

SSI/SSP Personal and Real Property

583 MPP30-755.113 You have disposed of resources for less than fair market value. This makes you ineligible for IHSS for the period _____ through _____.

584 MPP 30-773 You have personal and/or real property in excess of SSI/SSP standards which are listed below:

Property	SSI/SSP Standard
----------	------------------

Intercounty Transfer

585 W&IC 11102 You have moved to a different county and will continue to receive services from the county of _____ effective _____.

586 We will continue to authorize services as your eligibility for In-Home Services has been transferred from the county of _____ effective _____. W&IC 11102

California Residence

588 MPP 30-770.4 You are absent from the State of California and it appears you no longer intend to maintain California State residency. You have indicated your intent to reside outside the State of California by _____.

589 MPP 30-770.4 You have been continuously absent from the State of California for more than 60 days and it appears you no longer intend to maintain California State residency. You have indicated your intent to reside outside the State of California by _____.

Personal Care Services Program

593 You are not eligible for IHSS program services because you are eligible for those services under the Personal Care Services Program (PCSP). You are not authorized to receive PCSP services, even though you are eligible, because you have failed to complete the provider enrollment/certification by the due date _____ as required by PCSP. MPP 30-757.1, MPP 30-760.15, CCR 51204 and WIC 14132.95(a)(3)

594 You can no longer receive services under the Personal Care Services Program (PCSP) because you have elected to receive IHSS advance payments. However, you may be eligible for services under the IHSS program. MPP 30-780.4

Note: This notice relates ONLY to your Social Services.
It does NOT affect your receipt of SSI/SSP, Social Security or Medi-Cal.

- (A) **IHSS PLUS WAIVER**
- (B) **PERSONAL CARE SERVICES PROGRAM**

Your IHSS calculated share of cost is shown on the front of your attached In-Home Supportive Services (IHSS) Notice of Action. You are eligible for a share of cost comparison between your IHSS share of cost and Medi-Cal share of cost and are only responsible for the lower share-of-cost amount. You should have received a Medi-Cal Notice of Action identifying your Medi-Cal share of cost amount.

- If your Medi-Cal share of cost is greater than your IHSS share of cost, the California Department of Social Services will pay your Medi-Cal recognized expenses equal to the difference between the two shares of cost to reduce your Medi-Cal share of cost obligation to the amount of your IHSS share of cost.
- If your Medi-Cal share of cost is less than your IHSS share of cost, then you are only responsible for obligating the amount of your Medi-Cal share of cost.

When your IHSS provider's timesheet is processed for payment, any share of cost that you have not obligated for Medi-Cal approved services will be deducted from your provider's pay warrant(s). Both you and your provider(s) will receive an "Explanation of IHSS Share of Cost" letter for each pay period telling you the amount you must pay to your provider.

(c) **IHSS-RESIDUAL**

Your IHSS share of cost is shown on the front of your attached In-Home Supportive Services (IHSS) Notice of Action. It is your responsibility to pay your IHSS share of cost amount directly to your provider. This IHSS share of cost amount will be deducted from your provider's pay warrant(s) until your IHSS share of cost amount has been met.

If you are eligible for Medi-Cal and have a Medi-Cal share of cost, you can take proof of payment for the IHSS share of cost you have paid to your provider to your county Medi-Cal office to reduce your Medi-Cal share of cost obligation. For further information on how to apply these expenses, please contact your county Medi-Cal Eligibility Worker.

XIV. Reason Code 999

Notice of Action code 999 is a worker generated code used to adjust or manually change hours rather than accepting the system generated prorated hours in a prorated month. An example would be if the worker wants to approve payment for all the authorized hours for a month that is prorated.

There are two requirements when adjusting/manually changing hours.

- Manual changes or adjustments can only be made on a prorated segment on a case in T or L status
- A manual change or adjustment of hours cannot be more than the total hours displayed in field aa5. For example, if the hours displayed in field aa5 are 50.00, 51.00 hours may not be assigned to the eligibility segment.

A. To change the hours on a T or L Status case with a prorated M line segment:

1. Access the RELC screen in a “C” change mode.
2. Tab to field ZZ2, RSN CD, enter Reason Code **999**.
3. Tab to field aa6 and enter the desired hours. For example, if the current hours displayed are 25.00 and 50.00 hours are required, key in 50.00.
4. Press <Enter> to process through all screens until RELA presents in “I” mode.
5. The hours in field M5 on the RELB screen will be updated with the adjustment.

B. To change the hours for a prorated N or O line segment:

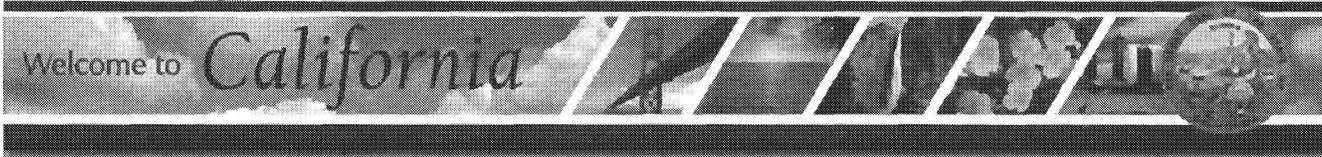
1. Access RELB screen in the “C” Change mode.
2. Tab to the SEGMENT NUMBER field.
3. Enter 2, to access the N line segment or 3, to access the O line segment, press <Enter>. The RELC grid for the N or O segment will be displayed.
4. Tab to field ZZ2 and enter Reason Code **999**.
5. Tab to field aa6 and key in the desired hours, press <Enter> until RELA presents in “I” mode.
6. Field N5 or O5 on the RELB screen will be updated with the adjustment.

PROGRAMS/SERVICES THAT INTERACT WITH IHSS

The following programs provide services that are identical or similar to those provided by IHSS. They are all publicly funded with a combination of federal, state and/or county funding. Help provided by other agencies, churches, family or friends are Alternative Resources to IHSS to the extent that they meet the needs of a consumer that IHSS would otherwise provide. However, if other agencies, churches, family or friends provide assistance to a consumer that IHSS would not provide (such as paying bills or taking the consumer to a movie), there is no impact to IHSS.

Program/Service	Sponsor/Funder	IHSS Treatment	Authority for Exemption
Adult Day Health Care (ADHC)	California Department of Aging (CDA) and local site	Services they provide are Alternative Resources to IHSS.	N/A
AIDS Waiver	California Department of Health Care Services (CDHCS)	IHSS authorization not impacted by these services.	ACL
Alzheimer's Day Care Resource Centers (ADCRC)	CDA and local site	Services they provide are Alternative Resources to IHSS.	N/A
Early Periodic Screening, Diagnosis and Treatment (EPSDT)	CDHCS	If the IHSS is provided by the EPSDT provider, EPSDT services are considered an Alternative Resource to IHSS.	ACL 02-43
Home Health Agency care	Medi-Cal and/or Medicare	Services they provide are Alternative Resources to IHSS.	N/A
In-Home Operations (IHO) Waiver	CDHCS	IHSS authorization not impacted by these services; IHO augments them.	ACL
Linkages	CDA and local site	N/A – Linkages provides case management services.	N/A
Institutional Deeming Waiver	Department of Developmental Services (DDS) and local Regional Centers	IHSS eligibility available to anyone certified under this waiver, regardless of income and resources. IHSS authorization not impacted by these services.	MPP 30-780.2 and MPP 30-785(b)(2)(B); DHS regulation section 51350(b) and ACL 98-53

Program/Service	Sponsor/Funder	IHSS Treatment	Authority for Exemption
Meals on Wheels	CDA, California Area Agencies on Aging (AAA) and local organization	Services they provide are Alternative Resources to IHSS meal preparation and, to some extent, shopping.	N/A
Multipurpose Senior Services Program (MSSP)	CDA and local site	IHSS authorization not impacted by these services.	ACL
Regional Center Services	DDS and local Regional Centers	IHSS authorization not impacted by these services.	ACL 98-53



- [Home](#)
- [About CDA](#)
- [Services and Programs](#)
- [What's New](#)
- [Statistics and Demographics](#)
- [Laws and Regulations](#)
- [Career Opportunities With CDA](#)
- [Doing Business With CDA](#)

California Area Agencies on Aging (AAA)

Area Agencies on Aging - Listed by County

The California Department of Aging contracts with and provides leadership and direction to Area Agencies on Aging (AAA) that coordinate a wide array of services to seniors and adults with disabilities at the community level and serve as the focal point for local aging concerns.

You can locate a AAA in your area by calling 1-800-510-2020 or find your county phone number below:

Quick Index: [A](#) [B](#) [C](#) [D](#) [E](#) [F](#) [G](#) [H](#) [I](#) [K](#) [L](#) [M](#) [N](#) [O](#) [P](#) [R](#) [S](#) [T](#) [V](#) [Y](#)

Alameda	(510) 567-8040
Alpine	(209) 532-6272
Amador	(209) 532-6272
Butte	(530) 898-5923
Calaveras	(209) 532-6272
Colusa	(530) 898-5923
Contra Costa	(925) 335-8700
Del Norte	(707) 442-3763
El Dorado	(530) 621-6150
Fresno	(559) 488-3821
Glenn	(530) 898-5923
Humboldt	(707) 442-3763
Imperial	(760) 339-6450
Inyo	(760) 873-6364
Kern	(661) 868-1000
Kings	(559) 582-3211, ext. 2824
Lake	(707) 463-7902
Lassen	(530) 842-1687
Los Angeles (City)	(213) 252-4000
Los Angeles (County)	(213) 738-4004
Madera	(559) 488-3821
Marin	(415) 499-7396
Mariposa	(209) 532-6272
Mendocino	(707) 463-7902
Merced	(209) 385-7550
Modoc	(530) 842-1687
Mono	(760) 873-6364
Monterey	(831) 755-8490

My CA

Californians, for information on services in your area for seniors or adults with disabilities, call toll-free:

1-800-510-2020

Outside California, call the toll-free Eldercare Locator service at 1-800-677-1116

AAA Personnel Only:

- [AAA Partners Index](#)



<u>Napa</u>	(707) 644-6612
<u>Nevada</u>	(916) 486-1876
<u>Orange</u>	(714) 567-7555
<u>Placer</u>	(916) 486-1876
<u>Plumas</u>	(530) 898-5923
<u>Riverside</u>	(951) 697-4697
<u>Sacramento</u>	(916) 486-1876
<u>San Benito</u>	(831) 688-0400
<u>San Bernardino</u>	(909) 891-3900
<u>San Diego</u>	(858) 495-5885
<u>San Francisco</u>	(415) 355-3555
<u>San Joaquin</u>	(209) 468-2202
<u>San Luis Obispo</u>	(805) 925-9554
<u>San Mateo</u>	(650) 573-2700
<u>Santa Barbara</u>	(805) 925-9554
<u>Santa Clara</u>	(408) 296-8290
<u>Santa Cruz</u>	(831) 688-0400
<u>Shasta</u>	(530) 842-1687
<u>Sierra</u>	(916) 486-1876
<u>Siskiyou</u>	(530) 842-1687
<u>Solano</u>	(707) 644-6612
<u>Sonoma</u>	(707) 565-5950
<u>Stanislaus</u>	(209) 558-8698
<u>Sutter</u>	(916) 486-1876
<u>Tehama</u>	(530) 898-5923
<u>Trinity</u>	(530) 842-1687
<u>Tulare</u>	(559) 730-2553 or (800) 321-2462
<u>Tuolumne</u>	(209) 532-6272
<u>Ventura</u>	(805) 477-7300
<u>Yolo</u>	(916) 486-1876
<u>Yuba</u>	(916) 486-1876

Last updated: January 28, 2004.

[Back to Top of Page](#)

[Conditions of Use](#) | [Privacy Policy](#) | [E-Mail CDA Webmaster](#)

© 2006 State of California.

California Home

Friday, October 19, 2007

[Home](#)[About CDA](#)[Services and Programs](#)[What's New](#)[Statistics and Demographics](#)[Laws and Regulations](#)[Career Opportunities With CDA](#)[Doing Business With CDA](#)

Multipurpose Senior Services Program

Local Multipurpose Senior Service Program (MSSP) sites provide social and health care management for frail elderly clients who are certifiable for placement in a nursing facility but who wish to remain in the community. The goal of the program is to arrange for and monitor the use of community services to prevent or delay premature institutional placement of these frail clients. The services must be provided at a cost lower than that for nursing facility care.

Clients eligible for the program must be 65 years of age or older, live within a site's service area, be able to be served within MSSP's cost limitations, be appropriate for care management services, currently eligible for Medi-Cal, and certified or certifiable for placement in a nursing facility. MSSP site staff make this certification determination based upon Medi-Cal criteria for placement.

Under a federal Medicaid Home and Community-Based, Long Term Care Services Waiver, MSSP provides comprehensive care management to assist frail elderly persons to remain at home. The program, which began in 1977 with eight sites, has expanded to 41 sites statewide and can serve up to 11,789 clients per month.

The services that may be provided with MSSP funds include:

Adult Day Care / Support Center: Community-based programs that provide non-medical care to meet the needs of adults with disabilities; a variety of social, psychosocial, and related support services in a protective setting, necessary to reach a therapeutic goal.

Housing Assistance: May include provision of physical adaptations and assistive devices, emergency assistance in situations that demand relocation, temporary lodging expenses in particular situations, and assistance to restore utility services.

Chore and Personal Care Assistance: Services are provided by individuals to elderly persons who need outside help to maintain independent living. **Chore** is for purposes of household support and applies to the performance of household tasks rather than to the care of the client. **Personal Care** provides assistance to maintain bodily hygiene, personal safety, and activities of daily living.

Protective Supervision: Insures provision of supervision to persons in their own homes who are very frail or otherwise may suffer a medical emergency. Such supervision does not require medical skills and can be performed by an individual trained to identify the onset of a medical crisis and able to summon aid in the event of an emergency.

Care Management: Assists clients in gaining access to needed waiver and other local services regardless of the funding source. Care managers are responsible for ongoing monitoring of the provision of services included in the client's plan of care. Additionally, care managers initiate and oversee the process of assessment and reassessment of a client's level of care and the monthly review of plans of care.

Respite: Includes the supervision and care of a client while the family or other individuals who normally provide full-time care take short-term relief or respite which allows them to continue as caretakers.

Transportation: Provides access to the community (e.g., non-emergency medical transportation to health and social service providers) and special events for clients who do not have means for transportation.

Meal Services: Includes meals served in congregate settings or meals

 My CA

Californians, for information on services in your area for seniors or adults with disabilities, call toll-free:

1-800-510-2020

Outside California, call the toll-free Eldercare Locator service at 1-800-677-1116

Related Links

- [MSSP Sites](#)
- [MSSP Program Memos](#)

delivered to clients who are homebound, unable to prepare their own meals and have no caretaker at home to prepare meals for them.

Social Services: Includes social reassurance / friendly visiting, individual or group counseling, and money management.

Communications Services: Includes translation and interpretive services and the provision of emergency response systems.

Frequently Asked Questions

[Back to Top of Page](#)

- **My father is only 63 years old, but otherwise he seems to meet the other requirements for MSSP. Can MSSP still help? If not, what do I do now?**

Since you must be at least age 65 to enroll in MSSP, your father wouldn't be eligible for this program at this time. Your local Area Agency on Aging (AAA) can provide information and refer you to other services in your father's community. The local AAA is listed in the telephone business white pages, or call 1-800-510-2020 for the AAA nearest his home.

- **What does it mean to be "certifiable for nursing facility placement?" I don't want to have to go into a nursing home.**

Being "certifiable" or "eligible" for nursing facility placement just means that you have disabilities that would qualify you to be in a nursing facility - it does not mean that you have to go into a nursing facility. A nurse who works for MSSP makes the certification. The goal of MSSP services is to see that people get the help they need to stay in their own homes as long as possible.

- **Why do you have to be on Medi-Cal to be on MSSP?**

The Medi-Cal program funds MSSP, so all enrollees of MSSP have to meet Medi-Cal eligibility criteria.

- **If I was to enroll in the MSSP program, could I still keep my In-Home Supportive Services caregiver?**

Yes, you can keep your same In-Home Support Services caregiver, as In-Home Supportive Services is a separate program from MSSP.

- **What if I need a service not covered by MSSP?**

There is no guarantee that MSSP will be able to pay for every service you need. When a need is identified, the first option is always to check whether family or friends can help. If these resources can't address your needs, then we look to other agencies in your community that have programs for which you might be able to qualify (e.g., In-Home Supportive Services, Meals on Wheels, etc.). MSSP will only consider spending its program funds once these additional sources of help are explored. This determination is based on several factors, including the type of service (only a few things can be paid for by MSSP), the availability of the service in your local area, and your willingness to participate in the program.

[Back to Top of Page](#)

[Conditions of Use](#) | [Privacy Policy](#) | [E-Mail CDA Webmaster](#)

© 2006 State of California.

6



[Home](#)

[About CDA](#)

[Services and Programs](#)

[What's New](#)

[Statistics and Demographics](#)

[Laws and Regulations](#)

[Career Opportunities With CDA](#)

[Doing Business With CDA](#)



Multipurpose Senior Services Program Contacts (By County)

Alameda County	City of Oakland Department of Human Services (City of Oakland only)	(510) 238-3762
	City of Fremont Human Services Department	(510) 574-2050
Alpine County	Area 12 Agency on Aging	(209) 532-6272
Amador County	Area 12 Agency on Aging	(209) 532-6272
Butte County	California State University--Chico	(530) 898-5082
Calaveras County	Area 12 Agency on Aging	(209) 532-6272
Contra Costa County	Office on Aging	(925) 335-8710
El Dorado County	Department of Human Services	530-621-6369
Fresno County	Fresno-Madera Area Agency on Aging	(559) 453-6494
Glenn County	California State University--Chico	(530) 898-5082
Humboldt County	Humboldt Senior Resource Center	(707) 443-9747
Imperial County	Work Training Center, Inc.	(760) 352-6181
Inyo County	Inyo-Mono Area Agency on Aging	(760) 873-6364
Kern County	Aging and Adult Services	800-510-2020 or 661-868-1000
Kings County	Kings-Tulare Area Agency on Aging	(559) 730-9921
Lake County	Community Care Mgmt. Corp.	(707) 995-7010
Lassen County	Golden Umbrella	(530) 226-3097
Los Angeles City	Jewish Family Service of LA	(323) 937-5930
	SCAN Independence at Home	(562) 492-9878
Los Angeles City/County	Altamed Health Services Corp.	877-462-2582
Los Angeles County	Huntington Hospital	(626) 397-3110
	Human Services Association	(562) 806-5400
	Partners in Care Foundation	(818) 526-1780
	Partners in Care Foundation--South	(310) 632-9980
Madera County	Fresno-Madera Area Agency on Aging	(559) 453-6494
Marin County	Jewish Family and Children Services	(415) 491-7960
Mariposa County	Area 12 Agency on Aging	(209) 532-6272
Mendocino County	Community Care Management Corp.	(707) 468-9347 (Ukiah)
		(707) 964-4027 (Fort Bragg)
Merced County	Human Services Agency	(209) 385-3000
Modoc County	Golden Umbrella	(530) 226-3097
Mono County	Inyo-Mono Area Agency on Aging	(760) 873-6364
Monterey County	Department of Social and	(831) 755-3403

My CA

Californians, for information on services in your area for seniors or adults with disabilities, call toll-free: 1-800-510-2020

Outside California, call the toll-free Eldercare Locator service at 1-800-677-1116

Related Links

- Return to: [MSSP Program](#)

	Employment Services	
Napa County	Area Agency on Aging	(707) 644-6612
Orange County	Social Services Agency	(714) 825-3000
	CalOptima	(888) 587-8088 (714) 246-8400
Placer County	UC Davis Care Management	(916) 734-5432
Riverside County	Office on Aging	951-867-3800
Sacramento County	UC Davis Care Management	(916) 734-5432
San Bernardino County	Aging and Adult Services	909-891-9115
San Diego County	Aging and Independent Services	(800) 339-4661 (toll free) (800) 510-2020 (San Diego Co.)
San Francisco County	Institute on Aging	(415) 750-4150
San Joaquin County	Department of Aging	(209) 468-2202
San Mateo County	Department of Health Services	(650) 573-3900
Santa Barbara County	MSSP Unit	(805) 346-8385
Santa Clara County	Council on Aging of Silicon Valley	(408) 296-8290
Santa Cruz County	Human Resources Agency	(831) 454-4600
Shasta County	Golden Umbrella	(530) 226-3097
Siskiyou County	Golden Umbrella	(530) 226-3097
Solano County	Area Agency on Aging	(707) 643-5170
Sonoma County	Area Agency on Aging	(707) 565-5970
Stanislaus County	Department of Social Services	(209) 558-2233
Tehama County	California State University--Chico	(530) 898-5082
Trinity County	Golden Umbrella	(530) 226-3097
Tulare County	Kings-Tulare Area Agency on Aging	(559) 730-9921
Tuolumne County	Area 12 Agency on Aging	(209) 532-6272
Ventura County	Area Agency on Aging	(805) 477-7300
Yolo County	UC Davis Care Management	(916) 734-5432
Yuba County	Health and Human Services	530-749-6471

The following counties do not have Multipurpose Senior Service Programs (MSSP) at present: Colusa, Del Norte, Nevada, Plumas, San Benito, San Luis Obispo, Sierra and Sutter.

For more information on other senior services in your county, call **1-800-510-2020**.

Last Modified: May 2005

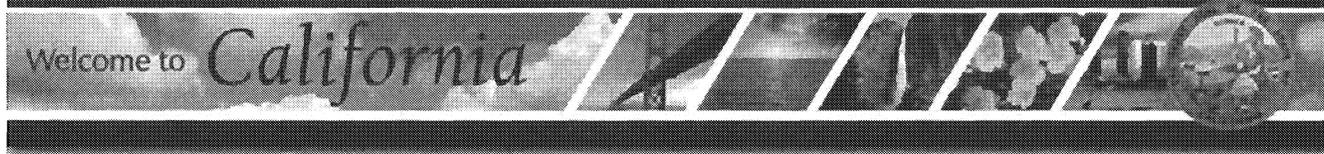
[Back to Top of Page](#)

[Conditions of Use](#) | [Privacy Policy](#) | [E-Mail CDA Webmaster](#)

© 2006 State of California.

California Home

Friday, October 19, 2007

[Home](#)[About CDA](#)[Services and Programs](#)[What's New](#)[Statistics and Demographics](#)[Laws and Regulations](#)[Career Opportunities With CDA](#)[Doing Business With CDA](#)

Linkages Program - (800) 510-2020

The goals of the Linkages Program are to:

- help frail elderly adults and adults with disabilities, age 18 years and older, remain in their homes,
- maximize their independence, and
- reduce the need for more costly out-of-home care.

The program accomplishes these goals by providing comprehensive care management. It is designed to help "fill in the gaps" by serving individuals who are not eligible for other care management programs. There are no income criteria for clients but they must have some difficulty with completing their daily activities to qualify for the program.

Linkages staff take a holistic approach in addressing client needs. The Linkages care manager begins assisting the client by completing an in-depth assessment of each person's situation in the home. Based on that assessment, the client, the family, and the care manager decide what the client needs and make a plan to meet those needs. This plan may include linking the individuals and their families to existing community services, such as:

- transportation
- meals
- in-home care
- housing assistance
- adult day care programs

The plan may also focus on obtaining adaptive devices, such as ramps, bath benches, medi-sets, and grab bars. Assistance, such as home repairs, counseling, or telephone reassurance, may be arranged to help Linkages clients remain independent.

Care managers follow up on the plan with the client on at least a monthly basis. This follow-up is provided to make sure the client is satisfied with the assistance received and to identify new needs. The care manager visits each client at least every three months.

There are 36 Linkages sites located throughout California. Each site serves approximately 100 elderly adults or adults with disabilities.

[Back to Top of Page](#)[Conditions of Use](#) | [Privacy Policy](#) | [E-Mail CDA Webmaster](#)

© 2006 State of California.

