Medi-Cal to Covered California Auto Enrollment

Alicia Emanuel, Cori Racela & Jasmine Young June 28, 2023







About Western Center on Law & Poverty

Western Center on Law & Poverty seeks to eliminate poverty and advance racial and economic justice by dismantling and transforming systems so all communities in California can thrive.

Through the lens of economic and racial justice, Western Center on Law & Poverty fights in courts, cities, counties, and in the Capitol to secure housing, health care, and a strong safety net for Californians with low incomes.

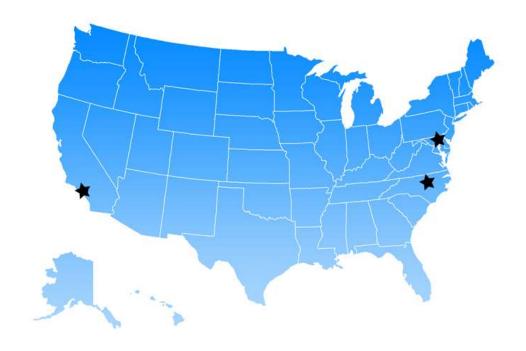
What we do:

- State legislative and budget advocacy
- Administrative advocacy at state and local levels
- Impact litigation
- Technical support to legal aid organizations



About the National Health Law Program

- National non-profit law firm committed to improving health care access, equity, and quality for underserved individuals and families
- Offices: CA, DC, NC
- State & Local Partners in 50 states + Washington DC



Background on SB 260

- In 2019, Western Center & Health Access co-sponsored SB 260 (Hurtado) to create an auto-enrollment mechanism to transition people without a break in coverage when they moved from Medi-Cal to Covered California eligibility.
- In March 2020, as part of COVID-19 relief legislation, Congress provided increased Medicaid funding to states.
- HHS implemented a "continuous coverage" requirement that prohibits states from terminating most Medicaid enrollees' coverage until after the PHE ends.
- The Consolidated Appropriations Act, 2023, which took effect December 29, 2022, delinked the Medi-Cal continuous coverage requirement from the ending of the PHE.
- SB 260 authorizes Covered California to automatically enroll individuals in a qualified health plan once they lose Medi-Cal coverage and become eligible for advanced premium tax credits (APTCs). This program was set to activate once the Medi-Cal continuous coverage unwinding began in April 2023.

What to Expect During the Implementation Process

Covered California Enrollment

July 1 - Covered CA enrollment in the lowest cost silver plan begins.

July 31 - Last day for individuals to opt-in or make the binder payment to keep the selected plan.

August 29 - Last day to: (a) change the selected plan or (b) select a plan if an individual opted-out or missed the payment/opt-in deadline.

April - June 2023

July - August 2023

Medi-Cal Renewals Resume

Medi-Cal renewal activities began for individuals with a June renewal month. For those who are no longer Medi-Cal eligible, the last day of Medi-Cal eligibility will be June 30.

August 2023 - Ongoing

This process is ongoing for Medi-Cal renewals in subsequent months.

5 Top Things to Know About SB 260

- 1) Lowest-cost Silver plan
- 2) Keep, Change or Cancel
- 3) Effectuating Coverage
- 4) Special Enrollment Period
- 5) Notices & How to Get Help

Which Covered CA Plan Will Individuals Be Enrolled In?

- Generally, individuals will be enrolled in the lowest-cost Silver Covered CA plan
 - In the future: Covered CA may develop functionality to enroll individuals in the managed care plan they had for Medi-Cal
 - Why? Continuity of care

• Exceptions:

- Individuals with family members already enrolled in Covered CA
 - May be enrolled in the family's existing health plan unless it is a Bronze plan
 - Why? Keep families together
- AI/AN will be placed in lowest cost AI/AN health plan

Enrollment Timing

- Covered California enrollment begins the day after Medi-Cal coverage ends
 - Eg. Medi-Cal ends January 31st & Covered CA coverage begins February 1.
 - 1st month of enrollment via SB 260: July 2023

Why?

- Avoid gaps in coverage
- Ensure seamless access to coverage and care

Keep, Change or Cancel



You Have Options

If you do not think this plan will work for you, there may be other insurance companies in your area.

