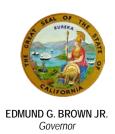


State of California—Health and Human Services Agency Department of Health Care Services



January 12, 2018

Medi-Cal Eligibility Division Information Letter No.: I 18-02

TO: ALL COUNTY WELFARE DIRECTORS

ALL COUNTY ADMINISTRATIVE OFFICERS

ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS

ALL COUNTY HEALTH EXECUTIVES

ALL COUNTY MENTAL HEALTH DIRECTORS

SUBJECT: Lynch v. Rank- Pickle

(Reference: Pickle Handbook, Section 4, Pages 4-1 through 4-13)

The purpose of this Medi-Cal Eligibility Division Information Letter is to inform you that the Department of Health Care Services will mail the Pickle Tickler Notices of Action (NOAs) on January 12, 2018, to individuals who:

- Currently receive Title II Retirement, Survivor's, and Disability Insurance Social Security benefits;
- Have been discontinued from Supplemental Security Income/State Supplementary Payment program since December 2015 (for any reason); or
- Were determined ineligible during the Pickle screening process.

A copy of the NOA (Notice Type 52) is enclosed.

Counties should have received their individual Pickle Tickler report the last week of December 2017. Each potentially eligible Pickle individual must receive a Pickle Medi-Cal notice for three consecutive years. Therefore, the December 2017 Tickler report will now only list potential individuals eligible for Pickle for years 2015, 2016, and 2017. Individuals listed during previous years will be dropped from the report. Henceforth, one year of ineligibles will be purged each year.

In addition, the lawsuit requires that each of the individuals on the Pickle Tickler listing, who has an active Medi-Cal case or who brings the NOA into the county welfare department to apply under the Pickle amendment, shall have an eligibility determination completed in accordance with Welfare and Institutions Code, Section 14005.37. The eligibility determination shall take place by Friday, March 30, 2018.

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Please refer to Section 4, pages 4-1 through 4-13 of your Pickle Handbook for specific instructions on county responsibilities for completing Pickle determinations.

If you have any questions on this letter, please contact Eric Sweeney at (916) 327-0412 or by email at Eric.Sweeney@dhcs.ca.gov.

Original Signed By Linda Nguyen for

Karen Chang, Branch Chief Policy Development Branch Medi-Cal Eligibility Division Medi-Cal Eligibility Division Information Letter No.: I 18-02 Page 2 January 12, 2018

State of California - Health and Human Services Department of Health Care Services Medical Assistance

NOTI CE TYPE 52 NOTI CE PREPARATI ON DATE: DECEMBER 27, 2017

MEDI - CAL NOTI CE

Lynch v. Rank Tickler Notice

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1234 ANYPLACE BLVD ANYTOWN CA 99999

TO: Medi-Cal Beneficiaries Discontinued from SSI/SSP

RE: CONTINUED MEDI-CAL BENEFITS

We have been told that you received Supplemental Security Income and/or State Supplemental Program (SSI/SSP) benefits some time after April 1977. We have also been told that your benefits have $\underline{\text{stopped}}$. If we are wrong and you have never received SSI/SSP, or you are now getting SSI/SSP benefits, please ignore this notice.

The purpose of this notice is to let you know that under a federal law called the Pickle amendment, Medi-Cal eligibility continues without a share of cost for certain individuals whose SSI/SSP benefits were stopped.

What does this mean to you? Because you once received SSI/SSP and are still on our list, you may be evaluated for Medi-Cal under the Pickle legislation. If eligible, you will receive Medi-Cal with no share of cost.

<u>How do you apply?</u> Call your local county welfare office <u>within 30 days if you want your Medi-Cal eligibility determined under the Pickle Amendment</u>. They will send you an application and/or make an appointment for you. Be sure to save this notice.

What if you already get Medi-Cal but have to pay a share of cost? Call your worker at your local welfare office and ask that your case be evaluated for "Pickle" eligibility.

What if you already get Medi-Cal and have no share of cost? Just ignore this notice unless you start to receive a share of cost.

What if you are now getting SSI/SSP benefits? You should ignore this notice. Persons who receive SSI/SSP automatically receive Medi-Cal at no share of cost.

If you have any questions about your Medi-Cal benefits as a Pickle eligible, you should contact the county welfare department for the county in which you live. To help you, we have listed below the address and telephone number of the county welfare department in your area.

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Note: If you have already been in contact with the county welfare department regarding your Pickle status, please follow their instructions and ignore this notice.

CONTACT: Alameda County

Social Service Agency

6955 Foothill Blvd., Ste. 300

0akl and, CA 94605

Attn: County S. Working

510-577-1890