



TOBY DOUGLAS
Director

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



EDMUND G. BROWN JR.
Governor

August 21, 2013

Medi-Cal Eligibility Division Information Letter No.: I 13-10

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS
ALL COUNTY LOW INCOME HEALTH PROGRAM (LIHP) DIRECTORS

SUBJECT: DELAY OF LOW INCOME HEALTH PROGRAM REDETERMINATIONS
FROM OCTOBER TO DECEMBER 2013

The purpose of this letter is to inform counties that the Department of Health Care Services (DHCS) has received approval from the Center for Medicare and Medicaid Services (CMS) for the Low Income Health Program (LIHP) to delay annual redeterminations for LIHP enrollees during the last quarter of 2013. The purpose of the delay is to minimize confusion during the transition period for enrollees moving to the Medi-Cal program or coverage options under Covered California.

Each local LIHP has the option to delay the LIHP annual redeterminations for their enrollees that would otherwise have been due in the last quarter of 2013. The LIHPs can choose to delay redeterminations for one, two or three months, from October to December 2013. A county may choose to implement this option for LIHP beneficiaries who are enrolled under the Medicaid Coverage Expansion component. If this option is implemented, the next redetermination for these enrollees after they transition to Medi-Cal will be due one year from their scheduled 2013 LIHP annual redetermination due date. DHCS will work with CMS to complete the appropriate waiver amendments to formalize CMS' approval.

If a LIHP intends to implement this optional redetermination delay, DHCS has instructed LIHPs that, prior to taking any actions, each LIHP should discuss the request with their county social services agency and send a letter via email (template attached), signed by the individual(s) authorized to sign on behalf of the LIHP and county Medi-Cal program, to the DHCS' LIHP Division. DHCS recognizes the county social services agencies will be responsible for processing the redeterminations for this population in 2014 and wants to ensure the LIHP and county Medi-Cal program agree with the implementation of this

Medi-Cal Eligibility Division Information Letter: I 13-10
Page 2
August 21, 2013

option. Once the signed letter has been submitted to DHCS, the county may immediately begin implementation activities.

If you have any questions regarding this Medi-Cal Eligibility Division Information Letter, or if we can provide further information, please contact Frank Kwong (Medi-Cal Eligibility Division) at (916) 552-9487 or by email at Frank.Kwong@dhcs.ca.gov.

For questions on the LIHP redetermination delay process, please contact Gloria Petrul (LIHP Division) at (916) 552-9290 or by email at Gloria.Petrul@dhcs.ca.gov.

Original Signed By

Tara Naisbitt, Chief
Medi-Cal Eligibility Division

Attachment

DATE: *[Date]*

**TO: Low Income Health Program
Department of Health Care Services**

FROM: *[LIHP Name]*
[Contractor Name]
[Contractor Address]

LIHP Redetermination Delay

Instructions: Send a letter using this template with the following information to LIHP prior to implementing:

Redetermination Delay Decision

The decision was made by [LIHP Name] and [county social services] to implement the optional redetermination delay for the last quarter of 2013 for LIHP redeterminations due during the time from October through December. This decision to delay redeterminations in the last quarter of 2013 for one year was made by the LIHP in collaboration with county social services. These delayed redeterminations will be due one year from the 2013 redetermination due date and will be processed by county social services.

[Program Name] **Contact Information:**

[Name, Title]
[Telephone Number]
[Email]

[Signature(s) of authorized individual for LIHP and County Social Services, including printed name(s) and title(s)]