

DATE: February 29, 2024

TO: ALL COUNTY WELFARE DIRECTORS Letter No.: 24-04
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: CONSOLIDATED POLICY FOR THE MEDI-CAL INMATE ELIGIBILITY PROGRAM, MEDI-CAL BENEFIT SUSPENSION PROCESSES, AND PRE-RELEASE MEDI-CAL APPLICATION PROCESSES FOR INCARCERATED INDIVIDUALS

(Reference: All County Welfare Directors Letters [89-58](#), [94-62](#), [04-14](#), [07-24](#), [08-07](#), [10-26](#), [11-33](#), [14-05](#), [14-41](#), [14-41E](#), [15-32](#), [15-32E](#), [16-12](#), [18-02](#), [18-02E](#), [18-26](#), [18-26E](#), [19-16](#), [19-17](#), [19-17E](#), [19-23](#), [20-10](#), [20-28](#), [21-07](#), [21-12](#), [21-13](#), [22-11](#), [22-12](#), [22-18](#), [22-22](#), [22-33](#), [23-08](#), [23-14](#), [23-15](#), [23-23](#) and Medi-Cal Eligibility Division Information Letters, [I 21-38](#), [I 22-18](#), [I 22-43](#), [I 22-43E](#), [I 22-46](#), [I 22-47](#), [I 23-09](#), [I 23-13](#), [I 23-29](#), [I 23-30](#), [I 23-37](#) and [I 23-43](#)).

PURPOSE

The purpose of this All County Welfare Directors Letter (ACWDL) is to consolidate policy and guidance from existing ACWDLs and Medi-Cal Eligibility Division Information Letters (MEDILs) on the Medi-Cal Incarceration Programs, Medi-Cal Benefit Suspension Processes, and Medi-Cal Pre-Release Application Processes for incarcerated individuals and youth in state and county correctional facilities.

The following ACWDLs and MEDILs pertaining to incarceration will be **obsolete** with the publication of this letter: ACWDLs 07-34, 09-01, 09-16, 10-06, 10-11, 10-22, 11-27, 12-21, 12-22, 12-35, 13-18, 14-24, 14-24E, 14-26, 14-26E, 17-28, 17-29, 17-29E, 17-36, 18-20, 20-08, 21-22, 22-26, 22-27 and MEDILs I 16-19, I 16-23, I 16-23E, I 17-10, I 17-23, I 18-10, I 18-15, I 20-05, I 22-15, I 22-40, I 23-24, and 23-24E. Any new incarcerated related letters will be provided in future ACWDLs or MEDILs.

For the purposes of this policy letter and pursuant to Medicaid regulation Title 42 CFR Section 435.1010, an inmate of a public institution is defined as “a person living in a public institution” and defines a public institution as “an institution that is the responsibility of a governmental unit or over which a governmental unit exercises administrative control.” Throughout this letter, Department of Health Care Services (DHCS) will use the term “incarcerated individual” to refer to adults and youth incarcerated within a public institution. In areas in which policy may differ for adults and

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youth (or eligible juveniles), DHCS will use the terms “incarcerated adults” and “incarcerated youth.”

To assist with navigating this ACWDL, the DHCS provided a table of contents detailing the various policy areas included and the page in which the section begins.

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ACRONYMS

Acronyms	Meaning
AB	Assembly Bill
ACWDL	All County Welfare Directions Letter
AE	Accelerated Enrollment
AR	Authorized Representative
BIC	Benefits Identification Card
CalAIM	California Advancing and Innovating Medi-Cal
CalSAWS	California Statewide Automated Welfare System
CBO	Community-Based Organization
CCF	County Correctional Facility
CCHCS	California Correctional Health Care Services
CCR	California Code of Regulations
CIC	Change in Circumstance
CCRP	County Compassionate Release Program
CCTRP	Custody to Community Transitional Reentry Program
CDCR	California Department of Corrections and Rehabilitation
CEC	Continuous Eligibility for Children
CFR	Code of Federal Regulations
CIN	Client Index Number
CMS	Centers for Medicare and Medicaid Services
CMPP	County Medical Probation Program
CWD	County Welfare Department
CYCF	County Youth Correctional Facilities
DAPO	Division of Adult Parole Operations
DDSD-SP	Disability Determination Services Division-State Programs
DHCS	Department of Health Care Services
DJF	Division of Juvenile Facilities
DRP	Division of Rehabilitative Programs
ESC	Eligibility Status Code

EVS	Eligibility Verification Systems
FC	Foster Care
FFP	Federal Financial Participation
FFS	Fee-For-Service
FFY	Former Foster Youth
GR/CAP	General Relief/Cash Assistance Program for Immigrants
GOV-RSP	Government Response Code (MEDS)
HCP	HealthCare Plan
HIS	Health Insurance System (MEDS)
ICT	Intercounty Transfer
IEVS	Income Eligibility Verification System (MEDS)
INQP	Pending/Denied Applications & Appeals (MEDS)
INQU	Incarceration and Suspension Information (MEDS)
INQV	Date Specific Aid Codes Inquiry (MEDS)
IRS	Internal Revenue Service
IVP	Incarceration Verification Program
Kin-GAP	Kinship Guardianship Assistance Payment
LTC	Long Term Care
MAGI	Modified Adjusted Gross Income
Medi-Cal	California's Medicaid Program
MEDS	Medi-Cal Eligibility Data System
MCIEP	Medi-Cal Inmate Eligibility Program
MCRP	Male Community Reentry Program
Medi-Cal PII	Medi-Cal Personally Identifiable Information
MEDIL	Medi-Cal Eligibility Division Information Letter
MHWS	MEDS Home Web Site
MOE	Month of Eligibility
MOU	Memorandum of Understanding
MPP	State Medical Parole
NOA	Notice of Action

PGM	Program Eligibility Indicator
POAM	Plan of Action and Milestones
POC	Point of Contact
PRCS	Post Release Community Supervision
ROI	Release of Information
SB	Senate Bill
SMD	State Medicaid Director
SSN	Social Security Number
SSA	Social Security Administration
SSApp	Single Streamlined Application
SSI/SSP	Supplemental Security Income/State Supplementary Payment
SUPPORT ACT	Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities
TCMP	Transitional Case Management Program
USC	United States Code
WIC	Welfare & Institutions Code

1. COUNTY AND STATE MEDI-CAL INMATE ELIGIBILITY PROGRAM (MCIEP)

Generally, federal law prohibits the claiming of Medicaid funds for healthcare services provided to incarcerated individuals residing in a correctional facility. However, there is an exception to this federal prohibition when an incarcerated individual receives inpatient medical services at a medical facility located off the grounds of the correctional facility for an expected stay of 24 hours or more, and the incarcerated individual is determined Medicaid eligible under the MCIEP.

MCIEP is a program that operates at both a state and county level as part of California's Medicaid program (Medi-Cal) which allows incarcerated individuals, who are determined eligible for Medi-Cal under the MCIEP, to receive inpatient hospital services such as emergency services, psychiatric care, as well as physician services which are provided outside of a correctional facility as covered Medi-Cal services. This section provides policy and guidance for the county and state MCIEP and outlines the eligibility criteria for the program.

Information related to MCIEP claiming processes can be found on [DHCS' Medi-Cal State Inmate Program and Medi-Cal County Inmate Program website](#).

MCIEP Background

42 Code of Federal Regulations (CFR) 435.1009 "generally prohibits claiming federal Medicaid funds for health care services provided to inmates residing in public institutions, such as state prisons." However, federal Medicaid rules do permit states to claim federal Medicaid funds for inpatient services provided to Medicaid-eligible incarcerated individuals if those services are provided off the grounds of a correctional facility.

Assembly Bill (AB) 1628 (Ramos, Chapter 729, Statutes of 2010) authorized the California Department of Corrections and Rehabilitation (CDCR) and the Department of Health Care Services (DHCS) to develop a process to maximize Federal Financial Participation (FFP) for inpatient hospital services received by state prison inmates in a hospital off the grounds of the correctional facility. In order to be eligible to claim FFP, an incarcerated individual must be eligible for Medi-Cal. MCIEP enables California to claim FFP for the incarcerated individual's inpatient hospital services off the grounds of the correctional facility if the incarcerated individual is eligible for Medi-Cal under the MCIEP, and receives services in a medical institution not under the control of the correctional facility, for services included in the state's Medicaid plan.

California Correctional Health Care Services (CCHCS) is a receivership established in June 2005, by court order as the result of a 2001 class-action lawsuit (*Plata v. Schwarzenegger*) against the State of California, over the quality of medical care in

State's prisons. Pursuant to that receivership, CCHCS is solely responsible for the medical care of incarcerated individuals and reports directly to the court. Mental health care and dental care services for incarcerated individuals, on the other hand, fall under the jurisdiction of CDCR at the correctional facility.

CDCR currently has the authority to apply for Medi-Cal coverage of acute inpatient hospital services provided off the grounds of the correctional facility on behalf of state-incarcerated individuals. DHCS entered into an Interagency Agreement with CCHCS as part of the implementation of MCIEP and began accepting and processing Medi-Cal applications for incarcerated adults, in collaboration with the CCHCS, on April 1, 2011.

AB 396 (Mitchell, Chapter 394, Statutes of 2011) authorized DHCS to develop a process to allow counties and CDCR's Division of Juvenile Facilities (DJF), to receive any available FFP for acute inpatient hospital services for incarcerated juveniles and for inpatient psychiatric services provided to Medi-Cal eligible incarcerated juveniles, who are admitted to a hospital off the grounds of the correctional facility. Under the provisions of AB 396, DHCS took steps to provide Medi-Cal coverage of inpatient services provided off the grounds of the correctional facility to incarcerated youth/juveniles in state and county facilities to the extent the participation requirements of AB 396 were met.

Effective January 1, 2014, AB 720 (Skinner, Chapter 646, Statutes of 2013), gave counties the authority to designate an entity to act on behalf of incarcerated individuals and help them apply for a health insurance affordability program upon release. Notwithstanding any other state law, and only to the extent federal law allows and FFP is available, the designated entity is also authorized to act on behalf of a county incarcerated individual for the purpose of applying for, or determinations of, Medi-Cal eligibility for acute inpatient hospital services authorized by Section 14053.7 of the Welfare and Institutions Code (WIC). Additionally, the statute required the suspension of Medi-Cal benefits (non-MCIEP) for individuals (regardless of age) who are already on Medi-Cal when they become incarcerated.

State and County MCIEP Eligibility Requirements

The MCIEP is a program that operates at both the state and county levels. The state is responsible for the administration of state MCIEP for state incarcerated individuals. The counties are responsible for managing county MCIEP for incarcerated individuals in their county correctional facilities and it is a voluntary program. Counties can participate in the MCIEP by entering into an agreement with DHCS.

The Single Streamlined Application (SSApp) is used to determine eligibility for MCIEP and incarcerated individuals who meet the criteria listed below. DHCS and County Welfare Departments (CWDs) must follow standard Medi-Cal application policies for

MCIEP applicants. The determination of eligibility for incarcerated individuals based on a disability must be completed within 90 days of receipt, while other applications must be processed within 45 days of receipt, in alignment with standard Medi-Cal rules.

To be eligible for MCIEP, an incarcerated individual must meet ALL qualifying criteria:

- Be incarcerated in a California state prison or a California County Correctional Facility (CCF);
- Receive or expect to receive inpatient hospital services off the grounds of the correctional facility for 24 hours or more; and
- Meet Medi-Cal eligibility requirements.

Note: The basis for keeping the incarcerated individual active in the MCIEP is **not** determined by the length of their inpatient stay and follows existing Medi-Cal rules for change in circumstance (CIC) and annual renewal redeterminations. If an incarcerated individual remains otherwise eligible, they can remain in MCIEP for the duration of their incarceration. However, if the designated entity or member voluntarily requests to be discontinued from MCIEP, the CWD or DHCS can discontinue the incarcerated individual from the MCIEP. Upon release, the individual must be redetermined for continued eligibility under other Medi-Cal programs and once the reevaluation is complete, the MCIEP must be terminated to allow claiming under another Medi-Cal program.

MCIEP Income, In-Kind Income, and Jail Accounts

CWDs must count all known income for an incarcerated individual based on current Medi-Cal policy. When a county-designated entity is applying for Medi-Cal on behalf of an incarcerated individual, income will typically include:

- Income in jail accounts deposited within the month of application.
- Income identified during Income Eligibility Verification System (IEVS) verification.
- Income reported on the application.

In-Kind Income

For Non-Modified Adjusted Gross Income (Non-MAGI) cases, the housing, utilities, and food received by an incarcerated individual are considered to be in-kind income, as outlined in [ACWDL 89-58](#).

Jail Accounts

Each correctional facility may handle incarcerated individual's funds differently. In general, incarcerated individuals are not allowed access to cash while inside the correctional facility. Monies deposited into an incarcerated individual's jail account within a month are counted as income in the month received. Examples of income

incarcerated individuals could receive include retirement pensions and any donations received in the month or wages for a job while incarcerated.

State MCIEP Roles and Responsibilities

Medi-Cal applications for State MCIEP are completed and submitted to DHCS by CCHCS on behalf of incarcerated individuals who are identified as needing or having received inpatient services off the grounds of the correctional facility. DHCS is responsible for MCIEP eligibility determinations for the state incarcerated population and apply the same eligibility rules and requirements for eligibility as the general Medi-Cal population. Applicants found eligible for Medi-Cal are given an MCIEP aid code and shown eligible in the Medi-Cal Eligibility Data System (MEDS). Incarcerated applicants found eligible for Medi-Cal under State MCIEP will **not** receive a Benefits Identification Card (BIC). DHCS provides CCHCS with the individual's eligibility information necessary for the administration of the State MCIEP program.

CCHCS Responsibilities for the State MCIEP

- Complete Medi-Cal applications and send them to DHCS.
- Forward all needed verifications.
- Forward medical records if a disability determination packet is needed.
- Receive eligibility information from DHCS regarding an incarcerated individual's Medi-Cal determination.
- Inform DHCS of a CIC if the incarcerated individual is released, deceased, is transferred to another correctional agency jurisdiction (e.g., county jail), or state hospital, approved to be medically paroled.

DHCS Responsibilities for the State MCIEP

- Perform state MCIEP eligibility determinations.
- Perform annual redeterminations per standard Medi-Cal rules.
- Perform CIC redeterminations for MCIEP members who are approved to be Medically Paroled.
- Perform ongoing case maintenance.
- Process and forward disability determination packets to the Disability Determination Services Division-State Programs (DDSD-SP) for a disability determination, if applicable.
- Forward incarcerated individual eligibility information to CCHCS for program administration purposes.
- Refer infants born to Medi-Cal eligible incarcerated pregnant individuals to CWDs for Deemed Eligibility.
- Refer cases of individuals released from prison but still active in MCIEP to CWDs for a CIC redetermination.

- Report incarceration, expected release, and/or actual release dates to CWDs for MCIEP members with a Medi-Cal case in MEDS that requires suspension or activation of benefits.
- Request information or verifications from CCHCS, as appropriate.

CWD Responsibilities for State MCIEP

- Provide DHCS with an updated list of county liaison contacts who will receive referrals from state MCIEP staff for newly released individuals and handle any issues arising from those referrals.
- Record incarceration dates and suspend benefits per the suspension policy for incarcerated individuals referred by MCIEP staff.
- Respond timely to miscellaneous requests from state MCIEP staff, such as lifting verification codes, in order to allow state staff to complete the MCIEP determination.

County MCIEP Roles and Responsibilities

The designated entity completes Medi-Cal applications for county MCIEP on behalf of incarcerated individuals who are identified as needing or having received in-patient services off the grounds of the correctional facility for processing at the county level. This often occurs after Medi-Cal covered inpatient services have been provided. CWDs are responsible for MCIEP eligibility determinations for the county incarcerated population. The county MCIEP determinations include all the same eligibility rules and requirements as the general Medi-Cal population. Applicants found eligible for Medi-Cal under county MCIEP are given a county MCIEP aid code. Incarcerated applicants found eligible for Medi-Cal under county MCIEP will **not** receive a BIC.

CWD Responsibilities for County MCIEP

- Perform county MCIEP eligibility determinations and share the eligibility determination with the CCF in a secure manner.
- Perform annual redeterminations per standard Medi-Cal rules.
- Perform CIC redeterminations for MCIEP recipients who are authorized under County Compassionate Release and County Medical Probation.
- Perform ongoing case maintenance.
- Complete CIC redetermination for MCIEP members released to their county from a correctional facility that do not already have ongoing Medi-Cal coverage.
 - If the MCIEP member intends to reside in a different county after release, the county will send a referral to the county where the MCIEP member intends to reside. This is only for individuals who do not have primary Medi-Cal established for ongoing eligibility.

- For those with suspended benefits who will be residing in a new county, initiate an Intercounty Transfer (ICT) to establish primary Medi-Cal benefits in the new county. ACWDLs [18-02](#) and [18-02E](#).

County Correctional Facility or Designated Entity Responsibilities for County MCIEP

- Forward completed Medi-Cal applications and documentation to CWDs.
- Forward medical records if a disability determination packet is needed.
- Receive eligibility information from the CWD regarding an incarcerated individual's county MCIEP determination.
- Inform the CWD when the incarcerated individual is incarcerated, released, paroled, or transferred to another correctional agency jurisdiction (e.g., another county or state prison).

2. STATE AND COUNTY MCIEP AID CODES AND ELIGIBILITY IN MEDS

MCIEP Aid Codes

The list of aid codes for State and County MCIEP including State Medical Parole (MPP), and County Compassionate Release Program (CCRP)/ County Medical Probation Program (CMPP) can be accessed via the [Medi-Cal Incarceration Policy Resources](#) page.

MCIEP Eligibility in Secondary Segments

Eligibility for MCIEP is displayed in the Secondary Special Segments in either the INMATE or the PAROLE special program screens (INQ1-INQ3) in MEDS. State and County MCIEP aid codes for inpatient care off the grounds of the correctional facility reside in the INMATE special segment and are date specific. State and County MCIEP aid codes for MPP, CCRP and CMPP reside in the PAROLE special segment and are full-month eligibility aid codes. Any current eligibility on the primary segment in MEDS runs concurrently with the MCIEP eligibility on the special segment (INMATE or PAROLE) and are not impacted by any other aid codes that co-exist. This allows for the presence of a full-scope non-MCIEP Medi-Cal aid code on the primary segment and a MCIEP aid code on the INMATE/PAROLE special segment to exist at the same time.

If an active State or County MCIEP inmate aid code exists, it will take precedence over any other active aid code in MEDS, including those on the primary segment, for the purpose of Medi-Cal billing and claiming. The Program Eligibility Indicator (PGM) (identifies the program(s) in which a member can have eligibility) data element in MEDS indicates whether a recipient has current (C), pending (P), future pending (F), and/or historical (H) eligibility status on State and County MCIEP aid codes. The INMATE segment allows for retro termination (date specific). The MCIEP aid codes in the PAROLE segment do not allow for date specific termination and requires a 10-day notice.

MCIEP Eligibility Effective Dates

The effective date for MCIEP eligibility, including instances where retroactive benefits are requested, cannot be prior to the date of incarceration. In certain instances, mid-month effective eligibility is required when the date of application is in the same month as the date of incarceration within the state or county correctional facility. This would also apply when the incarceration date falls within a month where retroactive benefits are requested.

Since State and County MCIEP aid codes take precedence over other active aid codes in MEDS, using a mid-month date allows providers to bill for services received in that month under the non-MCIEP aid code that occurred before the Medi-Cal member's incarceration. For MCIEP enrollment, if the incarcerated individual was incarcerated in the application month or retroactive month, the incarcerated individual's first full day of incarceration must be used as the effective date when processing the EW20/MW20 transaction. The information received from the correctional facility and/or hospital, 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 (2) dates received must be used as the effective date when processing the EW20/MW20 MEDS transaction.

Example 1: An application for MCIEP dated 12/14/2023 and the individual's incarceration date was 12/02/2023. If determined eligible, the MCIEP aid code effective date would be 12/02/2023.

