

**DEPARTMENT OF HEALTH SERVICES**

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April 14, 1999

TO: All County Welfare Directors  
All County Administrative Officers  
All County Medi-Cal Program Specialists/Liaisons  
All County Public Health Directors  
All County Mental Health Directors

Letter No.: 99-17

**REDETERMINATION OF BENEFITS - REFUGEES**

Ref.: All County Welfare Directors Letter (ACWDL) No. 97-57

The purpose of this ACWDL is to clarify that when refugees in aid codes 01- Refugee Cash Assistance, 0A-Refugee Cash Assistance, Exempt, 02- Refugee Medical Assistance, and 08-Entrant Cash Assistance have reached the end of their eight-month period of eligibility, the county welfare department must do a separate determination before benefits can be terminated. Section 435.930, Title 42, Code of Federal Regulations, provides that an agency **must continue to furnish Medi-Cal regularly to ALL individuals until they are found to be ineligible.**

The county should conduct an examination of the file to see if there is any other eligibility for Medi-Cal. If there is not enough information in the file to make a determination, additional information can then be requested from the recipient. Inquiry must be made before Medi-Cal can be terminated. If it appears that eligibility does exist in another program, the county welfare department shall do an intra program status change or intra program transfer to the appropriate aid code and shall determine eligibility under that aid category. Refugees in aid codes 01, 0A, or 08 will be eligible for Edwards Medi-Cal benefits until the Medi-Cal redetermination is completed. The county must use a termination code that does not suppress Edwards. Refugees in Refugee Medical Assistance aid code 02 must be placed in another qualifying aid code until a redetermination of eligibility in that aid category is completed.

If you have any questions, please contact Ms. Elena Lara of my staff at (916) 657-0712.

Sincerely

ORIGINAL SIGNED BY  
TOM WELCH for

Angeline Mrva, Chief  
Medi-Cal Eligibility Branch