

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

Benefits Identification Card (BIC) Issuance

Number

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Issue Date:

December 1, 2015

Effective Date:

Upon Receipt

Purpose:

To provide updated instructions for the issuance of a Medi-Cal BIC.

Background:

Medi-Cal Benefits Identification Cards (BICs) are issued either by the Department of Health Care Services (DHCS) in Sacramento, or by the County in the Family Resource Centers (FRCs). This section describes when BICs are issued by DHCS and the responsibilities and procedures for issuing BICs in the FRC.

Policy Change:

Instructions in the Medi-Cal Program Guide have been updated and procedures moved to a Processing Guide.

Summary of Changes:

MPG 14.02.01 – Instructions updated to match current procedures
Processing Guide 21 – Added to show procedures for issuing BICs

Impact/s:

Automation

No impact.

Forms and Document Capture

No impact.

Programs Affected

- CalWORKs
- Refugee Cash Assistance
- Foster Care
- Medi-Cal

Quality Control

Effective with the December 2015 review month, Quality Control will cite the appropriate error if the instructions in this letter are not followed.

Management Reporting

No impact.

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References:

[ACWDL 94-28](#)

Title 22, Sections [50737](#) and [50743](#)

Medi-Cal Eligibility Procedures Manual (MEPM) [14A and B](#), [19A and B](#)

Sunset Date:

This letter will be reviewed for continuance by December 31, 2018.

Approval for Release:



Rick Wanne, Director
Eligibility Operations

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MPG 14.02.01.A

Background:

Medi-Cal Benefits Identification Cards (BICs) are issued either by the Department of Health Care Services (DHCS) in Sacramento, or by the County in the Family Resource Centers (FRCs). This section describes when BICs are issued by DHCS and the responsibilities and procedures for issuing BICs in the FRC.

Policy:

Providers use the BIC and the Immediate Need/Minor Consent Paper ID card to access the California Automated Eligibility Verification System (AEVS) to verify eligibility and enter a share of cost (SOC) payment or obligation. AEVS pulls information from MEDS. Providers can access the system by phone, computer software, or a Point of Service (POS) device.

Procedure:

MPG 14.02.01.B, BICs Issued by DHCS in Sacramento

DHCS issues and mails BICs based on MEDS information.

DHCS issues a BIC to each:

- eligible member who is a Medi-Cal Family Budget Unit (MFBU) member of an active Medi-Cal case and when there is a SOC
- ineligible (IE) member
- responsible relative (RR).

DHCS issues the BIC when any of the above are:

- Supplemental Security Income/State Supplemental Program (SSI/SSP) eligible as reported by SSA
- Certified by the County as eligible to:
 - CalWORKs
 - Refugee Cash Assistance
 - Foster Care (Instructions for issuance are located in [MPG 05.11.03.](#))
 - Medi-Cal

DHCS issues BICs on a daily basis. The BICs are generated and mailed within 10 days from when a Medi-Cal beneficiary, IE, or RR is added to MEDS or when the worker requests a replacement. A new BIC is not needed when the beneficiary moves between Medi-Cal programs, or was discontinued and reapplies.

If data on MEDS are incomplete or conflicting, MEDS will not produce a BIC until the data are corrected.

MPG 14.02.01.C, Paper BICs Issued by County in FRC

County-issued paper BICs are used for minor consent ID and Immediate Medical Needs cards. Providers can use this card to verify eligibility and bill for services for up to one year for minor consent services, and 30 days for Immediate Medical Needs. This eliminates the need to issue additional cards for any subsequent month, unless the card is lost, stolen or damaged.

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MPG 14.02.01.D, Situations Requiring County Issuance of Paper BICs

Issue a County-issued paper BICs when:

1. a person claiming SSI/SSP eligibility requests a FRC issued paper BIC
2. a person who has completed the application process, been determined eligible, and who has an Immediate Medical Need per [MPG 04.05.03](#)
3. the original BIC is not received by the beneficiary or is incorrect
4. a BIC was issued, but has been lost, stolen, or damaged, or information on the card has changed (SSN, date of birth, or name).

For new approvals with a SOC, providers are not able to enter a SOC payment or obligation until the day after the beneficiary, IE, or RR has been added to MEDS. Until then the paper BIC will verify eligibility only. If the beneficiary needs to use the BIC the same day as it is issued, the provider may note the beneficiary's Client Identification Number (CIN), date of birth, and the BIC issuance date, and enter the SOC payment/obligation the following day.

Issue Immediate Need BICs for retroactive months when the beneficiary meets the criteria in [MPG 04.05.05](#).

Follow the instructions in [Processing Guide 21](#) to issue the paper BIC.

MPG 14.02.01.E, Minor Consent Services BICs

Minor Consent Services paper BICs are always produced in the FRCs. These cards are not to be mailed unless that is requested in writing by the minor.

