

Refer Members to Community Supports Services With this Quick Reference

USE THE ELIGIBILITY CRITERIA TO HELP DETERMINE WHEN SERVICES ARE COVERED

Community Supports (CS) services are part of the California Advancing and Innovating Medi-Cal (CalAIM) program, through the Department of Health Care Services (DHCS), to help improve the health of Medi-Cal members across the state. There are 14 CS services that are available to members, as described in the tables below.

Services to address homelessness and housing:

Description	Eligibility criteria
Housing Transition Navigation Services: Assistance with obtaining housing. This may include assistance with searching for housing or completing housing applications, as well as developing an individual housing support plan. Housing Tenancy and Sustaining Services: Assistance with maintaining stable tenancy once housing is secured. This may include interventions for behaviors that may jeopardize housing, such as late rental payment and services, to develop financial literacy. Housing Deposit¹	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Receives housing resources through the local homeless Coordinated Entry System or similar system; or <input checked="" type="checkbox"/> Meets the Dept. of Housing and Urban Development (HUD) definition of homeless; or <input checked="" type="checkbox"/> At-risk of experiencing homelessness.

Recuperative services:

Description	Eligibility criteria
Recuperative Care (Medical Respite): Short-term residential care for beneficiaries who no longer require hospitalization, but still need to recover from injury or illness. Short-Term Post Hospitalization Housing: Setting in which beneficiaries can continue receiving care for medical psychiatric or substance use disorder needs immediately after exiting a hospital.	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Exiting recuperative care or at-risk of hospitalization or are post-hospitalization; and <input checked="" type="checkbox"/> Meets the HUD definition of homeless.
Respite Services: Short-term relief provided to caregivers of beneficiaries who require intermittent temporary supervision.	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Live in the community and are compromised in their Activities of Daily Living; and <input checked="" type="checkbox"/> Require caregiver relief to avoid institutional placement and provide support.
Sobering Centers: Alternative destinations for beneficiaries who are found to be intoxicated and would otherwise be transported to an emergency department or jail.	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Individuals ages 18 and older who are intoxicated (appropriate for sobering centers); and <input checked="" type="checkbox"/> Transported/present to the emergency department or a jail.

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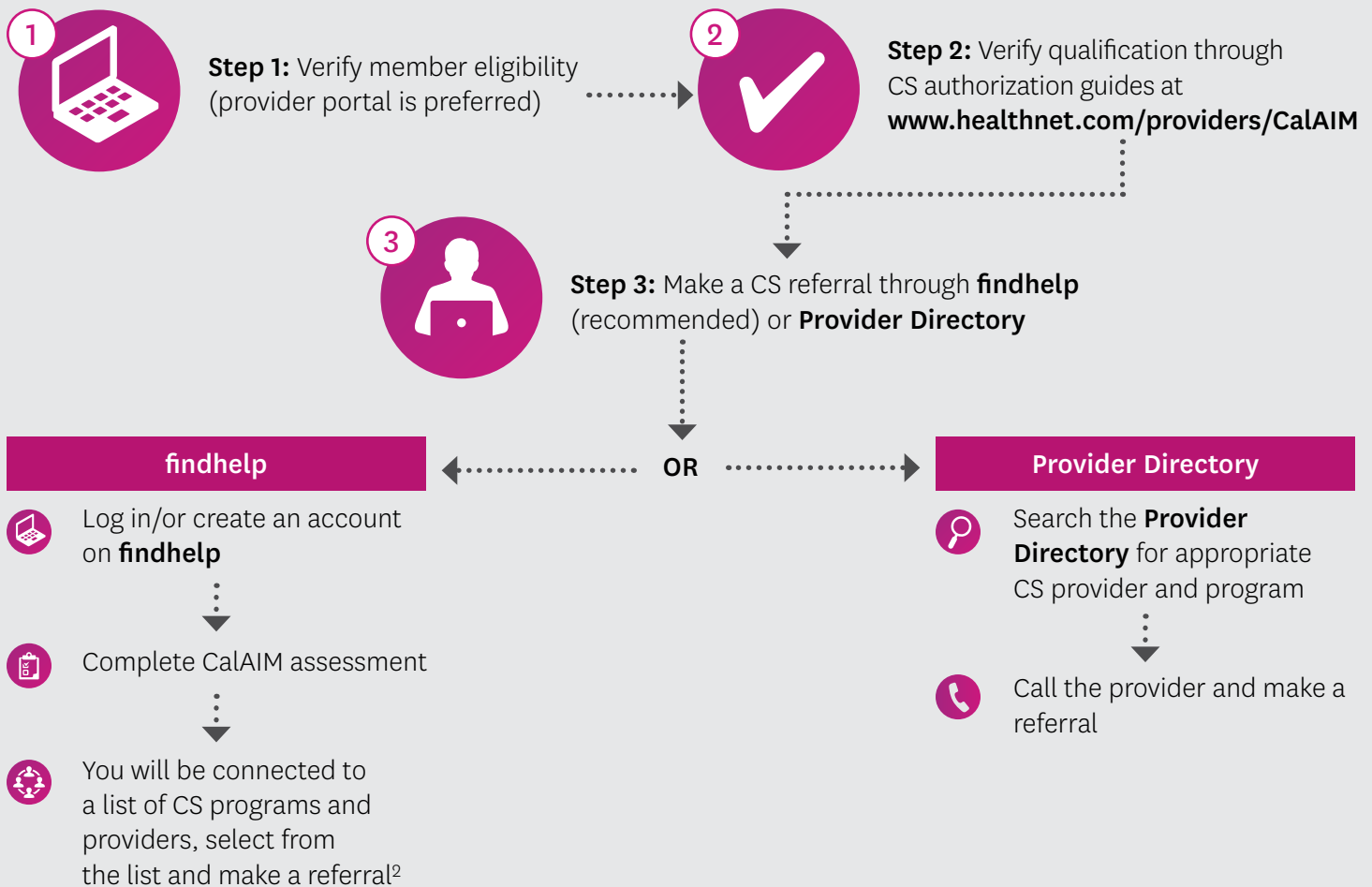


