



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



**ARNOLD SCHWARZENEGGER**  
Governor

February 2, 2007

TO: ALL COUNTY WELFARE DIRECTORS Letter No.: 07-03  
ALL COUNTY ADMINISTRATIVE OFFICERS  
ALL COUNTY MEDI-CAL PROGRAM SPECIALIST/LIAISONS  
ALL COUNTY HEALTH EXECUTIVES  
ALL COUNTY MENTAL HEALTH DIRECTORS

SUBJECT: MEDI-CAL TO HEALTHY FAMILIES BRIDGING PROGRAM  
(Reference: All County Welfare Directors Letters 99-06, 01-57, and 03-01)

The Medi-Cal to Healthy Families (HF) Bridging program (Bridging) is for children under age 19 who no longer qualify for no share of cost (SOC), full-scope Medi-Cal, but who appear to be eligible for the Healthy Families Program (HFP). The program provides these children with one additional month of no SOC, full-scope Medi-Cal to give time for the county to transfer the family's case information, with their consent, to the HFP or to give the family time to apply for the HFP if they have not given consent for the county to transfer this information.

All County Welfare Directors Letters (ACWDLs) 99-06, 01-57, and 03-01 provided counties with implementation instructions and related information for the Bridging program. The Bridging program was implemented December 1, 1998.

### **Purpose**

The purpose of this ACWDL is to:

- consolidate the Bridging requirements in ACWDLs 99-06, 01-57, and 03-01 into a single Bridging program letter,
- update prior policy so that children with other health care coverage are not precluded from the Bridging program and should now be referred to the HFP,
- describe how counties apply the Bridging process to prior months, and

- describe the recently enacted Bridging program performance standards, as specified in Welfare and Institutions Code (W&I Code) Section 14154(c)(3)(D)(i), (ii) and (iii) and instruct counties how they are to measure and report their performance. See Enclosure 1 for details.

The California Department of Health Services (CDHS) and the Managed Risk Medical Insurance Board are working towards an automated process to identify children eligible for Bridging and refer them to the HFP whenever there is consent. Even though this automated process is not yet completed, counties are still required under state law to meet Bridging performance standards, effective January 1, 2007. The Bridging performance standards statute (W&I Code Section 14154(3)(D)) provides that the effective date of the performance standards requirement is 60 days after a consent section (that addresses whether or not a family's case file information can be forwarded to the HFP) is included in the Medi-Cal application, the joint HF/Medi-Cal Application, and the Medi-Cal annual redetermination (RV) form. All of these consent sections were included by July 2006.

**Important: Please note that for purposes of providing consent to send Medi-Cal case information to the Healthy Families Program, consent must be given by an individual who is allowed to sign the Medi-Cal application, such as a parent, caretaker relative, legal guardian, or pursuant to Title 22 Section 50147.1(e), a child who is not living with his/her parents and the county determines that the child appears competent and no person or agency accepts legal responsibility for the child. Hereafter, such individuals will be referred to as "appropriate individuals".**

### **Overview**

**Bridging:** Children who have been receiving no SOC, full-scope Medi-Cal, but are determined to be eligible in the following month for Medi-Cal with an SOC or would have an SOC if property were not considered, qualify for one additional calendar month of no SOC, full-scope Medi-Cal, as long as they appear to meet the eligibility requirements of the HFP.

Summary of HFP eligibility requirements:

- United States citizen or qualified alien
- Under age 19
- Net family income must be at or below 250 percent of the federal poverty level (FPL)
- Not in any no SOC Medi-Cal program, such as

- Section 1931(b) Medi-Cal, i.e. those with net income
  - Less than 100 percent FPL if using the “Applicant” income test after taking all appropriate income disregards, or
  - Less than the 1931(b) “Recipient” income standards, after taking all appropriate disregards,
- The FPL Percentage Medi-Cal Programs (i.e., those with net family income at or less than:
  - 200 percent FPL for children under age one
  - 200 percent FPL for pregnant women
  - 133 percent FPL for children ages one up to age six and
  - 100 percent FPL for children ages six up to age 19
- Medi-Cal through a disability category, such as the Aged and Disabled FPL program
- Medi-Cal linked to cash assistance, such as CalWORKS or Supplemental Security Income
- Medi-Cal linked to foster care payments or through the Former Foster Care Children program
- Continued Medi-Cal coverage through the Continuous Eligibility for Children (CEC), Deemed Eligibility (DE) for Infants Program, Transitional Medi-Cal (TMC)
- Any other Medi-Cal category with no SOC

Important: A child otherwise eligible for Bridging continues to be eligible for Bridging even if the family does not provide property information that would have enabled the county to determine whether the child is eligible for any no SOC Medi-Cal program that has a property test.

For example, assume a child is the only member of the family on Medi-Cal and no property is in the case file because the child is in the FPL program. Assume the family’s income exceeds the appropriate FPL limit at redetermination and the family declines to provide property information. Therefore, the county is unable to determine whether the child would be eligible for any other no SOC Medi-Cal program that has a property test. If the child is otherwise eligible for Bridging, the county would identify this child as eligible for Bridging, even though the family did not provide property information.