Example 2: An application for MCIEP dated 12/14/2023, the individual's incarceration date was 12/02/2023, and retroactive eligibility for 11/2023 was requested. If determined eligible, the MCIEP aid code effective date would be 12/02/2023 and the request for retro in 11/2023 must be denied because the individual was not incarcerated, which is a criteria to qualify for MCIEP.

Example 3: An application for MCIEP dated 12/14/2023, the individual's incarceration date was 10/14/2023, and two (2) months of retroactive benefits for 10/2023 and 11/2023. If determined eligible, the MCIEP aid code effective date would be 10/14/2023.

Example 4: An application for MCIEP dated 12/14/2023, the individual's incarceration date was 10/14/2023, and they did not request retroactive benefits. If determined eligible, the MCIEP aid code effective date would be 12/01/2023 because the inpatient stay off the grounds of the facility occurred in the month of 12/2023 and the date of incarceration was not within the same month.

MCIEP Eligibility Termination Dates

MCIEP follows existing Medi-Cal eligibility rules and requirements and so as with any Medi-Cal member, the individual shall remain on MCIEP as long as they are otherwise eligible. The termination date of their MCIEP benefits is also date specific and must be the last full day of incarceration.

Additionally, MCIEP benefits shall end for any of these reasons:

- At the end of the month , the designated entity or member voluntarily requests to be discontinued from MCIEP if they remain incarcerated at the time of the request;
- At the end of the month of their annual redetermination due month or CIC, redetermination if the incarcerated individual becomes ineligible for MCIEP because they do not meet the eligibility or redetermination requirements; or
- Death of the MCIEP member.

INQV- Date Specific Aid Codes Inquiry Screen

Partial month eligibility for MCIEP is viewable by users on the Date Specific Aid Codes Inquiry (INQV) screen in MEDS. The INQV identifies which date-specific (partial month) aid codes are issued. Start and/or Term Date(s) are only included if the eligibility is for less than a full month. Full months of eligibility are **not** displayed on this screen and can be found in the appropriate INMATE special segment display screens INQ1, INQ2, or INQ3. Detailed screen information is provided in the MEDS Manual on the MEDS Home Web Site (MHWS).

Example: MCEIP eligibility is effective on 9/01/2023. MEDS will not display this aid code and effective dates on the INQV screen because this member's MCIEP eligibility was approved for the full month. The INQV screen displays partial month eligibility only.

COUNTY MCIEP APPLICANTS RECEIVING SOCIAL SECURITY INCOME

Effective January 1, 2024, CWDs are **not** required to complete the *County Transmittal for MCIEP Applicants Receiving SSI* (MC 195). The Social Security Administration (SSA) has their own policies and processes in place in which they receive information of members incarceration status from various sources and takes the appropriate action based on the information they receive.

3. CHANGE IN CIRCUMSTANCES: RELEASE FROM INCARCERATION AND TRANSFERS FOR MCIEP MEMBERS

Change in Circumstance (CIC) - Formerly called a SB87 Redetermination Requirement

MCIEP members without other applicable Medi-Cal eligibility do not need to re-apply for Medi-Cal benefits when transferred to another correctional facility or released from incarceration. The county, in which the MCIEP member will reside upon release or the transferring county, is responsible for completing a CIC redetermination as outlined in ACWDL 22-33 so that they can be re-evaluated for eligibility for other Medi-Cal (non-MCIEP) programs.

A CIC redetermination must be completed by the county before the MCIEP aid code is terminated. A new application is **not** required and the CWD should evaluate the member for eligibility for all Medi-Cal programs using the ex parte review process and contact the member only for any additional information required to complete a redetermination.

The redetermination review will result in either outcome:

- An approval determination in the county where the Medi-Cal member will reside upon release; or
- A denial determination which will be reflected on the Pending/Denied Applications & Appeals (INQP) screen in MEDS.

County MCIEP Referrals Due to Release or Transfer to a Different County

The county where the MCIEP member intends to reside is responsible for processing the CIC redetermination for Medi-Cal benefits upon the individual's release. If the county of residence is different than the county in which they are incarcerated, both CWDs shall be in communication to ensure proper processing and handling of the MCIEP case and CIC redetermination. See section titled *Incarcerated or Released in a Different State or County* for additional detail.

In circumstances where a MCIEP member in one county is transferred to another CCF in a different county or is transferred between CCF and a state prison, the county in which the MCIEP member is transferred to, will complete a CIC redetermination, and if otherwise eligible, will place the Medi-Cal benefits under suspension during their incarceration. The last day of incarceration in the CCF is reported as the release date. For more information see the *Medi-Cal Suspension Policy and Processes* section of this ACWDL.

State MCIEP Referrals Due to Release or Transfer to a CCF

Once DHCS has confirmed the state MCIEP member, who is not currently enrolled in a Medi-Cal (non-MCIEP) aid code, has been released from incarceration or has transferred from CDCR to a CCF, DHCS will notify the CWD of the individual's release/transfer in order for the CWD to complete a CIC redetermination for Medi-Cal benefits. For MCIEP members transferring to a CCF, the CWD will place the Medi-Cal benefits, if otherwise eligible, under suspension during their incarceration. This notification will be done via the Medi-Cal Inmate Eligibility Program DHCS-County Transmittal Form (accessible via the [Medi-Cal Incarceration Policy Resources](#) page), along with supporting documents.

CWDs are to follow the due-process procedures in Welfare and Institutions Code (WIC) 14005.37 upon receiving these referrals for the Medi-Cal eligibility determination. Given the nature of these referrals, the CWD may not receive enough information to complete the ex parte portion of the CIC redetermination. For example, if there is no record found either in MEDS or CalSAWS, or there is only an old record without current information for the CWD to use. In these types of situations, the CWD must do their due diligence to try and contact the individual. However, if they are unsuccessful, then the CIC redetermination is considered complete, and the CWD should document its efforts in the case file to indicate that a review was completed and that there is no valid/current contact information, following processes outlined in [ACWDL 22-33](#). DHCS staff will then discontinue the MCIEP aid code.

Activation of Suspended Medi-Cal (non-MCIEP) Benefits Required

MCIEP aid codes reside in the special segments (INMATE or PAROLE) and can run concurrently with suspended Medi-Cal (non-MCIEP). MCIEP members with active or suspended Medi-Cal do not need to re-apply for Medi-Cal benefits when released from incarceration. DHCS will notify the CWD of the release date for State MCIEP individuals being released.

CWDs must accept a verbal or written statement from the member, Authorized Representative (AR), state agency, county behavioral health plan, managed care plan or from the correctional agency regarding incarceration or release dates. If the newly released individual comes into the CWD office, calls the office, writes to the CWD, or has official documentation, the incarceration/release date they report can be considered an attestation by the individual. CWDs must follow processes which can be found in the *Activation of Benefits Upon Release from Incarceration of the Medi-Cal Suspension Policy and Processes* section of this letter.

Note: If the individual being released has active or suspended Medi-Cal in a different county, as a courtesy, the CWD shall send a notification to the CWD of responsibility. This will allow the responsible CWD to review the individual's case record and the

reported information, and process the Medi-Cal case (non-MCIEP) according to the suspension process.

4. CHANGE IN CIRCUMSTANCES (CIC): INFANTS BORN TO INCARCERATED INDIVIDUALS ON MCIEP

When a pregnant person is eligible for and receiving Medi-Cal at the time of the infant's birth, the infant is automatically deemed eligible for Medi-Cal without the need for a separate Medi-Cal application until age one (1), as long as the infant resides in California.

There will be circumstances when a pregnant person may not be Medi-Cal eligible under the MCIEP for inpatient hospital services (24 hours or more). In these circumstances, the infant does not qualify under Deemed Eligibility.

County MCIEP Enrolled in a Different County from the Deemed Eligible Infant

In the event the infant has a case open in a different county than the MCIEP member, as a courtesy, the CWD shall send a notification to the CWD of responsibility for the infant's case. This will allow the responsible CWD to review the record and the reported information, and proceed accordingly for the infant case. Refer to [ACWDL 11-33](#) and [MEDIL I 22-18](#)

State MCIEP Referrals Due to Deemed Eligible Infants

DHCS will notify the CWD of the infant's birth to a state MCIEP member through the Medi-Cal Inmate Eligibility Program DHCS-County Transmittal Form (accessible via the [Medi-Cal Incarceration Policy Resources](#) page). The county of responsibility for establishing benefits will be the county where the infant resides, unless the infant is under foster care placement or pending the adoption process. The CWD shall follow the current process for deemed infant, foster care, and/or adoption eligibility.

5. COUNTY MCIEP BILLING AND NOTICING

Summary of Billing and County Responsibility

Under the County MCIEP, the county of incarceration is responsible for reimbursing DHCS for the non-federal share incurred by the state for Fee-For-Service (FFS) medical services provided to MCIEP eligible county incarcerated individuals and administrative costs.

The county code data element in MEDS is used to identify and determine the county responsible for payment of the non-federal share and will function as an indicator of the responsible county for billing purposes. Therefore, the county where the individual is

incarcerated is responsible for completing the eligibility determination of the MCIEP enrollment and ensuring that the county address of incarceration is listed as the residence in MEDS to ensure proper billing of County MCIEP claims to the correct county. It is imperative that the appropriate CWD completes and maintains the eligibility for the incarcerated individual to prevent another county from being billed incorrectly for the non-federal share incurred by the medical services provided to the MCIEP eligible county incarcerated individual.

There are circumstances in which an incarcerated individual in one county is transferred to another CCF in a different county within the same month or an incarcerated individual is transferred between CCF and a state prison in the same month. However, MEDS only allows one county of responsibility per month for an aid code in the INMATE special segment and only allows either a State or County MCIEP aid code in the same month.

When an individual requires MCIEP coverage in more than one county in the same month or requires state and county MCIEP coverage during the same month, CWDs should email MCIEP@dhcs.ca.gov for DHCS to review circumstances and provide appropriate guidance.

Courtesy Application Process for MCIEP

In circumstances where the CWD receiving the application for MCIEP is not the incarcerated individual's county of incarceration, the Courtesy Application Process should be followed. Pursuant to Medi-Cal Eligibility Procedures Manual Letter No. 156 (dated January 23, 1996), the CWD shall forward the Single Streamlined Application (SSApp) for MCIEP enrollment, and all information collected within 15 days from the date of application to the county of responsibility for follow-up and initial eligibility determination.

CWDs are given the following guidelines on handling applications for MCIEP enrollment for Medi-Cal members who reside in one county (county of residency) but are incarcerated in another county (county of incarceration) and, subsequently, require inpatient hospital services off the grounds of the correctional facility.

- Example 1: CWD A receives an application from CWD B for a Medi-Cal member who is incarcerated in CWD, but MEDS shows their Medi-Cal benefits in CWD.
- CWD A should return the application to CWD B for the MCIEP eligibility determination and maintenance of the case. Note: CWD A shall follow the suspension process of the Medi-Cal benefits in their county, if applicable.

Example 2: CWD A receives an application from the correctional facility in CWD B for an incarcerated individual in CWD B who received inpatient services off the grounds of the correctional facility in CWD A.

- CWD A should return the application to CWD B, as CWD B is the county responsible for processing the application for MCIEP determination and maintenance of the case.

Example 3: An individual with a short stay of incarceration in CWD A receives inpatient services off the grounds of the CWD A facility. As part of the pre-release process, the incarcerated individual reports they are planning on residing in CWD B upon release.

- CWD A is responsible for processing the application for MCIEP enrollment and determination. CWD A and CWD B shall be in communication for the handling and processing of the MCIEP member's Medi-Cal upon release.

County MCIEP NOA Snippets

The Notice of Action (NOA) snippets for the County MCIEP in English and in threshold languages are available on DHCS' website: [County Inmate NOA Snippets](#). DHCS is collaborating internally with the California Statewide Automated Welfare System (CalSAWS) partners to determine the feasibility and timeline for automating some of these processes, including MCIEP NOA(s), within CalSAWS.

6. STATE MEDICAL PAROLE PROGRAM (MPP)

State Medical Parole Program Background

Senate Bill (SB) 1399 (Chapter 405, Statutes of 2010) authorizes CDCR, with the agreement of the head physician of their current institution and the Board of Parole Hearings, to identify State incarcerated individuals that can be granted medical parole if they meet certain criteria as follows:

- Being deemed permanently medically incapacitated with a medical condition that renders them unable to perform activities of basic daily living and requiring 24-hour care, and
- the inmate would not reasonably pose a threat to public safety.

Individuals who are medically paroled are usually placed in a Long-Term Care (LTC) facility off the correctional facility grounds. For Medi-Cal eligibility purposes, a state incarcerated individual granted medical parole under the MCIEP for State Medical Parole Program may be eligible for Medi-Cal benefits. Since incarcerated individuals, granted medical parole, are not officially released, or paroled from state prison, the individual's medical parole may end in any of the following situations:

- If the incarcerated individual's medical condition changes or improves; or

- If the incarcerated individual is discharged from a LTC facility and returns to state prison to serve the remainder of their sentence; or
- If the incarcerated individual is officially granted standard parole or released from state prison.

State Medical Parole Roles and Responsibilities

The CCHCS fills out an application for eligibility under the MPP, on behalf of the incarcerated individual, when they are approved or are pending approval to be Medically Paroled. If the individual is an existing state MCIEP member, a new application is **not** required. CCHCS will inform DHCS of the CIC and DHCS will perform a redetermination. DHCS shall follow Medi-Cal rules for the processing of the application or CIC redetermination. A disability determination packet is forwarded to Disability Determination Services Division-State Programs (DDSD-SP) for a disability determination, if applicable. When the eligibility determination is completed, DHCS sends a NOA to CCHCS.

7. COUNTY COMPASSIONATE RELEASE PROGRAM (CCRP) AND COUNTY MEDICAL PROBATION PROGRAM (CMPP)

The CCRP/CMPP is part of the MCIEP that allows the county sheriff to grant compassionate release or medical probation, in lieu of jail time, if certain conditions are met.

CCRP/CMPP Background

SB 1462 (Leno, Chapter 837, Statutes of 2012) gives the county sheriff, or their designee the option to grant medical probation for qualifying county inmates, similar to medical parole for state incarcerated individuals. The county sheriff is authorized to:

- Compassionately release certain incarcerated individuals from a CCF, based upon a medical condition causing the incarcerated individual's life expectancy to be less than six months (see AB 960) or
- Request that a court grant medical probation, or resentencing in lieu of jail time, for individuals that have been rendered medically incapacitated by their medical condition and unable to care for themselves, requiring 24-hour care.

AB 82 (Chapter 23, Statutes of 2013), amended the notification requirements in Government Code Sections 26605.6 (compassionate release) and 26605.7 (medical probation). An authorized individual, as designated by the county or county sheriff, will agree to notify DHCS when participating in the programs. Section 26605.7 was also amended to require that the chief probation officer notify DHCS in writing when a Medi-Cal eligible probationer's term of medical probation ends.

AB 960 (Ting, Chapter 744, Statutes of 2013), added Penal Code § 1172.2 amended Penal Code Sections 1170 and 1170.02 to raise the life expectancy from six (6) months to 1 year for CCRP in which the sheriff, in consultation with a physician, determines that the incarcerated individual in CCRP has a life expectancy of 12 months or less.

Federal Financial Participation (FFP) for CCRP/CMPP

Under the provisions of SB 1462 and AB 82, counties are responsible for paying the non-federal share of Medi-Cal costs for county-incarcerated individuals granted compassionate release or medical probation. Title XIX FFP is available for those who are “newly eligible” in the adult group (Section 1905(y) of the Social Security Act) and were assigned to aid codes K6 and K7. From 2014 through 2016, the FFP for aid codes K6 and K7 was 100 percent. This amount decreased to 95 percent in 2017, 94 percent in 2018, 93 percent in 2019, and 90 percent FFP in 2020 and thereafter.

Title XIX FFP for the “not newly” eligible adults remain at 50 percent and is assigned to aid codes K8 and K9. These individuals are identified as adults 19 through 64 years of age who are blind or disabled, not entitled to or enrolled in Medicare Parts A or B, and with a Federal Poverty Limit at or below 128 percent.

CCRP/CMPP Roles and Responsibilities and Eligibility Requirements

County sheriffs are authorized to release an incarcerated individual from a CCF on the CCRP if:

- The sheriff, in consultation with a physician, determines that the incarcerated individual has a life expectancy of 12 months or less.
- The sheriff determines the incarcerated individual would not reasonably pose a threat to public safety.
- The sheriff notifies the presiding judge of the superior court of his or her intention to release the incarcerated individual.
- A placement option for the incarcerated individual is secured, and a CWD or other applicable county agency examines the incarcerated individual’s eligibility for Medi-Cal or other medical coverage.

County sheriffs are authorized to release an incarcerated individual under the CMPP if:

- An incarcerated individual is physically incapacitated with a medical condition that renders the incarcerated individual permanently unable to perform activities of basic daily living, requiring 24-hour care, and if that incapacitation did not exist at the time of sentencing.
- An incarcerated individual would require acute, long-term, inpatient rehabilitation services.

- A placement option for the incarcerated individual is secured, and applicable CWD determines the incarcerated individual's eligibility for Medi-Cal or other medical coverage.

If at any time the court determines, based on a medical examination, that the probationer's medical condition has improved to the extent that the probationer no longer qualifies for medical probation, the court may return the probationer to the custody of the sheriff.

County correctional/jail staff must continue to inform the CWD when an incarcerated individual's situation has changed so that the CWD may update Medi-Cal eligibility accordingly. Communication between affected county entities is recommended for accurate claiming and DHCS billing for the non-federal share.

AB 82 Notification Requirements for CCRP/CMPP

For AB 82 notification requirements, "changes in status" means changes in *eligibility* status for incarcerated individuals granted compassionate release or medical probation under county MCIEP. Changes in status include:

- An incarcerated individual applies for Medi-Cal under MCIEP after being granted compassionate release or medical probation;
- An MCIEP incarcerated individual, granted compassionate release or medical probation, is returned to the custody of the sheriff; or
- The medical probation term has ended as determined by the chief probation officer.

If a compassionately released individual or a medical probationer is returned to custody, the financial responsibility shifts back to the county jail to cover the costs of housing and medical treatment for the incarcerated individual. Since DHCS is required to monitor the shift in financial responsibility, the CWD, county sheriff, or chief probation officer shall do the following:

- The CWD (compassionate release) or the county sheriff (medical probation) shall send a letter to DHCS agreeing to provide the below-described notices, as applicable.
- The CWD shall notify DHCS, in writing, when an incarcerated individual is released to the compassionate release program and has applied for Medi-Cal.
- The CWD shall notify DHCS in writing when a Medi-Cal member is, compassionate released, incarcerated individual has been returned to the custody of the county sheriff.
- The county sheriff shall notify DHCS in writing when an incarcerated individual is released to the medical probation program and has applied for Medi-Cal.

- The county sheriff shall notify DHCS, in writing, when a Medi-Cal member medical probationer has been returned to the custody of the county sheriff.
- The chief probation officer shall notify DHCS, in writing, when a Medi-Cal eligible probationer's term of medical probation ends.

Process for Notifying DHCS with the use of MC 196

To ensure timely reporting of the written notice requirements under Sections 26605.6 and 26605.7 of the Government Code, the following summarizes the process for reporting a compassionately released individual's or medical probationer's change of status within 30 days of the change. CWDs are to use the MC 196, "Transmittal Form for Notifying DHCS of MCIEP Changes in Status for County Medical Probation or Compassionate Release Inmates," to provide the statutorily required notices to DHCS. The MC 196 is located at the DHCS website and can be found here:

<https://www.dhcs.ca.gov/formsandpubs/forms/Pages/default.aspx>

The county sheriff may establish a designee (i.e., a sheriff's designee) to complete and submit the MC 196 Transmittal Form for Notifying DHCS of MCIEP Changes in Status for County Medical Probation or Compassionate Release Inmates on their behalf, such as correctional/jail facility staff, a county liaison or a CWD. The name and title of the authorized person completing the form must be provided on the transmittal form.

