

**CALIFORNIA DEPARTMENT OF CHILD SUPPORT SERVICES**

P.O. Box 419064, Rancho Cordova, CA 95741-9064



February 24, 2006

CSS LETTER: 06-08

ALL IV-D DIRECTORS  
ALL COUNTY ADMINISTRATIVE OFFICERS  
ALL BOARDS OF SUPERVISORS

SUBJECT: AID CODE PROJECT

Reason for this Transmittal

- State Law or Regulation Change
- Federal Law or Regulation Change
- Court Order or Settlement Change
- Clarification requested by One or More Counties
- Initiated by DCSS

This letter is regarding the aid code project conducted by the Department of Child Support Services (DCSS) and supported by the California Department of Social Services (CDSS), Department of Health Services (DHS), Health and Human Services Agency – Office of Systems Integration, and local child support agencies (LCSAs). The goal of the project is to minimize the impact of IV-A conversions on the IV-D programs.

This project's objective is to research the aid codes that have been identified by the LCSAs as critical to the conversion, provide definitions of aid code categories, and summarize any transitional descriptions. Fifty-seven aid codes have been identified as priority. Of the 57 aid codes identified by the LCSAs for research, the majority were medical aid codes.

The IV-A system refers numerous cases with aid codes that are not known to the IV-D systems. The IV-D system rejects referrals with unknown aid codes as "exceptions" on an error report. The LCSAs work the error report manually to determine if the case was properly referred to child support and if so, how the funds from the case should be applied. The purpose is to achieve a reduction in the number of referrals of unknown aid codes in an effort to decrease the LCSA's manual workload.

Since many aid codes are currently not in use or have not fallen out to the exception reports, this project has not addressed all of the approximately 150 aid codes listed on the Medi-Cal Eligibility Data System (MEDS) - Aid Codes Quick Reference Guide. Instead efforts were concentrated on the investigation and definition of the 57 critical aid codes the LCSAs identified. DCSS will resolve future aid code issues as they are identified.

The attached Aid Code Analysis Matrix consists of five category aid code identifiers: 1) Referable; 2) Recoupable; 3) Reportable (Active or Terminated); 4) Enforceable; and/or 5) IV-A/IV-D Interface, along with a comment field.

**IV-A/IV-D Interface: System Related** – The column in the Matrix titled, IV-A/IV-D Interface pertains to system related data that may be needed for proper IV-D case construct. As counties convert onto CalWIN, CASES allows family members to have alternate medical aid codes from their dependents (children in programs that can be referred to IV-D). The Medi-Cal aid codes indicated as “yes” in this column are the codes that are not considered as referable, recoupable, reportable or enforceable, but may be required data for transmitting complete case information to IV-D.

For example: as a referable “child” aid code interfaces from IV-A to IV-D, the non-referable medical aid code connected with the aided Custodial Party/Non-Custodial Parent/Other is not allowed to come over with the child. This disrupts case construct, [i.e., parent(s) falls off the case and does not come over to IV-D linked with the child/children] and the case falls to the error listing generating additional manual workload for LCSA case workers.

The medical aid codes indicated as “yes” in the IV-A/IV-D Interface column may be added to the County Sharing Ratio (CSR) screen at the county level. Adding these aid codes to the CSR table will allow people with that aid code [who are in the household] to remain part of the “intact family,” thus reducing the requirement to manually work this error list. However, the decision to expand the CSR table must be determined independently by each county.

**Medi-Cal Aid Codes** - In April 2005, DCSS circulated a comprehensive listing of all public assistance and Medi-Cal aid codes applicable to children. The DCSS Master Aid Code Listing was provided in the LCSA Letter 05-12, dated April 19, 2005. As a result of this project Medi-Cal has identified **an additional four** aid codes that have been found to meet the criteria for referral to the LCSAs for medical support enforcement. The aid codes and definitions are as follows:

**6H: Disabled – Federal Poverty Level Program:** Aged or disabled individuals not in Long-Term Care (LTC) qualify upon determination based on medically needy rules at 100 percent of federal poverty level. Disabled individuals in the program are not subject to an age limitation and can include children who are disabled. Information on this aid code can be found in DHS All County Welfare Directors Letter (ACWDL) 00-57, dated November 14, 2000.

**26: Blind – Pickle Eligible:** Aid to the blind Pickle eligibles. Covers persons who meet the federal definition of blind and are covered by the provisions of the *Lynch v. Rank* lawsuit. There are no age limitations for this aid code.