Net family income means the lowest amount of net income that was used to determine the infant’s or child’s eligibility for the appropriate FPL percent program.

This extra month of no SOC, full-scope Medi-Cal gives them a chance to have their case information forwarded to the HFP if consent has been given or to apply for the

HFP themselves, if consent is not given. Children who are undocumented are not eligible for Bridging because the HFP does not cover undocumented children.

**What Bridging is not:** Bridging is not for children who are new to Medi-Cal, even if they have an SOC in the application month. Bridging is not for children who can continue on no SOC Medi-Cal under any Medi-Cal category. Bridging is when there is a change from no SOC to SOC. Thus, children who are determined to have an SOC or be property ineligible at application are not eligible for Bridging. If appropriate, these children should be referred to the HFP, but not through the Bridging process outlined in this ACWDL. Please see the section near the end of this letter entitled, "Anything Upcoming Similar to Bridging?" regarding the Medi-Cal to HF Accelerated Enrollment program.

Example: If a child with an SOC in the application month is not eligible in any of the three months prior to the month of application (3-month retroactive Medi-Cal), there is no Bridging because the child did not change from no SOC to SOC.

Example: If a child had an SOC in the application month and then subsequently was determined eligible for no SOC in a retroactive month, CEC would be triggered and the child would have his/her SOC in the application month changed to no SOC.

### **Bridging Program**

Funding Source	The Bridging program is funded through federal Title XXI State Children's Health Insurance Program funds.
Definition of Bridging	<p>Bridging provides one month of no SOC, full-scope Medi-Cal for children who:</p> <ol style="list-style-type: none"><li>1. are receiving no SOC, full-scope Medi-Cal when there is a change in family circumstances that results in the child having an SOC, being determined property ineligible, or, if property were not considered, would have an SOC, and</li><li>2. appear to meet the eligibility requirements of the HFP.</li></ol> <p>Bridging also provides for the transfer of a child's relevant case file information from the Medi-Cal program to the HFP when bridging requirements are met, including consent.</p>

Note: A child who continues with zero SOC Medi-Cal even after a change in circumstances because the child is covered by the CEC provision (or any other no SOC program, such as, TMC) is not considered to have an SOC and is not to be Bridged.

Instead, these children likely would be Bridged at the end of their annual RV period if, at that time of RV, they are only eligible with an SOC, are property ineligible but otherwise eligible for the HFP, or would be eligible with an SOC if property were not considered.

Explanation  
concerning property

Why a child is referred to the HFP when such child is ineligible for any no SOC program due fully or in part to excess property or whose family declines to provide property information.

There is no property test in the HFP, just as there is no property test in the Medi-Cal percent programs. These children who meet HFP requirements would be eligible if they applied directly through the HFP. In the absence of Bridging, they would likely have a break in health coverage while their HFP enrollment was being processed. By providing a one-month transition, Bridging supports the goal that eligible children need to retain uninterrupted, ongoing health coverage during the HFP enrollment process.

Aid Code

Aid code 7X is used to identify children who are eligible under the Bridging program.

Concurrent Eligibility

A child who is eligible for Bridging and who is determined eligible with an SOC is concurrently in both the Bridging aid code and the SOC aid code so that he/she is included in the family size for the Medically Needy or Medically Indigent (MN/MI) SOC determination. A child who is eligible with an SOC has been determined property eligible. A child who did not have a property determination will not be concurrently eligible for the MN/MI program, e.g., a child whose property is unknown because he/she was in a FPL percent program.

Coverage during  
the Bridging month

The one-month Bridging month allows the child(ren) to continue receiving the same no SOC Medi-Cal coverage, through the same Medi-Cal health care delivery system, while:

- the family has an opportunity to provide HFP enrollment information to seek low cost health coverage for the child(ren) under the HFP or,
- the county, with the consent of the appropriate individual, forwards the application to HFP, while the HFP makes a determination based on the information forwarded by the county.

Who is Eligible?

To qualify for the Bridging Program, a child must meet all the following requirements:

- Be under the age of 19. Note: An infant *under* age one does not need the benefits of Bridging because once an infant has no cost Medi-Cal, the infant remains no cost Medi-Cal eligible either under DE for Infants or under CEC until an RV at age one.

Generally, if an infant's family is also on Medi-Cal, they will have a redetermination before the deemed infant reaches age one. The infant, while unaffected by the redetermination due to DE, is included in the family's eligibility RV.

If this RV is within two months of the infant's first birthday, generally the infant's eligibility at age one will be based on information provided during this RV. If such an infant is expected to have an SOC or would have an SOC if property were not considered, the HFP requests that the infant's case information be forwarded to them in order to start the enrollment process because the HFP has a regulatory provision to determine eligibility and enroll prospectively when no SOC Medi-Cal ends. Actual HFP enrollment will not occur until the infant reaches age one and Bridging has ended.