Visit your Enrollment Dashboard to:

- · See the full details of your plan
- Find your doctor
- · Compare other plans
- Change plans







Change Plan







How to effectuate coverage

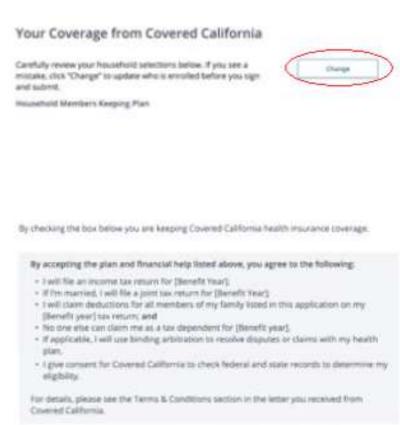
Coverage starts the first day of the month after losing Medi-Cal (e.g. July 1)

To effectuate/keep coverage, the transitioner must do the following by the last day of the first month of coverage:

- If you have a \$0 net premium => must accept the terms & conditions of receiving APTCs
 - Must be done by last day of the first month of coverage (e.g. July 31)
 - Can accept terms & conditions by phone with the Service Center/IVR
- If you have net premium that is \$1 or more => must pay the binder payment
 - The binder payment = first month's premium
 - Binger payment cannot be due before the last day of the first month of coverage (e.g. July 31)

Effectuating coverage for \$0 net premium





I confirm that I have read and agree to the terms and conditions stated above.

Your Coverage from Covered California Carefully review your household selections below. If you see a mistake, click "Change" to update who is enrolled before you sign and submit.

By checking the box below you are keeping Covered California health insurance coverage

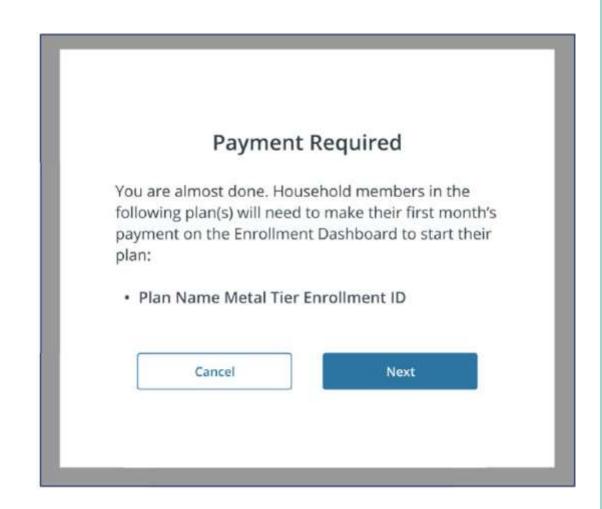
By accepting the plan and financial help listed above, you agree to the following:

- I will file an income tax return for [Benefit Year]
- If I'm married, I will file a joint tax return for [Benefit Year]
- will claim deductions for all members of my family listed in this application on my [Benefit Year] tax return, and
- No one else can claim me as a tax dependent for [Benefit Year]
- If applicable, I will use binding arbitration to resolve disputes or claims with my health plan.
- I give consent for Covered California to check federal and state records to determine my eligibility.

For details please see the Terms & Conditions in the letter you received from Covered California.

Effectuating Coverage with Binder Payment

- If you have a \$0 net premium
 => must accept the terms & conditions of receiving APTCs
- If you have net premium that is \$1 or more => must pay the binder payment
 - The binder payment = first month's premium
 - Binger payment cannot be due before the last day of the first month of coverage (e.g. July 31)



How Individuals Can Opt Out

Passive opt-out: don't effectuate coverage

Active opt-out: call the Covered CA Service Center or use their ChatBot

Interactive Voice Response (IVR)

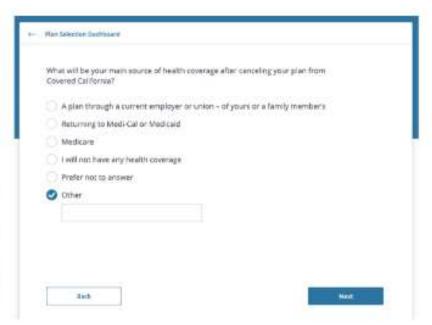
The Covered California Service Center IVR will be updated to allow consumers to complete their actions via phone.

- Consumers will need to complete the authentication process (Zip, DOB, Full SSN)
- Consumers will be able to Opt-In or Opt-out of coverage
- Consumers can request assistance from a Service Center Representative (SCR) anytime during the process if needed

ChatBot (CiCi)

The Covered California Chatbot, CiCi, will provide consumers with 24/7 online access to:

- Answers to frequently asked questions related to their transition from Medi-Cal to Covered California.
- Ability to authenticate (e.g., Zip, DOB, Full SSN) in order to Opt in to keep or Opt out to cancel their coverage
- Directions on how to change their plan online or by connecting with a Service Center Representative (SCR)
- LiveChat with a SCR.