The MC 196 should be submitted via encrypted email to DHCS at MCIEP@dhcs.ca.gov, and the subject line of the email should include "MCIEP Change of Status Transmittal." If the county/sheriff is unable to send an encrypted email, the completed form may be faxed to MCIEP via secure fax at (916) 440-5651.

MPP/CCRP/CMPP Eligibility Effective and Termination Dates

Full-month Medi-Cal eligibility is granted for MPP/CCRP/CMPP in the PAROLE segment and is **not** date specific, except with respect to a date of death. When new applications are received for MPP, CCRP, or CMPP, the eligibility effective date shall be the first day of the month of the application. The termination for eligible MPP/CCRP/CMPP must be effective at the end of the month and proper noticing rules must be followed. Their MCIEP benefits must be discontinued at the end of the month, for any of these reasons:

- The designated entity or member voluntarily requests to be discontinued;
- At annual redetermination or CIC, they do not meet the eligibility or redetermination requirements; or
- Death of the MCIEP member.

The MCIEP aid codes in the INMATE segment can run concurrently with the MCIEP aid codes in the PAROLE segment in the month in which there is a CIC whereby the MCIEP member is authorized for MPP/CCRP/CMPP or they recover and return to the

correctional facility. When both aid codes are present in the same month, the INMATE segment takes precedence over the aid code that resides in the PAROLE segment, as it is important to ensure there is no lapse in coverage.

Example 1: The CMPP member (PAROLE segment) recovers and is returned to the CCF on 10/07/2023 and a CIC is completed and determined eligible for county MCIEP (INMATE segment). The CMPP aid code is terminated effective the last day of the month in which they return to the facility (10/31/2023). The county MCIEP aid code (INMATE segment) is effective the first full day back in the correctional facility (10/08/2023).

Example 2: The County MCIEP member (INMATE segment) is authorized for CCRP/CMPP on 10/15/2023 and a CIC is completed and determined eligible for CCRP/CMPP (PAROLE segment). The effective date of the CCRP/CMPP aid code (PAROLE segment) is the first day of the month in which the member was transferred (10/01/2023). The termination date of the County MCIEP aid code (INMATE segment) is effective the last full day in the correctional facility (10/14/2023).

If the county has any issues with the termination of the CCRP/CMPP, the CWD should submit a Remedy Ticket indicating they cannot update the MEDS record.

8. CRAIG V. BONTÁ REQUIREMENTS AND REEVALUATION PROCESS FOR SUPPLEMENTAL SECURITY INCOME/STATE SUPPLEMENTARY PAYMENT BASED MEDI-CAL RECIPIENTS WHO BECOME INCARCERATED

The Social Security Administration determines eligibility for the Supplemental Security Income/State Supplementary Payment (SSI/SSP) program. SSI is a federal program that provides income support to eligible individuals who are aged (65 or older), blind, or disabled. The SSP Program is a state program, which augments SSI. If an eligible individual qualifies for SSI, they qualify for SSP in California. If the individual is eligible for SSI/SSP, they automatically receive Medi-Cal.

The court order in the *Craig v. Bontá* lawsuit requires that when SSI/SSP eligibility ends, members receive a redetermination of Medi-Cal eligibility before Medi-Cal benefits are terminated. These cases must first be reviewed and evaluated for eligibility or ineligibility in other Medi-Cal programs using the redetermination process described below. A *Craig v. Bontá* case that is terminated from Medi-Cal before all redetermination requirements are met is considered an erroneous termination. The only exceptions to the court ruling were individuals who lose SSI/SSP-based Medi-Cal due to:

- Death
- Loss of residence

- Incarceration

Medi-Cal eligibility rules for incarcerated individuals must include the requirements set forth in WIC Sections 14005.37 and 14011.10. This requires the *Craig v. Bontá* requirements to be applied to individuals who lose SSI/SSP-linked Medi-Cal due to incarceration. Members who lose SSI/SSP-linked Medi-Cal due to incarceration are transitioned into a *Craig v. Bontá* aid code, and must be evaluated for ongoing eligibility or ineligibility in other Medi-Cal programs using the CIC process, and benefits must be suspended per WIC Section 14011.10.

Effective with the July 2020 Month of Eligibility, MEDS will do the following for individuals who lose their SSI/SSP-linked Medi-Cal when SSA discontinues their SSI due to incarceration:

- Moves individuals into *Craig v. Bontá* aid codes until the CWD reviews and evaluates eligibility or ineligibility in other Medi-Cal programs using the existing redetermination process per WIC Section 14005.37.
- Auto-processes the EW32 transaction to report the incarceration and suspend Medi-Cal benefits.
- Sends the appropriate *Craig v. Bontá* Notice of Action (NOA) informing them of their *Craig v. Bontá* eligibility and that their Medi-Cal benefits are being suspended.
- Generates an appropriate MEDS Worker Alert informing the CWD of responsibility of the *Craig v. Bontá* eligibility and suspension of benefits.

MEDS Generated Worker Alerts for Incarcerated Members in *Craig v. Bontá*

When the member is moved into a *Craig v. Bontá* aid code because they lost their SSI/SSP due to incarceration, a new Worker Alert (9582 or 9583) is generated in MEDS for active CWD administered Medi-Cal records. CWDs will receive the following Worker Alerts regarding these cases:

- 9582 - INCARCERATED CRAIG V BONTA – MEDI-CAL DETERMIN NEEDED
Alert - is sent for first two months and afterwards alert 9583 will be sent.
- 9583 - INCARCERATED CRAIG V BONTA – MEDI-CAL DETERMIN OVERDUE
Alert - will continue to generate each Renewal until the *Craig v. Bontá* Aid Code is terminated on the MEDS record.

These alerts are located on the MEDS Online Worker Alert Summary display. Information about the new Worker Alerts is included in the “Appendix C: Batch Messages” section of the MEDS Manual on the MEDS Home Page website.

Exception Eligibles Report

Incarcerated members placed into a *Craig v. Bontá* aid code will also appear on the Exception Eligibles tracking report in a new category that will indicate incarceration. This new category will be titled "EXTENDED ELIGIBLE CRAIG V BONTA INMATE".

Incarcerated members who are subject to the *Craig v. Bontá* requirements will continue to appear on the Exception Eligibles report until the CWD completes the redetermination and those results are reported to MEDS. The Exception Eligibles tracking report will include the number of months that *Craig v. Bontá* Aid Code (1E, 2E, 6E) has been active.

Redetermination Process for Incarcerated Individuals and Loss of Contact

An individual's incarceration status or their suspension of Medi-Cal benefits does not prevent them from being determined eligible for a Medi-Cal program. As with any individual in *Craig v. Bontá* status, CWDs must review and evaluate these incarcerated individuals eligibility or ineligibility in other Medi-Cal programs, including Modified Adjusted Gross Income (MAGI) and Non-MAGI Medi-Cal, redetermination process described in [ACWDL 07-24](#).

As a reminder, CWDs must follow the process described in [ACWDL 22-33](#), including ex parte, sending the MC 355 to the last known address if necessary, and one additional contact when mail is returned as undeliverable. When CWDs are conducting this process, please follow the Mailing Guidance for Incarcerated Adult and Youth within the *Redeterminations for Individuals Who Are Incarcerated or Recently Released from Incarceration* section of this letter.

In accordance with existing Medi-Cal policy, if the CWD determines the individual is eligible for Medi-Cal, they must immediately update the case record with a new Medi-Cal aid code and send an approval notice. However, if the CWD determined the individual as ineligible, the member must be discontinued with a 10-day notice.

Activating Benefits for SSI and Former SSI Recipients (*Craig v. Bontá*)

If the CWD becomes aware of an individual's release date from incarceration who has suspended benefits in a SSA controlled aid code (10, 20 and 60) in their county, the CWD must report the release date in MEDS to activate the benefits as long as the Government Response Code (GOV-RSP) code in MEDS is not "2" "Federal or State-controlled Federal continuing." The CWD must enter the same County ID listed on the primary segment in MEDS in their EW32 transaction.

MEDS does not accept the EW32 transaction with a County-ID that includes a *Craig v. Bontá* aid code. Therefore, if the CWD becomes aware of an individual's release from incarceration who has an active *Craig v. Bontá* aid code with suspended benefits, the

county of responsibility needs to complete the redetermination and place the individual into the correct aid code, if eligible, prior to reporting the release date in MEDS (online) to activate the benefits. Note: As an optional workaround, the CWD can locate their County of Responsibility case number-based County-ID on the County-ID Cross Reference Report (INXC) MEDS screen to use via the EW32 transaction (e.g. 58-IE-200XXX5-0-02).

If the CWD is unable to report the release date or remove the incarceration restriction, and the benefits need to be activated, the CWD must submit a Remedy Ticket indicating that they cannot update the incarceration information on the MEDS record. If there is a barrier to care that requires a Remedy Ticket to be escalated, the CWD can send an encrypted email to the MCIEP mailbox via MCIEP@dhcs.ca.gov to request an escalation. If the CWD is unable to send an encrypted email, the CWD can email the MCIEP mailbox to initiate one. The encrypted email should include the Remedy Ticket information and the MEDS case details for the escalation request. State MCIEP will review the request and coordinate with the DHCS internal technical partners to escalate the ticket as a high priority.

Note: If an individual is still in *Craig v. Bontá* with suspended benefits and an Intercounty Transfer (ICT) is needed because the individual plans to reside in a different county permanently, the individual's address can be updated to update the County of Residence in MEDS. The sending county must complete the EW12 transaction in MEDS to transfer the individual from one county to another and remove the individual off the sending county's list. (Refer to [ACWDL 04-14](#)) Doing so will also change the County of Responsibility for the *Craig v. Bontá* aid code to allow that CWD to report the release and active benefits for that individual, if eligible. Once the benefits have been activated, the CWD must then follow existing Medi-Cal policy and procedures for completing a redetermination for the *Craig vs Bontá* individual. (Refer to [ACWDL 22-33](#)).

9. MEDI-CAL SUSPENSION POLICY AND PROCESSES

Medi-Cal Suspension Policy Background

Senate Bill (SB) 1147 (Calderon, Chapter 546, Statutes of 2008) required CWDs to suspend Medi-Cal benefits, rather than terminate Medi-Cal eligibility, for up to one (1) year for individuals under age 21 who were Medi-Cal members at the time they became inmates of a public institution.

Assembly Bill (AB) 720 (Skinner, Chapter 646, Statutes of 2013), effective January 1, 2014, added Penal Code (Pen. Code) § 4011.11 and amended the suspension requirement in Welfare and Institutions Code (WIC) § 14011.10 to expand to all incarcerated individuals. The statute states, in part, if an individual is a Medi-Cal member on the date they become an inmate of a public institution, their benefits must

be suspended effective the date they become incarcerated. The suspension must end on the date they no longer are an inmate of a public institution or one year from the date they become an inmate of a public institution, whichever is sooner.

Section 1001 of the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities (SUPPORT) Act “the SUPPORT Act,” signed into law on October 24, 2018, amended Section 1902(a) of the Social Security Act, to prohibit the termination of Medicaid eligibility for “eligible juveniles” (defined as individuals under age 21 and individuals under age 26 who were in foster care under the responsibility of the state or tribe on their 18th birthday or older) who become incarcerated individuals of a public institution. (42 United States Code (USC) § 1396a(a)(84)(A).)

AB 80 (Ting, Chapter 12, Statutes of 2020), the Public Health, Omnibus trailer bill amended WIC § 14011.10(d) to conform state law to the federal requirements of the SUPPORT Act beginning October 1, 2020, by prohibiting CWDs from terminating Medi-Cal eligibility for an “eligible juvenile” because the individual is incarcerated in a public institution, and instead allowed CWDs to suspend coverage during the period the eligible juvenile is incarcerated. As a result, CWDs were required to suspend Medi-Cal benefits for “eligible juveniles” for the duration of the incarceration, to activate Medi-Cal benefits upon release from the public institution, and to process eligible juvenile pre-release applications submitted to the CWD who were not enrolled in Medi-Cal immediately before incarceration.

The Centers for Medicare and Medicaid Services (CMS) State Medicaid Director (SMD) Letter: [SMD#21- 002](#) (January 19, 2021), entitled “Implementation of At-Risk Youth Medicaid Protections for Inmates of Public Institutions (Section 1001 of the SUPPORT Act)”, provided guidance on the implementation of the new Medicaid requirements related to suspension, redetermination and timely processing of applications for at-risk youth who are inmates of public institutions.

Although the suspension of Medi-Cal benefits is effective as of the date of incarceration, pursuant to federal law and clarification provided by CMS in [SMD#21-002](#), a 10-day notice is required for the suspension of Medi-Cal benefits for adult incarcerated individuals and eligible youth/juveniles. (Title 42 of the Code of Federal Regulations (CFR) § 431.211-214; see also 22 California Code of Regulations (CCR), § 50179.) Therefore, in practice, suspension of benefits for adult and juvenile incarcerated individuals shall **not** occur until such notice requirements have been fulfilled, as outlined in regulations.

On June 30, 2022, the Public Health Omnibus Bill (SB 184) (Chapter 47, Statutes of 2022) was signed into law. Effective January 1, 2023, the Omnibus Bill amended WIC §

14011.10(e) and now requires CWDs to suspend Medi-Cal benefits for all incarcerated individuals in a public institution for the duration of their incarceration, effective the date they become an incarcerated individual. Medi-Cal benefit suspension for adults and juveniles/eligible youth must end on the date the individual is no longer incarcerated in a public institution. This amendment allows CWDs to activate suspended Medi-Cal benefits upon release from the public institution without requiring a new application, as long as they remain otherwise eligible throughout their incarceration.

AB 133 (Chapter 143, Statutes of 2021) established California Advancing and Innovating Medi-Cal (CalAIM), which is a long-term commitment to transform and strengthen Medi-Cal, offering Californians a more equitable, coordinated, and person-centered approach to maximizing their health and life trajectory. The CalAIM Justice-Involved Initiative includes several provisions to improve access to and quality of health care for the justice-involved populations.

MEDI-CAL BENEFIT SUSPENSION POLICY FOR ALL INCARCERATED INDIVIDUALS

Per WIC § 14011.10(e)(1)(2), commencing January 1, 2023, if an individual is a Medi-Cal member on the date they become incarcerated in a public institution, their benefits shall be suspended effective on the date they become incarcerated in the public institution. Regardless of whether the individual is defined as an “eligible juvenile” or not, the suspension for all incarcerated individuals shall end on the date the individual is no longer an incarcerated individual of a public institution or until such time as they are no longer eligible for ongoing Medi-Cal. For this reason, DHCS will refer to “eligible juveniles” as “incarcerated youth” throughout this letter. No matter the length of incarceration, a Medi-Cal member must remain suspended throughout the incarceration unless they become otherwise ineligible.

A NOA must be sent at the time of suspension and at the time of activation of Medi-Cal benefits.

Example: An individual is incarcerated on 01/01/2022, with an expected release date of 3/01/2023 (14 months of incarceration). A pre-release application is submitted and approved for Medi-Cal in January 2023. The CWD should suspend the Medi-Cal benefits until the incarcerated individual is released. Upon release of the incarcerated individual, the CWD will activate the Medi-Cal benefits on the release date of 3/01/2023.

The suspension of their Medi-Cal benefits must end for any of these reasons:

- On the day of release from incarceration.
- At the end of the month the individual no longer meets program requirements for their Medicaid eligibility group and is ineligible for any other Medi-Cal program; or

- Death of the individual.

The process for suspension, coupled with proper noticing requirements and activating Medi-Cal benefits for incarcerated individuals can take some time due to gaps in communication between correctional facilities, the newly released members, and the CWDs, which may result in delays that inadvertently affect the Medi-Cal coverage upon release for incarcerated individuals that are only being held for a short stay of incarceration.

Medi-Cal Suspension Upon Incarceration

Effective, January 1, 2023, in order to ensure Medi-Cal members who are incarcerated for a short stay of incarceration can access Medi-Cal services seamlessly upon release, CWDs are instructed to suspend Medi-Cal benefits, once an individual is incarcerated for more than 28 days, while receiving Medi-Cal benefits. If the release date is unknown, the CWD must report the incarceration date after the 28th day.

- For release dates that fall after the 28th day, but within the 10-day noticing window, CWDs should also hold off on suspending benefits as the member will be released before the suspension can be applied.
- If the CWD is aware of the individual's release date and has confirmed they will be incarcerated beyond the 28-days and the 10-day noticing period, the CWD is **not** required to wait to suspend benefits.

Note: For individuals who applied during incarceration and are expected to be released within the same month the CWD is informed, or prior to the 28 day of incarceration and the 10-day noticing periods, the CWD is not required to report the incarceration and suspend benefits regardless of how long the individual was incarcerated.

Example: The CWD receives a pre-release Medi-Cal application for an individual on 7/02/2023 who was not currently receiving Medi-Cal benefits. This individual has been incarcerated within the CCF since 3/05/2023 but expected to be released on 8/05/2023.

The CWD approves the case on 7/24/2023, effective 7/01/2023. However, because the member is releasing in less than 39 days (28 days of incarceration while receiving benefits + 10 days of noticing), suspension of benefits is not necessary.

Suspension Policy for Medi-Cal Inmate Eligibility Program (MCIEP)

MCIEP benefits are **not** subject to the suspension policy because MCIEP provides benefits for county and state incarcerated individuals who receive inpatient hospital services in a medical facility off the grounds of the correctional facility. MCIEP follows

existing standard Medi-Cal eligibility rules and requirements. A Medi-Cal member may have a suspended Medi-Cal aid code in the primary segment along with an active MCIEP aid code in the special segment, and both aid codes can run concurrently.

Suspension Policy for Incarcerated Individuals Discontinued from SSI

Effective, July 2020, individuals who lose their SSI/SSP-linked Medi-Cal due to incarceration, are moved into *Craig v. Bontá* aid codes to allow for a Medi-Cal eligibility determination to be completed by the CWD. After the transition to a *Craig v. Bontá* Aid Code (1E, 2E or 6E), MEDS will automatically report the incarceration and suspend the individual's Medi-Cal benefits. In these cases, the EW32 uses the SSI/SSP termination date as the date of incarceration for the purpose of the EW32 when suspending Medi-Cal benefits.

DHCS will no longer generate the NOA Type 7A when an individual loses SSI/SSP, due to incarceration. In place of NOA Type 7A, DHCS will auto-generate a new NOA Type 88 to these members. The new NOA Type 88 will address both suspension of Medi-Cal benefits and the continuing *Craig v. Bontá* eligibility during the redetermination process. It is important to complete the *Craig v. Bontá* determination within 60 to 90 days, in accordance with current Medi-Cal policy. If applicable, the aid code should be updated to reflect ongoing eligibility and their benefits shall remain suspended for the remainder of their incarceration.

Activation of Benefits Upon Release from Incarceration

Upon release, Medi-Cal benefits must be activated effective the date of release without submitting a new application if the information available to the CWD is sufficient to determine that the former incarcerated individual is still eligible. If the incarcerated adult or youth has had an eligibility determination or redetermination completed within the last 12 months, one would not be required, barring any other known changes in circumstance that may affect their eligibility. If eligible, the incarcerated individual must be notified that their Medi-Cal benefits are no longer suspended, and that the benefits are activated on the day of release from incarceration.

CWDs must accept incarceration/release date verbally or by a written statement from the member, Authorized Representative (AR), state agency, behavioral health plan managed care plan, or from the correctional agency. If the member comes into the CWD office, calls the office, writes to the CWD, or has official documentation, the incarceration/release date they report can be considered a self-attestation and accepted as verification. If the actual release date is not known, the CWD may use the date that they report. If needed, the incarceration/release date can be corrected in CalSAWS or in MEDS if the actual date is provided later. This will ensure continuity of care for the released individual.

