

Agn. No. ____
MAY 3, 2016

**MOTION BY CHAIR HILDA L. SOLIS
AND SUPERVISOR SHEILA KUEHL**

**ENSURING TRANSITION TO FULL-SCOPE MEDI-CAL FOR CHILDREN UNDER SB
75 AND REEVALUATION OF MHLA MONTHLY GRANT FUND ALLOCATIONS TO
COMMUNITY PROVIDERS**

Last year, Governor Jerry Brown signed SB 75, establishing that all children under 19 and in families with incomes of up to 266% of the federal poverty level are eligible for full-scope Medi-Cal, regardless of their immigration status. Now children in LA County will gain tremendously from the full suite of benefits that Medi-Cal offers.

It is estimated that at least 40,000, if not more, children in LA County will become newly eligible as a result of SB 75. This expansion will begin on May 16, 2016.

As of March 31, 2016 over 10,000 of these children were enrolled in the My Health LA Program (MHLA).

During previous Medi-Cal expansions, including the Low Income Health Program (LIHP) Transition to Medi-Cal in 2014 and the Deferred Action for Childhood Arrivals (DACA) Expansion in 2015, LA County residents experienced long delays in their enrollment

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onto Medi-Cal, erroneous denials for Medi-Cal enrollment and other disruptive challenges.

While much work has been done, we do not know how many children in MHLA, the Healthy Kids Program or the Kaiser Permanente Child Health Plan are currently enrolled in restricted-scope Medi-Cal. It is also unknown whether the necessary state system updates will be completed and functional by the scheduled May 16 implementation date.

Following the transition, MHLA Community Partner Clinics (CPs) will not know which of their MHLA children do or do not have full-scope Medi-Cal. Children who are not part of the transition will have to complete a new application. CPs will have to attempt to identify the status of their patients, educate them about the changes, explain the necessary steps and timeline to ensure their child gets back into a coverage program.

Under the MHLA contracts, children eligible for other coverage are ineligible for MHLA. Other programs serving uninsured children in LA County (i.e. L.A. Care's Healthy Kids Program and Kaiser Permanente's Child Health Plan) have extended their own programs into the Fall due to concerns over the successful transition to full-scope Medi-Cal for these children.

In light of the transitioning of the MHLA pediatric population to full-scope Medi-Cal this is an appropriate time to reevaluate the reimbursement rate for MHLA providers.

It is generally understood that children are healthier than the adult population, often requiring fewer visits per year than other adults with chronic disease. It is possible that with the movement of 10,000 children from the program onto Medi-Cal, clinics could see an increase in the average number of visits necessary to serve a solely adult population. Assumptions regarding the acuity of the overall MHLA population will need

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to be tested again to ensure the methodology remains reasonable and valid.

I, THEREFORE MOVE, THAT THE BOARD OF SUPERVISORS direct the Department of Health Services (DHS) to refrain from disenrolling children under 19 from the MHLA program until December 31, 2016 to ensure these children can successfully transition to full-scope Medi-Cal.

I, ALSO MOVE, THAT THE BOARD OF SUPERVISORS direct the Department of Public Social Services (DPSS) to conduct a match on monthly basis until December 31, 2016, between its database of Medi-Cal recipients and a monthly list of children under 19 enrolled in MHLA provided by DHS, to track progress in getting MHLA children enrolled in full-scope Medi-Cal and to facilitate disenrollment of MHLA children under 19 who are determined to be enrolled in full-scope Medi-Cal.

I, ALSO MOVE, THAT THE BOARD OF SUPERVISORS direct the Department of Health Services, in coordination with the Community Clinic Association of Los Angeles County, to conduct an analysis to reevaluate the rate methodology for MHLA, given that the program's percentage of adult members, who require a higher level of service than the program's pediatric population, will increase, and report back to the Board within 60 days with their findings.

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HLS: ss/jyp