[CA-217971] List to prepare for Incurred Medicare Part B Disregard - Resolved: 08/24/2020 11:13 AM

| Team Responsible: | CalHEERS | Assignee: | Chad Quan | SPG Status: | Approved | | | | |
|--------------------------------------|---|---|--------------------------|----------------------------------|---|--|--|--|--|
| Fix Version/s: | [20.07] | Designer Contact: | Tisha Mutreja | Change Type (SCR): | Data Change | | | | |
| Minor Version: | 20.08.24 | Expedite Changes: | Production Deployment | Estimate: | 45 | | | | |
| Reporter: | Renee Gustafson | Regulation Reference: | | Created: | 07/16/2020 01:48 PM | | | | |
| Status: | In Production | Impact Analysis: | [N/A] | Outreach Required: | Yes | | | | |
| Policy/Design Consortium Contact: | Nina Butler | Training Impacted: | [N/A] | Funding Source: | LRS M&E | | | | |
| Project Phase (SCR): | Production | Migration Impact: | No | Funding Source ID: | | | | | |
| Committee: | [Medi-Cal/CMSP] | Approved by Committee: | | Other Agency Cross Reference: | CIV-107605; CA-213839; CIV-106510 | | | | |
| Consortium Review Approval: | | Consortium Review Approval Date: | | | | | | | |
| Non-Committee Review: | | | - // - / | | | | | | |
| Expedite Approval: | | J. Rapponotti via email o | | | | | | | |
| Current Design: | An aged, blind, or disabled (ABD) individual may become ineligible for benefits under the ABD Federal Poverty Level (FPL) program or 250% Working Disabled Program (WDP) because of the state's payment of the individual's Medicare Part B premiums. Medi-Cal EDBC will move the individual to the Medically Needy (MN) program with a Share of Cost (SOC) if their income and resources otherwise meet all eligibility requirements. | | | | | | | | |
| | field is required, but t | ail page, if the user selec the amount is not used in t be populated with the a | n any EDBC budgeting | . Because this amount i | | | | | |
| Request: | With SCRs CA-213839 CIV-106510, The Systems Medi-Cal EDBC rules will allow an Incurred Medicare Par Disregard for the amount of the Part B Premium when paid by the State and the individual may remain eligible ABD FPL or 250% WDP without a SOC if their income and resources otherwise meet all eligibility requirement. To prepare for the MC rules update to use the Part B Amount in the Incurred Medicare Part B Disregard, provide the County a list of individuals who are active in 250% WDP or MN with a SOC and who have Part B Payment Method of 'State' with a zero dollar Part B Amount. | | | | | | | | |
| | | | | | | | | | |
| Recommendation: | Generate a list of active individuals with aid code '17', '27', '67', '6G', 'C2', 'C4', 'C6' or 'C8', Share Of Cost (SOC) greater than \$0 who have high-dated State Paid Medicare Part B with a \$0 Part B Amount. | | | | | | | | |
| | The listing will consis - Case Name - Case Number - County - Unit - Unit Name - Office Name - Worker ID | st of below columns: | | | | | | | |
| | List Name: Active Medicare Individuals with State Paid Part B Amount as \$0 Additional Columns: CIN, Aid Code County Action: Enter the individual's actual Medicare Part B premium amount in the Part B Payment Amount on the Medicare Detail page, even if the premium is 'State Paid'. | | | | | | | | |
| | | sts will be posted at follo al>System Changes>SC | | >CA-217971 | | | | | |

| Outreach Description: | CIT will be available in the CIT Folder <https: calacesorg.sharepoint.com="" crfis<br="" migwebportal="" sites="">%20%20CITs/Forms/AllItems.aspx?viewid=13207c5d%2Dc11c%2D4814%2Daa1a%2Dc70bef2c1d4e&id= %2Fsites%2FMigWebPortal%2FCRFIs%20%20CITs%2FCalSAWS%20Information%20Transmittals%20%28CIT %29%2F2020> OR You may also retrieve the CIT document and attachments by following these steps: 1. Click on the CRFIs & CITs link at the top of the page. 2. Click on the "CalSAWS Information Transmittal (CIT)" folder. 3. Click on the "2020" folder. 4. Click on the appropriate CIT # folder.</https:> | | | | | | | | |
|--|---|---|-----------------------|----|-------------------------|---|--|--|--|
| Migration Impact Description: Migration Impact Analysis: Alternative | Joint Design was approved by Medi-Cal/CMSP Committee. Same changes will be delivered by CIV-107605 in Release 20.08.24 | | | | | | | | |
| Procedure Description: Operational Impact: Estimate: | 45 | | | | | | | | |
| Automated Test : | 0 | E | Batch/Interfaces : | 0 | Batch Operations : | 0 | | | |
| CalHEERS : | 28 | (| CalHEERS Test : | 12 | Client Correspondence : | 0 | | | |
| DBA : | 0 | Γ | Design : | 0 | Eligibility : | 0 | | | |
| Fiscal : | 0 | F | Forms Test : | 0 | Imaging : | 0 | | | |
| IVR/CC : | 0 | (| Online : | 0 | Performance : | 0 | | | |
| Release Communicati Support : | on 0 | | Reports : | 0 | Reports Test : | 0 | | | |
| Security : | 0 | S | System Test Support : | 0 | Tech Arch : | 0 | | | |
| Tech Ops : | 0 | ٦ | Fraining : | 0 | | | | | |