

# NOTES

FROM THE TRAINING BUREAU

September 21, 2007

## **ITEM 07-9-1: Paraphrased Regulations**

This version of the paraphrased regulations provides 35 additions and 13 revisions to the paraphrased regulations. There are also 36 deleted paraphrased regulations and 36 renumbered paraphrased regulations.

The major additions are in the Citizenship/Alien Residency section (Section 420-425) because All County Welfare Director's Letter (ACWDL) 07-12 was issued on June 4. That ACWDL explains that pursuant to the federal Deficit Reduction Act of 2005, Medi-Cal applicants and recipients must provide evidence of citizenship and national status as a condition of receiving full-scope Medi-Cal.

Many paraphrased regulations have been renumbered for better organization. Many obsolete regulations have been deleted. There will be renumbering and reorganization of the ParaRegs on a continuing basis.

In issue code 568-QA Needs Assessments, paraphrased regulations 568-2 through 568-13 (with the exception of 568-8) have been deleted from the paraphrased regulations.

Paraphrased regulation 568-2C has been split into 568-2C for the grid and 568-2D for factors/exceptions. Paraphrased regulation 568-3C has been divided into 568-3C for the grid and 568-3D for factors/exceptions as have all paraphrased regulations through 568-11C (except for 568-8). Judges may choose to cite one or more shorter paraphrased regulations that includes just the task definition such as (568-2A), just the rankings (568- 2B) just the grid (568-2C) and/or just factors/exception examples (568-2D)

For rubbing skin/repositioning, judges may cite paraphrased regulation may cite 568-12A, 568-12B and/or 568-12C. For care and assistance with prosthesis the options are 568-13A, 568-13B and/or 568-13C.

The Specified Low-Income Medicare Beneficiary (SLMB) section has been moved from issue code 433 to issue code 432 and combined with the Qualified Medicare Beneficiaries (QMB). The Qualified Individuals (QI) section has been moved from issue code 437 to 433. The paraphrased regulations regarding the 250% working disabled program have been moved from ParaRegs 430-11 through 430-20 into its own issue code 437 and renumbered from 437-1 through 437-10.

The following is the list of updates:

## **Issue Codes**

432 QMB/SLMB  
433 QI  
437 250% Working Disabled

## **Renumbered**

075-3 to 075-1A	430-15 to 437-5
075-1A to 075-1B (in part)	430-16 to 437-6
415-1A to 415-8	430-16A to 437-6A
415-8 to 415-8A	430-17 to 437-7
415-4A to 415-1G	430-18 to 437-8
415-4B to 415-1H	430-19 to 437-9
433-1 to 432-5	430-20 to 437-10
433-3 to 432-6	568-2C to 568-2C and 568-2D
433-4 to 432-7	568-3C to 568-3C and 568-3D
437-1 to 433-1	568-4C to 568-4C and 568-4D
437-3 to 433-2	568-5C to 568-5C and 568-5D
437-4 to 433-3	568-6C to 568-6C and 568-6D
437-4A to 433-4	568-7C to 568-7C and 568-7D
430-11 to 437-1	568-9C to 568-9C and 568-9D
430-11A to 437-2	568-10C to 568-10C and 568-10D
430-12 to 437-3	568-11C to 568-11C and 568-11D
430-12A to 437-3A	568-12B to 568-12B and 568-12C
430-13 to 437-4	568-13B to 568-13B and 568-13C

## **Deletions**

070-7; 076-3; S077-2; S077-4; 133-1A; 133-8; S135-7A; S135-7B; S136-6; S137-5; S140-1; S141-2; S137-5; S140-1; S141-2; S141-3; S144-6; S416-1; S416-1A; S416-2; S417-5; S417-8; S423-6A; S423-6B; 433-7; S438-5B deleted altogether; 564-2; S564-4; 564-5B; 568-2; 568-3; 568-4; 568-5; 568-6; 568-7; 568-9; 568-10; 568-11; 568-12; 568-13

## **Revisions**

### **070-3**

Retroactive eligibility for mothers who deliver children prior to anticipated month of birth (44- 209.235)

### **073-2A**

Father of unborn excluded from AU (82-832(c))

### **073-3**

SSI/SSP, RRP, Kin-GAP or FC recipient excluded from AU (82-832.1(d))

### **075-1A**

Determination of AU when there are multiple caretakers, or one caretaker and nonsiblings (82-824.1; W&I 11450.16(e))

### **130-3**

Definitions for purposes of 44-315, of NNI, grant amount, potential grant (44-315.1)

### **132-5A**

Title IV and BIA loans and grants are totally excluded as of 7/1/93. (ACL 94-02; 42-213.2c(2))

### **139-1**

Disability based unearned income is SDI, private disability, TWC and SSDI (W&IC 11451.5(b)(2); 44-101(f))

### **139-1A**

Private disability insurance benefits include privately purchased or employer-sponsored disability insurance, but not non-insurance benefits, e.g., veteran's benefits (44-111(f)(1)(B))

### **140-1**

Sick leave benefits are earned income (44-101(e))

### **417-1A**

Refugees entitled to evaluation for evaluation of Medi-Cal eligibility under SB 87 (ACWDL 97-57, 01-36, 01-39; MEPM 24B-11; W&IC 14005.31, .32, and .37)

