



California  
Department of  
Health Services

**SANDRA SHEWRY**  
Director

State of California—Health and Human Services Agency  
**Department of Health Services**



**ARNOLD SCHWARZENEGGER**  
Governor

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TO: ALL COUNTY WELFARE DIRECTORS Letter No: 05-21  
ALL COUNTY ADMINISTRATIVE OFFICERS  
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS  
ALL COUNTY HEALTH EXECUTIVES  
ALL COUNTY MENTAL HEALTH DIRECTORS

SUBJECT: THE IN-HOME SUPPORTIVE SERVICES INDEPENDENCE PLUS  
1115 DEMONSTRATION PROJECT IMPLEMENTATION AND  
CHANGES TO PROCESSING IN-HOME SUPPORTIVE  
SERVICES CASES

The purpose of this All County Welfare Directors Letter (ACWDL) is to announce the In-Home Supportive Services (IHSS) Independence Plus 1115 Demonstration Project that provides in-home care to Medi-Cal eligible individuals with federal financial participation. This demonstration project will be known as the IHSS Plus Waiver and is being implemented under Welfare and Institutions (W & I) Code, Section 14132.951. This letter also provides instructions and information on the processing of Medi-Cal eligibility determinations for the IHSS Plus Waiver, the Personal Care Services program (PCSP)\*, and the State/County-only IHSS Residual program\*.

**\*Note:** The use of the word “program” in this context refers to benefit categories rather than Medi-Cal program coverage groups.

### BACKGROUND

The IHSS program has provided in-home services to the aged, blind, and disabled population since 1973. These services have enabled these individuals to remain in their homes and communities and thereby avoid institutional care.

There have been two programs providing in-home services to this population: the IHSS Residual program, and PCSP.

The first program is the IHSS Residual program, a state/county-only funded program that provided in-home care that included the following services:

- Protective supervision;
- Restaurant meal allowance;
- Services, including personal care services, that are provided by a spouse or parent of a minor child;
- Domestic and related services only; and
- Advance payment for services.

The second program is PCSP. These are in-home state plan services for which the State receives federal matching funds. PCSP includes personal care, domestic and related services that are not provided by a spouse or parent of a minor child.

Because of a budget shortfall, IHSS Residual individuals were slated to lose their IHSS Residual services. In order to continue to provide those services, the State of California sought federal approval to implement the IHSS Plus Waiver. The Centers for Medicare and Medicaid Services approval was received effective August 1, 2004. Under the IHSS Plus Waiver, the State will receive federal matching funds.

### IN-HOME SERVICES PROGRAMS

There are now three programs providing in-home services: the IHSS Plus Waiver, PCSP, and IHSS Residual.

#### The IHSS Plus Waiver

To qualify for the IHSS Plus Waiver, Medi-Cal eligibility is required. Individuals not receiving Supplemental Security Income/State Supplementary Payments (SSI/SSP) or other Medi-Cal linked cash-based programs (e.g., CalWORKs) must be determined eligible for federally funded full-scope Medi-Cal by a Medi-Cal eligibility worker (EW). Individuals must also qualify for in-home services through a needs assessment, completed by an IHSS social worker (SW). Individuals receiving at least one of the IHSS Plus Waiver services are considered to be IHSS PLUS WAIVER participants.

Those IHSS PLUS WAIVER services are:

- Personal care; protective supervision; domestic and related services; heavy cleaning; accompaniment to medical appointments and alternative resources; removal of grass, weeds, rubbish, ice and snow; and teaching and demonstration, when they are provided by a spouse or parent of a minor child as allowed under IHSS Regulations Manual of Policies and Procedures (MPP), Section 30.763.41 and 30.763.45;
- Restaurant meal allowance; and/or
- Advance payment for in-home care services.

#### Personal Care Services Program (PCSP)

To qualify for PCSP, individuals not receiving SSI/SSP or Medi-Cal-linked to a cash-based program must be determined eligible for federally funded full-scope Medi-Cal by a Medi-Cal EW and be found in need of personal care services through a needs assessment. Effective May 1, 2004, the Medi-Cal State Plan regarding personal care services was expanded to include the following services as federally funded personal care services:

- Ancillary services, including domestic and related services, under W & I Code, Section 14132.95 (d)(2), **not** provided by a spouse or parent of a minor child; and
- Protective supervision **not** provided by a spouse or parent of a minor child.

#### The IHSS Residual Program

IHSS Residual program services will be available to individuals **eligible under current IHSS regulations**, but who are not eligible for federally funded full-scope Medi-Cal. The services available under the IHSS Residual program have not changed.

#### MEDI-CAL ELIGIBILITY DETERMINATIONS

Medi-Cal eligibility determinations and redeterminations are to be performed on all applications received by the county requesting in-home services and existing in-home service for persons who are not also eligible for SSI/SSP or other Medi-Cal linked cash-based assistance. These determinations/redeterminations are to be performed by Medi-Cal EWs, using Medi-Cal rules, Medi-Cal forms, and notices of actions. These determinations/redeterminations may result in a

Medi-Cal share of cost (SOC) or the SOC may be reduced and other family members may become eligible for Medi-Cal. This applies to all three of the IHSS programs. There is no automatic Medi-Cal eligibility based upon receipt of in-home services for any of the individual participants in the in-home services groups. In fact, the only individuals receiving automatic Medi-Cal are SSI/SSP individuals (including *Craig v. Bontá* cases for individuals who have lost SSI and are waiting for a Medi-Cal evaluation) and most, but not all, county administered cash assistance programs. Individuals must be determined eligible for whatever Medi-Cal program is appropriate (e.g., Section 1931(b), Aged and Disabled Federal Poverty Level, Pickle, Medically Needy, 250 Percent Working Disabled, etc.) before a referral is forwarded to the IHSS unit for a needs assessment. IHSS Residual program eligibility will continue to be determined by county SWs using the IHSS eligibility criteria contained in MPP 30-700 but Medi-Cal will not be automatic as indicated above.

