DEPARTMENT OF HEALTH SERVICES

P.O. BOX 942732 SACRAMENTO, CA 94234-7320



November 8, 1991 Letter No.: 91-101

TO: All County Welfare Directors All County Administrative Officers All County Medi-Cal Program Specialists/Liaisons

SUBJECT: Edwards v. Kizer Lawsuit

The purpose of this letter is to clarify stipulations of the <u>Edwards</u> v. <u>Kizer</u> lawsuit and to request cooperation between county AFDC and Medi-Cal staff in processing AFDC discontinuances that impact the <u>Edwards</u> caseload.

Background

The primary intent of the <u>Edwards</u> v. <u>Kizer</u> judgment is to ensure families terminated from AFDC cash benefits for specified reasons continue to receive Medi-Cal benefits until a determination of eligibility or ineligibility for Medi-Cal Only benefits is made and adequate and timely notice of such determination is provided.

When a recipient of AFDC is discontinued, Medi-Cal eligibility staff must take one of the following possible actions:

- Determine if the recipient is eligible for Medi-Cal Only benefits, either with or without a Share-of-Cost;
- Determine if the recipient is eligible for the four-month continuing category pursuant to Title 22, California Code of Regulations (CCR), Section 50243 or Transitional Medi-Cal.

If the Medi-Cal Only determination is not completed by the effective date of the AFDC discontinuance, the AFDC termination reason entered into MEDS by the county will cause an automatic aid code 38 (Edwards) card to be issued by the State until the determination is completed. Timely and adequate notice must be provided before discontinuing a recipient.

If in the process of making a Medi-Cal determination the information in the AFDC case file is insufficient, the county must give the recipient an opportunity to provide additional information on the MC 210E (Statement of Facts - Edwards)

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A detailed accounting of specific instructions for discontinuance codes and MEDS processing can be found in Department of Health Services ACWD Letters 90-06 and 90-53 (copies enclosed).

Processing General Guidelines/Information

In the spirit of cooperation between welfare programs and the Departments of Social Services and Health Services, it is important to identify actions necessary to complete the <u>Edwards</u> determination. The ultimate status of the case depends on a coordinated arrangement between AFDC and Medi-Cal staff relating to intraprogram status changes. Information from the AFDC case file must be made available to the Medi-Cal worker before an <u>Edwards</u> determination can be made. In counties where the AFDC workers are in separate locations, the critical information sharing can be burdensome due to logistics; however, creative solutions can be devised.

Critical information required from the AFDC case file includes:

Identification of the Family Budget Unit

- Names
- Aqes
- Relationships to recipient/applicant

Identification of Current Income

Who has income, what is the monthly amount?

Identification of Resources (Property)

Who has property, what is the value of each person's property?

Linkage Factors

- Are there children under 21 in the home?
- Is the recipient/spouse disabled/incapacitated?
- Is the Primary Wage Earner Unemployed?
- Is there an absent parent?
- Is the recipient/spouse age 65 or over?
- Is the recipient/spouse in Long Term Care?
- Is the recipient/spouse pregnant?

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Generally speaking, this information can be compiled from viewing the most recent copy of the following documents in the AFDC case:

CA 1 or SAWS 1 JA 2 or SAWS 2 CA 7 or SAWS 7 CA 8, CA 8A or CA 20 Medical information (disability, LTC, incapacity, etc.)

Each county and each district office within each county should develop specific procedures to facilitate the critical information sharing. Failure to provide information timely increases QC errors and holds the State at risk of federal sanctions and withholds.

The State Department of Finance has identified <u>Edwards</u> cases as a critical budget element and is monitoring caseload movement closely. Immediate reductions in the number of continuing Medi-Cal cases beyond 90 days is critical.

We encourage program managers from AFDC and Medi-Cal to meet and develop plans to facilitate cooperation and information sharing. By working together, we can reduce errors and increase accuracy in administering health and welfare programs.

Thank you for your immediate attention to this matter. If you have questions or comments regarding <u>Edwards</u> policy please contact RaNae Dunne (916) 657-0714.

Robert A. Horel Deputy Director Welfare Programs Department of Social Services

Enclosure

Sincerely,

ORIGINAL SIGNED BY

Frank S. Martucci, Chief Medi-Cal Eligibility Branch