- Be otherwise eligible for the HFP; i.e., a citizen or qualified alien, with or without other health coverage (OHC), whose net family income for specific age categories as stated previously (using the Medi-Cal methodology) is at or below 250 percent of the FPL; and
- Irrespective of property eligibility, would have a Medi-Cal SOC following the last no SOC month in any Medi-Cal program such as one of the following:
  1. an ongoing program such as the Income Disregard program for infants, 100 Percent FPL, 133 Percent FPL, Aid to Families with Dependent Children Medically Needy (AFDC-MN) no SOC, Blind/Disabled no SOC MN, Medically Indigent (MI) no SOC, Section 1931(b) only, or California Work Opportunity and Responsibility to Kids (CalWORKS); or
  2. a continuation or transition program or provision such as SB 87 alleged disability, pending an SB 87 RV, transitional aid code 38, TMC, or CEC.

Note: “Irrespective of property eligibility” or “would have an SOC if property were not considered” means that the county is to assume the child is property eligible even if no property information is provided.

Example: A child and elderly father are on CalWORKs and fail to complete their CalWORKs annual RV. They are put into aid code 38 so that a Medi-Cal RV can be completed. The father declines to provide property information. He is ineligible. The eligibility worker determines that based on the father’s pension, the child would be eligible only under the AFDC-MN program with an SOC if property were not considered. The child is otherwise eligible for the HFP and the county reports the child in 7X, the Bridging aid code. There is no concurrent AFDC-MN eligibility because property was not provided.

Explanation of the new requirement to refer children with OHC to the HFP

HFP eligibility is not precluded for a child who has OHC unless that OHC is employer sponsored. The HFP is responsible for making this determination and has requested that all such cases be referred to them. That is, an otherwise eligible Bridging Child with OHC is to be referred to the HFP.

Determining Eligibility

To ensure that all potential Bridging Program children are granted the extra one month of no cost health coverage, counties must establish a procedure whereby every case containing eligible children is evaluated for potential Bridging program eligibility whenever one or more of the children are determined to have an SOC (or would have an SOC if property were not considered) in the next month immediately following a month of full-scope, no SOC Medi-Cal.

Notices of Action

Sample Notices of Action (NOAs) for children eligible for Bridging are included in Enclosure 2.

### **Bridging Process**

#### First Step:

Send NOA

Send a NOA to the family informing them of the SOC or property ineligibility and that the child will remain on no SOC for one month under Bridging to provide the family with an opportunity to have their case file information shared with the HFP with their consent, or to apply for the HFP themselves.

#### Second Step:

Send an informing notice about the HFP

Inform the family of the SOC or property ineligible child about the HFP. Ideally, this information would be included in the NOA referenced in step one.

#### Third Step:

Report Bridging

Counties shall report the Bridging eligible child to the Medi-Cal Eligibility Data System (MEDS) in aid code 7X.



Fourth Step:

Determine Consent

Determine whether the appropriate individual has given consent to forward the RV to the HFP.

Note: If consent is given, the HFP needs that information. Therefore, if a consent section is not on the application that is referred to the HFP, counties must document that consent was given on the Medi-Cal to Healthy Families transmittal (MC 363) or complete and attach the stand-alone consent form provided in Enclosure 4 of this ACWDL.

If there is a consent section on the most recent application or reapplication and all of the following apply, consent has been given.

1. no box is checked withholding consent;
2. no written statement is on the form or on any other document withholding consent; and
3. nothing is contained in the case file documenting that the appropriate individual verbally told the county that consent is withheld at the time of the form's submittal.

If the most recent application or reapplication does not contain a consent section, the county needs to contact the family first by use of the consent form in Enclosure 3 or by phone. That is, if the county chose to contact the family by phone first and is unsuccessful, the county will need to send the family the consent form. If the county chose to use the consent form first and the form is not returned by the date the county has established for its return, the county will need to try to contact the family by phone.

The following describes how consent is/is not established under these two methods and any necessary county actions:

The county makes contact by phone

If the county calls the family and makes contact, the county needs to document the response of the appropriate individual in the case file. If he or she agrees to allow the

county to share the case information with the HFP, consent has been given. If he or she does not agree, consent has been withheld.

The family returns the consent form to the county

If the appropriate individual checks that consent is given and the form is signed, consent has been given.

If he or she checks that consent is not given or he or she does not sign the form even if he or she checks that consent is given, consent is not given.

The county is unsuccessful in reaching the family by phone and the consent form is not returned

If the county is unable to contact the family by phone and the consent form is not returned, consent has not been given.

Note: If a county uses the consent form, the county must provide a postpaid self-addressed envelope with it.

Fifth Step:

Referral to the HFP  
if Consent Given

When the appropriate individual consents, within two months of the SOC determination, to having case information forwarded to the HFP, the county will forward to the HFP, a copy of the most recent application/RV form (including all supporting income and citizenship or immigration status documentation), the appropriate NOA, the Medi-Cal to HF transmittal form, and if consent must be separately obtained because consent is not specifically or indirectly obtained as part of the most recent application/RV form, a copy of the "stand-alone" consent form if the appropriate individual completed one or a county notation in the comment section of the transmittal that states consent was given. (The Bridging program benefits only continue for one month. The child will be on SOC for the second month, but HFP will still accept the RV form.) If the NOA does not include the budget for each child, the county must send the budget worksheet for each referred child and the MC to HF transmittal form.

