Records / Submission Packages - Your State

CA - Submission Package - CA2022MS0004O - (CA-22-0072) - Eligibility

Summary

Reviewable Units Correspondence Log Approval Letter

News

Related Actions

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services Medicaid and CHIP Operations Group 601 E. 12th Street, Room 355 Kansas City, MO 64106



Center for Medicaid & CHIP Services

January 30, 2023

Jacey Cooper Chief Deputy Director, Health Care Programs California Department of Health Care Services P.O. Box 997413, MS 0000 Sacramento, CA 95899-7413

Re: Approval of State Plan Amendment CA-22-0072

Dear Ms. Cooper,

On December 08, 2022, the Centers for Medicare and Medicaid Services (CMS) received California State Plan Amendment (SPA) CA-22-0072, which proposed to disregard, in Medicaid eligibility determinations, the payments an individual receives from the California Guaranteed Income Pilot programs as income in the month of receipt and as resources for the 12 months following receipt.

We approve California State Plan Amendment (SPA) CA-22-0072 with an effective date(s) of October 01, 2022.

If you have any questions regarding this amendment, please contact Cheryl Young at Cheryl. Young@cms.hhs.gov.

Sincerely,

James G. Scott

Director, Division of Program Operations

Center for Medicaid & CHIP Services

Records / Submission Packages - Your State

CA - Submission Package - CA2022MS0004O - (CA-22-0072) - Eligibility

News Related Actions Reviewable Units Correspondence Log Approval Letter Summary

CMS-10434 OMB 0938-1188

Package Information

Package ID CA2022MS0004O

Program Name N/A

SPA ID CA-22-0072

Version Number 1

Submitted By Angeli Sus Lee

Package Disposition

Submission Type Official

State CA

Region San Francisco, CA

Package Status Approved

Submission Date 12/8/2022

Approval Date 1/30/2023 5:03 PM EST

Medicaid State Plan Eligibility

Mandatory Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

Package ID CA2022MS0004O

Submission Type Official

Approval Date 1/30/2023

Superseded SPA ID CA-21-0053

System-Derived

SPA ID CA-22-0072

Initial Submission 12/8/2022

Date

Effective Date 10/1/2022

Mandatory Coverage

A. The state provides Medicaid to mandatory groups of individuals. The mandatory groups covered are:

Families and Adults

Eligibility Group Name	Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 😯
Infants and Children under Age 19	₩			CONVERTED
Parents and Other Caretaker Relatives	✓			CONVERTED
Pregnant Women	V			APPROVED
Deemed Newborns	✓			NEW
Children with Title IV-E Adoption Assistance, Foster Care or Guardianship Care				NEW
Former Foster Care Children	✓			NEW
Fransitional Medical Assistance	₩			NEW
Extended Medicaid due o Spousal Support Collections				NEW

Aged, Blind and Disabled

Eligibility Group Name	Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 😯
SSI Beneficiaries	\checkmark			NEW
Closed Eligibility Groups	M			NEW
Individuals Deemed To Be Receiving SSI	M			NEW
Working Individuals under 1619(b)	M			NEW
Qualified Medicare Beneficiaries	V	\checkmark		APPROVED
Qualified Disabled and Working Individuals	V			NEW

Eligibility Group Name	Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 🛭
Specified Low Income Medicare Beneficiaries	✓	~		APPROVED
Qualifying Individuals	₩	✓		APPROVED

Mandatory Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

Package ID CA2022MS0004O **SPA ID** CA-22-0072

Submission Type Official Initial Submission 12/8/2022

Date Approval Date 1/30/2023 Effective Date 10/1/2022 Superseded SPA ID CA-21-0053

System-Derived

B. The state elects the Adult Group, described at 42 CFR 435.119.

Yes No

Families and Adults

Eligibility Group Name	Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 🕢
Adult Group	✓			CONVERTED

C. Additional Information (optional)

Eligibility Groups Deselected from Coverage

The following eligibility groups were previously covered in the source approved version of the state plan and deselected from coverage as part of this submission package:

N/A

Medicaid State Plan Eligibility

Eligibility Groups - Mandatory Coverage

Qualified Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS00040 | CA-22-0072

Individuals with income equal to or less than 100% of the FPL, who are entitled to Medicare Part A, and who qualify for Medicare cost-sharing.

Package Header

Package ID CA2022MS0004O **SPA ID** CA-22-0072

Initial Submission 12/8/2022 Submission Type Official Date

Approval Date 1/30/2023 Effective Date 10/1/2022 Superseded SPA ID CA-21-0053

System-Derived

The state covers the mandatory qualified Medicare beneficiaries group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

- 1. Are entitled to hospital insurance benefits under part A of title XVIII (Medicare Part A), including individuals who have purchased a premium to enroll in Part A.
- 2. Have income and resources at or below the standard for this group.

Qualified Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS00040 | CA-22-0072

Package Header

Package ID CA2022MS0004O

Submission Type Official

Approval Date 1/30/2023 Superseded SPA ID CA-21-0053

System-Derived

SPA ID CA-22-0072

Initial Submission 12/8/2022

Date

Effective Date 10/1/2022

B. Financial Methodologies

1. SSI methodologies are used in calculating household income. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

2. Less restrictive methodologies are used in calculating countable income.

O No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

A specified type of income is disregarded:

Description of As permitted under Section 1902(r)(2), all wages disregard: paid to an individual by the Census Bureau for temporary employment related to current or future census activities shall be exempt.

Name of income type:	Description:
Income used to pay spousal or child support	Reference to Supplement 3 of Attachment 2.6 A: The agency uses the same income disregards as used in SSI except as follows: Income which must, by court order or by agreement with a district attorney (DA), be used to pay spousal or child support is held to be unavailable to set the current needs of ABD-MN applicants and beneficiaries. In these cases the lower of 1) the amount ordered by the court or the DA agreement, or 2) the amount actually paid is deducted from the reported income.
In-home caregiver wages	As referenced in Supplement 8a of Attachment 2.6-A page 8: In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met: 1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program. Payments made by the California Department of Social Services to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt. These exemptions shall apply to the following coverage groups

Name of income type:	Description: referenced in the Social Security Act at Section 1902(r)(2): • 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i) (III) • 1905(p)
Kinship Guardianship Benefit Payments	As referenced in Supplement 8a of Attachment 2.6-A page 9: As permitted under Section 1902(r) (2), in determining eligibility for the following coverage groups, State funded benefit payments under the State's Kinship Guardianship Assistance Payment Program (also known as Kinship Guardianship Assistance Payment Program - Enhanced) shall be exempt. These coverage groups are: 1902(a) (10)(A)(ii), 1902(a)(10)(C)(i)(III), and 1905(p).
Universal Guaranteed Income	Disregard the amount of income individuals receive from the California Guaranteed Income Pilot programs.

3. Less restrictive methodologies are used in calculating countable re
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Yes

ON O

The less restrictive resource methodologies are:

General resource disregard:

Name of disregard:	Description:
Assembly Bill 133 (2021) Resource Disregard	A resource disregard equal to the difference between the applicable resource standard for this coverage group and \$130,000 for a single individual and an additional \$65,000 per household member, up to a maximum of 10 household members.

Specified methodology for the treatment of resources set aside for burial:

Name of methodology:	Description:
Burial Funds	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-a, Page 2:
	All of the following shall be disregarded in determining eligibility in their entirety and shall not be applied against a single \$1500 limit:
	(1) All of the following burial related funds:
	(a) The first \$1500 paid for clearly designated burial funds such as burial insurance policies with cash surrender values, revocable burial trusts, revocable burial contracts, or other revocable burial

 $\ensuremath{\overline{\sl}}$ The state uses a less restrictive methodology with respect to the treatment of motor vehicles.

A motor vehicle is disregarded under specific conditions.

Specified conditions:

Description: As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-a Page 11:

> One motor vehicle per budget unit shall be exempt regardless of value or use. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):

• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)

 $\ensuremath{\overline{\square}}$ A specified type of resource is disregarded:

Name of resource type:	Description:
Unpaid incurred medical bills	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 5: Pursuant to court order in Principe v. Belshe (Sacramento County Superior Court Case No. 96CSOO115), a resource disregard would be allowed equal to the amount of incurred medical bills that are unpaid in the month where there are excess resources for the entire month, • only when payment of those medical bills occurs in a later month, and

Name of resource type:	Description:
	verification of payment is
	This disregard would be allowed no earlier than the month of application (may not be one of the three months prior to the month of application).
	The requirements listed above would have to be met before eligibility is granted for the month throughout which the excess resources existed.
	This disregard would apply only to individuals who have excess resources for the entire month but who are otherwise eligible in that month under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Japanese Reparation Payments	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 6:
	Japanese Reparation payments made by the Canadian government shall be exempt from consideration in determining eligibility for Medical.
	Japanese Reparation payments, whether made by the United States or Canadian governments shall be exempt if received by the spouse or inherited from the spouse who was the original recipient, or both.
	Where Japanese Reparation payments, whether made by the United States or Canadian governments, are converted to another form, amounts of otherwise excess, nonexempt resources sufficient to ensure that the amount of the exemption equals the amount of the reparation payments received by the individual or inherited by the spouse of the individual, or both, shall not be considered as resources in determining eligibility for Medi-Cal.
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• (a)(10)(A)(ii)(I) • (a)(10)(A)(ii)(VI) • (a) (10)(A)(ii)(X) • (a)(10)(A)(ii)(XIII) • (a) (10)(A)(ii)(XVIII) • (a)(10)(C)(i)(III) • 1905(p)
SSI and AFDC differing methodologies	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 8: In considering all of the various
	items of resources where the SSI

Name of resource type:	Description:
	program and the AFDC program have differing methodologies, the State shall follow the methodology of the least restrictive of either the SSI program or the AFDC program.
	The general rules contained in the paragraph above shall apply to determine the resource methodologies employed in consideration of all resource items unless a more specific methodology for a specific resource item is otherwise set forth and included in the State plan.
	The above paragraphs apply to the resources of all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Principal residence disregard	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 9:
	The principal residence shall not be considered as a resource if any of the following circumstances exist (this is in addition to the reasons specified by the SSI program and the AFDC program):
	• if a child under the age of 21 lives on the property, or • if a dependent relative lives on the property, (for this purpose only, a disabled child age 21 or over shall be considered a dependent relative), • if a sibling or child age 21 or over of the applicant or beneficiary has continuously resided on the property for at least one year immediately prior to the date the applicant or beneficiary entered a skilled nursing facility or intermediate care facility and continues to reside there, or • if the property cannot be readily converted to cash but a bona fide effort is being made to sell the property. A bona fide effort to sell means that the property is listed for sale with a licensed real estate broker for its fair market value established by a qualified real estate appraiser, a good faith effort is being made to sell the property, offers at fair market value are accepted, and the applicant or beneficiary has supplied proof of compliance with these conditions to the county.
	The above paragraphs apply to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the

Name of resource type:	Description: following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Bona fide, good faith effort to sell or liquidate resource	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 10: The value of resources shall be disregarded when there is a bona fide, good faith effort being made to sell or liquidate the resource. The value of the resource shall be disregarded for as long as the bona fide good faith effort to sell or liquidate continues to be made. This methodology is essentially the same as the methodology applied to resources being sold or liquidated in the eligibility determinations of the SSI and AFDC program, however, since there is no conditional eligibility in the Medicaid program, the applicant/beneficiary shall not be required to sign, as a condition of eligibility, a statement agreeing to make repayment upon the sale of the property. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Restitution payments made to Holocaust victims	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 12 and 13: Excludable restitution payments made to a holocaust victim or his or her heirs or beneficiaries shall be considered an exempt resource for the purpose of determining eligibility to receive Medi-Cal benefits or the amounts of those benefits. A "holocaust victim" is a person who was persecuted by Nazi Germany, any other Axis regime, or any other Nazi controlled or Naziallied country: (1) on the basis of race, religion, physical or mental disability, or sexual orientation; (2) during any period before, during or after. An "excludable restitution payment" is any payment or distribution, recovered or returned asset or property, received directly by a holocaust victim or beirs or beneficiaries of a holocaust victim:

Name of resource type:

Description:

(1) as compensation pursuant to the German Act Regulating Unresolved Property Claims, as amended (Gesetz zur Regelung offener Vermogensfragen); (2) as a result of a settlement of claims against any entity or individual for recovered asset. A "recovered asset" is any asset of any type, including any bank deposits, insurance proceeds, artwork, or interest earned on any of these assets, owned by a holocaust victim, withheld from that holocaust victim or his or her heirs or beneficiaries and recovered, returned or otherwise compensated to the holocaust victim or his or her heirs or beneficiaries: (3) as a payment or restitution provided by law, or by a fund, established by any foreign country, the United States of America, or any other foreign or domestic entity, or as a result of a final resolution of a legal action; (4) as a direct or indirect return of, or compensation or reparation for, assets stolen or hidden from, or otherwise lost to, the individual before, during or immediately after World War II, including any insurance proceeds under policies issued on the individual by European insurance companies immediately before and during World War II; or (5) as interest, payable as part of any payment or distribution described in the paragraph.

These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):

• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)

In-home caregiver resource disregard

Supplement 8b to Attachment 2.6A, Page 13

In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met:

1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program.

Payments made by the California Department of Social Services to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt.

Name of resource type:	Description:
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i) (III) • 1905(p)
	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 1:
	A resource disregard is given to an individual who has purchased a precertified long-term care insurance policy or health care service plan contract which covers long-term care and has used such policy or plan to pay for services.
	Services which the individual receives and are paid for by the precertified long-term care insurance policy or health care service plan contract, which covers long-term care, must not be delivered by a member of the individual's family, unless: • The family member is a regular employee of an organization which is providing the services; and • The organization receives the payment for the services: and • The family member receives no compensation other than the normal compensation for employees in his or her job category.
Precertified long-term care insurance policy or health care service plan contract	The amount of the disregard is equal to the lesser of the following amounts: • the amount of payments made for services by the insurance policy; or • the actual charge for the services.
	Such disregard is in effect for the lifetime of the individual. The disregard is also allowed if a Medicaid application is filed on behalf of a deceased individual for payment of costs for care and services received by the individual during his or her lifetime.
	The disregard of resources is allowed for aged. blind and disabled individuals who are otherwise eligible and: A. Medically Needy [1902(a)(10)(C) (i)(III)], or B. Optional Categorically Needy [1902(a)(10)(A)(ii)]. except those who are included in Section 1902 (a)(10)(A)(ii)(VIII), 1902(a)(10)(A)(ii) (XI) and 1902(a)(10) (A)(ii)(IV) who are receiving Supplemental Security Income Payments under Title XVI or a State Supplemental Payment. or C. Who are Qualified Medicare Beneficiaries [1905(p)].
Universal Guaranteed Income	Disregard as resources income individuals receive from the

Name of resource type:	Description:
	California Guaranteed Income Pilot programs for 12 months following the month of receipt.

Qualified Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS00040 | CA-22-0072

Package Header

Package ID CA2022MS0004O

Submission Type Official

Approval Date 1/30/2023

Superseded SPA ID CA-21-0053

System-Derived

SPA ID CA-22-0072

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C. Income Standard Used

The amount of the income standard for this group is 100% FPL.

D. Resource Standard Used

The resource standard is the same used to determine eligibility for the Medicare Part D full-benefit low-income subsidy (LIS) (but without regard to the life insurance policy exclusion applied in LIS resource eligibility determinations). This standard is three times the SSI resource standard, adjusted annually in accordance with the consumer price index.

E. Medical Assistance Provided

Medical assistance is limited to payment of co-insurance and deductibles for Medicare Parts A, B and C and payment for the premiums for Medicare Parts A and

Medical assistance begins the first day of the month following the month in which the individual is determined to qualify for this eligibility group.

Qualified Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

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F. Additional Information (optional)

Medicaid State Plan Eligibility

Eligibility Groups - Mandatory Coverage

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS00040 | CA-22-0072

System-Derived

Individuals with income above 100% and below 120% of the FPL who are entitled to Medicare Part A, who qualify for payment of Medicare Part B premiums.

Package Header

Package ID CA2022MS0004O **SPA ID** CA-22-0072

Initial Submission 12/8/2022 Submission Type Official Date

Approval Date 1/30/2023

Effective Date 10/1/2022 Superseded SPA ID CA-21-0053

The state covers the mandatory specified low income Medicare beneficiaries group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

- 1. Would qualify as Qualified Medicare Beneficiaries (described in section 1905(p)(1) of the Act), except that their income exceeds the income level for that eligibility group.
- 2. Have income below the income standard and resources at or below the resource standard for this group.

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

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Effective Date 10/1/2022

B. Financial Methodologies

1. SSI methodologies are used in calculating household income. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

2. Less restrictive methodologies are used in calculating countable income.

O No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

A specified type of income is disregarded:

Description of As permitted under Section 1902(r)(2), all wages disregard: paid to an individual by the Census Bureau for temporary employment related to current or future census activities shall be exempt.

Name of income type:	Description:
Income used to pay spousal or child support	Reference to Supplement 3 of Attachment 2.6 A: The agency uses the same income disregards as used in SSI except as follows: Income which must, by court order or by agreement with a district attorney (DA), be used to pay spousal or child support is held to be unavailable to set the current needs of ABD-MN applicants and beneficiaries. In these cases the lower of 1) the amount ordered by the court or the DA agreement, or 2) the amount actually paid is deducted from the reported
In-home caregiver wages	As referenced in Supplement 8a of Attachment 2.6-A page 8: In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met: 1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program. Payments made by the California Department of Social Services to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt. These exemptions shall apply to the following coverage groups

Name of income type:	Description: referenced in the Social Security Act at Section 1902(r)(2): • 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i) (III) • 1905(p)
Kinship Guardianship Benefit Payments	As referenced in Supplement 8a of Attachment 2.6-A page 9: As permitted under Section 1902(r) (2), in determining eligibility for the following coverage groups, State funded benefit payments under the State's Kinship Guardianship Assistance Payment Program (also known as Kinship Guardianship Assistance Payment Program - Enhanced) shall be exempt. These coverage groups are: 1902(a) (10)(A)(ii), 1902(a)(10)(C)(i)(III), and 1905(p).
Universal Guaranteed Income	Disregard the amount of income individuals receive from the California Guaranteed Income Pilot programs.

3. I	_ess	restrictive	methodol	ogies are	used in	calculating	countable resour	rces.
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Yes

ON O

The less restrictive resource methodologies are:

General resource disregard:

Name of disregard:	Description:
Assembly Bill 133 (2021) Resource Disregard	A resource disregard equal to the difference between the applicable resource standard for this coverage group and \$130,000 for a single individual and an additional \$65,000 per household member, up to a maximum of 10 household members.

Specified methodology for the treatment of resources set aside for burial:

Name of methodology:	Description:
Burial Funds	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-a, Page 2:
	All of the following shall be disregarded in determining eligibility in their entirety and shall not be applied against a single \$1500 limit:
	(1) All of the following burial related funds:
	(a) The first \$1500 paid for clearly designated burial funds such as burial insurance policies with cash surrender values, revocable burial trusts, revocable burial contracts, or other revocable burial

 $\ensuremath{\overline{\sl}}$ The state uses a less restrictive methodology with respect to the treatment of motor vehicles.

A motor vehicle is disregarded under specific conditions.

