

*A guide for workers and job seekers with disabilities*

*The 250%  
Medi-Cal Working Disabled Program*

Frequently Asked Questions (FAQs)

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# **The 250% MEDI-CAL WORKING DISABLED PROGRAM**

## **Frequently Asked Questions**

### **1. What is the Medi-Cal Working Disabled Program?**

*Under this program, workers with disabilities who earn up to 250% of the Federal Poverty Level in countable earned income can buy into Medi-Cal by paying an affordable monthly premium. This means a single individual in 2006 can earn \$50,028 in gross wages a year and retain Medi-Cal services. The Medi-Cal Working Disabled Program has provided access to “full scope” Medi-Cal since April 1, 2000.*

### **2. What does the Medi-Cal Working Disabled Program consider “work”?**

*“Work” is undefined. A disabled worker on this program must provide proof of employment (for example, pay stubs or written verification of employment by employer).*

*If you are self-employed, you will have to provide records (for example, tax returns) to demonstrate employment. Also, for the independent contractor, verification may be provided with a 1099 IRS form as proof of income and employment.*

*You are still considered to be working under this Medi-Cal program if you are receiving vacation or sick leave pay from your employer.*

### **3. What medical coverage comes with the Medi-Cal Working Disabled Program?**

*Coverage is “full scope” Medi-Cal, allowing complete access to services.*

### **4. If I buy into Medi-Cal through the Medi-Cal Working Disabled Program, can I be eligible for In Home Supportive Services (IHSS)?**

*Yes. In this program, you are eligible for IHSS if you meet IHSS eligibility rules with a separate needs assessment for those services.*

*State law allows Personal Assistance Services in the IHSS program to be used in the workplace, effective January 1, 2003, because of the passage of AB 925 in 2002.*

**5. Who is eligible for the Medi-Cal Working Disabled Program?**

*Any working disabled person who meets the Medi-Cal definition of disability, earns up to 250% of the federal poverty level in countable earned income, and meets the assets requirement for Medi-Cal.*

*Except for earnings, all applicants must continue to meet Medi-Cal's definition of disability and the non-financial requirements of the Medi-Cal program. Earnings due to work are not a consideration in determining whether a disability exists.*

**6. What are the assets requirements for Medi-Cal?**

*This Medi-Cal program has the following limits on available resources. An individual may not have "liquid assets" (accessible money) in excess of \$2,000 (\$3,000 for a couple), except for the following: ownership of one house, occupied by the individual, and one car will not be considered when determining the individual's "Resource Levels."*

**7. What if I am already receiving Medi-Cal services now, and working?**

*If you are receiving Medi-Cal services now and working, earnings from work may disqualify you from continuing on Aged and Disabled Federal Poverty Level or SSI linked eligibility categories of Medi-Cal. In some cases, you could have a share of cost or an increase in your share of cost under the Medically Needy eligibility category of Medi-Cal. If a Medi-Cal share of cost is greater than the premium in this program, it is recommended that you ask your county Medi-Cal office for more information about your eligibility for this program.*

**8. What is 250% of the current annual federal poverty level?**

*To calculate 250% of the federal poverty level simply take the income number below for the correct family size and multiply by 2.5. According to the chart below, 250% the federal poverty level for a single individual in the year 2006 is 2.5 times \$9,800, or \$24,500 a family size of two it is 2.5 times \$13,200, or \$33,300.*

2006 Health and Human Services Federal Poverty Guidelines

<b>Size of Family Unit</b>	<b>48 Contiguous States and D.C.</b>	<b>Alaska</b>	<b>Hawaii</b>
1	\$ 9,800	\$12,250	\$11,270
2	13,200	16,500	15,180
3	16,600	20,750	19,090
4	20,000	25,000	23,000
5	23,400	29,250	26,910
6	26,800	33,500	30,820
7	30,200	37,750	34,730
8	33,600	42,000	38,640
For each additional person, add	3,400	4,250	3,910

SOURCE: *Federal Register*, Vol. 71, No. 15, January 24, 2006, pp. 3848-3849. From: <http://aspe.hhs.gov/poverty/05poverty.shtml>

**9. Are all of my earnings used when calculating 250% of the Federal Poverty Level?**

*No. When considering a disabled worker's income, the Medi-Cal Working Disabled Program uses Medi-Cal's "Countable Earned Income Calculation" for an individual's earned income only. The worker's disability income is not counted for this program. For example, disability cash benefits from State Disability Insurance (SDI), Short Term Disability, SSI, SSDI, Worker's Compensation, or Long Term Disability Insurance is NOT counted in this program.*

