

AMENDED IN ASSEMBLY MAY 27, 2011

AMENDED IN ASSEMBLY MAY 3, 2011

AMENDED IN ASSEMBLY APRIL 14, 2011

AMENDED IN ASSEMBLY MARCH 29, 2011

CALIFORNIA LEGISLATURE—2011–12 REGULAR SESSION

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**ASSEMBLY BILL**

**No. 714**

**Introduced by Assembly Member Atkins**

February 17, 2011

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An act to amend Section 127420 of, and to add Sections 104164, 120971.5, and 120971.6 to, the Health and Safety Code, to add Sections 12693.78, 12693.79, 12698.45, 12734, and 12739.615 to the Insurance Code, and to add Sections 14029.9 and 14105.182 to the Welfare and Institutions Code, relating to health care coverage.

LEGISLATIVE COUNSEL'S DIGEST

AB 714, as amended, Atkins. Health care coverage: California Health Benefit Exchange.

Existing law, the federal Patient Protection and Affordable Care Act, requires each state to, by January 1, 2014, establish an American Health Benefit Exchange that makes available qualified health plans to qualified individuals and employers. Existing state law establishes the California Health Benefit Exchange within state government, specifies the powers and duties of the board governing the Exchange relative to determining eligibility for enrollment in the Exchange and arranging for coverage under qualified health plans, and requires the board to facilitate the purchase of qualified health plans through the Exchange by qualified individuals and small employers by January 1, 2014.

Existing law establishes a program for the treatment of breast and cervical cancer, administered by the State Department of Health Care Services. Existing law provides specified health care coverage to eligible individuals under the Healthy Families Program, the Access for Infants and Mothers Program, the California Major Risk Medical Insurance Program, and the Federal Temporary High Risk Pool, which are administered by the Managed Risk Medical Insurance Board. Existing law provides specified health care coverage to eligible individuals under the Medi-Cal program and the Family PACT program, which are administered by the State Department of Health Care Services. Existing law provides specified health care coverage to individuals under the AIDS Drug Assistance Program (ADAP) and the federal Ryan White HIV/AIDS Treatment Extension Act of 2009, which are administered by the State Department of Public Health. Existing law provides for the regulation and licensure of hospital facilities by the State Department of Public Health.

This bill would, until June 30, 2013, require the State Department of Health Care Services, the State Department of Public Health, and the Managed Risk Medical Insurance Board, respectively, to disclose information on health care coverage through the California Health Benefit Exchange to every individual who has ceased to be enrolled under the programs described above, except that, with respect to the cancer treatment program, the Family PACT program, and the programs for treatment of HIV/AIDS, the disclosure would be made to each enrollee, *and for the Family PACT Program, the disclosure would be made by Family PACT providers*. The bill would require certain hospitals, when billing, to include additional disclosures regarding health care coverage through the Exchange.

On and after January 1, 2013, this bill would require the State Department of Health Care Services and the ~~board~~ *Managed Risk Medical Insurance Board* to provide to the California Health Benefit Exchange specified information for each ~~enrollee~~ *individual* who has ceased to be enrolled under those programs, except the cancer treatment program, the Family PACT program, and the programs for treatment of HIV/AIDS, in a manner to be prescribed by the Exchange, for purposes of determining eligibility and completing enrollment in the Exchange, and to disclose that enrollment to those individuals. On and after January 1, 2013, with respect to the cancer treatment program, the programs for the treatment of HIV/AIDS, and the Family PACT program, this bill would require the State Department of Health Care

Services or the State Department of Public Health to provide to the Exchange specified information for each enrollee in a manner to be prescribed by the Exchange for purposes of determining eligibility and completing enrollment in the Exchange. The bill would make the automatic enrollment of those individuals in the Exchange subject to the State Department of Health Care Services, the State Department of Public Health, and the Managed Risk Medical Insurance Board receiving approval from the United States Department of Health and Human Services to transfer the minimum information necessary to initiate an application for enrollment, as specified. The bill would allow an individual who has been enrolled in the Exchange by the departments or the board to opt out of that coverage in writing to the Exchange.