Specified conditions:

Description: As referenced in SUPPLEMENT 8b TO ATTACHMENT

2.6-a Page 11:

One motor vehicle per budget unit shall be exempt regardless of value or use. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):

• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)

 $\ensuremath{\overline{\square}}$ A specified type of resource is disregarded:

Name of resource type:	Description:
Unpaid incurred medical bills	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 5: Pursuant to court order in Principe v. Belshe (Sacramento County Superior Court Case No. 96CSOO115), a resource disregard would be allowed equal to the amount of incurred medical bills that are unpaid in the month where there are excess resources for the entire month, • only when payment of those medical bills occurs in a later month, and

l		
Name of resource type:	Description: • verification of navment is	
	 verification of payment is provided. 	
	This disregard would be allowed no earlier than the month of application (may not be one of the three months prior to the month of application).	
	The requirements listed above would have to be met before eligibility is granted for the month throughout which the excess resources existed.	
	This disregard would apply only to individuals who have excess resources for the entire month but who are otherwise eligible in that month under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)	
	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 6:	
Japanese Reparation Payments	Japanese Reparation payments made by the Canadian government shall be exempt from consideration in determining eligibility for Medi-Cal.	
	Japanese Reparation payments, whether made by the United States or Canadian governments shall be exempt if received by the spouse or inherited from the spouse who was the original recipient, or both.	
	Where Japanese Reparation payments, whether made by the United States or Canadian governments, are converted to another form, amounts of otherwise excess, nonexempt resources sufficient to ensure that the amount of the exemption equals the amount of the reparation payments received by the individual or inherited by the spouse of the individual, or both, shall not be considered as resources in determining eligibility for Medi-Cal.	
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):	
	• (a)(10)(A)(ii)(I) • (a)(10)(A)(ii)(VI) • (a) (10)(A)(ii)(X) • (a)(10)(A)(ii)(XIII) • (a) (10)(A)(ii)(XVIII) • (a)(10)(C)(i)(III) • 1905(p)	
SSI and AFDC differing methodologies	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 8: In considering all of the various	
	items of resources where the SSI	

Name of resource type:	Description:
	program and the AFDC program have differing methodologies, the State shall follow the methodology of the least restrictive of either the SSI program or the AFDC program.
	The general rules contained in the paragraph above shall apply to determine the resource methodologies employed in consideration of all resource items unless a more specific methodology for a specific resource item is otherwise set forth and included in the State plan.
	The above paragraphs apply to the resources of all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Principal residence disregard	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 9:
	The principal residence shall not be considered as a resource if any of the following circumstances exist (this is in addition to the reasons specified by the SSI program and the AFDC program):
	• if a child under the age of 21 lives on the property, or • if a dependent relative lives on the property, (for this purpose only, a disabled child age 21 or over shall be considered a dependent relative), • if a sibling or child age 21 or over of the applicant or beneficiary has continuously resided on the property for at least one year immediately prior to the date the applicant or beneficiary entered a skilled nursing facility or intermediate care facility and continues to reside there, or • if the property cannot be readily converted to cash but a bona fide effort is being made to sell the property. A bona fide effort to sell means that the property is listed for sale with a licensed real estate broker for its fair market value established by a qualified real estate appraiser, a good faith effort is being made to sell the property, offers at fair market value are accepted, and the applicant or beneficiary has supplied proof of compliance with these conditions to the county.
	The above paragraphs apply to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the

Name of resource type:	Description: following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Bona fide, good faith effort to sell or liquidate resource	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 10: The value of resources shall be disregarded when there is a bona fide, good faith effort being made to sell or liquidate the resource. The value of the resource shall be disregarded for as long as the bona fide good faith effort to sell or liquidate continues to be made. This methodology is essentially the same as the methodology applied to resources being sold or liquidated in the eligibility determinations of the SSI and AFDC program, however, since there is no conditional eligibility in the Medicaid program, the applicant/beneficiary shall not be required to sign, as a condition of eligibility, a statement agreeing to make repayment upon the sale of the property. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Restitution payments made to Holocaust victims	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 12 and 13: Excludable restitution payments made to a holocaust victim or his or her heirs or beneficiaries shall be considered an exempt resource for the purpose of determining eligibility to receive Medi-Cal benefits or the amounts of those benefits. A "holocaust victim" is a person who was persecuted by Nazi Germany, any other Axis regime, or any other Nazi controlled or Naziallied country: (1) on the basis of race, religion, physical or mental disability, or sexual orientation; (2) during any period before, during or after. An "excludable restitution payment" is any payment or distribution, recovered or returned asset or property, received directly by a holocaust victim or heirs or beneficiaries of a holocaust victim:

Name of resource type:

Description:

(1) as compensation pursuant to the German Act Regulating Unresolved Property Claims, as amended (Gesetz zur Regelung offener Vermogensfragen); (2) as a result of a settlement of claims against any entity or individual for recovered asset. A "recovered asset" is any asset of any type, including any bank deposits, insurance proceeds, artwork, or interest earned on any of these assets, owned by a holocaust victim, withheld from that holocaust victim or his or her heirs or beneficiaries and recovered, returned or otherwise compensated to the holocaust victim or his or her heirs or beneficiaries: (3) as a payment or restitution provided by law, or by a fund, established by any foreign country, the United States of America, or any other foreign or domestic entity, or as a result of a final resolution of a legal action; (4) as a direct or indirect return of, or compensation or reparation for, assets stolen or hidden from, or otherwise lost to, the individual before, during or immediately after World War II, including any insurance proceeds under policies issued on the individual by European insurance companies immediately before and during World War II; or (5) as interest, payable as part of any payment or distribution described in the paragraph.

These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):

• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)

In-home caregiver resource disregard

Supplement 8b to Attachment 2.6A, Page 13

In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met:

1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program.

Payments made by the California Department of Social Services to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt.

Name of resource type:	Description:
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i) (III) • 1905(p)
	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 1:
	A resource disregard is given to an individual who has purchased a precertified long-term care insurance policy or health care service plan contract which covers long-term care and has used such policy or plan to pay for services.
	Services which the individual receives and are paid for by the precertified long-term care insurance policy or health care service plan contract, which covers long-term care, must not be delivered by a member of the individual's family, unless: • The family member is a regular employee of an organization which is providing the services; and • The organization receives the payment for the services: and • The family member receives no compensation other than the normal compensation for employees in his or her job category.
Precertified long-term care insurance policy or health care service plan contract	The amount of the disregard is equal to the lesser of the following amounts: the amount of payments made for services by the insurance policy; or the actual charge for the services.
	Such disregard is in effect for the lifetime of the individual. The disregard is also allowed if a Medicaid application is filed on behalf of a deceased individual for payment of costs for care and services received by the individual during his or her lifetime.
	The disregard of resources is allowed for aged. blind and disabled individuals who are otherwise eligible and: A. Medically Needy [1902(a)(10)(C) (i)(III)], or B. Optional Categorically Needy [1902(a)(10)(A)(ii)]. except those who are included in Section 1902 (a)(10)(A)(ii)(VIII), 1902(a)(10)(A)(ii) (XI) and 1902(a)(10) (A)(ii)(IV) who are receiving Supplemental Security Income Payments under Title XVI or a State Supplemental Payment. or C. Who are Qualified Medicare Beneficiaries [1905(p)].
Universal Guaranteed Income	Disregard as resources income individuals receive from the

Name of resource type:	Description:
	California Guaranteed Income Pilot programs for 12 months following the month of receipt.

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS00040 | CA-22-0072

Package Header

Package ID CA2022MS0004O

Submission Type Official

Approval Date 1/30/2023

Superseded SPA ID CA-21-0053 System-Derived **SPA ID** CA-22-0072

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C. Income Standard Used

Family income must be above 100% FPL and below 120% FPL.

D. Resource Standard Used

The resource standard is the same used to determine eligibility for the Medicare Part D full-benefit low-income subsidy (LIS) (but without regard to the life insurance policy exclusion applied in LIS resource eligibility determinations). This standard is three times the SSI resource standard, adjusted annually in accordance with the consumer price index.

E. Medical Assistance Provided

Medical assistance is limited to payment for Medicare Part B premiums.

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

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F. Additional Information (optional)

Medicaid State Plan Eligibility

Eligibility Groups - Mandatory Coverage

Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS00040 | CA-22-0072

Individuals with income at or above 120% and below 135% of the FPL who are entitled to Medicare Part A, who qualify for payment of Medicare Part B premiums.

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System-Derived

The state covers the mandatory qualifying individuals group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet all of the following criteria:

- 1. Would qualify as Qualified Medicare Beneficiaries (described in section 1905(p)(1) of the Act), except that their income exceeds the income level for that eligibility group.
- 2. Are not otherwise eligible for Medicaid under the state plan.
- 3. Have income below the income standard and resources at or below the resource standard for this group.

Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

Package ID CA2022MS0004O

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B. Financial Methodologies

1. SSI methodologies are used in calculating household income. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

2. Less restrictive methodologies are used in calculating countable income.

Yes

O No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

A specified type of income is disregarded:

Description of As permitted under Section 1902(r)(2), all wages disregard: paid to an individual by the Census Bureau for temporary employment related to current or future census activities shall be exempt.

Name of income type:	Description:
Income used to pay spousal or child support	Reference to Supplement 3 of Attachment 2.6 A: The agency uses the same income disregards as used in SSI except as follows: Income which must, by court order or by agreement with a district attorney (DA), be used to pay spousal or child support is held to be unavailable to set the current needs of ABD-MN applicants and beneficiaries. In these cases the lower of 1) the amount ordered by the court or the DA agreement, or 2) the amount actually paid is deducted from the reported income.
In-home caregiver wages	As referenced in Supplement 8a of Attachment 2.6-A page 8: In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met: 1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program. Payments made by the California Department of Social Services to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt. These exemptions shall apply to the following coverage groups

Name of income type:	Description: referenced in the Social Security Act at Section 1902(r)(2): • 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i) (III) • 1905(p)
Kinship Guardianship Benefit Payments	As referenced in Supplement 8a of Attachment 2.6-A page 9: As permitted under Section 1902(r) (2), in determining eligibility for the following coverage groups, State funded benefit payments under the State's Kinship Guardianship Assistance Payment Program (also known as Kinship Guardianship Assistance Payment Program - Enhanced) shall be exempt. These coverage groups are: 1902(a) (10)(A)(ii), 1902(a)(10)(C)(i)(III), and 1905(p).
Universal Guaranteed Income	Disregard the amount of income individuals receive from the California Guaranteed Income Pilot programs.

3. Less restrictive methodologies are	e used in calculating	countable resources
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Yes

O No

The less restrictive resource methodologies are:

General resource disregard:

Name of disregard:	Description:
Assembly Bill 133 (2021) Resource Disregard	A resource disregard equal to the difference between the applicable resource standard for this coverage group and \$130,000 for a single individual and an additional \$65,000 per household member, up to a maximum of 10 household members.

Specified methodology for the treatment of resources set aside for burial:

Name of methodology:	Description:
Burial Funds	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-a, Page 2:
	All of the following shall be disregarded in determining eligibility in their entirety and shall not be applied against a single \$1500 limit:
	(1) All of the following burial related funds:
	(a) The first \$1500 paid for clearly designated burial funds such as burial insurance policies with cash surrender values, revocable burial trusts, revocable burial contracts, or other revocable burial

Name of methodology:	Description:
	arrangements.
	(b) Irrevocable burial trusts or irrevocable burial contracts, or other irrevocable burial arrangements.
	(c) Burial insurance policies without cash surrender values.
	(2) Life insurance policies on the life of any individual in the family shall be exempt if the combined face value of all of the policies on the insured individual is \$1500 or less.
	(3) All dividends and interest that accrue to and are not removed from the burial fund or policy described in (1) or (2).
	The disregard of life insurance policies and burial related funds is allowed for all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	(a)(10)(A)(ii), (a)(10)(C)(i)(III), and 1905(p)

 $\ensuremath{\overline{\sl}}$ The state uses a less restrictive methodology with respect to the treatment of motor vehicles.

A motor vehicle is disregarded under specific conditions.

Specified conditions:

Description: As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-a Page 11:

> One motor vehicle per budget unit shall be exempt regardless of value or use. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):

• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)

 $\ensuremath{\overline{\square}}$ A specified type of resource is disregarded:

Name of resource type:	Description:
Unpaid incurred medical bills	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 5: Pursuant to court order in Principe v. Belshe (Sacramento County Superior Court Case No. 96CSOO115), a resource disregard would be allowed equal to the amount of incurred medical bills that are unpaid in the month where there are excess resources for the entire month, • only when payment of those medical bills occurs in a later month, and

Name of resource type:	Description:
,	• verification of payment is
	This disregard would be allowed no earlier than the month of application (may not be one of the three months prior to the month of application).
	The requirements listed above would have to be met before eligibility is granted for the month throughout which the excess resources existed.
	This disregard would apply only to individuals who have excess resources for the entire month but who are otherwise eligible in that month under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) •
	1905(p) As referenced in SUPPLEMENT 8b
	TO ATTACHMENT 2.6-A Page 6:
	Japanese Reparation payments made by the Canadian government shall be exempt from consideration in determining eligibility for Medical.
	Japanese Reparation payments, whether made by the United States or Canadian governments shall be exempt if received by the spouse or inherited from the spouse who was the original recipient, or both.
Japanese Reparation Payments	Where Japanese Reparation payments, whether made by the United States or Canadian governments, are converted to another form, amounts of otherwise excess, nonexempt resources sufficient to ensure that the amount of the exemption equals the amount of the reparation payments received by the individual or inherited by the spouse of the individual, or both, shall not be considered as resources in determining eligibility for Medi-Cal.
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• (a)(10)(A)(ii)(I) • (a)(10)(A)(ii)(VI) • (a) (10)(A)(ii)(X) • (a)(10)(A)(ii)(XIII) • (a) (10)(A)(ii)(XVIII) • (a)(10)(C)(i)(III) • 1905(p)
SSI and AFDC differing methodologies	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 8: In considering all of the various
	items of resources where the SSI

Name of resource type:	Description:
	program and the AFDC program have differing methodologies, the State shall follow the methodology of the least restrictive of either the SSI program or the AFDC program.
	The general rules contained in the paragraph above shall apply to determine the resource methodologies employed in consideration of all resource items unless a more specific methodology for a specific resource item is otherwise set forth and included in the State plan.
	The above paragraphs apply to the resources of all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Principal residence disregard	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 9:
	The principal residence shall not be considered as a resource if any of the following circumstances exist (this is in addition to the reasons specified by the SSI program and the AFDC program):
	• if a child under the age of 21 lives on the property, or • if a dependent relative lives on the property, (for this purpose only, a disabled child age 21 or over shall be considered a dependent relative), • if a sibling or child age 21 or over of the applicant or beneficiary has continuously resided on the property for at least one year immediately prior to the date the applicant or beneficiary entered a skilled nursing facility or intermediate care facility and continues to reside there, or • if the property cannot be readily converted to cash but a bona fide effort is being made to sell the property. A bona fide effort to sell means that the property is listed for sale with a licensed real estate broker for its fair market value established by a qualified real estate appraiser, a good faith effort is being made to sell the property, offers at fair market value are accepted, and the applicant or beneficiary has supplied proof of compliance with these conditions to the county.
	The above paragraphs apply to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the

Name of resource type:	Description: following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Bona fide, good faith effort to sell or liquidate resource	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 10: The value of resources shall be disregarded when there is a bona fide, good faith effort being made to sell or liquidate the resource. The value of the resource shall be disregarded for as long as the bona fide good faith effort to sell or liquidate continues to be made. This methodology is essentially the same as the methodology applied to resources being sold or liquidated in the eligibility determinations of the SSI and AFDC program, however, since there is no conditional eligibility in the Medicaid program, the applicant/beneficiary shall not be required to sign, as a condition of eligibility, a statement agreeing to make repayment upon the sale of the property. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Restitution payments made to Holocaust victims	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 12 and 13: Excludable restitution payments made to a holocaust victim or his or her heirs or beneficiaries shall be considered an exempt resource for the purpose of determining eligibility to receive Medi-Cal benefits or the amounts of those benefits. A "holocaust victim" is a person who was persecuted by Nazi Germany, any other Axis regime, or any other Nazi controlled or Naziallied country: (1) on the basis of race, religion, physical or mental disability, or sexual orientation; (2) during any period before, during or after. An "excludable restitution payment" is any payment or distribution, recovered or returned asset or property, received directly by a holocaust victim or heirs or beneficiaries of a holocaust victim:

Name of resource type:

Description:

(1) as compensation pursuant to the German Act Regulating Unresolved Property Claims, as amended (Gesetz zur Regelung offener Vermogensfragen); (2) as a result of a settlement of claims against any entity or individual for recovered asset. A "recovered asset" is any asset of any type, including any bank deposits, insurance proceeds, artwork, or interest earned on any of these assets, owned by a holocaust victim, withheld from that holocaust victim or his or her heirs or beneficiaries and recovered, returned or otherwise compensated to the holocaust victim or his or her heirs or beneficiaries: (3) as a payment or restitution provided by law, or by a fund, established by any foreign country, the United States of America, or any other foreign or domestic entity, or as a result of a final resolution of a legal action; (4) as a direct or indirect return of, or compensation or reparation for, assets stolen or hidden from, or otherwise lost to, the individual before, during or immediately after World War II, including any insurance proceeds under policies issued on the individual by European insurance companies immediately before and during World War II; or (5) as interest, payable as part of any payment or distribution

These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):

described in the paragraph.

• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)

In-home caregiver resource disregard

Supplement 8b to Attachment 2.6A, Page 13

In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met:

1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program.

Payments made by the California Department of Social Services to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt.

Name of resource type:	Description:
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i) (III) • 1905(p)
	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 1:
	A resource disregard is given to an individual who has purchased a precertified long-term care insurance policy or health care service plan contract which covers long-term care and has used such policy or plan to pay for services.
	Services which the individual receives and are paid for by the precertified long-term care insurance policy or health care service plan contract, which covers long-term care, must not be delivered by a member of the individual's family, unless: • The family member is a regular employee of an organization which is providing the services; and • The organization receives the payment for the services: and • The family member receives no compensation other than the normal compensation for employees in his or her job category.
Precertified long-term care insurance policy or health care service plan contract	The amount of the disregard is equal to the lesser of the following amounts: • the amount of payments made for services by the insurance policy; or • the actual charge for the services.
	Such disregard is in effect for the lifetime of the individual. The disregard is also allowed if a Medicaid application is filed on behalf of a deceased individual for payment of costs for care and services received by the individual during his or her lifetime.
	The disregard of resources is allowed for aged. blind and disabled individuals who are otherwise eligible and: A. Medically Needy [1902(a)(10)(C) (i)(III)], or B. Optional Categorically Needy [1902(a)(10)(A)(ii)]. except those who are included in Section 1902 (a)(10)(A)(ii)(VIII), 1902(a)(10)(A)(ii) (XI) and 1902(a)(10) (A)(ii)(IV) who are receiving Supplemental Security Income Payments under Title XVI or a State Supplemental Payment. or C. Who are Qualified Medicare Beneficiaries [1905(p)].
Universal Guaranteed Income	Disregard as resources income individuals receive from the

Name of resource type:	Description:
	California Guaranteed Income Pilot programs for 12 months following the month of receipt.

Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

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C. Income Standard Used

Family income must be at or above 120% FPL and below 135% FPL.

D. Resource Standard Used

The resource standard is the same used to determine eligibility for the Medicare Part D full-benefit low-income subsidy (LIS) (but without regard to the life insurance policy exclusion applied in LIS resource eligibility determinations). This standard is three times the SSI resource standard, adjusted annually in accordance with the consumer price index.

E. Medical Assistance Provided

Medical assistance is limited to payment for Medicare Part B premiums.

Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

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F. Additional Information (optional)

Medicaid State Plan Eligibility

Optional Eligibility Groups

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A. Options for Coverage

The state provides Medicaid to specified optional groups of individuals.

Yes No

The optional eligibility groups covered in the state plan are (elections made in this screen may not be comprehensive during the transition period from the paperbased state plan to MACPro):

Families and Adults

Eligibility Group Name	Covered In	State Plan	Include RU In Package	Included in Another Submission Package	Source Type 🕢
Optional Coverage of Parents and Other Caretaker Relatives					NEW
Reasonable Classifications of Individuals under Age 21	6				CONVERTED
Children with Non-IV-E Adoption Assistance					CONVERTED
Independent Foster Care Adolescents					CONVERTED
Optional Targeted Low Income Children					CONVERTED
Individuals above 133% FPL under Age 65					NEW
Individuals Needing Treatment for Breast or Cervical Cancer	6	•			NEW
Individuals Eligible for Family Planning Services	B				CONVERTED
Individuals with Tuberculosis					CONVERTED
Individuals Electing COBRA Continuation Coverage	6				NEW

Aged, Blind and Disabled

Eligibility Group Name	Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 😯
Individuals Eligible for but Not Receiving Cash Assistance		\checkmark		APPROVED

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Eligibility Group Name	Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 🕢
Individuals Eligible for Cash Except for Institutionalization				NEW
Individuals Receiving Home and Community- Based Waiver Services under Institutional Rules				NEW
Optional State Supplement Beneficiaries	\checkmark			NEW
Individuals in Institutions Eligible under a Special Income Level				NEW
PACE Participants	✓			NEW
Individuals Receiving Hospice				NEW
Children under Age 19 with a Disability				NEW
Age and Disability- Related Poverty Level	\checkmark	₩		APPROVED
Work Incentives	\checkmark	\checkmark		APPROVED
Ticket to Work Basic				NEW
Ticket to Work Medical Improvements				NEW
Family Opportunity Act Children with a Disability				NEW
Individuals Receiving State Plan Home and Community-Based Services				NEW
Individuals Receiving State Plan Home and Community-Based Services Who Are Otherwise Eligible for HCBS Waivers				NEW

Optional Eligibility Groups

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B. Medically Needy Options for Coverage

The state provides Medicaid to specified groups of individuals who are medically needy.

