

August 7, 2013

Via Email

Dear STD Controllers, TB Controllers, CD Controllers, Immunization Coordinators, and Other Community Partners:

Welcome to the third issue of the STD Control Branch Healthcare Reform e-update. In our previous issue, we discussed coverage expansion, which includes Medi-Cal expansion and the Health Benefit Exchange (Covered California). In this issue, we discuss the requirements for qualified health plans participating in the Exchange to contract with “Essential Community Providers” and the opportunities for public health programs to partner with health plans in California.

In this issue: **1) [What is an Essential Community Provider?](#) 2) [Are STD, TB, Immunization, and Family Planning programs considered ECPs in California?](#) 3) [How can STD, TB, Immunization, and other public health programs in California partner with qualified health plans participating in the Exchange?](#)**

1) What is an Essential Community Provider (ECP)?

As part of health care reform, policymakers wanted to make sure that low-income and medically underserved communities who became newly insured would be able to access the safety net providers or “Essential Community Providers” that they currently see now, ensuring continuity of care. For the purposes of health care reform, an ECP is an organization that serves predominantly low-income, medically underserved communities, including safety net providers eligible to participate in the 340B drug purchasing program. States can define who will be counted as an ECP in their jurisdiction. Covered California decided to only count as ECPs those providers that deliver comprehensive primary care, including Federally Qualified Health Centers (FQHCs) and FQHC “look-alikes”, Disproportionate Share Hospitals, and federally-designated tribal health programs. Qualified Health Plans participating in the Exchange are required to contract with at least 15 percent of the Essential Community Providers in the count(ies) in which they provide coverage.

2) Are STD, TB, Immunization, and Family Planning programs considered ECPs in California?

No, not necessarily. Covered California decided not to count as ECPs “single-service providers”, such as STD clinics, TB clinics, and family planning clinics not providing comprehensive primary care. Instead, single-service providers are encouraged to contract with health centers that provide comprehensive services to low-income and underserved populations. For a letter from Covered California explaining this decision and who counts as an ECP in California, click [here](#). There is no way for single-service providers to become designated as ECPs or to count towards the 15 percent requirement during this qualified health plan cycle.

While single-service providers do not count towards the ECP requirement for qualified health plans, Covered California will consider single-service providers when seeking to ensure that health plans have sufficient geographic coverage in the counties in which the health plans propose to offer services. Single-service providers are also included in a list of 401(a) community clinic / free clinic providers, which Covered California will consult when reviewing geographic coverage.

3) How can STD, TB, Immunization, and other public health programs in California partner with qualified health plans participating in the Exchange?

Local health departments and community-based organizations can:

- Review Covered California's lists of Essential Community Providers/340(B) providers and free clinics/401(a) providers, which can be accessed [here](#) to determine whether their health department or program is included.
- Let us know whether there are gaps in these lists, and which programs of note are not listed at all and which are listed as 401(a) but not 340(B).
- Learn more about how to contract with health plans to deliver preventive services, regardless of whether this contract will enable the health plan to meet its ECP requirement. Future newsletters will discuss billing and reimbursement in further detail. Technical assistance for health departments and STD programs on billing and reimbursement is available from [Cardea Services](#). Also, the CDPH Immunization Branch contracted with the County of Kern, Public Health Services Department to develop a toolkit for health departments and CBOs on billing and reimbursement, which is available [here](#).