

County Medi-Cal Services Program Guide (CMSPG) Letter #31

June 06, 2014

Subject **2014/2015 COUNTY MEDICAL SERVICES (CMS) MAINTENANCE NEED LEVELS (MNL's) AND HARDSHIP MAXIMUM ALLOWANCE EXPENSES**

Effective Date July 1, 2014

Reference County Policy

Purpose To provide staff with the new:
• CMS and CMS Hardship MNL's; and
• CMS Hardship Maximum Allowable Expenses amounts.

Background Under the direction of the Board of Supervisors, the CMS and CMS Hardship MNLs, and CMS Hardship Maximum Allowable Expenses are adjusted annually effective July 1st.

Highlighted Changes **CMS and CMS Hardship MNLs**

Effective July 01, 2014, the new MNLs are as follows:

CMS Category	MNL	
	1 person	2 people
Standard	\$1,605	\$2,163
Hardship	\$3,406	\$4,589

CMS Hardship Maximum Allowable Expenses

Effective July 01, 2014, the new allowable amount for expenses are as follows:

Continued on next page

County Medi-Cal Services Program Guide (CMSPG) Letter #31, Continued

Highlighted Changes
(Continued)

Non-Discretionary Expense	Maximum Allowable Expense for	
	1 person	2 people
Housing/Utilities	\$852	\$1,148
Transportation	\$456	\$613
Food	\$248	\$335
Miscellaneous (includes clothing, personal)	\$111	\$147
Allowable Out-of-Pocket Health Care Expense	\$175	\$235

Required Action

Effective July 01, 2014, workers must use the new CMS MNL's, and CMS Hardship Maximum Allowable Expenses amounts when determining eligibility for CMS.

CMS IT System Impact (AuthMed)

AuthMed has been updated to include the new MNL's and Hardship Maximum Expense amounts.

Forms Impact

The CMS-38H (Attachment A) has been revised to reflect the 2014/2015 CMS Hardship Maximum Allowable Expenses amounts.

Document Capture Impact

AuthMed will calculate all budget entries; however, in situations where a manual budget is required, the worker shall image the completed CMS-38H into AuthMed.

Access Impact

When information is requested, Access/Access2Health agents will provide callers with the new CMS MNL's and Hardship Maximum Expense amounts.

Continued on next page

County Medi-Cal Services Program Guide (CMSPG) Letter #31, Continued

Quality Control (QC) Impact

Effective with the July 2014 review month, QC will cite the appropriate error on any case that does not comply with the requirements outlined in this letter.

Summary of Changes

The table below shows the changes to the CMSPG.

CMSPG Section	Updates
Article 6, Section 2, Appendix A	Updated the MNL's
Article 13, Section 3, Appendix A	Updated the Hardship Maximum Allowable Expenses amounts.

Changes to the CMSPG are noted with highlighted text.

Approval for Release

 6-6-14

JP

Patient Name		Budget Month/Year	
Member ID#		Date	
Worker #		Worker Name	

CMS Budget Worksheet

1.	Number of people in family unit _____	Complete these columns to determine income eligibility	
2.	Name of adult family members with income		
	A.	A	B
	B.	Earned Income	
3.	Gross Earnings/Earned In-kind (before deductions)	\$	\$
4.	State Disability Insurance (SDI)		
5.	Subtotal earned (add lines 3 and 4)	=	=
6a.	Work Expenses (\$90 for each person with earned income)	-	-
6b.	ABD Deduction (\$65 + ½ of the remainder for each person with earned income)	-	-
7.	Total Earned Income (subtract line 6 from line 5)	\$	\$
		Unearned Income	
8.	In-Kind Income	\$	\$
9.	Other Unearned Income (UIB, VA, SSA, etc.)		
10.	Total Unearned Income (Add lines 8 and 9)		
11.	Total Income (add lines 7 and 10)	\$	\$
12.	Health Insurance Premium <input type="checkbox"/> yes <input type="checkbox"/> no	-	-
13.	Verified Court Ordered Child Support/Alimony		
14.	Total Monthly Net Non-Exempt Income (subtract 12 and 13 from 11)	\$	\$
15.	Total CFBU Monthly Net Non-Exempt Income (add individual rounded totals for columns 14 A & B)		\$
16.	CMS MNL for CFBU Size		\$
17.	Subtract line 15 from line 16. If 15 is greater than 16, the applicant is over income. Offer Applicant CMS Hardship Application.		\$

If applicant is being denied for the sole reason of excess income, and is otherwise eligible, calculate CMS Hardship Evaluation budget.

