



Frequently Asked Questions

California Department of Health Care Services Medi-Cal In-Home Operations



The In-Home Operations (IHO) Branch is part of the State Department of Health Care Services (DHCS) and is responsible for the oversight, development and implementation of the Home and Community-Based Services (HCBS) under the Medi-Cal program. There are two HCBS Waivers under IHO. They include: 1) the In-Home Operations Waiver and 2) the Nursing Facility/Acute Hospital (NF/AH) Waiver.

WHAT ARE 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. Participants of HCBS Waivers must have full-scope Medi-Cal eligibility. These waiver services complement services that are available to Medi-Cal beneficiaries under the State Plan.

WHAT SERVICES ARE OFFERED UNDER THE HCBS WAIVERS?

The services available under IHO's HCBS Waivers include: case management; transitional case management; community transition services; private duty nursing (including shared services); family training; minor environmental accessibility adaptations; waiver personal care; medical equipment operating expenses; habilitation services; respite care; and personal emergency response systems (including installation & testing).

WHO PROVIDES THE SERVICES?

There are a variety of providers, including the following:

HCBS Waiver providers include: licensed and certified home health agencies; congregate living facilities; licensed registered nurses; licensed vocational nurses; licensed clinical social workers; marriage & family therapists; licensed psychologists; nonprofit organizations; professional corporations; personal care or employment agencies; and unlicensed caregivers.

HOW LONG CAN ONE RECEIVE THESE SERVICES?

A Medi-Cal beneficiary may receive HCBS waiver services as long as the beneficiary has Medi-Cal eligibility and the services requested are medically necessary, cost-neutral, and he/she meets the nursing facility or acute hospital level of care.

HOW ARE HCBS SERVICES REQUESTED?

To request HCBS waiver services, a waiver application must be completed and returned to IHO. To request an application, call (916) 552-9105.

A provider of waiver services must submit the following documentation: A Treatment Authorization Request (TAR); Nursing or Personal Care Assessment; Plan of Treatment signed by the physician, beneficiary, and the provider(s); Home & Safety Evaluation; and Medical information which support the request for services.

FOR MORE INFORMATION ABOUT IHO:

<http://www.dhcs.ca.gov/services/Pages/IHO.aspx>

(916) 552-9105 in Sacramento
Northern Regional Office
(213) 897-6774 in Los Angeles
Southern Regional Office