

# Medi-Cal Program Guide Letter (MPG) # 739

November 2, 2011

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**Subject**            **APPLICATION AND REDETERMINATION PROCESS FOR DECENTRALIZED IN-HOME SUPPORTIVE SERVICES (IHSS) RELATED MEDI-CAL CASES**

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**Effective**            September 9, 2011

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**Reference**            County Policy

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**Purpose**                The purpose of this letter is to inform staff of changes to the processing of IHSS related Medi-Cal cases due to decentralization.

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**Background**        Due to budgetary changes, effective November 2005 individuals who are receiving IHSS services are no longer automatically eligible to Medi-Cal. Applicants for IHSS services must have a Medi-Cal eligibility determination completed before IHSS services are authorized.

In San Diego County, the IHSS cases were administered by the IHSS unit housed at the Southeast Family Resource Center (FRC). This unit was divided into specialized Intake and Granted functions where eligibility was determined for IHSS and Medi-Cal.

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**Highlighted Changes**    In a joint effort to support the County's No Wrong Door Policy and better serve our common Medi-Cal clients who are also supported by the In Home Supportive Services (IHSS) section, The IHSS related Medi-Cal cases will no longer be centralized in the Southeast FRC. All FRC's will now be responsible for the intake and maintenance of these Medi-Cal cases. This will occur by way of the IHSS/MC Liaisons.

With the decentralization of IHSS related Medi-Cal cases to all FRCs, the MPG has been updated to include the worker's responsibility in processing IHSS/Medi-Cal applications and redeterminations.

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**Required Action**        Workers will follow the required steps outlined in [Article 5, Section 21.2](#) to complete application and redetermination processing requirements.

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**Automation**        No impact

**Impact**

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**Forms Impact**

No impact

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**ACCESS Impact**

No Impact

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**QA Impact**

No Impact

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**Summary of Changes**

The table below shows the changes made in the Medi-Cal Program Guide.

<b>Section</b>	<b>Summary of Change</b>
<a href="#">Article 5, Section 21.2</a>	<ul style="list-style-type: none"><li>• Info mapped the Article</li><li>• Deleted Section 5.21.2C Referrals When There Is An Active Case</li></ul>

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**Manager Approval**

Sylvia Melena, Assistant Deputy Director  
Self Sufficiency Programs  
Strategic Planning and Operational Support Division

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## Article 5 Section 21 – In-Home Supportive Services (IHSS)

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## 5.21.1 In-Home Supportive Services (IHSS)

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<b>A. General</b>	This section provides information on the treatment of cases in which an applicant/beneficiary is applying for or receiving IHSS services.	ACWDL 05-21, 05-26, 05-29
	Applicants for IHSS services must have a Medi-Cal eligibility determination completed before IHSS services are authorized.	ACL 05-05
	MPG LTR 580 (09/05)	05-05 Errata
<b>B. IHSS Programs</b>	There are three programs providing in-home services:	ACWDL 05-21, 05-26, 05-29
	<ul style="list-style-type: none"><li>• IHSS Plus Option (Aid Code 2L),</li><li>• Personal Care Services Program (PCSP) (Aid Code 2M), and</li><li>• IHSS Residual (Aid Code 2N).</li></ul>	ACL 05-05 05-05 Errata
	The above aid codes will be reported to MEDS via CMIPS and NOT entered by the Medi-Cal worker into CalWIN.	
	MPG LTR 580 (09/05)	
<b>C. IHSS Plus Option</b>	To qualify for the IHSS Plus Option, Medi-Cal eligibility is required. Individuals not receiving Supplemental Security Income/State Supplemental Program (SSI/SSP) or other Medi-Cal linked cash-based programs [for example, CalWORKs, Refugee Cash Assistance (RCA), Foster Care, or Adoptions Assistance Program (AAP)] must be determined eligible for federally funded full-scope Medi-Cal by a Medi-Cal worker. These individuals must also qualify for in-home services through a needs assessment, completed by an IHSS Social Worker (SW).	ACWDL 05-21, 05-26, 05-29
	MPG LTR 580 (09/05)	ACL 05-05 05-05 Errata
<b>D. PCSP</b>	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 worker and be found in need of personal care services through a needs assessment completed by an IHSS SW.	ACWDL 05-21, 05-26, 05-29
	MPG LTR 580 (09/05)	ACL 05-05 05-05 Errata

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**E.  
IHSS  
Residual**

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.

ACWDL  
05-21  
05-26  
05-29

MPG LTR 580 (09/05)

ACL  
05-05  
05-05  
Errata

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**F.  
Case  
Processing**

Application

County  
Policy

The Medi-Cal worker must:

- Complete the Medi-Cal determination using the MC 210 or authorized substitutes and related forms. Packets must contain a DDSD packet if disability has not already been determined.

Redetermination

The Medi-Cal worker must:

- Complete the annual redetermination using the MC 210RV and related forms, and
- Maintain the Medi-Cal case.

