

# Application Submitted...What's Next?

**Stronger Bridges to Health Forum 2009  
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# Introductions



## 1. Introductions:

- Your name & organization you work at

## 2. Please share in a small statement what inspires you to do this type of work.

## 3. What do you hope to learn at this workshop?

# Application Submitted...What's Next?



- Through the HSF training committee, and GGHI Network, and many surveys, we found that San Francisco Certified Application Assistors and Health Program Advocates were interested learning tools that would help them educate families on how to navigate and use services through the public health programs they are enrolled in.

# Application Submitted..What's Next?



“I helped enroll a family where the mom was enrolled in Medi-Cal, Father in HSF, one child in HFP, another one in HK, and a newborn in MC for children. Both parents were overwhelmed after I helped them with applications. They come to me for questions all the time. I don't mind, but they ask me questions I don't know the answers to. When will coverage begin? Where can they go for services and how much will it cost. Jose help me?!!”

# Today's Agenda Items



1. Review how programs process applications
  - Medi-Cal for Adults, Medi-cal for Children & Pregnant Women, Healthy Families, Healthy Kids, *Healthy San Francisco*
2. Review available health plans, dental plans, and vision plans available through each public health program for members

# Today's Agenda Items



**For each program we will review:**

- **Each application type and mode of submission**
- **Specials instructions for each mode submission**
- **Review number of days it takes for an application to be processed**
- **When will coverage begin?**

# CAA Tools



## Review:

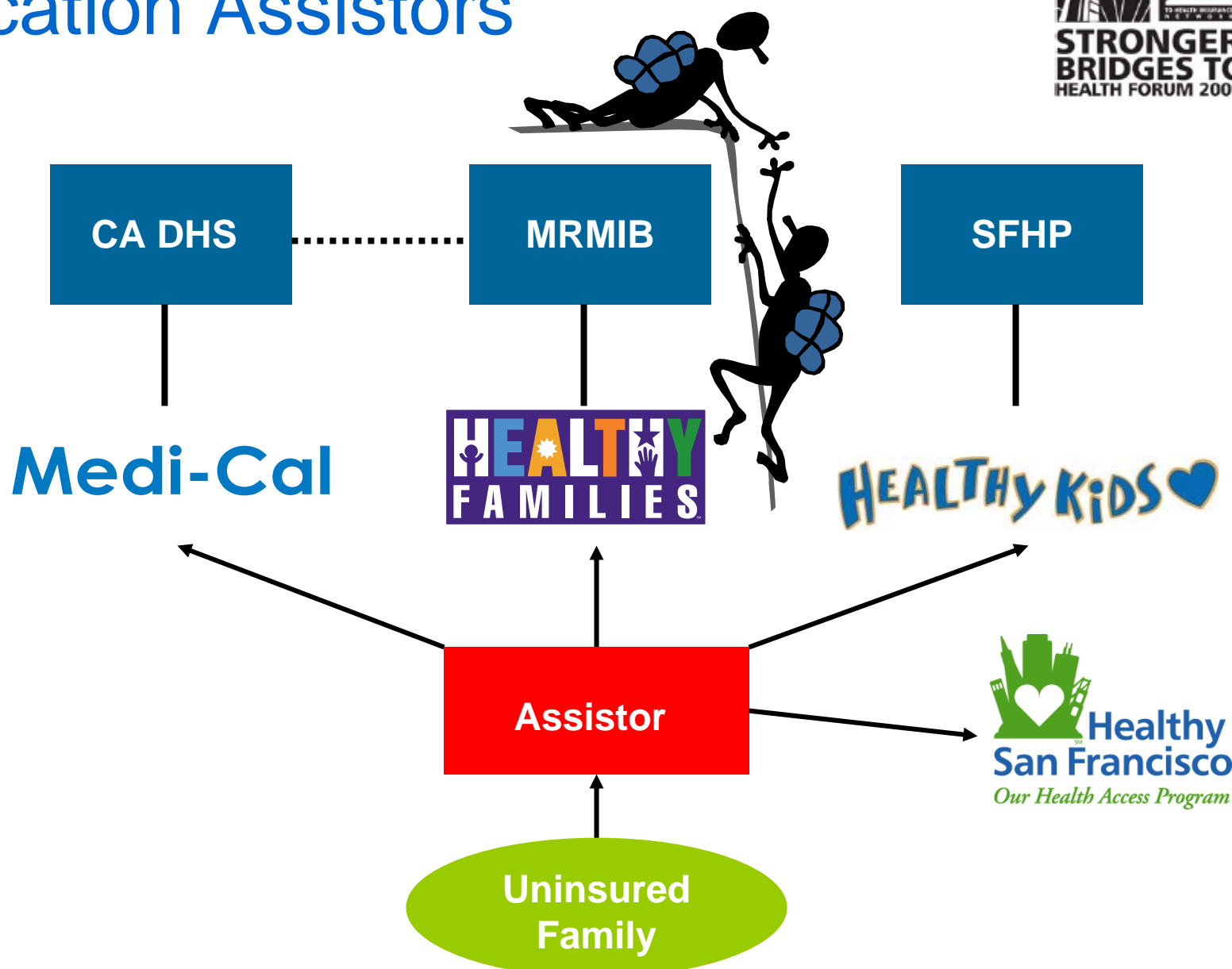
- **Special program phone numbers for CAA Assistance**
- **Downloadable forms and other CAA resources**
- **Special instructions and messages for applicants**

