Covered California Basics:

Resources, Tools and Information for You and Your Patients

California Chapter of American College of Physicians Services
California Academy of Family Physicians
California Academy of Physician Assistants
Osteopathic Physicians & Surgeons of California
The information in this publication was provided by Covered California through its website, press releases and other communications. Covered California remains the central source for ongoing information, news and updates.

For more information outside of what this booklet offers, please visit www.coveredca.com.

www.coveredca.com is the ONLY official website for Covered California.

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Dear Member,

It is an historic time for those of us who provide health care to Californians – the first year in which nearly everyone who wishes to purchase health care insurance coverage may do so without concern for pre-existing conditions and many may do so with the assistance of federal subsidies to offset the expense of their premiums.

The first open enrollment period for Covered California, our state’s health benefits exchange, ended March 31 with more than 1.3 MILLION Californians signed up for health plan coverage and another 1.9 MILLION Californians newly signed up for the Medi-Cal program. That’s an impressive achievement; despite some bumps and hiccups along the way, Californians have a right to be proud about how our state surpassed its sign-up goal for the first year of implementing the Affordable Care Act.

Our four organizations decided to seize the moment together last year in an effort to see that as many of our patients, their family members and friends as possible could gain access to care during Covered California’s first open enrollment period.

By “seizing the moment,” we mean that we jointly applied for and were awarded a grant from Covered California to reach out to our members
and their medical office staffs to inform them about directing patients to health coverage through Covered California: its website, www.CoveredCA.com, phone line (1-800-300-1506), Certified Enrollment Counselors or qualified agents.

From November 2013 through March 31 of this year, our respective organizations have educated more than 12,000 members at county chapter, regional and state association meetings as well as at hospital, residency program and community meetings. We’ve reached another 400,000 readers through articles in our magazines and e-publications and live and archived webinars.

Our job isn’t done yet. The next open enrollment period begins on November 15 and continues through February 15, 2015 – patients need to know about and get ready for this additional opportunity to obtain health care coverage. As you know, health care costs are one of the leading causes of bankruptcy. Our patients deserve the protection that good coverage can provide, and they deserve access to the high quality health care that WE can provide. Please alert your staff members to the new open enrollment period and be sure they also understand that those who leave their jobs or have another major life change such as marriage or divorce can enroll all year, as can those eligible for Medi-Cal.

Use this document to become even more informed about Covered California and the options for coverage for those who are so important to us – our patients.

Sincerely,

California Chapter of American College of Physicians Services,
California Academy of Family Physicians,
California Academy of Physicians Assistants and
Osteopathic Physicians & Surgeons of California
Covered California (CC) is the state’s health benefits marketplace that opened in October 2013 to carry out enrollment functions specified under the federal Patient Protection and Affordable Care Act, the national health care reform law. In partnership with the California Department of Health Care Services, Covered California was charged with creating a new health insurance marketplace in which individuals and small businesses gain access to affordable health insurance plans. With coverage starting in 2014, Covered California helps individuals determine whether they’re eligible for premium assistance available on a sliding-scale basis to reduce insurance costs or whether they are eligible for low-cost or no-cost Medi-Cal.

Assistance is available on the CoveredCA.com website in English and Spanish, from Certified Enrollment Counselors by phone in most languages and at social service agencies, and through certified insurance agents.

Consumers can compare health plans and choose those that work best for their health needs and budget. Small businesses can purchase competitively priced health insurance plans and offer their employees the ability to choose from an array of plans, and they may qualify for federal tax credits.

Covered California operates as a marketplace for commercial coverage. It’s not a form of public coverage, such as Medicare or Medi-Cal, and it’s not a government agency or regulator. It doesn’t contract directly with providers and doesn’t regulate plan networks.

Covered California does not contract directly with physicians, hospitals or other providers. Instead, health insurance plans contract directly with providers and the terms of those contracts (financial and non-financial) are proprietary to each plan.

The new marketplace is an independent part of the state government, overseen by a five-member board appointed by the Governor and the Legislature. For more information, visit www.CoveredCA.com.
More than 3 million California consumers enrolled in health insurance plans or in Medi-Cal by April 15, Covered California and the California Department of Health Care Services (DHCS) announced April 17.

