



California's protection & advocacy system

Medi-Cal Programs to Help You Stay in Your Own Home or Leave a Nursing Home

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There are a number of different programs in California that can help individuals with disabilities and/or seniors who receive Medi-Cal remain in their homes, or help them return home from a long-term care facility (including hospitals, nursing homes, and other medical facilities). This publication provides an overview of these programs, but if you need assistance getting services, you can contact Disability Rights California toll free at (800) 776-5746 or TTY: (800) 719-5798. You can also visit our website at www.disabilityrightsca.org.

How Can I Get Help With Daily Care Needs at Home?

The main Medi-Cal program that provides attendant care to help people with disabilities with personal care, cleaning, errands, and meals is **In-Home Supportive Services (IHSS)**. IHSS is designed to help low-income people with disabilities of all ages live safely in their own homes if they wish to do so, rather than in a nursing home or other group care facility. IHSS pays for a wide variety of home-based services performed by attendant care workers, including non-medical personal care such as bathing, grooming, feeding, dressing or toilet assistance. It also pays for other services such as cleaning, laundry, shopping, cooking and washing dishes. IHSS can fund “paramedical services” with a doctor’s authorization, and can provide transportation to and from medical and other necessary appointments. Most people find and hire their own attendants (including family members under some circumstances), but in some counties, agencies may be able to arrange for IHSS attendant care. For more

information about IHSS, see DRC's publication In-Home Supportive Services: Nuts and Bolts Manual at [click here for the IHSS Manual](#) or the California Department of Social Services website at [click here for their In-Home Supportive Services \(IHSS\) Program webpage](#).

Another option for people over age 55 who are eligible for Medi-Cal and Medicare and would qualify for placement in a nursing facility is the **Program of All Inclusive care for the Elderly (PACE)**. PACE provides coverage for all needed preventive, primary, acute and long-term care services including prescription drugs, doctor medical care, transportation, home care, checkups, hospital visits, and even nursing home stays whenever necessary. When enrolled in PACE, you work with PACE providers and you cannot get IHSS (although PACE offers some home care services). PACE is not available in all parts of California. For more information, see the California Department of Health Care Services website at: [click here for their Program of All-Inclusive Care for the Elderly \(PACE\) webpage](#).

What if I Need More than Attendant Care (like nursing care or residential care)?

California also operates several **Home and Community-Based (HCBS) Waivers** which are special Medi-Cal programs that waive certain Medi-Cal rules so that people can live at home instead of living in a facility.

There are a variety of different HCBS Waivers in California including: Acquired Immune Deficiency Syndrome (AIDS) Waiver; Assisted Living Waiver (ALW); Home and Community-Based Services Waiver for the Developmentally Disabled (HCBS-DD); the Home and Community-Based (HCB) Alternatives Waiver (formerly known as the Nursing Facility/Acute Hospital (NF/AH) Waiver); and the Multi-Purpose Senior Services Waiver (MSSP). These Waivers are described below:

Assisted Living Waiver (ALW): The Assisted Living Waiver is a Medi-Cal program that pays for assisted living, care coordination and other benefits provided to eligible seniors and persons with disabilities who qualify for placement in a nursing facility. ALW services are available in Alameda, Contra Costa, Fresno, Kern, Los Angeles, Orange, Riverside, Sacramento,

San Bernardino, San Diego, San Francisco, San Joaquin, San Mateo, Santa Clara, and Sonoma counties. Individuals receive services in participating Residential Care Facilities (RCFs), Residential Care Facilities for the Elderly (RCFEs) or in publicly subsidized housing.

For more information about this waiver, you can visit [the 'Assisted Living Waiver' page on DHCS' website by clicking here](#).

Home and Community Based Alternatives (HCB Alternatives) Waiver (formerly the Nursing Facility/Acute Hospital Waiver): The HCB Alternatives Waiver provides in-home shift nursing care, attendant care, habilitation, case management, and other services to individuals who qualify for placement in Medi-Cal facilities such as nursing facilities, subacute facilities, Intermediate Care Facilities for Individuals with Intellectual Disabilities/Continuous Nursing (ICF/DD-CN), or acute hospitals. This program is available statewide and has been administered directly by the Department of Health Care Services – In Home Operations division. Starting in 2018, DHCS will begin to contract with community-based Waiver Agencies to provide assessments and case management. For more information about the HCB Alternatives Waiver see DHCS web pages at: [click here for the Home and Community-Based Alternatives \(HCBA\) Waiver page](#) and [click here for the In-Home Operations \(IHO\) Waiver page](#). DRC also has a fact sheet about the HCB Alternatives Waiver, available at: [click here for the fact sheet](#).

Multipurpose Senior Services Program (MSSP): The MSSP Waiver provides Home and Community-Based Services (HCBS) to Medi-Cal eligible individuals who are 65 years or older and disabled, as an alternative to nursing facility placement. MSSP provides community-based case management, linkages to other needed services, and can fund or purchase some services needed to help participants remain in their homes. MSSP is available in almost all parts of the state. For more information, including the MSSP program contact information by county, see the California Department of Aging website at: [click here for the Multipurpose Senior Services Program webpage](#) or DRC's MSSP publication at: [click here for DRC's "The Multipurpose Senior Services Program may be the Answer to Staying at Home Rather than Going to a Nursing Home" publication](#).

Home and Community-Based Services Waiver for the Developmentally Disabled (HCB-DD Waiver): The DD Waiver funds many of the home and community based services available for people with developmental disabilities through California's regional centers. For more information generally about regional center services, see the California Department of Developmental Services website at: [click here for their Information About Regional Centers webpage](#) or DRC's publication, Rights Under the Lanterman Act, at: [click here for the RULA - Rights Under The Lanterman Act - Complete Manual](#).

