June 17, 2008

Sandra Shewry, Director
California Department of Health Care Services
1501 Capitol Avenue
P.O. Box 997413, M.S. 0000
Sacramento, CA 95899-7413

Re: Issuing the Department’s Reports on Improving the CHDP Gateway (AB 1948) and Creating the Prenatal and Newborn Hospital Gateways (SB 24) Without Further Delay

Dear Director Shewry:

The undersigned consumer and provider organizations are strongly united in this request that the Department immediately release the following documents:

(1) The Department’s feasibility study review (FSR) of improvements to the CHDP Gateway mandated by AB 1948 (Stats. 2006, c. 332, adding Welf. & Inst. C. § 14011.75). The FSR was due to the Legislature on March 1, 2008.

(2) The Department’s report on implementation options for the Prenatal Gateway (SB 24, Stats. 2003, c. 895, adding Welf. & Inst. C. §§ 14148.03-.05), based on stakeholder meetings facilitated by Habrask and Associates. These formal stakeholder meetings, mandated by SB 24, ended in December 2007; SB 24 itself became state law in October 2003.

Thousands of low-income children and pregnant women who are indisputably eligible for Medi-Cal or Healthy would benefit from improving the CHDP Gateway and creating the Prenatal Gateway (and related Newborn Hospital Gateway), as would the providers who deliver health care services to this population and the many participating insurance companies.

The purpose of both AB 1949 and SB 24 is to give families the option to use a simple process for submitting their applications for ongoing coverage on-line, from the provider’s office, and to continue their health coverage until the final eligibility determination is made. This modernization would be a vast improvement over the current system, in which eligible children and pregnant women automatically lose their coverage in a maximum of two months if they do not submit their follow-up “paper” applications on time.
At a time of record food and gas prices, crisis in the housing mortgage market, more and more employers dropping health insurance coverage for their employees and dependents, and the meltdown of county health care systems, California can ill afford to pass up the significant opportunity presented by the laws enacted through AB 1948 and SB 24 to facilitate enrollment into federally-funded health insurance programs. More importantly, the Department has an obligation to do everything it can to ensure that eligible low-income children and pregnant women have the health care coverage they are eligible for, in order to promote access to care and support California’s ailing health care safety net.

Sincerely,

[Signature]

Maternal and Child Health Access
Lynn Kersey, M.A., M.P.H., Executive Director

Children’s Advocacy Institute
Robert Fellmeth, Executive Director

LA Best Babies Network
Carolina Reyes, M.D., Executive Director

March of Dimes
Gail Margolis, Esq., Chair, Public Affairs Committee

Maternal, Child and Adolescent Health Action
Linda Bouskill Nagel, P.H.N., President

Planned Parenthood Affiliates of California
Ann Marie Benitez, Public Policy Director

San Mateo Legal Aid Society
Melissa Rodgers, Managing Attorney

Western Center on Law and Poverty
Elizabeth Landsberg, Esq., Legislative Advocate

cc: Stan Rosenstein, Deputy Director DHCS
    Toby Douglass, Assistant Deputy Director DHCS
    Secretary Kim Belshé, California Health and Human Services Agency
    Senator Sheila Kuehl, Chair, Senate Health Committee
    Assemblymember Mervyn M. Dymally, Chair, Assembly Health Committee