

DEPARTMENT OF HEALTH SERVICES

714/744 P STREET
SACRAMENTO, CA 95814



May 23, 1984

To: All County Welfare Directors

Letter No 84- 21

COUNTY MEDS ADVISORY GROUP (CMAG)

This letter is to inform you that the Department of Health Services (DHS) has established a Medi-Cal Eligibility Data System (MEDS) user/advisory committee. The committee name will be County MEDS Advisory Group (CMAG).

The primary purpose of CMAG is:

- o To periodically obtain input on the operational status of MEDS from the perspective of both the counties and DHS; to identify operational issues and obtain advice as to effect, resolution, etc.
- o To inform counties of any proposed changes to MEDS and obtain advice relative to implementation plans, schedules, etc.
- o To analyze future policies and procedures which may impact MEDS.
- o To promote a better understanding of MEDS and the potential of the system from both county and state perspectives.

Connie Farmer, Chief of the Systems Unit in the Medi-Cal Eligibility Branch (MEB) will serve as chairperson. Ed Briles, Data Systems Branch (DSB), will serve as a recording secretary.

The DHS contacted various counties that had expressed interest in participating as members of CMAG. During the selection process, the following criteria was considered: size of the county, "on-line" county, CDS county and whether or not the county was an "in-house" county. Since the majority of the counties that volunteered were in the southern part of the state, meetings will, for the most part, take place in southern California. The following will serve as participants of CMAG:

- o Inyo
- o Yuba
- o San Diego
- o Riverside
- o Orange

- o Kern
- o San Bernardino
- o Los Angeles

CMAG will hold meetings on a monthly basis. However, on occasion, it may be necessary to call a meeting for special issues. Meetings shall generally convene at 10:00 a.m. and adjourn by 3:00 p.m.

Attached are the minutes from the first CMAG meeting held in El Monte on April 2, 1984.

The next meeting will be held in San Diego on May 23, 1984. If you wish to add items to the Agenda, you may contact a county representative or Connie Farmer.

If you should have any questions regarding this letter, the minutes attached, or any items you wish to add to the next agenda, please feel free to call Connie Farmer at (916) 445-1912.

Sincerely,

Original signed by

Caroline Cabias, Chief
Medi-Cal Eligibility Branch

Attachment

cc: Medi-Cal Liaisons
Medi-Cal Program Consultants

COUNTY MEDS ADVISORY GROUP MINUTES
APRIL 2, 1984

The meeting was called to order by Chairperson Connie Farmer at the Los Angeles County Department of Public Social Services Administrative Office in El Monte.

I. Introduction of Attendees

Individuals in attendance introduced themselves, and stated their area of responsibility for County/MEDS operation. Those in attendance were:

Inyo	Darlene Landis
Los Angeles	Cecelia Buys William Ivey Phyllis Ward Jim Weathers
Orange	Karen Asbury John LaRoche
Riverside	Ginger Martin Micki Shieley
San Bernardino	Dolly Goodspeed Ron Wright
San Diego	Judy Baker
Yuba	Barbara Kelsey
DHS	Ed Briles -- Data Systems Branch Connie Farmer -- Medi-Cal Eligibility Branch Dave O' Farrell -- Data Systems Branch Karla Gurley -- Medi-Cal Eligibility Branch

Representatives from Kern County were not in attendance.

II. Purpose of Advisory Group

Connie stated that the purpose of the CMAG was to disseminate information on proposed MEDS changes, to gather information from counties regarding MEDS problems and desired changes to that system, to analyze future policies and receive input on procedures that may impact MEDS, and to promote a better understanding of MEDS and its potential. Connie went on to state that this was an information sharing group which would cooperatively address County/MEDS issues and resolutions to problems.

III. Specific Agenda Items Discussed

A. Duplicate Records on MEDS

Description

When two records for the same individual are added to MEDS with different MEDS IDs, counties must correct this problem by changing county ID numbers (i.e., counties must assign a different county ID to the MEDS ID they wish to use).

Planned Action

The Department is in the process of developing a mechanism to allow counties the capability of "linking" the correct county ID with the correct MEDS ID without assigning new county IDs. This change has been identified as a priority and counties will be informed of our proposed plan prior to implementation. Once confirmation of the proposed plan is accomplished by all users, MEDS will be modified as quickly as possible.

