Health4All KIDS

Medi-Cal Expansion & Health4All Kids: Tools and Resources for Communities

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Introduction

Mayra Alvarez
President and CEO
The Children's Partnership

Health4All KIDS

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Welcome

Sponsored by: Asian Americans Advancing Justice - Los Angeles, California Coverage & Health Initiatives, California Immigrant Policy Center, Children Now, Children's Defense Fund- California, Community Health Councils, Inc., Health Access, Maternal and Child Health Access, National Health Law Program, National Immigration Law Center, PICO California, The California Endowment, The Children's Partnership, United Ways of California and Western Center on Law & Poverty

Webinar objectives

Educate stakeholders about the details of the Health4All Medi-Cal kids expansion

Enlist share information so implementation is as successful as possible

Engage with communities to identify and address emerging issues and share resources

Webinar Overview & Format

Presentations

- The www.health4allkids.org toolkit
- Key facts about Health4All kids expansion
- What should you know about the Health4All Kids expansion?
- Community opportunities, challenges, & lessons

Participant engagement

Question & answer segment - via chat function (throughout the webinar)

Panel of experts will be available to answer questions

Follow-up "townhall" discussion to be held on May 6th

Health4All Kids Overview

Fatima Morales
Policy & Outreach Associate
Children Now

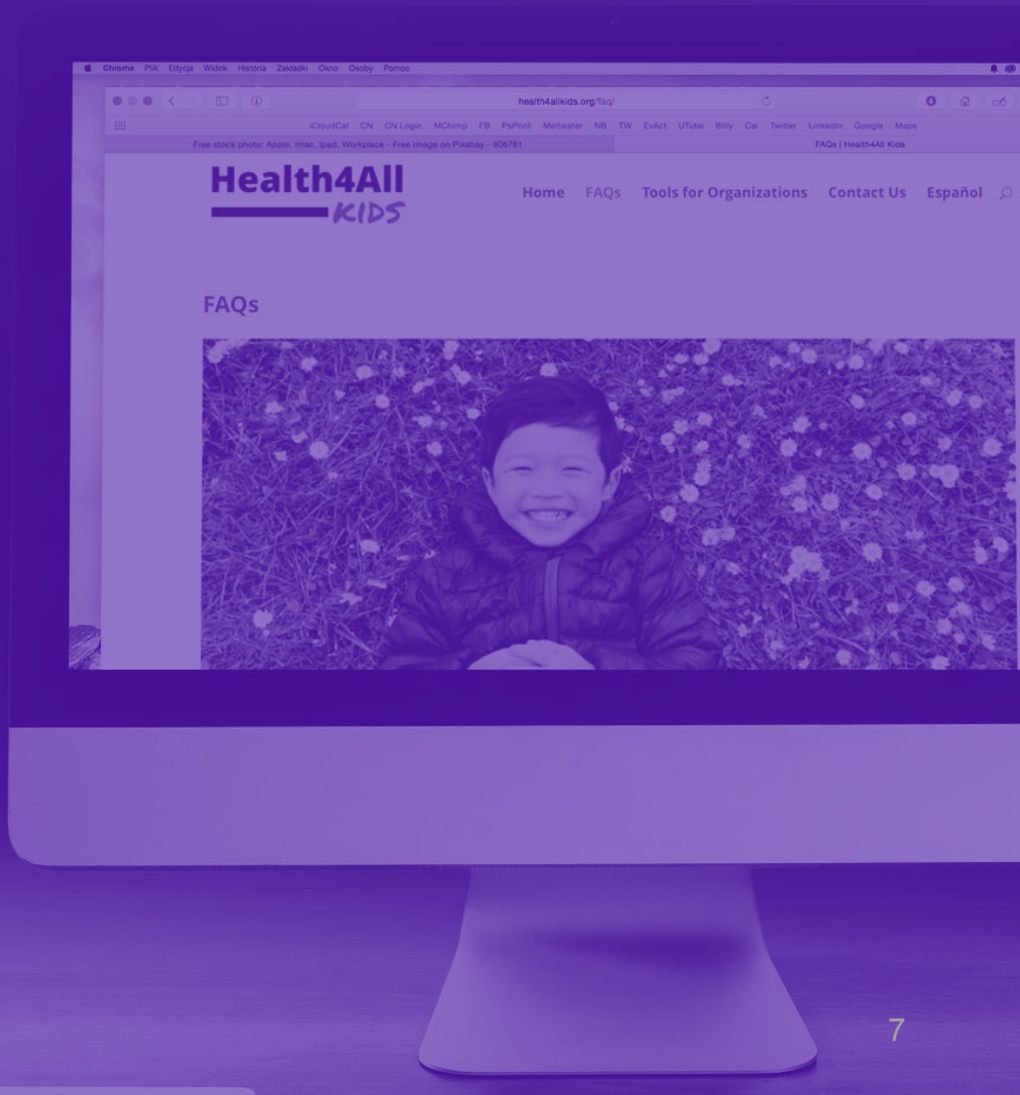
Health4All Kids Resources & Tools

Unveiling www.health4allkids.org

What's included?

Basic information and Frequently Asked Questions about the Health4All Kids Medi-Cal expansion in English and Spanish

Tools for organizations including messaging and outreach resources



Share questions & comments at:
questions@health4allkids.org

Key Facts About Health4All Kids

Senate Bill (SB) 75 and SB 4 passed in 2015

- All income-eligible children up to age 19 (<266% FPL) can enroll in full-scope Medi-Cal
- Children with restricted-scope Medi-Cal will transfer to full-scope Medi-Cal without having to reapply
- Children with county-based coverage or Kaiser must apply for Medi-Cal unless the child is already known to the Medi-Cal System
- Same enrollment rules apply as for children in Medi-Cal (choice of health plan, premiums, CCS program)

