

Medi-Cal Program Guide (MPG) Special Notice (SN) 08-17, Addendum A

June 8, 2011

Subject CLARIFICATIONS TO NOTICE OF ACTION REQUIREMENTS

Effective Date Upon receipt

Reference ACWDL 10-20

Purpose To provide staff with clarification on the single NOA policy outlined in MPG SN 08-17, Notice of Action Requirements.

Background Until the Department of Health Care Services (DHCS) adopts a Global NOA policy, MPG SN 08-17 instructed staff to implement an interim NOA policy designed to reduce confusion caused by multiple and conflicting NOAs. Workers were instructed to:

- Stop sending NOAs for every program for which the applicant/beneficiary was evaluated for and is found ineligible.
- Send a single NOA for the final authorizing action of the eligibility determination process.

Changes Additional NOA(s) must be sent in situations where a single NOA does not provide adequate notification. Situations which warrant additional NOA(s) include:

- Scenario A: Applicant ineligible for full-scope benefits due to excess property, yet eligible for limited scope benefits.
- Scenario B: Applicant ineligible for full-scope benefits due to excess property, yet eligible for Medicare Savings Program (MSP) benefits
- Scenario C: Ineligible for all MSPs after requesting for an MSP eligibility determination
- Scenario D: Ineligible for Asset Waiver program due to excess income; does not wish to provide property information.

**Required
Action**

Workers will:

- Send a single NOA to the applicant/beneficiary reflecting the final authorizing action of the eligibility determination process.
 - Send additional NOAs for situations where a single NOA does not provide adequate notification as specified above.
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Forms Impact

No impact.

**Automation
Impact**

Until CalWIN is reprogrammed with CR 4473 to generate only the NOA(s) that reflect the final authorized action(s), workers will delete NOAs which are not required to be mailed to the applicant/beneficiary using the instructions detailed in How To #140, Suppress/Delete Client Correspondence, on the CalWIN Intranet.

QA/QC Impact

Effective with August 2011 sample month, Quality Assurance will cite with the appropriate error any case that does not follow the requirements of this SN.

Attachment

Example of scenarios specified under the Changes Section is included as an attachment to this SN.

**Manager
Approval**



Sylvia Melena, Assistance Deputy Director
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Attachment A

Example of Scenario A

A pregnant woman is determined to be ineligible for full-scope Medi-Cal as a result of excess property. However, it is determined that she is eligible for limited pregnancy-related benefits provided under the 200 Percent Federal Poverty Level (FPL) Program, which does not have a property test. In this case, the pregnant woman must be notified of both determinations:

- Denial/discontinuance of full-scope benefits due to excess property;
AND
 - Approval for the 200 Percent FPL Program.
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Example of Scenario B

An individual is determined to be ineligible for full-scope Medi-Cal as a result of excess property. However, it is determined that the individual is eligible for a MSP under different property rules. In this case, the individual must be notified of both determinations:

- Denial/discontinuance of full scope benefits due to excess property;
AND
 - Approval for the MSP.
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Example of Scenario C

An individual requests to have eligibility determined for the MSPs, and is determined to be ineligible for all the MSPs. The individual must be notified of the denial for each separate MSP, as they have separate eligibility requirements and provide different types of benefits. As a result, multiple NOAs may be sent to these individuals. If the individual is approved for one MSP, then only the approval NOA for that MSP shall be sent.

Example of Scenario D

A child's application is forwarded from Single Point of Entry (SPE) to determine eligibility for a Medi-Cal Children's FPL Asset Waiver program based on the initial income screen at SPE. The child is determined to be over income for the FPL program by the County. The responsible caretaker does not wish to provide property information and subsequently withdraws the Medi-Cal application.

Since the application was forwarded to the county based on an income screening at SPE, once it is determined that the child has excess income, the application shall be sent back to Healthy Families (HF) for an eligibility determination with other documentation as required in MPG Article 4, Section 21.

Under this scenario, the final determination being made when evaluating eligibility for all Medi-Cal programs is that the child is ineligible due to the withdrawal of the application; however, the denial NOA must provide additional information to allow the responsible caretaker to provide the NOA to HF as proof of the excess income for the Medi-Cal FPL programs. The NOA that is sent to the child should reflect the withdrawal of the application and the denial for excess income for the FPL program.

Ideally, the denial NOA should explain:

1. Child is over the allowed income for the FPL programs;
 2. The responsible caretaker chose not to provide the property information needed to determine the child's eligibility for other Medi-Cal programs; and
 3. The responsible caretaker chose to withdraw the child's application.
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