

County of San Diego, Health and Human Services Agency (HHS)
Medi-Cal Program Guide Letter

Updated Beneficiary Contact Information received from Medi-Cal Managed Care Health Plans (MCHPs)	Number	Page
	824	1 of 1

Issue Date:

November 12, 2015

Effective Date:

Upon Receipt

Purpose:

To inform staff of new regulations for accepting updated beneficiary contact information from MCHPs.

Background:

The Medi-Cal Contact Information Form is used by the MCHPs to inform the County of changes in a beneficiary's contact information.

Policy Change:

MCHPs will now inform the County of changes in a beneficiary's contact information by phone, fax or email. Contact information includes address, name, and telephone number changes. The information provided to the County must be sufficient to identify the beneficiary's case record; including name, identification number, date of birth and former name (when a name change is being reported) and former phone number (when a phone number change is being reported) before changes are made. No changes are made if the information provided to the County is insufficient to identify the case record.

MCHPs will contact the County to inform them of the updates and whether the beneficiary has approved providing the updated information to the County. Refer to [MPG 04.07.15](#) for instructions.

Summary of Changes:

[MPG 04.07.15](#) - Added new regulation for updating beneficiary contact information

Impact/s:

Automation

No impact

Forms and Document Capture

No impact

Programs Affected

None

Quality Control

Effective with November 2015 review month, Quality Control will cite the appropriate error on any case that does not comply with the requirements outlined in this letter.

Management Reporting

None

County of San Diego, Health and Human Services Agency (HHS)
Medi-Cal Program Guide Letter

Updated Beneficiary Contact Information received from Medi-Cal
Managed Care Health Plans (MCHPs)

Number

Page

824

2 of 2

References:

ACWDL 15-30

Sunset Date:

This letter will be reviewed for continuance by November 30, 2018.

Approval for Release:

Handwritten signature and date: Rick Wanne, 11-12-15

Rick Wanne, Director
Eligibility Operations

**County of San Diego, Health and Human Services Agency (HHSA)
Medi-Cal Program Guide**

Processing Changes to Medi-Cal Contact Information

Number

04.07.15

Page

1 of 1

Background:

The Medi-Cal Contact Information Form is no longer required for Managed Care Health Plans (MCHPs) to inform the County of changes in a beneficiary's contact information (address, telephone number, etc.).

Policy:

MPG 4.7.15.A

MCHPs can inform the County of changes by phone, fax or email. The information provided to the County must be sufficient to identify the beneficiary's case record; including name, identification number, date of birth and former name (when a name change is being reported) and former phone number (when a phone number change is being reported) before changes are made. No changes are made if the information provided to the County is insufficient to identify the case record.

Procedure:

MPG 4.7.15.B

MCHPs will contact the County to inform them of the updates and whether the beneficiary has approved providing the updated information to the County.

If the provision to update the County...	Then the worker...
Has been approved by the beneficiary	Immediately inputs the information into the case record, and no verification or beneficiary contact is required.
Has not been approved by the beneficiary	Must verify the new information before making changes by: <ol style="list-style-type: none">1. Looking for the same changes made to other county cases for the same beneficiary or his/her immediate family members including, CalWORKs, CalFresh cases that are open or closed within the last 90 days.2. If unable to verify the changes made to any of the case records, then the worker attempts to contact the beneficiary to verify the updated information using the beneficiary's preferred method of contact.3. If no confirmation/verification is received, no changes are made.

Note: Document in the case comments that the updates were provided by an MCHP.

Other Program Impacts:

None

References:

ACWDL [15-30](#)

Sunset Date:

This letter will be reviewed for continuance by November 30, 2018.

Release Date:

November 12, 2018