“Bringing health insurance and health care to so many Californians is a big achievement that was accomplished in no small measure by the work of our employees, our partners at DHCS, insurance agents, Certified Enrollment Counselors, county partners and community organizations who spread the word about this historic initiative,” Covered California Executive Director Peter V. Lee said. “We are proud of what California has achieved, but recognize this is only the beginning of a long road of expanding affordable coverage to all Californians.”

From April 1-15, 205,685 consumers – including a one-day record of more than 50,000 on the final day – completed their applications and selected health plans through the Covered California exchange, bringing the total to 1,395,929 at the end of the historic, first open enrollment period. The total exceeds the base projection for Covered California for the entire six-month enrollment period by more than 815,929.

Of those enrolled in Covered California plans, 1,222,320, or 88 percent, are eligible for financial subsidies to help cover the cost of their health insurance premiums.

Medi-Cal enrolled approximately 1.9 million people through the end of March, including 1.1 million through the Covered California portal and county offices, approximately 650,000 former Low Income Health Program (LIHP) members who were transitioned to Medi-Cal by DHCS, and 180,000 individuals who applied through the state’s Express Lane program.

“When we began this journey last October, our goal was to help Californians get quality, affordable health care coverage,” said DHCS Director Toby Douglas. “With the help of our county partners, Covered California and thousands of concerned citizens and organizations who contributed, we’ve made incredible progress toward our goal in just six short months. We’re excited about the opportunities ahead for even more individuals who now have the opportunity to get coverage through Medi-Cal and Covered California.”

Enrollment among Latinos and among Californians 18 to 34 years old had a strong finish. Additionally, Covered California more than doubled its base
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Enrollment among Latinos and among Californians 18 to 34 years old had a strong finish. Additionally, Covered California more than doubled its base projection for Asian American enrollment and has met the base projection for African-American enrollment. Lee said insurance companies are reporting that 85 percent of all enrollees have paid their first month’s premium.

Latino enrollment now stands at 305,106 or 28 percent of the total enrollment. From the end of March to April 13, Latino enrollment increased at a rate of 30 percent, and had cleared the base projection of 265,000.

Enrollment of young adults 18 to 34 years old finished at 29 percent of the consumers who had selected a Covered California health insurance plan. This age group represents about 25 percent of the state’s population but approximately 36 percent of those eligible for subsidies. Also, about 36 percent of those newly enrolled in Medi-Cal are young adults 18 to 34 years old.

Mr. Lee praised his staff and partners for helping consumers “cross the finish line” after Covered California’s decision to allow consumers who had difficulty accessing the enrollment portal on March 31 to complete their applications by April 15. During the six-month period, 41 percent of all consumers self-enrolled for coverage through the Covered California website. Certified Insurance Agents enrolled 39 percent of all consumers, while Covered California Certified Enrollment Counselors and Service Center Representatives each enrolled about 9 percent.

Of the subsidy-eligible consumers who enrolled in the exchange through April 15, 809,085, or about 58 percent of the total, signed up for a Silver plan, the second-least-expensive plan of the four metal tiers. About 88 percent of consumers across all tiers received financial assistance.

Enrollment in Covered California private health insurance plans hit 1,221,727 through March 31. March was the highest single month of enrollment, with more than 416,000 people signing up for a plan.

In Covered California’s Small Business Health Options Program (SHOP), 1,156 small businesses — representing about 4,900 employees and their dependents — had enrolled for coverage through March 31. Enrollment in SHOP is available year round.

Although the open enrollment deadline has passed for Covered California health insurance plans, enrollment in Medi-Cal continues year-round. Individuals who would like their eligibility determined for low-cost or no-cost Medi-Cal can apply at www.CoveredCA.com.
Overview of Covered California Health Insurance Plans

Covered California plans are required to cover an established 10 categories of “essential benefits.” The levels and costs of coverage vary across the four types of plans offered, named “metal tiers.” The Bronze (least expensive, least coverage), Silver, Gold and Platinum (most expensive, most coverage) plans offer the same benefits but require different monthly premiums and copays. The actual costs of a plan for a specific consumer vary depending on that person’s or family’s place of residence (costs vary by California region) and income, which determines whether he or she receives a federal subsidy and, if so, the amount that offsets the costs.