Referrals could be made for recipients in the Pickle program under age 18. For more information, refer to DHS ACWDL 83-74, dated November 15, 1983.

**63: Disabled – Long Term Care:** Aid to the disabled Pickle eligibles. LTC status covers persons between 21 and 64 years of age who meet the federal definition of disability and who are medically needy in LTC status. However, referrals are made for recipients in the Pickle program who are disabled and under age 18. Reference to this aid code can be found in DHS ACWDL 91-98, dated November 4, 1991.

**66: Disabled – Pickle Eligible:** Aid to the disabled Pickle eligibles. Covers persons who meet the federal definition of disability and are covered by the provisions of the *Lynch v. Rank* lawsuit. There are no age limitations for this aid code. Referrals are made for recipients in the Pickle program under age 18. For information on this aid code, please refer to DHS ACWDL 83-74, dated November 15, 1983.

If you have any questions or concerns regarding the aid codes, please contact Trish Salvesson, Manager, Financial Management Policy Unit at (916) 464-5226. Please direct any questions concerning the CalWIN Interface to Michele Murphy, IV-A/IV-D Interface Team, California Child Support Automation Systems (CCSAS) Interface Management Branch at (916) 464-5600.

Sincerely,

s/KAREN ECHEVERRIA

KAREN ECHEVERRIA  
Acting Deputy Director  
Child Support Services Division

Attachment

## Aid Code Analysis Matrix

No.	Aid Code <sup>1</sup>	MEDS Description <sup>2</sup>	Effective <sup>3</sup>	Type <sup>4</sup>	Referable <sup>5</sup>	Recoupable <sup>6</sup>	(A) Reportable <sup>7</sup>	(T) Reportable <sup>8</sup>	Enforceable <sup>9</sup>	IV-A/IV-D Interface <sup>10</sup>	Comments
1.	<b>01</b>	<b>RCA</b> - Refugee Cash Assistance	7/1/89	N/W	No	No	No	No	No	No	If a child is subsequently placed into CalWORKs, KinGAP, or Foster Care, the case could be referred as a regular aided case. <b>ACWDL 90-95</b>
2.	<b>02</b>	<b>RMA</b> - Refugee Medical Assistance	7/1/89	MC	No	No	No	No	No	No	If a child is CalWORKs, KinGAP, Foster Care, or Medi-Cal eligible, the case could be referred as a regular aided case. <b>ACWDL 90-95</b>
3.	<b>03</b> \$2	<b>AAP</b> - Adoption Assistance Program - Federal	10/1/82	MC	No	No	No	No	No	No	Listed on the DCSS Master Aid Code Listing in the Foster Care category. No adopted children are referred. Cash grant program to facilitate hard to place children who would require permanent foster care placement without such assistance. (FFP) <b>ACIN I-131-82</b>
4.	<b>04</b> \$2	<b>AAP/AAC</b> Adoption Assistance Program Aid for Adoption of Children	10/1/82	MC	No	No	No	No	No	No	Listed on the DCSS Master Aid Code Listing in the Foster Care category. No adopted children are referred - Covers cash grant children receiving Medi-Cal eligibility through AAP/AAC benefits. (Non-FFP) <b>ACIN I-131-82</b>
5.	<b>05</b>	<b>SED</b> - Seriously Emotionally Disturbed (cash grant only)	7/1/86	MC	No	No	No	No	No	No	Listed on the DCSS Master Aid Code Listing in the Foster Care category. No Medi-Cal issued. (Non-FFP) <b>ACWDL 86-63</b>
6.	<b>09</b>	<b>FS</b> - Food Stamp Program	8/8/03	N/W	No	No	No	No	No	No	This code is not attributed to public welfare recipients, but needs a case number to receive food stamps. Recipients are not bound by cash assistance regulations and therefore not subject to child support enforcement activities. <b>ACL 03-64</b>
7.	<b>0A</b>	<b>RCA</b> - Refugee Cash Assistance - Exempt	7/1/89	N/W	No	No	No	No	No	No	Same as aid code 01 with the exception of exemption from grant reductions of behalf of the Assistance Payments Demonstration Project/California Work Pays Demonstration Project. <b>ACWDL 90-95</b>
8.	<b>0F</b>	Transitional Food Stamp Program	10/1/04	N/W	No	No	No	No	No	No	Should not be listed on LCSA's table for recoupment. Helps families retain FS after leaving CalWORKs - According to MEDS Reference Guide, this is not a valid aid code. <b>ACL 03-66 ACIN I-58-03</b>

