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Thank you

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Covered CA

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PRC

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Learning Objectives

By the end of this section of the training participants will be able to...

- Explain, briefly, how the unwinding of Medi-Cal operations under the COVID Public Health Emergency will affect beneficiaries
- Identify two ways to update client information with Medi-Cal
- Name the program that pays private health insurance premiums for People with HIV not eligible for Medi-Cal





April 1, 2023

What is the significance of this day?



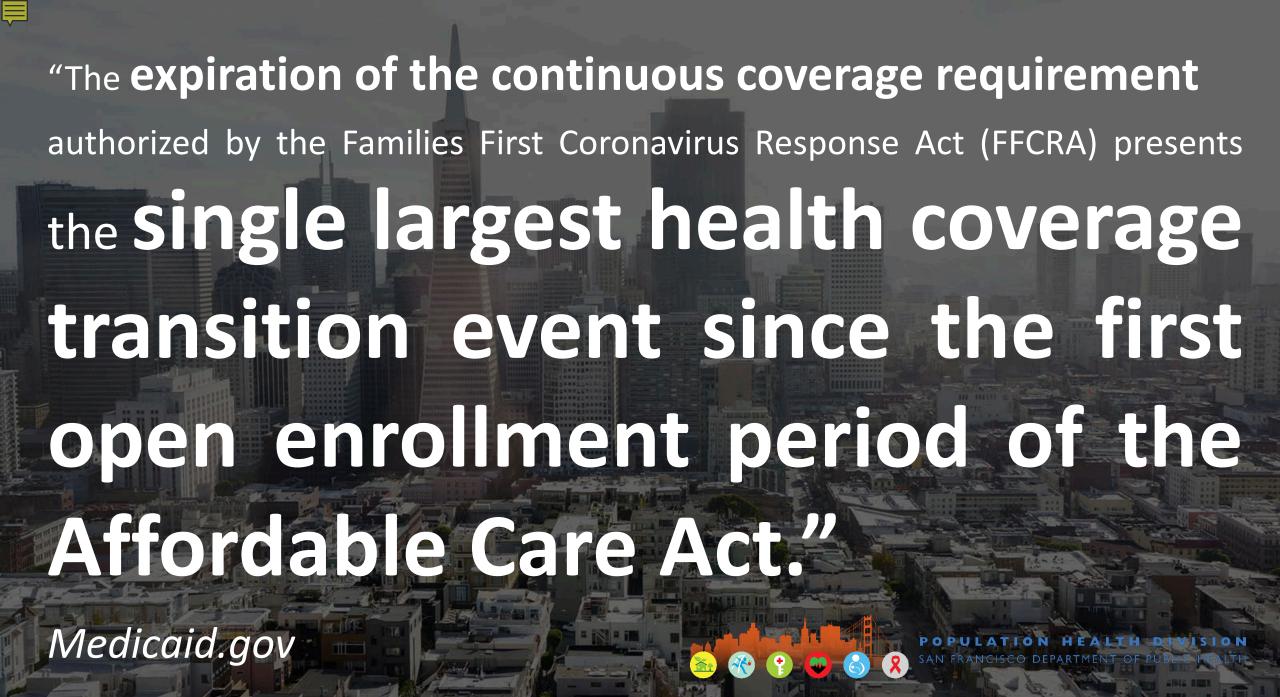
Federal taxes are due April 18th

End of the COVID Public Health Emergency (PHE) in California February 28th

Federal end of the COVID PHE May 11th

Medi-Cal redeterminations start again April 1st

1st day of spring! March 20th





Medi-Cal traditional and expanded

Enrollment is open year-round for Californians who meet eligibility guidelines

Traditional Medi-Cal	Medi-Cal Expansion
Eligibility is usually based on participation in another public assistance program like CalWORKS or SSI These programs define income limits.	Eligibility based on income (138% Modified Adjusted Gross Income of the Federal Poverty Level)
Enrollees are subject to a "resource test" (\$130,000 max, single person)	No Resource Limits Enrollees can own a primary residence and have money in the bank.



