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Director

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



EDMUND G. BROWN JR.
Governor

August 11, 2017

TO: ALL COUNTY WELFARE DIRECTORS Letter No.: 17-29
ALL COUNTY WELFARE ADMINISTRATIVE OFFICERS
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS
ALL COUNTY HEALTH EXECUTIVES
ALL COUNTY MENTAL HEALTH DIRECTORS
ALL COUNTY MEDS LIAISONS

SUBJECT: OVERVIEW OF THE STATE AND COUNTY MEDI-CAL INMATE
ELIGIBILITY PROGRAM AID CODES RESIDING IN THE SPECIAL
SEGMENT IN MEDS

(Title 42 Code of Federal Regulations Sections 435.1009, 435.1010;
Welfare and Institutions Code Sections 14011.10, 14053.7, 14053.8,
14053.9; Penal Code Sections 4011.11, 5072; References: All County
Welfare Directors Letters 11-27, 13-18, 14-26)

The purpose of this letter is to provide counties with an overview of changes to the Medi-Cal Inmate Eligibility Program's (MCIEP) state and county aid codes and changes to processing Medi-Cal applications. Effective July 1, 2016, county and state MCIEP aid codes that previously resided in the primary segment, Primary Medi-Cal Information (INQM) screen, of the Medi-Cal Eligibility Data System (MEDS), were moved to the special segment Special Program 1 Information (INQ1), Special Program 2 Information (INQ2), and Special Program 3 Information (INQ3) screens. Implementation of this change allows for partial month eligibility and fee-for-service claims processing, for services billed to Medi-Cal prior to and during incarceration in the same month.

Functionality in MEDS

Two new program types (INMATE and PAROLE) were added to the existing Program Eligibility Indicator (PGM) data element in MEDS to identify the program(s) in which an inmate has eligibility. The inmate aid codes reside in the INMATE special segment type while the County Compassionate Release Program/County Medical Probation Program and State Medical Parole aid codes reside in the PAROLE special segment type.

This allows for the presence of a full scope non-MCIEP Medi-Cal aid code on the primary segment and an inmate aid code on the INMATE special segment at the same time.

INMATE Aid Codes	PAROLE Aid Codes
State: F1, F2, G1, G2, N5, N6, N9	State: G0, G9 Upcoming aid codes: K2, K3, K4, K5 (Not yet implemented)
County: F3, F4, G3, G4, G5, G6, G7 G8, N7, N8, N0	County: J1, J2, J3, J4, J5, J6, J7, J8, K6, K7, K8, K9

Counties are responsible for processing applications received from inmates residing in county correctional facilities. The Department of Health Care Services (DHCS) processes applications submitted by the California Department of Corrections and Rehabilitation (CDCR)/California Correctional Health Care Services (CCHCS) for state inmates residing in state correctional facilities. Both entities determine eligibility for MCIEP and enter the appropriate INMATE or PAROLE aid codes in the months requested in MEDS. MCIEP coverage is reflected in the MEDS special segment. Any current eligibility on the primary segment in MEDS runs concurrently with the MCIEP eligibility on the special segment.

If an inmate aid code is active, it now takes precedence over any other active aid code in MEDS, including those on the primary segment. The PGM data element in MEDS indicates whether a recipient has current (C), pending (P), future pending (F), and/or historical (H) eligibility status on inmate aid codes.

The screenshot below illustrates the INQ2 screen in MEDS and the eligibility status information in the PAROLE program. The beneficiary has been active on the G0 state Medical Parole aid code since May 1, 2016. This screen also shows historical (H) and eligibility information in the INMATE special segment type located in a separate special segment within the same case.

```

INQ2                ** SPECIAL PROGRAM 2 INFORMATION **                XXX - 02/15/17
                                                                15:35:45
CASE-NAME                DISTRICT MEB                XXXXXXXXXXXX                , XXXXXX
COUNTY-ID 19-G0-XXXXXXXX-X-XX                EW-CODE B304
MEDS-ID XXX-XX-XXXX                SSN-VER A                RV-COMP 06-2016                XXXX XXXXXXXX ST
BIRTHDATE XX-XX-XXXX                DOB-VER C                SEX M                GOV-RSP 1                XXXXXXXXXXXXXXXX                CA XXXXX
CHAINED-ID                LAST-MC/CP-CHG 10-06-16                ADDRESS-FLAG D                RES-COUNTY 19
PRIOR-MEDS-ID                LAST-OTH-CHG 11-23-16                APDP                PICKLE                RECOVERY
WELFARE-PGM 001                DEATH-DT                DEATH-CD                TERM-DT                TERM-REAS
CIN 9XXXXXXXXX 2                HIC-NO                BIC-ISSUE 06-09-15                PAPER-ISSUE
PGM: M                1 (INMATE) H                2 (PAROLE) C H                3                FS                CW
                2017 2016=====
                02-17 PEND JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC
COUNTY 19                19                19 19 19 19 19 19 19 19 19 19
AID-CODE G0                G0                G0 G0 G0 G0 G0 G0 G0 G0
ELIG-STAT 001                001                003 003 002 002 001 001 001 001
SOC-AMT
CERT-DAY
OHC N                N N N N N N N N N N N N N
RESTRICT
MEDICARE
HCPL-NUM
HCPL-STAT
OPTION ___ <F13=VALID OPTIONS> F3=SUMMARY; F7=BACK; F8=FORWARD; ENTER=RETURN
    
```

