


☒ CalSAWS M&E ☐ CalWIN Migration

Distribution Date:	November 21, 2023
To:	PPOC.All,Consortium.RegionalManagers.All,Committee.Medical_CMSP.All,
CIT Name:	List for CA-207655: Home and Community-Based Services and Spousal Impoverishment Provisions
From:	CalSAWS Project

PPOCs, please forward to the appropriate impacted staff in your county:

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| <input type="checkbox"/> General
<input checked="" type="checkbox"/> Policy
<input type="checkbox"/> CW
<input type="checkbox"/> CF
<input checked="" type="checkbox"/> MC
<input type="checkbox"/> CMSP
<input type="checkbox"/> FC/KG/AAP
<input type="checkbox"/> Child Care
<input type="checkbox"/> WtW
<input type="checkbox"/> Other Program(s) _____
<input type="checkbox"/> BenefitsCal <input type="checkbox"/> MyBCW
<input type="checkbox"/> Customer Correspondence
<input type="checkbox"/> Other _____ | <input type="checkbox"/> Reports
<input type="checkbox"/> Fiscal
<input type="checkbox"/> Caseload Movement
<input type="checkbox"/> Management
<input type="checkbox"/> Fiscal
<input type="checkbox"/> Security
<input type="checkbox"/> Batch and Interfaces
<input type="checkbox"/> Imaging
<input type="checkbox"/> Migration
<input type="checkbox"/> Conversion
<input type="checkbox"/> Technical
<input type="checkbox"/> Training
<input checked="" type="checkbox"/> Help Desk |
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Description:	<p>Purpose</p> <p>The purpose of this CIT is to notify CalSAWS counties that a one-time list is posted for SCR CA-207655 Home and Community-Based Services and Spousal Impoverishment Provisions.</p> <p>Background</p> <p>The System has two Waiver-related Requested Medi-Cal Types: 'DDS HCBS Waiver' and 'Medi-Cal In Home Operations Waiver' (IHO). When a County Eligibility Worker determines an individual has either DDS-HCBS or IHO waiver and qualifies for Institutional Deeming, the User specifies the Waiver-related Requested Medi-Cal Type for the individual. The System's Medi-Cal EDBC rules create a 'Waiver' income budget; for DDS-HCBS determines either aid code 6V (no Share of Cost (SOC)) or 6W (SOC), or for IHO, aid code 6X (no SOC) or 6Y (SOC).</p> <p>With CA-207655, the System was updated to track Medi-Cal Waivers on the Customer Options page and no longer in a Requested Medi-Cal Type, effective 12/01/2023. SCR CA-207655 removed the Requested MC Types of DDS-HCBS or Medi-Cal In Home Operation.</p> <p>A Data Change Request (DCR) was completed on November 19, 2023, to add a Medi-Cal Waiver record to the Customer Options List page for individuals with a</p>
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	<p>Requested MC Type of DDS-HCBS or IHO. The update will also remove the Requested MC Type if the case has the Medi-Cal Waiver on the Customer Options List page. A one-time list was created for individuals that a Medi-Cal Waiver record could not be completed for in the DCR.</p> <p>The individuals that a Customer Options record could not be completed for will show the Requested MC Type of DDS-HCBS or IHO on the Case Summary page in CalSAWS.</p> <p>Additional Information</p> <p>A one-time list was created for the cases that did not successfully transition from the Requested MC Type Detail page to the Customer Options List page with the Medi-Cal Waivers selection. The list contains standard columns and the additional columns listed below.</p> <p>The list is available on the CalSAWS Web Portal at the following location:</p> <p></p> <p>List Name: <u>Individuals with a DDS or IHO Requested Medi-Cal Type</u></p> <p>Additional Columns:</p> <p>Person Name (First Name, Last Name) CIN DOB</p> <p>County Action</p> <p>Note: The name of the IHO waiver was updated to 'Home and Community-Based Alternatives (HCBA)'. When creating the Medical Waiver record for individuals that receive the IHO waiver, select the HCBA waiver.</p> <p>Workers should review the Case Summary page and if an individual in the MC program block has a Requested MC Type of DDS-HCBS or IHO, the worker should change the Requested MC Type to Medi-Cal and add an applicable Medi-Cal Waiver type of Developmental Disabilities HCBS DD (for DDS HCBS waiver) or HCBA (for IHO) on the Customer Options list page. Additionally, add a Full Hierarchy 'yes' record on the Customer Options List page for the individual. All other applicable data collection pages should be completed for the waiver individual and their parent or spouse.</p> <p>EDBC does not have to be run. If there is a Change in Circumstance or a Renewal and EDBC does need to be run, a full hierarchy review should be completed (including MAGI request if applicable).</p> <p>The functional changes with CA-207655 are effective the benefit month of 12/2023.</p> <p>If you have questions on this CIT, please reach out to the Primary Contact and cc your Regional Managers.</p>
Primary Project Contact:	<p>Nina Butler ButlerN@CalSAWS.org</p>

Backup Project Contact:	Maggie Orozco-Vega Orozco-VegaM@CalSAWS.org
Attachments:	None
Web Portal Link:	<div style="background-color: black; width: 80px; height: 20px; margin-bottom: 10px;"></div> <p>OR</p> <p>You may also retrieve the CIT document and attachments by following these steps:</p> <ol style="list-style-type: none"> 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 "2023" folder. 4. Click on the appropriate CIT # folder.