Option #4: Integrated Partnership

Consumer

1

California Health Benefit Exchange

Consumer



Service Center

- Respond to consumer calls
- Provide inperson assistance
- -Process mail

Core Automated Business Functions (CABF)

- Provide website offering ACA required functions
- Determine eligibility for Exchange subsidies, employee coverage, MAGI Medi-Cal*, and CHIP; refer potential non-MAGI Medi-Cal to counties
- Send all Medi-Cal cases to appropriate county for case maintenance
- Obtain eligibility determination for non-MAGI Medi-Cal from counties
- Deliver eligibility determination results to applicant
- Provide online shop/compare/plan selection functionality for Exchange, MAGI, and CHIP enrollees (with protections against improper steering)
- Store new Exchange subsidies, employee coverage and CHIP cases centrally for ongoing case maintenance
- Update master health care coverage client index
- Retrieve information to support service calls

(Note: CABF and Counties use same MAGI rules engine which links to verification hub

*Both Counties and CABF would determine MAGI eligibility)

Partnership

CHHS

DHCS

CDSS

Exchange Board

MRMIB Board (for transition)

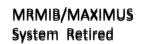
Governance Structure with clear roles & responsibilities

Accountabilit y Standards.



Counties/SAWS systems

- Determine eligibility for all Medi-Cal:
 MAGI* and non-MAGI and deliver results to applicant
- In-person application & assistance
- Store all Medi-Cal cases and perform ongoing case maintenance
- Handle public benefit programs



Qualified Health Plans

- Receive enrollment data
- Maintain enrollee information



Consumer

DHCS Contractor

System Retired