Finishing the Job: Ensuring Coverage for All Californians

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April 2014
CPEHN: Together We’re Stronger
Eliminating Health Disparities

6. What is this person’s race? Mark ☐ one or more races to indicate what this person considers himself/herself to be.

- ☐ White
- ☐ Black, African Am., or Negro
- ☐ American Indian or Alaska Native — Print name of enrolled or principal tribe.
- ☐ Asian Indian
- ☐ Chinese
- ☐ Filipino
- ☐ Other Asian — Print race.
- ☐ Japanese
- ☐ Korean
- ☐ Vietnamese
- ☐ Guamanian or Chamorro
- ☐ Samoan
- ☐ Other Pacific Islander — Print race.
Pre-ACA

- **5.6 million Californians** without health insurance in 2012
  - **4.6 million** eligible for coverage under the Affordable Care Act
  - **~1 million** ineligible due to immigration status

Source: UC Berkeley-UCLA CalSIM model, v1.7
California’s Uninsured

• Nearly three-quarters (74%) of California’s uninsured from communities of color

Projected eligible under ACA

- Medi-Cal
  - 67 percent (950,000) people of color
  - 35 percent (500,000) Limited English Proficient

- Covered California
  - 66 percent (1.8 million) people of color
  - 40 percent (1.09 million) LEP

Source: UC Berkeley-UCLA CalSIM model, v1.7
ACA Enrollment: 3 million newly insured and counting...

- 1 in 5 people enrolled nationally are from CA

- Over 1 million enrolled in Covered California as of mid-March

- 2 million individuals enrolled in or have been determined likely eligible for Medi-Cal as of March
  - 652,000 transitioned into Medi-Cal through LIHP
  - 134,000 applied through Express Lane program
  - 184,500 enrolled directly through counties
  - 1 million + enrolled through Covered California
California is leading the nation...

- Medi-Cal Expansion inclusive
  - All low-income childless adults earning less than 138% FPL
    - Includes qualified immigrants and permanently residing in the U.S. under color of law (PRUCOL), which includes Deferred Action for Childhood Arrival or DACAs.

- California implemented the Medi-Cal Expansion early
  - Transition of 652,000 from LIHP program to Medi-Cal

- Horizontal Integration (Express Lane)
  - CA identified over 600,000 adults and 150,000 children in CalFRESH eligible for Medi-Cal, and pre-qualified them for “express lane” enrollment.
However...

- Enrollment for Latinos, African American and Limited English Proficient lower than projected particularly in Covered California:
  - Latinos, 153,561 enrolled
    - ~1.2 million total eligible for subsidies
    - Covered CA projected take-up rate of 24% (290,000)
  - African Americans, 18,297 enrolled
    - 100,000 total eligible for subsidies
    - Covered CA projected take-up rate of 43% (43,000)
  - Limited English Proficient (LEP) only 15% as of January 31st

Source: Covered California Executive Director’s Report, Peter V. Lee, March 20, 2014 Board Meeting
Medi-Cal Enrollment Under the ACA – Ongoing throughout the year

Projected Eligible

- Latino: 48%
- African American: 8%
- Asian/PI: 7%
- Other/Multiple Race: 4%
- White: 33%

Actual Enrollment

- Latino: 38%
- African American: 6%
- Asian/PI: 17%
- Other/Multiple Race: 12%
- White: 27%

CPEHN, Medi-Cal Expansion: What’s at Stake for Communities of Color, 2013

Covered California Executive Director’s Report, Peter V. Lee, March 20, 2014 Board Meeting
Covered California Enrollment Under the ACA

Projected Eligible

- African American 4%
- Asian/PI 14%
- Latino 48%
- Other/Multiple Race 2%
- White 32%

Actual Enrollment

- Other/Multiple Race 13%
- Asian/PI 23%
- Latino 22%
- African American 3%
- White 40%

CPEHN, Medi-Cal Expansion: What’s at Stake for Communities of Color, 2013

Covered California Executive Director’s Report, Peter V. Lee, March 20, 2014 Board Meeting
# Enrollment of Limited English Proficient under the ACA – Jan. 31st

<table>
<thead>
<tr>
<th>Language</th>
<th>Subsidy Eligible</th>
<th>Unsubsidized</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>English</td>
<td>471,843</td>
<td>90,338</td>
<td>562,181</td>
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<tr>
<td></td>
<td><strong>82.5%</strong></td>
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<td><strong>84.5%</strong></td>
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<tr>
<td>Spanish</td>
<td>46,282</td>
<td>1,374</td>
<td>47,656</td>
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<td></td>
<td><strong>8.1%</strong></td>
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<td>Asian and Pacific Islander Languages</td>
<td>52,650</td>
<td>1,590</td>
<td>54,240</td>
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<tr>
<td></td>
<td><strong>9.2%</strong></td>
<td></td>
<td><strong>8.2%</strong></td>
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<tr>
<td>Indo-European Languages</td>
<td>1,494</td>
<td>75</td>
<td>1,569</td>
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<td></td>
<td><strong>0.3%</strong></td>
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<td>Grand Total</td>
<td>572,269</td>
<td>93,377</td>
<td>665,646</td>
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</tbody>
</table>

*Excludes 62,764 non-respondents,
Who are the Remaining Uninsured?