Special Enrollment Period (SEP)

Qualifying Life Event: Loss of Medi-Cal coverage **Special Enrollment Period**: 60 days before and after loss of coverage

• For people losing Medi-Cal on June 30, the SEP lasts until August 29

What can transitioners do during the SEP

- For keepers: Change plans* up until last day of SEP**
- For opt-outers (passive or active): shop for a plan until last day of SEP
- * Plan changes are prospective only.
- ** People at or below 150% FPL can change plans anytime during the year.

SB 260 Notices

- Covered CA created a new version of the Eligibility Determination Notice (NODO1T). This customized notice includes information on:
 - Plan enrollment & financial assistance
 - Options to keep, switch or cancel
 - How to get help
 - Note: Mailed with educational flyer
 - Explains financial help, health insurance terminology, and out-of-pocket costs
- Coverage cancelation notice
- Notice for households with Medi-Cal procedural terminations

07/15/2023

Case Number: 1234567890 Online Access Code: dt56lF



Welcome to Covered California!

Dear John Smith,

Covered California is a state agency that works with Medi-Cal to help Californians access affordable health care. Covered California is the only place to get federal financial help to buy a private health plan if you do not have coverage through a job or another program like Medi-Cal or Medicare.

Your Medi-Cal is ending. Covered California is here to help you stay covered.

You recently got a letter that your Medi-Cal program coverage is ending. California law requires us to use the household and income information you reported to Medi-Cal to help you enroll in a new Covered California health plan with financial help. We picked a health plan with the most financial help available. To start your coverage on 08/01/2023, you need to confirm the plan we picked for you.

Name	Plan	Monthly premium	Financial help	Amount you pay
John Smith - New	Kaiser - Silver 94 HMO	\$535.00	-\$535.00	\$0.00



Welcome to Covered California

Get help with your health insurance.

Covered California makes getting health insurance easier, with financial help for millions of Californians and free assistance to compare your options.

9

We can help you go from Medi-Cal to Covered California. You have options to choose from. We're here to help!

Cost savings

Many Californians can get covered with a low or \$0 monthly premium and save thousands of dollars a year.

Choose a plan from brands you know and trust.

Every plan we offer covers the important things
like routine wellness exams, emergency care and mental health.

After you enroll

After you complete your enrollment, your health plan will send you a welcome packet with information about your coverage and a member ID card.

Make the most of your coverage

An in-network provider will cost you less than an out-ofnetwork provider. Use your free preventative care for yearly flu shots, screenings and wellness exams. Get full coverage for prescriptions by using an in-network pharmacy.

Your plan benefits

The chart below shows costs for popular services. This plan offers the most cost savings based on your household information. There are other plans you can choose. To shop and compare plans, log in to your account at CoveredCA.com/new-plan.

Silver 87		
Annual wellness exam	\$0	
Generic medication copay	\$5	
Primary care visit copay	\$15	
Mental health services	\$15	
Urgent care visit copay	\$15	
Emergency room copay	\$150	

This list does not include all copays, coinsurance, deductibles or your out-of-pocket maximum. Log in or call us for full details.

Example

- In June, Alicia received a Medi-Cal notice stating that she is no longer eligible for Medi-Cal and that coverage will end on June 30th. Then, Alicia received a notice from Covered CA stating that she will be automatically enrolled in the lowest-cost Silver plan available on July 1st with a \$30 premium (non-zero dollar premium).
- Alicia must take an active step to either keep, change or cancel the Covered CA health plan she is enrolled in. If Alicia decides to keep the Covered CA health plan, she must effectuate her coverage by paying \$30 by July 31st. She can also switch which plan she is enrolled in. If Alicia takes no action, her enrollment will be canceled.

Resources

- NHeLP/Western Center Factsheet
 - https://healthconsumer.org/your_rights/medi-cal-to-covered-ca-sb260/
- Covered CA Resources
 - Toolkit https://hbex.coveredca.com/toolkit/downloads/Medi-cal-to-covered-california-enrollment-program Toolkit.pdf
 - Landing Page https://www.coveredca.com/keep-your-coverage/
 - Dedicated Phone Line 1-800-816-4725
- ACWDL https://www.dhcs.ca.gov/services/medi-cal/eligibility/letters/Documents/22-20.pdf
- Need Help?
 - Contact the Health Consumer Alliance
 - 1-888-804-3536
 - https://healthconsumer.org/
 - · Free legal assistance for health care consumers across CA



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