Yes No

The medically needy eligibility groups covered in the state plan are:

1. Mandatory Medically Needy:

Families and Adults

Eligibility Group Name	Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 🛭
Medically Needy Pregnant Women	₩	\checkmark		APPROVED
Medically Needy Children under Age 18	V	✓		APPROVED

Aged, Blind and Disabled

Eligibility Group Name	Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 🕡
Protected Medically Needy Individuals Who Were Eligible in 1973	V			NEW

2. Optional Medically Needy:

Families and Adults

Eligibility Group Name	Co	overed In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 😯
Medically Needy Reasonable Classifications of Individuals under Age 21		V	V		APPROVED
Medically Needy Parents and Other Caretaker Relatives		\checkmark	✓		APPROVED

Aged, Blind and Disabled

Eligibility Group Name	Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 🛭
Medically Needy Populations Based on Age, Blindness or Disability	₩	₩		APPROVED

Optional Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

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C. Additional Information (optional)

Eligibility Groups Deselected from Coverage

The following eligibility groups were previously covered in the source approved version of the state plan and deselected from coverage as part of this submission package:

N/A

Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Individuals Eligible for but Not Receiving Cash Assistance

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

System-Derived

Individuals who are eligible for but not receiving federal cash assistance or an optional state supplement.

Package Header

Package ID CA2022MS0004O **SPA ID** CA-22-0072

Submission Type Official Initial Submission 12/8/2022 Date

Approval Date 1/30/2023 Effective Date 10/1/2022

Superseded SPA ID CA-21-0053

The state covers the optional Individuals Eligible for but Not Receiving Cash Assistance eligibility group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1. Meet the eligibility requirements of at least one of the following cash assistance programs:

a. SSI

☑ b. Optional State Supplement

c. AFDC

2. Do not receive cash assistance under these programs.

Individuals Eligible for but Not Receiving Cash Assistance

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

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System-Derived

B. Individuals Covered

Yes

No

2. The state covers the following populations:

a. Individuals age 65 or older

b. Individuals who have blindness

c. Individuals who have a disability

d. All children under a specified age limit:

e. Reasonable classifications of children

f. Parents and other caretaker relatives

g. Pregnant women

h. Other population

Individuals Eligible for but Not Receiving Cash Assistance

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C. Financial Methodologies

- 1. In calculating household income and resources for individuals who are seeking eligibility on the basis of being age 65 or older or having blindness or disability, SSI methodologies are used. Please refer as necessary to Non-MAGI Methodologies, completed by the state.
- 3. Less restrictive methodologies are used in calculating countable income.

Yes

No

The less restrictive income methodologies are:

General income disregard:

Name of disregard:	Description:
Blind FPL Expansion	Disregard the amount of countable income over 100% FPL up to 138% FPL. If such disregards are not sufficient to result in an effective income level equal to the SSI/SSP payment level for a disabled individual or, in the case of a couple, the SSI/SSP payment level for a disabled couple, then an income disregard sufficient to achieve that result [shall be applied].

Description of As permitted under Section 1902(r)(2), all wages disregard: paid to an individual by the Census Bureau for temporary employment related to current or future census activities shall be exempt.

/	Census	Bureau	wages	are	disregarded.

A specified type of income is disregarded:

Name of income type:	Description:
Kinship Guardianship Benefit Payments	As referenced in Supplement 8a of Attachment 2.6-A page 9: As permitted under Section 1902(r) (2), in determining eligibility for the following coverage groups, State funded benefit payments under the State's Kinship Guardianship Assistance Payment Program (also known as Kinship Guardianship Assistance Payment Program - Enhanced) shall be exempt. These coverage groups are: 1902(a)(10)(A)(ii), 1902(a)(10)(C)(i) (III), and 1905(p).
In-home caregiver wages	As referenced in Supplement 8a of Attachment 2.6-A page 8: In-home caregiver wages paid to a household member shall be

Name of income type:	Description:
	exempt when both of the following conditions are met: 1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program. Payments made by the California Department of Social Services to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i) (III) • 1905(p)
Universal Guaranteed Income	Disregard the amount of income individuals receive from the California Guaranteed Income Pilot programs.

 $\ensuremath{{\ensuremath{\square}}}$ The following less restrictive methodologies are used:

Name of methodology:	Description:
Deductions for ineligible family members	Disregard and amount equal to the appropriate figure below, based on household size. This disregard description clarifies the existing policy listed on pages 6, 6a, and 7 of Supplement 8a to Attachment 2.6-A of the state plan. Household of 1: \$600 Household of 2: \$750 Household of 3: \$934 Household of 3: \$934 Household of 4: \$1,100 Household of 5: \$1,259 Household of 6: \$1,417 Household of 7: \$1,550 Household of 9: \$1,825 Household of 9: \$1,825 Household of 10: \$1,959 *A household of two adults where at least one person is aged, blind, or disabled utilizes the deduction for a household size of 3, as permitted by 42 CFR § 435.1007(c).
Medicare Part B Disregard	For the Section 1902 (a)(10)(A)(ii)(l) and (X) eligibility groups, disregard from an individual's income the amount of such individual's incurred Medicare Part B premium.

 ${\it 4. Less restrictive methodologies are used in calculating countable resources.}\\$

Yes

The less restrictive resource methodologies are:

General resource disregard:

Name of disregard:	Description:
Assembly Bill 133 (2021) Resource Disregard	A resource disregard equal to the difference between the applicable resource standard for this coverage group and \$130,000 for a single individual and an additional \$65,000 per household member, up to a maximum of 10 household members.

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Name of methodology:	Description:
	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-a, Page 2:
	All of the following shall be disregarded in determining eligibility in their entirety and shall not be applied against a single \$1500 limit:
	(1) All of the following burial related funds:
	(a) The first \$1500 paid for clearly designated burial funds such as burial insurance policies with cash surrender values, revocable burial trusts, revocable burial contracts, or other revocable burial arrangements.
	(b) Irrevocable burial trusts or irrevocable burial contracts, or other irrevocable burial arrangements.
Burial Funds	(c) Burial insurance policies without cash surrender values.
	(2) Life insurance policies on the life of any individual in the family shall be exempt if the combined face value of all of the policies on the insured individual is \$1500 or less.
	(3) All dividends and interest that accrue to and are not removed from the burial fund or policy described in (1) or (2).
	The disregard of life insurance policies and burial related funds is allowed for all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	(a)(10)(A)(ii), (a)(10)(C)(i)(III), and 1905(p)

 $\ensuremath{\overline{\sl}}$ The state uses a less restrictive methodology with respect to the treatment of motor vehicles.

 $\ensuremath{{\ensuremath{ \square}}}$ A motor vehicle is disregarded under specific conditions.

Specified conditions:

Description: As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-a Page 11:

> One motor vehicle per budget unit shall be exempt regardless of value or use. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):

• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)

A specified type of resource is disregarded:

Name of resource type:	Description:
Restitution payments made to Holocaust victims	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 12 and 13:
	Excludable restitution payments made to a holocaust victim or his or her heirs or beneficiaries shall be considered an exempt resource for the purpose of determining eligibility to receive Medi-Cal benefits or the amounts of those benefits.
	A "holocaust victim" is a person who was persecuted by Nazi Germany, any other Axis regime, or any other Nazi controlled or Nazi- allied country:
	(1) on the basis of race, religion, physical or mental disability, or sexual orientation;(2) during any period before, during or after.
	An "excludable restitution payment" is any payment or distribution, recovered or returned asset or property, received directly by a holocaust victim or heirs or beneficiaries of a holocaust victim: (1) as compensation pursuant to the German Act Regulating Unresolved Property Claims, as amended (Gesetz zur Regelung offener Vermogensfragen); (2) as a result of a settlement of claims against any entity or individual for any recovered asset. A "recovered asset" is any asset of any type, including any bank deposits, insurance proceeds, artwork, or interest earned on any of these assets, owned by a holocaust victim, withheld from that holocaust victim or his or her heirs or beneficiaries and recovered, returned or otherwise compensated to the holocaust victim or his or her heirs or beneficiaries; (3) as a payment or restitution provided by law, or by a fund, established by any foreign country, the United States of America, or any other foreign or domestic

Name of resource type:	Description:
	entity, or as a result of a final resolution of a legal action; (4) as a direct or indirect return of, or compensation or reparation for, assets stolen or hidden from, or otherwise lost to, the individual before, during or immediately after World War II, including any insurance proceeds under policies issued on the individual by European insurance companies immediately before and during World War II; or (5) as interest, payable as part of any payment or distribution described in the paragraph. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Independence Accounts	Independence Accounts established under the Work Incentives program shall be disregarded in the resource eligibility determination, subject to the limitation identified below: • Actions involving the accounts are subject to standard eligibility rules relating to resources (e.g., a transfer from the account for less than fair market value would be subject to transfer-of-asset rules).
In-home caregiver resource disregard	Supplement 8b to Attachment 2.6A, Page 13 In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met: 1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program. Payments made by the California Department of Social Services to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i) (III) • 1905(p)
Precertified long-term care insurance policy or health care service plan contract	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 1: A resource disregard is given to an

Name of resource type:

Description:

individual who has purchased a precertified long-term care insurance policy or health care service plan contract which covers long-term care and has used such policy or plan to pay for services.

Services which the individual receives and are paid for by the precertified long-term care insurance policy or health care service plan contract, which covers long-term care, must not be delivered by a member of the individual's family, unless:

- The family member is a regular employee of an organization which is providing the services; and
- The organization receives the payment for the services: and
- The family member receives no compensation other than the normal compensation for employees in his or her job category.

The amount of the disregard is equal to the lesser of the following amounts:

- the amount of payments made for services by the insurance policy;
- · the actual charge for the services.

Such disregard is in effect for the lifetime of the individual. The disregard is also allowed if a Medicaid application is filed on behalf of a deceased individual for payment of costs for care and services received by the individual during his or her lifetime.

The disregard of resources is allowed for aged. blind and disabled individuals who are otherwise eligible and: A. Medically Needy [1902(a)(10)(C) (i)(III)], or B. Optional Categorically Needy [1902(a)(10)(A)(ii)]. except those who are included in Section 1902 (a)(10)(A)(ii)(VIII), 1902(a)(10)(A)(ii) (XI) and 1902(a)(10) (A)(ii)(IV) who are receiving Supplemental Security Income Payments under Title XVI or a State Supplemental Payment. or C. Who are Qualified Medicare

Beneficiaries [1905(p)].

Resources exempted under 1902(a) (10)(A)(ii)(XIII)

As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 14: All resources exempted from consideration as resources for individuals in the optional coverage group under section 1902(a)(10)(A) (ii)(XIII) of the Act on the basis that they are employer or individual retirement arrangements authorized under the Internal Revenue Code shall continue to be exempt from consideration as resources in all other coverage groups subject to the provisions of

Name of resource type:	Description:
	1902(r)(2) under which the individual later becomes eligible for medical assistance where the basis for that eligibility is the individual's age, blindness, or disability.
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• 1902(a)(10)(A)(ii)(I) • 1902(a)(10)(A) (ii)(X) • 1902(a)(10)(C)(i)
	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 5:
	Pursuant to court order in Principe v. Belshe (Sacramento County Superior Court Case No. 96CSOO115), a resource disregard would be allowed equal to the amount of incurred medical bills that are unpaid in the month where there are excess resources for the entire month,
	 only when payment of those medical bills occurs in a later month, and verification of payment is provided.
Unpaid incurred medical bills	This disregard would be allowed no earlier than the month of application (may not be one of the three months prior to the month of application).
	The requirements listed above would have to be met before eligibility is granted for the month throughout which the excess resources existed.
	This disregard would apply only to individuals who have excess resources for the entire month but who are otherwise eligible in that month under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Japanese Reparation Payments	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 6:
	Japanese Reparation payments made by the Canadian government shall be exempt from consideration in determining eligibility for Medi-Cal.
	Japanese Reparation payments, whether made by the United States or Canadian governments shall be exempt if received by the spouse or inherited from the spouse who was the original recipient, or both.
	Where Japanese Reparation

Name of resource type:	Description:
	payments, whether made by the United States or Canadian governments, are converted to another form, amounts of otherwise excess, nonexempt resources sufficient to ensure that the amount of the exemption equals the amount of the reparation payments received by the individual or inherited by the spouse of the individual, or both, shall not be considered as resources in determining eligibility for Medi-Cal. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii)(I) • (a)(10)(A)(ii)(VII) • (a) (10)(A)(ii)(XVIII) • (a)(10)(C)(i)(IIII) • (a)(10)(C)(i)(IIII) • (a)(10)(C)(i)(IIII) • (a)(10)(C)(i)(IIII) • (a)(10)(C)(ii)(III) • (a)(10)(C)(iii)(III) • (a)(10)(C)(ii
	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 8:
SSI and AFDC differing methodologies	In considering all of the various items of resources where the SSI program and the AFDC program have differing methodologies, the State shall follow the methodology of the least restrictive of either the SSI program or the AFDC program. • The general rules contained in the paragraph above shall apply to determine the resource methodologies employed in consideration of all resource items unless a more specific methodology for a specific resource item is otherwise set forth and included in the State plan. The above paragraphs apply to the resources of all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
Principal residence disregard	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 9: The principal residence shall not be considered as a resource if any of the following circumstances exist (this is in addition to the reasons specified by the SSI program and the AFDC program):
	• if a child under the age of 21 lives on the property, or • if a dependent relative lives on the property, (for this purpose only, a disabled child age 21 or over shall be considered a dependent relative), **ECCOTA YOO BANAMI NINI 2 meC

Name of resource type:	Description:
	• if a sibling or child age 21 or over of the applicant or beneficiary has continuously resided on the property for at least one year immediately prior to the date the applicant or beneficiary entered a skilled nursing facility or intermediate care facility and continues to reside there, or • if the property cannot be readily converted to cash but a bona fide effort is being made to sell the property. A bona fide effort to sell means that the property is listed for sale with a licensed real estate broker for its fair market value established by a qualified real estate appraiser, a good faith effort is being made to sell the property, offers at fair market value are accepted, and the applicant or beneficiary has supplied proof of compliance with these conditions to the county. The above paragraphs apply to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Bona fide, good faith effort to sell or liquidate resource	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 10: The value of resources shall be disregarded when there is a bona fide, good faith effort being made to sell or liquidate the resource. The value of the resource shall be disregarded for as long as the bona fide good faith effort to sell or liquidate continues to be made. This methodology is essentially the same as the methodology applied to resources being sold or liquidated in the eligibility determinations of the SSI and AFDC program, however, since there is no conditional eligibility in the Medicaid program, the applicant/beneficiary shall not be required to sign, as a condition of eligibility, a statement agreeing to make repayment upon the sale of the property. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)

Name of resource type:	Description:
Universal Guaranteed Income	Disregard as resources income individuals receive from the California Guaranteed Income Pilot programs for 12 months following the month of receipt.

Date

Individuals Eligible for but Not Receiving Cash Assistance

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

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System-Derived

D. Income Standard Used

The income standard used is the standard of the most closely related cash assistance program.

E. Resource Standard Used

The resource standard used is the standard of the most closely related cash assistance program.

Individuals Eligible for but Not Receiving Cash Assistance

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F. Additional Information (optional)

Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Age and Disability-Related Poverty Level

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Individuals who are age 65 or older or who have a disability, with income no higher than 100% FPL.

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The state covers the optional Age and Disability-Related Poverty Level eligibility group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1. Meet at least one of the following condition(s):

a. Are age 65 or older; or

b. Have a disability.

2. Have income and resources at or below the standard for this group.

Age and Disability- Related Poverty Level

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B. Individuals Covered

1. The state covers all individuals who meet the characteristics described in section A.

No

Age and Disability- Related Poverty Level

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C. Financial Methodologies

- 1. SSI methodologies are used in calculating household income and resources. Please refer as necessary to Non-MAGI Methodologies, completed by the state.
- 2. Less restrictive methodologies are used in calculating countable income.

No

a. The state uses the same less restrictive income methodologies for all individuals covered.

No

The less restrictive income methodologies are:

General income disregard:

Name of disregard:	Description:
Aged and Disabled FPL Expansion	Disregard the amount of countable income over 100% FPL up to 138% FPL. If such disregards are not sufficient to result in an effective income level equal to the SSI/SSP payment level for a disabled individual or, in the case of a couple, the SSI/SSP payment level for a disabled couple, then an income disregard sufficient to achieve that result [shall be applied].

Census Bureau wages are disregarded.

Description of As permitted under disregard: Section 1902(r)(2), all wages paid to an individual by the Census Bureau for temporary employment related to current or future census activities shall be exempt.

A specified type of income is disregarded:

Name of income type:	Description:
Kinship Guardianship Benefit Payments	As referenced in Supplement 8a of Attachment 2.6-A page 9:

Name of income type:	Description:
	As permitted under Section 1902(r)(2), in determining eligibility for the following coverage groups, State funded benefit payments under the State's Kinship Guardianship Assistance Payment Program (also known as Kinship Guardianship Assistance Payment Program -Enhanced) shall be exempt. These coverage groups are: 1902(a)(10)(A)(ii), 1902(a)(10)(C)(i)(III), and 1905(p).
In-home caregiver wages	As referenced in Supplement 8a of Attachment 2.6-A page 8: In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met: 1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program. Payments made by the California Department of Social Services to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r) (2): • 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i)(III) • 1905(p)

Name of income type:	Description:
Universal Guaranteed Income	Disregard the amount of income individuals receive from the California Guaranteed Income Pilot programs.

 $\ensuremath{{\ensuremath{\bowtie}}}$ The following less restrictive methodologies are used:

Name of methodology:	Description:
	Disregard and amount equal to the appropriate figure below, based on household size. This disregard description clarifies the existing policy listed on pages 6, 6a, and 7 of Supplement 8a to Attachment 2.6-A of the state plan.
Deductions for ineligible family members	Household of 1: \$600 Household of 2: \$750 Household of 2 adults*: \$934 Household of 3: \$934 Household of 4: \$1,100 Household of 5: \$1,259 Household of 6: \$1,417 Household of 7: \$1,550 Household of 8: \$1,692 Household of 9: \$1,825 Household of 10: \$1,959
	*A household of two adults where at least one person is aged, blind, or disabled utilizes the deduction for a household size of 3, as permitted by 42 CFR § 435.1007(c).
Medicare Part B Disregard	For the Section 1902 (a)(10)(A)(ii)(I) and (X) eligibility groups, disregard from an individual's income the amount of such individual's incurred Medicare Part B premium.

3. Less restrictive methodologies are used in calculating countable resources.

0	Yes
	No

a. The state uses the same less restrictive resource methodologies for all individuals covered.

No

The less restrictive resource methodologies are:

General resource disregard:

Name of disregard:	Description:
Assembly Bill 133 (2021) Resource Disregard	A resource disregard equal to the difference between the applicable resource standard for this coverage group and \$130,000 for a single individual and an additional \$65,000 per household member, up to a maximum of 10 household members.

