

Medi-Cal Program Guide (MPG) Special Notice (SN) 13-09 Addendum L

November 6, 2014

Subject	HEALTH CARE REFORM (HCR) MEDI-CAL RENEWALS
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Effective	Upon Receipt
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Reference	All County Welfare Directors' Letters (ACWDLs): 14-21 , 14-31 , 14-32 , 14-33 , 14-35 Medi-Cal Eligibility Division Information Letters (MEDILs): I 14-25 , I 14-33 , I 14-33 E
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Purpose	To inform staff of the Pre-Affordable Care Act (Pre-ACA) and Modified Adjusted Gross Income (MAGI) Medi-Cal renewal (RV) process.
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Background	Pre-ACA Medi-Cal beneficiaries (applications dated 12/31/13 or earlier) were to be transitioned to MAGI Medi-Cal at their 2014 annual RV. Due to delays in RV processing, CalWIN has been applying SQLs to extend the RV due date to 2015 for cases in which the RFTHI RV packet was received. For cases which do not have a RFTHI RV packet received, discontinuance was put on hold. Post-ACA MAGI cases (applications dated 1/1/14 or after) are due for renewal beginning in December 2014.
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Highlighted Changes	<ul style="list-style-type: none">• Staff will resume processing all RVs in December 2014.• A new administrative RV process will be established for MAGI Medi-Cal.
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Pre-ACA RV Process	<p>The RFTHI RV packet will be auto generated for Pre-ACA cases with RVs due in December 2014. A RFTHI RV packet will not be generated for pre-ACA cases that were extended to 2015 when the RFTHI form was scanned or logged in as received.</p> <p>Beginning in December 2014, workers will review and process the RFTHI RV packet received at the 2014 RV to evaluate MAGI-linked individuals for transition to MAGI.</p> <p>The beneficiary is not required to submit any supporting</p>
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documentation with the completed RFTHI form. The form is only to acquire information to be verified through the federal data hub and available state data sources. Documentation will only be required if:

- CalHEERS Business Rules Engine (BRE) response does not verify the information.
- electronic verification through the BRE finds the information not reasonably compatible.
- information cannot be verified via an *ex parte* review. Note: *Ex parte includes* the review of information in companion cases and/or other programs such as CalWORKs, CalFresh and General Relief.

If the RFTHI form is incomplete, contact the client to obtain the missing information. RFTHI information can be provided by mail, fax, phone or in-person. Refer to [Special Notice Addendum F](#) for information on the RFTHI RV packet.

When processing the RFTHI form, refer to [e-HIT bulletin #3](#) for required entries to run the BRE for the MAGI evaluation.

SOC Beneficiaries:

SOC beneficiaries that are ineligible to MAGI will be evaluated for Advanced Premium Tax Credit (APTC).

Effective December 2014, beneficiaries who do not comply with the renewal process will be discontinued with timely Notice of Action (NOA) generated from CalWIN.

**MAGI RV
Process**

The MAGI RV process begins with December 2014 RVs and is initiated with an *ex parte* review of all available information in CalWIN, CalHEERS and other state/federal data systems to determine ongoing eligibility.

Two months prior to the RV due month, (for example, 01/2015 for 03/2015 RV) an administrative renewal process takes place wherein CalWIN sends e-HIT transactions to CalHEERS to initiate the electronic verification process for MAGI renewals.

If CalHEERS confirms eligibility, CalWIN will:

- receive eligibility results from CalHEERS along with a Notice of Action (NOA).
- authorize the case during the overnight batch process.
- reset the RV date to 12 months from the original RV month.

If CalHEERS does not confirm MAGI eligibility, CalWIN will generate and send the MC 0216 Medi-Cal Renewal Form to the beneficiary.

MC 0216 – Medi-Cal Renewal Form

The MC 0216 is a new renewal form that will be pre-populated with information available in CalWIN. This form will be auto-triggered by CalWIN to request information that was not electronically verified. Medi-Cal beneficiaries will be given at least 60 days to provide the information requested on the MC 0216.

Return of the MC 0216 is not required. The beneficiary can provide the information by phone, e-mail, or in person. However, requested verifications on the form need to be provided, and any new reported information must be verified.