Benefits Included

The health insurance plans offered through Covered California are required to provide basic levels of coverage and provide consumer protections, including the 10 categories of “essential health benefits:”

1. ambulatory patient services
2. emergency services
3. hospitalization
4. maternity and newborn care
5. mental health and substance use disorder services, including behavioral health treatment
6. prescription drugs
7. rehabilitative and habilitative services and devices
8. laboratory services
9. preventive and wellness services and chronic disease management
10. pediatric services
Standard Benefit Designs

Health insurance plans must follow Covered California’s standard benefit designs. With standardized benefits, consumers can accurately compare health insurance plans because the benefits are the same for all plans offered in the Covered California marketplace. Additionally, standardizing benefits ensures that the selected health insurance plans define what consumers get and limit consumers’ out-of-pocket cost by the type of service.

The following table shows how much consumers would pay depending on which metal plan they chose.

<table>
<thead>
<tr>
<th>Standard Benefit Designs by Metal Tier</th>
<th>Bronze</th>
<th>Silver</th>
<th>Gold</th>
<th>Platinum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coverage Category</td>
<td>Covers 60% average annual cost</td>
<td>Covers 70% average annual cost</td>
<td>Covers 80% average annual cost</td>
<td>Covers 90% average annual cost</td>
</tr>
<tr>
<td>Preventive Care Copay*</td>
<td>No cost</td>
<td>No cost</td>
<td>No cost</td>
<td>No cost</td>
</tr>
<tr>
<td>Primary Care Visit Copay</td>
<td>$60 for 3 visits</td>
<td>$45</td>
<td>$30</td>
<td>$20</td>
</tr>
<tr>
<td>Specialty Care Visit Copay</td>
<td>$70</td>
<td>$65</td>
<td>$50</td>
<td>$40</td>
</tr>
<tr>
<td>Urgent Care Visit Copay</td>
<td>$120</td>
<td>$90</td>
<td>$60</td>
<td>$40</td>
</tr>
<tr>
<td>Emergency Room Copay</td>
<td>$300</td>
<td>$250</td>
<td>$250</td>
<td>$150</td>
</tr>
<tr>
<td>Lab Testing Copay</td>
<td>30%</td>
<td>$45</td>
<td>$30</td>
<td>$20</td>
</tr>
<tr>
<td>X-Ray Copay</td>
<td>30%</td>
<td>$65</td>
<td>$50</td>
<td>$40</td>
</tr>
<tr>
<td>Generic Medical Copay</td>
<td>$19 or less</td>
<td>$19 or less</td>
<td>$19 or less</td>
<td>$5 or less</td>
</tr>
</tbody>
</table>

*In most situations, this is true for one visit per year.
The following table shows how much consumers would pay based on their incomes if they bought a Silver plan and qualified for out-of-pocket assistance.

<table>
<thead>
<tr>
<th>Coverage Category</th>
<th>94% Silver</th>
<th>87% Silver</th>
<th>73% Silver</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eligibility based on income and premium assistance</td>
<td>Covers 94% of average annual cost</td>
<td>Covers 87% of average annual cost</td>
<td>Covers 73% of average annual cost</td>
</tr>
<tr>
<td>Single Income Ranges</td>
<td>Up to $17,235</td>
<td>$17,236 to $22,980</td>
<td>$22,981 to $28,725</td>
</tr>
<tr>
<td>Annual Wellness Exam</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Primary Care Visit</td>
<td>$3</td>
<td>$15</td>
<td>$40</td>
</tr>
<tr>
<td>Specialty Care Visit</td>
<td>$5</td>
<td>$20</td>
<td>$50</td>
</tr>
<tr>
<td>Laboratory Tests</td>
<td>$3</td>
<td>$15</td>
<td>$40</td>
</tr>
<tr>
<td>X-Rays and Diagnostics</td>
<td>$5</td>
<td>$20</td>
<td>$50</td>
</tr>
<tr>
<td>Imaging</td>
<td>10%</td>
<td>15%</td>
<td>20%</td>
</tr>
<tr>
<td>Generic Drugs</td>
<td>$3</td>
<td>$5</td>
<td>$19</td>
</tr>
<tr>
<td>Annual Out-Of-Pocket Maximum Individual and Family</td>
<td>$2,250 individual and $4,500 Family</td>
<td>$2,250 individual and $4,500 Family</td>
<td>$5,200 individual and $10,400 Family</td>
</tr>
</tbody>
</table>