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

1 SECTION 1. Section 104164 is added to the Health and Safety  
2 Code, to read:

3 104164. (a) Effective January 1, 2012, to June 30, 2013,  
4 inclusive, the department shall ~~provide the following notice~~ *include*  
5 *the following notice in materials otherwise provided* to every  
6 individual receiving services or treatment for cancer under this  
7 chapter:

8  
9 “Effective January 1, 2014, you may be eligible for reduced-cost,  
10 comprehensive health care coverage through the California Health  
11 Benefit Exchange. If your income is low, you may be eligible for  
12 no-cost coverage through Medi-Cal. For more information, please  
13 visit [www.healthcare.ca.gov](http://www.healthcare.ca.gov) or call 1-888-Healthhelp (insert  
14 telephone number).”

15  
16 (b) Effective July 1, 2013, the department shall ~~provide the~~  
17 ~~following notice~~ *include the following notice in materials otherwise*  
18 *provided* to every individual receiving services or treatment under  
19 this chapter:

20  
21 “Because you are enrolled in a cancer screening or treatment  
22 program, an application for health care coverage through the  
23 California Health Benefit Exchange will be made for you. Coverage

1 will not be effective until January 1, 2014. You are not required  
 2 to accept coverage from the Exchange. Your payment for coverage  
 3 will be based on your income last year. If you make significantly  
 4 less or more this year than you made last year, please tell the  
 5 California Health Benefit Exchange and your charges will be based  
 6 on your current income. If your income is low, you may qualify  
 7 for no-cost coverage through Medi-Cal. For more information,  
 8 check [www.healthcare.ca.gov](http://www.healthcare.ca.gov) or call 1-888-Healthhelp (insert  
 9 telephone number).”

10

11 (c) (1) To maximize the number of individual Californians  
 12 complying with the requirements of the federal Patient Protection  
 13 and Affordable Care Act (Public Law 111-148) by obtaining  
 14 coverage consistent with the provisions of federal law, the  
 15 department shall seek approval from the United States Department  
 16 of Health and Human Services to transfer the minimum information  
 17 necessary to initiate an application for enrollment under this section  
 18 consistent with Section 100503 of the Government Code.

19 (2) Effective January 1, 2013, for each enrollee, the department  
 20 shall provide to the Exchange the name, most recent address, other  
 21 information that is in the possession of the program, and any other  
 22 information that the Exchange may require, in a manner to be  
 23 prescribed by the Exchange in order to determine eligibility and  
 24 complete enrollment. The information shall be kept confidential  
 25 in a manner consistent with subsection (g) of Section 1411 of the  
 26 federal Patient Protection and Affordable Care Act (Public Law  
 27 111-148).

28 (3) The information to the Exchange shall initiate an application  
 29 for enrollment in coverage within the meaning of Section 100503  
 30 of the Government Code.

31 (d) The individual shall have the opportunity to decline health  
 32 care coverage pursuant to this section by notifying the Exchange  
 33 in writing.

34 SEC. 2. Section 120971.5 is added to the Health and Safety  
 35 Code, to read:

36 120971.5. (a) Effective January 1, 2012, to June 30, 2013,  
 37 inclusive, the State Department of Public Health shall ~~provide the~~  
 38 ~~following notice~~ *include the following notice in materials otherwise*  
 39 *provided* to every individual receiving care or services under the

1 AIDS Drug Assistance Program (ADAP), as provided in Section  
2 120950:

3  
4 “Effective January 1, 2014, you may be eligible for reduced-cost,  
5 comprehensive health care coverage through the California Health  
6 Benefit Exchange. If your income is low, you may be eligible for  
7 no-cost coverage through Medi-Cal. For more information, please  
8 visit [www.healthcare.ca.gov](http://www.healthcare.ca.gov) or call 1-888-Healthhelp (insert  
9 telephone number).”

10  
11 (b) Effective July 1, 2013, the State Department of Public Health  
12 shall ~~provide the following notice~~ *include the following notice in*  
13 *materials otherwise provided* to every individual receiving care  
14 or services under ADAP as provided in Section 120950:

15  
16 “Because you are enrolled in a public health program, an  
17 application for health care coverage through the California Health  
18 Benefit Exchange will be made for you. Coverage will not be  
19 effective until January 1, 2014. You are not required to accept  
20 coverage from the Exchange. Your payment for coverage will be  
21 based on your income last year. If you make significantly less or  
22 more this year than you made last year, please tell the California  
23 Health Benefit Exchange and your charges will be based on your  
24 current income. If your income is low, you may qualify for no-cost  
25 coverage through Medi-Cal. For more information, check  
26 [www.healthcare.ca.gov](http://www.healthcare.ca.gov) or call 1-888-Healthhelp (insert telephone  
27 number).”

