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Free Webinar: Medi-Cal Asset Limit Elimination: What Advocates Need to Know

Webinar Transcript

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Tiffany Huyenh-Cho: Hello, everyone, and thank you for joining. We will start in a minute, just letting everyone file in. Okay. Great. Well, hello, everyone, and welcome to today's webinar. Thank you for joining. Our webinar today is the Medi-Cal Asset Elimination: What Advocates Need to Know. My name is Tiffany Huyenh-Cho, and I work at Justice and Aging. I am joined by David Kane, a senior staff attorney at Western Center on Law and Poverty. Justice and Aging is a non-profit law firm. We are a national organization that uses the power of law to fight senior poverty by securing access to affordable healthcare, economic security, and the courts, for older adults with limited resources. We've been around since 1972 and have focused our efforts, primarily fighting for people who have been marginalized and excluded from justice such as women, people of color, LGBTQ+ individuals, and people with limited English proficiency. I'll turn it over to David to let him introduce himself.

David Kane: Thanks, Tiffany. Hi, everybody. At the Western Center on Law and Poverty, we sponsored the state legislation that led to this great improvement to eliminate the asset limits in the Medi-Cal program. We do that as part of our work in the courts, cities and counties, and the state capital, fighting for housing, healthcare, and a strong safety net for everybody in California who has a low income. We recognize institutionalized racism as being a barrier. We call it out, and we address it in all aspects of our work, including in this, eliminating the asset limit test because it is, and was, part of institutionalized racism in the Medi-Cal program.

Tiffany Huyenh-Cho: Thanks, David. So first, some general housekeeping before we get started. Attendees are all on mute. You can use the question and answer function for substantive concerns and technical concerns, as well as questions. If you have problems getting onto the webinar, please email trainings@justiceandaging.org. You can also find materials and past trainings by searching our resource library on Justice and Aging website. A recording will be posted, of this webinar, today, on our Vimeo page at the conclusion of the presentation. You can also find the PowerPoint on the Justice and Aging webpage, as well. If you want to enable Closed Captionings, you can select the CC button on the Zoom control panel.

Well, great. So, we'll get started. Today's agenda, we will cover quite a bit. We will discuss assets and Medi-Cal today and how assets apply in the Medi-Cal program. We'll also discuss the upcoming asset elimination next month. It will also discuss how the asset elimination affects other Medi-Cal rules that are in place, and we'll cover a few frequently asked questions. Then, lastly, leave some time at the end for questions and answers from all of you. I'll note that our webinar, today, is a more general webinar. There is a lot of moving pieces with the asset elimination, so we could not cover a lot of detailed information, but we do have links and resources in most of our slides that provide a lot of the very specific information that some of you might be seeking.

All right. First, so just as a refresher, the Medi-Cal program is based on financial need and eligibility for Medi-Cal coverage does depend on meeting specific income and asset limits. Historically, older adults and people with disabilities must have assets below a certain amount to qualify for Medi-Cal benefits. Assets are also often referred to as resources, can be cash on hand, money stored in a checking or savings account, a second vehicle, for example. These asset limits apply only to older adults over age 65, persons with disabilities, and those in long-term care, today. Unlike younger populations in the Expansion Medi-Cal programs created under the Affordable Care Act, older adults and people with disabilities, today, must still demonstrate they have both limited income and assets to qualify for Medi-Cal coverage.

Like David said, a group of organizations worked to eliminate the asset limit, and it occurred in two phases. So just last year in July 2022, the asset limit was raised from $2,000 for a single person to $130,000. The increase in asset limits was a significant and monumental change that we're very excited about. Asset limits force individuals to live in deep poverty without the ability to save, the ability to save for retirement, for their future, or even for a security deposit. So, this is a significant change. It will make a difference in the lives of thousands of people on Medi-Cal, today, and those that are interested in applying for Medi-Cal, as well.

Next month, the asset limits will be eliminated altogether. So, this means that, except in limited circumstances, assets are no longer counted for financial eligibility for Medi-Cal. The only financial criteria considered will be income, after 2024. This will apply for both applications for Medi-Cal, and also at annual renewals. People will no longer need to prove, or verify, their asset information. Counties no longer can require people to verify their assets by producing written documentation, or chasing down statements and balances.

