

## **ENCLOSURE II FREQUENTLY ASKED QUESTIONS**

The frequently asked questions contained in this enclosure are organized into the following sections:

- Section I: MSR Forms
- Section II: Automation
- Section III: Exempt/Non-Exempt Beneficiary
- Section IV: MSR Processing

### **SECTION I: MSR FORMS**

1. **Are counties required to send a self-addressed postage-paid return envelope with the MSR?**

Yes.

2. **In a two-parent household, are both parents required to sign the MSR if both are non-exempt beneficiaries?**

No. Only one parent's signature is required on the MSR. An exempt parent may sign the MSR.

3. **Does the MC 239 I NOA require a NA back 9?**

Yes.

4. **On the MC 239 I NOA, what date is entered in the blank for the following statement:**

- **If you send us this information we requested by \_\_\_\_\_, your Medi-Cal may be restored.**

**Is the date to be the end of the discontinuance month or 30 days after the end of the discontinuance month? (Example: When the MSR Due Month is December, is the date to be entered 12/31/10 or 1/31/11?)**

The date to be entered will be 30 days after the end of the discontinuance month. In this example, the date would be 1/30/11; however, due to full month of eligibility, a MSR received on 1/31/11 would be reviewed as being timely.

## **SECTION II: AUTOMATION**

1. **Are counties permitted to program the MC 239 I NOA into two separate NOAs, one for failure to submit the MSR and the other for incomplete MSR?**

Yes. This is a county option.

2. **When automating the MSR, are counties permitted to modify the form; specifically in Section 2, allowing a choice to answer YES or NO?**

No. Counties are not permitted to alter the MSR.

3. **If the automated system sends up a term code 60 or 61 and then an EW sends up an online term code of 64 after the automated system code, will that overlay the 60 or 61 term code sent to MEDS?**

Yes.

4. **Will TMC use the new term code reason 64 for no status report or continue to use term code 60?**

TMC will continue to use term code 60.

### **SECTION III: EXEMPT/NON-EXEMPT BENEFICIARY**

- 1. Are married minors and emancipated minors considered exempt beneficiaries for MSR reporting?**

All individuals under the age of 21 are exempt beneficiaries.

- 2. Please clarify the exemption of individuals over the age of 65 and under the age of 21.**

Non-exempt individuals turning 65 years of age become exempt beneficiaries the first day of the month they become 65 years of age. Additionally, individuals remain exempt through the end of the month in which they turn 21 years of age.

Example: Non-exempt beneficiary turns 65 years of age in the MSR Mail Month. The beneficiary's status changes to exempt in the MSR Due Month.

- 3. In a two-parent household where both parents are Medi-Cal beneficiaries, if one parent is in an exempt category, does the household have to report?**

Yes. In a split household of an exempt and non-exempt beneficiary, the non-exempt member is required to complete the MSR. Counties are reminded that exempt beneficiaries shall not be terminated for failure to return the MSR.

- 4. Are non-exempt beneficiaries receiving federal Transitional Medi-Cal (TMC) required to submit both the TMC Quarterly Status Report and the MSR?**

No. Since federal TMC beneficiaries are required to complete the TMC Quarterly Status Report, they are considered exempt beneficiaries for MSR purposes.

- 5. Are beneficiaries, age 21 to 64, in a Skilled Nursing Facility or Intermediate Care Facility under aid code 53 (not aged or disabled) considered exempt from MSR reporting?**

No. Beneficiaries in aid code 53 are not exempt from MSR reporting since they have not been determined disabled.

## **SECTION IV: MSR PROCESSING**

- 1. Are counties permitted to process the MSR if it is completed and submitted prior to the end of the MSR Mail Month?**

Yes. The report is the beneficiary's statement of change in circumstances and must be acted upon promptly.

- 2. Is the beneficiary required to receive the MSR by the 10<sup>th</sup> of the month or is the county required to mail it out by the 10<sup>th</sup> of the month?**

Beneficiaries are to receive the MSR by the 10<sup>th</sup> of the month.

- 3. If a discontinued beneficiary submits a complete MSR on May 31 but was discontinued on April 30 because he/she failed to submit the MSR timely, does the county rescind the discontinuance even though it's been more than 30 days?**

Yes. Since Medi-Cal is based on whole months of eligibility (if eligible for one day of the month, eligible for the entire month), the county must rescind the discontinuance. The discontinuance shall only be rescinded if continued eligibility is found to exist.

