

DEPARTMENT OF HEALTH SERVICES

714/744 P STREET
P.O. BOX 942732
SACRAMENTO, CA 94234-7320



January 7, 1992

TO: All County Welfare Directors
All County Administrative Officers
All County Medi-Cal Program Specialists/Liaisons
All Pickle Coordinators

Letter No.: 91-124

SUBJECT: LYNCH V. RANK (PICKLE) - TICKLER SYSTEM

REFERENCE: PICKLE HANDBOOK, SECTION 4, PAGES 4-1 THROUGH 4-13

The purpose of this All County Welfare Directors Letter is to inform you that the Department of Health Services will mail out Pickle Tickler Notices of Action (NOAs) the first week of January 1992 to individuals who: 1) currently receive Title II (RSDI), Social Security benefits; 2) have been discontinued from the Supplemental Security Income/State Supplementary Program since April 1977 (for any reason); and 3) were determined Pickle ineligible during a previous screening process. A copy of the NOA is enclosed.

Counties should receive their individual Pickle Tickler computer report the first week in January 1992. A sample copy of the Tickler computer listing is enclosed. Additionally, pursuant to the Lynch v. Rank lawsuit, each potentially eligible Pickle individual must receive a Pickle Medi-Cal notice for three consecutive years. Therefore, the January 1992 Tickler report will now only list potential Pickle eligibles for the years of 1989, 1990 and 1991. Individuals listed during previous years will be dropped from the report. Henceforth, one year of ineligibles will be purged each year.

In addition, the lawsuit requires that each of the individuals on the Pickle Tickler listing who has an active Medi-Cal case or who brings the Tickler notice into the County Welfare Department to apply under the Pickle amendment shall have an eligibility determination completed in accordance with Title 22, California Code of Regulations, Section 50189. The eligibility determination shall take place within 30 days of the month preceding or following the Title II, Social Security cost of living adjustment.

Please refer to Section 4, pages 4-1 through 4-13 of your Pickle Handbook for specific instructions on county responsibilities for completing Pickle determinations.

If you have any questions, please contact Sylvia Finberg at (916) 657-0080/CALNET 437-0080.

Sincerely,

ORIGINAL SIGNED BY

Ricardo Bustamante for

Frank S. Martucci, Chief
Medi-Cal Eligibility Branch

Enclosures

ate of California - Health and Welfare Agency
partment of Health Services
dical Assistance

NOTICE TYPE 52
NOTICE PREPARATION DATE:
OCTOBER 2, 1991

MEDI-CAL
NOTICE OF ACTION

Lynch v. Rank Tickler Notice

PT00004

BUSH . GEORGE
GEORGE BUSH

1224 ANY AVENUE
ANYTOWH, CA 99999

D: Medi-Cal Beneficiaries Discontinued
From SSI/SSP

E: CONTINUED MEDI-CAL BENEFITS

e have been told that you received Supplemental Security Income and/or State Supplemental
rogram (SSI/SSP) benefits some time after April 1977. We have also been told that your
enefits have stopped. If we are wrong and you have never received SSI/SSP, or you are
ow getting SSI/SSP benefits, please ignore this notice.

he purpose of this notice is to let you know that under a federal law called the Pickle
mendment, Medi-Cal eligibility continues without a share of cost for certain individuals
hose SSI/SSP benefits were stopped.

What does this mean to you? Because you once received SSI/SSP and are still on our list,
ou may be evaluated for Medi-Cal under the Pickle legislation. If eligible, you will
receive Medi-Cal with no share of cost.

How do you apply? Take this notice with you to your local county welfare office within
90 days if you want your Medi-Cal eligibility determined under the Pickle Amendment.
Show this notice to your worker.

What if you already get Medi-Cal but have to pay a share of cost? Call your worker at
your local welfare office and ask that your case be evaluated for "Pickle" eligibility.

What if you are now getting SSI/SSP benefits? You should ignore this notice. Persons
who receive SSI/SSP automatically receive Medi-Cal at no share of cost.

If you have any questions about your Medi-Cal benefits as a Pickle eligible, you should
contact the county welfare department for the county in which you live. To help you, we
have listed below the address and telephone number of the county welfare department in
your area.

Note: If you have already been in contact with the county welfare department regarding
your Pickle status, please follow their instructions and ignore this notice.

CONTACT: --(Appropriate county
welfare office address
and telephone number)

REPORT NO. REPORT DATE TITLE..... DISTRICT WORKER
 MR-MED820-RO03 12/15/87 PICKLE TICKLER REPORT 999 A1

CASE-NAME COUNTY-ID MDS-ID BIRTHDATE SEX ELIG-STATUS
 DOE 99-99-9999999-9-99 999-99-9999 11-08-955 F 001
 DOE PLACE ANY STREET ANY TOWN, CALIFORNIA ZIP
 JANE A PICKLE-TICKLER SSI-LAST-RECEIVED LAST-PICKLE-CHG
 AO 12-11-87

CASE-NAME COUNTY-ID MDS-ID BIRTHDATE SEX ELIG-STATUS
 SMITH JOHN Z PICKLE-TICKLER SSI-LAST-RECEIVED LAST-PICKLE-CHG
 744 P STREET PI 12-86
 SACRAMENTO CA 95814

CASE-NAME COUNTY-ID MDS-ID BIRTHDATE SEX ELIG-STATUS
 NEUMAN ALFRED E PICKLE-TICKLER SSI-LAST-RECEIVED LAST-PICKLE-CHG
 714 P STREET PI 12-87
 SACRAMENTO CA 95814

CASE-NAME COUNTY-ID MDS-ID BIRTHDATE SEX ELIG-STATUS
 BOND JAMES C PICKLE-TICKLER SSI-LAST-RECEIVED LAST-PICKLE-CHG
 744 P STREET CI 12-11-87
 SACRAMENTO CA 95814

SAMPLE