



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



EDMUND G. BROWN JR.  
Governor

May 7, 2014

Medi-Cal Eligibility Division Information Letter No.: I 14-25

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

SUBJECT: Screening for Potential Modified Adjusted Gross Income (MAGI) Eligibles Upon Return of the “Redetermination for Medi-Cal Beneficiaries (Long-Term Care in own MFBU)”, (MC 262)

Individuals in the MAGI full-scope aid codes are eligible to receive long-term care (LTC) services without a share-of-cost and without regard to property. MAGI coverage groups are also mandatory categorical coverage groups and, therefore, eligibility for the MAGI groups must be considered before the optional categorical or Medically Needy coverage groups. This letter is to provide guidance to counties to screen MC 262 forms as they are returned by the Medi-Cal beneficiary, to see if the beneficiary is 19 years of age up to 65 without Medicare, or a parent, child, or pregnant woman. If so, then the individual is potentially eligible under the MAGI rules (see Medi-Cal Eligibility Division Information Letter No.: 14-06 for discussion of MAGI coverage of LTC services and supports).

Counties should collect the tax household information either by phone with the individual, spouse, parent or representative, or by mailing the “Request for Tax Household Information” form, following current policies on time limitations for responses, and then use the Business Rules Engine in CalHEERS to determine whether the individual or family is MAGI eligible. If determined ineligible for MAGI-based Medi-Cal, then complete the non-MAGI eligibility determination using the information contained on the submitted MC 262.

If you have any questions, or if we can provide further information, please contact Sharyl Shanen-Raya at (916) 552-9449 or by email at [Sharyl.Shanen-Raya@dhcs.ca.gov](mailto:Sharyl.Shanen-Raya@dhcs.ca.gov).

Original Signed By:

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Medi-Cal Eligibility Division