

## Covered California and Children: What Do Families and Professionals Working with Them Need to Know? December, 2013

### Overview of Covered California

As of October 1, Covered California (our state's health exchange under the federal Affordable Care Act, or ACA) offers pre-enrollment in plans for individuals and families who are or will be uninsured, **with health coverage to take effect January 1, 2014 for folks who apply by December 23, 2013.** The ACA requires all individuals aged 18 and over who are legal residents to have health coverage that meets minimum federal standards. **All Covered California plans meet these standards.** Before enrolling in plans under Covered California, families should first determine whether their children are eligible for Medi-Cal; the Covered California website will help them make this determination. (Undocumented children and adults are not eligible to participate in Covered California but may be eligible for certain Medi-Cal benefits.)

There are four options ("metals") for plans under Covered California, with out-of-pocket costs such as premiums, deductibles and co-pays varying by option:

- Platinum Plan: Enrollee pays 10% of expenses
- Gold Plan: Enrollee pays 20% of expenses
- Silver Plan: Enrollee pays 30% of expenses
- Bronze Plan: Enrollee pays 40% of expenses

Children and young adults under age 30 also are eligible to purchase catastrophic coverage; enrollees in these plans pay out-of-pocket for most health services until they reach the annual limit on cost sharing (\$12,700 in 2014).

Many low-income children and family members may be eligible for Medi-Cal, and families with incomes between 100% and 400% of the Federal Poverty Level (FPL) are eligible for federally subsidized premium assistance from 90% of premiums for those at 100% of FPL to 20% of premiums for those at 400%. Subsidies and premiums for a Silver plan purchased through Covered California can be calculated with the Kaiser Family Foundation Subsidy Calculator tool, which can be found at <http://kff.org/interactive/subsidy-calculator/> or through tools on the Covered California website.

Under Covered California the state has been divided into geographic regions and each region has its own group of participating plans. Information on the plans and on each plan's provider network is available on the Covered California website. (See below for the website address.)

### Essential Health Benefits for Children

The Affordable Care Act requires that all ACA plans cover the following essential health benefits:

- ambulatory patient services;
- emergency services;
- hospitalization;
- maternity and newborn care;
- mental health and substance use disorder services, including behavioral health treatment;
- prescription drugs;

- rehabilitative and habilitative services and devices;
- laboratory services;
- preventive and wellness services and chronic disease management; and
- pediatric services, including oral and vision care.

The Kaiser Small Group HMO is the benchmark plan for Covered California, defining the services to be provided as part of the federal Essential Health Benefits for children in our state.

### What Should Families Think About as They Purchase Coverage?

1. Provider networks: Do the plan networks include physicians, other providers, and hospitals that young children need? Families can find this information on the Covered California website by identifying the doctors and hospitals they use and determining which plans include those providers. Families whose children have multiple specialists may find that none of the plans includes all their specialists in its network and may have to make choices about which providers are priorities.
2. Out-of-pocket costs: There are trade-offs involved in selecting a particular “metal” plan. The higher the metal (e.g. platinum), the higher the upfront costs like premiums, while lower metals (e.g. bronze) carry lower premiums but higher pay-as-you-go costs like deductibles and co-pays. There are ceilings on out-of-pocket costs, but these costs still can be substantial in the lower metal plans. Families will have to judge whether they are better off paying more upfront for a higher metal plan with fewer pay-as-you-go costs or paying lower premiums for a lower metal plan with larger out-of-pocket costs whenever their children use services.
3. Separate dental plans: Child dental services are carved out from health plans and offered in separate stand-alone dental plans, so families will have to choose a separate dental plan for their children. These plans carry their own out-of-pocket cost requirements. The participating dental plans are Anthem Blue Cross of California, Blue Shield of California, Delta Dental of California, LIBERTY Dental Plan of California and Premier Access Dental and Vision. Families who already have health coverage can buy stand-alone dental coverage via Covered California.
4. Autism-related services: Applied Behavioral Analysis (ABA) services for children with autism are considered an essential benefit for the plans being sold through Covered California and are included in each of these plans. ABA services are not covered under Medi-Cal.

### How to Reach Covered California/Where to Obtain Information

Families can browse plans, search for providers, compare costs and apply at the Covered California website at [www.coveredca.com](http://www.coveredca.com) or by telephone at 800-300-1506. Enrollment assistance in multiple languages is available; check the Covered California website for information on local assisters.

**REMEMBER: December 23, 2013 is the deadline for applying in order to have coverage that begins on January 1, 2014! The open enrollment period will run through March 31, 2014.**