TO: All County Welfare Directors
   All County Administrative Officers
   All County Medi-Cal Program Specialists/Liaisons
   All County Outstationed Eligibility Workers Coordinators

OUTSTATIONED ELIGIBILITY WORKER (EW) PROGRAM PETITIONS AND REPORTING UPDATE

Ref.: All County Welfare Directors Letter Nos. 89-114, 91-25, 91-108, 92-16, 93-18, 94-23, 95-05, 96-07, 97-04, and 98-06.

The purpose of this letter is to provide counties with information concerning the petitioning and reporting process for the Outstationing EW program for fiscal year (FY) 1998-99. Enclosed with this letter are forms which must be completed and returned to the Medi-Cal Eligibility Branch no later than March 25, 1998.

OMNIBUS BUDGET RECONCILIATION ACT OF 1990 (OBRA '90) OUTSTATIONING

Petitioning:

Under OBRA '90, it is still mandatory that county welfare departments outstation EWs at Disproportionate Share Hospitals and Federally Qualified Health Centers (FQHC) unless it can be demonstrated that it is not administratively feasible to do so. The counties are required to submit new petitions only for the sites which have not participated in the outstationing program in the past, and which presently meet the criteria for outstationing under OBRA '90. The original intent of outstationing still remains to make quick determinations of Medi-Cal eligibility for pregnant women and children. Due to the recent legislative changes, the Department of Health Services extended no cost Medi-Cal eligibility for children up to age of 19 if the family income is at or below 100% of the Federal Poverty Level (FPL), thus removing the previous requirement of birth date after September 30, 1983. (See ACWDL No. 98-06.)

As in the past, DHS’s Medi-Cal Eligibility Branch (MEB) is sending a letter to new FQHC and Disproportionate Share Hospitals to make them aware of the availability of the outstationing program and their obligation to contact the county indicating their interest. (See enclosure.)

A copy of OBRA '90 Outstationing of Eligibility Workers (EW) Petition is enclosed with this letter. If your county needs more than one petition, please make additional copies.
PERINATAL OUTSTATIONING

Petitioning:

Like the funding for OBRA ‘90 outstationing, funding for Perinatal outstationing has been included in the county’s base budget since FY 1994-95. We do not anticipate any increase in funds for Perinatal outstationing for FY 1998-99. Therefore, we are requesting counties to reevaluate their Perinatal outstationing program to assure that resources are being utilized appropriately. Counties may modify their perinatal outstationing program (number of EW days/hours; discontinue/add sites) within their existing allocation if there is justification for the modification. Modifications should be reviewed by MEB and noted in monthly outstationing report.

REPORTING REQUIREMENTS

It continues to be mandatory that counties submit statistical reports for outstationing for OBRA ‘90 and Perinatal programs monthly. They should be received by MEB no later than 15 days after the last day of the report month. A camera-ready copy of the report form is included with this letter. Please reproduce the form according to your needs. You may contact the MEB for a “fresh” copy if needed.

Please accept my sincere appreciation for your excellent cooperation and hard work in implementing and maintaining the outstationing program.

If you have any budget questions, please direct them to your administrative director. If you have any questions regarding the program policies, please contact Kveta Simon of my staff at (916) 657-2767.

Sincerely,

ORIGINAL SIGNED BY

Frank S. Martucci, Chief
Medi-Cal Eligibility Branch

Enclosures
OBRA '90--OUTSTATIONING OF ELIGIBILITY WORKERS (EW) PETITION

(Note: Complete this form for each new OBRA '90 Site where you are proposing to outstation workers and/or existing location where a new EW is justified.

County ______________________________________________________

Hospital/Clinic Name ____________________________________________

Type of Facility:

Disproportionate Share Hospital _____  FQHC _____  Look-Alike Clinic _____

Indian Health Center _____  Other (Specify) ___________________________

1. What is estimated total number of EW hours per month necessary to process applications from OBRA '90 targeted population? ____________________________

2. How many EWs are needed to process OBRA '90 cases? ____________________________

3. What is projected number of applications which will be processed at this location? ____________________________

4. What is your county's FY 97-98 intake target? ____________________________

5. What is estimated staff travel time to process applications at this location? (Hours per month) ____________________________

6. Please indicate which days outstationed worker will visit this site?

Circle days: M T W Th F

7. How many hours on each day? ____________________________

8. Describe what arrangements will be made to meet OBRA '90 mandates of having staff available during hours welfare offices are normally open, e.g., posting notices, etc. ____________________________

9. Will facility staff be used to assist in Medi-Cal process, such as distribution of forms, scheduling interviews, etc?  Yes _____  No _____

If yes, describe extent to which facility staff will be utilized.
10. Based on information received from facility, what is that primary language of potential applicants?
   English_____ %  Spanish_____ %  Chinese_____ %  Vietnamese_____ %
   Other (Specify) __________________________ %

11. Does your county currently have, or anticipate being able to hire sufficient bilingual staff to meet
    the needs of targeted population?
    Yes___  No___

12. Please provide fiscal analysis of the incremental funding:

   EXAMPLE:
   
   (ESTIMATED OBRA App/Mo)
   100% - (No. of Requested EWs) ÷ FY 97/98 Intake Target* = Incremental %

   100% - (Question 3)
   (Question 2) ÷ Question 4 = Incremental %

13. Describe mechanism counties will use to oversee the quality assurance of eligibility decisions by
    outstation staff.

