

## 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 non-recurring 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 [cahealthwellness.com/providers](https://cahealthwellness.com/providers) to quickly access information to help you in your everyday interactions with California Health & Wellness Plan. The site includes:

- The Provider manual
- Provider Pulse newsletters
- Health Equity, Cultural and Linguistics Resources
- Provider News
- Education, Training and Other Materials
- And more!

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#### THIS UPDATE APPLIES TO:

- Physicians
- Independent Practice Associations
- Hospitals
- Ancillary Providers
- Community Supports (CS) Providers
- Enhanced Care Management (ECM) Providers

#### Online Access

[www.CAHealthWellness.com](https://www.CAHealthWellness.com)

- Secure Access
- Provider Billing manuals
- Provider forms
- Quick reference guides FAQs
- Secure messaging
- Prior Auth Code Checker Tool
- Clinical guidelines
- California Health & Wellness news
- Member eligibility
- PCP verification
- PCP panel lists
- Submit, inquire, or correct claims
- Submit authorizations or check authorization status

#### Call Us at 877-658-0305

Monday to Friday  
8 a.m. to 5 p.m. (PT)

#### Fax Numbers

**Prior Authorizations:** 866-724-5057

**Concurrent Review:** 855-556-7910

**Admissions:** 855-556-7907

**Appeals:** 855-460-1009

**Case Management:** 855-556-7909

#### Pharmacy

**Medi-Cal Rx** – Self-administered drugs and supplies obtained under the pharmacy benefit

- Prior auth fax: 800-869-4325
- Help Desk: 800-977-2273

**AcariaHealth** – Specialty Pharmacy

- Prior auth fax: 855-217-0926
- Phone: 855-535-1815

**CHWP Pharmacy Dept** – Provider-administered drugs requiring prior auth

- Prior auth fax: 877-259-6961
- Phone: 877-658-0305

**Medication Prior Authorization Form is available at**

[www.CAHealthWellness.com](https://www.CAHealthWellness.com).

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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 [cahealthwellness.com/providers/CalAIM](https://cahealthwellness.com/providers/CalAIM), under Forms & Tools > Community Supports (CS) Authorization Guides.

## **Additional information**

Providers are encouraged to access California Health & Wellness Plan's (CHWP's) provider portal online at [www.CAHealthWellness.com](https://www.CAHealthWellness.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 CHWP at 877-658-0305.