 My CA

Californians, for information on services in your area for seniors or adults with disabilities, call toll-free:

1-800-510-2020

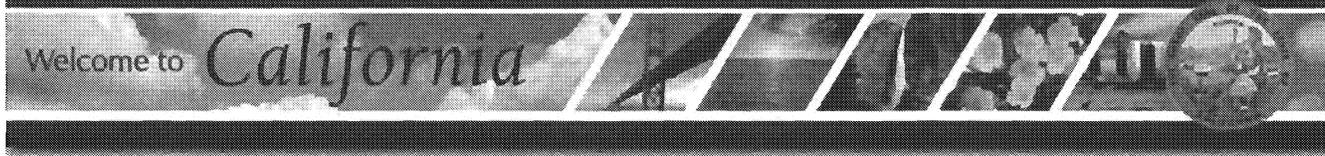
Outside California, call the toll-free Eldercare Locator service at 1-800-677-1116

Related Links

- [Linkages Contacts](#)
- [Aging Related Links](#)

California Home

Friday, October 19, 2007



[Home](#)

[About CDA](#)

[Services and Programs](#)

[What's New](#)

[Statistics and Demographics](#)

[Laws and Regulations](#)

[Career Opportunities With CDA](#)

[Doing Business With CDA](#)



Linkages Program - (800) 510-2020

County	Center
Alameda	City of Oakland, Aging, Health & Human Services
Alpine	Area 12 Agency on Aging
Amador	Area 12 Agency on Aging
Butte	Passages Adult Resource Center
Calaveras	Area 12 Agency on Aging
Colusa	Not available
Contra Costa	Contra Costa Office on Aging
Del Norte	Humboldt Senior Resources Center
El Dorado	El Dorado County Community Services
Fresno	Fresno-Madera Area Agency on Aging
Glen	Not available
Humboldt	Humboldt Senior Resources Center
Imperial	Imperial County Work Training Center
Inyo	Inyo-Mono Area Agency on Aging
Kern	Around The Clock Linkages
Kings	Kings-Tulare Area Agency on Aging
Lake	Community Care Management Corporation
Lassen	Golden Umbrella
Los Angeles City	Jewish Family Services of LA
Los Angeles County	Altamed Health Services Corp. Huntington Memorial Hospital Senior Care Action Network Health Plan, Inc.
Madera	Fresno-Madera Area Agency on Aging
Marin	Jewish Family and Children Services
Mariposa	Area 12 Agency on Aging
Mendocino	Community Care Management Corporation
Merced	Human Services Agency, Adult Services
Modoc	Golden Umbrella
Mono	Inyo-Mono Area Agency on Aging
Monterey	Area Agency on Aging Division
Napa	Agency on Aging
Orange	Council on Aging
Placer	UC Davis Care Management
Plumas	Not available
Riverside	Riverside County Office of Aging

My CA

Californians, for information on services in your area for seniors or adults with disabilities, call toll-free:

1-800-510-2020

Outside California, call the toll-free Eldercare Locator service at 1-800-677-1116

Related Links

- Return to: [Linkages Program](#)

Sacramento	UC Davis Care Management
San Benito	Jovenes de Antano
San Bernardino	Department of Aging and Adult Services
San Diego	San Diego County Aging & Independent Services
San Francisco	Goldman Institute on Aging
San Joaquin	San Joaquin County - Human Services Agency, Department of Aging
San Luis Obispo	Life Steps Foundation, Inc.
San Mateo	County of San Mateo, Aging and Adult Services
Santa Barbara	Life Steps Foundation, Inc.
Santa Clara	Council on Aging of Santa Clara County, Inc.
Santa Cruz	Senior Network Services
Shasta	Golden Umbrella
Siskiyou	Golden Umbrella
Solano	Agency on Aging
Sonoma	Sonoma County Area Agency on Aging
Stanislaus	Center for Senior Employment
Tehama	Not available
Trinity	Golden Umbrella
Tulare	Kings-Tulare Area Agency on Aging
Tuolumne	Area 12 Agency on Aging
Ventura	Ventura County Area Agency on Aging
Yolo	UC Davis Care Management

Last updated: April 14, 2003.

[Back to Top of Page](#)

[Conditions of Use](#) | [Privacy Policy](#) | [E-Mail CDA Webmaster](#)

© 2006 State of California.



Home

About CDA

Services and Programs

What's New

Statistics and Demographics

Laws and Regulations

Career Opportunities With CDA

Doing Business With CDA



Services and Programs

Adult Day Health Care

(916) 419-7545

Adult Day Health Care (ADHC) is a licensed community-based day care program providing a variety of health, therapeutic, and social services to those at risk of being placed in a nursing home. Currently, over 300 centers exist in many urban and rural areas of the state.

The centers are licensed by the California Department of Health Services. The Department of Aging's role is to administer the program and certify each center for Medi-Cal reimbursement.

The primary objectives of the program are to:

- Restore or maintain optimal capacity for self-care to frail elderly persons and other adults with physical or mental disabilities; and
- Delay or prevent inappropriate or personally undesirable institutionalization.

The program stresses partnership with the participant, the family, the physician, and the community in working towards maintaining personal independence. In some situations, individuals already institutionalized may be placed back in the community with ADHC assistance and support services.

Each ADHC location has a multidisciplinary team of health professionals who conduct a comprehensive assessment of each potential participant to determine and plan the ADHC services needed to meet the individual's specific health and social needs. Services provided at the center include: medical services; nursing services; physical, occupational and speech therapy; psychiatric and psychological services; social services; planned recreational and social activities; hot meal and nutritional counseling; and transportation to and from the center.

My CA

Californians, for information on services in your area for seniors or adults with disabilities, call toll-free:

1-800-510-2020

Outside California, call the toll-free Eldercare Locator service at 1-800-677-1116

Related Links

- [ADHC Centers](#)
- [ADHC Forms](#)

External Links

- [Search for a facility in your area](#)
- [California Department of Health Services](#)

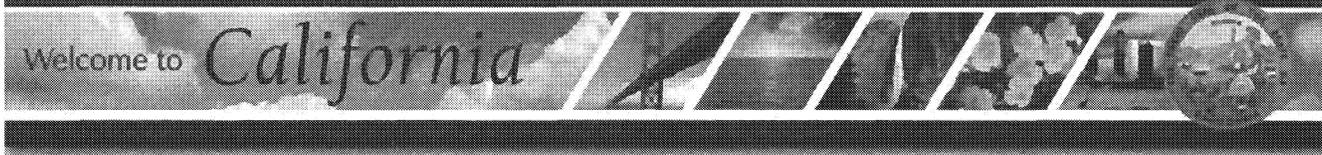
[Back to Top of Page](#)

[Conditions of Use](#) | [Privacy Policy](#) | [E-Mail CDA Webmaster](#)

© 2006 State of California.

California Home

Friday, November 16, 2007



[Home](#)

[About CDA](#)

[Services and Programs](#)

[What's New](#)

[Statistics and Demographics](#)

[Laws and Regulations](#)

[Career Opportunities With CDA](#)

[Doing Business With CDA](#)



Services and Programs: Adult Day Health Care

California Adult Day Health Centers

Select a County:

Alameda	Mendocino	San Bernardino	Shasta
Butte	Merced	San Diego	Siskiyou
Contra Costa	Monterey	San Francisco	Solano
Fresno	Napa	San Joaquin	Sonoma
Humboldt	Nevada	San Luis Obispo	Stanislaus
Imperial	Orange	San Mateo	Tulare
Kern	Placer	Santa Barbara	Tuolumne
Los Angeles	Riverside	Santa Clara	Ventura
Marin	Sacramento	Santa Cruz	Yolo

My CA

Californians, for information on services in your area for seniors or adults with disabilities, call toll-free:

1-800-510-2020

Outside California, call the toll-free Eldercare Locator service at 1-800-677-1116

Return to: [Adult Day Health Care](#)

Alameda County			
Alzheimer's Services of the East Bay ADHC Center - Berkeley	2320 Channing Way, Berkeley 94704	(510) 644-8292	(510) 540-6771
Alzheimer's Services of the East Bay ADHC Center - Hayward	561 A Street, Hayward 94541	(510) 888-1411	(510) 888-1357
Alzheimer's Services of the East Bay ADHC Center - Oakland	3012 Summit Street, Oakland 94609	(510) 869-8911	(510) 869-8944
Bay Area Community Services Adult Day Health Center	39600 Sundale Drive, Fremont 94538	(510) 656-7742	(510) 656-7891
Berkeley Adult Day Health Center	1890 Alcatraz Avenue, Berkeley 94703	(510) 601-0167	(510) 272-0209
Center for Elders' Independence	275 Eastmont Town Center, 7200 Bancroft Avenue, Oakland 94602	(510) 433-1160	(510) 957-0197
Center for Elders' Independence	1955 San Pablo Avenue, Oakland 94612	(510) 433-1160, ext. 1140	(510) 433-1166
Center for Elders' Independence - Berkeley	1497 Alcatraz Avenue, Berkeley 94702	(510) 433-1150 ext. 3000	(510) 844-0131
Hong Fook Adult Day Health Care Center	275 14th Street, Oakland 94612	(510) 839-9673	(510) 839-2435
Hong Fook Adult Day Health Care Center - Harrison Street	1388 Harrison Street, Oakland 94612	(510) 839-2270	(510) 938-9674
Lifelong Medical Care Adult Day Health Care	10700 MacArthur Boulevard, #14A, Oakland 94605	(510) 563-4390	(510) 563-4387
On Lok Senior Health Services - Fremont	159 Washington Boulevard,	(510) 870-6262	(510) 870-6250

13

Center	Fremont 94539		
Butte County			
Oroville Adult Day Health Care Center	2959 Lower Wyandotte Avenue, Oroville 95965	(530) 533-1234	(530) 533-1102
Peg Taylor Center for Adult Day Health Services	124 Parmac Road, Chico 95926	(530) 342-2345	(530) 342-3584
Contra Costa County			
The Bedford Center	1811 C Street, Antioch 94509	(925) 778-4171	(925) 778-4251
Guardian Adult Day Health Center	3905 San Pablo Dam Road, El Sobrante 94803	(510) 669-1005	(510) 669-1008
Mt. Diablo Center for Adult Day Health Care	490 Golf Club Road, Pleasant Hill 94523	(925) 682-6330 ext. 374	(925) 682-6375
Fresno County			
Adult Day Health Care of Fresno	3202 E. Ashlan Avenue Fresno 93726	(559) 227-8600	(559) 227-8200
Clovis Adult Day Health Care, Inc.	50 West Bullard, # 113, Clovis 93612	(559) 298-3996	(559) 298-2074
Fresno Adult Day Health Care Facility, Inc.	5191 N. Sixth Street, Fresno 93710	(559) 222-8300	(559) 222-8303
Heritage Adult Day Health Care Center	3115 N. Millbrook Avenue, Fresno 93703	(559) 222-0304	(559) 222-2132
Safe Harbor Adult Day Health Care Center	853 Van Ness, Fresno 93721	(559) 442-4567	(559) 442-4569
Saint Agnes Adult Day Health Care	1163 East Warner, Fresno 93710	(559) 449-3591	(559) 431-5873
Trinity Adult Day Health Care	3660 East Dakota Avenue, Fresno 93726	(559) 228-1200	(559) 224-3595
Valley Adult Day Health Care Center	4835 E. McKinley Avenue, Fresno 93727	(559) 454-0386	(559) 454-0387
Young At Heart Adult Day Health Care Center	3677 W. Beechwood Avenue, Fresno 93711	(559) 261-1115	(559) 261-9995
Humboldt County			
Adult Day Health Care of Mad River	3800 Janes Road, Arcata 95521	(707) 822-4866	(707) 822-6311
Eureka Adult Day Health Services	1901 California Street, Eureka 95501	(707) 444-8254	(707) 444- 8179
Fortuna Adult Day Health Services	2280 Newburg Road, Fortuna 95540	(707) 725-6927	(707) 725-1613
Imperial County			
Alegria Adult Day Health Care Center	1101 C.N. Perry Avenue, Calexico 92231	(760) 768-8419	(760) 768-8491
DayOut Adult Day Health Care - Brawley	580 West Main Street, Brawley 92227	(760) 344-5665	(760) 344-3422
DayOut Adult Day Health Care - El Centro	757 Main Street, El Centro 92243	(760) 337-8393	(760) 337-8449
The Valley Inn ADHC Center	437 Grape Avenue, Holtville, 92250	(760) 356-1262	(760) 356-4352

Kern County			
Chateau d'Bakersfield Adult Day Health Care	1011 17th Street, Bakersfield 93301	(661) 322-4085	(661) 322-4795
Delano Adult Day Health Care Center	1457 Glenwood Street, Delano 93215	(661) 725-7070	(661) 725-9300
Elderlife Adult Day Health Care Center	1111 Columbus Avenue #4, Bakersfield 93305	(661) 326-6595	(661) 326-6593
Los Angeles County			
2nd Century Adult Day Health Care Center	2121 Beverly Boulevard, Los Angeles 90057	(213) 483-1117	(213) 483-1127
A & M Health Services	11920 Ramona Boulevard, El Monte 91732	(626) 443-2091	(626) 443-4225
A & S/Franklin ADHC	3200 Santa Monica Boulevard, Santa Monica 90404	(310) 255-0999	(310) 255-0941
A Day Away... ADHC	15060 Imperial Highway, La Mirada 90638	(562) 902-5305	(562) 902-0835
A Day of Care	12041 Strathern Street, North Hollywood 91605	(818) 767-7787	(818) 767-1578
ABC Day Health Center	417 Alpine Street, Los Angeles 90612	(213) 481-0888	(213) 613-0328
ABC Therapy Center	720 S. Atlantic Boulevard, Monterey Park 91754	(626) 570-0778	(626) 570-9665
Active Adult Day Health Care	2385 Pacific Avenue, Long Beach 90806	(562) 426-7772	None available
AGS Adult Day Health Care	1925 W. Temple Street, Suite 111, Los Angeles 90026	(213) 413-8257	(213) 413-8267
AltaMed Adult Day Health Care	5425 E. Pomona Boulevard, Los Angeles 90022	(323) 728-0411	(323) 728-1535
AltaMed Grand Plaza Adult Day Health Care	701 Cesar Chavez Avenue, Suite 201, Los Angeles 90012	(213) 217-5300	(213) 217-5396
AltaMed Rugby Plaza Adult Day Health Care	6330 Rugby Plaza Suite 200, Huntington Park 90255	(323) 277-7678	(323) 277-7686
Angel Adult Day Health Care Center	1417 W. Washington Boulevard, Los Angeles 90007	(213) 745-4290	(213) 745-4297
Antelope Valley Adult Day Health Care Center	42212 10th Street West #8, Lancaster 93534	(661) 949-6278	(661) 949-6768
Arcadia Adult Day Health Care Center	15 Las Tunas, Arcadia 91007	(626) 447-9700	(626) 446-5405
Arcadia of Hollywood Adult Day Health Care Center	860 N. Highland Avenue, Los Angeles 90038	(323) 466-4122	(323) 466-2340
Asian Tower Health Center	709 North Hill Street, Units 1-2, Los Angeles 90012	(213) 687-7161	(213) 250-1797
Babylon Adult Day Health Care Center	5955 Lindley Avenue, Tarzana 91356	(818) 996-9172	(818) 996-9173
Be Well Adult Day Health Care	10937-47 Sepulveda, Mission Hills 91345	(818) 837-8285	(818) 837-8245

Best Care Adult Day Health Care	2679 Zoe Avenue, Huntington Park 90255	(323) 585-5800	(323) 585-5814
Best Care ADHC	13788 Foothill Boulevard, Unit #6, Sylmar 91342	(818) 362-0818	(818) 362-9400
Beverly Adult Day Health Care Center	316 N. Western Avenue, Los Angeles 90004	(323) 957-9777	(323) 957-9741
Boyle Heights Adult Day Health Care Center	302 La Veta Terrace, Los Angeles 90026	(213) 482-5900	(213) 482-5916
Burbank ADHC	2609 Burbank Boulevard, Burbank 91506	(818) 563-9255	(818) 563-9265
C & C Carson Adult Day Health Care Center	451 E. Carson Plaza Drive, Suite 105, Carson 90746	(310) 354-0031	(310) 354-3939
Carson Adult Day Health Care Center	23517 S. Main Street, Suite 110, Carson 90745	(310) 522-3860	(310) 522-3866
Casa Colina Adult Day Health Care Center	2820 North Garey Avenue, Pomona 91769	(909) 596-7733	(909) 593-0153
Casa Del Sol Adult Day Health Care Center	13907 East Amar Road, Suite D, La Puente 91746	(626) 338-4606	(626) 338-6545
Cedar Sinai Adult Day Health Care	732 N. Highland Avenue, Los Angeles 90038	(323) 957-6555	(323) 464-8373
Center for Healthy Living	15220 Vanowen Street, Van Nuys 91405	(818) 780-2466	(818) 780-2465
Center for Healthy Living II	11635-G Valley Boulevard, El Monte 91732	(626) 279-2760	(626) 279-2759
Central Adult Day Health Care Center	1825 Beverly Boulevard, Los Angeles 90057	(213) 413-6966	(213) 413-5276
Century Adult Day Health Care Center	405 East Alostia Avenue, Glendora 91740	(626) 914-6889	(626) 914-8999
Christ the King Adult Day Health Care Center	18800 Amar Road, Walnut 91789	(626) 581-4084	(626) 581-1356
Christian Adult Day Health Care Center	4419 Eagle Rock Boulevard, Los Angeles 90041	(323) 550-8236	(323) 550-1768
City of Refuge Adult Day Health Care	8415 S. Hoover Street, Los Angeles 90044	(213) 386-9591	None Available
Comfort Adult Day Health Care Center	5500 Valley Boulevard, Los Angeles 90032	(323) 223-0881	(323) 222-0478
Community Adult Day Health Care Center	1954 Atlantic Avenue, Long Beach 90806	(562) 591-3492	(562) 591-1422
Compton Adult Day Health Care	14925 Atlantic Avenue, East Rancho Dominguez 90221	(310) 764-2023	(310) 223-5921
Crossroads Adult Day Health Care Center	8518 Artesia Boulevard, Bellflower 90706	(562) 272-8007	(562) 272-8006
Crown City Adult Day Health Care Center	122 North El Molino Avenue, Pasadena 91101	(626) 793-1241	(626) 583-8844
	1320 W. Magnolia		

Daily Dreams Adult Day Health Care Center	Boulevard, Burbank 91506	(818) 729-9191	(818) 729-0921
Daylight Adult Day Health Care-Site I	915 East Colorado Street, Glendale 91205	(818) 553-3815	(818) 553-3845
Daylight Adult Day Health Care-Site II	905 East Colorado Street, Glendale 91205	(818) 553-3818	(818) 553-3845
Daylight - Hollywood Adult Day Health Care Center	5300 Santa Monica Boulevard, Suite 100, Los Angeles 90029	(323) 464-2066	(323) 464-0629
Daylight - LA Adult Day Health Care Center	2367 W. Pico Boulevard, Los Angeles 90006	(213) 736-9999	(213) 736-1717
Daylight SF Valley ADHC Center	5562 Reseda Boulevard, Tarzana 91356	(818) 345-9200	(818) 345-8010
E & V Adult Day Health Care Center	2005 N. Wilmington Avenue, Compton 90222	(310) 537- 6291	(310) 537- 6298
EL ARCA Adult Day Health Care Center	3839 Selig Place, Los Angeles 90031	(323) 223-3079	(323) 223-4685
East L.A. Adult Day Health Center	6210 Whittier Boulevard, Los Angeles 90022	(323) 888-2887	(323) 888-2889
East Valley Adult Day Health Care Center	8134 Foothill Boulevard, Sunland 91040	(818) 951-8608	(818) 951-9547
El Camino ADHC Center	15429 Crenshaw Boulevard, Gardena 90249	(310) 679-7624	(310) 679-7624
El Monte Adult Day Health Care Center	9537 Telstar Avenue, #119, El Monte 91731	(626) 401-2888	(626) 401-3588
Elim Adult Day Health Care Center	500 E. Carson Plaza Drive, Suites 101-108, Carson 90746	(310) 324-6700	(310) 324-6767
Encino Adult Day Health Care Center	17815 Ventura Boulevard, Encino 91316	(818) 774-2173	(818) 654-2635
Evergreen Adult Day Health Care Center	18555 Farjardo Street, Rowland Heights 91748	(626) 965-7833	(626) 964-5483
Evergreen Adult Day Health Care Center	606 West Las Tunas Drive, San Gabriel 91776	(626) 282-7397	(626) 282-7397
Everlasting Adult Day Health Care Center	4515 Eagle Rock Boulevard, Los Angeles 90041	(323) 344-3502	(323) 344-3501
Family Care ADHC	6434-6440 Coldwanter Canyon Boulevard, North Hollywood 91606	(818) 762-0373	(818) 762-0035
Family Circle Adult Day Health Care	2820 North Figueroa Street, Los Angeles 90065	(818) 551-9700	(818) 551-9773
Felices Dias Adult Day Health Care	2309 S. Flower Street, Los Angeles 90007	(213) 746-6611	(213) 746-6690
Fontana Adult Day Health Care Center	2309 Daly Street, Los Angeles 90031	(323) 276-8149	(323) 276-8143
Foothill ADHC	12040 Foothill Boulevard, Units #110-115, Lakeview Terrace 91342	(818) 890-3133	(818) 890-3163

Forever Young Adult Day Health Care Center	9820 Topanga Boulevard, Suite F, Chatsworth 91311	(818) 775-0377	(818) 775-0038
Forever Young Adult Day Health Care Center	4265-73 Main Avenue Baldwin Park 91706	(626) 960-2800	(626) 960-2855
Fountain of Youth ADHC	14528-30 Archwood Street, Van Nuys 91411	(818) 780-8008	(818) 780-1591
Friendly Adult Day Health Care-North Hollywood	10858 Oxnard Street, North Hollywood 91606	(818) 509-1619	(818) 509-2319
Friendly Adult Day Health Care-Tujunga	7235 Foothill Boulevard, Tujunga 91042	(818) 353-3224	(818) 353-1315
Genesis I Adult Day Health Care	20061 Saticoy Street, Suite 101, Winnetka 91306	(818) 349-7475	(818) 349-4220
Genesis II Adult Day Health Care	20247 Saticoy Street, Winnetka 91306	(818) 882-2829	(818) 882-2774
GetTogether Adult Day Health Care	16636 S. Crenshaw Boulevard, Torrance 90504	(313) 965-0110	(313) 965-0110
Glendale ADHC Center	6900 San Fernando Road, Glendale 91201	(818) 566-1868	(818) 566-6816
Glendale Gardens Adult Day Health Care Center	700 S. Central Avenue, Glendale 91204	(818) 507-4998	(818) 507-4999
Glendale Hills ADHC Center	550 N. Glendale Boulevard, Suite A, Glendale 91206	(818) 241-3400	(818) 241-3403
Glenoaks Adult Day Health Care Center	3201 N. Glenoaks Boulevard, Burbank 91504	(818) 848-0432	(818) 848-9943
Golden Acres Adult Day Health Care Center	12041 Strathern Street, North Hollywood 91605	(818) 830-1615	(818) 830-2045
Golden Age Adult Day Health Care Center	3820 Martin Luther King, Jr. Boulevard Lynwood 90262	(310) 632-0415	(310) 639-2734
Golden Age Adult Day Health Care Center	18332 Ventura Boulevard, Tarzana 91356	(818) 345-9393	(818) 705-5566
Golden Years Adult Day Services	60 E. Live Oaks Avenue, Arcadia 91006	(626) 447-0202	(626) 447-0403
Good Day Adult Day Health Care	662-664 West Broadway, Glendale 91204	(818) 550-7711	(818) 550-7713
Good Health Adult Day Health Care Center	988 N. Hill Street, Suite 111, Los Angeles 90012	(213) 680-8880	(213) 680-8862
Good Life Adult Day Health Care Center	1617 Beverly Boulevard, Los Angeles 90017	(213) 250-9191	(213) 250-9595
Good Time Adult Day Health Care Center	1961 E. Florence Avenue, Huntington Park, 90001	(323) 587-9895	(323) 587-9289
Graceful Senescence Adult Day Health Care	120 E. El Segundo Boulevard, Los Angeles 90061	(310) 538-5808	(310) 538-5406
Grand Adult Day Health Care Center	6752 White Oak Avenue, Van Nuys 91406	(818) 344-3456	(818) 344-3321
	1513 W. Sepulveda,		