As many of you already know, the state resumed annual Medi-Cal renewals earlier this year, after a three-year pause due to the COVID public health emergency. That meant negative actions and terminations of Medi-Cal benefits were paused during the pandemic. Medi-Cal renewals were restarted earlier this year. That period of time is called the unwinding. I'm sure you've heard quite a bit about it. It is a 14-month period that runs from June, well, April 2023 to May 2024, with June 2023 being the first month that renewals were due. California has implemented multiple flexibilities to simplify and improve the renewal process during the unwinding and some of them affect assets today.

What that means is that during this renewal period in 2023, there are no asset limits. In anticipation of the upcoming asset elimination, people do not have to report, or prove, their assets during their Medi-Cal renewal. Medi-Cal renewals will simply not count assets.

California decided to waive asset information being required to produce during the renewal process in order to reduce churn for those who may be over-asset and avoid the need to re-enroll in Medi-Cal in 2024. This means that on renewal packets, or information that is being requested, asset information can be left blank.

Individuals do not need to report their assets, their bank account balances, and the county should also not be asking people to supply additional written proof about bank accounts, or retirements, or property, etc. So, if a person did not report their asset information, or provide written documentation during their renewal, the county cannot come back and ask that person for additional verification. This will simplify the renewal process significantly and help people stay on Medi-Cal.

So, first example, Renato's renewal is due in December 2023. Before COVID, he kept his bank account below $2,000. That was the asset limit at that time. Since then, he's inherited $150,000 that he keeps in a savings account. So, what should Renato do when he renews in December? Renato can ignore the asset section of his renewal and leave it blank. If he does choose to report his assets, the county must ignore that information. So even if he reports that $150,000, the county cannot take that information and take any negative action against him. This does put Renato over the current asset limit of 130,000, but again, during renewals, any increase in assets are not to affect someone's Medi-Cal benefits. So, Renato can remain on Medi-Cal, today.

So, while assets do not apply for renewals in 2023, do want to make it clear that for new applications for Medi-Cal, there is still an asset limit. So, anyone newly applying for Medi-Cal coverage will be subject to the asset test. They must demonstrate they are below the current asset limits that are in place, again, 130,000 for a single person and 195,000 for a couple. Those with additional household members may be able to have an additional 65,000. If you are over the current asset limits today, you can still apply for Medi-Cal in December. The counties will review that application for January eligibility once the asset limit is eliminated. So, although someone may not get Medi-Cal benefits for December

2023 because they're over assets, the county can start coverage for January 2024 once assets are no longer counted. So, one good tip would be to apply today just to get coverage started on January 2024.

So, another example, Rebecca is 65. She is applying for the Non-MAGI, or Modified Adjusted Gross Income, Medi-Cal in November 2023, so just last month. She reported $175,000 in assets. The county denies her Medi-Cal application because she is over the limit of 130,000 as a single person. So, what should she do? Rebecca should reapply in December, this month. Counties will take that December application and if they are ineligible because of their assets, they can automatically assess for January eligibility. So, Rebecca should also soon be getting a notice letting her know that her coverage will start in January. So with that, I'll turn it over to David.

David Kane: Tiffany, here's the good news on one slide. Finally, we get to say goodbye to Medi-Cal's asset limits. Starting next month, the asset limits in Medi-Cal are gone. That means that when you're looking at financial eligibility for Medi-Cal, you are only looking at income. During this webinar, we are primarily talking about, though, how the asset limits are going away. We will talk about general highlights, about how the income counting rules of Medi-Cal related to assets might still be important. When we think about this, we should remember that none of those income counting rules have changed, or are changing, because the asset limits are changing. The income counting rules remain the same. Next slide.

So, there are questions, already, that we're getting about, "Who is impacted by this? Who is in this group of Non-MAGI Medi-Cal, Non-Modified Adjusted Gross Income?" It's these programs that you see on this slide. You might know them as the Aged, Blind, and Disabled Federal Poverty Level program, or the Medically Needy program, Share of Cost Medi-Cal, Long-term Care, the 250% Working Disabled Program, Medicare Savings Programs, all of them, the Multipurpose Senior Services program (MSSP), Medically Indigent, the Supplemental Security Income (SSI) Deemed Income Groups: Pickle, Disabled adult Child, Disabled adult Widower, and all other groups. Too many, we could list on one slide. You can find the full list in this All County Welfare Director's Letter 22-25. Next slide.