**Countable Earned Income Calculation for a single individual**

For Example: Monthly gross earned income = \$2,085

- \$65 Earned Income Exclusion

- \$20 Any Income Exclusion

÷ 2 =

**\$1,000 = Monthly Countable Earned Income**

*Important: Medi-Cal’s deeming rules apply when a worker has a spouse who is not disabled (see Medi-Cal deeming rules). Deeming rules are very specific to your individual situation. “Deeming rules” consider some of the income and resources of your spouse to be your income and resources when applying for or receiving benefits. It is recommended that you ask your county Medi-Cal office for more information about how deeming rules may affect your eligibility for this program.*

**10. How is the premium payment determined?**

*Your monthly net Countable Income determines your premium amount. The premium table below shows the monthly premium payment range for an eligible individual and couple.*

**2006 Premium Table using monthly “Countable Earned Income”**

Countable Income From	Countable Income To	Premium for Eligible Individual	Premium for Eligible Couple
\$1	\$600	\$20	\$30
\$601	\$700	\$25	\$40
\$701	\$900	\$50	\$75
\$901	\$1,100	\$75	\$100
\$1,101	\$1,300	\$100	\$150
\$1,301	\$1,500	\$125	\$200
\$1,501	\$1,700	\$150	\$225
\$1,701	\$1,994	\$175	\$275
\$1,941	\$2,000	\$200	\$300
\$2,101	\$2,673	\$250	\$375

**11. How do I make the premium payment to Medi-Cal?**

*Once you become eligible for the Medi-Cal Working Disabled Program, your county eligibility worker will provide you with self-addressed, postage paid envelopes to mail your monthly premiums. Premiums are due by the 10<sup>th</sup> of each month.*

Please ASK your eligibility worker for the latest instructions on sending in monthly premiums on time as procedures can change.

**12. Can my premium payments be increased or decreased?**

*Yes. If you report an increase or a decrease in your countable earned income, the county will decide whether your premium payment should be adjusted.*

*If your premium payments are increased, the county must send you a timely and adequate notice of action.*

*If the county decreases your premium payments for the months that you have already paid the premium payment, your overpayment for those months will be credited to your future premium payments.*

**13. What if I fail to pay my premium payments?**

*If the premium payments have not been received for two consecutive months, you will be sent a Notice of Action informing you of your termination from the Medi-Cal Working Disabled Program. The Notice of Action will also inform you that you will be re-determined for eligibility under another Medi-Cal program.*

*If you are discontinued from the Medi-Cal Working Disabled Program for failure to pay the premium payments for two consecutive months, you will have a 6-month penalty period. If you wish to reenroll in the program during the 6-month penalty period, you must pay the current and past due premiums. If you wish to enroll after the 6-month penalty period, you will be considered a new applicant and must prepay the premium for the first month of your new eligibility.*

**14. What if I am married?**

*If you are married and both you and your spouse are eligible for the Medi-Cal Working Disabled Program, then 250% of the federal poverty level for two persons is used. If your spouse is not eligible for 250% CWD, Medi-Cal's deeming rules may apply towards your countable income. Deeming rules are very specific to your individual situation. It is recommended that you ask your county Medi-Cal office for more information about how deeming rules may affect your eligibility for this program.*

**15. How do I get started with the Medi-Cal Working Disabled Program?**

*To buy into Medi-Cal through this program, you should go to your county social services office, or, if you currently receive Medi-Cal, you should talk to your Medi-Cal eligibility worker. Local Medi-Cal offices and phone numbers can be found online at <http://www.dhs.ca.gov/mcs/medi-calhome/CountyListing1.htm> or by calling the Beneficiary Unit for Medi-Cal 916-636-1980.*

*The Appendix contains a list of the County Coordinators for the Medi-Cal Working Disabled Program. These staff names can and do change. Use the Appendix information for your county and ask for the County Coordinator for this Medi-Cal program.*

**16. Can I qualify for this program if I already receive SSDI and Medicare?**

*Yes. As long as you are working, and meet all other eligibility criteria, you can buy into Medi-Cal under the Medi-Cal Working Disabled Program. You may also be eligible to have Medicare Part B premiums paid by Medi-Cal. Contact your county social services office for more information.*

**17. Can I have a retirement fund and still be eligible for this program?**

*Yes. Any employer or individual retirement plan, approved by the Internal Revenue Service (IRS), is permissible under the Medi-Cal Working Disabled Program (for example, an IRA-Individual Retirement Account, a 401k or other employer pension plan, etc.).*

**18. What is the difference between the Medi-Cal Working Disabled Program and the SSI 1619(b) provisions to access Medi-Cal?**