Green Harbor Adult Day Health Care	Suite D, Torrance 90501	(310) 891-2320	(310) 891-2347
Hayim Tovim Adult Day Health Care	1061 S. Fairfax Avenue, Los Angeles 90019	(323) 937-5646	(323) 937-0491
Health Guard Adult Day Health Care	894-896 North Fair Oaks Avenue, Pasadena 91103	(626) 683-5400	(626) 683-5756
Health View Adult Day Health Care Center	2280 Lomita Boulevard, Lomita 90717	(310) 602-0123	(310) 602-0124
Healthy Life Adult Day Health Care	137 N. Virgil, Los Angeles 90004	(213) 637-9700	(213) 637-9707
Healthy Living Adult Day Care	4410 N. Peck Road, El Monte 91732	(626) 450-0700	(626) 454-1806
Healthy Solutions Adult Day Care Center	14558 Sylvan Street, Van Nuys 91401	(818) 787-2828	(818) 787-1105
Helping Hands Adult Day Health Care Center	9051-9079 Woodman Avenue, Arleta 91331	(818) 830-7158	(818) 892-1626
HMS ADHCC	740 E. Washington Boulevard, Pasadena 91104	(626) 345-1240	(626) 345-1335
Home Avenue Adult Day Health Care Center	8114 Telegraph Road, Downey 90240	(562) 927-7660	(562) 927-6455
Inglewood Community Adult Day Health Care Center	11910 West Pico Avenue, Los Angeles 90064	(310) 445-3373	(310) 445-3383
Joyful Adult Day Health Care Center	18951 Colima Road, Rowland Heights 91748	(626) 333-2222	(323) 369-8956
Jubilee Adult Day Health Care Center	3155 Glendale Boulevard, Los Angeles 90039	(323) 668-7400	(323) 668-7402
KHEIR ADHC Center - Vermont	3030 W. 8th Street, Suite 100 Los Angeles 90005	(213) 389-6565	(213) 389-6262
KHEIR Adult Day Health Care Center - South Bay	14627 - 14645 S. Western Avenue, Gardena 90249	(310) 217-0900	(310) 225-3006
Kenwood Adult Day Health and Social Services Center	213 S. Kenwood Street, Glendale 91205	(818) 637-7880	(818) 637-2014
Kingsley Place Adult Day Health Care Center	548 S. Kingsley Drive, Los Angeles 90020	(213) 383-3303	(213) 384-1772
Kingsley Place Adult Day Health Care Center II	3020 Wilshire Boulevard, Suite 150, Los Angeles 90010	(213) 387-9097	(213) 387-9098
L'Chaim Adult Day Health Care Center	7636 Santa Monica Boulevard, West Hollywood 90046	(323) 650-8118	(323) 650-8504
La Puente Adult Day Health Care	656 Glendora Avenue, La Puente 91744	(626) 330-1174	(626) 934-7986
Lancaster Adult Day Health Care Center	42020 4th Street East, Lancaster 93535	(661) 948-1228	(661) 948-8109
Life Sharing Health Care - Norwalk Division	13000 San Antonio Drive, Norwalk 90650	(562) 863-6431	(562) 929-4374
Life Start Adult Day Health Care	1828 S. Western Avenue, Los Angeles 90006	(323) 733-1101	(323) 733-3411
Life Steps Foundation, Inc. Circle of Friends	365 East Beach Avenue,	(310) 673-9915	(310) 306-7278

	Inglewood 90302		
Lomita Adult Day Health Care Center	1234 Lomita Boulevard, Suite E, Harbor City 90710	(310) 539-4800	(310) 539-4813
Long Beach Adult Day Health Care Center	1771 E. 4th Street, Long Beach 90802	(562) 590-9083	(562) 590-9243
Long Life Adult Day Health Care Center	2001 W. 48th Street, Los Angeles 90062	(323) 299-4649	(323) 299-4651
Los Angeles ADHC Center	1424 W. Olympic Boulevard, Los Angeles 90015	(213) 383-9420	(213) 383-5160
Lotus Blossom Therapy Center	1305 W. Beverly Boulevard, Montebello 90640	(323) 346-0360	(323) 346-0361
M & T Adult Day Health Care Center	820 West Valley Boulevard, Alhambra 91803	(626) 943-0070	(626) 943-0077
Marina Adult Day Health Care	300 Washington Boulevard, Marina Del Rey 90292	(310) 821-3599	(310) 821-3387
Mayfair Adult Day Health Care	3711 S. LaBrea Avenue, Los Angeles 90016	(323) 299-8788	(323) 299-8726
Mejor Vida Adult Day Health Care Center	7400 Van Nuys Boulevard, #100 Van Nuys 91405	(818) 780-3900	(818) 782-1234
Mikkon Adult Day Health Care Center	2211-2213 E. Garvey Avenue, North, Suite A1-A2, West Covina 91791	(626) 967-0812	(626) 967-9286
Montebello Adult Day Health Care Center	833 W. Beverly Boulevard, Montebello 90640	(323) 728-9111	(323) 728-9113
Monterey ADHC	5926 Monterey Road, Los Angeles 90042	(323) 256-8898	(323) 257-7250
Morningside Adult Day Health Care Center	3216-28 Manchester Avenue, Inglewood 90305	(310) 412-0200	(310) 412-0600
Mountainview Adult Day Health Care	23751 and 23757 Roscoe Boulevard, West Hills 91304	(818) 999-9234	(818) 716-8030
National Adult Day Health Care Center	11261-B National Boulevard, Los Angeles 90064	(310) 943-5400	(310) 943-5410
New Life Adult Day Health Care Center	12220 South Street, Artesia 90701	(562) 916-7898	(562) 916-7571
New Sunrise Adult Day Health Care Center	9350 Reseda Boulevard, Northridge 91324	(818) 701-0010	(818) 701-0090
New Valley Adult Day Health Care Center	1710 S. Del Mar Avenue, Suite 112-117, San Gabriel 91776	(626) 569-9688	(626) 280-1868
Ocean Community Care Center	1448 18th Street, Santa Monica 90404	(310) 586-7607	(310) 586-7600
Oceanview Adult Day Health Care Center	1500 Main Street, Venice 90291	(310) 396-9166	(310) 396-4016
Olympic Rehabilitation Center	624-636 North La Brea Avenue, Los Angeles, 90036	(323) 954-4000	(323) 300-1309
Olympic Rehabilitation Center Site II	1227-31 S. La Cienega Boulevard, Los Angeles 90035	(310) 300-1111	(310) 360-1575

Olympus Adult Day Health Care	11613 West Washington Boulevard, Los Angeles 90066	(310) 572-7272	(310) 572-6092
ONEgeneration Adult Day Healthcare Program	17400 Victory Boulevard, Van Nuys 91406	(818) 708-6625	(818) 708-6620
Pacoima Adult Day Health Care Center	13117 Van Nuys Boulevard, Pacoima 91331	(818) 686-0701	(818) 686-0751
Paradise Adult Day Health Care Center	4414 Santa Monica Boulevard, Los Angeles 90029	(323) 660-1647	(323) 661-4226
Paramount Adult Day Health Care Center	15340 Paramount Boulevard, Paramount 90723	(562) 630-7100	(562) 630-7444
Partners Adult Day Health Care	7362 Santa Monica Boulevard, West Hollywood 90046	(323) 883-0330	(323) 883-0344
Pomona Adult Day Health Center	324 N. Paloma Drive, Pomona 91768	(909) 623-7000	(909) 623-7041
Prairie Place Adult Day Health Care Center	105 South Prairie Avenue, Inglewood 90301	(310) 674-8345	(310) 290-9056
Quality Time II Adult Day Health Care	5350 Atlantic Avenue, Long Beach 90805	(562) 728-4300	None Available
Ramona Adult Day Health Care Center	13310 Ramona Boulevard, Unit K, Baldwin Park 91706	(626) 960-9757	(626) 960-5987
Rancho Adult Day Health Care Center	7601 E. Imperial Highway, Building 802, Downey 90242	(562) 401-7991	(562) 803-5569
Red Heart Adult Day Health Care Center	5171 Hollywood Boulevard, Los Angeles 90027	(323) 953-7722	(323) 953-7721
Robertson Adult Day Health Care Center	369 South Robertson Boulevard, Beverly Hills 90211	(310) 289-7711	(310) 289-7367
S. Mark Taper Foundation Adult Day Health Care Center	672 S. Carondelet Street, Los Angeles 90057	(213) 388-4445	(213) 388-9551
Salida Del Sol Adult Day Health Care	2001 W. Olympic Boulevard, Los Angeles 90006	(213) 736-9450	(213) 736-9456
SANAR Adult Day Health Care Center	900 Pine Avenue, Long Beach 90813	(562) 495-2249	(562) 495-2702
San Fernando Valley Adult Day Health Care Center	10351 Balboa Boulevard, Granada Hills 91344	(818) 831-6651	(818) 831-9822
San Fernando Valley ADHC Center	7238 Canby Avenue, Reseda 91335	(818) 705-3404	(818) 705-5407
San Gabriel Valley Adult Day Health Care Center	1045 East Amar Road, West Covina 91792	(626) 330-0866	(626) 330-0754
San Pedro ADHC	430 W. Sixth Street, San Pedro 90731	(310) 519-9880	(310) 519-8072
St. Gabriel Adult Day Health Care Center	5514 Hollywood Boulevard, Los Angeles 90028	(323) 993-9400	(323) 993-9410
St. Mary's Adult Day Health Care Center	1827 S. Brand Avenue, Glendale 91204	(818) 543-5900	(818) 543-5902
Santa Clarita ADHC	22903 Soledad Canyon Road,	(661)	(661)

	Santa Clarita 91350	253-0700	253-0706
Sevana Adult Day Health Care Center	1327 Pleasant Avenue, Los Angeles 90033	(323) 263-0001	(323) 264-0005
Shiraz Adult Day Health Care Center	6907 N. Lankershim Boulevard, North Hollywood 91605	(818) 764-3336	(818) 764-6336
Silver Lake Adult Day Health Care Center	3339 W. Temple Street, Los Angeles 90016	(213) 383-0050	(213) 383-0035
Silver Wisdom Adult Day Health Care Center	1714 N. Ivar Avenue, Hollywood 90028	(323) 464-9161	(323) 464-9165
Sinai Adult Day Health Care	6075-6077 West Pico Boulevard, Los Angeles 90035	(323) 933-6611	(323) 933-1269
Star Community Adult Day Health Care	7014 Sunset Boulevard, Los Angeles 90028	(323) 463-4000	(323) 375-0609
Starlite Adult Day Health Care Center	9825 E. Garvey Avenue, El Monte 91733	(626) 350-0011	(626) 350-0077
Sunflower Day Health Care Center	136 Cook Avenue, Pasadena 91107	(626) 356-3838	(626) 356-3638
Sunny Cal Adult Day Health Care Center	8540 Valley Road, #112-B, Rosemead 91770	(626) 307-7772	(626) 307-7776
Sunny Day Adult Day Health Care	10530 Lower Azusa Road, El Monte 91731	(626) 350-3886	(626) 444-2747
Sunny Days Adult Day Health Care	3739 Overland Avenue, Los Angeles 90034	(310) 815-9115	(310) 280-9802
Sunrise Adult Day Health Care	1067-1071 S. Fairfax Avenue, Los Angeles 90019	(323) 935-2300	(323) 935-3083
Sunshine Adult Day Health Care Center	6939 Van Nuys Boulevard, Van Nuys 91405	(818) 988-7779	(818) 988-7787
Temple City Adult Day Health Care	9917 Las Tunas Drive, Temple City 91780	(626) 614-8999	(626) 614-8095
The Best of Times Adult Day Health Care	4350 11th Avenue, Los Angeles 90008	(323) 292-2898	(323) 292-2126
Ultra Care Plus ADHC	38424 10th Street, Palmdale 93550	(661) 538-0899	(661) 947-5029
UltraLife Adult Day Health Care	1022 E. Garvey Avenue, Monterey Park 91754	(626) 307-8806	(626) 307-8808
Unicare Adult Day Health Care Center	9825 E. Garvey Avenue, El Monte 91733	(626) 279-9082	(626) 279-9032
Universal Adult Day Health Care Center	3847 Grandview Boulevard, Los Angeles 90066	(310) 915-5252	(310) 915-0707
Valley Village	20835 Sherman Way, Canoga Park 91306	(818) 587-3600	(818) 587-3618
Valley Village Adult Day Health Care Center - Sunland	8727 Fenwick Street, Sunland 91040	(818) 446-0366	(818) 446-0298
Venus Adult Day Health Care Center	1809 W. Magnolia Boulevard, Burbank 91505	(818) 843-7872	(818) 843-7805
Victory ADHC	13627-1/2 Victory Boulevard, Van Nuys 91401	(818) 785-6603	(818) 785-6969

Victory Adult Day Health Center	1745 Victory Boulevard, Glendale 91201	(818) 500-4114	(818) 500-4120
Villa Adult Day Health Center	2109 W. Whittier Boulevard, Montebello 90640	(323) 724-8444	(323) 724-8442
Vineland Adult Day Health Care Center	5629 Vineland Avenue, North Hollywood 91606	(818) 753-0714	(818) 753-0916
Vista Adult Day Health Care Center	6061 Atlantic Boulevard, Maywood 90270	(323) 773-3555	(323) 773-3444
W.S. Adult Day Health Care Center	1041 E. Main Street, Alhambra 91801	(626) 281-1348	(626) 281-6618
W.S. Adult Day Health Care Center M.P.	863 South Atlantic Boulevard, Monterey Park 91754	(626) 308-3861	(626) 308-3867
Well and Fit Adult Day Health Care Center	23401 Golden Spring Drive, Diamond Bar 91765	(909) 860-0061	(909) 860-7180
Wellcare Adult Day Health Care	6740 Kester Avenue, Van Nuys 91405	(818) 988-2273	(818) 988-2336
West Covina Adult Day Health Care Center	1314 W. Francisquito Avenue, #8 West Covina 91790	(626) 918-9887	(626) 918-6647
Western Adult Day Health Care	3000 W. Sixth Street, Suite 101 Los Angeles, CA 90020	(213) 736-9963	(213) 736-6581
Whittier Adult Day Health Care Center	14268 E. Telegraph Road, Whittier 90604	(562) 944-6986	(562) 944-3748
Wilshire Adult Day Health Care Center	3921 Wilshire Boulevard, #100, Los Angeles 90022	(213) 383-0900	(213) 383-7085
Yasmine Adult Day Health Care Center	19531 Parthenia Street, Northridge 91324	(818) 718-7800	(818) 718-2777
Your Day ADHC	15719-21 Vanowen Street, Van Nuys 91406	(818) 781-8777	(818) 781-8775
Marin County			
Senior Access Adult Day Health Care - Novato	1905 Novato Boulevard, Novato 94947	(415) 897-6884	(415) 897-1585
Mendocino County			
Ukiah Senior Center ADHC	499 Leslie Street, Ukiah 95482	(707) 462-4343	(707) 462-2997
Merced County			
Day Break Adult Day Health Care Center	1251 Grove Avenue, Atwater 95301	(209) 357-0765	(209) 357-2580
DayOut - Merced	1460 Merced Avenue, Merced 95340	(209) 388-9175	(209) 388-9178
Napa County			
Adult Day Services of Napa Valley	414 Jefferson South Street Napa 94558	(707) 258-9087	(707) 258-9080
Nevada County			
Larry G. Lutz Adult Day Health Care Center	138 New Mohawk, Suite B-1, Nevada City 95959	(530) 273-6581	(530) 273-5671
Orange County			

23

ABC Westminster Day Health Center	14501 Magnolia Street, Westminster 92683	(714) 894-5880	(714) 894-5879
Acacia Adult Day Services	11391 Acacia Parkway, Garden Grove 92840	(714) 530-1566	(714) 530-1592
Acacia Adult Day Services - Northwest	5175 Ball Road, Cypress, 90630	(714) 527-3686	(714) 503-5083
Adult Day Services of Orange County	9451 Indianapolis Avenue, Huntington Beach 92646	(714) 593-9630	(714) 593-9632
Anaheim V.I.P. Adult Day Health Care Center	1158 North Knollwood Circle, Anaheim 92801	(714) 220-2114	(714) 220-1374
Bell Christian Home Adult Day Health Care Center	7571 Wyoming Street, Westminster 92683	(714) 379-5101	(714) 379-5104
Commonwealth Adult Day Health Care Center	7811 Commonwealth Avenue, Buena Park 90621	(714) 522-4960	(714) 522-4961
Cypress Adult Day Health Care Center	4470 Lincoln Avenue, Suites 1, 2 and 3, Cypress 90630	(714) 826-9664	(714) 826-9614
Evergreen World ADHC	9856 Westminster Avenue, Garden Grove 92843	(714) 638-1818	(714) 638-3828
Happy (Brea) Adult Day Health Care	595 W. Lambert, Brea 92821	(714) 990-0333	(714) 990-0368
Helping Hands for Better Living Adult Day Health Care	10281 Chapman Avenue, Garden Grove 92840	(714) 530-4489	(714) 530-9917
Irvine Health Foundation Adult Day Health Services Center	20 Lake Road, Irvine 92714	(949) 262-1123	(949) 551-0841
New Life Adult Day Health Care - Garden Grove	8100 Garden Grove Boulevard, Garden Grove 92840	(714) 537-6116	(714) 537-6925
Regent West Adult Day Health Care Center	4717 W. 1st Street, Santa Ana 92703	(714) 531-7561	(714) 531-7674
RIO Adult Day Health Care, Fullerton	130 Laguna Road, Fullerton 92834	(714) 680-6060	(714) 871-3640
RIO Adult Day Health Care Center	1800 East La Veta Avenue, Orange 92666	(714) 633-7400	(714) 633-4586
RIO San Clemente Leo Fessenden Adult Day Health Care	2021 Calle Frontera, San Clemente 92672	(949) 498-7671	(949) 498-1021
Santa Ana/Tustin V.I.P. Adult Day Health Care Center	1101 South Grand Avenue, Santa Ana 92705	(714) 558-1216	(714) 564-0386
Sarang Adult Day Health Care Center	5171 Lincoln Avenue, Cypress 90630	(714) 236-0852	(714) 236-0021
South County Adult Day Services	24300 El Toro Road, Building A Suite 2000, Laguna Hills 92653	(949) 855-9444	(949) 361-3361
Sultan Adult Day Health Care Center	125 W. Cerritos Avenue, Anaheim 92805	(714) 778-9000	(714) 778-9010
Sunny Hills ADHC Center	13300 Garden Grove Boulevard, Garden Grove 92843	(714) 740-0077	(714) 750-0706
Placer County			
Health for All ADHC,	4065 Grass Valley	(530)	(530)

24

Auburn	Highway, Suite 206, Auburn 95602-9157	885-2655	885-4343
Riverside County			
Camelot Adult Day Health Care Center	650 Camino Real Circle, Hemet 92543	(951) 766-7840	(951) 766-7034
Care Connexus Adult Day Services Center of Riverside	4130 Adams Street, Suite B Riverside 92504	(951) 509-2500	(951) 509-2578
Hallmark Adult Day Services	1759 D-11 Sunrise Way, Palm Springs 92262	(760) 318-2525	(760) 318-2524
Inland Empire Adult Day Health Care Center	135 N. McKinley Avenue, Corona 92879	(951) 808-9600	(951) 808-9178
Inland Grace Adult Day Health Care Center	10150 Indiana Street, Riverside 92503	(951) 343-1001	(951) 343-1061
St. Christopher Adult Day Health Care Center	4300 Green River Road #109, Corona 92880	(951) 549-6060	(951) 549-6064
Sacramento County			
Altamedix ADHC	4234 N. Freeway Boulevard, Sacramento 95834	(916) 648-3999	(916) 648-1919
Eskaton Carmichael Adult Day Health Care	5105 Manzanita Avenue, Suite C, Carmichael 95608	(916) 334-0296	(916) 338-1248
Health for All ADHC, Meadowview	2730 Florin Road, Sacramento 95822	(916) 391-5591	(916) 391-0264
Help to Recovery	3205 Hurley Way, Sacramento 95864	(916) 485-6711	(916) 485-2653
Rancho Cordova Adult Day Health Care Center	10086 Mills Station Road, Rancho Cordova 95670	(916) 369-1113	(916) 369-1138
Rosenwald C. Robertson Adult Day Health Center	3400 Elvas Avenue, Sacramento 95819	(916) 452-2529	(916) 452-3129
Sutter SeniorCare - Site I	7000 Franklin Boulevard, Suite 1020, Sacramento 95823	(916) 424-8412	(916) 424-3249
Sutter SeniorCare - Site II	1234 U Street, Sacramento 95818	(916) 446-3100	(916) 446-3699
San Bernardino County			
DayBreak Adult Day Health Care	268 McArthur Way, Upland 91786	(909) 920-1165	(909) 949-3800
High Desert ADHC	16120 Bear Valley Road, Victorville 92392	(760) 843-0300	(760) 843-0366
Loma Linda Adult Day Services	11406 Loma Linda Drive-East, Room 501, Loma Linda 92354	(909) 558-6198	(909) 558-6270
San Bernardino Adult Day Health Care Center	1102 S. Arrowhead Avenue, San Bernardino 92408	(909) 381-9952	(909) 381-9983
Tender Heart Adult Day Health Care	9499 'I' Avenue, Hesperia 92345	(760) 244-8776	(760) 244-9456
Yucaipa Adult Day Center	12980 Second Street, Yucaipa 92399	(909) 790-4012	(909) 790-3615
San Diego County			

25

AmeriCare Adult Day Health Care Center	340 Rancheros Drive, Suite 196, San Marcos 92069	(760) 682-2424	(760) 471-5104
Casa De Oro Adult Day Health Care Center	9805 Campo Road, Suite 130, San Diego 91977	(619) 462-0881	(619) 462-0084
Casa Pacifica	1424 30th Street, Suite C, San Diego 92154	(619) 424-8181	(619) 424-8151
Clairemont Villa Adult Day Health Care Center	5150 Murphy Canyon Road, San Diego 92123	(858) 567-8575	(858) 576-8424
Elm Adult Day Health Care Center	1220 Elm Avenue, Imperial Beach 91932	(619) 827-0573	(619) 271-1284
George G. Glenner Alzheimer's Family Centers - Chula Vista	280 Saylor Drive, Chula Vista 91910	(619) 420-1703	(619) 420-7196
George G. Glenner Alzheimer's Family Centers - Encinitas	335 Saxony Road, Encinitas 92024	(760) 635-1895	(760) 436-0949
Golden Life ADHC Center	7373 University Avenue, Suite 101 La Mesa 91941	(619) 433-3398	(619) 337-1499
Highlander Adult Day Health Care Center	2525 Highland Avenue, National City 91950	(619) 474-0015	(619) 477-8333
Heartland Adult Day Health Care Center	10920 Summit Avenue, Santee 92071	(619) 488-9300	None available
Hope Adult Day Health Care Center	11239 Camino Ruiz, San Diego 92126	(858) 653-5916	(858) 653-5295
Horizons Adult Day Health Care Center	1415 E. 8th Street, Suite 5, National City 91950	(619) 474-1822	(619) 474-1826
Horizons II Adult Day Health Care Center	6134 University Avenue, San Diego 92115	(619) 229-0990	(619) 229-0987
Loving Care Adult Day Health Care Center	2565 Camino Del Rio South #201, San Diego 92108	(619) 718-9777	(619) 718-9772
Neighborhood House Adult Day Health Care Center	851 South 35th Street, San Diego 92113	(619) 233-6691	(619) 233-6693
North County Adult Day Health Care Center	1221 W. Vista Way, Vista 92803	(760) 758-2210	(760) 758-6827
Open Arms ADHC	540 National City Boulevard, National City 91950	(619) 474-2026	(619) 477-1224
Poway Adult Day Health Care Center	13180 Poway Road, Poway 92064	(858) 748-5044	(858) 748-5405
Quantum Adult Day Health Care Center	4428 Convoy Street, Suite 288 San Diego 92111	(858) 467-4717	(858) 467-4721
Ramona Adult Day Health Care Center	2138-A San Vicente Road, Ramona 92065	(760) 789-1553	(760) 789-1036
Redwood Elderlink	1151 South Redwood Street, Escondido 92025	(760) 480-1030	(760) 737-0170
South Bay Adult Day Health Care Center	301 East J Street, Chula Vista 91910	(619) 426-0982	None available
Western Adult Day Health Care Center	240 S. Magnolia Avenue, El Cajon 92020	(619) 631-7222	(619) 631-9228

