

Department of Alcohol and Drug Programs Drug Medi-Cal Program Aid Codes Master Chart January 4, 2010

Overview

The following chart organizes Medi-Cal aid codes into the following five groups based on the percent of federal financial participation (FFP) for which the aid codes are eligible:

- Refugee (100 Percent FFP)
- Title XXI of the Social Security Act (Enhanced FFP)
- Breast and Cervical Cancer Treatment Program (BCCTP) Aid Codes (Regular FFP)
- All other aid codes (Regular FFP)
- State Funds Only (Zero FFP)

Within these groups, the program/description column identifies aid codes that have restrictions on the services for which FFP is available. These aid codes are also identified by color coding and font/italics/underlining (see footnotes).

Although certain aid codes are eligible for 100 percent or Enhanced FFP, the Department of Alcohol and Drug Programs (ADP) current policy is to process claims involving these aid codes using Regular FFP (except Minor Consent claims is processed using 100 percent State General Fund). Historically, the volume of claims submitted using Enhanced FFP or 100 percent FFP was comparatively small so that it did not warrant the separation and manual processing of these claims from those processed using Regular FFP.

The Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) column identifies aid codes that may include beneficiaries under age 21 who are eligible for expanded Medi-Cal benefits under the EPSDT program.

When selecting from multiple aid codes in the Medi-Cal Eligibility Determination System (MEDS), the Short Doyle/Medi-Cal claiming system (SD/MC) system pays a claim using the first aid code with FFP in the following order: Primary, Special 1, 2, and 3. If the claim is billed and payable with 7X, 8P, 8R, 8T, or 8X aid code, the claim will be paid at Regular FFP by ADP, even though it is listed as an Enhanced FFP Aid Code.

As of July 1, 2002, aid codes 8T, 44, 48, 55, 58, 69, and 7C are payable by the SD/MC system. These codes were previously locked out of the system, primarily because there are restrictions on the services covered by the aid code. For example, aid codes 8T, 55, and 58 identify beneficiaries who are only eligible for emergency services (emergency psychiatric inpatient hospital services and the related professional services) or pregnancy-related services (specialty mental health services required to ensure the health of the mother and child, generally up to delivery). While these aid codes are still restricted, they are now billable for services provided to beneficiaries in these code categories. Check the program description column for more information.

If a service is not covered under the aid code, the services will not be reimbursed by SD/MC.

These aid codes are billable for dates of service on or after July 1, 2002.

Historical FFP Rates

Federal Fiscal Year	Federal Fiscal Year Period	Regular FFP	Enhanced FFP*	
FFY 2011	October 1, 2010 – December 31, 2010	61.59%	65.00%	
FFY 2010	October 1, 2009 – September 30, 2010	61.59%	65.00%	
FFY 2009	October 1, 2008 – September 30, 2009	61.59%	65.00%	
FFY 2008	October 1, 2007 – September 30, 2008	50.00%	65.00%	
FFY 2007	October 1, 2006 – September 30, 2007	50.00%	65.00%	
FFY 2006	October 1, 2005 – September 30, 2006	50.00%	65.00%	
FFY 2005	October 1, 2004 – September 30, 2005	50.00%	65.00%	
FFY 2004	July 1, 2004 – September 30, 2004	50.00%	65.00%	
FFY 2004	October 1, 2003 – June 30, 2004	52.95%	65.00%	As of Date of Payment
FFY 2003	April 1, 2003 – September 30, 2003	54.35%	65.00%	As of Date of Payment
FFY 2003	October 1, 2002 – March 31, 2003	50.00%	65.00%	
FFY 2002	October 1, 2001 – September 30, 2002	51.40%	65.98%	
FFY 2001	October 1, 2000 – September 30, 2001	51.25%	65.88%	
FFY 2000	October 1, 1999 – September 30, 2000	51.67%	66.17%	

Special Indicators

The following indicators, which appear in the aid code portion of the county ID number, help Medi-Cal identify the following:

IE – Ineligible: A person who is ineligible for Medi-Cal benefits. An IE person may only use medical expenses to meet the share of cost (SOC) for other family members associated within the same case. Upon certification of the SOC, the IE individual is not eligible for Medi-Cal benefits in this case. An IE person may be eligible for Medi-Cal benefits in another case where the person is not identified as IE.

RR – Responsible Relative: An RR is allowed to use medical expenses to meet the SOC for other family members for whom he/she is responsible. Upon certification of the SOC, an RR individual is not eligible for Medi-Cal benefits in this Medi-Cal Budget Unit (MBU). The individual may be eligible for Medi-Cal benefits in another MBU where the person is not identified as an RR.

