

**BRIDGING THE GAP FOR A HEALTHY FUTURE**  
**"TROUBLEHOOTING & ADVOCACY"**  
**September 7<sup>th</sup>, 2007**

Presented by:  
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# Avoid Medi-Cal Post Enrollment Pitfalls



# GOALS



- Learn the most common Medi-Cal and Healthy Families post enrollment obstacles and how to avoid or address them.
- Learn Rights and Responsibilities that participants must comply with to maintain their benefits.



# Medi-Cal Fee for Service

- Clients can begin to access their benefits from any provider that accepts Medi-Cal
- They must present their Benefits Identification Card (BIC) to access services
- If they did not receive their BIC card they must contact their worker to have one sent





# Look Out!!! Medi-Cal Managed Care Packet



- Most participants must choose a Managed Care Plan
- Selecting a Dental Plan is Voluntary
- Dental and medical forms come in the same packet!
- The packet will also include an "Intent to Assign" letter which will indicate which household members are being asked to select a plan



# Medi-Cal Managed Care

- If the Choice Form is not submitted timely the participant will be defaulted - a plan will be chosen for them
- You can request a Medi-Cal Exemption if there is a complex medical condition for continuity of care



# Medi-Cal Client Responsibility

- 10 day reporting requirement!!!!!!
- State law and regulation require that clients report to the county welfare department any changes in the circumstances of the applicant/beneficiary within 10 calendar days following the date the change occurred.



# Changes which must be reported within 10 days include:



- A change in property; house, car etc..
- A change in income; increase or decrease
- Changes in health insurance coverage including enrollment in available health insurance or the discontinuance of health insurance



# More Changes to report

- A change in the beneficiary's living arrangement, household members, or residence
- The death of the applicant/beneficiary
- A change in guardianship/conservator or representative status
- Any other change in circumstances which may affect eligibility or share of cost





# How does the client report changes?



- Call the Eligibility Worker (EW)
  - EW information is on the Notice of Action
- Report changes on Mid-Year Status or Annual Redetermination report if timely
- If the client can not get a hold of the worker you can assist them by making a "Case Complaint" with the DPSS Deputy Directors office



# MEDI-CAL Continuous Eligibility for Children (CEC)

- Effective January 1, 2002, State Legislation established CEC for up to a 12 month period.
- CEC provides up to a 12 month period of eligibility for children under age 19 with a no Share of Cost (SOC) status regardless of any income changes.
- CEC can also apply to retro-active months.



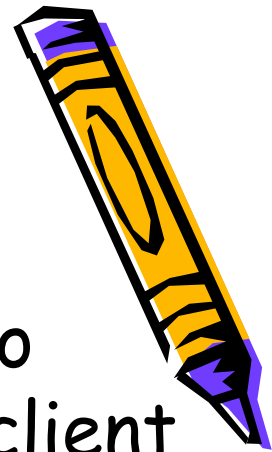
# Mid-Year Status Report(MSR)

- State Law requires some beneficiaries complete a MSR to keep their Medi-Cal
- You do not have to turn in the MSR and **you should not lose Medi-Cal** if you are:
  - A child under 21
  - Disabled or aged (65 or older)
  - Parent or guardian of a Cal WORKS child
  - Pregnant (your worker must be notified of pregnancy to be exempt)
  - A woman in the Breast or Cervical Cancer Program



# Mid-Year Status Report (MSR)

- If in the last 6 months there have been no changes to the family circumstances the client can check no changes and sign the form.
- Clients do not have to turn any documents (proof of income, resources, etc.) with MSR
- If the client loses Medi-Cal for not returning the MSR, you can still return it within 30 days of the termination date and the Medi-Cal could be reinstated.



# Senate Bill 87

## SB 87

- SB 87 is a law that says the county cannot cut Medi-Cal benefits unless it first follows specific steps and clearly demonstrate that the beneficiary is ineligible for *all* Medi-Cal programs.
- The county must “redetermine” eligibility before cutting benefits



# Senate Bill 87

## SB 87



### Step One: Ex Parte Review

- Internal review of the clients file to see if there is any other type of eligibility for Medi-Cal

### Step Two: Telephone Call

- The county must make a telephone call to the beneficiary

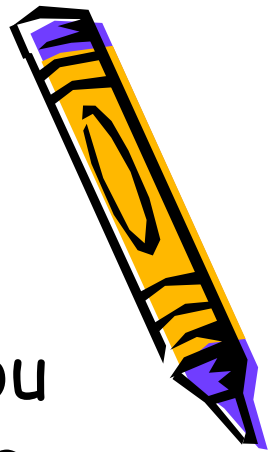
### Step Three: Mail

- The county must send a Request for Information Form



# SB 87

- If those three steps are not followed you can have the case reinstated by making a "Case Complaint" with DPSS Deputy Directors office.



# Medi-Cal Redetermination

MC-210 LA Pilot

- Annually every Medi-Cal recipient will have to recertify their case

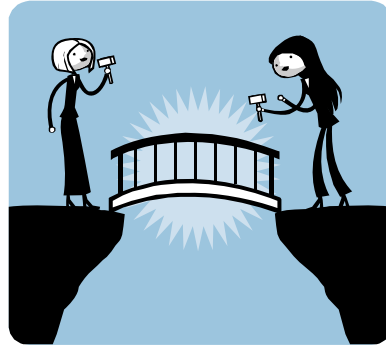
## Advocacy Tip

- Section 9
  - Question C - Bridging Opportunity



Medi-Cal

To



Healthy Families



Any child who loses free Medi-Cal and is assessed a share of cost is entitled to two months of continued free Medi-Cal while the county transfers the file to the Healthy Families



# Healthy Families

- Premiums must be paid by the 20<sup>th</sup> of each month regardless of whether or not families receive a bill.
- Failure to pay premiums for two consecutive months will result in disenrollment
- Families can request for their premium amounts to be re-evaluated if their income decreases or changes to their family size prior to the Annual Eligibility Review.



# Annual Eligibility Review (AER)

- Eligibility renewed annually
  - Annual Eligibility Review Packet is sent a month prior and must be completed
- Ensure that families submit their AER along with current income/deduction documents on time



# Bridging Opportunity

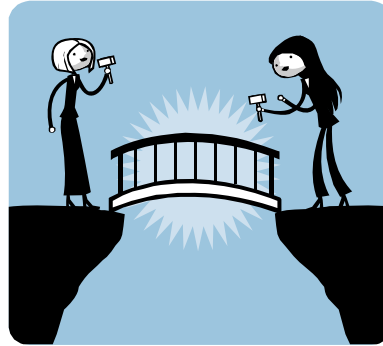
- Proceed to assist families with the AER process even if you think they are no longer for Healthy Families
- Families whose incomes have decreased or whose family size has increased may no longer be eligible for Healthy Families but can be bridged to Medi-Cal



Healthy Families

To

Medi-Cal



Bridging is a process in which children can be moved from Healthy Families to Medi-Cal while maintaining their health care benefits during the transition



# Who Can I call for more Training in Los Angeles County?

Maternal and Child Health Access

(213) 749-4261

Or

[training@mchaccess.org](mailto:training@mchaccess.org)

