# Medi-Cal - Home and Community-Based Services and Spousal Impoverishment Provisions

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## **Purpose**

This job aid provides information on processing Home and Community-Based Services (HCBS) Waiver Programs, and applying Spousal Impoverishment Provisions.

## **Customer Options**

Previously, the Requested Medi-Cal Type Detail page allowed a user to select Requested Medi-Cal Types of "DDS HCBS Waiver" and "Medi-Cal In-Home Operations Waiver" for an Individual, and Medi-Cal EDBC rules would grant waiver eligibility accordingly. Users will now track Medi-Cal Waivers in Customer Options, and both DDS HCBS Waiver and Medi-Cal In-Home Operations Waiver options are no longer available as a Requested Medi-Cal Type selection when creating new records. The Waiver EDBC logic will move to Requested Medi-Cal Type Medi-Cal.

The System allows a selection for Multipurpose Senior Services Program (MSSP) Waiver on the Select Programs page, but the System does not have logic to determine MSSP waiver eligibility (1X no SOC/1Y SOC). This requires the Worker to manually override eligibility for the MSSP Waiver program.

The Customer Options Detail page allows a user to select a Customer Option Type for an individual. Medi-Cal Waivers Developmental Disabilities (HCBS DD), Home and Community-Based Services and Waivers, and Home and Community-Based Alternative (HCBA) are located on the Customer Options Detail page.

When someone reports having a HCBS waiver, complete the Customer Option Detail page by selecting the type of wavier they have.

### Select a Medi-Cal Waiver Customer Option Type for an Individual

The steps below assume you are in the context of a case.

| Step | Action   |
|------|--|
| 1.   | Place the cursor over <b>Eligibility</b> on the <b>Global Navigation</b> bar.  |
| 2.   | Select Customer Information from the Local Navigator.  |
| 3.   | Click the <b>Customer Options</b> link on the <b>Task Navigation</b> bar.  |
| 4.   | On the Customer Options Detail page:  a. Select Medi-Cal Waiver from the Type droplist.  b. Select one of the following options from the Waiver Program Type droplist (selections display in alphabetical order):  • Developmental Disabilities (HCBS DD)  • Home and Community-Based Services Waivers |

- Home and Community-Based Alternatives (HCBA)
- c. Select one of the following options from Waiver Approval droplist, if appropriate:
  - Set Blank (default)
  - Yes
  - No

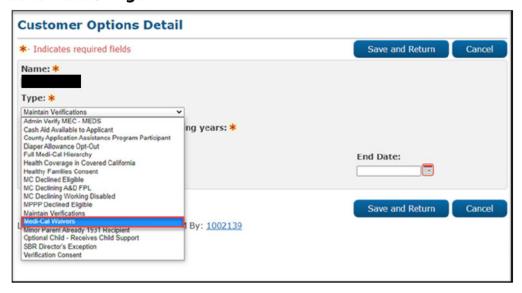
**Note:** If '**Yes**' is selected, the **Waiver** has been approved. Enter the appropriate **<Date>** in the **Waiver Approval Date** field.

- d. Select one of the following options from the **HCBS Wavier Program Type** droplist:
  - CA Community Transitions HCBS Person Grant (CCT)
  - Cal Medi-Connect Dual Demonstration Project
  - Community-Based Adult Services MC 2020 (CBAS)Developmental Disabilities State Plan Services (DDS)
  - In Home and Supportive Services (CFCO)
  - Medicaid 1915(c) Home and Community-Based Services (HCBS)
  - Other Waiver Program

Note: If 'Other Waiver Program' is selected, enter the <Wavier Type> in the Other Waiver Name field.

- Program of All-Inclusive Care for the Elderly (PACE)
- Senior Care Action Network (SCAN)
- e. Select <Yes or No> from Should the Individual be tested for Spousal Impoverishment provisions? droplist.
- f. Enter the appropriate < Date > in the Begin Date field.