# Application Assistors



- **You play an important role!**
- **You are connecting applicant to a public health program**
- **For many applicants, it may be the first time they are applying for program coverage (ex. Recent immigrant, applicant who just lost job)**
- **You are a teacher**
- **You will become the face of the program in some cases the health plan to the applicant**

# Application Assistors



# Application Assistors



Stay away from:

- Bending Eligibility Rules (Assistor vs. Advocate)
- Answering questions you should not answer (Application Assistor vs. Customer Service vs. Medical Home)

# Application Assistors



- Always Pre-Screen before you begin an application
- Make sure you have all required verifications
- Explain eligibility rules to family and possible fees
- Go over program policies with applicant before they sign application (ex. *Healthy San Francisco Acknowledgment Form*)
- Explain: Public Health Program vs. Health Plan

# Public Health Programs



- Medi-Cal
- Healthy Families
- Healthy Kids
- Healthy San Francisco

# Health Plans



- San Francisco Health Plan
- Blue Shield
- Health Net HMO
- Kaiser Permanente
- Anthem Blue Cross

# What is an HMO?



- A Health Maintenance Organization “HMO, sets out guidelines under which doctors can operate.
- The HMO has its roots in the early part of the 20th century. Many businesses began offering their employees prepaid medical programs, under which their care was looked after so long as it fell within the scope of allowed procedures.
- In 1973, the U.S. Department of Health and Human Services passed the HMO Act, which helped cement the HMO as a part of the American medical universe.
- Health care coverage through the use of an HMO costs less than comparable traditional health insurance with a trade-off of limitations on the range of treatments available.

# What is an HMO?



- 2 ways in which an HMO is able to offer cheaper health care.
- First, by contracting with specific providers of health care and dealing with large quantities of patients, the HMO is able to negotiate for more affordable health care than the patients would otherwise receive.
- Secondly, by eliminating treatments that the HMO views as unnecessary, and by focusing on preventative health care with an eye toward the long-term health of their members, the HMO reduces costs.
- When one joins an HMO, one is usually asked to choose a primary care physician. This doctor then acts in part as the HMO's agent in determining what treatments the patient does and does not need.
- When the primary care physician determines that the patient needs care they cannot offer, they give a referral to a specialist that can address the patient's concerns.

# What is an HMO?



San Francisco's 4 Public Health Programs have adopted the HMO model:

- After successful enrollment, members are asked to choose a health plan, dental plan, and vision plan
- For HSF, participants are asked to choose a medical home.

# Application Assistors



- **Advise applicant how long application will take to be processed**
- **Advise applicant when coverage may begin**
- **Give applicant the following phone numbers:**
  1. Customer Service of program they applied to or got enrolled in
  2. Customer Service of health plan they choose
  3. Your phone number

# Application Assistor



## Remind Applicant:

- If there is successful enrollment, eligibility will be good for 12 months
- They must call the public health program and health plan to report a change in address and phone number
- When they receive their renewal packet or letter, call an Application Assistor and make an appointment for application assistance

# Frustrated Applicant: Poor Application Assistance



# Excellent Application Assistance



# Modes of Submission & Special Instructions



## Medi-Cal: 4 Options

1. Medi-Cal Paper Application (MC 210)
  - **Application sent to 1440 Harrison**
2. MC/ HFP Joint Application (MC 321)
  - **Application sent to 1440 Harrison**
  - **Single Point of Entry**
3. MC (MC 210)
  - **Application sent to 1440 Harrison**

