



HealthPAC Application Assistor Update

November 2012

Alameda County Health Care Services Agency

Volume 1, Issue 1

In this update find:

- **Verification documents reminders**
- **Income clarifications and tips**
- **How to avoid returned and denied applications**
- **Health coverage resources**



HEALTHPAC ENROLLMENTS

Alameda County Application Assistors are continuing to do a great job at completing HealthPAC Applications! As of November 2012, there are over 85,000 HealthPAC participants. We appreciate your continued commitment to ensuring healthcare access to Alameda County residents.

Inside this issue:

Residency and ID verifications	1
Income verifications reminders	2
Preliminary eligible for Medi-Cal?	2
Most common returned applications	3
One-E-App Questions and feedback	3
HealthPAC and other Health insurance resources	3
Ticklers 101	4

RESIDENCY AND ID VERIFICATIONS

Here are a few tips related to residency documentation:

- Be sure that the address on the application is the same as the address on the verification residency documents.
- When renewing applications be sure to **check that you have updated the applicant's address in One-E-App to reflect their current address.**
- Be sure that the applicant provides a recent verification document to prove residency.
- As per policy effective 7/01/12 we no longer **accept a California driver's license or ID card** issued by the Department of Motor Vehicles as proof of Alameda County Residency. Refer to Verification Documents/Appendix E in the HealthPAC guidelines for acceptable verifications.

HealthPAC Auditors review applications which must include proof of the following:

- 1. Income**
- 2. Identification**
- 3. Residency**
- 4. Citizenship/ Residency (if applicable)**
- 5. Signed Rights and Declarations**

INCOME VERIFICATION REMINDERS

Did you know? The most common application returns are income related, below are a few tips to remember related to income documentation.

1 Gross Pay **2** Pay Period / Pay Date **3** Name & Address

Circle the gross amount, pay period, pay date, name and address of applicant, if the wage stub shows this information.



There are NO income deductions.

- Use gross amount when calculating income. Whenever there are earnings for tips and meals, count that in the total gross income too.
- Circle the gross amount, pay period, pay date, name and address of applicant, if the wage stub shows this information.
- Current wage stubs must be within approximately 45 days from the date that the application was created. For example: If the application was created on 8/1/2012, the wage stub pay date should not be older than 6/17/12.
- There are no income deductions.
- Unemployment benefits (UIB) are calculated weekly. Include any benefit reduction amounts, i.e. child support and tax withholdings.
- If an applicant receives rental income from a rental property, please provide previous year's Federal Income Tax Form 1040.
- Acceptable proof of self-employment income:
 1. Previous year's Federal Income Tax Form 1040 and/or
 2. Last 3 months profit and loss statement. If applicant did not file taxes last year, he/she should provide the previous 3 months profit and loss statement.
- For applicants who earn cash income (including those who are paid by personal checks, not wage stubs), please refer to Verification Documents/Appendix E in the HealthPAC guidelines for acceptable verifications.
- If using the HealthPAC Statement of Income and Residency/Appendix H form, please continue to submit forms that are fully completed, which includes being signed and dated by the household representative. Incomplete forms will result in returned or denied applications.

Income should be calculated using the following multipliers:

Weekly: x 4.33	Bi-weekly (every other week): x 2.167
Semi-monthly (twice per month): x 2	Monthly: x 1

PRELIMINARY ELIGIBLE FOR MEDI-CAL?

HealthPAC cannot be approved for someone who is "Preliminary eligible for Medi-Cal". Use the following tips to avoid this type of application being returned or denied:

- Include all family members in the household, on all types of One-E-App applications, even if a member has active health coverage.
- Answer "Yes" to the question "Is this Person Applying for Benefits?" regarding minors under 21 years of age living in the home, even if the minor has active health coverage. If any member receives public services or has active health coverage answer "Yes" to the question "Is [NAME OF APPLICANT] currently enrolled in any public benefit program(s)?" and select the type of coverage the person has. This notifies One-E-App of existing coverage.
- Continue with the Medi-Cal application if a member was directed to apply for Full-Scope or Share-of-Cost Medi-Cal. **Don't "Opt-out" of Medi-Cal**, or the application may be returned or denied due to a member being considered eligible for Medi-Cal.

1 I am currently receiving... **2** I am currently enrolled in...

If using the HealthPAC Statement of Income and Residency/Appendix H form, please continue to submit forms that are fully completed.

