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Medi-Cal Eligibility Division Information Letter No.: I 15-15

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

SUBJECT: County Application/Batch Processing Priorities

The purpose of this Medi-Cal Eligibility Division Information Letter (MEDIL) is to provide counties with guidance on priority-setting, in terms of processing applications and workload associated with Department of Health Care Services (DHCS) batch processing applicants into accelerated enrollment using aid code 8E. This letter supplements information provided in MEDIL 15-05 and 15-13 and is not intended to address other workload priorities for which counties are responsible.

In order to provide context to the information provided in this letter, the following is a brief summary of the various workload efforts that are the subject of this letter.

45-day Accelerated Enrollment (AE) Batch Processing

The purpose of this batch process is to provide AE eligibility through the 8E aid code. The AE batch process targets applicants, regardless of application channel, where Medi-Cal eligibility has not been determined within the 45-day timeframe and is inclusive of cases with applications made on or after November 15, 2014 and ongoing. Previous MEDILs have provided direction to counties to process full eligibility determinations for the records successfully batched into aid code 8E, and to work to resolve any records that failed the batch run, or otherwise, were unable to be batched into 8E by DHCS.

Rivera File Review

As a result of a court order in the *Rivera v. Douglas* (2015) lawsuit, DHCS continues to issue the Notice of Inaction (NOI) for individuals who have not received a final Medi-Cal determination and Notice of Action (NOA) within 45-days of their application, beginning from the 2015 Open Enrollment.

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Counties are provided with a weekly results file from the 45-day batch processing with records identified as needing a NOI. Counties have been asked to review and return this file to DHCS to exclude individuals who have already received a NOA.

Processing Applications Within 45-days

State and federal law requires eligibility determinations to be performed within 45-days of the application date unless the determination is pending a disability evaluation or the county is actively working with the applicant to obtain necessary verifications to finalize the determination.

Although the priority of all of these various workload efforts is extremely high, counties have requested DHCS to provide guidance in terms of prioritizing these efforts. DHCS' guidance is as follows:

Priority #1

Resolution of batch transactions DHCS was unable to batch in the 45-day AE weekly batch run. Because these records represent individuals that applied for health care coverage and may still be waiting for coverage, this workload effort should be given the highest priority. These records can be identified by filtering the Classifications column to exclude "Successfully Processed on to 8E via 8E Sweep" and "Application within 45 Days." These individuals will remain in the file until processed by the county, has eligibility in MEDS or are added to a county provided exclusion list that indicates the individual is subject to Long Term Negative Action.

Priority #2

Review of weekly Rivera file of individuals that DHCS intends to send NOIs. To the extent possible, individuals should not receive a NOI if action has been taken on their application and have been notified of their eligibility or ineligibility. The column heading on the weekly AE results file is "Send NOI."

Priority #3

Processing of applications within the state and federal required 45-day timeframe. The 45-day AE weekly batch runs and the Rivera NOI mailings are a direct result of the large pending backlog of applications that occurred in 2014. Ending the 45-day AE weekly batch runs and the Rivera NOI mailings, are in part dependent upon demonstrating that counties are processing applications within timeframes established by state and federal law. Therefore, it is critical that this workload effort be given a very high priority by the counties.

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Priority #4

Processing full eligibility determinations for individuals successfully batched into aid code 8E. This workload effort should be a priority due to the fiscal impact of maintaining individuals in aid code 8E without a full eligibility determination, as well as, access to care issues that may occur as individuals in aid code 8E must seek their own medical care in the Medi-Cal fee-for-service delivery system. These records can be identified by filtering the Classifications column to “Successfully Processed on to 8E via 8E Sweep.”

If you have any questions regarding this letter, please contact Ms. Yingjia Huang by phone (916) 327-6690 or email yingjia.huang@dhcs.ca.gov. We are appreciative of the counties' cooperation and assistance in this effort.

Originally signed by,

Alice Mak, Acting Chief

Medi-Cal Eligibility Division