Refugee Aid Codes (100 Percent FFP*)				
Code	Benefits	SOC	Program Description	EPSDT
0A	Full	No	Refugee Cash Assistance (FFP). Includes unaccompanied children. Covers all eligible refugees during their first eight months in the United States. Unaccompanied children are not subject to the eighth-month limitation provision. This population is the same as aid code 01, except that they are exempt from grant reductions on behalf of the Assistance Payments Demonstration Project/California Work Pays Demonstration Project.	Yes
01	Full	No	Refugee Cash Assistance (FFP). Includes unaccompanied children. Covers all eligible refugees during their first eight months in the United States. Unaccompanied children are not subject to the eighth-month limitation provision.	Yes
02	Full	Y/N	Refugee Medical Assistance/Entrant Medical Assistance (FFP). Covers refugees and entrants who need Medi-Cal and who do not qualify for or want cash assistance.	Yes
08	Full	No	Entrant Cash Assistance (ECA) (FFP). Provides ECA benefits to Cuban/Haitian entrants, including unaccompanied children who are eligible, during their first eight months in the United States. (For entrants, the month begins with their date of parole.) Unaccompanied children are not subject to the eighth-month limitation provision.	Yes

*Although these aid codes are eligible for 100 Percent FFP, ADP processes claims involving these aid codes using Regular FFP (see page 1).

Title XXI of the Social Security Act Aid Codes (Enhanced FFP*)				
Code	Benefits	SOC	Program Description	EPSDT
7X	Full	No	One-Month Healthy Families (HF) Bridge (FFP). Provides one additional calendar month of health care benefits with no Share of Cost, through the same health care delivery system, to Medi-Cal-eligible children meeting the criteria of the HF Bridging Program.	Yes
8P	Full	No	133 Percent Program. Child – United States Citizen (with excess property), Permanent Resident Alien/ Permanent Residence Under Color of Law (PRUCOL) Alien (FFP). Provides full-scope Medi-Cal benefits to children ages 1 up to 6, and beyond 6 years when inpatient status, which began before 6 th birthday, continues, and family income is at or below 133 percent of the federal poverty level.	Yes
8R	Full	No	100 Percent Program. Child (FFP) – United States Citizen (with excess property), Lawful Permanent Resident/Persons residing in the United States under color of Law (PRUCOL)/Immigration Reform and Control Act of 1986 (IRCA) Amnesty Alien [Aged, Blind or Disabled (ABD) or Under 18]. Provides full-scope benefits to otherwise eligible children, ages 6 to 19, and beyond 19 when inpatient status begins before the 19 th birthday, and family income is at or below 100 percent of the federal poverty level.	Yes
8T	Restricted to Pregnancy and Emergency Services	No	100 Percent Program. Child-Undocumented/Nonimmigrant Status/(IRCA Amnesty Alien [with excess property]). Covers emergency and pregnancy-related services only to otherwise eligible children ages 6 to 19, and beyond 19 when inpatient status begins before the 19 th birthday, and family income is at or below 100 percent of the federal poverty level.	
8X	Full	No	Medically Indigent (MI) - Accelerated Enrollment (AE) - Child Health Development and Protection (CHDP) Gateway for Healthy Families. Provides for the pre-enrollment of CHILDREN into the Medi-Cal program who are Screened as Probable Healthy Families Eligibles . Provides Temporary , full scope Medi-Cal benefits with no SOC.	Yes

*Although these aid codes are eligible for Enhanced FFP, ADP processes claims involving these aid codes using Regular FFP (see page 1).

Breast and Cervical Cancer Treatment Program (BCCTP) Aid Codes (Enhanced FFP*)				
Title XIX of the Social Security Act				
Code	Benefits	SOC	Program Description	EPSDT
0M	Full	No	BCCTP-Accelerated Enrollment (AE). Provides AE for temporary full-scope, no SOC Medi-Cal for females under 65 years of age who are diagnosed with breast and/or cervical cancer. Eligibility limited to 2 months.	Yes
0N	Full	No	BCCTP-AE, Provides AE for temporary full-scope, no SOC Medi-Cal for females under 65 years of age who have been diagnosed with breast and/or cervical cancer and are without creditable insurance coverage. No time limit.	Yes
0P	Full	No	BCCTP-Federal Provides full-scope, no SOC Medi-Cal for females under 65 years of age who have been diagnosed with breast and/or cervical cancer and are without creditable insurance coverage.	Yes

*Although these aid codes are eligible for Enhanced FFP, ADP processes claims involving these aid codes using Regular FFP (see page 1).

