

CalSAWS | Non-MAGI/MAGI Medi-CAL NOA Meeting Notes

Date:	May 27, 2021	Location:	Teams Meeting
Time:	2:00 pm – 4:00 pm	Meeting Called by:	Virginia Bernal

Meeting Attendees:

Region 1: Abel Kolodziejski, Celeste Armijo, Katrina Dillion
Region 2: Alisa Young, Chelsea Carson
Region 3: Emily Tuholski
Region 4: Adam Bacon, Karen Baglietto
Region 5: Arlene Reza, Kristen Timmins, Marcus Giffin, Mireya Cordova
Region 6: Carlos Agreda, Ericka Merida, Lucio Castillo

DHCS CalSAWS: None
First Data QA: None
Sponsor RM(s): Matthew Vandereyck (R4)
Design: Tiffany Huckaby, James Tran
CalSAWS North: Maggie Orozco-Vega, Humberto Trinidad
CalSAWS South: Maria Arceo, Nina Butler

Topic	Lead
Opening Items <ul style="list-style-type: none">Roll CallMay Meeting Notes Assignment: Region 2	Virginia Bernal
Committee Updates / SCR Review <ul style="list-style-type: none">Final review and vote on CA-57452 Updates to Failure to Respond Medi-Cal NOAs <i>Design and materials sent to committee on 5/6/21</i>We received quite a few comments and will be addressing as we go through the document.1. We are updating our Failure to Respond verbiage in the system for both Non-MAGI/MAGI.<ul style="list-style-type: none">Based on ACWDL 17-32 verbiageUpdating one for Non-MAGI and one for MAGI.No longer keeping required verbiage from the system and keeping any verbiage for obsoleted RE packets for historical monthsOne of the questions was around the historical months. This has been updated. These RRR packets are going to be removed with a current SCR and being replaced with the MAGI/Non-MAGIOlder existing packets will still existWe are still saving the existing verbiage in case you need to run any retro determinations on these packets	Tiffany Huckaby

1. Medi-Cal RE Packets were updated with CA-216432 in the 21.07 release. The MAGI RE Packet, Non-MAGI RE Packet and Mixed Household RE Packet will use the updated versions of the Failed to Respond verbiage in newly generated NOAs while the Medi-Cal RE Packets that were removed, with the exception of the ABD MC RE Packet and LTC MC RE Packet, will only have the currently existing verbiage for historical months.

Note: CA-216432 will remove the following Packets: MC Redetermination, MC LTC Packet, MSP Packet, MC 604 IPS Packet and Pre-ACA MC RE Packet.

2. The Mixed Household RE Packet for Failed to Respond will trigger a mixed non-MAGI/MAGI NOA with both new NOA Fragments (non-MAGI and MAGI) listed with the applicable program persons.
3. The two new NOA fragment reasons will require the 90 day NOA verbiage. This effort will be using the existing CalSAWS 90 day NOA verbiage and variable population. The existing 90-day verbiage in CalSAWS matches MEDIL 16-04.
4. The two new NOA fragment reasons will not generate with the MAGI Individual Action (H_TN_ACTION2) on mixed non-MAGI/MAGI NOAs as these fragments are on program level.
5. CA-214024 will add the missing Translations for Common Fragment to allow Medi-Cal NOAs to generate in all CalSAWS supported Threshold Languages. Until this is implemented only a subset of the Threshold Languages will generate for Medi-Cal NOAs. CA-228191 has been created for when the rest of the Threshold languages for the Medi-Cal Failed to Respond Fragments can be added.
6. Currently NOAs are generated per Program block and this effort will not change that functionality. A mixed non-MAGI/MAGI NOA will only generate if the program persons are on the same Program block.
7. Updates via in CA-209422 will still apply to the new Failure to Respond NOAs.

2. Mixed RE packet will trigger both new fragments both Non-MAGI and MAGI and created verbiage listed with applicable program individuals.

3. 90-day verbiage will be used to align with ACWDL 17-32. Will continue to use this verbiage. It matches MEDIL 16-04.

4. With an exception: only exception on a program level would be a MAGI NOA. You can have on individual level.

5. Common fragment: are templates, recommendations, our state hearing, things you would normally see on a notice. Some of our actions/footer messages you would see on a large number of notices. This is going to add the translations for those. By adding those, in the future, we will be able to add all thresholds for SCRs going forward. We won't have an issue with adding translations after this is implemented. This will be the case for each set of program NOAs. 228191 will be added for the rest of the Threshold languages.

7. CA-209422 updated failure to complete redetermination reason to generate on individual level so you could have a MAGI EDBC that fails only a couple of individuals and not the entire program.

Region 1: Requested some restructuring on the fragment. Last two sentences have been swapped.

Restructure MAGI snippet:

Your Medi-Cal is ending on <DATE> because you did not provide the renewal information that we requested, asked for. We need you to give us proof of your household income to see if you can still get Medi-Cal. Some examples of proof of your income are a paystub, your most recent tax return, a letter from your employer, or a benefits award letter. Please call us, visit us, or return your completed and signed renewal form to give us this information.

