



Medi-Cal Health Care Program

"To Enrich Lives Through Effective and Caring Service"

August 2007

DEPRIVATION and UNMARRIED PARENTS

ESD has received service requests because LEADER is not granting eligibility to a mother who lives with the father of their mutual child. Guess What? LEADER IS CORRECT!

Remember:

- Deprivation = Unemployment
- Absent Parent
- Deceased Parent
- Physical or Mental Incapacity of a Parent



A household that consists of unmarried parents with a mutual child does **not** meet the deprivation factor that would make the mother eligible for Medi-Cal. Children with both parents in the home, married or not, are not considered deprived.

Ref: MEM. Article 5, Section 50205 thru 50215

**DOCUMENT!
DOCUMENT!
DOCUMENT!**

Inside this issue:

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"CURE PERIOD" FOR TERMINATIONS LESS THAN 30 DAYS OLD

As a reminder, Medi-Cal cases that have been terminated for failure to comply with the redetermination process can be rescinded within 30 days of the termination date. As part of the intake process, eligibility workers are to determine if the applicant had a previous case that was terminated for failure to comply with the redetermination process less than 30 days prior to the new application date. Here's what you should do:

1. Review the Aid Programs screen of LEADER to determine the location, termination date and reason of the previous case.
2. Refer the beneficiary back to their approved worker when the termination reason is failure to comply with the redetermination process and the termination date is less than 30 days old. The approved worker will reevaluate the case, request necessary documentation and rescind or add benefits to the case as appropriate.

Reference: Manual Letter 369, dated 09/06/01, Administrative Directive 4160 dated 03/12/02.

Material Released in July 2007

- 🍏 FML #4666, dated 7/18/2007, PA 4040 Disability Packet Review Checklist

GOT IEVS?



DID YOU KNOW?

The State has recently clarified that we can accept documents which are faxed to us as long as we compare the signature with the original in the case record. This should be particularly helpful for last minute redetermination submissions.



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ARE YOU GUILTY ?

Do you use "short cuts" to terminate or deny cases?

Did you know that when you enlist these short cuts you block the LEADER logic to issue the Notice of Action?

Case action without a Notice of Action results in audit errors and poor customer service.



MSP - MEDICARE SAVINGS PROGRAMS

The Medicare Savings Programs (MSP) automation was initiated on LEADER in January 2007. MSP include the following programs:

- Qualified Medicare Beneficiary (QMB)
- Specified Low Income Medicare Beneficiary (SLMB)
- Qualified Individual -1 (QI-1)
- Qualified Disabled and Working Individual (QDWI)

Since MSP automation, numerous cases failed at conversion for various reasons. Some reasons for MSP failure are: The Verification Source in the Medicare Coverage Information Screen on LEADER has not been properly updated, or the source input is incorrect, or LEADER does not contain the beneficiary's correct HIC Number (Medicare Claim Number), or there is no HIC number at all!

An MSP Quick Guide to assist eligibility staff to identify and correct possible MSP eligible cases will be published soon. Remember, the Medicare Savings Programs are now treated as separate programs. LEADER can evaluate MSP as a stand-alone application or in conjunction with a request for Medi-Cal benefits. **Work-arounds are no longer allowed.**

Administrative Directive 4212, Supp. I, dated February 8, 2007
LEADER Build #199, December 29, 2006

SB 87 Telephone Call Documentation

SB 87 guidelines mandate if the outcome of an ex-parte review is not successful, the EW must attempt to reach the applicant/beneficiary by telephone. **The result of the telephone call must be documented in LEADER Case Comments.** If the required information was provided over the telephone, the type of information and verification must be documented along with the name of the person providing the information. If the telephone call was unsuccessful, this information must also be documented in LEADER Case Comments to indicate whether the phone number was disconnected, a wrong number, no one answered the phone, etc. An attempt to obtain the required information must be initiated by mail using the MC 355 when the EW is unable to complete a Medi-Cal eligibility review through the ex-parte process and the telephone call is unsuccessful.

Reference: ACWDL 02-59, dated 12/23/02, Administrative Directive 4160, dated 03/12/02

Just like the weather, it's *hot* to Document in Case Comments



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