Medi-Cal Expansion (MCE) income limits

138% MAGI FPL (effective 1/1/23)

- Modified Adjusted Gross Income of Federal Poverty Level
- For most people your MAGI is the same as the Adjusted Gross Income (AGI) found on your tax return
- See full chart at tiny.cc/IncomeCaps

Household Size	Annual Income	Monthly Income
1	\$20,121	\$1,677
2	\$27,214	\$2,269
3	\$34,307	\$2,860
4	\$41,400	\$3,450

Medi-Cal young adult expansion

- Effective January 1, 2020 | CA SB104 (2019)
- Full-scope, unrestricted Medi-Cal for anyone 19 to 26 years of age who meets MCE eligibility criteria – immigration status not considered
- State-funded doesn't impact federal public charge considerations
- 1,289 eligible in SF as of 7/2021
- Will not be re-evaluated until 2024, at the earliest, when full expansion to all undocumented is implemented





Medi-Cal older adult expansion

- Effective May 1, 2022 | CA AB133 (2021)
- Full-scope, unrestricted Medi-Cal for anyone 50 years of age and older who meets MCE eligibility criteria – immigration status not considered
- 185,000+ people age 50+ with restricted scope were anticipated to be automatically given full scope on 5/1/22
- State-funded so doesn't impact federal public charge considerations



Medicaid what exactly are we "unwinding"?

COVID PHE CMS* Directives, March 2020

- Paused many federal compliance reporting requirements
- Provided flexibility in enrollment and service delivery
 - Ex: Telehealth increase in compensation; flexibility in
 when it can be provided (e.g., OK for home visits or medical intakes)
 where it can be provided (OK for provider to be at home)
 how (Zoom OK, though not HIPAA compliant)
- Extra 6.2% in federal matching funds during PHE if states kept folks enrolled







Public Health Emergency Unwinding



Unwinding "no negative actions" to Medi-Cal

COVID PHE CMS Directives, March 2020

- No terminations for
 - Increase in income over MCE limit
 - Aging out (former foster youth, family coverage)
 - Household size decrease
- No increase in Share of Cost (SOC)
- No reduction from full to restricted scope for immigration status
- OK negative actions: deceased, no longer resident of state, request
 voluntary discontinuance, application fraud or admin error





Unwinding

"reinstating regular **Medi-Cal eligibility** determinations to address the outstanding work that has accumulated during the federal COVID-19 PHE"

MEDIL 22-18

Medicaid Co

Medicaid Coverage the numbers

Nationally

California

San Francisco

91.3 million in Medicaid & CHIP* increase of 29.5% (20.8 million) February 2020 to October 2022

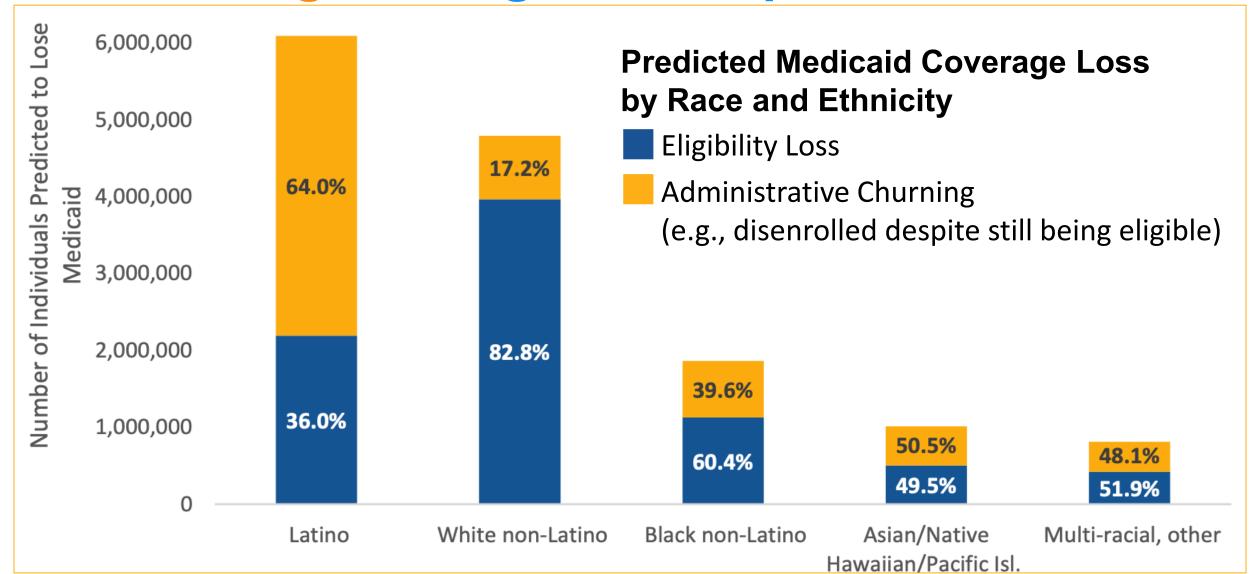
15.2 million in Medi-Cal* increase of 16% (2.7 million) February 2020 to December 2022