 $\ensuremath{{\ensuremath{\square}}}$ Specified methodology for the treatment of resources set aside for burial:

Name of methodology:	Description:
Burial Funds	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-a, Page 2:
	All of the following shall be disregarded in determining eligibility in their entirety and shall not be applied against a single \$1500 limit:
	(1) All of the following burial related funds:
	(a) The first \$1500 paid for clearly designated burial funds such as burial insurance policies with cash surrender values, revocable burial trusts, revocable burial contracts, or other revocable burial arrangements.
	(b) Irrevocable burial trusts or irrevocable burial contracts, or other irrevocable burial arrangements.
	(c) Burial insurance

Name of methodology:	Description:
	policies without cash surrender values.
	(2) Life insurance policies on the life of any individual in the family shall be exempt if the combined face value of all of the policies on the insured individual is \$1500 or less.
	(3) All dividends and interest that accrue to and are not removed from the burial fund or policy described in (1) or (2).
	The disregard of life insurance policies and burial related funds is allowed for all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r) (2):
	(a)(10)(A)(ii), (a)(10)(C) (i)(III), and 1905(p)

 $\ensuremath{\overline{\sl}}$ The state uses a less restrictive methodology with respect to the treatment of motor vehicles.

A motor vehicle is disregarded under specific conditions.

Specified conditions:

Description: As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-a Page 11:

> One motor vehicle per budget unit shall be exempt regardless of value or use. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):

> • (a)(10)(A)(ii) • (a)(10)(C) (i)(III) • 1905(p)

☑ A specified type of resource is disregarded:

Description:
As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 12 and 13:
Excludable restitution payments made to a holocaust victim or his or her heirs or beneficiaries shall be considered an exempt resource for the purpose of determining eligibility to receive Medi-Cal benefits or the amounts of those benefits.
A "holocaust victim" is a person who was persecuted by Nazi Germany, any other Axis regime, or any other Nazi controlled or Nazi-allied country:
(1) on the basis of race, religion, physical or mental disability, or sexual orientation; (2) during any period before, during or after.
An "excludable restitution payment" is any payment or distribution, recovered or returned asset or property, received directly by a holocaust victim or heirs or beneficiaries of a holocaust victim: (1) as compensation pursuant to the German Act Regulating Unresolved Property Claims, as amended (Gesetz zur Regelung offener Vermogensfragen); (2) as a result of a settlement of claims against any entity or individual for any recovered asset. A "recovered asset" is any asset of any type, including any bank deposits, insurance proceeds, artwork, or interest earned on any of these assets, owned by a holocaust victim, withheld from that holocaust victim

	Name of resource type:	Description:
		beneficiaries and recovered, returned or otherwise compensated to the holocaust victim or his or her heirs or beneficiaries; (3) as a payment or restitution provided by law, or by a fund, established by any foreign country, the United States of America, or any other foreign or domestic entity, or as a result of a final resolution of a legal action; (4) as a direct or indirect return of, or compensation or reparation for, assets stolen or hidden from, or otherwise lost to, the individual before, during or immediately after World War II, including any insurance proceeds under policies issued on the individual by European insurance companies immediately before and during World War II; or (5) as interest, payable as part of any payment or distribution described in the paragraph. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r) (2): • (a)(10)(A)(ii) • (a)(10) (C)(i)(IIII) • 1905(p)
	Independence Accounts	Independence Accounts established under the Work Incentives program shall be disregarded in the resource eligibility determination, subject to the limitation identified below:
		Actions involving the accounts are subject to standard eligibility rules relating to resources
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Name of resource type:	Description:
	(e.g., a transfer from the account for less than fair market value would be subject to transfer- of-asset rules).
	Supplement 8b to Attachment 2.6A, Page 13
	In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met:
In-home caregiver resource disregard	1) The caregiver is being paid for providing the inhome care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those inhome services through any federal, state or local government program.
	Payments made by the California Department of Social Services to an inhome care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt.
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r) (2):
	• 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i)(III) • 1905(p)
Precertified long- term care insurance policy or health care service plan contract	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 1:
	A resource disregard is given to an individual who has purchased a precertified long-term care insurance policy or health care service plan contract which covers long-term care and has

Name of resource type:

Description:

used such policy or plan to pay for services.

Services which the individual receives and are paid for by the precertified long-term care insurance policy or health care service plan contract, which covers long-term care, must not be delivered by a member of the individual's family, unless:

- The family member is a regular employee of an organization which is providing the services; and
- The organization receives the payment for the services: and
- The family member receives no compensation other than the normal compensation for employees in his or her job category.

The amount of the disregard is equal to the lesser of the following amounts:
• the amount of payments made for services by the insurance policy; or
• the actual charge for the services.

Such disregard is in effect for the lifetime of the individual. The disregard is also allowed if a Medicaid application is filed on behalf of a deceased individual for payment of costs for care and services received by the individual during his or her lifetime.

The disregard of resources is allowed for aged. blind and disabled individuals who are otherwise eligible and:
A. Medically Needy [1902(a)(10)(C)(i)(III)], or
B. Optional Categorically Needy [1902(a)(10)(A)(ii)]. except those who are included in

Section 1902 (a)(10) (A)(ii)(VIII), 1902(a) (10)(A)(ii)(XI) and 1902(a)(10) (A)(ii)(IV) who are receiving Supplemental Security Income Payments under Title XVI or a State Supplemental Payment. or C. Who are Qualified Medicare Beneficiaries [1905(p)]. As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 14: All resources exempted from consideration as resources for individuals in the optional coverage group under section 1902(a)(10)(A)(ii)(XIII) of the Act on the basis that they are employer or individual retirement arrangements authorized under the Internal Revenue Code shall continue to be exempt from consideration as resources in all other coverage groups subject to the provisions of 1902(r) (2) under which the individual later becomes eligible for medical assistance where the basis for that eligibility is the individual's age, blindness, or disability. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r) (2): 1902(a)(10)(A)(ii)(X) 1902(a)(10)(A)(ii)(X) 1902(a)(10)(C)(i) Unpaid incurred medical bills As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 5: Pursuant to court order in Principe v. Belshe (Sacramento County Superior Court Case No. 96CSOO115), a	Name of resource type:	Description:
SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 14: All resources exempted from consideration as resources for individuals in the optional coverage group under section 1902(a)(10)(A)(ii)(XIII) of the Act on the basis that they are employer or individual retirement arrangements authorized under the Internal Revenue Code shall continue to be exempt from consideration as resources in all other coverage groups subject to the provisions of 1902(r) (2) under which the individual later becomes eligible for medical assistance where the basis for that eligibility is the individual's age, blindness, or disability. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r) (2): • 1902(a)(10)(A)(ii)(X) • 1902(a)(10)(A)(ii)(X) • 1902(a)(10)(C)(i) Unpaid incurred medical bills SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 5: Pursuant to court order in Principe v. Belshe (Sacramento County Superior Court Case No.		(A)(ii)(VIII), 1902(a) (10)(A)(ii)(XI) and 1902(a)(10) (A)(ii)(IV) who are receiving Supplemental Security Income Payments under Title XVI or a State Supplemental Payment. or C. Who are Qualified Medicare Beneficiaries
medical bills SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 5: Pursuant to court order in Principe v. Belshe (Sacramento County Superior Court Case No.	under 1902(a)(10)(A)	SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 14: All resources exempted from consideration as resources for individuals in the optional coverage group under section 1902(a)(10)(A)(ii)(I) of the Act on the basis that they are employer or individual retirement arrangements authorized under the Internal Revenue Code shall continue to be exempt from consideration as resources in all other coverage groups subject to the provisions of 1902(r) (2) under which the individual later becomes eligible for medical assistance where the basis for that eligibility is the individual's age, blindness, or disability. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r) (2):
order in Principe v. Belshe (Sacramento County Superior Court Case No.	· ·	SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 5:
		order in Principe v. Belshe (Sacramento County Superior Court Case No.

Name of resource	Description:
type:	resource disregard would be allowed equal to the amount of incurred medical bills that are unpaid in the month where there are excess resources for the entire month,
	 only when payment of those medical bills occurs in a later month, and verification of payment is provided.
	This disregard would be allowed no earlier than the month of application (may not be one of the three months prior to the month of application).
	The requirements listed above would have to be met before eligibility is granted for the month throughout which the excess resources existed.
	This disregard would apply only to individuals who have excess resources for the entire month but who are otherwise eligible in that month under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• (a)(10)(A)(ii) • (a)(10) (C)(i)(III) • 1905(p)
Japanese Reparation Payments	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 6:
	Japanese Reparation payments made by the Canadian government shall be exempt from consideration in determining eligibility for Medi-Cal.
	Japanese Reparation payments, whether made by the United States or Canadian

vv	
Name of resource type:	Description:
	governments shall be exempt if received by the spouse or inherited from the spouse who was the original recipient, or both.
	Where Japanese Reparation payments, whether made by the United States or Canadian governments, are converted to another form, amounts of otherwise excess, nonexempt resources sufficient to ensure that the amount of the exemption equals the amount of the reparation payments received by the individual or inherited by the spouse of the individual, or both, shall not be considered as resources in determining eligibility for Medi-
	Cal. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r) (2):
	• (a)(10)(A)(ii)(I) • (a) (10)(A)(ii)(VI) • (a)(10) (A)(ii)(X) • (a)(10)(A)(ii) (XIII) • (a)(10)(A)(ii) (XVIII) • (a)(10)(C)(i)(III) • 1905(p)
SSI and AFDC differing methodologies	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 8:
	In considering all of the various items of resources where the SSI program and the AFDC program have differing methodologies, the State shall follow the methodology of the least restrictive of either the SSI program or the AFDC program.
	The general rules contained in the paragraph above shall apply to
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Name of resource type:

Description:

determine the resource methodologies employed in consideration of all resource items unless a more specific methodology for a specific resource item is otherwise set forth and included in the State plan.

The above paragraphs apply to the resources of all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)

• (a)(10)(A)(ii) • (a)(10) (C)(i)(III) • 1905(p)

Principal residence disregard

As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 9:

The principal residence shall not be considered as a resource if any of the following circumstances exist (this is in addition to the reasons specified by the SSI program and the AFDC program):

• if a child under the age of 21 lives on the property, or • if a dependent relative lives on the property, (for this purpose only, a disabled child age 21 or over shall be considered a dependent relative), • if a sibling or child age 21 or over of the applicant or beneficiary has continuously resided on the property for at least one year immediately prior to the date the applicant or beneficiary entered a skilled nursing facility or

,,,,		
	Name of resource type:	Description:
		intermediate care facility and continues to reside there, or • if the property cannot be readily converted to cash but a bona fide effort is being made to sell the property. A bona fide effort to sell means that the property is listed for sale with a licensed real estate broker for its fair market value established by a qualified real estate appraiser, a good faith effort is being made to sell the property, offers at fair market value are accepted, and the applicant or beneficiary has supplied proof of compliance with these conditions to the county. The above paragraphs apply to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r) (2):
	Bona fide, good faith	(C)(i)(III) • 1905(p) As referenced in
	effort to sell or liquidate resource	SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 10:
		The value of resources shall be disregarded when there is a bona fide, good faith effort being made to sell or liquidate the resource. The value of the resource shall be disregarded for as long as the bona fide good faith effort to sell or liquidate continues to be made. This methodology is essentially the same as the methodology applied to resources being sold or liquidated in the
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Name of resource type:	Description:
	eligibility determinations of the SSI and AFDC program, however, since there is no conditional eligibility in the Medicaid program, the applicant/beneficiary shall not be required to sign, as a condition of eligibility, a statement agreeing to make repayment upon the sale of the property. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r) (2): • (a)(10)(A)(ii) • (a)(10) (C)(i)(III) • 1905(p)
Universal Guaranteed Income	Disregard as resources income individuals receive from the California Guaranteed Income Pilot programs for 12 months following the month of receipt.

Age and Disability- Related Poverty Level

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

Package ID CA2022MS0004O

Submission Type Official

Approval Date 1/30/2023 Superseded SPA ID CA-21-0053

System-Derived

Initial Submission 12/8/2022

Date

Effective Date 10/1/2022

SPA ID CA-22-0072

D. Income Standard Used

The income standard for this eligibility group is:

1. 100% FPL

2. A lower percent of the FPL:

Age and Disability- Related Poverty Level

System-Derived

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

Package ID CA2022MS0004O

Submission Type Official

Approval Date 1/30/2023

Superseded SPA ID CA-21-0053

SPA ID CA-22-0072

Initial Submission 12/8/2022

Date

Effective Date 10/1/2022

E. Resource Standard Used

The resource standard used is:

- 1. The resource limit for the SSI program; or
- $\hfill \bigcirc$ 2. The resource limit used in the state's medically needy program, if higher.

Age and Disability- Related Poverty Level

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

Package ID CA2022MS0004O

Submission Type Official Approval Date 1/30/2023 Superseded SPA ID CA-21-0053

System-Derived

SPA ID CA-22-0072

Initial Submission 12/8/2022

Date

Effective Date 10/1/2022

F. Additional Information (optional)

Eligibility Groups - Options for Coverage

Work Incentives

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Individuals with a disability with income below 250% of the FPL, who would qualify for SSI except for earned income.

Package Header

Package ID CA2022MS0004O **SPA ID** CA-22-0072

Submission Type Official Initial Submission 12/8/2022

Date Approval Date 1/30/2023

Effective Date 10/1/2022 Superseded SPA ID CA-21-0053

System-Derived

The state covers the optional Work Incentives eligibility group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

- 1. Have earned income.
- 2. Meet the SSI definition of disability, but for earned income.
- 3. Meet income and resource standards following a two-step process, which includes:
 - a. Step One A comparison of family net income to 250% FPL; and
 - b. Step Two A comparison of individual net income and resources to the SSI standards, excluding earned income.

Work Incentives

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS00040 | CA-22-0072

Package Header

Package ID CA2022MS0004O

Submission Type Official

Approval Date 1/30/2023

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System-Derived

SPA ID CA-22-0072

Initial Submission 12/8/2022 Date

Effective Date 10/1/2022

B. Step One Financial Methodologies and Income Test

1. Financial methodologies

a. SSI methodologies are used in calculating family income. Please refer as necessary to Non-MAGI Methodologies, completed by the

b. Less restrictive methodologies are used in calculating countable income.

Yes

O No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

A specified type of income is disregarded:

Description of As permitted under Section 1902(r)(2), all wages disregard: paid to an individual by the Census Bureau for

census activities shall be exempt.

temporary employment related to current or future

Name of income type: Description: As referenced in Supplement 8a to Attachment 2.6 A, Page 5: For the working disabled covered under the provisions of Section 1902(a)(10)(A)(ii)(XIII) of the Act (1) As permitted under Section 1902 (r)(2); all disability income of the disabled individual is exempted (e.g. federal and state disability income and private disability Disability-based income disregard income such as an indemnity payment from an insurance company based on the individual's disability). (2) As permitted under Section 1902(r)(2), social security disability income that converts to retirement income upon the retirement of the individual, including any increases in the amount of that income, shall be exempt. 2009 SSI/SSP Payment Levels As referenced in Supplement 8a to Attachment 2.6-A Page 5a: Beginning on July 1, 2009, an amount of otherwise countable income equal to the difference between the applicable SSI/SSP payment level and the applicable SSI/SSP payment level in effect on

June 30, 2009 shall be exempt until and unless the SSI/SSP payment levels increase to a point that is above the levels in effect on June 30, 2009. This exemption shall be

Name of income type:	Description:
	applied to the following coverage groups: • 1902(a)(10)(A)(ii)(XIII)
In-home Caregiver Wages	As referenced in Supplement 8a of Attachment 2.6-A page 8: In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met: 1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program. Payments made by the California Department of Social Services to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i) (III) • 1905(p)
Kinship Guardianship Benefit Payments	As referenced in Supplement 8a of Attachment 2.6-A page 9: As permitted under Section 1902(r) (2), in determining eligibility for the following coverage groups, State funded benefit payments under the State's Kinship Guardianship Assistance Payment Program (also known as Kinship Guardianship Assistance Payment Program - Enhanced) shall be exempt. These coverage groups are: 1902(a)(10)(A)(ii), 1902(a)(10)(C)(i) (III), and 1905(p).
Universal Guaranteed Income	Disregard the amount of income individuals receive from the California Guaranteed Income Pilot programs.

2. Income Test

Family net income must be less than 250% FPL. Please refer as necessary to Non-MAGI Methodologies for the definition of family size.

Work Incentives

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

Package ID CA2022MS0004O

Submission Type Official

Approval Date 1/30/2023 Superseded SPA ID CA-21-0053

System-Derived

SPA ID CA-22-0072

Initial Submission 12/8/2022

Date

Effective Date 10/1/2022

C. Step Two Financial Methodologies and Income/Resource Test

1. Financial methodologies

a. SSI methodologies are used in calculating income and resources, except that earned income is not counted. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

b. Less restrictive methodologies are used in calculating countable income.

Yes

No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

☑ A specified type of income is disregarded:

Description of As permitted under Section 1902(r)(2), all wages disregard: paid to an individual by the Census Bureau for

temporary employment related to current or future census activities shall be exempt.

Name of income type:	Description:
Disability-based income disregard	As referenced in Supplement 8a to Attachment 2.6 A, Page 5: For the working disabled covered under the provisions of Section 1902(a)(10)(A)(ii)(XIII) of the Act (1) As permitted under Section 1902 (r)(2); all disability income of the disabled individual is exempted (e.g. federal and state disability income and private disability income such as an indemnity payment from an insurance company based on the individual's disability). (2) As permitted under Section 1902(r)(2), social security disability income that converts to retirement income upon the retirement of the individual, including any increases in the amount of that income, shall be exempt.
2009 SSI/SSP Payment Levels	As referenced in Supplement 8a to Attachment 2.6-A Page 5a: Beginning on July 1, 2009, an amount of otherwise countable income equal to the difference between the applicable SSI/SSP payment level and the applicable SSI/SSP payment level in effect on June 30, 2009 shall be exempt until and unless the SSI/SSP payment levels increase to a point that is above the levels in effect on June 30, 2009. This exemption shall be

Name of income type:	Description:
	applied to the following coverage groups: • 1902(a)(10)(A)(ii)(XIII)
In-home Caregiver Wages	As referenced in Supplement 8a of Attachment 2.6-A page 8: In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met: 1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program. Payments made by the California Department of Social Services to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i) (III) • 1905(p)
Kinship Guardianship Benefit Payments	As referenced in Supplement 8a of Attachment 2.6-A page 9: As permitted under Section 1902(r) (2), in determining eligibility for the following coverage groups, State funded benefit payments under the State's Kinship Guardianship Assistance Payment Program (also known as Kinship Guardianship Assistance Payment Program - Enhanced) shall be exempt. These coverage groups are: 1902(a)(10)(A)(ii), 1902(a)(10)(C)(i) (III), and 1905(p).
Universal Guaranteed Income	Disregard the amount of income individuals receive from the California Guaranteed Income Pilot programs.

c. Less restrictive methodologies are used in calculating countable resources.

Yes

No

The less restrictive resource methodologies are:

General resource disregard:

Name of disregard:	Description:
Assembly Bill 133 (2021) Resource Disregard	A resource disregard equal to the difference between the applicable resource standard for this coverage group and \$130,000 for a single individual and an additional \$65,000 per household member, up to a maximum of 10 household members.

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Name of methodology:	Description:
	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-a, Page 2:
	All of the following shall be disregarded in determining eligibility in their entirety and shall not be applied against a single \$1500 limit:
	(1) All of the following burial related funds:
	(a) The first \$1500 paid for clearly designated burial funds such as burial insurance policies with cash surrender values, revocable burial trusts, revocable burial contracts, or other revocable burial arrangements.
	(b) Irrevocable burial trusts or irrevocable burial contracts, or other irrevocable burial arrangements.
Burial Funds	(c) Burial insurance policies without cash surrender values.
	(2) Life insurance policies on the life of any individual in the family shall be exempt if the combined face value of all of the policies on the insured individual is \$1500 or less.
	(3) All dividends and interest that accrue to and are not removed from the burial fund or policy described in (1) or (2).
	The disregard of life insurance policies and burial related funds is allowed for all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	(a)(10)(A)(ii), (a)(10)(C)(i)(III), and 1905(p)

 $\ensuremath{{\ensuremath{\square}}}$ A motor vehicle is disregarded under specific conditions.

