STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY

GRAY DAVIS, *Governor*

DEPARTMENT OF HEALTH SERVICES
714/744 P Street
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(916) 657-0710

April 23, 2001

TO: All County Welfare Directors
All County Administrative Officers
All County Medi-Cal Program Specialists/Liaisons
All County Health Executives
All County Mental Health Directors

Letter No.:01-29

COUNTY SELF-CERTIFICATION OF SECTION 1931(B) MEDI-CAL IMPLEMENTATION

Reference: All County Welfare Directors Letters (ACWDL) Nos. 90-06, 98-43, 99-18 and E-Mail #97175

On January 8, 1990, ACWDL 90-06 was sent regarding the stipulated judgement under Edwards vs. Kizer and the process for doing redeterminations when persons are discontinued from AFDC (now known as CalWORKs).

On December 31, 1997, e-mail #97175 was sent requiring counties to flag those cases discontinued from CalWORKs solely due to more restrictive financial requirements resulting from the implementation of welfare reform. Instructions required counties to ensure that these families continue to receive Medi-Cal benefits until Section 1931(b) was operational.

On September 30, 1998, ACWDL 98-43 was sent to all counties with the first instructions and timelines for implementing the new Section 1931(b) program. The letter contained the following information and instructions:

- The procedures to implement Section 1931(b).
- Instructions that cases being held in aid code 38 were to have redetermination forms sent no later than December 1, 1998. Cases not returning packages were to be discontinued under usual Edwards procedures, and case reviews of returned packages were to be completed by April 30, 1999.
- Instructions that all active MN, MI and including Percent Program cases were to have Section 1931(b) eligibility reviews completed by December 31, 1999.

On April 16, 1999, ACWDL 99-18 advised counties that the deadlines specified in ACWDL 98-43 would not be modified.

Thirty months have passed since the first ACWDL (98-43) on Section 1931(b) was issued. The Health Care Financing Administration, in a letter to All State Medicaid Directors dated April 7, 2000, required States to review its policies and standards surrounding implementation of Section 1931(b).

Current data reflects that statewide implementation of the Section 1931(b) program has not yet occurred. DHS is aware that some counties have not taken steps to implement Section 1931(b) while it is also unclear how and when several counties performed Section 1931(b) eligibility determinations.

Due to the need to ensure that all counties have implemented the Section 1931(b) program correctly, the Department of Health Services is requiring each county to complete a self-certification of proper and timely implementation of Section 1931(b).

All counties must address the issues numbered below. The responses must include complete details of what steps were taken or are being taken for Section 1931(b) implementation and the time period for each of those actions. Counties that have not begun or have not fully implemented Section 1931 (b) directives, must submit an implementation plan outlining actions to be taken and a timeline showing anticipated completion.

1. Describe in detail the actions taken to assure the continuation of Medi-Cal benefits for those persons discontinued from CalWORKs after December 31, 1997, due to more restrictive financial requirements that resulted from welfare reform implementation.

2. Counties that continued Medi-Cal benefits for the above described persons prior to Section 1931(b) being operational, describe in detail how the backlog of cases created by this action have been processed for ongoing Medi-Cal eligibility.

3. Provide dates of when the elimination of the backlogged cases began and ended.

4. If there are any cases that remain in backlog, explain the reason.

5. Describe the extent to which county automated systems currently accommodate Section 1931(b). If your automated systems did not or do not yet perform Section 1931(b) functions properly, describe what work-arounds were needed or are now established to ensure proper implementation of Section 1931 (b) procedures.

6. Families discontinued from CalWORKs for reasons not relevant to ongoing Medi-Cal eligibility must first be evaluated for ongoing Section 1931(b) eligibility prior to any other programs. Describe in detail how your county assures that this review is conducted first.

7. Describe how the county identified and corrected eligibility errors that made families ineligible, or that placed families in share of cost aid codes when they should have been made Section 1931(b) eligible.

8. Describe what actions, if any were taken by the county to determine eligibility based upon information available in the case file prior to requiring additional information or the completion of a redetermination packet.

Counties will be required to rectify any case in which a family was denied eligibility or placed in a share of cost aid code without completing a Section 1931(b) review.

THE DEADLINE FOR COUNTIES TO SUBMIT THEIR SELF-CERTIFICATION STATEMENTS WILL BE MAY 1, 2001.

Please submit statements to:

Medi-Cal Eligibility Branch
Department of Health Services
714 P Street, Room 1650
Sacramento, CA. 95814
Attn: County Self-Certification

If you have questions concerning the Section 1931(b) implementation certification requirements, you may contact Ms. Tanya Homman of my staff at (916) 657-1469.

Sincerely,

ORIGINAL SIGNED BY
SHAR SCHROEPFER

Shar Shroepfer, Chief
Medi-Cal Eligibility Branch