Initial Eligibility Determination

As part of the changes in MEDS, **In** and **Out** dates were added to the Other Client Eligibility Information (INQE) screen in the INMATE segment type. Note: **In** and **Out** dates **do not apply** to the PAROLE segment type.

The **In** date indicates the first day of inmate eligibility and is verified by the number prior to the slash (# /). The **Out** date signifies the day inmate eligibility coverage ends (last full day of incarceration) and is verified by the number after the slash (_ / #). These specific dates are triggered and displayed based on the transactions used to approve and terminate MCIEP aid codes. This allows claims to be paid for Medi-Cal covered services when both MCIEP and non-MCIEP aid codes appear in MEDS during the same month. As a result, claims for services rendered prior to the **In** date and services rendered after the **Out** date of a particular month can be paid for those non-MCIEP covered services.

The **In** date is entered by the effective date used on EW20 transaction for county MCIEP aid codes and MW20 transaction for state MCIEP aid codes.

MW transactions can only be initiated and completed by DHCS. The **Out** date is entered by the term date on the EW20 or EW40 transactions for county MCIEP aid codes and MW20 or MW40 transactions for state MCIEP aid codes. The correct use of **In** and **Out** dates is important since active MCIEP aid codes now take precedence over

active non-MCIEP aid codes. Following the appropriate transaction, the INQE screen should be viewed to ensure that the **In** and **Out** dates were entered accurately as part of the verification process.

The proper use of **In** and **Out** dates will allow the individual to have appropriate access to care under their non-MCIEP aid codes. When the individual's eligibility shows an **In** date, only the individual's MCIEP aid code can be billed. Once the individual's eligibility status shows an **Out** date, the individual's non-MCIEP aid code can be billed again.

Note: MEDS can only accommodate one **In** and **Out** date per month. To correct an erroneously entered **In** or **Out** date, the county should submit a Remedy Ticket to DHCS for a file fix.

Example 1:

N7 County inmate eligibility approved effective 09/01/16 (EW20)

```
EW20                ** ADD NEW CLIENT ELIGIBILITY **                AXI - 12/05/16

CASE-NAME           DISTRICT           EW-CODE
COUNTY-ID 19 N7 XXXXXXXX X XX MEDS-ID XXXXXXXXXX CIN XXXXXXXXXX
BIRTHDATE xxxxxxxxx SSN-VER     BIRTH-VER NEW-BIRTHDATE
SEX x     ETHNIC     LANGUAGE     TITLE-II-NO
CA-DL/ID-NO        HIC-NO         TITLE-II-NO
NAME:
  LAST XXXXXX      FIRST XXXXXX    INITIAL X     APPL

PHONE ( ) -        COUNTRY-OF-ORIGIN ALIEN-NO
REF/ALIEN-IND      INS-ENTRY-DATE    ALIEN-ELIG
ALIEN-SPONSOR-STATUS EXP-DELIV-DATE
EFF-DATE 090116 ESAC 1    TERM-DATE         TERM-REASON
REDETERM-DATE 0816    SOC-AMOUNT
NEW-OHC n          MEDS-OHC *
APP-DATE           RETRO            ELIG-APPRV-DATE   CARD-REQUEST-REASON
ALIAS/SSA-NAME:   ALIAS-NAME-CODE
  LAST            FIRST           INITIAL           APPL
NEXT-TRANS        SAME-PERSON *    SAME-CASE *
```

Example 2:

