

**DEPARTMENT OF HEALTH SERVICES**

714/744 P Street  
P.O. Box 942732  
Sacramento, CA 94234-7320  
(916) 657-2941



September 6, 2000

MEDI-CAL ELIGIBILITY PROCEDURES MANUAL LETTER NO.: 226

TO: All Holders of the Medi-Cal Eligibility Procedures Manual

ARTICLE 5, TABLE OF CONTENTS, PAGES TC-7 THROUGH TC-10

Enclosed is an updated Article 5, Table of Contents of the Medi-Cal Eligibility Procedures Manual. Pages TC-7 through TC-9 are to be replaced with pages TC-7 through TC-10 to provide the correct index sequence for Article 5.

**Filing Instructions:**

**Remove Pages:**

Article 5 Table of Contents  
Pages TC-7 through TC-9

**Insert Pages:**

Article 5 Table of Contents  
Pages TC-7 through TC-10

Please direct any questions regarding the above information to Vicki Partington of my staff at (916) 654-5909.

Sincerely,

Original signed by

Affgeline Mrva, Chief  
Medi-Cal Eligibility Branch

Enclosure



1

2

3

4

5

---

## MEDI-CAL ELIGIBILITY PROCEDURES MANUAL

---

- C. Period of Eligibility
- D. Eligibility Determination
- E. Medi-Cal Family Budget Unit
- F. Retroactive Repayment of Share of Cost '52
- G. MEDS Alerts
- H. Questions and Answers
- I. Notices
- J. Worksheet

5L -- QUALIFIED MEDICARE BENEFICIARY (QMB) PROGRAM

- A. Background
- B. QMB Eligibility Criteria
- C. Medicare Information
- D. Dually Eligible QMBs and QMB-Onlys
- E. Benefits
- F. Verification
- G. Enrollment
- H. QMB Processing
- I. QMB Property Determination
- J. QMB Income Determination
- K. Questions and Answers

5M -- PRESUMPTIVE ELIGIBILITY (PE) PROGRAM

- A. Background
- B. Criteria for Determining PE
- C. Qualified Providers
- D. PE Application Process; Qualified Provider Responsibilities
- E. Minor Consent Eligibles

---

## MEDI-CAL ELIGIBILITY PROCEDURES MANUAL

---

- F. Department Responsibilities
- G. County Responsibilities
- H. PE Termination
- I. Aid Codes
- J. MEDS Interface
- K. Medi-Cal Determination Process for PE Participants
- L. MEDS Alerts
- M. Language for PE Notices

5N -- TUBERCULOSIS (TB) PROGRAM

- A. BACKGROUND
- B. OVERVIEW OF PROCESS
- C. AID CODE
- D. OVERVIEW OF ELIGIBILITY REQUIREMENTS
- E. DETAILS OF ELIGIBILITY REQUIREMENTS
- F. SCOPE OF BENEFITS-LIMITED TO TB-RELATED SERVICES
- G. MEDI-CAL PROVIDER RESPONSIBILITIES
- H. COUNTY RESPONSIBILITIES
- I. NOTICE OF ACTION (NOA)
- J. RETROACTIVE BENEFITS
- K. PLASTIC BENEFITS IDENTIFICATION CARD (BIC)
- L. EXAMPLES-TREATMENT OF INCOME AND PROPERTY
- M. MEDI-CAL TUBERCULOSIS (TB) PROGRAM QUESTIONS AND ANSWERS
- N. FORMS
  - I. MC 274 TB      MEDI-CAL TUBERCULOSIS PROGRAM APPLICATION
  - II. MC 275 TB      DENIAL NOTICE OF ACTION (English and Spanish)
  - III. MC 276 TB      DISCONTINUANCE OF NOTICE OF ACTION (English and Spanish)

---

## MEDI-CAL ELIGIBILITY PROCEDURES MANUAL

---

- IV. MC 277 TB APPROVAL OF BENEFITS NOTICE OF ACTION  
(English and Spanish)
- V. MC 278 TB TUBERCULOSIS (TB) PROGRAM PROPERTY  
WORKSHEET-ADULT
- VI. MC 279 TB TUBERCULOSIS (TB) PROPERTY  
WORKSHEET-CHILD
- VII. MC 280 TB TUBERCULOSIS (TB) PROGRAM ELIGIBLES -  
(FINANCIAL ELIGIBILITY WORKSHEET-  
ELIGIBLE CHILD WITH INELIGIBLE PARENT  
OR PARENTS)
- VIII. MC 282 TB TUBERCULOSIS (TB) PROGRAM INCOME  
ELIGIBILITY WORKSHEET

50 -- NOT IN USE PRESENTLY.

5P -- DRUG ADDICTION AND ALCOHOLISM (DA&A) PROGRAM

I. BACKGROUND

II. SUSPENDED DA&A Persons

A. Identification of Suspended DA&A Persons

B. Notices for and Listings of Suspended DA&A Individuals

C. County Responsibilities

D. Determination of Eligibility

E. Aid Codes for Eligible Individuals

F. Examples

G. Changes Reported By the Beneficiary

H. Pickle Persons

III. PERSON TERMINATED FROM SSI AFTER 12 MONTHS OF  
SUSPENSION

IV. PERSONS TERMINATED AFTER 36 MONTHS OF SSI PAYMENTS FOR  
DA&A

V. CASE COUNT

---

## MEDI-CAL ELIGIBILITY PROCEDURES MANUAL

---

VI. STATE ADMINISTRATIVE HEARING

VII. FORMS

5Q -- (TO BE RELEASED)

5R -- (PENDING)

5S -- SECTION 1931 (b) PROGRAM

A. BACKGROUND

B. PURPOSE

C. IMPLEMENTATION DATES

D. ELIGIBILITY REQUIREMENTS

E. AID CODES

F. SNEEDE V. KIZER

G. TRANSITIONAL MEDI-CAL

H. FOUR-MONTH CONTINUING

I. NOTICES OF ACTION

J. DETERMINING CARE AND CONTROL

K. FLOW CHART ON PROGRAM DETERMINATIONS