

ACA Planning Group

MEETING NOTES

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Public Health
Prevent. Promote. Protect.

San Luis Obispo County



Tuesday, December 09, 2014

3:00 PM to 5:00 PM

In Attendance:

Aguilera	Federick	CHC
Black	Robert	SVRMC
Borenstein	Penny	Health Agency- PH
Brown	Lesly	County Admin
Castaneda	Susana	Health Agency - PH
Diringer	Joel	Diringer & Associates
Garcia	Pati	DSS
Hale M.D.	Thomas	TCCH
Kelly	Nora	Health Agency- PH
Macedo	Christina	CAPSLO
Pierro	Cassandria	CHC
Shay	Jennifer	Health Agency- PH
Taylor	Mike	Health Agency – PH
Thomas	Catherine	Health Agency- M/C Outreach
Vickery	Greg	Health Agency - Behavioral Health
Walter	Nancy	Patient Services Rep, SVRMC
Wendt	Wendy	First 5
Lassen	Abbey	Attorney, Consumer Advocate

1. Welcome and Introductions

Michelle Shoresman welcomed the stakeholder representatives, reviewed agenda items and asked each person to introduce themselves and sign in on the sign in sheet.

2. Dept. of Social Services (DSS) Medi-Cal Enrollment Update

Patty Garcia:

DSS is averaging about 1,100 applications per month, with approximately 4,500 applications in the last 4 months. Caseload as of October is 21,800.

There are still about 800 pending applications because of technical issues with linking the Covered CA system and the DSS SAWS system. Pati said they are trying to finish the backlog before open enrollment period ends. Pati asked that if you know of someone that applied over a year ago and just now received notice from Covered California that they are eligible for Medi-Cal (M/C), to email her (pagarcia@co.slo.ca.us) so they can get the person enrolled in the system without further delay. Covered CA sends the M/C eligibility notifications to clients, not DSS, but you may contact Pati to check on an applicant's eligibility status with a release of information from the customer/client/participant.

DHCS launched the Express Lane Enrollment Project that uses the application information from individuals eligible for CalFresh to also apply for Medi-Cal (M/C) with no additional information required. Eligibility for M/C through the Express Lane is the same, including income at or below 138% FPL, but the automated system apparently enrolled some with incomes up to 200% FPL in M/C. Because the enrollment is automatic and due to the current backlog, DSS will not reverse those enrollments at this time, but will catch them when they have to reapply for M/C in 12 months. This does not affect local or state funds as the first year of M/C, and the CalWorks and CalFresh programs are 100% federally funded.

3. Covered CA Open Enrollment Roundtable

Michelle Shoresman:

At our last meeting, the group chose to meet again in order to roundtable with other agencies and troubleshoot how the enrollment process is going.

Public Health is working to become a Certified Enrollment Entity (CEE). Started this process about 6 months ago and we are currently waiting for CEE confirmation from Covered California and for 3 of our staff to become Certified Enrollment Counselors (CEC).

Catholic Charities a new CEE and did not have any problems becoming CEE.

Catherine Thomas:

The Outreach and Enrolment Program – There have been no recent issues assisting clients to enroll. Only had one issue with the ACA hotline but otherwise, going smooth.

Christina Macedo:

CAPSLO - Most clients get locked out of their Covered CA account and they have to call Covered CA themselves because Covered CA would not talk to any other person but the client. Clients have to wait for more than a half hour on the phone to get assistance. Clients end up reapplying on their own.

Nancy Walters:

Sierra Vista Regional Center – Has not been able to get through when calling Covered CA. Clients have only been successful calling DSS.

Dr. Tom Hale:

Twin Cities Hospital – Enrollment through the ER is difficult. Clients coming through the ER 8% are intoxicated. 50% of these are alcohol related and the other 50% is drug related. Due to their intoxication, that can't provide accurate information.

Frederick Aguilera:

CHC – Does not know how many clients who enrolled during this open enrollment period were previously without insurance. CHC is not having many issues with enrollment or renewals. The biggest struggle at this point is clients not knowing their log in information and CECs are not able to access their information. They offer CHC patients the option of scanning their information in their chart. Other than that, everything is working very well. Renewals have been easy with no problems. CHC has centralized CEC appointment scheduling for better access. There are two locations that have Spanish-speaking counselors. CHC estimates that during the last open enrollment, most clients (approx. 80%) were qualifying for Medi-Cal, while about 20% got Covered CA. This year, it appears 50% M/C and 50% Covered CA. Probably 90% of the clients are CHC patients. We have been focusing on in-reach. If there are any of our events that you would like to participate in, everyone is welcome.

4. DMHC Report on Anthem Covered California Provider Network, dated 11/18/14

Jennifer Shay, Public Health Dept.:

In response to complaints from consumers about the validity of the provider network list for the Anthem Blue Cross Covered California plan, the Department of Managed Health Care (DMHC) conducted a survey of the contracting status and availability of Anthem's network provider list.

Joel Diringier noted that DMHC has since released a similar report on Blue Shield's provider network, which reported similar findings.

The following is Jennifer's summary of the key findings of the DMHC 11/18/14 report on Anthem's network:

- Purpose of the DMHC survey was to "obtain confirmation of the physicians' contracting status and availability to take new patients."
- Report concludes that Anthem misled consumers about the size of their provider networks, especially network coverage for Covered CA plans.
- Good news is that this report serves to document the plan's violations and a follow up survey is planned in six months.
- Historically, DMHC does not monitor or enforce standards for access to specialty care. Outside the context of the survey, the report states (p 19) that DMHC reviews network adequacy based on the inclusion of PCPs.
- "Resulting Sample" (defined on p 45) was comprised of the following: *(1) physicians willing to participate in survey; (2) physicians no longer practicing at the designated location; and (3) physicians whose offices did not answer numerous phone calls.*
- (p 44): *Sample sizes for each group were selected to yield statewide sample precision levels of 2.5 % at the 95-% confidence level. All samples were stratified according to county. The final or "resulting" universe for sampling totaled 40,025 providers across all counties.*
- DMCH report available here: <http://www.dmhc.ca.gov/desktopmodules/dmhc/medsurveys/surveys/303fsnr111814.pdf>

Statewide Findings

- 3,272 total sample size (1,740 in EPO/PPO all specialties category)
- 12.8% providers don't accept CC
- 12.8% providers not at location
- 56% accept CC

SLO County Findings

- 27 sample size (called 27 providers--unknown how many were PCP v Specialty)
- 2 don't accept CC
- 4 no longer practicing
- 20 accept CC (counted if they accept ANY of the CC plans, not necessarily all plans)
 - Of those, 16 accept new pts w/ CC, 4 not accepting new pts w/ CC
- 261 providers listed in directory

5. SLO County Behavioral Health Update

Greg Vickery:

Greg said they are continuing to track an increase in requests for mental health services this year. It started slowly then the demand built over the summer and into fall.

They are also building a good relationship with CenCal Health and the Holman Group to transfer care for M/C clients with mild to moderate levels of impairment to providers with the Holman Group.

Next Meeting: February 24, 2015; 3 – 5pm @ SLO County Library