

☒ CalSAWS M&E☐ CalWIN Migration

Distribution Date:	January 29, 2024
To:	Committee.Medical_CMSP.All,
CIT Name:	HCBS Spousal Impoverishment and Institutional Deeming Functionality
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"/> 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 checked="" type="checkbox"/> Training
<input checked="" type="checkbox"/> Help Desk |
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Description:	<p>Purpose The purpose of this CIT is to provide additional information on the Home and Community Based Services (HCBS) functionality changes made with SCR CA-207655.</p> <p>Background A job aid titled Medi-Cal Home and Community-Based Services and Spousal Impoverishment Provisions is available in the CalSAWS online help and should be reviewed in conjunction with this CIT.</p> <p>The System has two Waiver-related Requested Medi-Cal Types: 'DDS HCBS Waiver' and 'Medi-Cal In Home Operations Waiver' (IHO). Prior to SCR CA-207655, when a County Eligibility Worker determined an individual has either DDS-HCBS or IHO waiver and qualifies for Institutional Deeming, the User specified the Waiver-related Requested Medi-Cal Type for the individual. Based off the Requested MC Type selected of DDS or IHO, the system automatically granted the corresponding aid code.</p> <p>SCR CA-207655 removed the Requested MC Types of DDS-HCBS or Medi-Cal In Home Operation for 12/2023 benefit month or later. The DDS and IHO Requested MC Types remain selectable for the months of 11/2023 and prior. To select the DDS or IHO wavier for months 11/2023 and prior, the view date would need to be</p>
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changed and then the Requested MC Type could be selected for an individual. When running EDBC, the corresponding DDS or IHO waiver aid code will be granted. The Requested Medi-Cal Type 'Medi-Cal' should be used for benefit months 12/2023 or later.

The System was updated to track Medi-Cal Waivers on the Customer Options page and no longer by Requested Medi-Cal Type. Beginning with the benefit month of 12/2023, when processing a case for a person that is potentially eligible to institutional deeming, they will be ran through the full MC hierarchy. They must be screened for MAGI program and if eligible will be granted MAGI per [ACWDL 23-07](#). If they are ineligible to MAGI or any other Non-MAGI program without a SOC, they will be granted the Institutional deeming waiver aid code 6X, 6V, 6W or 6Y. For the system to grant the waiver aid codes, it must be for a child aged 20 or under who has a MAGI ineligible status or Non-MAGI w/ Share of Cost (SOC) and the following data collection pages must be completed:

- o Customer Option Page- Full Hierarchy record set to 'Yes" and Medi-Cal Wavier record for DDS or HCBA (for IHO).

Additional Information

When processing a person that is eligible to Spousal impoverishment (SI), a regular aid code (ABD FPL, 250%, or MN) is granted. This is in line with ACWDL 23-07, [18-19](#) and [17-25](#). Per ACWDL 23-07 "For adult HCBS Waivers and Program service applicants and beneficiaries with a community spouse or registered domestic partner (RDP), the county shall determine their Medi-Cal eligibility at the time of application, redetermination, or change in circumstance in accordance with [ACWDLs 90-01](#), 17-25, and 18-19, as applicable. These applicants or beneficiaries shall be placed in regular Medi-Cal aid codes based on their coverage group, and following the budget steps in [MEDIL 21-07](#), in one-person Medi-Cal Family Budget Units (MFBUs) where they will receive HCBS SI budgeting in accordance with the ACWDLs 17-25 and 18-19. The spousal income allocation and Community Spouse Resource Allowance (CSRA) shall apply."

Note: With the implementation of Asset Elimination for Non-MAGI effective 01/2024, CSRA no longer applies.

Once the data collection pages are complete and the EDBC is ran, if the budget is applying spousal impoverishment that will be indicated with 'SI' showing in the budget name.

EDBC Example of when SI is being applying to the budget:

Eligible Budgets for MEDS					
Test	Result	SOC	% Oblig	FBU	Aid Code
Aged and Disabled- SI	Pass	\$0	0.00		1H

Per [ACWDL 23-13](#), HCBS Waivers and Institutional deeming may apply to the following:

- Married individual with no community spouse (spouse is in LTC).
- A child whose family income and resources make them ineligible for no cost

Medi-Cal.

- Married individuals who are both receiving HCBS Waiver or Program services"

"If the institutionally deemed spouse(s) were participating in one of the following four specific waivers, the respective institutional deeming aid codes would be used instead of the program aid codes. Institutional deeming aid codes are only used when institutional deeming is applied, not for spousal impoverishment. The waivers that have specific institutional deeming aid codes are:

- Home and Community-Based Alternatives (HCBA) Waiver, formerly the In-Home Operations Waiver (IHO Waiver)
 - o 6X (no SOC)
 - o 6Y (SOC)
- Multipurpose Senior Services Program (MSSP) Waiver for 65 years of age or older
 - o 1X (no SOC)
 - o 1Y (SOC)
- HCBS Waiver for Californians with Developmental Disabilities (HCBS-DD Waiver) and the Self-Determination Program (DDS/SDP) Waiver
 - o 6V (no SOC)
 - o 6W (SOC)

Most married couples will get spousal impoverishment. However, as mentioned above there are times where a married person would get institutional deeming (i.e. when both spouses are receiving HCBS waiver), however, that is not programmed in the System. It is to be designed and added in a future release date with SCR CA-246602. Until the SCR is released, an override is required when a married individual must be granted under aid code 6X, 6Y, 6V or 6W.

