



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



EDMUND G. BROWN JR.
Governor

July 8, 2014

Medi-Cal Eligibility Division Information Letter No.: I 14-36

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

SUBJECT: USING MODIFIED ADJUSTED GROSS INCOME AND EXPRESS
LANE ENROLLMENT AID CODES FOR APPLICATIONS IN THE
PENDING BACKLOG

This letter provides counties with guidance on using modified adjusted gross income (MAGI) and Express Lane Enrollment (ELE) aid codes to manually grant Medi-Cal eligibility in an effort to reduce the pending backlog of applications and get individuals into Medi-Cal as quickly as possible. This process may be used immediately.

When To Use MAGI or ELE Aid Codes

Counties shall use MAGI or ELE aid codes to manually grant Medi-Cal eligibility if at least one member of the household has an active Medi-Cal or CalFresh aid code in the Medi-Cal Eligibility Data System (MEDS) and the Statewide Automated Welfare System (SAWS), and only in the following scenarios:

1. At least one member of the household has been determined eligible or contingent eligible with a full scope Medi-Cal aid code in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS), but because one or more members of the household have a status of “pending” in CalHEERS, the entire case cannot be accepted into SAWS and Medi-Cal eligibility cannot be posted to MEDS. In this case, all members of the household with a full scope Medi-Cal aid code and a valid client identification number (CIN) assignment may be granted Medi-Cal eligibility into the appropriate MAGI or ELE aid code.
2. The county has file cleared the case and determined individuals are eligible for Medi-Cal based on the MAGI methodology. The case is sent to CalHEERS via an electronic health information transfer (eHIT) eligibility determination request (EDR) for the final eligibility determination and the response back from CalHEERS is

“pending” for Medi-Cal due to data and/or technology issues with CalHEERS. Data and/or technology issues include, but are not limited to, incorrect income calculation, incarceration verification status, and retroactive months’ eligibility assessment. In this case, all members of the household who have been determined by the county to be eligible for full scope Medi-Cal and who have a valid CIN assignment may be granted Medi-Cal eligibility into the appropriate MAGI aid code.

Counties shall not use the process outlined in this letter to manually grant Medi-Cal eligibility in the following scenarios:

1. The individual is eligible for Medi-Cal based on a methodology other than MAGI (non-MAGI).
2. The individual is eligible for a limited or restricted scope MAGI Medi-Cal aid code.
3. The case has no household members on an active Medi-Cal or CalFresh aid code in MEDS or SAWS.
4. The only eligible case members are children on the Optional Targeted Low Income Children’s Program. Aid codes for that program are T1, T2, T3, T4, T5, T6, T7, T8, T9, and T0.

Aid Codes

The following aid codes shall be used by the counties when manually granting Medi-Cal eligibility to individuals:

- 7U – 19-64 year olds who would be included in the new adult expansion group
- 7W – Children less than 19 years old
- 7S – Parents and caretaker relatives
- Appropriate MAGI aid codes

Case Creation Considerations

In the scenarios outlined in this letter, eligibility can only be granted by using online MEDS transactions. Counties can take two different paths for posting eligibility to MEDS:

- EW15 (Report Immediate Need Eligibility) – The EW15 transaction is used to establish immediate need Medi-Cal eligibility for the current month and/or request a temporary paper identification card. The appropriate MAGI aid code along with the eligibility status action code (ESAC) 6 shall be used when using EW15.
- EW20 (Add New Eligibility) – The EW20 is used to add new eligibility to MEDS and can be used to confirm immediate need eligibility when established with an EW15 transaction. An EW20 may report either a closed period of eligibility or ongoing eligibility. The appropriate MAGI or ELE aid code along with ESAC 1 or 6 shall be

July 8, 2014

used when using EW20. ESAC 1 shall be used when posting eligibility to MAGI aid codes. ESAC 6 shall be used when posting eligibility to ELE aid codes.

If counties choose to use the EW15 transaction, EW20 must also be used to ensure beneficiaries' eligibility continues past the month eligibility was granted using the EW15.

If ELE aid codes are used and there is no CalFresh eligibility on the case, counties shall use the case name "ACA Rush" when manually granting Medi-Cal eligibility. This will allow the Department of Health Care Services to track the cases for reporting purposes. Counties must also keep track of the cases when they manually grant eligibility.

Counties shall use the application month as the beginning date of eligibility. MAGI aid codes are only active in MEDS back to January 2014. ELE aid codes are only active back to February 2014. Once the pending application is processed, counties must use the prospective month as the beginning date of eligibility for the new aid code.

When granting eligibility to MAGI aid codes as outlined in this letter, counties shall use the SAWS case number. For ELE aid codes, counties shall use the CalFresh case number. In cases using ELE aid codes that have no available CalFresh case numbers, counties shall use the number 9 plus the CIN.

Once eligibility is granted, the county must go back and continue to work the case as time permits and information technology fixes are implemented.

Notices of Action and Welcome Packets

Notices of Action (NOAs) and intake packets will be sent by the State to beneficiaries who are granted eligibility with ELE aid codes via the process outlined in this letter. Initially, all beneficiaries will receive NOAs and intake packets that are specific to CalFresh-based Express Lane eligibility. Samples of these documents are located at:

http://www.dhcs.ca.gov/services/medi-cal/eligibility/Documents/Express_Lane/CalFreshWlcmPckg.pdf. In the near future, these documents will be revised to reflect accurate Medi-Cal eligibility reasons and program information. Counties will be advised when the revised documents are available and will replace the CalFresh-specific documents.

For those individuals who are granted eligibility with MAGI aid codes, counties shall generate manual NOAs, such as the MC 239 V, or another appropriate generic NOA for a Medi-Cal approval that currently exists in SAWS. Counties shall send or provide the usual intake packets to these beneficiaries.

July 8, 2014

Changes in Circumstance

If a change is reported by a beneficiary who has been granted Medi-Cal eligibility via the process outlined in this letter, the county shall process the change in circumstance reported if SAWS allows the change to be processed. Retroactive coverage can also be granted, if requested by the beneficiary, prior to processing the change in circumstance. MAGI aid codes are only active in MEDS back to January 2014. ELE aid codes are only active back to February 2014. If retroactive coverage is requested a case notation of the request is adequate. If a beneficiary has CalFresh Express Lane eligibility, a Supplement to Statement of Facts for Retroactive Coverage/Restoration form (MC 210A) is not necessary as it requests information not required for ELE eligibility.

If you have any questions regarding this letter, please contact Crystal Haswell at (916) 322-8084 or by email at Crystal.Haswell@dhcs.ca.gov.

Original Signed By:

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