

General Relief (GR) Program Guide Letter #43

August 29, 2007

Subject COUNTY MEDICAL SERVICES (CMS) RECERTIFICATIONS FOR GR RECIPIENTS AND OTHER CLARIFICATIONS

Effective Date Upon receipt.

Reference County policy.

Purpose The purpose of this letter is to provide:

- revised instructions for completing the CMS recertification for GR recipients;
- clarifications regarding the screening requirements when an individual applies for GR; and
- requirement for a Medi-Cal application when an individual either claims a disability that is expected to last more than 12 months or has been incapacitated for 12 months or longer.

Background GR recipients between the ages of 21 and 64 are categorically eligible for CMS if not already receiving Medi-Cal. The procedures for initial certification of GR including CMS were implemented in September 2005. Under these procedures, the GR worker completed the CMS-4 and gave the new recipient the CMS card.

Changes/ Clarifications **Recertifications** Effective with the receipt of this letter, GR workers will now complete the CMS recertification when they complete the GR recertification. They will follow the same actions as they do when completing the initial certification, including the steps in the table below.

Step	Action
1	Complete initial screening, including asking about potential eligibility to Medi-Cal.
2	Issue CMS card.
3	Give CMS Patient Handbook.
4	Complete CMS-4, County Medical Services Registration Information.

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Changes/ Clarifications (continued)

Initial Screening

During initial screening, the screening worker must ask questions regarding potential eligibility for Medi-Cal including asking if the applicant claims a disability expected to last longer than one year. The worker must also ask the applicant if they have a Social Security Disability or Supplemental Security Income (SSI) application or appeal that is pending a determination and if they have applied for Medi-Cal with a county worker. The worker must check the Medi-Cal and SSI appeal information using CalWIN and MEDS. After verifying, refer to Medi-Cal, if appropriate, using the current procedures.

Application for Medi-Cal

An applicant/recipient must apply for Medi-Cal and must cooperate with the Medi-Cal application process in order to continue to be eligible for GR and CMS when he/she:

- claims to have a disability that is expected to last more than 12 months;
- has been incapacitated for 12 or more months;
- is applying under the Interim Assistance Program and does not have an SSI application pending or has not been denied SSI within the past 24 months for the same disabling condition; or
- provides information on the 14-4 HHS, Medical Services Screening Sheet indicating potential Medi-Cal eligibility.

Completing the Re- certification

GR workers must follow the same actions when completing the GR recertification as they now do for the initial certification, including screening for potential Medi-Cal eligibility. See the table in **Changes/Clarifications**, above.

Training

Training is being developed and will be presented to GR eligibility staff to provide a reminder on the proper completion of the CMS card and the CMS-4, Registration Information form. Some items that have been identified as a training need for the CMS-4 are:

- Income questions not completed
- Status codes not completed
- Reason for short certification not entered
- Primary Care Clinic (PCC) number not entered

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Training

(continued)

- Certification period not entered correctly
- CMS Representative ID and Date not entered
- Individuals with pending Medi-Cal or SSI with the wrong Status Code.

Completing CMS Cards

Staff are reminded that they should be entering the date as an alpha, not numeric (for example, Mar 07 instead of 3/2007).

Replacement CMS Cards

If a GR recipient contacts the worker and requests a replacement for a lost or stolen CMS card, the worker must take the action in the table below.

Step	Action
1	Clear CalWIN to determine the correct certification period.
2	Complete a new CMS card with the recipient's information.
3	Enter "Duplicate" in red on the card.
4	Give the replacement card to the recipient.

Application for Medi-Cal

Individuals who are potentially eligible for Medi-Cal must apply for Medi-Cal. They must cooperate with the application process in order to continue to be eligible for GR or CMS.

If there is not a pending Medi-Cal application, and the applicant/ recipient has...	Then ...
Not been advised to apply for Medi-Cal,	Refer the recipient to the appropriate Family Resource Center (FRC) to apply. Certify CMS for 3 months to allow compliance with the Medi-Cal application process.
Been advised to apply for Medi-Cal,	Deny the GR application or discontinue the GR case with timely notice, as appropriate.

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Automation Impact No impact.

Forms Impact No impact.

Quality Assurance Impact Effective with the August 2007 review month, Quality Assurance will cite with the appropriate error any case that does not follow the requirements of this letter.

Summary of Change The table below shows the changes in the Program Guide.

Article/Section	Changes
GRPG 90-256	<ul style="list-style-type: none"> • Minor changes to format, • Added requirement to follow initial certification steps when completing the GR recertification.
GRPG 90-753	Added requirement for the applicant to apply for Medi-Cal if the incapacity is expected to last 12 months or longer.
GRPG 90-801	Added requirement for the applicant/recipient to apply for Medi-Cal if when applying for or receiving Interim Assistance Program benefits.

Filing Instructions The table below shows how to file the Program Guide material.

Action	Pages
Remove	GRPG 90-256
	GRPG 90-750-1 through 90-750-2
	GRPG 90-750-5 through 90-750-7
	GRPG 90-800-1 through 90-800-2
Replace	GRPG 90-250-11 through 90-250-14
	GRPG 90-750-1 through 90-750-2
	GRPG 90-750-5 through 90-750-8
	GRPG 90-800-1 through 90-800-2

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**Manager
Approval**

ORIGINAL SIGNED BY:

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