

December 30, 2021

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

EXECUTIVE SUMMARY

ALL COUNTY LETTER NO. 21-154

The purpose of this All-County Letter (ACL) is to provide information regarding the Medi-Cal Home and Community Based Alternatives (HCBA) Waiver through which the Waiver Personal Care Services (WPCS) waiver service is available.



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DIRECTOR

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DEPARTMENT OF SOCIAL SERVICES
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GAVIN NEWSOM
GOVERNOR

December 30, 2021

ALL COUNTY LETTER NO. 21-154

TO: ALL COUNTY WELFARE DIRECTORS
ALL IN-HOME SUPPORTIVE SERVICES PROGRAM MANAGERS

SUBJECT: INFORMATION AND INSTRUCTIONS REGARDING THE HOME
AND COMMUNITY BASED ALTERNATIVES (HCBA) WAIVER
AND WAIVER PERSONAL CARE SERVICES (WPCS)

REFERENCES: [ALL-COUNTY LETTER 03-24](#); [ALL-COUNTY LETTER 19-61](#);
WELFARE AND INSTITUTIONS CODE (WIC) 14132.97; SECTION
1915(c) of TITLE 19 of the SOCIAL SECURITY ACT; CALIFORNIA
CODE OF REGULATIONS, TITLE 22, Section 51346

The purpose of this All-County Letter (ACL) is to provide information regarding the Medi-Cal Home and Community Based Alternatives (HCBA) Waiver through which the Waiver Personal Care Services (WPCS) waiver service is available. In addition, this letter serves to clarify the role of the counties with respect to information sharing and referrals. Welfare and Institutions Code (WIC) section 14132.97 requires the Department of Health Care Services (DHCS) to provide WPCS to individuals eligible for services under the Nursing or Model Nursing Facility waivers.

Overview of Home and Community Based Alternatives (HCBA) Waiver

The HCBA Waiver provides care management services to persons at risk for nursing home or institutional placement. A multi-disciplinary team made up of a registered nurse and a social worker delivers care management services to Waiver beneficiaries. The HCBA Waiver covers a wide range of direct and indirect care services, including Waiver Personal Care Services (WPCS). DHCS administers the HCBA Waiver program, primarily using contracted HCBA Waiver agencies. HCBA Waiver agencies perform local Waiver administration functions and deliver the Comprehensive Care Management Waiver service (provided by a Care Management Team (CMT)).

County IHSS Staff Responsibilities regarding HCBA Waiver and WPCS

In connection with WIC 14132.97, counties are required to:

- Inform DHCS/Waiver Agency staff of personal care services hours currently authorized to the recipient, including the specific task categories for the approved IHSS hours.
- Determine eligibility for IHSS for those not currently authorized for services.

To ensure that eligible recipients obtain the WPCS they are entitled to, county IHSS staff must coordinate with DHCS/Waiver Agency staff. County IHSS staff must share case file information to assist DHCS/Waiver Agencies in determining the number of WPCS hours to authorize. Additionally, county IHSS staff may request that the Waiver Agency provide a list of mutual recipients in their county. Releases of Information (ROIs) are not required when Waiver Agency staff and county IHSS staff are sharing relevant case information regarding mutual recipients. County IHSS staff can also assist recipients who are in need of WPCS to receive WPCS by referring them to DHCS or the Waiver Agency associated with the recipient's county of residence. Any recipient who requests WPCS should be referred for an eligibility determination. As noted above, the HCBA waiver requires that recipients be enrolled in and receiving IHSS in order to be eligible for WPCS.

To be considered for WPCS, applicants must first apply for enrollment in the HCBA Waiver. After the receipt of an application for enrollment into the HCBA Waiver, a representative from DHCS or the applicable HCBA Waiver Agency will schedule an initial in-home assessment with a case manager and/or nurse evaluator to determine what services may be needed and in what quantity. HCBA Waiver service needs are determined during the assessment and authorized as determined medically necessary if the applicant is approved for enrollment.

County IHSS staff will continue to have the responsibility for annually assessing a recipient to determine the recipient's IHSS service needs. When re-assessing, county IHSS staff must communicate with DHCS/Waiver Agency staff regarding the changes in type, frequency or amount of services the recipient receives. If the annual, or any new assessment, results in a reduction in the number of authorized hours, the county IHSS worker should communicate with DHCS/Waiver Agency staff regarding the reason for the change in authorized hours. WPCS are to supplement and not supplant the services authorized by IHSS.

- Per WIC section 14132.97, WPCS shall not replace any authorized IHSS hours or IHSS hours that may be authorized.
- Further, WPCS hours are not alternative resources for purposes of determining the need for IHSS hours.
- IHSS hours shall not be denied or reduced because an individual is eligible for or receiving WPCS.

