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Department of Health Care Services



ARNOLD SCHWARZENEGGER
Governor

DATE: January 28, 2009

MMCD All-Plan Letter 09-002

TO: ALL MEDI-CAL MANAGED CARE HEALTH PLANS

SUBJECT: AID CODES 06 AND 46

This All-Plan Letter serves to provide information to Medi-Cal managed care plans regarding two new aid codes, 06 and 46, that are derived from existing aid codes 03, 04, 40, and 42 currently included in the Medi-Cal managed care contracts. These two new aid codes are effective January 1, 2009 for the Medi-Cal managed care program. This letter is for informational purposes only and is regarding upcoming aid code and system changes; no action is required at this time by the plans.

Aid code 06 is for children receiving a federal Title IV-E Adoption Assistance Program (AAP) cash subsidy from out-of-state and aid code 46 is for Title IV-E federally-funded foster care children placed in California from another state. Both aid codes are full-scope with no share of cost and have a “voluntary” enrollment status for Two-Plan Model and Geographic Managed Care programs and a “mandatory” enrollment status for the County Organized Health Systems. Both aid codes were activated for Medi-Cal in July 2008.

Newly Medi-Cal eligible beneficiaries, who are classified out-of-state foster care or AAP and would have been placed in aid codes 03 and 04 (AAP codes) or aid codes 40 and 42 (foster care codes), are being placed in aid codes 06 or 46. Beneficiaries in aid codes 03, 04, 40, or 42 are being placed in the new aid codes, if applicable, as their annual redetermination is processed.

Currently, beneficiaries who should have the option to enroll or should be enrolled in a Medi-Cal managed care program are being excluded from enrollment in a managed care plan given that the new aid codes are not activated for managed care. The Department of Health Care Services (DHCS) is in the process of updating its system to activate these two new aid codes for managed care. The implementation date for the system activation is yet to be determined. DHCS will notify managed care plans when the system has been activated.

The addition of these two aid codes will have a neutral revenue effect on managed care health plans as the affected populations are currently served in the Medi-Cal managed care program under existing aid codes. The purpose for creating these two new aid codes is to give the State the ability to track out-of-state beneficiaries.

January 28, 2009

DHCS and the California Medical Assistance Commission will be providing managed care plans with contract amendments that include these two new aid codes as soon as possible. If you have any questions or require additional information, please contact your Contract Manager.

Sincerely,



Cathy Halverson, Deputy Director
Health Care Operations