No Referral to the  
HFP if Consent  
Withheld

If consent is withheld, the county still reports the child to MEDS in aid code 7X, but cannot provide any information about the child to the HFP.

**Prior-Period Bridging  
New Provision**

There may be instances when a child's full-scope, SOC eligibility in a prior month based on the application is reduced to no SOC, e.g., through a fair hearing or the county recognizes it failed to act timely on a report of reduced income. The county will take its usual and appropriate action to reduce the SOC for that prior month.

If no SOC eligibility in that prior-period month is followed by an SOC in the following month, the county must determine whether Bridging is appropriate for that following month. If Bridging is appropriate, the county must report Bridging for that first SOC month. The county must then determine whether it is appropriate to refer the child to the HFP in the current month, i.e., the county will make a referral to the HFP if the appropriate individual has given consent, the child appears to meet HFP requirements and the RV determination is less than two months old.

Example 1:

A pregnant mother and four-year-old child were full-scope, MN with an SOC in January, February, and March. The baby was expected in April.

Early in March, their annual RV was conducted for the following April-March period. The county determined they would have an SOC in April based on the mother's earnings. The county sent an SOC NOA.

At the end of March, the pregnant mother reported to the county that the baby was born and she had not earned the money she expected to in March, but her earnings in April will return to pre-March levels. The mother did not notice that the county did not send her an NOA that her SOC was eliminated.

She and her two children continue eligible with an SOC.

At the end of August, the hospital where she gave birth sends her a bill for her March medical expenses in the amount of her SOC. She then learns that her SOC was not reduced to zero in March even though she reported her reduced earnings to the county. She files for a fair hearing. The fair hearing determines that she and her four-year-old child should have been no SOC for March, but that an SOC was appropriate for April. CEC is not applicable for April since that month is the first month of the new annual RV.

Note: The newborn remains eligible under DE for infants with no SOC until age one as long as he/she continues to live with the mother in California.

For the four-year-old child:

1. Determine whether Bridging should be established for April.

If the county had reduced the child's SOC in March, the child would have been Bridged to the HFP in April since that SOC month followed the no SOC month of March. Based on available information, the county determines that the child met Bridging requirements for April and in August (the current month) reports the child to MEDS in aid code 7X for April.

2. Determine whether it is appropriate to refer the child to the HFP.

The purpose of Bridging is to allow time for the family's case information to be sent to the HFP where consent is given or to allow the family time to apply for the HFP themselves if consent is not given. However, since HFP eligibility is based on current eligibility, it is not appropriate to refer the four-year-old child to the HFP unless the child's conditions in the current month meet HFP requirements.

- a. If the child is in no SOC Medi-Cal in the current month, no referral is to be made, even if the child changed from no SOC to SOC in the prior period.
- b. If current income is above the HFP income standard, no referral is to be made, even if the income in the prior month in which Bridging was established was within the HFP limit.
- c. If the child is already on the HFP in the current month or HFP coverage is pending for the following month, no referral is to be made.

Example 2. Use the same facts listed in Example 1.

New information: As in Example 1, the four-year-old child has an SOC in August, but family income is at or under the HFP limit. Since April had Bridging established after the fact, the county must determine whether a referral to the HFP is appropriate in August. Based on this new information that family income is within HFP guidelines, with consent, this child is referred to the HFP with the updated budget worksheet in August.

Example 3:

A child had an SOC in October, November and December 2005 and an SOC in January, February, and March 2006. The RV was conducted in March 2006 impacting April 2006. After the RV, the county determined there was an SOC for April 2006. The current month is May 2006 and a fair hearing just determined that the child should be no SOC eligible only for February.

The county reports aid code 34 for February and due to CEC, also reports the no SOC CEC aid code 7J for the child for March. CEC ended March 31, with the annual RV. The child's April SOC followed a no SOC month so the county must determine whether Bridging is appropriate for April, which is a prior month. If the county determines that Bridging

requirements were met in the prior month of April, the county will report the child to MEDS in aid code 7X in April.

If Bridging was appropriate in April, the county must now determine whether the child should be referred to the HFP in May, the current month.

Assume that the county determines that May's current income meets the HFP income standard and the child is otherwise eligible for the HFP. With consent, the county will refer the child to the HFP with the updated budget worksheet.

**Children Turning  
Age 19 Mid month**

Otherwise eligible Bridging children who are age 18 on the first of a month and will turn age 19 during that month are eligible for Bridging in that month, although no referral to the HFP should be made.

**Bridging Performance  
Standards**

Enclosure 1 contains detailed information and instructions concerning Bridging performance standards. These standards have been established in order to ensure the timely completion of Bridging determinations for certain children eligible for the Bridging program. Because the enacting state legislation for performance standards only addressed children who change from no SOC to SOC, these Bridging performance standards will only measure that specific situation. That is, other situations previously described in this letter as requiring Bridging will not be included in the performance standards. For example, children who are eligible for Bridging and reported in aid code 7X but who are ineligible for Medi-Cal due to excess property are not included in the Bridging performance standards process. See the explanation under "Who is Eligible" above for detailed information about property ineligibility. Children who are made eligible for Bridging in a prior period as described above will not be included in performance standards.

