

Provider Bulletin

Molina Healthcare of California

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February 5, 2024

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Medi-Cal Managed Care Plan Implementation of Primary Care Provider Assignment for the Age 26-49 Adult Expansion Transition APL 23-031

This is an advisory notification to Molina Healthcare of California (MHC) network providers applicable to the Medi-Cal line of business.

This notification is based on All-Plan Letter (APL) 23-031, which can be found in full on the Department of Health Care Services (DHCS) website at:

<https://www.dhcs.ca.gov/Documents/MCQMD/APL-23-031-Adult-Expansion.pdf>.

Background:

APL 23-031 ensures individuals transitioning to full-scope Medi-Cal maintain their existing Primary Care Provider (PCP) assignments to the maximum extent possible to minimize disruptions in services. PCPs include the following: general practitioners, internists, pediatricians, family practitioners, nonphysician medical practitioners, obstetrician-gynecologists, specialists, medical homes, and clinics.

When this is happening:

Senate Bill (SB) 184 expanded eligibility for full-scope Medi-Cal to individuals who are 26 through 49 years of age and who do not have satisfactory immigration status (SIS) as required. This new coverage is referred to as the Age 26-49 Adult Expansion. SB 184 took effect on January 1, 2024.

Policy:

New Enrollee Population

The new enrollee population consists of individuals who are 26 through 49 years of age, who are not currently enrolled in full-scope or restricted-scope Medi-Cal but who may apply for

Provider Action

Subcontractors and Network Providers must comply with all applicable state and federal laws and regulations, Contract requirements, and other DHCS guidance, including APLs and Policy Letters, or they will risk Corrective Action Plans (CAP) and administrative or monetary sanctions for non-compliance.



Medi-Cal after implementation of the Age 26-49 Adult Expansion and meets all eligibility criteria for full-scope Medi-Cal under any eligibility group, including Modified Adjusted Gross Income (MAGI) and Non-MAGI, except for SIS.

Transition Population

The transition population consists of individuals who are 26 through 49 years of age and are currently enrolled in restricted scope Medi-Cal because they do not have SIS or are unable to establish SIS for full-scope Medi-Cal under any eligibility group, including MAGI and Non-MAGI, before implementation of this expansion.

Collectively, these populations will be referred to as the “Adult Expansion Population.”

Data Sharing

MHC will:

- Maintain PCP assignment to the maximum extent possible for Adult Expansion Population Members
- Accept data from, transmit data to, and coordinate with the county uninsured programs and public health care systems serving the Adult Expansion Population
- Designate a point of contact for the county's uninsured programs and public health care systems and engage with all such organizations that are able and willing to share data per the requirements detailed in APL 23-031
- Review and use the data provided by the county's uninsured programs and public health care systems to match PCP assignments for these Members

Healthcare providers, health plans, and healthcare clearinghouses are considered covered entities and must comply with the data-sharing limitations of the Health Insurance Portability and Accountability Act (HIPAA). Covered entities are permitted to share healthcare data with other covered entities for treatment, payment, or healthcare operations purposes. Therefore, healthcare providers are authorized to share Protected Health Information (PHI) with MHC without patient authorization for payment or healthcare operations purposes.

What you need to know:

PCPs with “closed panel” status or “not accepting new Members” status will not be precluded from assignment to their existing Members. If the Member is assigned to a federally qualified health center (FQHC) or rural health clinic (RHC), the Member may be assigned at the clinic site level. MHC will not exclude assignments for Members assigned to an FQHC or RHC resulting from a lack of a provider-level assignment in the data.

MHC will maintain assignments for Adult Expansion Population Members with an existing PCP that is in-network with MHC. Members are not required to request continuity of care to maintain their PCP assignment with PCPs that are in MHC’s network. If the PCP is out-of-network, MHC is not expected to maintain that assignment. MHC will follow all Continuity of Care requirements in accordance with APL 23-022. If MHC does not have an executed contract with the assigned PCP prior to June 30, 2024, MHC is not required to effectuate the PCP assignment but will offer continuity of care if all requirements are met per APL 23-022.

For more information on continuity of care, please review APL 23-022 on the DHCS website at: <https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2023/APL23-022.pdf>.

What if you need assistance?

If you have any questions regarding the notification, please contact your Molina Provider Relations Representative below.

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If you are not contracted with Molina and wish to opt out of the MHC Provider Bulletin, email MHCProviderJusttheFax@MolinaHealthcare.com. Please include the provider's name, NPI, county, and fax number, and you will be removed within 30 days.