



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



ARNOLD SCHWARZENEGGER  
Governor

October 16, 2007

TO: ALL COUNTY WELFARE DIRECTORS LETTER NO: 07-11  
ALL COUNTY ADMINISTRATIVE OFFICERS  
ALL COUNTY MEDI-CAL PROGRAM/SPECIALISTS/LIAISONS  
ALL COUNTY HEALTH EXECUTIVES  
ALL COUNTY MENTAL HEALTH DIRECTORS

SUBJECT: CONTINUOUS ELIGIBILITY FOR CHILDREN DISCONTINUED FROM  
THE SUPPLEMENTAL SECURITY INCOME/STATE SUPPLEMENTARY  
PAYMENT PROGRAM  
(Reference: All County Welfare Directors Letter Numbers: 01-01,01-40,  
02-14, 02-20, 03-49, 03-52)

Continuous Eligibility for Children (CEC) provides no Share-of-Cost (SOC) Medi-Cal benefits to certain children up to the age of 19. The above referenced All County Welfare Directors Letters (ACWDLs) provide directions to counties on the implementation of CEC, but several counties have asked for clarification concerning CEC for children discontinued from the Supplemental Security Income/State Supplementary Payment Program (SSI/SSP).

**Summary:**

CEC applies to children discontinued from SSI/SSP who are within a continuous 12-month period beginning with the date of the last SSI/SSP determination that established SSI/SSP eligibility.

**Background:**

Senate Bill (SB) 87: The SB 87 process provides that no individual can be discontinued

from Medi-Cal without a redetermination (RV) of eligibility for all Medi-Cal programs. The SB 87 requirements are met if the county finds a child eligible for CEC.

The *Craig v. Bonta* lawsuit provides that the SB 87 process applies to those discontinued from SSI/SSP. These former SSI beneficiaries are to continue on no-cost Medi-Cal until the county conducts an SB 87 RV, such as finding the child eligible for CEC. This information was previously provided in ACWDL 02-14 dated March 8, 2002, question and answer 48 and ACWDL 01-01 dated January 8, 2001, at the bottom of page 2.

### CEC

The CEC period begins with the first month of an initial eligibility determination (including each of the three retroactive months as appropriate) or the first month impacted by an annual RV, for a child under age 19. The CEC period ends with the annual RV, except for infants who, if otherwise eligible for CEC, are covered until age one. Under federal law, the CEC period is limited to 12 months.

The CEC guaranteed period begins with the first month within the CEC period in which a child under age 19 is determined eligible for no cost Medi-Cal and ends with the annual RV or for an infant, at age one.

For purposes of CEC, a determination of eligibility for SSI is a determination of eligibility for no-cost Medi-Cal. Assuming that there is no issue about whereabouts unknown or an out-of-state move, such a child is placed in CEC when the child is not yet due for an annual RV but would otherwise be determined ineligible or have a SOC due to a change in circumstances prior to his/her annual RV. There are no financial requirements for coverage under CEC.

When there is a change in circumstances before the next annual RV is due, the county evaluates the impact such changes have on an infant's or child's eligibility.

In situations where CEC is not appropriate (e.g., the beneficiary is an adult, is a child age 19 or over, or a child who already has a SOC), the county may request additional information that is necessary to determine ongoing eligibility.

In situations with children under age 19 who may potentially be eligible for CEC, the county either

- Uses the information it already has to make the determination (e.g., the county can perform an ex parte determination that results in the child being determined ineligible
- For any other Medi-Cal program, staying in the same program or moving to a no-cost, zero SOC, or SOC program) or
- If no such information is available, the county places the child in CEC. The county may not request additional information solely to determine the child's eligibility.

For example, assume two children are in the 100 Percent Federal Poverty Level (FPL) program and their parents are not eligible for Medi-Cal. Assume one child leaves the home and the remaining child is now income ineligible since the family size decreased. The county has no property information to determine whether the remaining child could be Medically Indigent. The county should not inquire about property and would report the child in a CEC aid code.

### **County Actions:**

#### **Child Discontinued from SSI:**

Because of CEC, the regular SB 87 process for discontinued SSI individuals must be modified when the discontinued individual is under age 19. The regular SB 87 process provides that when any individual is discontinued from SSI, no-cost Medi-Cal continues until the county redetermines eligibility. If the county does not have sufficient information available to make such a determination for an adult or child over age 19, the county contacts the individual to request such information.

When the discontinued SSI individual is a child under age 19 and the county does not have sufficient information to make a RV for any Medi-Cal program, the county must first determine whether such child is or is not eligible for CEC based on the date the child was last determined eligible for SSI. Note: this determination must be made before the county can contact the child/family for more information.