214,629 in Medi-Cal**
increase of 20% (41,346)
Jan 2020 to July 2022
**not including SSI-linked Medi-Cal

*CHIP=Children's Health Insurance Program (included in Medi-Cal, in California)



Unwinding coverage loss disparities



Medi-Cal Ex Parte

- Start of the eligibility redetermination process
- Happens on the back-end
- HSA is required to conduct ex parte eligibility review
- Utilizes info in federal, state, and local records (CalFresh, CAAP, SSA, IRS, EDD, Equifax and others)



Timeline for Medi-Cal Recertifications & Transfers to Private Insurance

Medi-Cal sends redetermination forms



Starting April 1, 2023

Medi-Cal tries Ex Parte eligibility renewal



Not renewed Ex Parte?
Medi-Cal mails MC216 (Medi-Cal Renewal) and MC355
(Request for Information)
form(s) to enrollees, based on original enrollment date



Medi-Cal enrollees send back completed eligibility redetermination forms

Medi-Cal makes eligibility decision

Medi-Cal renewals, adjustments, terminations and transfers to private insurance will happen on a rolling basis starting April 1, 2023

Still Medi-Cal eligible?

Coverage continues; next recertification in 1 year



Not Medi-Cal eligible?

Application is transferred to Covered CA marketplace*

No response from Medi-Cal beneficiary?



*People may also transition to private coverage via employer, spouse, or purchased directly from an insurance company



