

One-e-App (OEA) Tips Sheet – Change in Coverage End-Date

April 2019



The purpose of this Tips Sheet is to:

1. Explain changes to the OEA system which will become effective on April 18, 2019, whereby OEA will reflect that a MHLA participant's coverage period continues until the last day of the month that a person's coverage ends. This change will apply to all active OEA applications. Put another way, all disenrollments will take effect on the last day of the month regardless of when in the month the disenrollment occurred.
2. Explain changes to the OEA system that change OEA logic to provide coverage of 365 days + any remaining days at the end of the month where coverage ends.

BACKGROUND: Prior to the changes described in this Tips Sheet, OEA provided 365 days of coverage from the day a MHLA application was approved. (An exception to this rule occurred when a participant enrolled for the first time and was added to a household with active MHLA participants already enrolled. In this case, the new applicant's eligibility coverage period ended on the same date as his or her household members).

CHANGE IN COVERAGE PERIOD: Effective April 18, 2019, OEA logic will be changed to provide coverage of 365 days of MHLA coverage *plus* any additional remaining days at the end of the month that coverage ends for a participant. This change applies to all active OEA Applications. This change allows OEA to accurately reflect current MHLA policy which provides eligibility coverage through the end of the month that coverage ends.

EXAMPLE 1: New Application – One Person Application:

Application ID: 19002201833000015		Date Submitted: 11/27/2018 (2 days)						
Primary Informant: Alden Tate Address: Test, Broadway Manchester, CA, 90003 Phone: N/A Submitted By: Aparna Chaudhary								
Income Details								
Person Name		Income Type	Gross Income					
		No Income.						
Preliminary Eligibility for Programs								
Opt Out	Person ID	Person Name	Program Name	Coverage Type				
<input type="checkbox"/>	31900201000330182	Alden Tate	My Health LA	Secondary				
<input checked="" type="checkbox"/>	31900201000330182	Alden Tate	Medi-Cal - Restricted No Share of Cost	Primary				
Program Disposition Details								
Applicant Name	Program Name	Disposition	Disposition Date	Medical Home	Denial/Disenroll Reasons	Coverage Period	Disenrollment Date	Comments
▼ Tate, Alden	My Health LA	Approved	11/27/2018	QUEENSCARE-ECHO PARK	N/A	11/27/2018 - 11/30/2019	N/A	N/A
Application(s)								
19002201833000015 (NEW)	My Health LA	Approved	11/27/2018	Primary	N/A	11/27/2018-11/30/2019		

RESULT: This application was completed on 11/27/2018. The coverage period is 365 days *plus* the three remaining days at the end of the month that coverage ends (in this case, the three days between November 27 and November 30, 2019 were added to this participant's coverage period).

EXAMPLE 2: Modify an Application – Adding New Member to Household:

Preliminary Eligibility for Programs

Opt Out	Person ID	Person Name	Program Name	Coverage Type
<input type="checkbox"/>	31900201000330182	Alden Tate	My Health LA	Secondary
<input checked="" type="checkbox"/>	31900201000330182	Alden Tate	Medi-Cal - Restricted No Share of Cost	Primary
<input type="checkbox"/>	31900201005332189	Sandra Tate	My Health LA	Secondary
<input checked="" type="checkbox"/>	31900201005332189	Sandra Tate	Medi-Cal - Restricted No Share of Cost	Primary

Program Disposition Details

Applicant Name	Program Name	Disposition	Disposition Date	Medical Home	Denial/Disenroll Reasons	Coverage Period	Disenrollment Date	Comments
▼ <u>Tate, Alden</u>	My Health LA	Approved	11/29/2018	QUEENSCARE-ECHO PARK	N/A	11/27/2018 - 11/30/2019	N/A	N/A
Application(s)								
19002201833000015 (NEW)	My Health LA	Approved	11/27/2018		Primary	N/A	11/27/2018-11/28/2018	
19002201833200037 (MODIFIED)	My Health LA	Approved	11/29/2018		Primary	N/A	11/29/2018-11/30/2019	
▼ <u>Tate, Sandra</u>	My Health LA	Approved	11/29/2018	VENICE-COLEN	N/A	11/29/2018 - 11/30/2019	N/A	N/A
Application(s)								
19002201833200037 (NEW)	My Health LA	Approved	11/29/2018		Primary	N/A	11/29/2018-11/30/2019	

RESULT: This modification was completed on 11/29/2018. The coverage period for each household member is 365 days *plus* the remaining one day at the end of the month.

- Because Alden is a participant whose enrollment end-date is 11/28/2018, OEA adds to his 365 days of coverage the additional days at the end of the month that his coverage ends. In Alden's example, he actually has 367 days of MHLA coverage, as his coverage will continue until the last day of November.
- Because Sandra is added to the Application on 11/29/2018, OEA adds to her 365 days of coverage one extra day at the end of the month that coverage ends. This provides Sandra with MHLA coverage through the last day of November 2019.
- The coverage end-date for all household members in the application is 11/30/2019.

EXAMPLE 3: Renew an Application. During renewal, add a new member.

