



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



ARNOLD SCHWARZENEGGER
Governor

May 14, 2007

TO: ALL COUNTY WELFARE DIRECTORS Letter No: 07-09
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
QUESTIONS AND ANSWERS FROM ACWDL 07-03
(Reference: All County Welfare Directors Letters 99-06, 01-57, 03-01, and 07-03)

This All County Welfare Directors Letter (ACWDL) answers questions posed by counties and advocates following the release of ACWDL 07-03, Medi-Cal to Healthy Families Bridging (Bridging), and finalizes the Medi-Cal to Healthy Families Bridging Consent Form (consent form) provided in that letter. The questions and answers are found in Enclosure 1. Please take note of question and answer number 1 that revises the review month for performance standards from March 2007 to August 2007 and the report month from June 29, 2007, to November 30, 2007. The revised consent form [DHS 0021 (04/07)] is found in Enclosure 2.

If you have any questions about this letter or further questions about ACWDL 07-03, please contact Ms. Leanna Pierson, Chief of the Medi-Cal Eligibility Branch Policy Unit A-1, at lperson@dhs.ca.gov or at (916) 552-9447.

Original Signed By

Maria Enriquez, Chief
Medi-Cal Eligibility Branch

Enclosures

Questions and Answers

Question 1: Have the review month and the report month for Bridging performance standards outlined in ACWDL 07-03 changed?

Response: Yes. The review month has changed from March 2007 to August 2007 and the report month has changed from June 29, 2007, to November 30, 2007.

Question 2: Performance standard (i) in Enclosure 1 of ACWDL 07-03 allows counties five working days to meet the standard, while performance standards (ii) and (iii) only allow five days. Should performance standards (ii) and (iii) also allow five working days?

Response: Yes. The word “working” was inadvertently omitted from performance standards (ii) and (iii). These standards will now be consistent with the enabling legislation (Chapter 80, Statutes of 2005). These three standards are as follows:

(D) When a child is determined by the county to change from no share of cost to a share of cost 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 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 Healthy Families Program within five working days from the determination of a share of cost.
- (ii) Ninety percent of all annual redetermination forms for these children shall be sent to the Healthy Families Program within five working days from the determination of a share of cost if the parent has given consent to send this information to the Healthy Families Program.
- (iii) Ninety percent of the families of these children placed in the Medi-Cal to Healthy Families Bridge Benefits Program who have not consented to sending the child's annual redetermination form to the Healthy Families Program shall be sent a request, within five working days of the determination of a share of cost, to consent to send the information to the Healthy Families Program.

Question 3: What does it mean for August 2007 to be the review month?

Response: The review month of August 2007 means that the case file of any child who has a redetermination (RV) in August that would result in a share of cost (SOC) for that child on September 1, 2007, is to be reviewed to determine whether the three performance standards have been met. The five working days could overlap months.

Therefore, the county must determine for all children for whom performance standards are applicable, whether, within five working days of the SOC determination, ninety percent of these children were sent a notice about the Healthy Families Program (HFP) and their annual RV forms were sent to the HFP if their parents have given consent, and whether ninety percent of the families of these children placed in Bridging who have not consented to sending the annual RV form to the HFP were sent a request for such consent. Regardless of the date in August that the SOC determination is made, the performance standards apply with respect to the five working days.

Question 4: Page 9 of ACWDL 07-03 provides that 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. Performance Standard (iii) provides that families who have not consented to sending the child's annual RV form to the HFP shall be sent a consent request.

(a) Does Performance Standard (iii) preclude the county from trying to call the family first instead of sending the consent form?

Response: No. As stated on page 9, if the county makes contact by phone, the county only needs to document that contact in the case. To meet the performance standard, the county would have to have made the call within five working days of the SOC. Furthermore, if the county is unsuccessful in reaching the family by phone, the consent form still will have to be sent within five working days of the SOC determination.

(b) If the most recent application has a consent section relating to Bridging and the family does not consent, is the county still required to send the consent form contained in Enclosure 3 of ACWDL 07-03?

Response: Yes. If consent was not given on the most recent application, the county must follow the requirements of any applicable performance standard to obtain consent.

Question 5: Is the consent form in Enclosure 3 going to be made final? Counties consider the form in ACWDL 07-03 a draft because it does not have a number. Furthermore, counties need it translated into languages other than English in order to meet their performance standards.

Response: The consent form has been numbered and can be found in Enclosure 2. The Department of Health Services (DHS) is in the process of having this form translated and will inform counties when these translations are available. However, DHS does not agree that the delay in providing such translations affects county Bridging performance standards. As directed in ACWDL 03-01, counties have been instructed to secure consent as part of the process to forward applications. Counties must secure consent in the language preferred by the family. Therefore, until the new consent form is translated, counties should continue their current consent process.

Question 6: Is a child eligible for Bridging in the month the child turns age 19?

Response: Yes. If otherwise eligible, such children are placed in Bridging in the month they turn age 19, but they are not included in Bridging performance standards, nor are they referred to the HFP. This is stated in Enclosure 1, Page 3, item 1 under Performance Standard (i).