**Average Premium Rates**

Rates vary by region, ZIP code, metal level and age. This chart shows average rates for Bronze and Silver plans offered across the state for a 40-year-old. The actual premium for a consumer may also vary by income and the amount of premium assistance received.

<table>
<thead>
<tr>
<th></th>
<th>Lowest</th>
<th>Second-Lowest</th>
<th>Third-Lowest</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bronze</td>
<td>$219</td>
<td>$234</td>
<td>$236</td>
</tr>
<tr>
<td>Silver</td>
<td>$304</td>
<td>$325</td>
<td>$335</td>
</tr>
</tbody>
</table>
Understanding Covered California Health Plans, Networks and Contracts

It is critical that California health care professionals understand Covered California, its relationship to the health plans and how to address problems that arise with contracts.

Key Facts:

1. **Know what Covered California is.** Covered California is a market for commercial coverage. It is not public coverage (like Medicare or Medi-Cal). It is not a government agency or regulator and it does not regulate health plan networks.

2. **Covered California does not contract directly with physicians, hospitals or other providers.** Health insurance plans contract directly with providers and the terms of those contracts (financial and non-financial) are proprietary to each plan.

3. **Health professionals must deal directly with the health plans; Covered California will not act as an intermediary.** If you have any questions about your contracts with Covered California health plans, use the contact information in this booklet.

4. **The California Medical Association, Covered California and four health plans that together account for more than 95 percent of the total Covered California enrollment to date (Anthem, Blue Shield, Health Net and Kaiser) jointly developed a document describing the provider networks associated with health plan products on Covered California.** Visit www.familydocs.org for more information.

5. **At this time, Covered California does not have a provider directory.** Persons interested in checking the network of a health plan must search the individual health plan’s directory, paying close attention to the fact that different health plan products within the same insurance company may offer different provider networks.

6. **Covered California has produced a Provider Directory Reference Guide which shows the URLs for the provider directories of the Covered California health plans and crosswalks between the product name on CoveredCA.com, the product name on ID cards and the product name on the health plan website.**

Any plan that offers a product on Covered California offers a “mirror” plan with identical benefits and networks. The ID cards of all consumers who purchased plans through Covered California display the logos of their respective health plan AND the logo of Covered California. The ID cards of patients who purchased mirror products do not display the Covered CA logo.

Three Covered California health plans sent notices to contracted physicians/providers with additional information on their exchange/mirror products. Review these notices to learn more:

> Blue Shield EPO  

> Blue Shield PPO  

> Anthem  

> Health Net  

The government agencies responsible for overseeing health plan networks are:

> California Department of Managed Health Care (DMHC):  
www.dmhc.ca.gov or 1.888.466.2219

> California Department of Insurance (CDI):  
www.insurance.ca.gov or 1.800.927.4357

Complaints about networks should be directed to these agencies.