**Anything Upcoming**

SB 437 (Chapter 328, Statutes of 2006) establishes a Healthy Families Presumptive Eligibility program (HF PE) similar to the eligibility requirements in the current Bridging program, but it requires that counties send applications to the HFP in an electronic application format, as long as CDHS has implemented any necessary automated interfaces. Once the HF PE program is implemented, it will replace the Medi-Cal to Healthy Families Bridging program. Therefore, activities to automate the current Bridging program will not proceed. Instead, activities will focus on implementing the automated/electronic requirements of the HF PE program.

**Questions?**

Topic	Person to call	Phone	E mail
Medi-Cal to Healthy Families Bridging	Cynthia Lawrence	(916) 552-9489	clawrenc@dhs.ca.gov
Bridging performance standards	Cynthia Lawrence	(916) 552-9489	clawrenc@dhs.ca.gov
Medi-Cal/Healthy Families Program Liaison	Guadalupe (Lu) Sanchez	(916) 552-9474	gsanche1@dhs.ca.gov

**Original signed by**

Maria Enriquez, Chief  
Medi-Cal Eligibility Branch

Enclosures

## Enclosure 1

### Newly Established Bridging Performance Monitoring Standards

#### 1. Bridging Performance Standards in State Law

In August 2005, Section 14154 (c)(3) of the W&I Code was amended as follows to establish three performance standards.

(D) When a child is determined by the county to change from no SOC to an SOC and the child meets the eligibility criteria for the HFP established under Section 12693.98 of the Insurance Code, the child shall be placed in the MC to HF Bridge Benefits Program and these cases shall be processed as follows:

- (i) Ninety percent of the families of these children shall be sent a notice informing them of the HFP within five working days from the determination of an SOC.
- (ii) Ninety percent of all annual RV forms for these children shall be sent to the HFP within five days from the determination of an SOC if the parent has given consent to send this information to the HFP.
- (iii) Ninety percent of the families of these children placed in the MC to HF Bridge Benefits Program who have not consented to sending the child's annual RV form to the HFP shall be sent a request, within five days of the determination of an SOC, to consent to send the information to the HFP.

(E) Subdivision (D) shall not be implemented until 60 days after the Medi-Cal and Joint Medi-Cal and HF applications and the Medi-Cal RV forms are revised to allow a parent of a child to consent to forward the child's information to the HFP.

#### 2. Collaboration

CDHS has developed procedures, in collaboration with counties and stakeholders, in order to implement the performance standards. These procedures establish county review cycles, sampling methodologies and procedures, and data reporting processes.

#### 3. Effective Date:

Effective mid-July 2006, the Medi-Cal application, the Joint Medi-Cal and HF application and the Medi-Cal RV form each contain a consent section. Therefore, these Bridging performance standards shall be implemented January 1, 2007.

#### 4. Submission of Performance Standards Reports

Section 14154 of the W&I Code also directs the CDHS to develop procedures for submission of the performance standards reports and to identify which counties are to submit performance standard reports to CDHS. Section 14154 provides that performance standard reports are due in January of each year. The Bridging



performance standard report for 2007 is due June 29, 2007. The next performance standard report will be due in January 2008 and every January thereafter. The format for the report is contained in Enclosure 4.

Identification of counties required to submit performance standards reports      The 25 counties with the largest Medi-Cal population, as identified in ACWDL 06-10 dated February 24, 2006, are to report as described below on the Medi-Cal to Healthy Families Bridging Performance Standards.

Review month      For the performance report due on June 29, 2007, the review month is February 2007. For the performance reports due in January 2008 and every January after that, each reporting county must select either September or October of that prior year as the review month. This will provide the county time to complete and submit its performance standard report by the appropriate January.

Sample size      Counties will either review the universe of affected cases or a State-determined sample of cases.

5.      Clarification of terms used in performance standards

*“date of the share of cost determination”* as it is used in W&I Code Section 14154

For counties that have a data system that determines the SOC eligibility:  
Use the date the county’s data system determines the SOC.

For counties that do not have a data system that determines the SOC:  
Use the date that the SOC eligibility is entered into the county system.

*“if the parent has given consent to send this information to the HFP,”* as used in performance standard (ii). (See the body of this ACWDL for additional details.)

Consent is given if the parent, caretaker relative, legal guardian, or any other individual who is allowed to sign the Medi-Cal application has:

- had an opportunity on the most recent application or reapplication to indicate that he/she does not want to give consent and he/she does not check that box and does not otherwise indicate on the form that consent is being withheld or

- not had an opportunity to withhold consent for a particular child, but is sent a stand-alone consent form or is contacted by the county and he/she specifies verbally or in writing that consent is being given. Note that if consent is given verbally, the county must document that in the child's case file.

Consent is not given if the parent, caretaker relative, legal guardian, or any other individual who is allowed to sign the Medi-Cal application indicates in writing or verbally to county staff that consent is being withheld. Consent is also not given by failure to return the stand-alone form. Consent is only given by virtue of a signed application, redetermination form, or the stand-alone consent form, which indicates consent is given, or where verbal consent is given by the parent, caretaker relative, or person acting on behalf of a child.

