TO: All County Welfare Directors

SUBJECT: CMSP Policy on Determination of Other Health Coverage Under Covered California

All County Letter No. 14-02 provided direction concerning CMSP eligibility and the determination of the availability of other health coverage under Covered California. This policy separates CMSP applications between those that are subject to the Covered California open enrollment period and those that are not subject to the open enrollment period. The policy became effective January 1, 2014.

The Board of Covered California recently revised the dates for the next Covered California open enrollment period to be November 15, 2014 through February 15, 2015. To align CMSP policy with the revised dates for Covered California open enrollment, the policy established under Article 3, Section 3-012.3 of the CMSP Eligibility Manual has been revised accordingly. A copy of these changes is attached. Please Note: The changes revise the periods during which applications for CMSP are considered inside and outside of a Covered California open enrollment period.

The changes contained in this All County Letter are effective October 1, 2014. Prior to receipt of this ACL, if counties have pended CMSP applications as being subject to the Covered California open enrollment period effective October 1, counties are directed to rescind that action and implement such actions in accordance with the requirements of this Letter.

Thank you for your attention to this matter. If you have any questions, please contact Alison Kellen, Program Manager, at (916) 649-2631, extension 19 or by email at akellen@cmspcounties.org.

Sincerely,

Kari Brownstein
Director of Finance & Administration
Policy on Determination of Other Health Coverage
Under Expanded Medi-Cal and Covered California

Revised CMSP Eligibility Manual Section 3-012.3

3-012.3 Evaluation for Expanded (MAGI-Based) Medi-Cal and Covered California

CMSP is the “payer of last resort.” Prior to evaluating eligibility for CMSP, all applicants shall be evaluated for all Medi-Cal programs, including the Medi-Cal expansion beginning January 1, 2014 (MAGI-based Medi-Cal). In addition, all applicants shall be evaluated for Covered California. For CMSP applicants that may be eligible for Covered California, the following rules shall apply:

A. Applications Subject to Covered California Open Enrollment Period

1. Beginning January 1, 2014 an application for CMSP shall be “subject to the Covered California open enrollment period” when the application is pending disposition action by the county:

   a. Between January 1, 2014 and February 26, 2014; and,

2. Beginning February 1, 2015 and for each following year, an application for CMSP shall be considered “subject to the Covered California open enrollment period” when the application is pending disposition action by the county between the first day of open enrollment to the 15 days prior to the close of open enrollment. CMSP will send out an instructional ACL to counties each year advising of the open enrollment periods.

3. When applications are subject to a Covered California open enrollment period, applicants for CMSP that are not otherwise eligible for Medi-Cal shall be required to do the following:

   a. Provide electronic or written evidence to the county that an application has been made to Covered California for health insurance coverage.
      i. Such evidence may be obtained by the county through electronic interface as systems may allow.

   b. Provide electronic or written evidence to the county that the applicant has paid the first month’s premium for participation in Covered California, when required.
      i. Such evidence may be obtained by the county through electronic interface as systems may allow.

4. Counties shall notify CMSP applicants of the requirements described in 3 (a) and (b) at the time of application if application is to be made on the CMSP application form.
If application is to be made using an alternative application form or method, including any application otherwise accepted for Medi-Cal, the applicant shall be notified of these requirements at the time of application processing by the county.

5. For 2014 only, for CMSP applications that are pending disposition action by the county in January through February, applicants shall provide the evidence set forth in 3 (a) and (b) as soon as possible but no later than February 26. For CMSP applications that are pending disposition action by the county between November 15, 2014 and January 31, 2015, applicants shall provide the evidence set forth in 3 (a) and (b) as soon as possible but no later than January 31, 2015.

6. Beginning February 1, 2015 and each following year, for CMSP applications that are pending disposition action by the county between the first day of open enrollment and the date that is 15 days prior to the close of open enrollment applicants shall provide the evidence set forth in 3 (a) and (b) as soon as possible but no later than 15 days prior to the close of open enrollment.

