

COMMUNITY PARTNER WEBINAR AUGUST 27, 2014



AGENDA

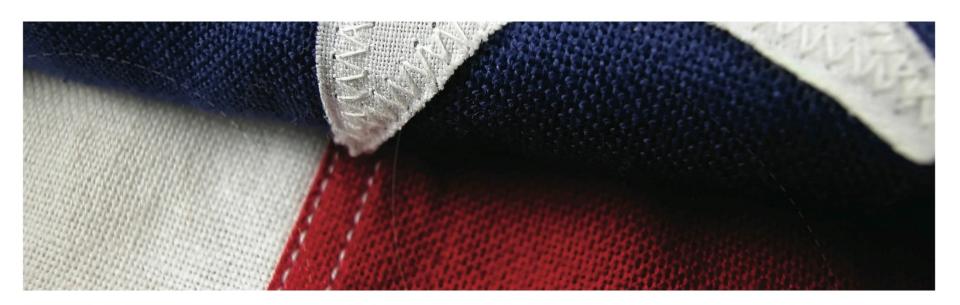


- VA Benefits
- Verification Notices to Consumers
- Authorization for Enrollment Assistance Form Update
- Press Release: Dental Plan Update
- Reporting Income Changes
- Webinar Survey
- Questions and Answers



VA BENEFITS: GITA UPPAL,
DIRECTOR FOR STRATEGY AND
OUTREACH, VA MEDICAL CENTER
SAN FRANCISCO









Veterans Health Administration

Honoring Those Who Served

VA's health care system is patient-centered and focused on promoting, preserving or restoring a Veterans' health and well-being

Key Components

Personalized Health Planning

 Proactive Integrative Strategies for Staying Healthy

Patient-Centered Care



The Face of VA



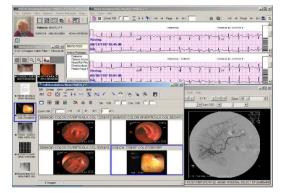
VA's Mobile Health Apps improve the health of Veterans.



Get care without leaving home using VA's Telehealth program.

Through MyHealtheVet:

- Maintain your personal health journal.
- Communicate with your doctor by email.
- Order Prescription refills for home delivery.



Traveling? Your electronic health record is accessible at any VA medical facility.



Women Veterans receive complete primary care

from one provider at one site, including:

- Preventive health services
- Care for acute and chronic illness.
- Reproductive health services
- Mental Health services

Access to VA Health Care

Access to VA health care benefits and services begins with enrollment



Key Points of VA Health Care Enrollment

 Veterans generally must be enrolled to receive VA Health Care.

 Enrollment assures Veterans that comprehensive health care services will be available when they are needed.

 Health care benefits are completely portable throughout the entire VA system.

Overview of VA Health Care Enrollment

- VA's enrollment system designates Veterans by priority groups.
 - Higher priority groups Service-connected Veterans who have received a VA disability rating.
 - Lower priority groups Denote other eligibilities generally based medical conditions, combat status, environmental exposures and income.
- All enrolled Veterans receive VA's comprehensive Medical Benefits Package which includes preventive, primary and specialty care, diagnostic, inpatient and outpatient care services.
 - Veterans may be receive <u>additional</u> benefits, such as dental care depending on their unique qualifications.
- VA is unable to enroll certain higher income Veterans without any qualifying eligibility factors such as medical conditions, certain combat service or environmental exposures. For financial thresholds see:
 - http://www.va.gov/healthbenefits/cost/income_thresholds.asp

Enrollment Priority Groups

Priority Group	Characteristics
1	Veterans service-connected (SC) disabled 50% or more; Unemployable due to SC conditions
2	Veterans SC 30 or 40% disabled
3	Former POWs, Purple Heart and Medal of Honor recipients; Veterans SC disabled 10 or 20%; Veterans discharged for a disability incurred/aggravated in line of duty
4	Veterans receiving aid and attendance or housebound benefits from VA; Veterans determined by VA to be catastrophically disabled; Veterans awarded 38 USC 1151benefits
5	Veterans with low income including Medicaid-eligible; VA pension recipients
6	Veterans with certain environmental exposures while in military; SC 0% compensable
7	Veterans with income above the VA national income threshold and below the geographically adjusted income threshold for their residence and agree to pay copays; Veterans with 0%SC non-compensable conditions
8 - Enrolled	Veterans with income above VA national and geographic income thresholds by 10% or less
8 - Not Enrolled	Veterans with income more than 10% above VA national and geographic income thresholds

Military Service Qualifications for VA Health Care

1. Service Episode

- Active military, naval or air service;
- Former Reservist with full-time activation under Title 10; or
- Former National Guard member mobilized by a Federal order.