26

San Francisco County			
30th Street Adult Day Health Care Center	225 30th Street, San Francisco 94131	(415) 550-2230	(415) 648-3957
Bayview Hunters Point Adult Day Health Center	1250 LaSalle Avenue, San Francisco 94124	(415) 826-4774	(415) 826-0178
Circle of Friends Adult Day Health Care	1550 Steiner Street, San Francisco 94115	(415) 614-2233	(415) 614-0453
Golden Gate Day Health	350 Golden Gate Avenue, San Francisco 94102	(415) 359-9210	(415) 339-9282
Golden State Adult Day Health Care Center	738 La Playa Street, San Francisco 94121	(415) 387-2750	(415) 387-2712
L'Chaim Adult Day Health Care	2534 Judah Street, San Francisco 94122	(415) 449-2900	(415) 449-2901
Laguna Honda Hospital ADHC Center	375 Laguna Honda Boulevard, San Francisco 94116	(415) 759-3360	(415) 759-3372
Mabini Day Health	55 Mabini Street, San Francisco 94107	(415) 882-7301	(415) 882-7390
Mission Creek Adult Day Health	930 Fourth Street, San Francisco 94158	(415) 974-6784	(415) 974-6785
On Lok Senior Health Services	225 30th Street, San Francisco 94131	(415) 550-2230	(415) 647-6332
On Lok Senior Health Services - Bush	1333 Bush Street, San Francisco 94109-5611	(415) 292-8888	(415) 292-8745
On Lok Senior Health Services - Mission Street Center	4430 Mission Street, San Francisco 94112	(415) 337-2858	(415) 337-2867
On Lok Senior Health Services - Montgomery	1000 Montgomery Street, San Francisco 94133	(415) 292-8600	(415) 292-8625
On Lok Senior Health Services - Powell	1441 Powell, San Francisco 94133	(415) 292-8650	(415) 292-8666
On Lok Senior Health by IOA	1426 Filmore Street, Suite 302, San Francisco 94115	(415) 447-1000	(415) 447-1035
On Lok Senior Health by IOA	2700 Geary Boulevard, San Francisco 94118	(415) 447-8900	(415) 447-1250
Presentation Day Health	301 Ellis Street, San Francisco 94102	(415) 923-0245	(415) 923-0275
R.A. Rosenberg Adult Day Health Center	3600 Geary Boulevard, San Francisco 94118	(415) 750-5330	(415) 750-5323
St. Mary's Adult Day Health Center	35 Onondaga Avenue, San Francisco 94112	(415) 334-4000	(415) 334-0819
Self-Help for the Elderly	408 22nd Avenue, San Francisco 94121	(415) 666-1888	(415) 666-1899
Your Health ADHC	386 Arguello Boulevard, San Francisco 94129	(415) 561-2341	(415) 561-2338
San Joaquin County			
Health for All ADHC, Lodi	125 South Washington Street, Lodi 95240	(209) 367-1552	(209) 367-3753
Judy Brown Adult Day Health Care	224 S. Sutter, Stockton 95203	(209) 466-9524	(209) 465-8834
San Mateo County			
Coastside Adult Day Health Center	645 Correas Street, Half Moon Bay 94019	(650) 726-5067	(650) 726-8743

27

Mills-Peninsula Senior Focus ADHC	1720 El Camino Real, Suite 10, Burlingame 94010	(650) 696-3660	(650) 696-3633
Santa Barbara County			
Santa Maria Wisdom Center	1010 North Broadway, Santa Maria 93454	(805) 349-9810	(805) 349-9160
Santa Clara County			
Avenidas Rose Kleiner Senior Day Health Center	270 Escuela Avenue, Mountain View 94040	(650) 494-8018	(650) 494-8055
Golden Castle ADHC Center	1137 San Antonio Road, Suite B, Palo Alto 94303	(650) 964-1964	(650) 964-1978
Grace Adult Health Care Center	1197 E. Arques Avenue, Sunnyvale 94085	(408) 731-8686	(408) 245-0142
Grand Adult Day Health Care Center	1765 South Main Street, Suite 101, Milpitas 95035	(408) 586-9000	(408) 586-8000
Great Endeavors Adult Day Health Care Center	3015 Union Avenue, San Jose 95124	(408) 559-8896	(408) 371-6543
MACSA Adult Day Health Care Center	130 North Jackson Avenue, San Jose 95116	(408) 928-1155	(408) 928-1169
Milpitas Adult Day Health Care Center	1533 California Circle, Milpitas 95035	(408) 719-1004	(408) 719-1094
Santa Cruz County			
Elderday Santa Cruz	1410 Ocean Street, Santa Cruz 95060	(831) 458-3481	(831) 458-2945
Shasta County			
Golden Umbrella Adult Day Healthcare Center	2227 College View Drive, Redding 96003	(530) 223-6034	(530) 223-0658
Madrone Adult Day Health Care Center	210 W. Center Street, Yreka 96097	(530) 842-3466	(530) 842-1768
Siskiyou County			
Madrone Adult Day Services - Weed Center	293 "A" Main Street, Weed 96094	(530) 938-7904	(530) 938-4342
Solano County			
Solano Adult Day Health Care Center	100 Corporate Place, Suite D, Vallejo 94590	(707) 642-6811	(707) 642-6917
Sonoma County			
Southwest Adult Day Services	684 Benicia Drive, Santa Rosa 95409-3058	(707) 538-0152	(707) 576-6637
Stanislaus County			
Miller's Place Adult Day Health Care	730 McHenry Avenue Modesto 95350	(209) 521-0507	(209) 521-0694
Turlock ADHC	2311-2317 W. Main Street Turlock 95380	(209) 667-6067	(209) 656-7892
Tulare County			
Visalia Adult Day Health Care Facility	202 N.E. 2nd Avenue, Visalia, CA 93291	(559) 625-0100	(559) 625-0114
Tuolumne County			
Groveland Adult Day	11699 Merrell Road,	(209)	(209)

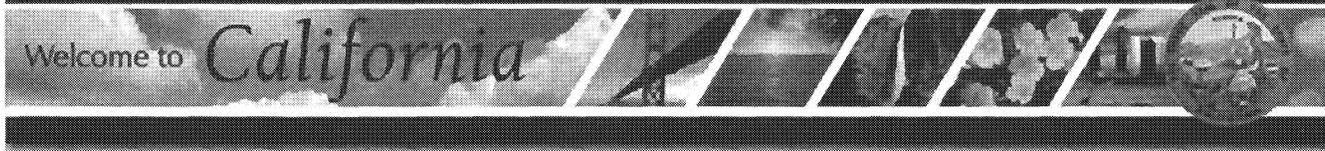
28

Health Care	Groveland 95231	962-7469	521-6099
Tuolumne Adult Day Health Care Center	101 Hospital Road, Sonora 95370	(209) 533-7180	(209) 532-1609
Ventura County			
Advanced Adult Day Health Care Center	2315 Kuehner Drive, Suites 121-126, Simi Valley 93063	(805) 526-7629	(805) 526-7620
Among Friends ADHC Center	851 South "A" Street, Oxnard 93030	(805) 385-7244	(805) 385-7246
Millennium Care Adult Day Health Care Center	2150 Winifred Street, Simi Valley 93065	(805) 583-0859	(805) 583-8057
Oxnard Family Circle Adult Day Health Care Center	5000 South "C" Street, Oxnard 93033	(805) 385-4180	(805) 385-4170
Ventura Coastal Adult Day Care Center	4221 E. Main Street, Ventura 93003	(805) 650-1190	(805) 650-1191
Ventura County Adult Day Health Care	1700 N. Lombard Street, Oxnard 93030	(805) 278-4321	(805) 278-4322
Yolo County			
Golden Days Adult Day Health Care Center	1215 Merkeley Avenue, West Sacramento 95691	(916) 371-6011	(916) 371-6061
Yolo Adult Day Health Center	20 North Cottonwood Street, Woodland 95695	(530) 666-8828	(530) 666-8826

[Back to Top of Page](#)

[Conditions of Use](#) | [Privacy Policy](#) | [E-Mail CDA Webmaster](#)

© 2006 State of California.



[Home](#)

[About CDA](#)

[Services and Programs](#)

[What's New](#)

[Statistics and Demographics](#)

[Laws and Regulations](#)

[Career Opportunities With CDA](#)

[Doing Business With CDA](#)



Alzheimer's Day Care Resource Center Program

Alzheimer's Day Care Resource Centers (ADCRC) provide a positive experience and care for persons with Alzheimer's disease and other dementia.

The primary purpose of the ADCRCs are to: prevent premature or inappropriate institutional placement of persons with moderate to severe levels of impairment due to dementia; provide support and respite for caregivers; serve as models of the optimum type and level of day care services that are needed by persons with dementia; make training opportunities available to professionals and other persons providing care and treatment for this population; and increase public awareness and knowledge about Alzheimer's disease and related disorders.

The centers provide services that support the physical and psychosocial needs of persons with Alzheimer's disease or related dementia. Individual care plans are developed for each program participant with activities scheduled in accordance with these plans. The overall objective is to keep the participants as healthy and active as possible by helping them maintain their highest level of functioning and to improve the quality of their lives while providing respite to caregivers.

Persons who have been diagnosed as having Alzheimer's disease or other dementia are eligible to participate, without regard to age or financial resources. Targeted are those persons having moderate to severe levels of care needs and behavioral problems which make it difficult for them to participate in other care programs.

Participants are requested to share in the cost of care through fees based on the cost of services and a sliding fee scale that is specific to each site. Approximately one-third of the sites are administered under Adult Day Health Care licensure and certification, permitting them to accept Medi-Cal eligible persons.

[Back to Top of Page](#)

[Conditions of Use](#) | [Privacy Policy](#) | [E-Mail CDA Webmaster](#)

© 2006 State of California.

My CA

Californians, for information on services in your area for seniors or adults with disabilities, call toll-free:

1-800-510-2020

Outside California, call the toll-free Eldercare Locator service at 1-800-677-1116

Related Links

- [Alzheimer's Day Care Resource Centers](#)



[Home](#)

[About CDA](#)

[Services and Programs](#)

[What's New](#)

[Statistics and Demographics](#)

[Laws and Regulations](#)

[Career Opportunities With CDA](#)

[Doing Business With CDA](#)



California Alzheimer's Day Care Resource Centers

For further information please call 1-800-510-2020.

County	Center
Alameda	Alzheimer's Services of the East Bay, Hayward
Butte	Peg's Place, Chico
Contra Costa	Diablo Center for Adult Day Health Care, Pleasant Hill
El Dorado	Senior Day Care, Placerville
Fresno	Oasis, Fresno
Humboldt	Humboldt Senior Resource Center, Eureka
Imperial	Imperial Valley Adult Day Health Care Center, El Centro
Inyo	The Care Center, Bishop
Kern	Alzheimer's Disease Association of Kern County, Inc., Bakersfield
Kings	Kings County Commission on Aging, Hanford
Los Angeles (City)	Hollywood Senior Multipurpose Center, Hollywood
	St. Barnabas Senior Center of Los Angeles, Los Angeles
	ONE, 17400 Victory Boulevard, Van Nuys
Los Angeles (County)	WISE Senior Services, Santa Monica
	Rancho Adult Day Services, Downey
	Gardena Senior Citizens Day Care Center, Gardena
	The Community Assistance Program for Seniors (CAPS), Pasadena
	Jewish Family Services, North Hollywood
	ONE, Van Nuys
	Human Service Association, Bell Gardens
Marin	Senior Access Alzheimer's Center, Novato
Mendocino	Redwood Coast Seniors, Inc., Fort Bragg

My CA

Californians, for information on services in your area for seniors or adults with disabilities, call toll-free:

1-800-510-2020
 Outside California, call the toll-free Eldercare Locator service at 1-800-677-1116

Related Links

- Return to: [Alzheimer's Day Care Resource Center Program](#)

Merced	DayOut, Merced
Monterey	Monterey County Alzheimer's Day Care Resource Center, Seaside
Napa	Adult Day Services of Napa Valley, Napa
Nevada	Health For All, Inc., Auburn
Orange	Adult Day Services of Orange County, Huntington Beach
Placer	Health For All, Inc., Auburn
Riverside	Care Connexus, Inc., Sun City
	Daybreak Adult Day Care Services, Hemet
	Eisenhower Memorial Five Star Club, Palm Desert
Sacramento	Triple "R", Sacramento
San Benito	Jovenes de Antano, Hollister
San Bernardino	Community Adult Day Care of San Bernardino, Patton
	The Other Place, Redlands
San Diego	Community Care for Adults, Oceanside
	George G. Glenner Alzheimer's Family Centers, Inc., Escondido
San Francisco	Goldman Institute on Aging, San Francisco
	Laguna Honda Hospital, San Francisco
	Self-Help for the Elderly, San Francisco
San Joaquin	Senior Services Agency of San Joaquin County, Stockton
San Luis Obispo	AD Care, San Luis Obispo
San Mateo	Mills-Peninsula Senior Focus, Burlingame
Santa Barbara	Life Steps Foundation, Santa Barbara
Santa Clara	Respite and Research for Alzheimer's Disease, San Jose
Santa Cruz	Jovenes de Antano, Hollister
Shasta	Golden Umbrella, Redding
Siskiyou	Rural Elders, Inc., Mt. Shasta
Sonoma	Alzheimer's Respite and Resource Center, Santa Rosa
Stanislaus	Miller's Place, Modesto
Tulare	Porterville Adult Day Services,

	Porterville
Tuolumne	Tuolumne Adult Day Health Care, Sonora
Ventura	Senior Concerns Alzheimer's Day Care Resource Center, Thousand Oaks
Yolo	Yolo Adult Day Health Center, Woodland

Last updated: May 20, 2003

[Back to Top of Page](#)

[Conditions of Use](#) | [Privacy Policy](#) | [E-Mail CDA Webmaster](#)

© 2006 State of California.

Services Provided By Regional Centers

Regional centers provide diagnosis and assessment of eligibility and help plan, access, coordinate and monitor the services and supports that are needed because of a developmental disability. There is no charge for the diagnosis and eligibility assessment.

Once eligibility is determined, a case manager or service coordinator is assigned to help develop a plan for services, tell you where services are available, and help you get the services. Most services and supports are free regardless of age or income.

There is a requirement for parents to share the cost of 24-hour out-of-home placements for children under age 18. This share depends on the parents' ability to pay. For further information, see Parental Fee Program (<http://www.dds.ca.gov/ParentalFee/Home.cfm>). There may also be a co-payment requirement for other selected services. For further information, see Family Cost Participation Program (<http://www.dds.ca.gov/FCPP/Index.cfm>).

Some of the services and supports provided by the regional centers include:

- Information and referral
- Assessment and diagnosis
- Counseling
- Lifelong individualized planning and service coordination
- Purchase of necessary services included in the individual program plan
- Resource development
- Outreach
- Assistance in finding and using community and other resources
- Advocacy for the protection of legal, civil and service rights
- Early intervention services for at risk infants and their families
- Genetic counseling
- Family support
- Planning, placement, and monitoring for 24-hour out-of-home care
- Training and educational opportunities for individuals and families
- Community education about developmental disabilities

Who Is Eligible For Services?

To be eligible for services, a person must have a disability that begins before the person's 18th birthday, be expected to continue indefinitely and present a substantial disability as defined in Section 4512 of the California Welfare and Institutions Code. Specifically, that is a disability that originates before an individual turns 18, continues or can be expected to continue

indefinitely, and constitutes a substantial disability for that individual. The disabilities include mental retardation, cerebral palsy, epilepsy, and autism. It also includes disabling conditions found to be closely related to mental retardation or to require treatment similar to that required for individuals with mental retardation, but shall not include other handicapping conditions that are solely physical in nature.

"Substantial disability" means the existence of significant functional limitations in three or more of the following areas of major life activity, as determined by a regional center, and as appropriate to the age of the person:

- (1) Self-care.
- (2) Receptive and expressive language.
- (3) Learning.
- (4) Mobility.
- (5) Self-direction.
- (6) Capacity for independent living.
- (7) Economic self-sufficiency.

Eligibility is established through diagnosis and assessment performed by regional centers.

Infants and toddlers (age 0 to 36 months) who are at risk of having developmental disabilities or who have a developmental delay may also qualify for services. The criteria for determining the eligibility of infants and toddlers is specified in *Section 95014* of the *California Government Code* (<http://www.dds.ca.gov/statutes/GOVSectionView.cfm?Section=95014.htm>). In addition, individuals at risk of having a child with a developmental disability may be eligible for genetic diagnosis, counseling and other prevention services. For information about these services, see Early Start

Information About Programs and Services

The Department of Developmental Services is responsible for designing and coordinating a wide array of services for California residents with developmental disabilities. Regional centers help plan, access, coordinate and monitor these services and supports.

A Person-Centered Planning approach is used in making decisions regarding where a person with developmental disabilities will live and the kinds of services and supports that may be needed. In person-centered planning, everyone who uses regional center services has a planning team that includes the person utilizing the services, family members, regional center staff and anyone else who is asked to be there by the individual. The team joins together to make sure that the services that people are getting are supporting their choices in where they want to live, how and with whom they choose to spend the day, and hopes and dreams for the future.

The following is a partial list of supportive services and living arrangements available for persons with developmental disabilities:

Day Program Services

Day programs are community-based programs for individuals served by a regional center. They are available when those services are included in that person's Individual Program Plan (IPP). Day program services may be at a fixed location or out in the community.

- Types of services available through a day program include:
- Developing and maintaining self-help and self-care skills.
- Developing the ability to interact with others, making one's needs known and responding to instructions.
- Developing self-advocacy and employment skills.
- Developing community integration skills such as accessing community services.
- Behavior management to help improve behaviors.
- Developing social and recreational skills.

There are many different types of day programs that provide a diverse range of opportunities for persons with developmental disabilities.

Education Services For Children with Developmental Disabilities

The public school system in California has an important role in providing services to children with developmental disabilities. In recent years, the California State Department of Developmental Services (DDS) and the California Department of Education (CDE) have become strong partners in providing early intervention services to children 0 - 3 years old and special education services to children 3 to 21 years old. Children with special needs who were served by California's Early Start Program (<http://www.dds.ca.gov/EarlyStart/home.cfm>) are able to enter public school programs as preschoolers if they satisfy the eligibility criteria as a child who can benefit from special education services. Local education agencies provide special education and related services to children with disabilities in environments including the home, school, public or private preschools or child care settings. Regional centers continue to provide some services for children who are eligible under the Lanterman Developmental Disabilities Services Act that are not provided as special education and related services.

More information about educational services for children with special needs can be obtained through local school districts, local education agency or Special Education Local Plan Area.

Work Services Program

The Work Services (*formerly Habilitation*) Program addresses the vocation needs of persons with developmental disabilities through a broad range of services directed toward developing the individual's maximum potential for mainstreaming into generic vocational rehabilitation programs. The Work Services Program provides both sheltered workshop services through Work Activity Programs and supported employment services. Work Services are available only to persons with developmental disabilities who are also Regional Center clients.

Supported Employment Services

Supported Employment (SE) services through the Department of Rehabilitation can be provided either through the vocational rehabilitation program or the HSP. SE services are aimed at finding competitive work in a *community integrated work setting* for persons with severe disabilities who need ongoing support services to learn and perform the work. SE placements can be individual placements, group placements (called enclaves), and work crews, such as landscaping crews. Support is usually provided by a job coach who meets regularly with the individual on the job to help him or her learn the necessary skills and behaviors to work independently. As the individual gains mastery of the job, the support services are gradually phased out.

The Department of Rehabilitation is the main SE service provider for adults with developmental disabilities. However, if they are unable to provide services due to fiscal reasons, the regional center may be able to help individuals served get a job by referring them to other programs that provide SE-like services, if these services are available in their area.

Work Activity Program Services

Work Activity Program (WAP) services through the Department of Rehabilitation include paid work, work adjustment and supportive habilitation services in a *sheltered work shop setting*. WAPs provide paid work in accordance with Federal and State Fair Labor Standards. Work adjustment services may include developing good work safety practices, money management skills, and appropriate work habits. Supportive habilitation services may include social skill and community resource training as long as the services are necessary to achieve vocational objectives.

Supported Services

Support services are provided to persons receiving services from a regional center in order to meet the goals and objectives of the Individual Program Plan (IPP) or the Individual Family Service Program (IFSP) (for children ages 0-3 years). Services may be provided through vendors approved by the regional center or through other resources.

Regional centers have a mandate not only to serve persons with developmental disabilities, but to provide services in the most cost-effective manner possible. They are required by the Lanterman Act to use all other resources or generic resources first before using regional center funds. A generic agency is one which has a legal responsibility to serve all members of the general public and receives public funds for providing those services. Other resources include natural supports, school districts, etc.

In-Home Supportive Services

In-Home Supportive Services (IHSS) provides personal care and domestic services to persons who are aged, blind or disabled and who live in their own homes. IHSS is provided to those who otherwise might be placed in an out-of-home care facility but who can safely remain in their own home if IHSS services are received.

Regional centers have a mandate not only to serve persons with developmental disabilities, but to provide services in the most cost-effective manner possible. They are required by the Lanterman Act to use all other sources of funding and services before using regional center funds to provide services. Persons who receive services from a regional center and are eligible for IHSS are expected to use IHSS services available to them.

The In-Home Supportive Services (IHSS) program is administered by each county with oversight by the California Department of Social Services (CDSS). For application and eligibility information contact local county welfare department, adult services section. Look for them in the county government section of the local telephone directory.

Supported Living Services

Supported Living Services (SLS) consist of a broad range of services to adults with developmental disabilities who, through the Individual Program Plan (IPP) process, choose to live in homes they themselves own or lease in the community. SLS may include assistance with

selecting and moving into a home; choosing personal attendants and housemates; acquiring household furnishings; common daily living activities and emergencies; becoming a participating member in community life; managing personal financial affairs, as well as other supports.

These services help individuals exercise meaningful choice and control in their daily lives, including where and with whom to live. SLS is designed to foster individuals' nurturing relationships, full membership in the community, and work toward their long-range personal goals. Because these may be life-long concerns, Supported Living Services are offered for as long and as often as needed, with the flexibility required to meet a persons' changing needs over time, and without regard solely to the level of disability. Typically, a supported living service agency works with the individual to establish and maintain a safe, stable, and independent life in his or her own home. But it is also possible for some individuals to supervise their services themselves, to secure the maximum possible level of personal independence.

The guiding principles of SLS are set down in Section 4689(a) of the Lanterman Act (<http://www.dds.ca.gov/Statutes/WICSectionView.cfm?Section=4685-4689.7.htm>). The Department's regulations for SLS are found in Title 17, Division 2, Chapter 3, Subchapter 19 (Sections 58600 et seq) (<http://www.dds.ca.gov/title17/T17sectiontoc.cfm?SubchapterID=34>) of the California Code of Regulations (CCR).

Individuals who choose to live in their own homes, and their agencies or other people who support them, often will need information about affordable housing options, sources of financial support such as Supplementary Security Income (SSI), and how to stretch a limited budget to meet living expenses. These are the ordinary challenges that are inseparable from a truly self-directed life in the community. For the many adults for whom SLS makes great sense, such challenges are often also road signs on the path to a satisfying life.

Family Home Agency

A Family Home Agency (FHA) approves family homes which offer the opportunity for up to two adult individuals with developmental disabilities per home to reside with a family and share in the interaction and responsibilities of being part of a family. The individual with developmental disabilities receives the necessary service and supports from the family, agencies and the community to enable the individual to be a participating member of the family and the community where the family resides. The family home arrangement allows the sharing of food, shelter, experience, responsibilities and love.

The FHA is a private, nonprofit organization under contract to, and vendored by a regional center. FHAs are responsible for recruiting, training, approving and monitoring family homes, as well as providing ongoing support to family homes. Social service staff employed by the FHA make regular visits to the family home to ensure that necessary services and supports are in place, and that the match between the family and the new family member is viable, and continues to be viable.

FHA and family home services and supports are a new option which enables adults with developmental disabilities to enter into partnerships with families that promote self-determination and interdependence.

Independent Living

Independent Living is a service provided to adults with developmental disabilities that offers functional skills training necessary to secure a self-sustaining, independent living situation in the

community and/or may provide the support necessary to maintain those skills. Individuals typically live alone or with roommates in their own homes or apartments. These homes are not licensed.

Independent living programs, which are vendored and monitored by regional centers, provide or coordinate support services for individuals in independent living settings. They focus on functional skills training for adults who generally have acquired basic self-help skills or who, because of their physical disabilities, do not possess basic self-help skills, but who employ and supervise aides to assist them in meeting their personal needs.

Foster Family Agency

Foster Family Agencies (FFAs) are residential options for children with developmental disabilities, that represent a collaborative effort between two service systems - developmental disabilities and social services/community care licensing. FFAs are privately operated organizations licensed by the Community Care Licensing Division of the State Department of Social Services to care for children up to age 18 in certified foster family homes. FFAs are responsible for the recruitment, training and certification of families to provide alternative homes for children. FFAs monitor and provide oversight for the homes they have certified, and have the authority to decertify homes when necessary. In addition, through the use of professional staff such as social workers, FFAs provide ongoing support to certified parent(s) and the children who live with them.

Professional foster care allows the family and/or those who know the child the best to pick and choose the best support system for the child and wrap services around the child rather than have the child fit into whatever services, i.e. group home, are available. The child is living in a "normal" way - the child lives in a family, in a neighborhood and interacts with other children living the same way. The child has as much contact with the family of origin as the family chooses. The foster home, in the most ideal situation, becomes an extension of the family system.

Respite (In-Home) Services

Respite (In-Home) Services means intermittent or regularly scheduled temporary non-medical care and/or supervision provided in the person's home. In-Home Respite services are support services which typically include:

- Assisting the family members to enable a person with developmental disabilities to stay at home;
- Providing appropriate care and supervision to protect that person's safety in the absence of a family member(s);
- Relieving family members from the constantly demanding responsibility of providing care; and
- Attending to basic self-help needs and other activities that would ordinarily be performed by the family member.