Medi-Cal eligibility determinations must also be completed on existing PCSP and IHSS Residual recipients who are not also eligible for SSI/SSP or other Medi-Cal linked cash-based assistance and have not yet received a Medi-Cal eligibility determination. The Medi-Cal case records must be maintained by and determinations and redeterminations completed by a Medi-Cal EW, using Medi-Cal rules and forms. Medi-Cal eligibility determinations for all existing in-home services recipients must be completed by October 1, 2005.

(SOC)

Medically Needy individuals with a SOC are to be treated as all other SOC individuals. The SOC may be met with any Medi-Cal service and the SOC is not automatically certified at the beginning of each month. Counties shall provide new applicants and Medi-Cal beneficiaries who are newly converted from an IHSS SOC to a Medi-Cal SOC with information on how the SOC is met using whatever method the county uses for instructing other Medi-Cal applicants. Counties shall revise their Medi-Cal SOC information to include the following two paragraphs.

“In the past, IHSS/PCSP individuals with a SOC automatically met that SOC at the beginning of each month and that SOC amount was deducted from the in-home service provider’s payment for services. Beginning August 1, 2005, the SOC must be met using Medi-Cal rules. This means that you are responsible for your medical expenses until your SOC has been met. For example, if you visit your doctor at the beginning of the month and you have not met your SOC yet, you must pay for that office visit (or a portion of that office visit up to your SOC amount).

The amount that you need to pay your in-home service provider as part of SOC will be reduced or eliminated by the amount you pay for other services if you have received other services before you pay your in-home provider for services he/she has provided to you. Once your SOC has been met, Medi-Cal will pay for your medical services, including in-home care. When your in-home services provider submits their time sheet, if you have a remaining SOC balance your provider's payment will be reduced by the amount you still owe. You will receive an Explanation of Benefits from your county's in-home services program that tells you how much you owe to your in-home service provider and what your remaining SOC balance is, if any, for that month."

#### CASE MANAGEMENT INFORMATION AND PAYROLL SYSTEM (CMIPS) AID CODE CHANGES AND NEW COUNTY ELIGIBILITY REPORTING

The Medi-Cal EW will place each IHSS PLUS WAIVER, PCSP, and IHSS Residual individual in an appropriate Medi-Cal aid code.

The aid codes used to report IHSS eligibility from CMIPS to Medi-Cal Eligibility Data System (MEDS) will be changing. In the past, IHSS Residual individuals appeared on MEDS in aid codes 18, 28, and 68 and PCSP individuals appeared on MEDS in PCSP tracking aid codes 1F (aged), 2F (blind), and 6F (disabled). Since it is no longer necessary to separately identify the aged, blind, or disabled in the IHSS/PCSP program aid codes, one new secondary tracking aid code is being created for each of the programs. The new IHSS PLUS WAIVER, PCSP, and IHSS Residual secondary tracking aid codes will appear in a Special Program Screen on MEDS. In preparation for CMIPS conversion to use the new aid codes, MEDS will accept the following new IHSS PLUS WAIVER/IHSS/PCSP aid codes beginning July 27, 2005:

- 2L - IHSS Plus Waiver
- 2M - Personal Care Services
- 2N - IHSS Residual

Medi-Cal EWs will not report these aid codes to MEDS. When programmed, CMIPS will pass the appropriate new aid code to MEDS or to the county if the county is doing its own reporting of IHSS PLUS WAIVER/IHSS/PCSP eligibility to MEDS. Counties who report in-home services eligibility to MEDS via their county Electronic Data Processing system and want to continue to do so will need to coordinate with the Department of Social Services/CMIPS on how they want to handle the initial conversion of existing aid codes to 2L, 2M, or 2N.

### CONVERSION PROCESSING

Beginning May 25, 2005, recipients of in-home services who must have a Medi-Cal eligibility determination completed before October 1, 2005 will be reported on the monthly Exception Eligibles Report sent to each county. This report will be sent to the counties so that the EWs can complete all of the Medi-Cal eligibility determinations for individuals in aid codes 18, 28, 68, 1F, 2F, or 6F, and report the appropriate Medi-Cal aid code to MEDS. This will also allow the State to track these cases and verify that the required Medi-Cal determinations have been completed. In-home services recipients will continue to appear on the report each month until the Medi-Cal eligibility has been reported to MEDS.

A one-time file will be created near the end of June 2005, to identify in-home services recipients with a SOC who have already received a Medi-Cal redetermination as evidenced by a Medi-Cal SOC aid code on the primary MEDS screen. Counties will be responsible for sending these individuals the SOC information included in the SOC section of this letter. The revised SOC information must be provided to those individuals prior to July 20, 2005.

Effective for August 2005 eligibility, automatic Medi-Cal eligibility associated with aid codes 18, 28, 68, 1F, 2F and 6F will be turned off when other Medi-Cal eligibility appears on MEDS. At that point, those aid codes will be used for tracking purposes only for the individuals. As of September 24, 2005, aid codes 18, 28, 68, 1F, 2F and 6F will be completely turned off. By that time all recipients of in-home care must be placed in the new tracking aid codes 2L, 2M, or 2N with Medi-Cal eligibility separately reported to MEDS.

If you have any questions regarding this letter or the IHSS Plus Waiver, contact Ms. Vicki Partington at (916) 552-9496 or email [Vparting@dhs.ca.gov](mailto:Vparting@dhs.ca.gov).

Original signed by

Tameron Mitchell, R.D., M.P.H., Chief  
Medi-Cal Eligibility Branch