2. Character of Service

- Honorable;
- General, under Honorable Conditions; or
- Other than Honorable with VA determination not a bar to benefits.

3. Minimum Duty Requirements - for enlistments after 8/7/1980, or duty entry after 10/16/1981

- At least 24 continuous months active service; or
- Full period called to active duty
- Exceptions:
 - Discharged for a disability incurred or aggravated in line of duty;
 - Discharged for a hardship; or
 - Early Out.

Special Enrollment Benefits for Combat Veterans

- Vietnam Veterans
 - service in the Republic of Vietnam1/9/1962 5/7/1975
- Persian Gulf War Veterans
 - service in Southwest Asia theater of operations 8/2/1990 – 11/11/1998
- OEF/OIF/OND Veterans
 - service in a theater of operations after 11/11/1998 and within 5 years of discharge

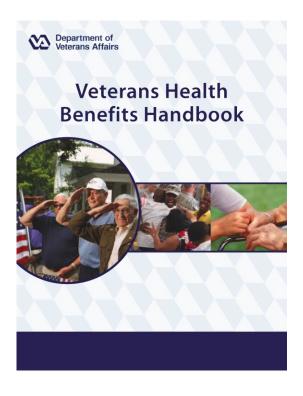
- Eligible for VA health care enrollment regardless of income
- No out-of-pocket costs for VA medical care and medications for treatment of conditions related to service

Applying for VA Health Benefits Enrollment

- VA encourages all Veterans to apply for VA health care benefits.
- Multiple convenient ways to apply.
 - Online at https://www.va.gov/healthbenefits/enroll
 - Need assistance? Call us or use Webchat.
 - Apply by Phone
 - 877-222-VETS (8387)
 - Mail an application to VA's Health Eligibility Center
 - 2957 Clairmont Road, Atlanta, GA 30329
 - Apply in person at a local VA Medical Center
- No proof of military service, e.g., DD214 is required with the application.

Once Enrolled in the VA Health Care System

- Once a Veteran enrolls in the VA health care system, they remain enrolled.
 There are no yearly re-enrollment requirements.
- Enrolled Veterans receive a tailored patient handbook detailing their VA medical services and benefits.



Once Enrolled in the VA Health Care System...

 Enrolled Veterans receive a Veterans' Health Identification Card for use at VA Medical Facilities.



VA Medical Benefits Package

- Preventive Care Services
- Primary and Specialty Care
- Inpatient and Outpatient Diagnostic and Treatment
 - Includes Durable Medical Equipment, e.g., wheelchairs, braces
- Prescription Services (prescribed by VA Physician)
- Long Term Care
 - Geriatric Evaluations, Adult Day Health Care, Respite Care, Home Health, Hospice and Palliative Care
- Limited Benefits
 - Ambulance Service
 - Eyeglasses and Hearing Aids
 - Non-VA Care
 - Dental Care
 - Nursing Home and Domiciliary Care
 - VA Foreign Medical Program

Medically related travel reimbursement, is an additional benefit enjoyed by many Veterans

VA Out-of-Pocket Costs

- VA has no enrollment fees, monthly premiums or cost shares
- Most Veterans are provided cost-free medical care and medications
- Some Veterans are charged modest copays which may be offset by their health insurance reimbursements to VA

Did You Know?

The average out-of-pocket costs in 2012 for a Veteran who paid both

medical care and medication copays

\$422

VA Out-of-Pocket Costs (cont.)

Care Setting	Coverage	Out of Pocket Costs
Outpatient	Primary Care	\$15
Only one copay is charged per day, regardless of the number of appointments	Specialty Care	\$50
Medications	Up to 30 day supply	\$8 or \$9
Inpatient Care	First 90 days of care	Up to Medicare Deductible (\$1184)
Veterans living in high cost areas may	Each subsequent 90 days of care	Up to 50% of Medicare Deductible (\$592)
qualify for reduced inpatient copay rates	Per Diem	Up to \$10/day

No copays are charged for care of Service-connected conditions, durable medical equipment, preventive screenings, lab tests and certain radiology studies and EKG's.

Additional copay exempt services are listed on

WWW.Va.lgov/inealundentente/teles/telejek/isiks/p

Locations of Care

- With over 1700 locations of care, VA is likely to have a hospital or clinic close to most Veterans' homes.
- Coverage goes with Veterans as they travel or move.
- Find near-by locations of care at www.va.gov/directory.