Acquired Immune Deficiency Syndrome (AIDS) Waiver: The AIDS Waiver serves Medi-Cal eligible children and adults with HIV disease or AIDS who qualify for placement in a nursing facility. Available services include: case management, skilled nursing, attendant care, psychotherapy, home-delivered meals, nutritional counseling, nutritional supplements, medical equipment and supplies, minor physical adaptations to the home, non-emergency medical transportation, and financial supplements for foster care. There are 20 AIDS Waiver providers in the state. Here is the current list of providers: [click here for the PDF list of Medi-Cal Waiver Program Providers from the CA Department of Public Health - Office of AIDS, HIV Care Branch](#). For more information, go to the California Department of Health Care Services website at: [click for their AIDS Medi-Cal Waiver Program webpage](#). DRC also has a fact sheet about the AIDS Waiver: [click here for the publication titled "How the AIDS Medi-Cal Waiver Can Help You Get the Care You Need At Home"](#).

Who Can Help Me Get Home from a Nursing Facility?

If you need help to get out of a medical facility, the **California Community Transitions (CCT)** program can help you do that. The CCT is available for Medi-Cal eligible individuals who have resided in a hospital or nursing facility for at least 90 days. The CCT can help to find a place to live and make sure that home care, furniture, and utilities are ready for you to come home. The CCT is not available in all counties. For more information, see the California Department of Health Care Services website at: [click here for their California Community Transitions Project webpage](#), or DRC's publication at: [click for the publication titled "The California Community](#)

[Transitions \(CCT\) Program: A Way for a Nursing Home Resident to Return to the Community](#)".

Note that the HCB Alternatives Waiver, described above, also can provide Transitional Case Management and Community Transition services to help you find housing and pay for things like security deposits and utility setup.

How Can I Get Out-of-Home Help During the Day?

Community Based Adult Services (CBAS) is a licensed program that offers daytime health and other services at centers throughout the state. Also known as Adult Day Health Care, CBAS is available for adults with disabilities who would otherwise qualify for nursing facility care, or have chronic conditions that meet entrance criteria (e.g., dementia, mental health diagnosis). Services provided at CBAS programs include: professional nursing services; physical, occupational and speech therapies; mental health services; therapeutic activities; social services; personal care; hot meals and nutritional counseling; and transportation to and from the participant's residence. For more information about CBAS, including how to find a program near you, see the California Department of Aging website at: [click here for their CBAS/ADHC - Community-Based Adult Services/Adult Day Health Care webpage](#) and [click further for the Program Overview webpage](#).

In addition, PACE programs (described above), typically offer adult day health care as a part of their program. [Click here for the 'Program of All-Inclusive Care for the Elderly \(PACE\)' page on the DHCS website](#).

How Can I Get Community Based Mental Health Services?

Your primary care physician or other physical health care provider can provide mental health services to you if you both agree. In addition, "specialty mental health services" are services that are provided by mental health specialists, such as psychiatrists, psychologists, licensed clinical social workers (LCSWs), licensed marriage and family therapists (MFTs), psychiatric technicians, or peer support providers. Specialty mental health services are provided to Medi-Cal beneficiaries through Medi-Cal Mental Health Plans (MHPs). All of the MHPs are part of county mental health or behavioral health departments. The MHP can provide services through its

own employees, or through contract providers. For more information about specialty mental health services, see DRC's publication at: [click here for the publication titled "Getting Medi-Cal Outpatient Specialty Mental Health Services"](#).

What if I Have a Medi-Cal Share of Cost that Makes Home Care Too Expensive?

If you are eligible for Medi-Cal but you have a Share of Cost (SOC), you can use that share of cost to pay for home and community based services, including personal care services, that you need to move home or remain at home. The California Department of Health Care Services (DHCS) has issued guidance about this as All County Welfare Director's Letter 15-02, available at: [click here for that letter](#). For more information, see DRC's publication on this topic at: [click for the publication titled "How Can I Use My Share of Cost to Get More Services I need?"](#).

If I Am Married and Disabled, How Can I Get Medi-Cal Services At Home and Not Just in Nursing Facility?

Until recently, Medicaid law has used more generous income rules for Medicaid eligibility for married couples when one spouse becomes disabled and goes to a nursing facility. This is intended to prevent the community spouse from becoming impoverished in order to pay for care for the disabled spouse. These rules also applied when the disabled spouse is on a HCBS Waiver. The Affordable Care Act extended these "spousal impoverishment" rules to couples in which one spouse meets nursing facility level of care but is (and wants to) remain in the community. Applying these rules enables married individuals to receive community-based Medi-Cal services like IHSS, CBAS, etc. Even though this has been required under federal law since January 1, 2014, the state just issued a letter implementing the law. There are many details to be worked out, but this is definitely a step in the right direction. The letter is here: [click for DHCS' All County Welfare Director's Letter 17-25](#).

What Happens to My Home While I Am in a Nursing Facility?

The home upkeep allowance is a Medi-Cal deduction for qualifying Medi-Cal beneficiaries who are living in, or will be living in, a nursing home or other medical facility. The home upkeep allowance currently allows beneficiaries to keep \$209 per month of their monthly income for maintenance and upkeep of their homes while they are temporarily residing in the nursing home other medical facility. The home upkeep allowance can be accessed for up to a six-month period from the date the beneficiary enters the nursing home. To qualify for the home upkeep allowance, a beneficiary must meet all of the following requirements:

- Intend to leave the nursing facility and to return home within six months of the date the individual begins living in the nursing home;
- Obtain a written medical statement from the individual's doctor certifying that he or she will be able to return home within six months;
- The spouse or family of the individual must not live in the home; and
- The home must be maintained for the individual's return.

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