In date 09/01/16 is entered on INQE screen (In date is shown before the slash)

```
INQE          ** OTHER CLIENT ELIGIBILITY INFORMATION **          AXI - 12/05/16
                                                    12:43:35
XXXXX          , XXXXXXXX          X          MEDS-CUR-MMY 12-16
MEDS-ID XXX-XX-XXXX SSN-VER A  CIN XXXXXXXXXX X  BIRTHDATE MM-DD-YYYY DOB-VER V

DEATH-DATE          DEATH-CD          DEATH-POSTED
SSI-LAST-RECEIVED  PICKLE-TICKLER          LAST-PICKLE-CHG
EXP-DEL-DATE          CMS-INDICATORS          ELIG-APPROVAL-DATE

SSN-VER-BIRTHDATE MM-DD-1957  LANG: SPOKEN 9 WRITTEN 9  ETHNIC 3
CITIZENSHIP-DOC: TYPE 2Z  NUMBER          SOURCE SS  DATE 11-14-2016
IDENTITY-DOC:      TYPE 2Z  NUMBER          SOURCE SS  DATE 11-14-2016
BIRTHPLACE US:AL:  INS-ENTRY-DATE          COUNTRY-OF-ORIGIN
CITIZEN/ALIEN-IND A  ALIEN-ELIG  ALIEN-SPONSOR-STAT  ALIEN-NO
PGM:  M          1(INMATE) C  H  2          3          FS          CW
          2016===== > 2015
          12-16 PEND  JAN  FEB  MAR  APR  MAY  JUN  JUL  AUG  SEP  OCT  NOV  DEC
ORIG-AID
NEG-ACTN
MULTI-SOC
RES-COUNTY
I/O-DAY          01/
ST/FED-IND
OPTION  __  <F13=VALID OPTIONS> F3=SUMMARY; F7=BACK; F8=FORWARD; ENTER=RETURN
```

Retroactive Eligibility Determination

Given the In date field is generated based on the effective date used in the MEDS transaction, MEDS entry for retroactive eligibility on county EW20 and state MW20 transactions will need to be processed differently. County Eligibility Workers (CEWs) and state MCIEP Analysts will no longer enter information on the retroactive “retro” line. Retroactive eligibility will be captured in the effective date (EFF-DATE) field to ensure that the In date can be entered correctly.

Note: This is for the purposes of processing the correct In date in MEDS only. This does not change any other processing related to retroactive eligibility, such as Redetermination (REDTERM-DATE) data element in MEDS. This also does not change any other processes related to Notices of Action (NOAs), etc.

Example 3:

Inmate is incarcerated in a county jail on 01/02/2016. Application date is 08/03/2016. Retroactive services are requested for 06/2016 and 07/2016. EW20 effective date is 06/01/2016 and annual redetermination date is 07/16.

```
EW20                ** ADD NEW CLIENT ELIGIBILITY **                AXI - 12/05/16

CASE-NAME                DISTRICT                EW-CODE
COUNTY-ID 19 N7 XXXXXXXX X XX  MEDS-ID XXXXXXXXXX    CIN XXXXXXXXXX
BIRTHDATE xxxxxxxx        SSN-VER    BIRTH-VER    NEW-BIRTHDATE
SEX X    ETHNIC            LANGUAGE                TITLE-II-NO
CA-DL/ID-NO                HIC-NO                TITLE-II-NO
NAME :

    LAST XXXXXX          FIRST XXXXXX          INITIAL X    APPL
PHONE (    )    -        COUNTRY-OF-ORIGIN    ALIEN-NO
REF/ALIEN-IND        INS-ENTRY-DATE        ALIEN-ELIG
ALIEN-SPONSOR-STATUS    EXP-DELIV-DATE
EFF-DATE 060116 ESAC 1    TERM-DATE                TERM-REASON
REDETERM-DATE 0716        SOC-AMOUNT

NEW-OHC n    MEDS-OHC *
APP-DATE        RETRO        ELIG-APPRV-DATE        CARD-REQUEST-REASON
ALIAS/SSA-NAME :        ALIAS-NAME-CODE
    LAST                FIRST                INITIAL    APPL
NEXT-TRANS        SAME-PERSON *
```

Eligibility Effective Dates

In certain instances, mid-month effective eligibility is required when the date of application is in the same month the inmate began under the custody/care of the CDCR/CCHCS or a county jail facility. This would also apply to instances during the same month that retroactive benefits are requested.

Since inmate aid codes take precedence over other active aid codes in MEDS, using a mid-month date will allow providers to bill for services received in that month under the non-MCIEP aid code before the Medi-Cal beneficiary's incarceration. For state MCIEP applications, if the inmate was incarcerated in the application month or retroactive month, the inmate's first full day of incarceration must be used as the effective date when processing the MW20 transaction. The information received from the county jail facility and/or hospital, however, may vary depending on the communication process in place. This information may reflect the date of incarceration or the first day of in-patient stay off the grounds of the correctional facility. In this situation, the earlier of the two dates received must be used as the effective date when processing the county EW20 MEDS transaction.