Question 7: Is a child eligible for Bridging who is already enrolled in the HFP if he/she meets all the Bridging requirements?

Response: Yes. The Bridging requirements do not specify that the child cannot already be enrolled in the HFP.

Question 8: ACWDL 07-03 expands the information that a county must send when referring a child to the HFP from that which was required in ACWDL 03-01. (See below.) That is, 07-03 now requires that a budget for each referred child be provided either on the notice of action (NOA) or on a budget worksheet. Counties do not necessarily complete budgets for each child. What documents can counties send instead?

Response: ACWDL 03-01 specifies that, "When a child is determined by the county to be eligible for Bridging, the county welfare department (CWD) shall first determine whether the child's parent, caretaker relative, or person acting on behalf of the child consents to having case information forwarded to the HFP. If he/she consents, the CWD will forward to the HFP, a copy of the most recent application/RV form, appropriate Notice of Action (NOA) and the Medi-Cal to Healthy Families transmittal form."

ACWDL 07-03 expands this to specify that, "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."

Counties will have met the requirement to provide budget information for each referred child if they send the budget information that was used to determine whether the child moved to a SOC and whether the child's income meets the HFP income guidelines that led to a Bridging referral to the HFP. This budget information may be for the entire family or any group that includes the child such as a Sneed mini budget unit's budget

information. This item will be part of the discussion among DHCS, the Managed Risk Medical Insurance Board, and counties concerning automating Bridging and the presumptive eligibility provisions of Senate Bill 437 (Chapter 328, Statutes of 2006).

This direction was not intended to create a change to established county processes. The intent of this language was to describe the items that HFP typically receives today. The requirement continues to be to send the information that HFP needs to determine eligibility in the same way as the county determined that the child was no longer eligible for no cost Medi-Cal.

Important: Given the limited information on the RV form, HFP relies on the family composition provided on the transmittal form. Please continue to fill out the transmittal form MC 363 as specified in the Medi-Cal Eligibility Procedures Section 4X.

Question 9: With respect to prior-period Bridging, page 11 of ACWDL 07-03 states counties can only refer the affected child made eligible for Bridging in a prior period if the child's RV in the current month is less than two months old. However, Example 2 on page 13 states that the child is to be referred even though the RV date was March and the current month is August. Should the county in this example refer the child to the HFP?

Response: Example 2 in ACWDL 07-03 is to be replaced with the following revised Example 2.

Example 2: A pregnant mother and four-year-old child were full-scope, Medically Needy with an SOC in January, February, and March 2006. The baby was expected in April 2006.

Early in March, their annual RV was conducted for the following April 2006-March 2007 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 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. The county deemed the newborn infant eligible for one year (until February 2007).

She and her four year old continued eligible with an SOC.

At the end of August 2006, the hospital where she gave birth sends her a bill for her March 2006 medical expenses in the amount of her SOC. She then learns that her SOC was not reduced to zero in March 2006 even

though she reported her reduced earnings to the county. She files for a fair hearing.

In March 2007, the county conducts the annual RV for the April 2007-March 2008 and determines the family has an SOC.

The county and mother receive the fair hearing decision in April 2007 that she and her four-year-old child should have been no SOC for March 2006, but that an SOC was appropriate for April 2006. CEC was not applicable for the four year old in April 2006 since that month was the first month of the annual RV for the April 2006-March 2007 period and the child had an SOC.

The county takes steps in April 2007 to implement the fair hearing decision as follows.

For the four-year-old child:

1. Determine whether Bridging should be established for April 2006.

If the county had reduced the child's SOC in March 2006, the child would have been Bridged to the HFP in April 2006 since that SOC month followed the no SOC month of March 2006. Based on available information, the county determines that the child met Bridging requirements for April 2006 and in April 2007 (the current month) reports the child to MEDS in aid code 7X for April 2006.

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 and the most recent application/RV is within two months of the proposed referral.

- 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.
- d. If the child's most recent application or RV is older than two months, no referral is to be made.

Assuming that the child's income is within the HFP guidelines, the HFP requirements have been met, and consent to refer the child to the HFP has been given, the child will be referred to the HFP in April 2007 because the March 2007 RV was conducted within two months of the referral.

Question 10: Some data systems do not know whether a child is already enrolled in the HFP in order to take this child out of the universe for purposes of Bridging performance standards as provided, for example in ACWDL 07-03, Enclosure 1, item 1, page 3. What should counties with these data systems do?

Response: As the counties have noted, there are some children who are enrolled in the HFP and also in no SOC Medi-Cal. If such a HFP-enrolled child moves from no SOC Medi-Cal to a SOC (irrespective of property), that child is entitled to Bridging, but is not to be referred to the HFP. For purposes of Bridging performance standards, it will be at a county's option whether or not to include such HFP-enrolled children in the universe of cases affected by performance standards. Counties will have to state on their performance standard report whether or not they are including these children in their statistics.

**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 1 (800) 880-5305 if you want additional information about the HFP.