

DEPARTMENT OF HEALTH SERVICES

14/744 P STREET

OX 942732

A MENTO, CA 94234-7320



March 30, 1992

Letter No.: 92-27

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

SUBJECT: FACT FINDING MEETINGS FOR MEDI-CAL ELIGIBILITY REGARDING
APPLICATIONS BASED ON DISABILITY

The Medi-Cal Eligibility Branch (MEB) has received information from some counties concerning applications for Medi-Cal based on disability. MEB is aware that the increased volume of Medi-Cal applications based on disability has caused greater demands on the county staff, county medical resources, and the Department of Social Services (DSS), State Programs, Disability Evaluation Division (DED). MEB is concerned with this situation.

In an effort to improve this situation, MEB in conjunction with DSS has obtained approval to hire additional DED staff. However, the technical knowledge the DED analyst is responsible to acquire requires an extensive training period. It is approximately one year before a new DED analyst copes effectively with a full caseload. Therefore, it will be some time before the full affect of this additional staff will be realized.

To further facilitate Medi-Cal determinations based on disability, MEB will commission a committee. The committee members will be composed of interested counties, State Programs DED line staff, DSS State Programs Central Office, Administrative Adjudications Division and MEB. The name of this committee will be the Medi-Cal Application Based on Disability (MABD) Committee. MABD will be responsible for analyzing the Medi-Cal process for applications based on disability. This analysis will include all aspects of the disability based Medi-Cal determination. The result of MABD's efforts will be reflected in new procedures for Medi-Cal applications based on disability.

Prior to the first meeting of MABD, MEB desires input from all counties. Therefore, **MEB REQUESTS EACH COUNTY TO ATTEND A MEETING OR SEND THEIR CONCERNS REGARDING THE MEDI-CAL APPLICATION BASED ON DISABILITY TO MEB.**

Three meetings will be held. Reservations are necessary due to room capacity. The date, time and location of these meetings are as follows:

SOUTHERN MEETING

April 27, 1992

10:00 AM

Social Services Agency

Anaheim Regional Centre*

3320 East LaPalma Ave., Room B480

Anaheim, CA 92806

Receptionist (714) 575-2400

Emergency Contact Number (714) 575-2411

** It is necessary to register with the security guard.*

The Anaheim location is the same as the January 1992 Southern Counties Meeting.

All County Welfare Directors
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CENTRAL MEETING

May 4, 1992

10:00 AM

Social Services Department
40 Douglas Drive, Rooms 1 and 2
Martinez, CA 94553
Receptionist (510) 313-1500
Emergency Contact Number (510) 313-1505

NORTHERN MEETING

May 7, 1992

10:00 Am

Shasta County Department of Social Services
Cascade Building
2460 Breslauer Way, Room 55
Redding, CA 96001
Receptionist/Emergency Contact Number (916) 225-5526

If you need to clarify directions for any of these meetings, please contact the Medi-Cal liaison or receptionist.

RESERVATIONS

Telephone Elaine Bilot at (916) 657-1246 by April 23, 1992 to make a reservation for one of the meetings. If voice mail answers, please state slowly:

1. *What is the location of the meeting that you will attend?*
 2. *How many staff will attend from your county?*
 3. *What county do you represent?*
 4. *Lastly, state your name, spell it and your telephone number.*
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The information received from these meetings or your written correspondence will be used to facilitate procedural changes. If your county has effectively solved certain problems connected to applicants for Medi-Cal based on disability, MEB would appreciate this data as well. The information should cover all aspects of an application based on disability including emergency disability cases.

MEB will consolidate your information for further investigation by MABD. If you are interested in participating in the MABD Committee, you must sign the attendance sheet and indicate your interest at one of the three meetings. Should you be interested in the committee, you must indicate if you are able to travel statewide for a monthly meeting. It is anticipated, MABD Committee will meet regularly for approximately one year. The location of the monthly MABD meeting will depend on the interested counties.

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The agenda for the three meetings is enclosed. If your county is submitting written correspondence, please send your comments to:

Medi-Cal Eligibility Branch
Attention: Elaine Bilot
714 P Street, Room 1650
Sacramento, CA 95814

Thank you in advance for your time and cooperation.

Sincerely,

ORIGINAL SIGNED BY

Frank S. Martucci, Chief
Medi-Cal Eligibility Branch

Enclosure

AGENDA

MORNING SESSION

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|----------|---|
| 10:00 AM | Sign-in |
| 10:15 AM | Introduction and DHS Overview of the Medi-Cal Application Based on Disability Process |
| 10:30AM | Host County Presentation of an Eligibility Worker's Procedures for a Medi-Cal Application Based on Disability |
| 10:45 AM | Medi-Cal Disability Application Assessment at State Programs, Disability Evaluation Division |
| 11:30 AM | Lunch |

AFTERNOON SESSION

- | | |
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| 1:00 PM | Discussion of the Medi-Cal Application Based on Disability Points for Possible Improvement |
| 3:00 PM | Close of Meeting |