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Example 4:

County Sheriff reported incarceration date of 08/05/2016. Application date is 08/13/2016. No retroactive services requested. EW20 effective date is 08/05/2016 and RV date is 07/2016. Note: Current date is used. This is the date MEDS uses to calculate the next redetermination date.

```
EW20                ** ADD NEW CLIENT ELIGIBILITY **                AXI - 12/05/16

CASE-NAME                DISTRICT                EW-CODE
COUNTY-ID 19 N7 XXXXXXXX X XX  MEDS-ID XXXXXXXXXXXX  CIN XXXXXXXXXXXX
BIRTHDATE XXXXXXXX        SSN-VER    BIRTH-VER  NEW-BIRTHDATE
SEX X    ETHNIC          LANGUAGE    TITLE-II-NO
CA-DL/ID-NO              HIC-NO      TITLE-II-NO
NAME:
  LAST XXXXXX          FIRST XXXXXX          INITIAL X    APPL

PHONE (    )    -                COUNTRY-OF-ORIGIN    ALIEN-NO
REF/ALIEN-IND                INS-ENTRY-DATE        ALIEN-ELIG
ALIEN-SPONSOR-STATUS        EXP-DELIV-DATE        TERM-REASON
EFF-DATE 080516 ESAC 1        TERM-DATE
REDETERM-DATE 0716        SOC-AMOUNT
NEW-OHC n    MEDS-OHC *
APP-DATE        RETRO        ELIG-APPRV-DATE        CARD-REQUEST-REASON
ALIAS/SSA-NAME:                FIRST                ALIAS-NAME-CODE
  LAST                FIRST                INITIAL        APPL
NEXT-TRANS                SAME-PERSON *        SAME-CASE *
```

Example 5:

County Sheriff reported incarceration date of 07/05/2016. Application dated is 08/12/2016. No retroactive requested. EW20 effective date is 08/01/2016 and the annual redetermination date is 07/2016. Note: Current date is used. This is the date that MEDS uses to calculate the next redetermination date.

```
EW20                ** ADD NEW CLIENT ELIGIBILITY **                AXI - 12/05/16

CASE-NAME                DISTRICT                EW-CODE
COUNTY-ID 19 N7 XXXXXXXX XXX  MEDS-ID XXXXXXXXXXXX    CIN XXXXXXXXXXXX
BIRTHDATE XXXXXXXX        SSN-VER    BIRTH-VER    NEW-BIRTHDATE
SEX X    ETHNIC            LANGUAGE                TITLE-II-NO
CA-DL/ID-NO                HIC-NO                TITLE-II-NO
NAME:
  LAST XXXXXXX            FIRST XXXXXXX            INITIAL X    APPL

PHONE (    )    -                COUNTRY-OF-ORIGIN        ALIEN-NO
REF/ALIEN-IND                INS-ENTRY-DATE            ALIEN-ELIG
ALIEN-SPONSOR-STATUS        EXP-DELIV-DATE
EFF-DATE 080116 ESAC 1        TERM-DATE                TERM-REASON
REDETERM-DATE 0716
NEW-OHC n                MEDS-OHC *
APP-DATE                RETRO                ELIG-APPRV-DATE        CARD-REQUEST-REASON
ALIAS/SSA-NAME:                ALIAS-NAME-CODE
  LAST                FIRST                INITIAL    APPL
NEXT-TRANS                SAME-PERSON *                SAME-CASE *
```

Eligibility Termination Dates

Termination dates entered on EW20 / MW20 and EW40 / MW40 transactions have also changed in instances when the inmate has been released from a public institution or correctional facility.

If the inmate is already active on a non-MCIEP Medi-Cal aid code or after an ex parte review has been completed, CEWs must use the inmate's last full day of incarceration as the termination date. This date is the day before the reported release date and it will be recorded in MEDS as the **Out** date on the INQE screen. Using the day before the inmate's release date will allow all applicable services that were, or will be, received in that month, to be claimable under the non-MCIEP aid code after the inmate's release.