Transfers to private

insurance

Covered CA

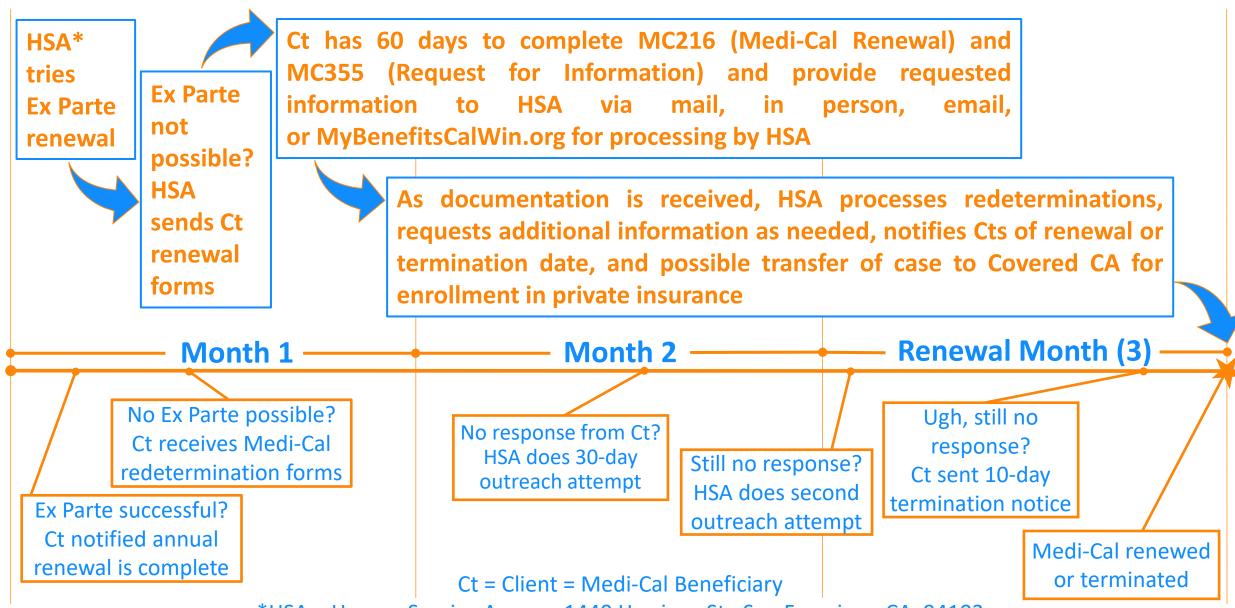


Covered CA receives case and begins communicating with beneficiary about transition from Medi-Cal to private insurance via insurance marketplace

People with HIV can enroll in ADAP & OA-HIPP to pay insurance premiums, out-of-pocket costs, & medication co-pays



Timeline Medi-Cal Unwinding Redeterminations



^{*}HSA = Human Service Agency, 1440 Harrison St., San Francisco, CA 94103



Are there special considerations for People Experiencing Homelessness?

Unfortunately, no. Mail goes to:

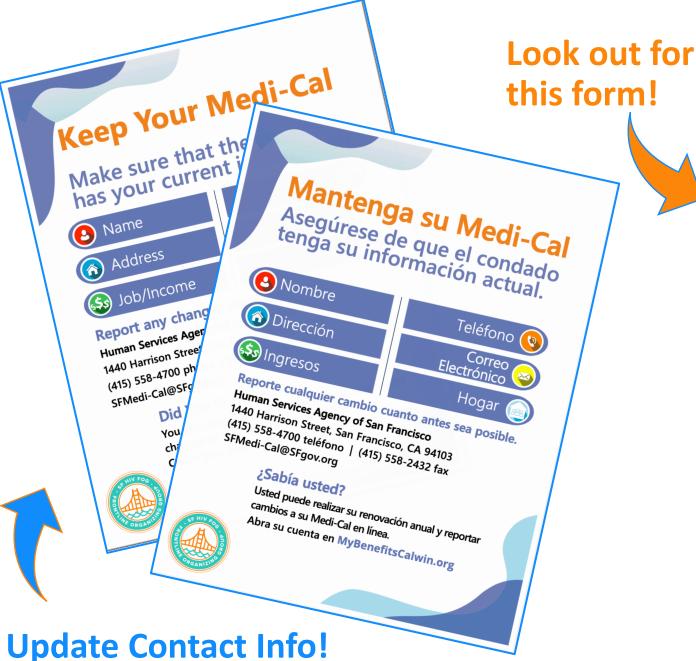
- USPS address on file with HSA
- General delivery (391 Ellis)

Consider

- Email notifications & online recertification via MyBenefitsCalWin.com
- Using clinic/agency address

In SF, the percentage of homeless individuals who automatically renew is high





STATE OF CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY DEPARTMENT OF HEALTH CARE SERVICES

You may lose your Medi-Cal if you do not respond by

Medi-Cal Renewal Form

You can get this form in another language or accessible format of your choice. To ask for help in your language, call:

Notice date:

Case number

Case name:

Worker name:

Worker telephone number:

It's time to renew benefits for:

Name

Date of birth

Household members not on this form will get a separate letter about their Medi-Cal.

- → Step 1. Read the form and answer the questions
- → Step 2. Sign and date on the Declaration and Signature page

in the envelope that

came with this letter.

→ Step 3. Send the form with proof by the due date of

Easy ways to give us your form and proof:

□ Online

or coveredca.com

By mail

() By phone

🥋 In person

Questions? Call your local county office at before the due date.

They are open Monday through Friday, p.m.]

page **1** of 19 MC 216 ENG (Rev 10/20)



Timeline Medi-Cal to Private Insurance

Ct is informed Medi-Cal is ending.

