

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



DATE December 22, 2021

Medi-Cal Eligibility Division Information Letter No.: I 21-42

TO: ALL COUNTY WELFARE DIRECTORS

ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS

ALL COUNTY MEDS LIAISONS

ALL CONSORTIA/SAWS PROJECT MANAGERS

SUBJECT: FREQUENTLY ASKED QUESTIONS REGARDING ACWDL 21-24

The purpose of this Medi-Cal Eligibility Division Information Letter (MEDIL) is to provide frequently asked questions (FAQs) regarding <u>ACWDL 21-24</u>, which instructs counties on how to conduct asset verification at application, reported changes in circumstance (CIC), and special case (responsible relative) searches starting January 3, 2022.

In addition to the responses provided in this FAQ and ACWDL 21-24, please continue to reference other ACWDLs and MEDILs DHCS has published regarding asset verification program (AVP) implementation:

- MEDIL I 17-05: Implementation of an Asset Verification Program Test Pilot for ABD Beneficiaries
- ACWDL 17-37: Asset Verification
- MEDIL I 19-12: Update on Asset Verification Reports
- MEDIL I 21-03: Updates on Delivery of Asset Verification Reports

If you have any questions or need further information, please contact Ms. Corinne Marquez by phone at (916) 345-8684 or by email at <a href="mailto:Corinne.Marquez@dhcs.ca.gov">Corinne.Marquez@dhcs.ca.gov</a>.

#### **Original Signed By**

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**Enclosure** 

## Frequently Asked Questions Regarding ACWDL 21-24 Posted December 22, 2021

## A. <u>Case Processing During the COVID-19 Public Health Emergency (PHE) and</u> Negative Action Moratorium

1. Are Medi-Cal applicants approved for benefits prior to receipt of the asset report afforded PHE protections granted to beneficiaries?

Yes. If an applicant is approved for Medi-Cal benefits prior to receipt of the asset report, then they are considered Validly Enrolled pursuant to 42 CFR 433.400(b) and are granted current PHE protections for beneficiaries. Counties must document in their case notes/files of actions taken.

2. Since counties cannot discontinue individuals later found to be over property, what should be done if an asset report reveals negative information about a case?

If an asset report reveals negative information about a case, then the County Eligiblity Worker (CEW) is required to document that information in the beneficiary's case file, indicating no adverse action was taken due to current PHE protections. Per Centers for Medicare and Medicaid Services (CMS) guidance, the beneficiary must be kept enrolled in Medi-Cal in accordance with 42 CFR 433.400(c)(2) through the end of the month in which the PHE ends.

3. Are counties permitted to calculate overpayments and submit fraud referrals?

The calculation of overpayments and submission of fraud referrals is permitted for annual renewals and reported CICs, subject to the allowable PHE case processing actions as specified in <u>ACWDL 21-16</u>.

#### B. Case Processing for Reported CIC

4. Are counties required to request asset verification at CIC, no matter what the change is?

CEWs do not have to request asset verification for all reported changes, only for those that result in the redetermination of eligibility and/or resetting of the beneficiary's redetermination date. For example:

- No, for an address change.
- Yes, for financial change and household change.

5. At CIC, can the renewal date be reset prior to receiving the AVP report or do counties need to wait for the report before resetting the renewal date?

Yes. Counties shall not deny or delay eligiblity due to non-receipt of the asset reports.

6. When the asset report comes back for a CIC and the information matches what is in SAWS, what value would be updated for the resource in SAWS?

At CIC, counties will continue to use attested value information in the case file and not update SAWS with the AVP report information.

Note: This also applies to annual renewals.

#### C. Lookback Periods

7. Even with a 90 day lookback for applications and reported CIC, is the expectation to only use the information to determine eligibility going forward?

This will depend on how much retroactive eligiblity is being requested, whether that is 30, 60, or 90 days. If 90 days of retroactive eligibility is not needed, then counties are instructed to use only the lookback period needed to make a determination of eligibility on the case.

8. What kind of data will be provided in the 60 month lookback period for LTC applicants?

It will be the same data as is currently provided in the monthly annual renewal files.

9. What will trigger the lookback period at application? Is it the application month or the date the request is initiated?

The lookback period is determined by the date the weekly batch file is submitted to the vendor, not the application date or the date the request was initiated. Therefore, counties should be mindful of when asset verification requests are being submitted relative to the intial application and batch submission dates.

For example, if an asset verification request for a three- month lookback period is submitted on January 31<sup>st</sup>, but that week's batch file is not sent to the vendor until February 7<sup>th</sup>, then the current response month would be February, with the last lookback month being November. The table below demonstrates the

changes that would occur for a 3 month lookback, depending on when the batch was submitted to the vendor:

Request Submission Date	Batch Submission Date	Current Month/Year	Lookback Month/Year
January 6, 2022	January 13, 2022	January 2022	December 2021 November 2021 October 2021
January 31, 2022	February 7, 2022	February 2022	January 2022 December 2021 November 2021

<u>Note:</u> The batch submission dates listed above are examples and should not be assumed to reflect the vendor's actual batch processing schedule.

#### D. <u>Use of the Modified AP21 Add Transaction Screen</u>

10. I cannot access the AP21 Add Transaction Screen in the Medi-Cal Eligibility Data System (MEDS), even though I am required to submit asset verification requests as part of my job duties. What should I do?

Please reach out to your county MEDS Liaison for access.

11. Why do the Asset Verification Inquiry and LTC Indicator options only appear on the AP21 screen after having selected for Option C, despite there being four different ways to acess the AP21 screen in MEDS?

This is because AVP requests are completed on a whole case basis, and the only way to achieve that in MEDS is through Option C. The other three methods result in an individual request.

12. In addition to name, DOB, and SSN, do counties also need to enter the application date and Serial NBR to request an asset report?

Yes.

13. Is there an indicator in MEDS that records if and when an AVP report was requested?

No. Counties are responsible for developing their own internal processes to keep track of AVP requests that have already been submitted. While duplicate requests can be removed from a single batch file, they cannot be removed across multiple batches.

#### E. <u>Turnaround Time and Notification of Receipt/Availability</u>

### 14. Once a weekly batch is submitted, how long does it take to receive results?

DHCS expects to receive weekly response file information within approximately 12 calendar days of the batch being sent to the vendor, and received by CalSAWS and CalWIN within 13-14 calendar days from the intial send date. Given the variability of batch processing times, please allow for an additional 1-2 calendar days for response file information to become viewable within CalSAWS and CalWIN.

<u>Note:</u> The turnaround time for the monthly renewal files will still remain around 15 calendar days, with those files to be received by DHCS on or around the 20<sup>th</sup> of each month.

#### 15. How will counties be notified when the weekly reports become available?

DHCS will notify counties via email once it has received the response file from the vendor, but it is still the responsibility of CalSAWS and CalWIN to load the data into their respective systems for viewing. CalSAWS and CalWIN, at such time, may elect to send a separate notification and/or worker alert indicating that the data is ready for viewing within their systems.