

CHAPTER 8

CMIPS & SHARE-OF-COST

SPECIAL INSTRUCTIONS

SOC Cases Changing to Non-SOC Cases

The POS process has resulted in changes to entering these cases into CMIPS.

When an IHSS SOC case is changed to a non-SOC case:

- The user may keep the existing date or
- May enter a new SOC date to indicate the END DATE for SOC.

After the case has been updated with this information it is *possible* to access the case again and delete the SOC date.

- ***The SOC date should not be deleted. The subsequent deletion of the SOC date removes all trace of SOC information from the database.***
- When the effective date is in the future, timesheets processed between the date the change is made and the actual effective date will not be calculated correctly.

EXAMPLE:

- The change from a SOC case to a non-SOC case is made on April 1.
- The actual change to non-SOC is not *effective* until September 1.
- CMIPS needs the SOC information to remain in the database so that the timesheets submitted for the intervening time period will be calculated as a SOC case.

An ending segment should be built when the SOC period ends and a new segment started for the beginning of the non-SOC period. Timesheets for both before and after the change will then be calculated correctly.

Cases Transferring between Programs

Recipients move back and forth between PCSP, IPW, and IHSS-R programs for various reasons. This makes it difficult to make sure that the funding for each case is handled correctly.

- A manual change to a recipient's funding source cannot be made.
- CMIPS identifies recipients and their eligibility by their MEDS codes when it does the daily interface.
- The Weekly Statutory Max Report helps identify when a recipient moves from one Secondary Aid Code to another. (Please see page A-7 for additional information on this report.)

Share of Cost Exceeds Needs

For cases in either the IPW or PCSP, Medi-Cal does not allow termination or denial of benefits when the SOC exceeds the individual's needs. Cases in the IHSS-R program are still subject to CDSS Manual of Policies and Procedures Division 30-700 Regulations. These cases should be handled as they are currently.

No Buy-Out will occur for IPW, PCSP, or IHSS-R cases when the SOC exceeds the needs.

Companion Cases

- A recipient couple cannot assign the share-of-cost to a specific provider.
- A couple's share of cost cannot be divided between two providers.
- The SOC will be applied against the first timesheet keyed.
- If that timesheet does not meet all of the SOC, then any remainder will be applied against the next timesheet keyed, up to the value of the timesheet.

Notice of Action Changes (NOA)

- The IHSS-R Notice of Action timeframes have not changed.
- CDHS will send 10-day NOA's to IPW and PCSP recipients when the Medi-Cal SOC increases or the Medi-Cal case is terminated.
- CDSS will continue to issue timely IHSS NOA's to IHSS-R/IPW/PCSP cases following reassessments.
- For IPW/PCSP applications received before the implementation of the IPW and being approved for retrospective services:
 - It will be necessary to build separate segments to reflect periods of eligibility prior to and after March 1, 2006 so that funding will be handled correctly.
 - CMIPS now contains a hard edit that will not allow the user to enter a date that crosses over the inception of the IPW program date.

CMIPS SPEC (Special) Transactions

The following SPEC Transactions have been affected as indicated by the IPW changes. Please see CMIPS Manual Page XI-B-4 for a detailed list of SPEC transactions.

W/X 11 - Reissue Voided Warrant to a Lien Holder

These transactions will not be included in Spend-down processing.

W/X 12 - Issue Lien Payment to Provider

These transactions will not be included in Spend-down processing.

X 14 - Emergency Meals

These transactions will not be included in Spend-down processing.

WX15 CHANGE IN LAW – Currently used for Buyout issues only, this method is used when payment is necessary due to a change in law. Funding comes from State and County sources only, not federal. Transactions may be keyed against a Provider or a Recipient case. Management approval is required for use of this SPEC transaction.

WX25 STATUTORY MAX EXCESS – Used to pay a provider for:

- Hours in excess of 195 hours Statutory Maximum.

- Recipient cases which have a Medi-Cal Secondary Aid Code of 2L (IHSS+ Waiver) or 2N (Residual) for the payment period.
- May not be keyed against a recipient who has a Medi-Cal Secondary Aid Code of 2M for the payment period.
- Payment may not exceed the 283 Hour Statutory Maximum.
- May be keyed against a *Provider* case only.

When a secondary aid code changes and the statutory maximum on a case decreases to 195 hours the system will not allow payment over the 195 hours, even when the client has not received timely notice of the change. This transaction is used only to pay the provider for those hours.

Special Handling for Certain Time/Spec Transactions

The following Time/Spec transactions require special handling because they contain a “hard edit” and will not allow processing to be completed until the problem is resolved. If any of the following three edits are displayed when data is entered, call the EDS Help Desk at (916) 636-4280 or for Los Angeles County (213) 387-3521.

- “INVALID CIN”
- “INVALID BIC ISSUE DT”
- “DATA ERROR – CALL EDS”

Certification Reversals

CMIPS will attempt to reverse an incorrectly applied SOC on MEDS; however, once a case is Medi-Cal certified, the certification cannot be reversed.

EXAMPLE

When a timesheet is keyed into CMIPS with:

- The wrong number of hours, or
- The wrong pay period.

If it results in a Spend-down that certifies a recipient for Medi-Cal for the month, *the transaction cannot be reversed.*

Notice of Action (NOA) Messages

The following charts show changes to NOA messages. For the complete text of all NOA messages see CMIPS 2000 User’s Manual, Section V-F-2.

New Messages

The following NOA messages have been added:

310 311 312 313 314 315 316 317 318 319 345 350* 409 445

A copy of the complete text of these messages is attached.

*Note that the original NOA message 350 has been deleted and rewritten as a NOA message attachment. The amount of information necessary on this notice kept it from being printed directly onto the NOA. This attachment should be included with each NOA sent to a SOC recipient. Staff should “check” the appropriate program message.

Modified Messages

Many of the NOA messages have been slightly modified to read, “In Home Services” rather than “In-Home Supportive Services”. Only messages used exclusively by IHSS-R will continue to read “In-Home Supportive Services”. Other minor modifications have been made to some NOA messages so that the messages can be used by all three programs.

308 309 322 331 354 373 376 377 379 386 387 408 415 422 444
462 470 471 472 473 474 477 521 532 534 535 539 540 554 586

A copy of the complete text of these messages is attached.

Discontinued Messages

The following NOA messages have been discontinued:

346 350 351 355 378 380 381 382 383 392 529
530 531 533 536 537 538 541 542 560 595 597

A copy of the complete text of these messages is attached.

POS System Down

When the POS system is not operational, CMIPS will be unable to get SOC information needed to process timesheets. When this happens a hard edit will be received and the timesheet cannot be entered. Staff will receive a message telling them to “try again later.” ***Do not to attempt to “work around” this edit.*** Working around the edit can cause problems to the recipient’s Spend-down and an incorrect warrant could be issued to the provider. The system is not expected to be down often; generally timesheets can be re-keyed later in the same day.

CMIPS Manual Updates

The CMIPS 2000 User’s Manual is updated quarterly. All counties receive a diskette every quarter with updates to the CMIPS manual.