Specified conditions:

Description: As referenced in SUPPLEMENT 8b TO ATTACHMENT

2.6-a Page 11:

One motor vehicle per budget unit shall be exempt regardless of value or use. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security

Act at Section 1902(r)(2):

• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)

 $\ensuremath{\overline{\square}}$ A specified type of resource is disregarded:

Name of resource type:	Description:
SSI and AFDC differing methodologies	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 8: In considering all of the various items of resources where the SSI program and the AFDC program have differing methodologies, the State shall follow the methodology of the least restrictive of either the SSI program or the AFDC program. • The general rules contained in the paragraph above shall apply to determine the resource methodologies employed in consideration of all resource items unless a more specific methodology for a specific resource item is otherwise set forth and included in the State plan. The above paragraphs apply to the resources of all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Principal residence disregard	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 9: The principal residence shall not be considered as a resource if any of the following circumstances exist (this is in addition to the reasons specified by the SSI program and the AFDC program): • if a child under the age of 21 lives on the property, or • if a dependent relative lives on the property, (for this purpose only, a disabled child age 21 or over shall be considered a dependent relative), • if a sibling or child age 21 or over of the applicant or beneficiary has continuously resided on the property for at least one year immediately prior to the date the applicant or beneficiary entered a

Name of resource type:	Description:
	skilled nursing facility or intermediate care facility and continues to reside there, or • if the property cannot be readily converted to cash but a bona fide effort is being made to sell the property. A bona fide effort to sell means that the property is listed for sale with a licensed real estate broker for its fair market value established by a qualified real estate appraiser, a good faith effort is being made to sell the property, offers at fair market value are accepted, and the applicant or beneficiary has supplied proof of compliance with these conditions to the county. The above paragraphs apply to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Bona fide, good faith effort to sell or liquidate resource	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 10: The value of resources shall be disregarded when there is a bona fide, good faith effort being made to sell or liquidate the resource. The value of the resource shall be disregarded for as long as the bona fide good faith effort to sell or liquidate continues to be made. This methodology is essentially the same as the methodology applied to resources being sold or liquidated in the eligibility determinations of the SSI and AFDC program, however, since there is no conditional eligibility in the Medicaid program, the applicant/beneficiary shall not be required to sign, as a condition of eligibility, a statement agreeing to make repayment upon the sale of the property. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Restitution payments made to Holocaust victims	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 12 and 13: Excludable restitution payments made to a holocaust victim or his or her heirs or beneficiaries shall

Name of resource type:

Description:

be considered an exempt resource for the purpose of determining eligibility to receive Medi-Cal benefits or the amounts of those benefits.

A "holocaust victim" is a person who was persecuted by Nazi Germany, any other Axis regime, or any other Nazi controlled or Naziallied country:

(1) on the basis of race, religion, physical or mental disability, or sexual orientation; (2) during any period before, during or after.

An "excludable restitution payment" is any payment or distribution, recovered or returned asset or property, received directly by a holocaust victim or heirs or beneficiaries of a holocaust victim: (1) as compensation pursuant to the German Act Regulating Unresolved Property Claims, as amended (Gesetz zur Regelung offener Vermogensfragen); (2) as a result of a settlement of claims against any entity or individual for any

recovered asset. A "recovered asset" is any asset of any type, including any bank deposits, insurance proceeds, artwork, or interest earned on any of these assets, owned by a holocaust victim, withheld from that holocaust victim or his or her heirs or beneficiaries and recovered, returned or otherwise compensated to the holocaust victim or his or her heirs or beneficiaries: (3) as a payment or restitution

provided by law, or by a fund, established by any foreign country, the United States of America, or any other foreign or domestic entity, or as a result of a final resolution of a legal action; (4) as a direct or indirect return of, or compensation or reparation for, assets stolen or hidden from, or otherwise lost to, the individual before, during or immediately after World War II, including any insurance proceeds under policies issued on the individual by European insurance companies immediately before and during World War II; or (5) as interest, payable as part of

These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):

any payment or distribution described in the paragraph.

• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)

Name of resource type:	Description:
	Exclude the value of all retirement accounts while the account owner is receiving coverage under section 1902(a)(10)(A)(ii)(XIII) of the Act.
Independence Accounts	For individuals enrolled in the eligibility category described at section 1902(a)(10)(A)(ii)(XIII) of the Act, the following resource methodology applies:
	A resource disregard will apply to an account established by the beneficiary after and during the individual's enrollment in the category. The individual shall designate the account to the state Medicaid agency as his or her Independence Account.
	These accounts will be held separately from non-exempt resources in accounts for which prior approval has been obtained from the Department.
	There is no minimum or maximum limit to establish the account.
	There is no minimum or maximum limit that can be deposited to the existing account
	Supplement 8b to Attachment 2.6A, Page 13
In-home caregiver resource disregard Precertified long-term care insurance policy or health care service plan contract	In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met:
	1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program.
	Payments made by the California Department of Social Services to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt.
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i) (III) • 1905(p)
	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 1:
	A resource disregard is given to an individual who has purchased a precertified long-term care insurance policy or health care service plan contract which covers long-term care and has used such

long-term care, must not be delivered by a member of the individual's family, unless: The family member is a regular employee of an organization which is providing the services; and The organization receives the payment for the services: and The services in the payment for the services no compensation other than the normal compensation for employees in his or her job category. The amount of the disregard is equal to the lesser of the following amounts: the amount of payments made for services by the insurance policy or the actual charge for the services Such disregard is in effect for the lifetime of the individual. The disregard is also allowed if a Medicaid application is filed on behalf of a deceased individual for payment of costs for care and services received by the individual during his or her lifetime. The disregard of resources is allowed for aged. blind and disabled individuals who are otherwise eligible and: A. Medically Needy [1902(a)(10)(C) (i)(iii)], or B. Optional Categorically Needy [1902(a)(10)(A)(ii)(VIII), 1902(a)(10)(A)(ii)(VIII), 1902(a)(10)(A)(iii)(VIII), 1902(a)(10)(A)(ii)(VIII), 1902(a)(10)	Name of resource type:	Description:
receives and are paid for by the precertified long-term care insurance policy or health care service plan contract, which covers long-term care, must not be delivered by a member of the individual's family, unless: • The family member is a regular employee of an organization which is providing the services; and • The organization receives the payment for the services: and • The family member receives no compensation other than the normal compensation for employees in his or her job category. The amount of the disregard is equal to the lesser of the following amounts: • the amount of payments made for services by the insurance policy or • the actual charge for the services. Such disregard is in effect for the lifetime of the individual. The disregard is also allowed if a Medicaid application is filed on behalf of a deceased individual for payment of costs for care and services received by the individual during his or her lifetime. The disregard of resources is allowed for aged. blind and disabled individuals who are otherwise eligible and: A. Medically Needy [1902(a)(10)(C) (()(()()()), or B. Optional Categorically Needy [1902(a)(10)(A)(ii)()()), except those who are included in Section 1902 (a)(10)(A)(ii)()()), accept those who are included in Section 1902 (a)(10)(A)(ii)(IV)), and 1902(a)(10)(A)(ii)(IV) who are receiving Supplemental Security Income Payments under Title XVI or a State Supplemental Payment. or C. Who are Qualified Medicare Beneficiaries [1905(p)]. As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 1: All retained earned income of a disabled individual that is held in a separately identified account and that is not commingled with any other resources shall be exempt from consideration as resources as permitted by Section 1902(r)(2).		policy or plan to pay for services.
equal to the lesser of the following amounts: • the amount of payments made for services by the insurance policy or • the actual charge for the services Such disregard is in effect for the lifetime of the individual. The disregard is also allowed if a Medicaid application is filed on behalf of a deceased individual for payment of costs for care and services received by the individual during his or her lifetime. The disregard of resources is allowed for aged. blind and disabled individuals who are otherwise eligible and: A. Medically Needy [1902(a)(10)(C) (i)(III)], or B. Optional Categorically Needy [1902(a)(10)(A)(ii)(I)) (XI) and 1902(a)(10)(A)(ii)(II) (XI) and 1902(a)(10)(A)(ii)(IV) who are included in Section 1902 (a)(10)(A)(ii)(IV) who are receiving Supplemental Security Income Payments under Title XVI or a State Supplemental Payment. or C. Who are Qualified Medicare Beneficiaries [1905(p)]. As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 1: All retained earned income of a disabled individual that is held in a separately identified account and that is not commingled with any other resources shall be exempt from consideration as resources at permitted by Section 1902(r)(2).		receives and are paid for by the precertified long-term care insurance policy or health care service plan contract, which covers long-term care, must not be delivered by a member of the individual's family, unless: • The family member is a regular employee of an organization which is providing the services; and • The organization receives the payment for the services: and • The family member receives no compensation other than the normal compensation for employees in his or her job
lifetime of the individual. The disregard is also allowed if a Medicaid application is filed on behalf of a deceased individual for payment of costs for care and services received by the individual during his or her lifetime. The disregard of resources is allowed for aged. blind and disabled individuals who are otherwise eligible and: A. Medically Needy [1902(a)(10)(C) (i)(III)], or B. Optional Categorically Needy [1902(a)(10)(A)(ii)], except those who are included in Section 1902 (a)(10)(A)(ii)(VIII), 1902(a)(10)(A)(ii) (XI) and 1902(a)(10) (A)(ii)(VI) who are receiving Supplemental Security Income Payments under Title XVI or a State Supplemental Payment. or C. Who are Qualified Medicare Beneficiaries [1905(p)]. As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 1: All retained earned income of a disabled individual that is held in a separately identified account and that is not commingled with any other resources shall be exempt from consideration as resources at permitted by Section 1902(r)(2).		equal to the lesser of the following amounts: • the amount of payments made for services by the insurance policy;
allowed for aged. blind and disabled individuals who are otherwise eligible and: A. Medically Needy [1902(a)(10)(C) (i)(III)], or B. Optional Categorically Needy [1902(a)(10)(A)(ii)]. except those who are included in Section 1902 (a)(10)(A)(ii), 1902(a)(10)(A)(ii) (XI) and 1902(a)(10) (A)(ii)(IV) who are receiving Supplemental Security Income Payments under Title XVI or a State Supplemental Payment. or C. Who are Qualified Medicare Beneficiaries [1905(p)]. As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 1: All retained earned income of a disabled individual that is held in a separately identified account and that is not commingled with any other resources shall be exempt from consideration as resources as permitted by Section 1902(r)(2). Unpaid incurred medical bills As referenced in SUPPLEMENT 8b		lifetime of the individual. The disregard is also allowed if a Medicaid application is filed on behalf of a deceased individual for payment of costs for care and services received by the individual during his or her lifetime.
TO ATTACHMENT 2.6-A Page 1: All retained earned income of a disabled individual that is held in a separately identified account and that is not commingled with any other resources shall be exempt from consideration as resources as permitted by Section 1902(r)(2). Unpaid incurred medical bills As referenced in SUPPLEMENT 8b		allowed for aged. blind and disabled individuals who are otherwise eligible and: A. Medically Needy [1902(a)(10)(C) (i)(III)], or B. Optional Categorically Needy [1902(a)(10)(A)(ii)]. except those who are included in Section 1902 (a)(10)(A)(ii)(VIII), 1902(a)(10)(A)(ii) (XI) and 1902(a)(10) (A)(ii)(IV) who are receiving Supplemental Security Income Payments under Title XVI or a State Supplemental Payment. or C. Who are Qualified Medicare
·	Separately identified account	TO ATTACHMENT 2.6-A Page 1: All retained earned income of a disabled individual that is held in a separately identified account and that is not commingled with any other resources shall be exempt from consideration as resources as
v. Belshe (Sacramento County Superior Court Case No.	Unpaid incurred medical bills	TO ATTACHMENT 2.6-A Page 5: Pursuant to court order in Principe v. Belshe (Sacramento County Superior Court Case No. 96CSOO115), a resource disregard

Name of resource type:	Description:
	amount of incurred medical bills that are unpaid in the month where there are excess resources for the entire month,
	 only when payment of those medical bills occurs in a later month, and verification of payment is provided.
	This disregard would be allowed no earlier than the month of application (may not be one of the three months prior to the month of application).
	The requirements listed above would have to be met before eligibility is granted for the month throughout which the excess resources existed.
	This disregard would apply only to individuals who have excess resources for the entire month but who are otherwise eligible in that month under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Japanese Reparation Payments	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 6:
	Japanese Reparation payments made by the Canadian government shall be exempt from consideration in determining eligibility for Medi-Cal.
	Japanese Reparation payments, whether made by the United States or Canadian governments shall be exempt if received by the spouse or inherited from the spouse who was the original recipient, or both.
	Where Japanese Reparation payments, whether made by the United States or Canadian governments, are converted to another form, amounts of otherwise excess, nonexempt resources sufficient to ensure that the amount of the exemption equals the amount of the reparation payments received by the individual or inherited by the spouse of the individual, or both, shall not be considered as resources in determining eligibility for Medi-Cal.
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• (a)(10)(A)(ii)(I) • (a)(10)(A)(ii)(VI) • (a) (10)(A)(ii)(X) • (a)(10)(A)(ii)(XIII) • (a)

Name of resource type:	Description:	
	(10)(A)(ii)(XVIII) • (a)(10)(C)(i)(III) • 1905(p)	
Universal Guaranteed Income	Disregard as resources income individuals receive from the California Guaranteed Income Pilot programs for 12 months following the month of receipt.	

2. Income Test

For individuals who pass Step One, in Step Two, the individual's unearned income (plus deemed income, if appropriate) must be less than one of the following income standards:

- a. The SSI income standard.
- b. The income standard of the state supplement program.
- 3. Resource Test

The individual's resources must be less than the SSI resource standard.

Work Incentives

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

Package ID CA2022MS0004O

Submission Type Official

Approval Date 1/30/2023

Superseded SPA ID CA-21-0053

System-Derived

SPA ID CA-22-0072

Initial Submission 12/8/2022

Date

Effective Date 10/1/2022

D. Premiums and Cost Sharing

Requirements for premiums and cost sharing for this group are found in the premium and cost sharing sections of the state plan.

Work Incentives

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

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E. Additional Information (optional)

Requirements for premiums and cost sharing for this group are found in the premium and cost sharing sections as well as page 12d of Attachment 2.6-A of the state plan.

Medicaid State Plan Eligibility

Eligibility Groups - Medically Needy

Medically Needy Pregnant Women

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS00040 | CA-22-0072

Woman who are pregnant or post-partum who would qualify under the state's Pregnant Women eligibility group, except for income.

Package Header

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The state covers the Medically Needy Pregnant Women eligibility group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

- 1. Are pregnant or post-partum, as defined in 42 CFR 435.4.
- 2. Would qualify under the Pregnant Women eligibility group, except for income.
- 3. Are not otherwise eligible for categorically needy coverage under the state plan.
- 4. Have income at or below the medically needy income level and resources at or below the medically needy resource level.

Medically Needy Pregnant Women

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

Package ID CA2022MS0004O

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System-Derived

SPA ID CA-22-0072

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Date

Effective Date 10/1/2022

B. Financial Methodologies

- 1. The financial methodology used is:
- a. AFDC methodologies. Please refer as necessary to Non-MAGI Methodologies, completed by the state.
- b. MAGI-like methodologies. Please refer as necessary to Non-MAGI Methodologies, completed by the state.
- 2. Less restrictive methodologies are used in calculating countable income.
- Yes
- O No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

A specified type of income is disregarded:

Description of As permitted under Section 1902(r)(2), all wages disregard: paid to an individual by the Census Bureau for

temporary employment related to current or future

census activities shall be exempt.

Name of income type:	Description:
In-home caregiver wages	As referenced in Supplement 8a of Attachment 2.6-A page 8: In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met: 1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program. Payments made by the California Department of Social Services to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i) (III) • 1905(p)
Kinship Guardianship Benefit Payments	As referenced in Supplement 8a of Attachment 2.6-A page 9: As permitted under Section 1902(r) (2), in determining eligibility for the following coverage groups, State funded benefit payments under the State's Kinship Guardianship Assistance Payment Program (also known as Kinship Guardianship Assistance Payment Program -

Name of income type:	Description:
	Enhanced) shall be exempt. These coverage groups are:
	1902(a)(10)(A)(ii), 1902(a)(10)(C)(i) (III) , and 1905(p).
Universal Guaranteed Income	Disregard the amount of income individuals receive from the California Guaranteed Income Pilot programs.

 $\ensuremath{{\ensuremath{\square}}}$ The following less restrictive methodologies are used:

Name of methodology:	Description:
Deductions for ineligible family members	Disregard and amount equal to the appropriate figure below, based on household size. This disregard description clarifies the existing policy listed on pages 6, 6a, and 7 of Supplement 8a to Attachment 2.6-A of the state plan. Household of 1: \$600 Household of 2: \$750 Household of 3: \$934 Household of 3: \$934 Household of 4: \$1,100 Household of 5: \$1,259 Household of 5: \$1,259 Household of 6: \$1,417 Household of 7: \$1,550 Household of 9: \$1,825 Household of 9: \$1,825 Household of 10: \$1,959 *A household of two adults where at least one person is aged, blind, or disabled utilizes the deduction for a household size of 3, as permitted by 42 CFR § 435.1007(c).

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٥.	Less	restrictive	methodolo	ogies are	usea m	calculating	countable	resources.

Yes

No

The less restrictive resource methodologies are:

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Name of methodology:	Description:
Burial Funds	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-a, Page 2:
	All of the following shall be disregarded in determining eligibility in their entirety and shall not be applied against a single \$1500 limit:
	(1) All of the following burial related funds:
	(a) The first \$1500 paid for clearly designated burial funds such as burial insurance policies with cash surrender values, revocable burial trusts, revocable burial contracts,

Name of methodology:	Description:
	or other revocable burial arrangements.
	(b) Irrevocable burial trusts or irrevocable burial contracts, or other irrevocable burial arrangements.
	(c) Burial insurance policies without cash surrender values.
	(2) Life insurance policies on the life of any individual in the family shall be exempt if the combined face value of all of the policies on the insured individual is \$1500 or less.
	(3) All dividends and interest that accrue to and are not removed from the burial fund or policy described in (1) or (2).
	The disregard of life insurance policies and burial related funds is allowed for all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	(a)(10)(A)(ii), (a)(10)(C)(i)(III), and 1905(p)

 $\ensuremath{\overline{\sl}}$ The state uses a less restrictive methodology with respect to the treatment of motor vehicles.

A motor vehicle is disregarded under specific conditions.