Preliminary Eligibility for Programs										
Opt Out	Person ID	Person Name	Program Name	Coverage Type						
<input type="checkbox"/>	31900201003337189	Allen Phelps	My Health LA	Secondary						
<input checked="" type="checkbox"/>	31900201003337189	Allen Phelps	Medi-Cal - Restricted No Share of Cost	Primary						
<input type="checkbox"/>	31900201004337187	Timothy Phelps	My Health LA	Secondary						
<input checked="" type="checkbox"/>	31900201004337187	Timothy Phelps	Medi-Cal - Restricted No Share of Cost	Primary						
<input type="checkbox"/>	31900201006337182	Chandler Phelps	My Health LA	Secondary						
<input checked="" type="checkbox"/>	31900201006337182	Chandler Phelps	Medi-Cal - Restricted No Share of Cost	Primary						

Program Disposition Details										
Applicant Name	Program Name	Disposition	Disposition Date	Medical Home	Future Medical Home	Change Reason	Denial/Disenrollment Reasons	Coverage Period	Disenrollment Date	Comments
▼ Phelps, Allen	My Health LA	Approved	12/04/2018	WESTSIDE FAMILY HEALTH CENTER	QUEENSCARE-ECHO PARK	Renewal Medical Home Changes	N/A	12/27/2017 - 12/31/2019	N/A	N/A
Application(s)										
19002201833700077 (NEW)		My Health LA	Approved	12/27/2017	Primary	N/A	12/27/2017-12/26/2018			
19002201833700093 (RENEWED)		My Health LA	Approved	12/04/2018	Primary	N/A	12/27/2018-12/31/2019			
▼ Phelps, Timothy	My Health LA	Approved	12/04/2018	WESTSIDE FAMILY HEALTH CENTER	QUEENSCARE-ECHO PARK	Renewal Medical Home Changes	N/A	12/27/2017 - 12/31/2019	N/A	N/A
Application(s)										
19002201833700077 (NEW)		My Health LA	Approved	12/27/2017	Primary	N/A	12/27/2017-12/26/2018			
19002201833700093 (RENEWED)		My Health LA	Approved	12/04/2018	Primary	N/A	12/27/2018-12/31/2019			
▼ Phelps, Chandler	My Health LA	Approved	12/04/2018	QUEENSCARE-ECHO PARK		N/A	N/A	12/04/2018 - 12/31/2019	N/A	N/A
Application(s)										
19002201833700093 (NEW)		My Health LA	Approved	12/04/2018	Primary	N/A	12/04/2018-12/31/2019			

RESULT: The renewal was completed on 12/04/2018. The coverage period for each household member is 365 days *plus* the additional days of the month of December.

- Because Allen and Timothy are renewing participants whose enrollment end-date is 12/27/2018, OEA adds 365 plus the four remaining days at the end of the month that coverage ends. This provides coverage through the last day of December 2019.
- Because Chandler is added to the application on 12/04/2018, his enrollment end-date would be 12/31/2019, to match the end date of his household members. Therefore, all of the members of this household have coverage through the last day of December 2019.

EXAMPLE 4: DISENROLLED: Application is dis-enrolled on 9/26/2018 for failure to Renew.

Program Disposition Details									
Applicant Name	Program Name	Disposition	Disposition Date	Medical Home	Denial/Disenrollment Reasons	Coverage Period	Disenrollment Date	Comments	
▼ Test, Bradley	My Health LA	Approved	12/11/2018	ST. JOHN'S-DR. KENNETH WILLIAMS	N/A	12/11/2018 - 12/31/2019	N/A	N/A	N/A
Application(s)									
19002201834300109 (Disenrolled)		My Health LA	Disenrolled	09/26/2018	Primary	Did Not Complete Renewal.	09/27/2017-09/26/2018		

▼ Test, Arlene	My Health LA	Pending	N/A	ST. JOHN'S-DR. KENNETH WILLIAMS	N/A	09/27/2017 - 09/26/2018	N/A	N/A
Application(s)								
19002201834300109 (Disenrolled)	My Health LA	Disenrolled	09/26/2018	Primary	Did Not Complete Renewal.	09/27/2017-09/26/2018		

EXAMPLE 4 (continued): READD (aka Re-enrollment): Application is re-enrolled following a disenrollment. One household member re-enrolled. One household member is pending because her application is incomplete.

Program Disposition Details

Applicant Name	Program Name	Disposition	Disposition Date	Medical Home	Denial/Disenroll Reasons	Coverage Period	Disenrollment Date	Comments
▼ Test, Bradley	My Health LA	Approved	12/11/2018	ST. JOHN'S-DR. KENNETH WILLIAMS	N/A	12/11/2018 - 12/31/2019	N/A	N/A
Application(s)								
19002201834300109 (Disenrolled)	My Health LA	Disenrolled	09/26/2018	Primary	Did Not Complete Renewal.	09/27/2017-09/26/2018		
19002201834400099 (READD)	My Health LA	Approved	12/11/2018	Primary	N/A	12/11/2018-12/31/2019		
Application(s)								
▼ Test, Arlene	My Health LA	Pending	N/A	ST. JOHN'S-DR. KENNETH WILLIAMS	N/A	09/27/2017 - 09/26/2018	N/A	N/A
Application(s)								
19002201834300109 (Disenrolled)	My Health LA	Disenrolled	09/26/2018	Primary	Did Not Complete Renewal.	09/27/2017-09/26/2018		

RESULT: Bradley's re-enrollment was completed on 12/11/2018. The coverage period for each household member who successfully re-enrolls is 365 days *plus* the additional days of the month of December.

- The coverage period for Bradley is 365 days plus the remaining 20 days until the end of the month, 12/31/2019.
- Because Arlene's enrollment has not been completed, she remains disenrolled at the time of Bradley's re-enrollment. If she were to successfully re-enroll during December 2018, her coverage would also end on last day of December 2019, the same as Bradley.