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**G.  
SOC**

SOC individuals are treated as Medically Needy individuals with a SOC. The SOC may be met with any medical service, including payments to the IHSS provider.

ACWDL  
05-21  
05-26  
05-29

MPG LTR 580 (09/05)

ACL  
05-05  
05-05  
Errata

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**H.  
IHSS Plus  
Option  
Income**

Payments made under the IHSS Plus Option are exempt as income and property. These exempt payments include:

ACWDL  
05-21  
05-26  
05-29

- Caregiver wages that are paid to a parent of an IHSS Plus Option minor child recipient for services provided to that child;
- Caregiver wages that are paid to a spouse of an IHSS Plus Option recipient for services provided to that recipient;
- Restaurant meal allowances from IHSS for the IHSS Plus Option recipient; and
- The advance payments made to IHSS Plus Option recipients to pay their caregivers directly for services provided under the IHSS Plus Option.

ACL  
05-05  
05-05  
Errata

MPG LTR 580 (09/05)

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**I.  
In-Home  
Caregiver  
Wages**

In-home caregiver wages received by a spouse or parent for care of a spouse or minor child in receipt of federal, state or local government in-home services program shall be exempt as income and property for Medi-Cal purposes. This exemption includes payments received by a parent or spouse of an IHSS Residual recipient.

ACWDL  
07-02

MPG LTR 616 (09/07)

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**J.  
In-Home  
Care  
Services  
Payments**

Payments made by Department of Health Care Services (DCHS) to an in-home care recipient for the purpose of purchasing in-home care services, including restaurant meals, shall be exempt as income and property for Medi-Cal purposes.

ACWDL  
07-02

MPG LTR 616 (09/07)

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## 5.21.2

### IHSS/Medi-Cal Application and Redetermination Processing

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#### A. General

This section provides information regarding the processing of the application when an individual applies for IHSS services.

County  
Policy

MPG LTR 580 (09/05)

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#### B. Application Processing

All applicants or recipients of IHSS must have a Medi-Cal eligibility determination completed by the County. These determinations are to be performed by Medi-Cal Human Services Specialists (HSS) using Medi-Cal rules, forms, and Notices of Actions (NOA).

ACWDL  
05-21

These individuals must also qualify for in-home services through a needs assessment, completed by an IHSS SW.

*Aid types:*

- IHSS Plus Option(Aid Code 2L)
- PCSP (Aid Code 2M)
- IHSS Residual (Aid Code 2N)

Note: The IHSS Needs Assessment can be completed by the IHSS SW at any time during this process, it is not necessary for the SW to wait for its completion

MPG LTR 739 (11/11)

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#### C. A&D FPL Program

The Medi-Cal determination is separate from the IHSS determination. The Medi-Cal HSS will determine potential eligibility to the A&D FPL according to the procedures outlined in [MPG Article 5, Section 19](#).

ACWDL  
05-21

MPG LTR 580 (09/05)

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**D.  
DDSD**

Cases which require a disability determination will follow the DDSD requirements outlined in [MPG Article 5, Section 4](#) with the following exception:

ACWDL  
05-21

- These pending cases will not be forwarded to the Continuing Banks until final approval from the DDSD has been received by the respective FRC.

MPG LTR 739 (11/11)

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**E.  
Re  
determination  
Procedure**

Each FRC is responsible for completing the annual redetermination of these cases according to the procedures outlined in [MPG Article 4, Section 15](#) and [Decentralized IHSS Medi-Cal Cases Eligibility Operations Guide](#).

County  
Policy

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**F.  
Out-  
Stationed  
Worker  
Procedures**

Out-stationed workers may receive IHSS related Medi-Cal referrals. Workers will be responsible for processing these cases according to the procedures outlined in [MPG Article 4, Section 2](#), [MPG Article 4, Section 3](#), and [IHSS Medi-Cal Out-Station Process Eligibility Operations Guide](#).

County  
Policy

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**G.  
CalWORKs  
Dis-  
continuance**

When a CalWORKs recipient who is also receiving IHSS is discontinued and there is no other Medi-Cal eligibility (for example, Transitional Medi-Cal (TMC) or 1931(b)), the FRC HSS must contact the IHSS SW to request a copy of the DDSD determination. The clue for the FRC HSS will be the 2L, 2M or 2N Aid Code on the Special Programs screen (INQ1) on MEDS. If the DDSD determination shows that the beneficiary is disabled and the reexamination date has not passed, then that determination can be used for Medi-Cal eligibility.

ACWDL  
05-21,  
05-26,  
05-29

ACL  
05-05  
05-05  
Errata

MPG LTR 580 (09/05)

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**H.  
Case  
Location**

The Medi-Cal case with an associated IHSS case will be located at the respective FRC based on zip code

County  
Policy

MPG LTR 739 (11/11)

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