ACCESS TO CARE:

Improving Access to Care through Health Consumer Advocacy

ABOUT US:



Legal Services of Northern California

- Free legal services for health care consumers across 32 northern California counties
- Part of the Health Consumer Alliance
  - HCA Consumer Hotline: 888-804-3536
  - Healthconsumer.org
- Consumers can call or visit LSNC at:
  - 1-888-354-4474
  - 515 12th Street, Sacramento, CA 95814



ACCESS TO CARE:

Insurance Coverage in California

Types of insurance

- Public programs:
  - Medicare
  - Medi-Cal
  - County/17000 programs

- Private insurance:
  - Employer-sponsored
    - Self insured
    - Fully insured
  - Individual private plans
  - Private plans through Covered California (sometimes called “Obamacare”)

Health Insurance Options

Income Level	Insurance Program
0-138% FPL	Medi-Cal
139-400% FPL	Covered California (the Exchange) with subsidies
401%+ FPL	Covered California (the Exchange), with no subsidies
Residual	County 17000 program

COVERED CALIFORNIA

PREMIUM ASSISTANCE

AMERICAN INDIAN / ALASKA NATIVE PLANS

ENHANCED SILVER PLANS (100%-250%)

	SILVER 94 (100%-150%)			SILVER 87 (>150%-200%)	SILVER 73 (>200%-250%)					
% OF FPL	**100%**	**138%**	**150%**	**200%**	**213%**	**250%**	**266%**	**300%**	**322%**	**400%**
HOUSEHOLD SIZE 1	$12,140	$17,237	$18,210	$24,280	$26,604	$30,350	$33,244	$36,420	$40,218	$48,560
2	$16,460	$23,336	$24,690	$32,920	$36,019	$41,150	$44,981	$49,380	$54,451	$65,840
3	$20,780	$29,436	$31,170	$41,560	$45,433	$51,950	$56,738	$62,340	$68,683	$83,120
4	$25,100	$35,535	$37,650	$50,200	$54,848	$62,750	$68,495	$75,300	$82,915	$100,400
5	$29,420	$41,635	$44,130	$58,840	$64,263	$73,550	$80,253	$88,260	$97,148	$117,680
6	$33,740	$47,735	$50,610	$67,480	$73,677	$84,350	$92,010	$101,220	$111,380	$134,960
7	$38,060	$53,834	$57,090	$76,120	$83,092	$95,150	$103,767	$114,180	$125,613	$152,240
8	$42,380	$59,934	$63,570	$84,760	$92,506	$105,950	$115,524	$127,140	$139,845	$169,520
each additional person, add	$4,320	$6,100	$6,480	$8,640	$9,415	$10,800	$11,758	$12,960	$14,233	$17,280

DHCS California Department of HealthCareServices

MEDI-CAL FOR ADULTS

MEDI-CAL FOR PREGNANT WOMEN

MEDI-CAL ACCESS PROGRAM (FOR PREGNANT WOMEN)

MEDI-CAL FOR KIDS (0-18 yrs.)

COUNTY CHILDREN'S HEALTH INITIATIVE PROGRAM

Medi-Cal

Traditional Medi-Cal

- Categorical eligibility
  - Age (65+)
  - Disability
  - Program link (SSI, CalWORKs, foster care)
  - Families with kids under 21
- Income eligibility
  - Depends on program, can be up to 266% FPL
- Asset eligibility
  - $2k for an individual, $3k for a couple

MAGI Medi-Cal

- Income eligibility
  - Must be under 138% FPL
- Age eligibility
  - Must be under 65
- Not eligible for free Part A Medicare
- No asset test!

Medi-Cal – Coverage

- Adults: “services reasonable and necessary to protect life, to prevent significant illness or significant disability, or to alleviate severe pain (22 CCR 51303)

- Children get more: “services necessary health care, diagnostic services, treatment and other measures… to correct or ameliorate defects and physical and mental illnesses and conditions discovered by the screening services”

- Medi-Cal + other insurance = Medi-Cal is payer of last resort and must use Medi-Cal providers

Medi-Cal – Share of Cost

- Medi-Cal can be free or with a share of cost - depends on monthly income
  - Share of Cost: for people with countable incomes over the program limit, Medi-Cal subtracts the "Maintenance Need Level" (MNL) and the rest is the monthly SOC
  - Disabled Adults and Seniors: can "spend down" countable income to qualify for FPL program, if not they get ABD-MN (with a share of cost)

Covered California

- State/federal exchanges – marketplaces where people can purchase private health insurance and qualify for income based APTCs and CSRs
  - California's exchange = Covered California
- Advance Premium Tax Credits (APTCs) – sliding scale premium subsidies available for people with incomes 100-400% FPL
  - APTCs set up so households pay a certain percentage of their income towards the SLCSP (second lowest cost silver plan)
- Cost Sharing Reductions (CSRs) available for people with incomes up to 250% FPL
- Plans are available in different coverage levels: Bronze, Silver, Gold, and Platinum

Covered California

- Those with “minimum essential coverage” (MEC), such as Medicare, free Medi-Cal, or affordable employer coverage are not eligible for APTCs or CSRs.