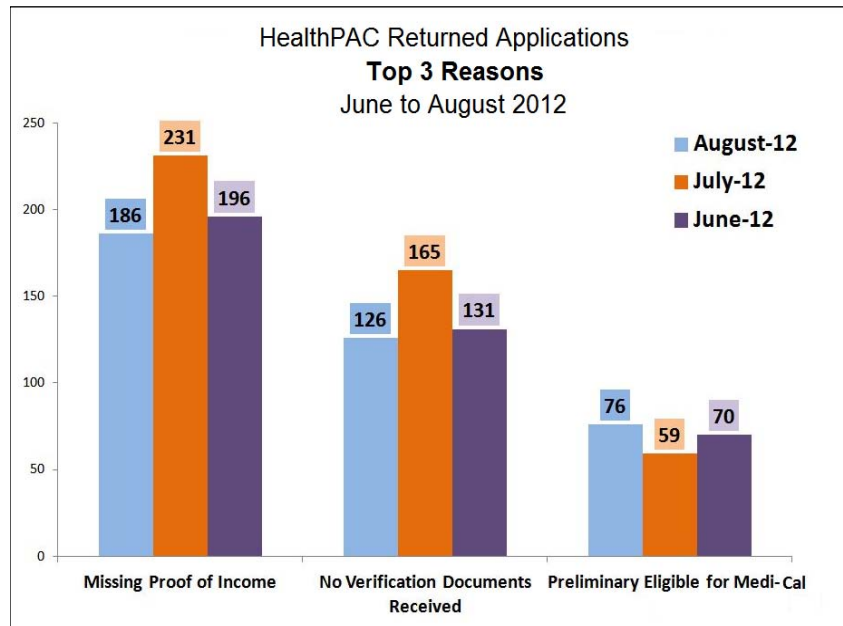
MOST COMMON RETURNED APPLICATION REASONS

The three most common returned reasons are shown on the chart to the right. Between June to August 2012 an average of 413 applications were returned due to these reasons.

You can help reduce the number of returned applications by uploading or faxing legible and complete documents as soon as an application is submitted. Auditors may return incomplete applications after a 48 hour period.



Remember, you are responsible for providing ALL verification documents within 24-48 hours of application submission.



ONE-E-APP QUESTIONS AND FEEDBACK

Don't forget! If you come across any One-E-App technical issues, the One-E-App Help Desk (510-529-9694) is here to assist you Monday–Friday between 8:30am–5:30pm.

Please send all non-urgent One-E-App related issues via the Help Desk email at oneeapp.alameda@nfpondemand.com. If you have any questions regarding the items on this update or want to submit ideas for future updates, please contact your One-E-App liaison.



HEALTHPAC AND OTHER HEALTH PROGRAM RESOURCES



HealthPAC Customer Service:
(877)879-9633



Alameda County Health Care:
<http://achealthcare.org/health-insurance-info/low-income-coverage-options/healthpac/>



Health Care Services Agency Services Health Care Program:
<http://www.acgov.org/health/indigent/pac-all.htm>



HealthPAC Brochure (Eng):
<http://www.acgov.org/health/documents/HealthPACbrochure-en.pdf>



HealthPAC Participant Handbook (Eng):
http://www.acgov.org/health/documents/LowResHPACHandbook081811_ENG.pdf

California LIHP Programs Contacts:

<http://www.dhcs.ca.gov/provgovpart/Pages/lihp.aspx>

Medi-Cal:

Beneficiary Line (800) 541-5555
<http://www.medi-cal.ca.gov/>

Alameda County Social Services:

(800) 698-1118 or (510) 777-2300
<http://alamedasocialservices.org/public/index.cfm>

Healthy Families:

(800) 880-5305
<http://www.healthyfamilies.ca.gov/Home/default.aspx>

Kaiser for Kids Child Health Plan:

(800) 255-5053
<http://info.kaiserpermanente.org/childhealthplan/>

ONE-E-APP TICKLERS 101

Please do not respond to ticklers or return the applications **until corrections have been made**, as it will save you time by eliminating unnecessary work.

