

DATE: July 18, 2023

- TO: ALL COUNTY WELFARE DIRECTORS Letter No.:23-14 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: MEDI-CAL ELIGIBILITY DATA SYSTEM (MEDS) ALERTS HIERARCHY PROCESSING GUIDELINES

The purpose of this All-County Welfare Directors Letter (ACWDL) is to assist counties in identifying Medi-Cal Eligibility Data System (MEDS) alerts with impact to eligibility, both immediate and through monthly and quarterly processes, using a hierarchy system. The hierarchy in this letter is intended to augment guidance provided in <u>ACWDL 08-09</u>, titled Monitoring of Quarterly Reconciliation Processing and Assessment of County Alert Processing. ACWDL 08-09 provides guidance on how the Department of Health Care Services (DHCS) will monitor compliance with the performance standards for quarterly reconciliation and worker/error alerts, as specified in Welfare and Institutions (W & I) Code Section <u>14154.5</u>.

## Background

W&I Code Section 14154.5 requires counties to process MEDS alerts timely and consistently to reduce data discrepancies between MEDS and Statewide Automated Welfare Systems (SAWS). MEDS alerts inform county and other partners of potential and existing discrepancies in MEDS records. Categorization of alerts is determined based on the frequency in which alerts are generated in MEDS and the impact to eligibility, with Category 1 representing the most common alerts with the most immediate negative eligibility impacts to a MEDS record and successive categories representing alerts with less immediate negative eligibility impacts.

MEDS alerts generate daily through several independent processes, including:

- 1. Daily update process
- 2. Monthly MEDS renewal process
- 3. Quarterly reconciliation process
- 4. Periodic data matching

Daily MEDS alerts immediately identify data discrepancies. Resolving daily alerts prevents negative impacts to MEDS records, results in minimal discrepancies, and reduces the occurrence of additional alerts in renewal, reconciliation, and periodic data matching processes. As outlined in <u>ACWDL 05-19</u>, titled Medi-Cal Eligibility Data System Reconciliations and Alerts, MEDS alerts received **on or before the tenth** working day of the month must be processed timely for the change to be effective the beginning of the following month. MEDS daily and renewal error alerts **received after the tenth** working day of the month must be processed timely for the change to be effective the beginning of the month must be processed timely for the change to be effective the beginning of the month must be processed timely for the change to be effective the beginning of the month must be processed timely for the change to be effective the beginning of the month must be processed timely for the change to be effective the beginning of the month must be processed timely for the change to be effective the beginning of the month must be processed timely for the change to be effective the beginning of the month after the following month.

**State of California** Gavin Newsom, Governor



California Health and Human Services Agency

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## **MEDS Alert Categories**

The Department of Health Care Services (DHCS) has identified three categories that have different impacts to MEDS records or are the result of MEDS processing of information not provided through county transactions. Please note that all categories have the same importance, and all categories are included in the hierarchy.

**Category 1**: These are the most frequently generated alerts that notify of an impact on eligibility and/or Share of Cost (SOC).

**Category 2**: These alerts notify of an impact on active county records, records in a hold status, or records active in a presumptive eligibility/accelerated program for an extended period.

**Category 3**: These alerts notify of an impact on eligibility and/or SOC. Alerts in this category present less immediate negative eligibility impacts than alerts identified in Category 1.

## MEDS Alert Hierarchy Table

	Category 1			
Alert Number	Frequency	Description	Action	
1082	Daily	Health Insurance Claim Number Discrepancy A transaction was submitted with an individual's Health Insurance Claim number and Social Security Number that do not match the records previously identified with the MEDS identification number on the transaction.	Verify that the Health Insurance Claim number and Social Security number are correct and match the MEDS record. Resubmit the transaction if corrections were made.	
1505	Daily	<u>MEDS Identification Number</u> <u>Discrepancy</u> The MEDS identification number submitted on the transaction does not match the MEDS identification number on file.	Verify the correct MEDS identification number and resubmit the appropriate transaction.	
1515	Daily	<u>CA Birth Match Discrepancy</u> A transaction was submitted to request an automated birth record match to document citizenship verification for a client born in	The no-match found alert does not necessarily imply that the client was not born in California or that the client would not be able to obtain a copy of their birth certificate to verify the	