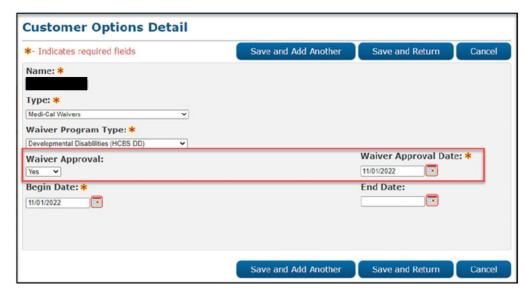
### **Customer Options Detail Page**



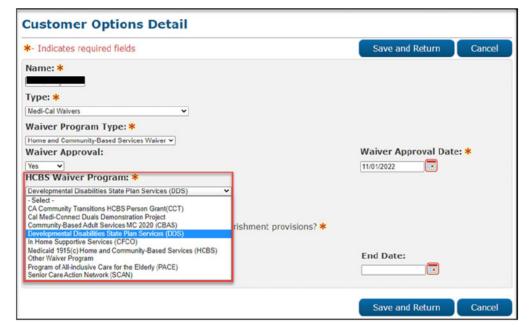
Customer Options Detail Page Medi-Cal Waivers Type



Customer Options Detail Page Waivers Programs Type



Customer Options Detail Page Waiver Approval and Approval Date



Customer Options Detail Page HCBS Waiver Programs



Customer Options Detail Page Spousal Impoverishment Question



Customer Options Detail page Other Waiver Name Description

# **Community Spouse**

The system will not apply Spousal Impoverishment provisions when both spouses are in LTC, or both have an HCBS waiver.

#### **Household Status**

**HCBS-Individual with Community Spouse:** Has a relationship of Spouse or Registered Domestic Partner to another case individual for at least one day in the benefit month. The Community Spouse resides at home and should have a record of "In the Home".

**Note:** A Permanently Out of the Home record should not exist for a Community Spouse.

**HCBS-Individual with Child(ren) and no Community Spouse:** Does not have a Community Spouse as defined above, but does have a relationship of Parent (Biological/Adoptive) or Parent (Step) to another case individual for at least one day in the benefit month.

Child(ren) or Stepchild(ren) who reside at home should have a record of "In the Home."

Note: A "Permanently Out of the Home" record for the Child(ren) or Stepchild(ren) should not exist or does not cover every day of benefit month.

#### Add a Household Status Record

The steps below assume you are in the context of a case.

| Step | Action   |
|------|--|
| 1.   | Place the cursor over <b>Eligibility</b> on the <b>Global Navigation</b> bar.  |
| 2.   | Select Customer Information from the Local Navigator.  |
| 3.   | Click the Household Status link on the Task Navigation bar.  |
| 4.   | On the <b>Household Status List</b> page:  a. Click the <b>Add</b> button.   |
| 5.   | On the Household Status Detail page:  a. Select <change reason=""> from the Change Reason droplist.  b. Enter <reported date=""> in the Reported Date field.  c. Select <person's name=""> from the Name droplist.  d. Select <living home="" in="" status="" the=""> from the Living in the Home Status droplist.  e. Select <household exception="" medi-cal="" status=""> from the HH Status MC Exceptions droplist, if appropriate.  f. Enter <planned date="" departure=""> in the Planned Departure Date field, if appropriate.  g. Enter <expected date="" return=""> in the Expected Return Date field, if appropriate.  h. Enter <begin date=""> in the Begin Date field.  i. Enter <end date=""> in the End Date field, if appropriate.  j. Click the Save and Return button.</end></begin></expected></planned></household></living></person's></reported></change> |

### **Income and Standard Allocation**

LTC/HCBS SI Provisions allow for a different amount other than the standard allocation if there is a hearing, court order, or customer request. To apply the non-standard amount, an override must be completed. In a future release, the system will be updated to allow for a different amount other than the standard allocation without the need for an override.

## **Property**

Effective January 01, 2024, a property test is no longer required for Non-MAGI Medi-Cal programs, including the SI provisions.

## Pickle Program

A regular Pickle computation can take place as part of Mega Mandatory. However, a Pickle budget under SI provisions will need to be computed outside of the system and results overridden, as necessary. Per DHCS, a Pickle SI budget computation is not currently available. If a user needs to complete a Pickle budget with SI provisions, DHCS should be contacted for guidance.

## **Full Medi-Cal Hierarchy Requirement**

There is a Batch EDBC Skip Reason Full Medi-Cal Hierarchy marked "No" or "Missing" to skip a case from Batch EDBC processing when at least one individual on the Medi-Cal program is requesting a Waiver or Home and Community-Based Services Waivers; but either no record exists for Full Medi-Cal Hierarchy, or Full Medi-Cal Hierarchy is set to "No".

# **Institutional Deeming**

Institutional Deeming only applies for individuals with a Customer Options record for Waiver Program Type Developmental Disabilities (HCBS DD) or Home and Community-Based Alternatives (HCBA), after they have been screened for the Full MC Hierarchy and found ineligible to MAGI, or eligible to a Non-MAGI SOC.

Release 23.11