The Case Management, Information and Payrolling System (CMIPS) does not capture whether a recipient is an HCBA waiver recipient. However, if an HCBA waiver recipient is authorized WPCS hours, those hours will be reflected on the “WPCS Hours” screen under the tab for “Providers and Hours.” Additionally, the “Case Providers” screen will identify which providers are WPCS providers.

HCBA Waiver

Effective January 1, 2002, the Nursing Facility waiver was replaced by the Nursing Facility A/B waiver and a Subacute waiver was implemented effective April 1, 2002. The HCBA Waiver is a continuation of the Nursing Facility/Acute Hospital (NF/AH) Waiver and was approved by the federal government’s Centers for Medicare and Medicaid Services (CMS) on May 16, 2017. Medicaid’s Home and Community-Based Services (HCBS) Waiver programs, including the HCBA Waiver, are authorized under Section 1915(c) of Title 19 of the Social Security Act, Section 14132(s) of the WIC, and Section 51346 of Title 22, California Code of Regulations and governed by Title 42 of the Code of Federal Regulations. The HCBA Waiver is administered by DHCS. Like all Medi-Cal waivers authorized under Section 1915(c) of the Social Security Act, the HCBA Waiver must be resubmitted to CMS for reauthorization every five-years.

The HCBA Waiver provides care management services to persons at risk for nursing home or institutional placement. Care management services are provided by a multidisciplinary care team comprised of a registered nurse and a social worker. The care management team coordinates Waiver and State Plan services (e.g., medical, behavioral health, In-Home Supportive Services, etc.), and arranges for other available long-term services and supports available in the local community. Care management and Waiver services are provided in the participant’s community-based residence. This residence can be privately owned, secured through a tenant lease arrangement, or the residence of a participant’s family member. Individuals who reside in Congregate Living Health Facilities and Intermediate Care Facilities for Individuals with Developmental Disabilities may also be eligible to receive some HCBA waiver services.

HCBA Waiver Services

The HCBA Waiver covers a wide range of direct care and indirect care services:

- Private duty nursing, including home health services
- Case management
- Habilitation
- Home and Family respite
- Community transition services
- Environmental accessibility adaptations

- Waiver Personal Care Services (WPCS)¹

Under the HCBA waiver, a recipient may be authorized for up to 24 hours per day of direct care, which may include a combination of In-Home Supportive Services (IHSS), WPCS, and in-home nursing. The Waiver Agency must coordinate with the county if the recipient is also receiving IHSS hours to ensure that the total direct care hours authorized by any source do not exceed 24 hours per day. The HCBA waiver covers WPCS for specific tasks that are not covered by the IHSS hours. As a part of the eligibility for WPCS, individuals must be eligible for and currently receiving IHSS. Recipients do not have to be approved for the maximum 283 IHSS hours to be eligible for WPCS. According to WIC section 14132.97, "Waiver personal care services" means the personal care services authorized for persons who are eligible for services under the Medi-Cal Nursing Facility or Model Nursing Facility waivers, now the HCBA Waiver. WIC Section 14132.97 also provides that waiver personal care services "shall differ in scope from personal care services that may be authorized in Section 14132.95, and shall not replace any hours of services authorized or that may be authorized under Section 14132.95 of the WIC." WPCS includes:

- Assistance to Independence in Activities of Daily Living (ADL): Assisting the participant in reaching a self-care goal, the WPCS provider promotes the participant's ability in obtaining and reinforcing his or her highest level of independence in ADLs. The WPCS provider provides assistance and feedback to the participant in an effort to help reach specific self-care goals in performing or directing caregivers in an activity without assistance from others. Services provided by the WPCS provider are verbal cueing, monitoring for safety, reinforcement of the participant's attempt to complete self-directed activities, advising the primary caregiver of any problems that have occurred; providing information for updating the participant's Plan of Treatment (POT) and addressing any self-care activities with an anticipated goal completion date.
- Adult Companionship: Adult companionship is for waiver participants who are isolated and/or may be homebound due to his or her medical condition. Adult companions must be at least 18 years of age and able to assist participants enrolled in the waiver. Waiver participants utilizing Adult Companionship must be at least 18 years old. Adult Companion services include non-medical care, supervision, and socialization provided to a waiver participant. To help maintain a waiver participant's psychological well-being, adult companions may assist waiver participants in accessing self-interest activities or accessing activities in

¹ WPCS is also a waiver benefit previously available through the In-Home Operations (IHO) waiver. The IHO waiver sunset on December 31, 2019 and all IHO waiver participants were transitioned to the HCBA waiver prior to that date.

the local community for socialization and recreational purposes, and/or providing or supporting an environment conducive to interpersonal interactions.

