

Authorization Guide for Respite Services

Respite Services provide short-term, non-medical care for members who need temporary supervision, giving caregivers time for rest or relief. The services are offered when the usual caregiver is absent or requires a break. Respite care is distinct from medical respite or recuperative care – it is solely intended to support the caregiver.

Program overview	
<p>Respite Services may include:</p> <ul style="list-style-type: none"> • Hourly care on an episodic basis during caregiver absence or need for relief. • Day or overnight care on a short-term basis. • Assistance with basic self-help needs and activities of daily living (ADLs), including interaction, socialization, and maintaining usual routines normally provided by the caregiver. <p>Service settings:</p> <ul style="list-style-type: none"> • Home Respite: Care in the member's home or a location used as their home. • Facility Respite: Care provided in an approved out-of-home location. 	
Required documentation	
<p>Respite Services (for Caregivers) Authorization Form, including:</p> <ul style="list-style-type: none"> • Member's needs. • Reason for caregiver absence. 	
Eligibility	
<p>Member must:</p> <ul style="list-style-type: none"> • Live in the community and depend on a qualified caregiver for most support. • Require caregiver relief to avoid institutional placement. <p>Additional eligible groups:</p> <ul style="list-style-type: none"> • Children previously covered under the Pediatrics Palliative Care Waiver. • Foster care program beneficiaries. • Members enrolled in California Children's Services or the Genetically Handicapped Persons Program (GHPP). • Members with complex care needs. 	
Authorization	
<p>Initial authorization: Hourly, based on the caregiver absence.</p> <p>Authorization extensions: Requires reassessment; authorization extensions remain hourly and vary by need.</p>	
Restrictions	State plan services to avoid
<ul style="list-style-type: none"> • Combined in-home and direct care services cannot exceed 24 hours per day. • Annual limit: 336 hours per calendar year (includes all in-home and facility services). 	<p>Respite services cannot replace or overlap with:</p> <ul style="list-style-type: none"> • Inpatient or outpatient hospital services.

- **Exceptions:** Additional hours may be authorized if the caregiver experiences a medical episode or hospitalization.
- Virtual or telehealth services are **not permitted**.

- Emergency department and transport services.
- Skilled nursing facility services.

Billing codes

- **S9125:** Respite care, in home, U6 (no prior authorization required effective December 1, 2025)
- **H0045:** Respite care not in the home, U6
- **S5151:** Unskilled respite care, not hospice, U6

Unit of service: Per diem

Provider types

Examples include, but are not limited to:

- Home health or respite agencies providing care in:
 - Private residence.
 - Approved residential facilities (e.g. congregate living health facilities (CLHFs).
 - Providers contracted by county behavioral health.
- Community settings such as:
 - Adult Family Home/Family Teaching Home
 - Certified Family Homes for Children
 - County Agencies
 - Residential Care Facility for the Elderly (RCFE)
 - Child Day Care Facility or Center
 - Family Child Care Home
 - Respite Facility
 - Foster Family Agency (FFA)-Certified Homes (Children Only)