SAN LUIS OBISPO COUNTY
HEALTH COMMISSION
Minutes of Meeting
Monday, August 12, 2013 (County Board of Supervisors Chambers)

Members Present: Lynn Enns (Chair), David Clous, Tracy Del Rio, Ed Guerena, Jean Raymond, Mary Jean Sage, Susan Warren
Members Absent: Gill Blonsley, James Pope, Anne Quinn, Scott Smith-Cooke
Staff Present: Penny Borenstein, Jean White
Speakers: Joel Diringer, Diringer & Associates

Agenda Item	Discussion	Action	Who/When
1. Call to Order	Meeting called to order by Chair Enns at 6:00 pm.	*Call to order*	*Chair Enns*
2. Approval of Minutes	Minutes of June 10, 2013 and July 8, 2013 were approved as drafted.	*June and July minutes approved.*	*All*
3. Public Comment	Chair Enns opened the floor to public comment with no response.		
4. Presentation: Health Care Reform 101	**Joel Diringer, Diringer and Associates**, provided a Power Point overview of the Affordable Care Act, that was passed in 2010 and is now being implemented with a January 1, 2014 deadline. Mr. Diringer played a short video released by the Robert Wood Johnson Foundation titled *"Affordable Care Act: Big Changes to Health Insurance"* and talked in more detail about areas of the Act: • Health plan changes: health insurance companies will now provide health insurance to everyone who applies, no annual/lifetime limits, no pre-existing condition exclusion, children up to age 26 can be on their parents' policies. • Individual mandates: mandated insurance for every legal resident of the US, w/penalties for those who don't have insurance (some exemptions). Plans must have minimum essential coverage. • Employer responsibilities: Employers with 50+ full time equivalent employees must offer employees (does not include dependents) affordable insurance w/ minimum essential coverage (this has been delayed until 2015). There are currently tax credits available to small businesses with fewer than 50 employees. • Expansion of MediCal: California has opted to expand MediCal to cover everyone under 133% of the poverty level (approx. $14,000 for an individual). MediCal will still be available for children up to 250% of the poverty level. There will no longer be an asset test for MediCal. • Covered California (California's Health Benefit Exchange): The Exchange is a State agency with an independent commission set up to do competitive bidding for health plans that have to meet certain requirements, offer essential health benefits, offer the same categories of coverage and apply all other limits. There is subsidized coverage for individuals who don't have employer or public coverage up to 400% of the federal poverty level (14,000 to 44,000 for individuals). In California, there will be four levels of plans available based on actuarial value called the metal levels (bronze, silver, gold, platinum). The bronze plan is calculated between its premiums, copays and deductibles with the insurance company paying 60% of medical bills and the consumer paying 40%. Bronze is the lowest plan - 60% actuarial value. The platinum plan is a 90% actuarial value. The coverage is the same; the difference is in the premium that you pay, the co-pays and whether you have to meet a		

deductible. Every plan has to offer 4 levels. There is a 5th level which is a catastrophic plan that is offered only to persons under age 30. Premiums are assessed by age, geography and family size and no longer based on medical conditions. The oldest person can pay no more than 3 times the amount of the youngest person. Open enrollment period (in the first year) begins on October 1st and ends on March 31st. Years after that have a much shorter enrollment period October 1st through December 8th, with coverage beginning on January 1st.

- How this is paid for: There is now a 10% tax on tanning salons, additional taxes on health plans, pharmaceutical companies, medical device companies; additional Medicare tax (on higher income people), and a new net investment tax (on net investment income over $250,000).
- Other pieces in the Act: Medicare is basically unaffected. There is quite a bit on preventive health. There is also additional payments to primary care providers who provide services under MediCal to encourage more primary care providers to accept MediCal for two years. The ACA does not include anyone who is not lawfully a resident in United States, but MediCal expansion will cover emergency MediCal available to everyone regardless of their citizenship status. There will be additional emergency coverage.
- Local implementation: Based on local surveys, there are approximately 40,000+ uninsured in SLO County. Approximately 7,000 are non-citizens. It is estimated that approx. 18,000 to 25,000 will be eligible for MediCal expansion, and 14,000 will be subsidy-eligible in the Exchange. The Exchange is estimating that enrollment from SLO County will be about 10,500 in the first year. The available plans in SLO County will be Blue Shield PPO and Anthem PPO. For a 40-year old single person in the silver plan (70% actuarial) premiums are $314-$326/month, however subsidies depending upon income could reduce the premium to $46-$326/month. There is a calculator on the Covered CA website to help calculate premiums & subsidies based on one's age and family size.
- Enrollment: You can access the Exchange through their toll free number or website, CoveredCA.com. The County Department of Social Services is gearing up to do major MediCal enrollment for the expansion population. There will also be enrollment efforts by private health insurance companies & brokers.
- CMSP: There are a lot of questions about who, if any, will be left in the pool as being CMSP eligible. There will be a lot of work by the CMSP workers along with DSS in getting as many of these folks onto MediCal and onto the Exchange come January 1st.
- ACA Planning Workgroup: Dr. Borenstein convened and Mr. Diringer has been facilitating the monthly ACA Planning group meetings. Several commissioners have been attending these meetings. The group comes together to both educate and be educated and to get everyone on the same page in terms of how the ACA is going to be implemented in SLO County. There are two subgroups: Outreach, Education & Enrollment and Access to Specialty Services & Care Coordination.
- Resources: Federal (healthcare.gov, cuidadodesalud.gov, kff.org); State (CoveredCA.com, healthexchange.ca.gov, itup.org); and local (slopublichealth.org/aca, slohealthaccess.org).