At this time, we will keep the original language. Send a System Enhancement Request and we can look at that again.

The comment on the notices are based on the existing MAGI Footer and it is a footer that generates on all denials/discontinuances.

Region 1: Abel Approves **Region 2:** Approves Alisa **Region 3:** Approves Emily **Region 4:** Approves Karen **Region 5:** Approves Mireya, Kristen, Marcus **Region 6:** Approves Carlos (3 regional votes).

Approved

- Summary of *potential* Phase 4
- **Discussing whether we want to update a subset mixed MAGI notices into a letter format.**

Background

SB 1341 Previous Phases

- SB 1341 All County Solution Phase 1 - Separate MSP NOAs
 - Released in 19.11
 - MSP noticing is separated from MC noticing
- SB 1341 All County Solution Phase 2 - Updates to the flow of mixed Non-MAGI/MAGI NOAs
 - Released in 20.09
 - Non-MAGI and MAGI noticing is now flowed/merged on the same NOA.
- SB 1341 All County Solution Phase 3 - Updating Non-MAGI/MAGI NOAs to allow for mixed actions
 - Released in 21.05
 - Mixed non-MAGI/MAGI NOAs combine onto one NOA with differing Action types.

We have been implementing a phase a year.

Phase 4: Created to update specific mixed HH non-MAGI/MAGI Noticing in Letter Form

This matches what we did for MSP. Used NOA generated from one of our test environments and put into a letter format. There was some concern around this topic that the length might be impacted moving to a letter format. There is a scenario where there is a big of an impact. This is something to think about, if this is the direction, we want to go. This is our approval and change:

Design Decisions

Sample NOAs – Approval/Change NOA

We have reviewed your eligibility for health coverage. We used the information you gave us and state and federal data to make this decision.

Member(s) of your family have been approved or had a change in benefits for Medi-Cal. This Notice of Action explains the county's action for each person.

As of 05/01/2021, Medi-Cal eligibility has been approved for the following member(s) of your family:

Name(s):

Testing Nonmagi

As of 05/01/2021, Medi-Cal eligibility or share of cost or premium has been changed for the following member(s) of your family:

Name(s):

Testing Magi

Beginning 05/01/2021, you are eligible to receive Full scope Medi-Cal benefits without a share-of-cost under the Aged and Disabled Federal Poverty Level Program.

Rules: These rules apply; you may review them at your local welfare office: California Code of regulations, Title 22, Section(s): 50262.

MC 239 A&D / MC-MAGI-C (11/2015)

State Hearing: If you think this action is wrong, you can ask for a hearing. The back page tells you how. Your benefits may not be changed if you ask for a hearing before this action takes place. You have only 90 days to ask for a hearing. The 90 days started the day after the county sent you this notice.

Benefits are being approved for:

Testing Nonmagi

Benefits for your infant child may continue up to age one under Deemed eligibility.

If you have never received a Benefits Identification Card (BIC), you will soon receive one in the mail. If you already have a BIC, you should bring this card to your medical provider whenever you need care. If you have family members who are eligible for Medi-Cal they will also receive cards.

DO NOT THROW AWAY YOUR BIC.

Always present your BIC to your medical provider whenever you need care. This card is good as long as you are eligible for Medi-Cal.

Pregnant women with a share of cost (SOC) may be eligible to the Medi-Cal Access Program (MCAP). If you are interested please call 1(800) 433-2611 or visit <http://www.coveredca.com/info> for more information and/or an application.

Report this coverage to your health insurance premium payer so your health insurance premium can be used to reduce your health insurance premium.

We have reviewed your eligibility for health coverage. We used the information you gave us and state and federal data to make this decision.

Member(s) of your family have been approved or had a change in benefits for Medi-Cal. This Notice of Action explains the county's action for each person.

As of 05/01/2021, Medi-Cal eligibility has been approved for the following member(s) of your family:

Name(s):

Testing Nonmagi

As of 05/01/2021, Medi-Cal eligibility or share of cost or premium has been changed for the following member(s) of your family:

Name(s):

Testing Magi

Beginning 05/01/2021, you are eligible to receive Full scope Medi-Cal benefits without a share-of-cost under the Aged and Disabled Federal Poverty Level Program.

Rules: These rules apply; you may review them at your local welfare office: California Code of regulations, Title 22, Section(s): 50262.

MC 239 A&D / MC-MAGI-C (11/2015) Page 1 of 3

This is a mock up- Did my best to keep all the spacing. From this standpoint, don't think it would be an issue for a particular action type.

Issue is when we have a lot of lists. In this particular one, it has a very long list. We are not saving space in that scenario.

Design Decisions

Sample NOAs – Denial NOA

We have reviewed your eligibility for health coverage. We used the information you gave us and state and federal data to make this decision.

Medi-Cal eligibility has been denied for the following member(s) of your family:

Name(s):

Test Test
Other Test

Your application for Medi-Cal dated 01/01/2021 has been denied.