   Name of Facility Contact Person ________________________________

   Phone Number of Facility Contact Person __________________________

   County Welfare Director's Signature ________________________________

* Intake Target will be adjusted if it changes for FY 98-99.
Dear Hospital/Clinic Administrator:

The purpose of this letter is to provide information about provisions of the Omnibus Budget Reconciliation Act of 1990 (OBRA '90) which mandated the outstationing of eligibility workers (EWs) at Disproportionate Share Hospitals, Federally Qualified Health Centers, Look-Alike Clinics and Indian Health Centers. The outstationed EWs accept and process Medi-Cal applications from pregnant women and children up to age 19.

Your facility/clinic was identified as a site which is eligible to participate in this program. In California, the county welfare departments have the responsibility to determine Medi-Cal eligibility.

The program mandating the outstationing of EWs offers many advantages to the facilities/clinics involved. As you may not be aware of the benefits of having an outstationed EW, we are writing directly to you.

Among the advantages of having an outstationed EW are:

- On-site Medi-Cal eligibility can make the application process easier for clients by allowing them to apply for Medi-Cal and receive services at the same location. Many clients who do not have access to an on-site eligibility worker do not apply for Medi-Cal for the following reasons:
  - They have problems getting to a local welfare office to apply for assistance because of excessive distance or inadequate transportation; and
  - They are unwilling to apply for assistance at welfare offices.

- Some clients who apply at the welfare office often do not complete the application process. They view the application form as long and complicated and do not understand documentation requirements. Pregnant women applying at welfare offices often do not receive coverage until late in the pregnancy due to failure to provide required documentation. Studies have shown the majority of clients applying at outstation locations complete the application process. This is partially due to the fact that it is more convenient, comfortable, and there is more time for the EW to answer questions.

- When a client applies for Medi-Cal at an on-site location, the eligibility determination usually occurs more rapidly than when the client applies at the welfare office. This often results in faster payment for the provider of service. Some of the reasons for the quicker eligibility determination are:
The on-site EW works cooperatively with clinic staff. If there is a problem related to the application process, follow-up can be done at the time the client comes in to receive services; and

EWs in outstation locations typically have smaller caseloads than workers in county welfare offices. As a result, more time is available to follow up with applicants.

Clinics/hospitals with EWs outstationed have reported a decline in the costs of uncompensated care.

Many counties in California have implemented very successful outstationing programs. Both clients and clinics report increased satisfaction with the Medi-Cal application process at these sites. Outstationing of EWs has removed many barriers and increased the accessibility of Medi-Cal for pregnant women and children in California.

The following factors should be kept in mind concerning the outstationing of EWs:

1. In determining how to implement outstationing, the welfare agency will take into consideration such factors as projected number of applications from the targeted population, travel time involved, availability of EWs with language skills necessary for the targeted population, and other factors;

2. The number of hours an EW is assigned to an outstationed location varies according to the number of projected and actual applications. In high use areas, one or more workers may be assigned full time. In other areas, workers may be assigned only one day per week or less; and

3. If the county social service agency determines that outstationing is feasible at your location, they will petition the State Department of Health Services (SDHS) for funding. If the SDHS approves the county’s outstationing plan, EWs can be outstationed when the necessary appropriations are approved through the State budgetary process.

So that we may document our efforts to comply with the OBRA ‘90 outstationing mandate, we are asking your cooperation in completing the form enclosed with this letter and returning it to the address shown on the form by February 28, 1998. In addition to completing and returning the enclosed form to DHS, you must also contact your county welfare department to indicate your interest in outstationing.
If you have any questions about the information in this letter or general questions about OBRA '90 outstationing of EWs, please contact Kveta Simon of my staff at (916) 657-2767.

Sincerely,

Frank S. Martucci
Chief
Medi-Cal Eligibility Branch

Enclosure
OUTSTATIONING OF ELIGIBILITY WORKERS
INTEREST INQUIRY FORM

NAME OF CLINIC/HOSPITAL

COUNTY

We are interested in pursuing the feasibility of having an eligibility worker located at this hospital/clinic. Please have our county social services agency contact us to discuss outstationing.

Name of Facility Contact Person

Phone Number of Facility Contact Person

Comments:

NAME OF CLINIC/HOSPITAL

COUNTY

We are not interested in having an eligibility worker located at this hospital/clinic to take Medi-Cal applications from pregnant women and children born after September 30, 1983 for the following reason(s):

Name of Person Completing Form

Title of Person Completing Form

Telephone Number of Person Completing Form

Return Completed Form to: Department of Health Services
Medi-Cal Eligibility Branch
Attention: Kveta Simon
714 P Street, Room 1650
P.O. Box 942732
Sacramento, CA 94234-7320

FAX No.: (916) 657-3224
MEDICAL FACILITIES LISTED AS NEWLY FEDERALLY QUALIFIED IN 1998.