## Aid Code Analysis Matrix

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9.	<b>14</b>	<b>Aged - MN - Medically Needy</b>	1/1/88	MC	No	No	No	No	No	Yes	An OBRA alien, categorically linked as aged, medically needy, over 65 years of age, whose disability was denied but is/was in an intermediate care facility or skilled nursing facility. <b>ACWDL 91-98</b>
10.	<b>17</b>	<b>Aged - MN - SCO Medically Needy- Share of Cost</b>	1/1/88	MC	No	No	No	No	No	Yes	Categorically linked as aged, medically needy, over 65 years of age, whose disability was denied but is/was in an intermediate care facility or skilled nursing facility. <b>ACWDL 91-98</b>
11.	<b>1H</b>	<b>Aged - FPL Program Federal Poverty Level Program</b>	1/1/01	MC	No	No	No	No	No	No	Disabled individuals are not subject to an age limitation, research must be conducted within counties. Disabled children need to be evaluated for this program and would be reported under 6H. <b>ACWDL 00-57</b>
12.	<b>22 *</b>	<b>Blind - SC Special Circumstances</b>	1/1/98	N/W	No	No	No	No	No	No	Reinstated aid code, provides a nonrecurring cash grant to eligible SSI/SSP recipients. Not valid for reporting to MEDS. <b>ACL -98-95</b>
13.	<b>26</b>	<b>Blind - Pickle eligible</b>	9/1/78	MC	Yes	No	No	No	Yes	Does not apply when referable	<b>Referable</b> - Listed on the DCSS Master Aid Code Listing in the Medi-Cal category as referable and enforceable. Referrals could be made for recipients in the Pickle program under age 18.
14.	<b>3D</b>	<b>CalWORKs pending, Medi-Cal eligible Cash grant authorization</b>	7/1/04	MC/CW	No	No	No	No	No	No	Not enforceable in a CalWORKs aid code until receipt of required documentation. Not referable until last trimester. <b>ACL 04-22</b>
15.	<b>3V#</b>	<b>AFDC - 1931(b) Non CalWORKS - ESO - Emergency Services Only</b>	3/1/99	MC	No	No	No	No	No	Yes	Designated for Not-Qualified aliens and therefore, not referable for child support services. <b>ACWDL 98-56</b>
16.	<b>38</b>	<b>Edwards vs. Kizer</b>	7/1/90	MC	No	No	No	No	No	Yes	No referrals for persons in transitional Medi-Cal. A subsequent application for Medi-Cal Only must be opened as new case. <b>ACWDL 90-53</b>

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17.	<b>39</b>	<b>Initial TMC</b> - Transitional Medi-Cal 6 months	4/1/90	MC	No	No	No	No	No	Yes	Family was initially in CalWORKs. A subsequent application for Medi-Cal must be opened as new case. No referrals for persons in transitional Medi-Cal. <b>ACWDL 90-32</b>
18.	<b>4A</b> \$2	<b>Out of State AAP Children</b>	1/1/00	MC	No	No	No	No	No	No	Adopted children are not referred for medical enforcement. IV-A should not transmit these cases in their interface/referral process. <b>ACWDL 00-22</b>
19.	<b>4M</b>	<b>Former Foster Care Child</b>	10/1/00	FC/MC	No	No	No	No	No	Yes	Emancipated youths. Transition foster care youths previously in aid codes; 40, 42, 4C, or 5K, automatically to this extended Medi-Cal program after being terminated from foster care. <b>ACWDL 00-41 and 00-61</b>
20.	<b>53</b>	<b>MI-LTC</b> Medically Indigent - Long Term Care	1/1/83	MC	No	No	No	No	No	Yes	Designated for undocumented non-linked immigrant patients age 21 or older in LTC facilities receives State-only LTC services, but not the full scope of Medi-Cal benefits. <b>ACWDL 82-59</b>
21.	<b>54</b>	<b>Four Month Continuing</b>	1/1/83	CW/MC	No	No	No	No	No	Yes	Family was initially in CalWORKs. A subsequent application for Medi-Cal must be opened as new case. According to the Medi-Cal Procedures Manual, no referrals are made for persons in transitional Medi-Cal. <b>ACWDL 82-66</b>
22.	<b>55#</b>	<b>OBRA not PRUCOL LTC</b> Omnibus Budget Reconciliation Act Permanent Resident Under Color of Law Long Term Care	1/1/88	MC	No	No	No	No	No	Yes	Referrals are not made on OBRA Aliens without PRUCOL or Amnesty Alien status. But otherwise eligible for Medi-Cal ESO. <b>ACWDL 91-99</b>
23.	<b>58#</b>	<b>OBRA Alien</b> Omnibus Budget Reconciliation Act	1/1/88	MC	No	No	No	No	No	Yes	Referrals are not made on OBRA Aliens under PRUCOL or Amnesty Alien status. But otherwise eligible for Medi-Cal ESO. <b>ACWDL 87-55</b>
24.	<b>59</b>	<b>Continuing TMC (6 months)</b> Transitional Medi-Cal	1/1/90	MC	No	No	No	No	No	Yes	To be eligible, the principal earner or caretaker must have a child living in the home of the previously aided household. This aid code should accurately transmit these cases in the IV-A/IV-D interface/referral process. <b>ACWDL 90-32</b>

