TO:       All County Welfare Directors
          All County Administrative Officers

SUBJECT:  TREATMENT OF DISABLED ADULT CHILDREN WHO
          HAVE BEEN DISCONTINUED FROM SSI/SSP

Effective November 1986 the Employment Opportunities for Disabled
Americans Act (Public Law 99-643) amended the Social Security Act
to provide categorical (zero share of cost) Medi-Cal to a limited
group of persons who are over 18 years of age and who have had
their SSI/SSP discontinued for specified reasons. Beginning July
1987 the Social Security Administration (SSA) will identify such
potentially eligible persons through a change in the SDX records.
A new Medicaid eligibility code (field 50) of "D" will indicate that
the person is a Social Security disabled adult child (DAC)
who has lost SSI/SSP eligibility due to either: entitlement to
receive Title II DAC benefits or an increase in Title II DAC
benefits. Medi-Cal eligibility for individuals affected by this
change must be determined in a manner similar to Pickle eligibles.

To be eligible, the DAC people must be over 18 years of age and
have previously received SSI/SSP on the basis of blindness or a
disability which began before the person reached age 22. He/she
must also: 1) currently receive Retirement, Survivors and Disa-
bility Income (RSDI) benefits as a result of this blindness or
disability and 2) have been discontinued from SSI/SSP as a
result of either having begun receiving RSDI or receiving an
increase in the amount of his/her RSDI benefits. Anyone not
meeting these requirements is not eligible as a DAC person and
must then have his/her Medi-Cal application processed in accord-
dance with Title 22, Section 50153.

The Department of Health Services (DHS) will provide these indi-
viduals with one month of extended (zero SOC) Medi-Cal
eligibility to allow them adequate time to complete the applica-
tion process at the county welfare department (CWD). At the time
that DHS is notified of the SSI/SSP discontinuance, the affected
population will be sent a Notice of Action (copy attached), a CA
1, MC 210, MC 210B, and a MC 239C. Individuals sent a Notice of
Action and application forms will have their aid code changed to
66 during the extended eligibility period and aid paid pending
(with zero SOC) will be granted if a request for a state hearing
is received timely. This procedure is designed after the Ramos
process.
County Responsibilities

DHS will send each CWD a listing containing the names, addresses and the amount of the current RSDI check for each DAC individual. When the CWD receives the listing, the CWD must contact each person to determine if assistance is needed in completing the application process. At the time either the forms are returned or the DAC person comes into the CWD a Pickle eligibility determination must be completed.

People who are discontinued from SSI/SSP due to admission to a long term care facility should not be included in the extended eligibility process. If the CWD finds that someone on the DHS listing has entered LTC, a regular Medi-Cal determination must be completed in accordance with Title 22, CAC, Section 50153. These people are sent a Ramos notice and the CWD receives a separate monthly listing of the names and addresses of the persons entering LTC.

When completing the Pickle financial eligibility computation the amount of RSDI benefits considered must never be greater than the amount the person was receiving at the time of his/her SSI/SSP discontinuance. This amount must be verified by using the amount provided on the DHS list, by an award letter, verification from SSA or viewing the check or direct deposit statement. If the person was discontinued from SSI/SSP prior to January 1987, a disregard computation is necessary in order to determine the amount of RSDI received at the time of the SSI/SSP discontinuance. This amount is to be used when determining all present and future Pickle eligibility.

For anyone discontinued after January 1987 a Disregard Computation Worksheet (DHS 7029) is unnecessary since the actual RSDI amount at the time of the SSI/SSP discontinuance should be the current amount reported on the DHS list. When completing the Financial Eligibility Worksheet use the verified amount of RSDI benefits for these people.

A Pickle Screening Worksheet (DHS 7020) is not required for DACs. Instead, the CWD must confirm that each person meets the eligibility criteria outlined in 1 and 2 above. If those criteria are met and the person meets all other Pickle income and resource eligibility requirements he/she is to be issued a zero share of cost Medi-Cal card (aid code 26, if person is blind; aid code 66 if disabled).

The first listing will be provided to CWDs no later than September 30, 1987. Since there are so few of these individuals each CWD may not receive a monthly listing. Any CWD wishing to
All County Welfare Directors  
All County Administrative Officers  
Page 3  

designate a specific person to receive this original listing and all subsequent monthly listings must notify Kristi Allen (916) 324-4961, ATSS 454-4961 prior to August 17, 1987. Counties failing to designate a contact person by that date will have the listings sent to the County Medi-Cal Policy Liaison.

Any questions regarding this letter should be directed to Kristi Allen at the above number.

Sincerely,

Original signed by

Frank S. Martucci, Chief  
Medi-Cal Eligibility Branch

cc: Medi-Cal Liaisons  
Medi-Cal Program Consultants

Expiration Date: December 31, 1987
Social Security Administration (SSA) has notified us that you are no longer eligible to receive a Supplemental Security Income/State Supplementary Payment (SSI/SSP). Because SSA informed us that you are not receiving an SSI/SSP check, you will not receive an SSI/SSP Medi-Cal card after ________________.

Regulations which require this action are California Administrative Code, title 22, Sections 50127 and 50703.

You have contacted SSA and have been told that you will once again receive SSI/SSP check, please disregard this notice. SSA will notify the Department of Health Services to resume issuance of your Medi-Cal card. This reinstatement process normally takes 4 to 6 weeks. If you have a medical emergency and need your Medi-Cal card before the reinstatement process has been completed, fact your local SSA office and they will issue you an eligibility referral which you can take to the local county welfare department and obtain any Medi-Cal cards to which you are entitled.

Though you will not receive an SSI/SSP Medi-Cal card after ________________, you have been granted one month of extended Medi-Cal eligibility. You will receive an extended eligibility Medi-Cal card only for the month of ________________.

You want to continue your Medi-Cal coverage after that, you must take the following actions: Complete the enclosed application, and mail them no later than ________________ to:

You complete and return these forms by ________________, the county will review your application and determine your continuing Medi-Cal eligibility immediately. Later, the county will set up an appointment for you to complete additional forms and for your required interview with your county eligibility worker.

If you do not follow these instructions, your Extended Medi-Cal Eligibility will end ________________. If you want Medi-Cal again, you will have to go to the county welfare department.

This letter is to show the county welfare department. It will help them to update your Medi-Cal status.

You must read the enclosed request for data release.