

### ***Questions for DHCS and Covered California***

Both DHCS and Covered California have been asked to be prepared to answer the following questions if asked by Legislators at the hearing. The Senate Health Committee has requested written answers to these questions be completed and returned to the committee.

### **Questions for DHCS**

1. When does DHCS anticipate the Medi-Cal backlog will be cleared?
2. Is existing funding for county Medi-Cal eligibility determination-related activities sufficient to meet the increased application and enrollment volume?
3. Does the state have a goal of eventually reducing the application processing time for Medi-Cal to less than 45 days given the enrollment simplification required by the ACA?
4. Welfare and Institutions Code Section 14102.5 (Section 24 of AB 1 X1) required DHCS to report to the Legislature and the public about the enrollment process for all insurance affordability programs various beginning 30 days after the end of each quarter. When will DHCS make the required reports available?
5. Why is Covered California but not counties allowed to use accelerated enrollment (AE) to expedite the enrollment of children in Medi-Cal? Does the state intend to allow counties to grant AE?
6. Does DHCS plan to use presumptive eligibility to grant Medi-Cal eligibility to individuals who have applications pending beyond 45 days?
7. SB 1002 (De Leon) proposed to require DHCS to seek any federal waivers necessary to use the eligibility information of individuals who have been determined eligible for the CalFresh program who are under 65 years of age and are not disabled to redetermine their Medi-Cal eligibility. That bill was vetoed by Governor Brown. In his veto message, the Governor stated that "Each department is working with the appropriate controlling federal agency to use existing program eligibility information to accomplish the goals of the bill. I appreciate the support of the Legislature, but this bill is not necessary." What is the status of administrative efforts to redetermine Medi-Cal eligibility using CalFresh program eligibility information?
8. When individuals have an increase/decrease in income that moves them from Medi-Cal eligibility to eligibility for an APTC through Covered California or from Covered California to Medi-Cal, what is being done to ensure these individuals do not have a gap in coverage, as required by Welfare and Institutions Code Section 15926(h)(1)?
9. The current process set forth in Section of AB 1 X1 (Section 14015.5) establishes how paper and electronic applications for individuals who appear to be MAGI Medi-Cal that are submitted through CalHEERS are to be handled, whereby Covered California and DHCS determine MAGI Medi-Cal eligibility for applications that require no further staff review, while the other Medi-Cal applications are forwarded to the counties for an eligibility determination. This section of law sunsets July 1, 2015. How has this process worked in practice? Does the Administration propose to extend these particular MAGI Medi-Cal eligibility determination responsibilities past July 1, 2015?

10. Has CalHEERS programming for Deferred Action for Childhood Arrivals (DACA) been corrected so these individuals' eligibility is appropriately determined? If not, when will this occur?
11. Has CalHEERS programming for former foster youth eligibility been implemented so that these individuals are being determined eligible for Medi-Cal, rather than Covered California, without having to complete the full application, including providing income information? If not, when will this occur?
12. Has CalHEERS program been corrected so that when individuals report a change of circumstance (such as an increase or decrease in income, or a change in family size) they are not losing eligibility? If not, when will this occur?
13. What has been the experience of enrollment for mixed households (including when a child is on Medi-Cal with income at 250% FPL and a parent is enrolled in a Covered California plan)?
14. Have the 2015 Medi-Cal renewal forms been programmed into CalHEERS? When will that process occur?

#### **Questions for Covered California**

15. What are Covered California's enrollment goals for 2015, by age, race and region?
16. What kind of monitoring and tracking is Covered California doing of consumer complaints and inquiries coming directly to Covered California and participating qualified health plans?
17. With the first round of open enrollment, it became clear early on that course corrections were necessary. What contingencies and resources does Covered California have in place this time around to course correct, if necessary?
18. Please explain who are the leads on the implementation team responsible for outreach to and enrollment of Latino, African American and Asian Pacific Islander populations?
19. How has Covered California responded to issues raised by Latino and Black Caucus members?
20. Please explain why Covered California intended outreach grantees to also become certified enrollment entities but less than third actually did?
21. Why were grantees slow to meet Covered California's aggressive goals and timeline as noted in the lessons learned document page 47?
22. Covered California relied heavily on uncompensated community outreach networks, 60% of whom served Latino communities and other non-English speaking communities. These organizations assisted with translations of Covered California fact sheets and other notices. The lessons learned report indicates these partners experienced challenges because they didn't have access to the same training and resources as other partners. What is Covered California doing differently to address these challenges?

23. Have all payments been made for enrollments to date? The lessons learned report indicates that \$2 million has been paid to enrollment counselors and \$3.6 million in compensation has been paid to Certified Enrollment Entities. Are there outstanding payments pending and if so, what is the reason these payments are outstanding?
24. The lessons learned report refers in multiple places to the “learning management system” not functioning as intended. What is the learning management system and what are the reasons for its poor performance? How are the issues being addressed?
25. The lessons learned document includes Figure 20 on page 65 which identifies “Service Channel Use by Ethnic Group.” Does this represent contacts by service channel or completed applications attributable to the service channel? Please explain.
26. The lessons learned report indicates that the San Joaquin Valley, including Fresno, had lower enrollment compared to projection levels. What strategies are being employed to improve enrollments specific to this region?
27. According to the July 2014 Kaiser Family Foundation Longitudinal Study, the remaining uninsured who are also eligible for subsidies indicates that these Californians are more of a challenge and many have been persistently uninsured. What will be done to reach these individuals?
28. The Kaiser study also indicates that many people remaining uninsured are Hispanic. Some are not eligible and others are worried about impact on immigration status. What will be done to message to those who are eligible for coverage?
29. Please explain the retail store front program. Where will these be located? How will they be staffed? Will there be compensation for enrollments?
30. What kind of training has been done to assist with application renewals?
31. Will consumers who take no action be auto renewed? Who will not be auto renewed?
32. Are Certified Insurance Agents required to enroll people in Medi-Cal? Is their mandatory training for Medi-Cal enrollments? Who conducts the training?
33. Please explain the resolution and appeals process. Is there a flow chart that explains what is handled by the back office and what goes to hearing?
34. What plans are there to improve customer service and achieve customer service goals?
35. As tax season draws closer what kind of messaging and consumer assistance will Covered California offer Covered California enrollees who are taking advantage of tax subsidies?