Key Health4All Kids Implementation Dates

- SB 75 indicates a program expansion date "No sooner than May 1, 2016"
- May 16, 2016 is the currently scheduled start date
- Families should enroll now to transfer in to full-scope Medi-Cal when the expansion begins
- Retroactive coverage begins on the first day of the month in which the program begins
  - For example: May 16th program start date, but coverage is retroactive to May 1st

What should you know about Health4All Kids

Jen Flory
Senior Attorney
Western Center on Law & Poverty

Cori Racela
Staff Attorney
National Health Law Program

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Medi-Cal & Immigration Status Today

Today, immigration status determines **scope** of Medi-Cal benefits

- Restricted Scope (a.k.a. "emergency" Medi-Cal)
- Full Scope services not available under restricted-scope: dental, vision, ongoing primary, preventive, prescription, specialty care mental health, substance abuse

Full scope: many immigration categories already qualify, including *PRUCOL*

Restricted Scope: primarily undocumented immigrants

What should you know about the Health4All Kids Medi-Cal expansion?

1. Medi-Cal does not share immigration information.
2. Children should apply for Medi-Cal now, even if they have other coverage or have family members with coverage.
3. Some families may have to pay a small premium for Medi-Cal.
4. Most families will need to select a health plan.

1 Medi-Cal Does Not Share Immigration Information

Privacy protections/sharing information with other agencies

- State law
- Federal official statements

Public charge & other immigration concerns

- INS rules on limits of public charge
- SSN for non-applicants

2 Children Should Apply for Medi-Cal Immediately…

Children can enroll in restricted scope Medi-Cal now

Children in restricted scope **automatically** moved to full scope on May 16
Important: **NO** other application needed with restricted scope

How to apply

- With an application assister
- By phone
- At a county office or county website
- At CoveredCA.com**

What you need to apply

- Family income information – use Tax Form 1040 as verifiable income information
- Information about other family members
  - Who is in the household?
  - Is anyone in the family already on Medi-Cal?

Children Should Apply for Medi-Cal **NOW** Even If They Have Other Coverage...