28  
29 (c) (1) To maximize the number of individual Californians  
30 complying with the requirements of the federal Patient Protection  
31 and Affordable Care Act (Public Law 111-148) by obtaining  
32 coverage consistent with the provisions of federal law, the State  
33 Department of Public Health shall seek approval from the United  
34 States Department of Health and Human Services to transfer the  
35 minimum information necessary to initiate an application for  
36 enrollment under this section consistent with Section 100503 of  
37 the Government Code.

38 (2) Effective January 1, 2013, for each enrollee, the State  
39 Department of Public Health shall provide to the Exchange the  
40 name, most recent address, other information that is in the

1 possession of the program, and any other information that the  
2 Exchange may require, in a manner to be prescribed by the  
3 Exchange in order to determine eligibility and complete enrollment.  
4 The information shall be kept confidential in a manner consistent  
5 with subsection (g) of Section 1411 of the federal Patient Protection  
6 and Affordable Care Act (Public Law 111-148), the information  
7 shall be provided consistent with Section 120980.

8 (3) The information provided to the Exchange shall initiate an  
9 application for enrollment in coverage within the meaning of  
10 Section 100503 of the Government Code.

11 (d) The individual shall have the opportunity to decline health  
12 care coverage pursuant to this section by notifying the Exchange  
13 in writing.

14 SEC. 3. Section 120971.6 is added to the Health and Safety  
15 Code, to read:

16 120971.6. (a) Effective January 1, 2012, to June 30, 2013,  
17 inclusive, the State Department of Public Health shall ~~provide the~~  
18 ~~following notice~~ *include the following notice in materials otherwise*  
19 *provided* to every individual receiving care or services under the  
20 federal Ryan White HIV/AIDS Treatment Extension Act of 2009  
21 (Public Law 111-187):

22  
23 “Effective January 1, 2014, you may be eligible for reduced-cost,  
24 comprehensive health care coverage through the California Health  
25 Benefit Exchange. If your income is low, you may be eligible for  
26 no-cost coverage through Medi-Cal. For more information, please  
27 visit [www.healthcare.ca.gov](http://www.healthcare.ca.gov) or call 1-888-Healthhelp (insert  
28 telephone number).”

29  
30 (b) Effective July 1, 2013, the State Department of Public Health  
31 shall ~~provide the following notice~~ *include the following notice in*  
32 *materials otherwise provided* to every individual receiving care  
33 or services under the federal Ryan White HIV/AIDS Treatment  
34 Extension Act of 2009 (Public Law 111-187):

35  
36 “Because you are enrolled in a public health program, an  
37 application for health care coverage through the California Health  
38 Benefit Exchange will be made for you. Coverage will not be  
39 effective until January 1, 2014. You are not required to accept  
40 coverage from the Exchange. Your payment for coverage will be

1 based on your income last year. If you make significantly less or  
2 more this year than you made last year, please tell the California  
3 Health Benefit Exchange and your charges will be based on your  
4 current income. If your income is low, you may qualify for no-cost  
5 coverage through Medi-Cal. For more information, check  
6 [www.healthcare.ca.gov](http://www.healthcare.ca.gov) or call 1-888-Healthhelp (insert telephone  
7 number).”

8  
9 (c) (1) To maximize the number of individual Californians  
10 complying with the requirements of the federal Patient Protection  
11 and Affordable Care Act (Public Law 111-148) by obtaining  
12 coverage consistent with the provisions of federal law, the State  
13 Department of Public Health shall seek approval from the United  
14 States Department of Health and Human Services to transfer the  
15 minimum information necessary to initiate an application for  
16 enrollment under this section consistent with Section 100503 of  
17 the Government Code.

18 (2) Effective January 1, 2013, for each enrollee, the State  
19 Department of Public Health shall provide to the Exchange the  
20 name, most recent address, other information that is in the  
21 possession of the program, and any other information that the  
22 Exchange may require, in a manner to be prescribed by the  
23 Exchange in order to determine eligibility and complete enrollment.  
24 The information shall be kept confidential in a manner consistent  
25 with subsection (g) of Section 1411 of the federal Patient Protection  
26 and Affordable Care Act (Public Law 111-148), the information  
27 shall be provided consistent with Section 120980.