All Other Aid Codes (Regular FFP)				
Code	Benefits	SOC	Program Description	EPSDT
03	Full	No	Adoption Assistance Program (AAP) (FFP). A cash grant program to facilitate the adoption of hard-to-place children who would require permanent foster care placement without such assistance.	Yes
04	Full	No	Adoption Assistance Program/Aid for Adoption of Children (AAP/AAC). Covers cash grant children receiving Medi-Cal by virtue of eligibility to AAP/AAC benefits.	Yes
1E	Full	No	Continued eligibility for the Aged (FFP). Covers former Supplemental Security Income (SSI) beneficiaries who are Aged (with exception of persons who are deceased or incarcerated in a correctional facility) until the county re-determines their eligibility.	
1H	Full	No	Federal poverty level – Aged (FPL-Aged) Provides full scope (no share of cost) Medi-Cal to qualified aged individuals/couples.	
1U	Restricted to Pregnancy and Emergency Services	No	Restricted Federal poverty level – Aged (Restricted FPL– Aged) Provides emergency and pregnancy-related benefits (no Share of Cost) to qualified aged individuals/couples who do not have satisfactory immigration status	
1X	Full	No	Multipurpose Senior Services Program Medi-Cal Qualified. Eligible due to application of spousal impoverishment rules. Covers persons 65 years and older who meet the Medi-Cal criteria for inpatient care in a nursing facility.	
1Y	Full	Yes	Multipurpose Senior Services Program Medi-Cal Qualified. Eligible due to application of spousal impoverishment rules. Covers persons 65 years and older who meet the Medi-Cal criteria for inpatient care in a nursing facility.	
10	Full	No	SSI/State Supplementary Payment (SSP) Aid to the Aged (FFP). A cash assistance program administered by the Social Security Administration (SSA) which pays a cash grant to needy persons 65 years of age or older.	
13	Full	Y/N	Aid to the Aged – Long Term Care (LTC) (FFP). Covers persons 65 years of age or older who are medically needy and in LTC status.	
14	Full	No	Aid to the Aged – Medically Needy (FFP). Covers persons 65 years of age or older who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only.	
16	Full	No	Aid to the Aged – Pickle Eligibles (FFP). Covers persons 65 years of age or older who were eligible for and receiving SSI/SSP and Title II benefits concurrently in any month since April 1977 and were subsequently discontinued from SSI/SSP but would be eligible to receive SSI/SSP if their Title II cost-of-living increases were disregarded. These persons are eligible for Medi-Cal benefits as public assistance recipients in accordance with the provisions in the <u>Lynch v. Rank</u> lawsuit.	
17	Full	Yes	Aid to the Aged – Medically Needy, SOC (FFP). Covers persons 65 years of age or older who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only.	

All Other Aid Codes (Regular FFP) - Continued				
Code	Benefits	SOC	Program Description	EPSDT
18	Full	No	Aid to the Aged – In Home Supportive Services (IHSS) (FFP). Covers aged IHSS cash recipients, 65 years of age or older, who are not eligible for SSI/SSP cash benefits.	
2E	Full	No	Continued eligibility for the Blind (FFP). Covers former SSI beneficiaries who are Blind (with exception of persons who are deceased or incarcerated in a correctional facility) until the county re-determines their eligibility.	Yes
20	Full	No	SSI/SSP Aid to the Blind (FFP). A cash assistance program administered by the SSA, which pays a cash grant to needy blind persons of any age.	Yes
23	Full	Y/N	Aid to the Blind – LTC Status (FFP). Covers persons who meet the federal criteria for blindness, are medically needy, and are in LTC status.	Yes
24	Full	No	Aid to the Blind – Medically Needy (FFP). Covers persons who meet the federal criteria for blindness who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only.	Yes
26	Full	No	Aid to the Blind – Pickle Eligibles (FFP). Covers persons who meet the federal criteria for blindness and are covered by the provisions of the <u>Lynch v. Rank</u> lawsuit (See aid code 16 for definition of Pickle eligibles).	Yes
27	Full	Yes	Aid to the Blind – Medically Needy, SOC (FFP). Covers persons who meet the federal criteria for blindness who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only.	Yes
28	Full	No	Aid to Blind – IHSS (FFP). Covers persons who meet the federal definition of blindness and are eligible for IHSS (See aid code 18 for definition of eligibility for IHSS).	Yes
3A	Full	No	SAFETY NET – All other Families, CalWORKs Timed-Out, Child-Only Case. (FFP) Provides for continued cash and Medi-Cal coverage of children whose parents have been discontinued from cash aid and removed from assistance unit (AU) due to reaching the CalWORKs 60 month time limit without meeting a time extender exception.	Yes
3C	Full	No	SAFETY NET – Two Parent, CalWORKs Timed-Out, Child-Only Case. (FFP) Provides for continued cash and Medi-Cal coverage of children whose parents have been discontinued from cash aid and removed from AU due to reaching the CalWORKs 60 month time limit without meeting a time extender exception.	Yes
3D	Full	No	Not on cash aid, but cash-linked Medi-Cal eligible because the individual has been determined to be eligible for CalWORKs.	Yes
3E	Full	No	CalWORKs Legal Immigrant – Family Group (FFP). Provides aid to families in which a child is deprived because of the absence, incapacity or death of either parent.	Yes
3G	Full	No	Aid to Families with Dependent Children (AFDC) - Family Group (FG) (State only non-FFP cash grant) (FFP for Medi-Cal eligibles). Provides aid to families in which a child is deprived because of the absence, incapacity or death of either parent, who does <u>not</u> meet all federal requirements, but State rules require the individual(s) be aided. This population is the same as aid code 32, except that they are exempt from the AFDC grant reductions on behalf of the Assistance Payments Demonstration Project/California Work Pays Demonstration Project.	Yes
3H	Full	No	AFDC-FU (State only non-FFP cash grant) (FFP for Medi-Cal eligibles). Provides aid to pregnant women (before their last trimester) who meet the federal definition of an unemployed parent but are not eligible because there are no other children in the home. This population is the same as aid code 33, except that they are exempt from the AFDC grant reductions on behalf of the Assistance Payments Demonstration Project/California Work Pays Demonstration Project	Yes
3L	Full	No	CalWORKs Legal Immigrant – Family Group (FFP). Provides aid to families in which a child is deprived because of the absence, incapacity or death of either parent.	Yes
3M	Full	No	CalWORKs Legal Immigrant – Unemployed (FFP). Provides aid to families in which a child is deprived because of the unemployment of a parent living in the home.	Yes
3N	Full	No	AFDC – Mandatory Coverage Group Section 1931(b) (FFP). Section 1931 requires Medi-Cal be provided to low-income families who meet the requirements of the AFDC State Plan in effect July 16, 1996.	Yes