Activating Benefits for Individuals in CCTRP/MCRP

For CDCR, state incarcerated individuals who participate in the CDCR reentry program and reside in a Custody to Community Transitional Reentry Program (CCTRP) and Male Community Reentry Program (MCRP) facility, **their suspension shall end when the individual enters Phase 3 of the reentry program**. Participants in Phase 3 of the reentry program are considered released for Medi-Cal purposes and no longer considered incarcerated individuals residing in a public institution. (See section *Overview of Medi-Cal Applications Received from Reentry Participants*).

Activating Benefits for Individuals with Active County MCIEP

If the released individual was also active on County MCIEP, the CWD must terminate the MCIEP aid code effective the last full date of incarceration in addition to activating their Medi-Cal benefits, if applicable. An active MCIEP aid code will take precedence over any other active benefits, which could result in a barrier to care for the member if not promptly terminated upon release.

Activating Benefits for SSI and Former SSI Recipients (*Craig v. Bontá*)

If the CWD becomes aware of an individual's release date from incarceration who has suspended benefits in a SSA controlled aid code (10, 20 and 60) in their county, the CWD is able to report the release date in MEDS (online) to activate the benefits, as long as the Government Response Code (GOV-RSP) code in MEDS is not "2" "Federal or State-controlled Federal continuing." The CWD must enter the same County ID listed on the primary segment in MEDS in their EW32 transaction.

MEDS does not accept the EW32 transaction with a County-ID that includes a *Craig v. Bontá* aid code. Therefore, if the CWD becomes aware of an individual's release from incarceration, who has an active *Craig v. Bontá* aid code with suspended benefits, the county of responsibility needs to complete the redetermination and place the individual into the correct aid code, if eligible, prior to reporting the release date in MEDS (online) to activate the benefits. Note: As an optional workaround, the CWD can locate their County of Responsibility case number based County-ID on the County-ID Cross Reference Report (INXC) MEDS screen to use via the EW32 transaction (e.g. 58-IE-200XXX5-0-02).

If the CWD is unable to report the release date or remove the incarceration restriction", and the benefits need activated, the CWD must submit a Remedy Ticket indicating that they cannot update the incarceration information on the MEDS record. If there is a barrier to care that requires a Remedy Ticket to be escalated, the CWD can send an encrypted email to the MCIEP mailbox via MCIEP@dhcs.ca.gov to request an escalation. If the CWD is unable to send an encrypted email, the CWD can email the MCIEP mailbox to initiate one. The encrypted email should include the Remedy Ticket

information and the MEDS case details for the escalation request. State MCIEP will review the request and coordinate with the DHCS internal technical partners to escalate the ticket as a high priority.

If an individual is still in *Craig v. Bontá* with suspended benefits and an Intercounty Transfer (ICT) is needed because the individual plans to reside in a different county permanently, the individual's address can be updated to update the County of Residence in MEDS. The sending county must complete the EW12 transaction in MEDS to transfer the individual from one county to another and remove the individual off the sending county's list. (Refer to [ACWDL 04-14](#)) Doing so will also change the County of Responsibility for the *Craig v. Bontá* aid code to allow that CWD to report the release and active benefits for that individual, if eligible. Once the benefits have been activated, the CWD must then follow existing Medi-Cal policy and procedures for completing a redetermination for the *Craig vs Bontá* individual. (Refer to [ACWDL 22-33](#) and [ACWDL 10-26](#)).

Suspension and Activation Notices of Action (NOAs)

The member must receive the "Suspension of Benefits" NOA when their benefits are being suspended and a 10-day advance notice is required to comply with CMS noticing requirements for suspension of Medi-Cal benefits. When the Medi-Cal eligibility of a member is activated, they must receive the "Medi-Cal Benefits Activated" NOA. A 10-day advance notice is not required when activating benefits, however, the NOA needs to be sent no later than the date the CWD activates the individual's eligibility. The suspension and activation of benefits NOAs are enclosed in this letter and translated versions for all threshold languages are available on the MEDS Home Website (MHWS).

NOA Mailing Guidance for Incarcerated Youth

For incarcerated youth who are not tax dependents and in a single-member household (e.g., household of one), the "Suspension of Benefits" NOA must be sent directly to the correctional facility, if known, otherwise, to the last known physical address in MEDS.

For incarcerated youth in a household on an active family case, the NOA will be sent to both the head of household last known physical address in MEDS and the correctional facility, if known, where the incarcerated youth resides. If the incarcerated youth is a tax dependent enrolled on a family Medi-Cal case, the Suspension of Benefits NOA should be mailed to the address of the head of household or AR, if applicable.

Note: When mailing to the CCF/CDCR facility, an Inmate Number or other identifying information for the member may be required.

NOA Mailing Guidance for Incarcerated Adults

For incarcerated adults, the “Suspension of Benefits” NOA must be mailed to the last known address listed in MEDS or the correctional facility, if known.

Note: When mailing to the CCF/CDCR facility, an Inmate Number or other identifying information for the member may be required.

Additional Considerations for the Medi-Cal Benefit Suspension Policy

While the goal of DHCS’ benefit suspension policy is to prevent DHCS from making improper Medi-Cal payments during a Medi-Cal member’s incarceration, it is important for DHCS to balance that with preventing barriers to care for members. Given the complexity of the justice system, DHCS acknowledges that the suspension of benefits for some scenarios may need to be assessed on a case-by-case basis. CWDs should contact DHCS via email at CalAIMJusticePreReleaseApps@dhcs.ca.gov for technical assistance if the suspension of benefits is creating a barrier to care for a Medi-Cal member.

DHCS’ Statewide Pre-Release Contacts list contains appropriate contacts for CWDs and county correctional facilities to assist with the communication necessary to facilitate the suspension and activation of benefits. A copy can be requested via email at CalAIMJusticePreReleaseApps@dhcs.ca.gov.

Incarcerated or Released in a Different State or County

CWDs may receive information from various sources, such as the county jail, juvenile detention facilities, and/or from the application for MCIEP, that an individual has been incarcerated or released in their county. A CWD is unable to activate benefits for a member for whom they do not have a case. Coordination between CWDs and CCFs is necessary to ensure the member’s benefits are suspended or activated in accordance with current policy.

If it is determined that the incarcerated or released individual in their county is active or has suspended Medi-Cal in a different county, a courtesy notice must be sent to that CWD advising of the active or suspended Medi-Cal to follow the suspension policy and process accordingly. An ICT is only required if, upon release of incarceration or required treatment, the individual intends to permanently reside in a county other than the county in which their current Medi-Cal eligibility was established.

Example 1: CWD A receives information that an individual is incarcerated in their county jail. After a due diligence search, CWD A identified that the incarcerated individual has Medi-Cal established in CWD B.

- CWD A contacts the Medi-Cal pre-release application contact in CWD B and advises CWD B of the incarceration information, including the

incarceration date and facility information. If the incarceration date is not known, CWD B will use the date they learned of the incarceration as the incarceration date for the purposes of suspension. CWD A will also advise their county jail of the correct CWD responsible for the member's Medi-Cal.

Example 2: CWD A receives information (from the county jail or the member) of an incarcerated individual's upcoming parole or release from incarceration to county A. After a due diligence search, CWD A identifies the individual being released has Medi-Cal in CWD B and intends to reside in county B.

- CWD A contacts the Medi-Cal pre-release application contact in CWD B and advises CWD B of the incarceration release date for the member. Upon the member's release from incarceration, CWD B activates their benefits.

Example 3: CWD A receives information (from the county jail or the member) of an incarcerated individual's upcoming parole or release from incarceration to CWD A. After a due diligence search, CWD A identifies the individual being released has Medi-Cal in CWD B, but the county jail/member confirmed the member intends to reside in CWD A upon release.

- CWD A contacts the Medi-Cal pre-release application contact in CWD B and advises CWD B of the incarceration release date for the member and the need to complete an Intercounty Transfer (ICT). CWDs must follow the ICT policy outlined in ACWDLs [18-02](#) and [18-02E](#) to complete the ICT. When feasible, the ICT should be completed prior to the release.

Notification of Incarceration Out of State

Per Title 22, California Code of Regulations (CCR) 50320, California residency is a requirement for Medi-Cal eligibility. When the CWD receives information that a member is out of state, the CWD has an affirmative duty to exercise due diligence in determining the state of residence of that member. The CWD must determine if the individual is temporarily out of state and intends to return to California or if the individual's intent is to remain outside of California. If necessary, CWDs must follow loss of contact rules for Medi-Cal.

Individuals Not Considered as Incarcerated

As described in Title 22 CCR § 50273(c)(1), the following individuals are **not** considered incarcerated individuals in a public institution and shall be eligible to apply for, or be evaluated for Medi-Cal benefits, provided they meet all other requirements for eligibility outlined in the code: an individual released from prison or jail on permanent release, bail, own recognizance, probation, or parole with a condition of:

- Home arrest/confinement
- Work release
- Community service
- Outpatient treatment
- Inpatient treatment

These individuals are **not** subject to the suspension of benefits, as they are not considered to be incarcerated. A few examples are provided below for more context:

Example 1: An individual who is released to home confinement does not meet the definition of an incarcerated individual in a “public institution” because a home is not considered a public institution, therefore, the individual is entitled to receive Medi-Cal benefits, if otherwise eligible. A Medi-Cal member with suspended benefits reports they have been released to home confinement on 5/25/2023. The CWD will submit the EW32 transaction to report the release date of 5/25/2023 and follow suspension rules to activate the Medi-Cal benefits.

Example 2: An incarcerated individual in county jail is subsequently released on probation, ordered to home arrest/home confinement, and to wear an ankle monitor. An individual in this circumstance is not considered an inmate of a “public institution” because a home is not considered a public institution and is therefore entitled to receive Medi-Cal benefits, if otherwise eligible. The CWD must accept the application and follow standard Medi-Cal rules for the determination of eligibility.

Example 3: An incarcerated individual who is granted reunification with their family/guardian over the weekend and must return to the public institution to serve the remainder of their sentence is still considered an incarcerated individual of a “public institution” because it does not meet the criteria for someone being housed outside of the public institution as described in Title 22 CCR § 50273.

Example 4: An incarcerated Medi-Cal member with suspended benefits reports they have been temporarily released on an overnight or weekend pass. The CWD must keep their benefits suspended in this circumstance.

10. SUSPENSION AND ACTIVATION OF MEDI-CAL BENEFITS IN MEDS

The suspension of Medi-Cal benefits is done by submitting a transaction through MEDS to report the incarceration. MEDS tracks the Incarceration, Suspend Start, Suspend End and Release Dates for incarcerated individuals. These dates reside in the Incarceration and Suspension Information (INQU) MEDS screen and are used to alert users of

suspended Medi-Cal benefits to prevent improper payments on behalf of incarcerated individuals who are not entitled to Medi-Cal services while incarcerated, except for those eligible under the MCIEP or other DHCS-authorized programs. Detailed screen information about the INQU screen; the EW32 online and batch transactions for incarceration and suspension reporting process; applicable MEDS alerts, and online and batch messages, can be found in the MEDS Manual on the MHWS.

INQU- Incarceration and Suspension Information Screen

Prior to 2020, suspension information (Policy Start/Stop Dates) was previously displayed in the Health Insurance System (HIS) screen of MEDS. That information was transitioned to the INQU Screen in MEDS beginning March 2020 Month of Eligibility (MOE). The Policy Start Date was converted into the Incarceration and Suspend Date fields. These dates are the same because the individual was incarcerated at the time the suspension was established. This can be corrected if the actual incarceration date is known. The Policy Stop Date was converted into the Suspend End Date field and the Release Date is the day following the Suspend End Date. This can be corrected if the actual release date is known. The INQU screen in MEDS can store multiple incarceration dates, suspension dates, and release dates, including multiple incarceration periods occurring within the same month, as long as there is no overlap.

The INQU MEDS screen will also indicate the status of an incarceration period: either an open incarceration (currently an ongoing incarceration) or closed incarceration (an individual has been released from incarceration). When the INQU screen indicates an open incarceration period, the CWD will report the release date when the individual is released via CalSAWS (batch) or the online EW32 MEDS transaction, resulting in a closed incarceration period.

Suspend Dates are only populated for records that have active Medi-Cal when the EW32 is processed. If a closed period of incarceration is submitted after the release date, there will neither be a Suspend Date nor a Suspend End Date. Correction of the open or closed incarceration periods can be corrected via the batch or online EW32 MEDS transaction.

Use of Restriction and Eligibility Status Codes in MEDS

When an incarceration is reported to MEDS, the Restriction Codes, (800 series) in conjunction with the Eligibility Status Code (ESC), reflect incarceration for both full (69X) and partial months (X5X). The Restriction Codes populate across MEDS Medi-Cal segments; however, they do **not** impact the INMATE, PAROLE, and General Relief/Cash Assistance Program for Immigrants (GR/CAP) segments, allowing eligibility to be added or terminated as needed without interruption to eligibility in these excepted segments. If the individual is incarcerated and released on the same day, there is no

restriction to any active Medi-Cal benefits. A list of Restriction Codes is accessible via the [Medi-Cal Incarceration Policy Resources](#) page.

- The ESC for the Medi-Cal aid code is updated to reflect 691 for full month incarceration or X5X with “5” as the middle digit (e.g., 301 changes to 351) for partial month, signifying partial month eligibility.
- The Restriction Code is updated to the 800 series to identify incarceration. The Restriction Code will remain until a release date is reported, irrespective of any changes to their Medi-Cal eligibility.

The Eligibility Status Codes are not affected for the MCIEP, General Relief (GR) or Cash Assistance Program for Immigrants (CAPI) aid codes in MEDS when a restriction is placed on the Medi-Cal segment(s).

The definitions of full and partial-month MCIEP Aid Codes and full and partial-month Incarceration Periods is accessible via the [Medi-Cal Incarceration Policy Resources](#) page. The link also includes the definitions of the MEDS’ Incarceration, Release, Suspend and Suspend End Dates.

Managed Care Enrollment During Suspension

The combination of Restriction Codes and Eligibility Status Codes triggers MEDS logic to update the Health Care Plan (HCP) enrollment status to indicate hold, disenrollment, or recoupment, and will update the Medicare Buy-In status to end or restart the Buy-In process. The capitation paid for a managed care plan for full months of incarceration within the last 13 months can be recouped. If the incarceration continues, the full months following the month the EW32 MEDS transaction is submitted will put the managed care status on hold for a total of 12 months. After 12 full months of a managed health care plan being on hold, the individual will be disenrolled from the health plan. After one (1) full month of a managed care plan indicating disenrollment, the managed health care plan will be removed from MEDS the following month. When a release from incarceration is reported to MEDS during the time that the HCP Status is in hold status, the month of release will result in the hold status being lifted.

MEDS EW32 Online and Batch Transactions

The process for suspension and activation of Medi-Cal benefits for incarcerated and released individuals is accomplished by updating the information in CalSAWS or MEDS via the EW32 online and batch transactions in MEDS. The EW32 online and batch transactions are used to report an incarceration (initiating suspension), report a release (ending suspension and activating benefits), and to correct previously reported incarceration or release dates. The EW32 online transaction processed directly in MEDS and the batch transactions come from CalSAWS to MEDS through overnight batch processes update.

Within the INQU screen in MEDS, the system determines and auto-populates the Restriction Code(s), Eligibility Status Code(s), Suspend Date(s), and Suspend End Date(s) for each incarceration period accordingly. The Suspend Date field is determined by MEDS and cannot be modified by the MEDS user. Refer to the EW32 Institutionalized/Incarcerated Client Update sections of the MEDS Manual for more information on EW32 functionality in MEDS.

CWDs are highly encouraged to track the incarceration of Medi-Cal members within CalSAWS. DHCS is collaborating with our CWD partners and CalSAWS to automate or enhance many processes for tracking incarcerations, specifically around the EW32 functionality and Notice of Actions (NOAs). Until implemented by CalSAWS, many processes may be manual for CWDs.

Suspension of Medi-Cal Benefits via the EW32

In accordance with state regulations, Medi-Cal members who are incarcerated are subject to the suspension of their Medi-Cal benefits. To comply with guidance from CMS on noticing requirements for suspension of Medi-Cal benefits, the suspension of benefits within MEDS should **not** occur until such notice requirements have been fulfilled, as outlined herein.

For individuals incarcerated more than 28 days (and anticipated to be incarcerated beyond the 10-day Suspension noticing requirement), the CWD will report the incarceration to MEDS via the EW32 transaction, on or after, the 29th day. The suspension of benefits is to occur after the 10-day NOA has been issued notifying of the upcoming suspension.

Example: On 4/05/2023, the CWD became aware of a Medi-Cal member who was incarcerated on 4/01/2023. On 4/29/2023, the CWD confirmed that the incarcerated individual remained incarcerated and issued a suspension NOA and then 10-days later, reported the incarceration date to MEDS via the EW32 transaction. This populates the INQU screen with the Incarceration Date of 4/01/2023 and suspends the member's Medi-Cal effective 5/10/2023.

However, if the CWD is aware of the individual's release date and has confirmed they will be incarcerated beyond the 28-days and the 10-day noticing period, the CWD is not required to wait to suspend benefits.

Activation (Unsuspension) of Medi-Cal Benefits via the EW32

Upon release, Medi-Cal benefits must be activated without the need for a new application. CWDs are to activate benefits (unsuspend) for individuals on the day of their release or within one (1) business day of notification of their release. If the incarcerated adult or youth has not had an eligibility determination or redetermination

completed within the last 12 months, a redetermination is required prior to their release to ensure they still qualify. If a redetermination is needed for the incarcerated individual and it cannot be completed before the release from incarceration, due to administrative circumstances beyond the agency's control, the CWDs must activate their benefits and complete the redetermination as expeditiously as possible.

Once Medi-Cal benefits are activated using the EW32 transaction, the benefits will be restored effective the date of release once MEDS is updated with this information. Because of the system delay, if the released individual is in immediate need of services, an Immediate Need transaction is also required. Once that occurs, the Suspend End Date on the MEDS INQU screen will reflect the last full day of incarceration (the day prior to the release date).

Example: An individual is released from incarceration on 3/11/2023, Medi-Cal benefits will be restored effective 3/11/2023. The INQU Screen will reflect 3/10/2023 (last full day of incarceration) as the Suspend End Date and the Release Date will display 3/11/2023 (actual day of release from incarceration).

A Suspend End Date is only generated for a record with a Suspend Date (open incarceration period). The Release Date on the INQU screen will be the only date that will populate if there is not an open suspension to end.

Important Note about Immediate Need (EW15)

The online EW15 transaction allows immediate need benefits to be issued when a MEDS record shows the person as incarcerated. In cases where an immediate need for services must be established, the CWD must follow the standard Immediate Need process by utilizing the online EW15 transaction in addition to the batch or online EW32 transaction. To show correct eligibility for the remainder of the month for the newly released individual, the EW32 transaction must be submitted on the same day as the EW15 transaction. When completing the EW15 transaction, the Restriction Code field should be left blank. MEDS will update the Restriction Code(s) for the member as appropriate based on the incarceration status.

Changes to Incarceration Information Reported to MEDS

The incarceration and release dates reported to MEDS for an incarceration period can be corrected or removed via an EW32 transaction when a change is warranted.

Correcting Previously Reported Incarceration and/or Release Dates

Before correcting a previously reported incarceration and/or release date, CWDs must review the INQU screen in MEDS to determine the incorrect information and confirm if a

date(s) must be corrected. If necessary, the incarceration and/or release dates can be corrected in CalSAWS and MEDS via an EW32 transaction.

Removing an Erroneously Reported Incarceration in MEDS

When an incarceration period on the INQU MEDS screen is erroneous, the CWD must correct the incarceration period by entering the Release Date or Correction Release Date equal to the Incarceration Date via batch or submit an online EW32 in MEDS. This will null the incarceration period from the individual's MEDS record but will not remove the incarceration period from the INQU MEDS screen. MEDS will show the incarceration date as the same date as the release date, however, will not display the incarceration restriction indicator nor impact the Medi-Cal benefits.