So, let's look at this example. Rebecca has worked all of her life and has saved about $250,000 in her savings account. She's going to retire next year, in March, and she plans to apply for Medi-Cal. Under these new rules, Medi-Cal cannot count her assets. They are not countable, at all. So that retirement account, nothing... Oops. Sorry. That savings account, nothing to worry about. It will not count against Rebecca's Medi-Cal application. Next slide.

So, let's talk a little bit about when assets still matter. They matter, not ever anymore, to be counted as property. They only matter when they might generate some income, that would count when Medi-Cal is determining eligibility based on income. Important to remember that any underlying asset value is not counted as an asset.

Now, we'll go over some of the details about where assets might matter because the income that results from them could count as income. Next slide, please.

Interest and Dividends. People may have certain types of assets that do not count anymore, but those assets generate some interest and dividend payments that people receive. Those payments may be countable income, but it depends on the type of account that they come from. All of the details are in this All County Welfare Director's Letter listed on this slide. Important to remember that the underlying asset that generates the interest in dividends does not count. There have been no changes in the income counting rules for interests and dividends. So if you are familiar with those, they remain the same. Earlier rules, before the asset elimination, depended largely on a All County Letter from 2005. It hinged on whether the underlying asset was countable, or exempt. Now that all assets are exempt, do not count. The department confirmed and clarified the interest and dividend rules in this All County Letter, so check it out for details. Next slide, please.

Next, we're going to talk about annuities and retirement plans on slide number 19. Thanks. With annuities, important to remember that the balance does not count as an asset. Only payments received may count as unearned income. You no longer have to receive periodic payments from an annuity. That rule is not relevant and does not apply anymore, but any payments received may still be countable unearned income. For retirement plans, such as IRAs and pensions and other retirement plans, again, please remember that the balance of those does not count as an asset, but certain distributions received may count as unearned income. The details are in this All County Letter on this slide.

Next, we'll talk about rental property, which is on the next slide. If somebody has rental property, the value of that rental property does not count as an asset. Only the net income received counts as income, under the same rules that have always applied to whether the net income from rental property counts for Medi-Cal eligibility. So, that involves the same subtractions and allowable deductions for rental property that have existed in the Medi-Cal program for years, like taxes, insurance, utilities, upkeep, and other repair costs for rental property. There's a tip here, on this slide, that we think is pretty important. For all of these complicated situations where you do not count the value of the asset for Medi-Cal anymore, but you may need to report any countable income that comes out of those assets for Medi-Cal, help to leave the department clarify how people can prove that income.

Now, you can prove that income by a sworn statement. You submit a statement to the county that says, "This is the income that I receive from the asset, how often I receive it." You sign it either on paper, online, or with your voice over the phone, saying that it is true. That is enough to prove any income from these types of assets that might be counted. Before, you would have to track down bank statements, other proofs, in paper, of that type of income. But now, this sworn statement is always available, which is a great improvement.

So, let's look at the next slide for another example. We're back with Renato who applies for Medi-Cal and has a $250,000 Individual Retirement Account, or IRA. He receives monthly distributions from a state annuity for certain veterans. What counts as income, or assets? Well, first, easy, assets. Nothing counts as assets anymore. So that $250,000 IRA doesn't count as an asset, nor does the balance of his state annuity that he has. But, any distributions from the IRA count as unearned income under the existing and continuing income counting rules for Medi-Cal. Fortunately, though, Renato's state annuity distributions are one of the special types of interest and dividend income that do not count as income. So anytime there is any interest or dividend income, it's good to look at the All County Welfare Director's Letter, that we included on slide 18, that lists all the different kinds of income and whether they count, or do not count. Here, state annuity distributions do not count as income, which is great for Renato. So, back to you, Tiffany.

