January 13, 1993

MEDI-CAL ELIGIBILITY MANUAL LETTER NO. 108

TO: Holders of the Medi-Cal Eligibility Manual

Enclosed are revisions to the procedures portion of the Medi-Cal Eligibility Manual. Specifically, Article 5F - The Asset Waiver Provision of the 200 Percent Program is being revised. These procedures supersede All County Welfare Directors Letters 91-96 and 92-02, and Electronic Mail Message No. 91188.

Procedure Revision

<table>
<thead>
<tr>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Article - 5F</td>
</tr>
<tr>
<td>200 Percent Asset Waiver Provision Procedures - draft procedures finalized. ACWD Letters 91-96, 92-02 and Electronic Mail Message No. 91188 may now be discarded.</td>
</tr>
</tbody>
</table>

Filing Instructions

Remove Pages

Procedural Table of Contents

PTC-1 - PTC-2

Article 5 Table of Contents

5F-1 - 5F-5

Insert Pages

Procedural Table of Contents

PTC-1 - PTC-2

Article 5 Table of Contents

If you have any questions on these revisions, please contact Lisa Reagan of my staff at (916) 657-3719, (916) 657-3719, CALNET 437-3719.

Sincerely,

Original signed by

Frank S. Martucci, Chief

Medi-Cal Eligibility Branch

Enclosure
CHAPTER 1 -- INTRODUCTION

i -- MEDI-CAL

ii -- DEPARTMENT OF HEALTH SERVICES RESPONSIBILITY

iii -- COUNTY CODES

iv -- MEANING OF TITLES UNDER THE SOCIAL SECURITY ACT

CHAPTER 2 -- PROCEDURES

Article 1 -- DEFINITIONS, ABBREVIATIONS, AND PROGRAM TERMS

1A -- COMMON-LAW MARRIAGE

1B -- PERSONS LIVING IN THE HOME

Article 2 -- ADMINISTRATION

2A -- MEDI-CAL QUALITY CONTROL (QC) PROCESS DESCRIPTION

2B -- FEDERALLY ELIGIBLE MEDI-CAL-ONLY CATEGORIES SUBJECT TO ELIGIBILITY QUALITY CONTROL REVIEW

2C -- MEDI-CAL ELIGIBILITY QUALITY CONTROL (QC) REPORT OF ERRORS

2D -- REQUIRED STATISTICAL REPORTING - MC 237

2E -- ETHNIC ORIGIN/PRIMARY LANGUAGE DATA COLLECTION

2F -- REFUGEE AND ENTRANT IDENTIFICATION AND REPORTING REQUIREMENTS

2G -- CASE RECORD RETENTION

2H -- CONFIDENTIALITY OF MEDI-CAL CASE RECORDS

Article 3 -- COUNTY OF RESPONSIBILITY

3A -- SUMMARY: COUNTY OF RESPONSIBILITY

Article 4 -- APPLICATION PROCESS

4A -- COUNTY PROCEDURES -- DISABILITY DETERMINATION REFERRALS

4B -- COUNTY PROCEDURES -- DED REFERRALS FOR DISABILITY FORMER SSI/SSP RECIPIENTS

4C -- COUNTY PROCEDURES -- PRESUMPTIVE DISABILITY
MEDI-CAL ELIGIBILITY MANUAL - PROCEDURES SECTION

4D -- GUIDELINES FOR DISABILITY INTERVIEWS AND ELIGIBILITY WORKER OBSERVATIONS

4E -- DISABILITY EVALUATION DIVISION PROCEDURES FOR TITLE XIX DISABILITY DETERMINATIONS

4F -- COUNTY PROCEDURES FOR DISABILITY REEXAMINATIONS, REEVALUATIONS, AND REDETERMINATIONS

4G -- DISABILITY VERIFICATION THROUGH THE RAILROAD RETIREMENT BOARD

4H -- PROCESSING OF STATUS REPORTS

4I -- DILIGENT SEARCH PROCEDURES

4J -- PROMPTNESS REQUIREMENT

4K -- PROCESSING OF MEDICALLY INDIGENT ADULTS (MIAs) APPLICANTS

4L -- RSDI/UI/DI REPORTS

4M -- VERIFICATION OF UNCONDITIONALLY AVAILABLE INCOME

4N -- TIMELY REPORTING BY PUBLIC GUARDIANS/CONSERVATORS OR BENEFICIARY REPRESENTATIVES

4O -- ONE MONTH EXTENDED ELIGIBILITY (EDWARDS V. MYERS)

