



Medicaid and CHIP Operations Group

February 16, 2023

Jacey Cooper, Medicaid Director
Department of Health Care Services
1501 Capitol Ave
PO Box 997413, MS 0000
Sacramento, CA 95899-7413

RE: Medi-Cal Waiver Program (MCWP) CA-0183.R06.00 Renewal

Dear Ms. Cooper:

The Centers for Medicare & Medicaid Services (CMS) is approving the state's request to renew Medi-Cal Waiver Program for the aged & disabled population with human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS). The CMS Control Number for the renewal is CA-0183.R06.00 and should be referenced on all future correspondence relating to this waiver renewal. The waiver has been approved for a five-year period with an effective date of January 1, 2023.

This waiver will offer the following supports for waiver participants: enhanced case management, homemaker, skilled nursing-licensed vocational nurse, skilled nursing-registered nurse, attendant care, home-delivered meals/nutritional supplements, Medi-Cal supplements for infants and children in foster care, minor physical adaptations to the home, non-medical transportation, nutritional counseling, psychotherapy and specialized medical equipment and supplies. The following number of unduplicated recipients and estimates of average per capita cost of waiver services have been approved:

<u>Waiver Year</u>	<u>C Factor Estimates</u>	<u>D Factor Estimates</u>	<u>D' Factor Estimates</u>	<u>G Factor Estimates</u>	<u>G' Factor Estimates</u>
Year 1	1948	\$4405.95	\$26158.00	\$108838.00	\$29511.00
Year 2	1948	\$4579.87	\$25556.00	\$113115.00	\$29511.00
Year 3	1948	\$4765.27	\$24968.00	\$117561.00	\$29511.00
Year 4	1948	\$4959.73	\$24394.00	\$122181.00	\$29511.00
Year 5	1948	\$5153.51	\$23833.00	\$126983.00	\$29511.00

This approval is subject to your agreement to serve no more individuals than those indicated in "C Factor Estimates" shown in the table above. If the state wishes to serve more individuals or make any other alterations to this waiver, an amendment must be submitted for approval. The

state may renew the waiver at the end of the five-year period by providing evidence and documentation of satisfactory performance and oversight.

It is important to note that CMS approval of this waiver 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 Lisa Amaro-Rife at Lisa.Amaro-Rife@cms.hhs.gov or (214) 767-2506.

Sincerely,

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

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