Tiffany Huyenh-Cho: All right. Thank you, David. So, Trusts. Like David's section is covering, there are some rules where some assets may still matter, but as income. So Trusts, in 2024, may still matter in some circumstances. In general, the principal, or balance, of a trust will not be counted after asset elimination because assets are no longer a factor in eligibility. However, payments made from a trust to an individual is counted as unearned income. There are several different types of trusts that might be available to a person such as a third-party trust, revocable and irrevocable trust. So, there's quite a bit of variation amongst all of these trusts. The interest derived from trust balances may also be treated as income. So, we won't get into the specifics during this webinar, but you can find more detailed information in the County Guidance 23-22E, linked on the slide. As David mentioned earlier, a tip is that if someone has difficulty obtaining written proof because it is unavailable, the counties can accept sworn statements, or affidavits, instead of written documentation. They can be made by phone, online, during application or renewal.

So generally, transferring, or giving away assets or resources without receiving anything in exchange, can result in a period of ineligibility for Medi-Cal funded long-term care. If a person is seeking Medi-Cal coverage for a long-term care state, the state will review a person's assets and bank account statements to determine if someone transferred, or gifted, countable assets to a third party, other than their spouse or permanently disabled child. This period is called the look-back period, and it's a period of 30 months. The look-back period determines whether a person gifted, or transferred, countable assets that could have been used to pay for long-term care. If someone transferred non-exempt assets during this look-back period, it may result in a period of ineligibility for Medi-Cal covered long-term care. So, these transfer penalties exist today. After

2024, California will still apply a look-back period to determine if any transfer of assets were made by someone entering long-term care. Even after the asset elimination, the transfer penalties can apply, but how they are applied will be dependent on when that initial transfer was made.

So, there is no penalty for any transfers made on, or after, January 1st, 2024, but penalties can apply if a transfer was made before January 1st, 2024. So in 2024, the look-back period that is taken into account will not look at any months in 2024. The length of the look-back period will also steadily decrease each month that passes after January 2024 and eventually expire mid-2026. So, for any person that enters a long-term care facility in 2024, the look-back period can only extend at the most back to, depending on when the transfer is made, July 2021 through December 2023. But again, the length of the look-back period really is dependent on a variety of factors and when that person is entering that facility.

So, here's an example. Rebecca applies for Long-Term Care Medi-Cal in March 2024. The look-back period for Rebecca is only 28 months, instead of 30 months. That is because, again, any months in 2024 are not counted. So, the look-back period is not going to take into account the months of February and January 2024. March is the month of her initial entry into long-term care, so that is also not counted. Her look-back period is September 2021 to December 2023. Those are the only months which the county can review to see if Rebecca made any disqualifying transfer of assets during this period of time.

So, Spousal Impoverishment Rules. Spousal impoverishment will also be affected by the asset elimination. These are rules that help married couples retain income, or assets, when one spouse enters an institutional setting, such as a skilled nursing facility. The person that enters the institutional setting is called the institutionalized spouse. The spouse that remains in the community, at home, is the community spouse.

These rules are meant to help the community spouse, that still remains at home and in the community, not impoverish themselves because their spouse is entering an institutional setting. Their income and assets may be used to pay for their long-term care.

The spouse entering the institution can allocate a certain amount of their income and assets to their community spouse for their use, up to a certain amount. Today, in 2023, that community spouse resource allocation is $148,620. That means in 2023, the spouse entering the institution can allocate up to that $148,620 in resources to their spouse.

After 2024, once the asset elimination takes place, this community spouse resource allocation no longer applies. There is no limit on how much a spouse entering the institution can allocate to the community spouse.

So, this is a significant change. It will help the community spouse, that remains at home, still maintain upkeep of home, rent, and other expenses, now that their spouse has entered an institutional setting.

I'll note that the Spousal Impoverishment Rules for income still does apply. Again, this really only touches on the asset allocation. You can find more specific details, as well, in the county guidance that we linked on the slide.

So, Estate Recovery. Estate Recovery is a requirement that's set by the federal government. It is the process by which Medi-Cal can bill a deceased person's estate to recover costs the Medi-Cal program made on their behalf. Estate Recovery is unchanged by the asset elimination, meaning it's in effect today and will continue unchanged after January 2024. However, I think it's important to know there are significant limits on which individuals, and for which services, the Department of Healthcare Services, the Medi-Cal agency, can seek Estate Recovery.