Health Commissioner Questions/Comments:

Commissioner Warren: Asked about the timeline for enrollment into MediCal for those persons who are on CMSP. *(Mr. Diringer explained that beginning October 1st, you can begin an application for*

	MediCal. The technicality of how that information gets transferred to DSS and how it gets processed is still unclear. You can complete an application through the Exchange for Covered California to begin January 1st. If you want coverage to begin January 1, 2014 through the Exchange, you have to complete your application by December 15th. If you go beyond the 15th, your first day of coverage through the Exchange will be February 1st.) **Commissioner Warren**: Asked about those who are not eligible for MediCal and who do not have employer insurance, and whether there will be a group of people who might not be able to afford insurance with the only two options being Blue Cross & Blue Shield in SLO county. *(Mr. Diringer explained that there are subsidies for lower income people. The magic number for a hardship exemption from the individual mandate is when the cost of insurance exceeds 9.5% of a person's income.)* **Commissioner Enns**: Asked if Medicare supplemental plans will be affected by the ACA. *(Mr. Diringer is unsure and unaware of any changes in supplemental plans.)*		
5. Health Agency / Public Health Report	**Dr. Penny Borenstein, Health Officer** thanked Joel Diringer for his work and knowledge on the Affordable Care Act and provided a brief update on the following: • **CMSP transition**: The Health Agency (HA) has been working closely with the Department of Social Services (DSS) on transitioning the eligibility function from the HA to DSS. It will be a little complicated to figure out who the remaining CMSP eligible are. The impacts to the Public Health Department from State realignment don't look quite as dramatic as reported last month. The HA has until October 1st to run the actual calculations on the various options that are available to each county and then the recommendation will be made by the HA and County Admin to the Board of Supervisors who must take official action by Dec 4th on which version of the realignment giveback to the State they will use. • **Federal sequester**: Won't know the full impact on the HA budget until a federal budget is signed, but there has been a bit of a cut to the immunization grant and the Maternal & Child Health block grant, with some of the others still being debated. • **Environmental Health has been inundated with requests for well permits** related to the water basin discussions that are occurring at the Board of Supervisor level. The uncertainty has led to quite a few requests for permits for wells to be approved in the short term not knowing when and if there will be restrictions. • **The Centers for Disease Control & Prevention runs a national program called Public Health Associates Program** and has provided the Public Health Department with two more interns for a period of two years who will work in the Health Promotion area. Public Health had one intern previously whose two year term had just run out. • **The Public Health Department received a renewal of the Injury Prevention Grant** through the State Office of Traffic Safety. A lot of work has been done in this area between the interns and the support from this grant for one full time health educator. The Injury Prevention Coalition is looking at pedestrian safety, particularly in elders, bike safety, and correct car seat installation. • **Flu vaccine** is starting to become available in some sectors in our county, with more coming in the near future.		

6. Health Commissioner Updates	**Chair Enns**: Reported that she and a few other commissioners have been attending the ACA Planning meetings. She also attended the Public Health Emergency Preparedness (PHEP) Advisory Committee meeting where they reviewed the emergency response to the recent power outage. Lots of good input and interesting to hear how much information was transmitted via either Facebook or Twitter. She also reported that the County Medical Reserve Corp will be having a booth to teach "hands only CPR" at the Old Navy Kids Safety event on Sept. 7th and at the Sheriff's Family Day at the Ranch held at the Madonna Inn on Sept. 14th. Chair Enns also attended the Mobility Management Summit in July that included discussion on transportation issues for people with health issues – more information can be found at www.rideshare.com or by calling 511 to get information on transportation options. **Commissioner Guerena**: No report. **Commissioner Sage**: Reported that the Domestic Violence Task Force met and is putting together their annual educational meeting for October (Domestic Violence Awareness month) with a focus this year on mental health services. **Commissioner Del Rio**: No report. **Commissioner Warren**: No report. **Commissioner Raymond**: The Adult Services Policy Council met on August 2nd and included two reports on Senate Bill 391, Affordable Housing Development & Financing. **Commissioner Clous**: Reported that the Tobacco Control Program is currently involved in a large statewide survey that is looking at the availability of healthy food and drink options in stores. 10,000 stores have been randomly selected in California, with 159 stores in San Luis Obispo. This survey is very extensive looking at what products are sold (tobacco products, alcoholic beverage, healthy food & drink options) and how they are marketed. Survey will be completed by August 20th.		
7. Committee Reports	**Commissioner Raymond, Chair of the Community Education Committee,** reported that the committee met and discussed agenda topics for the next 6 months that will focus on the Affordable Care Act. The Committee will meet in January to review topics for the remainder of the fiscal year.		
8. Prospective Future Items	**September 2013:** • Covered California / MediCal – how and where to get insurance **Future:** • Commissioner Warren would like to include a report from the ACA Care Coordination subcommittee (sometime in the next few months) as that committee looks at issues related to provider capacity.		
9. Adjournment	Meeting adjourned at 7:25.	*Adjournment*	*All*