# Modes of Submission & Special Instructions

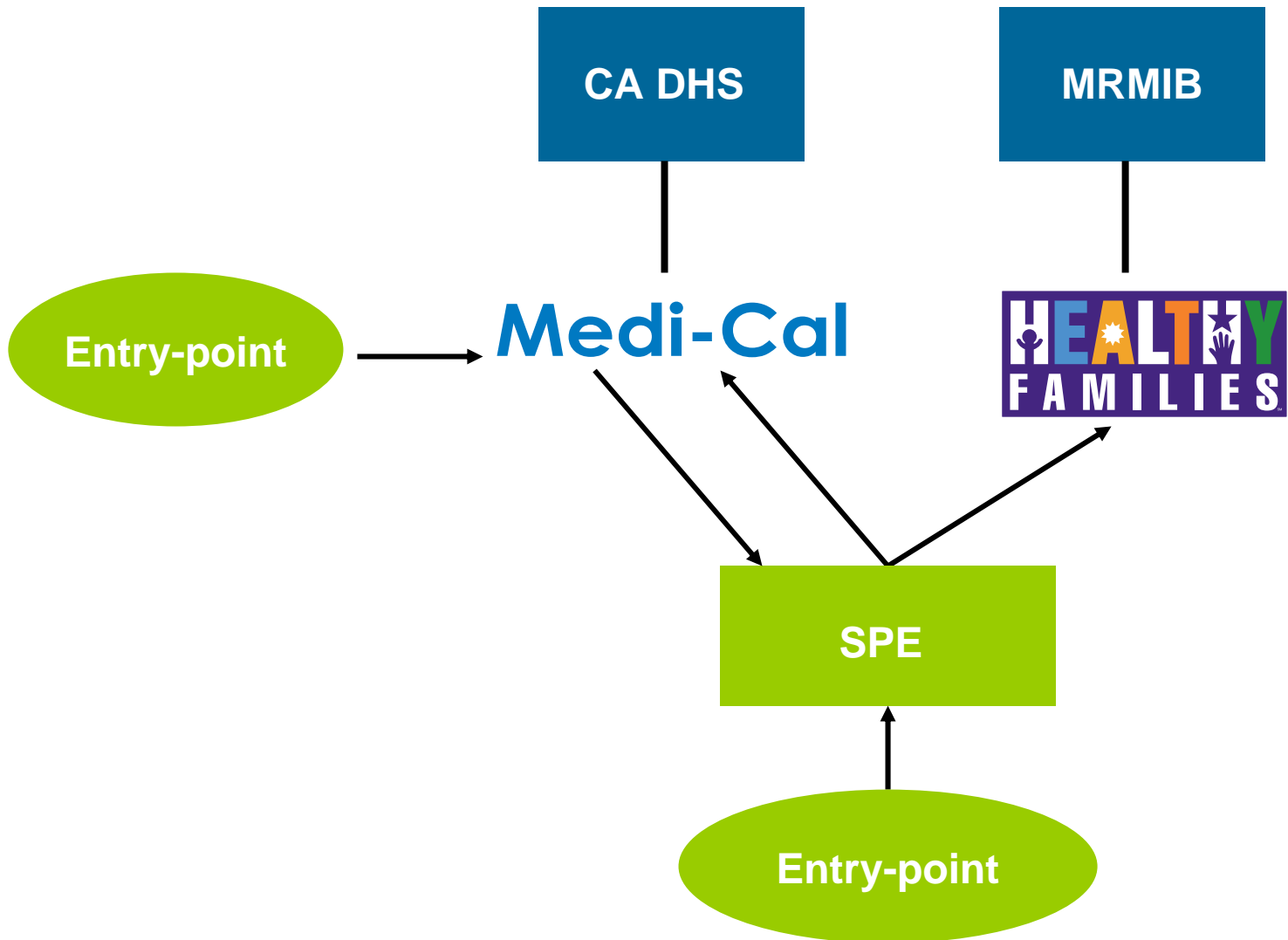


## Medi-Cal

### 4. One-e-App Universal Summary

- Interface between One-e-App and CalWin system
- Medi-Cal Record Management team downloads application with faxed in verifications
- Application assigned to Eligibility Worker 48 hours after Assistor submits application through One-e-App
- Send in application, even if application is incomplete

# Medi-Cal Modes of Submission “MC 321”



# Medi-Cal: Number of Days to Process



- Up to 45 business days total from date application was received
- Usually the process is much faster
- Application assigned to eligibility worker 48 hours after application is received
- If applicant gets asked for more information, applicant has 10 days to send item

# Medi-Cal: Coverage Begins



- Coverage begins the 1<sup>st</sup> day of the month when application was submitted
- Benefits are activated 2 business days from the day application is approved
- Applicant asked if they have outstanding medical bills 3 months before from date of application. Medi-Cal coverage includes 3 months retroactive coverage

# Medi-Cal: Coverage Begins



- Medical will send a written notice stating who is eligible for Medi-Cal and if coverage is free or not.
- Notice will have name and number of Medi-Cal representative who applicant may contact if he/she has questions or changes to report or if member loses BIC card.

# Medi-Cal: Coverage Begins



- Every person in household who qualifies for Medi-Cal will receive white plastic Benefits Information Card (BIC) in mail.
- Member must present this card when accessing services.

# Medi-Cal: Coverage Begins



- Most members who receive free Medi-cal are required to join a managed care plan
- Most San Franciscans join one of two managed care plans:

San Francisco Health Plan: 1-888- 558-5858

Blue Cross: 1-800-227-3238

# Medi-Cal: Coverage Begins



- Medi-Cal members who are seniors and persons with disabilities “SPD” are not required to enroll in a plan but may do so voluntarily by calling (800) 430-4263
- SPD Medi-Cal members may choose the Fee for Service option where member picks provider who accepts Medi-Cal

# Medi-Cal: Coverage Begins



- Members will receive managed care information by mail, including provider directories
- Members are encouraged to attend a public presentation to help them decide on a plan:

For schedule and location call Health Care Options: (800) 430-4263

- It usually takes 15 to 45 days to enroll in a health plan
- If member does not select plan within 30 days, the state will assign a plan. Member can change plan later.
- Member can change health plans by calling (800) 430-4263

# Medi-Cal: Coverage Begins



- After applicant selects a health plan, they will be able to choose a provider
- The member will receive a health plan card 7 days after they choose their health plan