I want to be clear that Estate Recovery does not apply to every Medi-Cal individual, and it only applies in limited circumstances. So, while California is required to practice Estate Recovery by the federal government, its reach is limited. Medi-Cal Estate Recovery is limited to those who were 55 and older, or those who were permanently disabled and living in institutional care, like a skilled nursing facility. Any Estate Recovery that can be claimed against those specific set of individuals is limited to Medi-Cal payments made for nursing home care and/or Home and Community-Based Services, and any related care that was made while a person was in the nursing home, or receiving Home and Community-Based Services.

Home and Community-Based Services can include 1915(c) waivers, such as the assisted living waiver. In-Home Supportive Services, or IHSS, is not subject to Estate Recovery. So while Estate Recovery is still going to be in practice after the asset elimination, again, its reach is still limited. Counties should not be asking about assets for Estate Recovery purposes.

And of course, there are exceptions to Estate Recovery. Even if someone might be subject to Estate Recovery, exceptions apply. California can only seek to recover assets that are subject to California Probate Law. Claims are also barred if a person is survived by a spouse, or registered domestic partner, or if they have a disabled child of any age, or a minor child under the age of 21. And of course, there's also hardship waivers that someone might apply for. So, this is a complicated topic. There isn't a one size all advice, so would encourage folks to contact CANHR's resource that we linked on the, slide. It's a very comprehensive guide. There's also the County MEDIL 23-29 that also provides more detailed instruction on Estate Recovery. And with that, turn it back over to David.

David Kane: Another complicated aspect of the Medi-Cal asset elimination involves overpayments. If you have not heard of this, that is a good thing. I hope it doesn't come up very much in your world. Sometimes it does come up when the Medi-Cal program identifies that they think somebody with Medi-Cal failed to report some information, like failed to report income, failed to report assets that they have. This is how they characterize it. With the elimination of the Medi-Cal asset limit, no longer will there be these types of issues for failure to report assets, or property. Because there are no limits, you don't have to report it. So, Medi-Cal won't be going after anybody, or an alleged failure to report assets or property information, but none of the other overpayment rules are changing.

So, where this rarely happens for failure to report income, the counties in the state may continue to investigate that because we still do have income rules in the Medi-Cal program. Also, if there was any month of eligibility of Medi-Cal this year, before next year, where they think that a failure to report assets or property would've impacted eligibility in that month in 2023 or earlier, they can continue to look into that, even next year. But if it concerns any month of eligibility starting in January, they cannot pursue any kind of overpayment investigation, or referral based on a failure to report assets. The complicated details on that are in this All County Letter 23-17 on this slide. So, please check it out for more information. Next slide, please.

So, Low Income Subsidy or Extra Help. This is here as just a quick reminder that this program is a federal program that helps people to lower their Medicare prescription drug costs. It has its own eligibility rules, including its own property and asset limits, that are not changed by Medi-Cal's Asset Limit Elimination. Those rules are listed at the bottom of this slide. You can look them up. The good news is that this should not matter for most people who have Medi-Cal because when you have full scope Medi-Cal, you are automatically eligible for extra help and the low income subsidy. So, when you qualify for Medi-Cal, regardless of assets with no asset limit, you will get the extra help and the low income subsidy. This applies also to people who enroll in Medicare Savings programs and people who have SSI. Next slide, please.

So now, we'll go over some frequently asked questions that we hope answer some questions that you might be having. First is, "Will Medi-Cal's income limits change?" No. Unfortunately, they are not changing in any drastic way and great way, such as the asset limits are in going away, but they do go up every year. We don't yet know what the limits are for next year. Those will be released early next year, and we'll have a better idea of how much they're going up.

