



**Gold Coast
Health Plan**SM
A Public Entity



Health Care Reform



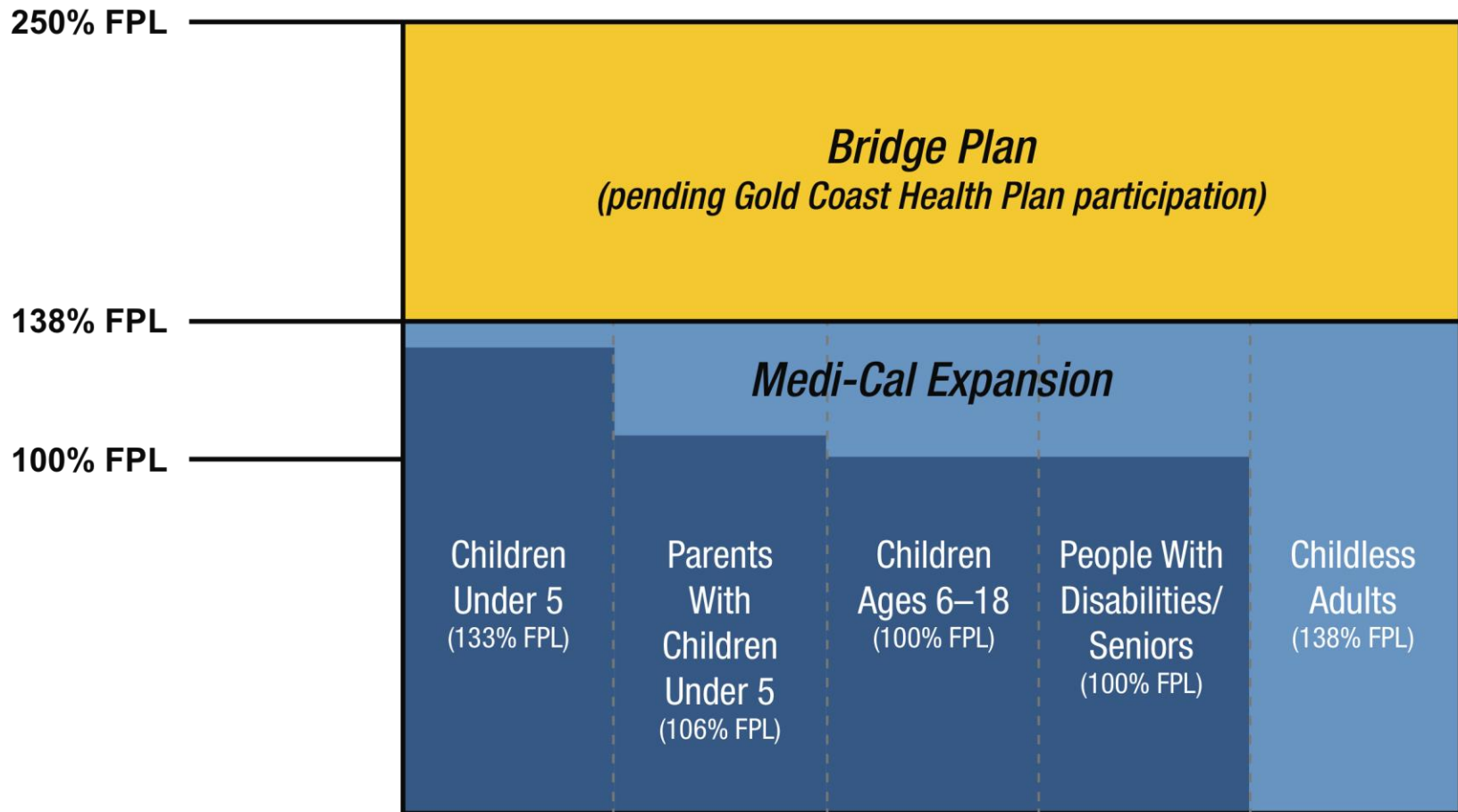
Health Care Reform

- Covered California (Health Benefit Exchange)
- Medi-Cal Expansion
- Bridge Plan Proposal
- Gold Coast Readiness
- Outreach to the Eligible

Health Care Reform: What is coming in 2014?