Butte County
Berry Creek Health Center
#10 Townhills Way
Berry Creek, CA 95916

Feather River Family
5734 Canyon View Dr.
Oroville, 95965

Calaveras County
Mark Twain St. Joseph Hospital
768 Mountain Ranch Rd.
San Andreas, CA 95249

Contra Costa County
Contra Costa Regional Med Center
20 Allen Street
Martinez, CA 94553-3191

Fresno County
University Medical Center-Fresno
P.O.Box 1232
Fresno, CA 93715

Kern County
Abalos, Arturo, MD
1004 14th Ave.
Delano, CA 93215

Tehachapi Valley Hospital
P.O. Box 1900
Tehachapi, CA 95381-1900

Kings County
Concoran District Hospital
1310 Hanna Ave.
Corcoran, CA 93212

Los Angeles
Los Angeles Community Hospital
4081 East Olympic Blvd.
Los Angeles, CA 90023
Daniel Freeman Memorial Hospital
333 North Prairie Ave.
Inglewood, CA 90301

South Bay Medical Center
514 North Prospect Ave.
Redondo Beach, CA 90277

St. Mary Medical Center
1050 Linden Ave.
P.O. Box 887
Long Beach, CA 90813

Arroyo Vista Family Health
2221 North Broadway
Los Angeles, CA 90031

East Valley Community Health

Avalon Municipal Hospital and Clinic
100 Falls Canyon Rd.
Avalon, CA 90704

BHC Alhambra Hospital
4619 North Rosemead Blvd.
Rosemead, CA 91770

Van Nuys Hospital
15220 Vanowen Street
Van Nuys, CA 91405

Woodruff Community Hospital
3800 Woodruff Ave.
Long Beach, CA 90808

**Marin County**
Point Reyes Medical Clinic
3 Sixth St.
Point Reyes, CA 94956

**Merced County**
Sutter Merced Medical Center
301 East 13th St.
Merced, CA 95340
Monterey County
Clinica Del Salud
950 Circle Dr.
Salinas, CA 93905

Monterey County Health Clinic
622 #8 East Alisal St.
Salinas, CA 93905

Seaside Family Health Center
1150 Fremont Blvd.
Seaside, CA 93955

Orange County
Western Medical Center - Santa Ana
1001 North Tustin Ave.
Santa Ana, CA 92705-8619

Plumas
Eastern Plumas District Hospital
500 First Ave.
Portola, CA 96122

Riverside County
Banning Health Center
3055 w. Ramsey
Banning, CA 92220

Inland Empire Community Health
13630 Mountainview Rd.
Desert Hot Springs, CA 92240

Lake Elsinore Health Center
30195 Fraser Drive
Lake Elsinore, CA 92530

Santa Rosa Del Valle
5060 Six
Cochella, Ca 92236

Mecca Health Clinic
65100 Date Palm
Mecca, CA 92254
Sacramento County
Sutter Community Hospital
2801 L St.
Sacramento, CA 95816

San Bernardino County
Community Hospital of San Bernardino
1805 Medical Center Dr.
San Bernardino, CA 92411

Valley Plaza Doctor’s Hospital
2224 Medical Center Drive
Perris, CA 92570

San Diego County
Escondido Community Clinic
201 e. Grand Ave. #2D
Escondido, CA 92025

Sherman Heights Family Clinic
420 24th St.
San Diego, CA 92102

Mercy Hospital and Med. Center
4077 5th Ave.
San Diego, CA 92103

Sharp Coronado Hospital
250 Prospect Place
Coronado, CA 92118
Humboldt County

Mobile Med. Office
P.O. box 905
Blue Lake, Ca 95525

Jerold Phelps Community Hospital
733 Cedar St.
Garberville, CA 95542

San Francisco County
Chinatown Public Health
1490 Mason
San Francisco, CA 94133
Sierra County
Sierra Family Medical
P.O.Box 709
725 3rd St.
Loyalton, CA 96118

Solano County
Sutter Solano Medical Center
300 Hospital Drive
Vallejo, CA 94589

Vaca Valley Hospital
1200 B. Gale Wilson Blvd.
Fairfield, CA 94533

Sonoma County
Sutter Medical Center of Santa Rosa
3325 Chanate Road
Santa Rosa, CA 95404

Stanislaus County
Central California Rehabilitation Hospital
730 17th Street
Modesto, CA 95354

Tulare County
Alta Family Health Clinic
P.O. Box 965
Danuba, CA 93618

Central Valley General Hospital

Family Healthcare Network

Ventura County
SPMH Rural Health
845 North 10th St.
Santa Paula, CA 93060

Yolo County
Sutter Davis Hospital
2000 Sutter Place
Davis, CA 95404

Yuba County