STATE OF CALIFORNIA — HEALTH AND WELFARE AGENCY

EDMUND G. BROWN JR., *Governor*

DEPARTMENT OF HEALTH SERVICES
714/744 P STREET
SACRAMENTO, CA 95814

June 22, 1979

To: All County Welfare Directors

Letter No. 79-15

MEDI-CAL CARDS -- RETROACTIVE INDICATOR

This is to advise you of a policy change regarding the use of the retroactive eligibility indicator on Medi-Cal cards.

Past policy has been that any card issued, by the Department or the counties, for a month of eligibility prior to the month of issuance, should be coded as retroactive. The policy is changed as follows:

1. Cards issued for retroactive months of eligibility as defined under CAC, Title 22, Section 50710 shall be coded with the retroactive indicator.

2. Cards issued for prior months of eligibility when the eligibility determination or the report of eligibility to the state for card issuance was delayed beyond the month of eligibility shall be coded retroactive. For example, if client applies in April but the eligibility determination is not completed until May, the April card should contain a retroactive indicator; the May card should not.

3. Share of cost cards where certification of eligibility does not occur until after the month of eligibility shall be coded retroactive.

4. Full complement replacement cards for prior months of eligibility for recipients certifying via the MC 110 that they did not receive the card issued in the month of eligibility shall be coded retroactive.

5. Full complement or proof of eligibility (POE) only replacement cards for items 1 and 2, 3 and 4, shall be coded retroactive.

6. "POE ONLY" cards for prior months of eligibility when the original card was issued and received in the month of eligibility shall <u>not</u> be coded retroactive.

Effective June 1979, the Department's CID system is being modified as follows:

1. For Transaction Code 1 or 5, for prior months of eligibility, the card will contain a retroactive indicator. It is assumed that one of the conditions in items 1, 2, or 4 above caused the delayed input of the full complement card issuance request.

2. For Transaction Code 6 or 7, for prior months of eligibility, the cards will be coded retroactive only if the pre/post indicator is coded "1" indicating true retroactive eligibility under Section 50710.

Counties may implement this policy change immediately but no later than August 1, 1979. A Procedures Manual change will be issued shortly. A provider bulletin outlining this change also will be issued shortly. Providers will be reminded that in cases where the client does not provide proof of eligibility at the time of service, the two month billing limitation may be waived by certifying on the claim when the proof of eligibility was received.

Please direct any questions to your Medi-Cal field representative.

Sincerely,

Original signed by

Barbara V. Carr for
Doris Z. Soderberg, Chief
Eligibility Branch

cc: Medi-Cal Liaisons
Medi-Cal Field Representatives

Expiration Date: December 31, 1979