

DEPARTMENT OF HEALTH SERVICES

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March 14, 2001

Medi-Cal Eligibility Branch Information Letter No.: I 01-03

TO: All County Welfare Directors
All County Administrative Officers
All County Medi-Cal Program Specialists/Liaisons
All County Health Executives
All County Mental Health Directors
All County MEDS Liaisons

REVISION TO SOCIAL SECURITY ADMINISTRATION'S (SSA) APPEAL CODES

Ref.: All County Welfare Directors Letter (ACWDL) No. 97-28

This letter is informational and counties do not need to take any new action due to the information given below.

The SSA has recently informed the Department of Health Services (Department) that they have made revisions to the SSA appeal codes. This means that the information regarding SSA appeals transmitted to the Medi-Cal Eligibility Data System (MEDS) via the State Data Exchange (SDX) has been revised. SSA transmitted the revised appeal codes in three stages. SSA began transmitting the revised appeal level codes with the daily SDX updates since October 23, 2000. Effective December 19, 2000, they have added a new position to the SDX to accommodate the new appeal decision codes. Finally, effective February 20, 2001, they will add a new position to the SDX to accommodate the new appeal decision dates.

The SSA appeal information is located on the MEDS INQP screen. The bottom of the INQP screen displays the SSA appeal date, appeal flag, and appeal level. Currently, counties only need to look for a single letter that would inform the county that a former Supplemental Security Income/State Supplementary Payment (SSI/SSP) recipient or applicant has an appeal at a certain level and if that appeal is pending, denied, approved, or dismissed. In the future, in order to decipher the status of an SSA appeal, counties must look at two codes (1) the code for the level of appeal and (2) the code for the decision.



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At this time, the Department's Information Technology Services Division (ITSD) has only been able to accommodate the additional letter "H" meaning that an appeal has been filed at the Office of Hearings and Appeal. The letter "P" will not be used for an appeal designation in the future. The rest of the letters are the same letters that have been programmed in the past, however, unfortunately most of the letters now have a different meaning. For example, the letter "A" used to mean that reconsideration was filed and that it is pending, the revised "A" means Appeals Council review.

The following are revised appeal level codes and what they mean (they are listed in order from lower to higher level of appeals):

R	Reconsideration
H	Hearing
A	Appeals Council Review
C	Court Activity
O	Class Action

The following are the newly created appeal decision codes that inform you of the decision rendered on the appeal:

AD	Dismissed/Abandoned
FA	Favorable/SSA Appealed
FC	Fully/Partially Favorable
FF	Fully Favorable
FN	Favorable/SSA Not Appealed (court case only)
OT	Closed: Other
PF	Partially Favorable
T1	Dismissed: Claimant Deceased
UA	Unfavorable/Appealed By Recipient (court case only)
UF	Unfavorable
UN	Unfavorable/Not Appealed By Recipient (court case only)
WC	Dismissed/Withdrawn (converted records only)
WD	Dismissed: Withdrawn
1D	Dismissed: Cannot Be Appealed
2D	Dismissed: Filed By Improper Requestor
3D	Dismissed: Filed Late Without Good Cause
4D	Dismissed: Withdrawn

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PROBLEMS

Several problems have developed as a result of these revisions to the SSA appeals information.

- Since SSA is not transmitting an update to revise the appeals information on all the SSI/SSP Medi-Cal records at one time (only when a change has been made), MEDS will show some records with the old appeal codes and other records with the new codes. This will cause some confusion when trying to decipher, e.g., whether the "R" means reconsideration has been filed or if a denial decision has been made at the Hearing level.
- ITSD is not able to capture the SSA appeal decision codes at this time. Therefore, the MEDS INQP screen will show that an appeal is at a certain level but will not show the status of the appeal.

ITSD may be able to capture the appeal decision codes by April of 2001. The Medi-Cal Eligibility Branch will issue a follow-up ACWDL when ITSD has completed the programming.

- The Medi-Cal individuals most affected by the revision to the SSA appeal codes are the SSI/SSP no longer disabled recipients. These Medi-Cal beneficiaries are entitled to receive continued Medi-Cal eligibility while an SSI appeal regarding the cessation of disability is pending or during the 65-day period for requesting the next level of appeal.

The SSI/SSP no longer disabled recipient's Medi-Cal eligibility status is now confusing because SSA:

1. is sending appeal information with old codes on some cases and new codes on others;
2. does not transmit appeal information timely; or
3. allows a new claim to be filed when a cessation of disability claim is still pending at the Appeals Council.

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For example, when there are two claims active at SSA on the same person, the new claim's information overlays the previous claim's information on MEDS. In this circumstance, the old appeal information on the cessation of disability will no longer be displayed on MEDS. When this happens, the SSI/SSP no longer disabled recipient is either inadvertently discontinued from Medi-Cal or is not discontinued when he or she should be discontinued.

As you can assess from the above, counties need to be aware of the problems regarding these Medi-Cal beneficiaries. There is no action that counties can take to correct the problems. However, if county staff become aware of any SSI/SSP no longer disabled recipients who are inadvertently terminated from Medi-Cal, please call Ms. Marie Taketa at (916) 657-1250 or Ms. Betty Mosher at (916) 654-0630 so that the Department can take appropriate action on these cases.

If you have any questions regarding the information provided above or the SSA appeal codes, please call Marie Taketa or my staff at (916) 657-1250.

Sincerely,

ORIGINAL SIGNED BY

Glenda Arellano
Acting Chief
Medi-Cal Eligibility Branch