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	Category 1			
Alert Number	Frequency	Description	Action	
		California and a match to the record was not found.	information sent in the transaction.	
2047	Daily	Death Date Discrepancy A transaction was submitted with a death date which differs from the death date populated in MEDS.	Compare the death date on the transaction to the MEDS record and correct the death date as appropriate.	
2144	Daily	<u>Conflicting Eligibility</u> Alert may be issued for current or history months when conflicting eligibility is found. Special program eligibility cannot co-exist with full scope Medi-Cal.	Re-evaluate eligibility and update as appropriate.	
2165	Daily	<u>Conflicting Eligibility</u> This alert identifies eligibility on MEDS that conflicts with establishing Accelerated Enrollment.	Report the final disposition of the Accelerated Enrollment application to MEDS.	
2182	Daily	<u>Name and/or Sex Missing</u> The transaction did not contain name and/or sex and no existing MEDS record was found for this client.	Review county records to determine whether the client identification information reported on the transaction is correct. Submit updates as needed to correct MEDS.	
4351	Daily	Potential Duplicate Record A newly created MEDS record may be a potential duplicate of an existing MEDS record.	Follow current processes for identifying and resolving duplicate records.	
4355	Daily	Social Security Number Found on Multiple Records Two different records on MEDS are reporting the same Social Security Number. The MEDS records may be a duplicate record, or one may be reporting an incorrect Social Security Number.	Follow current processes for identifying and resolving duplicate records.	

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	Category 1			
Alert Number	Frequency	Description	Action	
4806, 4807, 4808	Daily	Social Security Number Verification The Social Security Number failed to verify for this client.	Check to determine if the Social Security Number was correctly reported to MEDS. Check for specific discrepancy messages that may accompany this alert. Refer to the MEDS Manual for this alert for more information.	
4810	Daily	Social Security Number Verification The Social Security Number failed to verify for this client as a valid Social Security Number issued by Social Security Administration. This message may be issued along with message 4803, 4804, 4805, 4806, 4807, 4808 or 4809.	Check to determine if the SSN was correctly reported to MEDS. If the SSN was not correctly reported to MEDS, send a transaction to correct the SSN. Otherwise, refer the client to the Social Security Administration to resolve and/or get a corrected Social Security Card.	
4823	Daily	Social Security Number Verification This message may be issued along with message 4801, 4802, 4803, 4804 or 4805. It indicates that the Social Security Number verification information will not update MEDS because the birthdate was updated in MEDS during the verification process.	Check to determine if the Social Security Number was correctly reported to MEDS. Check for specific discrepancy messages that may accompany this alert. Refer to the MEDS Manual for this alert for more information.	
6001	Quarterly	Matching Record Not Found This message is generated when a matching record was not found in MEDS and the county transaction does not contain invalid data in any critical eligibility fields. An update was generated to add the county transaction to MEDS.	Review the eligibility data in the local eligibility system and compare it to the MEDS record. If necessary, modify the local eligibility system to reflect the correct data and/or initiate an update to MEDS to synchronize the MEDS record with the local eligibility system information	
4824	Daily	Social Security Number Verification This message may be issued along with message 4801, 4802, 4803, 4804, 4805, 4806, 4807, 4808 or 4809. It indicates that the Social	Check to determine if the Social Security Number was correctly reported to MEDS. Check for specific discrepancy messages that may accompany this alert.	

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		Category 1	
Alert Number	Frequency	Description	Action
		Security Number verification information will not update MEDS because the Social Security Number points to a different Client Index Number than it did when the verification request was initiated.	Refer to the MEDS Manual for this alert for more information.
6005	Quarterly	<u>County Recon Record Not Found</u> Eligibility is presumed active when the last eligibility update was within the most recent 6-month period. This additional evaluation will prevent the termination of active eligibility that cannot be reported due to county system limitations. An update was generated to place the record on hold pending further county action.	Review the local eligibility system to ensure the county record was not omitted in error. If the record was omitted in error, initiate the appropriate action to remove the hold status.
9005	Daily	Reported Out of State Centers for Medicare & Medicaid Services (CMS) has notified us that this recipient has changed the state or residence to a state other than California for an active record.	Verify residency and if recipient has moved out of state, close eligibility including all Special Programs. If the recipient has not moved out state, refer the recipient to their local Social Security Administration (SSA) field office. Also contact your State Buy-In representative.
9038	Daily	Eligibility Change due to DRA When full scope Medi-Cal eligibility is reported to MEDS in an aid code subject to Deficit Reduction Act (DRA) requirements for a client whose Citizenship Document Type or Identity Document Type indicates that client has not provided or is unable to provide the required DRA documentation, the reported aid code will be changed to an appropriate limited scope aid code.	Update MEDS to reflect citizenship and identity documentation that supports granting of full scope Medi-Cal eligibility. Once this is completed, the county reported aid code will be restored.

