

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



EDMUND G. BROWN JR. Governor

July 23, 2012

TO: ALL COUNTY WELFARE DIRECTORS Letter No.: 12-21 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: Division of Juvenile Justice Match Reports

The Department of Health Care Services (DHCS) is changing the distribution process for the California Department of Corrections and Rehabilitation Division of Juvenile Justice (CDCR-DJJ) match reports, formerly known as the California Youth Authority match reports. The CDCR-DJJ match report is part of the Income Eligibility Verification System (IEVS) Recipient System. Currently, CDCR-DJJ match reports are supplied by the California Department of Social Services (CDSS) and sent to Special Investigations Unit (SIU) welfare fraud investigators. Under the new process, DHCS will distribute the CDCR-DJJ match reports to the appropriate County Welfare Departments (CWDs). The purpose of this letter is to provide CWDs with instructions for coordinating with DHCS on the new CDCR-DJJ match reports distribution process.

Background

If an incarcerated juvenile was eligible for Medi-Cal prior to his or her incarceration, current Medi-Cal rules provide for the suspension of Medi-Cal benefits:

- for up to one year,
- or the end of the month that the juvenile turns 21,
- or the end of the month that the juvenile has become otherwise ineligible for Medi-Cal, whichever is sooner.

Medi-Cal coverage is not available while the juvenile's benefits are suspended, except as described later in the letter.

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Matching Process

DHCS will receive a monthly CDCR-DJJ match report from CDSS identifying incarcerated juvenile Medi-Cal beneficiaries. The CDCR-DJJ matches are compiled by comparing a list of Medi-Cal beneficiaries against a list of incarcerated juveniles. A person who appears on both lists is reported as a match. DHCS will distribute the matches to the appropriate CWDs. The match is intended to identify persons in CDCR-DJJ facilities who received Medi-Cal benefits during a month of incarceration. DHCS will send a list of all matches to CWDs via secure email using the attached Suspension Referral Form (Attachment A). CWDs must review the case and if appropriate suspend or terminate Medi-Cal during the period of incarceration, with proper notice, in accordance with All County Welfare Directors Letter (ACWDL) No. 10-06. As required by ACWDL 10-06, Medi-Cal must not be terminated during the one-year suspension period if an incarcerated juvenile identified by this match is Medi-Cal eligible. A youth may still receive Medi-Cal coverage for services received while *not* an inmate of a public institution. See ACWDL No. 10-06 for a more detailed explanation of the law and DHCS policy concerning suspension of Medi-Cal coverage for juvenile inmates of a public institution.

On a semi-annual basis, CWDs must send back the completed Suspension Referral Form to DHCS via secure email with information on the actions taken and the effective date of suspension or termination, as appropriate, for each incarcerated juvenile who was identified as Medi-Cal eligible. Data containing confidential information about a beneficiary must be sent through a secure transmission method. If a CWD has questions regarding how to send secure emails, or wants to request an alternate transmission method other than e-mail, please contact Mr. Kevin Phan at (916) 327-0404, or by email at Kevin.Phan@dhcs.ca.gov

Restoration of Benefits

Current Medi-Cal rules regarding the suspension and termination of Medi-Cal for incarcerated juveniles are not changed by this letter. As required by ACWDL 10-06, if a juvenile beneficiary is released from incarceration while Medi-Cal benefits are suspended, the juvenile's Medi-Cal must be restored without termination or requiring a new application if the juvenile is still eligible upon release. In these cases, as required by ACWDL 10-06, CWDs must lift the suspension so Medi-Cal benefits are restored. While benefits are suspended, eligibility redetermination requirements must still be met. As required by ACWDL 10-06, if an incarcerated juvenile fails to meet all Medi-Cal eligibility requirements while his or her benefits are suspended, or when Medi-Cal is terminated at the end of the suspension period, CWDs must provide proper written notice of action.

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Inmate Eligibility Coordination

DHCS will coordinate with the Medi-Cal Inmate Eligibility Program (MCIEP) to ensure that state inmates currently eligible for Medi-Cal coverage of inpatient services provided off the grounds of the correctional facility (or for coverage under the medical parole program) are not included in the list of names forwarded to the counties for review. If a county determines that an individual identified in this match has an MCIEP aid code (F1, G1, F2, G2, or F5) or has the Other Health Coverage Code of "G" (used for medical parolees), the county must not suspend the benefits of these individuals.

Eligibility of Incarcerated Juveniles

Recently enacted legislation, AB 396 (Chapter 394, Statutes of 2011) and SB 695, (Chapter 647, Statutes of 2011) provides Medi-Cal coverage to eligible incarcerated juveniles to the extent that federal funds are available and certain conditions are met. Counties will receive more information on the requirements of those new provisions in a separate ACWDL.

Individuals eligible for Medi-Cal in accordance with AB 396, SB 695, or any other policy under which incarcerated juveniles are Medi-Cal eligible will not be subject to discontinuance by this data match solely on the basis of their institutional status. These juveniles will continue to be eligible for the Medi-Cal coverage they are entitled to if they are otherwise eligible.

CWD Contact Information Requested

DHCS requests that each CWD appoint a representative that is responsible for coordinating with DHCS regarding this process and send a completed CWD Contact Information Form (Attachment B) to Mr. Kevin Phan via email by July 31, 2012.

If you have any questions regarding the instructions in this ACWDL, or if we can provide further information, please contact Mr. Kevin Phan at (916) 327-0404 or by email at Kevin.Phan@dhcs.ca.gov

Original signed by Robert Sugawara

Robert Sugawara, Acting Chief Medi-Cal Eligibility Division

DJJ SUSPENSION REFERRAL FORM

TO BE FILLED OUT BY DHCS:						TO BE FILLED OUT BY CWD:			
Client Index Number (CIN)	County-	County Number	Name	Address	City-State-Zip	Suspended (Y/N)		Comments	
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CWD Contact Information Form										
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