

ASSEMBLY BILL

No. 1518

**Introduced by Committee on Aging and Long-Term Care (Assembly
Members Brown (Chair), Gipson, Levine, and Lopez)**

March 10, 2015

An act to amend Section 14132.99 of the Welfare and Institutions Code, relating to Medi-Cal.

LEGISLATIVE COUNSEL'S DIGEST

AB 1518, as introduced, Committee on Aging and Long-Term Care. Medi-Cal: nursing facilities.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal Medicaid Program provisions. Existing federal law authorizes the state to obtain waivers for home and community-based services. Existing law authorizes the department to seek an increase in the scope of these waivers, in order to enable additional nursing facility residents to transition into the community, subject to implementation of these amended waivers upon obtaining federal financial participation, and to the extent it can demonstrate fiscal neutrality within the overall department budget.

This bill would make a technical, nonsubstantive change to those provisions.

Vote: majority. Appropriation: no. Fiscal committee: no.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. Section 14132.99 of the Welfare and Institutions
2 Code, as added by Section 3 of Chapter 551 of the Statutes of
3 2005, is amended to read:

4 14132.99. (a) For the purposes of this section, “facility
5 residents” means individuals who are currently residing in a nursing
6 facility and whose care is paid for by Medi-Cal either with or
7 without a share of cost. The term “facility residents” also includes
8 individuals who are hospitalized and who are or will be waiting
9 for transfer to a nursing facility.

10 (b) An additional 500 slots beyond those currently authorized
11 for the home- and community-based Level A/B nursing facility
12 waiver shall be added and 250 of these slots shall be reserved for
13 residents residing in facilities and transitioning out of facilities.

14 (c) For those patients who are in acute care hospitals and who
15 are pending placement in a nursing facility, the department shall
16 expedite the processing of waiver applications ~~in order to divert~~
17 ~~hospital discharges from nursing facilities into the community. so~~
18 *that upon discharge those patients are diverted into the community*
19 *rather than into nursing facilities.*

20 (d) The nursing facility Level A/B waivers shall be amended
21 to add the following services:

22 (1) One-time community transition services as defined and
23 allowed by the federal Centers for Medicare and Medicaid Services,
24 including, but not limited to, security deposits that are required to
25 obtain a lease on an apartment or home, essential furnishings, and
26 moving expenses required to occupy and use a community
27 domicile, set-up ~~fees, fees~~ or deposits for utility or service access,
28 including, but not limited to, telephone, electricity, and heating,
29 and health and safety assurances, including, but not limited to, pest
30 eradication, allergen control, or one-time cleaning prior to
31 occupancy. These costs shall not exceed five thousand dollars
32 (\$5,000).

33 (2) Habilitation services, as defined in Section 1915(c)(5) of
34 the federal Social Security Act (42 U.S.C. Sec. 1396n(c)(5)), and
35 in attachment 3-d to the July 25, 2003, State Medicaid Directors
36 Letter re Olmstead Update No. 3, to mean services designed to
37 assist individuals in acquiring, retaining, and improving the

1 self-help, socialization, and adaptive skills necessary to reside
2 successfully in home- and community-based settings.

3 (e) When requesting the renewal of the waiver, the department
4 shall consider expanding the number of waiver slots. Prior to
5 submission of the waiver renewal request, the department shall
6 notify the appropriate fiscal and policy committees of the
7 Legislature of the number of waiver slots included in the waiver
8 renewal request along with supportive data for those slots.

9 (f) The department shall implement this section only to the
10 extent it can demonstrate fiscal neutrality within the overall
11 department budget, and federal fiscal neutrality as required under
12 the terms of the federal waiver, and only if the department has
13 obtained the necessary approvals and receives federal financial
14 participation from the federal Centers for Medicare and Medicaid
15 Services. Contingent upon federal approval of the waiver
16 expansion, implementation shall commence within six months of
17 the department receiving authorization for the necessary resources
18 to provide the services to additional waiver participants.