

## **Authorization Guide for Personal Care and Homemaker Services**

Personal Care and Homemaker Services are provided for members who need assistance with activities of daily living (ADLs) or instrumental activities of daily living (IADLs).

Program overview	Required documentation
<ul> <li>Service includes:</li> <li>Assistance with ADLs such as bathing, dressing, toileting, ambulation, and feeding.</li> <li>Assistance with IADLs such as meal preparation, grocery shopping, and money management.</li> <li>Help with tasks such as cleaning, shopping, laundry, and grocery shopping.</li> <li>Aids individuals who could otherwise not remain in their homes.</li> <li>Services can be utilized:</li> <li>In addition to any approved county In-Home Supportive Services hours when additional hours are required and if In-Home Supportive Services benefits are exhausted.</li> <li>As authorized during any In-Home Supportive Services waiting period (member must be already referred to In-Home Supportive Services); this approval period includes services application date.</li> <li>For members not eligible for In-Home Supportive Services to avoid a short-term stay in a skilled nursing facility (not to exceed 60 days).</li> <li>In-home supportive services:</li> <li>House cleaning, meal preparation, laundry, grocery shopping, personal care services (such as bowel and bladder care, bathing, grooming, and paramedical services), accompaniment to medical appointments, and protective supervision for the mentally impaired.</li> </ul>	<ul> <li>Community Supports (CS) Referral Form for Personal Care and Homemaker Services.</li> <li>Initial assessment of member needs including ADLs and IADLs (Included in CS Referral Form).</li> </ul>
Eligibility	
<ul> <li>Individuals at risk of hospitalization or institutionalization in a nursing facility; or</li> <li>Individuals with functional deficits and no adequate support system; or</li> <li>Individuals approved for In-Home Supportive Services.<sup>1</sup></li> </ul>	

<sup>&</sup>lt;sup>1</sup>Eligibility criteria can be found at <u>http://www.cdss.ca.gov/In-Home-Supportive-Services</u>.

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<ul> <li>Authorization</li> <li>Initial authorization period is based on service need and not to exceed 60 days.</li> <li>Reauthorization: If an extension is needed, a reassessment of the member's needs must be submitted with an authorization request.</li> <li>If due to In-Home Supportive Services (IHSS) denial, there is a 60-day maximum. No extension allowed.</li> <li>For all other needs, re-auth every 30-days until IHSS is in place, the member has a backup caregiver, or other care coordination is identified to meet the member's needs.</li> </ul>		
<ul> <li>Member must not be participating in a duplicative state, local, or federally funded program.</li> <li>Members must be referred to the In-Home Supportive Services program.</li> <li>If a member receiving Personal Care and Homemaker services has any change in their current condition, they must be referred to In-Home Supportive Services for reassessment and determination of additional hours. Members may continue to receive Personal Care and Homemaker services during this reassessment waiting period.</li> <li>Similar services available through In-Home Supportive Services should always be utilized first.</li> <li>Personal Care and Homemaker services should only be utilized if appropriate and if additional hours/supports are not authorized by In-Home Supportive Services.</li> </ul>	Examples include but are not limited to inpatient and outpatient hospital services, emergency department services, and skilled nursing facility services.	
Codes		
T1019 U6		
Total lifetime maximum		
N/A		
Eligible providers		
Providers must have experience and expertise with providing these unique services in a culturally and linguistically appropriate manner. Provider must use best practices in rendering services. <sup>2</sup>		

<sup>&</sup>lt;sup>2</sup>Examples of Provider: home health agencies • county agencies • personal care agencies • Area Agencies on Aging (AAA).