Determining whether a discontinued SSI child is still eligible for CEC

There generally is one year or longer between SSI RVs. In order to determine whether the CEC period has expired, the county must first determine the last date on which the child was found SSI eligible (i.e. the last SSI RV date prior to the date of the RV that resulted in a finding of ineligibility for SSI). If SSI reports this date, it is on the Medi-Cal Eligibility Data System (MEDS) INQM screen in the REDET-DT field. If there is no RV date on the INQM screen, there likely will be a date on the Title XVI Income and Eligibility Verification System (IEVS) page under "Date of Last Redetermination." We have enclosed two pages from the Medi-Cal Eligibility Procedures Manual. Page 21C-37 contains a sample Title XVI IEVS screen with a field identified as "Date of Last Redetermination" and page 21C-38 contains an explanation under item 27 of this field. See Enclosure 1.

MEDS has an SSI RV date

Unless the county has information to the contrary, the county should assume the reported SSI RV date is accurate. If it is within 12 months of the month the county is conducting the SB 87 RV, the child is still eligible for CEC in that SB 87 RV month and the county cannot contact the child for additional information.

If the SSI RV date occurred 12 months prior to the month in which the county is conducting the SB 87 RV, the CEC period has concluded.

Neither MEDS nor the Title XVI IEVS screen has an SSI RV date

If MEDS does not have a date in the SSI RV field, the county must contact SSA to ask when the last RV was. Note their response in the case file. If SSA does not respond within 30 days, assume the SSI discontinuance date is the date of the SSI annual RV and, therefore, assume that the CEC period ends.

County actions if a discontinued SSI child is eligible for CEC

If this child lived with a parent(s) when on SSI, neither the child's income nor resources are known because the child's income on the INQX SSI/SSP MEDS screen also includes deemed income from parents that differs from the way Medi-Cal treats income

from parents. This means that no determination for any Medi-Cal-only program can be made due to lack of necessary information. Therefore, if the CEC period is still in effect, the county should report the child as CEC eligible. That determination would conclude the SB 87 process.

If the child did not live with his/her parents when on SSI, the county should use the income as shown on MEDS as the child's income. This means that there is enough information to determine whether the child is eligible for an FPL program since that program requires an income test but no property test. If the child is eligible for an FPL program, the county would report such eligibility instead of CEC eligibility.

If the child did not live with his/her parents when on SSI and the child is not eligible for the FPL program, there is not enough information on MEDS to determine the amount of a child's property and the county cannot determine his/her eligibility for any other Medi-Cal program without additional information. If the CEC period is still in effect, the county cannot request this or any other information and the county would report the child as CEC eligible. That determination concludes the SB 87 process.

When adding a discontinued SSI individual to an existing Medi-Cal Family Budget Unit (MFBU), the county should realign the SSI individual's annual RV date as established under SB 87 to the same annual RV date as the other family members in the MFBU. If, however, the individual is a child under age 19 and still covered by CEC, the following procedures must apply:

1. If during the annual RV of the child/family, no SOC Medi-Cal is determined, a new CEC period begins on that date.
2. If the annual RV finds the former SSI child ineligible, or eligible with a SOC, the county should allow the child to remain in a CEC aid code until the end of the original CEC period before discontinuing eligibility or imposing the SOC.

#### County actions if a discontinued SSI child is not eligible for CEC

The county should proceed with the usual SB 87 RV, including a request for any necessary information that is not already available. If the child is determined eligible for a no SOC Medi-Cal program, the county will issue its usual approval Notice of Action (NOA).

If the child is found ineligible or found eligible with a SOC, the NOA given to the family must include the date the county used to determine that the child's SSI/Medi-Cal-based

CEC period ended. This date is either on the MEDS record or it is the date of the SSI discontinuance as explained above. This statement should be as follows:

Your child \_\_\_\_\_ (child's name) has recently been discontinued from SSI and we have information provided by SSI to determine that his/her last SSI redetermination was on \_\_\_\_\_. If this information is incorrect, please tell that to the eligibility worker listed.

If the family can provide information to establish that the child had an SSI RV resulting in eligibility within 12 months of the county's SB 87 RV, the county must reevaluate whether the child was eligible for CEC and take appropriate action.

### **Questions and Answers**

The following answers are in response to various questions raised by counties.

1. Can CEC be established for a child discontinued from SSI without an SB 87 ex parte review required?

Response:

No. A determination of CEC eligibility is an ex parte determination and it meets the SB 87 requirement.

2. If the answer to number one is, "no," what do we do if the worker is unable to obtain income/property information on the parents?

Response:

If the child is within the SSI/Medi-Cal-based CEC period, the worker may not request income or property information from the parents. If the child is not within a CEC period, then the county should attempt to redetermine eligibility based on information already available. If the county needs more income or property information, they should follow the SB 87 steps, including the phone call and the written contact. If the information is not provided, the county should discontinue eligibility as provided under the SB 87 process.

3. Do counties override the system and place the child in a Property Waiver (i.e., FPL ) program if eligible rather than in CEC?

Response:

Yes. This is illustrated in the section above entitled County actions if a discontinued SSI child is eligible for CEC. For example, paragraph two states, "If the child did not live with his/her parents when on SSI, the county should use the income as shown on MEDS as the child's income. This means that there is enough information to determine whether the child is eligible for an FPL program since that program requires an income test but no property test. If the child is eligible for an FPL program, the county would report such eligibility instead of CEC eligibility."