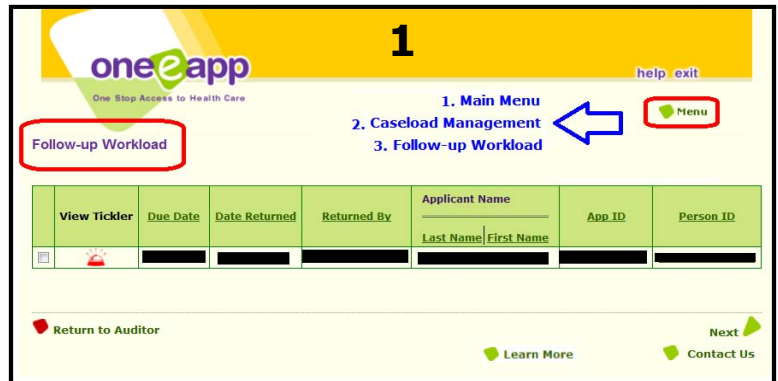
Only return corrected applications from the **Follow-up Workload** screen, not to be confused with **Tickler Workload** screen. Applications are not delivered directly to Auditors when returned from Tickler Workload.

It is very important when modifying applications to return the old application from the Follow-up Workload with a note including the new modified application number. This is the only time you should respond to the tickler without correcting the actual application.

1

Instructions to view Follow-up Workload screen:

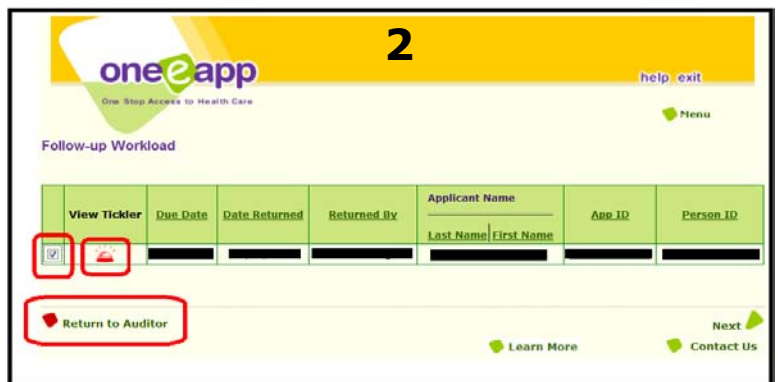
- login as a CAA, the *Follow up Workload* is the first screen that appears automatically when you have ticklers waiting to be resolved
- OR select the *Menu* tab followed by *Caseload Management* tab, followed by the *Follow-up Workload* tab



2

To view ticker message click on *View Tickler* box icon. Read the message. Depending on the message and correction needed, search for the application from the *Main Menu* and correct accordingly. Searching and working on the application will take you out of the *Follow-up Workload* window.

When correction is made, return to the *Follow-up Workload* window. Check the box in front of the application and select *Return to Auditor*.



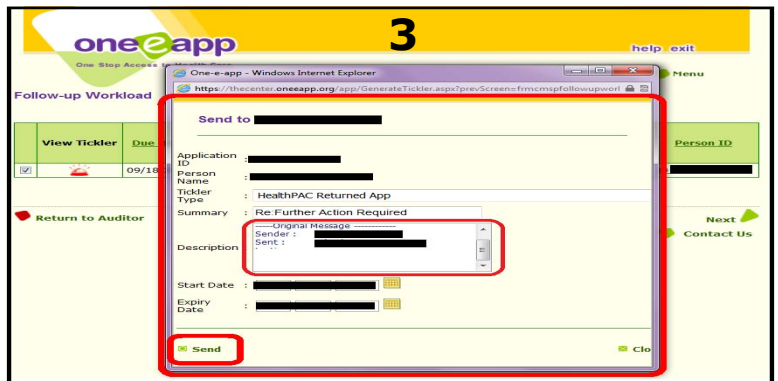
3

Once the selection *Return to Auditor* has been made, the *Note* page will appear. See example to the left.

Write your message on the top row in the description box.

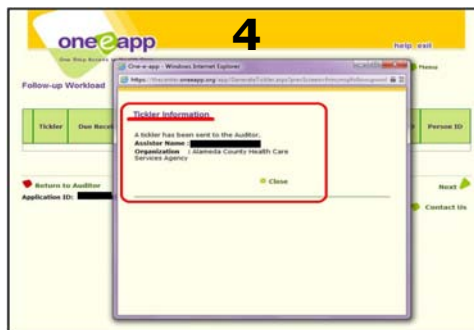
Do not delete ANY messages.

Select *Send* when complete.



4

A tickler confirmation will show up stating the application was sent to the Auditor.



5

The application will disappear from the *Follow up Workload*. You have successfully returned the case back to the Auditor.