# Medi-Cal: Benefits



- Preventive Care
- Primary and Specialty Health Care
- Mental Health Services
- Hospitalizations
- Prescription Medicines
- Dental and Vision Services will be covered by Medi-Cal for Adults until July 1, 2009

# Medi-Cal CAA Resources



- Medi-Cal Hotline: 415-863-9892
- Medi-Cal Eligibility Workers Answer Medi-Cal Hotline
- Assistors must identify themselves as Application Assistors

# Medi-Cal CAA Resources



- Eligibility Forms:

[www.dhcs.ca.gov/formsandpubs/forms/Pages/MCEBbyNumber.aspx](http://www.dhcs.ca.gov/formsandpubs/forms/Pages/MCEBbyNumber.aspx)

- Applications:

[www.dhcs.ca.gov/services/medical/Pages/MediCalApplicatins.aspx](http://www.dhcs.ca.gov/services/medical/Pages/MediCalApplicatins.aspx)

- Medical Official Website:

[www.sfhsa.org/Medi-CalHealthConnections.htm](http://www.sfhsa.org/Medi-CalHealthConnections.htm)

# Modes of Submission & Special Instructions



## Medi-Cal for Children & Pregnant Women: 3 Options

1. Health-e-App
  - Electronic Submission
2. MC/HFP Joint Application (MC 321)
  - Mail-In application (Family must mail in their own application)

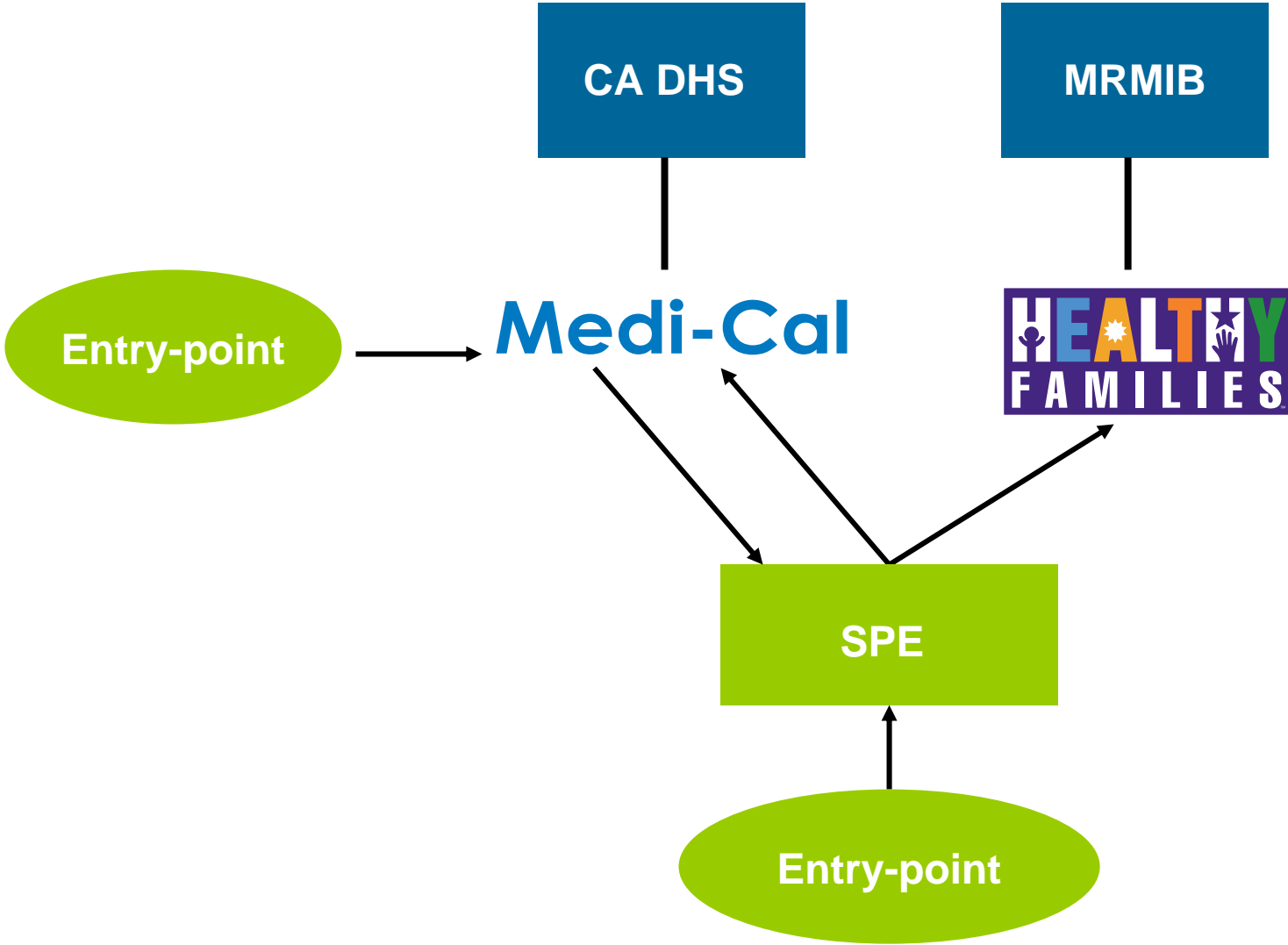
# Modes of Submission & Special Instructions



