



State of California—Health and Human Services Agency  
Department of Health Care Services



EDMUND G. BROWN JR.  
Governor

January 21, 2014

Medi-Cal Eligibility Informational Letter: I 14-08

TO: ALL COUNTY WELFARE DIRECTORS  
ALL COUNTY ADMINISTRATIVE OFFICERS  
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS

SUBJECT: E-HIT Workarounds - January 21, 2014

This letter is to provide counties with interim guidance on policies and procedures for implementing workarounds during the initial launch of the E-HIT interface between the California Health Eligibility, Enrollment, and Retention System (CalHEERS) and the Statewide Automated Welfare System (SAWS). The policies and procedures contained in this letter are temporary and should be implemented until such time that the Department of Health Care Services (DHCS) instructs counties otherwise. SAWS will also be issuing informational guidance pertaining to these workarounds.

### **SAWS System Overrides of Eligibility Determinations Coming from CalHEERS**

Currently, the three SAWS are designed with functionality to allow county eligibility workers the ability to conduct overrides in the SAWS of Modified Adjusted Gross Income Medi-Cal eligibility determinations that are returned from CalHEERS. Such overrides are not to occur pending further direction from DHCS. To the extent the county believes there is an incorrect eligibility determination returned from CalHEERS, the counties are directed to report such issues via the prescribed SAWS trouble ticket process for eHIT related matters. DHCS is in the process of working with SAWS, CalHEERS and the counties in determining additional steps that are to be taken to escalate issues whereby incorrect eligibility determinations are found when the eligibility disposition is sent to SAWS.

DHCS recognizes the need to quickly address all issues pertaining to eligibility determinations to ensure minimal impact to the applicant/beneficiary and to maintain system synchronization between SAWS, CalHEERS and the Medi-Cal Eligibility Data System (MEDS).

## **Two Primary Tax Filers on One Application**

The definition of Primary Tax Filer (PTF) is in relationship to the tax filing household (HH) that will be evaluated for Advance Premium Tax Credits (APTC) on the application/case in CalHEERS. CalHEERS allows one PTF per case.

If an application is submitted with two primary tax filers listed, the county eligibility worker should separate one of the primary tax filers off into a separate case in SAWS and run eligibility. Counties should not ask consumers to complete additional application or provide a statement of facts or an additional signature. This is an interim solution until system functionality can be implemented into CalHEERS and SAWS. However, Covered California does require a signature on each application and will follow up on their guidance for cases that are split and result in APTC/Cost Sharing Reductions (CSR) eligibility. For tracking purposes, counties should keep a list of all APTC cases they split off and do not have a signature for.

If an application is submitted with multiple tax filing HHs, only one of the tax filers of one of the tax filing HHs should be coded as the PTF. For example, if there is an application with unmarried parents and two children-in-common and each parent claims one of the common children as a tax dependent then only one of the tax filers (the unmarried mother or the unmarried father) can be coded as the PTF. All members on the application will first be evaluated for Modified Adjusted Gross Income (MAGI) Medi-Cal. CalHEERS applies the tax filing HH rules to the individual MAGI Medi-Cal budgets. If all applicants, both tax filing households, are found eligible to MAGI Medi-Cal, then there will not be an evaluation for APTC and there does not need to be a splitting out of a PTF. However, if the unmarried mother is coded as the PTF and is found eligible for MAGI Medi-Cal and the unmarried father is found ineligible to MAGI Medi-Cal, there are a few options. The consumer can opt to change the PTF to the unmarried father and then a redetermination can be processed and the unmarried father's tax filing HH will then be evaluated for APTC. However, if later the unmarried mother became ineligible to MAGI Medi-Cal and potentially eligible to APTC, then the unmarried mother can apply on a separate application and be coded as the PTF, in that case, with all of the family members included and then be evaluated for APTC on that second case.

## **Citizenship/Immigration Status**

CalHEERS does not contain the functionality to determine if an individual meets the Permanently Residing Under the Color of Law (PRUCOL) requirements or the extent to which a Lawful Permanent Resident (LPR) is under or over the 5 year bar. It is also important to note that the 5 year bar does not apply to all LPRs; it only applies to qualified aliens unless they are exempt. As such, some individuals may be determined eligible for limited scope benefits when they would otherwise be eligible for full scope Medi-Cal benefits.

As an interim measure to address this problem, a fix was implemented in CalHEERS to assign full-scope MAGI Medi-Cal to consumers attesting to eligible immigration status and the person provides the information to support their eligible immigration status, such as document type, Alien number, etc. However, there is no similar interim fix to address those who may be eligible on the basis of PRUCOL, unless they have asserted a status under one of the LPR categories. A CalHEERS Verification for LPR Change Request has been developed but not yet implemented.

Additionally CalHEERS understands that consumers in state-funded full-scope MAGI Medi-Cal are not considered to have minimal essential coverage (MEC) and, therefore, would also be found eligible for APTC/CSR. In this instance, these individuals would be entitled to have both state-funded full-scope MAGI Medi-Cal and APTC/CSR. However CalHEERS is unable to identify the state-funded full scope Medi-Cal vs. federal funded full scope Medi-Cal, therefore, these individuals will be assigned an aid code that is identified as meeting MEC and will not be found eligible to APTC/CSR.

Lastly, the following is a summary chart of how benefits are assigned in CalHEERS based on current programming:

Benefit Type	U.S. Citizen	LPR < 5 year bar	LPR > 5 year bar	Undocumented	PRUCOL (Not qualified aliens)
Full scope Medi-Cal (MAGI and Non-MAGI)	Y	Y	Y	N	Y
Restricted Medi-Cal (MAGI and Non-MAGI)	N	N	N	Y	N
APTC/CSR	Y	Y	Y	N	N

Based on the information above as a beginning step, SAWS are assessing the extent to which they can map their systems for PRUCOL eligible, similar to that of LPR eligible, in order to leverage this functionality in assisting with eligibility determinations and to track these cases as they come in from CalHEERS to SAWS. This mapping may also help to minimize data inconsistencies between SAWS and CalHEERS.

Below are the steps that the counties will need to undertake regarding this workaround:

- As cases are received from the CalHEERS access channel, the counties are to review the eligibility disposition provided by CalHEERS. To the extent the case has an individual who is an LPR or is undocumented and the eligibility determination does not conform to current DHCS policy in terms of scope of benefit coverage for these individuals, they are to obtain any needed documents, as applicable, and place the individual into the appropriate full scope or restricted MAGI or non-MAGI aid code in

SAWS. To the extent the final disposition places the person in PRUCOL status and there are no documents or document numbers to populate CalHEERS with, the county is to hold the final disposition in SAWS pending further direction from DHCS.

- If the case comes through the SAWS access channels, and the person indicates LPR or PRUCOL status, the county should process the case as per current DHCS policy. To the extent the case is PRUCOL, the county should hold the case in SAWS pending further direction from DHCS. To the extent the individual has an immediate need for services, the county should process an online MEDS transaction to help the individual get access to needed health care services.

DHCS will continue to work with SAWS, counties and CalHEERS in coming up with additional short, medium and long range solutions to address this policy area. The underlying goal of these efforts will be to automate, to the greatest extent possible, current DHCS policy regarding the placement of the individual into full scope versus restricted scope benefits for LPR and PRUCOL eligible individuals.

If you have any questions regarding this, please contact Crystal Haswell at (916) 552-9542 or by email at [Crystal.Haswell@dhcs.ca.gov](mailto:Crystal.Haswell@dhcs.ca.gov).

Original Signed By

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