ACP, CAFP, CAPA and OPSC are interested in compiling our members’ stories about problems with patient access or health plan contracts and submitting them to the departments above. Please contact CAFP Vice President of Health Policy Leah Newkirk at lnewkirk@familydocs.org to report any such problems.
Three Paths to Health Insurance

**Path 1**
- At or below 138% of the Federal Poverty Level (FPL)
- Medi-Cal

**Path 2**
- Between 139-250% FPL
- Eligible for a CC Health Plan with premium assistance and improved benefits

**Path 3**
- Between 251-400% FPL
- Eligible for a CC Health Plan with premium assistance but not improved benefits

**Path 3**
- Over 400% FPL
- Eligible for a CC Health Plan
Covered California Geographic Regions

Plan Options by Regions

- 19 Regions
- Prices differ from region to region
- Covered California plans do not have to participate in each pricing region
Covered California Contact Information

Covered California Consumer Help Desk

800-300-1506
(M-F, 8 am-5 pm)
(Staffed in multiple languages)

Information also is available online at www.CoveredCA.com. This includes answers to many consumer questions about health plan applications, enrollment, benefits, deadlines and current coverage. Consumers can use the "Shop and Compare" tool to review plan options.

Covered California Health Plan and Consumer Contact Information

Consumers in California can choose from among the following 11 health plans through Covered California in 2014. Various plans serve specific geographic regions of the state; not all plans are available in every region. Below is the customer contact information provided by the plans.

**Anthem Blue Cross**
www.anthem.com/ca
877-702-3074

**Blue of California**
www.blueshieldca.com
855-836-9705

**Chinese Community Health Plan**
www.cchphmo.com
888-775-7888

**Contra Costa Health Plan**
www.contracostatealthplan.org
800-211-8040

**Health Net**
www.healthnet.com
877-288-9082

**Kaiser Permanente**
www.kp.org
800-464-4000

**L.A. Care Health Plan**
www.lacare.org
888-452-2273

**Molina Health Care**
www.molinahealthcare.com
888-562-5442

**Sharp**
www.sharphealthplan.com
800-359-2002

**Valley Health Plan**
www.valleyhealthplan.org
408-885-5780

**Western Health Advantage**
www.westernhealth.com
888-563-2250
How do patients enroll?

www.coveredca.com

Covered California Service Center
(800) 300-1505

Certified Enrollment Counselors

Mail or Fax

Local County Human or Social Services Offices

IMPORTANT:
www.coveredca.com is the ONLY official website!
Resources for Office Staff

The next open enrollment period begin November 15, 2014.

Special Enrollment = a time outside of open enrollment during which consumers are eligible to sign up for health insurance.

Special Enrollment Events:

- Loss of Minimum Essential Coverage (MEC)
- Marriage, birth, adoption or placement for adoption
- Becoming a citizen, national or lawfully present
- Previous enrollment or non-enrollment is unintentional, inadvertent or erroneous and is the result of error, misrepresentation or inaction by the enrollment agent
- A health plan substantially violated a material provision of its contract
- Income change: Newly-eligible or -ineligible for premium assistance or has a change in eligibility for cost-sharing reductions
- Employer-sponsored plan will no longer be affordable or provide minimum value

Physician Directories

Physicians and other clinicians can verify whether they’re listed on health plan panels by checking each health plan’s directory on the individual plans’ websites. This can be confusing because health plans have different physician networks for different coverage products and the products are named differently on the Covered California website, health plan cards and health plan websites.

Covered California has produced a Provider Directory Reference Guide with a link to the provider directory of each Covered California health plan and then crosswalks the plan name on Covered California, the patient ID card and the website. See: www.familydocs.org/f/PlanNamesIDCardProviderDirectoryReferenceGuide.pdf
Health Consumer Alliance (HCA) is a partnership among legal aid organizations. Staff members provide free local assistance to individuals and families applying for or enrolled in Covered California plans or Medi-Cal.

Go to www.healthconsumer.org for contact information by county or call 888-804-3536.

HCA can help consumers with:

- Complicated immigration questions such as documentation status, student visas, work visas, etc.

- Continuity of care requests and working with health insurance plans and California regulators (Dept. of Managed Health Care and Dept. of Insurance).

- Complicated income questions such as how to calculate modified adjusted gross income, tax questions, and other income-related questions.

- Questions about the difference between Medi-Cal and Covered California, the benefits of being Medi-Cal-eligible, and other general questions, such as: Can I opt out of Medi-Cal? Will I be able to find a doctor if I enroll in Medi-Cal? Is Medi-Cal a good option for me?