

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

May 2, 2022

Jacey Cooper, Medicaid Director
California Department of Health Care Services
P.O. Box 997413, MS 0000
Sacramento, CA 95899-7413

RE: §1915 (c) Waiver 0141.R06.08 Multipurpose Senior Services Program Amendment

Dear Ms. Cooper:

The Centers for Medicare & Medicaid Services (CMS) is approving your request to amend the 1915(c) Multipurpose Senior Service Program for individuals 65 years of age and older and who require nursing facility level of care. The CMS Control Number for the amendment is 0141.R06.08. Please use this number in future correspondence relevant to this waiver action.

With this amendment, the state is removing managed care 1115 services from those counties initially carved out effective December 31, 2021, and the rate methodology will change back to Fee-for-Service. Additionally, this amendment will increase Factor C and point-in-time limits for Waiver Year 3 in accordance with the State Governor's Budget. The waiver continues to be cost-neutral and the average per capita cost of waiver services estimates (Appendix J.1) have been approved. The effective date of the amendment is May 2, 2022.

This approval is subject to your agreement to serve no more individuals than the total number of unduplicated participants indicated in Appendix J.2 of the waiver. If the state wishes to serve more individuals or make any other alterations to this waiver, an amendment must be submitted for approval.

It is important to note that CMS approval of this waiver amendment solely addresses the state's compliance with the applicable Medicaid authorities. CMS approval does not address the state's independent and separate obligations under federal laws including, but not limited to, the Americans with Disabilities Act, Section 504 of the Rehabilitation Act, or the Supreme Court's Olmstead decision. Guidance from the Department of Justice concerning compliance with the Americans with Disabilities Act and the Olmstead decision is available at http://www.ada.gov/olmstead/q&a_olmstead.htm.

CMS reminds the state that the state must have an approved spending plan in order to use the money realized from section 9817 of the American Rescue Plan (ARP). Approval of this action does not constitute approval of the state's spending plan.

Thank you for your cooperation during the review process. If you have any questions concerning this information, please contact me at (410) 786-7561. You may also contact Kathleen Creggett at Kathleen.Creggett@cms.hhs.gov or (415) 744-3656.

Sincerely,

ORIGINAL SIGNED BY

George P. Failla, Jr., Director
Division of HCBS Operations and Oversight

cc: Cheryl Young, CMCS, CMS
Deanna Clark, CMCS, CMS
Cynthia Nanes, CMCS, CMS