

ACA Planning Group MEETING NOTES



Public Health
Prevent. Promote. Protect.

San Luis Obispo County

**Tuesday, January 21, 2014
3:00 PM to 5:00 PM**

In Attendance:

Frederick	Aguilera	CHC	Nora	Kelly	Health Agency- PH
Anna	Bastidos	Morris & Garritano Insurance	David	Kilburn	ASN/SLO Hep C
Dave	Bernhardt	Transitions-MHA	Abby	Lassen	CA Rural Legal Assoc. Volunteer
Jill	Bolster-White	Transitions MHA- ED	Christina	Lefevre-Latner	Cal Poly CSU Health Insurance Proj.
Rich	Burke	Provider Services	Krista	Morley-Vega	CenCal Health
Penny	Borenstein	Health Agency- PH	Elena	Ramirez	ASN/SLO Hep C
Becca	Carsel	First 5-Health Access Consultant	Joe	Serrano	APA-Alliance for Pharm. Access
Joel	Diringer	Diringer & Associates	Jennifer	Shay	Health Agency- PH
Lynn	Enns	Health Commission	Betsy	Umhofer	Congresswoman Capps
Ron	Freeman	Susan Polk Insurance	Craig	Wood	CHC

Welcome, Introductions, and Updates

Joel Diringer, of Diringer and Associates, welcomed the stakeholder representatives and asked each person to introduce themselves and provide any updates:

- Cristina Lefevre-Latner announced that she is evaluating the implementation of the ACA for her Master's thesis and is seeking stakeholder input in the form of a survey she will be emailing to the group.
- Craig Wood announced that CHC has new clinic in Grover Beach with homeless services and behavioral health. Services are free for the homeless. In addition, CHC just hired two psychiatrists and is hiring more mid-level providers.
- Mr. Diringer announced that he will be presenting a webinar on how health care reform affects immigrant families and invited stakeholders to register or watch the recorded video at slohealthaccess.org.

Updates on Enrollment in Medi-Cal and Covered California

Mr. Diringer presented the following report (slide presentation is available on SLOpublichealth.org/ACA, under Meeting Materials):

- Anthem extended the deadline for payments until January 31 for Jan 1 enrollment.

Statewide Enrollment

- 625,000 enrolled for Covered CA health insurance and selected plans through January 15
 - Covered CA doesn't know how many of these people were previously uninsured, versus people who had non-ACA compliant insurance plans that were cancelled
- By end of 2013, 584,000 applicants were determined likely eligible for Medi-Cal; Plus 630,000 LIHP enrollees transitioned to Medi-Cal
 - Statewide, there have been over 1 million new Medi-Cal enrollees
- In Covered CA:
 - 84% received subsidies
 - 17% under age 25; 52% over age 45
 - 20% Latino; 6% Spanish speakers

Local Enrollment

- Department of Social Services (DSS) reports (as of 1/13/14)

- 2291 new approved Medi-Cal applications
- 273 approved Covered CA applications - 80% subsidized
- 1006 Medi-Cal applications pending verifications
- 1500 pending Covered CA applications
- Cen Cal reports (as of 1/8/14)
 - 938 new ACA Medi-Cal enrollees
 - 843 adults; 40 children; 10 misc.

Observations

- Enrollment
 - The 3300 Medi-Cal applications have reached approximately 20% of estimated eligibles
 - No local data on Covered CA enrollment forthcoming
 - Open enrollment continues through March for Covered CA; all year for Medi-Cal
 - Not clear if reaching the “hard to reach” populations
- Provider networks
 - Anthem Provider Directory – not on line as of last week
 - Blue Shield directory – on line
 - Anecdotal reports differ from health plan lists

Today, the CalHEERS (the system that does the MAGI calculation) and CalWIN systems were finally integrated, meaning DSS workers may now directly enroll Medi-Cal applicants and will no longer need to re-enter information from one system to the other. Applicants still have to upload, fax, mail, or bring documents to DSS for income or other verification. It was also noted that once a client is approved by DSS for Medi-Cal and receives an initial BIC card (white Beneficiary Insurance Card), the client is on fee-for-service Medi-Cal until CenCal is able to enter them into their system and issue them a CenCal card. This could be 30 to 60 days later. It was unclear who the fee-for-service specialty providers are, but CHC is the primary care and accepts fee-for-service.

Update on Provider Networks

Ron Freeman, Certified Enrollment Agent of Susan Polk Insurance, suggested people find their plan’s providers through the insurance companies instead of the Covered CA website. The Anthem provider list is available at: www.anthem.com/ca >Find a Doctor. Anthem identifies the Covered CA plans as “Pathway X (plan type)/ Individual via Exchange.” The Blue Shield provider list is available at www.blueshieldca.com>Find a Provider. Blue Shield identifies the Covered CA plans “2014 Individual and Family PPO or EPO Plans (including Covered CA).” Mr. Freeman noted that anecdotal reports from clients are that some doctors listed are not accepting the Exchange insurance plans.