Before removing (nulling) an incarceration period in MEDS using the EW32 transaction, CWDs must review the INQU MEDS screen to determine if the information is incorrect and identify the incarceration period that needs to be removed (nulled).

Other MEDS EW32 Transaction Considerations

County of Responsibility

In most circumstances, only the CWD responsible for either the member's current eligibility or pending determination for an open application may submit an EW32 transaction to make adjustments to the members benefits. For the EW32 online transaction, the CWD can use their County of Responsibility case number-based County-ID on the County-ID Cross Reference Report (INXC) MEDS screen.

MEDS is Not Functioning as Described

When the EW32 transaction is not functioning as described in this letter, a Remedy Ticket should be submitted. If there is a barrier to care that requires the Remedy Ticket to be escalated, the CWD can send an encrypted email to the MCIEP mailbox via MCIEP@dhcs.ca.gov to request an escalation. If the CWD is unable to send an encrypted email, the CWD can email the MCIEP mailbox to initiate one. The encrypted email should include the Remedy Ticket information and the MEDS case details for the escalation request. State MCIEP will review the request and coordinate with the DHCS internal technical partners to escalate the ticket as a high priority.

EW32 Resources

For additional information on the online EW32 transaction, refer to the MEDS Manual on the MHWS. If the CWD cannot null the incarceration period, the CWD will need to submit a Remedy Ticket. They must include as much information as possible on the ticket (e.g., an overlap issue, if there are multiple incarceration periods, which period needs to be corrected, and list in the ticket if there are any barrier to care issues).

EW32 Technical Questions

If assistance in the processing of the EW32 transaction is needed, the CWD may send an encrypted email inquiry to the MCIEP mailbox MCIEP@dhcs.ca.gov. If the CWD is unable to send an encrypted email, the CWD can email the MCIEP mailbox to initiate one. The email should include the Client Index Number (CIN) along with pertinent screenshots, as much information as possible to assist in the review process.

11. PRE-RELEASE MEDI-CAL APPLICATION PROCESSES FOR STATE AND COUNTY CORRECTIONAL FACILITIES AND THEIR DESIGNATED ENTITY OR ENTITIES

The purpose of this section is to establish policies for state and county correctional agencies in California which include CDCR, CCFs, and County Youth Correctional Facilities (CYCF), as well as to update existing policies for CWDs. The term "CCF" refers to both county correctional facilities and county youth correctional facilities. The term "designated entity or entities" refers to CWDs, CCFs, CDCR, community-based organizations (CBOs), and other contracted entities designated by the County Board of Supervisors to assist with submitting Medi-Cal pre-release applications.

The CDCR pre-release Medi-Cal application process is administered by the Division of Adult Parole Operations (DAPO) and is divided geographically into two regions, Northern and Southern. Information related to the Northern and Southern Directory can be found on the following CDCR web pages: [Northern Region Directory](#) and [Southern Region Directory](#).

The term "incarcerated individuals" refers to adult and youth incarcerated within a public institution, as defined by Medicaid regulation Title 42 CFR Section 435.1010. In areas in which policy may differ for adults and youth (or eligible juveniles), DHCS will use the terms "incarcerated adults" and "incarcerated youth".

History of Pre-Release Medi-Cal Application Processes

In 2004, CMS issued a letter entitled "Ending Chronic Homelessness." In the letter, CMS encouraged states to take steps necessary to ensure that applications for Medicaid (Medi-Cal in California) are processed in a timely manner so that individuals released from incarceration can receive Medicaid-covered services upon release from state prison or CCF. California implemented "pre-release" guidance for juveniles through Senate Bill (SB) 1469 (Cedillo, Chapter 657, Statutes of 2006). The law required CWDs to determine the Medi-Cal eligibility of youth, who are incarcerated for 30 days or more and wish to receive Medi-Cal benefits, prior to release.

CDCR Pre-Release Application Processes Prior to January 1, 2014

In 2008, CDCR and DHCS signed a Memorandum of Understanding (MOU) to coordinate the pre-release process for state incarcerated individuals. The MOU outlined shared goals, expectations, and roles and responsibilities between DHCS and CDCR. The pre-release process began with CDCR creating a system to identify potential Medi-Cal eligible incarcerated individuals who were nearing parole. Once identified, CDCR pre-release staff offered incarcerated individuals assistance with applying for Medi-Cal, prior to release. If an incarcerated individual authorized CDCR pre-release staff to act as their AR for purposes of applying for Medi-Cal, a paper-based Medi-Cal application was completed and submitted (via mail or encrypted email or secured fax) to a designated CWD contact in the county in which they expected to be released.

During the pre-release application process, CDCR facilities shared information with CWDs regarding the release date for incarcerated individuals and assisted with completing and submitting Medi-Cal applications to the appropriate CWDs. CDCR included a coversheet with the application so that the CWD Medi-Cal eligibility staff could identify these as pre-release applications that required special handling. CWDs accepted and processed the Medi-Cal applications and notified the appropriate CDCR facility of the outcome of the eligibility determination.

The CDCR and DHCS MOU is no longer in effect. This policy letter outlines the pre-release Medi-Cal application process as agreed upon by DHCS and CDCR.

CDCR Pre-Release Application Processes Since January 2014

In January 2014, CDCR implemented a pre-release application process for individuals incarcerated in California state prisons, who were potentially Medi-Cal eligible, to ensure they had access to care upon release. Later that year, DHCS provided guidance that the pre-release application and eligibility determination processes were applicable to incarcerated adults and youth in both state and county facilities who apply for Medi-Cal coverage.

California Advancing and Innovating Medi-Cal (CalAIM) Mandatory Pre-Release Application Process for County Correctional Facilities

Starting January 1, 2023, the CalAIM Justice-Involved Initiative mandates that every county establish a Pre-Release Medi-Cal Application Process. This process aims to ensure that all incarcerated adults and juveniles who are released from CCFs have timely access to Medi-Cal services, provided they are eligible. The initiative includes various provisions that aim to improve the quality of healthcare and accessibility to justice-involved populations.

As outlined in Pen. Code Section 4011.11, the Board of Supervisors in each county, in consultation with the county sheriff and chief probation officer for juvenile inmates, shall

designate an entity or entities to assist incarcerated individuals with submitting an application for, or otherwise assisting their enrollment in, a health insurance affordability program consistent with federal requirements.

The designated entity or entities (CWDs, CCFs, CBOs, etc.) must work together to facilitate the enrollment of incarcerated adults and youth in health insurance affordability programs on, or before, their date of release. CCFs and CWDs are also required to develop a process to inform CWDs of the incarceration status of CCF incarcerated adults and youth in order for CWDs to suspend and activate Medi-Cal coverage for members.

Date of Compliance for Pre-Release Application Mandate

DHCS required all CWDs and CCFs to be in full compliance with the CalAIM Medi-Cal Pre-Release Application Mandate by June 30, 2023. County agencies that are not in compliance by this date are subject to an ongoing Plan of Action and Milestones (POAM), detailing a concrete roadmap to becoming fully compliant.

County-Level Quarterly Reporting of Pre-Release Application Data

To track implementation progress and overall compliance with the state Pre-Release Medi-Cal application mandate, DHCS requires all counties and CDCR to track Pre-Release application data every month (i.e., measures will be reflective of month-long time periods, see required metrics below) and submit this data to DHCS on a quarterly basis. The first report of pre-release application data, reflective of the third quarter reporting period (June 1 through August 31, 2023) was due to DHCS by October 1, 2023. Data submissions are due the first of the month following the end of the quarter.

Quarter	Reporting Period	Date Due to DHCS
Quarter 1	January 1 through March 31	May 1
Quarter 2	April 1 through June 30	August 1
Quarter 3	July 1 through September 30	November 1
Quarter 4	October 1 through December 31	February 1

The following information should be reported to DHCS for each month being reported for within the quarter:

CCFs (separately reported for county jails and county youth correctional facilities):

- Average number of individuals incarcerated within the facility/facilities
- Total number of individuals screened for Medi-Cal
- Total number of individuals who declined to apply for Medi-Cal
- Total number of individuals interested in Medi-Cal, but were confirmed to be already enrolled*

- Total number of Pre-Release Medi-Cal applications submitted

CWDs:

- Total number of Pre-Release Medi-Cal applications received from CCFs
- Total number of Pre-Release Medi-Cal applications received for an individual already on Medi-Cal (duplicative) from CCFs*
- Total number of Pre-Release applications approved from CCFs
- Total number of Pre-Release applications denied from CCFs
- Total number of Pre-Release Medi-Cal applications received from CDCR
- Total number of Pre-Release Medi-Cal applications received for an individual already on Medi-Cal (duplicative) from CDCR*
- Total number of Pre-Release applications approved from CDCR
- Total number of Pre-Release applications denied from CDCR

CDCR:

- Total number of individuals screened for Medi-Cal
- Total number of individuals who declined to apply for Medi-Cal
- Total number of Pre-Release Medi-Cal applications submitted

Note: Items marked above with (*) are new data requirements effective with the publication of this letter. DHCS requests counties begin tracking and reporting on them to DHCS for Quarter 2 of 2024 (April 1 to June 30, 2024), due on August 1, 2024.

DHCS requires CWDs, County Correctional Facilities, County Youth Correctional Facilities, and CDCR to submit quarterly data reports on an ongoing basis (i.e., DHCS has not set an end date for data submissions). CWDs who are the entity designated by the CCF to assist incarcerated individuals with enrolling in Medi-Cal, the CWD can report the data to DHCS on behalf of the CCF.

Quarterly reports can be submitted to DHCS via email at:

CalAIMJusticePreReleaseApps@dhcs.ca.gov in the format that is easiest for the submitter (e.g., detailed in the body of the email, in a spreadsheet, or pdf report). DHCS developed a template and Frequently Asked Question for the quarterly data reporting that can be accessed via the [Medi-Cal Incarceration Policy Resources](#) page.

Approval of California's Medicaid 1115 Demonstration Waiver

On January 26, 2023, California became the first state in the nation to receive federal approval to offer a targeted set of Medicaid services to youth and adults in state prisons, county jails, and county youth correctional facilities for up to 90 days prior to release. Through a federal [Medicaid 1115 demonstration waiver](#) approved by the CMS, DHCS

will partner with state agencies, counties, and community-based organizations to establish a coordinated community reentry process that will assist people leaving incarceration in connecting to the physical and behavioral health services that they need prior to release and re-entering their communities.

Enrolling incarcerated adults and youth in Medi-Cal during the pre-release process as they re-enter the community from a correctional facility is essential for providing access to the 90-day pre-release services outlined in California's 1115 waiver. The mandatory pre-release application process plays a crucial role in granting justice-involved populations access to vital medical and behavioral health services while incarcerated and upon their release into the community. This approach contributes to establishing a continuum of care between correctional facility settings and the community, ultimately aiming to enhance health outcomes and reduce the demand for costly and inefficient services in California.

Pre-Release Medi-Cal Application Process

Incarceration by itself is not a reason for an individual to be determined ineligible for Medi-Cal. The Pre-Release Application Process was developed to assist incarcerated individuals who are not enrolled in Medi-Cal but wish to apply prior to their release from incarceration. An incarcerated individual's participation in the Pre-Release Medi-Cal Application Process is voluntary. The incarcerated adult must be willing to participate in the process to apply for Medi-Cal. In the case of an incarcerated youth, the parent or legal guardian must authorize participation in the application process. If an adult or a youth's parent or legal guardian declines an offer to submit a pre-release Medi-Cal application, there is no requirement for correctional facilities or the CWD to follow up.

Federal and State law require CWDs to accept Medi-Cal applications from, or on behalf of, incarcerated adults or youth at any time during their incarceration regardless of their length of stay. CWDs must follow standard Medi-Cal application policies when processing applications and determining eligibility for pre-release applicants, including completing the determination of eligibility within 45 days of receipt, or 90 days of receipt for individuals being determined eligible based on a disability (42 CFR. § 435.912). If an individual is determined eligible for Medi-Cal while incarcerated, the CWD must treat this individual as it would any person who was enrolled in Medi-Cal. If the individual will remain incarcerated, the CWD must suspend benefits if appropriate.

Pre-Release Medi-Cal Application processes ensure that, if determined eligible, all individuals incarcerated in California have access to needed Medi-Cal covered services and care upon their re-entry into the community. They also establish the foundation for DHCS, CCFs, and CDCR's implementation of the Medicaid 1115 Demonstration Waiver, the Medi-Cal Justice-Involved Reentry Initiative. This initiative will provide pre-

release and reentry services to qualified incarcerated individuals on Medi-Cal. For additional information, see [ACWDL 23-23](#).

To ensure the application can be processed well in advance, preferably within 90 days before the individual's projected release date, the Pre-Release Application process should be implemented at intake, or as soon as is reasonably possible, in CCFs. At a minimum, they should be initiated within 135 days of the incarcerated individual's release.

To align with CCFs, CDCR will also begin submitting pre-release applications within 135 days of the individual's expected release beginning in January 2024.

CCF/Transitional Case Management Program (TCMP) Benefit Workers may submit applications earlier than 135 prior to the incarcerated individual's release, as approved by DHCS to support enrollment in Pre-Release Services under CalAIM.

Individuals Incarcerated in State Prison

The CDCR TCMP Benefit Workers are the designated entity to assist with submitting the Medi-Cal application for CDCR incarcerated adults who are being released to Post Release Community Supervision (PRCS) and DAPO. The intent of the pre-release application process is to ensure continued access to health coverage for eligible incarcerated individuals returning to the community. To accomplish this goal, TCMP Benefit Workers meet face-to-face with the incarcerated individual to collect pertinent information, assist them in filling out the Medi-Cal application, and then submit a pre-release Medi-Cal application packet on their behalf.

Individuals Incarcerated in County Jails or County Youth Correctional Facilities

As authorized by Pen. Code § 4011.11, counties are required to have policies and procedures in place to comply with the CalAIM Mandatory Pre-Release Medi-Cal Application Process. This allows CWDs and CCFs the opportunity to ensure that all eligible county incarcerated adults and youth have Medi-Cal coverage upon release from CCFs.

DHCS recommends that each county's CWD, the county sheriff for county jails, and the county probation officer for county youth correctional facilities work together with their respective County Board of Supervisors to identify best practices for implementation and on-going maintenance of their county pre-release Medi-Cal application process within their county, in compliance with this mandate. Depending on the size of the county and the size of the incarcerated population, the manner in which it is implemented may look different county-to-county.

In 2022, DHCS published [Strategies for Conducting Pre-Release Medi-Cal Enrollment in County Jails](#) to provide support to CWDs and CCFs as they developed their pre-

release Medi-Cal application processes by sharing recommended and alternative approaches to identifying Medi-Cal eligible individuals, partnering with application assisters, submitting applications to CWDs, and coordinating across Medi-Cal and county justice agencies. The following are examples of the varied approaches counties have taken with respect to operationalizing their Medi-Cal pre-release application partnerships:

- CCFs contract with CBOs to enroll eligible individuals incarcerated within their facilities. The CBOs work within the CCF, allowing them to have access to jail facilities, security clearance, and safety assurances. The CCF screens for Medi-Cal during booking, allowing the CBO to begin the application process during intake, which enables the CWD to process the application and effectuate coverage if there is an early release.
- CCFs contract with a third-party vendor to complete pre-release applications for individuals incarcerated within their facilities. The contractors are healthcare professionals who have been trained on the pre-release application processes and have jail security clearance, allowing them to access incarcerated individuals on set days/times during the week to complete the application process.
- CCFs contract with the CWD to enroll eligible individuals incarcerated within their facility. The CCF provides a roster of individuals for pre-release to the CWD. The CWD identifies individuals from the list who are not enrolled in Medi-Cal and provides a list of these individuals to rehabilitation officers within the CCF to complete the Medi-Cal applications. The rehabilitation officers then send the completed Medi-Cal applications to eligibility workers dedicated to justice-involved enrollment staffed within the CWD for processing.
- In one county, the CCF staff are trained to complete and submit Medi-Cal applications to the CWD.

Designated Entities Assisting with Pre-Release Applications

Pen. Code Section 4011.11 authorizes the Board of Supervisors in each county, in consultation with the county sheriff or the county probation department, to designate an entity or entities to assist a county incarcerated individual with their pre-release application for Medi-Cal. The Board of Supervisors shall not designate the county sheriff as an entity to assist with pre-release applications unless the county sheriff agrees to perform that function. Any community-based organization designated as an entity to assist incarcerated individuals with their pre-release applications must be approved by the jail administrator or their designee. The law also clarifies that designated entities may not perform a Medi-Cal eligibility determination or redetermination unless they are the CWD.

Designated entities cannot sign a pre-release application on behalf of the incarcerated individual unless the incarcerated individual appoints the designated entity as their AR.

(Refer to ACWDLs [18-26](#), [18-26E](#), [20-08](#) and [23-15](#)). A designated entity only has the authority to sign a Medi-Cal application on behalf of an incarcerated individual when applying for MCIEP inpatient services off the grounds of the public institution. The CWD or CCF/CDCR may not apply for Medi-Cal on behalf of the individual without their knowledge and consent, except for requests for MCIEP.

Throughout this section, DHCS uses the term “CCF/TCMP Benefit Worker”, but it is implied that any action listed for CCF may be accomplished by the CCF’s designated entity.

Authorized Representative (AR)

An AR designation is not required for a CCF or a TCMP Benefit Worker to assist the incarcerated individual or youth or youth’s family with completing and submitting a pre-release application for an incarcerated individual or youth. This is because the incarcerated individual or youth’s parent/legal guardian will be signing the pre-release application.

However, during the application process, the inmate or youth may designate an individual or an organization as an AR to act responsibly on their behalf in assisting with their application, renewal of eligibility, and other ongoing communications with the CWD. TCMP Benefit Workers are almost always designated as the applicant’s AR on the application to simplify the application process for CDCR inmates. For these incarcerated individuals, CWDs must only receive requests from the TCMP Benefit Worker/AR and may only share information with the AR listed on the Medi-Cal application and the contact listed on the CDCR TCMP coversheet. A CDCR TCMP sample coversheet can be accessed via the [Medi-Cal Incarceration Policy Resources](#) page. Refer to ACWDLs [18-26](#), [18-26E](#), [20-28](#), and [23-15](#) for more information on AR policy.

Release of Information (ROI)

A ROI is not required for a CCF or TCMP Benefit Worker to submit an application on behalf of an inmate or youth, or for any communication between them and CWD in order to complete pre-release application and enrollment processes. As part of the TCMP Benefit Workers process to support CDCR, a Release of Information is completed by the inmate and submitted to the CWD with the pre-release application package.

Authorization for Release of Information [CDCR Form 7385-A](#) identifies the additional persons and organizations authorized to receive the individual’s information, the types of information being requested, and the dates for which the authorization is valid. Additionally, the CDCR Form 7385-A identifies the specific date in which the member is canceling the authorization. The agreement between the member and CDCR routinely

allows up to one (1) year from date of intake before the authorization expires, to assist justice-involved individuals with benefits follow-up. This expiration date is reflected on the CDCR Form 7385-A [45 CFR § 164.508 (c)(1)(v) & CA Civ. Code § 56.11 (h)].

During the time the release of information is valid, regardless if the individual was released from incarceration, CWDs may receive requests for the outcome of the eligibility determination outcomes and confirmation of the effective date. The CWD can release additional information, as requested, if authorized by the CDCR Form 7385-A.

Incarcerated Individuals Already Receiving Medi-Cal

In the pre-release application process, if it is verified that an applicant is currently receiving Medi-Cal, the CCF/TCMP Benefit Worker must notify the relevant CWD in a timely manner. This will allow the CWD to confirm that the member's Medi-Cal information is up to date and accurate, including the individual's address where they will reside upon release and their incarceration information (incarceration date and expected release date, if known).

A coversheet or transmittal form can be used when reporting incarcerations to CWDs for inmate or youths who are already enrolled in Medi-Cal. For ease of identification, CCFs should include all of the information listed below in step #4 of the application process for TCMP/CCFs, as well as the Client Index Number (CIN)/Social Security Number (SSN) for the inmate or youth.