B. Delayed Termination of SDX Records

Description

Currently discrepancies exist between the SDX microfiche/tape or paper listings and the MEDS data base. In most situations an individual shows not eligible on the tape/fiche or paper listing and eligible on MEDS. This precludes counties from taking over the MEDS record when trying to establish eligibility for the discontinued SSI/SSP individual.

Planned Action

Initially, effective with May 1984 month of eligibility, the Department will compare the SDX Medi-Cal card print file with the MEDS data base. If an individual record is not on the card print file and an active SSI/SSP record is on MEDS, the MEDS record will be terminated. This process will then allow counties to establish eligibility. This modification will eliminate the majority of SSI/SSP -- county eligibility problems. Other SDX/MEDS changes will be implemented in the future and counties will be notified.

C. Request for SSI/SSP Medi-Cal Cards When an Individual is Currently a County Eligible

Description

An individual has been determined SSI/SSP eligible and has been given an SSI/SSP eligibility referral form by SSA in order to obtain a Medi-Cal card. The individual was a county eligible and that eligibility still shows on MEDS.

Planned Action

It was determined that this was a county/SSA problem. The county should verify the correct program the individual is on. If SSI/SSP is the correct program, for termination of the county record should be accomplished.

D. Delay in Receiving County Worker Alert

Description

Timely receipt of county worker alerts varies considerably depending on locale and mode of delivery. While this problem was greatest during the Greyhound strike it still exists to a lesser extent.

Planned Action

DHS will prepare an All County Welfare Directors Letter describing the different delivery options available and approximate delivery time frames. Should counties wish to change their current delivery process they may do so. The All County Welfare Directors Letter will be forthcoming sometime in May 1984.

E. MEDS Updates not Always Processed Timely (Online and Batch)

Description

Counties have submitted online and batch transactions to MEDS but those transactions are, on occasion, not processed in the nightly MEDS update to be reflected on the data base the following day.

This situation occurs when an update problem is identified and there is insufficient time to restore the data base to what it was prior to update and rerun the online and batch transactions.

While the Department takes every precaution to ensure updates are processed each night, it can be expected that problems will occur.

Planned Action

DHS will make every effort to ensure that a message is displayed on the MEDS terminals by 9:00 a.m. the next day following an

unsuccessful update. In addition, Eligibility Branch will attempt to contact counties by telephone.

Data Systems Branch will look into a way to negate the need for counties to log off then on in order to review a daily broadcast.

F. Birthdate Changes to Validated SSANs

Description

Currently counties are unable to make birthdate changes to SSAN validated records if the change is outside of the birthdate range edits.

Planned Action

The Social Security Administration is in the process of revising birthdate range criteria. Likewise DHS will revise its birthdate range criteria. Counties will be instructed via All County Welfare Directors letter of the change.

In addition, the capability for counties to request that validated verification codes be changed to allow birthdate changes outside of acceptable ranges will be implemented sometime in June 1984.

G. Problems with Tape Delivery (Change in Carrier or Lost Tapes)

Description

Some counties have expressed concern regarding last minute changes in delivery by the State or nonreceipt of tapes.

Planned Action

DHS desires to standardize carrier service to the extent possible. Greyhound has a new service which may have possibilities for some areas. See item D above for other planned action.

H. Counties not Notified Timely of Tape Problems

Description

Situations have arisen whereby a county tape was not processed -- not sent by the county or misplaced/overlooked by the State and not processed.

Planned Action

A procedure is in place whereby if there is a gap in tape numbers (indicating a missing magnetic tape submitted by counties) Data

Guidance is to notify the county the first day and Eligibility Branch the next day (if still missing).

Data Guidance is looking into a different "positive reporting" method for controlling receipt/processing of magnetic tapes.

I. Bursting of reports Resulting in Duplication of Some Paper or report data and Omission of Others

Description

This problem arises when a break in paper being printed on the laser printers occurs. To avoid loss of data when the printer restarts with a new batch of paper it reprints several of the records from the previous report.