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25.	<b>5F#</b>	<b>OBRA Alien-Pregnant Woman</b> Omnibus Budget Reconciliation Act	10/1/94	MC	No	No	No	No	No	Yes	Restricted to emergency and state-only funded non-emergency pregnancy-related services. Referrals are not made on OBRA Aliens under PRUCOL or Amnesty Alien status. <b>ACWDL 94-60</b>
26.	<b>5J#</b>	<b>SB87 Pending Disability SOC</b> Share of Cost	7/1/01	MC	No	No	No	No	No	Yes	Transitional - used for lost linkage to Medi-Cal when the potential basis for eligibility is (the allegation of) disability. If subsequently certified, the case would transfer into a qualified disability aid code to continue eligibility. <b>ACWDL 02-40</b>
27.	<b>5T#</b>	<b>Continuing TMC - ESO</b> Transitional Medi-Cal Emergency Services Only	10/1/98	MC	No	No	No	No	No	No	Emancipated/undocumented persons are not referred to child support. If a parent is on TMC, the child(ren) are not referred. <b>ACWDL 98-56</b>
28.	<b>5W#</b>	<b>Four month continuing - Pregnancy + ESO</b> Emergency Services Only	3/1/99	MC	No	No	No	No	No	No	Restricted to services for pregnant woman or pregnancy related emergency services. Emancipated/undocumented aliens are not referred to child support. <b>ACWDL 98-56</b>
29.	<b>5X</b>	<b>2nd year TMC (1 year) age 19 &amp; older (expired 9/30/2003)</b> Transitional Medi-Cal	10/1/98	MC	No	No	No	No	No	No	Designated as TMC for qualified alien emancipated youths aged 19 or older, participants required redetermination. This aid code expired September 30, 2003. <b>ACWDL 03-45</b>
30.	<b>63</b>	<b>Disabled - LTC</b> Long Term Care	1/1/90	MC	Yes	No	No	No	Yes	Does not apply when referable	<b>Referable</b> - Listed on the DCSS Master Aid Code Listing in the Medi-Cal category. This aid code may include disabled children in long-term care. <b>ACWDL 91-98</b>
31.	<b>66</b>	<b>Disabled - Pickle eligible</b>	9/1/78	MC	Yes	No	No	No	Yes	Does not apply when referable	<b>Referable</b> - Listed on the DCSS Master Aid Code Listing in the Medi-Cal category. Referrals could be made for recipients in the Pickle program under age 18. <b>ACWDL 83-74</b>
32.	<b>69#</b>	<b>200% - Infant OBRA</b>	10/1/89	MC	No	No	No	No	No	Yes	Poverty level program for pregnant women and babies up to one year old. Medical support enforcement referrals will not be made on undocumented children. <b>ACWDL 90-16</b>

