



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



GAVIN NEWSOM
GOVERNOR

DATE: May 10, 2022

Medi-Cal Eligibility Division Information Letter No.: I 22-18

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY ADMINISTRATIVE OFFICERS
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIASONS

SUBJECT: DEEMED ELIGIBLE INFANTS POLICY REMINDERS
(Reference All County Welfare Director's letters: [03-49](#), [09-17](#), [09-27](#), [11-33](#), and Medi-Cal Eligibility Division Information Letter (MEDIL) [18-11](#))

The purpose of this MEDIL is to remind counties of appropriate policies for Deemed Eligible Infants.

Background

Under the Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA) and Title 22, California Code of Regulations (Title 22 CCR), Section 50262.3 infants born to mothers who are enrolled in Medi-Cal on the date of the infant's birth are automatically deemed eligible for Medi-Cal for up to one year without the need for a separate application. Deemed Eligible Infants may be enrolled through the Child Health and Disability Prevention Program (CHDP) Gateway, in aid code 8U, or directly enrolled in non-deemed aid code, P9, until the age of one year old. The Department of Health Care Services (DHCS) has identified several actions that result in improper actions and would like to remind counties of the appropriate policies for this population.

Policy Reminders

Through regular case reviews, DHCS has identified several actions that result in the wrongful disenrollment of Deemed Eligible Infants from the Medi-Cal program. This includes:

1. Case maintenance activities
2. Taking negative action on Deemed Eligible Infant under the age of one when annual household redetermination is not complete
3. Taking negative action on Deemed Eligible Infant under the age of one for failure to provide requested documents
4. Failed Medi-Cal Eligibility Data System (MEDS) transactions

5. Absence of a Modified Adjusted Gross Income (MAGI) Medi-Cal determination, resulting in a Deemed Eligible Infant transitioning from a MAGI Medi-Cal aid code to a Medically Needy aid code with a share of cost

At this time, all actions have been remedied through DHCS technical assistance. As a best practice, counties shall ensure that actions taken in eligibility systems and MEDS do not cause interruption of eligibility for Deemed Eligible Infants by carefully reviewing eligibility upon completion of case work activities. This allows counties to identify erroneous disenrollments and take the required actions to restore eligibility promptly.

It is advisable to review MEDS two days after performing case maintenance activities to confirm that MEDS has the correct eligibility for each household member. It is also imperative to review MEDS alerts to ensure records are properly maintained for continuity of services.

If you have any questions concerning this letter or require additional information pertaining to deemed eligibility of children, please contact Ms. Lucy Hall at Lucy.Hall@dhcs.ca.gov or call (916) 345-8088.

Original Signed By:

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