



Department of Health Care Services
MEMORANDUM

DATE: October 13, 2020

TO: Assisted Living Waiver (ALW) Care Coordination Agencies (CCA)
and Home and Community-Based Alternatives (HCBA) Waiver Agencies

FROM: Integrated Systems of Care Division
Program, Policy and Operations Branch

SUBJECT: Temporary Modification of 1915(c) Waiver Enrollment Policy
Implementation Guidance

The purpose of this guidance is to provide Assisted Living Waiver (ALW) Care Coordination Agencies (CCA) and Home and Community-Based Alternatives (HCBA) Waiver Agencies with direction regarding implementation of temporary flexibilities available during the public health emergency. On September 17, 2020, the Centers for Medicare and Medicaid Services (CMS) approved California's request to temporarily modify 1915(c) Waiver enrollment policy for the Assisted Living and HCBA Waivers. The State sought federal approval to prioritize intake processing of waiver applicants residing in hospitals and skilled nursing facilities in areas of the state identified as "hotspots" by the Director of the Department of Health Care Services (DHCS). The authorized Appendix K amendment is available waiver-wide but only applies to individuals residing in counties with the highest rates of new COVID-19 infections.

Under normal circumstances, HCBA WAs and ALW CCAs are required to prioritize the enrollment of waiver applicants who have been in an institution for more than 60 days. The intent of this requirement is to support the transition of individuals who, because of the length of time the individual received care in an institutional setting, are more likely to experience challenges when transitioning back to home and community-based settings.¹ DHCS' approved emergency Appendix K amendment temporarily modifies this existing Waiver enrollment policy, outlined in Appendix B-3: f. *Selection of Entrants to the Waiver*, to prioritize enrollment of all waiver applicants in counties identified as "hotspots," regardless of the number of days the individual has resided in an institution. The intent of the emergency flexibility is to help decompress the impact of the pandemic on the health care infrastructure, by maximizing transitions of otherwise eligible applicants from impacted institutions to receive nursing-level of care at home or in a community-based setting.

DHCS will identify COVID-19 hotspots based on data [published](#) by CDPH every Tuesday. In addition to a county's assigned tier level, a county is identified as a hotspot when the adjusted case rate is $\geq 8\%$. Based on these criteria, if a county is identified as a hotspot, DHCS will provide written notification to the affected ALW CCA and/or HCBA WAs.

Implementation of the enrollment flexibility within a designated "hotspot" may begin immediately upon receipt of written notification from DHCS. Once deemed a hotspot, the hotspot designation, and resulting flexibilities, will remain in effect until February 28, 2021

¹ It has been demonstrated that the longer an individual remains in an institution, the more difficult it becomes for the person to return home because the individual has lost community-based resources and supports and/or has become dependent to being cared for in an institution.

when DHCS' approved Appendix K expires. Without explicit, written authorization from DHCS, ALW CCAs and HCBA WAs may not apply this enrollment flexibility to applicants on a waiver's waitlist.

If you have questions about the application of the emergency flexibility, and/or the "hotspot" authorization process, please send them to your Waiver's designated inbox.

ALW CCAs may submit questions to: ALWP.IR@dhcs.ca.gov

HCBA WAs may submit questions to: HCBAAlternatives@dhcs.ca.gov.