

DEPARTMENT OF HEALTH SERVICES

714/744 P STREET
BOX 942732
SACRAMENTO, CA 94234-7320



(916) 657-2941

August 21, 1995

ACWDL Information Letter No.: I-95-17

TO: All County Medi-Cal Program Specialists/Liaisons

MEDI-CAL LIAISON LISTS FOR THE QUARTERLY STATUS REPORT AND DISABILITY ISSUES

The purpose of this letter is to notify you of a proposed change in the preparation and distribution of the Medi-Cal liaison lists for the quarterly status report and for disability issues. These lists will provide the Department of Health Services (DHS) and State Programs Disability Evaluation Division with the names of county contacts for Medi-Cal disability issues and the names of persons responsible for receiving the quarterly status report for closed and pending disability cases.

We have noticed in both lists that most county welfare departments identify the same contact person(s); however, a few offices have different contact persons. Because DHS would like to combine these lists and distribute only one list, we recommend that counties select one contact person per location for both disability issues and the status report. This will streamline communications and simplify maintenance of the list.

To assist us in consolidating and updating the lists, please complete the enclosed MC 4033 by providing updated information for your county. Please submit the MC 4033 to DHS by September 25, 1995. If we do not receive any updates from you by that date, we will continue to use the information from the previous lists of November 1994.

The consolidated and updated list will be mailed to you later with updated telephone lists for Disability Evaluation Division staff for both the Oakland and Los Angeles branches.

Please contact Terry Durham of my staff at (916) 657-2701 if there are any questions regarding this letter.

Sincerely,

Original signed by

Frank S. Martucci, Chief
Medi-Cal Eligibility Branch

Enclosure

DISABILITY LISTINGS UPDATE

_____ **MEDI-CAL LIAISON(S) FOR DISABILITY ISSUES**

_____ **MEDI-CAL LIAISON(S) FOR QUARTERLY STATUS LISTINGS FOR PENDING AND CLOSED DISABILITY CASES**

(PLEASE INDICATE WHICH LIST IS TO BE UPDATED WITH A CHECK MARK)

PLEASE USE THIS FORM TO TRANSMIT THE NAME OF YOUR COUNTY'S REPRESENTATIVE, OR IN COUNTIES WHERE MULTIPLE CONTACTS WILL BE NECESSARY, PLEASE PROVIDE THE SAME INFORMATION FOR EACH REPRESENTATIVE ON A SEPARATE FORM. IT WOULD BE APPRECIATED IF THE INFORMATION IS PRINTED OR TYPED.

COUNTY: _____

LIAISON: _____

LIAISON'S POSITION TITLE: _____

LIAISON'S TELEPHONE NUMBER: _____

ALTERNATIVE TELEPHONE NUMBER: _____

OFFICE ADDRESS:

RETURN TO: Department of Health Services
Medi-Cal Eligibility Branch
Attn: Unit B Clerical Supervisor
714 P Street, Room 1376
P. O. Box 942732
Sacramento, CA 94234-7320

DEPARTMENT OF HEALTH SERVICES

714/744 P. STREET
P.O. BOX 942732
SACRAMENTO, CA 94234-7320



September 11, 1995

ACWDL Information Letter No: I-95-18

TO: All County Welfare Directors
All County Medi-Cal Program Liaisons

SEPTEMBER 1995 QUALIFIED BENEFICIARY (QMB) AND SPECIFIED LOW-INCOME BENEFICIARY (SLMB) MAILER

The purpose of this letter is to inform you that the Health Care Financing Administration (HCFA) will send another mailer this month to 33,921 persons in California who could potentially be eligible for QMB or SLMB benefits. A copy is enclosed for your information. These persons are Medicare eligible but were not receiving Medi-Cal at the time they were identified.

Counties should be reminded that if the person contacts you and is not receiving Medicare Part A and wishes to apply for QMB benefits, he/she must first apply for "conditional" Part A benefits with Social Security Administration (SSA) during the general enrollment period (January through March) if he/she has not already done so. Persons who apply during this enrollment period will not be entitled to benefits until the following July.

If you have any further questions, please contact Marge Buzdas at (916) 657-0726.

Sincerely,
Frank S. Martucci
for
Frank S. Martucci, Chief
Medi-Cal Eligibility Branch

Enclosure



DEPARTMENT OF HEALTH & HUMAN SERVICES

Health Care Financing Administration

6325 Security Boulevard
Baltimore, MD 21207

AUG 21 1995

Dear Medicare Beneficiary:

GOOD NEWS! You may be eligible for assistance under the Qualified Medicare Beneficiary (QMB) program offered through your State Medical Assistance office. If you qualify, you will pay less for hospital, physician, and other Medicare Services. Whether you qualify will depend on your income and the value of things you own.

If you qualify for the QMB program, the State will pay your Medicare hospital deductible (\$716), your Medicare Part B Medical Insurance premium of \$46.10 per month as well as your \$100 annual Part B deductible. Depending on which doctor you see, the State may also pay your 20 percent coinsurance for Medicare covered services.

WHO QUALIFIES?

To qualify for assistance under the QMB program, you must meet the following requirements:

1. Your assets, such as bank accounts, stocks and bonds, savings bonds, and other types of savings cannot exceed \$4,000 for an individual or \$6,000 for a couple.
2. In most States, your income cannot be more than \$643 per month for an individual or \$856 per month for a couple. In Alaska, the monthly income limit is \$798 for an individual and \$1,065 for a couple. In Hawaii the income limit is \$738 per month for an individual and \$983 for a couple. Income includes such things as Social Security retirement benefits, veterans benefits, pensions, wages, interest, and dividends.

If your monthly income is over \$643 but not more than \$767, you may be eligible for a related program which pays for your Medicare part B premium only.

WHAT TO DO IF YOU THINK YOU QUALIFY?

If you think you qualify, you may file an application for Medicaid at your State, county or local medical assistance office. Check your phone directory for the office nearest you. You can find these offices listed under Medicaid, Social Services, Medical Assistance, Public Assistance, Human Services or Community Services.

Sincerely,

Sally K. Richardson
Director
Medicaid Bureau