

DATE: November 20, 2024

TO: ALL COUNTY WELFARE DIRECTORS Letter No.: 24-14
ALL COUNTY WELFARE ADMINISTRATIVE OFFICERS
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS
ALL COUNTY HEALTH EXECUTIVES
ALL COUNTY MENTAL HEALTH DIRECTORS

SUBJECT: 2025 MEDICARE CATASTROPHIC COVERAGE ACT SPOUSAL
IMPOVERISHMENT CAPS (Reference: ACWDLs 90-01, 90-03, 91-84,
17-25, 18-19 and MEDILs I 21-07 and I 24-16)

The purpose of this All County Welfare Directors Letter (ACWDL) is to inform counties of an increase to the maximum income under the Medicare Catastrophic Coverage Act, and provide information on how to apply the Spousal Impoverishment (SI) provisions for Non-MAGI Medi-Cal.

Effective January 1, 2025, the Minimum Monthly Maintenance Needs Allowance (MMMNA) is \$3,948 per month.

Note: The MMMNA amount effective January 1, 2024, through December 31, 2024, was \$3,854.

Income Eligibility

The MMMNA¹ applies to the determination of spousal income allocation to the community spouse when the institutionalized spouse resides in a skilled nursing facility or on a home and community-based services (HCBS) waitlist or is participating in home and community-based services (HCBS). The following ACWDLs 90-03, 17-25, 18-19 and Medi-Cal Eligibility Division Information Letters (MEDILs) [I 21-07](#) and [I 24-16](#) provide additional information. As long as there is the expectation that nursing facility level of care would be required for 30 consecutive days (Section 50033.5 and Questions 26, 27 and 29 in ACWDL [90-01](#), and ACWDLs [17-25](#) and [18-19](#)), according to ACWDL [91-84](#), the spousal income allocation applies in the month:

- Of application for an institutionalized/HCBS spouse.
- Of admission for an institutionalized spouse who is a Medi-Cal member.
- A request for HCBS is made by an HCBS spouse who is a Medi-Cal member.

¹ Pursuant to Section 50603(f) in ACWDL [90-03](#), a higher monthly spousal income allocation amount may be used in place of the calculated maximum based on the MMMNA if ordered by the court or through fair hearing.

Letter No.: 24-14
Page 2
November 20, 2024

Please Note: When determining whether the gross income of the community spouse is below the MMMNA, remember to deduct amounts paid by the community spouse for Medicare or other health insurance premiums (ACWDL [90-03](#), Question 22).

If you have any questions regarding this letter, please contact Jaeseana Mercado at (916) 345-7806 or by email at Jaeseana.Mercado@dhcs.ca.gov.

Original Signed By

Theresa Hasbrouck
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