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	Category 1			
Alert Number	Frequency	Description	Action	
9043	Daily	SSI Denial Reported A Supplemental Security Income/State Supplemental Payment (SSI/SSP) application was denied by the Social Security Administration.	Applications submitted to the Social Security Administration that are denied should be evaluated by counties for all other categories of Medicaid eligibility.	
6015	Quarterly	<u>No Recon Update</u> An update was not generated because the MEDS information was presumed to be more current. Refer to the MEDS Manual for this alert for more information.	Review each alert generated for the local eligibility system record to identify the error. Modify the local eligibility system to reflect the correct data. If necessary, initiate an update to MEDS to synchronize MEDS with the local eligibility system information.	
9554	Monthly	RMA/EMA Ending This alert is generated at the beginning of the tenth month for refugees who are Refugee Medical Assistance (RMA)/Entrant Medical Assistance (EMA) eligible to notify the worker of the approaching time limit. A termination date will be added to MEDS at the end of the twelfth month.	Send an application and notify affected beneficiaries of termination for RMA at the end of the twelve-month eligibility period.	
9555	Monthly	RMA/EMA Ending Terminations are posted for all Refugee Medical Assistance (RMA)/Entrant Medical Assistance (EMA) eligible beneficiaries whose RMA twelve-month eligibility period ends.	For beneficiaries who have been on RMA/EMA for twelve months or longer, counties must send the DHCS 7110 Notice of Action (NOA) along with a Medi- Cal application as soon as possible.	
9559	Monthly	Aid Code Discrepancy The recipient shows eligibility on MEDS in a State-Only restricted Medi-Cal aid code and this aid code cannot share eligibility with a	Review eligibility and determine which eligibility is correct. Update the local eligibility system and MEDS as appropriate per internal business procedures.	

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	Category 1			
Alert Number	Frequency	Description	Action	
		companion full scope aid code simultaneously.		
9584	Monthly	<u>Medicare Eligible</u> This alert is generated when someone in specific aid codes becomes eligible for Medicare. Examples of affected Aid Codes* include K2, K3, K4, K5, K6, K7, K8, K9, L6, L7, M1, M2, N5, N6, N7, N8. *List subject to change.	Complete the eligibility redetermination process.	

	Category 2			
Alert Number	Frequency	Description	Action	
9532	Monthly	SB87 ReminderThis is a reminder to complete an SB87 Medi-Cal redetermination on a discontinued county administered cash-linked client (aid code 38). 	If the SB87 Medi-Cal redetermination was already completed, review MEDS records, prior MEDS alerts, county records, and prior county updates sent to MEDS for the source of the conflict or problem. If the SB87 disposition update was rejected, resolve the problem identified in the original alert message and then verify that an update from the county system has either overlaid or terminated the aid code 38 eligibility. If necessary, submit a transaction to report the information from the SB87 disposition. If MEDS was not updated but the county system was, then there is a county system or procedure problem that needs to be resolved.	

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	Category 2			
Alert Number	Frequency	Description	Action	
			If the Medi-Cal SB87 redetermination has not been completed, complete the process (refer to All County Welfare Directors Letter (ACWDL) 01-36 and any subsequent related ACWDLs). After completing this process, verify that the county system has updated MEDS appropriately.	
9535	Monthly	Infant Approaching One Year of Age This alert is generated when an infant presumed to be deemed eligible through the online Gateway enrollment process is approaching one year of age.	Take the required follow-up action to prevent the deemed eligibility status from continuing beyond the infant's first birthday. For more details see All County Welfare Directors Letter (ACWDL) #05-02.	
9546	Monthly	Accelerated Enrollment Over Two Months This alert is generated when a client has been eligible on MEDS in an accelerated enrollment aid code for more than 2 months and the application process has not been completed or MEDS has not been successfully updated with the outcome of the application process. This is a reminder to county staff that the application process has not been completed in the expected timeframe.	If the application was processed, review the MEDS record, prior MEDS worker alerts county records, and prior county updates sent to MEDS to determine the source of the problem. If MEDS rejected the application disposition, resolve the problem identified in the original alert message and then verify that an update from the county system has terminated the Accelerated Enrollment eligibility. Check for a second Accelerated Enrollment record for this client. If a second record is found, please refer to the MEDS Manual for this alert.	

