

State of California—Health and Human Services Agency  
**Department of Health Services**



California  
Department of  
Health Services

**SANDRA SHEWRY**  
Director



**ARNOLD SCHWARZENEGGER**  
Governor

September 1, 2004

**MEDI-CAL ELIGIBILITY PROCEDURES MANUAL LETTER NO.: 293**

**TO: ALL HOLDERS OF THE MEDI-CAL ELIGIBILITY PROCEDURES MANUAL**

**SUBJECT: ARTICLE 22C-7 COMMUNICATING WITH STATE PROGRAMS  
DISABILITY AND ADULT PROGRAMS DIVISION AND DEPARTMENT  
OF HEALTH SERVICES ABOUT CHANGES AND STATUS**

Enclosed is an update to Article 22C-7 regarding a staff change in Los Angeles Disability Adult Programs Division.

**Filing Instructions:**

**Remove Pages**

**Insert Pages**

**Article 22**

**Article 22**

**Pages 22C7.1 through 22C-7.2**

**Pages 22C-7.1 through 22C-7.2**

All questions pertaining to the disability reexamination process should be directed to Mr. Terry Durham at (916) 552-9483.

Original signed by

**Richard Brantingham**  
Acting Chief  
Medi-Cal Eligibility Branch



---

## MEDI-CAL ELIGIBILITY PROCEDURES MANUAL

---

### 22C-7 – COMMUNICATING WITH STATE PROGRAMS – DISABILITY AND ADULT PROGRAM DIVISION (SP-DAPD FORMERLY SP-DED) AND DHS ABOUT CHANGES AND STATUS

#### 1. NOTIFYING SP-DAPD ABOUT CHANGES

##### A. MC 222 LA/MC 222 OAK – DAPD PENDING INFORMATION UPDATE FORM

When a disability evaluation is pending, CWD will notify SP-DAPA about changes in client's situation, which affect eligibility or which would enable SP-DAPA to contact client. MC 222 LA/Oak is used to submit changes and to report information to SP-DAPA

CWDs who send packets to Los Angeles SP-DAPA will use MC 222 LA. Other CWDs who send packets to Oakland SP-DAPA will use MC 222 Oak.

##### B. TYPE OF CHANGES TO REPORT TO SP-DAPD

1. Change in client's address.
2. Changes in client's name, telephone or message number.
3. Denial or discontinuance of client on basis of nonmedical information (e.g., excess property).
4. Withdrawal of application.
5. Cancellation of Authorization for Release of Information (MC 220) by client.
6. Death of client.
7. Receipt of new medical evidence (attach new medical evidence to MC 222).
8. Availability of interpreter (Provide name and phone number).
9. Change in EW.
10. Any other pertinent information, which affects SP-DAPD's actions on a pending case.

##### C. SP-DAPD ADDRESSES

Disability packets from Imperial, Los Angeles, Orange, Kern and San Diego Counties must be sent to:

California Department of Social Services  
Disability and Adult Programs Division  
**Los Angeles State Programs Branch**  
P.O. Box 30541, Terminal Annex  
Los Angeles, CA 90030  
**(213) 480-6400/ 8-677-6400 CALNET**  
**FAX: (800) 869-0188**

Disability packets from all other Counties must be sent to:

California Department of Social Services  
Disability and Adult Programs Division  
**Oakland State Programs Branch**  
P.O. Box 23645  
Oakland, CA 94623-0645  
**(510) 622-3756/ 8-561-3756 CALNET**  
**FAX: (800) 869-0203**

---

## MEDI-CAL ELIGIBILITY PROCEDURES MANUAL

---

D. MC 4033 – DISABILITY LISTING UPDATE FORM

CWDs will use MC 4033 to notify the state of any changes to 1) Medi-Cal Liaison List for Disability Issues, or 2) Medi-Cal Liaison List for Quarterly Status Listings for Pending and Closed Disability cases. Check appropriate list and specify items being updated.

These lists are updated on a regular basis and contain names and phone numbers of CWD liaisons, which DHS-MEB and SP-DAPD may need to communicate with CWDS.

2. RECEIVING AND REQUESTING CASE STATUS INFORMATION FROM SP-DAPD

A. QUARTERLY COMPUTER STATUS LIST

CWDs will receive a quarterly computer status list from SP-DAPD regarding pending and closed disability cases, along with instructions on its use. If a particular case was forwarded to SP-DAPD prior to most recent quarterly list and does not appear on list, CWD may contact SP-DAPD Program Support unit by telephone or in writing to obtain status information, as follows:

Los Angeles State Programs Branch

Myra Ancla  
Operations Support Analyst  
CDSS-DAPD-LASPB  
P.O. Box 30541, Terminal Annex  
Los Angeles, CA 90030  
(213) 480-6453

Oakland State Programs Branch

Lis Okamura  
Operations Support Analyst  
CDSS-DAPD-OSPB  
P.O. Box 23645  
Oakland, CA 94623-0645  
(510) 622-3787/ 8-561-7387 CALNET

B. USE OF DISANBILITY LISTING UPDATE FORM (MC 4033)

A combined list of Medi-Cal liaisons, district office codes, addresses and telephone numbers will be used to distribute the quarterly status reports. Form MC 4033 (Disability Listings Update) should be used and sent to the department of Health Services (DHS) to provide updated information to the list. DHS's address is listed on the form.

C. QUESTIONS AND INQUIRIES ON SPECIFIC CASES

In urgent or unusual circumstances, questions and inquiries about specific cases may be directed to the Disability Evaluation analyst (DEA) assigned to the case, or the Unit Manager. To determine which DEA or Unit is assigned to case, provide client's name and Social Security number to Masterfiles, at the following numbers:

Los Angeles State Programs Branch

Masterfiles:  
(213) 480-6400  
8-677-6400 CALNET

Oakland State Programs Branch

Masterfiles:  
(510) 622-3756  
8-5613756 CALNET