Respite (Out-of-Home) Services are provided in licensed residential facilities.

Respite services typically are obtained from a respite vendor, by use of vouchers and/or alternative respite options. Vouchers are a means by which a family may choose their own service provider directly through a payment, coupon or other type of authorization.

Transportation services

Transportation services are provided so persons with a developmental disability may participate in programs and/or other activities identified in the IPP. A variety of sources may be used to provide transportation including: public transit and other providers; specialized transportation companies; day programs and/or residential vendors; and family members, friends, and others. Transportation services may include help in boarding and exiting a vehicle as well as assistance and monitoring while being transported.

Community Care Facilities

Community Care Facilities (CCFs) are licensed by the Community Care Licensing Division of the State Department of Social Services to provide 24-hour non-medical residential care to children and adults with developmental disabilities who are in need of personal services, supervision, and/or assistance essential for self-protection or sustaining the activities of daily living. Based upon the types of services provided and the persons served, each CCF vendored by a regional center is designated one of the following service levels:

- SERVICE LEVEL 1: Limited care and supervision for persons with self-care skills and no behavior problems.
- SERVICE LEVEL 2: Care, supervision, and incidental training for persons with some self-care skills and no major behavior problems.
- SERVICE LEVEL 3: Care, supervision, and ongoing training for persons with significant deficits in self-help skills, and/or some limitations in physical coordination and mobility, and/or disruptive or self-injurious behavior.
- SERVICE LEVEL 4: Care, supervision, and professionally supervised training for persons with deficits in self-help skills, and/or severe impairment in physical coordination and mobility, and/or severely disruptive or self-injurious behavior. Service Level 4 is subdivided into Levels 4A through 4I, in which staffing levels are increased to correspond to the escalating severity of disability levels.

Intermediate Care Facilities and Program Types (ICF/DD, ICF/DD-H, ICF/DD-N, ICF/DD-CN)

Intermediate Care Facilities (ICF) are health facilities licensed by the Licensing and Certification Division of the California Department of Health Services to provide 24-hour-per-day services. The four types of ICFs providing services for Californians with developmental disabilities in the community are:

ICF/DD (Developmentally Disabled)

"Intermediate care facility/developmentally disabled" is a facility that provides 24-hour personal care, habilitation, developmental, and supportive health services to developmentally disabled clients whose primary need is for developmental services and who have a recurring but intermittent need for skilled nursing services.

ICF/DD-H (Habilitative)

"Intermediate care facility/developmentally disabled-habilitative" is a facility with a capacity of 4 to 15 beds that provides 24-hour personal care, habilitation, developmental, and supportive health services to 15 or fewer developmentally disabled persons who have intermittent recurring needs for nursing services, but have been certified by a physician and surgeon as not requiring availability of continuous skilled nursing care.

ICF/DD-N (Nursing)

"Intermediate care facility/developmentally disabled-nursing" is a facility with a capacity of 4 to 15 beds that provides 24-hour personal care, developmental services, and nursing supervision for developmentally disabled persons who have intermittent recurring needs for skilled nursing care but have been certified by a physician and surgeon as not requiring continuous skilled nursing care. The facility shall serve medically fragile persons who have developmental disabilities or demonstrate significant developmental delay that may lead to a developmental disability if not treated.

ICF/DD-CN (Continuous Nursing) Pilot Program

These facilities provide services similar to ICF/DD-N services with the addition of 24-hour skilled nursing services (licensed vocational nurse and registered nurse) for those consumers whose medical conditions require continuous nursing care and observation. The ICF/DD-CN facilities provide these services for 4-15 consumers in a community-based living arrangement, with preference given to facilities serving 4-6 individuals. The pilot project is currently limited to selected participants and no new facilities are currently being developed.

Source: California Health & Safety Code, Chapter 2. Health Facilities, Article 1, Section 1250-1263: www.leginfo.ca.gov

State of California
Department of Developmental Services

Directory of Regional Centers

California's has 21 regional centers with more than 40 offices located throughout the state that serve individuals with developmental disabilities and their families.

[Map of Regional Centers \(PDF\)](#)

[Lookup Regional Centers in Los Angeles County by ZIP Code](#)

Regional Centers	Executive Director	Areas Serve
Alta California Regional Center 2135 Butano Drive Sacramento, CA 95825	Phil Bonnet (916) 978-6400	Alpine, Colusa, El Dorado, Nevada, Placer, Sacramento, Sierra, Sutter, Yolo, and Yuba counties
Central Valley Regional Center 4615 North Marty Avenue Fresno, CA 93722-4186	Robert Riddick (559) 276-4300	Fresno, Kings, Madera, Mariposa, Merced, and Tulare counties
Eastern Los Angeles Regional Center 1000 South Fremont Alhambra, CA 91802-7916	Gloria Wong (626) 299-4700	Eastern Los Angeles county including the communities of Alhambra and Whittier
Far Northern Regional Center 1900 Churn Creek Road, #319 Redding, CA 96002 Mailing Address: P. O. Box 492418 Redding, CA 96049-2418	Laura Larson (530) 222-4791	Butte, Glenn, Lassen, Modoc, Plumas, Shasta, Siskiyou, Tehama, and Trinity counties
Frank D. Lanterman Regional Center 3303 Wilshire Boulevard, Suite 700 Los Angeles, CA 90010	Diane Campbell Anand (213) 383-1300	Central Los Angeles county including Burbank, Glendale, and Pasadena
Golden Gate Regional Center 875 Stevenson Street, 6th Floor San Francisco, CA 94103	James Shorter (415) 546-9222	Marin, San Francisco, and San Mateo counties
Harbor Regional Center 21231 Hawthorne Boulevard Torrance, CA 90503	Patricia Del Monico (310) 540-1711	Southern Los Angeles county including Bellflower, Harbor, Long Beach, and Torrance
Inland Regional Center 674 Brier Drive San Bernardino, CA 92408 Mailing Address: P. O. Box 6127 San Bernardino, CA 92412-6127	Mary Lynn Clark (909) 890-3000	Riverside and San Bernadino counties
Kern Regional Center 3200 North Sillect Avenue Bakersfield, CA 93308	Michal C. Clark, Ph.D. (661) 327-8531	Inyo, Kern, and Mono counties
North Bay Regional Center 10 Executive Court, Suite A Napa, CA 94558	Bob Hamilton (707) 256-1100	Napa, Solano, and Sonoma counties
North Los Angeles County Regional Center 15400 Sherman Way, Suite 170 Van Nuys, CA 91406-4211	George Stevens (818) 778-1900	Northern Los Angeles county including San Fernando and Antelope Valleys
Redwood Coast Regional Center 525 Second Street, Suite 300 Eureka, CA 95501	Clay Jones (707) 445-0893	Del Norte, Humboldt, Mendocino, and Lake counties
Regional Center of the East Bay 7677 Oakport Street, Suite 300 Oakland, CA 94621	James M. Burton (510) 383-1200	Alameda and Contra Costa counties
Regional Center of Orange County 801 Civic Center Drive West, Suite 100 Santa Ana, CA 92701	William J. Bowman (714) 796-5100	Orange county
San Andreas Regional Center 300 Orchard City Drive, Suite 170 Campbell, CA 95008	Santi J. Rogers (408) 374-9960	Monterey, San Benito, Santa Clara, and Santa Cruz counties

San Diego Regional Center
 4355 Ruffin Road, Suite 200
 San Diego, CA 92123-1648

Carlos Flores
 (858) 576-2996

Imperial and San Diego counties

San Gabriel/Pomona Regional Center
 761 Corporate Center Drive
 Pomona, CA 91768

R. Keith Penman
 (909) 620-7722

Eastern Los Angeles county including El Monte, Monrovia, Pomona, and Glendora

South Central Los Angeles Regional Center
 650 West Adams Boulevard, Suite 200
 Los Angeles, CA 90007-2545

Dexter Henderson
 (213) 744-7000

Southern Los Angeles county including the communities of Compton and Gardena

Tri-Counties Regional Center
 520 East Montecito Street
 Santa Barbara, CA 93103-3274

Omar Noorzad, Ph.D.
 (805) 962-7881

San Luis Obispo, Santa Barbara, and Ventura counties

Valley Mountain Regional Center
 702 North Aurora Street
 Stockton, CA 95202

Richard W. Jacobs
 (209) 473-0951

Amador, Calaveras, San Joaquin, Stanislaus, and Tuolumne counties

Westside Regional Center
 5901 Green Valley Circle, Suite 320
 Culver City, CA 90230-6953

Michael Danneker
 (310) 258-4000

Western Los Angeles county including the communities of Culver City, Inglewood, and Santa Monica

Last Updated: 11/13/2007

[Conditions of Use](#) | [Privacy Policy](#)
 Copyright © 2007 State of California
 11/1/07: 6,974 - 306

Department of Developmental Services Regional Centers

(Colors correspond to areas served by each Regional Center)



Updated: July 1, 2003



Program of All Inclusive Care for the Elderly (PACE)

Overview

- [Hot Topics](#)
- [Regulation & Background](#)
- [Information for State Agencies](#)
- [Provider Application and Related Resources](#)
- [Expansions](#)
- [BIPA 903 Waiver Requests](#)
- [Additional Resources](#)
- [List of PACE Provider Organizations](#)

Overview

The Program of All-Inclusive Care for the Elderly (PACE) is a capitated benefit authorized by the Balanced Budget Act of 1997 (BBA) that features a comprehensive service delivery system and integrated Medicare and Medicaid financing. The program is modeled on the system of acute and long term care services developed by On Lok Senior Health Services in San Francisco, California. The model was tested through CMS (then HCFA) demonstration projects that began in the mid-1980s. The PACE model was developed to address the needs of long-term care clients, providers, and payers. For most participants, the comprehensive service package permits them to continue living at home while receiving services rather than be institutionalized. Capitated financing allows providers to deliver all services participants need rather than be limited to those reimbursable under the Medicare and Medicaid fee-for-service systems.

The BBA established the PACE model of care as a permanent entity within the Medicare program and enables States to provide PACE services to Medicaid beneficiaries as a State option. The State plan must include PACE as an optional Medicaid benefit before the State and the Secretary of the Department of Health and Human Services (DHHS) can enter into program agreements with PACE providers.

Participants must be at least 55 years old, live in the PACE service area, and be certified as eligible for nursing home care by the appropriate State agency. The PACE program becomes the sole source of services for Medicare and Medicaid eligible enrollees.

An interdisciplinary team, consisting of professional and paraprofessional staff, assesses participants' needs, develops care plans, and delivers all services (including acute care services and when necessary, nursing facility services) which are integrated for a seamless provision of total care. PACE programs provide social and medical services primarily in an adult day health center, supplemented by in-home and referral services in accordance with the participant's needs. The PACE service package must include all Medicare and Medicaid covered services, and other services determined necessary by the interdisciplinary team for the care of the PACE participant.

PACE providers receive monthly Medicare and Medicaid capitation payments for each eligible enrollee. Medicare eligible participants who are not eligible for Medicaid pay monthly premiums equal to the Medicaid capitation amount, but no deductibles, coinsurance, or other type of Medicare or Medicaid cost-sharing applies. PACE providers assume full financial risk for participants' care without limits on amount, duration, or scope of services.

Downloads

[PACE Fact Sheet \[PDF 65 KB\]](#)

Related Links Inside CMS

There are no Related Links Inside CMS

Related Links Outside CMS



46



Program of All Inclusive Care for the Elderly (PACE)

- Overview
- Hot Topics
- Regulation & Background
- Information for State Agencies
- Provider Application and Related Resources
- Expansions
- BIPA 903 Waiver Requests
- Additional Resources

List of PACE Provider Organizations

List of PACE Provider Organizations



This list contains the PACE Organizations operating as permanent providers. The list includes only those organizations for which a Program Agreement has been executed. All Organizations reflected in this list have been approved by CMS to provide the Medicare Part D benefit. The PACE Organizations may be sorted by name and state.

Select From The Following Options:

Show all items

Show only (select one or more options):

- Show only items whose last modified date is within the past
- Show only items whose State is California
- Show only items containing the following word

Show Items

There are 4 items whose state is California.

Sort by: State Ascending



View Results in Excel

Organization Name ▲ ▼	City ▲ ▼	State ▲ ▼	Phone # ▲ ▼
AltaMed Senior Buena Care	Los Angeles	California	323-728-0411
Center for Elders Independence	Oakland	California	510-433-1150
On Lok Senior Health Services	San Francisco	California	415-292-8888
Sutter Senior Care	Sacramento	California	916-446-3100

View Items Per Page: 10



Data Last Updated : 10/26/2007
[Help with File Formats and Plug-Ins](#)

[Submit Feedback](#)

47

THE VA AID & ATTENDANCE PROGRAM

The Aid and Attendance (A&A) Special Pension provides benefits for veterans and surviving spouses who require the regular attendance of another person to assist in eating, bathing, dressing and undressing or taking care of the needs of nature. It also includes individuals who are blind or a patient in a nursing home because of mental or physical incapacity. Assisted care in an assisting living facility also qualifies.

The A&A Pension can provide up to \$1,519 per month to a veteran, \$976 per month to a surviving spouse, or \$1,801 per month to a couple*.

Eligibility must be proven by filing the proper Veterans Application for Pension or Compensation. This application will require a copy of DD-214 (see below for more information) or separation papers, Medical Evaluation from a physician, current medical issues, net worth limitations, and net income, along with out-of-pocket Medical Expenses.

A DD-214 is issued to military members upon separation from active service. DD-214s were issued to separated service members beginning in the 1950's. The term "DD-214" is often used generically to mean "separation papers" or "discharge papers", no matter what form number was used to document active duty military service. If the VA has a copy of a DD-214, it is usually because the veteran attached a copy (or sometimes, the original) to his or her application for disability or education benefits. If you've lost your original DD-214 or a copy and you are receiving (or applied for in the past) disability or education benefits from the VA, they may have a copy (or the original, if you gave it to them) on file. At the very least, if you are currently receiving benefits (or did in the past), they should be able to provide a Statement of Service, which can be used instead of a "DD-214".

Any War-Time Veteran with 90 days of active duty, 1 day beginning or ending during a period of War, is eligible to apply for the Aid & Attendance Special Pension. A surviving spouse (marriage must have ended due to death of veteran) of a War-Time Veteran may also apply. The individual applying must qualify both medically and financially.

To qualify medically, a War-Time Veteran or surviving spouse must need the assistance of another person to perform daily tasks, such as eating, dressing, undressing, taking care of the needs of nature, etc. Being blind or in a nursing home for mental or physical incapacity, or residing in an assisted living facility also qualifies.

To qualify financially, an applicant must have less than \$80,000 in assets, EXCLUDING their home and vehicles.

<http://www.veteranaid.org/program.php>
<http://www.vba.va.gov/bln/21/Benefits/>

CALIFORNIA MEDICAID HOME AND COMMUNITY-BASED SERVICES WAIVER PROGRAMS

Program Name	Persons Eligible	Services	Referred By
<p>Acquired Immune Deficiency Syndrome (AIDS) Waiver</p>	<p>Persons on Medi-Cal with an HIV or AIDS diagnosis who are certifiable for placement in a nursing facility or acute care hospital, but choose to live at home. This includes those who have a health condition made difficult to manage because of the HIV diagnosis.</p>	<p>Wide range of community-based services including, but not limited to, case management, homemaker services, attendant care, transportation, meals, skilled nursing care, and medical equipment.</p>	<p>Department of Health Services, Office of AIDS</p>
<p>Assisted Living Waiver Pilot Project (ALWPP) The ALWPP is a three-year pilot project.</p>	<p>Persons on Medi-Cal who are 21 years of age or older, who meet the Nursing Facility (A or B) Level of Care, and who live in Sacramento, San Joaquin, or Los Angeles County.</p>	<p>Participants will reside in either a Residential Care Facility for the Elderly (RCFE) or in a Public Subsidized Housing (PSH) Unit. Waiver services are: Assisted Living Services, Care Coordination, Nursing Facility Transition Care Coordination, Translation and Interpretation Services, Consumer Education, Environmental Accessibility Adaptations, and Community Transition Services. Participants who reside in RCFEs will receive services from the RCFE. Participants who reside in PSHs will receive services from a Medi-Cal licensed Home Health Agency. Care coordination is provided by Care Coordination Agencies that contract with CDHS.</p>	<p>Department of Health Services, Medi-Cal Operations Division Monitoring and Oversight Section</p>
<p>DDS Home and Community Based Services (HCBS) Waiver Aid Codes:* 6V (no share of cost) 6W (share of cost) *For those who qualify for full-scope Medi-Cal through the institutional deeming or spousal impoverishment rules under the waiver.</p>	<p>Developmentally disabled persons under the Regional Center definition who would otherwise require care in one of the categories of intermediate care facility for persons with developmental disabilities (ICF/DD). Institutional deeming and spousal impoverishment rules are applied.</p>	<p>Wide range of community-based services, including home health, physical and occupational therapy, and transportation.</p>	<p>Department of Developmental Services Regional Centers</p>

CALIFORNIA MEDICAID HOME AND COMMUNITY-BASED SERVICES WAIVER PROGRAMS. CONTINUED

Program Name	Persons Eligible	Services	Referred By
<p>HCBS Nursing Facility/Acute Hospital (NF/AH) Waiver</p> <p>Medi-Cal In-Home Operations administers three waivers: 1) Nursing Facility Level A and B (NF A/B); 2) Nursing Facility Subacute (NFSA); and 3) In-Home Medical Care (IHMC). These three waivers will be combined into a single waiver starting January 1, 2007.</p> <p>Aid Codes:* 6X (no share of cost) 6Y (share of cost)</p> <p>*For those who qualify for full scope Medi-Cal under the institutional deeming or spousal impoverishment rules under the NF A/B and NFSA waivers.</p>	<p>Physically disabled individuals, including children, who would otherwise require acute hospital or nursing facility care but wish to remain in the community. Institutional deeming and spousal impoverishment rules are applied (see Glossary).</p>	<p>Home health care, including nursing, case management, respite care, utility coverage, and minor home modifications.</p>	<p>Department of Health Services In-Home Operations (IHO) Section</p>
<p>In-Home Medical Care Services (IHMC) Waiver</p>	<p>Individuals requiring acute hospital care for 90 consecutive days or greater but who wish to receive care at home.</p>	<p>Home health care, including nursing, case management, respite care, utility coverage, home aide assistance, and minor home modifications.</p>	<p>Department of Health Services In-Home Operations (IHO) Section</p>
<p>Multipurpose Senior Services Program (MSSP) Waiver</p> <p>Aid Codes:* IX (share of cost) IY (no share of cost)</p> <p>*For those who qualify for full-scope Medi-Cal through spousal impoverishment rules.</p>	<p>Persons on Medi-Cal who are 65 years of age or older, who live in the counties and zip codes covered by the waiver, and who are certifiable for placement in a nursing facility but choose to live at home. Spousal impoverishment rules are applied.</p>	<p>Wide range of community-based services including, but not limited to: case management, personal care, money management, homemaker services, housing assistance, meals, transportation, and respite care.</p>	<p>Department of Aging</p>
<p>Nursing Facility Level A and B (NF A/B) Waiver</p>	<p>Physically disabled individuals, including children, who would otherwise require intermediate (NF-A) or skilled nursing (NF-B) care for 365 consecutive days or greater but wish to remain in the community.</p>	<p>Home health care, including nursing, case management, respite care, utility coverage, home aide assistance, personal care services, and minor home modifications.</p>	<p>Department of Health Services In-Home Operations (IHO) Section</p>
<p>Nursing Facility Subacute (NF SA) Waiver</p>	<p>Physically disabled adults who would otherwise require subacute nursing facility care for 180 consecutive days or greater but wish to remain in the community.</p>	<p>Home health care, including nursing, case management, respite care, utility coverage, home aide assistance, personal care services, and minor home modifications.</p>	<p>Department of Health Services In-Home Operations (IHO) Section</p>

Medi-Cal Operations Division - Monitoring and Oversight Section

Monitoring and Oversight Section

The Monitoring and Oversight Section (MOS) of the HCBS Branch is responsible for the indirect management of two pilot projects and the two following waivers:

Developmentally Disabled (DD) Waiver

The DD waiver is the largest waiver in the state, and the largest waiver in the United States with a capability of serving over 70,000 beneficiaries. The DD waiver is targeted to disabled beneficiaries who would otherwise require institutional care. The waiver provides services and assistance for the beneficiaries to remain in their homes and communities. The waiver is administered by twenty-one Regional Centers and the Department of Developmental Services with monitoring and oversight provided through this section of the HCBS Branch.

Multipurpose Senior Services Program (MSSP) waiver

The MSSP waiver is targeted to those medically fragile individuals over the age of sixty-five and is administered through 41 MSSP sites throughout the state, under the California Department of Aging. Comprehensive oversight and management by DHS is provided through the Monitoring and Oversight Section.

The two pilot projects managed by the MOS are the Intermittent Care Facility - Continuous Nursing (ICF-CN) and the Assisted Living Waiver Pilot Project (ALWPP). The ICF-CN provides a home and community based alternative for DD beneficiaries who are also technology dependent. The ALWPP is in the design stage and will provide assisted living as an alternative to long-term placement in a skilled nursing facility for Medi-Cal recipients. Detailed information on each of the pilot projects is as follows:

Intermediate Care Facility for the Developmentally Disabled-Continuous Nursing (ICF/DD-CN) Pilot Project

The passage of AB 359 by the California State Legislature in 1999 required the Department to establish an Intermediate Care Facility for the Developmentally Disabled-Continuous Nursing (ICF/DD-CN) Pilot Project. The waiver requires the Department to commit to maintaining access to care, provision of quality services, adhering to cost effectiveness, and open access to emergency services for the target population eligible for services under the waiver. Additionally, approval of the waiver required the implementation and submission of an independent evaluation to CMS and a system by which cost effectiveness would be monitored and insured.

An internal Pilot Project Committee (PPC) has been formed to gather information and discuss and implement appropriate decisions regarding design of the ICF/DD-CN model. Members of the PPC include: Department Of Health Service's Medi-Cal Policy Division, Medi-Cal Operations Division, and Licensing and Certification, as well as the Department of Developmental Services. There are six facilities included in the waiver project to date; the waiver will allow the participation of up to ten sites pending review and approval of Application of Participation via the PPC.

Waiver eligibility criteria requires that participants be Medi-Cal eligible, certified by Regional Center as developmentally disabled, enrolled in the Regional Center, exhibiting medical necessity for 24 hour continuous skilled nursing care and/or observation, and free of any clinically active communicable disease. Participants must also meet specific minimum medical criteria as described in the waiver.

For more information about the ICF/DD-DN pilot project, contact Monet Parham-Lee at (916) 552-9105.

Assisted Living Waiver Pilot Project (ALWPP)

AB 499 (Aroner), Statutes of 2000, requires the Department to develop and submit a waiver application to the Centers for Medicare & Medicaid Services (CMS) for an Assisted Living Waiver Pilot Project. The project proposes to enable low income, Medi-Cal eligible persons who reside in Residential Care Facilities for the Elderly, or publicly funded senior and disabled housing projects, to age in place when they might otherwise require in-patient Nursing Facility (NF) care. The Department is to test the efficacy of two Assisted Living models - licensed Residential Care For the Elderly (RCFE) and publicly funded senior and disabled housing projects. NCB Development Corporation has been selected as the contractor to assist the Department in the development and implementation of the planned waiver for the pilot project. The Department will work with NCB Development Corporation to develop needed policies and procedures for the standards and evaluation of the effectiveness and efficacy of the pilot project. An evaluation of the project is planned in the final year of implementation.

For more information about the ALWPP, contact Mark Mimnaugh at (916) 552-9105.



