

Authorization Guide for Nursing Facility Transition/Diversion to Assisted Living Facilities

Nursing Facility Transition/Diversion services facilitate member’s transition from a nursing facility back to a home-like, community setting and/or prevent skilled nursing admissions for members with an imminent need for nursing facility level of care (LOC).

The service helps individuals live in the community and/or avoid institutionalization. The service is for individuals who are transitioning from a licensed health care facility to a living arrangement in a Residential Care Facility for the Elderly (RCFE) or an Adult Residential Facility (ARF).

Members must meet the following criteria to qualify for Nursing Facility Transition/Diversion services:

| Eligibility: | Restrictions: |
|--|--|
| <p>For Nursing Facility Transition:</p> <ul style="list-style-type: none"> • Has resided 60+ days in a nursing facility; • Is willing to live in an assisted living setting as an alternative to a nursing facility; and • Can reside safely in an assisted living facility with appropriate and cost-effective supports. <p>For Nursing Facility Diversion:</p> <ul style="list-style-type: none"> • Is interested in remaining in the community; • Is willing and able to reside safely in an assisted living facility with appropriate and cost-effective supports and services; and • Must be currently receiving medically necessary nursing facility LOC or meet the minimum criteria to receive nursing facility LOC services and, in lieu of going into a facility, is choosing to remain in the community and continue to receive medically necessary nursing facility LOC services at an assisted living facility. | <ul style="list-style-type: none"> • Member is participating in duplicative state, local, or federally funded programs. • Members who are directly responsible for paying their own living expenses. |
| Service includes: | |
| <ul style="list-style-type: none"> • Wraparound services such as assistance with ADLs and IADLs as needed, companion services, medication oversight, and therapeutic social and recreational programming, provided in a home-like environment. • 24-hour direct care staff on-site to meet scheduled unpredictable needs in a way that promotes maximum dignity and independence and to provide supervision, safety, and security. • Allowable Expenses.¹ <p>Allowable expenses (including but not limited to):</p> <ul style="list-style-type: none"> • Assessing the member’s housing needs and presenting options.¹ | |

¹Refer to Housing Transition/Navigation Services Community Supports for additional details.

- Assessing the service needs of the member to determine whether the member needs enhanced on-site services at the RCFE/ARF.
- Assisting in securing a facility residence, including the completion of facility applications, and securing required documentation (e.g., Social Security card, birth certificate, prior rental history).
- Communicating with facility administration and coordinating the move.
- Establishing procedures and contacts to retain facility housing.
- Coordination to ensure that the needs of members who need enhanced services to be safely and stably housed in RCFE/ARF settings have Community Supports and/or enhanced care management services.

Total lifetime maximum: N/A

Codes:

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Allowable Community Supports providers:

Providers must have experience and expertise with providing housing-related services and supports in a culturally and linguistically appropriate manner. Provider must use best practices in rendering services.ⁱⁱ

State services to be avoided:

Examples include but are not limited to skilled nursing facility services, inpatient hospital services, and psychiatric inpatient stays.

ⁱExpenses necessary to enable a person to establish a community facility residence (except room and board).

ⁱⁱExamples of provider: case management agencies • home health agencies • Medi-Cal managed care plans • ARF/RCFE operators.