



| Health Care Reform

As CA Health Care Enrollment Begins, Advocates Make Sure No One Is Left Out



New America Media [URL: <http://www.newamericamedia.org/>], Question & Answer, Viji Sundaram, Interview with Ellen Wu, Posted: Aug 25, 2013

Editor's Note: With less than six weeks before open enrollment begins for Medi-Cal and Covered California – the state's online health insurance marketplace set up under Obamacare – health care advocates are hoping that those eligible will take advantage of the programs and reduce health care disparities in communities of color. California Pan-Ethnic Health Network's chief executive Ellen Wu is among them. She spoke to NAM health editor Viji Sundaram.

Californians will be able to start enrolling in Med-Cal and Covered California in less than six weeks. But a study by UCLA and UC Berkeley, funded in part by CPEHN, has shown that people with limited English proficiency are expected to enroll at lower rates than their English proficient counterparts, unless there's more outreach and education.

Our report, *Achieving Equity by Building a Bridge from Eligible to Enrolled* [URL: <http://www.cpehn.org/pdfs/BuildingaBridgeFactSheet1-13.pdf>], provides data supporting what we already intuitively know, that culturally and linguistically appropriate outreach will be critical to the success of Obamacare. We believe that the state also understands the importance of culturally and linguistically appropriate outreach.

Covered California [URL: <http://www.coveredca.com/>] has worked with stakeholders from diverse communities from the start and continues to develop strategies to maximize participation. They have funded \$37 million in outreach grants to 48 lead grantees (and hundreds of subcontractors) across the state. According to Covered California, out of the 48 community-focused grants, 37 are Latino- focused, 32 are African American and "some 20 grants specifically target outreach to the diverse Asian-Pacific Islander communities."

With regards to Medi-Cal enrollment, the Department of Health Care Services will spend \$53 million (funded by The California Endowment with matching federal funds) to help with enrollment in Medi-Cal. A portion of these funds (around \$28 million) will go to counties to partner with local community organizations to outreach the hard-to-reach populations.

CPEHN will continue to provide input throughout the process and is cautiously optimistic that we'll be able to enroll a large percentage of the eligible LEP [Limited English Proficiency] population.

Researchers recommend that available resources should be targeted to consumers with the highest need. Do you think the state is providing in-person assistance to those who may lack Internet access? Low-income new immigrants are unlikely to know how to access the Internet. What is being done to ensure that this group of people is educated about Obamacare and the exchange?

In CPEHN's report, *Equity in the Digital Age: How Health Information Can Reduce Disparities* [URL: <http://www.cpehn.org/pdfs/EquityInTheDigitalAge2013.pdf>], we discuss the need to develop technological tools that are accessible by everyone, especially given the digital divide. For example studies show that while low-income communities of color may not have access to the Internet, they often do have smart phones, so the online application needs to be mobile compatible. We also recommend that even given all of the technologies in place, in-person culturally and linguistically assistance **MUST** be available.

We have heard commitment from Covered California that they are hiring customer service representatives in the 13 different Medi-Cal Managed Care threshold languages (Arabic, Armenian, Chinese, English, Farsi, Hmong, Khmer, Korean, Lao, Russian, Spanish, Tagalog, and Vietnamese) and have the capacity to provide oral interpretation in any language through their call center. Additionally, the paper application will be translated into 11 languages and the online application is available in both English and Spanish. We continue to work with the state to make sure consumers are aware of the availability of language assistance on the paper application and online web portal.

CPEHN is also developing a fact sheet for our community partners to use to understand the coverage that is available to immigrants.

Of the 300,000 Californians who will not enroll in Medi-Cal or the exchange, either because they don't know they can, or don't know how, 70 percent of them will be people of color, unless more outreach is done. These uninsured will strain the Emergency Rooms and



health clinics. Are you concerned about this?

We strongly support culturally and linguistically appropriate outreach efforts for the state's communities of color, but we know that there will still be a number of individuals who will remain uninsured. However, anyone who is uninsured after the implementation of Obamacare is likely to be uninsured now and is currently relying on local ERs and community health centers for their care. When the ACA is fully implemented, the number of uninsured in California will drop dramatically, so the strain on local ERs and community health centers will presumably be less than it is currently. What we are concerned about, however, is whether the counties will have enough resources to provide services to the remaining uninsured, given the \$300 million cut in funding passed in the state budget. We will continue to advocate for access to affordable health coverage for the 3-4 million remaining uninsured.

California recently passed a law to expand Medi-Cal, which includes immigrants. Can you explain some of the major elements of the Medi-Cal expansion as it relates to immigrants?

The Medi-Cal expansion bill, ABx1 1 (John Perez) and SBx 1 1 (Ed Hernandez), expanded Medi-Cal for parents and caretakers (caretakers defined as a relative by blood, adoption, or marriage, as well as a domestic partner) from those making up to 100 percent of the Federal Poverty Level (\$11,490 for an individual and \$19,530 for a family of three) [to those making] up to 138 percent of the Federal Poverty Level. It also expanded Medi-Cal to childless adults who are new qualified immigrants and individuals permanently residing under color of law (PRUCOLs) up to 138 percent of the Federal Poverty Level. This was a major legislative victory and means that thousands of immigrants are able to access affordable health coverage.

Under Obamacare, starting Jan. 1, 2014, former foster care youth will remain eligible for Medi-Cal until they turn 26, provided they were covered by Medi-Cal on their 18th birthday. Do they, like other Medi-Cal beneficiaries, have to meet the federal poverty level guidelines as others do?

No, former foster youth who were in Medi-Cal on their 18th birthday remain eligible for Medi-Cal until they turn 26, regardless of their income. They do not have to meet income eligible requirements. In addition, through the state's fiscal year 2013-14 budget, former foster youth who turn 21 between June 1, 2013 and Dec. 31, 2013 will stay covered in Medi-Cal.

Under current Medi-Cal provisions, are beneficiaries not eligible for mental health and substance abuse treatment?

In the current Medi-Cal [URL: <http://www.cpehn.org/pdfs/Medi-CalExpansionFactSheet.pdf>] program, beneficiaries are eligible for mental health services, but through a referral to the county mental health program. Mental health was considered a "carve out" benefit in managed care (i.e. it was not included in the benefits the beneficiaries got through their managed care plan). The expanded mental health services in Medi-Cal now include some mental health services [URL: <http://www.cpehn.org/pdfs/Medi-CalExpansionFactSheet.pdf>] through the health plan.

Comments

Disclaimer: Comments do not necessarily reflect the views of New America Media. NAM reserves the right to edit or delete comments. Once published, comments are visible to search engines and will remain in their archives. If you do not want your identity connected to comments on this site, please refrain from commenting or use a handle or alias instead of your real name.

New America Media, 209 9th Street, Suite 200, San Francisco, CA 94103