Feedback on Outreach and Enrollment From Non-Profits

AIDS Support Network staff said that Covered CA enrollment has been a very frustrating experience. Handwritten applications that were sent to Covered CA were lost by Covered CA. Follow-up with each application has been time consuming. Several people whose applications were completed in the last week of October are still Medi-Cal pending. People get different letters and documentation from Covered CA – some don’t get welcome letters, while others do and some get a letter about their subsidies, but some don’t, and some letters are missing key information. David Kilburn warned that Covered CA added a shortcut for enrollment counselors to create applications, but that shortcut eliminates access down the road for the client. They have found that it’s better for the client to build their own account and then turn it over to the Certified Enrollment Counselor. ASN staff has been building relationships with partner organizations to expedite applications and help clients get medications during the transition.

In discussion, Mr. Diringer said that he understood that Covered CA is not forwarding leads they receive to Certified Enrollment Counselors or Agents and are just sitting on them. Cristina Lefevre Latner, of the Cal Poly - CSU Health Insurance Project, said that they now directly refer people to enrollment counselors rather than only sending leads to Covered CA because none of their Covered CA leads were contacted by an assister.

Craig Wood from CHC reported that enrolling clients in Covered CA has been very difficult for them as well. The latest issue is that homeless patients are being denied Medi-Cal because they applied using the Prado Day Center as their address and, apparently, Covered CA interprets multiple uses of the same address as potential fraud. Frederick Aguilera, coordinator for the CHC Certified Enrollment Counselors, added Covered CA is overloaded and phone calls are not being answered. One problem they are having is that the application printout shows responses that are not what was selected online, such as all women are automatically entered as pregnant.

CHC staff assisted with 1350 applications, including those in Santa Barbara County, but it's not known how many completed enrollment or were approved. About 80% of the applications at CHC are for Medi-Cal. Any uninsured patient who comes into CHC is assisted with an application.

A discussion ensued about how people who are Medi-Cal pending can demonstrate this to CHC if they need services now, but have no proof yet that they've enrolled. Craig Wood said that CHC staff can verify enrollment. CHC is also able to get around the Medi-Cal backlog by qualifying people to pay via a sliding scale fee and sending them a bill, but telling them to not pay it because CHC will back bill Medi-Cal once the patient is enrolled. Health Officer Dr. Penny Borenstein said that the CHC Pharmacy was not doing this and was turning patients away without their medication. Mr. Wood said he believed Medi-Cal pending clients can access an emergency 30 day supply at their pharmacy. Abby Lassen, volunteer at the CA Rural Legal Assoc., asked if Mr. Wood would investigate this further.

Changes in CMSP and New Medically Indigent Services Program (MISP)

Dr. Borenstein reported that 36,000 legal residents in the county were uninsured when health care reform began and there may be a few thousand fewer uninsured residents now. There are also about 7,000 undocumented residents who do not qualify for Medi-Cal or insurance subsidies. About 80% of CMSP clients were in the Medi-Cal income range (0 to 138% FPL), and Public Health worked with DSS on enrolling CMSP clients into Medi-Cal, plus many, many more enrolled with help from CHC's Certified Enrollment Counselors.

Dr. Borenstein said the new MISP is intended for those low-income residents not eligible for Medi-Cal because their income is just over the maximum (between 139 - 250% FPL), and yet have not been able to get insurance coverage. The Health Agency and DSS intended the new MISP eligibility requirements to become effective January 1, but the Board of Supervisors decided they wanted residents to continue to be eligible under the old requirements until April 1, after enrollment closes for Covered CA insurance plans. The April 1 MISP requirements are more restrictive in that applicants must also demonstrate that the state has granted them an exemption from the individual mandate to obtain health coverage due to a lack of affordability or other qualifying hardship. However, the Covered CA exemption process is not yet in place, and if it is still not in place by April 1, the Health Agency and DSS will likely develop an internal process for determining a qualifying hardship for MISP eligibility.

A group discussion arose about some confusing information coming from DSS about MISP and the lack of clear communication with providers about the new program. Dr. Borenstein said some aspects of the program are not yet in place and suggested people contact Nora Kelly, the Public Health Department's liaison for CMSP and MISP, at 781-4815, with any questions about MISP.

The Residually Uninsured

Dr. Borenstein stated that, unfortunately, this doesn't change with health care reform. Some won't apply for insurance during open enrollment and others won't apply for Medi-Cal until they have a serious health problem. Mr. Diringier noted that emergency Medi-Cal coverage for undocumented residents is greatly expanded.

Results Planning Group Participant Survey

Mr. Diringier reported the following modest results and asked more people to complete the survey:

- 7 responses: 100% attended 3+ meeting; 50% NFPs, 16% Providers; 33% County;

- 85% found information extremely or very useful
- 71% found meeting organization and facilitation was excellent or very good
- All found day/time/local were very/somewhat convenient
- 85% said meeting should be monthly
- FutureTopics:
 - ACA enrollment – updates and collaboration
 - ACA changes
 - CMSP transition; CenCal enrollment
 - Mental health

Mr. Diring said he will invite representatives from the two main physician groups in the county to talk at the **next ACA Planning Group meeting: Tuesday, February 18, 2014, 3:00 – 5:00pm, at the SLO City-County Library.**

Visit the ACA Planning Group webpage at SLOpublichealth.org/ACA for meeting information, materials, and resource links.