### **417-3**

Four-month continuing Medi-Cal benefits for AFDC families terminated because of increased child/spousal support (50243; ACWDL 90-32, 90-33, 90-66)

---

*Notes from the Training Bureau – Issue 07-9-1*

**433-1**

Establishment of QI program, and interim procedures; QI-2 program discontinued 12/31/02; QI-1 program discontinued 9/30/03 (ACWDL 97-45, 98-15, 98-47, 03-02)

**561-1A**

Chronic disabling condition is disability standard for PCSP; PCSP only for categorically needy persons (51350(b))

**Additions****073-1**

Persons excluded by law from the AU include persons not meeting citizenship/alien status requirements (82-832(b))

**073-1A**

Persons excluded by law from the AU include children living with minor parent receiving foster care or Kin-GAP (82-832(a))

**073-11G**

Counties may waive MFG rules for victims of domestic violence (ACIN I-02-06) 073-13A MFG requirement reminder plus examples (ACIN I-29-07)

**414-14**

Counties must provide DHCS 0001 form to applicants and DHCS 0002 form to beneficiaries (ACWDL 07-12)

**415-11**

Documentation of U.S. citizenship and identity required (ACWDL 07-04)

**415-11A**

Federal law requires CDHS to implement federal citizenship/identity documentation requirements with as much flexibility as allowed (ACWDL 07-04)

**421-1**

Documentation of U.S. citizenship and identity required (ACWDL 07-12)

**421-1A**

Federal law requires CDHS to implement federal citizenship/identity documentation requirements with as much flexibility as allowed (ACWDL 07-12)

**421-1B**

County duty to assist in obtaining evidence of citizenship/identity; if otherwise eligible for Medi-Cal, but ineligible for full-scope Medi-Cal for lack of citizenship/identity verification, applicants/beneficiaries eligible for restricted Medi-Cal (ACWDL 07-12)

**421-C**

Documentation of citizenship and identity is a one-time activity (ACWDL 07-12)

---

*Notes from the Training Bureau – Issue 07-9-1*

**421-1D**

New applicants are treated differently from ongoing beneficiaries (ACWDL 07-12)

**421-2**

Applicants and beneficiaries who are exempt from citizenship/identity verification (ACWDL 07-12)

**421-3**

Requirement to document citizenship/national status does not apply when presumptive eligibility/accelerated enrollment is established, although is required when ongoing eligibility is determined (ACWDL 07-12)

**421-4**

Counties must provide DHCS 0001 form to applicants and DHCS 0002 form to beneficiaries (ACWDL 07-12)

**421-4A**

Five-tier hierarchy of acceptable evidence of citizenship and identity (ACWDL 07-12)

**421-4B**

Documentation establishing U.S. citizenship (ACWDL 07-12)

**421-4C**

Documentation of identity required if Tier 1 evidence of citizenship is not available (ACWDL 07- 12)

**421-4D**

Acceptable evidence of identity (tier 5) (ACWDL 07-12)

**421-5**

County must obtain evidence of citizenship/identity for applicants within prescribed time limit that may be extended for “good faith” effort to obtain documentation (ACWDL 07-12)

**421-5A**

At redetermination, county must allow beneficiaries time to provide evidence of citizenship/identity as long as beneficiary is making “good faith” effort to obtain documentation (ACWDL 07-12)

**421-5B**

Definition of “good faith” effort to obtain documentation of citizenship/identity (ACWDL 07-12)

**421-5C**

Examples of “good faith” effort to obtain documentation of citizenship/identity (ACWDL 07-12)

**421-5D**

County must provide reasonable assistance to persons incapable of obtaining required documents (ACWDL 07-12)

**431-3A**

CSRA is combined separate property and community property of institutionalized and community spouses (ACWDL 90-01, draft §50031.7)

**431-3B**

Property of institutionalized and community spouses treated in accord with §§50490.1 through .7 and supersedes any other sections inconsistent with those sections (ACWDL 90-01, draft regulation 50490)

**431-3C**

Net market value of all available net non-exempt income of institutional or community spouse is available to the institutionalized spouse (ACWDL 90-01, draft regulation 50490.3)

**470-4A**

Medicare Part D deductions (ACWDL 05-23)

**470-9**

MN person in board and care has unavailable income if income is paid to facility for care and support, and exceeds maintenance need level; after 4/1/00 there is a \$315 deduction allowable (50515(a)(3); *Pettit v. Bontá*; ACWDL 00-56)

**560-2**

Three in-home service programs; IHSS Plus Waiver, PCSP and IHSS-Residual (ACWDL 05-21)

**560-2A**

Things needed to qualify for IHSS Plus Waiver (ACWDL 05-21)

**560-2B**

Things needed to qualify for PCSP (ACWDL 05-21)

**560-2C**

Services available for IHSS-Residual (ACWDL 05-21)

**561-8**

PCSP recipient may receive three-month retroactive benefits if services actually received and out of pocket expenses incurred (ACL 02-18)

**563-9**

Non-parent may provide PCSP in home of an institutionally deemed child even if parent is in the home. (ACL 00-83)