STATE OF CALIFORNIA—HEALTH AND WELFARE AGENCY EDMUND G. BROWN JR., Governor

DEPARTMENT OF HEALTH SERVICES
714/744 P STREET
SACRAMENTO, CA 95814

December 22, 1982

To: All County Welfare Directors Letter No. 82-73

FAIR HEARINGS AND AID PAID PENDING (APP) FOR PERSONS DISCONTINUED FROM THE MEDICALLY INDIGENT ADULT (MIA) PROGRAM

The Department has decided that those persons discontinued from the MIA program do have appeal rights. They must file for a hearing within 90 days of the mailing date of the Notice of Action. Those persons who file before the effective date of the action (therefore by December 31, 1982) are entitled to continued Medi-Cal benefits pending the hearing (APP) under aid code 81.

APP for all claimants, including those in the early transfer counties, will be granted by issuing a full service, green Medi-Cal card. The only exception will be if the claimant clearly indicates there has been a change in circumstances. For example, if a MI father and MI mother were discontinued effective January 1, 1983; the father leaves the household in late December; the mother files a timely hearing request on the basis that she should not be a MI; then she should get APP but her husband would not.

MIA applicants who applied in November or December 1982 and whose application was not acted upon in time to give a ten day notice, should be given a simultaneous approval and denial. This action would result in approval of their application from December 1, 1982 to December 31, 1982 (and any retroactive months) and denial of their application for January 1, 1983 onward. The denial should explain that the law has changed, that the affected applicant is not one of the people who is still eligible under the MIA program (under 21; pregnant women; time-eligible refugees; and ICF/SNF residents), and that individual's eligibility for other Medi-Cal programs has been evaluated but you (the county) have determined that person is not eligible for Medi-Cal. These persons do not have to receive a ten day notice and they are <u>not</u> to receive continued benefits pending the hearing.

The Department has developed a position statement (a copy of which is attached) which you may use when the issue of the hearing is that the claimant has been misclassified as an MIA and still should be eligible for Medi-Cal. We believe this is the only issue where a hearing officer will rule that the person should not have been discontinued.

In order to reduce the volume of fair hearings and the amount of APP, the Department will ask the counties to reevaluate the circumstances (for example, check the date of birth for someone filing for a hearing claiming he is under 21) when a person claims he or she has been misclassified. When appropriate, counties will reinstate those persons and secure withdrawals for the hearings.

After January 1, 1983 persons who are receiving Medi-Cal under one of the new aid codes (02, 53, 86, or 87) who have a change in status (examples: a refugee has been in the country for more than 18 months or a nursing home patient is discharged to go home) which makes them ineligible for Medi-Cal benefits also have appeal rights. These persons are entitled to APP if they file timely but

the county should grant APP under their former aid code. However MI children (aid codes 82 or 83) who reach the age of 21, are discontinued, and file timely receive APP under aid code 81. You must use this aid code because the age/aid code edits of CID and MEDS would not accept a record under aid code 82 or 83.

If you have any questions, please contact your Medi-Cal program consultant.

Sincerely,

Original signed by

Madalyn M. Martinez, Chief
Medi-Cal Eligibility Branch

Attachment

cc: Medi-Cal Liaisons
Medi-Cal Program Consultants

Peter Abbott, Chief
County Health Services
714 P Street, Room 1350

Laurence Geller, Chief
Office of the Chief Referee
Department of Social Services
744 P Street, MS 6-105

Case Name: Notice Dated _____

Case Number: Receiving APP _____

Hearing Date:

County Position

This recipient was discontinued as a Medically Indigent (MIA) person from Medi-Cal effective January 1, 1983 due to a change in law (W & I Code, Section 14005.4 as amended by Statutes of 1982, Chapter 1594, Section 19), which limited Medi-Cal eligibility to thos MIA persons who have confirmed pregnancies, are time-eligible refugees, are in a skilled nursing or intermediate care facility, or are under 21 years of age.

The county has determined that this person is not eligible for MIA Medi-Cal program as of January 1, 1983 based on the following criteria:

I. Age

This person's birthdate is _____ thus he/she is at least 21 years of age but not older than 64 years of age.

II. Refugee Status

This person arrived in this country on _____ and, therefore, has resided here longer than 18 months.

III. Pregnancy Status

1. This person does not have a confirmed pregnancy; or
2. She has not presented proper documentation of her pregnancy; or
3. Her pregnancy was terminated by birth or abortion on _____.

IV. Institutional Status

1. This person resides at _____ which is not a skilled nursing or intermediate care facility.

2. This person was discharged from the SNF/ICF on _____.

This person has been evaluated for potential eligibility under other Medi-Cal programs but no such eligibility exists.