



PARTNERSHIP HEALTHPLAN OF CALIFORNIA

Community Supports Criteria Matrix and HCPCS Code Chart

MCUP3142 Attachment A
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01/10/2024

See further descriptions of each column header on pages 4 - 6

Community Support Services		Housing Transition Navigation Services	Housing Deposits	Housing Tenancy and Sustaining Services	Short-Term Post-Hospitalization Housing	Recuperative Care	Meals/ Medically Tailored Meals	Respite Services	Personal Care and Homemaker Services
HCPCS Codes		H0043, H2016	H0044	T2041 and TBD	H0044	T2033	S5170; S9470	H0045, S5151, 9125	S5130, T1019
1	Individuals prioritized for a permanent supportive housing unit or rental subsidy resource through the local homeless Coordinated Entry System (CES): Highly vulnerable individuals with disabilities, chronic conditions/mental illness, substance use disorder and upon exiting incarceration (effective January 1, 2024)	X	X	X					
2	Qualifies for HUD definition of Homeless: People who are living in a place not meant for human habitation for 12 continuous months or for 4 separate occasions in the last 3 years (must total 12 months)	X	X	X	X				
3	Qualifies for definition of chronic homelessness: Must have (A) been continuously homeless for the last 12 months OR (B) has a minimum of 4 occasions of homeless over the last 3 years totalling a minimum of 12 months	X	X	X	X				
4	Qualifies for HUD definition of at risk of homelessness: Have an annual income below 30% of median family income for the area, as determined by HUD and, do not have sufficient resources or support networks i.e. family, friends, faith based, social networks, immediately available to prevent them from moving to an emergency shelter	X	X	X	X				
5	Qualifies for at risk of experiencing homelessness: Those who are at risk of homelessness including individuals and families who have an annual income below 30% of median family income of the area as determined by HUD	X	X	X	X				
6	Qualifies for No Place Like Home definition of "at risk of chronic homelessness"	X	X	X	X				
7	Individuals who are not receiving duplicative support from other State, local tax, or Federally funded programs	X	X	X	X	X	X	X	X
8	Identified as reasonable and necessary in the individual's housing support plan	X	X	X					
9	Any individual who received Housing Transition/ Navigation Services in counties that offer Community Support Housing Transition/Navigation Services		X	X					
10	May only receive once in individual's lifetime.		X		X				
11	Only available for a single duration in the individual's lifetime. Service may be considered for one additional approval with documentation as to what conditions have changed to demonstrate why providing services would be more successful on the second attempt.			X					
12	Only available when enrollee is unable to cover deposits required for tenants. The liaison will be responsible for paying deposits to the landlord, PG&E, water deposit, or other utility deposits needed.		X						
13	Individuals must also receive Housing Transition/ Navigation services, at a minimum, the associated tenant screening, housing assessment and individualized housing support plan must be completed in conjunction with this service.		X						
14	Exiting Recuperative Care				X				
15	Individuals exiting an inpatient hospital stay, residential substance use disorder treatment or recovery facility, residential mental health treatment facility, correctional facility, or nursing facility.				X				
16	Individuals must have medical/ behavioral health needs such that experiencing homelessness upon discharge from the hospital, substance use or mental health treatment facility, correctional facility, nursing facility, or recuperative care would likely result in hospitalization, re-hospitalization, or institutional readmission.				X				
17	Individuals who are at risk of hospitalization or are post-hospitalization, requiring mental or medical care and follow up					X			
18	Individuals who live alone with no formal support i.e. services provided by professional trained employees, typically paid for their work.					X			
19	Individuals who face housing insecurity or have housing that would jeopardize their health and safety without modification.					X			
20	Beneficial to achieve or maintain medical stability and prevent hospital admission or re-admission, which may require behavioral health or medical interventions.					X			
21	Individuals who live in the community and are compromised in their Activities of Daily Living (ADLs) and are therefore dependent upon a qualified caregiver who provides most of their support, and who require caregiver relief to avoid institutional placement.							X	