Next question is, "Does this apply to CalFresh, CalWORKs, or SSI?" This asset limited elimination is only for Medi-Cal's eligibility rules. But, keep in mind that people who have CalWORKs, or SSI, automatically receive Medi-Cal linked to their CalWORKs, or SSI, benefits. They meet those programs' eligibility rules to qualify. So, those rules are not changing by this Medi-Cal rule chain. However, if somebody loses their CalWORKs, or their SSI, they should be evaluated for

Medi-Cal under the rules that have no asset limit. CalFresh already doesn't consider property and assets in almost every situation.

Next question is about, "What happens to Medi-Cal's share of cost?" Well, the same rules for the asset elimination, they apply to people who have Share of Cost Medi-Cal. So, people who have Share of Cost Medi-Cal will not have an asset limit anymore. Another piece of good news is that we're looking forward to the Share of Cost calculation changing in a great way in January 2025, so that Share of Cost will no longer be so high for people. There will no longer be a cliff once you get over the limit for Medi-Cal and you end up with the 700, $800, or more, monthly Share of Cost. The change that is coming is that for every dollar that you're over the Medi-Cal limit, that is the amount of your Share of Cost. So, Share of Cost amount should be going down significantly starting in January 2025. This is subject to there being sufficient financial support in the state budget. Advocates are pushing to make sure that that support is there to implement this on time in January 2025. Next slide, please.

The next slide is about, "What happens if people are denied Medi-Cal now, before the asset limits are eliminated next year?" There could be people who have applied for Medi-Cal, or renewed their Medi-Cal, before there was the waiver of the asset limits in the Medi-Cal renewals. Anybody who was denied, or discontinued, for Medi-Cal in the last six months of this year, they will be sent a letter that tells them that the asset limits are going up. Sorry. Have been discontinued, and now they can reapply for Medi-Cal next year and get their Medi-Cal regardless of any assets that they have. The letters for this group of people will start to go out in February of next year. It's anybody who was denied, or discontinued, because they were over assets between July and December of this year. Next slide, please.

Medi-Cal is going to update a bunch of forms. When the asset limits go away, there have to be a bunch of changes because those asset limits are all over the place, including in these forms that are on this slide.

There are going to be great improvements to some of these mailers and notices that you might see on a regular basis, like the Standards for Medi-Cal Eligibility, known as the 7077 form. That is being updated. The application for Medicare Savings Programs is also being overhauled and updated in a great way. The Non-MAGI Medi-Cal information sheet that notifies people about what this Medi-Cal category is, also being updated and improved significantly. We're also going to see changes that will start in January, including the renewal forms for Medi-Cal will no longer even ask anybody about assets, or property. They're just taking out those pages from the renewal packets. That Additional Household Information Needed form, the MC 604, will no longer be used because they don't need to ask for asset and property information. There's a Non-MAGI Informing Notice that told people about the asset limits. That's going away, as well, so you won't see it anymore. There is a Medi-Cal Eligibility and Estate Recovery Standards Document that also will be updated, so that will also have the updated Medi-Cal Asset Rules very soon. More details are on the DHCS Forms website. Next slide, please.

There are some great resources that are out there. There is a Department Medi-Cal Asset Limit Elimination website. There, you can find all kinds of useful resources to check out. Here's a link. It's good to share that around so that people know that this is happening. The state has also developed Medi-Cal Asset Elimination Outreach materials in 19 threshold languages. It includes flyers, social media graphics, talking points, frequently asked questions, and a bunch of other good stuff. You can check it out there, at the link that is in the chat. All right. I think we're on to questions, Tiffany.

Tiffany Huyenh-Cho: All right. Thank you, David. So, we have several questions in the Q&A. We do have quite a bit of time, so that's great. I'll start with one that came up a couple of times about MAGI Medi-Cal. That was an acronym that we used earlier. MAGI stands for Modified Adjusted Gross Income. MAGI is a income counting methodology. It's really based on the tax code. It is a type of income counting that is only applicable to the younger populations on Medi-Cal. It's not applicable to the Medi-Cal programs that mostly serve older adults and people with disabilities. So, the Non-MAGI programs are the Medi-Cal categories we're discussing today, where the asset limit will be eliminated. That is because the MAGI programs again, Modified Adjusted Gross Income, those are programs created under the Affordable Care Act, and they currently don't have an asset limit. So with the upcoming asset elimination next month, older adults that do not qualify for these MAGI programs will also have parity with these younger populations. There will be no asset test for both groups for older adults and people with disabilities, and the younger populations.