4P -- CHILD HEALTH AND DISABILITY PREVENTION (CHDP) PROGRAM

4Q -- PROCEDURES FOR LONG-TERM CARE (LTC) ADMISSIONS AND DISCHARGES FOR SSI/SSP AND MEDI-CAL RECIPIENTS

4R -- PROCEDURES FOR MEDICAL SUPPORT ENFORCEMENT PROGRAM

Article 5 -- MEDI-CAL PROGRAMS

5A -- AID CODES

5B -- FOUR MONTH AND NINE MONTH CONTINUING ELIGIBILITY

5C -- DEPRIVATION -- LINKAGE TO AID TO FAMILIES WITH DEPENDENT CHILDREN (AFDC)

5D -- MEDI-CAL ELIGIBILITY FOR NONFEDERAL AFDC CASH ASSISTANCE RECIPIENTS

5E -- RAMOS V. MYERS PROCEDURES

5F -- 200 PERCENT ASSET WAIVER PROVISION PROCEDURES

5G -- 60-DAY POSTPARTUM PROGRAM PROCEDURES

5H -- CONTINUED ELIGIBILITY PROGRAM PROCEDURES

5I -- QUALIFIED DISABLED WORKING INDIVIDUAL
5E -- RAMOS v. MYERS PROCEDURES

I. Background

II. SSI/SSP Discontinuance Process

III. County Welfare Department Responsibilities

IV. Issuance of Medi-Cal ID Cards/Numbers

V. State Hearing Process

5F -- 200 PERCENT ASSET WAIVER PROVISION PROCEDURES

A. Background

B. Affected Groups

C. Aid Codes

D. Changes in Income

E. Changes in Property

F. Status Reports

G. Case Counts

H. Examples
5F — ASSET WAIVER PROVISION OF THE 200 PERCENT PROGRAM

A. BACKGROUND

During the 1991 legislative session, the California State Legislature passed AB 99 which, among other things, enacted an asset waiver provision specifically for Medi-Cal eligible pregnant women and infants up to one year of age with incomes above 185 percent but not in excess of 200 percent of the Federal Poverty Level (FPL). This means that pregnant women and infants under one year of age whose family income would qualify them for services under the 200 Percent Program, but currently are ineligible due to excess property, will now have their excess assets disregarded in order to qualify for the 200 Percent Program. Those pregnant women and infants with family income at or below 185 percent FPL or above 200 percent FPL do not qualify for this special provision. Implementation of this provision began January 1, 1992.

B. AFFECTED GROUPS

Pregnant women and infants whose family income makes them eligible for the 200 Percent Program, but whose family assets exceed the Medi-Cal Program limit, are eligible for the Asset Waiver Provision of the 200 Percent Program.

Pregnant Women

In determining the eligibility of a pregnant woman, if her income is above 185 percent and does not exceed 200 percent of the FPL, and she is otherwise eligible, but her assets are over the Medi-Cal property limit, she is eligible under the Asset Waiver Provision of the 200 Percent Program. In this event, the pregnant woman applicant (or the person applying on her behalf) should be advised that, although her assets exceed the regular Medi-Cal program limit, she is still eligible for Medi-Cal for her pregnancy-related services under the Asset Waiver Provision of the 200 Percent Program. However, if the pregnant woman also wants full-scope benefits for herself and/or the rest of her family, she must reduce her family assets to the property limit in order to establish regular Medi-Cal eligibility.

In order to identify those women eligible for this special provision of the 200 Percent Program, the county must still gather the customary information on property through the MC 210 (Statement of Facts form) and appropriate documentation, as in determining eligibility for regular Medi-Cal. Once it is determined that the pregnant woman qualifies for the 200 Percent Program, but her property is over the Medi-Cal limit, she will be advised that she is ineligible for full-scope benefits; however, she is eligible for pregnancy-related services under the Asset Waiver Provision of the 200 Percent Program.

Infants under One Year of Age

In the case of an infant under one year of age with family income above 185 percent but not in excess of 200 percent FPL, if the family assets are over the Medi-Cal program limit, the infant is eligible for the Asset Waiver Provision and will receive full-scope benefits until his/her first birthday. NOTE: If the infant is undocumented, he/she will receive only emergency services during that period.

We have included some examples in Section H of these procedures to demonstrate specific case situations related to the Asset Waiver Provision of the 200 Percent Program.

