State of California—Health and Human Services Agency
Department of Health Care Services

DAVID MAXWELL-JOLLY
Director

ARNOLD SCHWARZENEGGER
Governor

November 8, 2010

TO ALL COUNTY WELFARE DIRECTORS Letter No.: 10-20
ALL COUNTY ADMINISTRATIVE OFFICERS
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS
ALL COUNTY HEALTH EXECUTIVES
ALL COUNTY MENTAL HEALTH DIRECTORS

SUBJECT: CLARIFICATIONS TO ALL COUNTY WELFARE DIRECTORS LETTER (ACWDL) 08-32 NOTICE OF ACTION REQUIREMENTS

The purpose of this letter is to provide counties with clarification on the policies outlined in ACWDL 08-32, Notice of Action (NOA) Requirements. ACWDL 08-32 provided interim policies to eliminate multiple and confusing NOAs and required counties to take any measures possible to stop sending NOAs for every program for which the applicant/beneficiary has been evaluated for and does not qualify, and to instead, send a single NOA informing beneficiaries of the final result of the eligibility determination.

The example case scenarios below provide clarification for applicant/beneficiary situations where a single NOA may not provide adequate notification and an additional NOA(s) must be provided.

Scenario A:
Ineligible for Full-Scope Benefits due to Excess Property, yet Eligible for Limited-Scope Benefits

A pregnant woman is determined to be ineligible for full-scope Medi-Cal as a result of excess property. However, it is determined that she is eligible for limited pregnancy-related benefits provided under the 200 Percent Federal Poverty Level (FPL) Program, which does not have a property test. In this case, the pregnant woman must be notified of both determinations:

1. denial/discontinuance of full-scope benefits due to excess property and
2. approval for the 200 Percent FPL Program.

Scenario B:
Ineligible for Full-Scope Benefits due to Excess Property, yet Eligible for Medicare Savings Program (MSP) Benefits

An individual is determined to be ineligible for full-scope Medi-Cal as a result of excess property; however, it is determined that the individual is eligible for a MSP under different property rules. In this case, the individual must be notified of both determinations:

1. denial/discontinuance of full-scope benefits due to excess property and
2. approval for the MSP.

Scenario C:
Ineligible for all MSPs after Requesting an MSP Eligibility Determination

An individual requests to have eligibility determined for the MSPs, and is determined to be ineligible for all of the MSPs. The individual must be notified of the denial for each separate MSP, as they have separate eligibility requirements and provide different types of benefits. As a result, multiple NOAs may be sent to these individuals. If the individual is approved for one MSP, then only the approval NOA for that MSP need be sent.

Scenario D:
Ineligible for Asset Waiver Program due to Excess Income – Does not Wish to Provide Property Information

A child's application is forwarded from Single Point of Entry (SPE) to determine eligibility for a Medi-Cal Children's FPL Asset Waiver program based on the initial income screen at SPE. The child is determined to be over income for the FPL program by the county. The responsible caretaker does not wish to provide property information and subsequently withdraws the Medi-Cal application.

Since the application was forwarded to the county based on an income screening at SPE, once it is determined the child has excess income, the application should be sent back to the Healthy Families Program (HFP) for an eligibility determination with other documentation as required by ACWDL 08-58, "Documentation Needed When Referring Applications to the Healthy Families Program."

Under this scenario, the final determination being made when evaluating eligibility for all Medi-Cal programs is that the child is ineligible due to the withdrawal of the application; however, the denial NOA must provide additional information to allow the responsible caretaker to provide the NOA to the HFP as proof of the excess income for the Medi-Cal FPL programs. Therefore, the NOA that is sent to the child should reflect the withdrawal of the application and the denial for excess income for the FPL program.

Ideally, the denial NOA should explain:

1. the child is over the allowed income for the FPL programs,
2. the responsible caretaker chose not to provide the property information needed to determine the child's eligibility for other Medi-Cal programs, and
3. the responsible caretaker chose to withdraw the child's application.

Reminders

The Department of Health Care Services (DHCS), with consultation from the NOA Workgroup (comprised of counties, consortia and advocates) is in the process of drafting a Global NOA Policy ACWDL, which will standardize NOA policy and will provide NOA guidelines for all programs or scenarios, including the scenarios outlined in this letter. DHCS has previously instructed counties/consortia that automation changes are not required to implement these interim policies, but will be required when the Global NOA Policy ACWDL is released.

In the meantime, counties and consortia shall follow methods currently available to notify the individuals described in this letter of:

1. the simultaneous approval for limited benefits and the denial/discontinuance of full-scope benefits due to excess property,
2. the denial for each MSP, and
3. the denial for withdrawing the application, because a child is over income for the Medi-Cal FPL programs. For example, a county may simultaneously send one NOA denying full-scope Medi-Cal due to excess property, and another NOA approving limited benefits, or a county may send one combined NOA with all the required information listed.

Counties are reminded that in order to ensure Limited English Proficiency individuals are aware of the translation services they are entitled to, counties must send a multilingual notification with all NOA mailings effective October 1, 2008. The multilingual notification must be included with every NOA sent to all applicants/beneficiaries regardless of the primary language specified on Medi-Cal Eligibility Data System.

If you have any questions regarding this letter, please contact Ms. Alison Brown at (916) 552-9510 or by email at Alison.Brown@dhcs.ca.gov.

Original signed by

René Mollow, MSN, RN, Chief
Medi-Cal Eligibility Division