28 (3) The information provided to the Exchange shall initiate an  
29 application for enrollment in coverage within the meaning of  
30 Section 100503 of the Government Code.

31 (d) The individual shall have the opportunity to decline health  
32 care coverage pursuant to this section by notifying the Exchange  
33 in writing.

34 SEC. 4. Section 127420 of the Health and Safety Code is  
35 amended to read:

36 127420. (a) Each hospital shall make all reasonable efforts to  
37 obtain from the patient or his or her representative information  
38 about whether private or public health insurance or sponsorship  
39 may fully or partially cover the charges for care rendered by the

1 hospital to a patient, including, but not limited to, any of the  
2 following:

3 (1) Private health insurance.

4 (2) Medicare.

5 (3) The Medi-Cal program, the Healthy Families Program, the  
6 California Childrens' Services Program, or other state-funded  
7 programs designed to provide health coverage.

8 (b) If a hospital bills a patient who has not provided proof of  
9 coverage by a third party at the time the care is provided or upon  
10 discharge, as a part of that billing, the hospital shall provide the  
11 patient with a clear and conspicuous notice that includes all of the  
12 following:

13 (1) A statement of charges for services rendered by the hospital.

14 (2) A request that the patient inform the hospital if the patient  
15 has health insurance coverage, Medicare, Healthy Families,  
16 Medi-Cal, or other coverage.

17 (3) A statement that if the consumer does not have health  
18 insurance coverage, the consumer may be eligible for Medicare,  
19 Healthy Families, Medi-Cal, California Childrens' Services  
20 Program, or charity care. Effective January 1, 2013, the statement  
21 shall include information about the availability of coverage through  
22 the California Health Benefit Exchange and that such coverage  
23 shall be available effective January 1, 2014.

24 (4) (A) A statement indicating how patients may obtain  
25 applications for the Medi-Cal program and the Healthy Families  
26 Program and that the hospital will provide these applications.  
27 Effective January 1, 2013, the statement shall include information  
28 about the availability of coverage through the California Health  
29 Benefit Exchange and that such coverage shall be available  
30 effective January 1, 2014. If the patient does not indicate coverage  
31 by a third-party payer specified in subdivision (a), or requests a  
32 discounted price or charity care then the hospital shall provide an  
33 application for the Medi-Cal program, the Healthy Families  
34 Program, or other governmental program to the patient. This  
35 application shall be provided prior to discharge if the patient has  
36 been admitted or to patients receiving emergency or outpatient  
37 care.

38 (B) Effective January 1, 2014, the California Health Benefit  
39 Exchange shall be included as a government program under this

1 section, including for purposes of the notice and application  
2 requirements under this subdivision.

3 (5) Information regarding the financially qualified patient and  
4 charity care application, including the following:

5 (A) A statement that indicates that if the patient lacks, or has  
6 inadequate, insurance, and meets certain low- and moderate-income  
7 requirements, the patient may qualify for discounted payment or  
8 charity care.

9 (B) The name and telephone number of a hospital employee or  
10 office from whom or which the patient may obtain information  
11 about the hospital's discount payment and charity care policies,  
12 and how to apply for that assistance.

13 SEC. 5. Section 12693.78 is added to the Insurance Code, to  
14 read:

15 12693.78. (a) Effective January 1, 2012, to June 30, 2013,  
16 inclusive, the board shall ~~provide the following notice~~ *include the*  
17 *following notice in materials otherwise provided* to every individual  
18 who ceases to be enrolled in the program:

19  
20 “Effective January 1, 2014, you may be eligible for reduced-cost,  
21 comprehensive health care coverage through the California Health  
22 Benefit Exchange. If your income is low, you may be eligible for  
23 no-cost coverage through Medi-Cal. For more information, please  
24 visit [www.healthcare.ca.gov](http://www.healthcare.ca.gov) or call 1-888-Healthhelp (insert  
25 telephone number).”