Planned Action

Data Systems Branch will look into modifications to laser printing of reports to avoid this problem.

J. Reports Received Without an Explanation

Description

The situation referred to relates to the SSAN Validation reports released to counties in February. The All County Welfare Directors Letter describing the reports was received in the counties only a couple of weeks before the reports were sent. This did not allow counties sufficient time to notify staff of the reports and appropriate processing.

Planned Action

DHS will attempt to ensure better coordination in the future.

K. Inter-County Transfer Conflicts

Description

Currently, if an inter-county transfer occurs and the "prior" county has not terminated the MEDS record, the "new" county is unable to take the case over.

Planned Action

A MEDS transaction (EW 05) when implemented will eliminate this problem. This transaction is used to transfer responsibility for a recipient's case from one county to another.

The State anticipates implementation of this change in August 1984.

III. Announcements and Unscheduled Agenda Items

- A. Connie announced that the MEDS County Post Implementation Review team was scheduled to begin in Yolo and Sonoma Counties. An All County Welfare Directors Letter announcing the objectives, areas to be reviewed, etc., was released. Counties wishing to volunteer for early review should contact their Eligibility Branch liaison.
- B. Benefits Review Unit (BRU) Update -- The new Fiscal Intermediary contract with Computer Science Corporation contains a provision to automate share of cost claims. This provision will eliminate BRU. Counties will receive further information on the BRU phase out as it occurs.
- C. Statewide Automated Welfare System (SAWS) -- Connie explained the progression from SPAN to the Auditor General contract with Arthur Anderson, their report, and the DSS response, which culminated in SAWS. One of the elements of SAWS is a proposed expansion of MEDS to provide a "Central Index" (by adding non-Assistance Food Stamp recipients to MEDS). If approved by the Legislature, the current plan calls for implementing up to four counties by the end of Fiscal Year 1984/85.

SAWS also includes an automated eligibility determination system. A part of this is the Automated Intake System (AIS) being piloted in San Diego. Judy Baker stated that she would set up a demonstration of AIS for the next meeting.

- D. Project Intercept -- This "project" is essentially a computer program developed by Federal DHHS auditors. It was understood to have the ability to provide information as to whether an SSAN had ever been issued and, if so, the year of issuance. At this point our investigation has not confirmed that the latter feature exists (which would seem to be most useful). Clarification is being sought.
- E. Possible New Eligibility Worker Alert Message -- As the result of Quality Control reviews, errors were identified where counties failed to discontinue certain cases (or change aid categories) when individuals turned age 21 years. The state staff indicated that a worker alert could be sent stating an individual was nearing age 21 years. This alert would have to be sent for anyone turning age 21. The county would have to determine which cases needed action and which did not.

County staff in attendance indicated that most county internal EDP systems notify them of the age change and that the report would not be that useful.

The MEDS User Committee attendees were asked for suggestions on MEDS enhancements. Those items were:

1. Timely and ongoing receipt of MEDS statistical reports.
2. Statistical reports broken down by district.
3. Included on statistical reports the number of MEDS inquiries.
4. Timely updating of MEDS User Manual.
5. Records that are terminated after renewal show forced issuance. If eligibility is reestablished for the forced issuance month, counties would like the "041" eligibility status to change to "001".

Items 1 through 4 are being worked on at this time. Counties will be notified of the change in statistical reports and will receive MEDS User Manual updates upon completion. Further analysis is required for item 5. State staff will report on the progress of this enhancement at future meetings.

IV. Next Meetings

The next meeting of the MEDS User Committee is scheduled for May 23, 1984, in San Diego.

The preliminary agenda for the May 23 meeting is attached to these minutes. Any county which wants to suggest other agenda items should call their Eligibility Branch MEDS liaison by May 21, 1984.

Attachment

CMAG
Agenda
May 23, 1984
San Diego, CA

1. Discussion of minutes - updating items and questions.
2. Upcoming change cycle items.
3. Phase III.
4. MEDS enhancements.
5. AB 1305 update.
6. Extending MEDS availability.
7. Update on reconciliation schedule.
8. Indicator on MEDS if beneficiary has previously misreported in another county.
9. Automated Intake System (AIS) presentation.
10. Other.