C. AID CODES

There will be no new aid codes specifically for persons eligible for the Asset Waiver Provision of the 200 Percent Program. Since this provision allows counties to waive assets for pregnant women and infants whose income qualifies them for the 200 Percent Program, this category of eligibles will be assigned the appropriate 200 Percent Program aid code.
D. CHANGES IN INCOME

Increases in Income

Since Continued Eligibility (CE) disregards increases in income for certified eligible pregnant women through the end of the 60-day postpartum period, and for infants who are deemed eligible for up to one year of age, income increases will have no effect on their eligibility for the Asset Waiver provision. Therefore, income increases or other changes which affect treatment of family income are disregarded for these individuals and they remain on the 200 Percent Program until eligibility ends due to the end of pregnancy (including postpartum period) or reaching one year of age.

Decreases in Income

The CE procedures provided instructions to counties on how to treat decreases in income under CE. Those Instructions indicate that pregnant women and/or infants who experience a decrease in income while receiving 200 Percent Program benefits shall be placed in the 185 Percent Program. Under the Asset Waiver Provision of the 200 Percent Program, however, counties must not place these beneficiaries in the 185 Percent Program, as their excess property would make them ineligible in that income category. Instead, Asset Waiver beneficiaries who experience a decrease in income (or any other change in circumstances), which would normally cause their income to drop to 185 percent FPL or lower, shall be maintained in the 200 Percent Program, at the same level of services, through their respective periods of eligibility.

Only if the Asset Waiver beneficiary can spend his/her property down to within program limits should counties place him/her in the 185 Percent Program after a decrease in income. If property is liquidated and income is below 186 percent FPL, the Asset Waiver Provision does not apply anymore.

For example, a pregnant woman applying for Medi-Cal has family income at 196 percent FPL and has excess property. She elects to receive only pregnancy-related services under the 200 Percent Program, so she is determined eligible for the 200 Percent Program at no SOC for her pregnancy-related services and ineligible for full-scope services due to excess property (she has chosen not to spend down her excess property). Subsequently during her pregnancy, she experiences a decrease in income to 180% FPL. However, because she experienced this income decrease while eligible under the Asset Waiver Provision of the 200 Percent Program her eligibility is continued under the 200 Percent Program through the postpartum period. Should she choose to spend down her assets to within the Medi-Cal program limit concurrent with or subsequent to the income decrease, she would then be placed in the 185 Percent Program as described in the Decision Chart found in the CE procedures.

E. CHANGES IN PROPERTY

The Asset Waiver Provision of the 200 Percent Program also provides protection for pregnant women and/or infants up to one year of age who become property ineligible while receiving benefits under the 200 Percent Program. In such instances, all family members, except for infants under one year of age, must be discontinued from full-scope benefits (or from restricted benefits if an OBRA-eligible pregnant woman). The case file should be annotated to indicate that the pregnant woman and/or infant continues to be eligible under the Asset Waiver Provision of the 200 Percent Program. Two NOAs are required. One for discontinuance of the family and a second one discontinuing and approving the pregnant woman.

F. STATUS REPORTS

Current procedures exempt Medi-Cal Family Budget Units (MFBUs) consisting solely of a pregnant woman and/or an infant under one year of age from submitting a quarterly status report. Those persons determined eligible for Medi-Cal under the Asset Waiver Provision of the 200 Percent Program are treated in the same manner and need not submit a quarterly status report. However, they are still required to report changes within ten days.
G. CASE COUNTS

Cases involving the Asset Waiver Provision are to be reported to the Department as part of your 200 Percent Program caseload activity. Please follow current instructions on reporting 200 Percent Program caseload activity.

H. EXAMPLES

Example One: A pregnant woman applicant has family income at 195% FPL and a savings account valued at $8,000 for her unborn’s future education. The father of the unborn is deceased and there are no other children. The EW notifies the pregnant woman that she has excess property and must spend down to the Medi-Cal limits if she wants to be eligible for full-scope benefits. She is also told she is eligible for pregnancy-related services through her postpartum period under the Asset Waiver Provision of the 200 Percent Program. She chooses to receive only pregnancy-related services in order to avoid spending down her savings account. Therefore, she is granted eligibility for the 200 Percent Program through the end of the 60-day postpartum period. At birth, the infant is eligible for full-scope benefits under the 200 Percent Program through his/her first year of life.