## 3. One-e-App

- Electronic Submission via direct connection to Health-e-App.
- Assistor must fax documents into One-e-App and Health-e-App

# Medical for Children & Pregnant Women Application Mode of Submission



# Medi-Cal for Children & Pregnant Women: Number of Days to Process



- Up to 45 days total from the date application was received
- Single Point of Entry (SPE) has up to 10 business days of 45 to process from date application was received.
- If SPE determines pre-eligibility for Medi-Cal, application is forwarded to (H.S.A) County Medi-cal office
- (H.S.A.) County Medi-Cal office has the remainder 45 days

# Medi-Cal for Children & Pregnant Women: Coverage Begins



- Coverage begins the 1<sup>st</sup> day of the month when application was submitted
- Benefits activated 2 business days from the day application is approved
- Medi-Cal will send a written notice stating who is eligible for Medi-Cal and if coverage is free or not.
- Notice will have name and number of Medi-Cal representative who applicant may contact if he/she has questions or changes to report or if member loses BIC card.

# Medi-Cal for Children & Pregnant Women: Coverage Begins



- Children in household who qualify for Medi-Cal will receive white plastic Benefits Information Card (BIC) in mail.
- Member must present this card when accessing services.
- Parents of enrolled children can choose between:  
San Francisco Health Plan: 1-888-558-5858  
Blue Cross: 1-800-227-3238

# Medi-Cal for Children and Pregnant Women: Coverage Begins



- Members will receive managed care information by mail, including provider directories
- Members are encouraged to attend a public presentation to help them decide on a plan:

For schedule and location call Health Care Options:  
(800) 430-4263

# Medi-Cal for Children and Pregnant Women: Coverage Begins



- It usually takes 15 to 45 days to enroll in a health plan
- If member does not select plan within 30 days, the state will assign a plan. Parent of child can change plan later.
- Member can change health plans by calling (800) 430-4263

# Medi-Cal for Children & Pregnant Women: Coverage Begins



- After applicant selects a health plan, they will be able to choose a provider
- The member will receive a health plan card 7 days after they choose their health plan

# Medi-Cal for Children



- Dental Services:

Delta Dental: 1-877-580-1042

- Vision Services

Vision Service Plan: 1-800-877-7239

- Services are free!

# Medical for Children & Pregnant Women



- Restricted vs. Full Scope
- Share of Cost vs. No Cost

# Medi-Cal for Pregnant Women



- Services offered: Prenatal, delivery, postpartum-related services
- Family income must be at or below 200% FPL. A pregnant woman is counted as a family of two (herself and unborn child)
- Pregnant women legal status not a factor

# Medical for Children & Pregnant Women: CAA Tools



- CAA/EE Help Line  
1-800-279-5012
- Single Point of Entry  
1-800-279-5012
- H.S.A. (County Medi-Cal Office) 863-9892

# Medical for Children & Pregnant Women: CAA Tools



- Healthy Families Reference Manual
- CAA Resources:  
[www.healthyfamilies.ca.gov/EEs\\_CAAs/](http://www.healthyfamilies.ca.gov/EEs_CAAs/)
- Applications:  
[www.healthyfamilies.ca.gov/Downloads/Applications.aspx](http://www.healthyfamilies.ca.gov/Downloads/Applications.aspx)
- Local Medi-Cal Office Website:  
[www.sfhsa.org/Medi-CalHealthConnectinos.htm](http://www.sfhsa.org/Medi-CalHealthConnectinos.htm)

# Modes of Submission & Special Instructions



## Healthy Families: 3 options

### 1. Health-e-App

- Electronic Submission

### 2. MC/ HFP Joint Application (MC 321)

- Mail-In application (family must mail in their own application). Will receive invoice later