*For Supplemental Security Income (SSI) recipients, under section 1619(b) Medi-Cal coverage can continue at no cost even if earnings, either alone or along with other income, become too high for a SSI cash payment. This is true as long as earnings do not exceed the California Medi-Cal threshold amount of \$34,035 annually (2006 amount). A higher personal earnings threshold can be established depending on health care costs and other individual factors. The 1619(b) provision may allow you to have certain retirement funds. Request more information for your situation from a benefits planner or a Work Incentive Liaison (WIL) at your local Social Security field office.*

*To qualify for 1619(b) a worker with a disability must have received SSI for at least 1 month in the past twelve months, be disabled, meet all other eligibility*

*rules, need Medi-Cal in order to work, and have a gross earned income that is insufficient to replace Medi-Cal coverage (including IHSS).*

**19. What are the reporting requirements for the Medi-Cal Working Disabled Program?**

*There is an annual eligibility review for all recipients of any Medi-Cal program. However, there are no scheduled reporting requirements due to work, but you are required to report all changes (for example; earnings, name/address changes) to your county eligibility worker within 10 days of the change.*

**20. What if I have private or employer health care?**

*Having private or employer health care does not make you ineligible for the Medi-Cal Working Disabled Program. Private or employer health care may not cover all of the services a person with a disability may need (for example; a wheelchair, a respirator, certain prescription drugs, or In Home Supportive Services).*

***Important Note:*** *Depending on the employment situation and other factors, you may be able to access employer-sponsored health coverage, Medicare and Medi-Cal with the same job at the same time. In addition, a California program called HIPP, the Health Insurance Premium Payment program may pay for private health insurance premiums in such situations. For information on application procedures call Toll Free 1-866-298-8443.*

**21. If I stop working, when is the first month of my ineligibility for the Medi-Cal Working Disabled Program?**

*The month of ineligibility begins on the first day of the following month in which you have stopped working, unless you can demonstrate good cause.*

*A good cause includes hospitalization, an inability to work that is directly related to the disability, a work-site closure, or a loss of current transportation with no other alternative means of transportation. If a good cause exists and you meet all other eligibility requirements, the county will continue your eligibility in the 250% CWD program for the next two months following the month in which you stopped working.*

***Note:*** *When you are no longer eligible for this program, California state law SB 87 requires that Medi-Cal find out whether you are eligible for other Medi-Cal programs and services.*

## **22. Can I qualify for the Medi-Cal Working Disabled Program if I am an immigrant?**

*Yes. Some disabled immigrants are eligible for the 250% CWD program, including immigrants who are “Permanently Residing in the United States” Under Color of Law (PRUCOL).*

*Qualified Immigrants include:*

- *Lawful Permanent Residents;*
- *Immigrants Granted Asylum under section 208 of the Immigration and Nationality Act (INA);*
- *Refugees admitted to the United States under section 207 of the INA;*
- *Immigrants paroled into the United States under INA section 212(d)(5) for at least one year;*
- *An immigrant whose deportation is being withheld under section 243(h) of the INA;*
- *An immigrant granted conditional entry under section 203(a)(7) of the INA;*
- *An immigrant who is Cuban and Haitian Entrant as defined in section 501(e) of the Refugee Education Assistance Act of 1980; or*
- *Battered immigrants who meet the requirements for qualified alien status.*

## **23. What about the new Medicare prescription drug law and my drug coverage in this Medi-Cal program?**

*A new law, the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA), created Prescription Drug Benefits that will be added to Medicare in 2006.*

**IMPORTANT** *If you are enrolled in the Medi-Cal Working Disabled Program, or enrolled in any Medi-Cal category using federal funds, **and eligible for Medicare**, you are considered “**dual eligible**,” eligible for Medi-Cal and Medicare. For most “dual eligibles” in 2006, Medi-Cal prescription drug coverage using federal funds ended. The Medicare prescription drug program provides drug coverage with different rules beginning January 1, 2006. Please see Medicare Part D Section in the training manual, [www.db101.org](http://www.db101.org) and [www.calmedicare.org](http://www.calmedicare.org) for descriptions of current rules and other new information. Also use CA HICAP services, call:*

*Medicare Health Insurance Counseling and Advocacy Program 1-800-434-0222  
Medicare Drug Plan Finder at [www.medicare.gov](http://www.medicare.gov)*

**County Coordinators  
250% Medi-Cal Working Disabled Program**

01-ALAMEDA Social Services Agency  
8477 Enterprise Way  
Oakland, CA 94621  
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[Jacoooper@alameda.ca.us](mailto:Jacoooper@alameda.ca.us)