All Other Aid Codes (Regular FFP) - Continued				
Code	Benefits	SOC	Program Description	EPSDT
3P	Full	No	AFDC-Unemployed Parent (FFP cash). Aid to families in which a child is deprived because of the unemployment of a parent living in the home and the unemployed parent meets all federal AFDC eligibility requirements. This population is the same as aid code 35, except that they are exempt from the AFDC grant reductions on behalf of the Assistance Payments Demonstration Project/California Work Pays Demonstration Project.	Yes
3R	Full	No	AFDC-FG (FFP) in which the child(ren) is deprived because of the absence, incapacity or death of either parent. This population is the same as aid code 30, except that they are exempt from the AFDC grant reductions on behalf of the Assistance Payments Demonstration Project/California Work Pays Demonstration Project.	Yes
3T	Restricted to Pregnancy and Emergency Services	No	Initial Transitional Medi-Cal (TMC) (FFP). Provides six months of emergency and pregnancy-related initial TMC benefits (no SOC) for aliens who do not have satisfactory immigration status (SIS) and have been discontinued from Section 1931(b) due to increased earnings from employment.	
3U	Full	No	CalWORKS Legal Immigrant – Unemployed (FFP). Provides aid to families in which a child is deprived because of the unemployment of a parent living in the home.	Yes
3V	Restricted to Pregnancy and Emergency Services	No	Section 1931(b) (FFP). Provides emergency and pregnancy-related benefits (no SOC) for aliens without SIS who meet the income, resources and deprivation requirements of the AFDC State Plan in effect July 16, 1996.	
30	Full	No	AFDC-FG (FFP). Provides aid to families with dependent children in a family group in which the child(ren) is deprived because of the absence, incapacity or death of either parent.	Yes
32	Full	No	AFDC-FG (State only non-FFP cash grant) (FFP for Medi-Cal eligibles). Provides aid to families in which a child is deprived because of the absence, incapacity, or death of either parent, who does <u>not</u> meet all federal requirements, but State rules require the individual(s) be aided.	Yes
33	Full	No	AFDC-Unemployed Parent (State-only program non-FFP cash grant) (FFP for Medi-Cal eligibles). Provides aid to pregnant women (before their last trimester) who meet the federal definition of an unemployed parent but are not eligible because there are no other children in the home.	Yes
34	Full	No	AFDC-Medically Needy (FFP). Covers families with deprivation of parental care or support who do not wish or are not eligible for a cash grant but are eligible for Medi-Cal only.	Yes
35	Full	No	AFDC-U (FFP cash). Provides aid to families in which a child is deprived because of unemployment of a parent living in the home and the unemployed parent meets all federal AFDC eligibility requirements.	Yes
36	Full	No	Aid to Disabled Widow/ers (FFP). Covers persons who began receiving Title II SSA before age 60 who were eligible for and receiving SSI/SSP and Title II benefits concurrently and were subsequently discontinued from SSI/SSP but would be eligible to receive SSI/SSP if their Title II disabled widow/ers reduction factor and subsequent Cost-Of-Living Adjustments (COLAs) were disregarded.	Yes
37	Full	Yes	AFDC-Medically Needy (FFP). Covers families with deprivation of parental care or support who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only.	Yes
38	Full	No	Continuing Medi-Cal Eligibility (FFP). <u>Edwards v. Kizer</u> court order provides for uninterrupted, no SOC Medi-Cal benefits for families discontinued from AFDC until the family's eligibility or ineligibility for Medi-Cal only has been determined and an appropriate <i>Notice of Action</i> sent.	Yes