- Expansion of Medicaid-eligibility up to 138% FPL
- Individual Mandate
- Employer Mandate deferred until 2015
- Coverage & Subsidies Begin In Health Benefits Exchange
- Coverage Enhancements
 - Parents can cover children up to age 26
 - No pre-existing condition exclusions
 - No lifetime cap on medical costs or benefits
- Bridge Health Plan Option- April 2014

Income Eligibility Levels- 2014



FPL = Federal Poverty Level ■ Current Population ■ Expansion Population



CA Health Benefit Exchange aka Covered California

- California's Health Benefit Exchange
 - 19 geographical exchanges
- First open enrollment period
 - October 1, 2013 to March 31, 2014
 - Coverage effective January 1, 2014
- 2.2 million will be eligible statewide by 2019 *(UCLA Center for Health Policy)
- Four “metal” plan ratings ranging from 60%-90% coverage; members pay out of pocket for portion not covered





Covered California- Health Plans

- **Ventura County Health Care Plan in 2015**
- Alameda Alliance for Health
- Anthem Blue Cross of California-Individual Market Only
- Blue Shield of California
- Chinese Community Health Plan
- Contra Costa Health Plan
- Health Net
- Kaiser Permanente
- L.A. Care Health Plan
- Molina Healthcare
- Sharp Healthcare
- Valley Health Plan
- Western Health Advantage



Medi-Cal Expansion

- About 7 million covered currently in California
- About 1 million are currently eligible but not enrolled
- Approximately 2.2 million will be newly eligible

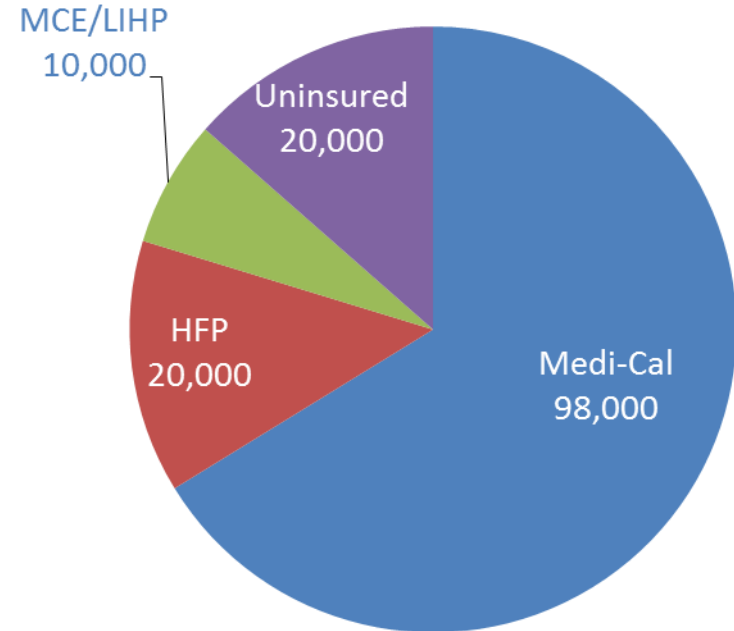
Source: UCLA Center for Health Policy

Medi-Cal/GCHP Enrollment Will Increase Approximately 45-50 Percent in 2013 and Beyond

Legacy Medi-Cal Population **98,000**
(as of 12/31/2012)

Expansion Population

- **ACE MCE** **10,000**
- **Uninsured*** **20,000**
- **Healthy Families **** **20,000**



* Estimated enrollment over 12-24 months

** Approx. 6,000 of these enrollees have been enrolled into GCHP since January 2013



Medi-Cal Expansion Benefits

*Must include 10 essential health benefits:

1. Ambulatory outpatient services
2. Emergency services
3. Hospitalization
4. Maternity and newborn care
5. Mental health & substance use disorder svcs-ACA requirement
6. Prescription drugs
7. Rehabilitative and habilitative services
8. Laboratory services
9. Preventive care and chronic disease management
10. Pediatric services, including oral and vision care

*Source: http://www.coveredca.com/coverage_basics.html

State proposing the MCE benefits mirror existing Medi-Cal benefits, unless mandated by ACA.

Long-Term Care benefit proposed by DHCS as long as “asset test” is approved by CMS. If not, then LTC will not be a MCE benefit.