- Open enrollment + SEPs
  - Coverage can only be purchase during open enrollment
  - Qualifying life events, such as loss of MEC, can trigger a “special enrollment period” (SEP)

Private insurance

- People can get private coverage:
  - From an employer,
  - Through Covered California, or
  - By purchasing directly from a health insurance company

- Relevant law depends on the type of plan:
  - Self-insured plans → ERISA, regulated by federal Department of Labor
  - Fully-insured plans → CA law, regulated by either DMHC or CDI

Medicare

- Medicare is the federal health insurance program for seniors and people with disabilities
  - "Seniors" = people 65+ years old with 40 quarters of work
  - "People with disabilities" = people who have received SSDI (Title II) benefits for at least 24 months

- Eligibility is NOT based on income (not a low income program)

- Original Medicare covers medically necessary care within the scope of covered benefits

Medicare is Divided into 4 Parts

- Part A – Hospital insurance:
  - Covers most inpatient hospital care, certain inpatient skilled nursing facility care, and certain hospice care
- Part B – Medical insurance:
  - Covers a portion of outpatient medical services such as doctors' services, outpatient hospital care, laboratory tests, outpatient physical and speech therapy, certain home health care, certain ambulance services, and certain medical equipment and supplies.
- Part C – Medicare Advantage:
  - Allows beneficiaries to enroll in and receive Medicare benefits through private health insurance plans.
- Part D – Prescription Drug Coverage:
  - Provides prescription drug coverage through private drug plans.

Medicare Costs

- Part A - Free for those with 40 quarters
- Part B
  - Standard monthly premium $135.50 for 2019 (but if eligible before, its lower)
  - State pays for people with free Medi-Cal
  - For medical services – Medicare pays 80% of covered services
- Part C - Medicare Advantage premiums
- Part D - premiums and drug co-pays
  - State pays for “benchmark” plans and subsidizes other plans for people on free Medi-Cal

Other Programs:

- Breast & Cervical Cancer Treatment Program (BCCTP)
  - Must need treatment for breast and/or cervical cancer
  - Income below 200% FPL

- County Indigent Healthcare Programs
  - Sacramento → CMISP + Healthy Partners
  - Placer → MCSP
  - Others → CMSP

HEALTH CONSUMER RIGHTS

Managed Care Rights

- Timely access to care
  - PCP appointment within 10 business days
  - Specialist appointment within 15 business days
- Geographic access to care
  - PCP within 30 minutes or 10 miles of patient's residence
  - Specialist within 30-90 minutes or 15-60 miles (depending on county size) of patient's residence
- Right to continuity of care

Health Plan Appeal Rights

- Fee-for-service Medi-Cal → state fair hearing
- Medi-Cal managed care → internal grievance, external grievance to DMHC, and state fair hearing
- Private managed care plans → internal grievance + external grievance to either DMHC or CDI
- Federal ERISA plans/self-funded plans → federal DOL

CREATING PARTNERSHIPS:

Incorporating Health Consumer Advocacy in a Healthcare Setting

What are health disparities?

- Population-specific differences in the presence of disease, health outcomes, quality of health care and access to health care services that exist across racial and ethnic groups.

What Causes Health Disparities?

- Social determinants of health
- Access to Care

Social Determinants

- Low levels of education
- Low socioeconomic status
- Violence in communities
- Unsafe housing
- Occupational hazards

What Can I Do?