#### 6. Methodology to Determine whether Bridging Performance Standards Are Met

The following is the methodology counties are to use to determine whether they have met each of the three Bridging performance standards specified in W&I Code Sections 14154 (c)(3)(D)(i), (ii) and (iii).

##### Performance Standard (i) (W&I Code 14154 (c)(3)(D)(i)):

Ninety percent of the families of these children shall be sent a notice informing them of the HFP within five working days from the determination of an SOC.

Note: This HFP information may be included on the Medi-Cal SOC NOA (see samples in Enclosure 2), but the NOA would then need to be sent within five days of the SOC determination.

1. Determine the number of children with full-scope, no SOC Medi-Cal eligibility in one month who will be eligible for Medi-Cal with an SOC in the following month. This number does NOT include children who will be ineligible for Medi-Cal due to excess property, who will be turning age 19 in the Bridging month, who were made eligible for Bridging in a prior period, or who are already enrolled in the HFP. Note that children with excess property or who will turn age 19 in the Bridging month are not precluded from Bridging if otherwise eligible.
2. Subtract the number of children whose family income exceeds the HFP income standard.
3. Subtract the number of children who are undocumented. The remaining number of children are put into aid code 7X.

4. Determine the number of families these remaining children belong to. All children in the same Medi-Cal Family Budget Unit are considered to be one family.
5. Determine the number of these families who were sent at least one notice informing them of the HFP within five days of the SOC determination.
6. Divide the number in step 5 by the number in step 4 and convert to a percent.

Example (i)

1. The county determines on June 16, 2006, that 97 children who are eligible for full-scope, no SOC Medi-Cal in June 2006 will be eligible for Medi-Cal with an SOC in July 2006.
2. The county determines that seven of these children have family income that exceeds the HFP income standard. The county subtracts seven from 97 leaving 90 children.
3. The county determines that there are ten children who are undocumented and subtracts ten from 90. There are 80 children remaining and the county puts them into aid code 7X. The county determines these 80 children belong to 38 families.
4. The county determines that 35 of these 38 families were sent at least one notice of HFP information within five days, or by June 21, 2006.
5. The county divides the number of families in step 5 by the number of families in step 4 ( $35/38 = 92.1$  percent). The county meets performance standard (i).

Performance Standard (ii) (W&I Code 14154 (c)(3)(D)(ii)):

Ninety percent of all annual RV forms for these children shall be sent to the HFP within five days from the determination of an SOC if the parent has given consent to send this information to the HFP.

1. Determine the number of children with full-scope, no SOC Medi-Cal eligibility in one month who will be eligible for Medi-Cal with an SOC in the following month. This number does NOT include children who will be ineligible for Medi-Cal due to excess property, who will turn age 19 in the Bridging month, who were made eligible for Bridging in a prior period, or who are already enrolled in the HFP.
2. Subtract the number of children whose family income exceeds the HFP income standard.
3. Subtract the number of children who are undocumented. The remaining children are put into aid code 7X.
4. Subtract the number of children for whom consent was not given.
5. Determine the number of children remaining after step 5 whose applications were sent to the HFP within five days of the SOC determination.

6. Divide the number of remaining children in step 5 by the number in step 4 and convert to a percent.

Example (ii)

1. The county determines on June 16, 2006, that 97 children who are eligible for full-scope no SOC Medi-Cal in June 2006 will be eligible for Medi-Cal with an SOC in July 2006.
2. The county determines that seven of these children have family income that exceeds the HFP income standard. The county subtracts seven from 97 leaving 90 children.
3. The county determines that there are ten undocumented children in this number and subtracts 10 from 90. There are 80 children remaining.
4. The county determines that families of eight of these 80 children did not give consent and subtracts 8 from 80. There are 72 children remaining.
5. The county determines that annual RV forms for 70 of the children in step 4 were sent to the HFP within five days of the SOC determination.
6. Divide the number in step 5 by the number in step 4 ( $70/72 = 97.2$  percent). The county meets performance standard (ii).

Performance Standard (iii) (W&I Code 14154 (c)(3)(D)(iii)):

Ninety percent of the families of these children placed in the Medi-Cal to HF Bridging Program who have not consented to sending the child's annual RV form to the HFP shall be sent a request, within five days of the determination of an SOC, to consent to send the information to the HFP.

1. Determine the number of children with zero or no SOC in one month who will be eligible for Medi-Cal with an SOC in the following month. This number does NOT include children who will be ineligible for Medi-Cal due to excess property, who will turn age 19 in the Bridging month, who were made eligible for Bridging in a prior period, or who are already enrolled in the HFP.
2. Subtract the number of children whose family income exceeds the HFP income standard.
3. Subtract the number of children who are undocumented.
4. The remaining children are put into aid code 7X.
5. Subtract the number of children in step 4 for whom consent was given.
6. Determine the number of families these remaining children in step 5 belong to. All children in the same Medi-Cal Family Budget Unit are considered to be one family.

