DEPARTMENT OF HEALTH SERVICES
714/744 P STREET
  RAMENTO, CA 95814
  (916) 445-1912

May 11, 1981

To: All County Welfare Directors   Letter No. 81-21

SOCIAL SECURITY NUMBER (SSN) VALIDATION PROCESS

This letter is to provide updated information on the SSN sight verification
and validation process as described in the Department of Social Services/
Department of Health Services' Letter No. 81-8 (to all county welfare
directors, dated February 27, 1981). Included are items pertaining to the
current one-time validation project (Phase 1 and Phase 2) as well as infor-
mation concerning an ongoing process that is to be established.

Phase 1

The SSN validation listings supplied to counties from this phase's process-
ing contain Aid to Families with Dependent Children (AFDC) cash and AFDC-MN
(Medically Needy) (3x and 4x aid codes) Medi-Cal beneficiaries whose SSNs
could not be computer-validated by the Social Security Administration (SSA).
The Department experienced a number of computer processing problems with
the original listings production (Phase 1, using December 1980 month of
eligibility (MOE) data) and has produced a new listing (Phase 1, using
March 1981 MOE data). The March listing is being forwarded under separate
cover to all counties, because of the number of counties which have asked
to receive it. However, if your county has begun to process the December
1980 MOE listing, use of the March listing is optional. The following is to
clarify the processing for each Phase 1 listing:

1. Phase 1 -- December 1980 MOE

    a. Ignore all closed/discontinued cases.

    b. Some listings contain other than 3x/4x records. Process only Aid
        Codes 3x and 4x, using procedures in Letter No. 81-8.

    c. The eligibility worker may have changed for some cases since the
        time the worker code on the listing was sent to the Department.

    d. The listings are separated by cash and Medical Assistance Only
        (MAO) aid codes.

2. Phase 1 -- March 1981 MOE

    a. Ignore all persons discontinued as of April 1981. Process other
        persons per Letter No. 81-8.

    b. This listing contains Aid Codes 3x and 4x only. County screen-
        out of other cases is not necessary.

    c. The eligibility worker number reported by counties via Central
        Issuance Division (CID) for March 1981 will be reflected.

    d. The listings are separated by cash and MAO aid codes.

3. Phase 1 -- Either Listing

    All counties should have received a paper listing. Additionally,
    those counties that originally requested computer tapes should have
    also received tapes for this validation process. Except for certain
    counties, the March 1981 listings will be separated by AFDC cash and
    MAO aid codes.

4. Phase 1 -- Either Listing

    If you have evidence that the SSN is a valid number and the sex is
    correct, and the client affirms that the birth date is correct but
    there is a discrepancy in the name, encourage the recipient to change
    his/her name either as known to the county or as known to SSA so that
    they match.

    Example 1: Beneficiary applied for an SSN using the first name as
    "Robert" and the county record lists the first name as "Bob". Both
    records should reflect one name or the other.

    Example 2: The recipient's maiden name is listed on one record and
    the married name is on another. Both records should reflect the
    recipient's current status.

    If the recipient refuses to correct this name discrepancy, indicate
    this in the case file. These cases will appear once again on the next
    unvalidated SSN listings. The Department is developing a procedure
    for the ongoing validation process whereby the county welfare depart-
    ment will be able to notify the State that this type of name difference
    appears to be the only discrepancy.

    Do not discontinue Medi-Cal coverage if the recipient refuses to
    change his/her name on one of the records. However, if the bene-
    ficiary fails without good cause to cooperate in this SSN validation
    process for other reasons (i.e., refusal to correct erroneous birth
    date with SSA), Medi-Cal eligibility shall be discontinued.

Phase 2

The following instructions apply to Phase 2 listings of the SSN validation project:

1. Process the persons on the listing per Letter No. 81-8.

2. Phase 2 lists include Aged, Blind, and Disabled (ABD); MN; and medically indigent (MI) beneficiaries (aid codes other than 3x and 4x. Supplemental Security Income/State Supplementary Payment (SSI/SSP) aid codes are not included).

3. The listings include those individuals eligible in March 1981 only. The problem we encountered in having large numbers of discontinued cases appearing in Phase 1 listings has been corrected.