26  
27 (b) Effective July 1, 2013, the board shall ~~provide the following~~  
28 ~~notice~~ *include the following notice in materials otherwise provided*  
29 to every individual who ceases to be enrolled in the program:

30  
31 “Because you are no longer enrolled in the Healthy Families  
32 Program, an application for health care coverage through the  
33 California Health Benefit Exchange will be made for you. Coverage  
34 will not be effective until January 1, 2014. You are not required  
35 to accept coverage from the Exchange. Your payment for coverage  
36 will be based on your income last year. If you make significantly  
37 less or more this year than you made last year, please tell the  
38 California Health Benefit Exchange and your charges will be based  
39 on your current income. If your income is low, you may qualify  
40 for no-cost coverage through Medi-Cal. For more information,

1 check [www.healthcare.ca.gov](http://www.healthcare.ca.gov) or call 1-888-Healthhelp (insert  
2 telephone number).”

3

4 (c) (1) To maximize the number of individual Californians  
5 complying with the requirements of the federal Patient Protection  
6 and Affordable Care Act (Public Law 111-148) by obtaining  
7 coverage consistent with the provisions of federal law, the board  
8 shall seek approval from the United States Department of Health  
9 and Human Services to transfer the minimum information  
10 necessary to initiate an application for enrollment under this section  
11 consistent with Section 100503 of the Government Code.

12 (2) Effective January 1, 2013, for each enrollee who has ceased  
13 to be enrolled, the board shall provide to the Exchange the name,  
14 most recent address, other information that is in the possession of  
15 the program, and any other information that the Exchange may  
16 require, in a manner to be prescribed by the Exchange in order to  
17 determine eligibility and complete enrollment. The information  
18 shall be kept confidential in a manner consistent with subsection  
19 (g) of Section 1411 of the federal Patient Protection and Affordable  
20 Care Act (Public Law 111-148).

21 (3) The information provided to the Exchange shall initiate an  
22 application for enrollment in coverage within the meaning of  
23 Section 100503 of the Government Code.

24 (d) The individual shall have the opportunity to decline health  
25 care coverage pursuant to this section by notifying the Exchange  
26 in writing.

27 SEC. 6. Section 12693.79 is added to the Insurance Code, to  
28 read:

29 12693.79. Effective January 1, 2012, the board shall ~~provide~~  
30 ~~the following notice~~ *include the following notice in materials*  
31 *otherwise provided* to every individual enrolled in the Healthy  
32 Families program:

33

34 “Effective January 1, 2014, if your parents or other family  
35 members do not have health care coverage that costs less than 10%  
36 of your income, your parents or other family members may be  
37 eligible for ~~reduced-cost~~ *reduced-cost*, comprehensive health care  
38 coverage through the California Health Benefit Exchange. If your  
39 income is low, you may be eligible for no-cost coverage through  
40 Medi-Cal. For more information, please visit

1 www.healthcare.ca.gov or call 1-888-Healthhelp (insert telephone  
2 number).”

3  
4 SEC. 7. Section 12698.45 is added to the Insurance Code, to  
5 read:

6 12698.45. (a) Effective January 1, 2012, to June 30, 2013,  
7 inclusive, the board shall ~~provide the following notice~~ *include the*  
8 *following notice in materials otherwise provided* to every individual  
9 who ceases to be enrolled in the program:

10  
11 “Effective January 1, 2014, you may be eligible for reduced-cost,  
12 comprehensive health care coverage through the California Health  
13 Benefit Exchange. If your income is low, you may be eligible for  
14 no-cost coverage through Medi-Cal. For more information, please  
15 visit www.healthcare.ca.gov or call 1-888-Healthhelp (insert  
16 telephone number).”

17  
18 (b) Effective July 1, 2013, the board shall ~~provide the following~~  
19 ~~notice~~ *include the following notice in materials otherwise provided*  
20 to every individual who ceases to be enrolled in the program:

21  
22 “Because you are no longer enrolled in AIM (Access for Infants  
23 and Mothers Program), an application for health care coverage  
24 through the California Health Benefit Exchange will be made for  
25 you. Coverage will not be effective until January 1, 2014. You are  
26 not required to accept coverage from the Exchange. Your payment  
27 for coverage will be based on your income last year. If you make  
28 significantly less or more this year than you made last year, please  
29 tell the California Health Benefit Exchange and your charges will  
30 be based on your current income. If your income is low, you may  
31 qualify for no-cost coverage through Medi-Cal. For more  
32 information, check www.healthcare.ca.gov or call 1-888-Healthhelp  
33 (insert telephone number).”

