
on facts clearly demonstrating that the beneficiary is no longer eligible for Medi-Cal under any basis' may the beneficiary's Medi-Cal eligibility be terminated".

The DHS has not advised the State Hearings Division of any position it has taken on this case. Judges are reminded that they should write any case involving an SB 87 issue in Ramos cases as proposed decisions. Judges should also write proposed decisions on any other case involving SB 87 that is not in conformity with DHS policy.

Proposed decisions regarding SB 87 should be directed to:

Marlene Ratner,
Department of Health Services
Medi-Cal Eligibility Branch
714 P. St. Rm 1692
Sacramento, California 95814

*California Department of Social Services - State Hearings Division
Notes from the Training Bureau - May 2, 2002*

Item 02-05-01D

Payment of the Medicare Part B Premium to Establish Eligibility for the Aged and Disabled Federal Poverty Level Program

All County Welfare Director's Letter (ACWDL) 01-18 dated March 16, 2001 provided questions and answers regarding the Aged and Disabled Federal Poverty Level (A&D FPL) program. In the answer to question 8 of that ACWDL, it was stated that a person could pay a health care premium to qualify for the A&D FPL program.

The CDHS has determined that this answer only applies to health insurance premiums, and not to the Medicare Part B premium. That is, after the first two months on Medi-Cal, per Title 22 CCR § 50773, the CDHS makes the payment of the Medicare Part B buy-in on behalf of the Medi-Cal beneficiary. This payment is made per an agreement between the CDHS and the Social Security Administration.

Under the current agreement between the CDHS and the Social Security Administration, the CDHS may not permit a Medi-Cal recipient to opt out of the Medicare Part B buy-in on an individual basis.

*California Department of Social Services - State Hearings Division
Notes from the Training Bureau - May 2, 2002*

Item 02-05-01C

The \$20 Any Income Deduction

Title 22 CCR §50549.2 says: