



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



ARNOLD SCHWARZENEGGER
Governor

December 29, 2006

TO: ALL COUNTY WELFARE DIRECTORS Letter No.: 06-41
ALL COUNTY ADMINISTRATIVE OFFICERS
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS
ALL COUNTY HEALTH EXECUTIVES
ALL COUNTY MENTAL HEALTH DIRECTORS
ALL COUNTY PICKLE COORDINATORS

SUBJECT: HIERARCHY OF MEDI-CAL PROGRAMS
(Reference: All County Welfare Directors Letter Nos. 01-18 and 99-02)

This All County Welfare Directors Letter (ACWDL) updates and clarifies the hierarchy of some Medi-Cal programs information contained in ACWDLs 01-18 (The Aged and Disabled Federal Poverty Level Program – Questions and Answers) and 99-02 (More Information on the Implementation of Section 1931(b), flowcharts) when determining an individual's or family's Medi-Cal eligibility. Several counties have asked the California Department of Health Services whether prior ACWDLs that contain such information are still accurate.

First, this ACWDL contains a replacement page that supersedes the original page 3 of ACWDL 01-18 dated March 16, 2001. This replacement page clarifies the order that was stated in question 9 concerning four Medi-Cal programs. These four programs are Pickle, Section 1931(b), Aged and Disabled Federal Poverty Level (A&D FPL) and Medically Needy (MN).

Please be aware that this list was included in ACWDL 01-18 only for the purpose of illustrating where the A&D FPL program is in relationship to the Section 1931(b) and the Medically Needy programs, because ACWDL 01-18 concerned the A&D FPL program. Though unstated in that letter, this order also clarifies that an aged, blind or disabled individual who is eligible for the Pickle or the Section 1931(b) program may not be covered under the A&D FPL program, even if otherwise eligible. However, an individual

may decline Pickle coverage in order to have eligibility determined under Section 1931(b) since both of these programs are considered mandatory categorically needy under federal law and there are no federal restrictions on such eligibility.

As the replacement page illustrates, the correct order in determining Medi-Cal eligibility for these four programs is:

- Pickle
- Section 1931(b)
- A&D FPL/Aged, Blind and Disabled Medically Needy (ABD MN) No Share of Cost
- ABD MN Share of Cost

This replacement page also updates the contact phone number if there are questions about the A&D FPL program that is the subject of this ACWDL and the signature. Please remove page 3 in the original issued ACWDL No. 01-18 and replace it with the attached page.

Secondly, this ACWDL provides a hierarchy of programs based on ACWDL 99-02, dated January 12, 1999, which contains three flow charts illustrating eligibility determinations for non-aged or non-disabled families. This list is as follows:

- Section 1931(b)
- Section 1931(b) Sneed/Gamma
- Transitional Medi-Cal
- Aid to Families with Dependent Children-Medically Needy (AFDC-MN)
- AFDC-MN Sneed/Gamma
- Medically Indigent (MI)
- MI Sneed/Gamma
- FPL for infants, children, and pregnant women.

We hope this information is helpful. If you have any questions about this letter, please feel free to contact Mr. John McDaniel at (916) 552-9481.

Original signed by

Maria Enriquez, Chief
Medi-Cal Eligibility Branch

Enclosure

Attachment

The following page replaces page 3 in ACWDL 01-18.

All County Welfare Directors
All County Administrative Officers
All County Medi-Cal Program Specialists/Liaisons
All County Health Executives
All County Mental Health Directors
Page 3 (replacing original issued March 16, 2001)

9. What order should programs be reviewed?

Process Order

- *Pickle*
- *1931(b)*
- *A&D FPL/Aged, Blind and Disabled Medically Needy (ABD MN) No Share of Cost*
- *ABD MN Share of Cost*

10. Do Qualified Medicare Beneficiaries (QMB) and Specified Low-Income Medicare Beneficiaries (SLMB) affect this program?

The A&D FPL program does not affect QMBs and SLMBs. Please handle QMBs and SLMBs as usual.

If you have other questions, please contact Craig Yagi at (916) 552-9522.

Original signed by

Maria Enriquez, Chief
Medi-Cal Eligibility Branch