

DEPARTMENT OF HEALTH SERVICES

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SACRAMENTO, CA 95814

(916) 445-1912



September 21, 1988

TO: All County Welfare Directors
All County Administrative Officers

Letter No.: 88-74

SUBJECT: IMPLEMENTATION OF COBRA PROVISIONS WHICH RESTORE AND CONTINUE
MEDI-CAL ELIGIBILITY FOR CERTAIN DISABLED WIDOW(ER)S

REFER TO: All County Welfare Directors Letter (ACWDL) No. 88-40

The above referenced ACWDL provided background and discussed interim procedures counties should follow regarding preservation of Medi-Cal status for certain disabled widow(er)s under the Omnibus Budget Reconciliation Act of 1987 (OBRA '87). Section 9116 of OBRA '87 creates a new group of Medicaid eligibles. Title II widow(er)s aged 60 through 64 who became ineligible for SSI or SSP payments because of entitlement to or an increase in Title II widow(er)s benefits are affected. Effective July 1, 1988, states were mandated to continue to consider these individuals to be SSI recipients for Medicaid purposes until their Part A Medicare (hospital insurance) entitlement begins. The Department of Health Services (DHS) advised counties in ACWDL 88-40 to determine any potential eligible under existing eligibility provisions, flag cases and await further instructions. The number of individuals affected by this provision was originally estimated to be 100,000 nationally. However, we have been informed only 6,800 individuals were identified nationally.

DHS recently received the SSA computer tape which identifies 446 potential eligibles statewide in California. The tape contains names, addresses, social security numbers and social security claim data (current Title II amount). Please note that since the computer listing is not in any kind of county order and does not provide zip codes so that we can sort these individuals out by county, we will not be forwarding it to counties. Also, DHS received operational instructions from HCFA on how to determine eligibility for this group as follows:

Individuals are deemed to be SSI recipients for purposes of Medicaid if the following conditions are met:

- o Have attained age 60;
- o are eligible for and receiving early widow(er)s benefits under Section 202(e) or 202(f), or under any other provisions of Section 202 if they are also eligible under Subsection (e) or (f) of the Act;
- o are not entitled to Medicare Part A (hospital insurance); and
- o are ineligible for SSI or SSP benefits under Section 1616(a) of the Act because of receipt of Title II benefits under Section 202 of the Act.

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These individuals are deemed to be SSI recipients for Medicaid purposes as long as they would continue to be eligible for SSI or SSP in the absence of the widow(er)s benefits described above.

Individuals who apply under OBRA '87 widow(er)s provisions must have evidence of their current Title II benefit amount. Therefore, counties will need to either verify the individuals Title II benefit amount through a SSA award or through the local SSA office letter provided by the individual in order to determine the amount to be disregarded. (Verification should be requested through the SSA 1610 or TPQY process). The inquiry must indicate the individual is applying for Medi-Cal as an OBRA '87 widow(er). Local SSA field offices have been informed of these new provisions and are required to provide the necessary benefit amount information.

Most eligibility determinations under this provision will consist of individuals who currently receive Title II benefits for any reason other than disability (which includes most awards under Section 202). In these cases the entire Title II amount and the widow(er)s benefit is to be disregarded. In cases where an individual currently receives Title II as a disabled person, only the widow(er)s portion of the benefit award is disregarded. All SSA disability benefit awards fall under section 223 and, therefore, do not apply. We have been informed that all individuals will receive two award letters which will distinguish between the Title II benefit amount and the widow(er)s benefit amount. (The SSA computer tape does not distinguish the two.) Individuals determined eligible under these provisions should be assigned Aid Code 36.

If you have any question, please contact RaNae M. Dunne at (916) 324-4955/ATSS 454-4955.

Sincerely,

Original signed by

A. Mrva, for
Frank S. Martucci, Chief
Medi-Cal Eligibility Branch

cc: Medi-Cal Liaisons
Medi-Cal Consultants

Expiration Date: August 1, 1989