CMS Hardship Evaluation

STEP 1	<p>Determine if the Applicant's monthly net non-exempt income is at or below 350% FPL. Refer to Article A, Section 5, Appendix C for CMS Maintenance Need Levels (MNL)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Applicant's monthly net non-exempt income</td> <td style="width: 50%;"></td> </tr> <tr> <td>350% FPL</td> <td></td> </tr> </table> <p>If Applicant's monthly net non-exempt income is at or less than 350%, go to Step 2.</p>	Applicant's monthly net non-exempt income		350% FPL																																																						
Applicant's monthly net non-exempt income																																																										
350% FPL																																																										
STEP 2	<p>Determine Total Monthly Allowable Non-Discretionary Expenses (using chart below)</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr style="background-color: black; color: white;"> <th rowspan="3">Non-Discretionary Expenses</th> <th rowspan="3">(A) Applicant's Actual Non-Discretionary Expenses</th> <th colspan="2">(B) Maximum Allowable Expense (EFF 7/1/14)</th> <th rowspan="3">Applicant's Allowable Expenses (Lesser of A or B)</th> </tr> <tr style="background-color: black; color: white;"> <th>For 1</th> <th>For 2</th> </tr> </thead> <tbody> <tr> <td>Housing/Utilities</td> <td></td> <td>\$852</td> <td>\$1,148</td> <td></td> </tr> <tr> <td>Transportation</td> <td></td> <td>\$456</td> <td>\$613</td> <td></td> </tr> <tr> <td>Food</td> <td></td> <td>\$248</td> <td>\$335</td> <td></td> </tr> <tr> <td>Miscellaneous (includes clothing, personal)</td> <td></td> <td>\$111</td> <td>\$147</td> <td></td> </tr> <tr> <td>Allowable Out-of -Pocket Health Care Expense Allowance</td> <td></td> <td>\$175</td> <td>\$235</td> <td></td> </tr> <tr> <td>Tax expenses (state and federal taxes, SDI, Social Security, and Medicare) include taxes paid whether shown as a deduction on earning statements or paid out of pocket.</td> <td></td> <td colspan="2">Actual</td> <td></td> </tr> <tr> <td>Court Ordered Payments (e.g., current child support and alimony)</td> <td></td> <td colspan="2">Actual</td> <td></td> </tr> <tr> <td>Payments on Prior Medical Debt</td> <td></td> <td colspan="2">Actual</td> <td></td> </tr> <tr style="background-color: #cccccc;"> <td colspan="5">Applicant's Total Monthly Allowable Non-Discretionary Expenses</td> </tr> <tr> <td colspan="5">Enter amount in item B below.</td> </tr> </tbody> </table>	Non-Discretionary Expenses	(A) Applicant's Actual Non-Discretionary Expenses	(B) Maximum Allowable Expense (EFF 7/1/14)		Applicant's Allowable Expenses (Lesser of A or B)	For 1	For 2	Housing/Utilities		\$852	\$1,148		Transportation		\$456	\$613		Food		\$248	\$335		Miscellaneous (includes clothing, personal)		\$111	\$147		Allowable Out-of -Pocket Health Care Expense Allowance		\$175	\$235		Tax expenses (state and federal taxes, SDI, Social Security, and Medicare) include taxes paid whether shown as a deduction on earning statements or paid out of pocket.		Actual			Court Ordered Payments (e.g., current child support and alimony)		Actual			Payments on Prior Medical Debt		Actual			Applicant's Total Monthly Allowable Non-Discretionary Expenses					Enter amount in item B below.				
Non-Discretionary Expenses	(A) Applicant's Actual Non-Discretionary Expenses			(B) Maximum Allowable Expense (EFF 7/1/14)			Applicant's Allowable Expenses (Lesser of A or B)																																																			
				For 1	For 2																																																					
		Housing/Utilities		\$852	\$1,148																																																					
Transportation		\$456	\$613																																																							
Food		\$248	\$335																																																							
Miscellaneous (includes clothing, personal)		\$111	\$147																																																							
Allowable Out-of -Pocket Health Care Expense Allowance		\$175	\$235																																																							
Tax expenses (state and federal taxes, SDI, Social Security, and Medicare) include taxes paid whether shown as a deduction on earning statements or paid out of pocket.		Actual																																																								
Court Ordered Payments (e.g., current child support and alimony)		Actual																																																								
Payments on Prior Medical Debt		Actual																																																								
Applicant's Total Monthly Allowable Non-Discretionary Expenses																																																										
Enter amount in item B below.																																																										
STEP 3	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: black; color: white;"> <th colspan="2">Calculation of Total Monthly Discretionary Income</th> </tr> </thead> <tbody> <tr> <td style="width: 80%;">A. Total Gross Monthly Income</td> <td style="width: 20%;"></td> </tr> <tr> <td>- B. Total Monthly Allowable Non-Discretionary Expenses</td> <td style="text-align: center;">-</td> </tr> <tr> <td>= C. Total Monthly Available Income</td> <td style="text-align: center;">=</td> </tr> </tbody> </table> <p>Subtract Line B (applicant's Total Monthly Allowable Non-Discretionary Expenses) from Line A (applicant's Total Gross Monthly Income).</p> <p>The remaining amount (Line C) shall be considered the applicant's Total Monthly Available Income.</p>	Calculation of Total Monthly Discretionary Income		A. Total Gross Monthly Income		- B. Total Monthly Allowable Non-Discretionary Expenses	-	= C. Total Monthly Available Income	=																																																	
Calculation of Total Monthly Discretionary Income																																																										
A. Total Gross Monthly Income																																																										
- B. Total Monthly Allowable Non-Discretionary Expenses	-																																																									
= C. Total Monthly Available Income	=																																																									
STEP 4	<p>Determine Applicant's Monthly Share of Cost</p> <p>The Applicant's Total Monthly Available Income (Line C above) is the Applicant's Monthly Share of Cost.</p>																																																									

