

MEMORANDUM

June 2012

PRESIDENTS
Wendy Lazarus & Laurie Lipper

TO: California Policymakers Concerned with Children's Health

FROM: The Children's Partnership

RE: CHDP Gateway: Maximizing Its Potential for Children as the Affordable Care Act Is Implemented

In the publication *Building a Consumer-Driven Eligibility, Enrollment, and Renewal System: Essential Design Features for Effective Health Reform in California*, The Children's Partnership addressed the importance of creating linkages between the Child Health and Disability Prevention Program (CHDP) Gateway and new coverage options in the new post health reform landscape. This memo continues this discussion by providing a more detailed analysis of how to structure this linkage within the context of these essential goals or levers:

- Maintain the critical CHDP services and enrollment pathway via the CHDP Gateway for low-income children;
- Leverage CHDP's connections with harder-to-reach children most likely eligible for Medi-Cal and the Healthy Families Program in order to enroll as many children as possible;
- Utilize CHDP Gateway to reach and enroll other family members eligible for new coverage options; and
- Maximize the availability and use of federal funding.

The CHDP Gateway can serve as an effective avenue to achieve the goals of the Affordable Care Act (ACA)—namely taking enrollment to where children and families receive their health care, making a culture of coverage a reality for California's families.

Overview of the CHDP Gateway

CHDP provides periodic health assessments and referrals for any needed diagnosis and treatment¹ to Medi-Cal children under age 21 (through the federally mandated Early and Periodic Screening, Diagnosis and Treatment (EPSDT) benefit) and to all other children under age 19 with family income below 200% FPL. At the time of the health assessment, those children without full-scope Medi-Cal or Healthy Families coverage are processed through the electronic CHDP Gateway, which includes:

- *Pre-Enrollment (or Presumptive Eligibility)*: Eligible children (those meeting Medi-Cal or Healthy Families income eligibility rules) receive up to two months of full-scope Medi-Cal. Families must complete a Medi-Cal/Healthy Families application to continue this health coverage. Eligible children can pre-enroll through the Gateway as often as they are allowed visits per a periodicity schedule. In FY 2010-11, 503,649 children were pre-enrolled into Medi-Cal through the Gateway.²
- *Deemed Infant Enrollment*: Infants under one year of age whose mothers had Medi-Cal (including pregnancy-only coverage) at the time of delivery are automatically enrolled in Medi-Cal. Eligible infants receive full-scope Medi-Cal until their first birthday without their parent(s) having to complete an

¹CHDP does not provide or cover the cost of the treatment.

²E-mail communication with Rene Mollow, Chief, Medi-Cal Eligibility Division, California Department of Health Care Services, February 13, 2012.

application. While this process should occur at the hospital when the child is born, the CHDP Gateway serves as a stopgap measure by ensuring that eligible infants are enrolled in full-scope Medi-Cal at well-child visits.

The enrollment process through the Gateway works as follows:

1. The parent, legal guardian, or emancipated minor completes and signs a CHDP Program Pre-Enrollment Application (DCHS 4073). The one-page form asks:
 - General identifying information (address, date of birth, etc.).
 - The number of people in the family and income.
 - The child's Social Security Number (SSN), which is optional, and Benefits Identification Card (BIC) number (if applicable).
 - The mother's date of birth and BIC or SSN. (Note: the form asks that all patients under one year of age answer these questions, although it is only relevant if the mother is receiving Medi-Cal.)
 - Whether to receive a Medi-Cal/Healthy Families application to apply for continuing coverage.
2. The provider enters the data into a web-based interface or point of service (POS) terminal. (Note: in FY 2005-06, about 60% of Gateway transactions were submitted through the Internet interface.)³ The system determines presumptive Medi-Cal or Healthy Families eligibility in real time based on age, income, existing Medi-Cal/Healthy Families coverage (through a Medi-Cal Eligibility Data System (MEDS) interface), and whether the child is due for an exam in accordance with the periodicity schedule.
3. The provider receives a message back indicating the child's eligibility (or whether he/she is already enrolled in Medi-Cal/Healthy Families). The responses can include that the child is:
 - Eligible for temporary full-scope Medi-Cal/Healthy Families (or for full-scope Medi-Cal as a deemed infant).
 - Not eligible for temporary Medi-Cal/Healthy Families coverage but eligible for state-funded CHDP services (in cases where a child is in the system with a confirmed ineligible immigration status and is within the periodicity schedule).
 - Not eligible for either temporary Medi-Cal/Healthy Families or state-funded CHDP services based on eligibility factors (age, income, periodicity schedule).
4. The child eligible for temporary Medi-Cal/Healthy Families receives a printout of the response message, which must be signed by the parent/guardian and used to access medical care until the child's BIC comes in the mail. (Note: A child already enrolled in Medi-Cal/Healthy Families but with no BIC or a child eligible as a deemed infant also will receive the response message printout for temporary use.)
5. Families that provide consent receive a Medi-Cal/Healthy Families application in the mail (within 10 business days). Coverage is terminated at the end of the following month for families that did not consent to receive an application or if no completed application is received. These children can enter the Gateway again according to the periodicity schedule.