VA Health Care, ACA and Veterans

- VA wants all Veterans to get health care that improves their health and wellbeing.
- Enrollment in VA health care, CHAMPVA and Spina Bifida programs meet the health care law's coverage standards.
 - Enrolled Veterans do not need to take any additional steps to meet the health care law coverage standards.
 - The health care law does not change VA health benefits or Veterans' out-of-pocket costs.
- VA will continue to provide Veterans with high quality, comprehensive health care and benefits they earned through their service.
- Enrolled Veterans can use VA and other federal health care coverage including Medicare, Medicaid, TRICARE or private health insurance.

VA's Overarching Communication Strategy

VA's focus is to:

- Educate Veterans that VA health care meets ACA health insurance standards and (for those not currently enrolled), promote VA health care as an option; and
- Communicate to Veterans and their families the value of health insurance and provide information about the Marketplace to those not eligible for care through VA, including Veterans' families.
- To execute a multi-faceted strategy to engage with Veterans, staff and other stakeholders about VA and ACA.
- To ensure consistent communications with these audiences, VA has developed key messages.

Receive care to improve health and well-being 2 If enrolled, no additional steps needed 3 If not enrolled, apply any time Not eligible, get coverage through Marketplace 4 VA health care and benefits are unchanged 5

ACA Outreach Efforts—VA website



VA Health Benefits Explorer

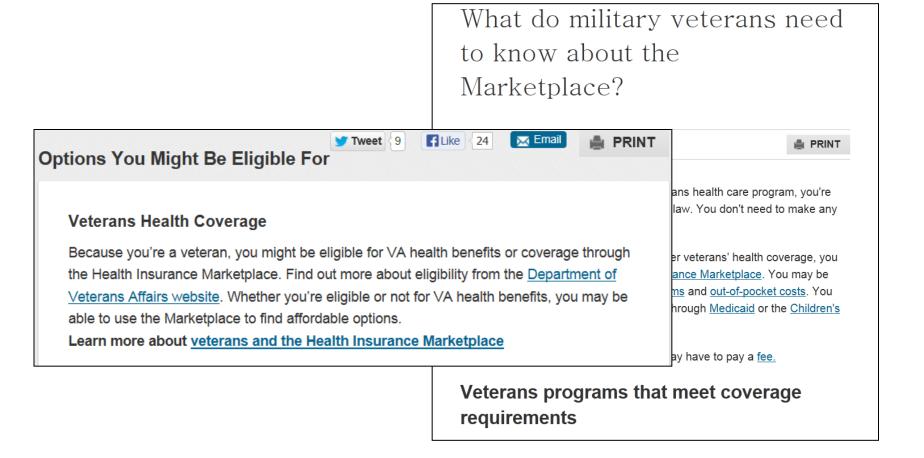
Thank you for completing VA's Health Benefits Explorer.

Congratulations! Based on the information you provided, you would be eligible for enrollment.

Review the table below for your comprehensive VA health benefits.

Health Benefit	Coverage		
Medical Benefits Package	Your VA Medical Benefits Package includes: Preventive Care Hospital (Inpatient) Services Ancillary Services Mental Health Home Health Care Geriatrics and Extended Care Medical Equipment/Prosthetic Items and Aids		
<u>Dental Benefits</u>	Yes, comprehensive dental benefits may be provided		
Nursing Home Placement	Yes, benefits provided when needed for any condition		
Medically Related Travel Benefits	Yes		
<u>Eyeglasses</u>	Yes, If receiving VA care or services		
Hearing Aids	Yes, if receiving VA care or services		
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VA Visibility on healthcare.gov



Discussion

 Opportunities to integrate ACA information in existing community partner channels.

Opportunities to collaborate / disseminate ACA information to Veterans and their family members.

For more information



1-877-222-VETS (8387)

www.va.gov/aca

(webchat is available)

Monday through Friday Saturday

8 a.m. to 10 p.m., Eastern 11 a.m. to 3 p.m.



VERIFICATION NOTICES TO CONSUMERS





Covered California verifies citizenship/lawful presence and income for all applicants.

- Consumer information is securely verified against the Federal Data Services
 Hub and other electronic data sources.
- When Covered California is unable to verify self-attested income and citizenship/lawful presence electronically, we ask that consumers provide acceptable documentation.
- Starting next week Covered California will begin mailing notices to consumers with an unverified citizenship/lawfully present status.
- Covered California is required to verify this information in order to continue coverage, and if applicable, continue providing federal tax credits (APTC/CSR).
- All consumer citizenship/immigration information will be kept entirely private.
 The notice, and any documents submitted, will NOT impact a consumer's
 citizenship or immigration status, and no information will be shared with law
 enforcement or immigration authorities.