4. Phase 2 listings indicate eligibility worker numbers as of March MOE.

5. The "name discrepancy" procedure described in 3 in the above Phase 1 section also applies to Phase 2 listings.

General Information

1. Based on discussions with counties, on the objectives of SSN validation and on client population characteristics, the following is suggested for prioritizing the validation workload. Several counties found this to be a successful method:

    a. Review case records of all unvalidated persons to identify those in which incorrect data was forwarded to the State or entered by the State (i.e., incorrect birth date, misspelled name, transposed number, etc.). Correct via the CID or paper county process.

    b. The remaining cases, which require contacting the recipient, should then be processed in the following priority:

        (1) AFDC-Cash Grant

        (2) MI Adults

        (3) ABD-MN

        (4) AFDC-MN

        (5) MI Children

        (6) Long-Term Care

        (7) Other

It will be necessary, in order for a county to receive its full allocation, to validate the SSNs of persons in all categories of eligibles. It is preferable that several categories at once be worked on. However, if some cases cannot be worked by June 30, work should be done generally according to the priorities listed above.

2. As indicated in Title 22, Section 50168 (a) (6) (c), the Department will notify each county when an SSN has been validated whether the recipient was referred to an SSA district office or the county submits corrected information to the Department. This is the only verification of valid SSN a county will need.

3. Funding for the current SSN validation project will terminate as of June 30, 1981. Validation funds not justified by the cost of validation workload by June 30 will revert to the State's General Fund. Funds for the ongoing process for MAO applicants for the 1981-82 Fiscal Year have been requested, and we will notify you under separate cover of your county's allocation for the process when legislative approval is received. The Department of Social Services will inform county welfare departments, under separate cover, of the funding and procedures for ongoing SSN validation of AFDC cash eligibles.

4. County SSN Validation Statistics

    One of the Legislature's conditions in appropriating the funds to complete this one time SSN validation project was that the Department of Health Services and Department of Social Services file a report with the Legislature in November 1981. Therefore, each county must supply the following information to the Department:

    a. The number of persons whose "SSN validation data elements" are corrected at the county level via the case review process (i.e., transposition error correction, misspelled names correction, etc.). Some counties are currently keeping such a tally. (Validation data elements are name, sex, date of birth, and SSN.)

    b. The number of beneficiaries (cash grant and Medi-Cal only) referred to an SSA district office (case review did not validate SSN).

    c. The number of Medi-Cal-only beneficiaries discontinued for failure to cooperate with the validation process.

        Note: If the recipient after discontinuance does cooperate and is subsequently reinstated, subtract this case from your figures. If this occurs after you have sent the information to the Department, please make a record of the number of cases so reinstated each month. At the end of the month, call the number listed below and verbally report these corrections.

d. The number of AFDC cash grant recipients who refused to cooperate
    with the validation process.

    Note: If the beneficiary chooses to cooperate at a later date,
    subtract this case from your figures. See process described in
    c. above.

e. The number of AFDC fraud referrals made as a result of the SSA
    validation project.

f. For those referred to an SSA district office with a form MC 194
    (or equivalent), the number of beneficiaries who were referred
    for the purpose of:

    (1) Applying for an SSN because they had none of their own but
         were using someone else's SSN (e.g., their mother's SSN).

    (2) Giving corrected information to SSA.

    For those counties which have a "referral results feedback
    process" arranged with local SSA district offices, the number of
    persons referred whose validation data elements matched the data
    that SSA has.

    Counties which do have a feedback process and want to ensure that
    they recognize returned MC 194s as relating to the validation
    process, may code the MC 194 at the time it is prepared in the
    upper right-hand corner of the form. Counties may use whatever
    coding they choose to identify these MC 194s.

The above statistical information is to be compiled and delivered by
October 1, 1981 to:

            Department of Health Services
            Att: Michael L. Summers
            714 P Street, Room 1692
            Sacramento, CA 95814

            (916) 445-1797

Ongoing Validation

Once the current SSN validation project is completed and evaluated, the
Department will be issuing separate procedures for an "ongoing" validation
process. The process will incorporate the following:

1. Quarterly or semiannual processing.

2. Listing only currently eligible persons with unvalidated SSNs.

3. Procedures for resolution of unvalidated SSNs, through counties notifying the Department where there is name discrepancy which the client will not correct.

4. Improved automated processing which will reduce the amount of county workload involved.

5. Continued state verification directly to counties, when an SSN has been newly assigned or validated.

If you have any questions regarding these instructions or if you have any comments/suggestions concerning this validation process, contact your Medi-Cal program consultant.

                              Sincerely,

                              Original signed by

                              Madalyn M. Martinez, Chief
                              Medi-Cal Eligibility Branch

cc: Medi-Cal Liaisons
    Medi-Cal Program Consultants

Expiration Date: November 30, 1981