7. Determine the number of these families who received at least one request to give consent to share their child's/children/s case information with the HFP within five days of the SOC determination.
8. Divide the number of families in step 7 by the number of families in step 6 and convert to a percent.

Example (iii)

1. The county determines on June 16, 2006, that 97 children who are eligible for no cost or zero SOC in June 2006 will be eligible for Medi-Cal with an SOC in July 2006.
2. The county determines that seven of these children have family income that exceeds the HFP income standard. The county subtracts seven from 97 leaving 90 children.
3. The county determines that there are ten undocumented children in this number and subtracts ten from 90. There are 80 children remaining.
4. These 80 children are put into aid code 7X.
5. The county determines that families of 72 of these 80 children gave consent and subtracts 72 from 80. There are eight children remaining.
6. The county determines that these eight children belong to 3 families.
7. The county determines that only one family received a request to give consent to share their child's/children/s case information with the HFP within five days of the SOC determination.
8. Divide the number of families in step 7 by the number of families in step 6 ( $1/3 = 33.3$  percent). (The county does not meet performance standard (iii)).

7. Reports

Each of the selected counties are required to submit a report to CDHS on the county's results in meeting the Bridging performance standards and submit a corrective action plan if CDHS finds that the county is not in compliance with one or more of the standards. If the county reports that it has failed to meet one or more of the Bridging performance standards that shall constitute a CDHS finding and require a corrective action plan. The submission and content of the corrective action plan shall be in accordance with ACWDL 05-22E. The county may be subject to a reduction in county administrative funds by two percent in the next fiscal year if the county does not meet the performance standards.

**Notice of Action (NOA) language if child otherwise eligible with an SOC**

Counties may use the following suggested language for any NOA that imposes an SOC on otherwise eligible children that were receiving full-scope, zero or no SOC Medi-Cal in the month immediately preceding the SOC month.

Although you would otherwise be eligible for continued Medical coverage with a share of cost (SOC) in the month indicated above, we have determined that you may be eligible for the Healthy Families Program (HFP), which provides low cost health coverage to children. For this reason, your no cost Medi-Cal coverage will continue through the end of \_\_\_\_\_ (month) in order for you to have an opportunity to apply for the HFP or if an individual such as your parent, caretaker relative, or legal guardian gives us consent, we will share your case file with the HFP without you needing to complete a new application. Beginning \_\_\_\_\_, your SOC will be \_\_\_\_\_.

We can only refer your case to the HFP if an individual such as your parent, caretaker relative, or legal guardian has given consent.

\_\_\_\_\_ Consent has been given; therefore, we will forward your information from your Medi-Cal case to the HFP. The HFP will contact you to request any additional information that is necessary to make a HFP eligibility determination.

\_\_\_\_\_ Consent has not been given; therefore, we will not forward your information to the HFP, but you will have no SOC for one month in order for you to apply for the HFP. You may obtain additional information about the HFP by calling (800) 880-5305. **If you would like to have us forward your information to the HFP, you can still consent now!** To consent, please call your worker whose phone number is at the top of this page and tell him/her that you want us to share your information. If consent is given within two months of the date of this notice, we will forward your case file information to the HFP so that you can enroll in the HFP without having to file a new application.

**Notice of Action language if ineligible for reasons such as excess property**

Counties may use the following suggested language for any discontinuance NOA issued to otherwise eligible children that were receiving full-scope, zero or no SOC Medi-Cal in the month immediately preceding the month of ineligibility.

Although you are ineligible for free Medi-Cal without a share of cost beginning in the month indicated above, we have determined that you may be eligible for the Healthy Families Program (HFP), which provides low-cost health coverage to children. For this reason, your no-cost Medi-Cal coverage will continue through the end of \_\_\_\_\_ (month) in order for you to have an opportunity to apply for the HFP or if an individual such as your parent, caretaker relative, or legal guardian gives us consent, we will share your case file information with the HFP without you needing to complete a new application.

We can only refer your case to the HFP if consent is given.

\_\_\_\_\_ Consent has been given; therefore, we will forward your application and other information from your Medi-Cal case to the HFP. The HFP will contact you to request any additional information that is necessary to make a HFP eligibility determination.

\_\_\_\_\_ Consent has not been given; therefore, we will not forward your information to the HFP, but you will have no SOC for one month in order for you to apply for the HFP. You may obtain additional information about the HFP by calling (800) 880-5305. **If you would like to have us forward your information to the HFP, you can still consent now!** To consent, please call your worker whose phone number is at the top of this page and tell him/her that you want us to share your information. If consent is given within two months of the date on this notice, we will forward your case file information to the HFP so you can enroll in the HFP without having to file a new application.