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33.	<b>6C</b>	<b>DAC - Disabled</b> Disabled Adult Children	8/1/93	MC	No	No	No	No	No	No	Members of this group are considered emancipated youths, (described as 18 years of age or older), and are not to be referred for medical support enforcement. <b>ACWDL- 93-36</b>
34.	<b>6G</b>	<b>250% Income Level for the Working Disabled</b>	4/1/00	MC	No	No	No	No	No	Yes	Employed disabled undocumented aliens whose net family income is below 250 FPL and who are entitled to full-scope Medi-Cal benefits. <b>ACWDL 99-67</b>
35.	<b>6H</b>	<b>Disabled - FPL</b> Federal Poverty Level	1/1/01	MC	Yes	No	No	No	Yes	Does not apply when referable	<b>Referable</b> - Listed on the DCSS Master Aid Code Listing in the Medi-Cal category. This program is not subject to an age limitation and may include disabled children. <b>ACWDL 00-57</b>
36.	<b>6J</b>	<b>SB87 Pending Disability</b>	7/1/01	Mc	No	No	No	No	No	Yes	Transitional - used for lost linkage to Medi-Cal when the potential basis for eligibility is (the allegation of) disability. If subsequently certified, the case would transfer into a qualified disability aid code to continue eligibility. <b>ACWDL 02-40</b>
37.	<b>6R</b>	<b>SB87 Pending Disability SOC</b> Share of Cost	7/1/97	MC	No	No	No	No	No	Yes	Transitional Medi-Cal (TMC) aid code assigned when the potential basis for eligibility is [the allegation of] disability. If a parent in on TMC, the child(ren) are not referred. <b>ACWDL 02-40</b>
38.	<b>6V</b>	<b>DDS Waivers (No SOC)</b> No Share of Cost	7/1/99	MC	No	No	No	No	No	No	No referrals from IV-A to IV-D because persons in the Department of Developmental Services and Model Waivers are in their own Medi-Cal Family Budget Unit (MFBU). <b>ACWDL 95-10</b>
39.	<b>74#</b>	<b>133% - Undoc/Temporary Visa (OBRA)</b>	7/1/90	MC	No	No	No	No	No	Yes	Extends medical assistance eligibility - Medi-Cal Procedures manual explains that this population of undocumented/temporary visa/entitled to emergency services only are not a referable population. <b>ACWDL 90-61</b>
40.	<b>76# \$2</b>	<b>60 Day Postpartum</b>	1/1/88	MC	No	No	No	No	No	No	Medical support referrals will not be made on an unborn child until the end of the 60-day postpartum period of the mother. <b>ACWDL 87-80</b>



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41.	<b>7C#</b>	<b>100% OBRA Child</b>	11/1/91	MC	No	No	No	No	No	No	No undocumented children are to be referred for medical support enforcement unless children are citizens. IV-A should not transmit these cases in interface/referral process. <b>ACWDL 91-61</b>
42.	<b>7H# \$9</b>	<b>Tuberculosis</b>	10/1/94	MC	No	No	No	No	No	No	A limited services program, only available for outpatient TB-related services. Undocumented aliens are not eligible for this program. <b>ACWDL 94-67</b>
43.	<b>7K#</b>	<b>CEC - Undocumented</b> Continuous Eligibility for Children	1/1/01	MC	No	No	No	No	No	No	Restricted benefits - referrals for medical support enforcement are not made on non-citizen children. <b>ACWDL 01-01</b>
44.	<b>80# \$8</b>	<b>QMB</b> Qualified Medicare Beneficiary	1/1/90	MC	No	No	No	No	No	Yes	Restricted to Medicare premiums, co-insurance, and deductibles for qualified Medicare beneficiaries. <b>ACWDL 89-80</b>
45.	<b>81</b>	<b>MI - APP</b> Medically Indigent Aid Paid Pending	12/10/91	MC	No	No	No	No	No	No	Individuals 21 or more years of age in an institution for mental diseases - converted to Aid Code 82 (FFP) <b>ACWDL 91-115, terminated aid code 81.</b> <b>ACWDL 95-32</b>
46.	<b>82</b>	<b>MI - C</b> Medical Indigent - Children	7/1/95	MC	No	No	No	No	No	No	Individuals 21 years of age and under in an institution for mental diseases. Children who receive inpatient services prior to 21st birthday continuously to age 22. <b>ACWDL 95-32</b>
47.	<b>83</b>	<b>MI - C SOC</b> Medical Indigent - Children Share of Cost	3/24/82	MC	No	No	No	No	No	No	Used for Medically Indigent children that are relinquished for adoption or placement in foster care. Undocumented children are not referred to child support. <b>ACWDL 82-21</b>
48.	<b>86</b>	<b>MI - CP</b> Medical Indigent Confirmed Pregnancy	1/1/83	MC	No	No	No	No	No	No	Under Medi-Cal regulations, individuals over 21 years of age are not considered children. <b>ACWDL 82-59</b>
49.	<b>87</b>	<b>MI - CP SOC</b> Medical Indigent Confirmed Pregnancy Share of Cost	1/1/83	MC	No	No	No	No	No	No	Infants are referred at the end of the 60-day post partum period. Under Medi-Cal regulations, individuals over 21 years of age are not considered children. <b>ACWDL 82-59</b>

