

## Where did Healthy Families go?

The State Children's Health Insurance Program (SCHIP), called Healthy Families in California, was a program for low-income children. During 2013, the SCHIP program was folded into Medi-Cal, resulting in the move of 800,000 children from a standalone commercial-like product to expanded Medi-Cal managed care. The new aid codes for Medi-Cal SCHIP members include E2, E4 and E5 and the new TLIC aid codes T0 through T9.

## What is TLIC?

TLIC stands for Targeted Low Income Children Program and is a new category within Medi-Cal managed care. Many of the 800,000 Healthy Families/SCHIP members transitioned into this new TLIC category. TLIC aid codes start with the letter 'T' followed by a number (0-9).

## What is LIHP?

The Affordable Care Act allowed the State to create the Low Income Health Program (LIHP). LIHP started in 2010 and provided expanded health coverage to low-income adults with a family income at or below 138% of the Federal Poverty Level (FPL). Prior to 2014, most LIHP members received healthcare from community clinics and other local providers where services were compensated directly by the state. On January 1, 2014, under the Affordable Care Act (ACA), 600,000 people transitioned into Medi-Cal managed care, as a new Medi-Cal expansion aid code L1. During a beneficiary's annual review called redetermination, some LIHP members may be changed to other aid codes or categories.

## Are there other Medi-Cal managed care expansion categories?

Yes. Aid code M1 is a new low-income adult category similar to LIHP but for beneficiaries who were not part of LIHP. They have family incomes at or below 138% of the Federal Poverty Level (FPL). Unlike LIHP, there is no bulk assignment of these members; rather, these are new beneficiaries who now qualify for Medi-Cal coverage as a result of the expanded eligibility rules of the Affordable Care Act (ACA). During a beneficiary's annual review called redetermination, some M1 members may be changed to other aid codes or categories.

## Medi-Cal Expansion

# FAQ

- Your questions asked,  
our answers given

## What about expansion in general?

In addition to all of the above, the State is looking at other ways to streamline the application process and prequalify people for expanded Medi-Cal. For example, the new health insurance exchange (Covered California) is prequalifying people looking for insurance. Depending on family income or other factors, they may qualify for private insurance on the exchange, or they may qualify for a 100% subsidy called Medi-Cal.

CalFresh is another example. Also known as SNAP (Supplemental Nutrition Assistance Program) or food stamps, the rationale is that if a person qualifies for low-income benefits like SNAP, then they probably also qualify for other low-income assistance programs like Medi-Cal. In this case, similar to LIHP, enrollment will be automatic and bulk-transferred into Medi-Cal managed care in the coming months.

## What will I be paid for these new expansion patients?

New aid codes and new aid categories will have all IPAs and medical groups rethinking compensation. Please refer to your IPA or medical group contract for specific rates as it may apply to you.



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