- 4. What is the county responsibility when a Medi-Cal non-exempt beneficiary receiving Non-Assistance Food Stamps fails to return his/her MSR, but has returned a Food Stamps Quarterly Status Report (QSR) due the same month as the MSR with sufficient information about changes in circumstances? Is the SB 87 process followed in this situation?**

No. The SB 87 process is not followed in this situation because failure by the beneficiary to submit his/her MSR constitutes a failure to cooperate and not a change in circumstances. When a non-exempt beneficiary fails to submit the MSR, counties shall generate the MC 239 I NOA informing the beneficiary that his/her Medi-Cal benefits will be discontinued effective the last day of the MSR Due Month.

- 5. After 30 days past the discontinuance date, can the MC 321 HFP-AP (Additional Persons) form be used to add discontinued non-exempt beneficiaries back to an existing case instead of the MC 210 or MC 321?**

Yes. The MC 321 HFP-AP form can be used to add discontinued beneficiaries back to the existing case.

- 6. Are good cause regulations, Title 22 California Code of Regulations (CCR) Section 50175 (c), applicable to non-exempt beneficiaries who submit the MSR after the last day of the month following the discontinuance date?**

Yes. The good cause regulations, Title 22, CCR Section 50175 (c), apply to the MSR.

**7. Are exempt beneficiaries remaining on the existing case required to receive a ten-day NOA before increasing their SOC?**

Yes. All exempt beneficiaries must be notified timely and adequately. Counties are also reminded that any beneficiary whose discontinuance action is rescinded shall be notified about the action and change in Medi-Cal benefits.

**8. If the beneficiary reports a change in circumstances during the six-month MSR reporting period and the worker completes the case action based upon this change, does the beneficiary have to report this change on the MSR?**

No. The beneficiary does not have to re-report the change in circumstances on the MSR form.

**9. A non-exempt beneficiary reports an income change on the MSR but doesn't provide documentation. The MSR is dated and signed. Does the county take the information provided at face value?**

Yes. If the MSR form contains sufficient information to make an eligibility determination, the county should accept the beneficiary's report at face value and not follow-up with the beneficiary to verify the content of the form. The county must only follow-up with the beneficiary if the form is incomplete (resulting in insufficient information to determine eligibility) and then must only do so by following the SB 87 redetermination process.

**10. How is the Continuous Eligibility for Children (CEC) period and the annual redetermination verification (RV) date impacted when the non-exempt beneficiary has been discontinued more than 30 days and is added back to the existing case?**

Per ACWDL 02-14 (Questions and Answers Regarding Eligibility for Children) dated March 8, 2002, question number 40, the annual RV date does not change for children in CEC. If a parent is discontinued and then requests to be added back to the existing case the annual RV date will remain the same as for the family members who remained active.

**11. Can discontinued non-exempt beneficiary's apply for retroactive benefits when requesting to be added back to the existing case?**

Yes. Since this is considered a reapplication, the beneficiary may apply for retroactive benefits for three months prior to the reapplication. The beneficiary must meet retroactive regulation requirements before eligibility is established for

any retro month. To be added back to the existing case, the beneficiary must complete the MC 210 A requesting retroactive eligibility and the MC 321 AP form.

**12. What date begins the MSR period? Is it the application date or the date eligibility is granted?**

The MSR period is established in the first month of eligibility, which most often is the month of application. The exception for not establishing the MSR period in the month of application is when an applicant is not eligible in the month of application. For example, the applicant has excess property in the month of application and needs to spend down before Medi-Cal eligibility is established. In this situation, the MSR period begins in the first month eligibility is granted. Retroactive Medi-Cal months are not included in the MSR period.

MSR Period when eligibility is granted in the month of application:

Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
One	Two	Three	Four	Five	Six	Seven	Eight	Nine	Ten	Eleven	Twelve
Application Month Eligibility Granted				MSR Mail Month  Mail to be received by the 10th	MSR Due Month  Due by 5th					Mail Annual Packet by end of month	Annual Packet Due

MSR period when eligibility is granted after the month of application:

Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
One	Two	Three	Four	Five	Six	Seven	Eight	Nine	Ten	Eleven	Twelve
Application Month Over Property	Over Property	First Month Eligible				MSR Mail Month  Mail to be received by the 10th	MSR Due Month  Due by 5th				

**13. Do counties follow the two-contact rule prior to termination based upon non-return of the MSR?**

No. The two-contact rule only applies to Medi-Cal applications that are received and more information is required. The MSR follows the SB 87 process; however,

the SB 87 process only applies when the MSR is received but is incomplete. If the MSR is not returned, the beneficiary is discontinued.