

**MEDS NETWORK USER MANUAL**

Appendices / Appendix D Quick Reference Guides / MEDS Quick Reference Guide

<b>ELIG</b>	<b>0180</b>
<b>1st Dist. = Medi-Cal/CMSP/Other Eligible Status</b> <b>0181</b>	
0	Full Scope Medi-Cal Eligible (includes zero SOC) with no conditions (refer to 3 below for conditions)
1	Full Scope Medi-Cal LTC/SOC Eligible (i.e., Share of Cost to be met by LTC claim)
2	LTC/SOC Eligible with one or more conditions (refer to 3 below for conditions)
3	Eligible with one or more conditions – Certified SOC, Restricted Services, Minor Consent, CMSP Coverage, Limited Scope Medi-Cal Coverage and/or Partial Health Care Plan (3-HP) Coverage
4	Medi-Cal Eligible with Full Service Medi-Cal HCP Coverage
5	Medi-Cal or CMSP Client with an Unmet Share of Cost Obligation (un-certified SOC)
6	Eligible for a Health or Welfare Program other than Medi-Cal or CMSP services (i.e., SSMH, OSH, Out-of-State Foster Care, Unborn, County M Program, CHP State Only, MEC State and County, HCP/Childing, HCP New, and RM Program Mother)
7	Hold
8	CHP pending Medicare part A & B confirmation
9	Ineligible

<b>2nd Dist. = Normal/Exception Eligible</b>	<b>0182</b>
0	Normal eligible
1	Unconfirmed Immediate Need eligible reported more than 1 month prior
2	Unconfirmed Immediate Need eligible reported 1 month prior
3	Unconfirmed Immediate Need eligible reported in current month
4	Forced eligible due to late termination
5	Partial Month Eligibility (Presumptive Eligibility, etc.)
6	MEDS changed aid code to limited scope due to ORA, Citizenship/identity requirements not met
7	Exception eligible
8	Forced eligible from MEDS hold
9	Full Month Eligibility

<b>3rd Dist. = Timeliness/Misc. Information</b>	<b>0183</b>
1	Regular eligible reported timely
2	Regular eligible reported retroactively
3	3 month retroactive eligible
4	Continuing eligible reported timely
5	Continuing eligible reported retroactively
6	Ramos/Foster/HSS/Other Extended eligible
7	Aid Paid Pending Ramos/Myers
8	Hold from LTC/SOC status
9	Ineligible or Regular hold

<b>ADWD</b>	<b>1089</b>
<b>Abse-Deduct Adults Without Dependents</b>	
0	Not ADWD
1	ADWD

<b>ADDRESS FLAG</b>	<b>0060</b>
<b>Good Deliverable Address</b>	
A	Address certified via Finalist
C	County Overrule, not certified via Finalist
D	Presumed reliable, Finalist changes unreliable
W	ERC ruled - previously A
X	ERC ruled - previously C
Y	ERC ruled - previously D
<b>Presumed Deliverable Address</b>	
Blank	Failed Finalist; presumed reliable
B	ERC ruled - previously Blank
<b>Considered Undeliverable Based on Returned Mail</b>	
1	ERC returned - previously 0
6	ERC returned - previously W
8	ERC returned - previously X
7	ERC returned - previously Y
9	NOA returned - previously Good Deliverable or Presumed Deliverable Address
<b>Considered Undeliverable For Other Reasons</b>	
2	Failed MEDS validation code
3	Foster Care Assistance terminated
4	Residence address but not a mailable address
5	General residence area for a homeless client
<p>* These are the only valid input values (H and B apply only to a residence address). Finalist is the MEDS address certification software.</p> <p>NOTE: Address Flag should only be input when the Finalist standardover address is incorrect (and needs to be overridden) (value C) or for a residence address when it is considered undeliverable (value 4 or 5).</p>	

# Meds Network User Manual Quick Reference Guide

**Jin-Ying Zhang**



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