Specified conditions:

Description: As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-a Page 11:

> One motor vehicle per budget unit shall be exempt regardless of value or use. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):

• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)

 $\ensuremath{\overline{\square}}$ A specified type of resource is disregarded:

Name of resource type:	Description:
Principal residence disregard	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 9: The principal residence shall not be considered as a resource if any of the following circumstances exist (this is in addition to the reasons specified by the SSI program and the AFDC program): • if a child under the age of 21 lives on the property, or • if a dependent relative lives on the property, (for this purpose only, a disabled child age 21 or

Name of resource type:	Description:
	over shall be considered a dependent relative), • if a sibling or child age 21 or over of the applicant or beneficiary has continuously resided on the property for at least one year immediately prior to the date the applicant or beneficiary entered a skilled nursing facility or intermediate care facility and continues to reside there, or • if the property cannot be readily converted to cash but a bona fide effort is being made to sell the property. A bona fide effort to sell means that the property is listed for sale with a licensed real estate broker for its fair market value established by a qualified real estate appraiser, a good faith effort is being made to sell the property, offers at fair market value are accepted, and the applicant or beneficiary has supplied proof of compliance with these conditions to the county. The above paragraphs apply to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Bona fide, good faith effort to sell or liquidate resource	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 10: The value of resources shall be disregarded when there is a bona fide, good faith effort being made to sell or liquidate the resource. The value of the resource shall be disregarded for as long as the bona fide good faith effort to sell or liquidate continues to be made. This methodology is essentially the same as the methodology applied to resources being sold or liquidated in the eligibility determinations of the SSI and AFDC program, however, since there is no conditional eligibility in the Medicaid program, the applicant/beneficiary shall not be required to sign, as a condition of eligibility, a statement agreeing to make repayment upon the sale of the property. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)

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Name of resource type:	Description:
Universal Guaranteed Income	Disregard as resources income individuals receive from the California Guaranteed Income Pilot programs for 12 months following the month of receipt.
Restitution payments made to Holocaust victims	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 12 and 13:
	Excludable restitution payments made to a holocaust victim or his or her heirs or beneficiaries shall be considered an exempt resource for the purpose of determining eligibility to receive Medi-Cal benefits or the amounts of those benefits.
	A "holocaust victim" is a person who was persecuted by Nazi Germany, any other Axis regime, or any other Nazi controlled or Nazi- allied country:
	(1) on the basis of race, religion, physical or mental disability, or sexual orientation; (2) during any period before, during or after.
	An "excludable restitution payment" is any payment or distribution, recovered or returned asset or property, received directly by a holocaust victim or heirs or beneficiaries of a holocaust victim: (1) as compensation pursuant to the German Act Regulating Unresolved Property Claims, as amended (Gesetz zur Regelung offener Vermogensfragen); (2) as a result of a settlement of claims against any entity or individual for
	any recovered asset. A "recovered asset" is any asset of any type, including any bank deposits, insurance proceeds, artwork, or interest earned on any of these assets, owned by a holocaust victim, withheld from that holocaust victim or his or her heirs or beneficiaries and recovered, returned or otherwise compensated to the holocaust victim or his or her heirs or beneficiaries; (3) as a payment or restitution provided by law, or by a fund, established by any foreign country, the United States of America, or any other foreign or domestic entity, or as a result of a final resolution of a legal action; (4) as a direct or indirect return of, or compensation or reparation for, assets stolen or hidden from, or otherwise lost to, the individual before, during or immediately after World War II, including any
	insurance proceeds under policies issued on the individual by European insurance companies immediately before and during

Name of resource type:	Description:
	World War II; or (5) as interest, payable as part of any payment or distribution described in the paragraph.
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Independence Accounts	Independence Accounts established under the Work Incentives program shall be disregarded in the resource eligibility determination, subject to the limitation identified below: Actions involving the accounts are subject to standard eligibility
	rules relating to resources (e.g., a transfer from the account for less than fair market value would be subject to transfer-of-asset rules).
	Supplement 8b to Attachment 2.6A, Page 13
In-home caregiver resource disregard	In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met:
	1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program.
	Payments made by the California Department of Social Services to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt.
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i) (III) • 1905(p)
Precertified long-term care insurance policy or health care service plan contract	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 1:
	A resource disregard is given to an individual who has purchased a precertified long-term care insurance policy or health care service plan contract which covers long-term care and has used such policy or plan to pay for services.
	Services which the individual receives and are paid for by the precertified long-term care insurance policy or health care service plan contract, which covers

Name of resource type:	Description:
	long-term care, must not be delivered by a member of the individual's family, unless: • The family member is a regular employee of an organization which is providing the services; and • The organization receives the payment for the services: and • The family member receives no compensation other than the normal compensation for employees in his or her job category.
	The amount of the disregard is equal to the lesser of the following amounts: • the amount of payments made for services by the insurance policy; or • the actual charge for the services.
	Such disregard is in effect for the lifetime of the individual. The disregard is also allowed if a Medicaid application is filed on behalf of a deceased individual for payment of costs for care and services received by the individual during his or her lifetime.
	The disregard of resources is allowed for aged. blind and disabled individuals who are otherwise eligible and: A. Medically Needy [1902(a)(10)(C) (i)(III)], or B. Optional Categorically Needy [1902(a)(10)(A)(ii)]. except those who are included in Section 1902 (a)(10)(A)(ii)(VIII), 1902(a)(10)(A)(ii) (XI) and 1902(a)(10) (A)(ii)(IV) who are receiving Supplemental Security Income Payments under Title XVI or a State Supplemental Payment. or C. Who are Qualified Medicare Beneficiaries [1905(p)].
Resources exempted under 1902(a) (10)(A)(ii)(XIII)	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 14: All resources exempted from consideration as resources for individuals in the optional coverage group under section 1902(a)(10)(A) (ii)(XIII) of the Act on the basis that they are employer or individual retirement arrangements authorized under the Internal Revenue Code shall continue to be exempt from consideration as resources in all other coverage groups subject to the provisions of 1902(r)(2) under which the individual later becomes eligible for medical assistance where the basis for that eligibility is the individual's age, blindness, or disability.
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):

Name of resource type:	Description: • 1902(a)(10)(A)(ii)(I) • 1902(a)(10)(A) (ii)(X) • 1902(a)(10)(C)(i)
	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 5:
	Pursuant to court order in Principe v. Belshe (Sacramento County Superior Court Case No. 96CSOO115), a resource disregard would be allowed equal to the amount of incurred medical bills that are unpaid in the month where there are excess resources for the entire month,
	 only when payment of those medical bills occurs in a later month, and verification of payment is provided.
Unpaid incurred medical bills	This disregard would be allowed no earlier than the month of application (may not be one of the three months prior to the month of application).
	The requirements listed above would have to be met before eligibility is granted for the month throughout which the excess resources existed.
	This disregard would apply only to individuals who have excess resources for the entire month but who are otherwise eligible in that month under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Japanese Reparation Payments	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 6:
	Japanese Reparation payments made by the Canadian government shall be exempt from consideration in determining eligibility for Medi-Cal.
	Japanese Reparation payments, whether made by the United States or Canadian governments shall be exempt if received by the spouse or inherited from the spouse who was the original recipient, or both.
	Where Japanese Reparation payments, whether made by the United States or Canadian governments, are converted to another form, amounts of otherwise excess, nonexempt resources sufficient to ensure that the amount of the exemption equals the amount of the reparation payments received by the individual or inherited by the spouse of the individual, or both,

Name of resource type:	Description:
	shall not be considered as resources in determining eligibility for Medi-Cal.
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• (a)(10)(A)(ii)(I) • (a)(10)(A)(ii)(VI) • (a) (10)(A)(ii)(X) • (a)(10)(A)(ii)(XIII) • (a) (10)(A)(ii)(XVIII) • (a)(10)(C)(i)(III) • 1905(p)
	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 8:
	In considering all of the various items of resources where the SSI program and the AFDC program have differing methodologies, the State shall follow the methodology of the least restrictive of either the SSI program or the AFDC program.
SSI and AFDC differing methodologies	The general rules contained in the paragraph above shall apply to determine the resource methodologies employed in consideration of all resource items unless a more specific methodology for a specific resource item is otherwise set forth and included in the State plan.
	The above paragraphs apply to the resources of all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)

SPA ID CA-22-0072

Medically Needy Pregnant Women

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

Package ID CA2022MS0004O

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System-Derived

C. Income Standard Used

The income standard used for this group is described in the Medically Needy Income Level RU.

D. Resource Standard Used

The resource standard used for this group is described in the Medically Needy Resource Level RU.

E. Spenddown

The state allows individuals to deduct incurred medical and remedial expenses (spend down) to become eligible under this group. Spenddown is defined in the Handling of Excess Income (Spenddown) RU.

Medically Needy Pregnant Women

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

 Package ID
 CA2022MS00040
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System-Derived

F. Additional Information (optional)

Medicaid State Plan Eligibility

Eligibility Groups - Medically Needy

Medically Needy Children under Age 18

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Children under age 18 who would qualify under the state's categorically needy eligibility groups, except for income.

Package Header

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System-Derived

The state covers the Medically Needy Children under Age 18 eligibility group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

- 1. Are under age 18.
- 2. Would qualify as categorically needy, except for income.
- 3. Are not otherwise eligible for categorically needy coverage under the state plan.
- 4. Have income at or below the medically needy income level and resources at or below the medically needy resource level.

Medically Needy Children under Age 18

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS00040 | CA-22-0072

Package Header

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B. Financial Methodologies

- 1. The financial methodology used is:
- a. AFDC methodologies. Please refer as necessary to Non-MAGI Methodologies, completed by the state.
- b. MAGI-like methodologies. Please refer as necessary to Non-MAGI Methodologies, completed by the state.
- 2. Less restrictive methodologies are used in calculating countable income.
- Yes
- No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

A specified type of income is disregarded:

Description of As permitted under Section 1902(r)(2), all wages

disregard: paid to an individual by the Census Bureau for temporary employment related to current or future census activities shall be exempt.

Name of income type:	Description:
In-home caregiver wages	As referenced in Supplement 8a of Attachment 2.6-A page 8: In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met: 1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program. Payments made by the California Department of Social Services to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i) (III) • 1905(p)
Kinship Guardianship Benefit Payments	As referenced in Supplement 8a of Attachment 2.6-A page 9: As permitted under Section 1902(r) (2), in determining eligibility for the following coverage groups, State funded benefit payments under the State's Kinship Guardianship Assistance Payment Program (also known as Kinship Guardianship Assistance Payment Program -

Name of income type:	Description:
	Enhanced) shall be exempt. These coverage groups are:
	1902(a)(10)(A)(ii), 1902(a)(10)(C)(i) (III) , and 1905(p).
Universal Guaranteed Income	Disregard the amount of income individuals receive from the California Guaranteed Income Pilot programs.

▼ The following less restrictive methodologies are used:

Name of methodology:	Description:
Deductions for ineligible family members	Disregard and amount equal to the appropriate figure below, based on household size. This disregard description clarifies the existing policy listed on pages 6, 6a, and 7 of Supplement 8a to Attachment 2.6-A of the state plan. Household of 1: \$600 Household of 2: \$750 Household of 2 adults*: \$934 Household of 3: \$934 Household of 5: \$1,259 Household of 6: \$1,417 Household of 6: \$1,417 Household of 7: \$1,550 Household of 9: \$1,825 Household of 9: \$1,825 Household of 10: \$1,959 *A household of two adults where at least one person is aged, blind, or disabled utilizes the deduction for a household size of 3, as permitted by 42 CFR § 435.1007(c).

Yes

No

The less restrictive resource methodologies are:

Specified methodology for the treatment of resources set aside for burial:

Name of methodology:	Description:
rame or meaned stage.	2 csc. (p. 10 cs.)
Burial Funds	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-a, Page 2:
	All of the following shall be disregarded in determining eligibility in their entirety and shall not be applied against a single \$1500 limit:
	(1) All of the following burial related funds:
	(a) The first \$1500 paid for clearly designated burial funds such as burial insurance policies with cash surrender values, revocable burial trusts, revocable burial contracts, or other revocable burial

 $\ensuremath{\overline{\sl}}$ The state uses a less restrictive methodology with respect to the treatment of motor vehicles.

A motor vehicle is disregarded under specific conditions.

Specified conditions:

Description: As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-a Page 11:

> One motor vehicle per budget unit shall be exempt regardless of value or use. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):

• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)

 $\ensuremath{\overline{\square}}$ A specified type of resource is disregarded:

Name of resource type:	Description:				
Principal residence disregard	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 9:				
	The principal residence shall not be considered as a resource if any of the following circumstances exist (this is in addition to the reasons specified by the SSI program and the AFDC program):				
	 if a child under the age of 21 lives on the property, or if a dependent relative lives on the property, (for this purpose only, a disabled child age 21 or over shall be considered a 				

Name of resource type:	Description:
	dependent relative), • if a sibling or child age 21 or over of the applicant or beneficiary has continuously resided on the property for at least one year immediately prior to the date the applicant or beneficiary entered a skilled nursing facility or intermediate care facility and continues to reside there, or • if the property cannot be readily converted to cash but a bona fide effort is being made to sell the property. A bona fide effort to sell means that the property is listed for sale with a licensed real estate broker for its fair market value established by a qualified real estate appraiser, a good faith effort is being made to sell the property, offers at fair market value are accepted, and the applicant or beneficiary has supplied proof of compliance with these conditions to the county. The above paragraphs apply to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Bona fide, good faith effort to sell or liquidate resource	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 10: The value of resources shall be disregarded when there is a bona fide, good faith effort being made to sell or liquidate the resource. The value of the resource shall be disregarded for as long as the bona fide good faith effort to sell or liquidate continues to be made. This methodology is essentially the same as the methodology applied to resources being sold or liquidated in the eligibility determinations of the SSI and AFDC program, however, since there is no conditional eligibility in the Medicaid program, the applicant/beneficiary shall not be required to sign, as a condition of eligibility, a statement agreeing to make repayment upon the sale of the property. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)

Name of resource type:	Description:
Universal Guaranteed Income	Disregard as resources income individuals receive from the California Guaranteed Income Pilot programs for 12 months following the month of receipt.
Restitution payments made to Holocaust victims	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 12 and 13:
	Excludable restitution payments made to a holocaust victim or his or her heirs or beneficiaries shall be considered an exempt resource for the purpose of determining eligibility to receive Medi-Cal benefits or the amounts of those benefits.
	A "holocaust victim" is a person who was persecuted by Nazi Germany, any other Axis regime, or any other Nazi controlled or Nazi- allied country:
	(1) on the basis of race, religion, physical or mental disability, or sexual orientation; (2) during any period before, during or after.
	An "excludable restitution payment" is any payment or distribution, recovered or returned asset or property, received directly by a holocaust victim or heirs or beneficiaries of a holocaust victim: (1) as compensation pursuant to the German Act Regulating Unresolved Property Claims, as amended (Gesetz zur Regelung offener Vermogensfragen); (2) as a result of a settlement of claims against any entity or individual for
	any recovered asset. A "recovered asset" is any asset of any type, including any bank deposits, insurance proceeds, artwork, or interest earned on any of these assets, owned by a holocaust victim, withheld from that holocaust victim or his or her heirs or beneficiaries and recovered, returned or otherwise compensated to the holocaust victim or his or her heirs or beneficiaries; (3) as a payment or restitution provided by law, or by a fund, established by any foreign country, the United States of America, or any other foreign or domestic entity, or as a result of a final resolution of a legal action; (4) as a direct or indirect return of, or compensation or reparation for, assets stolen or hidden from, or otherwise lost to, the individual before, during or immediately after World War II, including any insurance proceeds under policies issued on the individual by European insurance companies immediately before and during

Name of resource type:	Description: World War II; or (5) as interest, payable as part of any payment or distribution described in the paragraph. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Independence Accounts	Independence Accounts established under the Work Incentives program shall be disregarded in the resource eligibility determination, subject to the limitation identified below: • Actions involving the accounts are subject to standard eligibility rules relating to resources (e.g., a transfer from the account for less than fair market value would be subject to transfer-of-asset rules).
In-home caregiver resource disregard	Supplement 8b to Attachment 2.6A, Page 13 In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met: 1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program. Payments made by the California Department of Social Services to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i) (III) • 1905(p)
Precertified long-term care insurance policy or health care service plan contract	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 1: A resource disregard is given to an individual who has purchased a precertified long-term care insurance policy or health care service plan contract which covers long-term care and has used such policy or plan to pay for services. Services which the individual receives and are paid for by the precertified long-term care insurance policy or health care service plan contract, which covers

Name of resource type:	Description:
	long-term care, must not be delivered by a member of the individual's family, unless: • The family member is a regular employee of an organization which is providing the services; and • The organization receives the payment for the services: and • The family member receives no compensation other than the normal compensation for employees in his or her job category.
	The amount of the disregard is equal to the lesser of the following amounts: the amount of payments made for services by the insurance policy; or the actual charge for the services.
	Such disregard is in effect for the lifetime of the individual. The disregard is also allowed if a Medicaid application is filed on behalf of a deceased individual for payment of costs for care and services received by the individual during his or her lifetime.
	The disregard of resources is allowed for aged. blind and disabled individuals who are otherwise eligible and: A. Medically Needy [1902(a)(10)(C) (i)(II)], or B. Optional Categorically Needy [1902(a)(10)(A)(ii)]. except those who are included in Section 1902 (a)(10)(A)(ii)(VIII), 1902(a)(10)(A)(ii) (XI) and 1902(a)(10) (A)(ii)(IV) who are receiving Supplemental Security Income Payments under Title XVI or a State Supplemental Payment. or C. Who are Qualified Medicare Beneficiaries [1905(p)].
Resources exempted under 1902(a) (10)(A)(ii)(XIII)	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 14: All resources exempted from consideration as resources for individuals in the optional coverage group under section 1902(a)(10)(A) (ii)(XIII) of the Act on the basis that they are employer or individual retirement arrangements authorized under the Internal Revenue Code shall continue to be exempt from consideration as resources in all other coverage groups subject to the provisions of 1902(r)(2) under which the individual later becomes eligible for medical assistance where the basis for that eligibility is the individual's age, blindness, or disability. These exemptions shall apply to the following coverage groups
	the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):

Name of resource type:	Description: • 1902(a)(10)(A)(ii)(I) • 1902(a)(10)(A) (ii)(X) • 1902(a)(10)(C)(i)			
	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 5:			
	Pursuant to court order in Principe v. Belshe (Sacramento County Superior Court Case No. 96CSOO115), a resource disregard would be allowed equal to the amount of incurred medical bills that are unpaid in the month where there are excess resources for the entire month,			
	 only when payment of those medical bills occurs in a later month, and verification of payment is provided. 			
Unpaid incurred medical bills	This disregard would be allowed no earlier than the month of application (may not be one of the three months prior to the month of application).			
	The requirements listed above would have to be met before eligibility is granted for the month throughout which the excess resources existed.			
	This disregard would apply only to individuals who have excess resources for the entire month but who are otherwise eligible in that month under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):			
	• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)			
Japanese Reparation Payments	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 6:			
	Japanese Reparation payments made by the Canadian government shall be exempt from consideration in determining eligibility for Medi-Cal.			
	Japanese Reparation payments, whether made by the United States or Canadian governments shall be exempt if received by the spouse or inherited from the spouse who was the original recipient, or both.			
	Where Japanese Reparation payments, whether made by the United States or Canadian governments, are converted to another form, amounts of otherwise excess, nonexempt resources sufficient to ensure that the amount of the exemption equals the amount of the reparation payments received by the individual or inherited by the spouse of the individual, or both,			

1	l <u>-</u>
Name of resource type:	Description:
	shall not be considered as resources in determining eligibility for Medi-Cal.
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• (a)(10)(A)(ii)(I) • (a)(10)(A)(ii)(VI) • (a) (10)(A)(ii)(X) • (a)(10)(A)(ii)(XIII) • (a) (10)(A)(ii)(XVIII) • (a)(10)(C)(i)(III) • 1905(p)
	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 8:
SSI and AFDC differing methodologies	In considering all of the various items of resources where the SSI program and the AFDC program have differing methodologies, the State shall follow the methodology of the least restrictive of either the SSI program or the AFDC program.
	• The general rules contained in the paragraph above shall apply to determine the resource methodologies employed in consideration of all resource items unless a more specific methodology for a specific resource item is otherwise set forth and included in the State plan.
	The above paragraphs apply to the resources of all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)

Medically Needy Children under Age 18

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

Package ID CA2022MS0004O

Submission Type Official

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Superseded SPA ID CA-20-0022

System-Derived

SPA ID CA-22-0072

Initial Submission 12/8/2022

Date

Effective Date 10/1/2022

C. Income Standard Used

The income standard used for this group is described in the Medically Needy Income Level RU.

D. Resource Standard Used

The resource standard used for this group is described in the Medically Needy Resource Level RU.

E. Spenddown

The state allows individuals to deduct incurred medical and remedial expenses (spend down) to become eligible under this group. Spenddown is defined in the Handling of Excess Income (Spenddown) RU.

Medically Needy Children under Age 18

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

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F. Additional Information (optional)

Date

Medically Needy Children under Age 18

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

 Package ID
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 SPA ID
 CA-22-0072

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Medicaid State Plan Eligibility

Eligibility Groups - Medically Needy

Medically Needy Reasonable Classifications of Individuals under Age 21

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

One or more reasonable classifications of individuals under age 21 who do not qualify as categorically needy.

Package Header

 Package ID
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 CA-22-0072

Submission Type Official **Initial Submission** 12/8/2022

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The state covers the optional Medically Needy Reasonable Classifications of Individuals under Age 21 eligibility group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

- 1. Are under age 21, or a lower age, as specified in section C.
- 2. Would not qualify under the Medically Needy Children under Age 18 eligibility group (42 CFR 435.301)
- 3. Are not otherwise eligible for categorically needy coverage under the state plan.
- 4. Have income at or below the medically needy income level and resources at or below the medically needy resource level.

