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To: Medical Directors & IPA Network
From: IEHP – Provider Relations
Date: 7/31/2025
Subject: **REVISED – UM Authorization Guidelines**

IEHP's Guideline Review Committee has approved the following authorization guideline updates/changes, **effective 8/1/2025:**

Guideline #	Guideline Title	Degree of Change	Updates/Changes
UM_CSS 01	Community or Home Transition Services (formerly named: Community Transition Services/Nursing Facility Transition to a Home)	Revised Moderate	Highlights: <ul style="list-style-type: none">• Name changed from Community Transition Services/Nursing Facility Transition to a Home to <u>Community or Home Transition Services</u>• Updated verbiage to include revisions made to the Community Supports Policy Volume 1 (pg.19)• Included verbiage from Community Supports Policy Guide Volumes 1 & 2 Appendix D: SMHS, DMC, and DMC-ODS Access Criteria• Reference Updated: Department of Health Services, April 2025 Medi-Cal Community Supports, or in Lieu of Services (ILOS), Policy Guide• Under Coverage Limitations and Exclusions• Included maximums of services to be provided
UM_CSS 02	Assisted Living Facility Transitions (formerly named: Nursing Facility Transition/Diversion to Assisted Living Facilities)	Revised Moderate	Highlights: <ul style="list-style-type: none">• Name changed from Nursing Facility Transition/Diversion to Assisted Living Facilities to <u>Assisted Living Facility Transitions</u>• Updated verbiage to include revisions made to the Community Supports Policy Volume 1 (pg.13)• Included verbiage from Community Supports Policy Guide Volumes 1 & 2 Appendix D: SMHS, DMC, and DMC-ODS Access Criteria• Reference Updated: Department of Health Services, April 2025 Medi-Cal Community Supports, or in Lieu of Services (ILOS), Policy Guide• Under Coverage Policy• Added components for members' ADLs• Under Coverage Limitations and Exclusions• Added details regarding room and board expenses• Clarified members cannot receive both the ALW and CCT at the same time

Guideline #	Guideline Title	Degree of Change	Updates/Changes
UM_CSS 06	Asthma Remediation	Revised Moderate	<p>Highlights:</p> <ul style="list-style-type: none"> • Updated verbiage to include revisions made to the Community Supports Policy Volume 1 (pg.42) • Included verbiage from Community Supports Policy Guide Volumes 1 & 2 Appendix D: SMHS, DMC, and DMC-ODS Access Criteria • Reference Updated: Department of Health Services, April 2025 Medi-Cal Community Supports, or in Lieu of Services (ILOS), Policy Guide • Under Coverage Limitations and Policy • Added clarification regarding when services are available in a home • Added clarification of eligibility requirements • Under Coverage Limitations and Exclusions <ul style="list-style-type: none"> ○ Included information regarding exclusions that need to be reviewed under APS and that services should not interfere with EPSDT services
UM_CSS 07	Environmental Accessibility Adaptations (Home Modifications)	Revised Minor	<p>Highlights:</p> <ul style="list-style-type: none"> • Updated verbiage to include revisions made to the Community Supports Policy Volume 1 (pg. 28) • Included verbiage from Community Supports Policy Guide Volumes 1 & 2 Appendix D: SMHS, DMC, and DMC-ODS Access Criteria • Reference Updated: Department of Health Services, April 2025 Medi-Cal Community Supports, or in Lieu of Services (ILOS), Policy Guide • Under Coverage Policy <ul style="list-style-type: none"> ○ Included clarification of eligibility requirements
UM_CSS 09	Sobering Centers	Revised Minor	<p>Highlights:</p> <ul style="list-style-type: none"> • Updated verbiage to include revisions made to the Community Supports Policy Volume 1 (pg. 39) • Included verbiage from Community Supports Policy Guide Volumes 1 & 2 Appendix D: SMHS, DMC, and DMC-ODS Access Criteria • Reference Updated: Department of Health Services, April 2025 Medi-Cal Community Supports, or in Lieu of Services (ILOS), Policy Guide • Under Coverage Policy <ul style="list-style-type: none"> ○ Minor revisions removed for members requesting services