Confidentiality

To assure confidentiality, MEDS requires that all minor consent paper BICs be issued by an on-line transaction on a MEDS terminal using pseudo numbers rather than the SSN. This means a minor consent case cannot be granted ongoing eligibility on MEDS. Each month that a minor consent services BIC is needed, an on-line issuance must be done by the worker, which will then update the MEDS eligibility history file.

Address

To ensure the minor consent eligible beneficiary does not receive a Beneficiary Explanation of Medi-Cal Benefits and Services or other mailings from DHCS, do not submit the minor's home address to DHCS via MEDS. Use the FRC P.O. Box.

Minor Consent Services Codes

Children applying for minor consent services must specify the type of services they want covered before eligibility can be determined. For program evaluation and control purposes, DHCS has assigned each type of minor consent service a separate aid code. These aid codes are listed in [04.04.04.A](#).

Enter these codes on the paper BICs issued by the MEDS system. The codes will appear as part of the 14-digit county ID number in positions three and four, immediately following the county code. Indicate the aid code on form 14-1 HHS.

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Minor consent beneficiaries receive a paper BIC that is good for one year from the date of issuance. Do not issue a new BIC when a minor reapplies for minor consent services unless it has been 12 months since the last date of issuance, or the card has been lost.

See [04.04.04.B](#) if a child requests more than one type of minor consent service.

EXCEPTION: Do not use the minor consent services aid codes for minors who are already included in a public assistance case, and MFBU with zero SOC, or for minors who apply for, and receive, CalWORKs aid on the basis of pregnancy.

Minors Included in Parent’s Case

If the minor is ...	Then ...
included in the parent’s zero SOC MFBU or in the parent’s Assistance Unit,	issue a paper BIC. Use the parent’s case serial number for the minor. No Case Comment is to be entered for this action.
included in the parent’s SOC MFBU and the SOC has been met,	issue a paper BIC. Use the parent’s case serial number for the minor. No Case Comment is to be entered for this action.
included in the parent’s SOC MFBU and the SOC has not been met,	process an application in the minor’s name. The minor will have a separate case number.
covered under a Medi-Cal Health Plan,	refer to 04.04.03.D .

Other Coverage

Do not report other coverage information for children who are applying for minor consent services only, regardless of whether the child’s parent(s) have other coverage.

MPG 14.02.01.F, Returned BICs

BICs that cannot be delivered by the post office will be returned to DHCS and destroyed. DHCS will report returned BICs via MEDS alerts 9007, 9009, and 9010.

For BICs that are mailed to a FRC P.O. Box (for example, a homeless beneficiary), FRCs will keep the BICs in a secure location. Follow instructions in [Processing Guide 21](#) if the BIC is not claimed.

MPG 14.02.01.G, General Format of BIC

A Medi-Cal BIC contains specified information. The front of each BIC contains the beneficiary’s CIN, date of birth, and the card issuance date. Providers use this information to access AEVS.

The CIN is a state-issued number. It begins with a “9” followed by seven numeric digits, one alpha character, a check digit followed by a four-digit code, which is the Julian date for the date of issue.

The issue date on the BIC is the date the card is generated. The issue date can be viewed on the MEDS INQO screen. A request for a replacement BIC will invalidate the previously issued BIC. A request for a replacement paper BIC will invalidate the previously issued paper BIC. Providers cannot use previously issued card because the issue date has changed.

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Other Program Impacts:

CalWORKs, Refugee Cash Assistance, and Foster Care recipients receive their Medi-Cal BICs in accordance with these instructions.

References:

[ACWDL 94-28](#)

Title 22, Sections [50737](#) and [50743](#)

Medi-Cal Eligibility Procedures Manual (MEPM) [14A and B](#), [19A and B](#)

MPG Letter [828](#)

Sunset Date:

This policy will be reviewed for continuance on or by December 31, 2018.

Release Date:

December 1, 2015

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Purpose:

To provide instructions for the issuance of Medi-Cal BICs.

Background:

Medi-Cal Benefits Identification Cards (BICs) are issued either by the Department of Health Care Services (DHCS) in Sacramento, or by the County in the Family Resource Centers (FRCs). This section describes when BICs are issued from DHCS, and the responsibilities and procedures for issuing BICs in the FRC.

Policy:

Providers use the BIC and Immediate Need/Minor Consent Paper ID card to access the California Automated Eligibility Verification System (AEVS) to verify eligibility and enter a share of cost (SOC) payment or obligation. AEVS pulls information from MEDS. Providers can access the system by phone, computer software, or a Point of Service (POS) device.