Such as:

Transitioning from Kaiser Child Health Plan

Transitioning from local Healthy Kids

County health program (e.g. My Health LA)

Many of these programs do not track whether their kids have restricted scope Medi-Cal.

Transitioning from Kaiser Permanente Child Health Plan (KPCHP)

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- No automatic transition: KPCHP members must apply for Medi-Cal if they don't already have it.
- KPCHP continues until child is in Medi-Cal plan.
- No child will be disenrolled from KPCHP solely because of SB 75 transition issues.
- Once in Medi-Cal, kids will have to choose Kaiser as their Medi-Cal managed care plan

Transitioning from local coverage programs or Healthy Kids

- Healthy Kids families should enroll in Restricted Medi-Cal, if not already enrolled
- Local programs should be messaging their members
- Based on the Healthy Kids policy, a child is not eligible for Healthy Kids if he or she is eligible for Full Scope Medi-Cal.

When Family Members Already Have Medi-Cal

No new application necessary!

- Contact county to get added to the case
- Can use form MC371, but not necessary

Deferred Action for Childhood Arrivals (DACA) and SB 75: How do these two forms of Medi-Cal eligibility relate?

- Some children can apply for DACA status
- With DACA status, Medi-Cal coverage can continue after a child ages out of SB 75 eligibility (age 19)

3 Some Families May Have to Pay a Small Premium for Medi-Cal

- Medi-Cal is free for kids with family income below 160% FPL ($3,234 for a family of 4)
- Above that, Medi-Cal monthly premiums are $13/child ($39 maximum per family)
- Premiums apply for restricted scope Medi-Cal
- No Medi-Cal co-pays – treatment & medication without charge
- A note about Share of Cost & estate recovery

4 Most Families Will Need to Select a Medi-Cal Health Plan

Medi-Cal services delivered via Medi-Cal managed care plans

Health plan selection depends on county:

- County Organized Health System (COHS) counties (22), automatically enrolled
- All others will have to choose a Medi-Cal Managed Care Plan in the county via Health Care Options choice packet
    - 30 days to choose a plan
    - if no plan selected, DHCS assigns child a plan

Expedited plan enrollment available – call HCO **1-800-430-4263**

Kids who already have coverage and/or providers:

Continuity of Care

Community Opportunities, Challenges & Lessons

Sonya Vasquez
Chief Program Officer
Community Health Councils, Inc.

Carolina Gamero
Communications Specialist
California Immigrant Policy Center

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Covering Kids & Families (CKF) Coalition

2016 Regional Enrollment Network

February – April 2016

Topic: Medi-Cal & Immigrant Health Coverage – SB 75 focus

Representing: Yolo, Sacramento, Napa, Solano, Sonoma, San Joaquin, Butte, Fresno, Madera, & Inland Empire

Major Themes (so far):

Resources Needed

- *Outreach Materials*
- *Media/Communications*
- *Training*

Expected Barriers

- *Misinformation*
- *Technology Issues*

Proposed Solutions

- *Cross Collaboration*
- *Trainings and Resources*
- *Outreach*

How can communities use this information about SB 75?

Community-based organizations & clinics are crucial to assisting eligible families with enrollment into Medi-Cal!

1. Assist families with navigating the transition/enrollment process, including addressing language access needs.
2. Assist families through the Medi-Cal Managed Care process, especially continuity of care issues.
3. Prepare them for the premium process (if necessary) and the Redetermination
4. Share messages/information about Medi-Cal with families through flyers, newsletter articles, op-eds, word-of-mouth, and other communications.
5. Coordinate and partner with county Medi-Cal eligibility office to identify and address the specific local enrollment issues facing the community during implementation.
6. Work with local partners to organize and coordinate community events to educate and enroll families.

Best Practices When Working with Immigrant Communities: **Key Messages**

Invoke values-based framework

"We're all in this together. California is stronger when everyone is covered."

"We all have a stake in the fight for Health for All"

"Health is a human right. Everyone should have access to healthcare no matter where they were born."