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Example 6:

County Inmate was released from county jail on 11/13/16. **Out** date 11/12/16 is entered on INQE screen (**Out** day is shown after the slash)

```
INQE          ** OTHER CLIENT ELIGIBILITY INFORMATION **          AXI - 12/05/16
                                                    12:43:35
XXXXX          , XXXXXXXX          X          MEDS-CUR-MMY 12-16
MEDS-ID XXX-XX-XXXX SSN-VER A  CIN XXXXXXXXXX X  BIRTHDATE MM-DD-YYYY DOB-VER V

DEATH-DATE          DEATH-CD          DEATH-POSTED
SSI-LAST-RECEIVED   PICKLE-TICKLER          LAST-PICKLE-CHG
EXP-DEL-DATE        CMS-INDICATORS          ELIG-APPROVAL-DATE

SSN-VER-BIRTHDATE MM-DD-1957  LANG: SPOKEN 9 WRITTEN 9  ETHNIC 3
CITIZENSHIP-DOC: TYPE 2Z  NUMBER          SOURCE SS  DATE 11-14-2016
IDENTITY-DOC:      TYPE 2Z  NUMBER          SOURCE SS  DATE 11-14-2016
BIRTHPLACE US:AL:  INS-ENTRY-DATE          COUNTRY-OF-ORIGIN
CITIZEN/ALIEN-IND A  ALIEN-ELIG  ALIEN-SPONSOR-STAT  ALIEN-NO
PGM:  M          1(INMATE) C  H  2          3          FS          CW
          2016===== > 2015
          12-16 PEND  JAN  FEB  MAR  APR  MAY  JUN  JUL  AUG  SEP  OCT  NOV  DEC
ORIG-AID
NEG-ACTN
MULTI-SOC
RES-COUNTY
I/O-DAY /12
ST/FED-IND
OPTION ___ <F13=VALID OPTIONS> F3=SUMMARY; F7=BACK; F8=FORWARD; ENTER=RETURN
```

MEDS User Manual Updates

The Quick Reference Guide has been updated to reflect all changes.

New MEDS Alert

MEDS will issue the following Renewal eligibility alert message at Renewal for contradicting eligibility: 'CONFLICTING ELIGIBILITY – CHECK FOR ELIGIBILITY TERMINATION'. For example, in a case where an individual has a PAROLE aid code and an INMATE aid code in the same month and both aid codes are active at Renewal, one of the aid codes does not have a termination date. Alert message number 9574 has been updated in the MEDS manual.

Impact on the Current Suspension of Non-MCIEP Medi-Cal Benefits

Counties are required to suspend, rather than terminate, Medi-Cal benefits for all inmates, regardless of age, who were Medi-Cal beneficiaries at the time they became inmates of a public institution. The suspension process is intended to ensure continuity

of Medi-Cal coverage for individuals upon their release from a California county jail or California state prison, if they are released within a one-year period. (All County Welfare Directors Letters 14-26 and 13-18)

Prior to the implementation of the new INMATE and PAROLE special segment types in the MEDS special segment, an individual enrolled in a non-MCIEP Medi-Cal aid code, who subsequently became incarcerated, was required to have their eligibility suspended through a three-step process. The process involved applying an Other Health Coverage (OHC) I "Institutionalized" code on the MEDS' primary segment INQM screen with the EW32, lifting the suspension with a second EW32, and terminating the county aid code using the EW40. The suspension rules have not changed, but the processing has changed due to the movement of the MCIEP aid codes.

Now that the MCIEP aid codes reside in the special segment, it is no longer necessary for counties to enter a second EW32 transaction to lift the suspension or an EW40 transaction to terminate the individual's aid code.

Upon receiving notification of a Medi-Cal beneficiary's incarceration, the county shall follow the suspension process described below:

- The county shall use the EW32 transaction to enter the OHC I code on the MEDS' primary segment INQM screen to suspend Medi-Cal benefits; a Suspension NOA is required to be sent once the county is notified of the individual's incarceration status. The county shall then confirm the suspension via the MEDS Online POS Inquiry (MOPI) screen and track the suspension for twelve months from the date of incarceration. MOPI will display "Subscriber Medi-Cal has been suspended, contact county welfare agency for more information".

Currently, the OHC I code suspends all active aid codes, including any MCIEP aid codes in the special segment; however, DHCS has made claiming system changes which will override the OHC I code to allow for the adjudication of claims submitted for state and county MCIEP aid codes, if all other requirements are satisfied.

Two new "no benefits" aid codes (SI and CI) are being developed that will replace the OHC I code. DHCS staff will utilize the SI aid code while counties will utilize the CI aid code. Until DHCS implements these new aid codes and provides counties with instructions, counties must follow the above outlined OHC I suspension process.

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If you have any questions, or need additional information, please contact Mr. Angelo Vitale by phone at (916) 327-6705, or by email at MCIEP@dhcs.ca.gov. Billing/claiming inquiries should be directed to the DHCS Safety Net Financing Division/Inmate Claiming Unit at DHCSIMCU@dhcs.ca.gov.

Sincerely,

Original Signed By

Sandra Williams, Chief
Medi-Cal Eligibility Division