



Comments to the Board

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May 20, 2021 Board Meeting

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From: [Steve Shorr](#)
To: [Steve Shorr](#)
Subject: [EXTERNAL] # 1 in Google - Medi Cal & Other Coverage
Date: Saturday, May 8, 2021 7:53:22 AM
Attachments: [image001.png](#)

Gentlemen,

My Pro Bono website on Medi Cal is # 1 in Google for the questions on what if you have Medi Cal and other insurance. I find it quite confusing and conflicting to give and get the authoritative correct answers.

Would you please answer these questions, with citations to CA or Federal Law, Regulations, Evidence of Coverage, whatever. I don't like posting hearsay evidence, so and so said.

1. What are the Medi Cal HMO's doing to stop those with other coverage from enrolling?
 - a. On this [DHCS page](#), the public is told they must choose an HMO. Nothing is said about if you have other coverage, it's excluded.
 - b. On or about 10.26.2020 the Medi Cal Ombudsman emailed and said that if one had private insurance they could NOT enroll in a Medi Cal Managed Care Plan!
2. When one has a Medi Cal HMO and other coverage – can the patient still pick which provider or plan to go to?
3. When a member uses HMO services, how does the HMO collect & bill other coverage?
4. When a member uses say his Employer's HMO or PPO how does the collect copays & deductibles from Medi Cal HMO and/or fee for service?
5. Of the four approaches to Managed Care & Third Party Liability on [Medicaid.Gov](#) which is CA using?
 - a. How is this being enforced & implemented?

I'm not getting a penny in compensation from Covered CA nor any Insurance Company for my website. IMHO the least you can do, is give me the correct answers for posting.

I will be posting this email on my website. Please respond for the public there. I'm doing all this, not getting a penny, even for website expenses. IMHO the least Medi Cal and the Insurance Companies who are making \$\$\$ from my taxes and website information is respond with an authoritative and correct answer.

Steve



medi cal and other insurance



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About 2,150,000,000 results (1.13 seconds)

Are you allowed to have OHC Other Health Insurance & Medi Cal at the Same time? **Yes**, You can have Medi-Cal even though you have Other Health Coverage (OHC) through individual or group private health (or dental) insurance coverage.

<https://individuals.healthreformquotes.com> › full-scope

Dual Coverage? Medi-Cal & Individual or Employer coverage

[About featured snippets](#) • [Feedback](#)

<https://www.dhcs.ca.gov> › Pages › TPLRD_OCU_cont

Other Coverage - Department of Health Care Services - CA.gov

Mar 23, 2021 — following is not OHC: Medical Managed Care Plans (i.e. LA Care, Molina, etc.) Medicare Part A & B. Institutionalized (OHC Code "I"). Medi-Cal. OHC Processing Center. The OHC ...

People also ask

Can I have Medi-Cal and private insurance?



Can you have medical as a secondary insurance?



Can you have covered California and Medi-Cal?



How does Medicaid work with other insurance?



[Feedback](#)

<https://www.dhcs.ca.gov> › Medi-Cal_CovCA_FAQ

Medi-Cal and Covered California Frequently Asked Questions

Mar 23, 2021 — Will I qualify for health insurance if I am not a citizen or do not have satisfactory immigration status? Will undocumented immigrants be eligible for full-scope Medi-Cal? Where can I get ...

<https://ca.db101.org> › health_coverage › medi_cal › faqs

DB101 California - Medi-Cal: Frequently Asked Questions

may qualify for Medi-Cal coverage for emergencies or during pregnancy. If you are not sure whether you qualify, contact an organization in your area that works with immigrants. Can I ...
You've visited this page 4 times. Last visit: 3/21/21

www.SteveShorr.com

310.519.1335 Office Landline Press 1 to bypass message

562.286.1592 Texting, but email is preferred

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NAIC National Producer # 2710578

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From: [Steve Shorr](#)
To: [Steve Shorr](#)
Subject: [EXTERNAL] Oops - Forgot link - Medi Cal & Other Coverage
Date: Saturday, May 8, 2021 1:55:00 PM

Here's the link to post your response.

