

Resolution for the Indigent Care Program

Santa Barbara County Board of Supervisors July 8, 2014

History

<u>1976</u> Medi-Cal Medically Indigent Adult (MIA) Category established by State (initially, only State funding no federal).



- <u>1983</u> MIAs shifted to Counties (given only 70% of funding).
- <u>1986</u> Santa Barbara County, via Resolution, creates MIA Services Program and assigns to PHD.
- <u>1992</u> State MIA funding "Realigned" (as part of 1991 Health Realignment). Funds ongoing indigent care in SB County
- 2014 Affordable Care Act and Sunset of MIA Program.
- <u>2014</u> Indigent Care Program (ICP) transition (*January 2014 to present*).

Indigent Care in SB County

- Individuals in need of medical care
- Between 21-64 years of age
- Ineligible for any other health care coverage
- Citizen or legally admitted alien AND resident of SB County
- Meet income and asset eligibility criteria
- All primary care and available specialty care at PHD HCCs
- Supported by State Realignment funding.

Prior to closure of Medically Indigent Adult Services Program

- Average 1,000 patients in program
- Approximately \$3.6M/year inpatient/outpatient referral costs.
- Includes primary care, specialty and inpatient care



MIA vs ICP Regulations

Different Income Eligibility:

- MIA: 0%-200% of Federal Poverty Level (FPL)
- ICP: 138% to 200% of FPL AND ineligible for other health care coverage

Share of Cost:

- MIA: below 100% of FPL = zero share of cost
- ICP: all patients will have a share of cost
 - Those individuals from 0-138% of FPL should qualify for Medi-Cal

Income and Asset differences:

- MIA: used Net Income
- ICP: uses Gross Income (Modified Adjusted Gross Income (MAGI))
- ICP: Share of Cost determinations based upon differences between income and Medi-Cal minimum necessity levels

Inpatient coverage: Only after hospitals and patients apply for *Hospital Medi-Cal Presumptive Eligibility* (new benefit from ACA).

Current Program Status



- All MIA Program service claims have been received with >95% processed to date.
- Greater than 85% of previous MIA Program patients are enrolled in MAGI. 95% remain PHD patients.
- FY 2014-2015 budget based upon projected 50-100 ICP patients.
- Since January there are no Indigent Care Program patients
- Tracking ICPs in other Counties- similar experiences.

Requested Board Actions

- State Welfare and Institutions Code Section 17,000
- Need to create ongoing program and eligibility regulations
 - Closeout of MIA Program.
 - Establish Indigent Care Program (ICP) and Eligibility Regulations through Resolution.
 - Authorize Public Health Department Director to adjust ICP regulations accordingly to address changing environment and medical necessity for qualifying indigents.