Guideline #	Guideline Title	Degree of Change	Updates/Changes
UM_CSS 10	Recuperative Care (Medical Respite)	Revised Minor	<p>Highlights:</p> <ul style="list-style-type: none"> Under Coverage Limitations and Exclusions <ul style="list-style-type: none"> Included limitation of ‘per calendar year’ for the maximum benefit between STPH and Recuperative Care
UM_CSS 11	Short-Term Post-Hospitalization Housing	Revised Minor	<p>Highlights:</p> <ul style="list-style-type: none"> Under Coverage Limitations and Exclusions <ul style="list-style-type: none"> Included limitation of ‘per calendar year’ for the maximum benefit between STPH and Recuperative Care
UM_CSS 12	Day Habilitation Programs	Revised Moderate	<p>Highlights:</p> <ul style="list-style-type: none"> Updated verbiage to include revisions made to the Community Supports Policy Volume 2 (pg. 43) Included verbiage from Community Supports Policy Guide Volumes 1 & 2 Appendix D: SMHS, DMC, and DMC-ODS Access Criteria Reference Updated: Department of Health Services, April 2025 Medi-Cal Community Supports, or in Lieu of Services (ILOS), Policy Guide Under Coverage Policy <ul style="list-style-type: none"> Included additional eligibility criteria details Included requirements for extension of services Under Coverage Limitations and Exclusions <ul style="list-style-type: none"> Added details pertaining to when a member should be referred to the Housing Trio
UM_CSS 13	Personal Care and Homemaker Services	Revised Moderate	<p>Highlights:</p> <ul style="list-style-type: none"> Updated verbiage to include revisions made to the Community Supports Policy Volume 1 (pg. 25) Included verbiage from Community Supports Policy Guide Volumes 1 & 2 Appendix D: SMHS, DMC, and DMC-ODS Access Criteria Reference Updated: Department of Health Services, April 2025 Medi-Cal Community Supports, or in Lieu of Services (ILOS), Policy Guide Under Coverage Policy <ul style="list-style-type: none"> Included details on when Personal Care and Homemaker Services can be utilized Included details on eligibility requirements Under Coverage Limitations and Exclusions <ul style="list-style-type: none"> Included exclusions of Members receiving services through IRC Included that members must apply for IHSS

Guideline #	Guideline Title	Degree of Change	Updates/Changes
UM_CSS 14	Respite Services	Revised Moderate	Highlights: <ul style="list-style-type: none"> Updated verbiage to include revisions made to the Community Supports Policy Volume 1 (pg. 10) Included verbiage from Community Supports Policy Guide Volumes 1 & 2 Appendix D: SMHS, DMC, and DMC-ODS Access Criteria Reference Updated: Department of Health Services, April 2025 Medi-Cal Community Supports, or in Lieu of Services (ILOS), Policy Guide Under Coverage Policy <ul style="list-style-type: none"> Included additional criteria Under Coverage Limitations and Exclusions <ul style="list-style-type: none"> Included exclusions for members linked in IRC, IHSS, and/or Hospice
UM_CSS 04	Housing Transition Navigation Services	Revised Moderate	Highlights: <ul style="list-style-type: none"> Under Coverage Policy <ul style="list-style-type: none"> Addition of SMHS criteria
UM_CSS 08	Medically Tailored Meals/Medically-Supportive Food	Revised Moderate	Highlights: <ul style="list-style-type: none"> Under Coverage Policy Revised eligibility requirements for chronic conditions

Access to all other authorization guidelines can be found at: www.providerservices.iehp.org > Resources > Resources for Providers > Utilization Management Clinical Criteria or [click here](#).

If you have any questions, please contact the IEHP Provider Call Center at (909) 890-2054, (866) 223-4347 or email ProviderServices@iehp.org

All IEHP communications can be found at: on the IEHP website: www.providerservices.iehp.org > News and Updates > Notices