22	Relief of family caregivers of children who previously were covered for Respite Services under the Pediatric Palliative Care Waiver, foster care program beneficiaries, beneficiaries enrolled in California Children's Services, and Genetically Handicapped Persons Program (GHPP), and Clients with Complex Care Needs.							X	
23	Restriction and limitation: Service limit is up to 336 hours of service per year.							X	
24	Individuals at risk for hospitalization, or institutionalization in a nursing facility								X
25	Individuals with functional deficits and no other adequate support system, such as vision, hearing or movement limitation or growth, behavioral, language development or physical or spiritual development disorders.								X
26	Individuals approved for In-Home Supportive Services (IHSS)								X
27	Can be receiving In-Home Supportive Services (IHSS), when additional hours are required or if IHSS benefits are exhausted.								X
28	Individuals with chronic conditions, such as, but not limited to diabetes, cardiovascular disorders, congestive heart failure, stroke, chronic lung disorders, human immunodeficiency virus (HIV), cancer, gestational diabetes, or other high risk perinatal conditions, and chronic or disabling mental/behavioral health disorders.						X		
29	Individuals being discharged from the hospital or a skilled nursing facility or at high risk of hospitalization or nursing facility placement.						X		
30	Individuals with extensive care coordination needs.						X		
31	Limitation = Up to 2 meals per day for up to 12 weeks = longer if determined medically necessary						X		
32	Limitation = meals not covered to respond solely to food insecurities.						X		
33	Cannot be enrolled in any other alternative food program or delivery services.						X		
34	Restriction and limitation: In the home setting, these services, in combination with any direct care services the member is receiving, may not exceed 24 hrs per day of care.							X	
35	Restriction and limitation: This service is only to avoid placement to which the medical managed care plan would be responsible.					X		X	
36	Restriction and limitation: Necessary to achieve or maintain medical stability and prevent hospital admission or re-admission, which may require behavioral or medical interventions.					X			

Housing Transition/Navigation Services

Eligibility Criteria

Individuals who:

- Are prioritized for a permanent supportive housing unit or rental subsidy resource through a local Coordinated Entry System (CES).
- Meet the Housing and Urban Development (HUD) definition of homeless.
- Meet the definition of an individual experiencing chronic homelessness.
- Meet the HUD definition of at risk of homelessness.
- Meet the State's No-Place-Like-Home definition of "at risk of chronic homelessness."

Restrictions and Limitations

- Housing Transition/Navigation services must be identified as reasonable and necessary in the individual's individualized housing support plan.

Housing Deposit

Eligibility Criteria

Individuals who:

- Received Housing Transition/Navigation Services Community Supports in counties that offer Housing Transition/Navigation Services.
- Are prioritized for a permanent supportive housing unit or rental subsidy resource through the local homeless CBO.
- Meet the Housing and Urban Development (HUD) definition of homeless.
- Meet the HUD definition of at risk of homelessness.
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- Meet the State's No-Place-Like-Home definition of "at risk of chronic homelessness."

Restrictions and Limitations

- Only available in an individual's lifetime.
 - Housing Deposits can only be approved one additional time with documentation as to what conditions have changed to demonstrate why providing Housing Deposits would be more successful on the second attempt.
- Must be identified as reasonable and necessary in the individual's individualized housing support plan and available only when the enrollee cannot meet such expense.
- Individuals must also receive Housing Transition Navigation services (at a minimum, the associated tenant screening, housing assessment, and individualized housing support plan) in conjunction with this service.

Housing Tenancy & Sustaining Services

Eligibility Criteria

Individuals who:

- Received Housing Transition/Navigation Services Community Supports in counties that offer Housing Transition/Navigation Services (but this is not a requirement)
- Are prioritized for a permanent supportive housing unit or rental subsidy resource through the Coordinated Entry System (CES).
- Meet the Housing and Urban Development (HUD) definition of homeless
- Meet the definition of an individual experiencing chronic homelessness
- Meet the HUD definition of at risk of homelessness
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- Meet the State's No-Place-Like-Home definition of "at risk of chronic homelessness"

Restrictions and Limitations

- These services are available from the initiation of services through the time when the individual's housing support plan determines they are no longer needed.
- Only available for a single duration in the individual's lifetime.
 - Housing Tenancy and Sustaining Services may be approved one additional time with documentation demonstrating what has changed and how this service would be more successful on the second attempt.
- These services must be identified as reasonable and necessary in the individual's individualized housing support plan and are available only when the enrollee is unable to successfully maintain longer-term housing without such assistance.
- Many individuals will have also received Housing Transition/Navigation services (at a minimum, the associated tenant screening, housing assessment and individualized housing support plan) in conjunction with this service but it is not a requirement.

