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**Item 02-12-01E**

CDSS ACWDL 02-44 -- August 27, 2002 -- \$240 Deduction from Disability Income for Applicants of the §1931(b) Program

Effective November 1, 2002, when the county evaluates the eligibility of an applicant for the §1931(b) program, it is required to deduct \$240 from disability income when determining monthly countable income. The \$240 deduction applies to combined disability income of all members of the MFBU. (Previously, the applicable deduction for disability income of §1931(b) applicants was \$90.)

Disability income includes Social Security disability payments and private disability payments. Temporary Workers Compensation and State Disability insurance are treated as earned income, not disability based income for purposes of determining income eligibility for the §1931(b) program pursuant to the Tinoco and Sawyer lawsuits.

When applying the \$240 income deduction for §1931(b) applicants, any portion of the \$240 that is not applied to disability income is NOT "carried over" and applied to an applicant's earnings. By contrast, any portion of the \$240 deduction that is not applied to a recipient's disability income is "carried over" and applied to the recipient's earnings.

Note: The earned income deduction for §1931(b) applicants remains at \$90. The \$240 deduction applies to disability income only. If an MFBU receives disability income and earned income, it may receive both the \$240 disability deduction plus the \$90 earnings deduction.

*California Department of Social Services - State Hearings Division  
Notes from the Training Bureau - December 10, 2002*

**Item 02-12-01D**

CDSS ACWDL 02-43 -- August 27, 2002 -- Income Verification for Retroactive Medi-Cal

Income verification used to determine current month eligibility reported by an applicant on the MC 210 (Statement of Facts) may be used to determine income eligibility for each retroactive month provided that the applicant reports no change on the MC 210A (Supplemental Statement of Facts for Retroactive Coverage). Only one pay stub is required to verify income provided it accurately reflects retroactive income. Thus if an applicant reports receiving \$200 weekly income on his MC 210 and provides a pay stub dated May 6 verifying \$200 weekly income, the county may use that pay stub to determine the applicant's weekly income for the retroactive months of March and April so long as the applicant reported no change of income on his MC 210A form.

*California Department of Social Services - State Hearings Division  
Notes from the Training Bureau - December 10, 2002*

**Item 02-12-01C**

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**CDSS ACWDL 02-42 -- July 19, 2002 -- Representatives of Medi-Cal Applicants**

This ACWDL rescinds the following ACWDLs regarding authorized representatives for incompetent applicants: ACWDL 95-30, 95-60, 96-20, 97-01 and 02-28. Previously, ACWDLs 93-84 and 94-99 had been rescinded. ACWDL 94-62 has not been rescinded.

The DHS will issue a new ACWDL that provides new guidance and examples on the subject of authorized representatives and incompetent applicants and beneficiaries. In the interim, this ACWDL suggests that counties follow Title 22 CCR §50163(a)(3)(B) in situations where the applicant is incompetent and has no spouse, conservator, guardian or executor. That section does not require that a person filing an application on behalf of an incompetent person have prior knowledge of that person's circumstances.

Note: While this ACWDL does not mention ACWDL 94-62, that ACWDL may be helpful in circumstances involving an incompetent applicant.

*California Department of Social Services - State Hearings Division  
Notes from the Training Bureau - December 10, 2002*

**Item 02-12-01B**

**CDSS ACWDL 02-40 -- July 3, 2002 -- Processing Disability Evaluations under the SB 87 Process**

Counties are reminded that they must process disability evaluations any time an applicant or beneficiary alleges he/she has a disability. This is true regardless of whether the individual is currently receiving Medi-Cal on another basis.

The 250% program allows individuals to earn above the current Substantial Gainful Activity (SGA) limit (\$780 monthly in 2002) and still qualify for Medi-Cal through disability linkage. Counties must thus not deny Medi-Cal based on SGA if the individual alleges a disability, but must refer the case to the Disability and Adult Programs Division (DAPD) for a disability evaluation.

*California Department of Social Services - State Hearings Division  
Notes from the Training Bureau - December 10, 2002*

**Item 02-12-01A**

**CDSS ACWDL 02-38 -- June 28, 2002 -- Questions and Answers About the Aged and Disabled (A&D) Federal Poverty Level (FPL) Program**

Following are answers to some of the questions in this ACWDL:

• New FPLs become effective in April of each year. The A&D FPL program limit for an individual is determined by adding \$230 to 100% of the FPL for an individual and \$310 to 100% of the FPL for a couple. Do not count the annual Social Security cost of living