration of the PHE.
- Exceptions to the moratorium on discontinuances/ negative actions are:
  - voluntary requests for discontinuance,
  - death of a beneficiary, or
  - individuals who move out of state.

## Medi-Cal Reinstatements During COVID-19 Public Health Emergency

- DHCS, working collaboratively with the SAWS and counties, are continually working to identify individuals who have been inadvertently discontinued, and have their eligibility restored each month.
  - The identified cases targeted for restoration take into consideration the legitimate discontinuances that are allowed during the PHE.
  - To date, approximately 131,000 individuals were restored back into coverage since the beginning of the COVID-19 PHE, as a result of the reinstatement effort.
- Beginning with the November 2020 benefit month, DHCS worked with SAWS and Counties to identify in advance any cases slated for discontinuance.
  - Due to this early identification effort, individuals scheduled for discontinuance,
     November 2020 benefit month forward, have been retained in coverage without a break in aid.

#### **COVID-19 Uninsured Group**

- COVID-19 Uninsured Coverage Group (aka COVID-19 PE):
  - For uninsured individuals
  - Services limited to medically necessary COVID-19 testing, testing-related, and treatment services
  - 12-month enrollment period or end of public health emergency, whichever comes later
- COVID-19 Uninsured Application Pathways:
  - All PE Qualified Providers, including:
  - Hospital PE
  - Child Health and Disability Prevention Gateway
  - PE for Pregnant Women
- COVID-19 Uninsured Enrollments as of 02/01/2023: 432,801