**MEDI-CAL TO HEALTHY FAMILIES  
BRIDGING CONSENT FORM**

County Return Address Box

Medi-Cal Recipient Address Box

Notice date: \_\_\_\_\_  
Case number: \_\_\_\_\_  
Worker name: \_\_\_\_\_  
Worker number: \_\_\_\_\_  
Worker telephone number: \_\_\_\_\_  
Office hours: \_\_\_\_\_  
Notice for: \_\_\_\_\_

**Your child(ren) listed above may be eligible for low-cost health coverage through the Healthy Families Program (HFP). They will receive no share of cost Medi-Cal for one calendar month in order to give you time to apply for the HFP. If you give us consent, we will forward your case file information to the HFP and you will not have to file a new application with the HFP.**

The benefits in the HFP include:

- Choice of health, dental and vision insurance plans.
- Low monthly premiums from \$4 per child per month to a maximum of \$45 per family per month.
- No co-payment for preventive services (such as immunizations).
- \$5 co-payment for other office visits and prescriptions.

If you consent to our sending your case file information to the HFP, HFP will accept your Medi-Cal information as your application for the HFP. If you consent, you will not have to complete a new HFP application. The HFP will then contact you to let you know what different information they need to enroll your child(ren).

If you wish to give consent to forward your information to the HFP, you must check the box that shows, "I give my consent to forward my Medi-Cal case file information to the HFP." You must sign and date this form and return it to the county address above. You may also call your Medi-Cal worker to tell him/her that you wish to give consent.

If you do not wish to give consent, do NOT return this form. If you do not return this form, consent is NOT given. Your Medi-Cal case file information will not be sent to the HFP and your child(ren) will not get HFP health care coverage unless you apply. You can request an HFP/Medi-Cal application by calling 1 (800) 880-5305.

**I give my consent to forward my Medi-Cal case file information to the HFP.**

**Sign:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
(Return this form or call-in your response within five days.)

**If you have any questions or need additional information, please contact your Medi-Cal worker listed on the top right corner of this notice. Please call (800) 880-5305 if you want additional information about the HFP.**



**REPORTING FORMAT FOR BRIDGING PERFORMANCE STANDARDS**

County: \_\_\_\_\_

This report is for the Bridging Month of: \_\_\_\_\_

When a child is determined by the county to change from no share of cost (SOC) to an SOC and the child meets the eligibility criteria for the Healthy Families Program established under Section 12693.98 of the Insurance Code, the child shall be placed in the Medi-Cal to Healthy Families Bridge Benefits (Bridging) Program and these cases shall be processed as specified under performance standards 1-3.

Please note that only children who move from full-scope, no SOC eligibility under an SOC program are included in the evaluation of performance standards, i.e., the Bridging performance standards do not include all children eligible for Bridging.

**Performance Standard 1.**

Ninety percent of the families of these children shall be sent a notice informing them of the Healthy Families Program within five working days from the determination of an SOC.

1. The number of children subject to performance standards who moved from full-scope, no SOC Medi-Cal eligibility to SOC eligibility in the Bridging month is: \_\_\_\_\_.
2. The number of these children whose family income is at or below the HFP income standard is: \_\_\_\_\_.
3. The number of these children who have satisfactory immigration status or are citizens is: \_\_\_\_\_.
4. All children in the same Medi-Cal Family Budget Unit are considered to be one family. The number of families these remaining children belong to is: \_\_\_\_\_.
5. The number of these families who were sent at least one notice informing them of the HFP within five days of the SOC determination is: \_\_\_\_\_.
6. Divide the number in step 5 by the number in step 4 and convert to a percent: \_\_\_\_\_.

**Performance Standard 2**

Ninety percent of all annual redetermination (RV) forms for these children shall be sent to the HFP within five days from the determination of an SOC if the parent has given consent to send this information to the HFP.

1. The number of children subject to performance standards who moved from full-scope, no SOC Medi-Cal eligibility to SOC eligibility in the Bridging month is:\_\_\_\_\_.
2. The number of these children whose family income is at or below the HFP income standard is :\_\_\_\_\_.
3. The number of these children who have satisfactory immigration status or are citizens is: \_\_\_\_\_.
4. The number of these children for whom consent was given is: \_\_\_\_\_.
5. The number of these children whose applications were sent to the HFP within five days of the SOC determination is: \_\_\_\_\_
6. Divide the number of remaining children in step 5 by the number in step 4 and convert to a percent \_\_\_\_\_

**Performance Standard 3**

Ninety percent of the families of these children placed in the Medi-Cal to HF Bridging Program who have not consented to sending the child's annual RV form to the HFP shall be sent a request, within five days of the determination of an SOC, to consent to send the information to the HFP.

1. The number of children subject to performance standards who moved from full-scope no SOC Medi-Cal eligibility to SOC eligibility in the Bridging month is:\_\_\_\_\_.
2. The number of these children whose family income is at or below the HFP income standard is: \_\_\_\_\_.
3. The number of these children who have satisfactory immigration status or are citizens is: \_\_\_\_\_

4. The number of these children for whom consent was not given is:\_\_\_\_\_.
5. All children in the same Medi-Cal Family Budget Unit are considered to be one family. The number of families these children belong to is: \_\_\_\_\_.
6. The number of these families who received at least one request to give consent to share their child's/children/s case information with the HFP within five days of the SOC determination is: \_\_\_\_\_.
7. Divide the number of families in step 6 by the number of families in step 5 and convert to a percent: \_\_\_\_\_.