All Other Aid Codes (Regular FFP) - Continued				
Code	Benefits	SOC	Program Description	EPSDT
39	Full	No	Initial Transitional Medi-Cal (TMC) – Six Months Continuing Eligibility (FFP). Provides coverage to certain clients subsequent to AFDC cash grant discontinuance due to increased earnings, increased hours of employment or loss of the \$30 and 1/3 disregard.	Yes
4A	Full	No	Adoption Assistance Program (AAP). Program for AAP children for whom there is a state-only AAP agreement between any state other than California and adoptive parent(s).	Yes
4F	Full	No	Kinship Guardianship Assistance Payment (Kin-GAP). Federal program for children in relative placement receiving cash assistance.	Yes
4G	Full	No	Kin-GAP. State-only program for children in relative placement receiving cash assistance.	Yes
4K	Full	No	Emergency Assistance (EA) Program (FFP). Covers juvenile probation cases placed in foster care.	Yes
4M	Full	No	FORMER FOSTER CARE CHILDREN. This program covers former foster care youth who were in foster care on their eighteenth birthday. Coverage extends until the 21st birthday and provides full-scope, no-cost benefits.	Yes
4P	Full	No	CalWORKs Family Reunification – All Families (FFP). Provides for the continuance of CalWORKs services (includes Medi-Cal) to all families except two parent families, under certain circumstances, when a child has been removed from the home and is receiving out-of-home care	Yes
4R	Full	No	CalWORKs Family Reunification – Two Parent (FFP). Provides for the continuance of CalWORKs services (includes Medi-Cal) to two parent families, under certain circumstances, when a child has been removed from the home and is receiving out-of-home care	Yes
40	Full	No	AFDC-FC/Non-Fed (State FC). Provides financial assistance for those children who are in need of substitute parenting and who have been placed in foster care.	Yes
42	Full	No	AFDC-FC/Fed (FFP). Provides financial assistance for those children who are in need of substitute parenting and who have been placed in foster care.	Yes
44	Restricted to Pregnancy - Related Services	No	Income Disregard Program-Pregnant (FFP), United States Citizen/Permanent Resident Alien/PRUCOL Alien. Provides family planning, pregnancy-related and postpartum services for any age female if family income is at or below 200 percent of the federal poverty level.	
45	Full	No	Children Supported by Public Funds (FFP). Children whose needs are met in whole or in part by public funds other than AFDC-FC.	Yes
47	Full	No	Income Disregard Program- Infant (FFP), United States Citizen, Permanent Resident Alien/PRUCOL Alien. Provides full Medi-Cal benefits to infants up to one year old and continues beyond one year when inpatient status, which began before first birthday, continues and family income is at or below 200 percent of the federal poverty level.	Yes
48	Restricted to Pregnancy - Related Services	No	Income Disregard Program- Pregnant , Undocumented/Nonimmigrant Alien (but otherwise eligible). Provides family planning, pregnancy-related and postpartum services for any age female if family income is at or below 200 percent of the federal poverty level. Routine prenatal care is non-FFP. Labor, delivery and emergency prenatal care are FFP.	
5F	Restricted to Pregnancy and Emergency Services	Y/N	Omnibus Budget Reconciliation Act (OBRA) Aliens. Covers non-immigrant and undocumented aliens who do not have proof of permanent resident alien, PRUCOL or amnesty alien status, but who are otherwise eligible for Medi-Cal.	
5K	Full	No	Emergency Assistance (EA) Program (FFP). Covers child welfare cases placed in EA foster care.	Yes

All Other Aid Codes (Regular FFP) - Continued				
Code	Benefits	SOC	Program Description	EPSDT
5T	Restricted to Pregnancy and Emergency Services	No	Continuing TMC (FFP). Provides an additional six months of continuing emergency and pregnancy-related TMC benefits (no SOC) to qualifying aid code 3T recipients.	
5W	Restricted to Pregnancy and Emergency Services	No	Four Month Continuing (FFP). Provides four months of emergency and pregnancy-related benefits (no SOC) for aliens without SIS who are no longer eligible for Section 1931(b) due to the collection or increased collection of child/spousal support.	
54	Full	No	Four-Month Continuing Eligibility (FFP). Covers persons discontinued from AFDC due to the increased collection of child/spousal support payments but eligible for Medi-Cal only.	Yes
55	Restricted to Pregnancy and Emergency Services	No	This covers Undocumented Aliens in Long Term Care (LTC), but not PRUCOL aliens. LTC services are covered using state-only funds. Emergency and pregnancy-related services are covered using state and federal funds. Recipients remain in this aid code even if they leave LTC.	
58	Restricted to Pregnancy and Emergency Services	Y/N	OBRA Aliens. Covers nonimmigrant and undocumented aliens who do not have proof of permanent resident alien, PRUCOL or amnesty alien status, but who are otherwise eligible for Medi-Cal.	
59	Full	No	Additional TMC – Additional Six Months Continuing Eligibility (FFP). Covers persons discontinued from AFDC due to the expiration of the \$30 plus 1/3 disregard, increased earnings or hours of employment, but eligible for Medi-Cal only, may receive this extension of TMC.	Yes
6A	Full	No	Disabled Adult Child(ren) (DAC)/Blindness (FFP).	Yes
6C	Full	No	Disabled Adult Child(ren) (DAC)/Disabled (FFP).	Yes
6E	Full	No	Continued eligibility for the Disabled (FFP). Covers former SSI beneficiaries who are Disabled (with exception of persons who are deceased or incarcerated in a correctional facility) until the county re-determines their eligibility.	Yes
6G	Full	No	250 Percent Program Working Disabled. Provides full-scope Medi-Cal benefits to working disabled recipients who meet the requirements of the 250 Percent Program.	Yes
6H	Full	No	Federal Poverty Level – Disabled (FPL Disabled). Provides full-scope Medi-Cal (No share of cost) to qualified disabled individuals/couples	Yes
6J	Full	No	SB 87 Pending Disability Program. Provides full scope (no share of cost) benefits to recipients 21 to 65 years of age, who have lost their non-disability linkage to Medi-Cal and are claiming disability. Medi-Cal coverage continues uninterrupted during the determination period.	
6N	Full	No	Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA)/No Longer Disabled Recipients (FFP). Former SSI disabled recipients (adults and children not in aid code 6P) who are appealing their cessation of SSI disability.	Yes
6P	Full	No	PRWORA/No Longer Disabled Children (FFP). Covers children under age 18 who lost SSI cash benefits on or after July 1, 1997, due to PRWORA of 1996, which provides a stricter definition of disability for children.	Yes
6R	Full	Yes	SB 87 Pending Disability (SOC). Covers with an SOC those aged 21 to 65 who have lost their non-disability linkage to Medi-Cal and are claiming disability. Medi-Cal coverage continues uninterrupted during the determination period.	