Actions:

SSI/SSP Medi-Cal Paper BICs

Step	Who	Action
1	Designated Worker	Verify SSI/SSP eligibility.
2		Complete 14-1 HHSA.
3	FRC Manager or designee	Sign the 14-1 HHSA to approve the issuance prior to issuing the card.
4	Designated Worker	Give the completed 14-1 HHSA to the MEDS operator.
5		Process as Immediate Need or mail to the beneficiary.
6		Resolve issues with SSI/SSP BICs.
7		Refer problems to the Eligibility Operations MEDS Specialist.

Immediate Need Issuance

Complete form 14-1 HHSA and deliver it to the Immediate Need OA. When available, attach a screen print of the Wrap Up windows showing the aid codes.

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Mail Delivery of Paper BICs

Eligibility staff will complete and submit form 14-1 HHSA using the instructions printed on the reverse side of the form. Submit the form to the Immediate Need OA to have the paper BIC produced and mailed to the beneficiary.

Office Delivery of Paper BICs

County produced paper BICs issued in the FRC are to be delivered to the beneficiary by OA staff. The “Medi-Cal Paper ID Card Receipt Form” section of form 14-1 HHSA will be used for the beneficiary’s signature.

Preparation

For SSI beneficiaries, Prepare the “Medi-Cal Paper ID Card Receipt Form” section of the 14-1 HHSA, including the beneficiary’s name, the current date, the worker’s name and number.

When the packet containing the 14-1 HHSA and paper BIC is complete, give it to a designated OA who will be responsible for delivering the BIC to the beneficiary, identifying the beneficiary, and obtaining the beneficiary’s signature on the form.

Verification of Identity

When completing the 14-1 HHSA, explain to the beneficiary that the OA delivering the paper BIC must verify the beneficiary’s identity.

See [04.07.06](#), [07.02.02](#) for acceptable forms of identification.

If the beneficiary has no identification, the worker may:

- Identify the beneficiary to the OA
- Provide the OA with identifying information (for example, birth dates of children)
- Have the beneficiary sign the 14-1 HHSA on the “other information” line prior to submitting it to the OA for card issuance. The OA can have the beneficiary sign the 14-1 HHSA, and compare the signatures before releasing the paper BIC.

OA Responsibilities Following Delivery of Paper BIC

After BIC delivery, the OA will:

Type of Case	Action
HHSA	Send the completed 14-1 HHSA to the Document Processing Center (DPC) to be imaged.
SSI	File form 14-1 HHSA in a centralized location for statistical purposes.

Out of County Eligible Beneficiary

A paper BIC may be issued to a Medi-Cal beneficiary from another county when an immediate need exists.

If MEDS inquiry indicates ...	Then ...
eligibility for the month in question,	issue the BIC.

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no eligibility for the month in question,	contact the County of Responsibility to obtain the proper issuance information.
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When a beneficiary from another county is a member of a Health Maintenance Organization (HMO) Plan and needs medical services, follow the procedures below.

Step	Action
1	The beneficiary may use his/her BIC to obtain emergency medical services.
2	For treatment that is not an emergency, the beneficiary or provider may call the plan on the HMO card to obtain authorization for services. The authorization will depend on the seriousness of the illness/injury.
3	If the beneficiary has moved to San Diego County and is enrolled in an HMO that is not active in San Diego County, have the beneficiary contact the Health Care Options (HCO) representative in the FRC, or call Healthy San Diego (HSD) at 619-515-6584 and provide the beneficiary's: <ul style="list-style-type: none"> • name • SSN • phone number
4	HSD staff will: <ol style="list-style-type: none"> 1. assist the beneficiary in disenrolling from the other county HMO and enrolling in the San Diego County HMO 2. verify the beneficiary's disenrollment, which is effective within 45 days <p>Note: between the date HSD is notified and the end of the month, the beneficiary is still a member of the HMO and must obtain services as stated above.</p>
5	Document in Case Comments that HSD was contacted.

Request for Replacement BICs

If ...	Then ...						
the original BIC was not received by the beneficiary,	<table border="1"> <thead> <tr> <th align="center">Step</th> <th align="center">Action</th> </tr> </thead> <tbody> <tr> <td align="center">1</td> <td>Check MEDS to see if the record is correct and if a BIC was issued.</td> </tr> <tr> <td align="center">2</td> <td>Correct MEDS, if incorrect, and issue a BIC.</td> </tr> </tbody> </table>	Step	Action	1	Check MEDS to see if the record is correct and if a BIC was issued.	2	Correct MEDS, if incorrect, and issue a BIC.
Step	Action						
1	Check MEDS to see if the record is correct and if a BIC was issued.						
2	Correct MEDS, if incorrect, and issue a BIC.						
MEDS shows a BIC was issued, but has been lost, stolen, or damaged or if the information on the card has changed (SSN, DOB, or name),	Request a replacement BIC on the Maintain Card Requests window in CalWIN.						

Returned BICs

If ...	Then ...
an address is available,	mail the BIC to the beneficiary. Document in Case Comments.
no address is available,	confidentially destroy the BIC.

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