Ct's case is transferred to Covered CA

> Covered CA autoenrolls Ct into lowest-cost silver-level plan.

Clients terminated from Medi-Cal have a 60-day Special Enrollment Period (SEP) to transition to private insurance.

Delays in enrollment could result in a coverage gap.

Enroll in ADAP to pay for ART & HIPP for insurance premiums

60 Day SEP

Ct accepts Covered CA, auto-enrolled plan or picks a different option.

For seamless coverage after Medi-Cal ends, Ct must pay premium within one month!

Eligible clients
who are
uninsured can
access
medication
through ADAP
or a Patient
Assistance
Program and
get care from a
Ryan Whitefunded clinic

Uninsured!

-M'Cal Renewal Month-

Covered CA outreaches client for transition to private insurance

Medi-Cal ends; Private Insurance starts *Coverage can be obtained through Covered CA, an employer, spouse/domestic partner, or directly from an insurance provider.

SEP ends. Next chance to enroll in private insurance is during annual Covered CA open enrollment period (Nov 1 to Jan 31) thru employer, or spouse/family



What workers can do when change happens

- Support transitions until clients have picked up meds using their new coverage and have seen their new provider
- Know the key players at other clinics and introduce your clients to them
- Instill confidence in your clients: "You're going to be OK"
- Review your panel Who is now working and over income for MCE?
 Who moved? Who will need extra help?
- Educate clients about ADAP and HIPP





How might this impact the HIV system of care?

- **DPH clinics don't take private insurance** Clients no longer eligible for Medi-Cal will need to transition to a new medical home
- Enrollment Workers will likely see an uptick in workload –
 ADAP, HIPP, PrEP-AP enrollment; Medi-Cal appeals, Covered CA
- Likely increase in uninsured No longer eligible for MCE but missed transition to private insurance; will need Ryan White-funded OPAC
- Healthy SF Yes, but person first must be without insurance for 90 days, will face fine on taxes, and still need ADAP

Medi-Cal Continuous Coverage Unwinding

CA OFFICE OF AIDS (OA) Cost Savings Programs for People with HIV





ADAP



AIDS Drug Assistance Program

- Managed by CA State Office of AIDS (OA)
- Administered by a Pharmacy Benefits Manager (PBM)
 Magellan Rx (contracted by OA)
- Complements private insurance pays ADAP formulary medication co-pays
- Pays for full cost of drugs for uninsured not enrolled in private insurance



ADAP, continued

Magellan Rx MANAGEMENTSM

AIDS Drug Assistance Program

- CA resident immigration status <u>not</u> a bar
- HIV+
- 18+ years of age
- Income between 138% and 500% of MAGI FPL based on household size;
 for undocumented, income from 0% to 500% of MAGI FPL
- Rx from CA physician
- Do not qualify for coverage that pays 100% of Rx costs i.e., Traditional or Expanded Med-Cal



OA-HIPP

Office of AIDS Health Insurance Premium Payment Program

- Pays health insurance premiums up to \$1,938/month! (dental and vision, too, if included in plan)
- Pays medical out-of-pocket (MOOP) expenses
- Private insurance plans purchased via Covered CA,
 COBRA, or directly from an insurance carrier
- Administered by OA contractor
 Pool Administrators, Inc. (PAI)





OA-HIPP, cont'd

General Eligibility Criteria

- Enrolled in ADAP
 all eligibility criteria met
- Not enrolled in Medicare or Medi-Cal with no share of cost
- Enrolled in private health insurance with Rx drug coverage





EB-HIPP

Employer-based Health Insurance Premium Payment program

- Pays health insurance premiums up to \$1,938/month! (dental and vision, too, if included in plan)
- Pays medical out-of-pocket (MOOP) expenses
- Private insurance through an employer
- Administered by OA contractor
 Pool Administrators, Inc. (PAI)





SF HIV CARE OPTIONS

A guide to San Francisco's clinics, providers, and the healthcare coverage they accept.



