

ACA Outreach, Education & Enrollment Group

OEE MEETING NOTES

Friday, October 18, 2013

2:00 PM to 3:30 PM

SLO Public Health Department



Public Health
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San Luis Obispo County



In Attendance:	Ayers	Peggy	County DSS
	Borenstein	Penny	County Public Health Dept.
	Burke	Rich	Zybex Medical
	Carsel	Becca	First 5-Health Access Consultant
	Diringer	Joel	Diringer & Associates
	Dudley	Pam	County Public Health Dept.
	Gonzales	Gloria	County Sheriff's Office
	Kilburn	David	ASN/SLO Hep C
	McIntosh	Grace	CAP SLO
	Quennell	Colin	County Drug & Alcohol Services
	Rabanal	Ophelia	Jail to Jobs& AARP Volunteer
	Shay	Jennifer	County Public Health Dept.
	Thomas	Catharine	Cal Poly – CSU Health Ins. Project
	Wood	Craig	CHC

Covered California Launch

While not as rough as the launch of the federal exchange, OEE partners reported the Covered California launch had plenty of its own glitches.

Community Health Centers of the Central Coast (CHC) and the AIDS Support Network (ASN) reported that many of their Certified Enrollment Counselors (CECs) had not yet received official certification from Covered California. As of 10/12/13, Covered California reported they had certified only 279 CECs statewide and 3,824 certifications were pending. Without certification, CHC has been unable to enroll people using CalHEERS. ASN also reported that the CalHEERS system cannot complete enrollment for individuals who also need ADAP enrollment due to a technical conflict, which is expected to be resolved soon. CAPSLO is still uncertain if they will have staff trained as CECs.

The latest press release from Covered California announced that 94,500 applications were started, yet provided no information on how many were completed.

Updates on Community Efforts

The Covered California website had not yet published a list of local CECs available to assist the public. CHC noted that their CECs will be conducting in-reach only and will not be available for public referral. ASN said they did agree to enroll persons other than their clients if capacity allows. CAPSLO said it would only do internal clients.

CHC: Without access to CalHEERS, CHC could not act as CECs, but instead performed the role of Assisters and helped over 250 people complete paper Medi-Cal applications which were then submitted to DSS.

Public Health: Enrollment efforts at Public Health also got off to a slow start, but results improved by the end of the second week. With help from DSS, Public Health enrolled 57 CMSP clients into Medi-Cal, 6 into a Covered California insurance plan, and partially completed another 27 applications. Public Health converted an office space into an enrollment hub where clients waiting to meet with a CMSP eligibility worker are invited to use one of three computer stations to research and enroll in coverage

using the Covered California consumer website. DSS loaned CMSP an eligibility worker for October and November to work in the enrollment hub helping CMSP clients use the computers, navigate the website, and answer enrollment questions. Many CMSP clients were eager for the assistance and online access.

DSS: During the first week of enrollment, the SLO County DSS call center processed the highest number of Covered California referral calls than any other county in the state. Training provided by Covered California was delayed and, consequently, other call centers were not fully staffed by October 1. SLO DSS, on the other hand, took the proactive approach and developed their own training program to ensure their call center was fully staffed with trained personnel. In addition, DSS will mail 10 thousand informational letters next week to individuals with open DSS cases but not enrolled in Medi-Cal.

The Future of CMSP: Dr. Borenstein was asked to tell the group what CMSP is going to look like in 2014. Although CMSP is closing its doors as of 12/31/13, the Health Agency is planning for a much smaller program, called the Medically Indigent Services Program (MISP), which will accommodate residual medically indigent adult clients depending on eligibility criteria, such as an exemption from the coverage mandate.

DSS will perform the MISP eligibility functions and the Health Agency is talking to CenCal Health about performing the administrative functions. In early December, the three CMSP eligibility technicians will transfer to DSS to begin their training. Other CMSP staff will continue in their current positions for a while after the 12/31/13 closing date to process accounting work and other office duties.

The Health Agency does not know what costs to expect for the new MISP. All counties are uncertain about what obligations under Welfare and Institution Section 17000 remain in a post ACA environment. Nevertheless, in December, the Health Agency is presenting its recommendations to the Board of Supervisors regarding the County's position on how the state will calculate their take back of realignment funding for indigent medical care.

CSU Health Insurance Education Project (HIEP) at Cal Poly: Cal Poly HIEP announced they were holding five workshops on campus to provide students and the public an opportunity to learn about the ACA. Catherine Thomas will send the flyer to the group.

Outreach Materials Swap Meet: OEE partners were asked to bring any unwanted or extra ACA outreach materials they may have to the 10/29/13 ACA Planning Group meeting for a swap meet of sorts.

DHCS Outreach & Enrollment Grant Opportunity

Assembly Bill 82, Section 71, requires DHCS to accept a \$12.5 grant from the California Endowment, apply for federal matching funds, and use the \$25M as grant funding for county projects supporting Medi-Cal outreach and enrollment efforts. DHCS has not disclosed the potential award amounts and is instead waiting for counties to submit their funding requests before they will determine how much they have to award. DHCS is collaborating with Covered California to establish program criteria, training, and best practices. The grant application is in the form of a survey and will be released to counties next week, with a due date of November 15, and awards announced late November. Multi-agency applications are encouraged. Local health or social service departments are encouraged to apply. A community benefit organization may apply only if the county entity does not want to apply. Dr. Borenstein has discussed the grant opportunity with DSS and decided to collaborate, with Public Health taking the lead. Priority efforts will be aimed at enrollment assistance for Behavioral Health clients and Jail inmates. None of the CBOs present requested to be included as a sub-grantee, though there was interest in including homeless persons as a priority target group.

Besides the grant award, DHCS will use the Endowment funds to compensate Certified Enrollment Counselors (CECs) \$58 per successful Medi-Cal application. This program is run by Covered California and mirrors their Assistants Program which does not consider Public Health Departments eligible entities.

No date was set for the next OEE Group meeting.