DATE: April 14, 2023

Medi-Cal Eligibility Division Information Letter No.: I 23-28

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY ADMINISTRATIVE OFFICERS
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS
ALL COUNTY HEALTH EXECUTIVES
ALL COUNTY MENTAL HEALTH DIRECTORS
ALL COUNTY MEDS LIAISONS
ALL PROBATION DIRECTORS
ALL FOSTER CARE ELIGIBILITY WORKERS
ALL FORMER FOSTER YOUTH ELIGIBILITY WORKERS

SUBJECT: PROCESSING FORMER FOSTER YOUTH DURING THE UNWINDING OF CONTINUOUS COVERAGE

This Medi-Cal Eligibility Division Information Letter (MEDIL) clarifies the process for counties to follow in resuming normal case processing of the Former Foster Youth (FFY) during the unwinding of the continuous coverage flexibility based on guidance issued by the Centers for Medicare and Medicaid Services (CMS).

Background
Since the beginning of the PHE in March 2020, FFY have been maintained in Medi-Cal pursuant to the continuous coverage requirement of the PHE. With the lifting of the continuous coverage requirement effective March 31, 2023, counties have raised questions on how to process the FFY.

FFY Who Aged Out During the Public Health Emergency
During the PHE, any FFY who aged out of the FFY Program by turning 26 years of age, was maintained in their Medi-Cal coverage by being moved into an aid code that did not have age limitations. With the lifting of the continuous coverage requirement, these FFY are to be processed by following the guidance set out in ACWDLs 22-18 and 22-33.

As set out in ACWDL 22-18, once the continuous coverage requirement ends, counties will begin initiating renewal activities starting in the sequence below that occur prior to the last day of the renewal period. The dates listed below may vary slightly within each SAWS system.

- 85 Days Prior: Ex Parte Review Completed
- 60-75 Days Prior: Annual Renewal Packet Mailed (when applicable)
10 Days Prior: Notice of Action Sent
Last Day of Eligibility: Final Day of Eligibility for Discontinued Beneficiaries

**FFY Aging Out During the Continuous Coverage Unwinding Period**

If the FFY did not age out of the FFY Program during the PHE but will be aging out of the FFY Program during the continuous coverage unwinding period, follow the guidance in ACWDLs 14-41 and 15-32 and MEDIL I21-33. According to MEDIL I21-33, counties are to start an ex parte review of the FFY's existing case record no later than 120 days prior to their 26th birthday to determine the FFY's Medi-Cal eligibility beyond their 26th birthday. If the youth is eligible for another program, the county shall transition the FFY to the appropriate Medi-Cal program, effective the month following their 26th birthday.

If the county is unable to determine eligibility for other Medi-Cal programs, the county shall issue the FFY Informational Letter "Upcoming Change to Your Medi-Cal Coverage." DHCS published this letter along with ACWDL 15-32 and requested that counties program it into their system. This letter notifies the FFY of the need for additional information to decide Medi-Cal eligibility.

Counties are to enclose the Medi-Cal Request for Information form, MC 355, with the FFY Informational Letter. The MC 355 will specify all the additional information needed giving the FFY at least 30 days to provide the information requested. If appropriate, the Request for Tax Household Information (RFTHI) form will be listed on the MC 355 and enclosed with the FFY Informational Letter.

If the requested information is not provided within 30 days after sending out the FFY Information Letter, the county must attempt to contact the beneficiary. During the contact, the county must specify the requested information and provide a 10-day deadline following the contact to provide the requested additional information.

If the FFY provides the requested information and is found eligible, the county shall transition the FFY to the appropriate Medi-Cal program, effective the month following their 26th birthday. If after the additional 10 days noted above, the FFY has not returned the information requested, the county shall send a timely Medi-Cal Notice of Termination and discontinue the FFY from Medi-Cal effective the last day of the month in which they turn 26. The Medi-Cal Notice of Action shall explain the basis for termination and the ability to cure within 90 days.

**FFY Not Aging Out**
For the youth who has not aged out, but is being processed during the continuous coverage unwinding, process the FFY annual renewals according to guidance set out in ACWDLs 14-41 and 15-32 and MEDIL 121-33. Once the county has verified that the FFY is not out-of-state, incarcerated, or deceased, the county shall send the FFY Notice of Action “Automatic Renewal of Eligibility for FFY Medi-Cal Program” notifying the individual of their ongoing eligibility. DHCS published this NOA along with ACWDL 15-32 and requested counties to program it into their system. No response is needed from the FFY.

If the mailed NOA is returned due to loss-of-contact, the county will attempt to verify the address through phone contact, authorized representative, social worker, or other contact person listed on their case record history. If contact is not established, the county will continue the beneficiary on aid code 4M and place the FFY beneficiary into fee-for-service if applicable. The FFY beneficiary shall not be discontinued from coverage due to a loss of contact.

If you have any questions, or if we may provide further information, please contact the Former Foster Youth Program by email at FFY@dhcs.ca.gov.

Sincerely,

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