
income. Medi-Cal Eligibility
Procedures Manual
Article 10M explains how to
treat self-employment
income.

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

Item 02-05-01G

DHS to Use Initials of Dental Consultants Instead of Full Names on Position Statements

The State Hearings Division has agreed to permit the DHS Office of Medical Dental Services (OMDS) to use the initials of Delta Dental dental consultants on position statements and related documents instead of the full names of the consultant. DHS has requested to use initial of dental consultants instead of full names because several consultants have received threatening mail from claimants when their Treatment Authorization Requests have been denied.

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

Item 02-05-01F

Breast and Cervical Cancer Treatment Program (BCCTP)

The BCCTP became effective on January 1, 2002. It was authorized by Assembly Bill 430 (Chapter 171, Statutes of 2001). Statutory authority for the BCCTP is found at W&IC §§14007.71, 14017.6, 14017.7 and Health and Safety Code §§104160 through 104163.

This program provides urgently needed cancer treatment coverage to persons who have a diagnosis of breast and/or cervical cancer, have met Centers for Disease Control (CDC) screening criteria or are being screened by a CDC provider, and are determined to be in need of treatment.

The following providers are authorized to provide screening and enrollment into the BCCTP: Breast Cancer Early Detection Program, Breast and Cervical Cancer Control Program and Family PACT providers. These screening and enrollment providers screen for income eligibility (200% of the Federal Poverty Level), and for California residency.

There are no property limits for the BCCTP. Persons do not need to meet Social Security disability criteria to be eligible for the BCCTP.

Applicants who meet federal eligibility requirements (i.e., female, under 65, citizens or lawful permanent residents and without credible health insurance) will receive full-scope Medi-Cal for the duration of their cancer treatment. Those who do not meet federal

eligibility requirements, but meet State-only BCCTP standards, will receive services limited to cancer treatment for a specified time period (i.e., 18 months for breast cancer and 24 months for cervical cancer).

The toll-free number for persons wanting information on the Breast and Cervical Cancer Treatment program is 1-800-824-0088.

The CDHS should be issuing an ACWDL before the end of June that gives more details on the BCCTP.

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Item 02-05-01E

Does Senate Bill 87 Apply to Medi-Cal Recipients Not Administered by the County

CalWORKs except when such person is clearly ineligible for § 1931(b) Medi-Cal. In addition, per Welfare and Institutions Code (W&IC) § 14005.37(a), counties are required to continue Medi-Cal benefits and evaluate Medi-Cal eligibility for all Medi-Cal recipients after they receive information that may effect eligibility for Medi-Cal. These provisions had to be implemented by July 1, 2001.

The applicable statutory authority for the redetermination process is found at Welfare and Institutions Code (W&IC) §§14005.30 through .39, particularly .37. The CDHS issued All County Welfare Director's Letter 01-36 dated June 19, 2001 that discussed changes in the Medi-Cal redetermination process. The changes to the redetermination process included an ex parte process in which the county makes a Medi-Cal only eligibility determination without the involvement of the person whose Medi-Cal is discontinued.

The ex parte process is used in a variety of circumstances such as when CalWORKs is discontinued because the caretaker relative failed to complete the annual redetermination process, when the only child in a CalWORKs family leaves the home, or there is a loss of contact with the family. In these and other circumstances, the county is required to evaluate Medi-Cal eligibility without contacting the claimant by checking resources such as the Income Eligibility and Verification System (IEVS), the Employment Development Department or the Systematic Alien Verification for Entitlements (SAVE) system.

When the ex parte process is unsuccessful in determining whether the person is eligible or ineligible for Medi-Cal, the county is permitted to contact the claimant by telephone to request necessary information. The county must document in the case record the exact reason for calling the individual.

If the ex parte and telephone contacts are unsuccessful, the county is required to send an MC355 form to the person to request the necessary information.