Hospital Presumptive Eligibility Program Asset Training

Department of Health Care Services



Coverage Group: Aged, Blind, or Disabled

Aged, Blind, or Disabled

- » This section covers Hospital Presumptive Eligibility applicants who are:
 - Aged 65 or older
 - Blind
 - Disabled
- » These statuses rely solely on applicant attestation, and no proof or verification of such status is required.

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Status	Social Security Administration Definition
Aged	Aged 65 or older
Blind	<u>Definition of statutorily blindness</u>
Disabled	 Has a medically determinable physical or mental impairment that: Prevents them from doing any substantial gainful activity (definition of substantial gainful activity), and Has lasted or is expected to last for a continuous period of at least 12 months, or is expected to result in death

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- » To be eligible for Hospital Presumptive Eligibility in the Aged, Blind, or Disabled coverage group, applicant must:
 - Be a California Resident.
 - Be within 138% of the federal poverty level for their household size.
 - Not currently have Medi-Cal.
 - Not received Presumptive Eligibility within the past 12 months.
 - Be within the asset limit for their household size.

Asset Limit

- » A new California law sets a limit on the total amount of assets (property) a person or family can have to qualify for Medi-Cal, including Hospital Presumptive Eligibility.
- » Starting January 1, 2026, California will count assets when determining eligibility for Hospital Presumptive Eligibility applicants whose eligibility is based on:
 - Being aged 65 or older.
 - Being blind.
 - Having a disability.

Asset Limit

- » Assets are things owned that have a monetary value.
- » Only some assets count toward the asset limit

Not Countable	Countable
Primary Home (where applicant lives)	Second Homes
Primary Vehicle	Second Vehicles
Household items (furniture, clothing, etc.)	Cash
Retirement funds (like IRAs), if applicant is receiving the Required Minimum Monthly Distribution or periodic payments of interest and principal	Bank Accounts

Asset Limit

What are the Asset Limits?

- » Asset Limits
 - \$130,000 for one person
 - Plus \$65,000 for each additional household member (up to 10 members total)

Household Size	Asset Limit
1	\$130,000
2	\$195,000
3	\$260,000
4	\$325,000
5	\$390,000
6	\$455,000
7	\$520,000
8	\$585,000
9	\$650,000
10	\$715,000

Aged, Blind, or Disabled

- » Until the Provider Portal is programmed with asset questions, providers will prescreen all Hospital Presumptive Eligibility applicants.
- » This involves verbally confirming Aged, Blind, or Disabled status and asking about asset information when applicable.

Aged, Blind, or Disabled

- » Below is the process:
 - Issue and collect the current Hospital Presumptive Eligibility paper application.
 - **Prior** to entering the application data for a determination in the portal, the provider will pre-screen the applicant by asking "Are you over age 65, blind, or disabled?"

Provider will ask the applicant: Are you over age 65, blind, or disabled?

» If yes:

- Provider explains what assets are and what counts.
- Provider obtains amount of total assets.
- Provider compares attested asset amount and household size to asset limit chart.
- Provider determines if applicant is asset eligible or not:
 - **Asset Eligible:** When pre-screened as asset eligible, provider proceeds with determination via the portal.
 - **Asset Ineligible**: When pre-screened as asset ineligible, provider prints and completes the asset denial template with the following details:
 - Date/time, National Provider Identifier (NPI), applicant name, applicant date of birth (DOB)

Provider will ask the applicant: Are you over age 65, blind, or disabled?

» If yes and asset ineligible:

- When pre-screened as asset ineligible, provider prints and completes the asset denial template with the following details:
 - Date/time, NPI, applicant name, applicant DOB

Provider will ask the applicant: Are you over age 65, blind, or disabled?

» If the applicant answers no:

- Provider does not ask about or collect asset information.
- Provider proceeds to enter the application data into the portal for a determination

- » The pre-screening process does not change other existing requirements.
- » Providers will follow all existing processes to:
 - Store verification in patient's case record.
 - Ensure applicants understand questions.
 - Explain outcome to applicant.
 - Provide applicants with copies of all documentation (i.e., application, approval/denial, etc.).

Resources

- » Asset Resources
 - Household Asset Limits for Non-Modified Adjusted Gross Income Programs as of January 1, 2026, chart located in Medi-Cal Eligibility Letter <u>ACWDL 25-14</u>
 - Medi-Cal Asset Limits Frequently Asked Questions Page and Help Center

Resources

Application Date/Time:

Provider Number:

Individual's Name:

Date of Birth:

Response: You are not eligible to Hospital Presumptive Eligibility because you are over the asset limit.

Questions? Email DHCSHospitalPE@dhcs.ca.gov