Note: The System allows a selection for Multipurpose Senior Services Program (MSSP) Waiver on the 'Select Programs' page, but the Systems does not have logic to determine MSSP waiver eligibility (1X no SOC/1Y SOC). Users will need to manually override eligibility for the MSSP Waiver program. The Multipurpose Senior Services Program (MSSP) functionality will be added into CalSAWS at a future date with SCR CA-265116.

Note: The name of the IHO waiver was updated to 'Home and Community-Based Alternatives (HCBA)'. When creating the Medi-Cal Waiver record for individuals that receive the IHO waiver, select the HCBA waiver.

To grant a DDS or IHO (HCBA) Waiver for months of 11/2023 or prior the Requested MC Type should be selected for the appropriate person:

- Click the **View Details** button located in the Medi-Cal Program block on the **Case Summary** page.
- Click the **Edit** button on the **Medi-Cal Detail** page.
- Enter the application or appropriate date for a month of 11/2023 or prior in the **Date** field; then click the **View Date** button.
- Click the **Edit** button next to the waiver person's name.
- Under the Requested MC Type section of the Medi-Cal Person Detail page, click the **Edit** button and select the appropriate **Requested Medi-Cal Type** of DDS HCBS Waiver or Medi-Cal In Home Operations Waiver.
- Click the **Save and Return** button.

Requested Medi-Cal Type Information

Requested Medi-Cal Type: *

DDS HCBS Waiver

Begin Month: *

11/2023

End Month:

When processing a month for 12/2023 or later the Requested MC Type will need to be updated following the above steps and selecting Medi-Cal as the Requested Medi-Cal Type.

Requested Medi-Cal Type Information

Requested Medi-Cal Type: *

Medi-Cal

Begin Month: *

12/2023

End Month:

To grant a DDS or HCBA (formerly IHO) waiver aid code for 12/2023 forward:

For benefit month of 12/2023 forward, the Requested MC Type should be Medi-Cal for waiver individuals. 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 DDS or HCBA on the Customer Options list page.

The appropriate waiver should be selected on the Medi-Cal waiver record located on the Customer Options page. The waiver types that can be selected for the Medi-Cal waiver record are: Developmental Disabilities (HCBS DD), Home and Community-Based Alternatives (HCBA) and Home and Community-Based Services Waivers (this is the type for spousal impoverishment to be screened).


Additionally, add a Full Hierarchy 'yes' record on the Customer Options List page for the individual and the spouse applying for spousal impoverishment. All other applicable data collection pages should be completed for the waiver individual and their parent or spouse.

To screen for Spousal Impoverishment:

Go To the Customer Options List page:

- Click the **Add** button.
- Select the name of the waiver person, select **Medi-Cal Waivers** as the **Type**, and select **Home and Community-Based Services Waivers**.
- Select 'yes' on the **Waiver Approval** field.
- Add the date the waiver was approved to the **Waiver Approval** date field.
- Select the waiver type from the **HCBS Waiver Programs** drop list.
- Select 'yes' for '**Should the Individual be Tested for Spousal Impoverishment Provision?**'
- Click the **Save and Return** button.

If the waiver person and their community spouse are both applying, they can be in the same MC program block. The 'Medi-Cal waiver' record on the Customer Option page should only be completed for the waiver person.

	<p>For a person applying or being re-evaluated (renewed) for the institutional deeming aid codes 6X, 6Y, 6V or 6W, their parent will need to be associated to the case. The parent should not be added/pended in the MC program block, but the appropriate data collection pages will need to be completed for them (e.g. income, tax household, etc.). If the parent is in the MC program block, they should have a denied/discontinued status with an FRI Role.</p> <p>Make a MAGI Request (for DDS and IHO waiver eligible individuals) by going to the MAGI Eligibility tab and selecting the Begin and End months; then click the Request MAGI button.</p> <p>Note: DDS and IHO waiver notices are currently manually created by users. SCR CA-241932 will add the DDS waivers notices to generate in the system when the waiver is granted in EDBC. SCR CA-267198 will add the notice for the HCBA (formerly IHO) waiver.</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:	<p>Maggie Orozco-Vega Orozco-VegaM@CalSAWS.org</p>
Attachments:	<p>CIT 0011-24 MC HCBS and Spousal Impoverishment Provisions.pdf</p>
Web Portal Link:	<p></p> <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 "2024" folder. 4. Click on the appropriate CIT # folder.