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Director

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



EDMUND G. BROWN JR.
Governor

October 22, 2015

Medi-Cal Eligibility Division Information Letter No.: I 15-29

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

SUBJECT: Review Share-of-Cost Cases for Potential Modified Adjusted Gross
Income and Advanced Premium Tax Credit Eligibility
(Reference: All County Welfare Directors Letters 14-33)

The purpose of this letter is to remind counties to review cases in Share-of-Cost (SOC) aid codes and no other aid codes, to determine if beneficiaries might be eligible for a Modified Adjusted Gross Income (MAGI) or Advanced Premium Tax Credit (APTC) program. This review must be completed **before** the Medi-Cal Eligibility Data System (MEDS) Renewal (November 24, 2015) for December month of eligibility. If a beneficiary is eligible for no SOC Medi-Cal (MAGI or non-MAGI), Medi-Cal eligibility must be corrected in the systems and case record for all affected months potentially dating back to January 1, 2014, as possible. In accordance with the Medi-Cal Eligibility Procedures Manual, Articles 12-C and 14-E, the counties must issue Letters of Authorization (MC 180s) and Share of Cost Letters (MC 1054) to beneficiaries with medical expenses for services received during any past months for which they are newly eligible and desire Medi-Cal payment.

All County Welfare Directors Letter (ACWDL) 14-33 instructed counties to review their caseloads for beneficiaries who were potentially eligible for MAGI Medi-Cal or the APTC program, but were either denied for being over property or assigned to a Medi-Cal SOC or limited services program only. It is extremely important that this review takes place before the cut-off date (MEDS Renewal for December month of eligibility is November 24th) for the Department of Health Services (DHCS) to process the Internal Revenue Service form 1095-B data production that will occur in December 2015. The urgency of this review is for two reasons:

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1. To ensure MEDS reflects Minimal Essential Coverage (MEC) in Medi-Cal aid codes for one or more months in the 2015 tax year for DHCS to issue correct 1095-B forms to Medi-Cal beneficiaries. Medically Needy SOC Medi-Cal is not considered MEC. If eligibility records are not corrected, those individuals, who do not have other MEC, will either have to pay a tax penalty or seek a hardship exemption from the Affordable Care Act's individual mandate. Issuing the correct 1095-B forms will eliminate the need for individuals to file hardship exemption waivers. It will also ease the burden on county and state resources to handle consumer inquires, disputes and issuance of late 1095-B forms.
2. To ensure that beneficiaries, who are potentially eligible for APTC coverage, are able to enroll in a qualified health plan during Covered California's Special Enrollment period. When consumers are not enrolled in APTC coverage during the open enrollment period, they must have a circumstance that meets the criteria for a special enrollment period. A beneficiary who has Medi-Cal with a SOC and no other coverage may meet the criteria for a special enrollment period, if they met their SOC and have not received a special enrollment period consideration in the last 12 months.

Counties are reminded that once the individual's eligibility has been redetermined through the California Healthcare Eligibility, Enrollment, and Retention System, notices will be produced and sent to county print centers for mailing to beneficiaries. Please see ACWDL 14-33 for further details and instructions for reviewing cases that may be potentially MAGI Medi-Cal or APTC eligible.

If you have questions about this letter, please contact Leanna Pierson at (916) 327-0408 or by email at Leanna.Pierson@dhcs.ca.gov or Sharyl Shanen-Raya at (916) 552-9449 or by email at Sharyl.Shanen-Raya@dhcs.ca.gov.

Original Signed By

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