

Notice of Action Snippets for the County Medi-Cal Inmate Program

Program	Determination	Type	Language	Comment	Aide Code	Legal Authority
Adult County Inmate Program	Full Scope Approval, Retroactive Approval, and Redetermination	Body	Si <FIRST NAME LAST NAME> ay makakakuha ng Medi-Cal na mga serbisyo simula sa <MONTH DD, YYYY>. Kabilang lamang sa mga serbisyo ang pagkapasok sa ospital at sa mental na kalusugan na mga serbisyo. Si <FIRST NAME LAST NAME> ay dapat makakuha ng mga serbisyonang iyon sa labas ng bilangguan ng county.		F3, G3	Pen. Code §5072, Welf. & Inst. Code § 14053.7
Adult County Inmate Program	Full Scope and Restricted Scope Approval, Retroactive Approval, and Redetermination	Footer	Makakakuha ka ng isang Kard ng Pagkakilanlan para sa Benepisyo (Benefits Identification Card (BIC)) kapag napalabas ka mula sa bilangguan ng county. Upang makuha ang iyong BIC, makipag-ugnay sa iyong manggagawa sa county.	Replace current Benefits Identification Card (BIC) language with language provided. BICs are in MEDS but suppressed; plastic cards will not be mailed out to the individual.	F3, F4, G3, G4, N7, N8	Pen. Code §5072, Welf. & Inst. Code § 14053.7
Adult County Inmate Program	Restricted Scope Approval, Retroactive Approval, and Redetermination	Body	Si <FIRST NAME LAST NAME> ay makakakuha ng Medi-Cal na mga serbisyo simula sa <MONTH DD, YYYY>. Kabilang lamang sa mga serbisyo ang pagkapasok sa ospital dahil sa emerhensiya, pagkaospital dahil sa pangkalusugang mental na emerhensiya at pagkaospital na may kaugnayan sa pagbubuntis na mga serbisyo. Si <FIRST NAME LAST NAME> ay dapat makakuha ng mga serbisyonang iyon sa labas ng bilangguan ng county.		F4, G4	Pen. Code §5072, Welf. & Inst. Code § 14053.7

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Adult County Inmate Program	Restricted Scope Approval, Retroactive Approval, and Redetermination	Body	Si <FIRST NAME LAST NAME> ay makakakuha ng Medi-Cal na mga serbisyo simula sa <MONTH DD, YYYY>. Kabilang lamang sa mga serbisyo ang pagkapasok sa ospital dahil sa emerhensiya, pagkaospital dahil sa pangkalusugang mental na emerhensiya at pagkaospital na may kaugnayan sa pagbubuntis na mga serbisyo. Si <FIRST NAME LAST NAME> ay dapat makakuha ng mga serbisyong iyon sa labas ng bilangguan ng county.		N8	Pen. Code §5072, Welf. & Inst. Code § 14053.7
Juvenile County Ward Program	Full Scope Approval, Retroactive Approval, and Redetermination	Body	Si <FIRST NAME LAST NAME> ay makakakuha ng Medi-Cal na mga serbisyo simula sa <MONTH DD, YYYY>. Kabilang sa mga serbisyo ang lahat ng pagkapasok sa ospital at sa mental na kalusugan na mga serbisyo. Si <FIRST NAME LAST NAME> ay dapat makakuha ng mga serbisyong iyon sa labas ng bilangguan ng county.	Covers services for juveniles under the age of 21	G5, G7	Pen. Code §5072, Welf. & Inst. Code § 14053.7, 14053.8, 14053.9

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Juvenile County Ward Program	Full Scope Approval, Retroactive Approval, and Redetermination	Footer	Makakakuha ka ng isang Kard ng Pagkakilanlan para sa Benepisyo (Benefits Identification Card (BIC)) kapag napalabas ka mula sa bilangguan ng county. Upang makuha ang iyong BIC, makipag-ugnay sa iyong manggagawa sa county.	Replace current BIC language with language provided. BICs are issued in MEDS but suppressed; plastic cards will not be mailed out to the individual.	G5, G7,	Pen. Code §5072, Welf. & Inst. Code § 14053.7, 14053.8, 14053.9
County Compassionate Release/Medical Probation Program	Full Scope Approval, Retroactive Approval, and Redetermination	Body		Use current NOA language for full Scope non-MAGI cases. These individuals are not considered incarcerated and are eligible for full Medi-Cal covered services. *Covers individuals age 65 and over. Individuals are entitled to all Medi-Cal covered long-term care (LTC) services. ** Covers disabled individuals. Individuals are entitled to all Medi-Cal covered LTC services.	J1, J2, *J5, **J7	Gov. Code §§ 26605.6, 26605.7, 26605.8; Pen. Code §5072, Welf. & Inst. Code § 14053.7

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County Compassionate Release/Medical Probation Program	Restricted Scope Approval, Retroactive Approval, and Redetermination	Body		Use current NOA language for restricted scope non-MAGI cases. ***Covers individuals age 65 and over.	J3, J4, ***J6, J8	Gov. Code §§ 26605.6, 26605.7, 26605.8; Pen. Code §5072, Welf. & Inst. Code § 14053.7
County Compassionate Release/Medical Probation Program	Full Scope Approval, Retroactive Approval, and Redetermination	Body		Use current NOA language for full scope MAGI cases. These clients are not considered incarcerated and are eligible for full Medi-Cal covered services.	K6, K8	Gov. Code §§ 26605.6, 26605.7, 26605.8; Pen. Code §5072, Welf. & Inst. Code § 14053.7
County Compassionate Release/Medical Probation Program	Restricted Scope Approval, Retroactive Approval, and Redetermination	Body		Use current NOA language for restricted scope MAGI cases.	K7, K9	Gov. Code §§ 26605.6, 26605.7, 26605.8; Pen. Code §5072, Welf. & Inst. Code § 14053.7
All County Inmate Programs	Full Scope and Restricted Scope Denial, Retroactive Denial, and Discontinuance	Body		Use current NOA language for denial, retroactive denial, and discontinuance.	F3, F4, G3, G4, N7, N8, G5, G7, J1, J2, J3, J4, J5, J6, J7, J8, K6, K7, K8, K9	Pen. Code §5072, Welf. & Inst. Code §§ 14053.7, 14053.8, 14053.9