If the MC 0216 form is not returned or the information is not provided by the 1st of the RV month, the worker will:

Step	Action						
1	Contact the beneficiary in their preferred method of contact.						
	<table border="1"> <thead> <tr> <th>If contact is...</th> <th>Then ...</th> </tr> </thead> <tbody> <tr> <td>successful</td> <td>request the MC 0216 form and give a 10-day timeline. Reminder: The beneficiary can provide the information over the phone, but must provide verification.</td> </tr> <tr> <td>unsuccessful</td> <td>send the MC 355 requesting the MC 0216 form with a 10-day deadline.</td> </tr> </tbody> </table>	If contact is...	Then ...	successful	request the MC 0216 form and give a 10-day timeline. Reminder: The beneficiary can provide the information over the phone, but must provide verification.	unsuccessful	send the MC 355 requesting the MC 0216 form with a 10-day deadline.
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unsuccessful	send the MC 355 requesting the MC 0216 form with a 10-day deadline.						
2	Narrate the case actions.						
3	Review the case at the 10-day deadline.						
	<table border="1"> <thead> <tr> <th>If the information...</th> <th>Then ...</th> </tr> </thead> <tbody> <tr> <td>Was received</td> <td>Process the RV.</td> </tr> <tr> <td>Was not received</td> <td>Discontinue the case with timely NOA for failure to cooperate. (The case will auto-discontinue at NOA cutoff).</td> </tr> </tbody> </table>	If the information...	Then ...	Was received	Process the RV.	Was not received	Discontinue the case with timely NOA for failure to cooperate. (The case will auto-discontinue at NOA cutoff).
	If the information...	Then ...					
Was received	Process the RV.						
Was not received	Discontinue the case with timely NOA for failure to cooperate. (The case will auto-discontinue at NOA cutoff).						

Mixed Cases

For mixed cases that include both MAGI and Non-MAGI beneficiaries, e-HIT transactions will be sent to CalHEERS to initiate the electronic

verification process for MAGI. The RV form will be mailed for Non-MAGI as indicated below.

RV Forms

For Pre-ACA renewals due in December 2014, the RFTHI MC 01-2014 and MC 01-2014 Appendix will be auto mailed.

For RVs due in 2015, see below for the RV forms to be auto mailed to the beneficiary:

If the case is...	Then the following form(s) will be mailed...
Non-MAGI only (not in LTC)	MC 210 RV and MC 210 PS.
Non-MAGI only (in LTC)	MC 262.
mixed MAGI and Non-MAGI	<ul style="list-style-type: none">• MC 0216 for the MAGI beneficiaries (if CalHEERS does not confirm MAGI eligibility).• MC 604 IPS for the Non-MAGI beneficiaries.

The **MC 604 IPS** acquires the necessary Non-MAGI asset, income and deduction information to evaluate individuals for Non-MAGI eligibility.

Return of the RV forms is not required. Beneficiaries can provide the information by mail, fax, phone or in-person. However, reported changes must be verified.

Continued Eligibility for Children on Pre-ACA Medi-Cal

Continue Medi-Cal benefits through the 2015 annual RV date for children receiving pre-ACA Medi-Cal in 2014 who are determined ineligible for MAGI during their 2014 renewal.

Note: This only applies to Pre-ACA RVs due in 2014.

At the December 2014 RV for pre-ACA cases, if the income is determined to be above the Optional Targeted Low Income Children (OTLIC) Program income standard of 266% FPL for the household size, the worker will:

- continue eligibility under a new ACA OTLIC aid code that matches the pre-ACA aid code the child had prior to the annual RV (same premium level and citizenship/immigration status).
- override CalWIN and CalHEERS to assign the new ACA OTLIC aid code. Refer to [e-HIT bulletin #16](#)–Bottom line Override in CalHEERS.
- issue MAGI approval NOA CSC 96 to notify that the child’s Medi-Cal will continue until their next annual RV in December 2015.

Pre-ACA to ACA Aid Code Mapping for Children

Scope & Age	Pre ACA aid code (old)									ACA Aid Code (OTLIC)
Full-scope, Infant	H1	39	3N	47	54	59	5C	7J		T5
Full-scope, age 1-6	H2	39	3N	5C	54	59	72	7J	8P	T4
Full-scope, age 1-6	H3	5D								T3 (Premiums)
Full-scope, age 6-19	H4	39	3N	54	59	5C	7A	7J	8R	T2
Full-scope, age 6-19	H5	5D								T1(Premiums)
Restricted, Infant	3T	3V	5T	5W	69	7K				T0
Restricted, age 1-6	3T	3V	5T	5W	74	7K	8N			T9
Restricted, age 6-19	3V	5T	5W	7C	7K	8T				T7

NOTE: The above provision does not apply if the child:

- reaches the age of 19 and is not continuously hospitalized
- moves out of state
- dies
- no longer pays the required premiums
- the parent or guardian voluntarily terminates the child’s Medi-Cal

**Screening
LTC
Beneficiaries
for MAGI**

Individuals on MAGI aid codes are eligible to receive LTC services without a share of cost and without regard to property. Therefore, LTC beneficiaries must be screened for potential MAGI eligibility at renewal.