Appendix 6A CMS Maintenance Need Levels (MNLs) Income Limit Chart and In-kind Income Values

A. Income Limit

MNL CHART – EFF 07/01/14		
CFBU SIZE	CMS 165% FPL	CMS HARDSHIP 350% FPL
1	\$1,605	\$3,406
2	\$2,163	\$4,589
3	\$2,723	\$5,775
4	\$3,280	\$6,958
5	\$3,838	\$8,141
6	\$4,397	\$9,328
7	\$4,955	\$10,511
8	\$5,513	\$11,694
9	\$6,072	\$12,880
10	\$6,630	\$14,063
Add for additional members	\$559	\$1,187

CMSPG LTR 31 (06/14)

Appendix 13A CMS Hardship Evaluation Process

The following steps are to be taken when evaluating a CMS Hardship application:

Step	Action								
1	<p>Determine if the Applicant's monthly net non-exempt income is at, or below, 350% FPL. Refer to Appendix 06.02A for CMS MNLs.</p> <table border="1" style="margin-left: 20px;"> <tr> <td style="width: 60%;">Applicant's monthly net non-exempt income</td> <td></td> </tr> <tr> <td>350% FPL</td> <td></td> </tr> </table> <p>If Applicant's monthly net non-exempt income is at or less than 350%, go to Step 2.</p>	Applicant's monthly net non-exempt income		350% FPL					
Applicant's monthly net non-exempt income									
350% FPL									
2	<p>Using chart below, determine Total Monthly Allowable Non-Discretionary Expenses:</p> <table border="1" style="margin-left: 20px;"> <thead> <tr> <th style="width: 25%;">Non-Discretionary Expenses</th> <th style="width: 25%;">(A) Applicant's Actual Non-Discretionary</th> <th style="width: 25%;">(B) Maximum Allowable Expense (EFF 07/01/14)</th> <th style="width: 25%;">Applicant's Allowable Expenses (Lesser of</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Non-Discretionary Expenses	(A) Applicant's Actual Non-Discretionary	(B) Maximum Allowable Expense (EFF 07/01/14)	Applicant's Allowable Expenses (Lesser of				
Non-Discretionary Expenses	(A) Applicant's Actual Non-Discretionary	(B) Maximum Allowable Expense (EFF 07/01/14)	Applicant's Allowable Expenses (Lesser of						

	Expenses	For 1	For 2	A or B)
	Housing/Utilities	\$852	\$1,148	
	Transportation	\$456	\$613	
	Food	\$248	\$335	
	Miscellaneous (includes clothing, personal)	\$111	\$147	
	Allowable Out-of - Pocket Health Care Expense Allowance	\$175	\$235	
	Tax expenses (state and federal taxes, SDI, Social Security, and Medicare) include taxes paid whether shown as a deduction on earning statements or paid out of pocket.	Actual		
	Court Ordered Payments (e.g., current child support and alimony)	Actual		
	Payments on Prior Medical Debt	Actual		
	Applicant's Total Monthly Allowable Non-Discretionary Expenses			
	Enter amount in item B below.			
3	Calculation of Total Monthly Discretionary Income			
	A. Total Gross Monthly Income			
	- B. Total Monthly Allowable Non-Discretionary Expenses			-
	= C. Total Monthly Available Income			=
<p>Subtract Line B (applicant's Total Monthly Allowable Non-Discretionary Expenses) from Line A (applicant's Total Gross Monthly Income).</p> <p>The remaining amount (Line C) shall be considered the applicant's Total Monthly Available Income.</p>				
4	<p>Determine Applicant's Monthly Share of Cost.</p> <p>The Applicant's Total Monthly Available Income (Line C above) is the Applicant's Monthly Share of Cost.</p>			