

# DHCS Roles and Work Process Q and A for ACA Implementation

September 23, 2013

Number	Date	Type	Question	Answer
1	9/23/2013	R&WP	Will we as county eligibility workers be considered "certified enrollment counselors"	No. The Certified Enrollment Counselors cannot determine eligibility. They only assist with the applications. However, county eligibility workers will be required to screen the applicant for all health care programs.
2	9/23/2013	R&WP	So CMSP will still be available next year too? We thought that expanded Medi-Cal would be absorbing the CMSP clients.	Yes County Medically Indigent Programs will still exist. Medi-Cal will be absorb the LIHP clients. Counties will be able to reduce the size of the Medically Indigent populations as they transition to Medi-Cal or APTC/CSR. In addition, APTC/CSR enrollment is only available during annual open enrollment unless there is a circumstance that warrants enrollment. Under this rule, APTC/CSR enrollment won't be available for regular applicants throughout the year so CMSP would be used for these clients.
3	9/23/2013	R&WP	How quickly does information come back from the Federal Hub?	The goal is to have the Hub reply in real time. Counties will be notified if there is a problem with the HUB.
4	9/23/2013	R&WP	Will the c4yourself.com website also work? Are they linked to benefitscal.org	The C4 yourself on-line application will still exist as well as the other consortium on-line portals. Customers may apply using this system and county staff can initiate an application using C 4 Yourself as part of the Eligibility and Enrollment process for Horizontal Integration.
5	9/23/2013	R&WP	If a customer applies after January 1, 2014 how soon will the coverage start?	It depends on the determination. Medi-Cal programs will be effective the first of the application month and potentially the retro months as applicable. There is no Retro MAGI in October to December 2013 because the program starts in January 2014.
6	9/23/2013	R&WP	Does one day eligible all month eligible still apply to APTC/CSR or enrollment in health plans?	Covered California Question
7	9/23/2013	R&WP	Will we still be looking at deprivation come January?	No. However, In January-March 2014 when someone asks for Retro Non-MAGI in October-December 2013 deprivation is still considered.
8	9/23/2013	R&WP	Will the required script for CalHEERS be in the CalHEERS system for reference?	If this question is about the Quick Sort Transfer script it is for MAGI, Non-MAGI and APTC/CSR enrollment. And will not be in a system. Additional scripts are being developed and will be available on the CWDA website.

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9	9/23/2013	R&WP	If the customer is eligible for Non-MAGI MC, can they choose to enroll in APTC/CSR Services?	No. If the person is eligible to any form of Medi-Cal this is considered Minimal Essential Coverage (MEC) therefore they are not eligible to APTC/CSR. The only way the person can be eligible is if he or she declines the Medi-Cal coverage and pays full-price for a Covered CA plan with no government tax credits or subsidies.
10	9/23/2013	R&WP	In Yolo County, our MC/CF staff are separate from CW staff. How will MC/CF staff determine if someone is potentially eligible to CW? Also, since CW staff are not trained in MC here, how will CW staff make MC determinations timely for consumers who are not eligible to CW? This doesn't seem like it will be a horizontal integration if the programs require different forms, verifications, etc. if they will have to be referred to different workers and have separate appointments?	Horizontal Integration creates a referral to the other program. Staff in that program will make the determination. Information and verifications received would not need to be duplicated i.e., SSN, Citizenship, Residency etc.
11	9/23/2013	R&WP	Will retro coverage be possible to get under MAGI come next year? Or will clients only be able to get health coverage from app date forward?	Retro Medi-Cal will continue to exist for Medi-Cal Programs including MAGI. The first month we will look at retro for MAGI will be February 2014 where we will look at January.
12	9/23/2013	R&WP	On flow chart on page 34, Step 5, what are "Qualifiers Exist" refer to?	If they appear eligible. For example they client is not eligible for MAGI and may be ABD or LTC.
13	9/23/2013	R&WP	To determine if you run an applicant through CalHEERS do you have to determine all income and eligibility first? Ex. just given we went directly to CalHEERS for MAGI Medi-Cal and SAWS for CalFresh.	This is determined by the answer to the "now" or "later" question from October through December 2013. If the applicant is requesting benefits later, always start the process in CalHEERS. If the applicant is requesting benefits now, always start the process in SAWS. CalFresh will always be entered in SAWS as CalHEERS is for healthcare programs only.
14	9/23/2013	R&WP	If a customer is on MAGI Medi-Cal and enrolled through CalHEERS system, if she applies for CalFresh at a later date, will information be shared with SAWS?	Not until the systems are fully interfaced. The worker is encouraged to manually check CalHEERS for case information if he or she has system access, in addition to any information reported to MEDS.