



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



ARNOLD SCHWARZENEGGER
Governor

April 30, 2008

TO: ALL COUNTY WELFARE DIRECTORS Letter No.: 08-19
ALL COUNTY WELFARE ADMINISTRATIVE OFFICERS
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS
ALL COUNTY HEALTH EXECUTIVES
ALL COUNTY MENTAL HEALTH DIRECTORS
ALL COUNTY MEDS LIAISONS

SUBJECT: EIGHTEEN NEW ALPHA-NUMERIC AID CODES TO SEPERATE THREE
PREVIOUSLY COMBINED AID CODES

The purpose of this letter is to inform counties of the creation of 18 "new" alpha-numeric aid codes to better define three "existing" program aid codes which currently contain beneficiaries with varying Medi-Cal program eligibility. These three currently combined aid codes are 55, 58, and 5F. Medi-Cal program aid codes are tied to an eligibility group and/or indicate whether the person has a share of cost (SOC). Medi-Cal program aid codes 55, 58, and 5F are limited scope and are used when a beneficiary does not have satisfactory immigration status or after the reasonable opportunity period if a United States citizen is not able to verify citizenship/identity status as required by the Deficit Reduction Act (DRA) of 2005. The projected implementation date for these aid codes is the July 2008 month of eligibility.

BACKGROUND

The Omnibus Budget Reconciliation Act of 1986 made it necessary to identify and track certain groups of aliens for the purpose of reporting this information to the Medi-Cal Eligibility Data System. Aid code 55, 58, and 5F were created as a result of this legislation.

Effective January 1, 1988, aid code 58 was established to identify individuals that were receiving restricted-scope Medi-Cal. This aid code entitles beneficiaries that are eligible to receive emergency and/or pregnancy-related medical benefits only.

Effective October 1, 1991, aid code 55 was established for undocumented aliens in long term care (LTC) who have been determined ineligible for the special permanently residing under color of law (PRUCOL) status by the United States Department of Homeland Security (formally known as The Immigration and Naturalization Service). These aliens are to remain in aid code 55 even if they leave LTC. This aid code entitles beneficiaries to receive all LTC services and emergency and pregnancy-related medical benefits only.

Effective October 1, 1994, aid code 5F was established for undocumented pregnant women who are otherwise eligible for aid code 58. This aid code was introduced as a means to separately identify this group of individuals. This aid code entitles beneficiaries to receive emergency and/or pregnancy-related medical benefits only.

These aid codes are comprised of beneficiaries without satisfactory immigration status whose eligibility has been determined based on the program requirements for the following Medi-Cal programs:

- Aid to Families with Dependant Children-Medically Needy (MN).
- Medically Indigent (MI) Children
- MI Pregnant Women.
- Aged, Blind, or Disabled (ABD)-MN.
- ABD-MN receiving LTC services.

Additionally, these aid codes have combined SOC and no SOC beneficiaries.

POLICY

When aid codes 55, 58, and 5F were implemented they had specific descriptions that identified the type of benefits the beneficiary was eligible to, and in the past there has been no need to identify exact program eligibility or differentiate between SOC/no SOC cases. County Consortia systems are currently unable to report Medi-Cal program aid codes along with limited-scope aid codes so these new aid codes were developed to differentiate between Medi-Cal programs and SOC/no SOC. Aid code changes are needed to better define eligibility factors and benefit costs. The best way to meet this demand is to create alpha-numeric aid codes to separate the different programs that exist within aid codes 55, 58, and 5F.

IMPLEMENTATION

The Department has established 18 new aid codes to identify and further define program eligibility and SOC/no SOC status for limited scope beneficiaries. These new alpha-numeric codes will continue to accommodate undocumented individuals as well as unverified citizens due to DRA regulations.

Enclosed is a chart specifying:

- Current full-scope Medi-Cal program aid codes.
- Current limited-scope aid codes used for these beneficiaries.
- The new alpha-numeric counterpart aid code.
- Whether the new aid code can identify beneficiaries with or without a SOC.

Also enclosed are examples of how the new aid codes are to be used.

When the counties are systematically capable of utilizing the alpha-numeric aid codes, they can place individuals who have not yet met the DRA citizenship requirements within these codes.

Since aid codes 55, 58, and 5F no longer meet the needs of the Department, they eventually will no longer be in use. Currently there is no target date to terminate the usage of these aid codes. A separate letter will be released once this date has been determined.

If you have any questions, you can contact Ms. Rose Pankratz at (916) 552-9462.

Original Signed By:

Vivian Auble, Chief
Medi-Cal Eligibility Division

Enclosures

AID CODES EXAMPLES

Example 1:

An individual presents himself at the county office and completes an application for Medi-Cal. He is over 65 years of age and is therefore linked to Medi-Cal as aged. He cannot provide proof of citizenship but denies being undocumented. His reasonable period has ended because the individual states he cannot afford to continue the quest for documentation. His net non-exempt income disqualifies him from the Aged and Disabled Federal Poverty Level program, but he is otherwise eligible. The county worker then gives this individual limited-scope Medi-Cal with a SOC.

Before implementation of these new aid codes, this individual will be in aid code 58. The new aid code is C2, Aged Individual with a SOC, and benefits are limited to emergency and prenatal care.

Example 2:

An individual presents herself at the county office and completes an application for Medi-Cal. She is undocumented and her only linkage to the Medi-Cal program is pregnancy. The family has little income or resources; their net nonexempt income is below the applicable limit for the family size.

Before implementation of these new aid codes, this individual will be in aid code 5F. The new aid code is D8, Medically Indigent (MI) without a SOC, and benefits are limited to emergency and prenatal care.

AID CODES

Aid codes **58**, **55**, and **5F** consist of individuals in one or a combination of the following criteria with one thing in common, they are **UNDOCS**:

- [Medically Needy](#)
- [Medically Indigent](#)
- [Restricted](#) or [Limited](#)
 - [with](#) (SOC) or
 - [without a share of cost](#)
- [Long-term care](#)
- [Pregnant](#)

In order to clearly define each individual's criterion for belonging in a particular grouping, new alpha-numeric aid codes are being created.

Aid codes to be defined within aid code 58, 55, and 5F:

*NEW LIMITED-SCOPE AID CODE	FULL-SCOPE MEDI-CAL PROGRAM AID CODE	EXISTING LIMITED-SCOPE AID CODE	SOC	NO-SOC	Long-Term Care (LTC), Pregnancy (P), Child (C), Medically Needy (MN), or Medically Indigent (MI)
C1	14	58		X	AGED-MN
C2	17	58	X		AGED-MN
C3	24	58		X	BLIND-MN
C4	27	58	X		BLIND-MN
C5	34	58		X	AFDC-MN
C6	37	58	X		AFDC-MN
C7	64	58		X	DISABLED-MN
C8	67	58	X		DISABLED-MN
C9	82	58		X	MI-C
D1	83	58	X		MI-C
D2	13	55		X	AGED-LTC
D3	13	55	X		AGED-LTC
D4	23	55		X	BLIND-LTC
D5	23	55	X		BLIND-LTC
D6	63	55		X	DISABLED-LTC
D7	63	55	X		DISABLED-LTC
D8	86	5F		X	MI-P
D9	87	5F	X		MI-P

*Replaces existing Limited-Scope aid codes (third column).