All Other Aid Codes (Regular FFP) - Continued				
Code	Benefits	SOC	Program Description	EPSDT
6U	Restricted to Pregnancy and Emergency Services	No	Restricted Federal Poverty Level – Disabled (Restricted FPL-Disabled). Provides emergency and pregnancy-related benefits (no share of cost) to qualified disabled individuals/couples who do not have satisfactory immigration status	
6V	Full	No	Aid to the Disabled – DDS Waiver (FFP). Covers persons who qualify for the Department of Developmental Services (DDS) Regional Waiver.	Yes
6W	Full	Yes	Aid to the Disabled – DDS Waiver SOC (FFP). Covers persons who qualify for the DDS Regional Waiver.	Yes
6X	Full	No	Aid to the Disabled – Model Waiver (FFP). Covers persons who qualify for the Model Waiver.	Yes
6Y	Full	Yes	Aid to the Disabled – Model Waiver SOC (FFP). Covers persons who qualify for the Model Waiver.	Yes
60	Full	No	SSI/SSP Aid to the Disabled (FFP). A cash assistance program administered by the SSA that pays a cash grant to needy persons who meet the federal definition of disability.	Yes
63	Full	Y/N	Aid to the Disabled – LTC Status (FFP). Covers persons who meet the federal definition of disability who are medically needy and in LTC status.	Yes
64	Full	No	Aid to the Disabled – Medically Needy (FFP). Covers persons who meet the federal definition of disability and do not wish or are not eligible for cash grant, but are eligible for Medi-Cal only.	Yes
65	Full	Y/N	1115 Waiver five months of eligibility for Evacuees of Hurricane Katrina. Applications 8/24/05 to 1/31/06. Final date of any waiver eligibility 5/31/06.	Yes
66	Full	No	Aid to the Disabled Pickle Eligibles (FFP). Covers persons who meet the federal definition of disability and are covered by the provisions of the Lynch v. Rank lawsuit. No age limit for this aid code.	Yes
67	Full	Yes	Aid to the Disabled – Medically Needy, SOC (FFP). (See aid code 64 for definition of Disabled – Medically Needy).	Yes
68	Full	No	Aid to the Disabled IHSS (FFP). Covers persons who meet the federal definition of disability and are eligible for IHSS. (See aid code 18 for definition of eligibility for IHSS).	Yes
69	Restricted to Emergency Services	No	Income Disregard Program. Infant (FFP) – Undocumented/Nonimmigrant Alien (but otherwise eligible). Provides emergency services only for infants under 1 year of age and beyond 1 year when inpatient status, which began before 1 st birthday, continues and family income is at or below 200 percent of the federal poverty level.	
7A	Full	No	100 Percent Program. Child (FFP) – United States Citizen, Lawful Permanent Resident/PRUCOL/(IRCA Amnesty Alien [ABD or Under 18]). Provides full benefits to otherwise eligible children, ages 6 to 19 and beyond 19 when inpatient status began before the 19 th birthday and family income is at or below 100 percent of the federal poverty level.	Yes
7C	Restricted to Pregnancy and Emergency Services	No	100 Percent Program. Child – Undocumented/Nonimmigrant Status/[IRCA Amnesty Alien (Not ABD or Under 18)]. Covers emergency and pregnancy related services to otherwise eligible children, ages 6 to 19 and beyond 19 when inpatient status begins before the 19 th birthday and family income is at or below 100 percent of the federal poverty level.	
7J	Full	No	Continuous Eligibility for Children (CEC) program. Provides full-scope benefits to children up to the 19 years of age who would otherwise lose their share of cost	Yes
7K	Restricted to Pregnancy and Emergency Services	No	Continuous Eligibility for Children (CEC) program. Provides emergency and pregnancy-related benefits (no share of cost) to children up to 19 years of age who would otherwise lose their no share of cost Medi-Cal.	