Messaging on health4all kids is powerful within context of impact on whole communities

- Children are part of mixed-status families
- Healthy adults and kids lead to a stronger CA
- This expansion for kids is a step towards Health4All

Best Practices for Working with Immigrant Communities: **Considerations**

- Ask patients which language they prefer to use, and provide interpretation and resources in that language when possible
- Help families navigate complex systems of care by assisting with paperwork, providing empathetic care, and linking patients to community resources
- Provide training for staff; Refrain from terms like “illegal”, “DREAMer”, “DACA kid”
- Respect intersecting identities of immigrants, including race, sexual orientation, gender, ability, etc.

Best Practices When Working With Immigrant Communities: **Addressing Concerns**

Reduce fear of detention and deportation by clarifying how personal information will be shared

- Personal information on Medi-Cal applications is confidential and can only be used for enrollment purposes (California Welfare & Institutions Code Section 14100.2)
- Covered California immigration fact sheet

Using Medi-Cal will not cause your child to be considered a public charge or hurt their ability to adjust status in the future

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Discussion

TIP: Submit questions through chat feature

Panel of experts:

Dayanna Carlos
Program Associate, *The California Endowment*

Mark Diel
Executive Director, *California Coverage & Health Initiatives*

Lynn Kersey
Executive Director, *Maternal and Child Health Access*

Gabrielle Lessard
Health Policy Attorney, *National Immigration Law Center*

Doreena Wong
Program Director, Asian Americans Advancing Justice - Los Angeles

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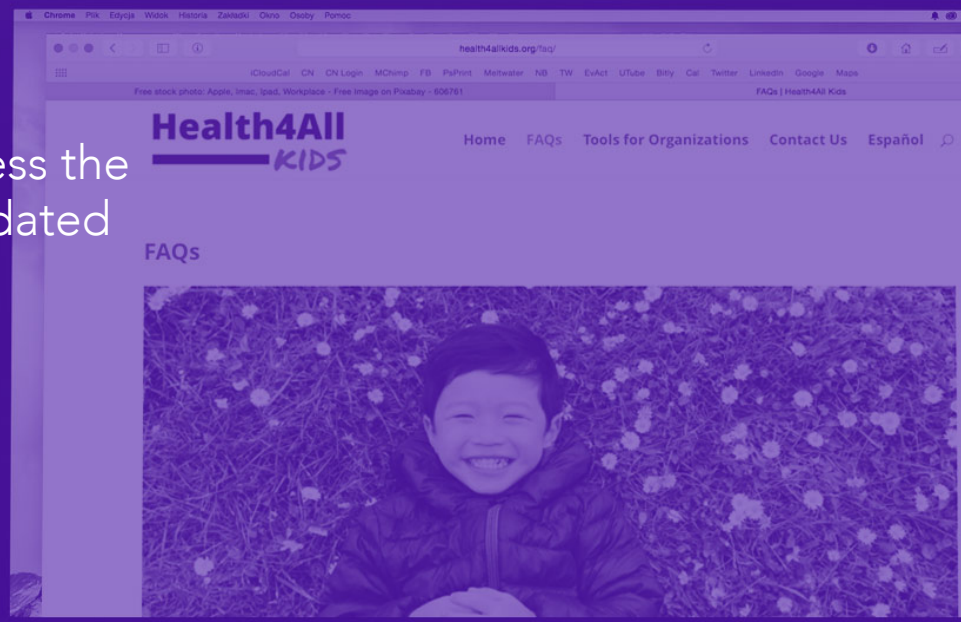
Thank You

Check out www.health4allkids.org to access the toolkit resources that will be regularly updated



Stay tuned!

Follow-up townhall
May 6th at 1pm PT

Twitterchat
May 10th at 11am PT

Contact us: questions@health4allkids.org

To contact Dept. of Health Care Services (DHCS): SB75EligibilityandEnrollment@dhcs.ca.gov