- The CWD must ensure that the CCF/TCMP Benefit Worker is provided the member's CIN and issue a temporary or plastic Benefits Identification Card (BIC) for the member as needed.
- If the member has been incarcerated for at least one (1) full calendar month and is anticipated to be incarcerated through a 10-day noticing period, the CWD shall report the incarceration and suspend their Medi-Cal benefits, even if the individual is expected to be released within the same month as the suspension's effective date. This allows DHCS to recoup any managed care capitation that was paid during any full months the member was incarcerated without CWDs or DHCS' knowledge.

Example: The CWD is informed on 12/02/2023 of a member who has been incarcerated within the CCF since 7/04/2023. The CCF informs the CWD that the member is expected to be released on 12/24/2023.

- o The member was incarcerated for the full calendar months of August through November, and they are expected to remain incarcerated beyond the 10-day noticing period. The CWD would report the incarceration date of 7/04/2023 to suspend the benefits after the 10-day noticing period. MEDS will suspend benefits and

recoup any managed care plan capitation payment paid during the months of August through November. Upon release, the CWD will activate benefits.

Mailing Addresses During Incarceration

For incarcerated adults and youth who are in a single-member household (e.g., household of one), their mailing address must be updated to the correctional facility's actual physical address, when known. CWDs must update this when reporting the incarceration. This will ensure that NOAs and other Medi-Cal communication is mailed to the correct location during incarceration and for incarcerated youth, this is necessary in order to comply with federal SUPPORT ACT regulations for eligible juveniles. Upon the adult or youth's release from incarceration, the correctional facility's address can be removed.

Intercounty Transfers (ICTs)

An ICT is only required if the individual intends to permanently reside in another county from where their Medi-Cal is established upon release of incarceration or required treatment. An ICT is **not** needed when the member is incarcerated or while residing in a residential treatment facility in another county.

Example 1: An individual with their Medi-Cal established in CWD A, is incarcerated in CWD B but plans to reside in CWD A after release.

- An ICT is not required simply because the individual is incarcerated in a different county than where their Medi-Cal is established.
- CWDs should follow existing policy for temporary moves.

Example 2: An individual with their Medi-Cal established in CWD A and was incarcerated in CWD B but is court-ordered to attend a residency treatment program in CWD B as a condition of their release and plans to reside in CWD A after completing treatment.

- An ICT is not required because the individual is required to obtain treatment in a different county than where their Medi-Cal is established.
- CWDs should follow existing policy for temporary moves.

If an ICT is needed, CWDs should follow existing policies and timelines. However, when feasible, DHCS recommends the ICT be initiated and completed prior to the individual's release to ensure they can appropriately access care in their community upon release.

Example 3: An individual with their Medi-Cal established in CWD B was incarcerated in CWD B but plans to reside in CWD A after being released from incarceration.

- An ICT is required to establish Medi-Cal benefits for the member within CWD A, where they intend to reside upon release.

Suspension of Benefits Policy

Individuals incarcerated for more than 28 days while receiving Medi-Cal benefits are subject to the suspension of benefits policy. It is the responsibility of the CCFs and CDCR to promptly notify CWDs or DHCS of the incarceration/releases of Medi-Cal members. CWDs or DHCS will use the reported incarceration date to suspend their Medi-Cal benefits and will activate them upon notification of the individual's release from incarceration. For more information see the *Medi-Cal Suspension Policy and Processes* section of this ACWDL.

Pre-Release Application Roles and Responsibilities

CWDs, CCFs, and CDCR each play critical roles and have their respective responsibilities in the facilitation of successful pre-release application processes for incarcerated adults and youth. Below are the key elements of an effective pre-release Medi-Cal application process for each.

County Welfare Departments

CWDs role is to accept and process pre-release applications from CCFs and CDCR for any incarcerated adult or youth. Additional CWD responsibilities related to this include:

- Establish points of contacts (POCs) responsible for Pre-Release Medi-Cal Applications and Suspension of Benefit processes and collaborate with CCFs and TCMP Benefit Workers to establish streamlined communication and processes between organizations.
- Establish a secure form of communication (e.g., encrypted email, secure file transfer protocol, secure collaboration platforms, secure cloud storage services secure data systems, etc.) to send and receive information between both organizations. The method must ensure that information is exchanged effectively and expeditiously in a manner that protects the confidentiality and integrity of the data.
- Establish preferred locations for pre-release electronic and paper applications to be submitted.

CDCR TCMP Benefit Workers

The TCMP Benefit Worker's role is to facilitate the pre-release application process for individuals incarcerated within CDCR facilities being released under PRCS or DAPO. Additional TCMP responsibilities related to this include:

- Establish points of contacts responsible for Pre-Release Medi-Cal Applications and Suspension of Benefit processes and collaborate with CWDs to establish streamlined communication and processes between organizations.
- Establish a secure form of communication (e.g., encrypted email, secure file transfer protocol, secure collaboration platforms, secure cloud storage services secure data systems, etc.) to send and receive information between both organizations. The method must ensure that information is exchanged effectively and expeditiously in a manner that protects the confidentiality and integrity of the data.

County Jails, County Youth Facilities, or Designated Entities

The entity designated by the County Board of Supervisors (CWDs, CCFs, contracted entity, or other designee) must assist county incarcerated individuals with completing the Medi-Cal application and submitting it, or otherwise assisting in, their enrollment in Medi-Cal. Additional CCF responsibilities include:

- Establish POCs responsible for Pre-Release Medi-Cal Applications and Suspension of Benefit processes and collaborate with CWDs to establish streamlined communication and processes between organizations.
- Establish a secure form of communication (e.g., encrypted email, secure file transfer protocol, secure collaboration platforms, secure cloud storage services secure data systems, etc.) to send and receive information between both organizations. The method must ensure that information is exchanged effectively and expeditiously in a manner that protects the confidentiality and integrity of the data.

Statewide Medi-Cal Pre-Release Application Contacts

To assist with the facilitating Medi-Cal pre-release application and suspension of benefit processes, DHCS maintains two different contact lists:

- Statewide Medi-Cal Pre-Release POCs for counties and CCFs
 - Maintained via: CalAIMJusticePreReleaseApps@dhcs.ca.gov
- CDCR-TCMP Pre-Release & County POC
 - Maintained via: MCIEP@dhcs.ca.gov

CCFs, CWDs, and CDCR must supply DHCS with the name, address, phone number, fax number, and email address of contacts and a designated back-up(s) from their respective organizations. Updates to contacts or requests for current contact lists can be made using the email addresses listed above. These lists are updated as changes are reported so it is recommended to obtain them from DHCS on a regular basis.

Pre-Release Application Processes

As stated in Title 42 CFR, Section 435.907, Medi-Cal applications should be accepted by CWDs through various means such as mail, online, telephone, fax, or in-person. CCFs, their delegated entities, and TCMP Benefit Workers may have different methods for filling out and submitting the Medi-Cal application on behalf of the incarcerated individual or youth. DHCS encourages CWDs to collaborate with CCFs, their designated entities, or TCMP Benefit Workers to establish preferred processes for the submission of pre-release applications in any format.

Accelerated Enrollment (AE)

To help the CWDs and CCFs navigate the potential operational challenges associated with members who have short-term incarceration stays, DHCS strongly encourages CCFs/CDCR to use Medi-Cal AE pathways through BenefitsCal or Covered California to expedite Medi-Cal enrollment in facilities where individuals do not have known release dates and/or are expected to stay for only short periods of time.

Medi-Cal's AE program allows new Medi-Cal applicants to receive real-time "conditional eligibility" and immediate access medical services, if applicable. DHCS grants AE to Medi-Cal applicants who apply through the [CoveredCA.com](https://www.coveredca.com) web application or by phone to Covered California's service center and applications submitted through [BenefitsCal.com](https://www.benefitscal.com) web application.

Unlike presumptive eligibility, AE provides Medi-Cal applicants with temporary full-scope benefits while their self-attested eligibility information, including income, is being verified; those benefits continue until the final eligibility determination is made on the application. Individuals will be approved or denied Medi-Cal following the normal application processing rules.

DHCS strongly encourages CCFs or their designees to leverage AE for incarcerated individuals for whom it would be infeasible to complete the Medi-Cal application and enrollment process before the individual's release date (e.g., individuals with very short incarcerations or unpredictable release dates).

Incarcerated Youth

To streamline the pre-release process for incarcerated youth, county youth correctional facilities or their designated entities should engage with the youth's parents or legal guardians early on in the process to obtain their permission to apply for Medi-Cal on behalf of the youth.

The county youth correctional facility must notify the parent or legal guardian, in writing, of its intention to obtain Medi-Cal benefits for the youth and request a signature on the pre-release application to provide consent for applying for Medi-Cal. The county youth

correctional facility will give the parent or legal guardian 30 days to respond to the request.

- If the parent or legal guardian informs the facility that they do not want an application to be submitted on behalf of their child, no application will be submitted.
- If the parent or legal guardian does not respond, the county youth correctional facility must submit the application without a signature and the CWD will process the application.
 - CWDs are required to make two (2) additional attempts to contact the applicant for the purposes of gathering all information necessary to determine eligibility. In the case of an incarcerated youth, these attempts will be made to contact the parent or legal guardian. ([ACWDL 22-12](#))
 - County youth correctional facilities should be aware that the application will be denied if the parent or legal guardian fails to cooperate or does not respond to the request for information needed for the CWD to determine eligibility.

Ward of the Court

When a minor becomes a ward of the court, the court takes control and responsibility away from the parents/guardian to oversee the care of the minor. California Rules of Court provision 5.790(h) addresses wardship orders and states that a court may make a reasonable order for the medical treatment of a child adjudged a ward of the court. Depending on the circumstances of the court's order in declaring the juvenile a ward, a judge is able to overrule a parent's decision to opt-out of Medi-Cal if it is in the best interest of the child under Rule of Court 5.790(h).

If the incarcerated youth is under 18 and a ward of the court, the county youth correctional facility and CWD must collaborate, as needed, to determine if an application should be submitted on behalf of the minor, based upon the applicable existing court order. Each situation will need to be assessed on a case-by-case basis.

Example: The court declares the juvenile a ward of the court and sentences the juvenile to 60 days confinement in the juvenile detention center. Per WIC § 14029.5, the county youth correctional facility attempted to obtain consent to apply for Medi-Cal benefits prior to the juvenile's release, but the parents refuse to cooperate and opt-out of coverage. Since the juvenile is now a ward of the court, the parents are no longer considered the juvenile's legal guardian(s). Either the court or a third party appointed by the court will be responsible for making decisions that serve the best interests of the child. Since health coverage is in the best interest of the juvenile, the county youth correctional facility or the

CWD can reasonably move forward with submitting and processing the pre-release Medi-Cal application without parental consent.

Application Process Steps for CCFs (or Designated Entities) and TCMP Benefit Workers

For individuals and youth incarcerated in CCFs, it is recommended to complete this process at or near intake to ensure those incarcerated short-term have an opportunity to receive assistance with enrolling in Medi-Cal. At a minimum, the application should be submitted at least 135 days before release, if the release date is known, to provide CWDs with sufficient time to complete their eligibility determination.

As part of the pre-release application process, the CCF/TCMP Benefit Workers must:

1. Identify individuals who are interested in applying for Medi-Cal.
 - CCFs must ask all incarcerated individuals if they have health insurance and collect responses to health-related screening questions to identify individuals interested in applying for or already being enrolled in Medi-Cal.

Note: If the incarcerated individual or youth plan to move to another state upon their release, a Medi-Cal pre-release application is not required. Instead, the CCF will provide the individual with Medicaid application information (e.g., website) for the state where they will reside and if necessary, assist them with the application process.

2. Verify the current Medi-Cal enrollment status of the individual or youth, either through DHCS' Eligibility Verification Systems (EVS) or in collaboration with the CWD. See [MEDIL 23-13](#) for more information on EVS.
 - If the incarcerated individual or youth is **already enrolled** in Medi-Cal, the CCF/TCMP Benefit Worker must verify with the appropriate CWD that the member's Medi-Cal information is up to date and accurate, including the individual's address where they will reside upon release and their incarceration information (incarceration date and expected release date if known). The CCF/TCMP Benefit Worker must report or assist the member with reporting any necessary changes to CWD. This may also be accomplished using a coversheet or transmittal form.
 - If necessary, obtain the member's CIN from the CWD and request for a temporary or plastic BIC to be issued for the member.
3. Meet with the incarcerated individual to answer any application questions and assist them in completing the pre-release application, along with gathering other required

documentation that may be beneficial to the CWD to process the pre-release application, as needed.

- Applications should at minimum include the applicant's full name, date of birth, social security number, citizenship status, address where the individual intends to reside upon release, and their mailing address.
- If an incarcerated individual is in a single-member household (e.g., household of one), DHCS recommends to use the correctional facility's actual physical address as the member's mailing address, if known. Note: When mailing to the CCF/CDCR facility, an Inmate Number or other identifying information for the member may be required.

For incarcerated youth, the county youth correctional facility must be listed as the mailing address.

Important considerations when completing the pre-release application:

- If the incarcerated individual is 18 years of age or older, the incarcerated individual or youth can apply on their own case.
- If the individual is under 18 years of age and considered part of their parents' household for tax purposes, the parent or legal guardian is required to sign the Medi-Cal Application as detailed in WIC 14029.5. See *Incarcerated Youth* above for more information.

4. Complete the coversheet/transmittal to submit with the pre-release application. This will help to facilitate the application process and ensure that the necessary information is communicated effectively. The coversheet/transmittal or other means of communication with the CWD must include the following minimum information:
 - The name and address of the CCF, along with the contact information for the CCF/TCMP Benefit Worker or designated point of contact.
 - The inmate or youth's full name (including any known aliases), inmate number, date of birth, social security number, county and address where the individual intends to reside, the mailing address, and contact information of any Authorized Representative or parent or legal guardian (if applicable).
 - The date of incarceration and expected or actual release date (if known or applicable).
 - **Note:** A known release will be considered the actual release date, unless CCF/TCMP Benefit Worker notifies the CWD of a change to this date.

- Any other identification documentation or information (such as jail or prison identification) that may be beneficial to the CWD to process the pre-release application.
 - A coversheet or transmittal form can also be used when reporting incarcerations to CWDs for inmate or youths who are already enrolled in Medi-Cal. For ease of identification, CCF/TCMP benefit workers should include all the information above as well as the CIN/SSN for the inmate or youth.
5. Submit the completed application and coversheet/transmittal to the CWD in the county where the incarcerated individual is expected to reside upon their release. Once the application is submitted, the standard determination process generally can take up to 45 days. If the individual is qualifying based on a disability, it can take up to 90 days.
- If submitting the application through BenefitsCal or Covered California's electronic application methods, the application will be routed to the appropriate CWD based on the residence address on the application.
 - A coversheet/transmittal can be uploaded as a verification document with the electronic application to designate it as a pre-release application and streamline the submission of the additional information from the coversheet.
6. Communicate with the CWD and working with the applicant, when necessary, in order to assist with trouble-shooting application questions, requests for verification or for follow-up information, and any other items necessary for the CWD to process the pre-release application.
- Any subsequent changes to information included on the pre-release application should be reported to the CWD as soon as the CCF/TCMP Benefit Worker becomes aware of the change. If a change of address requires an ICT, coordinate with the CWDs as needed.
7. Inform the applicant about the outcome of their application and the Medi-Cal eligibility determination made by the CWD, including distributing any NOAs or Medi-Cal documentation received by the facility for the individual or youth.
- CCFs must support individuals in submitting Fair Hearing requests for any adverse actions concerning their Medi-Cal coverage or services through written, online, or phone channels, as needed. DHCS acknowledges that certain modalities may be limited by the capabilities of the CCF and/or the privileges of the individual inmate.
 - For individuals who remain incarcerated during a scheduled hearing date, county agencies must implement virtual Fair Hearings

so that incarcerated individuals may participate via video conferencing or telephone. Many county agencies already have capabilities in place to support virtual court hearings, and DHCS expects these facilities to leverage this existing infrastructure to support Medi-Cal Fair Hearings.

- Assist approved members with completing the Medi-Cal Managed Care Enrollment Packet, if needed.
8. Provide individuals and youth with their CWDs contact information upon release and advise them of their responsibility to report any household changes to their CWD within 10 days. This can be done in person, online, by phone, email, or fax. Examples of household changes that should be reported for their Medi-Cal:
- Get married or divorce;
 - Have a child, adopt or place a child for adoption;
 - Have a change in income (if applicable);
 - Move, or have a change in who is living in your home;
 - Have a change in disability status;
 - Have a change in tax filing status, including change in tax dependents;
 - Are incarcerated (jail, prison, etc.) or released from incarceration;
 - Change your name, date of birth or SSN; and/or
 - Have any other changes that may affect your income or household size.
9. Keep the CWD informed of any changes in the individual or youth's information, especially of those to the member's address, releasing county, and/or their release date. The CCF/TCMP Benefit Worker must make every effort to submit confirmation of release information to the CWD within a week of the expected release date and no later than one (1) business day, except in the case of unplanned releases.
- Request a temporary or plastic BIC for the member from the CWD, if needed, and coordinate with the CWD to determine the best way to ensure the member has access to it upon release.
 - When notifying the CWD of the release, the CCF/TCMP Benefit Worker must provide the following:
 - Full name (and any known aliases);
 - Date of birth
 - CIN/SSN;
 - and known or estimated release date.

Application Process Steps for CWDs

While CWDs may have processes and procedures developed for receiving pre-release applications for incarcerated adults and youth, CWDs must follow standard Medi-Cal rules and procedures during the evaluation and the determination of Medi-Cal eligibility.

As part of the pre-release application process CWDs must:

1. Collaborate with CCFs and CDCR to verify the current Medi-Cal enrollment status of incarcerated adults and youth to assist with identifying individuals who will require pre-release application assistance.
 - If the incarcerated individual or youth is already enrolled in Medi-Cal, the CWD must verify with the CCF/CDCR that the member's Medi-Cal information is up to date and accurate, including the individual's address where they will reside upon release and their incarceration information (incarceration date and expected release date if known). The CCF/TCMP Benefit Worker must work with the member to report any necessary changes to CWD. This may also be accomplished using a coversheet or transmittal form.
 - If necessary, provide the CCF/TCMP Benefit Worker with the member's CIN.
 - Request a temporary or plastic BIC for the member from the CWD, if needed, and coordinate with the CWD to determine the best way to ensure the member has access to it upon release.
2. Assist the CCF/TCMP Benefit Workers with answering questions related to the Medi-Cal program, the pre-release application or required documentation, and/or the suspension of benefits processes.
3. Acknowledge the receipt of Medi-Cal pre-release applications and coversheets/transmittals from CCFs and TCMP Benefit Workers within 10 business days of receiving them.
 - If the CWD receives a paper application for an individual incarcerated within the local county who will be residing in another county upon release, the CWD must accept the paper application and coordinate with the correct county of responsibility to transition the application to the new CWD in a manner that acknowledges the original date of application.
 - When the CWD receives an application for an individual or youth enrolled in Medi-Cal, the CWD must take action on the duplicate application. CWDs should review the duplicate application and use any new information to conduct a CIC redetermination in the open case, if needed.
 - Following standard application processes, the duplicate application may be denied with the denial reason of, "on aid in another case."
4. Communicate with CCFs/TCMP Benefit Workers to process applications and trouble-shooting application questions, requests for verification or for follow-up

information, and any other items necessary for the CWD to process the pre-release application. Refer to ACWDLs [08-07](#) and [22-12](#).

- Notify the CCFs a minimum of 10 days in advance if the Medi-Cal determination is not anticipated to be finalized by the expected release date.