34  
35 (c) (1) To maximize the number of individual Californians  
36 complying with the requirements of the federal Patient Protection  
37 and Affordable Care Act (Public Law 111-148) by obtaining  
38 coverage consistent with the provisions of federal law, the board  
39 shall seek approval from the United States Department of Health  
40 and Human Services to transfer the minimum information

1 necessary to initiate an application for enrollment under this section  
 2 consistent with Section 100503 of the Government Code.

3 (2) Effective January 1, 2013, for each enrollee who has ceased  
 4 to be enrolled, the board shall provide to the Exchange the name,  
 5 most recent address, other information that is in the possession of  
 6 the program, and any other information that the Exchange may  
 7 require, in a manner to be prescribed by the Exchange in order to  
 8 determine eligibility and complete enrollment. The information  
 9 shall be kept confidential in a manner consistent with subsection  
 10 (g) of Section 1411 of the federal Patient Protection and Affordable  
 11 Care Act (Public Law 111-148).

12 (3) The information provided to the Exchange shall initiate an  
 13 application for enrollment in coverage within the meaning of  
 14 Section 100503 of the Government Code.

15 (d) The individual shall have the opportunity to decline health  
 16 care coverage pursuant to this section by notifying the Exchange  
 17 in writing.

18 SEC. 8. Section 12734 is added to the Insurance Code, to read:

19 12734. (a) Effective January 1, 2012, to June 30, 2013,  
 20 inclusive, the board shall ~~provide the following notice~~ *include the*  
 21 *following notice in materials otherwise provided* to every individual  
 22 who ceases to be enrolled in the program:

23  
 24 “Effective January 1, 2014, you may be eligible for reduced-cost,  
 25 comprehensive health care coverage through the California Health  
 26 Benefit Exchange. If your income is low, you may be eligible for  
 27 no-cost coverage through Medi-Cal. For more information, please  
 28 visit [www.healthcare.ca.gov](http://www.healthcare.ca.gov) or call 1-888-Healthhelp (insert  
 29 telephone number).”  
 30

31 (b) Effective July 1, 2013, the board shall ~~provide the following~~  
 32 ~~notice~~ *include the following notice in materials otherwise provided*  
 33 to every individual who ceases to be enrolled in the program:

34  
 35 “Because you are no longer enrolled in the California Major  
 36 Risk Medical Insurance Program, an application for health care  
 37 coverage through the California Health Benefit Exchange will be  
 38 made for you. Coverage will not be effective until January 1, 2014.  
 39 You are not required to accept coverage from the Exchange. Your  
 40 payment for coverage will be based on your income last year. If

1 you make significantly less or more this year than you made last  
2 year, please tell the California Health Benefit Exchange and your  
3 charges will be based on your current income. If your income is  
4 low, you may qualify for no-cost coverage through Medi-Cal. For  
5 more information, check [www.healthcare.ca.gov](http://www.healthcare.ca.gov) or call  
6 1-888-Healthhelp (insert telephone number).”

7

8 (c) (1) To maximize the number of individual Californians  
9 complying with the requirements of the federal Patient Protection  
10 and Affordable Care Act (Public Law 111-148) by obtaining  
11 coverage consistent with the provisions of federal law, the board  
12 shall seek approval from the United States Department of Health  
13 and Human Services to transfer the minimum information  
14 necessary to initiate an application for enrollment under this section  
15 consistent with Section 100503 of the Government Code.

16 (2) Effective January 1, 2013, for each enrollee who has ceased  
17 to be enrolled, the board shall provide to the Exchange the name,  
18 most recent address, other information that is in the possession of  
19 the program, and any other information that the Exchange may  
20 require, in a manner to be prescribed by the Exchange in order to  
21 determine eligibility and complete enrollment. The information  
22 shall be kept confidential in a manner consistent with subsection  
23 (g) of Section 1411 of the federal Patient Protection and Affordable  
24 Care Act (Public Law 111-148).

25 (3) The information provided to the Exchange shall initiate an  
26 application for enrollment in coverage within the meaning of  
27 Section 100503 of the Government Code.

28 (d) The individual shall have the opportunity to decline health  
29 care coverage pursuant to this section by notifying the Exchange  
30 in writing.