02-ALPINE Dept. of Social Services  
75 Diamond Valley Rd.  
P.O. Box 277  
Markleeville, CA 96120  
Regina Britschgi  
(530) 694-2235  
(530) 694-2252 FAX  
[rbritschgi@isaws.cahwnet.gov](mailto:rbritschgi@isaws.cahwnet.gov)

03-AMADOR Dept. of Social Services  
1003 Broadway  
Jackson, CA 95642  
Kim Crippen  
(209) 223-6569  
(209) 223-6208 FAX  
[Kcrippen@co.amador.ca.us](mailto:Kcrippen@co.amador.ca.us)

04-BUTTE Dept. of Social Welfare  
P.O. Box 1649  
Oroville, CA 95965  
Patty Walker  
(530) 879-3549  
(530) 879-3483 FAX  
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05-CALAVERAS Works and Human Services Agency  
891 Mnt. Ranch Road  
San Andreas, Ca. 95249  
Connie McLain  
(209) 754-6447  
(209) 754-4536 FAX  
[cmclain@co.calaveras.ca.us](mailto:cmclain@co.calaveras.ca.us)

06-COLUSA Health and Human Services  
521 East Webster  
Colusa, CA 95932  
Alexander Rodriguez  
(530) 458-0262  
(530) 458-0492 FAX

07-CONTRA COSTA Employment and Human Services  
40 Douglas Dr.  
Martinez, CA 94553  
Sandy Baldwin  
(925) 313-1621  
(925) 313-1758 FAX  
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08-DEL NORTE Health and Social Services  
880 Northcrest Dr.  
Crescent City, CA 95531  
Carmen Chavez  
(707) 464-3191 x337  
(707) 465-1783 FAX  
[cchavez@co.delnorte.ca.us](mailto:cchavez@co.delnorte.ca.us)

09-EL DORADO Dept. Of Social  
Services  
3057 Briw Rd.  
Placerville, CA 95667  
Midge Mortensen  
(530) 642-7159  
(530) 626-9060 FAX  
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10-FRESNO  
County of Fresno  
Dept. of Human Services  
Fresno, CA 93750  
Karen Sebilian  
(559) 253-9006  
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11-GLENN Human Resources  
Agency  
P.O. Box 611  
Willows, CA 95988  
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(530) 934-6521 FAX  
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12-HUMBOLDT Dept. of Social  
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13-IMPERIAL Dept. of Social  
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2995 S. Fourth St. Ste. 105  
El Centro, CA 92243  
Judy Milan  
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14-INYO Dept. of Social Services  
1351 Rocking W Drive  
Bishop, CA 93514  
Candy Ross  
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15-KERN Human Services  
P.O. Box 511  
Bakersfield, CA 93302  
Mary Erwin  
(661) 631-6105  
(661) 633-7047 FAX  
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16-KINGS Human Services Agency  
1200 South Dr.  
Hanford, CA 93230  
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(559) 585-0346 FAX  
[aguzman@co.kings.ca.us](mailto:aguzman@co.kings.ca.us)

17-LAKE Dept. of Social Services  
15975 Anderson Ranch Pkwy  
P.O. Box 9000  
Lower Lake, CA 95457  
Esther Gould  
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18-LASSEN Dept. of Social Welfare  
720 Richmond Road  
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Susanville, CA 96130  
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Dept. of Public Social Services  
12900 Crossroads Parkway south  
City of Industry, CA 91746  
Carol Roach  
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20-MADERA Dept. of Public  
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22-MARIPOSA Dept. of Social  
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23-MENOCINO Dept. of Social  
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24-MERCED Human Services Agency  
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Merced, CA 95341-0112  
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25-MODOC Dept. of Social Services  
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Alturas, CA 96101  
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26-MONO Social Services  
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Mammoth Lakes, CA 93546  
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27-MONTEREY Dept. of Social Services  
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28- NAPA Health and Human Services  
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29-NEVADA Dept. of Public Soc. Services.  
950 Maidu Ave.  
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30-ORANGE Social Services Agency  
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33-RIVERSIDE Dept. of Social  
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40-SAN LUIS OBISPO Human  
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42-SANTA BARBARA Dept. of  
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1100 West Laurel Ave.  
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43-SANTA CLARA Social Services  
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45-SHASTA Dept. of Social Services  
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(530) 255-5288 FAX  
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46-SIERRA Human Services  
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47-SISKIYOU Dept. of Human  
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Yreka, CA 96097  
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48-SOLANO Health and Human  
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49-SONOMA Human Services Dept.  
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50-STANISLAUS Community  
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56-VENTURA Human Services  
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57-YOLO Dept. of Employment and  
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**Thanks!**

CA Department of Health Services, &  
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Project (CHIIP) for updated contact  
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