

DEPARTMENT OF HEALTH SERVICES

714/744 P STREET
SACRAMENTO, CA 95814

May 12, 1988

TO: All County Welfare Directors
All County Administrative Officers

Letter No.: 88-33

SUBJECT: EXTENDED FILING DATE UNDER OBRA 87 PROVISIONS WHICH
RESTORE AND CONTINUE MEDI-CAL ELIGIBILITY FOR CERTAIN
DISABLED WIDOW(ER)S

REFER TO: All County Welfare Directors (ACWD) Letters No. 86-54
and 87-5

The above referenced ACWD Letters described the procedures counties were to follow to preserve Medi-Cal status under the COBRA 1985 provisions for certain disabled widow(er)s who lost SSI benefits because of 1983 changes which increased their Title II widow(er)s benefits. Notices were mailed by DHS to individuals identified by SSA's computer tape as potential eligibles under the COBRA 85 provision. The notices advised them to contact their local county welfare office no later than June 30, 1987.

The purpose of this letter is to inform counties that Section 9108 of OBRA 1987, amended Section 1634b3 of the Social Security Act to extend the deadline for disabled widow(er)s to apply for Medicaid protection under the 1985 amendments to July 1, 1988. Therefore, individuals who were previously identified by SSA and did not contact the appropriate county welfare department for possible eligibility by the previous deadline of July 1, 1987 will be mailed another notice. This notice (copy attached) will inform these individuals of the extended deadline under OBRA 87 and advise them to contact their local county welfare department. Please note that any undeliverable mail will be returned to DHS who, in turn, will notify the appropriate county.

The following counties have been identified from the SSA tape as having residents who failed to respond to the previous notice which indicated a deadline of July 1, 1987 to apply for zero share of cost Medi-Cal benefits:

| <u>County</u> | <u>No. of Individuals</u> |
|---------------|---------------------------|
| Alameda | 1 |
| Contra Costa | 1 |
| Los Angeles | 5 |

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| <u>County</u> | <u>No. of Individuals</u> |
|---------------|---------------------------|
| Orange | 2 |
| Plumas | 1 |
| Riverside | 2 |
| San Diego | 1 |
| San Joaquin | 1 |
| Santa Clara | 1 |
| Solano | 1 |
| Stanislaus | 1 |
| Ventura | 1 |

Please refer to attachment 2 to identify in your particular county those individual(s) and their appropriate disregard amount(s) who have been notified (by DHS) that the deadline to apply under the OBRA 85 provision has been extended to June 30, 1988. Counties who do not have potential eligibles will not receive a copy of attachment 2.

Counties are to follow procedures contained in ACWD Letter No. 87-5 to determine eligibility. Please note that an Errata Notice was mailed to all counties correcting an error on page 2, fifth paragraph, which instructed counties to use the MC 210 in lieu of the "Pickle" application (DHS 7038). Also, counties need to be aware that these individuals are only entitled to three months retroactive benefits from the date they apply for OBRA 87 benefits.

Thank you for your cooperation in complying with the new OBRA 87 provision. Any questions should be directed to RaNae M. Dunne at (916) 324-4955/ATSS 454-4955.

Sincerely,

Original signed by

Frank S. Martucci, Chief
Medi-Cal Eligibility Branch

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Attachments

cc: Medi-Cal Liaisons
Medi-Cal Consultants

Expiration Date: May 1, 1989

Ud. necesita un interprete, favor de comunicarse con su trabajador del condado.

Attachment 1
NOTICE PREPARATION DATE:

Beneficiary ID Number:

NOTICE OF POSSIBLE MEDI-CAL ELIGIBILITY
WITHOUT SHARE OF COST

Last Month SSI/SSP Received:

Our records indicate that you were notified in October 1986 that you were potentially eligible for Medi-Cal under the 1985 Consolidated Omnibus Budget Reconciliation Act (COBRA) as it related to your Social Security benefits. The notice gave you specific instructions on how to apply for zero share of cost Medi-Cal benefits under the COBRA provision. The COBRA provision established a deadline of June 30, 1987 to apply for zero SOC Medi-Cal benefits. The purpose of this notice is to inform you that the prior deadline of June 30, 1987 has been extended to June 30, 1988. If you are now receiving Medi-Cal without a share of cost, you do not have to do anything about this notice. However, if you are not now receiving Medi-Cal or if you are required to pay a share of cost before you receive your Medi-Cal card, this notice is important. PLEASE READ IT CAREFULLY!

If you are one of the persons covered by the COBRA Act, you will be eligible for Medi-Cal without a share of cost. To be eligible, all of the following conditions must apply to you:

- You were under age 60 when you first began receiving Social Security benefits; and
- You are now receiving Social Security benefits and have been continuously since December 1983; and
- You received Social Security Disabled Widows or Widowers benefits in January 1984; and
- At any time you received both SSI/SSP and Social Security benefits in the same month; and
- You no longer receive SSI/SSP as a result of the 1983 increases in your widows or widowers benefits.

To find out if you are entitled to receive Medi-Cal without a share of cost, contact your local county welfare department at the following address:

If you are eligible for Medi-Cal under the COBRA Act, you may receive up to three months retroactive Medi-Cal (effective three months from the date you apply).

Applications for Medi-Cal without a share of cost under COBRA filed after June 30, 1988 will not be eligible for consideration under the COBRA Act. It would be to your advantage to apply at the county welfare department as soon as possible in order to obtain maximum benefits.

If you need assistance, or have questions, you should check your Social Security records, call your local Social Security Office, or contact the Department of Health Services, Medi-Cal Eligibility Branch, attention RaNae M. Dunne at (916) 324-4955.