Clinic-Based Care Options HIV Clinics often offer "wrap around" care with Primary Care Physicians, RNs, Social Workers, Benefits Coordinators, and other services

CLINIC NAME

Positive Health Program at Ward 86 iesp

SF General Hospital, 995 Potrero Ave., Bldg. (628) 206-2400, option 3 (new patient appoir

Kaiser lespañol!

2238 Geary Blvd., 4 West - Geary Campus 1600 Owens, 4th Floor – Mission Bay Campu (415) 833-4638 - HIV Clinic Intake Line (415) 833-3475 - HIV Benefits Hotline

360 Wellness Center | Women's HIV Cli

UCSF Medical Center 350 Parnassus Ave., Ste. 908 (415) 353-2119, option 5 (new patient appoi

Clínica Esperanza ¡español!

Mission Neighborhood Health Center 240 Shotwell St.



SF HIV BENEFITS OPTIONS

How to pay for health care and medication so you can stay in care and undetectable



Private Insurance

■ Employer-based Insurance Health

- Enrollment: Through your employer's H
- Open Enrollment: Defined by the emplo
- Cost-savings Programs: ADAP | EB-HIPP
- Leave your job? You have 60 days to en Covered CA or "off exchange", directly f cover these private insurance premiums

Califor Covered CA Blue S

- Enrollment: (800) 300-1506 | CoveredC
- Open Enrollment: November 1 to Janua lose employer-based insurance or Medi-
- Cost-savings Programs: Cost-reductions
- Before purchasing insurance ask your n

Full-pr ☐ Off-Exchange Blue S

• Effective way to obtain full-scope insur



INCOME THRESHOLDS

HIVHEALTHSERVICES CA Office of AIDS Programs*, Medi-Cal Expansion, Aged & Disabled Medi-Cal, Covered CA, and Healthy San Francisco

SF HEALTH NETWORK

Household Size	Medi-Cal Expansion as of 1/1/23		CA OA* and Healthy SF to update 4/1/23	Covered CA to update 11/1/23
	138%	138%	≤500%	600%
	(annual)	(monthly)	(annual)	(annual)
1	\$20,121	\$1,677	\$67,950	\$81,540
2	\$27,214	\$2,269	\$91,550	\$109,860
3	\$34,307	\$2,860	\$115,150	\$138,180
4	\$41,400	\$3,450	\$138,750	\$166,500
5	\$48,494	\$4,043	\$162,350	\$194,820

- *California Office of AIDS Programs:
 - ADAP (medication) | PrEP-AP (medication + some medical co-pays) OA-HIPP & EB-HIPP (insurance premiums + medical co-pays) MPPP (Medicare Parts C, D, and MediGap premiums, Part C and B medical co-pays)
- Amounts are Modified Adjusted Gross Income of Federal Poverty Level (MAGI FPL)
- For Unemployment Insurance, multiply weekly benefit amount by 4.33 to determine

Sources

- Medicaid.gov <u>Unwinding and Returning to Regular Operations after COVID-19</u>, 10/13/22
- Kaiser Family Foundation <u>Analysis of Recent National Trends in Medicaid and CHIP Enrollment</u>, 10/4/22
- CMS October 2022 Medicaid and CHIP Enrollment Trends Snapshot
- CA Department of Healthcare Services <u>Medi-Cal and COVID-29 Public Health Emergency and Continuous Coverage Operational Unwinding Plan</u>, 1/13/23
- CA Department of Healthcare Services Medi-Cal Monthly Eligible Fast Facts, August 2022
- CA Department of Healthcare Services Medi-Cal Enrollment Update, 8/30/22
- San Francisco Human Services Agency Medi-Cal Demographics Report, December 2022
- US Dept of Health and Human Services, Assistant Secretary for Planning and Evaluation <u>Unwinding</u>
 <u>the Medicaid Continuous Enrollment Provision: Projected Enrollment Effects and Policy Approaches</u>,
 8/9/22 (presentation data and graphic on slide "Unwinding coverage loss disparities")
- California Health Advocates <u>Upcoming Medi-Cal Changes in 2023</u>, 9/28/22



Questions?



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