Services for long-term well-being in home-like settings:

Description	Eligibility criteria
Asthma Remediation: Physical modifications to a beneficiary's home to mitigate environmental asthma triggers.	<div><div><div></div></div><div>Has poorly controlled asthma in the past 12 months: An emergency department visit, hospitalization, two sick or urgent care visits, or a score of 19 or lower on the asthma control test.</div></div>
Day Habilitation: Programs provided to assist beneficiaries with developing skills necessary to reside in homelike settings, often provided by peer mentortype caregivers. These programs can include training on use of public transportation or preparing meals.	<div><div><div></div></div>Experiencing homelessness; or<div><div><div></div></div>Exited homelessness and entered housing in the last 24 months; or<div><div><div></div></div>At-risk of homelessness or institutionalization whose housing stability could be improved.</div></div></div>
Environmental Accessibility Adaptation: Physical adaptations to a home to ensure the health and safety of the beneficiary. These may include ramps and grab bars.	<div><div><div></div></div>At-risk for institutionalization in a nursing facility.</div>
Meals/Medically Tailored Meals: Meals delivered to the home that are tailored to meet beneficiaries' unique dietary needs, including following discharge from a hospital.	<div><div><div></div></div>Has chronic conditions; and<div><div><div></div></div>Discharged from the hospital or skilled nursing facility, or at high risk of hospitalization, nursing facility placement or extensive care coordination needs.</div></div>
Nursing Facility Transition/Diversion to Assisted Living Facility: Services provided to assist beneficiaries transitioning from nursing facility care to community settings or to prevent beneficiaries from being admitted to nursing facilities. Community Transition Services/Nursing Facility Transition to Home: Services provided to assist beneficiaries transitioning from nursing facility care to home settings in which they are responsible for living expenses.	<div><div><div><div><div></div></div><div>Has resided in a nursing facility for 60+ days.</div></div><div><div><div></div></div>Is willing to live in an assisted living setting as an alternative to a nursing facility.</div><div><div><div></div></div>Can reside safely in an assisted living facility with support.</div></div><div><div><div></div></div>Is interested in remaining in the community.</div><div><div><div></div></div>Is willing and able to reside safely in an assisted living facility with support.</div><div><div><div></div></div>Must be currently receiving necessary nursing facility services or meet the minimum criteria to receive nursing facility services.</div></div>
Personal Care and Homemaker Services: Services provided to assist beneficiaries with daily living activities, such as bathing, dressing, housecleaning and grocery shopping.	<div><div><div></div></div>At-risk for hospitalization or institutionalization in a nursing facility; or<div><div><div></div></div>Individuals with functional deficits and no other support system; or<div><div><div></div></div>Individuals approved for In-Home Supportive Services.</div></div></div>

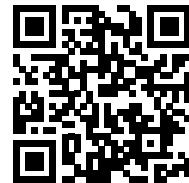
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Refer to the flowchart to determine CS eligibility and make referrals



Findhelp

Use findhelp at calvivahealth-ecm-cs.findhelp.com/ or scan this QR code to identify local resources, supports staff and community partners when searching for local services.



Provider directory

Find a CS provider for your patients via the CalViva Health directory at www.calvivahealth.org/providers/provider-directory/ or scan this QR code.



Additional information

To learn more about CS or to access these services, contact **CalViva Health at 888-893-1569** or call the **State's Medi-Cal Health Care Options at 800-430-4263 (TTY: 800-430-7077)**.

¹Housing deposits are available for members in housing navigation and housing tenancy if there is a need and all county resources have been expended.

²Only refer to providers on findhelp if their program card has been claimed with a checkmark on the right-hand corner, or else refer through provider directory.