Example Two: A married pregnant mother and her 8-month-old son are receiving benefits as 200 Percent Program eligibles. Her husband is ineligible for benefits. Mom inherits real property worth $50,000 and reports it under her continuing responsibility to report changes within ten days. Under the Asset Waiver Provision of the 200 Percent Program, she remains eligible for pregnancy-only benefits with the same aid code, but is discontinued (with timely notice) from her full-scope eligibility. She continues to receive her zero SOC pregnancy-only card until the end of her postpartum period, at which time she will be discontinued from her 200 Percent Program eligibility. Counties should send a NOA using the special language created for the Asset Waiver Provision of the 200 Percent Program (See Section J) to notify her of the discontinuance, and should ensure that she is again informed that her eligibility may be reinstated (as AFDC/MN) if she spends down her excess property and some other basis for her eligibility exists (e.g., deprivation). As in the previous example, the newborn infant is eligible for full-scope benefits through his/her first year of life.

With regard to the 8-month-old son, he continues to receive full-scope benefits under the 200 Percent Program until the end of the month in which he reaches his first birthday. At that time, use the special Asset Waiver NOA discontinuance language and inform of spenddown.

I. NOTICES OF ACTION (NOA)

We have developed specific NOA language for the Asset Waiver Provision of the 200 Percent Program. Please use this approval and discontinuance language in developing the necessary NOAs for this group of eligibles. An approval NOA using this suggested language should be sent to the pregnant woman applicant in conjunction with a NOA denying full-scope benefits due to excess property (or a NOA denying restricted benefits if the pregnant woman has only requested this level of services).
Your application for Medi-Cal benefits was denied/terminated because your family's property is over the Medi-Cal limit. However, you have been approved for benefits under the special Asset Waiver Provision of the 200 Percent Program because:

1. You are pregnant or you are an infant under age one, and;
2. Your family's income is 186% to 200% of the federal poverty level.

- If you are a pregnant woman, you will receive a no share of cost Medi-Cal card restricted to coverage of pregnancy-related and postpartum care.
- If you are an infant under age one, you will receive a no share of cost Medi-Cal card for full coverage under Medi-Cal unless benefits restricted to emergency medical care were requested. If restricted benefits were requested, you will receive those benefits instead.

An emergency medical condition is a condition manifesting itself by acute symptoms of sufficient severity, including severe pain, which in the absence of immediate medical attention could reasonably be expected to result in any of the following: (1) Placing the patient's health in serious jeopardy; (2) Serious impairment to bodily functions; (3) Serious dysfunction to any bodily organ or part. The emergency must be certified by a physician or other appropriate medical provider (in accordance with Section 51056, Title 22, California Code of Regulations). The Department of Health Services may review the provider's decision that an emergency existed and that certain follow-up treatment services were medically justified.

You are eligible for 200 Percent Program Medi-Cal beginning: ___/____.

When you receive your Medi-Cal card, please present it to your medical provider when you are requesting medical services.

The regulations that require this action are Sections 50262 and 50401, Title 22, California Code of Regulations.

Please notify your Eligibility Worker immediately if you are not interested in receiving 200 Percent Program Medi-Cal benefits.

/___/___

(Eligibility Worker) (Phone) (Date)
MEDI-CAL ELIGIBILITY MANUAL - PROCEDURES SECTION

MEDI-CAL NOTICE OF ACTION
DISCONTINUANCE OF BENEFITS
ASSET WAIVER PROVISION
OF THE 200 PERCENT PROGRAM

[ ] Denial/Discontinuance For: ____________________

Case No. ____________________

[ ] Your eligibility to receive 200 Percent Program Medi-Cal benefits will be discontinued effective the last day of ____________________.

You Are No Longer Eligible For Medi-Cal Benefits Under the 200 Percent Program Because:

[ ] Your family's assets are within the Medi-Cal limits and you have been determined eligible to regular Medi-Cal benefits. You will receive a separate notice that will tell you about your eligibility for Medi-Cal.

[ ] Your family income is now more than 200 Percent of the Federal Poverty Level.

[ ] You have not provided the information listed below. That information was needed to determine if you continue to be eligible for Medi-Cal benefits under the Asset Waiver Provision of the 200 Percent Program.

[ ] To be eligible for pregnancy-related or postpartum services under the Asset Waiver Provision of the 200 Percent Program, you must be pregnant or in the postpartum period. You are no longer pregnant or in the postpartum period.

[ ] To be eligible for Medi-Cal benefits under the Asset Waiver Provision of the 200 Percent Program, you must be under age one. You have now reached age one.

The regulations that require this action are Sections 50262 and 50401, Title 22, California Code of Regulations.

Please call me if you have any questions about this action.

(Eligibility Worker) ____________________ (Phone) ____________________ (Date) ____________________