All Other Aid Codes (Regular FFP) - Continued				
Code	Benefits	SOC	Program Description	EPSDT
72	Full	No	133 Percent Program. Child-United States Citizen, Permanent Resident Alien/PRUCOL Alien (FFP). Provides full Medi-Cal benefits to children ages 1 up to 6, and beyond 6 years when inpatient status, which began before 6 th birthday, continues, and family income is at or below 133 percent of the federal poverty level.	Yes
76	Restricted to 60-day Postpartum Services	No	60-Day Postpartum Program (FFP). Provides Medi-Cal at no SOC to women who, while pregnant, were eligible for, applied for, and received Medi-Cal benefits. They may continue to be eligible for all-postpartum services and family planning. This coverage begins on the last day of pregnancy and ends the last day of the month in which the 60 th day occurs.	
8E	Full	No	Accelerated Enrollment. Provides immediate, temporary, fee-for-service, full scope Medi-Cal benefits to children under the age of 19.	Yes
8G	Full	No	Qualified Severely Impaired Working Individual Program Aid Code. Allows recipients of the Qualified Severely Impaired Working Individual Program to continue their Medi-Cal eligibility.	Yes
8W	Full	No	Medically Indigent (MI)-Accelerated Enrollment (AE)- CHDP Gateway for Medi-Cal. Provides for the pre-enrollment of CHILDREN into the Medi-Cal program who are Screened as No Cost Medi-Cal Eligibles . Provides Temporary , full scope Medi-Cal benefits with no SOC.	Yes
80	Restricted to Medicare Expenses	No	Qualified Medicare Beneficiary (QMB). Provides payment of Medicare Part A premium and Part A and B coinsurance and deductibles for eligible low income aged, blind, or disabled individuals.	
82	Full	No	MI-Person (FFP). Covers medically indigent persons under 21 who meet the eligibility requirements of medical indigence. Covers persons until the age of 22 who were in an institution for mental disease before age 21. Persons may continue to be eligible under aid code 82 until age 22 if they have filed for a State hearing.	Yes
83	Full	Yes	MI-Person SOC (FFP). Covers medically indigent persons under 21 who meet the eligibility requirements of medical indigence.	Yes
86	Full	No	MI-Confirmed Pregnancy (FFP). Covers persons aged 21 years or older, with confirmed pregnancy, who meets the eligibility requirements of medical indigence.	
87	Full	Yes	MI-Confirmed Pregnancy SOC (FFP). Covers person's aged 21 or older, with confirmed pregnancy, who meet the eligibility requirements of medical indigence but are not eligible for 185 percent/200 percent or the Medically Needy programs.	
C1	Restricted to Pregnancy and Emergency Services	No	OBRA Aliens and Unverified Citizens. Covers eligible aliens who do not have satisfactory immigration status and unverified citizens. Aid to the Aged-Medically Needy (FFP). Covers persons 65 years of age or older who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only.	
C2	Restricted to Pregnancy and Emergency Services	Yes	OBRA Aliens and Unverified Citizens. Covers eligible aliens who do not have satisfactory immigration status and unverified citizens. Aid to the Aged-Medically Needy SOC (FFP). Covers persons 65 years of age or older who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only.	
C3	Restricted to Pregnancy and Emergency Services	No	OBRA Aliens and Unverified Citizens. Covers eligible aliens who do not have satisfactory immigration status and unverified citizens. Blind-Medically Needy (FFP). Covers persons who meet the federal criteria for blindness who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only.	Yes
C4	Restricted to Pregnancy and Emergency Services	Yes	OBRA Aliens and Unverified Citizens. Covers eligible aliens who do not have satisfactory immigration status and unverified citizens. Blind-Medically Needy SOC (FFP). Covers persons who meet the federal criteria for blindness who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only.	Yes

All Other Aid Codes (Regular FFP) - Continued				
Code	Benefits	SOC	Program Description	EPSDT
C5	Restricted to Pregnancy and Emergency Services	No	OBRA Aliens and Unverified Citizens. Covers eligible aliens who do not have satisfactory immigration status and unverified citizens. AFDC–Medically Needy (FFP). Covers families with deprivation of parental care or support who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only.	Yes
C6	Restricted to Pregnancy and Emergency Services	Yes	OBRA Aliens and Unverified Citizens. Covers eligible aliens who do not have satisfactory immigration status and unverified citizens. AFDC–Medically Needy SOC (FFP). Covers families with deprivation of parental care or support who do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only.	Yes
C7	Restricted to Pregnancy and Emergency Services	No	OBRA Aliens and Unverified Citizens. Covers eligible aliens who do not have satisfactory immigration status and unverified citizens. Disabled–Medically Needy (FFP). Covers persons who meet the federal definition of disability and do not wish or are not eligible for a cash grant, but are eligible for Medi-Cal only.	Yes
C8	Restricted to Pregnancy and Emergency Services	Yes	OBRA Aliens and Unverified Citizens. Covers eligible aliens who do not have satisfactory immigration status and unverified citizens. Aid to the Disabled–Medically Needy SOC (FFP).	Yes
C9	Restricted to Pregnancy and Emergency Services	No	OBRA Aliens and Unverified Citizens. Covers eligible aliens who do not have satisfactory immigration status and unverified citizens. MI person (FFP). Covers medically indigent persons under age 21 who meet the eligibility requirements of medical indigence. Covers persons until the age of 22 who were in an institution for mental disease before age 21. Persons may continue to be eligible under aid code 82 until age 22 if they have filed for a State hearing.	Yes
D1	Restricted to Pregnancy and Emergency Services	Yes	OBRA Aliens and Unverified Citizens. Covers eligible aliens who do not have satisfactory immigration status and unverified citizens. MI–Child SOC (FFP). Covers medically indigent persons under age 21 who meet the eligibility requirements of medical indigence.	Yes
D2	Restricted to Pregnancy and Emergency Services	No	OBRA Aliens–Not PRUCOL and Unverified Citizens–LTC services. Covers eligible undocumented aliens in LTC who are not PRUCOL and unverified citizens. Recipients will remain in this aid code even if they leave LTC. For more information about LTC services, refer to the OBRA and IRCA section in the Medi-Cal Provider Manual. Aid to the Aged–LTC (FFP). Covers persons 65 years of age or older who are medically needy and in LTC status. Providers Note: LTC services refer to both those services included in the per diem base rate of the LTC provider, and those medically necessary services required as part of the patient’s day–to–day plan of care in the LTC facility (for example, pharmacy, support services and therapies).	
D3	Restricted to Pregnancy and Emergency Services	Yes	OBRA Aliens–Not PRUCOL and Unverified Citizens – Long Term Care (LTC) services. Covers eligible undocumented aliens in LTC who are not PRUCOL and unverified citizens. Recipients will remain in this aid code even if they leave LTC. For more information about LTC services, refer to the OBRA and IRCA section in the Medi-Cal Provider Manual. Aid to the Aged–LTC (FFP) SOC. Covers persons 65 years of age or older who are medically needy and in LTC status. Providers Note: LTC services refer to both those services included in the per diem base rate of the LTC provider, and those medically necessary services required as part of the patient’s day–to–day plan of care in the LTC facility (for example, pharmacy, support services and therapies).	