David Kane: And by the way, if you haven't already, you can input your questions into the Q&A, question and answer feature, here in Zoom. We will try to answer as many as we can, right now. The next question is, "If you apply for Medi-Cal, now, do you need to supply asset information?" Well, if you want Medi-Cal for the current month of December, or any of the retroactive months, you can get possibly three retroactive months if you apply this month, you will need to provide asset information for those months. Those are months when we still have the increased asset limits in the Medi-Cal program. But, if you are simply seeking Medi-Cal for January 2024, or later, the county should not deny eligibility for those months if you don't provide asset information. So in other words, it should not be required for eligibility for those months. Hope that helps.

Tiffany Huyenh-Cho: David, we have another question on, "Does the asset elimination impact QMB beneficiaries?" So, QMB is the Medi-Cal asset... Sorry. The Qualified Medicare Beneficiary program. I was trying to go back to the slide, but I think something got lost. Slide 15 does have the impacted Non-MAGI groups. So, Qualified Medicare Beneficiary is part of the Medicare savings program. This program will have asset limits also eliminated come January 2024.

David Kane: Next question is, "What about a second house, or a car, as assets?" Starting in January, don't worry about it. We don't have to count, as assets, any property like homes, houses, cars. Anything that we were concerned about, this year, as a countable asset is no longer a countable asset starting in January of next year.

Next question. And Tiffany, we see the CANHR website, just FYI. A great website. That's where you can find, all of you all, some information about the Medi-Cal Estate Recovery laws, and those sorts of things. So, did we say that SSI's asset limits are being eliminated? No. The SSI program still has its own rules. They're set by the federal government. They're different from Medi-Cal rules. This Medi-Cal change does not change SSI's eligibility rules.

Tiffany Huyenh-Cho: Thanks, David. I somehow clicked onto the CANHR site, so thank you for noting that. This, again, is the impacted Non-MAGI group slide that lists all of the impacted groups come 2024. Like David said, SSI is not part of the asset elimination because it is a separate program.

David Kane: I think the nuance here is, everybody who has SSI gets Medi-Cal by having SSI. So, somebody might still be keeping their SSI, meeting those requirements, different asset limits, to keep their SSI so that they can keep their Medi-Cal. If they can do that, that's a good thing to do. If, for whatever reason, their assets go above the SSI limits, or they are no longer eligible for SSI, they have a right to be evaluated for all other Medi-Cal programs, including Medi-Cal with no asset limit.

Tiffany Huyenh-Cho: There is another question about where to direct people for help. There is a lot of resources out there. A lot of groups and advocacy organizations are very excited about this change. One good one is always the Health Consumer Alliance. They are a network of legal aid programs throughout the state that have a hotline that does answer these type of questions. HICAPs are also aware of the change that is happening. We can put, in the chat, the link to the Health Consumer Alliance for more direct individual advice about how this might affect an individual person.

David Kane: The question here, is about, "Does this asset limit elimination apply to people ages 21 to 65 that are not disabled?" So, I think this question is asking about people who might already have Medi-Cal in a different eligibility category. MAGI, Modified Adjusted Gross Income, that program has not ever had an asset limit. So, this does not impact those rules. It only impacts the rules for the Non-MAGI group, which is available to people on this slide, generally people who have disabilities, if they're under the age of 65, and everybody who is age 65 and older, who has Medi-Cal.

The question here about those sworn statements, that you can use to prove income that might be countable from an asset that is excluded and doesn't count. How to prove that income? You have a new option to submit a sworn statement. It does not have to be notarized. That is not a requirement. So, you simply attest, or swear, that the information you are providing is true. You attach your signature and the county knows it's your signature, and that should be enough.

