

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



GAVIN NEWSOM GOVERNOR

November 17, 2021

TO: ALL COUNTY WELFARE DIRECTORS Letter No.: 21-32 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: EXPANSION OF ACCELERATED ENROLLMENT TO ADULTS

(References: All County Welfare Directors Letters 08-07, 15-26, and 15-28, Medi-Cal Eligibility Division Information Letters I 14-23, 15-11, 15-15 and I 15-27.)

PURPOSE

The purpose of this letter is to provide counties with guidance regarding the expansion of Accelerated Enrollment to adults. This guidance is in accordance with the settlement in the matter of *Rivera v. Lightbourne*.

BACKGROUND

In 2015, the Department of Health Care Services (DHCS) received two court orders as part of the *Rivera* lawsuit that required DHCS to notify applicants of their right, authorized by state and federal law, to file an appeal and request a hearing when a non-disability based Medi-Cal eligibility determination has not been performed within 45 days, unless an exception applies. As a result of this lawsuit, beginning with the 2015 Open Enrollment, DHCS was ordered to issue a Notice of Inaction (NOI) for applicants who have not received a Notice of Action (NOA) resulting from a final Medi-Cal determination within 45 days of filing their application. The NOI is to notify applicants of their right to file an appeal and request a hearing as to why their eligibility determination has not been performed within 45 days.

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On May 10, 2021, a settlement was reached in the *Rivera* lawsuit that requires DHCS to grant Medi-Cal eligibility to applicants who meet all eligibility criteria pending county eligibility verifications. In order to meet these terms, the Department will expand the expedited enrollment process established for children known as "Accelerated Enrollment" to adults who submit online applications through the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) but are pending verifications.

ELIGIBILITY

Effective July 1, 2021, children (0-19 years of age) and adults submitting a CalHEERS online portal application who are eligible to Modified Adjusted Gross Income (MAGI) Medi-Cal based on self-attested information, will be enrolled into Accelerated Enrollment if the following criteria is met:

- New applicant
- Eligible for MAGI Medi-Cal based on self-attested information but are pending other verifications Applying through the CalHEERS portal

Applicants eligible for Accelerated Enrollment will be placed in the existing full scope aid code 8E. Accelerated Enrollment will provide up to two full months of temporary no-cost Medi-Cal eligibility for adults while eligibility verifications are obtained. In the third month, 8E aid code eligibility will be placed in a hold status in Medi-Cal Eligibility Data System (MEDS) and will be reported on the County monthly Exception Eligible Report (EER). Existing MEDS alerts will be generated to the County of Responsibility upon enrollment of individuals into aid code 8E.

ACCELERATED ENROLLMENT CALHEERS SYSTEM UPDATES

CalHEERS has been updated to allow both children and adult that are applying via the CalHEERS portal applicants to receive Accelerated Enrollment for MAGI Medi-Cal with aid code 8E. However, those with an outstanding death verification and/or an existing MEDS Minimum Essential Coverage (MEC) verification will result in a "pending eligible" status in CalHEERS.

Once CalHEERS completes an Accelerated Enrollment eligibility determination and there are pending verifications, CalHEERS will send an Unsolicited Determination of Eligibility Request (DER-U) to the counties. Counties must follow existing eligibility determination processes for Accelerated Enrollment individuals.

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Once the outstanding verifications are verified by counties, Accelerated Enrollment individuals will be placed by SAWS into the appropriate MAGI Medi-Cal aid code.

COUNTY PROCEDURES

Counties are reminded to follow normal eligibility determination procedures in determining ongoing Medi-Cal coverage for individuals in Accelerated Enrollment. This process includes conducting an ex-parte review prior to requesting any verification from applicants (<u>14-23</u>).

As this ACWDL provides guidance for submitted CalHEERS applications/statement of facts, counties must follow the two-contact requirement for obtaining all pending verifications needed to determine eligibility. Applicants can be denied after counties follow the two-contact requirement if there is no applicant response for requested verifications (see ACWDL <u>08-07</u>).

INFORMING NOTICES

If the As a reminder, counties who do not complete an eligibility determination within 45 days of the application date (California Code of Regulations § 50177(b) and 42 CFR §435.912(e), will need to generate a NOI to the applicant in compliance with the *Rivera* lawsuit.

If you have any questions regarding this letter, or need further information, please contact Joel Mojica by phone at (916) 345-8049 or by email <u>AcceleratedEnrollment@dhcs.ca.gov</u>.

Original Signed By

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