All Other Aid Codes (Regular FFP) - Continued				
Code	Benefits	SOC	Program Description	EPSDT
D4	Restricted to Pregnancy and Emergency Services	No	OBRA Aliens–Not PRUCOL and Unverified Citizens–LTC services. Covers eligible undocumented aliens in LTC who are not PRUCOL and unverified citizens. Recipients will remain in this aid code even if they leave LTC. For more information about LTC services, refer to the OBRA and IRCA section in the Medi-Cal Provider Manual. Aid to the Blind–LTC Status (FFP). Covers persons who meet the federal criteria for blindness, are medically needy, and are in LTC status.	Yes
D5	Restricted to Pregnancy and Emergency Services	Yes	OBRA Aliens–Not PRUCOL and Unverified Citizens–LTC services. Covers eligible undocumented aliens in LTC who are not PRUCOL and unverified citizens. Recipients will remain in this aid code even if they leave LTC. For more information about LTC services, refer to the OBRA and IRCA section in the Medi-Cal Provider Manual. Aid to the Blind–LTC, SOC (FFP). Covers persons who meet the federal criteria for blindness, are medically needy, and are in LTC status. Providers Note: LTC services refer to both those services included in the per diem base rate of the LTC provider, and those medically necessary services required as part of the patient’s day–to–day plan of care in the LTC facility (for example, pharmacy, support services and therapies).	Yes
D6	Restricted to Pregnancy and Emergency Services	No	OBRA Aliens–Not PRUCOL and Unverified Citizens–LTC services. Covers eligible undocumented aliens in LTC who are not PRUCOL and unverified citizens. Recipients will remain in this aid code even if they leave LTC. For more information about LTC services, refer to the OBRA and IRCA section in the Medi-Cal Provider Manual. Aid to the Disabled–LTC status (FFP). Covers persons who meet the federal definition of disability, are medically needy, and are in LTC status.	Yes
D7	Restricted to Pregnancy and Emergency Services	Yes	OBRA Aliens–Not PRUCOL and Unverified Citizens–LTC services. Covers eligible undocumented aliens in LTC who are not PRUCOL and unverified citizens. Recipients will remain in this aid code even if they leave LTC. For more information about LTC services, refer to the OBRA and IRCA section in the Medi-Cal Provider Manual. Aid to the Disabled–LTC, SOC (FFP). Covers persons who meet the federal definition of disability, are medically needy, and are in LTC status. Providers Note: LTC services refer to both those services included in the per diem base rate of the LTC provider, and those medically necessary services required as part of the patient’s day–to–day plan of care in the LTC facility (for example, pharmacy, support services and therapies).	Yes
D8	Restricted to Pregnancy and Emergency Services	No	OBRA Aliens and Unverified Citizens–Pregnant Women. Covers eligible pregnant alien women who do not have satisfactory immigration status and unverified citizens. MI–Confirmed Pregnancy (FFP). Covers persons aged 21 or older, with confirmed pregnancy, who meet the eligibility requirements of medical indigence but are not eligible for 185 percent/200 percent or the Medically Needy programs.	
D9	Restricted to Pregnancy and Emergency Services	Yes	OBRA Aliens and Unverified Citizens–Pregnant Women. Covers eligible pregnant alien women who do not have satisfactory immigration status and unverified citizens. MI–Confirmed Pregnancy SOC (FFP). Covers persons aged 21 or older, with confirmed pregnancy, who meet the eligibility requirements of medical indigence but are not eligible for 185 percent/200 percent or the Medically Needy programs.	

State Funds Only (Zero FFP)				
Code	Benefits	SOC	Program Description	EPSDT
7M	Restricted Valid for Minor Consent Services	Y/N	Minor Consent Program. Covers minors age 12 and under 21. Limited services related to sexually transmitted diseases, sexual assault, drug and alcohol abuse, and family planning.	
7N	Restricted Valid for Minor Consent Services	No	Minor Consent Program. Covers pregnant female minors under age 21. Limited to services related to pregnancy and family planning.	
7P	Restricted Valid for Minor Consent Services	Y/N	Minor Consent Program. Covers minors age 12 and under 21. Limited services related to sexually transmitted diseases, sexual assault, drug and alcohol abuse, family planning, and outpatient mental health treatment.	