In-Home Operations

California Department of Health Care Services
Long Term Care Division
Home and Community-Based Services (HCBS) Branch
In-Home Operations (IHO) Section
P.O. Box 997437, MS 4502
Sacramento, CA 95688-7437
(916) 552-9105



WEBSITE:

For general information about In-Home
Operations or to view a copy of the
HCBS Waivers

www.dhs.ca.gov/mcs/mcod/ihos

Email: IHOwaivers@dhs.ca.gov

IHO INTAKE UNIT:

Phone (916)552-9105

FAX (916) 552-9151

IHO CASE MANAGEMENT UNITS:

NORTHERN REGION

P.O. Box 997437, MS 4502
Sacramento, CA 95899-7437

Phone (916) 552-9105

FAX (916) 552-9149

(916) 552-9151

SOUTHERN REGION

311 South Spring Street, Suite 313
Los Angeles, CA 90013

Phone (213) 897-6774

FAX (213) 897-7355

(213) 897-9314

EPSDT

Phone (916) 552-9105

FAX (916) 552-9150

**MEDI-CAL'S IN-HOME OPERATIONS (IHO)
HOME AND COMMUNITY-BASED SERVICES (HCBS) OPTIONS
QUICK-REFERENCE GUIDE**



THIS IS ONLY A REFERENCE GUIDE. PLEASE CALL (916) 552-9105 FOR ANY CLARIFICATION

EPSDT SERVICES

HCBS WAIVER SERVICES

Eligibility	EPSDT SERVICES	HCBS WAIVER SERVICES
Available Services	Full-scope Medi-Cal eligible and medically eligible beneficiary UNDER the age of 21. EPSDT services are designed to assist in supporting a beneficiary in his/her home as an alternative to care in a licensed health care facility. EPSDT services authorized by IHO include Private Duty Nursing (PDN) and Pediatric Day Health Care (PDHC).	Full-scope Medi-Cal eligible and medically eligible beneficiary. HCBS waiver services are designed to assist in supporting a beneficiary in his/her home as an alternative to care in a licensed health care facility. HCBS waiver services include case management, community transition services, private duty nursing, home health aides, life-sustaining utility reimbursement, habilitation services, family training, and respite care.
Criteria for Services	EPSDT services may be authorized when medically necessary at a cost that is not greater than what may be provided in a licensed health care facility. These services must be prior authorized.	HCBS waiver services may be authorized when medically necessary at a cost that is not greater than what may be provided in a licensed health care facility. These services must be prior authorized.
Place of Services	The beneficiary's home, which is not a licensed health care facility, or in a Pediatric Day Health Care facility.	The beneficiary's home or a congregate living health facility.
Service Providers	Providers of EPSDT private duty nursing services include licensed and certified home health agencies and/or individual licensed nurses - also known as supplemental nursing service providers. PDHC services are provided by licensed and certified PDHC facilities.	HCBS waiver services providers include licensed and certified home health agencies; individual licensed Registered Nurses, Licensed Vocational Nurses, Licensed Clinical Social Workers, Marriage & Family Therapists, Licensed Psychologists; nonprofit or professional organizations; personal care or employment agencies; or unlicensed caregivers.
Requests for Service	An appropriately licensed and certified Medi-Cal provider should submit a Treatment Authorization Request (TAR) for EPSDT PDN or PDHC to IHO.	A HCBS Waiver application (available upon request) must be completed and returned to IHO.
Required Documentation	Medical records (Including but not limited to) : Medical information that supports the request for services; assessment and identification of skilled nursing care needs; Plan of Treatment (POT) signed by the physician authorizing the services; and a TAR requesting the services.	Medical records (Including but not limited to) : Medical information that supports the request for services; assessment and identification of skilled nursing care needs; home safety evaluation; Plan of Treatment (POT) signed by the physician, beneficiary & caregivers; and a TAR requesting the services.

MEDI-CAL IN-HOME OPERATIONS

Medi-Cal In-Home Operations (IHO), within the California Department of Health Care Services, has statewide responsibility for reviewing and authorizing home and community-services under the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) benefit or through Home and Community-Based Service (HCBS) waivers. These services are authorized for Medi-Cal beneficiaries who meet medical necessity criteria for the requested services. The cost of these services in the home must not exceed the cost that Medi-Cal would expend in the otherwise appropriate licensed health care facility.

IHO has two offices in California – headquarters, located in Sacramento, and a regional office in Los Angeles.

The Sacramento office is responsible for processing EPSDT private duty nursing and pediatric day health care requests. This office is also responsible for reviewing all new requests statewide for HCBS waiver services. Upon receipt and review of the HCBS application, the request for HCBS waiver services is then forwarded to the appropriate regional office for completing the intake process and ongoing administrative case management.

MEDI-CAL HOME AND COMMUNITY-BASED SERVICES OPTIONS

Home and community-based options under Medi-Cal include the authorization of services through a **Home- and Community-Based Services (HCBS) Waiver** or under the **Early and Periodic Screening, Diagnosis, and Treatment (EPSDT)** state-plan benefit. These services are available to full-scope Medi-Cal beneficiaries who meet certain medical necessity criteria, and are authorized by the Medi-Cal In-Home Operations (IHO) Section.

Home and Community-Based Services Waivers

Home- and Community-Based Services (HCBS) waivers are creative alternatives, allowed under federal law, for states participating in Medicaid (Medi-Cal in California), to be implemented in the home or community for certain Medi-Cal beneficiaries to avoid hospitalization or nursing facility placement. Services provided under a waiver are typically not part of the benefit package available under Medicaid. When the Federal Government approves a waiver, federal monies are matched to state dollars for reimbursement of the services provided under the waiver.

Requests for waiver services can come from Medi-Cal providers, associated agencies, beneficiaries, families, friends, or advocates. Requests may be faxed, mailed, telephoned to IHO. Upon receipt of the request for HCBS waiver services, IHO will mail a HCBS Waiver application to the individual. Assessment for HCBS waiver services begins upon the receipt of the completed HCBS Waiver application by IHO.

Once a Medi-Cal home program is established for the beneficiary, medically necessary waiver services that will assist the beneficiary in remaining safely at home are authorized by

IHO. Additional Medi-Cal services authorized by IHO when medically appropriate for HCBS Waiver beneficiaries include equipment, supplies, therapies, and transportation.

California currently has five HCBS waivers: HCBS Waiver for the Developmentally Disabled (DDS), Multi-Purpose Senior Services Program (MSSP), AIDS, In-Home Operations (IHO), and Nursing Facility Acute Hospital (NF/AH) Waivers. IHO is responsible for the authorization and management of services under the IHO and NF A/H waivers.

In-Home Operations (IHO) Waiver

- Services are subject to prior authorization.
- Individuals enrolled in this waiver typically have a catastrophic illness, may be technology dependent, and have a risk for life-threatening incidences.
- The IHO waiver is designed for persons who are physically disabled and who:
 - Have been receiving continuous care in an acute hospital for 36 months or greater; or,
 - Have been continuously enrolled in an IHO-administered HCBS Waiver since prior to January 1, 2002 and continue to receive direct care services primarily rendered by a licensed nurse.
- Beneficiary must be Medi-Cal eligible. This can be established in one of two ways:
 - Community deeming rules/requirements, i.e., the regular financial rules for Medi-Cal eligibility; or,
 - Institutional deeming rules/requirements, i.e., the individual is assessed to be Medi-Cal eligible “as if” he/she were in a long-term care facility.
- IHO waiver services include: Case management, transitional case management, community transition services, skilled nursing and shared nursing services, personal care services, habilitation services, minor home modifications, personal emergency response systems, family training, life-sustaining utility reimbursement, and respite care.
- Services are provided in the beneficiary’s home that has been assessed to be a safe environment.
- Services are authorized through appropriate licensed and certified Medi-Cal providers, such as home health agencies, individual providers such as Registered Nurses, Licensed Vocational Nurses, Marriage and Family Therapists, Licensed Clinical Social Workers, Licensed Psychologists, employment and personal care agencies, non-profit and professional organizations, congregate living health facilities, and unlicensed caregivers.
- Implementation of IHO waiver services also involves the active participation of the family and/or primary caregiver in the home care program. Beneficiaries must have an

identified support network system available to them in the event the HCBS provider of direct care services is not able to provide the total number of hours approved and authorized by IHO. A family member and/or a primary caregiver should be proficient in the tasks necessary to care for the beneficiary at home to ensure care is not interrupted. This proficiency requirement may be satisfied by training, as necessary to safely carry out the plan of treatment and/or by providing direct care to the beneficiary on an ongoing basis. The involvement of the family and/or the primary caregiver helps to ensure a safe home program for the beneficiary.

- Services are prescribed by the beneficiary's community-based primary care physician in accordance with regulations outlined in the CCR, Title 22, Division 3.

Nursing Facility Acute Hospital (NF/AH) Waiver

- Services are subject to prior authorization.
- The NF/AH waiver is designed to:
 - provide Medi-Cal beneficiaries who have long-term medical conditions and who meet the acute hospital, subacute nursing facility, distinct-part nursing facility, skilled nursing facility B (skilled) or A (intermediate) level of care with the option of returning to and/or remaining in his/her home or home-like setting in the community in lieu of institutionalization;
 - facilitate a safe and timely transition of medically needy Medi-Cal eligible beneficiaries from a medical facility to his/her home and community; and,
 - offer Medi-Cal eligible beneficiaries who reside in the community but are at risk of being institutionalized within the next 30-days, the option of utilizing NF/AH Waiver services to develop a home program that will assist in safely meeting his/her home medical care needs.
- Beneficiary must be Medi-Cal eligible. This can be established in one of two ways:
 - community deeming rules/requirements, i.e., the regular financial rules for Medi-Cal eligibility; and,
 - institutional deeming rules/requirements, i.e., the individual is assessed to be Medi-Cal eligible "as if" he/she were in a long-term care facility.
- Authorized services must be cost-effective to the Medi-Cal program. This means that the total cost of providing waiver services and all other medically necessary Medi-Cal services to the beneficiary must be less than the total cost incurred by the Medi-Cal program for providing care to the beneficiary in comparable level facility.
- NF/AH waiver services include: Case management, transitional case management, community transition services, skilled nursing and shared nursing services, personal care services, habilitation services, minor home modifications, personal emergency response systems, family training, life-sustaining utility reimbursement, and respite care.

- Services are provided in the beneficiary's home that has been assessed to be a safe environment.
- Implementation of NF/AH waiver services also involves the active participation of the family and/or primary caregiver in the home care program. Beneficiaries must have an identified support network system available to them in the event the HCBS provider of direct care services is not able to provide the total number of hours approved and authorized by IHO. A family member and/or a primary caregiver should be proficient in the tasks necessary to care for the beneficiary at home to ensure care is not interrupted. This proficiency requirement may be satisfied by training, as necessary to safely carry out the plan of treatment and/or by providing direct care to the beneficiary on an ongoing basis. The involvement of the family and/or the primary caregiver helps to ensure a safe home program for the beneficiary.
- Services are authorized through appropriate licensed and certified Medi-Cal providers, such as home health agencies, individual providers such as RN, LVN, Marriage and Family Therapist, Licensed Clinical Social Worker, Licensed Psychologist, employment and personal care agencies, non-profit and professional organizations, congregate living health facilities, and unlicensed caregivers.
- Services are prescribed by the beneficiary's community-based primary care physician in accordance with regulations outlined in the CCR, Title 22, Division 3.

Early and Periodic Screening, Diagnosis and Treatment

Early and Periodic Screening, Diagnosis and Treatment (EPSDT) is a federally mandated Medicaid (Medi-Cal in California) benefit for eligible people under 21 who have no restrictions on Medi-Cal eligibility or services received. Under EPSDT, states are required to provide medically necessary services to treat, correct, or ameliorate a defect, mental illness, or physical illness or condition regardless of whether or not the service or item is otherwise included in the state's Medicaid plan. Services provided under EPSDT, which are not available to all Medi-Cal beneficiaries, are known as ***EPSDT Supplemental Services***. The EPSDT Supplemental Services approved by In-Home Operations are Private Duty Nursing (PDN) and Pediatric Day Health Care (PDHC) services.

Requests for EPSDT services must come from an appropriate Medi-Cal provider. Requests for services include a Treatment Authorization Request (TAR) and additional appropriate medical documentation to support the requested service.

Medically necessary PDN or PDHC services that will assist the beneficiary in remaining safely at home are authorized by IHO. In some instances, requested services must be coordinated with California Children's Services and/or Medi-Cal Managed Care.

- EPSDT services are subject to prior authorization.
- EPSDT services are provided to full-scope Medi-Cal beneficiaries who are under the age of 21. Services may be authorized once medical necessity criteria have been met.

- Authorized services must meet either the regular Medi-Cal definition of medical necessity or the EPSDT definition for medical necessity, which is outlined in CCR, Title 22, Division 3, Sections 51003 and 51340(e).
- Authorized services must be cost-effective to the Medi-Cal program. This means that the individual cost of providing EPSDT private duty nursing services in home settings must be less than the total cost incurred by the Medi-Cal program for providing the care in a licensed health care facility.
- Services are authorized through appropriate licensed and certified Medi-Cal providers, typically home health agencies, or individually enrolled Registered Nurses or Licensed Vocational Nurses.
- Services are prescribed by the beneficiary's primary care physician in accordance with regulations outlined in CCR, Title 22, Division 3.
- Services may be authorized in licensed foster or unlicensed small family homes.

EPSDT Pediatric Day Health Care (PDHC) Services

- PDHC services are subject to prior authorization.
- PDHC services are provided to full-scope Medi-Cal beneficiaries who are under the age of 21. PDHC services may be authorized once medical necessity criteria have been met for the provision of skilled nursing care services **and** therapeutic intervention(s).
- Authorized services must meet either the regular Medi-Cal definition of medical necessity or the EPSDT definition for medical necessity, which is outlined in CCR, Title 22, Division 3, Sections 51003 and 51340(e).
- Authorized services must be cost-effective to the Medi-Cal program. This means that the individual cost of providing EPSDT PDHC services must be less than the total cost incurred by the Medi-Cal program for providing the care in a licensed health care facility. If there are nursing services being provided in the home under the EPSDT private duty nursing benefit **and PDHC services are also requested**, the total cost of these two services shall be no greater than the costs incurred for providing these services in a licensed health care facility.
- Services are authorized through licensed Pediatric Day Health Care Facilities.
- Prescribed by the beneficiary's primary care physician, in accordance with regulations outlined in the CCR, Title 22, Division 3 Manual.

HCBS WAIVER SERVICES ARE NOT PART OF THE MEDI-CAL STATE PLAN BENEFIT PACKAGE

In-Home Operations (IHO) has administrative responsibility for two waivers. They are:

In-Home Operations (IHO) Waiver is designed for persons who

- ◇ are physically disabled; **and**,
- ◇ who have been receiving continuous care in an acute hospital for 36 months or greater, **or**
- ◇ have been continuously enrolled in an IHO-administered HCBS Waiver since prior to January 1, 2002 and continue to receive direct care services primarily rendered by a licensed nurse.

Nursing Facility/Acute Hospital (NF/AH) Waiver is designed:

- ◇ for beneficiaries who meet the acute hospital, subacute nursing facility, distinct-part nursing facility, skilled nursing facility A (intermediate) or B (skilled) level of care; **and**
- ◇ to facilitate a safe and timely transition of medically needy Medi-Cal eligible beneficiaries from a medical facility to his/her home and community; **or**,
- ◇ to give beneficiaries who reside in the community but are at risk of being institutionalized within the next 30-days the option of developing a home program that will assist in safely meeting his/her home medical care needs.

The following are the current facility alternatives for the two HCBS waivers under IHO:

- ◇ Acute Hospital;
- ◇ Adult or Pediatric Subacute;
- ◇ Skilled Nursing Facility (SNF or NF level B); and,
- ◇ Intermediate Care Facility (ICF or NF level A).

ONLINE RESOURCES FOR MEDI-CAL SERVICES

California Code of Regulations, Title 22, Division 3: www.ccr.oal.ca.gov

Medi-Cal Provider Bulletins: www.medi-cal.ca.gov

State Statutes – Health and Safety Code; Welfare and Institutions Code: www.oal.ca.gov

Medi-Cal Operations Division – In-Home Operations Section: www.dhcs.ca.gov/mcs/mcod/ihos



Frequently Asked Questions

California Department of Health Care Services Home and Community-Based Services Branch Medi-Cal In-Home Operations Section



WHAT IS IN-HOME OPERATIONS?

In-Home Operations (IHO) is a section in DHCS that oversees the development and implementation of home- and community-based programs under Medi-Cal. Under the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) state plan benefit, IHO authorizes:

- Private Duty Nursing (PDN), and
- Pediatric Day Health Care (PDHC)

Under a federal waiver program, IHO authorizes two Home and Community-Based Waivers:

- In-Home Operations Waiver (IHO)
- Nursing Facility/Acute Hospital (NF/AH) Waiver

WHAT IS EPSDT?

EPSDT is a Medi-Cal benefit for individuals under the age of 21 who have full-scope Medi-Cal eligibility. This benefit allows for periodic screenings to determine health care needs. Based upon the identified health care need, diagnostic and treatment services are provided.

WHAT SERVICES ARE OFFERED UNDER THE EPSDT BENEFIT?

EPSDT services include all services covered by Medi-Cal. In addition to the regular Medi-Cal benefits, a beneficiary under the age of 21 may receive additionally medically necessary services. These additional services are known as EPSDT Supplemental Services and include: private duty nursing services from a Registered Nurse (RN) or a Licensed Vocational Nurse (LVN), Case Management, Pediatric Day Health Care, and Nutritional and Mental Health Evaluations and Services.

WHAT ARE HOME AND COMMUNITY-BASED SERVICES (HCBS) WAIVERS?

HCBS Waivers allow states that participate in Medicaid (known as Medi-Cal in California) to develop creative alternatives for individuals who would otherwise require care in a nursing facility or hospital. Medi-Cal has an agreement with the Federal Government, which allows for waiver services to be offered in either a home or community setting. The services offered under the waiver must cost no more than the alternative institutional level of care. Recipients of HCBS Waivers must have full-scope Medi-Cal eligibility.

WHAT SERVICES ARE OFFERED UNDER THESE HCBS WAIVERS?

The services available under these HCBS Waivers include case management, community transition services, private duty nursing, family training, home health aides, life-sustaining utility reimbursement, habilitation services, and respite care.

WHO PROVIDES THE SERVICES?

There are a variety of providers, including the following:

- EPSDT providers – licensed and certified Home Health Agencies and/or individually enrolled private duty nursing service providers.
- HCBS Waiver providers – licensed and certified home health agencies; individual licensed RN, LVN, LCSW, MFT, Psychologist; nonprofit or professional organizations; personal care or employment agencies; or unlicensed caregivers.

HOW LONG CAN ONE RECEIVE THESE SERVICES?

The beneficiary may receive these home- and community-based services as long as they are medically necessary, cost-neutral, and he/she meets the nursing facility or acute hospital level of care.

HOW DOES ONE REQUEST HCBS WAIVER SERVICES?

The beneficiary or their representative must contact IHO and request a HCBS Waiver application. Based upon the information on the Waiver application, the Nurse Evaluator II will determine if the individual meets the criteria for the HCBS waiver and schedule a home visit to discuss the waiver and waiver services that are available. Each HCBS waiver can only serve a limited number of individuals. Once that limit is reached, the names of individuals requesting waiver services will be placed on a waiting list based upon the date IHO received their completed HCBS Waiver application.

HOW DOES ONE REQUEST EPSDT SERVICES?

The provider must submit the request for services to IHO on a Treatment Authorization Request (TAR).

In addition to the TAR, the provider must also submit the following medical documentation:

- Medical information, which supports the medical necessity for the requested services;
- Assessment of medical care needs, i.e., nursing care, and;
- Plan of Treatment signed by a physician.

HOW TO REQUEST OTHER IN-HOME SERVICES?

A request for any service needed for the home program or the PDHC program may be submitted to IHO by the appropriate provider. These services must be medically necessary. Examples include therapy services, equipment, and transportation.

FOR MORE INFORMATION ABOUT IHO:

www.dhs.ca.gov/mcs/mcod/iho

(916) 552-9105 in Sacramento
(213) 897-6774 in Los Angeles



July 2005

AIDS MEDI-CAL WAIVER PROGRAM

What we do:

Local agencies, under contract with the Department of Health Services, Office of AIDS, HIV Care Branch, provide home- and community-based services as an alternative to nursing facility care or hospitalization. Services provided are: 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.

Who we serve:

- Medi-Cal recipients: (1) whose health status qualifies them for nursing facility care or hospitalization, (2) in an "Aid Code" with full benefits (excludes long term care) and federal financial participation, and (3) not enrolled in the Program of All-Inclusive Care for the Elderly (PACE);
- Individuals with a written diagnosis by an attending physician of HIV disease or AIDS with current signs, symptoms, or disabilities related to HIV disease or treatment;
- Adults who are certified by the nurse case manager to be at the nursing facility level of care and score 60 or less using the *Cognitive and Functional Ability Scale* assessment tool;
- Children under 13 years of age who are certified by the nurse case manager as HIV/AIDS symptomatic; and
- Individuals with a health status that is consistent with in-home services and who have a home setting that is safe for both the client and service providers (e.g., structurally sound, clear exits during emergencies, etc.).

What you should know:

- Medical equipment, medical supplies, and minor physical adaptations to the home have an annual maximum amount payable. Financial supplements for infants and children, non-emergency medical transportation, nutritional supplements, and home delivered meals have a monthly maximum amount payable.
- For continued approval, the cost of the program must be the same or less than the cost of institutional care. The program is currently approved by the federal Department of Health and Human Services, Centers for Medicare and Medicaid Services, through December 2006 and is authorized to serve 3,330 persons in calendar year 2005 and 3,410 persons in calendar year 2006.
- Individuals cannot be simultaneously enrolled in any of the following programs: Medi-Cal Hospice Care Program, AIDS Case Management Program, and State Targeted Case Management Services Program.
- Whenever possible, the case manager will arrange for enrollment in another program if a client is determined not eligible, loses eligibility, or funds are exhausted.
- To find the nearest *AIDS Medi-Cal Waiver Program (MCWP)*, see Website <http://www.dhs.ca.gov/AIDS/counties/pdf/projectlistingcountiesservedmcwp.pdf>.



These MCWP agencies can provide additional information regarding eligibility and program services, enrolling and disenrolling clients, and direct provision of case management by a nurse and social worker. If you are not eligible for MCWP, you may be eligible for other programs within the same agency or its parent agency.

Helpful resources:

- To find the nearest AIDS Case Management Program, see Website <http://www.dhs.ca.gov/AIDS/counties/pdf/projectlistingcountiesservedcmp.pdf>.
- If you are a Medi-Cal recipient, for information on other Department of Health Services waiver programs, see Website http://files.medi-cal.ca.gov/pubsdoco/publications/masters-MTP/Part2/home_o07.doc.
- For information on other local HIV/AIDS services, see the *California Clearinghouse Resource Directory* at Website <http://www.hivinfo.org/links/lhj.htm>.
- For information about HIV/AIDS, call the:
 - *California AIDS Hotline* at 1-800-367-AIDS (English/Spanish/Filipino) or 1-888-225-AIDS (TDD).
 - *National AIDS Hotline* at 1-800-342-AIDS (English), 1-800-344-SIDA (Spanish), or 1-800-243-7889 (TDD).
- For information on the Office of AIDS mission, Office of AIDS programs, and other helpful resources, see Website <http://www.dhs.ca.gov/AIDS>.

Frequently asked questions:

How long can I stay on the program? Indefinitely, as long as you are eligible and do not exceed your annual \$13,209 maximum amount payable.

What are the costs to clients? There are no costs to the client for AIDS Medi-Cal Waiver Program services. Individuals with a Medi-Cal share of cost must meet that share of cost each month to be eligible for services.