31 SEC. 9. Section 12739.615 is added to the Insurance Code, to  
32 read:

33 12739.615. (a) Effective January 1, 2012, to June 30, 2013,  
34 inclusive, the board shall ~~provide the following notice~~ *include the*  
35 *following notice in materials otherwise provided* to every individual  
36 who ceases to be enrolled in the program:

37

38 “Effective January 1, 2014, you may be eligible for reduced-cost,  
39 comprehensive health care coverage through the California Health  
40 Benefit Exchange. If your income is low, you may be eligible for

1 no-cost coverage through Medi-Cal. For more information, please  
2 visit [www.healthcare.ca.gov](http://www.healthcare.ca.gov) or call 1-888-Healthhelp (insert  
3 telephone number).”

4

5 (b) Effective July 1, 2013, the board shall ~~provide the following~~  
6 ~~notice~~ *include the following notice in materials otherwise provided*  
7 to every individual who ceases to be enrolled in the program:

8

9 “Because you are no longer enrolled in the Federal Temporary  
10 High Risk Pool, an application for health care coverage through  
11 the California Health Benefit Exchange will be made for you.  
12 Coverage will not be effective until January 1, 2014. You are not  
13 required to accept coverage from the Exchange. Your payment for  
14 coverage will be based on your income last year. If you make  
15 significantly less or more this year than you made last year, please  
16 tell the California Health Benefit Exchange and your charges will  
17 be based on your current income. If your income is low, you may  
18 qualify for no-cost coverage through Medi-Cal. For more  
19 information, check [www.healthcare.ca.gov](http://www.healthcare.ca.gov) or call 1-888-Healthhelp  
20 (insert telephone number).”

21

22 (c) (1) To maximize the number of individual Californians  
23 complying with the requirements of the federal Patient Protection  
24 and Affordable Care Act (Public Law 111-148) by obtaining  
25 coverage consistent with the provisions of federal law, the board  
26 shall seek approval from the United States Department of Health  
27 and Human Services to transfer the minimum information  
28 necessary to initiate an application for enrollment under this section  
29 consistent with Section 100503 of the Government Code.

30 (2) Effective January 1, 2013, for each enrollee who has ceased  
31 to be enrolled, the board shall provide to the Exchange the name,  
32 most recent address, other information that is in the possession of  
33 the program, and any other information that the Exchange may  
34 require, in a manner to be prescribed by the Exchange in order to  
35 determine eligibility and complete enrollment. The information  
36 shall be kept confidential in a manner consistent with subsection  
37 (g) of Section 1411 of the federal Patient Protection and Affordable  
38 Care Act (Public Law 111-148).

1 (3) The information provided to the Exchange shall initiate an  
2 application for enrollment in coverage within the meaning of  
3 Section 100503 of the Government Code.

4 (d) The individual shall have the opportunity to decline health  
5 care coverage pursuant to this section by notifying the Exchange  
6 in writing.

7 SEC. 10. Section 14029.9 is added to the Welfare and  
8 Institutions Code, to read:

9 14029.9. (a) Effective January 1, 2012, to June 30, 2013,  
10 inclusive, the department shall ~~provide the following notice~~ *include*  
11 *the following notice in materials otherwise provided* to every  
12 individual who ceases to be enrolled in the Medi-Cal program:  
13

14 “Effective January 1, 2014, you may be eligible for reduced-cost,  
15 comprehensive health care coverage through the California Health  
16 Benefit Exchange. If your income is low, you may be eligible for  
17 no-cost coverage through Medi-Cal. For more information, please  
18 visit [www.healthcare.ca.gov](http://www.healthcare.ca.gov) or call 1-888-Healthhelp (insert  
19 telephone number).”  
20

21 (b) Effective July 1, 2013, the department shall ~~provide the~~  
22 ~~following notice~~ *include the following notice in materials otherwise*  
23 *provided* to every individual who ceases to be enrolled in the  
24 Medi-Cal program:  
25

26 “Because you are no longer enrolled in Medi-Cal, an application  
27 for health care coverage through the California Health Benefit  
28 Exchange will be made for you. Coverage will not be effective  
29 until January 1, 2014. You are not required to accept coverage  
30 from the Exchange. Your payment for coverage will be based on  
31 your income last year. If you make significantly less or more this  
32 year than you made last year, please tell the California Health  
33 Benefit Exchange and your charges will be based on your current  
34 income. If your income is low, you may qualify for no-cost  
35 coverage through Medi-Cal. For more information, check  
36 [www.healthcare.ca.gov](http://www.healthcare.ca.gov) or call 1-888-Healthhelp (insert telephone  
37 number).”  
38

39 (c) (1) To maximize the number of individual Californians  
40 complying with the requirements of the federal Patient Protection

1 and Affordable Care Act (Public Law 111-148) by obtaining  
 2 coverage consistent with the provisions of federal law, the  
 3 department shall seek approval from the United States Department  
 4 of Health and Human Services to transfer the minimum information  
 5 necessary to initiate an application for enrollment under this section  
 6 consistent with Section 100503 of the Government Code.

