

PROVIDER Update



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Respite Services: Provide Temporary Relief for Primary Caregivers

Support is available for caregivers of members

Respite services are available to caregivers of members who require intermittent temporary supervision. The services are provided on a short-term basis due to the absence or need for relief of the caregiver. These services are distinct from medical respite/recuperative care and provide rest for the caregiver only.

The service limit is up to 336 hours per calendar year. The service is inclusive of all in home and in-facility services. Exceptions to the limit of 336 hours per calendar can be made when the caregiver experiences an episode that leaves the member without their caregiver. Respite support provided during these episodes can be excluded from the 336 hour annual limit.

Eligibility and services

Members are eligible for caregiver respite services if they live in the community and are compromised in their Activities of Daily Living (ADLs) and dependent on a qualified caregiver who provides most of their support. Said caregiver requires caregiver relief to avoid institutional placement of the member.

Members may also qualify for caregiver respite services if they are:

- Children who previously were covered for respite services under the Pediatrics Palliative Care Waiver.
- Foster care program beneficiaries.
- Members enrolled in California Children's Services or Genetically Handicapped Persons Program (GHPP), and
- Members with complex care needs.

Services are provided to the member in his or her own home or another location being used as the home.

THIS UPDATE APPLIES TO MEDI-CAL PROVIDERS:

- Physicians
- Participating Physician Groups
- Hospitals
- Ancillary Providers
- Community Supports Providers
- Enhanced Care Management Providers

PROVIDER SERVICES

888-893-1569
www.healthnet.com

PROVIDER PORTAL

provider.healthnetcalifornia.com

Discover Helpful Tools to Support Your Office

Go to the Provider Library at providerlibrary.healthnetcalifornia.com to quickly access information to help you in your everyday interactions with our Plan. The library includes:

- Provider manuals
- Forms and References
- Education, Training and Other Materials
- Updates and letters
- Contacts
- Health Equity, Cultural and Linguistics Resources

Respite services should be made available when it is useful and necessary to maintain a person in their own home and to preempt caregiver burnout.

Billing service codes

Billing for respite services must use service codes **H0045**, **S5151**, or **S9125** with **modifier U6**.

Authorization Guide

For more information on Community Supports (CS) authorization guides and eligibility criteria, access the provider website at [Healthnet.com> Provider> CalAIM Resources> Forms & Tools](https://www.healthnet.com/Provider/CalAIM/CalAIM-Resources/Forms-Tools) under Community Supports (CS) Authorization Guides or www.healthnet.com/content/healthnet/en_us/providers/support/calaim-resources.html.

Additional information

Providers are encouraged to access the provider portal online at **provider.healthnetcalifornia.com** for real-time information, including eligibility verification, claims status, prior authorization status, plan summaries, and more.

If you have questions regarding the information contained in this update, contact CalViva Health at 888-893-1569.