Staff must evaluate the MC 262 forms to determine if the LTC beneficiary is:

- a child
- an adult between the age 19 to 64 without Medicare
- a Parent/caretaker (with or without Medi-Care)
- pregnant

Staff will collect the RFTHI information over the phone or by mail when LTC beneficiaries meet one of the criteria above. Beneficiaries that are determined ineligible to MAGI will be evaluated for Non-MAGI based on the information provided on the MC 262.

**Mega-
Mandatory
Eligibility**

Annual redeterminations for individuals in the “Mega-Mandatory” groups will be completed following the existing pre-ACA rules. “Mega-Mandatory” coverage groups include:

- CalWORKs
- SSI/SSP
- Title IV-E and State Only Foster Care
- State only Foster Care
- Title IV-E and State Only Adoption Assistance
- Title IV-E and State Only KinGAP
- Pickle
- Disabled Adult Child
- Disabled Widow/Widower
- Former Foster Care

Grandfather Protections

The Pre-ACA “grandfather protections” end at the 2014 RV. Beneficiaries are no longer protected against adverse actions when the RV is processed or if they report a change in circumstance.

90 Day Cure Period

Beneficiaries will have a 90-day cure period to comply with the RV Process after discontinuance.

If the packet is provided...	Then ...	
within 90 days of discontinuance date	<ul style="list-style-type: none"> • do not immediately rescind the negative action. • do an <i>ex parte</i> review. • if additional information is needed, mail the MC 355 and allow the beneficiary 30 days to provide. 	
	If the beneficiary...	Then...
	provides the information	process the RV without a break in aid.
does not provide the information	<ul style="list-style-type: none"> • do not send a 2nd discontinuance NOA. The previous NOA stands. • contact the beneficiary by phone and inform him/her that the previous discontinuance is still valid. • if unable to reach the beneficiary by phone, mail the CalWIN form 	

		14-111 RRR Not Timely.
After 90 days of discontinuance	Evaluate for good cause. Refer to MPG 04.21.01 for information and good cause procedures.	
	If good cause is...	Then ...
	established	<ul style="list-style-type: none"> • process the RV. • If additional information is needed, mail the MC 355 and allow 30 days to provide.
	not established	inform beneficiary that he/she may reapply for Medi-Cal.

Loss of Contact

If the RV packet is returned with “no forwarding address” or as “return to sender”, prior to discontinuing the case the worker will:

- perform an *ex parte* review of information available in CalWIN, CalHEERS, and MEDS for the beneficiary and his/her family members to determine the most current contact information.
- attempt to contact the beneficiary by phone, or their preferred method of contact.
- mail the MC 355 if contact is unsuccessful.
- narrate case actions

If all required attempts at contact fail, send discontinuance NOA.

Reminder: Former Foster Care Children (FFCC) up to age 26 must not be discontinued due to a loss of contact.

Processing Guide

The [Medi-Cal Annual Redetermination \(RV\) Processing Guide](#) will be issued upon receipt of critical information from DHCS and CalWIN related to renewal processing.

Automation Impact

Workers will need to process a bottom line override in CalWIN and CalHEERS to assign the new ACA OTLIC aid code. Refer to [e-HIT bulletin #16](#)–Bottom line Override in CalHEERS.

Access Impact

Access may experience an increase in calls from beneficiaries

inquiring on their RV. The Processing Guide is currently being revised and will provide updated instructions for Access staff.

Forms Impact The following new forms are available in CalWIN:

- MC 0216 – Medi-Cal Renewal
- MC 604 IPS – Additional Income and Property Information

Document Processing Center DPC staff will scan the barcoded MC 01-2014, MC 210 RV, MC 262, MC 0216 and MC 604 IPS forms, or manually login the RV packet in the Maintain Periodic Reports Details window.

PA (CalFresh or CalWORKs) Program Impact No impact

Quality Control (QC) Impact Upon resumption of desk reviews, Quality Control (QC) will cite the appropriate error when instructions in this material are not followed.

Sunset Date November 6, 2015

Approval for Release

Handwritten signature and date: 11-6-14

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