7 (2) Effective January 1, 2013, for each enrollee who has ceased  
 8 to be enrolled, the department shall provide to the Exchange the  
 9 name, most recent address, other information that is in the  
 10 possession of the program, and any other information that the  
 11 Exchange may require, in a manner to be prescribed by the  
 12 Exchange in order to determine eligibility and complete enrollment.  
 13 The information shall be kept confidential in a manner consistent  
 14 with subsection (g) of Section 1411 of the federal Patient Protection  
 15 and Affordable Care Act (Public Law 111-148).

16 (3) The information provided to the Exchange shall initiate an  
 17 application for enrollment in coverage within the meaning of  
 18 Section 100503 of the Government Code.

19 (d) The individual shall have the opportunity to decline health  
 20 care coverage pursuant to this section by notifying the Exchange  
 21 in writing.

22 SEC. 11. Section 14105.182 is added to the Welfare and  
 23 Institutions Code, to read:

24 14105.182. (a) Effective January 1, 2012, to June 30, 2013,  
 25 inclusive, ~~the department shall provide the following notice~~ *Family*  
 26 *PACT provider shall include the following notice in materials*  
 27 *otherwise provided* to every individual receiving care or services  
 28 under the Family PACT program as provided in subdivision (aa)  
 29 of Section 14132:

30  
 31 “Effective January 1, 2014, you may be eligible for reduced-cost,  
 32 comprehensive health care coverage through the California Health  
 33 Benefit Exchange. If your income is low, you may be eligible for  
 34 no-cost coverage through Medi-Cal. For more information, please  
 35 visit [www.healthcare.ca.gov](http://www.healthcare.ca.gov) or call 1-888-Healthhelp (insert  
 36 telephone number).”

37  
 38 (b) Effective July 1, 2013, the department shall ~~provide the~~  
 39 ~~following notice~~ *include the following notice in materials otherwise*  
 40 *provided* to every individual receiving care or services under the

1 Family PACT program as provided in subdivision (aa) of Section  
2 14132:

3

4 “Because you are enrolled in a public health program, an  
5 application for health care coverage through the California Health  
6 Benefit Exchange will be made for you. Coverage will not be  
7 effective until January 1, 2014. You are not required to accept  
8 coverage from the Exchange. Your payment for coverage will be  
9 based on your income last year. If you make significantly less or  
10 more this year than you made last year, please tell the California  
11 Health Benefit Exchange and your charges will be based on your  
12 current income. If your income is low, you may qualify for no-cost  
13 coverage through Medi-Cal. For more information, check  
14 [www.healthcare.ca.gov](http://www.healthcare.ca.gov) or call 1-888-Healthhelp (insert telephone  
15 number).”

16

17 (c) (1) To maximize the number of individual Californians  
18 complying with the requirements of the federal Patient Protection  
19 and Affordable Care Act (Public Law 111-148) by obtaining  
20 coverage consistent with the provisions of federal law, the  
21 department shall seek approval from the United States Department  
22 of Health and Human Services to transfer the minimum information  
23 necessary to initiate an application for enrollment under this section  
24 consistent with Section 100503 of the Government Code.

25 (2) Effective January 1, 2013, for each enrollee, the department  
26 shall provide to the Exchange the name, most recent address, other  
27 information that is in the possession of the program, and any other  
28 information that the Exchange may require, in a manner to be  
29 prescribed by the Exchange in order to determine eligibility and  
30 complete enrollment. The information shall be kept confidential  
31 in a manner consistent with subsection (g) of Section 1411 of the  
32 federal Patient Protection and Affordable Care Act (Public Law  
33 111-148).

34 (3) The information provided to the Exchange shall initiate an  
35 application for enrollment in coverage within the meaning of  
36 Section 100503 of the Government Code.

- 1 (d) The individual shall have the opportunity to decline health
- 2 care coverage pursuant to this section by notifying the Exchange
- 3 in writing.

O