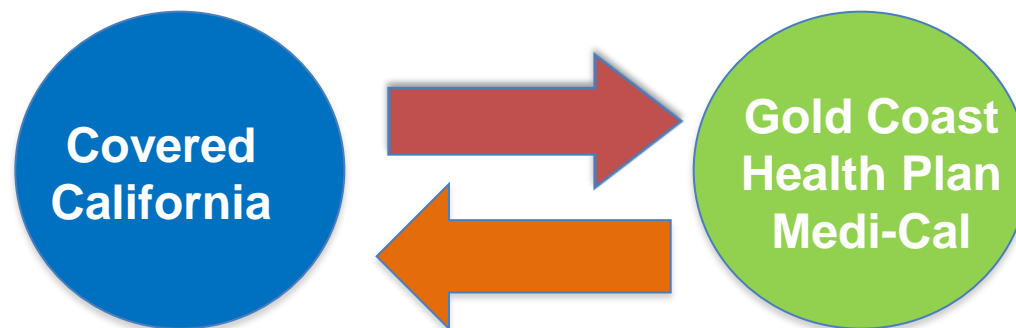


Medi-Cal Expansion - Financing

- State's costs for newly eligible:
 - Covered 100% by federal government in first three years of expansion
 - Gradually drops to 90 percent in 2020 and beyond
 - States must implement full expansion to receive these funds
- Increases reimbursement for primary care providers to Medicare equivalent rates for 2013-14

Delivery System Challenges

- Higher need for behavioral health services and care coordination
- Provider stability if the newly eligible switch providers often
- Challenges due to churn between Exchange and Medi-Cal: continuity of care, affordability, health outcomes





Bridge Plan

- State Legislature authorized Bridge Plan policy through SBX3 1
- Governor signed SBX3 1 into law on July 11, 2013
- Five-year sunset from date of federal approval still pending

Objectives of the Bridge Plan:

- Establish a health plan for low-income individuals and parents of Medi-Cal and HFP-eligible individuals moving between Medi-Cal to Covered California
- Promotes continuity of coverage and care
- Reduce the disruptions in continuity of care associated with changes in health plans
- Creates access to more affordable coverage

Bridge Plan Eligibility Limited To:

- Incomes between 139 % to 250% of FPL
- Individuals previously enrolled in Medi-Cal Managed Care Plan
- Members of a household in which there is a Medi-Cal or HFP enrollee if they are counted as part of the Modified Adjusted Gross Income household.
- Parent(s) or caretaker relative of a Medi-Cal enrolled child.



Health Plan Criteria For Bridge Plan

- Only Medi-Cal Managed Care Plans can offer Bridge Plan
- Must be certified as a Qualified Health Plan (QHP)
 - Maintain medical loss ratio (MLR) of 85%
 - Must apply for and meet standards for licensure under the Knox-Keene Health Care Service Plan Act
 - Exempted from the requirement to sell products within each of the five levels of coverage available in Covered California but must offer at least one silver-level plan

Bridge Plan Factors for GCHP Consideration

- Financial viability-Plans must offer option equal to 2nd lowest cost silver plan
- Actuarial and Operational Analysis Pending
- Ongoing administrative costs for workload increases due to oversight are undetermined e.g. premium collection, network adequacy, member participation in Exchange
- Plans must apply for Knox-Keene licensing
- Network adequacy
- Transfer open treatment authorizations under the low income health program (LIHP)
- **Can GCHP be ready by April 2014?**



Gold Coast Readiness for Medicaid Expansion

- Partner with County, health care partners, and community stakeholders to ensure smooth transition
 - Provider network analysis and utilization patterns
 - Ensure continuity of care (prescriptions, authorizations for pending treatment, etc.)
- Operational readiness review to identify gaps and resource needs
 - Increased staffing based upon identified needs
 - Ex: additional call center staff, new member orientations, media outreach campaign to raise member awareness



GCHP Outreach Activities

- Coordination with County, Healthcare Partners, Community Stakeholders
- Radio-Media Campaign and Internet Messaging
- New Member Orientations
- Telephone Outreach Campaign
- Health Fairs & Workshops
- Schools and Youth Day Camps
- Public Events and Community Festivals





State Outreach Activities

- Covered California launched outreach & awareness campaign in July 2013
 - \$43 million in federal funds for outreach grants
 - Guiding principle: encourage enrollment
 - Reach eligible populations “where they live, work and play”
- The California Endowment pledged \$225 million over the next four years to boost enrollment in Medi-Cal and increase number of PCPs



Gold Coast Health Plan's Mission

To Improve the Health of Our Members
Through the Provision of the Best Possible
Quality Care and Services

Contact GCHP
888-301-1228
www.goldcoasthealthplan.org



Questions ?