How do I apply for Medi-Cal? Call or visit your local county social services office and ask for a Medi-Cal application. If you need help filling out the application, call the county social services agency, and/or check their Website <http://www.dhs.ca.gov/mcs/medi-calhome/CountyListing1.htm>



**California Department of Health Services
Office of AIDS
Community Based Care Section
AIDS Medi-Cal Waiver Program (MCWP) Contractors**

6/14/2007

Alameda

Alameda County Medical Center
15400 Foothill Boulevard, Bldg. C, Second Floor
San Leandro 94578
(510) 895-4343

**Bay Area Consortium for Quality Health Care,
Inc.**

5709 Market Street
Oakland 94608
(510) 652-3300

Amador

**Sierra Health Resources, Inc.
d.b.a. Sierra HOPE**
P.O. Box 159
Angels Camp 95222
(209) 736-6792

Butte

Home Health Care Management, Inc.
1398 Ridgewood Drive
Chico 95973
(530) 343-0727

Calaveras

**Sierra Health Resources, Inc.
d.b.a. Sierra HOPE**
P.O. Box 159
Angels Camp 95222
(209) 736-6792

Colusa

Home Health Care Management, Inc.
1398 Ridgewood Drive
Chico 95973
(530) 343-0727

Contra Costa

**Contra Costa County Health Services
Department Public Health**
597 Center Avenue, Suite 200
Martinez 94553
(925) 313-6771

Del Norte

St. Joseph Home Care
721 E Street
Eureka 95501
(707) 443-9332

El Dorado

Sierra Foothills AIDS Foundation
12183 Locksley Lane, Suite 205
Auburn, CA 95602
(530) 889-2437

Fresno

**Fresno Community Hospital and Medical
Center dba University Medical Center**
445 S. Cedar Avenue
Fresno 93702
(559) 459-4435

Glenn

Home Health Care Management, Inc.
1398 Ridgewood Drive
Chico 95973
(530) 343-0727

Humboldt

St. Joseph Home Care
721 E Street
Eureka 95501
(707) 443-9332

Lake

Community Care Management Corporation
301 South State Street
Ukiah 95482
(707) 468-0314

Lassen

Home Health Care Management, Inc.
1398 Ridgewood Drive
Chico 95973
(530) 343-0727

Los Angeles

AIDS Healthcare Foundation
1001 North Martel Avenue
Los Angeles 90046
(323) 860-5200

AIDS Project Los Angeles
3550 Wilshire Boulevard, Suite No. 300
Los Angeles 90010
(213) 201-1600

AIDS Service Center
909 South Fair Oaks Ave.
Pasadena 91105
(626) 441-8495

Minority AIDS Project
5149 West Jefferson Boulevard
Los Angeles 90016
(323) 936-4949

**St. Mary Medical Center
d.b.a. St. Mary CARE Program**
411 E. 10th St., Suite 107
Long Beach 90813
(562) 624-4900

Marin

Hospice by the Bay
17 East Sir Francis Drake Boulevard
Larkspur 94939-172
(415) 927-2273

Mendocino

Community Care Management Corporation
301 South State Street
Ukiah 95482
(707) 468-0314

Modoc

Home Health Care Management, Inc.
1398 Ridgewood Drive
Chico 95973
(530) 343-0727

Napa

**Queen of the Valley Medical Center,
Community Outreach, CARE Network**
3448 Villa Lane, Suite 102
Napa 94558
(707) 251-2000

Nevada

Sierra Foothills AIDS Foundation
12183 Locksley Lane, Suite 205
Auburn, CA 95602
(530) 889-2437

Orange

AIDS Services Foundation Orange County
17982 Sky Park Circle, Suite J
Irvine 92614-640
(949) 809-5700

Placer

Sierra Foothills AIDS Foundation
12183 Locksley Lane, Suite 205
Auburn, CA 95602
(530) 889-2437

Plumas

Home Health Care Management, Inc.
1398 Ridgewood Drive
Chico 95973
(530) 343-0727

Riverside

Desert AIDS Project
1695 N. Sunrise
Palm Springs 92262
(760) 323-2118

Inland AIDS Project
3756 Elizabeth Street
Riverside 92506-250
(951) 346-1910

Sacramento

Rx Staffing and Home Care, Inc.
4640 Marconi Avenue, Suite 1
Sacramento 95821-431
(916) 979-7300

San Bernardino

Desert AIDS Project
1695 N. Sunrise
Palm Springs 92262
(760) 323-2118

Inland AIDS Project
3756 Elizabeth Street
Riverside 92506-250
(951) 346-1910

San Diego

North County Health Services
150 Valpreda Road, Suite 101A
San Marcos, 92069-291
CA
(760) 736-6725

San Diego Hospice & Palliative Care
4311 Third Avenue
San Diego 92103-140
(619) 278-6400

San Francisco

Tenderloin Health
255 Golden Gate Avenue
San Francisco 94102
(415) 437-2900

Westside Community Mental Health Center, Inc.
489 Clementina Street
San Francisco 94103
(415) 495-6071

San Joaquin

San Joaquin County Public Health Services
1601 East Hazelton Avenue
Stockton 95205-622
(209) 468-3820

San Luis Obispo

San Luis Obispo County Public Health Department
2191 Johnson Avenue
San Luis Obispo 93401
(805) 781-5540

San Mateo

San Mateo County, Aging and Adult Services
225 37th Avenue
San Mateo 94403
(650) 573-3904

Santa Barbara

Pacific Pride Foundation
126 East Haley Street, Suite A-11
Santa Barbara 93101
(805) 963-3636

Santa Clara

Health Trust (The)
1701-A South Bascom Avenue
Campbell 95008
(408) 961-9850

Santa Cruz

Santa Cruz County Health Services Agency
1060 Emeline Avenue, Building F
Santa Cruz 95060
(831) 454-4730

Shasta

Home Health Care Management, Inc.
1398 Ridgewood Drive
Chico 95973
(530) 343-0727

Sierra

Home Health Care Management, Inc.
1398 Ridgewood Drive
Chico 95973
(530) 343-0727

Siskiyou

Home Health Care Management, Inc.
1398 Ridgewood Drive
Chico 95973
(530) 343-0727

Solano

**Solano County Health and Social Services
Older and Disabled Adults Services**
275 Beck Avenue, MS 5-110
Fairfield 94533
(707) 784-8203

Sonoma

Face to Face, Sonoma County AIDS Network
873 Second Street
Santa Rosa 95404
(707) 544-1581

Stanislaus

Stanislaus County Health Services Agency
830 Scenic Drive, Bldg. #3
Modesto 95353-312
(209) 558-7400

Sutter

Home Health Care Management, Inc.
1398 Ridgewood Drive
Chico 95973
(530) 343-0727

Tehama

Home Health Care Management, Inc.
1398 Ridgewood Drive
Chico 95973
(530) 343-0727

Trinity

Home Health Care Management, Inc.
1398 Ridgewood Drive
Chico 95973
(530) 343-0727

Tuolumne

**Sierra Health Resources, Inc.
d.b.a. Sierra HOPE**
P.O. Box 159
Angels Camp 95222
(209) 736-6792

Ventura

Ventura County Public Health Department
3147 Loma Vista Road
Ventura 93003
(805) 652-6694

Yolo

Rx Staffing and Home Care, Inc.
4640 Marconi Avenue, Suite 1
Sacramento 95821-431
(916) 979-7300

Yuba

Home Health Care Management, Inc.
1398 Ridgewood Drive
Chico 95973
(530) 343-0727

THE RIGHT AND THE WRONG WAY TO

DOCUMENT

When thinking about, “How do I document this case,” always paint a solid picture of need so that a stranger without social work experience can see the consumer’s need, and will be able to justify the services authorized to meet that need. This solid picture should always identify the consumer’s functional impairments and the risk they pose to the consumer, and should spell out how In-Home Supportive Services will reduce the risk. In addition, remove all judgmental comments; instead, simply report observed behaviors and environmental conditions.

Here are a few examples:

Wrong way: “The consumer needs Meal Preparation services.”

Right way: “Consumer has congestive heart failure, which causes her to become short-of-breath, with minor exertion. As a result, she is only able to prepare a light breakfast (she states she has more energy in the morning), and needs meal preparation services for lunch and dinner.”

[NOTES: Here the “right way” presents a description of functioning, and its connection to the specific types of services needed to address the impairment.]

Wrong way: “Consumer’s house is filthy.”

Right way: “During the home visit, I observed animal feces on the floor in several places. Consumer’s couch appeared stained, and had the odor of urine emanating from it. I noticed a pile of unwashed dishes in the kitchen sink, and a layer of black mold in the bathroom sink.”

[NOTES: Here the “right way” presents facts and detailed observations, while the “wrong way” could be an expression of the writer’s judgmentalism.]

Wrong way: “Consumer needs one hour per week for Ambulation.”

Right way: “During the home visit, I observed consumer attempting to ambulate. His gait appeared unsteady – he nearly fell twice during the visit – and he stated that he is afraid to walk to the bathroom, unattended. Consumer stated that he spends approximately 8-9 minutes per day, getting to the bathroom and kitchen. This is equivalent to 1 hour per week for Ambulation.”

[NOTES: MPP 30-757.14(k) defines Ambulation as, “consisting of assisting the consumer with walking or moving the consumer from place to place.” The Annotated Assessment Criteria support this in the sections on Bathing & Grooming, and Bowel & Bladder: “Getting to and from the bathroom is evaluated as Mobility Inside.”]

Wrong way: “Consumer no longer needs Bathing services.”

Right way: “Telephone call from consumer. She stated that her broken wrist is completely healed, and that her orthopedic surgeon removed her arm-cast today. She further stated that she is now bathing for herself, unassisted. Bathing services removed as of this date.”

[NOTES: In this case, the consumer stated no further need for Bathing services, but the removal of a cast does not, per se, mean that the consumer can return to the former functioning level immediately. It is possible that the orthopedic surgeon will prescribe a regimen of physical therapy to regain functioning in the consumer’s hand. If the fracture was in the consumer’s dominant hand, then it is possible that some services, such as Bathing or Dressing would need to continue until full functioning is regained.]

Wrong way: “Consumer needs total care.”

Right way: “Consumer has Multiple Sclerosis, and she spends the entire day in bed. She lacks the physical strength and endurance to reposition, transfer, toilet, ambulate, bathe, dress, feed herself, clean her house, shop or run errands, prepare meals or clean-up afterward, or do her laundry.”

[NOTES: Here the “right way” presents a description of functioning, and its connection to the specific types of services needed to address the impairment.]

Wrong way: “Consumer needs Protective Supervision.”

Right way: “According to the physician’s evaluation, the consumer has a diagnosis of dementia from Alzheimer’s disease and a history of wandering in the street, unable to recognize danger.”

[NOTES: Here the physician’s evaluation suggests elements of the consumer’s behavior and cognitive limitations that could assist the SW in concluding that Protective Supervision is warranted. However, a full evaluation by the SW, using the Protective Supervision criteria found in MPP 30-757.17 et seq., and the Annotated Assessment Criteria needs to be completed.]

Wrong way: “Consumer was uncooperative.”

Right way: “Three months ago, I suggested to consumer that the local Senior Center would be a resource for him, for both socialization and daily lunches. To date, he continues to state a feeling of isolation and difficulty affording meals; however he has not contacted the Senior Center yet.”

[NOTES: Services for all adult consumers are voluntary. Thus, consumers have the right to refuse services, and not to follow the SW’s suggestions. While, from the SW’s perspective, going to the Senior Center could reduce both social isolation and the cost of daily lunches, there may be many reasons why the consumer has chosen not to follow this suggestion. Thus, the “right way” describes the consumer’s statements and actions, while the “wrong way” suggests uncooperativeness.]

HEY, HEY, HEY, READ ALL ABOUT IT!

IHSS Social Workers are Documenting! Documenting! Documenting!

Documentation is important in each and every one of our IHSS cases; it allows the reader to have a visual picture of what took place while the social worker was in the home, and what has transpired since the home visit. This is important when, and if, the case is transferred to another worker or another county. It lays a foundation, which a consumer's history is built on. Case narrative is the readers visual picture of what has been going on with the consumer, his/her family dynamics, living environment, provider history and any changes in the consumer's health conditions.

Documentation / Narrative will be a valuable resource to you when you need to fall back on certain dates and times that a particular incident took place. It can be anything from a consumer being hospitalized, to a consumer alleging abuse by a caretaker. (Remember however, narrative alone is not enough if there is an allegation of abuse, you must also cross-report any abuse to APS/Law Enforcement on a SOC 341).

When documenting your case it is simple, just pretend that you work for the local news paper, no it is not the Daily Planet, it is the "IHSS" or the "Independent Helping Services Sentinel". Sentinel means "Look out, or Guard" which is the job of each social worker to look out for the best interest of their consumer, and guard them against possible fraud, or neglect. As a reporter for the Sentinel, it is your job to be accurate, grab the reader's attention and tell a story that will allow your reader to be there with you.

Remember you are a star reporter, the Clark Kent of Social Services, you may not have a cape, and phone booths are really hard to find these days, but you have something more powerful, and that is you are a social worker. You are providing services to the elderly and dependent adult allowing them to remain in their own home as long as possible. So what you need to do to insure safety, and insure that your consumer is receiving the appropriate services, is simple, just follow the rules of journalism: Who, What, When, Where, How, and Why. So grab your mighty pen, which can write faster than a speeding bullet, okay maybe not faster, but pretty quickly, and practice the following:

Who is calling you?	The client, doctor, family member, Lois Lane, or a friend?
What are they calling you about?	Need a new provider, changes in their medical conditions, no longer in the home, hospitalized, can't find a phone booth or just needing information about other community resources that may be available to them.
When did the incident occur?	Was it today, yesterday, last week, last year or will it be sometime in the future.
Where was the client when it occurred?	In her own home, in the hospital or racing a locomotive.
How has this affected the client?	Emotionally, physically, financially? Did the provider quit, or has consumer hired a new provider.
Why did this happen?	Was it because of the consumer, the provider, a family member? Was it because of bills were not being paid, or because of theft?

*Remember the importance of documentation: "If it isn't documented it did not happen."

State Hearings:

When going to a State Hearing, it is important that you have completed an assessment tool, covering each area of service, and documented the home visit. The State Hearing Judge will rely on documented information from your case, and testimony from you, the consumer, and other witnesses. If you did not document certain events, and the consumer denies that you addressed these issues, it will be a case of “he said, she said” and the Judge usually will err on the side of the consumer. So for better results on those rare occasions when you have a case that is appealed by a consumer, you need to make sure that your documentation is accurate, filed appropriately in your case, and that it allows the reader reviewing your case to build a visual picture of what transpired during your home visit, and how you came up with your assessments, and the hours you granted or denied.

If you follow the simple rules of journalism, who knows-one day when a new social worker comes down the road and picks up one of your cases they may say “Wow who was that Super Social Worker?!!!!!!”

NARRATIVE GUIDE

(Note: This is only a guide. Each case should be reviewed on a case-by-case basis and documented according to your specific findings and county procedures.)

*Remember to always address: **Who? What? When? Why? How?***

1. Reason for the interaction (annual reassessment, client request because of recent hospitalization, etc).
2. Age of consumer.
3. Current living arrangement (note who else is present during the interview).
4. Condition of the home (cleanliness, cluttered, odors, unkempt, lifestyle choice).
5. Consumer's general attitude and condition during the interview (ability to understand and answer questions).
6. Consumer's diagnosis (past and present).
7. Observations noted at the time of the home visit.
8. Consumer's current functional capabilities/limitations.
9. A summary supporting any changes to Functional Index Ranking.

Example:

Prior notes indicate the consumer was able to walk or move around inside the house without assistance. Due to a recent hip surgery and failure to show any significant improvement and the fact the consumer can no longer walk or move around the house without being at risk of falling and/or injury, the consumer currently requires assistance with ambulation.

Or

Prior notes indicate the recipient had hip surgery 6 months ago with significant medical improvement. It was observed that the consumer is now able to stand, walk, and move around inside the house without any limitations. The consumer does not require assistance walking or moving around inside the house.

10. Complete name of alternative resources and/or voluntary services and hours provided.
11. Description and justifications for Protective Supervision needs or changes.
12. Description and justifications for Paramedical needs or changes.
13. If it was established at the prior home visit that Paramedical services were temporary, a review and notation should be documented in the summary regarding the continuance or denial of the current Paramedical services.

CHALLENGING CASE SCENARIO – SARAH

You are a new worker on a caseload. One of your consumers, Sarah, is due for a reassessment. You read the case record and learn that Sarah is a 71-year-old woman who lives alone in a three-bedroom house. Sarah's diagnoses include rheumatoid arthritis, hypertension, and heart disease. She is deaf in her left ear and has had both knees replaced and the joints in her right hand replaced. She currently has minimal use of her right hand and almost no use of her left hand. She walks slowly with a cane. She has a three-wheel electric scooter that she uses when she goes outside of her house. She uses the scooter to go to a nearby grocery store and restaurant. She says she prefers to use the cane inside of her house because she wants to maintain her ability to ambulate within the house and is afraid she will lose this if she relies on the scooter for inside mobility. She currently receives assistance with Domestic and all Related Services as well as some assistance with Bathing, Oral Hygiene and Grooming, with Care and Assistance with Prosthesis (setting up her Medi-set), Transfer and Accompaniment to Medical Appointments which includes physical therapy. Sarah has a niece who lives on the East Coast who she seldom has contact with, but no other family. She has been known to have many pets and is very attached to them. She spends her time watching TV and trying to be active in community activities. She has access to a computer and is able to use it with her right hand.

Sarah has been receiving IHSS for approximately five years, and the case record indicates that she has had several social workers during that time for various reasons. The case record also contains numerous notes regarding frequent phone calls, most of which are complaints about the providers and the quality of their services. You note that in the last year she has gone through five different providers. There is also indication that Sarah frequently calls and requests assistance with utility bills and paying for medications which she says are not covered by Medi-Cal. She states she knows of other people that get the same medications paid for by Medi-Cal but her pharmacist refuses to "jump through the hoops".

The case record indicates that the last call made to the county was last month. During this phone call, Sarah states that she learned at the last Public Authority Advisory Committee meeting that there is now an IHSS Quality Assurance section in the county. She states that she is happy to know that the county is now assuring the quality of the services that she receives and that she would like for them to come out and talk to her about the quality of the services she has been getting. When asked for specific information, she states the following current complaints:

- She prints recipes from the Food Channel and asks the housekeeper to use them and the provider refuses. She does not like the food that the provider prepares and would prefer to eat her meals at the nearby restaurant.
- She asks the provider to change her sheets each day when she comes (three days per week) and the provider says she does not have enough time. She wants the provider to have more hours so she can change the sheets three times per week. She says she sleeps better when her sheets smell fresh.
- She expects the provider to care for her pets.
- The provider refuses to drive Sarah to lunch when she goes out with her friends once every week.
- She needs a "lift chair" because she often has trouble getting up from a seated position and fell once.

Sarah indicates that unless these things are corrected, she will be firing her current provider. The case record indicates that there was a recent call from the Public Authority indicating that Sarah has asked that they send her a new list of providers to interview, but that they currently do not have any names to send to her.

The notes documenting the last telephone call indicate that Sarah had a great deal of difficulty hearing on the telephone and that the social worker had to repeat information several times. The social worker also indicated in the notes that Sarah is just an unhappy person, that there are no providers who could provide services to her satisfaction, and that Sarah will not listen to her when she explains that her requests are beyond the scope of IHSS.

Group Tasks – Part 1 – Preparing for the Home Visit

- What things will I need to know before going on the home visit?
- What questions will I ask to get clear and concise information?
- What approach could I take to maximize my success?
- What environmental issues should I consider?

Group Tasks – Part 2 – Addressing Issues

When you arrived for the home visit, Sarah begins by pulling out a list of problems that she wants to discuss. All of the issues previously identified by Sarah in her most recent phone call were on the list.

- Assume that during the home visit you attempted to resolve all of the issues that were identified and any additional issues that you believed that needed to be addressed. As a group, identify the information you gave to Sarah in response to each of the issues you have been assigned.
- How do you think Sarah responded to the information you gave her?
- Are there any IHSS services that Sarah is not receiving that she may qualify for?
- What referrals would you make to try to resolve some of Sarah's complaints and maximize her ability to remain safely at home?
- Identify any additional information you will need to obtain before completing the assessment and any additional forms that you will need.

Group Tasks – Part 3 – Authorization of Hours

- Using the Authorizing Hours information provided, complete the Documentation Worksheet to show how the hours were assessed for the tasks indicated. Include appropriate documentation.
- Determine if an HTG exception exists and, if so, document the reason for the exception on the Documentation Worksheet.
- Complete the grid portion of the SOC 293 for the tasks indicated.

AUTHORIZING HOURS – SARAH

Bathing and Grooming

Sarah requires assistance getting in and out of the tub, washing her body, shampooing her hair and brushing her hair. Her neighbor comes over on the days when the provider is not there and helps her brush her hair. Sarah says that she has always bathed on a daily basis and that it is a problem for her that her provider comes only 3 days per week. She says that she has very dry skin and that her doctor has told her that she should bathe every day using a special moisturizing soap. You determined during the home visit that Sarah’s FI rank for Bathing and Grooming is a “4”. Sarah indicates that it takes her about 20 minutes to bathe, which includes shampooing her hair. Her provider spends 10 minutes blow drying and brushing her hair after bathing her. She states it takes 5 minutes to brush her hair on the days that she does not get a bath. Sarah indicates that although she would like to bathe daily, she usually would shampoo her hair only 3 times per week.

Documentation Worksheet

Bathing, Oral Hygiene, and Grooming						
FI Rank (Enter)		4				
	Low	High				
Rank 2	0.50	1.92	Assistance with getting in/out of tub/shower			
Rank 3	1.27	3.15	Blow dry/brush hair after bathing			
Rank 4	2.35	4.08	Oral hygiene			
Rank 5	3.00	5.10	Grooming			
Note: Compare Total Need with above range.			Reason for assistance:			
			Additional information to document exceptions to guidelines and identification of Alt. Resources:			

Grid Portion of SOC 293

Total Need	Adjustments	Individual Need	Alternative Resources	Auth. For Purchase	Unmet Need

Meal Preparation

Sarah indicates during the home visit that she has toast and tea for breakfast each day which she can prepare herself. She indicates that she likes to eat her main meal in the middle of the day because she does not sleep well when she eats a large meal in the evening. She states she usually has a cup of soup or something light in the evening which she fixes herself. You determine that Sarah's FI rank for Meal Preparation and Cleanup is a "4" based on the fact that she must have someone prepare her main meal on a daily basis.

Sarah states her provider comes 3 days per week, and that she usually tries to prepare her main meal while she is there as well as meals for her to reheat on the days she is not there. Sarah says it usually takes the provider about 1 hour each time she is there to prepare her main meal and the meals for the days that she is not there. The types of meals she prepares typically include some type of meat/poultry, starch and fresh vegetable.

In response to Sarah's complaints about the types of meals and quality of meals her current provider cooks, the social worker discussed the following options: Restaurant Meals Allowance and Meals on Wheels. Sarah said that she would not accept Meals on Wheels because she had tried it before and the food was so bad she had ended up feeding it to her pets. She thinks that Restaurant Meals Allowance would be better for her because she could go to the nearby restaurant each day and order whatever she wanted.

Documentation Worksheet

Meal Preparation			Needs help with <input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner				
FI Rank (Enter)	4						
	Low	High					
Rank 2	3.02	7.00					
Rank 3	3.50	7.00					
Rank 4	5.25	7.00					
Rank 5	7.00	7.00					
Note: Compare Total Need with above range.			Breakfast				
			Lunch				
			Dinner				
			Snacks				
			Reason for assistance:				
			Shared living exceptions (required when services not prorated):				
			Additional information to document exceptions to guidelines and identification of Alt. Resources such as MOW:				

Grid Portion of SOC 293

Total Need	Adjustments	Individual Need	Alternative Resources	Auth. For Purchase	Unmet Need

Ambulation

Sarah is able to ambulate inside of her apartment without assistance. She requires help from her front door to the car, from the car to her destination, from there to the car and from the car to the door when she returns. She goes to her primary care doctor once per month and to physical therapy two times per week. Her FI ranking in Ambulation is a "3". She also requires assistance to her car when she attends an advisory committee meeting once per month. It takes about 5 minutes for her provider to assist her getting from her door to the car and car to the door which includes putting her scooter into and out of the vehicle. Sarah states that she takes public transportation (Medi-van) when she goes to physical therapy, but prefers to have her provider take her to the doctor and to the advisory committee meetings. She states that she pays \$1.00 each way for the Medi-van. She states that additional time is needed when she goes to the doctor because her provider must wait for her there and it takes about two hours.

Documentation Worksheet

Ambulation		
FI Rank (Enter)	3	
	Low	High
Rank 2	0.58	1.75
Rank 3	1.00	2.10
Rank 4	1.75	3.50
Rank 5	1.75	3.50
Note: Compare Total Need with above range.		

Walking Inside Home				
From/To	Time Assessed	# of Times Per Day	# of Days Per Week	Total Need Per Week
Retrieving Assistive Device(s)				
Device	Time Assessed	# of Times Per Day	# of Days Per Week	Total Need Per Week
Assistance From House To Car And Car To House For Medical Appt. & Alt. Resource				
	Time Assessed	# of Times Per Month	Total Need Per Month	Total Need Per Week (Monthly Need ÷ 4.33)
From House to Car and from Car to Doctor's Office				
From Doctor's Office Car to and from Car to House				
Reason for assistance:				
Additional information to document exceptions to guidelines and identification of Alt. Resources:				

Grid Portion of SOC 293

Total Need	Adjustments	Individual Need	Alternative Resources	Auth. For Purchase	Unmet Need

IN-HOME SUPPORTIVE SERVICES

NOTICE OF ACTION-

Note: This notice relates ONLY to your Social Services.
 It does NOT affect your receipt of SSI/SSP or Social Security.
KEEP THIS NOTICE WITH YOUR IMPORTANT PAPERS.