### 3. One-e-App

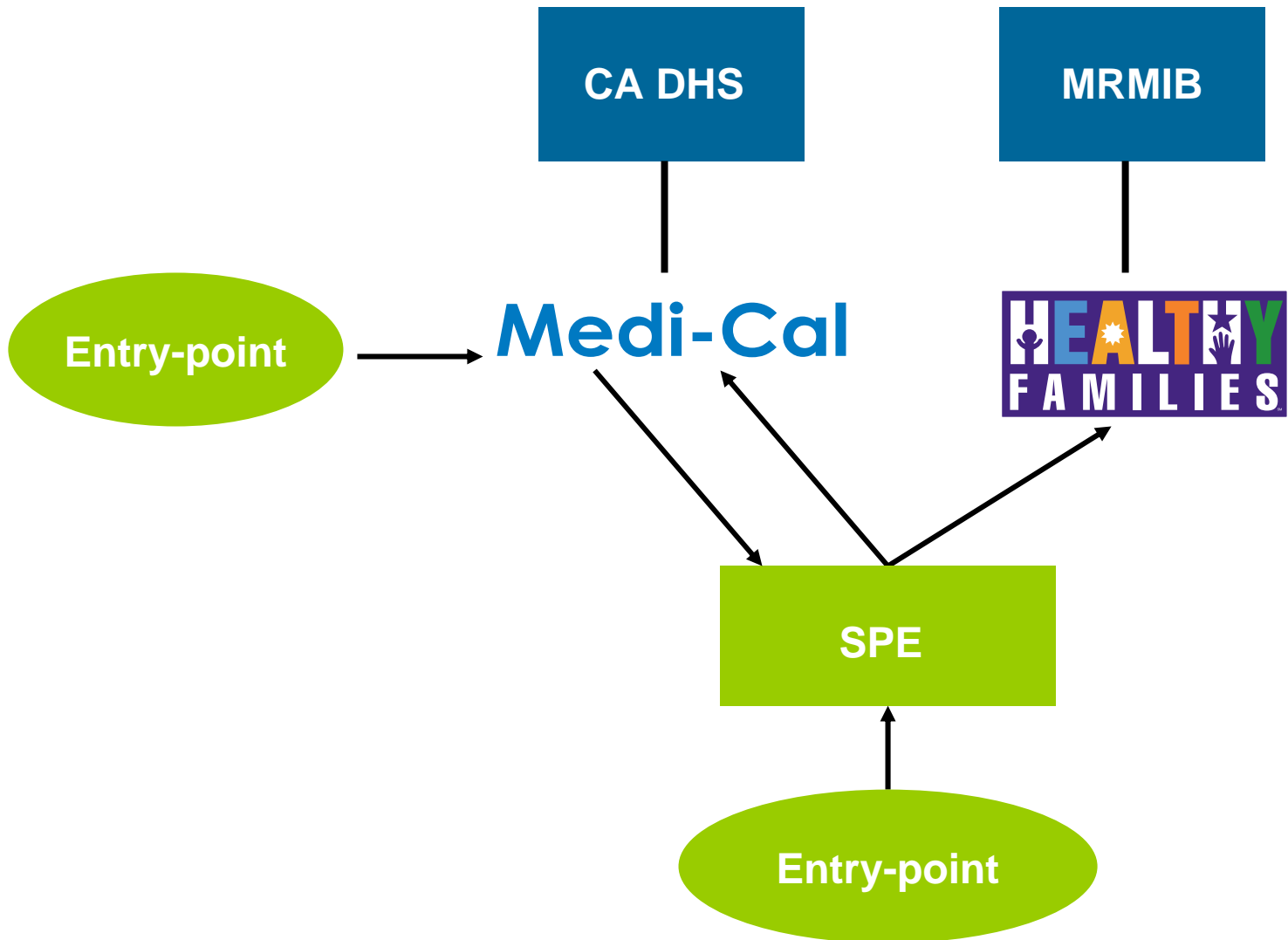
- Electronic Submission via direct connection from One-e-App to Health-e-App

# Healthy Families: Number of Days to Process



- Up to 20 business days total from the date the application was received
- Single Point of Entry has up to 10 business days to process from date application is received. If SPE determines pre-eligibility for Healthy Families Program, application is forwarded to HFP for final approval
- Healthy Families Program has up to 10 business days to process application from the date application is received

# Medi-Cal Modes of Submission “MC 321”



# Healthy Families: Coverage Begins



- 2 business days after approval
- Healthy Family Program sends electronic file to chosen health plan with an eligibility begin date
- The health plan will send a card to the member
- Member should receive member card within 7 days from the date the health plan received electronic file

# Healthy Families: Health Plans



## Member will be able to pick from 4 different health plans:

- San Francisco Health Plan (\$4 - \$14 per member)  
1-888-558-5858
- Blue Shield (\$7 - \$17 per member)  
1-800-393-6145
- Health Net HMO (\$7 - \$17 per member)  
1-800-327-0502
- Kaiser Permanente (\$7 - \$17 per member)  
1-800-464-4000

# Healthy Families: Health Plans



- Families can save on premiums: Pay 3 months receive 1 month for free
- Set up monthly automatic payments: 25% discount on your premiums

# Healthy Families: Dental Plans



Member will be asked to pick from 4 Dental Plans:

- Access Dental: 1-888-849-8440
- Premier Access Dental: 1-888-584-5830
- SafeGuard Dental: 1-800-880-3080
- Western Dental: 1-800-805-8000

# Healthy Families: Vision Plans



- Member will be asked to chose from 3 Vision Plans:
- EyeMed Vision Care: 1-866-723-0390
- SafeGuard Vision: 1-800-880-3080
- Vision Service Plan (VSP): 1-800-877-7239

# Healthy Families: Benefits



## Medical Benefits

- Physician Services: \$5 co-pay, Free if under 2 yrs old
- Preventive Care: Free
- Prescription Drugs: \$5
- Hospital: Free
- Medical Transportation: Free
- X-Rays: Free
- Mental Health: Inpatient Free, Outpatient \$5 per visit
- Alcohol and Drug Abuse: Inpatient Free, Outpatient \$5 per visit

