

February 20, 2024

Dear Plan Partners,

Effective January 1, 2024, all Medi-Cal managed care plans (MCPs) became responsible for the provision of the Intermediate Care Facility for Developmentally Disabled (ICF/DD) Homes benefit.¹

As MCPs and ICF/DD Homes continue to work together and establish partnerships and contracts, DHCS would like to emphasize the key continuity of care requirements outlined in [APL 23-023, Intermediate Care Facilities for Individuals with Developmental Disabilities -- Long Term Care Benefit Standardization and Transition of Members to Managed Care](#) and [APL 23-022 Continuity of Care for Medi-Cal Beneficiaries Who Newly Enroll in Medi-Cal Managed Care from Medi-Cal Fee-For-Service, on or After January 1, 2023 \(Supersedes APL 22-032\)](#).

DHCS is issuing this letter to all Plan Partners to emphasize the importance of the continuity of care policies and requirements that must be honored for members residing in ICF/DD Homes that have newly transitioned from Medi-Cal Fee-For-Service to Medi-Cal managed care.

Member Protections Supporting ICF/DD Home Continuity of Care

ICF/DD Homes are a long-term home living setting, in which a member may spend months, year, or decades of their life. Ensuring continuity of care within a member's existing residence, and other services and supports they receive, is critical to their overall wellbeing.

As such, to prevent disruptions in care, MCPs must provide continuity of care by allowing members to stay in their current ICF/DD Home without any member effort. It is also DHCS' expectation that MCPs will make all efforts to minimize disruptions in care for services authorized and current providers where the member has an existing relationship to the extent continuity of care conditions are met. The continuity of care policies are instrumental in helping preserve member access to the appropriate services.

¹ Including Intermediate Care Facility for the Developmentally Disabled (ICF/DD); Intermediate Care Facility for the Developmentally Disabled – Habilitative (ICF/DD-H); and Intermediate Care Facility for the Developmentally Disabled – Nursing (ICF/DD-N)

DHCS policies for continuity of care policies applicable to members residing in ICF/DD Homes are outlined in APL 22-023 and APL 22-002 and includes important member protections specific to the following aspects of continuity of care:

- **Automatic continuity of care to allow members to stay in existing ICF/DD Homes.** MCPs must automatically provide 12 months of continuity of care for the ICF/DD Home placement of any member residing in an ICF/DD Home who is mandatorily enrolled into an MCP after January 1, 2024. Members do not have to request this continuity of care, and MCPs must allow members to stay in the same ICF/DD Home if the ICF/DD Home meets certain requirements. Following their initial 12-month automatic continuity of care period, members may request an additional 12 months of continuity of care.
- **Continuation of the authorization for ICF/DD services.** MCPs are responsible for treatment authorization requests (TAR) approved by DHCS for ICF/DD Home services provided under the ICF/DD Home per diem rate for the duration of the treatment authorization for existing authorization requests and for up to two years for any new requests. MCPs are responsible for all other approved authorization requests for services in an ICF/DD Home, exclusive of the ICF/DD Home per diem rate for a period of 90 days after enrollment in the MCP, or until the MCP is able to reassess the Member and authorize and connect the Member to Medically Necessary services.
- **Continuity of care following a leave of absence or bed hold.** If a member temporarily leaves an ICF/DD Home in accordance with regulatory leave of absence or bed hold policies, the MCP must allow the member to return to the same ICF/DD Home where the member previously resided if it is the member's preference.²
- **Continuity of care for Durable Medical Equipment (DME) and medical supplies.** MCPs must allow transitional members to keep their existing DME rentals and medical supplies from their existing Provider, under the previous Prior Authorization for a minimum of 90 days following MCP enrollment and until the new MCP is able to reassess, the new equipment or supplies are in possession of the Member, and ready for use.³ Continuity of DME and medical supplies must be honored without a request by the Member, authorized representative, or Provider. Additionally, if DME or medical supplies have been arranged for a transitioning Member but the equipment or supplies have not been

² Detailed under the Leave of Absence and Bed Hold policies in 22 CCR sections 51535 and 51535.1.

³ This is subject to the existing DME Provider meeting the Continuity of Care requirements outlined in section I of APL 23-022.

delivered, the MCP must allow the delivery and for the Member to keep the equipment or supplies for a minimum of 90 days following MCP enrollment and until the new MCP is able to reassess. If the MCP does not complete a new assessment, the authorization remains in effect for the duration of the treatment authorization. After 90 days, the MCP may reassess the Member's authorization at any time and require the Member to switch to a Network DME Provider.

- **Continuity of care protections extend to Primary Care Providers, Specialists, and select ancillary Providers.** If a Member is mandatorily transitioning from Medi-Cal FFS to enroll as a Member in an MCP on or after January 1, 2023, the Member may request continuity of care for up to 12 months after the enrollment date with the MCP if a pre-existing relationship exists with that Provider, regardless of the Member having a condition listed in HSC section 1373.96. Continuity of care protections extend to Primary Care Providers, Specialists, and select ancillary Providers, including physical therapy; occupational therapy; respiratory therapy; behavioral health treatment; and speech therapy Providers.
- **Continuity of care also provides continued access to the following services but may require a switch to Network Providers.** Non-Emergency Medical Transportation (NEMT) and Non-Medical Transportation (NMT), Facility Services, Professional Services, Select Ancillary Services, and appropriate Level of Care Coordination. MCPs must make every effort to ensure continued access to care to providers that have experience and expertise in working with Members with developmental disabilities.

For any questions or concerns regarding the continuity of care policies as it relates to ICF/DD Homes, DHCS encourages MCPs, ICF/DD Homes, and other stakeholders to reach out with questions at LTCTransition@dhcs.ca.gov. More information can be found on the [DHCS LTC Carve-In webpage](#).

We appreciate your partnership in ensuring that members residing in ICF/DD Homes have their needs met and the ICF/DD Home provider network receives appropriate support and guidance.

Sincerely,

Department of Health Care Services
Health Care Delivery Systems