Important considerations for ICTs during the application process:

- If the CWD is informed of a change of address that warrants an ICT for a pending application, the CWD must follow best practices in accordance with Medi-Cal ICT policy. If the timing is such that the individual will be released shortly and the application processing has not been started, CWD A could send the application to CWD B to process. However, if CWD A has already established a case in their county or completed the determination, then this should be treated as a CIC and the case would require an ICT to CWD B.
 - The two CWDs must collaborate to complete the ICT prior to the individual's release, when possible. If necessary, additional coordination can be accomplished through each CWD's ICT coordinator. At minimum, the residence address must be updated to ensure the individual can be enrolled in the accurate managed care plan upon release. Communication between the CWDs and the CCF/TCMP Benefit Worker is vital to understanding the situation and ensuring benefits are established in the correct county where the individual will reside upon release.
5. Notify CCFs/TCMP Benefit Workers and the applicants of the eligibility determination outcome, provide the applicant all necessary Medi-Cal informing documentation (i.e., Notice of Action), communicate the CIN number to the CCF, and issue a BIC if applicable.
- For CDCR inmates, notify the TCMP Benefit Worker of the member's BIC number upon their approval for CDCR to prepare for and coordinate the individual's care as they prepare for release into the community.
 - In cases where there is an immediate need for services upon release, the CWD must issue a temporary BIC for the incarcerated individual or youth and collaborate with the CCF/TCMP Benefit Worker to have it delivered so they can access Medi-Cal benefits upon release.
 - If applicants are approved for Medi-Cal but remain incarcerated, CWDs must take necessary steps to suspend benefits when applicable.
 - Upon approval, if the member is expected to be released within the same month or prior to the 28 days of incarceration while receiving Medi-Cal benefits and the 10-day noticing periods, the CWD is not required to report the incarceration and suspend benefits regardless of how long the individual was incarcerated.

Example: The CWD receives a pre-release Medi-Cal application for an individual on 7/02/2023 who was not receiving Medi-Cal benefits. This individual has been incarcerated within the CCF since 3/05/2023 but expected to be released on 8/05/2023.

The CWD approves the case on 7/24/2023. However, because the member is releasing in less than 39 days (28 days of incarceration + 10 days of noticing), suspension of benefits is not necessary.

6. Provide the CCF/TCMP Benefit Worker with appropriate CWD contact information for member to use for assistance or to report changes upon release.
7. Process CIC redeterminations or ICTs in accordance with standard Medi-Cal policy when alerted of changes to an individual or youth's information by the member or CCF/TCMP Benefit Worker, including forth coming releases from incarceration.
 - If a change of address requires an ICT, the CWD must initiate the ICT, as outlined in ACWDLs [18-02](#), [18-02E](#), and [MEDIL I 23-29](#). Additional details about ICTs during incarceration are detailed below.
8. Document the individual's anticipated or known release date. The known release date shall be considered the release date unless otherwise notified by the CCF/TCMP Benefit Worker, or the member. For same-day or past releases, the CWD must activate benefits no later than one (1) business day of notification from the release. For future release dates, the CWD should take action to report this information to MEDS timely to ensure the Medi-Cal benefits are activated and available on the day of the member's release.
 - Issue a temporary or plastic BIC for the member, if needed, and coordinate with the CCF/TCMP Benefit Worker to determine the best way to ensure the member has access to it upon release.
 - In cases where an immediate need for services upon release is identified, the CWD must follow the standard Immediate Need process in addition to the EW32 transaction to activate Medi-Cal coverage to allow the member access to their benefits on the date the release was reported to MEDS.
9. Remove the CCF/CDCCR address as the mailing address and end date the AR designation for the TCMP Benefit Worker upon the member's release (if applicable).

Issuing of BICs During and After Incarceration

To ensure Medi-Cal members releasing from correctional facilities have access to benefits upon release, DHCS requires CCFs/TCMP Benefit Workers and CWDs to collaborate to ensure the member has access to either a temporary or a plastic BIC

card upon release. However, we acknowledge the challenges of this considering the concerns with BICs in incarceration setting, unknown release dates, expiration date of temporary BICs, and the timing of issuance of the plastic BIC.

An example of a best practice for accomplishing this when the expected release date is known, such as for CDCR incarcerated individual:

- a. CWD will issue a temporary BIC for the member and securely email that to the TCMP Benefit Worker about two weeks prior to the expected release to ensure it will remain valid after their release.
- b. Upon the individual's release from CDCR, the CWD will update member's record to remove the CDCR facility as the individual's mailing address and end-date the AR authority of the TCMP Benefit Worker.
- c. Once the address is updated in MEDS, the CWD will issue a plastic BIC for the member which will be mailed to their residence within the community.

Note: Additional considerations may need to be made to issue a BIC for members who are homeless or do not have a valid address in MEDS.

Maintaining Medi-Cal During Incarceration

Once approved for Medi-Cal, individuals need to remain eligible in order to maintain their Medi-Cal coverage. Medi-Cal members must report any household changes to their CWD within 10 days. Upon receipt of the information, CWDs will determine if the information requires a CIC redetermination to assess whether the individual remains eligible for Medi-Cal.

The following are examples of a member's changes in circumstance that require an eligibility redetermination, as they may affect eligibility:

- Reported or discovered changes in income;
- Reported or discovered changes in household size or tax filing status; or
- Reported or discovered change in citizenship or immigration status.

Some changes, such as a change in name, address, or telephone number, may not impact the member's Medi-Cal eligibility or warrant the need for a CIC redetermination.

The CCF/TCMP Benefit Worker must assist the Medi-Cal member with reporting any changes to the CWD and provide any support necessary for them to complete any required CIC redeterminations. CWDs must collaborate with the CCF/TCMP Benefit Worker as needed to complete this process. For more information on CIC Redeterminations, please see the *Redeterminations for Individuals who are Incarceration or Recently Released from Incarceration* section of this letter.

Address Changes that Require an ICT During Incarceration

An ICT is only required when there is a permanent move to a new county. If it is determined that the incarcerated individual or youth intends to permanently reside in another county from where their Medi-Cal is established upon release of incarceration or required treatment, an ICT is required following existing ICT policies and procedures. An ICT can be completed while the individual's benefits are suspended.

CWDs and CCF/TCMP Benefit Workers must collaborate to complete the ICT prior to the individual's release, when possible. But, at minimum, the residence address must be updated to ensure the individual can be enrolled in the accurate managed care plan upon release. The original CWD and/or CCF/TCMP Benefit Worker shall ensure the new CWD has all the necessary incarceration information to fulfill their pre-release application and suspension of benefit responsibilities for the member.

Note: The use of the Statewide Medi-Cal Pre-Release Application Contacts and CDCR-TCMP Pre-Release & County POC lists may be helpful in identifying appropriate CWD, CCF, or TCMP Benefit Worker contacts for these situations.

An ICT is **not** required when an individual is incarcerated or ordered to receive treatment in another county. There are situations where a person may temporarily receive services in a county other than the county of responsibility and where an ICT is not required, such as an example a member who, upon release from incarceration, temporarily establishes residence in one county as a condition of parole, temporarily resides in a residential treatment facility in another county, is residing temporarily in a foster care facility, or is a college student residing in a county other than their primary residence for the duration of the school year. If the Medi-Cal member intends to return to their prior county upon completion of incarceration or treatment, an ICT is **not** required. CWDs would follow existing ICT policy for temporary stays.

Example 1: An individual with their Medi-Cal established in CWD A, was incarcerated in CWD B, but is court-ordered to attend a residency treatment program in CWD B as a condition of their release and plans to reside in CWD A after completing treatment.

- An ICT is not required because the individual is incarcerated in a different county than where their Medi-Cal is established.
 - CWDs should follow existing policy for temporary moves.
- An ICT is not required because the individual is required to obtain treatment in a different county than where their Medi-Cal is established.

Example 2: An individual with their Medi-Cal established in CWD B was incarcerated in CWD B but plans to reside in CWD A after being released from incarceration.

- An ICT is required to establish Medi-Cal benefits for the member within CWD A, where they intend to reside upon release.

Behavioral Health Services during an ICT

Given the complexity of these scenarios, DHCS issued Behavioral Health Informational Notice [24-008](#) to provide County Behavioral Health Plans guidance on how either the county of residency or county of responsibility can bill for Medi-Cal for Behavioral Health services during an ICT or the above mentioned scenarios when the member resides in a county other than their county of responsibility. Additional clarification guidance and technical assistance will continue to be provided to county agencies in this area.

Managed Care Plan Enrollment during ICT

The member's county of residency is used to determine appropriate managed care enrollment. Once an ICT is initiated, the CWD must update the address and residence county in MEDS. If applicable, the CWD or the member can work with the DHCS Managed Care Office of the Ombudsman to request an expedited managed care enrollment within their new county. Additional information can be found on their website: [Office of the Ombudsman](#).

DHCS acknowledges that certain ICT situations involving justice-involved individuals can be complicated and may require individualized assessments. DHCS is available to support CWDs and CCF/TCMP Benefit Workers by providing technical assistance for any scenario that may require additional input or clarification. DHCS will work with the CWDs to explore additional ICT scenarios and issue clarification guidance as needed.

Preparing for a Member's Release from Incarceration

When there is a release from incarceration, there are a few steps that CCF/TCMP Benefit Workers and CWDs can take to prepare for the individual's release into the community. In scenarios in which the release date is known to CWDs and CCF/TCMP Benefit Workers, these processes can be prepared for in advance.

- Ensure the member has access to their temporary or plastic BIC upon release.
- Ensure the member's release date is promptly communicated to the CWD to allow the CWD to close out the incarceration and active the member's benefits.
 - In cases where an immediate need for services upon release is identified, the CWD must follow the standard Immediate Need process in addition to the EW32 transaction to activate Medi-Cal coverage to allow the member access to their benefits on the date the release was reported to MEDS.

Redeterminations at Release

If the incarcerated adult or youth has not had an eligibility determination or redetermination completed within the last 12 months, a redetermination is required prior to their release to ensure they still qualify. If the information available to the CWD is sufficient to determine that the individual is still eligible, no contact with the member is required. If a redetermination is needed for the incarcerated individual and it cannot be completed before their release from incarceration, due to administrative circumstances beyond the CWD's control, the CWDs must activate their benefits and complete the redetermination as expeditiously as possible, which generally would be no more than 60 days after release.

If the incarcerated adult or youth has had an eligibility determination or redetermination completed within the last 12 months, one would not be required, barring any other known changes in circumstance that may affect their eligibility. If a CIC redetermination is needed, CWDs must perform it following existing Medi-Cal policies and procedures. Reference [ACWDL 22-33](#). For more information, please see the *Redeterminations for Individuals Who Are Incarcerated or Recently Released from Incarceration* section of this letter.

Notification of Activation of Benefits Upon Release from Incarceration

CCFs/TCMP Benefit Workers are to notify CWDs as soon as they become aware of the expected release date for an incarcerated individual. The CCF/TCMP Benefit Worker must make every effort to submit confirmation of release information to the CWD within a week of the expected release date, and no later than one (1) business day, except in the case of unplanned releases.

In those situations, the CCF must provide as much notice as possible, so that the CWD can close the incarceration period and activate (unsuspend) available benefits, as appropriate. Once notified that an inmate or youth has been released from incarceration, CWDs must activate (unsuspend) Medi-Cal benefits on the day of release. For more information, please see the *Activation of Benefits Upon Release from Incarceration of the Medi-Cal Suspension Policy and Processes* section of this letter.

12. REDETERMINATIONS FOR INDIVIDUALS WHO ARE INCARCERATED OR RECENTLY RELEASED FROM INCARCERATION

If an individual who is incarcerated or recently released from incarceration is subject to an annual redetermination or a CIC redetermination, standard Medi-Cal policies and procedures must be followed. Reference [ACWDL 22-33](#).

Mailing Guidance for Incarcerated Youth

For incarcerated youth, who are not tax dependents and in a single-member household (e.g., household of one), the request for information must be sent directly to the correctional facility, if known, otherwise, to the last known physical address in MEDS.

For incarcerated youth in a household on an active family case, the request for information must be sent to both the head of household last known physical address in MEDS and the correctional facility, if known, where the eligible juvenile resides.

If the incarcerated youth is a tax dependent enrolled on a family Medi-Cal case, the request for information should be mailed to the address of the head of household or AR (if applicable).

Note: When mailing to the CCF/CDCR facility, an Inmate Number or other identifying information for the member may be required.

Mailing Guidance for Adults

For incarcerated adults, the request for information must be mailed to the last known address listed in MEDS or the correctional facility, if known.

If an incarcerated adult is in a single-member household (e.g., household of one), DHCS recommends CWDs to use the correctional facility's actual physical address as the member's mailing address, if known.

Note: When mailing to the CCF/CDCR facility, an Inmate Number or other identifying information for the member may be required.

Annual Renewal Redeterminations

Under the SUPPORT Act, when an incarcerated youth's eligibility is suspended, they are **not** required to undergo annual renewal determinations while they are incarcerated.

To align with California Advancing and Innovating Medi-Cal (CalAIM) Initiatives and the SUPPORT Act policies for eligible juveniles, effective January 1, 2023, **all** incarcerated individuals (adult or youth) are **not** required to complete annual renewal determinations during the period in which they are incarcerated.

DHCS acknowledges CalSAWS does not currently have the functionality to support the no annual renewal policy for both incarcerated and non-incarcerated household members. DHCS is collaborating with our CWD partners and CalSAWS to implement automation of this policy and encourages CWDs to always enter incarcerations in CalSAWS to ensure the individual's incarceration status is reflected accurately.

Until such time, households that contain an incarcerated individual and other active Medi-Cal members requiring an annual renewal should proceed with the renewal process. The system workarounds outlined in this section assist to establish feasible options within CWDs to protect the incarcerated individual's Medi-Cal eligibility. These workarounds are options in-keeping with the policy, and CWDs can opt to use their own best practice workarounds with these considerations.

Medi-Cal Case as a Single Household/Household of One

Annual redeterminations are **not** required for **all** incarcerated individuals, therefore once an incarcerated individual is on their own case, the CWD can exercise due diligence to ensure that the incarcerated individual does not undergo an unnecessary annual redetermination while they remain incarcerated.

Medi-Cal Case with Other Family Members

DHCS acknowledges CalSAWS does not currently have the functionality to support the no annual renewal policy for cases with mixed incarcerated and non-incarcerated household members. Counties should proceed with the renewal process for households that contain an incarcerated individual and other active members who require an annual renewal until DHCS issues further policy guidance regarding redeterminations for mixed households with incarcerated and non-incarcerated members.

During the family's annual redetermination, CWDs must determine if the incarcerated individuals are claimed as a tax dependent. If the incarcerated individual is **not** claimed as a tax dependent or included as part of the tax household, the CWD can create a separate case for them, and they do **not** have to undergo the redetermination process.

If the incarcerated individual is claimed as a tax dependent or is part of a family tax household in which the family is determined to be ineligible, (e.g., over income) during the family's annual renewal, the CWD is required to evaluate the incarcerated individual's eligibility for all other Medi-Cal programs, following current Medi-Cal rules.

Example: The incarcerated individual (adult or youth) is part of a family household, the incarcerated individual is also a tax dependent, and the family has not reported otherwise. The CWD should follow standard Medi-Cal rules, and if the incarcerated individual remains a tax dependent and is not eligible for other Medi-Cal programs, then the CWD can discontinue the incarcerated individual since they are part of the tax household. However, before discontinuing the incarcerated individual who is a member of a household case, the CWD must determine if the incarcerated individual can be put on their own case to preserve the eligibility and suspension until release from incarceration.

If the incarcerated individual, part of a family household, ages out of their current Medicaid eligibility group, the CWD should follow standard Medi-Cal rules to determine whether that event may impact the eligibility of other household members, and redetermine their eligibility, if appropriate and consistent with 42 CFR § 435.916.

Change In Circumstance (CIC) Redeterminations for Incarcerated Individuals

As detailed in [ACWDL 22-33](#), WIC Code §14005.37 states that a members' eligibility, "shall be promptly redetermined whenever the CWD receives information about changes in a member's circumstances that may affect eligibility for Medi-Cal benefits." Incarcerated individuals whose Medi-Cal benefits may or may not be suspended are not precluded from this requirement and Medi-Cal suspension of benefits does not prevent a redetermination into a different Medi-Cal program while under suspension. Incarceration by itself is not a change that requires a redetermination as an individual's incarceration status does not preclude them from being eligible for Medi-Cal. Therefore, if the basis for the Medi-Cal member's eligibility changes during an individual's incarceration, a CIC redetermination must be processed.

The incarceration of a youth in a public institution generally would not require a CIC redetermination for any household members whose financial eligibility is based on MAGI. An exception to this general rule would occur if the CWD received updated information, and it is not reasonable to assume the eligible juvenile will return to the same household following their release from the correctional facility.

No Longer Meets Program Requirements during Incarceration

A CIC redetermination is required for incarcerated adults and youth for situations in which they no longer meet program requirements for the Medi-Cal eligibility group they are enrolled in, (e.g., aging out of Kinship Guardianship Assistance Payment (Kin-GAP)). This includes when an individual's California Work Opportunity and Responsibility to Kids (CalWORKs) is discontinued due to their incarceration.

Once an individual no longer meets the eligibility criteria of a Medi-Cal program, the individual must not remain in that aid code beyond the program's requirements. Federal and state statutes require the CWD to exercise due diligence when searching for other programs for the incarcerated individual. CWDs must evaluate the individual for all other Medi-Cal programs before discontinuing them from Medi-Cal benefits. Once the CIC redetermination is completed, if it results in the incarcerated individual being determined eligible under another aid code, the benefits under the new aid code must remain suspended.

Example 1: An incarcerated individual is enrolled in Medi-Cal under the Kin-GAP Program, is tax dependent on a family Medi-Cal case and is turning 20 years of

age. The CWD must evaluate the juvenile for eligibility in all other Medi-Cal programs, following current Medi-Cal rules. If the CWD has evaluated the juvenile for all other Medi-Cal programs, and the juvenile is still ineligible, the CWD can discontinue the juvenile following standard Medi-Cal rules for discontinuance.

Example 2: An incarcerated youth with suspended Medi-Cal benefits in a Medi-Cal program such as Former Foster Youth (FFY), Foster Care (FC), or Continuous Eligibility for Children (CEC) is no longer in compliance with program requirements. CWDs are required to follow all eligibility and CIC redetermination regulations to guarantee that the qualified youth is enrolled in the most suitable Medi-Cal program, provided they meet the eligibility criteria. Before ending eligibility, CWDs must confirm that the incarcerated youth is not eligible under any other Medi-Cal program.

Additional Considerations: MAGI Household Composition

In general, under MAGI, the household composition for incarcerated individuals and their families remains unchanged for the length of the incarceration. Medi-Cal policies and procedures for household composition rules continue to apply (see 42 CFR §435.603). CWDs must follow standard Medi-Cal policies and procedures for determining household composition involving an incarcerated adult or youth. A few nuance examples from [ACWDL 20-10](#), which may impact incarcerated individuals are highlighted below:

Temporary Absence

The Internal Revenue Service (IRS) considers an absence to be temporary if it is reasonable to assume the absent person will return to the home after the temporary absence and the home is maintained during the person's absence; it is not limited to a specific length of time. The CWD must assume that the absent person will return home unless the CWD has information to the contrary.

The CWD should apply temporary absence rules to both tax-filing and non-tax-filing households. The rest of the household is obligated to report if the household experiences other changes in circumstances that may affect eligibility, including an increase in household size or income. The CWD must make a redetermination of eligibility for the household members, consistent with 42 CFR. § 435.916(d). (WIC § 14005.37)

Basic Rules for Married Individuals

Whenever a couple is married and expects to file a joint tax return, regardless of whether they are living together in the same household, the spouses will be counted in

each other's household for the purposes of making a MAGI Medi-Cal determination in accordance with 42 CFR Section 435.603(f)(1) and (4).

However, if the spouses will not be filing jointly in the next year, it will be considered a reasonably predictable change in income consistent with 42 CFR. Section 35.603(h)(3), and the spouses will not be required to be included in each other's MAGI Medi-Cal household."