# Healthy Families: Benefits



## Dental Benefits

- Preventative Care: Every 6 months, Free
- Fillings: As needed, Free
- Sealants: As needed only for permanent 1<sup>st</sup> and 2<sup>nd</sup> molars, Free
- X-Rays: Free
- Major Services: Root Canals, Crowns and Bridges: \$5

# Healthy Families: Benefits



## Vision Benefits

- Eye Examinations: Once every 12 months, \$5
- Prescription Glasses: Once every 12 months, \$5 per glasses, frames, or lenses

# Healthy Families: CAA Tools



- Healthy Families Reference Manual
- CAA/EE Help Line:  
1-800-279-5012
- CAA Resources:  
[www.healthyfamilies.ca.gov/EEs\\_CAAs/](http://www.healthyfamilies.ca.gov/EEs_CAAs/)
- Applications:  
[www.healthyfamilies.ca.gov/Downloads/Applicatin.aspx](http://www.healthyfamilies.ca.gov/Downloads/Applicatin.aspx)
- Healthy Families Website:  
[www.healthyfamilies.ca.gov](http://www.healthyfamilies.ca.gov)

# Application Modes of Submission

## Healthy Kids Program: 3 Options

1. HK Online Application (PETS)
  - Electronic Submission (Mail in payment and signature page)
  
2. HK Paper Application
  - Mail-In
  - Must mail in payment or premium assistance form
  
3. One-e-App
  - Electronic Submission. Must fax documents into One-e-App. Must mail in payment.

# Healthy Kids: Number of Days to Process



- Up to 10 Business days total from the date application was received
- Application Assistors can call Jose Arinez at San Francisco Health Plan for questions at: 415-615-4229
- Member will have to pay \$48 to \$126 for the year depending on the family income
- Premium Assistance available for members who qualify



# Healthy Kids: Coverage Begins

- If application approved prior to the 25<sup>th</sup> of the month, coverage begins first day of the following month
- If approved after the 25<sup>th</sup> of the month, coverage begins on the first day of the month following next



# Healthy Kids: Benefits

Health Plan: San Francisco Health Plan

- 1-888-558-5858

Vision Plan: Vision Service Plan

- 1-800-877-7239

Dental Plan: Delta Dental

- 1-877-580-1042



# Healthy Kids: Benefits

Health Plan: San Francisco Health Plan

- 1-888-558-5858

Vision Plan: Vision Service Plan

- 1-800-877-7239

Dental Plan: Delta Dental

- 1-877-580-1042

# Healthy Kids: Benefits

## Medical Benefits

- Preventive Care: Free
- Prescription Drugs: \$5
- Hospital: Free
- Emergency Health Coverage: \$15
- Ambulance Services: Free
- X-Rays: Free
- Mental Health: Free

# Healthy Kids: Benefits

## Dental Benefits:

- Visits-Diagnostic: Free
- Oral Surgery: Free
- Drugs & Anesthesia: Free
- X-Rays: Free
- Root Canals, Crowns and Bridges: Free



# Healthy Kids: Benefits

Upon successful enrollment, HK member will receive:

1. SFHP card in 7 days
  - Provider Name, Address, and Phone Number
2. Summary of Benefits
3. Access to SFHP Customer Service: 547-7800
4. No Dental Card or Vision Card will be mailed out. Member can call Customer Service or access website to find provider through network.



# Healthy Kids: CAA Tools

- HK CAA Reference Manual V. 4/2009
- HK Eligibility Department:  
1-800-547-7800
- HK Website:  
[www.sfhp.org/visitors/programs/healthy\\_kids/](http://www.sfhp.org/visitors/programs/healthy_kids/)
- HK CAA Tools Site:  
[www.sfhp.org/community/gghi\\_network/enrollment\\_tools.aspx](http://www.sfhp.org/community/gghi_network/enrollment_tools.aspx)

# Modes of Submission and Special Instructions



## *Healthy San Francisco*

- One-e-App
- Electronic Enrollment via One-e-App

# *Healthy San Francisco: Number of days to process application*



- 0 days. Immediate enrollment upon submission of application.
- Assistor must fax in all verifications and make sure to go back to check that all verifications are viewable
- During application assistance, applicant will choose their HSF Medical Home from a list of 29.

# Healthy San Francisco: Participant Fees



- All HSF participants with FPL's over 100% will be assigned a participant fee
- Monthly fee is determined by the FPL

FPL	GA/Hmls	0-100%	101-200%	201-300%	301-400%	401-500%	500%+
Qrt Fee	\$0	\$0	\$60	\$150	\$300	\$450	\$675
Mnth Fee	\$0	\$0	\$20	\$50	\$100	\$150	\$225

- Participants will be billed on a quarterly basis, i.e. every three months to remain enrolled in HSF

# Healthy San Francisco: Participant Fees



- HSF Billing Unit will send invoices directly to HSF Participants
- Participants will receive within 7 days from enrollment
- Participant pays the HSF Billing Unit (not in person)
- Not paying results in disenrollment from HSF