Notice to Consumers will include the following:

- Individual household members that are required to submit acceptable documents
- List of acceptable documents for both citizens and lawfully present individuals
- How to submit documents
- What happens if the documents are not submitted by the due date
- Instructions to consumers who have already sent documents
- How to get help

Documents are due by September 30, 2014



Certified Enrollment Counselors may assist consumers with providing the required documentation in one of three ways:

IMPORTANT: CECs are required to collect the *Authorization for Enrollment Assistance Form* from the consumer before providing any assistance. **PBEs** may also assist consumers with submitting required documentation but are not required to obtain the *Authorization Form*.

- 1. FAX documents to Covered California
 - Include the "Here's my proof" cover page provided in the notice
 - 1-888-329-3700
- 2. MAIL documents to Covered California
 - Do not send original copies
 - Include the "Here's my proof" cover page provided in the notice
 - Mail copies to:

Covered California Service Center P.O. Box 3530 Rancho Cordova, CA 95670-5667



3. CECs may assist consumers in UPLOADING their required documents to the consumer's CoveredCA.com account.

- The consumer must delegate access to their application to the CEC while logged into their account via the *Find Help Near You* feature.
- If the Consumer has not created a personal account, they will be required to.
 They need to link their existing case to their new account using the Access Code that was mailed to them.
- If the consumer needs an Access Code to link their new account, CECs may call the CEC Help Line at (855) 324-3147, and:
 - The consumer must be present;
 - Covered California will first verify the CECs identity; and
 - CECs will hand over the phone to the consumer so that Covered California can verify their identity and provide them the Access Code.
- The CEC will assist the consumer to link the consumer account to their existing case and delegate the application.
- Upload the required documents from the "List of Documents" identified in the notice.
- If the document does not match a "Document Type" category within the online application select "US Passport" and continue.



CERTIFIED ENROLLMENT COUNSELOR (CEC) AUTHORIZATION CONSENT FORM



CEC AUTHORIZATION FORM



- CEEs/CECs are required to collect the new Authorization for Enrollment Assistance Form (Authorization) from consumers prior to providing any enrollment assistance.
- The Authorization Form:
 - Authorizes CECs to create, collect, give out, access, keep, store, and/or use consumer Personally Identifiable Information (PII) in order to fulfill his/her duties;
 - Requires CECs to inform consumers of their responsibilities; and
 - Requires CECs to inform consumers that they may revoke their Authorization at any time, verbally or in writing.

CEC AUTHORIZATION FORM UPDATE



- Covered California does not require CEEs to send in the Authorization Forms at this time. The CEE is responsible for storing a record of the Authorization for 6 years.
- The Authorization may be stored electronically in accordance with all applicable laws and regulations (CFR 45 §155.260).
- Electronically stored PII must be encrypted.
- The form should be reviewed and signed by the consumer without regard for eligibility to Covered CA Health Plans or Medi-Cal Programs.

CEC AUTHORIZATION FORM UPDATE



- Only the primary household member or other household adult is required to sign the Authorization.
- If working with multiple CEEs, the consumer must provide this Authorization to each entity.
- Only one Authorization per household needs to be provided to the CEE if working with multiple CECs under the same entity.
- CECs are required to provide consumers a copy of the Authorization if requested by the consumer.
- If CECs under the Navigator Program are assisting consumers over the phone they may attest to having received verbal verification from the consumer.
- If the CEC is also an Authorized Representative they are still required to collect the Authorization Form.

CEC AUTHORIZATION FORM



The Authorization Form will be available in 12 languages:

English	Spanish	Chinese	Vietnamese
Korean	Tagalog	Russian	Armenian
Arabic	Hmong	Khmer	Farsi

Note: Advocacy groups and stakeholders are currently reviewing the translated forms. We expect to release the Authorization in the above languages next week.

To download the Authorization:

ipas.ccgrantsandassisters.org

The Authorization is independent of the online and paper applications.

[Reference: 45 C.F.R. 155.215(g) and 45 C.F.R. 155.210(e)(6)]



PRESS RELEASE: DENTAL PLAN UPDATE



DENTAL PLAN UPDATE



- All individual Covered California Health Plans in the 2015 benefit year will include pediatric dental care coverage.
- New stand-alone family dental plan option will offer adults the opportunity to receive dental coverage outside of the general health plans at an additional cost.
- Stand-alone family dental plans will not be available at the beginning of open enrollment, but will be added in early 2015.
- Financial assistance is not available for the optional adult dental benefits.



REPORTING INCOME CHANGES



COVEREDCA.COM APPLICATION INCOME PAGES



Income Pages

- How to enter income into the Covered California online application.
- Modify the income pages when an applicant reports a change in income.
- Income is directly related to a *applicant's eligibility for financial assistance*, so it is important to re-determine benefits
 upon completing updates or changes to income pages.
- CoveredCA.com demonstration on reporting income changes September 10, 2014.



WEBINAR SURVEY





QUESTIONS





THANK YOU!