Tiffany Huyenh-Cho: See in the Q&A, we do have a lot of questions about income and recognize that that's a big part of the Medi-Cal eligibility equation. A lot of questions about what's happening to the income limits. Again, our webinar is focused on asset limits. Right now, income limits for the Medi-Cal programs, such as Age Disabled, is 138% of their federal poverty level, as well as for the Expansion Adult Medi-Cal categories. We understand that it's not a reasonable cost of living, especially in California and in our very high cost counties in the Bay Area, or Southern California. The income limits do increase a little bit each year because they are based on the federal poverty level. Right now, we don't know of, or at least I don't, David might, of other work to increase the income limits significantly. Understand, it's still a big piece. 138% is really not that much. I think it's about around $1,600 a month in gross income and realize that that's not a livable income for many people, especially in those very high cost of living areas.

David Kane: Another question here, is, "Does long-term care insurance still count as an asset?" No. I love these because I can just say no. That is an asset that may have counted before, but next year, it does not count because we do not count assets in 2024, and beyond.

Tiffany Huyenh-Cho: I see another question about Estate Recovery and whether it will still be around after 2024. And again, yes. Estate Recovery will still be in existence. It's required by the federal government, so it is unchanged by the asset elimination. However, as I covered earlier in the webinar, Estate Recovery does not apply to every person that's on Medi-Cal. It is very limited to who it reaches and the types of payments that the Medi-Cal program can recoup. So, it's not something that will affect every person.

David Kane: Another question here, is about applications for Medi-Cal. "New applications submitted this month, in December, will they automatically be considered for eligibility in January?" Yes. That is how it should work. So, apply now, this month, and you will be evaluated for Medi-Cal with no asset limit starting in January. If you want Medi-Cal eligibility this month, or any of the three earlier months, you will need to report some asset information and meet the current asset limits which were raised. Those are the limits you would have to meet for this year.

Tiffany Huyenh-Cho: I see another question in the chat about, "Applications filed in December would automatically be reconsidered for January. Is that true?" Applications filed in December, if a person is denied Medi-Cal for December 2023 because they are over the asset limit of 130,000 for a single person, yes. The county will automatically reconsider that person for January 2023. So even if that person was over asset in December, they won't be in January because assets don't matter. The county can provide, or grant, eligibility for January 2024 going forward.

David Kane: Someone's asking, "Do these Medi-Cal rules apply to all of the other state's Medicaid programs, or just in California?" Right now, we're talking only about Medi-Cal. These rules apply only in California. The asset elimination is for Medi-Cal, only in California.

Tiffany Huyenh-Cho: I see another question. "Will the Medi-Cal application forms be easier to complete in 2024 with the asset elimination?" Yes. That is one of the exciting pieces of the asset elimination. Not only does it allow people to save for retirement for their future, it will also simplify Medi-Cal applications and renewals. Counties will not need to ask about assets, or resources, because it will not be a factor. Folks won't need to chase down bank account statements, or burial trust, and things along those lines. So, it will make it easier for folks to demonstrate that they qualify for Medi-Cal because the counties will only be looking at income for financial eligibility purposes.

David Kane: Here's one about QMB. "Clarify how QMB is, or isn't, impacted." Qualified Medicare Beneficiary program, QMB. Good news. Qualified Medicare Beneficiary, QMB, is one of the Medicare savings programs. There is no longer an asset limit for QMB, or SLMB, or QI, or QWVI. All of the Medicare savings programs no longer have an asset limit, starting next year.

Tiffany Huyenh-Cho: There's another question about Estate Recovery. "To clarify, Estate Recovery does not apply to In-Home Supportive Services, or IHSS?" Correct. It does not.

Maybe, we can do one more question and let you all go. Thanks for your engagement.

David Kane: Here's one to help clarify. "Does this impact the scope of Medi-Cal coverage?" I would say no, unfortunately, or maybe in a good way. When you eliminate the asset limit, it means that anybody can qualify for Medi-Cal, regardless of assets. When they get that Medi-Cal, it is their full scope Medi-Cal that provides all of the Medi-Cal coverage services. Whereas before, if they were over asset, they would be denied Medi-Cal entirely.

Tiffany Huyenh-Cho: All right. Well, thank you, David, again, for joining and helping me present. This was a great webinar. I hope you all learned quite a bit and are just as excited as we are about the upcoming asset elimination. I know there's still some questions that we did not answer. We can review them and follow-up after, for ones that are appropriate. Again, thank you, all, for your time and for joining us today. Have a good one.