Incarcerated Youth

For a youth that resides outside of a parent's home in an institutional facility such as a correctional facility, the household composition will vary depending on if the child will be claimed as a tax dependent.

- **Incarcerated youth not claimed as a tax dependent:** If an incarcerated youth is not claimed as a tax dependent or if the youth is uncertain of their expected filing status, the non-Filer Rules shall be used to determine household composition for MAGI Medi-Cal eligibility. As a result, the youth's parent(s) would not be included in the household composition (42 CFR §435.603(f)(3)).
- However, for incarcerated youth claimed as tax dependents, [SMD # 21-002](#) provides clarification to Section 1001 of the SUPPORT Act which states:
The IRS defines a stay in a juvenile facility as a "temporary absence" that does not impact household composition for tax filing purposes. These rules provide for flexibility concerning living together in the case of temporary absences, such as an individual's detention in a juvenile facility. Specifically, an individual detained in a juvenile facility may be considered to be temporarily absent from, but remain living in, the home the individual lived in before his or her detention. ([IRS Publication 501](#))

Discontinuance at Annual or Change in Circumstance (CIC) Redetermination

Discontinuances for failure to cooperate may be issued only as a last resort, as long as the CWD follows Medi-Cal rules and sends the request for additional information to the most current address in MEDS.

Considerations Before Discontinuing Family with Incarcerated Member

When an incarcerated adult or youth is a tax dependent in a family household case and after a CIC redetermination, the family is found ineligible for Medi-Cal, the incarcerated individual would also be discontinued as they are part of the tax household. However, before discontinuing the incarcerated individual who is a member of a household case, the CWD must evaluate whether the individual can be put on their own case to maintain their eligibility during their incarceration.

Redeterminations at Release

If the incarcerated adult or youth has not had an eligibility determination or redetermination completed within the last 12 months, a redetermination is required prior to their release. If a redetermination is needed for the incarcerated individual and it cannot be completed before their release from incarceration due to administrative circumstances beyond the CWD's control, the CWDs must activate their benefits and initiate the redetermination as expeditiously as possible, which generally would be no more than 60 days after release.

If they have had a redetermination completed within the last 12 months one would not be required, barring any other known changes in circumstance that may affect their eligibility. If a CIC redetermination is needed, CWDs must perform a CIC redetermination following existing Medi-Cal policies and procedures. Reference [ACWDL 22-33](#).

13. DATA SHARING BETWEEN COUNTY CORRECTIONAL FACILITIES (CCFS) AND COUNTY WELFARE DEPARTMENTS (CWDs)

To ensure successful Pre-Release Medi-Cal Application processes, on-going communication between the CCFs and the CWDs is necessary. Furthermore, state law requires the sharing of information and data between CWDs and CCFs to facilitate the enrollment of incarcerated individuals in Medi-Cal on or before their date of release and to appropriately suspend and activate Medi-Cal coverage for members. This is in accordance with Pen. Code 4011.11(h)(4)) and WIC § 14184.102(j); also see WIC § 14184.800. However, all member/applicant information shared between the CCFs and CWDs, regardless of the transfer method and format (paper, electronic, or other), must comply with applicable state and federal requirements to protect the information of the member/applicant.

Written Agreements between CWDs and CCFs

CWDs and their local CCFs must enter into written agreements for the purposes of data sharing that impose, at a minimum, the same restrictions and conditions, with respect to Medi-Cal Personally Identifiable Information (Medi-Cal PII), that apply to the CWD through the Medi-Cal Privacy and Security Agreement between the CWD and DHCS, released via [ACWDL 19-16](#), or any applicable superseding ACWDL. A "written agreement" is a legal document summarizing the agreement between two or more parties. This could be accomplished in the form of a data sharing agreement, a memorandum of understanding, or any other formal legal contract between the parties.

It is recommend that these written agreements must include at minimum: (1) restrictions on disclosure of Medi-Cal PII, (2) conditions regarding the use of appropriate

administrative, physical, and technical safeguards to protect Medi-Cal PII, and (where relevant) (3) the requirement that any breach, security incident, intrusion, or unauthorized access, use, or disclosure of Medi-Cal PII be reported to the CWD.

If the following language is included in the CWD's written agreement with their local CCFs, the DHCS shall authorize the CWD to share data with any CCF in the state even if they are not a direct party to the CWD's agreement with their local CCF.

"To address situations where an individual in custody of (enter County Correctional Facility name) will be a resident of a county other than the CWD that is signatory to this agreement, the commitments of (enter County Correctional Facility name) under this agreement to protect confidential information shall also apply to confidential information exchanged with such other county. This provision is not intended to impose any new obligation on the county signing this agreement with regard to any inter-county transactions."

Data sharing agreements are **not** required between CWDs and CDCR.

DHCS recognizes that CWDs and their local CCFs may have intricate business relationships, especially in the context of pre-release applications, that may necessitate a more formal agreement than a standard data sharing agreement to properly document and address their complexity.

Release of Information (ROI)

A ROI is **not** required for any communication of Member information between the CCF/CDCR and CWD in order to complete the pre-release Medi-Cal application or suspension of benefit processes.

Please note that a ROI (CDCR Form 7385-A) may be used by Department of Corrections and Rehabilitation for their Transitional Case Management Program (TCMP) pre-release application processes.

Authorized Representative (AR)

An AR is **not** required for any communication of member information between the CCF/CDCR and CWD in order to complete the CCF to submit an application or suspension of benefit processes.

However, at any time the incarcerated individual may designate an individual or an organization as an AR to act on their behalf to assist with their Pre-Release Medi-Cal Application, renewal of Medi-Cal eligibility, and other ongoing Medi-Cal related processes with the CWD.

Please note that for CDCR TCMP pre-release application processes, the TCMP Benefit Worker will be designated by the applicant/member as their AR. TCMP Benefit Workers will include a request in the applicant's coversheet to end the AR upon the member's release from CDCR. Refer to ACWDLs [18-26](#), [18-26E](#), [20-28](#), and [23-15](#) for more information on AR policy.

14. OVERVIEW OF MEDI-CAL APPLICATIONS RECEIVED FROM REENTRY PARTICIPANTS

The purpose of this section is to provide guidance for CWDs processing of Medi-Cal applications received from state prison incarcerated individuals who are participating or residing in the CDCR Custody to Community Transitional Reentry Program (CCTRP) or Male Community Reentry Program (MCRP) facilities.

The Division of Rehabilitative Programs (DRP) of CDCR offers pre-release community programs that are available in various locations across California. These programs allow eligible individuals serving time in state prison to complete their remaining sentence in the community instead of staying in confinement in state prison.

Note: Female Offender Treatment and Employment Program (FOTEP) participants have served their term of incarceration. And, as such, the overview of Medi-Cal applications received from reentry participants does not pertain to FOTEP, but only for participants in CCTRP and MCRP facilities.

CCTRP/MCRP Reentry Background

Pursuant to Medicaid regulation Title 42 CFR Section 435.1010, an inmate of a public institution is defined as "a person living in a public institution" and defines a public institution as "an institution that is the responsibility of a governmental unit or over which a governmental unit exercises administrative control."

The inmate exclusion is a general coverage exclusion and not an eligibility exclusion. Incarceration does not preclude an incarcerated individual from being determined eligible for Medicaid. The CWD must accept applications from incarcerated individuals to enroll in Medi-Cal during the time of their incarceration. If the individual meets all applicable Medi-Cal eligibility requirements, the CWD must enroll the individual effective before, during, and after the time spent in the correctional facility. Once enrolled, however, the CWD must place the incarcerated individual in a suspended eligibility status during the period of incarceration. (WIC § 14011.10.) (See 42 CFR § 435.1009, 435.1010; CMS [SHO # 16-007](#)).

On October 11, 2016, CDCR amended the CCR Title 15, Crime Prevention and Corrections, Division 3 – Adult Institutions, Programs, and Parole, which authorized

CDCR to develop the Alternative Custody Program (ACP). The ACP is a voluntary program developed for eligible incarcerated individuals. It allows them to serve up to the last 24 months of their sentence in the community of confinement in state prison.

In June 2021, CMS determined that once a participant completes Phase 2 and reaches Phase 3, also known as the “Transitional Phase” in a CDCR Post-Conviction Community Reentry Program facility, CCTRP, or MCRP facilities, they will no longer be considered as an incarcerated individual of a public institution for Medi-Cal purposes. This means that they must be considered “released” for Medi-Cal eligibility, enrollment, and benefits purposes. The earliest this can happen is 61 days after arriving at the designated Reentry facility.

CMS acknowledged that CCTRP and MCRP participants entering Phase 3, the “Transitional Phase” of the CDCR Post-Conviction Community Reentry Program, have freedom of movement and association by being able to access jobs and educational opportunities, community resources, and health care services outside of the facility. Based on these clarifications, the processing and adjudicating of Medi-Cal applications for CCTRP and MCRP Reentry facility participants entering the Phase 3 “Transitional Phase” was updated on June 1, 2022. The guidance pertaining to CDCR’s other Post-Conviction Community Programs remains unchanged.

On June 30, 2022, the Public Health Omnibus Bill (SB 184) (Chapter 47, Statutes of 2022), was signed into law. Effective January 1, 2023, the amended WIC § 14011.10(e) requires CWDs to suspend Medi-Cal benefits for all incarcerated individuals of a public institution for the duration of their incarceration. This amendment allows CWDs to activate suspended Medi-Cal benefits upon release from the public institution without requiring a new application, as long as they remain otherwise eligible throughout their incarceration. CWDs must activate benefits for CCTRP/MCRP Phase 3 Reentry participants to ensure access to medical services.

CDCR’s Four-Phased Progressive Program for Custody to Community Transitional Reentry Program (CCTRP) / Male Community Reentry Program (MCRP) Participants

The CCTRP and MCRP utilize a four-phased progressive program that allows each participant the opportunity to work through each phase at their own pace. Each phase is designed to assist the participants’ transitioning back into the community by connecting and accessing them with local resources. Participants are case managed by their assigned Parole Agent and/or their Care Team (Case Manager/Counselor) to achieve personalized goals within given timeframes.

- Phase 1 – “Orientation Phase” (Day 1 through day 30): This time is used to identify treatment and support needs. In this phase, CCTRP/MCRP participants are **not** allowed to leave the facility without a program staff escort.
- Phase 2 – “Treatment Phase” (Starts no earlier than day 31): Participants in this phase may receive “passes” and are allowed to leave the facility without a program staff escort for certain reasons.
- Phase 3 – “Transitional Phase” (Starts no earlier than day 61): Participants in this phase are allowed independent living within the program with Care Team support to adjust to community living. **Participants in this phase are no longer considered incarcerated individuals of a public institution for Medi-Cal purposes and are no longer subject to suspension.**
- Phase 4 – “Discharge Phase” (No later than 30 days before release): It is essential during this phase that the participants are leaving the program with a verified rehabilitation arrangement that shall include housing and/or treatment. During the discharge phase, the Care Team shall coordinate and/or assist the participant in submitting a Medi-Cal application for Medi-Cal benefits if not already established.

Suspension Policy for CCTRP and MCRP

Only participants in Phase 1 and Phase 2 that reside in the CCTRP and MCRP facilities are considered incarcerated individuals for Medi-Cal purposes.

CMS determined that when a CCTRP or MCRP participant reaches Phase 3, they are no longer considered an inmate of a public institution and shall instead be considered “released” for Medi-Cal eligibility, enrollment, and benefits purposes. Therefore, DHCS considers Phase 3 and Phase 4 participants of CCTRP/MCRP as released from incarceration.

CDCR, Division of Rehabilitative Programs (DRP) continues to expand these programs and as new facilities are developed, CWDs may use access the list of CCTRP and MCRP facilities via the [Medi-Cal Incarceration Policy Resources](#) page. DHCS will make every effort to provide updated information of new CCTRP and MCRP facilities as CDCR continues to expand the Community Reentry programs and new facilities as they are developed. If a CWD receives information from a participant and the reentry program is not listed in the link, CWDs are advised to contact MCIEP@dhcs.ca.gov and provide the facility address for verification.

CWDs are advised to verify the phase and address of the applicant when evaluating all Medi-Cal applications received from applicants who participate or reside in CDCR’s CCTRP or MCRP facilities. If there is no address reported, the CWD shall verify with the individual if they are still part of the reentry program. If the participant has completed

Phase 4 and is still without a residence, the CWD must follow Medi-Cal rules pertaining to the current homeless policy and process the application accordingly.

CWDs must follow standard Medi-Cal application policy and determine eligibility for pre-release applications for reentry participants within 45 days of receipt, or 90 days of receipt for individuals being determined eligible based on a disability. Additionally, incarceration by itself is **not** a reason for an individual to be determined ineligible for Medi-Cal.

Note: For individuals residing in a CCTRP or MCRP reentry program, the phase of their reentry is merely to be used to determine if the individual's benefits require suspension (Phase 1 and Phase 2) and/or when to activate benefits when the member is no longer considered an incarcerated individual (Phase 3). Thus, the CWD must enroll the individual in the appropriate Medi-Cal aid code and then suspend the benefits, if applicable in consideration of the short stay of incarceration (more than 28 days) and anticipated to be enrolled in Phase 1 or Phase 2 beyond the 10-day suspension noticing requirement.

Example: The CWD receives a pre-release application of a Phase 2 CCTRP/MCRP participant that is scheduled to be enrolled in Phase 3 within seven (7) days of the approval date. A suspension of benefits is not necessary since the individual must be considered "released" from incarceration during the 10-day noticing period.

CWD Processing Medi-Cal Applications Received from CCTRP/MCRP Facilities

Effective June 1, 2022, CDCR reentry staff must leverage pre-existing county points of contacts (POCs) when submitting pre-release applications for participants residing in CCTRP or MCRP facilities. CWDs must maintain and provide a county POC list to CDCR that includes information about where pre-release applications should be sent.

Below are key elements of an effective reentry participants' pre-release application process for CDCR reentry staff and CWDs:

- Maintain and make available a county specific CDCR Reentry Pre-Release POC list and local CWD Reentry POC list.
- Collaborate to establish streamlined communication and processes between organizations.
- Establish a secure form of communication to transmit and receive information between both organizations. This can be via encrypted email or other forms of secure communication to ensure that information is exchanged effectively and expeditiously.

- If a receiving CWD of the application is not the same as the county of the reentry program facility, the receiving CWD must forward the application and all information collected to the appropriate CWD where the reentry program facility is located and where the participant resides. CWDs may contact the MCIEP mailbox at MCIEP@dhcs.ca.gov to request the CWD point of contact.

CWDs must follow the guidance below when evaluating Medi-Cal applications submitted by reentry program participants, or the participants AR. CWDs must accept applications sent from CDCR reentry facilities and process all Medi-Cal applications based on the information provided and consistent with current Medi-Cal requirements and guidelines.

The Medi-Cal application will include either a CCTRP Coversheet or a MCRP Coversheet (accessible via the [Medi-Cal Incarceration Policy Resources](#) page) informing the CWD that the applicant is participating in the CCTRP or MCRP and the phase they are currently enrolled in along with the anticipated Phase 3 date. The anticipated Phase 3 date is considered valid, unless otherwise notified of a change. The CWD must process the Medi-Cal application and determine eligibility for Medi-Cal coverage consistent with current Medi-Cal requirements and guidelines. The CWD must notify the designated CDCR Reentry staff of the outcome of the eligibility determination or request additional information, if required.

Note: If the application does not include a CDCR CCTRP or MCRP coversheet, the CWD can accept the participant's written or verbal attestation of enrollment in the CCTRP/MCRP program.

Pre-Release Applications for CCTRP/MCRP Participants in Phase 1 and Phase 2

If the CCTRP or MCRP participant is determined eligible for Medi-Cal and is in Phase 1 or Phase 2 of their reentry program, the CWD must enroll the individual in the appropriate Medi-Cal aid code and then suspend the benefits per WIC § 14011.10.

- If the participant is determined ineligible for Medi-Cal, the CWD must deny the Medi-Cal application and issue a Denial NOA to the applicant at the address provided on the application or to the last known address in MEDS, or to the applicant's/AR's address.

Pre-Release Applications for CCTRP/MCRP Participants in Phase 3 and Phase 4

Once the participant reaches Phase 3, known as the "Transitional Phase," they are no longer considered incarcerated in a public institution. Instead, they are considered released from incarceration for Medi-Cal purposes.

If the CDCR CCTRP coversheet or the CDCR MCRP coversheet indicate the participant is enrolled in Phase 3 or Phase 4 and their eligibility has not been previously

established, the CWD must process their application to determine their eligibility for Medi-Cal, following current Medi-Cal rules.

In instances when a CCTRP or MCRP participant in Phase 3 downgrades to a lower Phase or is returned to state prison, CDCR-DRP must notify DHCS. If appropriate, DHCS will suspend the Medi-Cal benefits and issue a Suspension of Benefits NOA through the Incarceration Verification Program (IVP). State MCIEP staff will send a courtesy email to the CWD reentry POC.

Note: The anticipated Phase 3 date is assumed to be considered the actual Phase 3 date, unless CDCR or participant notified otherwise of a change, the CWD must notify and inform the designated CDCR reentry staff of the eligibility determination outcome or request additional information, if needed.

Suspended Benefits

If a reentry participant's eligibility has already been established and their Medi-Cal benefits have been suspended, the participant/member or CDCR reentry staff can verbally attest or in writing confirming that they are enrolled in Phase 3 or Phase 4. This attestation must serve as acceptable proof for the CWD to process the "release" within MEDS for Medi-Cal purposes. The CWD must enter the Release Date in CalSAWS or via the EW32 transaction in MEDS to activate their Medi-Cal benefits and remove the Medi-Cal suspension. The Release Date entered in CalSAWS or on the EW32 transaction will be the same day as the Phase 3 enrollment date provided by the participant or their AR. If the actual Phase 3 enrollment (Release Date) is unknown, the date of the reporting can be considered as confirmation by the individual and can be used as the date of release.

CDCR Reentry Contacts

CWDs must provide to DHCS with updates to the name, address, phone number, fax number, and email address of a contact person and a designated back-up(s) from their respective organizations who are responsible for pre-release application processes via email to MCIEP@dhcs.ca.gov. Current contact lists can be requested using the same email address.

QUESTIONS AND ANSWERS RELATED TO THIS ACWDL

Any relevant clarifications or technical assistance that DHCS provides to CWDs, CCFs, or CDCR related to the policy outlined in this letter will be captured in a Q&A document. The intent of the Q&A document is to clarify existing policy and guidance. The Q&A document for this ACWDL can be accessed here via the [Medi-Cal Incarceration Policy Resources](#) page.

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Any areas identified as new policy or guidance will be released in a stand-alone policy letter.

DHCS CONTACTS

If you have any questions, or if we can provide further information, please contact DHCS using the email contacts listed below.

Medi-Cal Program/Subject Matter:	DHCS Email Address:
• MCIEP Eligibility • EW32 MEDS Technical Assistance • Medi-Cal Incarceration Workgroup • CDCR-CCTRP/MCRP Pre-Release & County Points of Contact (POC) • CDCR-TCMP Pre-Release & County POC	MCIEP@dhcs.ca.gov
MCIEP Billing/claiming	DHCSIMCU@dhcs.ca.gov
• CalAIM Pre-Release Medi-Cal Application Mandate for Counties • Statewide Medi-Cal Pre-Release POC for Counties and CCFs • Eligibility Verification Systems (EVS) for CCFs • Medi-Cal Suspension of Benefits Policy	CalAIMJusticePreReleaseApps@dhcs.ca.gov
PATH Funding for CalAIM Justice Involved Initiatives	Justice-involved@ca-path.com
Intercounty Transfer (ICT)	ICT@dhcs.ca.gov
Former Foster Youth (FFY)	FFY@dhcs.ca.gov
Foster Care	DHCSFosterCareProgram@dhcs.ca.gov

Sincerely,

Sarah Crow
Division Chief, Medi-Cal Eligibility