³C. Teare, *et al.*, "Connecting Kids to Health Coverage: Evaluating the Child Health and Disability Prevention Gateway Program," California Healthcare Foundation, August 2007.

6. Providers are encouraged to expedite services and arrange appointments for other needed services for those children enrolled in full-scope Medi-Cal during the temporary coverage period, although it is unclear how consistently this occurs. In addition, the provider must maintain the completed Gateway application and response message in the child's medical file.⁴

Children receiving presumptive eligibility receive coverage through the Medi-Cal fee-for-service delivery system, which is paid for by federal Title XIX (Medicaid) or Title XXI (Healthy Families) funds in addition to state general matching funds. For children found ineligible due to immigration status, CHDP services are paid for through state funds.

Issues for Consideration

The following findings from analyses conducted for the California HealthCare Foundation and The California Endowment are based upon a general program review, data covering the period October 1, 2005 to September 30, 2006, and focus groups conducted in 2006 with parents, providers, and CHDP staff.⁵

- A large number of children are receiving critical services through the CHDP Gateway (613,575 children passed through the Gateway and received more than 700,000 health assessment visits during the 2005-06 period).
- A number of infants (approximately 64,000) were deemed eligible for full-scope Medi-Cal coverage until age one.
- California has successfully utilized federal funding to pay for the coverage provided to these children and is appropriately targeting state funding to children not eligible for the public programs due to immigration status.
- Families do not seem to be enrolling through the CHDP Gateway multiple times for temporary coverage (13% of children pre-enrolled more than once during the 2005-06 period).
- In the 2005-06 period, the vast majority of children applying through the Gateway are not receiving ongoing coverage (only 12% of pre-enrollees received ongoing coverage), although that number appears to be increasing (21% in FY 2010-11).⁶ Although the vast majority (91%) of families request an application for ongoing coverage, only a small portion (28%) returned the applications. Families report never receiving an application, having a difficult time completing the application, and/or not understanding that the coverage they have is temporary (especially after receiving a BIC in the mail).
- Correctly completing the follow-up application and submitting required documentation is difficult for families. Even when an application is completed and returned, almost half are determined ineligible for coverage, most due to "failure to cooperate" with follow-up requests for information.
- Providers (and office staff) have limited capacity to educate families on the program when they are assisting them with applying for Gateway coverage. As a result, families report a general misunderstanding of what the program provides (beyond getting the doctor visit that day for free). Given limited provider capacity, it is not feasible to require families to provide additional eligibility elements or add procedural steps and education as a standard part of the Gateway process.

⁴California Dept. of Health Care Services, "Provider Responsibilities: Health Assessments," *CHDP Provider Manual*, April 2006.

⁵Comparable most recent data are generally not available. C. Teare, *et al.*, "Connecting Kids to Health Coverage: Evaluating the Child Health and Disability Prevention Gateway Program," California Healthcare Foundation, August 2007; "The CHDP Gateway: Barriers to Successful Enrollment in Medi-Cal and Healthy Families, Insights from Twelve Focus Groups with Parents of Uninsured Children, Providers, and CHDP Staff," The California Endowment, October 2006.

⁶This is one area where a comparison to contemporary data is possible. E-mail communication with Rene Mollow, Chief, Medi-Cal Eligibility Division, California Department of Health Care Services, February 13, 2012.