IF REQUESTING A STATE HEARING, PLEASE SEND

YOUR
 IHSS
 OFFICE

Your County

Sarah Rockford
 123 Main Street
 Mytown, Ca 99999

Case Number	60-10-123345-00
Date Mailed	02-08-2008

Your Authorization for In-Home Supportive Services has been changed effective 03-01-20

NOW		WAS	
Your Countable Income:	\$ _____	Your Countable Income:	\$ _____
Minus SSI/SSP Benefit Level:	\$ _____	Minus SSI/SSP Benefit Level:	\$ _____
Your Share of Cost:	\$ _____	Your Share of Cost:	\$ _____
Minus Assessed IHSS Cost:	\$ _____	Minus Assessed IHSS Cost:	\$ _____
Income in Excess of Assessed Cost:	\$ _____	Income in Excess of Assessed Cost:	\$ _____

SERVICES	HOURS NOW	PREVIOUS HOURS	(+) INCREASE OR (-) DECREASE	SERVICES	HOURS NOW	PREVIOUS HOURS	(+) INCREASE OR (-) DECREASE
DOMESTIC SERVICES per month:	6.00	5.00		ACCOMPANIMENT SERVICES per week:			
Clean floors, wash kitchen counters, stoves, refrigerators, bathroom; store food, supplies; take out garbage; dust, pick up; bring in fuel; change; make bed and miscellaneous.				Medical Appointment:	0.23	0.23	0.00
HEAVY CLEANING (one month only):				To Alternative Resources:			
RELATED SERVICES per week:				YARD HAZARD ABATEMENT:			
* Prepare Meals:	3.00	2.00	+ 1.00	Remove Grass, or Weeds, Rubbish (one month only):			
** Meal Cleanup:	1.50	2.00	- .50	Remove Ice, Snow, per week:			
Routine Laundry:	1.00	1.00		PROTECTIVE SUPERVISION per week:			
Shopping for Food:	1.00	1.00		TEACHING/DEMONSTRATION per week! (no more than three months duration)			
Other Shopping Errands:	.50	.50		* PARAMEDICAL SERVICE per week:			
NON-MEDICAL PERSONAL SERVICES per week:				TOTAL WEEKLY HOURS X 4.33:			
* Respiration Assistance:				ADD DOMESTIC SERVICE HOURS:			
* Bowel, Bladder Care:				ADD HEAVY CLEANING:			
* Feeding:				ADD REMOVE GRASS, ETC.:			
* Routine Bed Baths:				TOTAL MONTHLY HOURS	53.8	48.5	+5.30
* Dressing:				(rounded to the nearest tenth)			
* Menstrual Care:					NOW	WAS	
* Ambulation:	.08	0.00	+ 0.08	Restaurant Meal Allowance:	\$ _____	\$ _____	
* Move In/Out of Bed:	.50	.50					
* Bathe, Oral Hygiene/Grooming:	3.14	3.00	+ .14	<input type="checkbox"/> "Since you meet the criteria for 20 hours or more in starred (*) ser you can get an advance payment to pay your own provider. If you to get advance payment, contact your service worker. The double st (***) service is included in the 20 hours only when assistance with fee preparation of meals and meal cleanup are all required."			
* Rub Skin, Repositioning, Help On/Off Seats, In/Out of Vehicle:							
* Care/Assistance with Prosthesis:	.08	.08					

The above action(s) is supported by Federal Law (Social Security Act), State Law (Welfare and Institutions Code), Federal Regulations (Code of Federal Regulations), State Regulations (California Administrative Code and State Department of Social Services Manual of Policies and Procedures).
 Your authorization for In-Home Supportive Services has been changed effective 03/01/2008.

You must report immediately any changes that might affect your eligibility or need for In-Home Supportive Services such as change in income, property, living arrangement, medical condition or ability to work. If you have any questions or think additional facts should be considered contact:
 District Office: 01 Service Worker: Mary Worker SW#: A11 Telephone: 555-555-5555

YOU HAVE THE RIGHT TO FILE A WRITTEN OR ORAL REQUEST FOR A STATE HEARING. PLEASE SEND YOUR WRITTEN REQUEST TO THE COUNTY ADDRESS ON THE TOP RIGHT HAND CORNER OF THIS FORM.

Clean floors, wash kitchen counters, stoves, refrigerators, dishwasher, store food, supplies; take out garbage; dust, pick up; bring in fuel; change; make bed and miscellaneous.

0.23 0.23 0.00

Medical Appointment:

HEAVY CLEANING (one month only):

To Alternative Resources:

RELATED SERVICES per week:

YARD HAZARD ABATEMENT:

* Prepare Meals: 3.00 2.00 + 1.00
 ** Meal Cleanup: 1.50 2.00 - .50
 Routine Laundry: 1.00 1.00
 Shopping for Food: 1.00 1.00
 Other Shopping Errands: .50 .50

Remove Grass, or Weeds, Rubbish (one month only):
 Remove Ice, Snow, per week:
 PROTECTIVE SUPERVISION per week:
 TEACHING/DEMONSTRATION per week: (no more than three months duration)

NON-MEDICAL PERSONAL SERVICES per week:

* PARAMEDICAL SERVICE per week:
 TOTAL WEEKLY HOURS X 4.33:
 ADD DOMESTIC SERVICE HOURS:
 ADD HEAVY CLEANING:
 ADD REMOVE GRASS, ETC.:

* Respiration Assistance:
 * Bowel, Bladder Care:
 * Feeding:
 * Routine Bed Baths:
 * Dressing:
 * Menstrual Care:
 * Ambulation:
 * Move In./Out of Bed:
 * Bathe, Oral Hygiene/Grooming:
 * Rub Skin, Repositioning, Help On./Off Seats, In./Out of Vehicle:
 * Care./Assistance with Prosthesis:

TOTAL MONTHLY HOURS (rounded to the nearest tenth)

53.8 48.5 + 5.30

NOW WAS

Restaurant Meal Allowance: \$ \$

"Since you meet the criteria for 20 hours or more in starred (*) sex you can get an advance payment to pay your own provider. If you to get advance payment, contact your service worker. The double star (**) service is included in the 20 hours only when assistance with fee preparation of meals and meal cleanup are all required."

The above action(s) is supported by Federal Law (Social Security Act), State Law (Welfare and Institutions Code), Federal Regulations (Code Federal Regulations), State Regulations (California Administrative Code and State Department of Social Services Manual of Policies and Procedures)

Your authorization for In-Home Supportive Services has been changed effective 03/01/2008.

You must report immediately any changes that might affect your eligibility or need for In-Home Supportive Services such as change in income, property, living arrangement, medical condition or ability to work. If you have any questions or think additional facts should be considered contact: District Office: 01 Service Worker: Mary Worker SW#:A11 Telephone: 555-555-5555

YOU HAVE THE RIGHT TO FILE A WRITTEN OR ORAL REQUEST FOR A STATE HEARING. PLEASE SEND YOUR WRITTEN REQUEST TO THE COUNTY ADDRESS ON THE TOP RIGHT HAND CORNER OF THIS FORM.

SOCIAL SERVICES STANDARDS
SERVICE PROGRAM NO. 7: IN-HOME SUPPORTIVE SERVICES

TABLE OF CONTENTS

CHAPTER 30-700 SERVICE PROGRAM NO. 7: IN-HOME SUPPORTIVE SERVICES

	Section
Program Definition	30-700
Special Definitions.....	30-701
County Quality Assurance and Quality Improvement	30-702
Persons Served by the Non-PCSP IHSS Program	30-755
Need.....	30-756
Program Service Categories and Time Guidelines	30-757
Time Per Task and Frequency Guidelines	30-758
Application Process	30-759
Responsibilities.....	30-760
Needs Assessment Standards.....	30-761
Service Authorization	30-763
Individual Providers Compensation.....	30-764
Cost Limitations.....	30-765
County Plans.....	30-766
Service Delivery Methods.....	30-767
Overpayments/Underpayments.....	30-768
Payrolling for Individual Providers	30-769
Eligibility Standards	30-770
Linkage	30-771
Resources	30-773
Income.....	30-775
Provider Identification	30-776
Personal Care Services Program (PCSP) Eligibility.....	30-780
In-Home Supportive Services (IHSS) Plus Waiver Program	30-785

This page is intentionally left blank.

30-700 PROGRAM DEFINITION

30-700

- .1 The In-Home Supportive Services (IHSS) Program provides assistance to those eligible aged, blind and disabled individuals who are unable to remain safely in their own homes without this assistance. IHSS is an alternative to out-of-home care. Eligibility and services are limited by the availability of funds.
- .2 The Personal Care Services Program (PCSP) provides personal care services to eligible Medi-Cal beneficiaries pursuant to Welfare and Institutions Code Section 14132.95 and Title 22, California Code of Regulations, Division 3 and is subject to all other provisions of Medi-Cal statutes and regulations. The program is operated pursuant to Division 30.
- .3 The IHSS Plus Waiver program provides IHSS Plus Waiver services, to eligible Medi-Cal beneficiaries, subject to Medi-Cal provisions, statutes and regulations, pursuant to Welfare and Institutions Code Section 14132.951 and Title 22, California Code of Regulations, Division 3, and is operated pursuant to Division 30.
 - .31 These services are available as described in MPP Section 30-757, when services are provided by a parent of a minor child recipient or a spouse; and/or when the recipient receives a Restaurant Meal Allowance; and/or when the recipient receives Advance Payment for in-home care services.
 - .32 Recipients in any one of the categories described in Section 30-700.31, who have been determined eligible for Medi-Cal, qualify for the IHSS Plus Waiver program.
 - .33 The IHSS Plus Waiver Program is a "Section 1115 Demonstration Project" as defined in 42 USC, Section 1315. This demonstration project has been approved for 5 years, beginning August 1, 2004. Eligibility and services are limited to the availability of funds and potential extensions to the demonstration.
- .4 Individuals who qualify for both IHSS and PCSP funding shall be funded by PCSP.
- .5 All civil rights laws, rules, and regulations of Division 21 shall be complied with in administering IHSS program regulations.

NOTE: Authority cited: Sections 10553, 10554, 12300, 14142.95, and 14132.951, Welfare and Institutions Code; Chapter 939, Statutes of 1992; and 42 USC, Section 1315(a) of the Social Security Act. Reference: Sections 12300, 14132.95, and 14132.91, Welfare and Institutions Code.

30-701 **SPECIAL DEFINITIONS** **30-701**
(Continued)

- (3) Allocation means federal, state, and county monies which are identified for a county by the Department for the purchase of services in the IHSS Program.

- (b) (1) Base Allocation means all federal, state and county monies identified for counties by the Department for the purchase of services in the IHSS Program, exclusive of any provider COLA allocation, but including recipient COLA.

- (2) Base Rate means the amount of payment per unit of work before any premium is applied for overtime or related extraordinary payments.

- (c) (1) Certified Long-Term Care Insurance Policy or Certificate or certified policy or certificate means any long-term care insurance policy or certificate, or any health care service plan contract covering long-term care services, which is certified by the California Department of Health Services as meeting the requirements of Welfare and Institutions Code Section 22005.

- (2) Compensable services are only those services for which a provider could legally be paid under the statutes.

- (3) Consumer means an individual who is a current or past user of personal care services, as defined by Section 30-757.14, paid for through public or private funds or a recipient of IHSS or PCSP.

- (4) County Plan means the annual plan submitted to the California Department of Social Services specifying how the county will provide IHSS and PCSP.

- (5) CRT or Cathode Ray Tube means a device commonly referred to as a terminal which is used to enter data into the IHSS payrolling system.

THIS PAGE IS INTENTIONALLY LEFT BLANK

30-701 **SPECIAL DEFINITIONS (Continued)** **30-701**

- (6) CRT County means a county in which one or more CRTs have been located allowing the county to enter its data directly into the payroll system.
- (d) (1) Deeming means procedures by which the income and resources of certain relatives, living in the same household as the recipient, are determined to be available to the recipient for the purposes of establishing eligibility and share of cost.
- (2) Designated county department means the department designated by the county board of supervisors to administer the IHSS program.
- (3) Direct advance payment means a payment to be used for the purchase of authorized IHSS which is sent directly to the recipient in advance of the service actually being provided.
- (e) (1) Employee means the provider of IHSS under the individual delivery method as defined in Section 30-767.13.
- (2) Employer means the recipient of IHSS when such services are purchased under the individual delivery method as defined in Section 30-767.13.
- (3) Equity Value means a resource's current market value after subtracting the value of any liens or encumbrances against the resources which are held by someone other than the recipient or his/her spouse.
- (f) (Reserved)
- (g) Gatekeeper Client means a person eligible for, but not placed in a skilled or intermediate care facility as a result of preadmission screening.
- (h) (1) Hours Worked means the time during which the provider is subject to the control of the recipient, and includes all the time the provider is required or permitted to work, exclusive of time spent by the provider traveling to and from work.
- (2) Housemate means a person who shares a living unit with a recipient. An able and available spouse or a live-in provider is not considered a housemate.
- (i) (1) "Intercounty Transfer" means a transfer of responsibility for the provision of IHSS services from one county to another when the recipient moves to a new county and continues to be eligible for IHSS:
 - (A) "Transferring County" means the county currently authorizing IHSS services.
 - (B) "Receiving County" means the county to which the recipient moves to make his/her home.

30-701 SPECIAL DEFINITIONS (Continued) 30-701

- (C) "Transfer Period" means the period during which the transferring county remains responsible for payment of IHSS services, after which the receiving county will be responsible for payment. The transfer period starts when the transferring county sends the documentation, including the notice of transfer form, and records to the receiving county.

- (D) "Expiration of Transfer Period" means the end of the transfer period. The transfer period shall end as soon as administratively possible but no later than the first day of the month following 30 calendar days after the notification of transfer form is sent to the receiving county or as allowed in Section 30-759.96.

HANDBOOK BEGINS HERE

(E) Example: The transferring county sends a notification of transfer form along with documents to the receiving county on January 20th.

The receiving county has 30 calendar days to return the transfer form. The receiving county returns the transfer form on February 19th, stating that they will assume responsibility effective March 1st.

- The transfer period begins January 20th.

- The transfer period ends on March 1st. IHSS payment is terminated by the transferring county.

- The receiving county begins IHSS payment effective March 1st and the transfer is complete.

HANDBOOK ENDS HERE

(j) (Reserved)

(k) (Reserved)

(l) (1) Landlord/Tenant Living Arrangement means a shared living arrangement considered to exist when one housemate, the landlord, allows another, the tenant, to share housing facilities in return for a monetary or in-kind payment for the purpose of augmenting the landlord's income. A landlord/tenant arrangement is not considered to exist between a recipient and his/her live-in provider. Where housemates share living quarters for the purpose of sharing mortgage, rental, and other expenses, a landlord tenant relationship does not exist, though one housemate may customarily collect the payment(s) of the other housemate(s) in order to pay mortgage/rental payments in a lump sum.

(2) Licensed Health Care Professional means a person who is a physician as defined and authorized to practice in this state in accordance with the California Business and Professions Code.

(3) Live-In Provider means a provider who is not related to the recipient and who lives in the recipient's home expressly for the purpose of providing IHSS-funded services.

30-701 SPECIAL DEFINITIONS (Continued) 30-701

- (4) A list means any informal or formal listing or registry of written name(s) of prospective In-Home Support Services providers maintained by the county agency, county social services staff, a contractor as defined under Welfare and Institutions Code Section 12302.1, or any public or private agency for purposes of referring the prospective providers for employment.
- (m) Minor means any person under the age of eighteen who is not emancipated by marriage or other legal action.
- (n) (1) Net Nonexempt Income means income remaining after allowing all applicable income disregards and exemptions.
- (2) Nonprofit consortium means an association that has a tax-exempt status and produces a tax exempt status certificate and meets the definition of a nonprofit organization as contained in OMB Circular A-122 found at Federal Register, Vol. 45, No. 132, dated July 8, 1980.

HANDBOOK BEGINS HERE

- (A) OMB Circular A-122 found at Federal Register, Vol. 45, No. 132, dated July 8, 1980, defines a nonprofit organization as one which:
 - (1) Operates in the public interest for scientific, educational, service or charitable purposes;
 - (2) Is not organized for profit making purposes;
 - (3) Is not controlled by or affiliated with an entity organized or operated for profit making purposes; and
 - (4) Uses its net proceeds to maintain, improve or expand its operations.

HANDBOOK ENDS HERE

- (o) (1) Out-of-Home Care Facility means a housing unit other than the recipient's own home, as defined in (o) (2) below. Medical out-of-home care facilities include acute care hospitals, skilled nursing facilities, and intermediate care facilities. Nonmedical out-of-home care facilities include community care facilities and homes of relatives which are exempt from licensure, as specified in Section 46-325.5, where recipients are certified to receive board and care payment level from SSP.
- (2) Own Home means the place in which an individual chooses to reside. An individual's "own home" does not include an acute care hospital, skilled nursing facility, intermediate care facility, community care facility, or a board and care facility. A person receiving an SSI/SSP payment for a nonmedical out-of-home living arrangement is not considered to be living in his/her home.

30-701**SPECIAL DEFINITIONS (Continued)****30-701**

- (p) (1) Paper County means a county which sends its data in paper document form for entry into the payroll system to the IHSS payroll contractor.
- (2) Payment Period means the time period for which wages are paid. There are two payment periods per month corresponding to the first of the month through the fifteenth of the month and the sixteenth of the month through the end of the month.
- (3) Payrolling System means a service contracted for by the state with a vendor to calculate paychecks to individual providers of IHSS; to withhold the appropriate employee taxes from the provider's wages; to calculate the employer's taxes; and to prepare and file the appropriate tax return.
- (4) Personal Attendant means a provider who is employed by the recipient and, as defined by 29 CFR 552.6, who spends at least eighty percent of his/her time in the recipient's employ performing the following services:
- (A) Preparation of meals, as provided in Section 30-757.131.
 - (B) Meal clean-up, as provided in Section 30-757.132.
 - (C) Planning of menus, as provided in Section 30-757.133.
 - (D) Consumption of food, as provided in Section 30-757.14(c).
 - (E) Routine bed baths, as provided in Section 30-757.14(d).
 - (F) Bathing, oral hygiene and grooming, as provided in Section 30-757.14(e).
 - (G) Dressing, as provided in Section 30-757.14(f).
 - (H) Protective supervision, as provided in Section 30-757.17.
- (5) Preadmission Screening means personal assessment of an applicant for placement in a skilled or intermediate care facility, prior to admission to determine the individual's ability to remain in the community with the support of community-based services.
- (6) Provider Cost-of-Living Adjustment (COLA) means all federal, state and county monies identified for counties by SDSS for the payment of wage and/or benefit increases for service providers in the IHSS program.

30-701**SPECIAL DEFINITIONS (Continued)****30-701**

- (7) Public Authority means:
- (A) An entity established by the board of supervisors by ordinance, separate from the county, which has filed the statement required by Section 53051 of the Government Code, and
 - (B) A corporate public body, exercising public and essential governmental functions and that has all powers necessary and convenient to carry out the delivery of in-home supportive services, including the power to contract for services and make or provide for direct payment to a provider chosen by a recipient for the purchase of services.
- (q) (Reserved)
- (r) (1) Recipient means a person receiving IHSS, including applicants for IHSS when clearly implied by the context of the regulations.
- (2) Reduced payment means any payment less than full payment that may be due.
- (s) (1) Severely Impaired Individual means a recipient with a total assessed need, as specified in Section 30-763.5, for 20 hours or more per week of service in one or more of the following areas:
- (A) Any personal care service listed in Section 30-757.14.
 - (B) Preparation of meals.
 - (C) Meal cleanup when preparation of meals and consumption of food (feeding) are required.
 - (D) Paramedical services.
- (2) Shared Living Arrangement means a situation in which one or more recipients reside in the same living unit with one or more persons. A shared living arrangement does not exist if a recipient is residing only with his/her able and available spouse.
- (3) Share of cost means an individual's net non-exempt income in excess of the applicable SSI/SSP benefit level which must be paid toward the cost of IHSS authorized by the county.
- (4) Spouse means a member of a married couple or a person considered to be a member of a married couple for SSI/SSP purposes. For purposes of Section 30-756.11 for determining PCSP eligibility, spouse means legally married under the laws of the state of the couple's permanent home at the time they lived together.

30-701	SPECIAL DEFINITIONS (Continued)	30-701
---------------	--	---------------

- (5) SSI/SSP means the Supplemental Security Income and State Supplementary Program administered by the Social Security Administration of the United States Department of Health and Human Services in California.

- (6) State Allocation Plan means that process whereby individual county IHSS program allocations are developed in a manner consistent with a) Welfare and Institutions Code Sections 10102 and 12300 et seq., and b) funding levels appropriated and any control provision contained in the Annual Budget Act.

- (7) State-mandated program cost means those county costs incurred for the provision of IHSS to recipients, as specified in Section 30-757, in compliance with a state approved county plan. Costs caused by factors beyond county control such as caseload growth and increased hours of service based on individually assessed need, shall also be considered state-mandated.

- (8) Substantial Gainful Activity means work activity that is considered to be substantial gainful activity under the applicable regulations of the Social Security Administration, 20 CFR 416.932 through 416.934. Substantial work activity involves the performance of significant physical or mental duties, or a combination of both, productive in nature. Gainful work activity is activity for remuneration of profit, or intended for profit, whether or not profit is realized, to the individual performing it or to the persons, if any, for whom it is performed, or of a nature generally performed for remuneration or profit.

- (9) Substitute Payee means an individual who acts as an agent for the recipient.

- (t) Turnaround Timesheet means a three-part document issued by the state consisting of the paycheck, the statement of earnings, and the timesheet to be submitted for the next pay period.

- (u) (Reserved)

- (v) (1) Voluntary Services Certification is the form numbered SOC 450 (10/98) which is incorporated by reference and which is to be used statewide by person(s) providing voluntary services without compensation.

- (w) (Reserved)

- (x) (Reserved)

- (y) (Reserved)

- (z) (Reserved)

NOTE: Authority cited: Sections 10553, 10554, 12301.1, and 22009(b), Welfare and Institutions Code; and Chapter 939, Statutes of 1992. Reference: Sections 10554, 11102, 12300(c), 12301, 12301.6, 12304, 12306, 12308, 13302, 14132.95, 14132.95(e), 14132.95(f), and 22004, Welfare and Institutions Code.

30-702 COUNTY QUALITY ASSURANCE AND QUALITY IMPROVEMENT 30-702

- .1 Each county shall establish a Quality Assurance (QA) unit or function which, at a minimum, will be required to perform the following tasks:
- .11 Develop and regularly review policies and procedures, implementation timelines, and instructions under which county QA and Quality Improvement (QI) programs will function.
 - .12 Perform routine, scheduled reviews of supportive services cases which include reviewing a sample of case files and other documents.
 - .121 The county shall define routine, scheduled reviews in their QA procedures.
 - .122 The county's QA case sample shall:
 - (a) Include cases from all district offices and all workers involved in the assessment process.
 - (b) Include a minimum number of cases determined by CDSS based on the county's caseload and QA staffing allocation.
 - .123 If the county is unable to meet the requirements of Section 30-702.122, the county shall submit a written alternative proposal to CDSS outlining the reason as well as an alternative sample method. CDSS shall review the proposal and determine if it is acceptable for compliance with Section 30-702.122.
 - .124 The county's routine, scheduled reviews shall consist of desk reviews and home visits.
 - .125 The review process shall be a standardized process, including standard forms for completing desk reviews of cases and for completing home visits.
 - (a) The desk reviews must include:
 - (1) A sample of denied cases.
 - (2) Validation of case file information by recipient contact using a sub-sample of cases.
 - (3) A process to verify:

30-702

COUNTY QUALITY ASSURANCE AND QUALITY IMPROVEMENT
(Continued)

30-702

- (A) Required forms are present, completed, and contain appropriate signatures.
 - (B) There is a dated Notice of Action in the case file for the current assessment period.
 - (C) The need for each service and hours authorized is documented.
- (b) The county shall conduct home visits using a sub-sample of their desk reviews to confirm that the assessment is consistent with the recipient's needs for services and the applicable federal and state laws and policies have been followed in the assessment process. When conducting home visits the county shall:
- (1) Notify the recipient prior to the home visit.
 - (2) Verify the recipient's identity.
 - (3) Verify the need for any IHSS service tasks, not just the task currently authorized.
 - (4) Verify all data on the G-Line of the SOC 293 (1/91), which includes specific information that may impact the assessment of need.
 - (5) Verify the recipient understands which services have been authorized and the amount of time authorized for each.
 - (6) Discuss with the recipient, the recipient's health issues and physical limitations to assist in identifying the recipient's functional limitations.
 - (7) Discuss any changes in the recipient's condition or functional limitations since the last assessment.
 - (8) Discuss the quality of services provided by the county with the recipient, including addressing the recipient's awareness of, and the ability to, contact and communicate with his/her worker.
 - (9) Verify that the recipient understands his/her ability to request a fair hearing.
 - (10) Ensure a completed back-up plan, that indicates the steps the recipient must take in the event of an emergency, is in the recipient's file and a copy has been provided to the recipient to use as a future resource.