

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



EDMUND G. BROWN JR. Governor

March 19, 2012

TO: ALL COUNTY WELFARE DIRECTORS Letter No.: 12-12 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: Out of State Medi-Cal Coverage for Interstate Compact on the Placement of Children (ICPC) for Aid Code 40 (AFDC-FC State-Only)

The purpose of this letter is to inform counties of potential full-scope out-of-state Medi-Cal coverage (including dental services) for California children who are in the care and custody of a county welfare agency or probation department via court dependency order or ward status and placed out of state in a California Department of Social Services (CDSS) certified residential facility (group home) under the ICPC. This letter applies only to California children specified above receiving state-funded cash Aid to Families with Dependent Children-Foster Care (AFDC-FC) benefits under aid code 40. It does not apply to children who receive federal Title IV-E benefits, as these children should be covered under the Medicaid program of the state where they are placed.

## Background

The ICPC is a compact entered into by its member jurisdictions and establishes uniform legal and administrative procedures governing the interstate placement of children for adoptive or foster care placement purposes. The compact was created to ensure that children requiring out-of-state placement will receive the same protections and services as if they remained in their home state. In California, the placement of children in another state is based on a determination that the child's needs could not be met in California and that the needs of the child would be best served or met if the child is placed in another state. Children placed out of state in certified residential facilities (group home) who are in receipt of Title IV-E are generally automatically eligible for Medicaid in the state of placement in accordance with federal requirements, Federal law permits but does not require states to provide Medicaid coverage for children who receive state only (non Title IV-E) foster care benefits from another state. Therefore, those children under aid code 40

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(non Title IV-E funded AFDC-FC) who are under the care and custody of the county and placed out of state, are not automatically eligible for Medicaid in another state. The Department of Health Care Services (DHCS) has made a decision to extend full-scope out-of-state Medi-Cal coverage to these children under aid code 40.

## County Action on Medi-Cal Eligibility Data System (MEDS)

For California to continue to provide Medi-Cal benefits to these children when they are in their out-of-state residential facility (group home) placement, counties must manually identify these children with a specific residence code "99" in the residence field on MEDS. The child's out-of-state address must be entered into MEDS along with the out-of-state residence code for Medi-Cal to pay out-of-state claims to those out-of-state Medi-Cal enrolled providers.

## **Providers and Billing Information**

DHCS Provider Enrollment will enroll out-of-state entities to provide medical services to children placed by counties under the ICPC. The entities must be linked to a residential care facility certified by CDSS and they will be enrolled in accordance with the federal and state Medicaid rules and regulations in effect at the time the application is submitted. The current list of out-of-state residential care facilities that have been certified by CDSS can be found at the following link:<u>http://ccld.ca.gov/PG536.htm</u>.

Information and applications for enrollment as a Medi-Cal Provider can be found on the Medi-Cal Website (<u>www.medi-cal.ca.gov</u>). Click on Provider Enrollment and select the appropriate application. Additionally, questions can be submitted to DHCS Provider Enrollment at <u>PEDCorr@dhcs.ca.gov</u>.

Applications submitted by out-of-state entities to enroll as Medi-Cal providers must have the letters "ICPC" written on the top of the application to help the DHCS Provider Enrollment Division (PED) identify them. They must be submitted with a letter (on facility letterhead) from the certified residential care facility where the Medi-Cal beneficiaries for which the entity intends to provide services will reside. This letter shall certify that the entity seeking enrollment as a Medi-Cal provider has an agreement or contract with the certified residential care facility to provide necessary medical care to the Medi-Cal beneficiaries residing in that facility.

Applications from out-of-state provider entities will be assigned and reviewed expeditiously. The assigned PED analyst will work directly with the applicant to facilitate compliance with Medi-Cal enrollment requirements.

Providers interested in providing dental services to out-of-state children with an aid

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code 40 may contact the Denti-Cal Enrollment Unit by calling Delta Dental, the dental fiscal intermediary contractor, at (916) 853-7373 and request to be connected to the Enrollment Unit. The Enrollment Unit will provide assistance on topics ranging from enrolling in the program and/or obtaining information about how to bill for emergency services for the children residing out-of-state. Providers can also send inquiries via email to <u>Denti-CalEnrollmentDept@delta.org.</u> The Provider Handbook which explains how to submit a claim, current Statewide Maximum Allowance rates, required documentation and much more, is available online at <u>www.denti-cal.ca.gov.</u>

If you have any non-provider related questions about the letter, please contact Stephanie Hockman at (916) 319-9356 or by email at <u>stephanie.hockman@dhcs.ca.gov.</u>.

Original signed by Robert Sugawara

Robert Sugawara, Acting Chief Medi-Cal Eligibility Division