CHDP Gateway Options Under Health Reform:

Leveraging the Gateway to Provide Ongoing Enrollment and Coverage for the Whole Family

Given the important role that the CHDP Gateway plays in providing access to preventive care and a launching point for enrollment, California should continue the CHDP Gateway as an element of the new ACA enrollment and coverage system and modify its pre-enrollment linkage to Medi-Cal and Healthy Families to provide a streamlined coverage pathway for anyone else in the family who wants ongoing coverage. This could be accomplished by maintaining the essential services and pre-enrollment eligibility the CHDP Gateway currently provides for children while addressing some of the systemic issues the program has in connecting participants to ongoing coverage. This includes allowing applicants, at their option, to begin and possibly even complete an application for ongoing ACA coverage for the child and other family members (Medi-Cal/Healthy Families or subsidized Exchange coverage).

Some of the operational tasks required for these changes will require further exploration, and potentially further federal guidance, specifically as it relates to the ACA application requirements. However, generally, the State could undertake the following steps to effectuate these changes.

1. Revise the CHDP Pre-Enrollment form to better align it with the ACA application and to designate it as an application for the child's ongoing coverage, at the family's option, by asking the minimal set of questions required under federal law. (Note: Under federal presumptive eligibility rules, a child presumptively enrolled in coverage through the use of an application, rather than just a screening form, can maintain coverage until a final determination is made.)
 - Determine whether the questions on household and income can better capture information needed per the new ACA application guidelines. The intent would be to develop questions that are simplified enough for purposes of the presumptive eligibility determination, but which also could be used for full coverage purposes.
 - Retain provision of the child's SSN as an option but clarify that providing it would help facilitate ongoing coverage.
 - If other questions and/or declarations are required to designate the pre-enrollment form as an initial ACA application, provide families with the convenient option to answer those additional questions.
2. Provide families with the option to complete enrollment for the child and other family members needing coverage either at the time of the CHDP visit or afterwards. (Note: Infants enrolled via their mother's Medi-Cal coverage at the time of birth will already have completed this process; however, other family members could be asked whether they want coverage.) The capacity of providers to provide this assistance will vary. However, to facilitate this process, families could be linked with Navigators and/or providers could receive incentives for assisting the family in completing a full application online at the time of service. This might be particularly relevant in the clinic setting.
3. Build an interface between the electronic Gateway and California's Healthcare Eligibility, Enrollment, and Retention System (CalHEERS). Though the POS option for the Gateway would still be available, CHDP providers would log into the online system and have the ability to either start a CHDP pre-enrollment application (which allows for applicant choice to also initiate an application) or complete the entire enrollment process. If the child is eligible for pre-enrollment into Medi-Cal/Healthy Families and does not complete the enrollment process at the time of service, establish the following follow-up procedures:

- Family will be asked to provide consent for an assistor to follow up with them. If consent is provided, the assistor will receive their contact information via e-mail.
- Family will receive a printout of the temporary BIC with clear notification that the coverage is temporary unless they provide enough information to start (and ultimately complete) an application. The family will also be given information that helps them complete the process (including how to contact local assistors, the call center number, and a link to the online prepopulated application with their temporary id/password).
- Family will be asked to provide a cell phone number in order to receive text reminders about finalizing enrollment process. (While this option should be available to all applicants, those applying through the CHDP Gateway could have the additional benefit of receiving reminders about when their temporary coverage will end.)
- Family will also be sent a prepopulated application (by e-mail and/or mail, as per preferred method) and, once again, information on the many ways in which they can complete the process.

This process would allow the family to apply for coverage for other family members—at the same time, at their choice—and would not require them to start from scratch by completing a new application. This process envisions that the system will flag what remaining questions are needed (if going through an assistor or completing application online or by phone) or the family will use the prepopulated application.

Moving Forward: Steps to Take Before 2014

Because the full interface between the CHDP Gateway and the forthcoming CalHEERS system might not be in place when it launches ACA enrollment, the State will likely need to consider a phased-in approach to making these changes. Such a phased-approach would need to include the following priority next steps:

1. Maintain the CHDP program and the CHDP Gateway as it currently operates with presumptive eligibility at the child's CHDP visit.
2. Encourage providers to use the online system (when available) and make sure they are aware of the new eligibility opportunities for parents and other family members under the ACA.
3. Strengthen and improve the information families receive about the CHDP program, including clear notifications about the temporary nature of the coverage and what is needed to complete the enrollment process, should they choose to do so.
4. Begin developing a process to successfully interface the CHDP Gateway with the new CalHEERS system.