<https://individuals.healthreformquotes.com/medi-cal/full-scope/dual-coverage/#comment-110033>

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From: [Anete Millers](#)
To: [BoardComments \(CoveredCA\)](#)
Subject: [EXTERNAL] Comment Submission for May 20 Board Meeting
Date: Wednesday, May 19, 2021 11:36:59 AM
Attachments: [CAHP Comment Letter to Cov CA - Marketing Spend - 05-14-2021.pdf](#)

Good morning!

The California Association of Health Plans (CAHP) expects to make comments at tomorrow's board meeting regarding proposed marketing spend under the American Rescue Plan. Attached is our recent letter to Covered California on this topic, and I've also included the main points below.

As part of its three-part strategic approach to promoting health care enrollment in 2021 and 2022, Covered California will be coordinating with contracted health plans through a range of technology, outreach, and policy initiatives to maximize the uptake of new subsidies among enrollees. One of the proposed initiatives is the expectation that Qualified Health Plans (QHPs) spend at least 0.6 percent of all On- and Off-Exchange premiums on direct marketing.

- QHP issuers have raised concerns that this proposal will increase member premiums, and that this approach is not an effective use of member premium dollars. We ask that Covered California consider other standard marketing metrics related to efficacy of marketing tactics, such as marginal cost per acquisition, that should be used to determine the efficacy and investment in each issuer's marketing budget.
- CAHP shares Covered California's commitment to stability and affordability in the individual health care market. However, requiring a minimum amount be spent on direct response marketing that is based on, and grows annually with, premiums – taking into account medical and pharmacy trends – puts significant upward pressure on affordability. We believe this strategy is not the most efficient use of marketing dollars, and it is only one small part of a carrier's overall marketing plan.
- Additionally, QHPs remain concerned that locking in an annual direct marketing spend percentage without data-driven, evidence-based decision making regarding its effectiveness will not lead to successful marketing efforts.

CAHP appreciates your consideration of health plans' comments about Covered California's proposed marketing spend expectation, and we look forward to fostering further dialogue on this topic. We respectfully suggest that our requested change to the proposed initiative will lead to success in our collective efforts to support consumer access to affordable health care.

Thank you!

Anete Millers

Director of Regulatory Affairs
California Association of Health Plans
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www.calhealthplans.org

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May 14, 2021

Ms. Kelly Green
Director of Communications and External Affairs
Covered California
1601 Exposition Boulevard
Sacramento, CA 95815

Sent via email:
kelly.green@covered.ca.gov

Re: Proposed Marketing Spend Initiative for 2021-2022 Enrollment Engagement Efforts

Dear Ms. Green,

The California Association of Health Plans (CAHP) represents 45 public and private health care service plans (plans) that collectively provide coverage to over 28 million Californians. We write to request that Covered California re-consider its proposed initiative requiring Qualified Health Plans (QHPs) to spend at least 0.6 percent of premiums on direct marketing.

General Comments

CAHP and our QHPs are pleased to continue our efforts as partners with Covered California to successfully market and conduct enrollment outreach with the goal of maximizing health care enrollment throughout 2021 and 2022.

However, we have previously provided significant comments to Covered California in response to proposed changes requiring health plans to spend a percentage of premiums on direct marketing. While we are grateful for Covered California's past openness in listening to our feedback, health plans still have significant concerns with the proposed marketing spend initiative.

Health Plan Concerns Regarding 0.6 Percent Marketing Spend Proposal

As part of its three-part strategic approach to promoting health care enrollment in 2021 and 2022, Covered California will be coordinating with contracted health plans through a range of technology, outreach, and policy initiatives to maximize the uptake of new subsidies among enrollees. One of the proposed initiatives is the expectation that QHPs spend at least 0.6 percent of all On- and Off-Exchange premiums on direct marketing.

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cost per acquisition, that should be used to determine the efficacy and investment in each issuer's marketing budget.

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Additionally, QHPs remain concerned that locking in an annual direct marketing spend percentage without data-driven, evidence-based decision making regarding its effectiveness will not lead to successful marketing efforts.

CAHP appreciates your consideration of health plans' comments about Covered California's proposed marketing spend expectation, and we look forward to fostering further dialogue on this topic. We respectfully suggest that our requested change to the proposed initiative will lead to success in our collective efforts to support consumer access to affordable health care.

Sincerely,

A handwritten signature in black ink, appearing to read "Anete Millers". The signature is fluid and cursive, with the first name "Anete" and last name "Millers" clearly distinguishable.

Anete Millers
Director of Regulatory Affairs