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

Package ID CA2022MS0004O

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System-Derived

SPA ID CA-22-0072

Initial Submission 12/8/2022

Date

Effective Date 10/1/2022

B. Individuals Covered

The state covers the following populations:

☑ 1. All children under a specified age limit:

i. Under age 21

ii. Under age 20

iii. Under age 19

2. Reasonable classifications of children

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

Package ID CA2022MS0004O

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Effective Date 10/1/2022

C. Financial Methodologies

1.	The	state	uses	the	same	financia	metho	dology	for	all	indiv	/iduals	cover	red.
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Yes

No

2. The financial methodology used is:

a. AFDC methodologies. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

b. MAGI-like methodologies. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

3. Less restrictive methodologies are used in calculating countable income.

Yes

No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

Description of As permitted under Section 1902(r)(2), all wages disregard: paid to an individual by the Census Bureau for

temporary employment related to current or future census activities shall be exempt.

A specified type of income is disregarded:

Name of income type:	Description:
In-home caregiver wages	As referenced in Supplement 8a of Attachment 2.6-A page 8: In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met: 1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program. Payments made by the California Department of Social Services to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i) (III) • 1905(p)
Kinship Guardianship Benefit Payments	As referenced in Supplement 8a of Attachment 2.6-A page 9: As permitted under Section 1902(r) (2), in determining eligibility for the following coverage groups, State

Name of income type:	Description:				
	funded benefit payments under the State's Kinship Guardianship Assistance Payment Program (also known as Kinship Guardianship Assistance Payment Program - Enhanced) shall be exempt. These coverage groups are: 1902(a)(10)(A)(ii), 1902(a)(10)(C)(i) (III), and 1905(p).				
Universal Guaranteed Income	Disregard the amount of income individuals receive from the California Guaranteed Income Pilot programs.				

The following less restrictive methodologies are used:

Name of methodology:	Description:			
Deductions for ineligible family members	Disregard and amount equal to the appropriate figure below, based on household size. This disregard description clarifies the existing policy listed on pages 6, 6a, and 7 of Supplement 8a to Attachment 2.6-A of the state plan. Household of 1: \$600 Household of 2: \$750 Household of 3: \$934 Household of 4: \$1,100 Household of 5: \$1,259			
	Household of 6: \$1,417 Household of 7: \$1,550 Household of 8: \$1,692 Household of 9: \$1,825 Household of 10: \$1,959			
	*A household of two adults where at least one person is aged, blind, or disabled utilizes the deduction for a household size of 3, as permitted by 42 CFR § 435.1007(c).			

4. Less restrictive methodologies are used in calculating countable resources.

Yes

No

The less restrictive resource methodologies are:

 $\ensuremath{{\ensuremath{ \bullet {\ensuremath{\belowdello$

Name of methodology:	Description:
Burial Funds	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-a, Page 2: All of the following shall be disregarded in determining eligibility in their entirety and shall not be applied against a single \$1500 limit: (1) All of the following burial related funds:

Name of methodology:	Description:
	(a) The first \$1500 paid for clearly designated burial funds such as burial insurance policies with cash surrender values, revocable burial trusts, revocable burial contracts, or other revocable burial arrangements.
	(b) Irrevocable burial trusts or irrevocable burial contracts, or other irrevocable burial arrangements.
	(c) Burial insurance policies without cash surrender values.
	(2) Life insurance policies on the life of any individual in the family shall be exempt if the combined face value of all of the policies on the insured individual is \$1500 or less.
	(3) All dividends and interest that accrue to and are not removed from the burial fund or policy described in (1) or (2).
	The disregard of life insurance policies and burial related funds is allowed for all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	(a)(10)(A)(ii), (a)(10)(C)(i)(III), and 1905(p)

The state uses a less restrictive methodology with respect to the treatment of motor vehicles.

 $\ensuremath{{\ensuremath{\square}}}$ A motor vehicle is disregarded under specific conditions.

Specified conditions:

Description: As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-a Page 11:

> One motor vehicle per budget unit shall be exempt regardless of value or use. The above paragraph $% \left\{ \left(1\right) \right\} =\left\{ \left($ applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):

• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)

A specified type of resource is disregarded:

Name of resource type:	Description:
Independence Accounts	Independence Accounts established under the Work Incentives program shall be disregarded in the resource eligibility determination, subject to the limitation identified below:
	Actions involving the accounts are subject to standard eligibility rules relating to resources (e.g., a

Name of resource type:	Description:
	transfer from the account for less than fair market value would be subject to transfer-of-asset rules).
In-home caregiver resource disregard	Supplement 8b to Attachment 2.6A, Page 13
	In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met:
	1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program.
	Payments made by the California Department of Social Services to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt.
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i) (III) • 1905(p)
Precertified long-term care insurance policy or health care	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 1:
service plan contract	A resource disregard is given to an individual who has purchased a precertified long-term care insurance policy or health care service plan contract which covers long-term care and has used such policy or plan to pay for services.
	Services which the individual receives and are paid for by the precertified long-term care insurance policy or health care service plan contract, which covers long-term care, must not be delivered by a member of the individual's family, unless: • The family member is a regular employee of an organization which is providing the services; and • The organization receives the payment for the services: and • The family member receives no compensation other than the normal compensation for employees in his or her job category.
	The amount of the disregard is equal to the lesser of the following amounts: • the amount of payments made for services by the insurance policy; or
	• the actual charge for the services.
	Such disregard is in effect for the

Name of resource type:	Description:
	lifetime of the individual. The disregard is also allowed if a Medicaid application is filed on behalf of a deceased individual for payment of costs for care and services received by the individual during his or her lifetime. The disregard of resources is allowed for aged. blind and disabled individuals who are otherwise eligible and: A. Medically Needy [1902(a)(10)(C) (i)(i)]], or B. Optional Categorically Needy [1902(a)(10)(A)(ii)], except those who are included in Section 1902 (a)(10)(A)(ii)(VIII), 1902(a)(10)(A)(ii) (XI) and 1902(a)(10) (A)(ii)(IV) who are receiving Supplemental Security Income Payments under Title XVI or a State Supplemental Payment. or C. Who are Qualified Medicare Beneficiaries [1905(p)].
Resources exempted under 1902(a) (10)(A)(ii)(XIII)	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 14: All resources exempted from consideration as resources for individuals in the optional coverage group under section 1902(a)(10)(A) (ii)(XIII) of the Act on the basis that they are employer or individual retirement arrangements authorized under the Internal Revenue Code shall continue to be exempt from consideration as resources in all other coverage groups subject to the provisions of 1902(r)(2) under which the individual later becomes eligible for medical assistance where the basis for that eligibility is the individual's age, blindness, or disability. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • 1902(a)(10)(A)(ii)(I) • 1902(a)(10)(A) (ii)(X) • 1902(a)(10)(C)(i)
Unpaid incurred medical bills	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 5: Pursuant to court order in Principe v. Belshe (Sacramento County Superior Court Case No. 96CSOO115), a resource disregard would be allowed equal to the amount of incurred medical bills that are unpaid in the month where there are excess resources for the entire month, • only when payment of those medical bills occurs in a later month, and • verification of payment is provided. This disregard would be allowed no earlier than the month of

Name of resource type:	Description:
	application (may not be one of the three months prior to the month of application).
	The requirements listed above would have to be met before eligibility is granted for the month throughout which the excess resources existed.
	This disregard would apply only to individuals who have excess resources for the entire month but who are otherwise eligible in that month under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Japanese Reparation Payments	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 6:
	Japanese Reparation payments made by the Canadian government shall be exempt from consideration in determining eligibility for Medical.
	Japanese Reparation payments, whether made by the United States or Canadian governments shall be exempt if received by the spouse or inherited from the spouse who was the original recipient, or both.
	Where Japanese Reparation payments, whether made by the United States or Canadian governments, are converted to another form, amounts of otherwise excess, nonexempt resources sufficient to ensure that the amount of the exemption equals the amount of the reparation payments received by the individual or inherited by the spouse of the individual, or both, shall not be considered as resources in determining eligibility for Medi-Cal.
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• (a)(10)(A)(ii)(I) • (a)(10)(A)(ii)(VI) • (a) (10)(A)(ii)(X) • (a)(10)(A)(ii)(XIII) • (a) (10)(A)(ii)(XVIII) • (a)(10)(C)(i)(III) • 1905(p)
SSI and AFDC differing methodologies	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 8:
	In considering all of the various items of resources where the SSI program and the AFDC program have differing methodologies, the State shall follow the methodology of the least restrictive of either the SSI program or the AFDC program.

Name of resource type:	Description:
	The general rules contained in the paragraph above shall apply to determine the resource methodologies employed in consideration of all resource items unless a more specific methodology for a specific resource item is otherwise set forth and included in the State plan.
	The above paragraphs apply to the resources of all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Principal residence disregard	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 9:
	The principal residence shall not be considered as a resource if any of the following circumstances exist (this is in addition to the reasons specified by the SSI program and the AFDC program):
	• if a child under the age of 21 lives on the property, or • if a dependent relative lives on the property, (for this purpose only, a disabled child age 21 or over shall be considered a dependent relative), • if a sibling or child age 21 or over of the applicant or beneficiary has continuously resided on the property for at least one year immediately prior to the date the applicant or beneficiary entered a skilled nursing facility or intermediate care facility and continues to reside there, or • if the property cannot be readily converted to cash but a bona fide effort is being made to sell the property. A bona fide effort to sell means that the property is listed for sale with a licensed real estate broker for its fair market value established by a qualified real estate appraiser, a good faith effort is being made to sell the property, offers at fair market value are accepted, and the applicant or beneficiary has supplied proof of compliance with these conditions to the county. The above paragraphs apply to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):

Name of resource type:	Description:
2.	• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Bona fide, good faith effort to sell or liquidate resource	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 10: The value of resources shall be disregarded when there is a bona fide, good faith effort being made to sell or liquidate the resource. The value of the resource shall be disregarded for as long as the bona fide good faith effort to sell or liquidate continues to be made. This methodology is essentially the same as the methodology applied to resources being sold or liquidated in the eligibility determinations of the SSI and AFDC program, however, since there is no conditional eligibility in the Medicaid program, the applicant/beneficiary shall not be required to sign, as a condition of eligibility, a statement agreeing to make repayment upon the sale of the property. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Universal Guaranteed Income	Disregard as resources income individuals receive from the California Guaranteed Income Pilot programs for 12 months following the month of receipt.
Restitution payments made to Holocaust victims	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 12 and 13:
	Excludable restitution payments made to a holocaust victim or his or her heirs or beneficiaries shall be considered an exempt resource for the purpose of determining eligibility to receive Medi-Cal benefits or the amounts of those benefits.
	A "holocaust victim" is a person who was persecuted by Nazi Germany, any other Axis regime, or any other Nazi controlled or Naziallied country:
	(1) on the basis of race, religion, physical or mental disability, or sexual orientation;(2) during any period before, during or after.
	An "excludable restitution payment" is any payment or distribution, recovered or returned asset or property, received directly

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

Package ID CA2022MS0004O **SPA ID** CA-22-0072

Submission Type Official Initial Submission 12/8/2022

Date Approval Date 1/30/2023

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System-Derived

D. Income Standard Used

The income standard used for this group is described in the Medically Needy Income Level RU.

E. Resource Standard Used

The resource standard used for this group is described in the Medically Needy Resource Level RU.

F. Spenddown

The state allows individuals to deduct incurred medical and remedial expenses (spend down) to become eligible under this group. Spenddown is defined in the Handling of Excess Income (Spenddown) RU.

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G. Additional Information (optional)

Medicaid State Plan Eligibility

Eligibility Groups - Medically Needy

Medically Needy Parents and Other Caretaker Relatives

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Parents and other caretaker relatives of dependent children who do not qualify as categorically needy.

Package Header

 Package ID
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System-Derived

The state covers the optional Medically Needy Parents and Other Caretaker Relatives eligibility group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

- 1. Meet the definition of parent or caretaker relative, as described in the mandatory Parents and Other Caretaker Relatives eligibility group.
- 2. Are not otherwise eligible for categorically needy coverage under the state plan.
- 3. Have income at or below the medically needy income level and resources at or below the medically needy resource level.

Medically Needy Parents and Other Caretaker Relatives

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

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B. Financial Methodologies

1. The financial methodology used is:

- a. AFDC methodologies. Please refer as necessary to Non-MAGI Methodologies, completed by the state.
- b. MAGI-like methodologies. Please refer as necessary to Non-MAGI Methodologies, completed by the state.
- 2. Less restrictive methodologies are used in calculating countable income.
- Yes
- O No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

A specified type of income is disregarded:

Description of As permitted under Section 1902(r)(2), all wages disregard: paid to an individual by the Census Bureau for

temporary employment related to current or future census activities shall be exempt.

Description:
As referenced in Supplement 8a of Attachment 2.6-A page 8: In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met: 1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program. Payments made by the California Department of Social Services to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
As referenced in Supplement 8a of Attachment 2.6-A page 9: As permitted under Section 1902(r) (2), in determining eligibility for the following coverage groups, State funded benefit payments under the State's Kinship Guardianship Assistance Payment Program (also known as Kinship Guardianship Assistance Payment Program -

Name of income type:	Description:
	Enhanced) shall be exempt. These coverage groups are:
	1902(a)(10)(A)(ii), 1902(a)(10)(C)(i) (III) , and 1905(p).
Universal Guaranteed Income	Disregard the amount of income individuals receive from the California Guaranteed Income Pilot programs.

 $\ensuremath{{\ensuremath{\square}}}$ The following less restrictive methodologies are used:

Name of methodology:	Description:
Deductions for ineligible family members	Disregard and amount equal to the appropriate figure below, based on household size. This disregard description clarifies the existing policy listed on pages 6, 6a, and 7 of Supplement 8a to Attachment 2.6-A of the state plan. Household of 1: \$600 Household of 2: \$750 Household of 3: \$934 Household of 3: \$934 Household of 5: \$1,259 Household of 6: \$1,417 Household of 6: \$1,417 Household of 9: \$1,825 Household of 9: \$1,825 Household of 9: \$1,825 Household of 10: \$1,959 *A household of two adults where at least one person is aged, blind, or disabled utilizes the deduction for a household size of 3, as permitted by 42 CFR § 435.1007(c).

3.	Less restrictive	methodologies are	used in calculating	countable resources.
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Yes

O No

The less restrictive resource methodologies are:

Specified methodology for the treatment of resources set aside for burial:

Name of methodology:	Description:
Burial Funds	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-a, Page 2: All of the following shall be disregarded in determining eligibility in their entirety and shall not be applied against a single \$1500 limit: (1) All of the following burial related
	funds: (a) The first \$1500 paid for clearly designated burial funds such as burial insurance policies with cash surrender values, revocable burial trusts, revocable burial contracts, or other revocable burial

 $\ensuremath{{\ensuremath{oldsymbol{ iny}}}}$ The state uses a less restrictive methodology with respect to the treatment of motor vehicles.

A motor vehicle is disregarded under specific conditions.

Specified conditions:

Description: As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-a Page 11:

> One motor vehicle per budget unit shall be exempt regardless of value or use. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):

• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)

A specified type of resource is disregarded:

Name of resource type:	Description:
Principal residence disregard	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 9: The principal residence shall not be considered as a resource if any of the following circumstances exist (this is in addition to the reasons specified by the SSI program and the AFDC program): • if a child under the age of 21 lives on the property, or • if a dependent relative lives on the property, (for this purpose only, a disabled child age 21 or over shall be considered a

Name of resource type:	Description:
	dependent relative), • if a sibling or child age 21 or over of the applicant or beneficiary has continuously resided on the property for at least one year immediately prior to the date the applicant or beneficiary entered a skilled nursing facility or intermediate care facility and continues to reside there, or • if the property cannot be readily converted to cash but a bona fide effort is being made to sell the property. A bona fide effort to sell means that the property is listed for sale with a licensed real estate broker for its fair market value established by a qualified real estate appraiser, a good faith effort is being made to sell the property, offers at fair market value are accepted, and the applicant or beneficiary has supplied proof of compliance with these conditions to the county. The above paragraphs apply to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Bona fide, good faith effort to sell or liquidate resource	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 10: The value of resources shall be disregarded when there is a bona fide, good faith effort being made to sell or liquidate the resource. The value of the resource shall be disregarded for as long as the bona fide good faith effort to sell or liquidate continues to be made. This methodology is essentially the same as the methodology applied to resources being sold or liquidated in the eligibility determinations of the SSI and AFDC program, however, since there is no conditional eligibility in the Medicaid program, the applicant/beneficiary shall not be required to sign, as a condition of eligibility, a statement agreeing to make repayment upon the sale of the property. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2): • (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)

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Name of resource type:	Description:
Universal Guaranteed Income	Disregard as resources income individuals receive from the California Guaranteed Income Pilot programs for 12 months following the month of receipt.
Restitution payments made to Holocaust victims	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 12 and 13:
	Excludable restitution payments made to a holocaust victim or his or her heirs or beneficiaries shall be considered an exempt resource for the purpose of determining eligibility to receive Medi-Cal benefits or the amounts of those benefits.
	A "holocaust victim" is a person who was persecuted by Nazi Germany, any other Axis regime, or any other Nazi controlled or Nazi- allied country:
	(1) on the basis of race, religion, physical or mental disability, or sexual orientation;(2) during any period before, during or after.
	An "excludable restitution payment" is any payment or distribution, recovered or returned asset or property, received directly by a holocaust victim or heirs or beneficiaries of a holocaust victim: (1) as compensation pursuant to the German Act Regulating Unresolved Property Claims, as amended (Gesetz zur Regelung offener Vermogensfragen); (2) as a result of a settlement of claims against any entity or individual for
	any recovered asset. A "recovered asset" is any asset of any type, including any bank deposits, insurance proceeds, artwork, or interest earned on any of these assets, owned by a holocaust victim, withheld from that holocaust victim or his or her heirs or beneficiaries and recovered, returned or otherwise compensated to the holocaust victim or his or her heirs or beneficiaries; (3) as a payment or restitution provided by law, or by a fund, established by any foreign country, the United States of America, or any other foreign or domestic entity, or as a result of a final resolution of a legal action; (4) as a direct or indirect return of, or compensation or reparation for,
	assets stolen or hidden from, or otherwise lost to, the individual before, during or immediately after World War II, including any insurance proceeds under policies issued on the individual by European insurance companies immediately before and during

Name of resource type:	Description:
	World War II; or (5) as interest, payable as part of any payment or distribution described in the paragraph.
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Independence Accounts	Independence Accounts established under the Work Incentives program shall be disregarded in the resource eligibility determination, subject to the limitation identified below: • Actions involving the accounts are subject to standard eligibility rules relating to resources (e.g., a transfer from the account for less
	than fair market value would be subject to transfer-of-asset rules).
	Supplement 8b to Attachment 2.6A, Page 13
	In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met:
In-home caregiver resource disregard	1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program.
	Payments made by the California Department of Social Services to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt.
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i) (III) • 1905(p)
Precertified long-term care nsurance policy or health care service plan contract	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 1:
	A resource disregard is given to an individual who has purchased a precertified long-term care insurance policy or health care service plan contract which covers long-term care and has used such policy or plan to pay for services.
	Services which the individual receives and are paid for by the precertified long-term care insurance policy or health care service plan contract, which covers

Name of resource type:	Description:
	long-term care, must not be delivered by a member of the individual's family, unless: • The family member is a regular employee of an organization which is providing the services; and • The organization receives the payment for the services: and • The family member receives no compensation other than the normal compensation for employees in his or her job category.
	The amount of the disregard is equal to the lesser of the following amounts: • the amount of payments made for services by the insurance policy; or • the actual charge for the services.
	Such disregard is in effect for the lifetime of the individual. The disregard is also allowed if a Medicaid application is filed on behalf of a deceased individual for payment of costs for care and services received by the individual during his or her lifetime.
	The disregard of resources is allowed for aged. blind and disabled individuals who are otherwise eligible and: A. Medically Needy [1902(a)(10)(C) (i)(III)], or B. Optional Categorically Needy [1902(a)(10)(A)(ii)]. except those who are included in Section 1902 (a)(10)(A)(ii)(VIII), 1902(a)(10)(A)(ii) (XI) and 1902(a)(10) (A)(ii)(IV) who are receiving Supplemental Security Income Payments under Title XVI or a State Supplemental Payment. or C. Who are Qualified Medicare Beneficiaries [1905(p)].
Resources exempted under 1902(a) (10)(A)(ii)(XIII)	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 14: All resources exempted from consideration as resources for individuals in the optional coverage group under section 1902(a)(10)(A) (ii)(XIII) of the Act on the basis that they are employer or individual retirement arrangements authorized under the Internal Revenue Code shall continue to be exempt from consideration as resources in all other coverage groups subject to the provisions of 1902(r)(2) under which the individual later becomes eligible for medical assistance where the basis for that eligibility is the individual's age, blindness, or disability.
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):

