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Title 22@ Social Security

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Division 3@ Health Care Services

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Subdivision 1@ California Medical Assistance Program

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Chapter 2@ Determination of Medi-Cal Eligibility and Share of Cost

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Article 4@ Beneficiary Application Process

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Section 50183@ Transfer Between Programs

50183 Transfer Between Programs

(a)

A person or family who has been receiving Medi-Cal under any program other than SSI/SSP and whose eligibility is discontinued shall be evaluated by the county department to determine if Medi-Cal eligibility exists under any other program. If it appears that eligibility would exist for: (1) AFDC, regulations pertaining to the appropriate AFDC program shall be followed in transferring the case and establishing eligibility. (2) SSI/SSP, the person shall be referred to the Social Security Administration. This referral shall be documented in the case file. Pending the SSI/SSP determination, the county department shall determine eligibility under any other program for which the person may be eligible. (3) Only Medi-Cal-only, the county department shall initiate an intraprogram status change or interprogram transfer to the appropriate aid category and shall determine eligibility under that aid category. A new application form is not required.

(1)

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(2)

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may be eligible.

(3)

Only Medi-Cal-only, the county department shall initiate an intraprogram status change or interprogram transfer to the appropriate aid category and shall determine eligibility under that aid category. A new application form is not required.

(b)

The county shall not be required to evaluate Medi-Cal eligibility under another program when a beneficiary has: (1) Been discontinued due to any of the following: (A) A move out of state. (B) A move with loss of contact. (C) Death. (2) Established Medi-Cal eligibility simultaneously in two or more different counties or under two or more different programs or identities, and eligibility was discontinued in all but one county or under all but one program or identity. (3) Been discontinued from the program due to noncooperation in supplying information needed to meet cash grant eligibility requirements, and those same requirements exist for all Medi-Cal-only programs for which the person may be eligible.

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(A)

A move out of state.

(B)

A move with loss of contact.

(C)

Death.

(2)

Established Medi-Cal eligibility simultaneously in two or more different counties or

under two or more different programs or identities, and eligibility was discontinued in all but one county or under all but one program or identity.

(3)

Been discontinued from the program due to noncooperation in supplying information needed to meet cash grant eligibility requirements, and those same requirements exist for all Medi-Cal-only programs for which the person may be eligible.

(c)

Persons whose SSI/SSP eligibility has been discontinued may apply for Medi-Cal at the county department. (1) A new application shall be completed, unless the family of the person discontinued from SSI/SSP is currently receiving Medi-Cal. In this case, the request for aid shall then be treated as a request to add a family member to the Medi-Cal case. (2) The date of the application shall be the date the completed application form is received by the county department.

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(2)

The date of the application shall be the date the completed application form is received by the county department.