- **Hospitalization Services:** While the HCBA participant is admitted to a health care facility, the WPCS provider can provide the following services: routine housekeeping in the participant's absence; collection of mail and other deliverables in the participant's absence and contacting or visiting the participant to assist in responding to mail; food shopping for the participant's return to home; assistance in obtaining medications and medical supplies for the participant's return home; and availability to accept delivery of durable medical equipment and supplies at the participant's home.

The HCBA Waiver allows WPCS to be provided through independent providers, individuals that are employed directly by the participant, or agencies that enroll as Medi-Cal providers and bill through the Medi-Cal fiscal intermediary. All individual WPCS providers must be enrolled IHSS providers. Individual WPCS providers receive payment through CMIPS and are subject to the same provider enrollment process as IHSS providers. Additionally, WPCS providers receive the same collective bargaining rights, wages, benefits, and other terms and conditions of employment that exist for IHSS providers in their respective counties. Initiation of timesheet and payroll processing for WPCS providers is completed by the DHCS IHSS/WPCS Unit. WPCS timesheets are submitted electronically through CMIPS. If a WPCS provider has any issues with payment (e.g., timesheet is declined, hours not paid, provider not enrolled, etc.), the WPCS participant and provider can contact the WPCS Hotline at (916) 552-9214.

HCBA Waiver Agencies

The primary model for the administration and operation of the HCBA Waiver is through contracted HCBA Waiver Agencies. The Waiver Agencies are responsible for local Waiver administration functions and for the delivery of the Comprehensive Care Management Waiver service provided by a Care Management Team (CMT).

Waiver Agency administration functions include, but are not limited to:

- Evaluating applicants' eligibility for the Waiver;
- Submitting enrollment applications and supporting documentation to DHCS for approval (which includes the Intake Medical Summary, Case Management Report, POT, Menu of Health Services, and Informing Notices);
- Conducting annual level of care evaluations;
- Reviewing and approving participants' person-centered POTs; and

- Authorizing Waiver services, including managing service utilization, developing and maintaining a provider network, engaging in quality assurance activities, billing the fiscal intermediary, and adjudicating provider claims.

For a list of HCBA Waiver Agencies, designated area of coverage, and contact information, please refer to the following HCBA Waiver Agency chart. The application for the HCBA Waiver can be found on the DHCS website: [HCBA Waiver Application](#).

Waiver Agency	Service Area
Access TLC 1-800-852-9887	Santa Barbara County, and sections of Los Angeles and Orange Counties (service area defined by zip codes)
Centers for Elders' Independence (510) 318-7375	Alameda and Contra Costa Counties
Home Health Care Management 1-800-400-0727 OR (530) 343-0727	Butte, Glenn, Sacramento, San Joaquin, Shasta, Solano, Sutter, Tehama, Yolo, Yuba, Colusa, Del Norte, El Dorado, Humboldt, Lake, Lassen, Modoc, Nevada, Placer, Plumas, Sierra, Siskiyou, and Trinity Counties
Institute on Aging (415) 750-4111	San Francisco, San Mateo, San Bernardino, and Riverside Counties
Libertana Home Health 1-800-750-1444 OR (818) 902-5000	Kern, Fresno, Kings, Tulare, Madera, Mariposa, Merced, Stanislaus, Tuolumne, San Luis Obispo, Amador, Calaveras, Santa Clara, Santa Cruz, San Benito, Monterey, and sections of Los Angeles and Orange Counties (service area defined by zip codes)
Partners in Care 1-800-251-6764	Sections of Los Angeles County (service area defined by zip codes)
San Ysidro Health (833) 503-5910	San Diego County

Sonoma County Human Services Department (707) 565-5900	Sonoma County
Ventura County Agency on Aging (805) 477-7300	Ventura County

The following seven counties are not currently covered by a HCBA Waiver Agency: Alpine, Imperial, Inyo, Marin, Mendocino, Mono, and Napa. For these areas, DHCS is responsible for the HCBA Waiver administration functions and applications should be submitted to the Integrated Systems of Care Division at CareManagement@dhcs.ca.gov.

For more information, please refer to the [DHCS HCBA Waiver Webpage](#).

If you have questions regarding this letter, please contact the DHCS Integrated Systems of Care Division at HCBAalternatives@dhcs.ca.gov and include the name and number of this letter in the subject line.

Sincerely,

Original Document Signed By

DEBBI THOMSON,
Deputy Director
Adult Program Division