



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



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TO: ALL COUNTY WELFARE DIRECTORS Letter No.: 08-58  
ALL COUNTY ADMINISTRATIVE OFFICERS  
ALL COUNTY MEDI-CAL PROGRAM SPECIALIST/LIAISONS  
ALL COUNTY HEALTH EXECUTIVES  
ALL COUNTY MENTAL HEALTH DIRECTORS

SUBJECT: DOCUMENTATION NEEDED WHEN REFERRING APPLICATIONS TO  
THE HEALTHY FAMILIES PROGRAM  
(References: All County Welfare Directors Letter 07-03 and 07-09)

This All County Welfare Directors Letter (ACWDL) is to remind counties of the documentation needed when referring a child from Medi-Cal to the Healthy Families Program (HFP) for an eligibility determination at initial application, annual redetermination (RV), or during the Medi-Cal Midyear Status Report (MSR) when the MSR requirement for children becomes effective on January 1, 2009.

At the initial Medi-Cal application, there will be instances when a child under age 19 is determined not eligible for no-cost Medi-Cal because their income is above the Federal Poverty Level for that child's age group, but they appear to be income eligible for HFP. It is important that these applications be forwarded to the HFP for an eligibility determination, if the family provides consent.

The Medi-Cal to HFP Bridging program (Bridging) is for children under age 19, who no longer qualify for no-cost, full-scope Medi-Cal, but who appear to be income eligible for the HFP. The Bridging program provides these children with one additional month of no-cost, full-scope Medi-Cal to give time for the county to forward the case information of families who have consented to the HFP, or to give the families time to apply for the HFP if they have not given consent to the county to forward their case information to the HFP.

The MSR requirement for children will result in some children moving from no-cost, full-scope Medi-Cal to Medi-Cal with a share-of-cost (SOC) before their annual RV. The revised MSR form contains an “opt out” statement for parents/caretakers to request the county not to refer their children to the HFP when they are determined SOC eligible. When the “opt out” statement is not checked, children whose family income is within the HFP income guidelines should be referred to the HFP just as they would during an annual RV. Before referring a child to HFP, the county shall conduct a Medi-Cal Eligibility Data System(MEDS) file clearance to ensure the child being referred to HFP is not already enrolled. If the child is already enrolled into HFP, the child’s MEDS record would show eligibility under the HFP aid code 9H and counties shall not refer the child to the HFP. However, the child is still eligible for the one-month no SOC Medi-Cal under the Bridging Program.

### HFP Requirements

The HFP eligibility requirements are similar to Medi-Cal but have higher income guidelines. To determine a child’s eligibility for the HFP, the HFP regulations require income documentation be dated within 45 days of the HFP eligibility determination. If income documentation is older than 45 days, the HFP accepts other supporting documentation to substantiate the family’s income. The supporting income documentation counties can provide to the HFP is listed in the documentation section below.

### Documentation

To facilitate a child’s transition from Medi-Cal to the HFP, counties shall include documentation required by the HFP to determine the child’s eligibility. To prevent delays in the child’s eligibility determination, the HFP needs to determine the family size with respect to the relationship of household members, family income, and the reason(s) that a child is no longer eligible for no-cost, full-scope Medi-Cal.

Counties must obtain appropriate consent from the family to share information with the HFP and complete the Medi-Cal to HFP transmittal form (MC 363), which is downloadable from the Department of Health Care Services website at <http://www.dhcs.ca.gov/formsandpubs/forms/Forms/mc363.pdf>, to send case information to the HFP.

Counties must list all household members on the MC 363, including the parents/step-parents; all children, including step-children and unborn(s); and send the following appropriate documents to the HFP with the MC 363:

A copy of the “stand-alone” consent form or a county notation in the comment section of the MC 363 that states family consent was given verbally. (Use only if consent was not obtained as part of the most recent application or RV form and MSR form.)

A copy of the most recent application or RV form and MSR form, if available.

A copy of the most recent Medi-Cal Notice of Action (NOA) showing the income calculation for the Medi-Cal Family Budget Unit (MFBU) with the SOC amount. If at all possible, send a NOA that was issued within the last two months of the referral. Counties should not send a copy of a NOA showing the Mini Budget Unit calculation due to Sneed income allocation because HFP does not accept the Sneed NOA as income verification.

A copy of the most recent discontinuance NOA with the reason the child has been determined ineligible for no-cost Medi-Cal.

A copy of any proof of income, dated within 45 days.

A copy of the current MFBU budget computation worksheet. The HFP will use the MFBU budget computation worksheet as supporting income documentation.

A photocopy of the following documents, if they are available in the case file:

- Birth certificate (If the child’s US citizenship was validated by the automated birth record match via MEDS, please indicate on the MC 363.)
- Immigration verification or Proof of Acceptable Citizenship or Identity Documents (DHCS 0011)
- Proof of tribal affiliation (American Indian or Alaska Native)

The underlying principle of referring applications to the HFP is to provide a seamless process to refer a child from Medi-Cal to the HFP. If the HFP can not complete the child’s eligibility determination based on all available documentation from the family’s Medi-Cal case information, the HFP will contact the county or the family for additional information.

If you have any questions regarding this letter or the Bridging program, please contact Ms. Coleen Keelan, of my staff, at (916) 445-4062 or email at [coleen.keelan@dhcs.ca.gov](mailto:coleen.keelan@dhcs.ca.gov).

Original Signed By

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Medi-Cal Eligibility Division