Letter No.: 96-56

DEPARTMENT OF HEALTH SERVICES

714/744 P Street P.O. Box 942732 Sacramento, CA 94234-7320 (916) 657-2941

October 11, 1996



TO: All County Welfare Directors

All County Administrative Officers

All County Medi-Cal Program Specialists/Liaisons

NOTICE(S) OF ACTION (NOAS)

This letter updates the Department of Health Services' (DHS) policy for (NOAs) used to inform applicants and beneficiaries of eligibility and program status:

- (1) DHS will continue to:
 - (a) publish and distribute NOAs and NOA changes,
 - (b) provide state NOA language for all circumstances that might apply to the eligibility for its programs, and
 - (c) maintain manual NOAs language at the state level.
- (2) Counties will decide how to carry out NOA changes and to what degree they are automated. Counties are responsible for the timely and accurate implementation of these NOA changes.
- (3) Counties have the flexibility to pick and use appropriate state language suited to applicants'/beneficiaries' individual eligibility circumstances:
 - (a) counties can choose the state language to use within their automated welfare systems,
 - (b) add as appropriate, their own language to NOAS to adapt to special or unforeseen circumstances (provided they obtain approval for such language from DHS), and
 - (c) consult on an as needed basis with DHS staff for direction/clarification on individual NOA issues/state language.

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- (4) If counties choose not to automate particular eligibility program NOAs or NOA changes, they will:
 - (a) notify DHS, Medi-Cal Eligibility Branch they will not automate a new NOA requirement or change within 90 days of its release, and
 - (b) have available and use manual NOAS with appropriate state language for the program/circumstance in order to remain in compliance with state requirements.

Consortia and counties are reminded the Medi-Cal program does not require a specific NOA format such as TURNER. It is a Consortia/County decision on what sort of format within which to place the appropriate state language.

This policy applies to all Consortia/Counties. If there are questions about NOAS and specific Medi-Cal requirements, please contact Ms. Ana Ramirez at (916) 657-1401.

Sincerely,

ORIGINAL SIGNED BY

FRANK S. MARTUCCI, CHIEF Medi-Cal Eligibility Branch