Abstract

In 2010, California was the first state in the nation to pass legislation creating a state-administered health exchange under the Affordable Care Act. The California Health Benefit Exchange (the Exchange) is governed by a five-member independent state Board with members appointed by the Governor and the Legislature. The work of the Exchange has involved not only the Board and staff of the Exchange, but a wide array of committed partners across the state who have joined together to achieve the shared vision and mission of the Exchange.

The Exchange is making significant progress in the development and implementation of the programs, systems and support services needed to provide quality health coverage for an estimated 2.7 million Californians by 2016. The Exchange has been engaged in accelerated planning and development activities since its first Exchange Establishment grant award in 2011 and met, and in many cases exceeded, the objectives and tasks identified in that first Level I work plan.

Accomplishments during the current Level I grant include: (1) Refining with stakeholder participation the vision, mission, and values of the Exchange and specific policy principles to inform Exchange activities; (2) Holding regular public Board meetings and meetings across the state with extensive stakeholder input and participation; (3) Defining the program elements, essential tasks and required systems in major core areas, including eligibility and enrollment, outreach and marketing, consumer assistance and qualified health plan management; (4) Securing through competitive solicitations expert resources and consultants to help advance decision-making, system design and implementation approaches in each area; (5) Engaging with state departments administering existing coverage programs in extensive system review and analysis to design the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS), an IT system that will serve as consolidated support for eligibility and enrollment in Exchange programs, Medi-Cal (California's Medicaid program) and Healthy Families (California's Children's Health Insurance Program (CHIP)); (6) Developing and cultivating active partnerships and collaborations with state agencies, the Legislature and key decision makers on shared research, analysis and implementation activities; (7) Recruiting and hiring key senior managers and staff; and (8) Establishing internal business, operational and financial management systems to support the work of the Exchange.

The Exchange is seeking funding for a second Level I Exchange Establishment grant (1.2) to execute the next level of planning and development activities. During this second Level I grant (August 15, 2012-June 30, 2013) the Exchange will: (1) Engage in continued planning, research and stakeholder consultation; (2) Actively collaborate with state agencies to maximize coordination and integration in health coverage programs, consumer assistance and health insurance oversight; (3) Design and refine program and operational elements and internal operational policies to support "no wrong door" coordinated enrollment and eligibility and responsive consumer assistance, including activities to advance development of CalHEERS; (4) Refine and begin to implement an aggressive marketing, outreach, and public education program to set the stage for engaging millions of ethnically and culturally diverse Californians in gaining coverage in 2014; (5) Select and certify qualified health plans to be offered in the individual and SHOP Exchanges; (6) Submit the Exchange Blueprint and secure federal certification for the operation of a state-based Exchange; (7) Develop and execute a multi-year plan for evaluation and monitoring of Exchange programs and implementation of federal health reforms in the state; and (8) Maintain and enhance financial management, accountability and business operations in service of the mission and functions of the Exchange.