- ~2-3 million:
  - Citizens or legal residents
    - Limited English Proficient (3 out of 5)
    - Latino (2/3rds)
    - Residents of LA or other Southern CA counties (62%)
    - Lack of Affordable Coverage (21-23%)
      - “Family Glitch”
        - IRS’ interpretation of eligibility for tax credits which only takes in account cost of coverage for employee, not for family members
        - Subsidies not high enough
        - Earn too much for financial assistance
  - ~1 million undocumented immigrants
    - Currently 20% of the uninsured, up to 33% after 2014

Source: Lucia, Jacobs, Dietz, Graham-Squire, Pourat, and Roby: After Millions of Californians Gain Health Coverage under the Affordable Care Act, who will Remain Uninsured? September 2012
Remaining Uninsured in 2019
Uninsured Californians under age 65
Total: 4,010,000

- Other (has an affordable offer of coverage from Exchange or Employer) (23%)
- Eligible for Medi-Cal (29%)
- No offer of affordable coverage (>8% income) (21%)
- Not eligible due to immigration status (27%)

Assumes lower take-up rates

Source: Lucia, Jacobs, Dietz, Graham-Squire, Pourat, and Roby: After Millions of Californians Gain Health Coverage under the Affordable Care Act, who will Remain Uninsured? September 2012
Next steps: Advance state policies

- Expand Access to Health Care for All
  - SB 1005 (Lara) Health For All: expands state-only Medi-Cal and creates a program in Covered CA to provide coverage for undocumented immigrants.

- Strengthen Affordability protections for Californians: Weigh in on federal policies and consider state policies to fix the “family glitch” and ensure adequate subsidy levels.
Next steps: Advance state policies

- **Ensure cultural and linguistic access**
  - **SB 204 (Corbett) Prescription Drug Labels**: Requires instructions for taking medications translated into other languages to be printed on prescription drug containers.

  - **AB 505 (Nazarian) Medi-Cal Language Access**: Codifies current language access requirements on Medi-Cal managed care health plans.

  - **AB 2102 (Ting) Data for a Culturally Appropriate Healthcare Workforce**: Requires collection of demographic data on certain health professions, including nurse practitioners, physician assistants, and vocational nurses.
Next steps: Advance state policies

- **Encourage Retention and Utilization:**
  - **AB 1769 (Pan)/AB 1805 (Skinner) Medi-Cal Provider Payments:** Restores remaining 10% reimbursement rate cuts to fee-for-service Medi-Cal providers being implemented this year, at the same time of the ACA Medicaid expansion.

- **SB 964 (Hernandez) Network Adequacy Oversight of Health Plans:** Requires Department of Managed Health Care (DMHC) to conduct surveys of health plans for timely access and network adequacy for Medi-Cal managed care and Covered California plans lines of business.
Next Steps: Better Data Collection

- **Race, Ethnicity and Primary Language:**
  - Paper and online application still not synced
  - English still default language in CalHEERs
  - Call Center staff should be trained on how to ask questions about race, ethnicity and primary language
  - Add write-in option for “other” race and ethnicity

- **Other demographic data:**
  - Include questions on sexual orientation and gender identity
Next Steps: Standard Reporting

- **Provide data on:**
  - Enrollment channels for Covered California and Medi-Cal by race, ethnicity and primary language
  - Performance data on Covered California & QHP Call Centers
  - City/county level enrollment and demographics

- **Conduct qualitative evaluation of:**
  - Call Center, other enrollment channels for Limited English Proficient callers in time for enrollment 2.0!
Next steps: Strengthen Enrollment Efforts in vulnerable communities

- Rethink Enrollment Assistance Program
  - Conduct evaluation with grantees (spring 2014)
  - Consider raising reimbursement rates ($58 too low)
  - Consider reimbursement for retention and utilization

- Train more bilingual Outreach and Enrollment Counselors
  - Streamline the certification process
  - Reduce administrative burden on grantees
  - Provide trainings/interpretation in other languages
Next steps: Strengthen Enrollment Efforts in vulnerable communities

- Reduce unnecessary barriers to enrollment
  - Conduct ongoing trainings with CEEs and Navigators on eligibility for:
    - Covered CA and Medi-Cal
    - Special populations: e.g. immigrants, Former Foster Youth
    - Special Enrollment Periods
    - Plan Choice
    - Retention and Utilization

- Partner with the Health Consumer Alliance
- Open to Outreach and Education grantees

- Host regional forums where CEEs, Navigators and Outreach grantees can share best practices
Next steps: Improve Cultural and Linguistic Access

- **Prioritize Hire of Diversity Officer at Covered CA**
  - Report to Covered CA Director, Peter Lee
  - Accountable for ensuring cultural and linguistic access to Covered CA for diverse consumers

- **Ensure proper functioning of Covered CA website**
  - Repair glitches in English and Spanish website, other languages to come

- **Strengthen Capacity of Customer Service hotline**
  - Continue to hire more bilingual customer service reps
  - Ensure calls handled in set standard of 80% in 30 seconds in English, Spanish and other languages
  - Ensure LEP callers are not dropped between transfers
  - Conduct qualitative analysis of calls in other languages
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