7. Applicants that fail to comply with the requirements set forth in 3 (a) and (b) shall be determined in non-compliance with CMSP eligibility rules that require applicants to cooperate, initially and during the course of CMSP eligibility, in availing themselves of other health coverage. Such applicants shall be denied eligibility for CMSP for noncooperation.

8. If all other CMSP eligibility criteria are met, applicants that provide the evidence set forth in 3 (a) and (b) shall be approved for CMSP for the period commencing with the first of the month of application to the beginning of the Covered California coverage period, or for three months, including the month of application, whichever is shorter.

9. CMSP applicants that are denied CMSP eligibility during a period that is subject to the Covered California open enrollment period due to non-compliance with the requirements set forth in 3 (a) and (b) may apply for CMSP beginning with the first of the month following the period that is subject to the Covered California open enrollment period.

   a. For CMSP applicants that are denied CMSP eligibility due to non-compliance with 3 (a) and (b), the beginning date of aid for CMSP shall be the first of the month in which the application is taken after the end of period that is subject to the Covered California enrollment period.

B. Applications Not Subject to Covered California Open Enrollment Period

1. Beginning January 1, 2014, an application for CMSP shall be considered “not subject to the Covered California open enrollment period” when the application is received and pending disposition by the county between February 27, 2014 and November 14, 2014.
2. Beginning February 1, 2015 and for each following year, an application shall be considered “not subject to the Covered California open enrollment period” when the application is received and pending disposition action by the county on or after the date that is 15 days before the end of the Covered California open enrollment period and the day prior to the date of the start of the next open enrollment period.

3. During any period when applications are not subject to the Covered California open enrollment period, CMSP applicants that are not otherwise eligible for Medi-Cal shall be required to do the following:

   a. Provide electronic or written evidence of any participation in Covered California that was terminated for lack of monthly premium payment.
      
      i. Such evidence may be obtained by the county through electronic interface as systems may allow.
      
      ii. Processing of the application shall not be completed until the applicant provides this evidence.

   b. Provide an attestation that none of the conditions outlined below are applicable. These conditions are considered special circumstances for enrollment in Covered California outside of an open enrollment period:
      
      i. A qualified individual or a dependent's loss of Minimum Essential Coverage;
      
      ii. A qualified individual gains a dependent or becomes a dependent;
      
      iii. An individual not previously a U.S. citizen, U.S. national or lawfully present gains such status;
      
      iv. A qualified individual's enrollment or disenrollment in a Covered California Plan (CCP) is unintentional, inadvertent, or erroneous as a result of an error, misrepresentation, or inaction of the staff or instrumentalities of Covered California or Health and Human Services;
      
      v. An enrollee adequately demonstrates that a CCP substantially violated a material provision of its contract in relation to the enrollee;
      
      vi. An enrollee is determined newly eligible or newly ineligible for Advanced Premium Tax Credit (APTC) or has a change in eligibility for cost-sharing reduction (CSR);
      
      vii. An individual whose existing coverage through an eligible employer-sponsored plan will no longer be affordable or provide minimum value;
      
      viii. A qualified individual or enrollee gains access to new CCPs as a result of a permanent move; this also applies to individuals recently released from incarceration; or,
      
      ix. A qualified individual who is an Indian may enroll in a CCP or change to another one time per month.
4. If the attestation described in 3 (b) finds none of the conditions are applicable, a
determination of eligibility for CMSP shall be made following receipt of all other
information required to determine eligibility.

5. If the attestation described in 3 (b) finds one or more of the conditions are
applicable, the applicant shall be required to do the following:
   a. Provide electronic or written evidence to the county that an application has
      been made to Covered California for health insurance coverage.
      i. Such evidence may be obtained by the county through electronic
         interface as systems may allow.
   b. Provide electronic or written evidence to the county that the applicant has
      paid the first month’s premium for participation in Covered California.
      i. Such evidence may be obtained by the county through electronic
         interface as systems may allow.

6. If the applicant fails to provide the evidence described in 3 (b) or 5 (a) and 5 (b)
within sixty (60) days of the qualifying date for the special circumstance, or as
otherwise required by Covered California, the CMSP application shall be denied.