

**SUBMITTAL TO THE BOARD OF SUPERVISORS
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

243



FROM: County Executive Office

SUBMITTAL DATE:
December 6, 2011


SUBJECT: Low Income Health Program

RECOMMENDED MOTION: Receive and File the Low Income Health Program update

BACKGROUND: As you may recall, the Low Income Health Program (LIHP) has been in development for over a year now and offers a new revenue opportunity for several county departments. The LIHP is a component of the federally approved five year, "Bridge to Reform" Section 1115 (a) Comprehensive Demonstration Project Waiver expanding health care coverage through December 31, 2013, to low income, uninsured adults who are not eligible for Medi-Cal or Healthy Families. The program provides health care services for non-traditional Medi-Cal populations through the Medicaid Coverage Expansion (MCE) Program. The MCE Program affords counties the opportunity to receive an uncapped fifty percent federal match for the costs incurred for providing medical services to the eligible population. It is expected that approximately 20,000+ members may enroll in the program.

Departmental Concurrence

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Debra Cournoyer, Principal Management Analyst

FINANCIAL DATA	Current F.Y. Total Cost:	N/A	In Current Year Budget:	N/A
	Current F.Y. Net County Cost:	N/A	Budget Adjustment:	N/A
	Annual Net County Cost:	N/A	For Fiscal Year:	2011/12

SOURCE OF FUNDS:	Positions To Be Deleted Per A-30	<input type="checkbox"/>
	Requires 4/5 Vote	<input type="checkbox"/>

C.E.O. RECOMMENDATION: APPROVE
BY: 
Jay E. Orr

County Executive Office Signature

- Consent
- Policy
- Consent
- Policy

Dep't Recomm.:
Per Exec. Ofc.:

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On February 8, 2011, item 3.27, your Board authorized submission of the LIHP application to the California Department of Health Care Services (DHCS). The County received initial approval from DHCS on April 11, 2011. The approval initiated the concurrent authorization, allocation and contract process. On June 28, 2011, item 3.15 your Board authorized the Assistant County Executive Officer to sign the contract between Department of Health Care Services (DHCS) and the County.

Riverside County's application is expected to be approved by DHCS and the Centers for Medicare and Medicaid Services (CMS) and authorized to begin the plan January 2012. Riverside County is in the first group of new counties approved for a LIHP (only the ten pilot counties from a 2007 initiative have previously been authorized to start a LIHP). It is anticipated that within the month of December, the Assistant County Executive Officer will sign the contract, per Board authorization and the County will proceed with implementation of the LIHP, known as Riverside County HealthCare. Upon execution by DHCS, the agreement will be submitted to the Board for ratification.

Riverside County HealthCare (RCHC) provides a broad range of health care services to residents of Riverside County who are: 1) between the ages of 19-64; 2) United States Citizens, or United State non-citizen nationals, or qualified Aliens as defined by Federal Law; 3) at or below 133% of the Federal Poverty Level; 4) not pregnant; and 5) are not eligible for Medi-Cal or Healthy Families. RCHC will provide services such as emergency care services (including transportation); acute inpatient hospital services; physician services (including specialty care); mental health services, outpatient hospital services; prescription and limited non-prescription medications; laboratory services; radiology; physical therapy; prior-authorized non-emergency medical transportation (when medically necessary); medical equipment and supplies; and prosthetic and orthotic appliances and devices.

The RCHC program was developed in a collaborative effort between the Riverside County Executive Office, Riverside County Regional Medical Center (RCRMC), and the Community Health Agency/Department of Public Health (DOPH), Department of Mental Health, Department of Public Social Services and the Office on Aging. In addition, the Inland Empire Health Plan participates as a strategic partner and will provide administrative services on a contractual basis.

In July 2011, well after the pilot counties had started their LIHP programs, DHCS, CMS, and the Health Resources and Services Administration (HRSA) determined that eligible Ryan White HIV/Aids Program clients who are eligible for the LIHP under the Section 1115 Waiver must be enrolled in the LIHP. Under current law, the Ryan White HIV/AIDS Program must serve as the payer of last resort. As such, the collaborative County departments have included this population in the planning for implementation of RCHC.

The RCHC provider network will include: 1) RCRMC serving as the network hospital provider, primary care provider, specialty physician network provider, and provide all outpatient hospital services; 2) pharmacy services will be provided through RCRMC's three existing pharmacy locations and mail distribution services; 3) DOPH will provide primary care services through their ten Federally Qualified Health Center (FQHC) Look Alike family care centers; and 4) three contracted Federally Qualified Health Centers (FQHC's) will provide additional primary care services in areas where the County currently does not have primary care coverage. Contracted providers have been selected for durable medical equipment, orthotics and prosthetics and home health services. Staff is in the process of selecting providers through County Purchasing for non-emergency medical transportation and home infusion services.

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As part of the LIHP contract with DHCS, there will be significant monitoring and reporting requirements. These requirements necessitate capturing data scrutinizing program expenditures and revenues. In addition, access standards for delivery of care will need to be met. Access standards include proximity requirements as well as time standards for provision of care. Standards include a requirement that primary care providers must be within 30 miles or 60 minutes of members' homes; routine visits to primary care providers must occur within 30 days of request through June 30, 2012, reducing to 20 days as of July 1, 2012; and, specialty care appointments must be provided within 30 business days of authorization.

The implementation of the LIHP will provide Riverside County matching federal funds for care currently provided to Riverside County residents and ensure the health care network is established for a seamless transition for these members to Medi-Cal in 2014.