4. How will counties identify these cases?

Response:

They will be included on the regular Exception Eligibles Report with the other *Craig* eligibles. When counties begin to review these cases, they will use the procedures in this letter for those individuals under age 19.

5. How do I determine whether this discontinued SSI child lived with a parent(s) when on SSI?

Response:

To determine whether the discontinued SSI child lived with a parent(s) when on SSI, check the INQX Screen on MEDS for the SSI child. See Enclosure 2 for a copy of a screen print. Check the SSI-LVG-ARR-CD. The descriptions for Federal Living Arrangement Codes are as follows:

Code	Value
A	Own household
B	Another's household
C	Parent's household (for child cases only)
D	Title XIX institution
E	No Federal Living Arrangement applicable in December 1973, or, if applicable, mandatory supplementation is not payable Individual is in a non-Title XIX institution, living arrangement change in progress, or outside the U.S.

If you have any questions or need additional information, please contact either Ms. Sherilyn Walden by e-mail at [Sherilyn.Walden@dhcs.ca.gov](mailto:Sherilyn.Walden@dhcs.ca.gov) or by phone at (916) 552-9502 or Ms. Sharyl Shanen-Raya by e-mail at [Sharyl.Shanen-Raya@dhcs.ca.gov](mailto:Sharyl.Shanen-Raya@dhcs.ca.gov) or by phone at (916) 552-9449.

**Original signed by**

Vivian Auble, Chief  
Medi-Cal Eligibility Division

## MEDI-CAL ELIGIBILITY PROCEDURES MANUAL

NAME: EXPERANZA TUITT		DATE-OF-DEATH:		
TRANSPOSED SSN:		PAYMENT STATUS CODE: N01-NONPAY AS OF 05/97		
DATE OF ELIGIBILITY: 09/88		DATE OF LAST REDETERMINATION: 10/29/96		
APPLICATION DATE: 09/07/88		NET CURRENT BENEFIT FOR 06/01/97 - FED AMT \$ 0.00 STATE AMT \$ 0.00		
HISTORY:	DATE	FEDERAL	STATE	TYPE OF PAYMENT
	08/01/96	\$ 0.00	\$ 0.00	NONE MADE
	07/01/96	\$ 0.00	\$ 33.34	REGULAR MONTHLY
	06/15/96	\$ 0.00	\$ 38.34	SUPPLEMENTAL
NUMBER OF MULTIPLE SSNS:		TYPE OF BENEFIT: AGED INDIVIDUAL		
DENIAL DATE:		OTHER SSNS:		
APPEAL CODE:		APPEAL DATE:		

  

MEDICARE DATA (PART A AND B):	START	STOP	PREMIUM	BUY-IN	START	STOP
HOSPITAL INSURANCE (A):		09/87		N		
SUPPLEMENTAL INSURANCE (B):		09/87	\$ 41.10	Y	09/88	
CROSS REFERENCE CLAIM NUMBERS:						

1. Name	Name of beneficiary receiving Title II benefits. Not the name if a payee.
2. Transposed SSN	SSN validated by SSA if different from the input SSN.
3. Claim Number	The SSN claim account number followed by 1 to 3 digit claim suffix called a Beneficiary Identification Code- BIC, on which the applicant has Title II entitlement.
4. Current Entitlement	Net amount of the monthly cash benefits after premium deductions or overpayment adjustment. Amount may be shown even if not payable. See payment status code.
5. Payment Status	Indicates the current payment status for this beneficiary. Possible codes are: adjustment; no action being taken on this claim; receiving monthly benefits shown; deferred, -receiving workers comp; pay thru RR board; future pay, - thru RR board; claim denied; claim disallowed; pending; record being corrected; suspended - no child in home, - alien, - refused SSA payments, - receiving workers comp; terminated - death of claimant, - age of child, - no longer disabled; nonpay.
6. Special Pay Date	Date associated with the special monthly payment or prior due amount if no special monthly payment is present.
7. Black Lung Status	Black lung payment status will be N = nonpayment E = entitled P = pending Black Lung Entitlement T = terminated D = deceased
8. Date of Initial Entitlement	Date the beneficiary was entitled to initial benefits.
9. History Date and Gross Amount	Entries will be shown for one year prior to the date of the request with a maximum of 8 entries. New history will display first. The Date will be the effective date of the change regardless of when the change was made. The gross amount will be the amount of the benefit rounded before any Medicare premium deductions.
10. Termination Date	Month and year the beneficiary's benefits were terminated.
11. Date of Death	Month, day and year of the beneficiary's death if appropriate or known. Payment status should be T1. If not T1, disregard date of death.
12. Dual Entitlement Number	Will display another SSN if the beneficiary is entitled to benefits on that SSN.
13. Prior Due Amount	Payment for one or more retroactive months. Can be issued on same date as Special Monthly Payment or in preceding month.