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		Category 2	
Alert Number	Frequency	Description	Action
			If the application has not been processed, complete the application process and then verify that an update from the county system has updated MEDS correctly. If the AE aid code indicates the application was filed at Single Point of Entry (SPE) and you have not received a copy of the application, contact SPE immediately to obtain a copy of the application. Complete the application process and then verify that an update from the county system has updated MEDS correctly.
9548	Monthly	SB87 Determination Needed This alert is generated when a client previously Medi-Cal eligible in a category not administered by counties (e.g., former Supplemental Security Income/State Supplementary Payment (SSI/SSP)) has been in an extended eligible status pending county completion of an SB87 Medi-Cal redetermination process for more than two months.	If the SB87 Medi-Cal redetermination process was already completed, determine why MEDS was not updated and submit MEDS updates as appropriate so that MEDS will terminate the extended eligibility. If the SB87 Medi-Cal redetermination process has not yet been completed, complete the SB87 Medi-Cal redetermination process (refer to All County Welfare Directors Letter (ACWDL) 03-24 and any subsequent related ACWDLs). Once the process is completed, verify that the county system has updated MEDS appropriately.

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	Category 2			
Alert Number	Frequency	Description	Action	
9550	Monthly	Forced Eligible Status This alert is generated when a beneficiary has been placed in a forced eligible status and the county has not yet taken action to resolve the problem that generated the forced eligible status. A forced eligibility status indicates that MEDS is continuing the questionable eligibility on MEDS until a pending county update is processed to report the correct current eligibility.	Review prior worker alerts to determine why the MEDS record was placed in a forced eligible status. Resolution of the eligibility status will vary depending on what alert caused the MEDS hold. Resolve the problem identified in the original alert message and then verify that an update from the county system has either overlaid or terminated the forced eligible status or, if necessary, submit an online transaction to resolve the problem and report the information from the rejected transaction.	
9827	Monthly	Over 12 Months Of Age -App Determination Overdue	If the application has not been processed, complete the application process and then verify that an update from the county system has updated MEDS correctly.	

	Category 3				
Alert Number	Frequency	Title and Description	Action		
9003	Daily	<u>Death Date Reported</u> This alert is generated when a death date has been reported.	Follow county procedures when information is received indicating client is deceased. Refer to All County Welfare Directors Letter (ACWDL) related to death for additional information.		

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		Category 3	
Alert Number	Frequency	Title and Description	Action
9004	Daily	<u>Death Date Reported</u> This alert is generated when a death date has been reported through Buy-In.	If the recipient is deceased, close ALL program eligibility including all Special Programs. If the recipient is not deceased, refer recipient to the local Social Security Administration field office. Also, contact your State Buy-In representative.
9060	Daily	Incarceration Reported This alert indicates a client has been reported as incarcerated. If the client has active Medi-Cal and their benefits are suspended. If the client is enrolled in a managed health care plan and the enrollment has been put on hold. The Public Institution is responsible for medical coverage during the suspension period. The message will include the start date and release date (if there is one), if reported. If the client is still incarcerated, the release date returned with the alert will be blank.	This message is sent to any active workers other than the worker identified on the reporting transaction. The county should evaluate the suspension period, determine if this impacts the client's case and take any action that may be necessary.
9070	Daily	Residency Discrepancy This alert is generated when the beneficiary is closed in MEDS in connection with the residency verification program (PARIS or other).	Re-evaluate beneficiary's eligibility and close their case in State Automated Welfare System (SAWS) if the client is not a resident of California.
9073	Daily	Residency Discrepancy This alert is generated when the beneficiary was closed in MEDS in connection with the residency verification program (PARIS or other) and the county did not	Revaluate beneficiary's eligibility and close the client's case in SAWS if the client is not a resident of California.

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Category 3			
Alert Number	Frequency	Title and Description	Action
		update State Automated Welfare System (SAWS).	
9585	Monthly	<u>Virtual Residence Address</u> There is a known Virtual Residence Address identified in the Residence Address for a current Medi-Cal beneficiary.	Immediate action is required to correct the Virtual Residence Address to a residence address that is not a business, post office box, or Commercial Mail Receiving Agency (CMRA).

County specific actions are not the cause of all of the alerts listed above; however, the county must process the alert to identify and document the source of the error and initiate steps to remedy the error. For assistance with resolving MEDS alerts, counties should work with the designated MEDS Coordinator to submit a help desk ticket.

For questions regarding the information contained in this letter, contact Laurieanne Blanco at 916-345-8600 or Laurieanne.Blanco@dhcs.ca.gov.

Sincerely,

Yingjia Huang Assistant Deputy Director Health Care and Benefits Department of Health Care Services