



## CalAIM Recuperative Care Community Supports Program Overview

Community Supports (CS) is a Medi-Cal benefit available to members that meet specific eligibility criteria and opt-in to participate. CS are optional, non-traditional services that address Social Determinants of Health. Under this program, L.A. Care launched Recuperative Care (Respite Care) Community Supports on January 1, 2022. In this document, you can learn more about who is eligible and how you can make a referral.

**Recuperative Care:** Also referred to as medical respite care, is short-term residential care for individuals who no longer require hospitalization, but still need to heal from an injury or illness (including behavioral health conditions) and whose condition would be exacerbated by an unstable living environment. It allows individuals to continue their recovery and receive post-discharge treatment while obtaining access to primary care, behavioral health services, case management, and other supportive social services.

## Who qualifies for the L.A. Care Community Supports Recuperative Care Program?

- ⌘ L.A. Care Medi-Cal Member.
- ⌘ Members who are homeless or have unstable housing and/or lack of support in their housing AND
- ⌘ Need to heal from an injury or illness (including behavioral health conditions) and have a condition, which would be exacerbated by an unstable living environment.

## How long does the program cover?

**Recuperative care covers in 30 day increments for up to 90 days. Member must continue to meet criteria to qualify for an extension.**

- ⌘ Members who lose L.A. Care coverage during recuperative stay lose their recuperative care authorization and will not be covered by L.A. Care.
- ⌘ Members that gain L.A. Care coverage during their recuperative care stay can be referred and are assessed based on the initial criteria.

## L.A. Care Exclusion Criteria:

**The following list of conditions excludes member from recuperative placement:**

- ⌘ Member requires higher level of care.
- ⌘ Member is not psychiatrically stable and/or is cognitively impaired
- ⌘ Member has been recently combative, aggressive, and/or threatening towards staff or other individuals.
- ⌘ Member who has an active infectious disease that requires isolation, such as tuberculosis, *Clostridioides difficile* (C. DIFF), or Methicillin-Resistant *Staphylococcus Aureus* (MRSA), can be reviewed on a case-by-case basis.

## Referrer Responsibilities

### Prior to Hospital or SNF Discharge

Ensure member is discharged with all required medications

Discuss recuperative care as an option with member

If member agrees, the referrer MUST check box indicating member consent

Attach clinical documentation to referral form

**Note:** Delay's in discharge and/or change in the member's case that affects the referral submitted, must be notified to L.A. Care Recuperative Care staff as soon as possible.

## Referral Submission Process:

**STEP 1** The request & extension form can be found on [lacare.org](https://lacare.org) under the 'For Provider Section' under the Community Support option.

Request form for internal staff please [click here](#)

**STEP 2** Please complete the request or extension form and attach the required documents via secure fax **213.536.0634**.

**STEP 3** Attach all required documents per member.

L.A. Care allows referring parties to find an accepting Recuperative Care Center prior to sending authorization request to L.A. Care. Authorization request can be sent to L.A. Care by either the referring party or by the Recuperative Care Center. A prior authorization is required for any L.A. Care members being admitted into Recuperative Care Centers under the L.A. Care Recuperative Care CALAIM Program.

The following documents are necessary for all referrals coming directly to L.A. Care for authorization and placement:

- ⌘ Face Sheet
- ⌘ History and Physical
- ⌘ Medication List
- ⌘ Wound Care Notes

## What happens after the Request?

- ⌘ Hospital or Recuperative Care Center must contact L.A. Care and must provide L.A. Care with the date of transfer and/or the date of Recuperative Care admission.



If you have questions please contact us at [recupcare@lacare.org](mailto:recupcare@lacare.org)



Request will only be accepted via fax at **213.536.0634**