

**ACTIVITY CODE (8)
FACILITATING MEDI-CAL APPLICATION**

Claiming Unit: Public Guardian

Submittal Date: 06/30/2025

Local Governmental Agency: ABC County

Amended Date:

Provide the information listed below:

1. Identify the Eligibility Intake objective and provide a detailed description of the Medi-Cal application facilitation process performed:

Claiming unit staff will evaluate and assist clients with the different applications for Medi-Cal benefits. One objective is to ensure that potentially eligible Medi-Cal clients are screened for their Medi-Cal eligibility and another is that Medi-Cal eligible clients maintain their Medi-Cal eligibility status through the redetermination process.

2. Provide a detailed description of how the Eligibility Intake activity will be performed to achieve the objective. For example, identify the staff performing the activity, describe what is performed, indicate when and where it is performed:

Eligibility intake will be conducted on an individual client and/or family unit basis and is performed on an ongoing basis by Public Guardian staff. The purpose of performing this duty is to help clients with the steps needed to enroll in Medi-Cal so that they can receive Medi-Cal covered health services. The duties performed include:

- a. Explaining Medi-Cal eligibility rules and the Medi-Cal eligibility process to prospective applicants.
- b. Assisting an applicant in filling out a Medi-Cal eligibility application.
- c. Gathering information related to the application and eligibility determination/ redetermination from a client, including resource information and third-party liability (TPL) information as a prelude to submitting a formal Medi-Cal application to the county social services department.
- d. Providing necessary forms and packaging all forms in preparation for the Medi-Cal eligibility determination.

3. Indicate whether the Eligibility Intake is performed by the LGA's subcontractors or by claiming unit staff:

Facilitating activities are performed by claiming unit staff.

A. Provide the name(s) and address(s) of the subcontractor(s), if applicable:

Not applicable.

4. If using a method other than time survey, describe how the costs of the Eligibility Intake will be developed and documented:

N/A - The time survey method will be used to document time spent by staff performing this activity.

Documents Required:

1. Copies of any documents unique to or designed by the claiming unit for use in conjunction with this activity.
2. A list of subcontractors, if direct-charge invoices will be submitted for those subcontractors. **N/A**
3. Copies of those sections of contracts that clearly describe the Eligibility Intake to be performed, how the time spent performing the Eligibility Intake will be performed, and that show the effective date of the contract. If direct charging, the contract must clearly show the method used for determining direct-charge claiming (including application of the Medi-cal percentage discount) and the dollar amount to be paid to the contractor. **N/A**