Medi-Cal benefits under the Non-MAGI Medi-Cal program have been denied for:

Other Test

You are being denied because you do not qualify for Non-MAGI Medi-Cal. In order to be eligible to Non-MAGI Medi-Cal you must meet one of the following:

- Blind or disabled.
- Pregnant.
- Under the age of 21 or age 65 and over.
- A parent/caretaker relative caring for a child under 21 in the home.

Rules: These rules apply; you may review them at your local welfare office: California Code of Regulations, Title 22, Section(s): 50203, 50251.

MC_239_V002 / MC-MAGI-D (11/2015)

State Hearing: If you think this action is wrong, you can ask for a hearing. The back page tells you how. Your benefits may not be changed if you ask for a hearing before this action takes place. You have only 90 days to ask for a hearing. The 90 days started the day after the county sent you this notice.

We have reviewed your eligibility for health coverage. We used the information you gave us and state and federal data to make this decision.

Medi-Cal eligibility has been denied for the following member(s) of your family:

Name(s):

Test Test
Other Test

Your application dated 01/01/2021 has been denied.

Our information shows you are not a resident of California.

We used the information you gave us and our records to make our decision. If you have questions or think we made a mistake, call or write to us.

22 CCR § 50320 is this decision.

DO NOT THROW AWAY YOUR BIC.

You can use it again if you are eligible for another hearing.

You are being denied because you do not qualify for Non-MAGI Medi-Cal. In order to be eligible to Non-MAGI Medi-Cal you must meet one of the following:

- Blind or disabled.
- Pregnant.
- Under the age of 21 or age 65 and over.
- A parent/caretaker relative caring for a child under 21 in the home.
- The responsibility of a public agency.

You do not meet any of the above criteria.

Test Test has been denied Medi-Cal services under the MAGI program.

Test Test

Your application dated 01/01/2021 has been denied. You do not qualify for Medi-Cal because:

Our information shows you are not a resident of California.

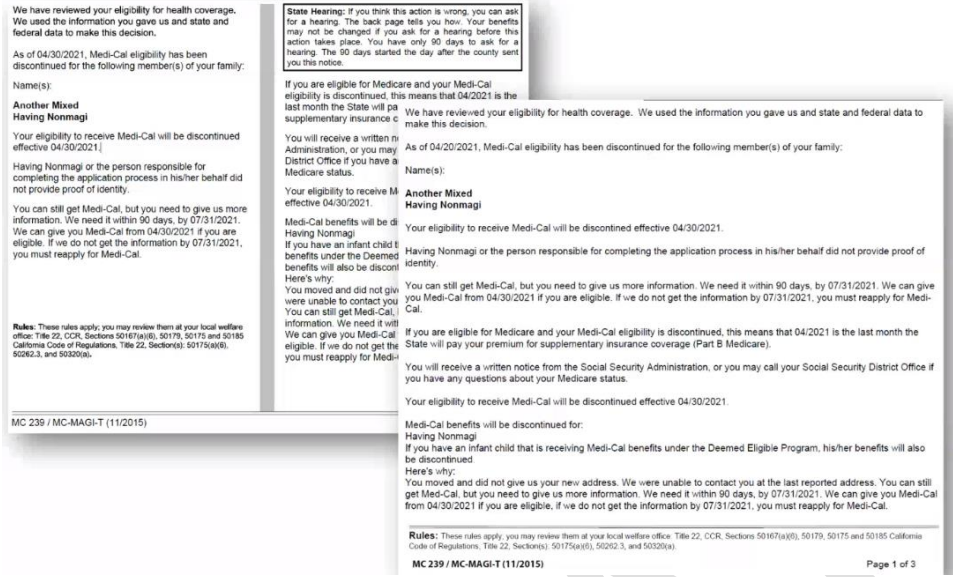
We used the information you gave us and our records to make our decision. If you have questions or think we made a mistake, call or write to us.

Rules: These rules apply; you may review them at your local welfare office: California Code of Regulations, Title 22, Section(s): 50203, 50251.

MC_239_V002 / MC-MAGI-D (11/2015) Page 1 of 3

Design Decisions

Sample NOAs – Discontinuance NOA



Next steps: Do we want to move forward if we have any additional conditions, we want to add to this? We are looking at all notices without budgets, which is vast majority of non-financial denial/discontinuances. Most of the approvals have a budget – would only be a small number of approvals.

Only moving forward with the design

PowerPoint will be sent after the meeting and updated version of the SCR

All Regions approved to move forward with Phase 4 as requested.

Region 1 approves, 2 votes, Region 2 approves, 1 vote, Region 3 approves, 1 vote, Region 4 approves, Region 5 approves, 3 votes, Region 6 approves, 3 votes

Next meeting scheduled for June 24th.

Closing Items

- Open discussion
- Next Meeting: 06/24/2021 (Notes Assignment – Region 3)

#	Action Item	Assigned To	Assigned Date	Due Date	Status
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2

#	Decision Made	Who Made the Decision	Date
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1			
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2			
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DRAFT

