



IEHP UM Subcommittee Approved Authorization Guideline			
Guideline	Assisted Living Facility Transitions	Guideline #	UM CSS 02
		Original Effective Date	1/1/2022
Section	Community Support Services	Revision Date	7/14/2025
		Committee Approval Date	7/21/2025
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COVERAGE POLICY

Assisted Living Facility Transitions is designed to assist Member With living in the community and avoid institutionalization, whenever possible.

The goal of the service is to facilitate nursing facility transition back into a home-like, community setting, and/or to prevent nursing facility admissions for Members living in the community. This Community Support is intended for Members with an imminent need for nursing facility level of care (LOC) and is intended to provide a choice of residing in an assisted living setting as an alternative to long-term placement in a nursing facility.

- A. The term assisted living facility (ALF) includes a Residential Care Facility for the Elderly (RCFE), or an Adult Residential Care Facility (ARF). This service includes two components, as follows: This service includes two components:
 1. Time-limited transition services and expenses to enable a person to establish a residence in an ALF. Transition services end once the Member establishes residency in the ALF. The transitional period will vary in length and services provided based on a Member's unique circumstances. Allowable expenses are those necessary to enable a person to establish ALF residence (except room and board), including, but not limited to:
 - a. Assessing the Member's housing needs and presenting options.
 - b. Assessing the service needs of the Member to determine if the Member needs enhanced onsite services at the ALF, so the Member can be safely and stably housed
 - c. Assisting in securing an ALF residence, including the completion of facility applications, and securing required documentation (e.g., Social Security Card, birth certificate, prior rental history)
 - d. Moving expenses to support a Member's transition, such as movers/moving supplies and necessary private/personal articles to establish an ALF residence
 - e. Communicating with facility administration and coordinating the move
 - f. Establishing procedures and contacts to retain housing at the ALF.
 2. Ongoing assisted living services are provided to Members on an ongoing basis after they transition into the ALF. Members can receive these services indefinitely, as long as Member can maintain residency in the ALF. These services include:
 - a. Assistance with Activities of Daily Living (ADLs) and Instrumental ADLs (IADLs)
 - b. Meal preparation

- c. Transportation
 - d. Medication administration and oversight
 - e. Companion services
 - f. Therapeutic social and recreational programming provided in a home-like environment
 - g. 24-hr direct care staff onsite at the ALF to meet unpredictable needs in a way that promotes maximum dignity and independence, and to provide supervision, safety, and security
 - h. Care Coordination services to screen or eligibility and support enrollment of Members in Enhanced Care Management (ECM) and other Community Supports
- B. Members are eligible for Assisted Living Facility Transitions when the following are met:
- 1. Member's residing in a nursing facility who meet ALL of the following:
 - a. Have resided 60+ days in a nursing facility
 - b. Are willing to live in an assisted living setting as an alternative to nursing facility
 - c. Able to reside safely in an ALF
 - 2. Member's residing in the community who meet ALL of the following:
 - a. Are interested in remaining in the community
 - b. Are willing and able to reside safely in an ALF
 - c. Meet the minimum criteria to receive nursing facility LOC services and, in lieu of going to a facility, choose to remain in the community and continue to receive medically necessary nursing facility LOC services at an ALF
- C. Members who are receiving facility level health care services on an acute or post-acute care basis (such as hospitalization or a short-term skilled nursing facility stay) may be eligible for this Community Support, provided they otherwise meet the eligibility criteria.
- D. Active IEHP Membership.

COVERAGE LIMITATIONS AND EXCLUSIONS

- A. Members are directly responsible for paying their own living expenses.
- B. Room and board expenses are not included in this service.
- C. A Member can be eligible for both the Assisted Living Waiver and California Community Transitions (CCT) program and this services, however, they cannot receive both at the same time.
- D. Community supports shall supplement and not supplant services received by the Medi-Cal beneficiary through other State, local, or federally-funded programs, in accordance with the CalAIM STCs and federal and DHCS guidance

ADDITIONAL INFORMATION

The goal of this service is to both facilitate nursing facility transition back into a home-like, community setting and/or prevent skilled nursing admissions for Members with an imminent need for nursing facility LOC. Individuals have a choice of residing in an assisted living setting as an alternative to long-term placement in a nursing facility when they meet eligibility requirements.

Nursing facility transition/diversion services include wraparound services such as assistance with Activities of Daily Living (ADLs), and instrumental ADLs (IADLs) as needed, companion services, medication oversight and therapeutic social and recreational programming provided in a home-like environment. It also includes 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.

CLINICAL/REGULATORY RESOURCE

CalAIM is an initiative by the Department of Health Care Services (DHCS) to improve the quality of life and health outcomes of Medi-Cal beneficiaries by implementing broad delivery system, programmatic, and payment system reforms. A key feature of CalAIM is the introduction of a menu of Community Supports, that offer medically appropriate and cost-effective alternatives to services covered under the State Plan. Federal regulation allows states to permit Medicaid managed care organizations to offer Community Supports as an option to Members (Code of Federal Regulations).

DEFINITION OF TERMS

Institutionalization – the state of being placed or kept in a residential institution.

REFERENCES

1. State of California-Health and Human Services Agency, Department of Health Care Services, April 2025. Medi-Cal Community Supports, or in Lieu of Services (ILOS), Policy Guide. Community Supports -Service Definitions.

DISCLAIMER

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