Name of resource type:	Description: • 1902(a)(10)(A)(ii)(I) • 1902(a)(10)(A) (ii)(X) • 1902(a)(10)(C)(i)
	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 5:
	Pursuant to court order in Principe v. Belshe (Sacramento County Superior Court Case No. 96CSOO115), a resource disregard would be allowed equal to the amount of incurred medical bills that are unpaid in the month where there are excess resources for the entire month,
	 only when payment of those medical bills occurs in a later month, and verification of payment is provided.
Unpaid incurred medical bills	This disregard would be allowed no earlier than the month of application (may not be one of the three months prior to the month of application).
	The requirements listed above would have to be met before eligibility is granted for the month throughout which the excess resources existed.
	This disregard would apply only to individuals who have excess resources for the entire month but who are otherwise eligible in that month under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)
Japanese Reparation Payments	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 6: Japanese Reparation payments made by the Canadian government shall be exempt from consideration in determining eligibility for Medical.
	Japanese Reparation payments, whether made by the United States or Canadian governments shall be exempt if received by the spouse or inherited from the spouse who was the original recipient, or both.
	Where Japanese Reparation payments, whether made by the United States or Canadian governments, are converted to another form, amounts of otherwise excess, nonexempt resources sufficient to ensure that the amount of the exemption equals the amount of the reparation payments received by the individual or inherited by the spouse of the individual, or both,

Name of resource type:	Description:
	shall not be considered as resources in determining eligibility for Medi-Cal.
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• (a)(10)(A)(ii)(I) • (a)(10)(A)(ii)(VI) • (a) (10)(A)(ii)(X) • (a)(10)(A)(ii)(XIII) • (a) (10)(A)(ii)(XVIII) • (a)(10)(C)(i)(III) • 1905(p)
	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 8:
	In considering all of the various items of resources where the SSI program and the AFDC program have differing methodologies, the State shall follow the methodology of the least restrictive of either the SSI program or the AFDC program.
SSI and AFDC differing methodologies	The general rules contained in the paragraph above shall apply to determine the resource methodologies employed in consideration of all resource items unless a more specific methodology for a specific resource item is otherwise set forth and included in the State plan.
	The above paragraphs apply to the resources of all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• (a)(10)(A)(ii) • (a)(10)(C)(i)(III) • 1905(p)

Medically Needy Parents and Other Caretaker Relatives

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Package Header

Package ID CA2022MS0004O **SPA ID** CA-22-0072

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C. Income Standard Used

The income standard used for this group is described in the Medically Needy Income Level RU.

D. Resource Standard Used

The resource standard used for this group is described in the Medically Needy Resource Level RU.

E. Spenddown

The state allows individuals to deduct incurred medical and remedial expenses (spend down) to become eligible under this group. Spenddown is defined in the Handling of Excess Income (Spenddown) RU.

Medically Needy Parents and Other Caretaker Relatives

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F. Additional Information (optional)

Superseded SPA ID CA-20-0022

Medicaid State Plan Eligibility

Eligibility Groups - Medically Needy

Medically Needy Populations Based on Age, Blindness or Disability

MEDICAID | Medicaid State Plan | Eligibility | CA2022MS0004O | CA-22-0072

Individuals who are age 65 or older or who have blindness or a disability who do not qualify as categorically needy.

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The state covers the optional Medically Needy Populations Based on Age, Blindness or Disability eligibility group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1.Meet at least one of the following:

a. Are age 65 or older;

b. Have blindness; or

c. Have a disability.

- 2. Are not otherwise eligible for categorically needy coverage under the state plan.
- 3. Have income at or below the medically needy income level and resources at or below the medically needy resource level.

Medically Needy Populations Based on Age, Blindness or Disability

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B. Individuals Covered

The state covers the following populations:

- ✓ 1. Individuals age 65 or older
- 2. Individuals with blindness
- 3. Individuals who have a disability

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C. Financial Methodologies

1. The state uses the same financial methodology for all individuals covered.

Yes

O No

2. The financial methodology used is:

a. SSI methodologies. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

b. Less restrictive methodologies are used in calculating countable income.

Yes No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

Description of As permitted under disregard: Section 1902(r)(2), all wages paid to an individual by the Census Bureau for temporary employment related to current or future census activities shall be exempt.

A specified type of income is disregarded:

Name of income type:	Description:
In-home caregiver wages	As referenced in Supplement 8a of Attachment 2.6-A page 8: In-home caregiver wages paid to a household member shall be exempt when both of the following conditions are met: 1) The caregiver is being paid for providing the in-home care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those in-home services through any federal, state or local government program. Payments made by the California Department of Social Services to an in-home care recipient for the purpose of

Name of income type:	Description:
	purchasing in-home care services, including restaurant meals, shall be exempt. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r) (2):
	• 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i)(III) • 1905(p)
Kinship Guardianship Benefit Payments	As referenced in Supplement 8a of Attachment 2.6-A page 9: As permitted under Section 1902(r)(2), in determining eligibility for the following coverage groups, State funded benefit payments under the State's Kinship Guardianship Assistance Payment Program (also known as Kinship Guardianship Assistance Payment Program -Enhanced) shall be exempt. These coverage groups are: 1902(a)(10)(A)(ii), 1902(a)(10)(C)(i)(III), and 1905(p).
Universal Guaranteed Income	Disregard the amount of income individuals receive from the California Guaranteed Income Pilot programs
Income used to pay spousal or child support	Reference to Supplement 3 of Attachment 2.6 A: The agency uses the same income disregards as used in SSI except as follows: Income which must, by court order or by agreement with a district attorney (DA), be used to pay spousal or child support is held to be unavailable to set the current needs of ABD-MN applicants and beneficiaries. In these cases the

Name of income type:	Description:
	lower of 1) the amount ordered by the court or the DA agreement, or 2) the amount actually paid is deducted from the reported income.

The following less restrictive methodologies are used:

Name of methodology:	Description:
	Disregard and amount equal to the appropriate figure below, based on household size. This disregard description clarifies the existing policy listed on pages 6, 6a, and 7 of Supplement 8a to Attachment 2.6-A of the state plan.
Deductions for ineligible family members	Household of 1: \$600 Household of 2: \$750 Household of 2 adults*: \$934 Household of 3: \$934 Household of 5: \$1,100 Household of 5: \$1,259 Household of 6: \$1,417 Household of 7: \$1,550 Household of 8: \$1,692 Household of 9: \$1,825 Household of 10: \$1,959
	*A household of two adults where at least one person is aged, blind, or disabled utilizes the deduction for a household size of 3, as permitted by 42 CFR § 435.1007(c).

c. Less restrictive methodologies are used in calculating countable resources.

Yes No

The less restrictive resource methodologies are:

The state uses a less restrictive methodology with respect to resources set aside for burial.

 $\ensuremath{\,{\,\square}\,}$ Specified methodology for the treatment of resources set aside for burial:

Description:
As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-a, Page 2:
All of the following shall be disregarded in determining eligibility in their entirety and shall not be applied against a single \$1500 limit:
(1) All of the following burial related funds:
(a) The first \$1500 paid for clearly designated burial funds such as burial insurance policies with cash surrender values, revocable burial trusts, revocable burial contracts, or other revocable burial arrangements.
(b) Irrevocable burial trusts or irrevocable burial contracts, or other irrevocable burial arrangements.
(c) Burial insurance policies without cash surrender values.
(2) Life insurance policies on the life of any individual in the family shall be exempt if the combined face value of all of the policies on the insured individual is \$1500 or less.
(3) All dividends and interest that accrue to and are not removed from the burial fund or policy described in (1) or (2).
The disregard of life insurance policies and burial related funds is allowed for all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)

Name of methodology:	Description:
	(2):
	(a)(10)(A)(ii), (a)(10)(C) (i)(III), and 1905(p)

 $\ensuremath{\overline{\sl}}$ The state uses a less restrictive methodology with respect to the treatment of motor vehicles.

 $\ensuremath{{\ensuremath{\square}}}$ A motor vehicle is disregarded under specific conditions.

Specified conditions:

Description: As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-a Page 11:

> One motor vehicle per budget unit shall be exempt regardless of value or use. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):

• (a)(10)(A)(ii) • (a)(10)(C) (i)(III) • 1905(p)

☑ A specified type of resource is disregarded:

Name of resource type:	Description:
Principal residence disregard	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 9:
	The principal residence shall not be considered as a resource if any of the following circumstances exist (this is in addition to the reasons specified by the SSI program and the AFDC program):
	• if a child under the age of 21 lives on the property, or • if a dependent relative lives on the property, (for this purpose only, a disabled child age 21 or over shall be considered a dependent relative), • if a sibling or child age 21 or over of the applicant or beneficiary has continuously resided

on the property for at least one year immediately prior to the date the applicant or beneficiary entered a skilled nursing facility or intermediate care facility and continues to reside there, or • if the property cannot be readily converted to cash but a bona fide effort is being made to sell the property. A bona fide effort is being made to sell the property. A bona fide effort is being made to sell means that the property is listed for sale with a licensed real estate broker for its fair market value established by a qualified real estate appraiser, a good faith effort is being made to sell the property, offers at fair market value are accepted, and the applicant or beneficiary has supplied proof of compliance with these conditions to the county. The above paragraphs apply to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r) (2): • (a)(10)(A)(ii) • (a)(10) (C)(i)(III) • 1905(p) Bona fide, good faith effort so eing made to sell or liquidate resource shall be disregarded when there is a bona fide, good faith effort being made to sell or liquidate the resource. The value of resource shall be disregarded for as long as the bona fide good af ith effort being made to sell or liquidate the resource. The value of the resource shall be disregarded for as long as the bona fide good af fish effort seforts of first offerts.	Name of resource type:	Description:
effort to sell or liquidate resource SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 10: The value of resources shall be disregarded when there is a bona fide, good faith effort being made to sell or liquidate the resource. The value of the resource shall be disregarded for as long as the bona		at least one year immediately prior to the date the applicant or beneficiary entered a skilled nursing facility or intermediate care facility and continues to reside there, or • if the property cannot be readily converted to cash but a bona fide effort is being made to sell the property. A bona fide effort to sell means that the property is listed for sale with a licensed real estate broker for its fair market value established by a qualified real estate appraiser, a good faith effort is being made to sell the property, offers at fair market value are accepted, and the applicant or beneficiary has supplied proof of compliance with these conditions to the county. The above paragraphs apply to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r) (2):
resources shall be disregarded when there is a bona fide, good faith effort being made to sell or liquidate the resource. The value of the resource shall be disregarded for as long as the bona	effort to sell or	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 10:
to sell or liquidate		resources shall be disregarded when there is a bona fide, good faith effort being made to sell or liquidate the resource. The value of the resource shall be disregarded for as long as the bona fide good faith effort

Name of type:	resource	Description:	
-3/ F		continues to be made. This methodology is essentially the same as the methodology applied to resources being sold or liquidated in the eligibility determinations of the SSI and AFDC program, however, since there is no conditional eligibility in the Medicaid program, the applicant/beneficiary shall not be required to sign, as a condition of eligibility, a statement agreeing to make repayment upon the sale of the property. The above paragraph applies to all applicants and recipients who are otherwise eligible under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security	
		Act at Section 1902(r) (2): • (a)(10)(A)(ii) • (a)(10) (C)(i)(III) • 1905(p)	
Universal Guarante	ed Income	Disregard as resources income individuals receive from the California Guaranteed Income Pilot programs for 12 months following the month of receipt.	
	n payments Holocaust	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 12 and 13:	
		Excludable restitution payments made to a holocaust victim or his or her heirs or beneficiaries shall be considered an exempt resource for the purpose of determining eligibility to receive Medi-Cal benefits or the amounts of those benefits.	
		A "holocaust victim" is a person who was	
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Name of resource type:

Description:

persecuted by Nazi Germany, any other Axis regime, or any other Nazi controlled or Nazi-allied country:

(1) on the basis of race, religion, physical or mental disability, or sexual orientation; (2) during any period before, during or after.

An "excludable restitution payment" is any payment or distribution, recovered or returned asset or property, received directly by a holocaust victim or heirs or beneficiaries of a holocaust victim: (1) as compensation pursuant to the German Act Regulating **Unresolved Property** Claims, as amended (Gesetz zur Regelung offener Vermogensfragen); (2) as a result of a settlement of claims against any entity or individual for any recovered asset. A "recovered asset" is any asset of any type, including any bank deposits, insurance proceeds, artwork, or interest earned on any of these assets, owned by a holocaust victim, withheld from that holocaust victim or his or her heirs or beneficiaries and recovered, returned or otherwise compensated to the holocaust victim or his or her heirs or beneficiaries; (3) as a payment or restitution provided by law, or by a fund, established by any foreign country, the United States of America, or any other foreign or domestic entity, or as a result of a final resolution of a legal action; (4) as a direct or indirect return of, or

Name of resource type:	Description:
	compensation or reparation for, assets stolen or hidden from, or otherwise lost to, the individual before, during or immediately after World War II, including any insurance proceeds under policies issued on the individual by European insurance companies immediately before and during World War II; or (5) as interest, payable as part of any payment or distribution described in the paragraph. These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r) (2):
	• (a)(10)(A)(ii) • (a)(10) (C)(i)(III) • 1905(p)
Independence Accounts	Independence Accounts established under the Work Incentives program shall be disregarded in the resource eligibility determination, subject to the limitation identified below: Actions involving the accounts are subject to standard eligibility rules relating to resources
	(e.g., a transfer from the account for less than fair market value would be subject to transfer- of-asset rules).
In-home caregiver resource disregard	the account for less than fair market value would be subject to transfer-
_	the account for less than fair market value would be subject to transfer- of-asset rules). Supplement 8b to Attachment 2.6A,

providing the inhome care to his/her spouse or minor child living in the home, and 2) The spouse or minor child is receiving those inhome services through any federal, state or local government program. Payments made by the California Department of Social Services to an inhome care recipient for the purpose of purchasing in-home care services, including restaurant
the California Department of Social Services to an in- home care recipient for the purpose of purchasing in-home care services,
meals, shall be exempt.
These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r) (2):
• 1902(a)(10)(A)(ii) • 1902(a)(10)(C)(i)(III) • 1905(p)
As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 1:
A resource disregard is given to an individual who has purchased a precertified long-term care insurance policy or health care service plan contract which covers long-term care and has used such policy or plan to pay for services.
Services which the individual receives and are paid for by the precertified long-term care insurance policy or health care service plan contract, which covers long-term care, must not be delivered by a member of the individual's family, unless: • The family member is a regular employee of an

Name of resource	Description:
type:	providing the services; and • The organization receives the payment for the services: and • The family member receives no compensation other than the normal compensation for employees in his or her job category. The amount of the disregard is equal to the lesser of the following amounts: • the amount of payments made for services by the insurance policy; or • the actual charge for the services.
	Such disregard is in effect for the lifetime of the individual. The disregard is also allowed if a Medicaid application is filed on behalf of a deceased individual for payment of costs for care and services received by the individual during his or her lifetime.
	The disregard of resources is allowed for aged. blind and disabled individuals who are otherwise eligible and: A. Medically Needy [1902(a)(10)(C)(i)(III)], or
	B. Optional Categorically Needy [1902(a)(10)(A)(ii)]. except those who are included in Section 1902 (a)(10) (A)(ii)(VIII), 1902(a) (10)(A)(ii)(XI) and 1902(a)(10) (A)(ii)(IV) who are receiving Supplemental Security Income Payments under Title XVI or a State Supplemental Payment. or C. Who are Qualified Medicare Beneficiaries [1905(p)].
Resources exempted under 1902(a)(10)(A) (ii)(XIII)	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 14: All resources exempted

	Name of resource type:	Description:			
		from consideration as resources for individuals in the optional coverage group under section 1902(a)(10)(A)(ii)(XIII) of the Act on the basis that they are employer or individual retirement arrangements authorized under the Internal Revenue Code shall continue to be exempt from consideration as resources in all other coverage groups subject to the provisions of 1902(r) (2) under which the individual later becomes eligible for medical assistance where the basis for that eligibility is the individual's age, blindness, or disability.			
		shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r) (2):			
		• 1902(a)(10)(A)(ii)(I) • 1902(a)(10)(C)(i)			
	Unpaid incurred medical bills	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 5:			
		Pursuant to court order in Principe v. Belshe (Sacramento County Superior Court Case No. 96CSOO115), a resource disregard would be allowed equal to the amount of incurred medical bills that are unpaid in the month where there are excess resources for the entire month,			
		• only when payment of those medical bills occurs in a later month, and • verification of payment is provided.			
		This disregard would be allowed no earlier than the month of application (may not			
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Name of resource type:	Description:
	be one of the three months prior to the month of application).
	The requirements listed above would have to be met before eligibility is granted for the month throughout which the excess resources existed.
	This disregard would apply only to individuals who have excess resources for the entire month but who are otherwise eligible in that month under California's State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r)(2):
	• (a)(10)(A)(ii) • (a)(10) (C)(i)(III) • 1905(p)
Japanese Reparation Payments	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 6:
	Japanese Reparation payments made by the Canadian government shall be exempt from consideration in determining eligibility for Medi-Cal.
	Japanese Reparation payments, whether made by the United States or Canadian governments shall be exempt if received by the spouse or inherited from the spouse who was the original recipient, or both.
	Where Japanese Reparation
	payments, whether made by the United States or Canadian governments, are converted to another
	form, amounts of otherwise excess, nonexempt resources sufficient
	to ensure that the amount of the

Name of resource type:	Description:
	exemption equals the amount of the reparation payments received by the individual or inherited by the spouse of the individual, or both, shall not be considered as resources in determining eligibility for Medi- Cal.
	These exemptions shall apply to the following coverage groups referenced in the Social Security Act at Section 1902(r) (2):
	• (a)(10)(A)(ii)(I) • (a) (10)(A)(ii)(VI) • (a)(10) (A)(ii)(X) • (a)(10)(A)(ii) (XIII) • (a)(10)(A)(ii) (XVIII) • (a)(10)(C)(i)(III) • 1905(p)
SSI and AFDC differing methodologies	As referenced in SUPPLEMENT 8b TO ATTACHMENT 2.6-A Page 8:
	In considering all of the various items of resources where the SSI program and the AFDC program have differing methodologies, the State shall follow the methodology of the least restrictive of either the SSI program or the AFDC program.
	• The general rules contained in the paragraph above shall apply to determine the resource methodologies employed in consideration of all resource items unless a more specific methodology for a specific resource item is otherwise set forth and included in the State plan.
YpuiOsfFaFOcOtpY00l	The above paragraphs apply to the resources of all applicants and recipients who are otherwise eligible under California's

Name of resource type:	Description:
	State Plan and who are also a member of one of the following coverage groups referenced in the Social Security Act at Section 1902(r) (2):
	• (a)(10)(A)(ii) • (a)(10) (C)(i)(III) • 1905(p)

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Package Header

SPA ID CA-22-0072 Package ID CA2022MS0004O

Submission Type Official Initial Submission 12/8/2022

Date Approval Date 1/30/2023 Effective Date 10/1/2022 Superseded SPA ID CA-20-0022

System-Derived

D. Income Standard Used

The income standard used for this group is described in the Medically Needy Income Level RU.

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System-Derived

E. Resource Standard Used

The resource standard used for this group is described in the Medically Needy Resource Level RU.

Date

Medically Needy Populations Based on Age, Blindness or Disability

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F. Spenddown

The state allows individuals to deduct incurred medical and remedial expenses (spend down) to become eligible under this group. Spenddown is defined in the Handling of Excess Income (Spenddown) RU.

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G. Additional Information (optional)

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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