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50.	<b>8C \$8</b>	<b>SLMB</b> Specified Low-Income Medicare Beneficiary	1/1/93	MC	No	No	No	No	No	Yes	Undocumented (usually aged, disabled) in specified low-income Medicare beneficiaries (SLMB) program. Children would not be referred for medical support enforcement. <b>ACWDL 92-61</b>
51.	<b>8N#</b>	<b>133% Excess Property Child - ESO</b> Emergency Services Only	12/1/98	MC	No	No	No	No	No	No	Covers emergency services only to otherwise eligible children. <b>ACWDL 98-46</b>
52.	<b>8P</b>	<b>133% Excess Property Child</b>	12/1/98	MC	Yes	No	No	No	Yes	Does not apply when referable	<b>Referable</b> - Listed on the DCSS Master Aid Code Listing in the Medi-Cal category. Eligible citizen below poverty level. <b>ACWDL 98-46</b>
53.	<b>8R</b>	<b>100% Excess Property Child</b>	12/1/98	MC	Yes	No	No	No	Yes	Does not apply when referable	<b>Referable</b> - Listed on the DCSS Master Aid Code Listing in the Medi-Cal category. Eligible citizen below poverty level. <b>ACWDL 98-46</b>
54.	<b>8T#</b>	<b>100% Excess Property Child - Pregnancy - ESO</b> Emergency Services Only	12/1/98	MC	No	No	No	No	No	No	Covers emergency and pregnancy-related services only to otherwise eligible children. IV-A should not transmit these cases in their interface/referral process. <b>ACWDL 98-46</b>
55.	<b>97</b>	<b>GR/GA (for county use)</b>	1/1/81	N/W	No	No	No	No	No	No	<i>County only aid code:</i> Requires direct contact at local level.** <b>ACWDL 00-35</b>
56.	<b>9X</b>	<b>FC ineligible - County Funds</b>	5/30/00	N/W	No	No	No	No	No	No	When a child has been determined ineligible for foster care payments based on State and Federal rules, some counties still pay benefits with county-only funds. <i>County only aid code:</i> Requires direct contact at local level.** <b>ACWDL 00-35</b>
57.	<b>IE%</b>	<b>Ineligible for Medi-Cal</b>	0/00/00	MC	No	No	No	No	No	No	Ineligible means a person who is ineligible for Medi-Cal benefits.

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<b>Definitions:</b>											
1. The number or aid code identifier as shown on Medi-Cal Eligibility Data System (MEDS) Quick Reference Guide.											
2. The aid code title.											
3. The date in which this aid code became effective.											
4. Type of assistance: CalWORKs (CW), KinGAP (KG), or Foster Care (FC), Medi-Cal (MC), or Non Welfare (NW).											
5. Referable: A case type involving Medi-Cal only or cash-aid assistance to a minor child.											
6. Recoupable: The part of a reportable case type collection to reimburse the public assistance paid to the family.											
7. (A) Reportable: A case type that is currently recognized by an active aid code and reported on the CS 34 or CS 35.											
8. (T) Reportable: A case type that was historically referable or recoupable, or enforced but is no longer an active aid code.											
9. Enforceable: Case types that may not be referable, are not recoupable, but involve medical support in a transitional or temporary capacity.											
10. IV-A/IV-D Interface System Related: Data needed for proper case construct in a non-referable CP/NCP aid code. The Medi-Cal aid codes indicated as "yes" in this column are the codes that are not considered as referable, recoupable, reportable or enforceable, but may be required data for transmitting complete case information to IV-D.											
<b>Keys to symbols used:</b>											
*	Optional										
#	Uses aid codes message to limit scope of coverage										
@	County Medical Services Program										
\$n	On MEDS in special program segment (See list below)										
%	IE and RR can be in SOC or Non-SOC case										
<b>Special program segment types:</b>											
1- Breast and Cervical Cancer Treatment Program											
2 - Child											
3 - County Medical Services Program											
4 - Dialysis/Total Parenteral Nutrition											
5 - General Relief/Cash Assistance Program											
6 - Healthy Family											
7 - In home/Personal Care Services											
8 - Medicare											
9 - Tuberculosis											
A - Accelerated eligibility											
B - Child Health Disability and Prevention											
<b>** The California Child Support Automated System (CCSAS) will not support county only aid codes.</b>											