



Maternal and Child Health Access

1111 W. Sixth Street, Fourth Fl  
Los Angeles, CA 90017-1800  
Tel 213. 749. 4261  
Fax 213. 745. 1040  
[www.mchaccess.org](http://www.mchaccess.org)

June 13, 2011

### **May Revise Proposal to Transition Children from Healthy Families to Medi-Cal**

Medi-Cal provides more health benefits with lower consumer-cost sharing for children and with a better appeals process than Healthy Families'. Medi-Cal cannot impose waiting lists; Healthy Families can and does. For these reasons, MCHA strongly supports the concept of transitioning the Healthy Families program to Medi-Cal.

Still, many important issues must be addressed to ensure that the May Revise proposal promotes children's best interests:

- Most kids can stay in their current health plans under the proposal and with their current providers. But for those who cannot, before the transition from Healthy Families to Medi-Cal occurs, the state must provide for continuity of care for every child whose circumstances require it—**no transition should occur for any child without that protection, even if it means fewer savings in the budget year.**
- The state must also demonstrate that adequate provider networks exist to meet children's needs, especially for the minority of kids living in counties where there are no Medi-Cal managed care plans. **The money the Governor says his proposal will save should instead go, to the degree necessary, to making sure doctors and nurses will be there when kids need them.** The lowest income children who have been in Medi-Cal all along need this, not only children transitioning from Healthy Families.
- Medi-Cal should contract with children's Healthy Families dental plans to preserve access, but **no other expansion of dental managed care should occur in Medi-Cal, not even on a voluntary basis.** The "voluntary" Medi-Cal dental managed care that exists in Los Angeles at present becomes a nightmare when children and families are unknowingly placed into dental managed care plans-- often as the result of faulty enrollment and/or marketing practices-- and can't get out quickly during dental emergencies.
- **The county where a child lives should decide eligibility.** But to tackle the Medi-Cal application processing delays that exist in some counties, the state should **adopt a robust program of Accelerated Enrollment**, at the county as well as the state Single Point of Entry, and **simplify Medi-Cal's eligibility rules and procedures** so that delays are less likely, even in down economic times when caseloads spike.