Short-Term Post-Hospitalization Housing

Eligibility Criteria

Individuals who:

- Are exiting recuperative care.
- Individuals exiting an inpatient hospital stay residential substance use disorder treatment or recovery facility, residential mental health treatment facility, correctional facility, or nursing facility and who meet any of the following criteria.
 - Meet the Housing and Urban Development (HUD) definition of homeless.
 - Meet the definition of an individual experiencing chronic homelessness.
 - Meet the HUD definition of at risk of homelessness.
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 - Meet the State's No-Place-Like-Home definition of "at risk of chronic homelessness."

Restrictions and Limitations

- Only available once in an individual's lifetime and are limited and are not to exceed a duration of six (6) months per episode (but may be authorized for a shorter period based on individual needs). Plans are expected to make a good faith effort to review information available to them to determine if an individual has previously received services.
- The service is only available if the enrollee is unable to meet such an expense.

Recuperative Care

Eligibility Criteria

- Individuals who are at risk of hospitalization or are post-hospitalization.
- Individuals who live alone with no formal supports.
- Individuals who face housing insecurity or have housing that would jeopardize their health and safety without modification.

Restrictions and Limitations

Recuperative care/medical respite is an allowable Community Supports service if it is:

- Necessary to achieve or maintain medical stability and prevent hospital admission or re- admission, which may require behavioral health interventions.
- Not more than 90 days in continuous duration.
- Does not include funding for building modification or building rehabilitation.

Medically Tailored Meals/ Medically Supported Food

Eligibility Criteria

- Individuals with chronic conditions, such as but not limited to, diabetes, cardiovascular disorders, congestive heart failure, stroke, chronic lung disorders, human immunodeficiency virus (HIV), cancer, and chronic or disabling mental/behavioral health disorders.
- Individuals being discharged from the hospital or a skilled nursing facility or at high risk of hospitalization or nursing facility placement.
- Individuals with extensive care coordination needs.

Restrictions and Limitations

- Up to two medically-tailored meals per day and/or medically-supportive food and nutrition services for up to 12 weeks, or longer if determined medically necessary.
- Meals that are eligible for or reimbursed by alternate programs are not eligible.
- Meals are not covered to respond solely to food insecurities.

Respite Services

Eligibility Criteria

- Individuals who live in the community are compromised in their Activities of Daily Living(ADLs) and are therefore dependent upon a qualified caregiver who provides most of their support, and who require caregiver relief to avoid institutional placement.
- Other subsets may include children who previously were covered for Respite Services under the Pediatric Palliative Care Waiver, foster care program beneficiaries, beneficiaries enrolled in California Children's Services, and Genetically Handicapped Persons Program (GHPP), and Clients with Complex Care needs.

Restrictions and Limitations

- In the home setting, these services, in combination with any direct care services the member is receiving, may not exceed 24 hours per day of care.
- Service limit is up to 336 hours per calendar year.
- This service is only to avoid placements for which the Medi-Cal managed care plan would be responsible.

Personal Care & Homemaker Services

Eligibility Criteria

- Individuals at risk for hospitalization, or institutionalization in a nursing facility.
- Individuals with functional deficits and no other adequate support system.
- Individuals approved for In-Home Supportive Services. Eligibility criteria can be found at: <http://www.cdss.ca.gov/In-Home-Supportive-Services>.

Restrictions and Limitations

- This service cannot be utilized in lieu of referring to the In-Home Supportive Services program. Member must be referred to the In-Home Supportive Services program when they meet referral criteria.
- 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.