

MANUAL MATERIAL TRANSMITTED					
MANUAL: INCOME MAINTENANCE			CHANGE NUMBER: 207		
DELETE			INSERT OR CHANGE		
PAGES	CHAPTER	DATED	PAGES	CHAPTER	DATED
57 - 58	16	10/00	57 - 58	16	4/01
			58a	16	4/01
			58b	16	4//99
DATE: APRIL, 2001			TO: ALL INCOME MAINTENANCE MANUAL HOLDERS		

This change is being made to update Chapter 16 with information concerning a new Categorically Needy, Optional Medicaid group called Women with Breast or Cervical Cancer (BCC). Other chapters will be updated to include this group whenever other changes are made.

The Breast and Cervical Cancer Prevention and Treatment Act of 2000 (Public Law 106-354) amends Title XIX of the Social Security Act to give States enhanced matching funds to provide Medicaid eligibility to uninsured women under age 65 who have been identified through the Centers for Disease Control and Prevention's National Breast and Cervical Cancer Early Detection Program and who are in need of treatment for breast or cervical cancer. The Act also allows for presumptive approval for these women so that they will be covered while a determination is being made for eligibility under mandatory coverage groups.

There are no income or asset limits for the BCC group. Women will be approved for Medicaid, provided they meet the minimum requirements. They must, however, apply for any mandatory Medicaid coverage for which it appears they may qualify. Failure to apply or assist in this determination will result in closure of the BCC case.

Eligibility is continuous as long as the woman is receiving cancer treatment. When the treatment ends, the case is closed. Coverage may be backdated up to three months prior to the date of application, but no earlier than April 1, 2001, the effective date of the coverage group. There is no limit to the number of times a woman may become eligible for the BCC group.

RAPIDS INSTRUCTIONS

Work-Around 01-02 Breast and Cervical Cancer Medical Assistance Coverage (BCC)

RAPIDS Will: BCC coverage is not included in the RAPIDS MA cascade. There is no category code specific to BCC MA. Individuals who should receive this coverage will not.

Work-Around: BCC coverage should be entered in a separate case. When a woman meets the eligibility guidelines in Chapter 16.7,H, of the Income Maintenance Manual, do the following:

1. Enter ANPS with begin MMY as the first month of eligibility. Enter Y to the question, '...THE JULY 1972 COLA?' Enter N to all other questions.
2. Run SFED and watch for MP C to pass on AGE. **DO NOT CONFIRM.**

3. Tran to AGOE and using PF8, page forward until you come to the screen containing MP C. For **each** month of MP C:
 - Enter reason code 703 for the presumptive phase approval, or
 - Enter reason code 704 for the approval of the regular phase

Since the coding entered on ANPS causes MP C to pass, it isn't necessary to override the status of the MP C AG. Entering the reason code alone is sufficient.

4. Have the override approved.
5. Tran to AGECE. Verify the override code is displayed for each month of MP C and **only then** confirm.

Note: The wording on notices for MP C has been modified and will be correct if the correct code 703 or 704 has been entered. Use of any other code will result in incomplete. Federal and State reporting and coverage for these individuals.

Questions about RAPIDS entries should be directed to the RAPIDS Help Desk.

All other questions should be directed to the OFS Policy Unit.