The image shows a sample of a Healthy San Francisco invoice form. At the top left is the Healthy San Francisco logo. The main heading is 'Your Healthy San Francisco Invoice', with translations for Chinese and Spanish. Below this is a table with payment details: 'Payment for the period of <<000000-000000>>' with a due date of '<<0000-00>>', 'Discounts <<\$000.00>>', 'Previous Payments Received <<000000>>', and 'TOTAL PAYMENT DUE <<\$000.00>>'. The 'PAYMENT DUE BY' date is '<<000000>>'. Below the table is a section for 'Participant number <<participant number>>'. The main body of the form contains instructions: 'Your Healthy San Francisco participant fee is due. Please detach and mail the bottom portion of this form and your payment in the enclosed envelope. Your payment is needed to begin and continue receiving medical services through Healthy San Francisco for the next three months.' It also states that fees are billed every three months and that non-payment leads to disenrollment. Payment instructions specify sending a personal check or money order to Healthy San Francisco, with a note that cash or credit cards are not accepted. Contact information for Customer Service at (415) 615-4555 is provided. At the bottom, there are instructions for the reverse side in Chinese and Spanish, and a return address: '1114 56 78 90 1 2 3 4 1 1 1 1 0 9 2 5 0 7 0 0 6 0 0 0 8'. A barcode is also present at the bottom.

# Healthy San Francisco: Coverage Begins



Upon successful enrollment HSF participant will receive:

1. HSF ID Card within 7 days of enrollment
  - Participant ID Number
  - Medical Home Name, Address, and Phone Number
  - Use for accessing medical services and picking up prescription medications

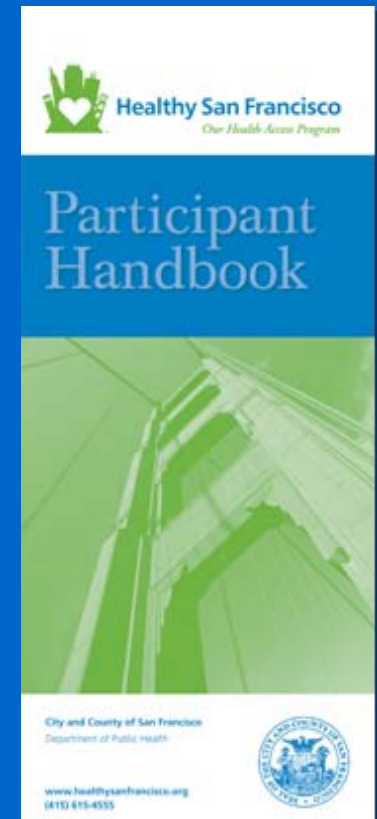


# Healthy San Francisco: Coverage Begins



## 2. HSF Participant Handbook

- Information guide for getting the services participant needs that are provided by HSF.



# Healthy San Francisco: Point of Service Fees



- A participant may need to pay a Point of Service Fee.
- Will depend on the participant's Medical Home, household income, and what medical service the participant is receiving.
- DPH Medical Homes: Point of Service Fees

Service	GA/Hmls	0 - 100%	101 - 500%*	501% - Over*
DPH Primary <sup>1</sup>	\$0	\$0	\$10	\$20
Urgent	\$0	\$0	\$20	\$50
Ancil/Rad/PT/OT	\$0	\$0	\$20	\$50
Specialty	\$0	\$0	\$20	\$50
Pharmacy	\$0	\$0	\$5/\$25	\$25/\$50
ER	\$0	\$25	\$50	\$100
Same Day Surgery	\$0	\$0	\$100	\$200
Inpatient (participants will apply for Medi-Cal w/inpatient admission)	\$0	\$0	\$200/admit	\$350/admit
Mental Health	UMDAP <sup>2</sup>	UMDAP	UMDAP	UMDAP
Substance Abuse Treatment	Varies by Treatment Site			

# Healthy San Francisco: Point of Service Fees



- Primary care fees at SFCCC, CCHCA, and Kaiser Permanente SF Medical Center and other non DPH related medical homes will differ.

# Healthy San Francisco: Benefits



- Preventative and Routine Care
- Specialty Care
- Urgent Care
- Emergency Care
- Ambulance Services
- Hospital Care
- Alcohol and Drug Abuse
- Laboratory Services/Tests
- Mental Health
- Family Planning
- Durable Medical Equipment
- Prescription Medicine

# Healthy San Francisco: CAA Tools



- HSF Application Assistor Reference Manual
- One-e-App Help Line:  
**1-866-429-1979**
- Jose Aguilera, HSF Outreach Specialist  
**415-615-4403**  
  
Your Training Lead

# Healthy San Francisco: CAA Tools



- HSF Website:

[www.healthysanfrancisco.org](http://www.healthysanfrancisco.org)

- CAA Resources:

[www.healthysanfrancisco.org/eligibility\\_staff/Enroll\\_en\\_tools.aspx](http://www.healthysanfrancisco.org/eligibility_staff/Enroll_en_tools.aspx)

- [www.healthysanfrancisco.org/eligibility\\_staff/Assist\\_orUpdates.aspx](http://www.healthysanfrancisco.org/eligibility_staff/Assist_orUpdates.aspx)

# Application Submitted: What's Next?



*Any Questions?*

*Please complete evaluations!*

*Thank you for attending!*