PROVIDER *Update*



NEWS & ANNOUNCEMENTS

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2 PAGES

Housing Options for Members Through Community Transition Services/Nursing Facility Transition Services To a Home

Find out how to help Medi-Cal members transition from a skilled nursing facility to live at home

If you identify an individual who may need help transitioning from a nursing facility to a community setting, refer to the information in this update for eligibility requirements, coverage limits and the role of Community Supports providers.

Services and eligibility

Community Transition Services/Nursing Facility Transition to a Home are nonrecurring set-up expenses for individuals who are transitioning from a licensed facility to a living arrangement in a private residence where the person is directly responsible for his or her own living expenses.

Eligibility requirements include members who:

- Currently receive medically necessary nursing facility level of care (LOC) services and choose to transition to a home and continue to receive medically necessary nursing facility LOC services; and
- Lived 60+ days in a nursing home and/or medical respite setting; and
- Are interested in moving back to the community; and
- Are able to reside safely in the community with appropriate/cost-effective supports services.

Billing service code

Use service code T2038 U4 to bill for Community Transition Services/Nursing Facility Transition to a Home service.

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

THIS UPDATE APPLIES TO **CALIFORNIA PROVIDERS:**

- Physicians
- Participating Physician Groups
- Hospitals
- Ancillary Providers
- Community Supports (CS) Providers
- Enhanced Care Management (ECM)

LINES OF BUSINESS:

O IFP

- Ambetter HMO Ambetter PPO
- O Ambetter EPO O Full Network PPO
- O Ambetter HSP
- O Employer Group
 - O HMO/POS/HSP
 - O EPO
 - O PPO
- Medicare Advantage (HMO/PPO) (Wellcare By Health Net)
- Cal MediConnect (Los Angeles/San Diego)
- Medi-Cal
 - Kern
 - San Bernardino
 - Los Angeles
 - San Diego Molina • San Joaquin
 - Riverside
- Stanislaus
- Sacramento
- Tulare

PROVIDER SERVICES

800-675-6110

PROVIDER PORTAL

provider.healthnetcalifornia.com

PROVIDER COMMUNICATIONS

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Role of the Community Supports providers

Providers must:

- Have experience and expertise with providing housing-related services.
- Provide support in a culturally and linguistically appropriate manner.
- Use best practices in rendering the below services.
 - Nonrecurring setup expenses for members who are transitioning from a licensed facility to a living arrangement in a private residence where the person is directly responsible for their own living expenses.
 - Assessing the member's housing needs and presenting options.
 - Assisting in searching for and securing housing, including the completion of housing applications and securing required documentation (e.g., Social Security card, birth certificate, prior rental history).
 - Communicating with the landlord (if applicable) and coordinating the move.
 - Establishing procedures and contacts to retain housing.
 - Identifying, coordinating, securing, or funding non-emergency, nonmedical transportation to assist members' mobility to ensure reasonable accommodations and access to housing options prior to transition and on move-in day.
 - Identifying the need for and coordinating funding for environmental modifications to install necessary accommodations for accessibility.
 - Identifying the need for and coordinating funding for services and modifications necessary to enable a person to establish a basic household (funding that does not constitute room and board).

Community Supports authorization guides

Use the Community Supports authorization guides to help determine member eligibility for CS services. The guides are online at www.healthnet.com/providers/CalAIM, under Forms & Tools > Community Supports (CS) Authorization Guides.

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 the Health Net Medi-Cal Provider Services Center at 800-675-6110.