- Look “upstream” - Think about affecting the sources of the problems
  - Ask about a patient’s “social history”
- Take a community-oriented approach to problem solving
- Partner with legal services providers to address issues through a Medical-Legal Partnership (MLP)

MLP Concept

- Social factors influencing a patient's health can be addressed through basic legal rights and advocacy

- Three steps:
  - Assess the social factors
  - Collaborate with legal partners
  - Improve the patient's overall health

Legal Problems are Health Problems



Income supports & Insurance



Housing & utilities



Employment & Education

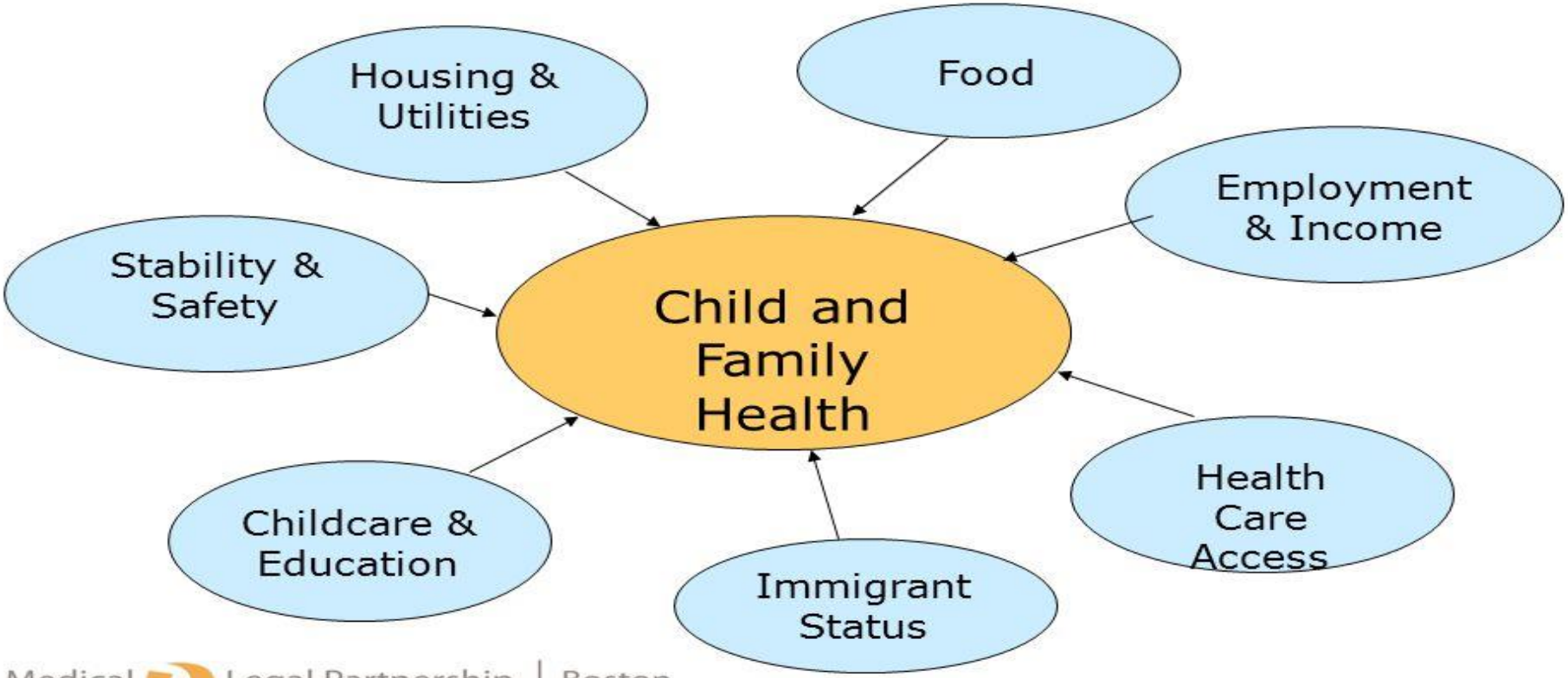


Legal status



Personal & family stability

Wide Range of Laws Governing Basic Needs Influence Child and Family Health



Medical Legal Partnership | Boston
RAISING THE BAR FOR HEALTH

Legal Services of Northern California

- Housing
  - Habitability
  - Evictions
  - Foreclosure
- Public Benefits/Income Support
  - CalWORKs
  - Disability Benefits (SSI, SSDI)
  - Employment related (SDI, UIB)
  - General Assistance
  - Food Stamps or CalFRESH
- Health
  - ACA – Covered CA; Medi-Cal Expansion
  - Medi-Cal, County, Medicare, Private Insurance
  - Medical Bills
- Employment
- Disability/Reasonable Accommodations

Questions?

- Liza Thantranon
- 515 12th Street
- Sacramento, CA 95814
- Lthantranon@LSNC.net
- (916) 551-2150

LEGAL SERVICES of NORTHERN CALIFORNIA