

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



GAVIN NEWSOM GOVERNOR

DATE March 12, 2020

Medi-Cal Eligibility Division Information Letter No.: I 20-06

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

SUBJECT: PUBLIC HEALTH CRISIS OR DISASTER REMINDERS FOR MEDI-CAL

The purpose of this Medi-Cal Eligibility Division Information Letter (MEDIL) is to remind counties to utilize existing guidance to continue processing applications and redeterminations for individuals affected by public health crises and disasters. On March 4, 2020, Governor Gavin Newsom declared a State of Emergency in response to the global COVID-19 outbreak and the increase in the number of positive cases across the state.

Please refer to the following All County Directors Letters (ACWDL) or MEDIL when processing applications or redeterminations from individuals affected by any California public health crisis or disaster:

- ACWDL <u>19-01</u> Exceptions due to Public Health Crisis or Disaster,
- MEDIL I <u>17-16</u> Processing Applications from Individuals Affected by Disasters, and
- ACWDL <u>15-36</u> Guidance to Counties on Treatment of Applications/Redeterminations in Disaster Areas and Treatment of Disaster Assistance for Modified Adjusted Gross Income and Related Information

As outlined in the above guidance, for all populations affected by a public health crisis or disaster, counties shall:

- Continue to provide benefits beyond the certification period, as needed, to provide additional time to submit renewals or verifications, and
- Modify eligibility requirements at application or renewal to allow for self-attestation
 - **Important Reminder**: Counties may accept a signed and dated affidavit, under penalty of perjury, to verify California residency, income, and

Medi-Cal Eligibility Division Information Letter No.: I 20-06 Page 2 March 12, 2020

property from applicants who are unable to provide necessary verifications due to the public health crisis or disaster.

As beneficiaries find it necessary to relocate to be with family or friends in another county, counties may begin receiving urgent requests for inter-county transfers (ICTs). Please remember that Medi-Cal beneficiaries may contact either the Receiving County or Sending County to assist with transferring their case on a permanent or short-term basis.

Counties should follow the existing processes for changes needed to the Medi-Cal Managed Care Plan coverage:

- Submit the on-line fillable form to the Office of the Ombudsman as directed in MEDIL I <u>14-59</u>. The online, fillable form should be used when requesting expedited:
 - o Plan Changes
 - o Plan Enrollments
 - o Plan Disenrollments
 - o Removal of 59 Holds
- Counties are to submit the form to the website located at: <u>http://dhcs.ca.gov/MCOmbudsman</u> or contact the Office of the Ombudsman by phone at 1-888-452-8609.

If you have any questions, or if we can provide further information, please contact Bonnie Tran by phone at (916) 345-8063 or by email at <u>Bonnie.Tran@dhcs.ca.gov</u>.

Original Signed by

Sandra Williams, Chief Medi-Cal Eligibility Division